

Complaints Managers Governance and Learning Forum

Minutes from Complaints Managers Governance and Learning Forum, Monday, 11th June 2018

Welcome: The Assistant National Director, National Complaints Governance and Learning Team (NCGLT), opened the meeting by welcoming everyone present.

1. Minutes from last meeting

Minutes were agreed.

2. Matters arising:

(a) CMS FAQ

FAQ is to be developed in relation to queries resulting from CMS Training. Queries in relation to the users report are to be directed to NCGLT.

(b) Unreasonable Complainant Behaviour

An update on this will be circulated after the next meeting of the steering group which takes place this afternoon.

(c) Delegation Orders

Delegation orders for Complaints Officers and Review Officers now have a time limit on them and are valid for three years from when they are issued and will then be reviewed. A revocation form has also been developed which allows the delegation order to be revoked from somebody if people no longer need it.

For national delegations, they have to be signed off on by National Directors. Voluntary agencies appoint and sign off on their own ones.

An update on the number of Review Officer delegations and Complaint Officer delegations received to date was given.

The issue of the need for Complaints Officer training was highlighted.

(d) Learning Guidance

Learning Guidance forms have now been sent out to everyone and they are being trialed until the end of September.

There are five key forms in the system. Feedback would be appreciated so that the forms can be finalised. The point was raised that implementing these forms may be challenging and so therefore, it is important that they be critiqued constructively. It would be important to find out if Line Managers find them useful. We also need to satisfy the needs of Ombudsman's reports. The QPS side of things will support the learning.

(e) Ombudsman Action Plans

Audits will be reduced to annually instead of bi-annually. Our office will issue reminders in November/December with the aim of having them back in January to have a report on the previous year. Some of them are six months overdue at this stage. This will be highlighted at the next Chief Officer's meeting.

The January 2017 reports returned have been sent to the Ombudsman.

Action: The working group on evidence based compliance needs to be established.

3. Update on Complaints Management System, NCGLT

Delays are being experienced with CMS set-ups and there are a couple of reasons for this. One is in relation to locations. The SCA list is outdated and so we have asked estates in some areas to give us up to date lists and when people contact us in relation to set up for those areas, the list is being sent out to them so that they can tick off what they need access to. We are also advising the SCA of new locations. They also have their own process for updating. The impact falls more heavily on CHO areas. People can re-submit their forms if they didn't have access to all the locations they needed originally.

Some of the set up forms are being incorrectly filled out and so therefore have to be sent back to clarify issues with them and this creates a delay.

Some staff originally identified for training turned out to be the incorrect ones so that also caused a delay in the correct people being trained and set up. One support staff may input information for several complaints officers.

NCGLT did a comparison between Q1 stats 2017 and Q1 stats 2018.

Report training started on 30th May. There are no places left on the course on 27th June. The next report training course will take place on 11th July and details will be circulated. Awareness sessions and training sessions will be organized and begin again in July. Refresher training will also be available. There will be more report training from September. Two days a month will be set aside for training, one for general CMS training and one for report training. We will be limited with venue and staff availability.

A usage list has been issued to CMS leads and has asked them to check that everybody on it still needs their account and also identify if any additional staff need training and set up.

Three CMS Steering Group meetings have taken place and three more have been scheduled. An assessment of the benefit of collecting compliments has taken place.

A CMS support form has been created for support staff who are inputting data on behalf of complaints officers and mandatory usable NIMS fields have been circulated.

Change requests have been agreed and in relation to the new GDPR regulations, CMS leads have been asked to identify data controllers in their areas.

NIMS Phase III is starting on 13th June and is looking at the point of contact module and positive feedback module.

Action: NCGLT to circulate an excel spreadsheet to CHO areas with their locations on it and it is also available to download.

4. Case Study Request, NCGLT

The Service Improvement Manager for the Integrated Care Programme for Older Persons, requires anonymised case studies in relation to older persons for quarterly workshops. He is interested in having a Complaints Manager present at them. There are two left this year and if people are interested, they can contact him.

5. Self Assessment Checklists, NCGLT

The self assessment forms for Complaints Officers and Review Officers have been developed. These are designed to check if people understand their role, recognise the need for a standard delegation form, identify any training that might be needed and highlight the importance of recommendations. It forms the basis of our early commencement auditing phase. It lets people know the supports available to them also. Module 2, Effective Complaints Investigation is now live. This is an interactive online complaint handling learning tool on HSELand.

The service user feedback form has also been developed. It asks service users what their experience of the complaints system was in relation to the process. The outcome of a person's

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complaint will have an impact on how it is completed. It was suggested that the question "was your complaint upheld" be put on it as it could then be cross checked with their satisfaction rate.

The plan is to send these forms out with the final complaint report and so therefore there could be issues on the ground. Considerations have to be put in place.

The question of whether or not it could be randomized and maybe a year after the complaint was made was mentioned and could a sample of complaints be taken similar to the patient experience survey. Perhaps they could be trialed in patient forums.

Action: Complaints Managers to circulate these forms to line managers for their feedback.

6. Patient Safety and Advocacy Consultation Update, Department of Health

The Department of Health gave a presentation on the recent consultation process around the development of a Patient Safety Complaints and Advocacy Policy to enable an integrated and responsive health system that listens to and learn from complaints and concerns in order to improve services, reduce errors and support patients when something goes wrong. High level findings and observations were also presented.

7. Complaint Case Study Presentations

Presentations have been deferred to the December forum.

8. First Impressions following Ombudsman's Audit, Office of the Ombudsman

The Ombudsman's Office has started following up on the Learning to get Better Report by conducting site visits during April and May. They have completed seven out of eight hospital sites and three CHO areas using the recommendations made in the report as a basis for discussion.

Some areas had been marked down as non-complaint prior to the site visit but turned out to be compliant but had not returned their up to date action plans and so the Ombudsman's Office were unaware of the progress made.

The overall impression was a positive one as a whole. Some areas were not compliant with all recommendations. A HSE website audit will be undertaken on the information on how to make a complaint for each hospital and CHO area and also for voluntary hospitals.

There was one issue with a Mental Health facility and so they will be visiting that next week.

The next stage will be an audit of complaints made to the Ombudsman's office since the report was issued. They will be linking in with the NCGLT and the Department of Health.

9. CMGLF issues

- **Ombudsman Action Plans – Working Group on Evidence Based Compliance Assessment**

This working group needs reps from both CHO's and HG's to sit on the group.

Action: It was suggested that the voluntary hospital that did very well in the Ombudsman's audit present at one of the upcoming forums.

- **Service User Groups – the patient voice**

Action: Spreadsheet to be sent to General Manager's and/or Heads of Service to get names from service user forum.

10. Unlocking the Potential of Healthcare Complaints to Improve Patient care, National University of Ireland Galway (NUIG)

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NUIG presented on the NCGLT joint research project using the London School of Economics HCAT Tool to classify complaints.

This tool is currently only designed for hospitals and so therefore needs to be made valid for CHO's also. Severity levels could be an issue in relation to CHO's.

Voluntary agencies were also mentioned. However, there may be GDPR issues with this.

Any other Business:

Action: Arrange for someone from the Data Protection Commissioner's Office to speak about the new GDPR Regulations at the next meeting. If people want to put down their concerns in writing, we could give this to them in advance and they could come with answers prepared.

Action: All Presentation Slides & materials from today's meeting will be circulated to members.

Date of Next Meeting:

The next meeting will take place on **Monday 24th September 2018.**