# **Complaints Managers Governance and Learning Forum**

# Minutes from the National Complaints Managers Governance and Learning Forum, Monday, 4th March 2019

#### Welcome:

The Chair opened the meeting by welcoming everyone present. Attendees introduced themselves for the benefit of new members.

**1. Presentation on the Directorate Quality Agenda Project** by the National Quality Improvement Team Lead for Evidence for Improvement and the Qualitative Researcher, Evidence for Improvement. The Team made a call for anonymised complaints to present to the Leadership Team to inform the quality agenda.

# 2. Minutes from last meeting:

Minutes were agreed.

### 3. Matters arising:

### (a) CMS Updates

Update to be circulated on CMS developments to all Complaints Managers going forward and if anyone has any queries on these, they can contact the NCGLT office.

# (b) Clinical Guidance

Clinical Guidance slides have been added to the current training programme for Complaints Officers. A new Train the Trainer programme will also be developed.

### (c) E-learning Module on Clinical Complaints

A meeting is scheduled with HSELand module developers and NCGLT in relation to this.

#### (d) Ombudsman Action Plans – Working Group on Evidence Based Compliance

Progress has been made with regard to this. Two working groups have been set up, one for CHOs and one for HGs and Leads appointed.

### (e) Service User Groups – the patient voice

**Action:** NCGLT to write out to get representatives for this.

### (f) CMGLF Minutes

The 2018 and 2019 minutes will be published online.

Action: NCGLT will circulate format for approval.

## 4. Update: Complaints Management System, NCGLT

# **NCGLT Annual Report**

A draft of the NCGLT Annual Report is currently being prepared. Each area will see its own section for approval before finalising the report. Some will have a mix of stats information on both the CMS and spreadsheet. As regards the HSE Annual Report, the first draft has gone back. An overview of the 2018 data was presented and highlighted a decrease of 15% on complaints received last year. This could be as a direct result of an increased focus on Point of Contact resolution but also could be a result of improved reporting, i.e. where Stage 1 complaints were incorrectly classified and returned as Stage 2 data.

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Some information is still outstanding so this figure may increase. Not all Hospital Groups (HG) have sent back their returns. Going forward, there will be individualised hospital data produced as opposed to being set out by HG. The KPI decreased for Community Healthcare Organisations (CHO) areas. The reason for this is that we now have more accurate data than we had previously. Primary Care Reimbursement Services (PCRS) and Assessment of Need (AON) are now being included. A separate report on AON will form part of the NCGLT report. AON complaints are decreasing. In 2016 there were 1,000 and in 2017 there were 740. In 2018, they decreased again. However, with a significant number of recommendations going out to the services, this in turn may give rise to complaints.

### CMS Usage/Training

There has been a steady increase in CMS usage. NCGLT requested that Complaints Managers advise them of their training requirements. NCGLT are providing Train the Trainer (TTT) courses for those who have attended general CMS user training and also report training. The first TTT session was held on 25<sup>th</sup> February.

### **HCAT Project**

This has been through ethics approval. NCGLT are inviting CHO's and HG's to take part in this. Initially, an analysis of 300 anonymised complaints per CHO will be completed. If the particular area is not in a position to anonymise the complaints, our office will do this and the area can approve it. HCAT was initially designed for Acutes, therefore, the current categorization is not supportive of CHO areas so it needs to be built around them. A further 500-800 anonymised complaints will then be sought. In relation to HG's, 1200 complaints need to be analysed.

**Action:** NCGLT to write out to CHO's and HG's requesting nominations.

### 4. Complaint Case Study Presentation: CHO

This case study led on to a discussion in relation to clinical issues. It was the opinion of the group that YSYS information needs to be clearer. Under the Act, YSYS does not investigate clinical complaints and therefore, clinical issues have no right of review under the YSYS policy. However, if a complaint has both YSYS and clinical issues, there is a right of review for the YSYS part and this can be confusing for complainants. It was suggested that a list of contact points are printed in the appendix of the report going out to the complainant and also that the correct pathway be highlighted.

This will be considered in the YSYS policy review which is due to commence in 2020. A steering group will be developed at the end of this year.

### **5. Complaint Case Study Presentation:** CHO

This case study highlighted the issue of FOI and how it impacts on complaints. Sometimes, the information that a person receives through FOI can lead to a complaint depending on how material is redacted that can impact on how the remaining words are is read and interpreted.

It was suggested that this issue is flagged to Consumer Affairs for them to raise this issue in their training sessions going forward.

**Action:** Highlight this FOI issue to Consumer Affairs.

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#### 6. Update from the Office of the Ombudsman

The Ombudsman's Annual Report is to be published in June. It was highlighted that Complaints Officers are looking for a forum. In relation to action points, it was acknowledged that the CMS is starting to work and that Complaints Officers are being trained to use it. The HSE will be conducting an audit of how complaints are being dealt with. The Ombudsman's office will be requesting the casebooks as they would hope to publish them at the end of Quarter 1. The E-learning modules are being used and work is being done on the HSE website. The development of their own health complaints website is on hold at moment as a result of GDPR issues. The server cannot hold data that is not under their remit.

The Ombudsman would like that Clinical Judgment would come under his remit. However, legislation would have to be changed to allow for this.

# 7. Networking and Feedback

NCGLT requested input from the group as to the preferred structure of the networking session as this was the first time that this had formed part of the forum agenda. It was suggested that it be informal but that ideas or suggestions for discussion be put forward in advance.

### 8. CMGLF Update: NCGLT

**Learning Forms** – These were sent out to the Chief Officers and CEO's at the beginning of the year. The Learning Notification Forms should be coming back from Complaints Officers and Review Officers to inform casebooks for publication.

Action: Re-circulate all forms again.

**Action:** Guidance to be developed in relation to the learning as opposed to the recommendations. Sometimes, even where there is no recommendation to be made, there may be a learning point for the service.

- Ombudsman Action Plans The CHO areas have completed the 2018 analysis of compliance rates. There are two HG's outstanding. This analysis will assist in developing a standardised set of criteria to measure against. A CHO and HG working group have been set up. The timeframe has been extended until the end of Ouarter 2. The Learning to Get Better Ombudsman Report was originally specific to HG's but a proposal can be put together for CHO's in relation to recommendations and present a revised set to the Ombudsman.
- Case Study Presentation for June Two Complaints Managers agreed to present case studies at the next forum.

# **Any other Business:**

NCGLT requested members to forward any agenda items they may have in advance of the next forum.

**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 10<sup>th</sup> June 2019.