

1. Introduction

This report presents the volume and subjects of complaints received, any trends and themes identified, and areas where changes in practice are recommended. NHS Coventry and Warwickshire Integrated Care Board (the ICB) welcomes comments, complaints and compliments about the services it directly provides to patients and about its commissioning activity. The ICB believes that good handling of complaints is one way in which we can help to improve the quality of services for our patients.

The ICB is committed to ensuring complaints are addressed in the most appropriate way and at the earliest opportunity. The ICB's Complaints Management policy is in line with the Parliamentary and Health Service Ombudsman's NHS Complaint Standards Framework. This supports the timely and proportionate handling of complaints. It also ensures complainants are aware of the support they can access if they require help to make a complaint or need assistance throughout the process, recognising this can be stressful.

In the handling of complaints, we are conscious of a potential detrimental impact on staff complained about. It is recognised that individuals in this situation report negative changes to their work practice, health and wellbeing. To support staff through the process and with any resulting learning, line management are included in our investigations.

Complaints received with aspects of ongoing care are considered by the Complaints Care Delivery and Service Improvement Group. This group of senior managers, including Nursing, Safeguarding and Complaints staff, meet to collectively to discuss if there is any role for the ICB outside of the complaints process to ensure safe and effective care.

The responsibility and transfer of Primary Care services from NHS England (NHSE) to the ICB took place on 1 July 2023. This included the responsibility for complaints for Primary Care, which incorporates Pharmacy, Optometry, Dentistry and GP complaints. Wherever possible Primary Care complaints are resolved through Early or Local Resolution. If a formal complaint is indicated or required, the Host Regional Team at the Office of the West Midlands manage the complaint on behalf of the ICB. Oversight and assurance is through the West Midlands ICB Joint Committee on behalf of the West Midlands' ICB Boards. Whilst this arrangement matures, high level complaints information held by the Office of the West Midlands is shared with the Quality, Safety and Experience Committee for understanding and high-level oversight.

2. Complaints Handling Process – Investigation Pathways

The Complaints service reviews and triages all contact from patients, family, advocates and Members of Parliament and has four approaches to handling complaints.

Complaints Managed through Local Resolution

Our frontline staff often handle concerns or complaints that can be resolved quickly at the time they are raised or very soon after. We encourage our staff to do this as much as possible so that people get a fast and effective answer to their issues. Oversight of locally resolved contacts is managed within the relevant services.

Complaints managed through Early Resolution

When local resolution is not possible, we seek to identify any complaint that could be resolved quickly in support of our commitment to complaints being addressed and resolved at the earliest opportunity. When we believe that an early resolution may be possible, we aim to take action to address and resolve the issues raised within 10 working days. However, this can take longer if the additional time means the complaint is more likely to be resolved for the individual.

Complaints managed formally (Formal Complaints)

Not every complaint can be resolved quickly (due to complexity or seriousness).

In these cases, a complaint is allocated to an Investigating Officer who will take a closer look into the issues raised. This involves taking a detailed and in depth view of the issues to determine what happened and what should have happened. The Complaints Investigation Toolkit supports the Investigating Officer and the Director(s) responsible for the area(s) to which the complaint relates to undertake a thorough investigation and produce a high quality response to the complaint.

Primary Care Complaints

In July 2023 the commissioning of Primary Care services (Pharmacies, Dentists and Opticians) transferred from NHS England (NHSE) to the ICB. Whilst we attempt local and early resolution where we can, some complaints require a formal investigation. A Host Team at the Office of the West Midlands manages these complaints for the ICB with oversight and assurance through the West Midlands ICB Joint Committee on behalf of the ICB Boards.

MP Correspondence

The ICB receives correspondence from Members of Parliament (MPs).

Specific patient-related correspondence from MPs is handled through the formal complaints process. Correspondence which is not specifically related to a patient's care (requests relating to service commissioning or improvements) are managed informally with the ICB aiming to investigate and respond to the MP within 10 working days.

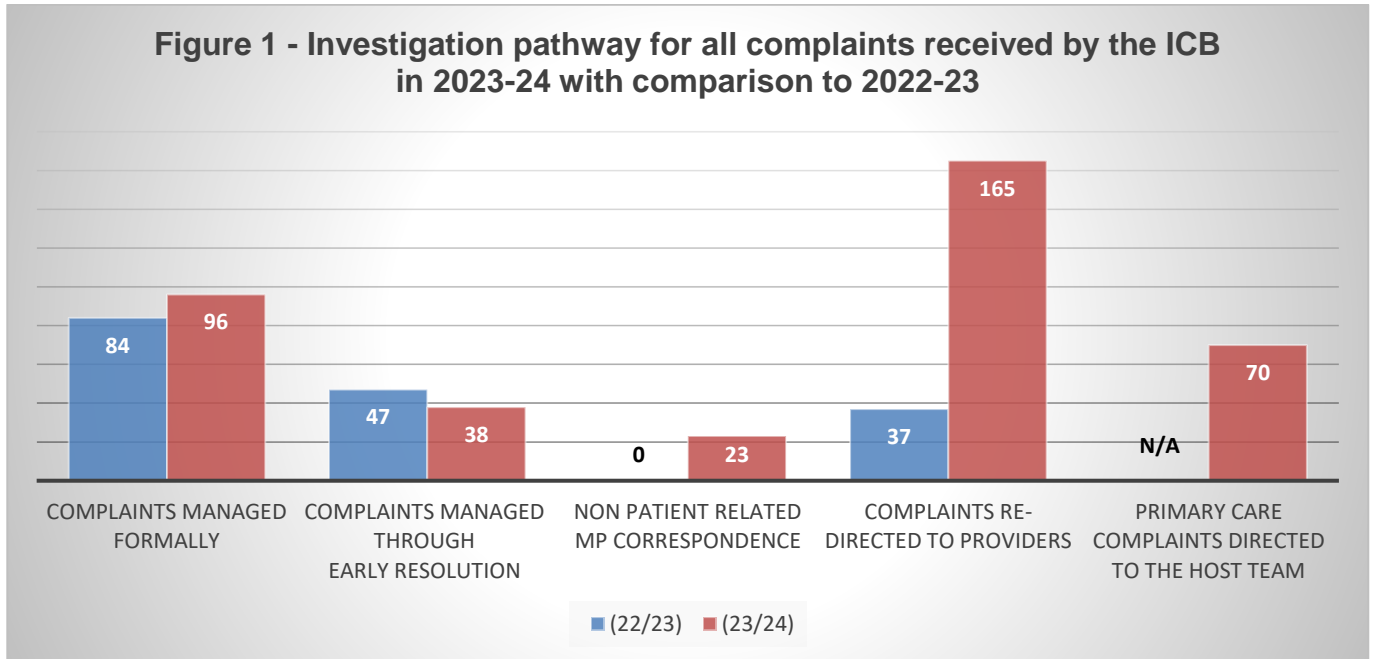
Re-directed Provider Complaints

If a complaint is made to us as commissioner, we determine how to handle the complaint in discussion with the person raising the complaint. Complaints are reviewed upon receipt and the majority redirected to the statutory providers for investigation through their own complaints process. This gives them the opportunity to investigate, respond and identify opportunities to learn and improve. To meet our responsibility as a commissioner of services the issues raised were noted as part of our ongoing quality assurance process, which provides information about the safety, effectiveness and patient experience of services commissioned by the ICB.

3. Complaints Received

3.1 In 2023-24, 392 complaints were received in total compared to 168 in 2022-23.

3.2 **Figure 1** below shows the total number of complaints received by the ICB and the investigation pathway taken for 2023-24 with comparison to the previous year (2022-23).



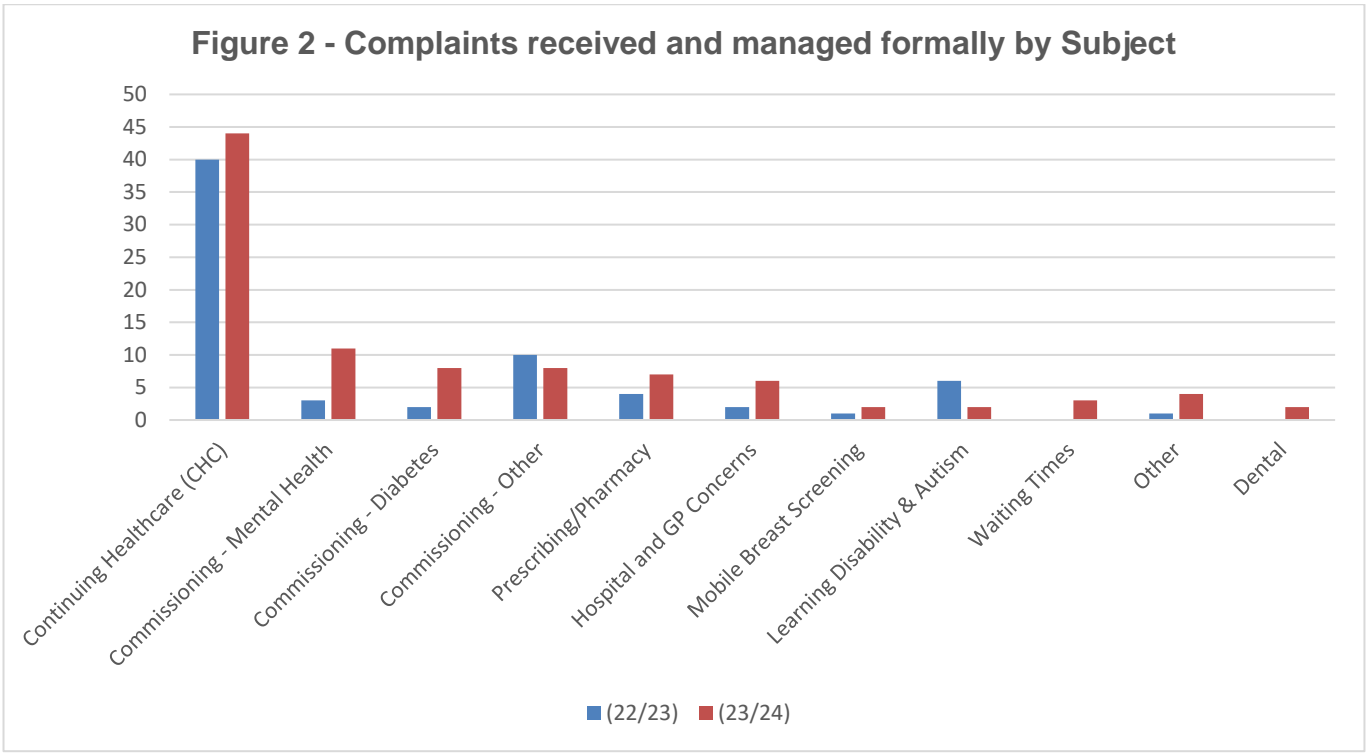
3.3 In 2023-24 there was a significant increase in the number of complaints received and redirected to Providers, this is a direct result of the transfer of commissioning of Primary Care services to the ICB with the ICB becoming the 'front door' for all Primary Care complaints in July 2023.

3.4 A new category, Primary Care Complaints Directed to the Host Team again is the result of the transfer of Primary Care services and shows the number of Primary Care complaints directed to the Host Team for formal resolution.

3.5 The way in which Non-patient related MP correspondence is categorised changed in 2023-24. Previously these figures were included in 'Complaints Managed through Early Resolution'.

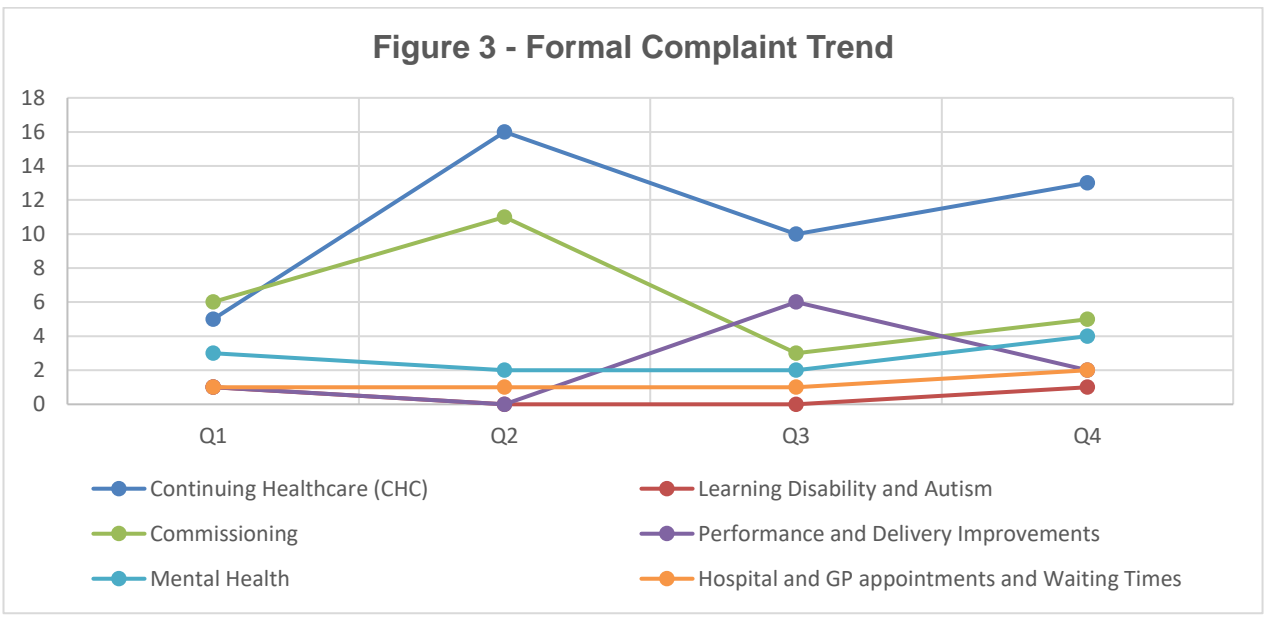
4. Formal Complaints by Subject

4.1 **Figure 2** shows the number of complaints formally investigated by the ICB by subject in 2023-24 in comparison to 2022-23. Most complaints (45/96) investigated by the ICB related to the NHS Continuing Healthcare (CHC) service which is a patient facing service provided by the ICB.



5. Trend in complaints received and managed formally

5.1 **Figure 3** below shows the number of complaints managed formally, received throughout each quarter by service. The number of complaints received throughout the year was fairly consistent with a marked increase in CHC complaints received in Quarter 2 which related to CHC assessments.

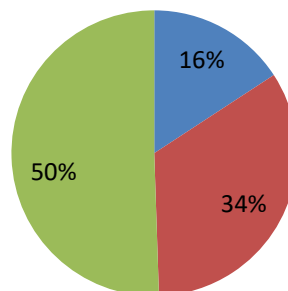


6. Outcomes

- 6.1 In line with the Parliamentary and Health Service Ombudsman's (PHSO) approach to categorising the outcome of complaints, the ICB records complaints as either 'upheld', 'partially upheld' or 'not upheld'.
- 6.1 In 2023-24, 50% of complaints were not upheld and 50% of complaints were either upheld or partially upheld. This is in line with the outcomes from 2022-23.
- 6.1 **Figure 4** below shows the overall breakdown of complaint outcomes for the ICB from 2023-24. The majority of complaints (11/15) upheld related to Continuing Healthcare assessments which correlates with 2022-23.

Figure 4 - Outcomes of Formal Complaints Investigated by the ICB in 2023-24

■ Upheld ■ Partially Upheld ■ Not Upheld



7. Acknowledgement and Response Timeframes

- 7.2 **Acknowledgement** – The ICB is committed to acknowledging all complaints within three working days of receipt. During 2023-24 100% of complaints received were acknowledged within 3 working days.
- 7.3 **Response** – The ICB's Complaints Management policy, in line with the PHSO guidance explains that the timeframe for responding to each complaint is set on a case by case basis depending on the requirements and complexity of the case and that the timeframe is agreed with the complainant at the outset. The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 allow organisations up to six months to respond to complaints.
- 7.4 **Figure 5** below shows the performance relating to complaints managed formally with comparison shown to the previous year.

Figure 5: Performance data relating to formal complaint responses	2022-23	2023-24
Number and % of formal complaints responded to in 2023-24 within:		
25 working days	11 (26%)	37 (38%)
25-40 working days	14 (33%)	30 (31%)
40-60 working days	9 (22%)	19 (20%)
60+	8 (19%)	11 (11%)
% of formal complaints received in year and responded to within the original agreed timeframe at the outset (this only shows complaints received and responded to within the identified year)	34%	89%
Average time taken to respond to formal complaints (working days)	46	35

7.5 The number of complaints responded to has increased from the previous year. The reason for this is an increase in the number of complaints received and response to a backlog of aged cases. Performance in terms of timeliness has also improved with 89% of complaints being responded to within the original agreed timeframe. 97 complaints were responded to in total which differs slightly from the number of complaints received as some complaints carried over from the previous financial year. This is a result of more careful consideration when triaging complaints and improved processes within the complaints service.

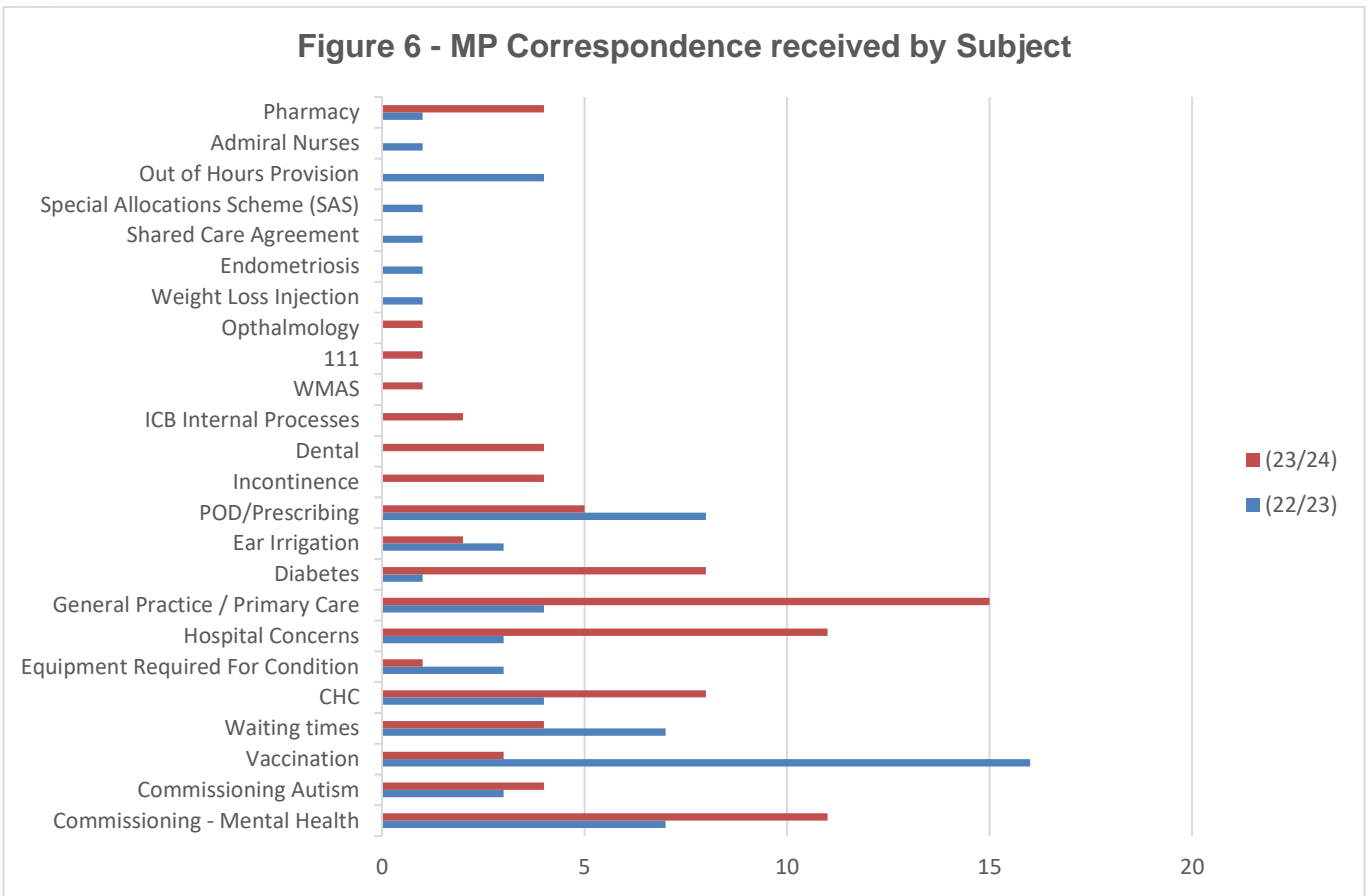
7.6 Of the 96 formal complaints investigated by the ICB in 2023-24, five were returned by the complainant for further investigation. Of these five cases, three were requests for further information about the CHC process which upon receipt satisfied the complainant. This is an indicator that responses were well received.

8. MP Correspondence by Subject

8.2 Individuals may contact their MP in relation to NHS services and in some cases the MP shares this correspondence with the ICB for comment. There were 89 instances where an MP contacted us in 2023-24. Of these 43 cases were managed through the Formal Complaints pathway, 23 through the Non-patient related MP correspondence pathway, 20 through the Complaints redirected to Providers pathway and 3 cases were managed through early resolution.

8.3 **Figure 6** shows the number of contacts made by MPs by subject in 2023-24 with comparison to 2022-23. Most of the correspondence received (27/89) related to the commissioning of services.

Figure 6 - MP Correspondence received by Subject



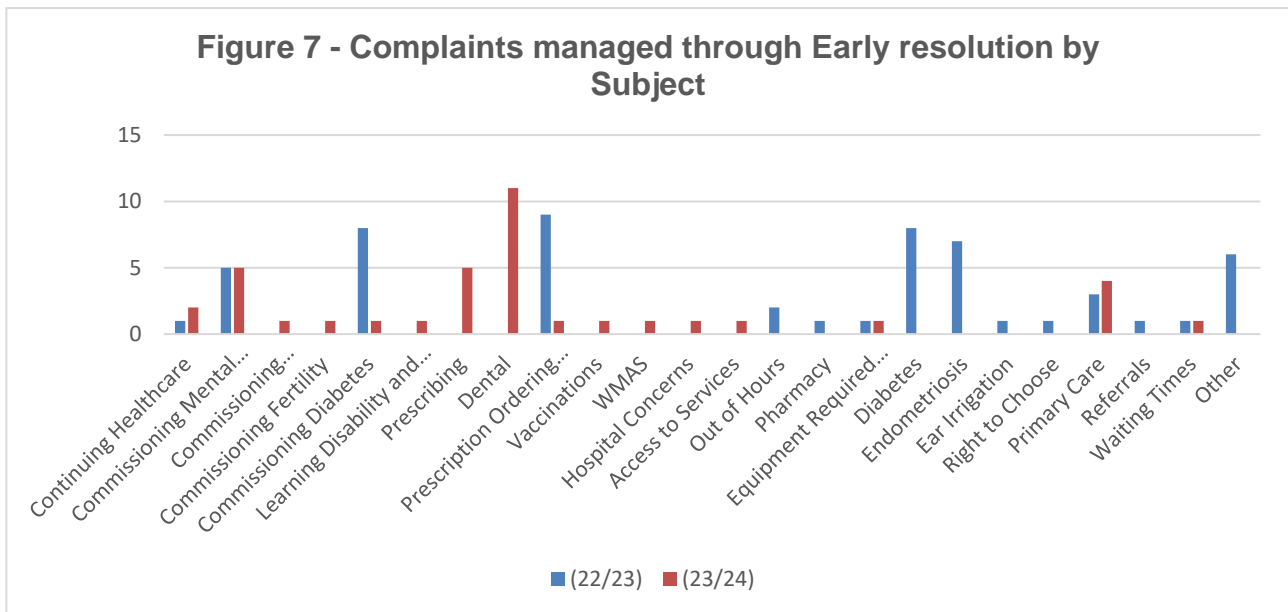
9. Early Resolution

9.2 During 2023-24 the ICB managed 38 complaints through Early Resolution.

9.3 **Figure 7** below shows the overall breakdown of Early Resolution complaints received during 2023/24 by subject and comparison with 2022-23. Most complaints (11/38) related to accessing Primary Care Dental Services.

9.4 Thirty (83%) of complaints were responded to within 10 working days. The remaining cases needed longer to resolve as additional time was required by supporting services to provide a robust response or resolution for the individual.

Figure 7 - Complaints managed through Early resolution by Subject

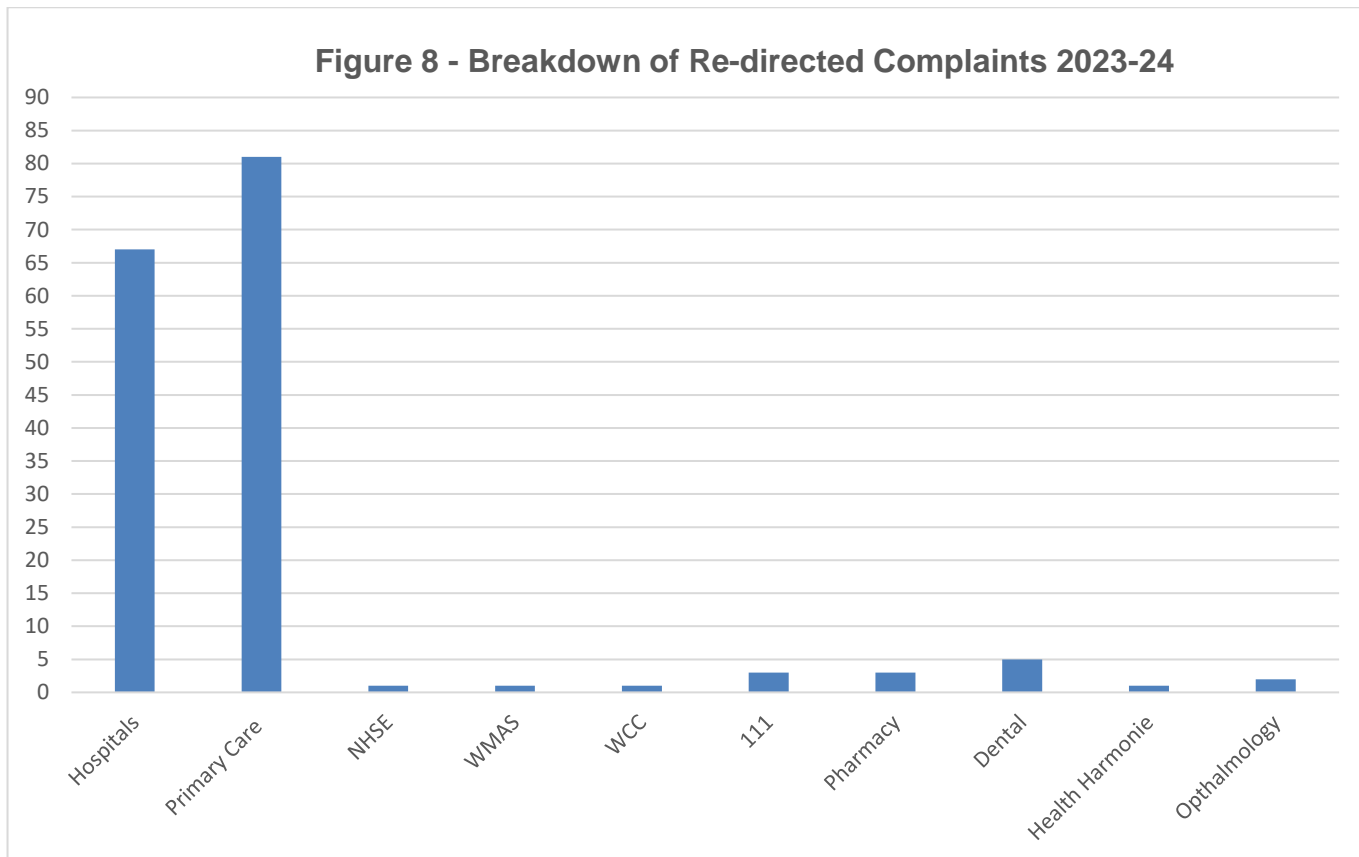


10. Provider Complaints

- 10.2** If a complaint is made to us as commissioner, we determine how to handle the complaint in discussion with the person raising the complaint. In most cases the provider of the service is best placed to deal with the complaint. The ICB notes the issues raised as part of its ongoing quality assurance process, which provides information about the safety, effectiveness and patient experience of services commissioned by us.
- 10.3** The ICB received 165 complaints which related to Providers in the system, which is a significant increase from 2022-23. 148/165 of these complaints related to hospital and GP concerns, waiting times, and availability of appointments. With the agreement of the complainant, these complaints were directed to the Provider for investigation via their own internal process which gives the Provider the opportunity to investigate, respond and identify opportunities to learn and improve.
- 10.4** The ICB helped complainants to understand the complaints management process and why redirecting to the Provider was best practice. Support was provided in contacting the Provider where required and details of advocacy organisations were shared. This marked increase was in part due to the transfer of Primary Care commissioning responsibilities.
- 10.5** The ICB had oversight of the Provider's responses in 16 instances for its own quality assurance and to provide confidence to the complainant. An example of such cases is that of an individual who, although is a resident of Coventry and Warwickshire, had been under the care of a number of specialists Trusts outside of the region. The ICB requested oversight of this joint investigation and integrated response due to its complexity and to support the patient and family.
- 10.6** Multi-Agency complaints – In line with PHSO guidance, where it is identified that a complaint relates to more than one provider, a lead provider is identified who collates all investigations

into one joint response. Multi-agency complaints where the ICB was identified as lead are reflected within our figures for formal complaints. There were also four occasions where the ICB provided a response to be integrated into a response facilitated by the lead provider.

10.7 **Figure 8** below shows the overall breakdown of complaints redirected to Providers within the system received during 2023-24 by subject. Most complaints (81/165) related to our Primary Care Services. There was no formal recording of data for 2022-23.



11. Parliamentary and Health Service Ombudsman and Local Government and Social Care Ombudsman

11.2 The Parliamentary and Health Service Ombudsman and Local Government and Social Care Ombudsman (LGO) provides services to the public by undertaking independent investigations into complaints where the complainant considers that the NHS in England has not acted properly or fairly or has provided a poor service. The PHSO/LGO will normally only take on a complaint after the NHS organisation complained about has had an opportunity to investigate and respond to the complaint.

11.3 The PHSO/LGO carry out initial assessments (where they consider whether they can and should investigate a complaint) and contact us for information to help with this. In 2023-24 seven cases were assessed but at the time of this report no formal investigations had been opened.

11.4 Three cases under PHSO assessment were decided during 2023-24 of which two were upheld.

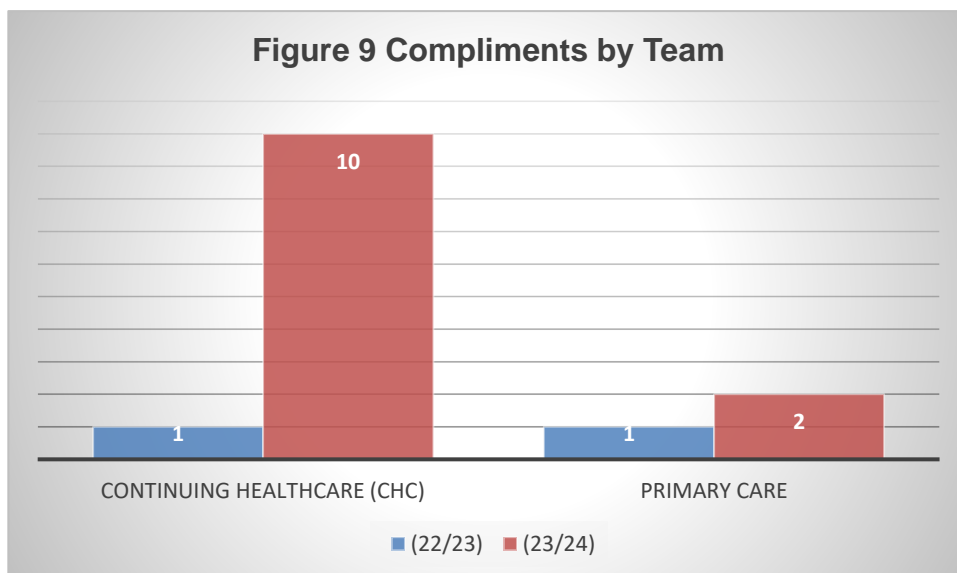
The first case related to the Learning, Disability and Autism service. The remedy recommended for both the ICB and Local Authority included an apology and financial reimbursement. This was for avoidable distress and impact on the patient's wellbeing and mental health.

A second case upheld also related to the Learning Disability and Autism service. The recommended remedy included a resolution statement, and letters of apology from both the ICB and Coventry & Warwickshire Partnership Trust. Both services were asked to pay the family in recognition of their parts in the exacerbation of the difficult family circumstances.

The third assessed complaint was not upheld by the PHSO and was a longstanding CHC complaint where multiple attempts had taken place to resolve to the complainant's satisfaction.


12. Compliments

- 12.2** The ICB receives compliments relating to the services it delivers directly and occasionally for the providers within the system.
- 12.3** **Figure 9** below shows the breakdown of our compliments received throughout 2023-24 compared to 2022/23. The increase in compliments this year is believed to be due to a clearer understanding of reporting of compliments within services.



13. Unreasonably Persistent Complainants

- 13.2** The ICB is committed to dealing with all complaints fairly and impartially and to providing a high quality service. As part of this approach, the ICB would rarely limit people from making contact. However, there are a small number of cases where the frequency of contact with the ICB or individual behaviour, hinders consideration of their own and/or other people's complaints or requests for information.

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- 13.3** During 2023-24 the ICB experienced 2 instances where it was necessary to implement the Management of Persistent and Unreasonable Behaviour Policy compared to 0 cases in 2022-23.

14. Quarterly Returns

- 14.2** All NHS organisations and those delivering NHS services are required to submit annual returns to NHS Digital. The K041a return relates to complaints managed formally by the ICB and the K041b return relates to Primary Care formal complaints. The information collection allows monitoring of complaints received by the NHS. It also supports the commitment to improve the patient experience by listening to the public voice.
- 14.3** The ICB has submitted the K041a return to NHS Digital relating to 2023-24 within the deadline and the Primary Care K041b return is due in July 2024.

15. Learning and Development

- 15.2** In line with the four aims of the Coventry and Warwickshire system we want to improve outcomes in population health and healthcare and tackle inequalities in outcomes, experience and access. One way in which we can do this is through listening to our population, of which complaints are a valuable source of data.
- 15.3** The intelligence from complaints about ICB services/commissioning is shared within the organisation to support learning and improvement. The majority of complaints received during the year relate to the Continuing Healthcare Service. Regular reports and meetings with the Leadership team support the management and timeliness of responses to complaints.
- 15.4** Actions following complaints can take place at several points in time. There are occasions when the ICB was aware of problems and made changes at the time. Other changes/actions can be made following a complaint investigation. SMART actions are recorded and monitored through to conclusion. Below are some of the actions and learning from formal complaints.

Example 1

Following a complaint from the family of a CHC patient, an investigation took place to establish if the correct CHC funding had been received by the family. The CHC team felt that a holistic view was warranted which resulted in a decision to award CHC funding to ensure that the patient was not financially disadvantaged. A review of the processes for formally documenting capacity assessments and the recording of Lasting Power of Attorneys was completed and further training and development of clinical staff in respect of patient capacity was identified. A reimbursement payment was made to the family.

Example 2

An aged CHC financial recompense complaint was raised by a deceased patient's family and their legal team. An investigation took place and established that there had been initial errors in the calculation of care needs, substantial delays in calculating the recompense which had been recognised and a lack of clear and concise communication to the family. The complaints process acted as a vehicle for final conversations to offer appropriate recompense and an additional compensation payment. The investigation identified the need for a full review of how similar cases are managed and responsibilities and decisions are communicated to patients and families. Additionally, Service Managers offered record-keeping training to the clinical team and a new policy was adopted to ensure that all disputes in payment and/or reimbursement decisions were handled in a timely way by a permanent senior staff member.

Example 3

A complaint was received from a patient following their CHC assessment meeting. The patient felt that the meeting was conducted unprofessionally and without understanding of their neurological condition. As part of the investigation, the Investigating Officer met with the complainant to understand their experience more fully. The investigation identified the need for a registered Mental Health Nurse as well as a Registered General Nurse to be present at all CHC assessment meetings where a patient has any neurological conditions. This resulted in a change in process to meet this identified need. Further, specific training in neurological conditions was also provided for relevant clinical staff.

Example 4

A complaint was received regarding a delay in funding payment being made to a care home where the patient was CHC eligible causing a refund due to the patient to be delayed. Attempts to resolve this had resulted in an experience of poor communication. The investigation identified the cause of this delay but also highlighted the need for a clear process for both the care home and ICB in such scenarios. An action was taken by the ICB contracting team to deliver training to this care home and rectify this matter swiftly. Further action then involved the creation of a formal Standard Operating Procedure with appropriate timescales for responding to and maintaining communication with care providers around issues such as payments. Finally, with recognition of the failed attempts to resolve this matter without a formal complaint, a summary of the complaint investigation was shared across the administration and wider team and associated learning provided for all those involved.

Example 5

A complaint was received which related to a potential shared care agreement (SCA). It was recognised that this issue had been previously raised by other complainants. A commitment was made to communicate with our GP Practices regarding SCAs in terms of how they can support patients with previous private diagnoses of Attention Deficit Hyperactivity Disorder (ADHD). Ongoing support was offered to an individual practice to support in their understanding of SCAs.

Example 6

A complaint was received regarding local service provision for children with continence needs. The ICB recognised an absence of service in this area. The current position and our commitment to a new service with neighbouring organisations was explained as being a priority along with an apology. Ongoing support was offered to the family via signposting to meet the child's needs in the interim period. The actions taken support the ICB's strategic priorities and areas of focus; enabling the best start in life for children and young people and improving access to services.

16. Conclusion

16.2 Complaints performance in 2023-24 was strong with all complaints being acknowledged and responded to in line with NHS Complaints regulations and our policy.

16.3 For the 47 complaints responded to which were either fully or partially upheld, learning was captured and shared with services and the organisation through reporting, meetings and individual action plans. A small number of complaints were returned for further resolution and no new cases opened by the PHSO during the year which gives assurance around our complaints handling.

16.4 Achievements

- Eliminated aged complaints from previous year
- Became the front door for Primary Care complaints
- Stronger relationship built with other ICBs through the West Midlands ICBs Primary Care (PC) Complaints Working Group
- Development of Coventry and Warwickshire Complaints Network
- Worked with ICB Primary Care (PC) team to develop reports to support their understanding of complaints received for PC services.
- Reviewed service user feedback arrangements, developed new process to increase engagement
- Complaints information reviewed and updated on ICB website
- Updates to Complaints Database and Standard Operating Procedures to support more accurate and effective recording and reporting and allow cross cover.



16.5 On the Horizon

- Training for Investigating Officers within the ICB to support high quality investigations
- Completion of PHSO NHS Complaints Standards Assessment matrix to understand the quality of our complaints handling and make necessary improvements
- Review of data obtained at complaint outset including demographics to ensure equality.

Recommendations

Members are requested to be **ASSURED** that suitable complaint management arrangements are in place and that complaints are being used as an opportunity to learn and improve.

End of Report