

Complaints Managers Governance and Learning Forum

Monday, 8th March 2021, 10.00am to 12.00pm: Webex Meeting

1. Welcome:

The Assistant National Director (AND) of the National Complaints Governance and Learning Team opened the meeting by welcoming everyone present to the first Forum of 2021. New members were introduced and welcomed as well as the guest speakers.

The AND advised that the HSE Your Service Your Say Annual Report 2019 was now available on the HSE website and the link would be circulated following the forum.

2. Matters arising and previous minutes:

Minutes agreed.

Matters arising – Forum questionnaire: Issued after December 2020 forum with a limited response. Questionnaire to be recirculated after today's forum. This will inform format, and content.

3. Ombudsman Address

The Ombudsman addressed the forum and acknowledged that Health Service employees have been under incredible pressure during the COVID-19 pandemic and thanked staff for delivering a remarkable service in difficult times.

The Ombudsman acknowledged changes in the patterns of complaints from the perspective of the Office of the Ombudsman as a result of COVID-19 but that this shift has not necessarily been reflected in a major increase in healthcare complaints.

The Ombudsman wished to highlight 'Learning to Get Better', for the benefit of the new forum members. He acknowledged the emotional engagement that complainants have in terms of the subject matter in healthcare complaints. He also recognised that trying to get responses from clinicians can take time because of the nature of their work but that the delay can, in turn, add to the distress of the complainant.

The Ombudsman acknowledged the work being done by the HSE and expressed his appreciation and understanding in relation to the challenges faced day to day in doing that work. In the current context those challenges are being exacerbated by having to deal with complaints remotely as well as trying to engage with clinicians who are immersed in the COVID-19 emergency response.

The Ombudsman highlighted that the reason for LTGB was the strong belief that the health service needs decent feedback loops. If mistakes are caught early, services can be improved which makes for a safer and better healthcare service. He acknowledged the services' willingness to learn from complaints. LTGB was the Ombudsman's first own initiative report. Normally investigations are initiated because of complaints but in this instance it was because it was felt that there weren't enough complaints coming through.

The Ombudsman welcomed improvements in relation to key issues such as access to mechanisms for providing feedback and continuing with commitments in encouraging complaints and making it easier for complainants to share experiences.

The Ombudsman acknowledged the strides made in standardisation, such as forms and IT systems for recording data, which allows for a much better chance in identifying patterns.

He highlighted that he was very pleased with initiatives that have been taken in relation to training and online training and that this is a pattern they are trying to promote with other sectors. He acknowledged the steady progress towards a well-functioning, integrated complaints service across healthcare in Ireland but appreciated that changes to legislation are still needed for progression in some areas.

The Ombudsman acknowledged the importance of having access to Forums, such as this, which adds to a healthy cross-agency working relationship which he hopes to see continue.

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The AND, NCGLT thanked the Ombudsman for his very positive contribution. He highlighted the work carried out by the HSE since the initial 2015 LTGB report and the subsequent 2018 report and the significant improvements achieved. The AND, NCGLT acknowledged that there was still work to be done and that we continue to improve as a group. He highlighted new developments such as the severity and harm ratings attached to HCAT going live on CMS and the learning from this will be invaluable. An audit will be conducted at the end of Q2.

4. National Director, Quality Assurance and Verification (QAV)

The National Director for QAV thanked the Ombudsman for his reflections on work being carried out. He highlighted that 2020 and the initial months of 2021 have been exceptionally challenging for everybody present and the range of responsibilities have been significantly impacted due to changes in priorities and demands as well as redeployment. He stressed that he hoped for a return to normal business in the later part of 2021.

The National Director highlighted that priorities remain the same in relation to training and the use of CMS to achieve valuable data. He advised that the Safety & Quality Committee of the HSE Board have taken a particular interest in this and their main agenda is around learning, not just from complaints but from serious incidents and a range of other initiatives.

The National Director highlighted that when someone takes the time to put a complaint down on paper, they are not only giving their time but they are pouring out an experience which we need to hear and be able to respond to which is a commitment that the forum members strive towards. He drew attention to the recognition of the progress made in the 2018 LTGB report but that there remains a commitment to improve.

The National Director advised that there will be changes during 2021 in relation to corporate reorganisation of the HSE and waiting to see how the complaints function fits into that but certainly seeing that the whole area of patient experience, from complaints or from other sources, will be elevated in terms of how the organisation manages that at a national level.

The National Director thanked all present for their time.

5. Case Study Presentation: SAOLTA University Healthcare Group

A complaint case study was presented from SAOLTA in relation to a Service User who spent a significant amount of time in intensive care with very complex and rare condition and subsequently died in the presence of family. May they rest in peace.

The issues raised within the complaint were mainly in relation to the complexity in the decision making which fell under clinical judgement. The complaint went to an internal review. The review highlighted a lack of understanding by the complainant of the complexity of the case, especially as the complainant, who was not the next of kin, was not involved in all aspects of the decision-making regarding care and treatment and drew attention to the importance of advocacy in such instances.

The AND, NCGLT acknowledged that this was a fantastic example of where advocacy can be highly effective providing critical support.

6. Update: Overview of the 2020 complaints data and update on the CMS and HCAT, Senior Manager, NCGLT

An overview of complaints Data for 2020 was presented and everyone thanked for contributing information requested in advance of the annual report in what has been an unprecedented year.

It was advised that NCGLT would be in touch with group members individually in terms of their own area's data.

A decrease in complaints for 2020 was highlighted and that this may be attributed to the reduction in services during the COVID-19 pandemic. Point of contact complaints also showed a reduction due

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to not having access to meeting people within services during this time. The NCGLT annual report would be contextualizing the information presented.

The efforts to record compliments was acknowledged which was evident from the data recorded.

A group member highlighted an error in data recorded regarding compliments for their area. The AND responded and asked that when circulating the slides that each area would review the data relevant to their own area and to contact NCGLT regarding any errors prior to the information being published.

The AND acknowledged that complaints data was down by 17% overall which was quite low in comparison to figures shown earlier in the year. It was highlighted that data was retrospectively added on to CMS as well as some areas providing data on template spreadsheets where data had not been added on CMS and efforts acknowledged to ensure data was contributed.

The AND highlighted the high percentage of compliments recorded and asked if there had been progress made in moving to a method of recording compliments on CMS. It was advised that currently the focus is on point of contact complaints as the pilot for this was put on hold due to COVID-19. The pilot will be starting back up but recording compliments on CMS would be the next project following that. A template for recording compliments was circulated with the template for POC complaints and that having the template encouraged recording.

New developments and data for 2021 were also presented. An audit will be carried out in relation to recording of severity and harm in Q2 2021.

7. Overview of 2020 Casebook, Senior Manager, NCGLT

The National HSE Anonymised Feedback Learning Casebook for 2020 is now completed. It is hoped to have this published and circulated widely this week. All those who contributed to the casebook were thanked and the level of compliments included and the learning to be had from positive feedback as highlighted. It was requested when submitting compliments, that the background to the compliment including the identification of the key learning points be included.

Submissions for the Q1 2021 casebook are due 30th April 2021.

Presentation of positive feedback case, Children's Health Ireland

Children's Health Ireland (CHI) presented a positive feedback case from CHI at Crumlin which involved a young child who expressed thanks in relation to their experience in the plastics dressing clinic, for the kindness shown and for helping them feel brave.

CHI identified that they investigated and assessed the methods used to make the service user 'feel brave' and highlighted the importance of sharing positive learning across sites to allow other areas to learn from the approach and ultimately better the patient experience.

As a result of this analysis of the positive feedback a leaflet is being developed to provide young patients with more information about what to expect when attending the clinic.

Forum members were complimentary of the approach in investigating and breaking down the positive feedback as they would a complaint.

There is valuable information in compliments and we can utilise that information to implement change. It was acknowledged that viewing something that you might think as very understandable from an adult's perspective can differ from the perspective of a child. This development was very encouraging and stressed the benefits of implementing child friendly approaches.

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8. Overview of Training Developments, Senior Manager, NCGLT

A brief overview of the training available was given. As a consequence of the ongoing restrictions NCGLT are trying to provide training online where possible. It was also appreciated that the Ombudsman acknowledged the amount of work that NCGLT has been doing in creating webinars and providing a flexible, online platform for staff to access training.

Following a previous presentation questions were received in relation to the content available on HSeLanD. NCGLT provided clarity in relation to the three main modules available as well as various webinars developed and how to access these on the HSeLanD platform. It was explained that the webinars are intended to support staff around the complaints process and that they are on a separate platform (Discovery Zone Hub) to the main modules on HSeLanD.

The Learning from Complaints webinar has been published online since the last forum. The learning guidance document is also in the process of being updated and forum members will be notified in the coming weeks once updated.

A further webinar will also be available in the coming weeks 'Building Resilience for Staff Handling Complaints'.

Many of the training modules developed are developed as a result of feedback received from Complaints Managers regarding what would be useful and what would assist in the complaints management process.

The AND welcomed any questions or suggestions regarding further training programmes that might assist in the feedback process.

9. Presentation from Patient Advocacy Service

An overview of the Patient Advocacy Service (PAS) was provided. A background in relation to the establishment of PAS was presented as well as discussion around the services provided and the key trends identified to date.

The recently signed Memorandum of Understanding between PAS and the HSE was also discussed.

The presentation led to discussion surrounding emerging trends in complaints as well as concerns regarding supports being put in place by the group to assist staff across the system in addressing complaints and being proactive in our approach.

A group member also raised the issue of the MOU and its rollout with particular consideration to the need for resources regarding the promotion of the PAS service. The AND responded advising that the next phase of the MoU currently underway is the implementation phase which will address those issues.

10. Any other business

Members would be contacted for case submissions for the next forum.

Action:

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

Date of Next Meeting: - Monday, 31st May, 2021 @ 10:00am until 12:00 Midday (Online Platform)