

# East Sussex Healthcare NHS Trust Complaints Review 2023

Healthwatch East Sussex  
Published: August 2023

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East Sussex

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# Objectives

Healthwatch East Sussex (HWES) have utilised a team of independent volunteers to review the processes used by East Sussex Healthcare NHS Trust (ESHT) when they are in receipt of a complaint.

The objectives of the project were to:

- Provide an independent “lay voice” review of the Trust’s complaints process.
- Assess the quality and timeliness of the Trust’s response and make recommendations for improvement.
- Demonstrate to local residents that the Trust welcomes and values wider patient and public feedback.

The volunteer reviewers examined a random selection of 25 complaints received by ESHT and scrutinised each for adherence to the specified process set out by ESHT.

All activity was dealt with in the strictest confidence and the subject of the complaint was not open to scrutiny.

This review of ESHT complaints took place in March 2023 and covered complaints from Urgent Care and Medicine. This was a pilot activity which will be refined and rolled out to other divisions within ESHT later in 2023.

# Methodology

ESHT asked HWES to review 25 randomly selected complaints, including 6 re-opened cases, where the complainant was not satisfied with the outcome of their original complaint and where the complaint was subsequently reopened.

The methodology had to satisfy a number of safeguards around patient confidentiality, any potential breaches to Data Protection, and in delivering a totally random selection of cases to ensure the independence of this review.

The Trust asked a staff member from outside the complaints department to choose 25 cases from a selection of 217 cases, all of which were represented by an ID number, with no other details to influence their selection.

HWES chose eight independent volunteer reviewers from our existing volunteer pool to support this project and review the complaints cases. All volunteers involved signed a confidentiality agreement agreeing not to discuss or disclose anything from the individual complaints reviewed.

When reviewing a complaint, reviewers needed to ensure that each case met certain quality standards and helped to determine what good looks like in practice. Reviewers were provided with a prompt sheet created by HWES in partnership with ESHT and The Advocacy People, which assessed complaints against the [2022 UK Central Government Complaints Standards Summary of Expectations](#) as well as a number of the standards used in our previous report.

The prompt sheet asked the reviewer to reflect on the following subjects:

- Information and Accessibility
- Sensitivity
- Responsiveness
- Seamless Service
- Support
- Effectiveness
- Objectiveness
- Complaints Experience

Reviewers were then asked to rate the Trusts response to each complaint as either Very Good, Good, Satisfactory or Poor.

In contrast to the 2016 review, during this exercise our volunteers did not have access to the entire complaint file, but instead were given access to the original complaint letter and the Trusts response letter.

This resulted in the unexpected challenge that the reviewers felt unable to fully answer some of the questions posed in the prompt sheet due to a lack of evidence on which to make an objective judgement.

# Observations and Findings

## What worked well:

- The Trust now responds to all complaints in a timely manner, ensuring that complainants are contacted within 3 working days of making a complaint.
- All complainants are provided with information on both the complaints process itself, and how to access advocacy services if needed as standard.
- The Trust generally communicates with patients in a sensitive, empathetic manner, which considers the complainant's experience.

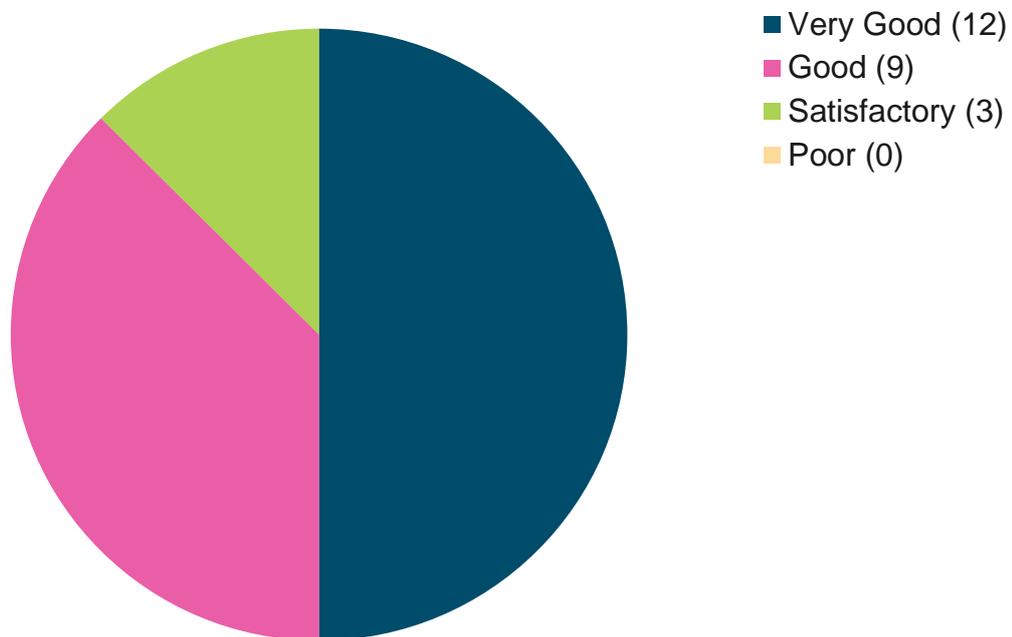
## What didn't work well:

Based on the documentation reviewed it was not possible for our reviewers to clarify in all cases whether the Trust was ensuring that complainants were involved in, and aware of, every step of the investigation, and that the process was impartial. This limitation will be factored into the methods used for reviewing and validating this aspect of the process in any future complaints review. The Trust did supply reviewers with a copy of their Standard Operating Procedure (SOP) which clearly outlined how the Trust keep complainants involved in, and aware of, the complaints process.

The SOP states that the Trust shares a complaints factsheet with every complainant, outlining all steps of the process, and that wherever possible complainants were kept informed of progress at every stage as per the standard operating procedure for complaints.

## Assessing the complaint

After working through the review criteria, our reviewers were then asked to grade the Trusts overall response to each complaint (using what information they had available to them).



The cases could be graded as follows:

**Very Good** – i.e. no further suggestions offered to improve the response.

**Good** – i.e. some responses could be improved

**Satisfactory** – i.e. meets the minimum standards

**Poor** – i.e. the complainant was very dissatisfied with the process

Of the 25 cases examined, the reviewers graded 48% (12) as Very Good, 36% (9) as Good, 12% (3) as Satisfactory, and 0% (0) as Poor. One case (4%) was not given a rating as it was not investigated.

This amounts to 84% (21) of cases being rated as either Very Good or Good as to how the complaint was conducted.

**Case 12 – Graded Very Good** – “Detailed response (which) covers all points and recognises where improvements could be made”.

**Case 8 – Graded Good** – “The (Trusts) response does not say what was learned. (the Trust) did try to investigate properly, but were hampered by poor record keeping. (The) response should have taken into account that the complainants mental health had suffered”.

**Case 2 – Graded Satisfactory** – “(A) standard letter, needed to be revised to take (into) account of gravity of the complaint. (It) should have been more clear about referral to Adult Social Care and also the process.”

## Information and Accessibility

From the information provided, none of the HWES assessors felt able to ascertain if the complainants were provided with adequate information about the complaints process at the beginning of the process itself, such as what to expect and how long it may take. There was also no evidence from the details provided that information had been supplied to complainants in an accessible format if needed.

Although our assessors were not able to evidence this (due to the information available to the assessors), the Trusts Standard Operating Procedure (SOP) states that all complainants are sent a formal letter of acknowledgement within three working days of the complaint being received. This includes a copy of the Trust's complaints factsheet and a leaflet on how to access advocacy services. The complaints factsheet contains information on what complainants should expect from the process and how long the process may take.

## Sensitivity

Of the 25 cases reviewed, 80% (19) of cases showed that the Trust had communicated to complainants with sensitivity and sympathy, and did not attempt to reduce, deny, or marginalise the complainant's feelings or experiences in any way.

Within the remaining 20% (6) there was only one other example (4%), where the reviewers felt that the clinical language used in the Trust's response made the letter sound unsympathetic to the complainant. The remaining 16% (4 cases) did not provide sufficient information to make a judgement.

Only 28% of the cases reviewed showed evidence of the patient being fully included in the process, with clear information about how the complaint was being investigated. This proportion may be low due to a lack of information provided to assessors rather than a poor quality of service.

## Responsiveness

In four-out-of-five (80%) of the cases reviewed, the Trust acknowledged the experiences of the complainant, although in several cases it was noted that the response could have been improved, as not every response fully acknowledged the complainant's experiences.

## Seamless Service

Only 8% (2) of the cases showed evidence that the complaint involved multiple organisations and in both cases our volunteers felt that there was evidence to show that the process appeared to have been well managed by the Trust.

## Effectiveness

Our reviewers found that in 56% (14) of cases reviewed, information was sent to the complainant about how their complaint would be used to improve services in the future within the Trust. It was also found that in 32% (8) of cases no information was provided to the complainant in the Trust's response letter about how their complaint would be used to make changes or encourage learning within the Trust.

## Objectiveness

Due to the nature of the evidence provided to our volunteers, our reviewers were not able to evidence that the Trust had assured complainants that the complaints process was an impartial one. This wasn't evidence that the Trust do not do this, only that we are unable to find evidence that they do from the limited information our volunteers had access to.

Our reviewers were initially unsure if senior staff had been involved in each case from the evidence that they reviewed but ESHT were able to supply HWES with clear evidence that this was the case, as each letter to complainants is investigated by a senior manager and written and approved (signed) from a member of the executive team. Additionally, in many cases, a number of senior staff are involved in the investigation and review of the complaint response.

## Complaints Experience

Our reviewers examined each case to look for any evidence that complainants expressed concerns in their complaint about how it may affect their ongoing or continued care. They found only one example of this, amounting to 4% (1) but there was not further evidence to show how this concern was dealt with by the Trust.

# Shared Learning

Both HWES and ESHT are committed to continuing a rolling review of complaints in different divisions within ESHT and felt that there was much that could be done to improve the way in which further reviews are undertaken, this includes:

1. ESHT staff will join HWES volunteers in a series of preparation sessions where ESHT staff will give detailed explanations of both the complaints process (including SOP) and ESHT's staff structure. This will enable volunteer reviewers to feel more confident and able to properly undertake the review and better understand how the complaints system should work.
2. ESHT and HWES staff and volunteer reviewers will work together to set shared aims and objectives and appropriate questions which can be answered fully by the evidence available.

# Recommendations

1. HWES should share this report and its findings with ESHT and Healthwatch England as well as publish this report on their website for the public to access.
2. HWES and ESHT will work together to deliver a rolling review of complaints processes to ensure that these are robust, patient-centric and that all divisions are following the same guidelines. A different division within the Trust will be reviewed each year.
3. HWES will support ESHT to ensure that they better communicate to each complainant how their individual complaint will be used as a learning tool or to effect change within service delivery and be able to evidence this.
4. The Trust should make sure it communicates with complainants regularly to keep complainants involved and informed in every step of the complaints process and ensure that all communications are easily available in alternative, accessible formats, in line with the [NHS accessible information standards](#).
5. The Trust should ensure it makes clear to complainants at the outset of any complaint, that the complaints process is an impartial one and that their complaint will in no way affect their current, ongoing, or future care.
6. The Trust should monitor how they implement changes to service delivery as a result of a complaint and ensure that they are able to evidence any outcomes from that change to external stakeholders.

## Response from East Sussex Healthcare NHS Trust:

**Response to ESHT Recommendation 4:** At the outset of a complaint, the complaints team will contact complainant by telephone (if the number is available). At this point the Patient Experience Officer (member of the complaints team) will share their contact details and inform them when to expect an update (if contact details not available the acknowledgment letter requests these details are provided). The Standard Operating Procedure has been revised and now includes two updates to the complainants on the progress of the complaint.

**Response to ESHT Recommendation 5:** This information is included in the complaints factsheet shared with every acknowledgement or request for consent. As part of this review process with Healthwatch the complaint and response were made available to the volunteers and not any additional correspondence between ESHT and the complainant.

# Conclusions

From the information available to them, the Healthwatch East Sussex Volunteer Reviewers felt that ESHT were providing a robust and fair complaint service which operated in a timely manner and communicated with complaints in a sympathetic and understanding manner.

It was also clear to both HWES and ESHT that for future reviews, both partners would need to reassess how we reviewed the complaints to ensure that we were finding the information needed to make an informed assessment of the service.

This review has shown positive collaboration between Healthwatch East Sussex and East Sussex Hospital Trust which will support our objective to continue to work in partnership to improve ESHT services for all patients.



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