

2. CONCERNS MANAGEMENT

4.1 Concerns Assurance

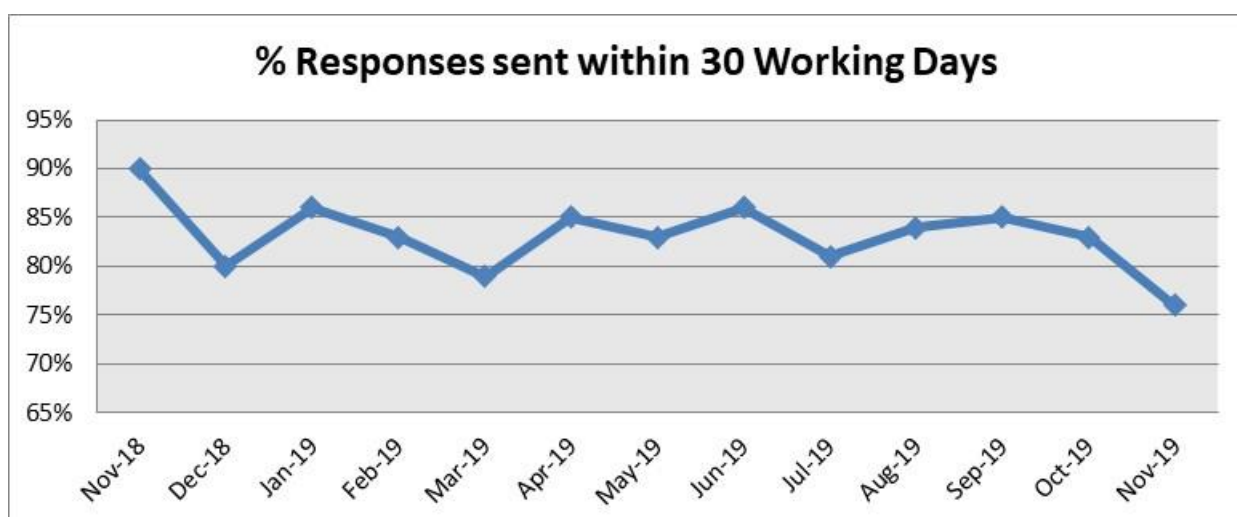
On a monthly basis, the Health Board conducts a Concerns Redress Assurance Group (CRAG) where the Corporate Complaints Team review recently closed complaints. A 'deep dive' review is undertaken on each Service Delivery Unit in turn, as well as the review of a selection of closed complaints from the other Service Delivery Units. During this review, any agreed actions by the Service Delivery Units are monitored by the Corporate Complaints Team to confirm actions are completed to ensure compliance. CRAG is continually developing and evolving to ensure that the best possible learning and assurance is attained by the Health Board. The Health Board has also introduced CRAG workshops where learning is shared with senior members of the Service Delivery Units.

A Learning Event based on sharing learning and providing assurance, based on complaints themes and trends, with examples of good responses, is being arranged for 10th March 2020 during Patient Safety Week. Learning from other Health Board's Section 16 Ombudsman Reports will also be presented in the Learning Event, which is being supported and attended by the Health Board's Ombudsman Improvement Officer.

4.2 Complaints Performance

The Health Board have achieved 76% for October 2019 performance, which is 1% higher than the Welsh Government Target of 75%.

The reduction in performance was discussed at the Quality and Safety Assurance Governance Group in January and related to complex complaints and capacity in 3 of the Units.



4.2.1 Re-opened Complaints from 1st April 2019 to 17th January 2020

Breakdown

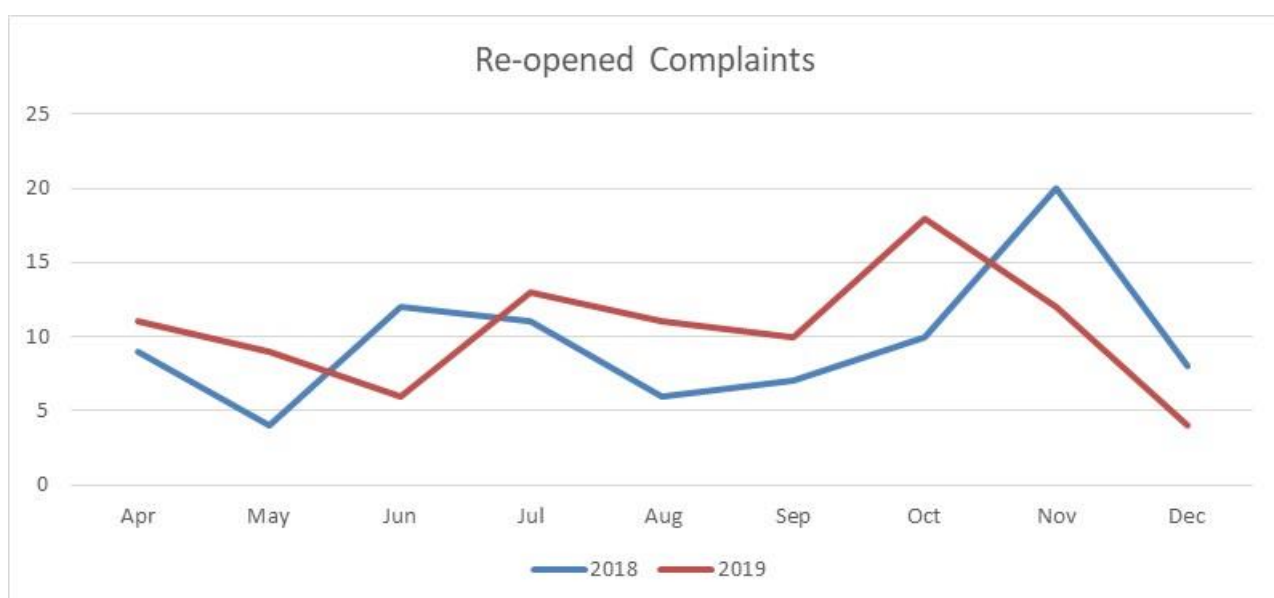
The Health Board received **1181** formal complaints from 1st April 2019 – 17th January 2020, the percentage of re-opened cases during this period is **8.5%**

Total 100 re-opened cases throughout the Health Board

Comparison to this period last year

The Health Board received **1070** formal complaints from 1st April 2018 – 17th January 2019, the percentage of re-opened cases during this period was **7.7%**

Total of 83 re-opened cases throughout the Health Board



Unit Breakdown 2018 & 2019

Service Delivery Unit	Received		Percentage of total received		Re-opened		%	
	2018	2019	2018	2019	2018	2019		
Morrison Hospital	398	495	37%	41.9%	49	65	59%	65%
Primary & Community	106	133	9.9%	11.2%	12	13	14.5%	13%
Neath Port Talbot	59	62	5.5%	5.2%	3	7	3.6%	7%
Singleton Hospital	180	315	16.8%	26.7%	7	12	8.4%	12%
Mental Health	91	131	8.5%	11%	4	3	4.8%	3%

Princess of Wales	207	N/A	19.3%	N/A	8	N/A	9.6%	N/A
Corporate	13	13	1.2%	1.1%	0	0	N/A	N/A
Planning	15	30	1.4%	2.5%	0	0	N/A	N/A
Workforce	1	2	0.09%	0.2%	0	0	N/A	N/A
Total	1070	1181			83	100		

The peak of reopened complaints in October has been analysed and presented to the Quality and Safety Governance Group in July 2020 and tailored training sessions are being provided to the Units to support learning.

4.3 Ombudsman Cases

There has been a slight decrease in complaints which the Ombudsman has investigated in relation to the Health Board in 2018/19, 35 compared to 37 in 2017/18. From the 1st April 2019 – 17th January 2020 have received 24 new investigations compared to 30 for the same period last year.



The Patient Feedback Team has ensured that all Ombudsman timescales are met to ensure continued timeliness when communicating with the Ombudsman. The Health Board has Key Performance Indicators in place, which are monitored on the Datix system, which assist with achieving the timescales set by the Ombudsman.

An Ombudsman Project Plan has been implemented, and a tailored training programme providing Ombudsman Learning and Assurance training has been delivered to each Unit Governance Team, based on identified themes and trends. The training incorporated the importance of complying with actions agreed at meetings with complainants and in complaint responses. This will ensure a robust system is in place in the Service Delivery Units.

A Learning Event has been arranged for 10th March 2020 during Patient Safety Week and the Ombudsman Improvement Officer will also be in attendance to deliver a presentation and workshop training.

4.4 Concerns Actions taken/being taken include:

- Concerns Redress Assurance Group (CRAG) to continue reviewing and auditing complaint responses to ensure compliance with the “Regulations”.
- Each month a ‘deep dive’ review is undertaken on each Service Delivery Unit in turn, as well as the review of a selection of closed complaints from the other Service Delivery Units. During this review, any agreed actions by the Service Delivery Units are monitored by the Corporate Complaints Team to confirm actions are completed to ensure compliance and reported to the Quality and Safety Governance Group.
- Attendance at the Ombudsman Network Meeting on Friday 13th December 2019.
- Attendance at the Complaints Network Meeting on 23rd January 2020.
- Appropriate early resolution is considered on receipt of each Ombudsman enquiry and investigation.
- Tailored Mental Health & Learning Disabilities training is currently being arranged to reinforce the “Regulations” and Redress process.
- A Learning Event based on sharing learning and providing assurance, based on complaints themes and trends, is being arranged for 10th March 2020 during Patient Safety Week. Learning from other Health Board’s Section 16 Ombudsman Reports will also be presented in the Learning Event, which is being supported and attended by the Health Board’s Ombudsman Improvement Officer.