

Berkshire Healthcare NHS Foundation Trust Annual Complaints Report April 2023 to March 2024

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1. Introduction and executive Summary

This report contains the annual complaint information for Berkshire Healthcare NHS Foundation Trust (referred to in this document as The Trust), as mandated in The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. The Trust formally reports patient experience through our Quality Executive and Trust Board on a quarterly basis, alongside other measures including compliments, the Friends and Family Test, PALS, and our internal patient survey programme, which is operated through the iWGC feedback solution.

This report looks at the application of the Complaints Process within the Trust from 1 April 2023 to 31 March 2024 and uses data captured from the Datix incident reporting system.

Factors (and best practice) which affect the numbers of Formal Complaints that Trusts receive include:

- Ensuring processes are in place to resolve potential and verbal complaints before they escalate to Formal Complaints. These include developing systems and training to support staff with local resolution.
- An awareness of other services such as the Patient Advice and Liaison Service (PALS – internal to the Trust) and external services including Healthwatch and advocacy organisations which ensure that the NHS listens to patients and those who care for them, offering both signposting and support.
- Highlighting the complaints process as well as alternative feedback mechanisms in a variety of ways including leaflets, poster adverts and through direct discussions with patients, such as PALS clinics in clinical sites.

When people contact the service, the complaints office will discuss the options for complaint management. This gives the opportunity to make an informed decision as to whether they are looking to make a Formal Complaint or would prefer to work with the service to resolve the complaint informally.

The number of Formal Complaints received has increased to 281 from 240, with the table below reporting the activity over time. This shows that we received the highest number of Formal Complaints this past year; it is important to consider this in terms of the number of patient contacts and the % of these contacts that result in a Formal Complaint being made:

Year	Number of Formal Complaints received	% of Patient Contacts
2023/24	281	0.030%
2022/23	240	0.043%
2021/22	231	0.049%
2020/21	213	0.038%

The Trust actively promotes feedback as part of 'Learning from Experience', which within the Complaints Office includes activity such as enquiries, services resolving concerns informally, working with other Trusts on joint complaints, responding to the office of Members of Parliament who raise concerns on behalf of their constituents, complaints raised via the CQC and through advocacy services. The Trust achieved a 100% response rate in responding to complainants within an agreed timescale and continues to monitor an internal target of 25 working days (with the complexity of a number of the complaints that we receive and the availability of operational staff this internal target is not always possible).

There were 73 MP enquiries/concerns raised, a decrease from 88 last year and 67 in 2021/22. The level of activity from MPs has had a sustained increase from 34 in 2020/21.

CAMHS continues to be the main service MPs contact the Trust about, however activity has decreased from 66% of contacts to 34% this year; the main theme of these being waiting times (43%). CMHT received the second highest level of MP activity with 16%, and of these, 92% (n5 out of n6) were about services based in the West of the County.

2. Complaints received – activity

2.1 Overview

During 2023/24, 281 Formal Complaints were received into the organisation. Table 1 shows the number of Formal Complaints by service and compares them to the previous financial year.

Table 1: Formal Complaints received

Service	2022/23						2023/24						
	Q1	Q2	Q3	Q4	Total for year	% of Total	Q1	Q2	Q3	Q4	Total for year	% of Total	Comparison to last FY
CMHT/Care Pathways	11	10	18	14	53	22.00%	16	6	13	14	49	17.44%	↓
CAMHS - Child and Adolescent Mental Health Services	4	6	13	10	33	14.00%	8	11	7	9	35	12.45%	↓
Crisis Resolution & Home Treatment Team (CRHTT)	3	9	6	4	22	9.00%	5	10	5	6	26	9.25%	↑
Acute Inpatient Admissions – Prospect Park Hospital	13	7	9	6	35	15.00%	10	2	4	7	23	8.19%	↓
Community Nursing	3	0	4	5	12	5.00%	3	6	5	3	17	6.05%	↑
Community Hospital Inpatient	4	3	2	1	10	4.00%	1	2	5	4	12	4.27%	↑
Common Point of Entry	0	1	3	1	5	2.00%	1	3	0	0	4	1.42%	↓
Out of Hours GP Services	1	0	1	2	4	1.50%	1	2	7	4	14	4.98%	↑
PICU - Psychiatric Intensive Care Unit	1	2	0	4	7	3.00%	0	0	1	0	1	0.36%	↓
Urgent Treatment Centre	1	0	0	0	1	0.50%	1	1	2	1	5	1.78%	↑
Older Adults Community Mental Health Team	1	1	0	0	2	1.00%	1	2	1	0	4	1.42%	↑
Other services during quarter	19	11	15	11	56	23.00%	21	19	25	26	91	32.38%	↑

Grand Total	61	50	71	58	240	100.00%	68	64	75	74	281	100	↑
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Of the 281 Formal Complaints that were received, 38 were secondary complaints (35 of these were from 8 patients).

Table 2 below details the main themes of complaints and the percentage breakdown of these.

Table 2: Themes of Complaints received.

Main subject of complaint	Number of Complaints	% of Complaints
Abuse, Bullying, Physical, Sexual, Verbal	1	0.36%
Access to Services	9	3.20%
Attitude of Staff	39	13.88%
Care and Treatment	134	47.69%
Clinical Care Received	1	0.36%
Communication	32	11.39%
Confidentiality	11	3.91%
Discharge Arrangements	8	2.85%
Discrimination, Cultural Issues	4	1.42%
Inaccurate Records	1	0.36%
Management and Administration	1	0.36%
Medical Records	8	2.85%
Medication	13	4.63%
Other	5	1.78%
Patients Property and Valuables	2	0.71%
Physical Abuse	1	0.36%
Support Needs (Including Equipment, Benefits, Social Care)	1	0.36%
Waiting Times for Treatment	10	3.56%
Grand Total	281	100.00%

The main theme of complaints received during 2023/24 was care and treatment with 47.69% an increase from 43.33% the previous year. Communication (11.39%) and attitude of staff (13.88%) remain the other 2 areas with the highest number of Formal Complaints, and these remain the top 3 themes for Formal Complaints year on year.

Complaints received in relation to care and treatment are wide ranging and focus very much on individual circumstances and therefore it has not been possible to pick up themes or areas for specific action by services in relation to these.

The following tables show a breakdown for 2023/24 of the Formal Complaints that have been received and where the service is based.

2.2 Mental Health service complaints

Table 3: Mental Health Service complaints

Service	Number of Complaints
SUN	1
A Place of Safety	4
Adult Acute Admissions - Bluebell Ward	7
Adult Acute Admissions - Daisy Ward	5
Adult Acute Admissions - Rose Ward	2
Adult Acute Admissions - Snowdrop Ward	9
CMHT/Care Pathways	49
CMHTOA/COAMHS - Older Adults Community Mental Health Team	4
Common Point of Entry	4
Crisis Resolution and Home Treatment Team (CRHTT)	26
Early Intervention in Psychosis - (EIP)	2
IMPACTT	3
IPS - Individual Placement support	2
Mental Health Act Department	1
Mental Health Integrated Community Service	1
Neuropsychology	4
Older Adults Inpatient Service - Rowan Ward	1
Other	3
Out of Area Placements	2
PICU - Psychiatric Intensive Care - Sorrel Ward	1
Psychological Medicine Service	5
Talking Therapies - Practical Support Services	2
Talking Therapies - PWP Team	3
Grand Total	141

2.2.1 Mental Health Complaints by service

The adult mental health services receiving higher numbers of Formal Complaints in 2023/24 are detailed further below.

Community Mental Health teams (CMHT)

Table 4: CMHT complaints

Main subject of complaint	Geographical Locality						Grand Total
	Bracknell	Reading	Slough	West Berks	Windsor, Ascot, and Maidenhead	Wokingham	
Access to Services					3		3
Attitude of Staff	1						1
Care and Treatment	6	4	4	10	2	5	31
Communication	2			1	3		6
Confidentiality	1				1		2
Discharge Arrangements	1						1
Medical Records				1			1
Medication		1				2	3
Waiting Times for Treatment		1					1
Grand Total	11	6	4	12	9	7	49

Adult mental health inpatients

Table 5: Adult mental health inpatient ward complaints

Main subject of complaint	Ward					Grand Total
	Bluebell Ward	Daisy Ward	Rose Ward	Snowdrop Ward	PICU - Sorrel Ward	
Abuse, Bullying, Physical, Sexual, Verbal	1					1
Attitude of Staff	1		1	1		3
Care and Treatment	4	1	1	6	1	13
Communication	1					1
Discharge Arrangements		2		1		3
Other		1				1
Patients Property and Valuables				1		1
Physical Abuse		1				1
Grand Total	7	5	2	9	1	24

Sorrel ward received 1 Formal Complaint compared to 7 for both previous 2 years.

Bluebell Ward and Snowdrop Ward received the highest number of Formal Complaints, however there were no specific themes for these.

CRHTT

Table 6 below demonstrates that there has been a sustained increase in the number of Formal Complaints received about CRHTT to 26; an increase from 22 in 2022/23, 15 in 2021/22 and compared with 13 in 2020/21.

Table: 6 CRHTT complaints

Main subject of complaint	Geographical Locality					Grand Total
	Bracknell	Reading	Slough	West Berks	Windsor, Ascot, and Maidenhead	
Attitude of staff	1	3	1		2	7
Care and Treatment	3	3	2		1	9
Communication			1		1	2
Confidentiality	2					2
Discrimination, Cultural Issues			2			2
Inaccurate Records	1					1
Medical Records		2				2
Medication				1		1
Grand Total	7	8	6	1	4	26

2.3 Community Health Service Complaints

Community Health Service complaints accounted for 27% of Formal Complaints compared with 16% 2022/23, 29% in 2021/22 and 24% in 2020/21.

There were no themes with complaints raised around specifics of care delivery and patient's individual circumstances.

Table 7: Community Health Service Complaints

Service	Geographical Locality						Grand Total
	Bracknell	Reading	Slough	West Berks	Windsor, Ascot, and Maidenhead	Wokingham	
Assessment and Rehabilitation Centre (ARC)			2				2
Community Dental Services		2	3				5
Community Dietetics				1			1
Community Geriatrician Service				1			1
Community Hospital Inpatient Service - Ascot Ward						1	1
Community Hospital Inpatient Service - Donnington Ward				1			1
Community Hospital Inpatient Service - Henry Tudor Ward					6		6
Community Hospital Inpatient Service - Jubilee Ward			1		1		2
Community Hospital Inpatient Service - Windsor Ward						2	2
Continence					1		1
District Nursing	1	3	2	2	1	7	16
Hearing and Balance Services	1				1		2
Integrated Pain and Spinal Service - IPASS						1	1
Intermediate Care		1		1			2
Lower Limb Clinic						1	1
Out of Hours GP Services		11		3			14
Phlebotomy				3			3
Physiotherapy Musculoskeletal		1	1		1		3
Podiatry	1	2			1		4
Sexual Health			2				2
Urgent Treatment Centre				5			5
Grand Total	3	20	11	17	12	12	75

2.3.1 Community Health Complaints by service

The top 3 community services receiving Formal Complaints in 2023/24 are detailed further below.

Community Nursing

As detailed in Table 8; 11 of the 18 complaints were regarding care and treatment, a review of these has not identified any themes. There were 38 complaints Community Nursing in 2022/23 and the decrease is reflected of the ongoing work underway within the Division.

Table 8: Community Nursing Service complaints

Main subject of complaint	Geographical Locality						Grand Total
	Bracknell	Reading	Slough	West Berks	Windsor, Ascot, and Maidenhead	Wokingham	
Attitude of Staff	1		1	1			3
Care and Treatment		4		1	1	5	11
Confidentiality				1			1
Discharge Arrangements						1	1
Medication			1			1	2
Grand Total	1	4	2	3	1	7	18

Community Health Inpatient Wards

Table 9: Community Health Inpatient Ward Complaints

Main subject of complaint	Ward					Grand Total
	Ascot Ward	Donnington Ward	Henry Tudor Ward	Jubilee Ward	Windsor Ward	
Attitude of Staff			2			2
Care and Treatment	1		1	1	1	4
Clinical Care Received			1			1
Confidentiality					1	1
Discharge Arrangements		1	1	1		3
Patients Property and Valuables			1			1
Grand Total	1	1	6	2	2	12

There has been targeted work to reduce complaints on the wards, particularly on Oakwood Ward which has previously had a higher number of complaints and received none over the past year.

WestCall Out of Hours GP Service

As shown in the table below, WestCall received 14 Formal Complaints compared with 4 during 2022/23, 9 in 2021/22 and 8 in 2020/21. Most of the complaints were about care and treatment, and the Urgent Care Medical Director and Senior Leadership Team are actively engaging with the operational staff to address this.

Table 10: WestCall Out of Hours GP Service complaints

Main subject of complaint	Geographical Locality		Grand Total
	Reading	West Berks	
Access to Services	1	1	2
Attitude of Staff	2		2
Care and Treatment	6	2	8
Discrimination, Cultural Issues	1		1
Medical Records	1		1
Grand Total	11	3	14

2.4 Children, Young People and Families

Table 11: Children, Young People and Family Service Complaints

Service	Geographical Locality						Grand Total
	Bracknell	Reading	Slough	West Berks	Windsor, Ascot, and Maidenhead	Wokingham	
CAMHS - AAT			1	1		2	4
CAMHS - ADHD	2	6	1	1			10
CAMHS - Anxiety and Depression Pathway		2				1	3
CAMHS - Common Point of Entry (Children)		2				1	3
CAMHS - Getting Help East				1			1
CAMHS - Learning Disabilities					1		1
CAMHS - Rapid Response	1				1		2
CAMHS - Specialist Community Teams	2	2	1		3	2	10
Children's Occupational Therapy - CYPIT	2		1			1	4

Children's Speech and Language Therapy - CYPIT	3					1	4
Community Paediatrics			1				1
Eating Disorders Service				1			1
Health Visiting		1		1		1	3
Immunisation		1				2	3
Keyworking Team				1			1
Learning Disability Service Inpatients - Campion Unit - Ward		1					1
Neurodevelopmental Services		1					1
Perinatal Mental Health						1	1
Phoenix						1	1
School Nursing		1					1
Grand Total	10	17	5	6	5	13	56

Table 12: CAMHS Complaints

Service	Main subject of complaint							Grand Total
	Access to Services	Attitude of Staff	Care and Treatment	Communication	Medical Records	Medication	Waiting Times for Treatment	
CAMHS - AAT	1	1					2	4
CAMHS - ADHD			3	1	1	3	2	10
CAMHS - Anxiety and Depression Pathway			3					3
CAMHS - Common Point of Entry (Children)	1						2	3
CAMHS - Getting Help East			1					1
CAMHS - Learning Disabilities			1					1
CAMHS - Rapid Response			1	1				2
CAMHS - Specialist Community Teams			8	1			1	10
Keyworking Team			1					1
Phoenix			1					1
Grand Total	2	1	19	3	1	3	7	36

There was 1 Formal Complaint about the attitude of staff in compared to 3 last year and 5 the year before. Complaints about waiting times have also decreased.

3. Complaints closed – activity

As part of the process of closing a Formal Complaint, a decision is made around whether the complaint is found to have been upheld, or well-founded (referred to as an outcome). The table below shows the outcome of complaints.

Table 13: Outcome of closed Formal Complaints

Outcome	2022/23						2023/24					
	Q1	Q2	Q3	Q4	Total	% of 22/23	Q1	Q2	Q3	Q4	Total	% of 23/24
Locally resolved/not pursued	0	0	0	0	0	0	0	4	1	3	8	3.11
Not Upheld	23	22	23	38	106	43%	20	25	30	25	100	38.91
Partially Upheld	21	30	26	25	102	41%	22	26	24	32	104	40.47
Upheld	12	9	7	8	36	15%	11	9	12	9	41	15.95
SUI	0	0	0	0	3	1%	0	0	2	2	4	1.56
Grand Total	57	61	57	72	247		53	64	69	71	257	

Complaints can cover several services and issues which are investigated as individual points which contributes towards higher partially upheld outcomes.

Table 14: Outcome of closed Formal Complaints by main subject

Main subject of complaint	Outcome of complaint							Grand Total
	Not Upheld	Partially Upheld	Upheld	Local Resolution	Serious Untoward Incident Investigation	Case not pursued by complainant	No Further Action	
Abuse, Bullying, Physical, Sexual, Verbal		3						3
Access to Services	5	3	2					10
Attitude of Staff	14	14	8			1		37
Care and Treatment	43	52	12	3	2	1		113
Communication	18	8	6	2				34
Confidentiality	4	1	5					10
Discharge Arrangements	1	3						4
Discrimination, Cultural Issues		4	1					5

Management and Administration	1							1
Medical Records	1	4	3				1	9
Medication	5	4	2		2			13
Other	4							4
Patients Property and Valuables	1							1
Waiting Times for Treatment	3	7	2					12
Support Needs (Including Equipment, Benefits, Social Care)		1						1
Grand Total	100	104	41	5	4	2	1	257

Table 14: Outcome of closed Formal Complaints by main subject and percentage

Main subject of Complaint	Outcome of Complaint							Grand Total
	Not Upheld	Partially Upheld	Upheld	Local Resolution	Serious Untoward Incident Investigation	Case not pursued by complainant	No Further Action	
Abuse, Bullying, Physical, Sexual, Verbal	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Access to Services	50.00%	30.00%	20.00%	0.00%	0.00%	0.00%	0.00%	100%
Attitude of Staff	37.84%	37.84%	21.62%	0.00%	0.00%	2.70%	0.00%	100%
Care and Treatment	38.05%	46.02%	10.62%	2.65%	1.77%	0.88%	0.00%	100%
Communication	52.94%	23.53%	17.65%	5.88%	0.00%	0.00%	0.00%	100%
Confidentiality	40.00%	10.00%	50.00%	0.00%	0.00%	0.00%	0.00%	100%
Discharge Arrangements	25.00%	75.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Discrimination, Cultural Issues	0.00%	80.00%	20.00%	0.00%	0.00%	0.00%	0.00%	100%
Management and Administration	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Medical Records	11.11%	44.44%	33.33%	0.00%	0.00%	0.00%	11.11%	100%
Medication	38.46%	30.77%	15.38%	0.00%	15.38%	0.00%	0.00%	100%
Other	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Patients Property and Valuables	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Waiting Times for Treatment	25.00%	58.33%	16.67%	0.00%	0.00%	0.00%	0.00%	100%
Support Needs (Including Equipment, Benefits, Social Care)	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100%
Grand Total	38.91%	40.47%	15.95%	1.95%	1.56%	0.78%	0.39%	100%

Weekly open complaints situation reports (SITREP) sent to Clinical Directors, as well as on-going communication with the Complaints Office throughout the span of open complaints to keep them on track as much as possible.

Table 15 – Response rate within timescale agreed with the complainant.

2020/21				2021/22				2022/23				2023/24			
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
100	99	100	100	100	100	100	100	95	100	100	100	100	100	100	100

4. Complaints as a mechanism for change – learning

The Divisions monitor the outcomes and learning from complaints within their Patient Safety and Quality Meetings. A Patient Safety, Experience and Learning Group takes place on a weekly basis, and further learning is shared and disseminated in a Trust wide newsletter called Circulation.

5. Parliamentary and Health Service Ombudsman

The Parliamentary and Health Service Ombudsman (PHSO) are independent of the NHS and facilitate the second stage of the complaints process. The table below shows Trust activity with the PHSO.

Table 16: PHSO activity

Month opened	Service	Month closed	Current stage
Apr-23	CMHT/Care Pathways	Sep-23	LGO not progressing, but now with PHSO to consider
Jul-23	CMHT/Care Pathways	Awaiting update	File sent to PHSO on to aid their decision on whether to investigate
Jul-23	CAMHS – Specialist Community Team	Sep-23	PHSO have reviewed file and are not progressing
Sep-23	CRHTT	Awaiting update	File sent to PHSO on to aid their decision on whether to investigate
Sep-23	CAMHS	Awaiting update	File sent to PHSO on to aid their decision on whether to investigate
Nov-23	Neurodevelopmental services	Awaiting update	File sent to PHSO on to aid their decision on whether to investigate
Dec-23	Heart Function	Awaiting update	File sent to PHSO on to aid their decision on whether to investigate
Feb-24	CAMHS - Specialist Community Team	Ongoing	Complaint referred to PHSO
Feb-24	CAMHS - Specialist Community Team	Ongoing	Confirmed we will enter into Dispute Resolution process; awaiting update.

6. Multi-agency working

In addition to the complaints detailed in the report, the Trust monitors the number of multi-agency complaints they contribute to but are not the lead organisation (such as NHS England and Acute Trusts).

There were 3 multi-agency complaints responded to in 2023/24, which is a significant decrease from 14 in 2022/23 and 27 in 2021/22. Two of these were about our physical health services and the other about mental health services.

Table 17: Formal Complaints led by other organisations

Lead organisation	2021/22	2022/23	2023/24
Berk West CCG/ICB	1	1	1
CCG - Frimley/ICB	2	0	1
EBPCC OOH	1	0	
Frimley health	2	0	
GP	1	0	
Local Authority	1	1	
NHSE	4	1	
RBH	3	3	1
SCAS	10	8	
Wexham Park	2	0	
Grand Total	27	14	3

7. Complaints training

Our complaint handling and response writing training available to staff continues to be delivered online over MS Teams and takes place on a regular basis (with a waiting list) across the different Divisions, in addition to bespoke, tailored training for specific teams which has taken place to staff groups and teams.

8. Mortality Review Group

Our complaints process works alongside our Serious Incidents processes and Mortality Review Group (linking in as part of the Patient Safety Incident Response Framework; PSIRF) having a direct link to ensure that any complaint involving a patient death is reviewed. Weekly and monthly meetings with the Patient Safety Team take place to ensure that we are working effectively and identifying any themes or emerging patterns.

The Trust Mortality Review Group (TMRG) met monthly, and the Complaints Office provides information into this group. There were 16 Formal Complaints forwarded to the MRG this year, compared with 22 in 2022/23, 14 in 2021/22 and 18 in 2020/21.

From January 2024 in line with our meeting restructure to support the new Patient Safety Incident Response Framework the meeting now covers mortality and patient safety as is known as the mortality and patient safety Learning Group.

The Medical Director is also sent a copy of complaint responses involving a death before they are signed by the Chief Executive.

Table 18: Complaints forwarded to TMRG

Service	Number of complaints
CAMHS - Rapid Response	1
CMHT/Care Pathways	1
Common Point of Entry	1
Community Hospital Inpatient Service - Ascot Ward	1
Community Hospital Inpatient Service - Henry Tudor Ward	2
Crisis Resolution and Home Treatment Team (CRHTT)	2
District Nursing	2
Estates	2
Intermediate Care	1
Out of Area Placements	1
Out of Hours GP Services	1
Talking Therapies - PWP Team	1
Grand Total	16