

Persona Annual Complaints Report 2018/2019

1.0 Purpose and Introduction

- 1.1 Persona Care & Support Ltd is responsible for reviewing all complaints and analysing the contents in order to provide service improvements in regard to quality assurance, policies and procedures, staff training etc. and feedback is shared anonymously through Persona's Quality Assurance Committee.
- 1.2 This report relates to the period 01 April 2018 to 31 March 2019, and provides information as set out in our Complaints Policy and Procedure (Section 14: Annual Reports) and provides comparisons between the different services within Persona year on year, as well as detailing the nature of some of the complaints received, along with any lessons learned that have been identified.

2.0 Background

- 2.1 The complaints in this report typically relate to issues where customers, their families or representatives feel that the service they have received has not met their expectations. Persona Care & Support Ltd always endeavour to resolve any concerns or dissatisfaction before a formal complaint has been received. Therefore, formal complaints usually arise when the customer, family or representative does not agree with our interpretation of events.
- 2.2 We value customer's feedback and every concern or complaint (defined as an expression of dissatisfaction or poor experience about the actions, decisions or apparent failing of any service) are seen as an opportunity to improve the quality of our care and services.
- 2.3 Persona Care & Support Ltd uses the Care Quality Commission's (CQC) Key Line of Enquiry (KLOE's) as its baseline standard for all its services to achieve service compliance and deal with complaints accordingly.
- 2.4 Persona Care & Support Ltd endeavours to resolve all complaints with an informal approach (discussions and meetings) in the first instance, however, should this approach be unsuccessful either party may initiate the formal Complaints Procedure Process Stages 2-5 (see below).

<p>Stage 1: Informal Response</p>	<ul style="list-style-type: none"> • Upon receipt of a complaint, this will initially be referred to the manager of the service to make a courtesy call to the complainant and complete own internal investigations
<p>Stage 2: Management Response</p>	<ul style="list-style-type: none"> • Unsuccessful response at Stage 1 • Delegated to a Senior Manager for further investigation
<p>Stage 3: Directors Response</p>	<ul style="list-style-type: none"> • Unsuccessful response at Stage 2 • Management responses to be considered and will be reviewed by Operations Director and/or Persona Leadership Team
<p>Stage 4: Referral to Commissioner</p>	<ul style="list-style-type: none"> • Unsuccessful response at Stage 3 • Complaint referred to the commissioner under Bury Council - DCW complaints policy and procedure - 0161 253 5151 or adultcareservices@bury.gov.uk
<p>Stage 5: Referral to LGO</p>	<ul style="list-style-type: none"> • Unsuccessful response at Stage 4 • Referral to the Local Government Ombudsman (LGO) will remain as always the last resort for any complaints and will be co-ordinated through Head Office

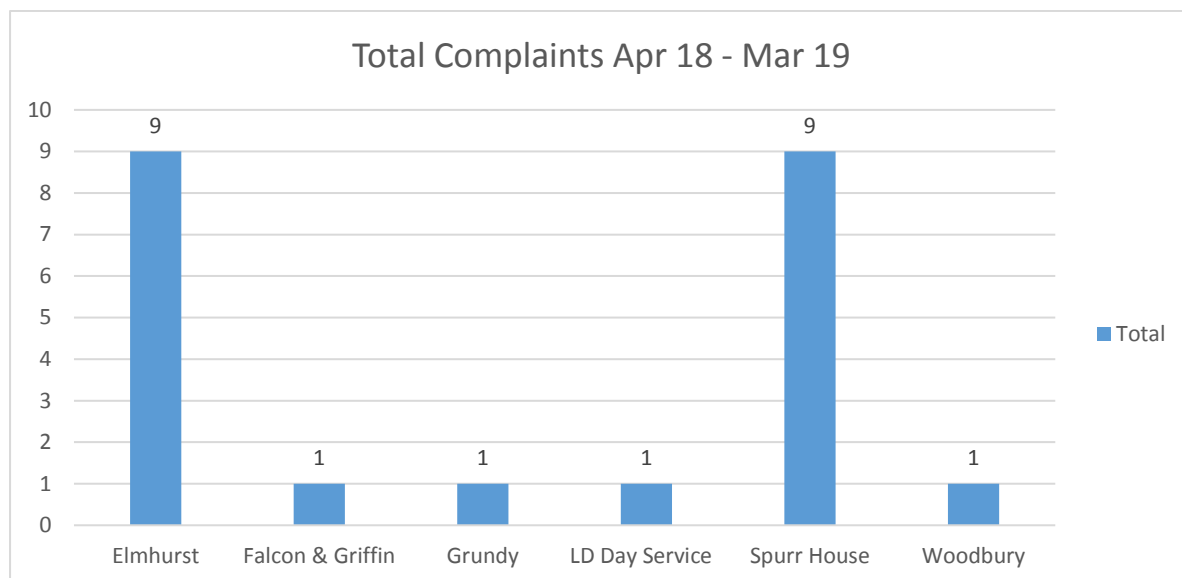
2.5 The Complaint Procedure is not intended for dealing with allegations of misconduct by staff. This is dealt with under our HR Disciplinary Policies and Procedures.

3.0 Data Analysis

Complaints

- 3.1 This is the first year Persona Care & Support has compiled an Annual Complaints Report so comparisons to other years information/data is limited but we can build on this data analysis moving forward.
- 3.2 The total number of complaints for 2018/2019 was 22, with Short Stay Services (Elmhurst and Spurr House) both receiving 9 complaints each and the other services one each (see Figure 1 below). Although the number of complaints for Short Stay Services (Elmhurst and Spurr House) were the same, Elmhurst had a larger number of customer stays during this period so the percentage of complaints per customer stays is lower than Spurr House (*see table below for comparison numbers).

Figure 1: Number of Complaints received for the period 2018/2019



Service	Number of Complaints 2018/2019	Individual Stays or Unique Customers	Number of complaints as a percentage of total number of stays/unique customers
Elmhurst	9	339	2.65%
Spurr House	9	239	3.77%
Grundy	1	165	0.61%
LD Day Services	1	169	0.59%
Woodbury	1	152	0.66%
Falcon & Griffin	1	N/A	N/A

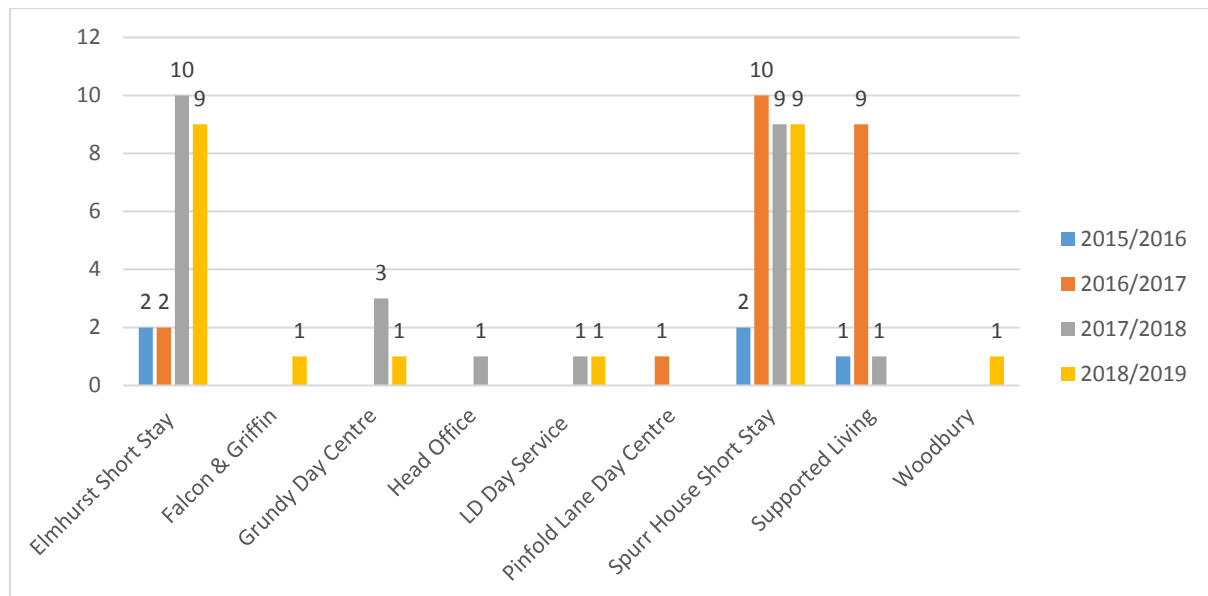
3 complaints in 2018/2019 related to previous complaints made (2 for Elmhurst and 1 for Spurr House and 1 of those also being in the same period (Spurr House). This has highlighted that we need to pay more care and attention in responding to complaints in future to make sure we get it right first time.

3.3 The year on year comparison (see table below) shows a slight reduction in the total number of complaints and by service (see Figure 1a). The total for 2015/2016 is low because it is a shorter period (Oct 15 – Mar 16), which is when Persona was started.

Year	Total
2015/2016*	5
2016/2017	22
2017/2018	25
2018/2019	22

*2015/2016 only half a year's data as Persona only formed in October 2015

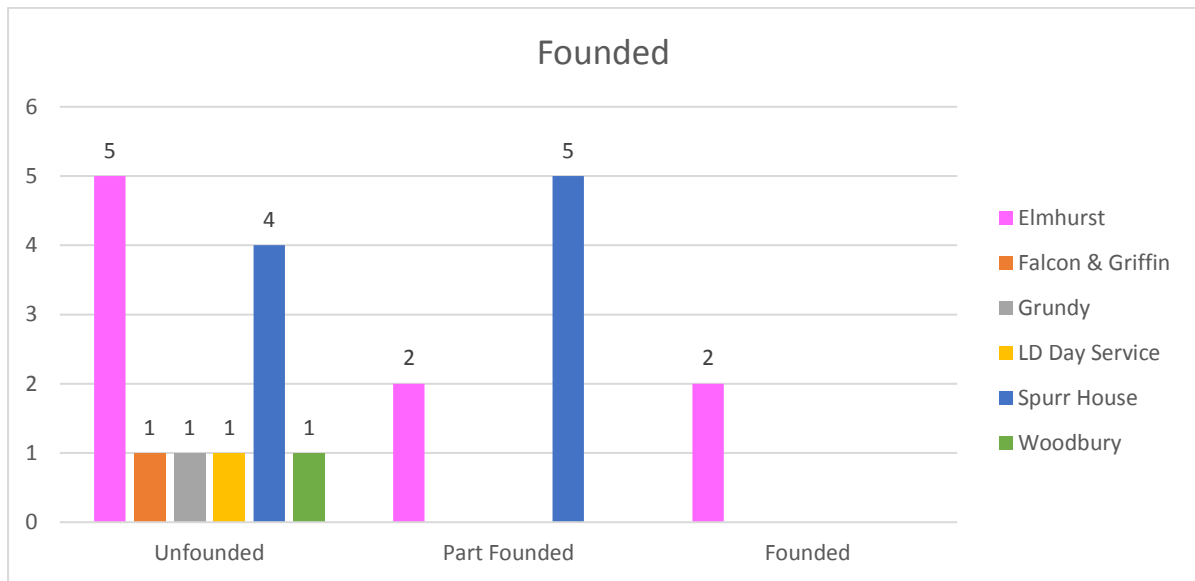
Figure 1a: Totals comparison year on year



3.4 The number of founded, part founded and unfounded complaints (see Figure 2 below) shows only the number of complaints where we worked with others to resolve and that despite complaints being received, Persona Care & Support Ltd have been able to evidence and explain outcomes to customers and whilst also addressing lessons learned. The table below shows which other bodies we also worked with to conclude these complaints.

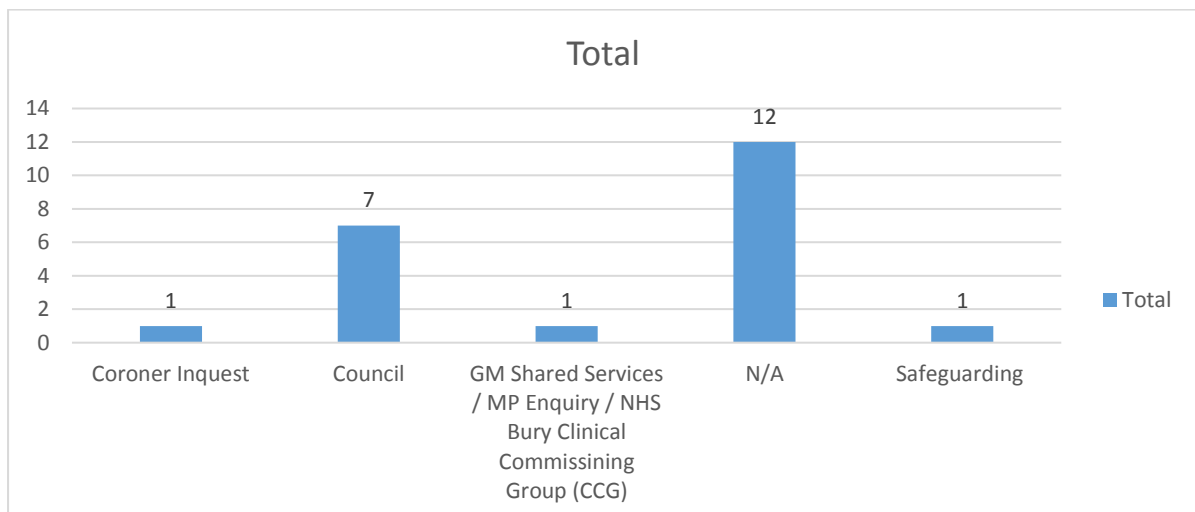
External Bodies Involved	Founded	Part Founded	Unfounded
Coroners Court	1		
Bury Council		2	5
GM Shared Services			1
Safeguarding			1

Figure 2: Founded, Part Founded & Unfounded Complaints 2018/2019



3.5 Complaints referred to other bodies for investigation (see Figure 3 below) are where Persona Care & Support Ltd have worked with other organisations to conclude complaints (also noted in section 3.3).

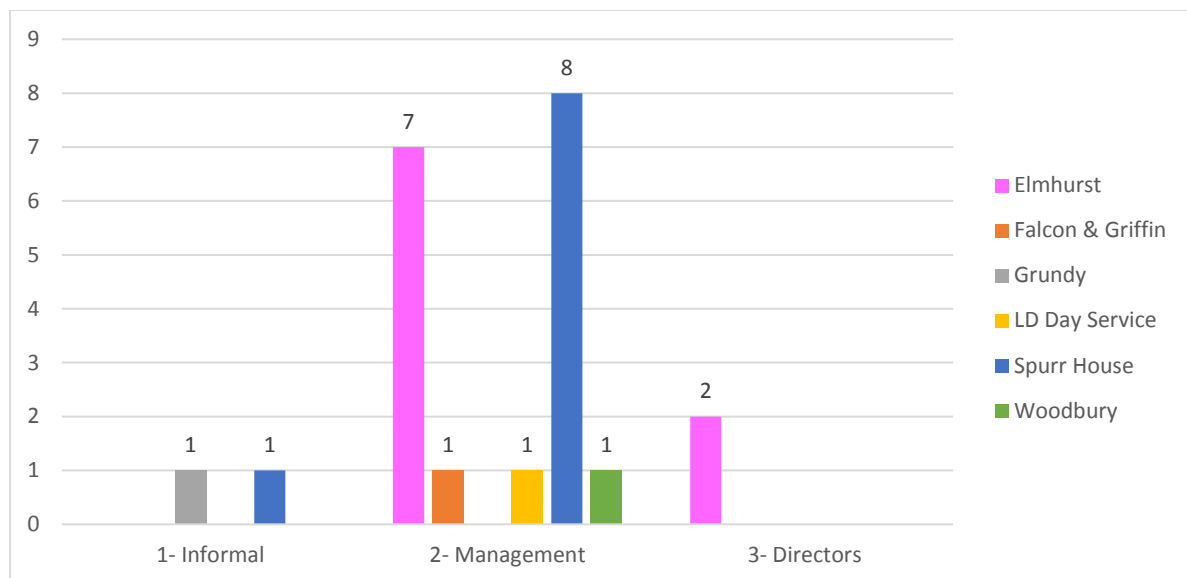
Figure 3: Complaints referred to other bodies 2018/2019



3.6 4 Complaints were led and responded back to the customer by Bury Council (2 each for Elmhurst & Spurr House) and 1 Complaint was led and responded back to the customer by GM Shared Services (Patient Services Team) for Spurr House.

3.7 Stages of the 22 complaints as explained in Section 2 Background (sub-section 2.4): There were 2 resolved informally direct by the services, 18 were resolved by a management response and 2 were escalated to Directors Responses (breakdown by service in Figure 4 below).

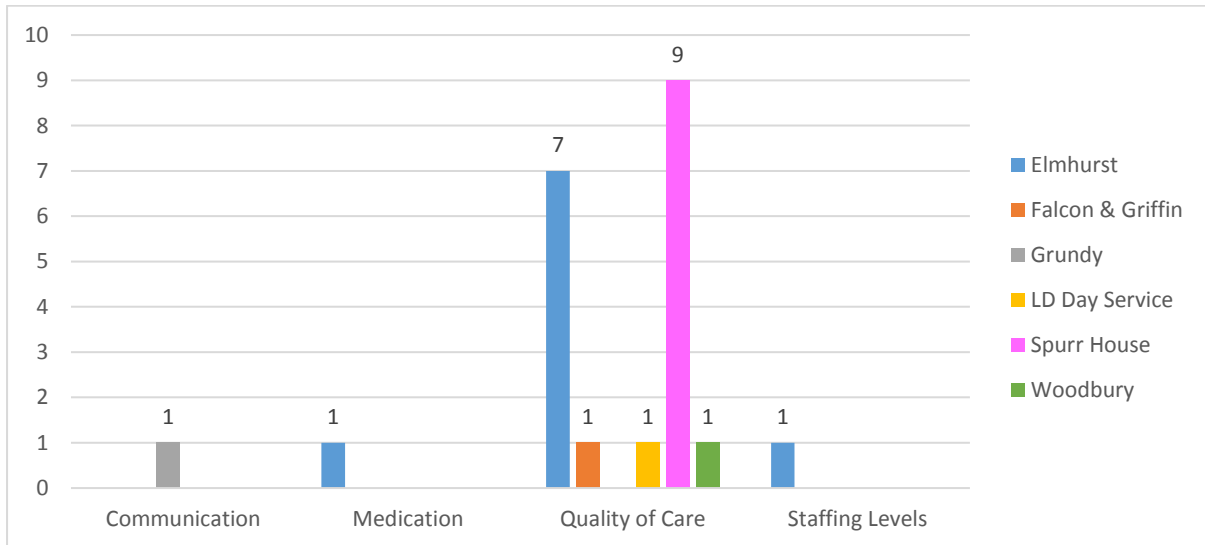
Figure 4: Stages of Response 2018/2019



3.8 Themes and patterns of the 22 complaints received: 19 were in relation to the customer's expectation of the quality of care given by staff (see Figure 5 below), however, following investigations 11 of the 19 were unfounded and 7 part founded (see table below).

Theme	Founded	Part Founded	Unfounded
Communication	1		
Medication	1		
Quality of Care	1	7	11
Staffing Levels	1		

Figure 5: Themes and Patterns 2018/2019



3.9 In order to continually improve our services and quality of care to our customers it is vital that we capture any lessons learned from complaints and some of the actions we have taken from these complaints are summarised below.

- Improve record keeping and documentation
- Daily walkabouts introduced in some services to check and improve on the cleanliness of the buildings
- Make sure sufficient stocks of pendants are kept on scheme (Short Stay services only)
- Increase supply of bedding to make allowances for delays in laundry turnaround or during times of high volume turnarounds (Short Stay services only)
- Programme of maintenance works ongoing in the buildings
- Medication Policy reviewed and associated documentation updated
- Admission and discharge procedure being reviewed and updated

Compliments

3.10 In addition to complaints received, Persona Care & Support Ltd also records the number of compliments received (see Figure 6 below).

3.11 The year on year comparison shows a slight reduction in the total number of compliments as per the table below and by service (see Figure 6a below) with most services having a small reduction, with the exception of LD Day Service and Spurr House who have increased the number of compliments this year. Also the figures for 2015/2016 are low because Persona Care & Support Ltd was only formed in October 2015.

Year	Total
2015/2016*	29
2016/2017	132
2017/2018	135
2018/2019	128

*2015/2016 only half a year's data as Persona only formed in October 2015

Figure 6: The number of compliments received for period 2018/2019

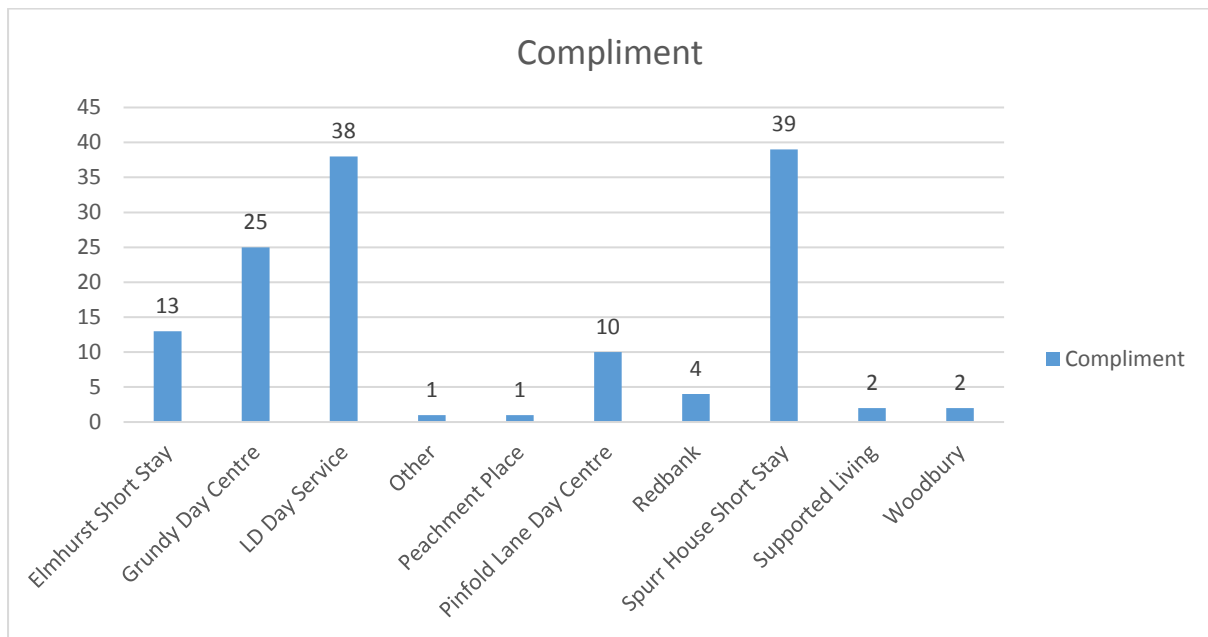
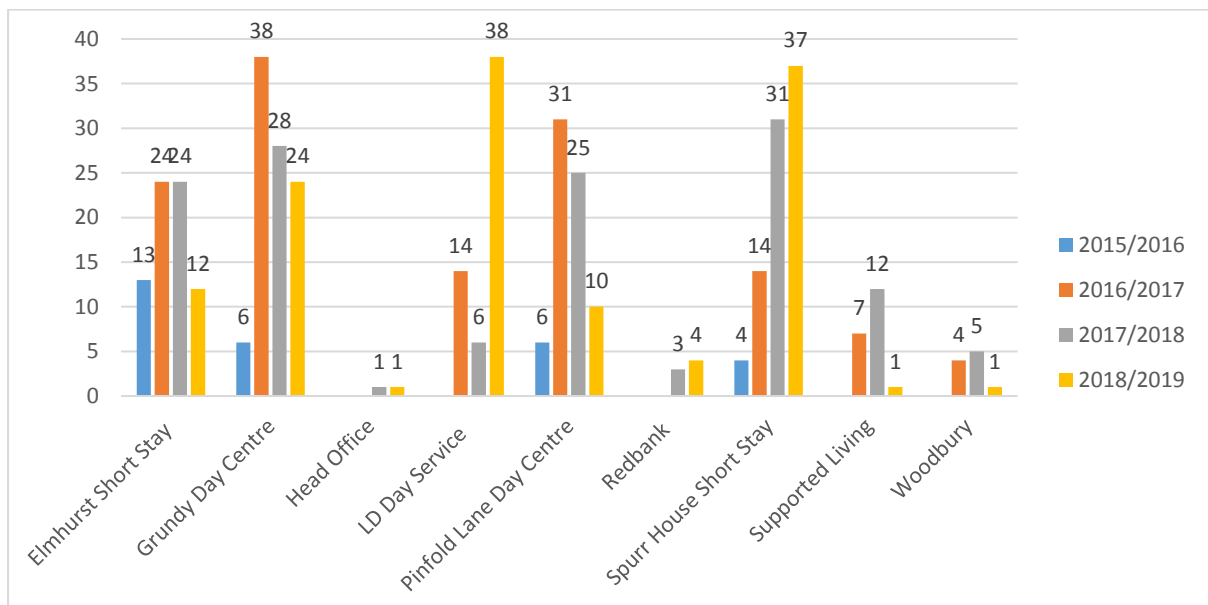


Figure 6a: Number of compliments received year on year by service



3.12 The table below shows the further breakdown of the number of compliments received into each service year on year. There is an inconsistent approach from services sending in compliments for recording. The figures for 2015/2016 are low because Persona Care & Support Ltd was only formed in October 2015.

Service	2015/2016*	2016/2017	2017/2018	2018/2019
Elmhurst Short Stay	13	24	12	12
Grundy Day Centre	6	38	28	24
Head Office			1	1
LD Day Services		14	6	38
Pinfold Day Centre	6	31	25	10
Redbank			3	4
Spurr House Short Stay	4	14	31	37
Supported Living		7	12	1
Woodbury		4	5	1

*2015/2016 only half a year's data as Persona only formed in October 2015

3.13 The table below shows the number of compliments in 2018/2019 and the percentage of compliments based on the number of individual stays (*short stay services only) or number of unique customers for all other services.

Service	No. Compliments	Individual Stays or Unique Customers	%
Elmhurst Short Stay*	12	339	3.54%
Grundy Day Centre	24	165	14.55%
Head Office	1	N/A	N/A
LD Day Services	38	169	22.49%
Pinfold Day Centre	10	65	15.38%
Redbank	4	45	8.89%
Spurr House Short Stay*	37	239	15.48%
Supported Living	1	115	0.87%
Woodbury*	1	152	0.66%

*2015/2016 only half a year's data as Persona only formed in October 2015