

HEALTH NEWS BRIEFING

**An analysis of the
complaints work
of CHCs**

September 1996

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1. Introduction

CHCs and complaints

Although it has never been their formal statutory responsibility, CHCs have for more than two decades provided invaluable help and support to members of the public who have had reason to complain about NHS care or treatment. They are in the unique position of having detailed knowledge and experience of local health service structures, and yet are fully independent of the NHS.

CHCs' involvement in complaints work is time-consuming and often complex; research has shown that in most CHCs, Chief Officers spend more than half their time dealing with complaints-related workⁱ. Although the "important role" of CHCs in respect of complaints has been acknowledged by the NHS Executiveⁱⁱ, they still do not receive specific funding for carrying out this work. This situation has exacerbated the intense pressures of work experienced by Community Health Councils throughout the country.

The complaints database

In July 1994, ACHCEW arranged for all of its member CHCs to receive the necessary computer software for a "complaints database". The database, which was designed in conjunction with a steering group of CHC officers, was primarily intended to assist CHCs with the day-to-day management of their increasing complaints workload and to enable regular monitoring reports to be produced automatically.

An additional benefit of the database is that it has standardised the way in which CHCs record complaints statistics and enabled comparisons to be made on a national basis. For the first time since the inception of CHCs, it is now possible to produce a detailed analysis of NHS complaints, based on a representative sample of complaints handled by CHCs throughout England and Wales.

The number of complaints handled during 1995

The analysis which follows is based on the computerised annual complaints reports of **89** Community Health Councils (43%), which represents a total number of **7,916** complaints handled by those CHCs during 1995ⁱⁱⁱ. Although it is not possible to extrapolate this figure accurately, it could be broadly estimated that the number of complaints handled by all CHCs throughout England and Wales in 1995, was around 20,000.

The computerised reports have enabled ACHCEW to look at the details of 9,434 incidents which led to those complaints being made; and 21,343 formally recorded actions taken by CHCs to help individual complainants.

2. Characteristics of those making complaints

Gender of complainants

A substantially greater proportion of all complainants are female...

Where the individual is making a complaint about their own care or treatment:

(n=4198)

Female	2622 (63%)
Male	1502 (36%)
Not specified	74 (2%)

Where someone has made a complaint on behalf of the individual:

(n=3699)

Female	1856 (50%)
Male	1529 (41%)
Not specified	314 (9%)

Age of complainants

The number of complaints made by or on behalf of those aged 55 and over is disproportionately high when compared to the population profile. However, this is largely accounted for by the comparatively high level of contact with the health service within this group.

Where the individual is making a complaint about their own care or treatment:

(n=1143)

Under 17	18 (2%)
18 to 34	309 (27%)
35 to 54	398 (35%)
55 and over	418 (37%)

Where someone has made a complaint on behalf of the individual:

(n=1569)

Under 17	511 (33%)
18 to 34	191 (12%)
35 to 54	155 (10%)
55 and over	712 (45%)

Disability

Even considering the fact that information on disability was not collected in many cases, the proportion of complainants recorded as having a disability is extremely high. It is difficult to ascertain whether complainants' disabilities had any bearing on the complaints themselves (eg difficulties in gaining access to

appropriate services) and this would suggest the need for further research in this area.

Where the individual is making a complaint about their own care or treatment:

(n = 4200)

No info/not specified	2674 (64%)
Not disabled	1182 (28%)
Disabled	344 (8%)

Where someone has made a complaint on behalf of the individual:

(n = 3699)

No info/not specified	2494 (67%)
Not disabled	747 (20%)
Disabled	458 (12%)

Ethnicity

Overall, there is a relatively high proportion of non-white complainants seen by CHCs. This may be influenced by the positive publicity initiatives undertaken by some CHCs and, in some cases, by the availability of multilingual information on patients rights.

(n=7888)

Not Specified/No information = 5346 (excluded for percentages)

		<i>1991 Census figures</i>
White	2330 (91.7%)	(94.1%)
Non white	212 (8.3%)	(5.9%)

Breakdown of the non-white population

Black Caribbean	35 (16.5%)	(16.9%)
Black African	12 (5.7%)	(7.1%)
Black Other	24 (11.3%)	(6.0%)
Indian	12 (5.7%)	(28.1%)
Pakistani	23 (10.9%)	(15.4%)
Bangladeshi	2 (0.9%)	(5.5%)
Chinese	6 (2.8%)	(5.0%)
Asian Other	36 (17.0%)	(6.5%)
Other	62 (29.2%)	(9.5%)

Where the individual is making a complaint about their own care or treatment:

(n=4194)

Not Specified/No information = 2775 (excluded for percentages)

White	1293	(91.1%)
Black Caribbean	17	(1.2%)
Black African	12	(0.9%)
Black Other	19	(1.3%)
Indian	7	(0.5%)
Pakistani	12	(0.9%)
Bangladeshi	1	(0.1%)
Chinese	3	(0.2%)
Asian Other	20	(1.4%)
Other	35	(2.5%)

Where someone has made a complaint on behalf of the individual:

(n=3694)

No information/Not Specified= 2571 (excluded for percentages)

White	1037	(92.3%)
Black Caribbean	18	(1.6%)
Black African	0	(-)
Black Other	5	(0.5%)
Indian	5	(0.5%)
Pakistani	11	(1.0%)
Bangladeshi	1	(0.1%)
Chinese	3	(0.3%)
Asian Other	16	(1.4%)
Other	27	(2.4%)

3. Who were the complaints made about?

Organisation type

Despite the fact that nine out of ten contacts with the NHS occur within the community, most complaints related to hospital care. CHCs dealt with more complaints about hospital consultants than complaints about GPs.

(n=9191, based on individual incidents)

Provider	5772	(63%)
Family Health Services	2599	(28%)
Purchaser	188	(2%)
Ambulance Services	112	(1%)
Other	218	(2%)
Not Specified	302	(3%)

Respondent's professional Group

Hospital complaints

(n=4238)

Consultant	1960	(46%)
Other hospital doctor	740	(18%)
Hospital nurse	516	(12%)
Hospital midwife	70	(2%)
Hospital professional/technical	98	(2%)
Hospital - Professions allied to medicine	156	(4%)
Hospital - admin/clerical	405	(10%)
Hospital - ancillary	11	(-)
Hospital - other	282	(7%)

Community health service complaints

(n = 349)

Community nurse	71	(20%)
Community midwife	21	(6%)
Community doctor/dentist	40	(12%)
Community - Profs. allied to medicine	56	(16%)
Community - admin/clerical	68	(20%)
Community - other	93	(27%)

Family health services

(n = 2376)

General medical services	1712	(72%)
General dental services	527	(22%)

General pharmaceutical services	64	(3%)
General ophthalmic services	38	(2%)
Administrative/clerical	35	(2%)

Purchasers

(n=141)

DHA	64	(45%)
FHSA	7	(5%)
GP Fundholder	10	(7%)
Health Commission	60	(43%)

Ambulance services

(n = 86)

Ambulance crew	40	(47%)
HQ/control staff	46	(53%)

4. What were the reasons for complaint?

A substantial minority of complaints related in some way to clinical issues and this seems to be an area which requires further exploration. However, communication is clearly still a major problem and it is disturbing to find that around one in ten complaints was brought about by problems with staff attitude.

Hospital and community services (66% of total)

(n=5472)

Inappropriate treatment/care	1693	(31%)
Diagnosis	676	(12%)
Staff attitude	478	(9%)
Lack of information	446	(8%)
Waiting lists	378	(7%)
Admin Procedures	298	(5%)
Discharge procedures	248	(5%)
Waiting times	210	(4%)
Poor access to services	186	(3%)
Cancelled appointments	134	(2%)
Premises/facilities	98	(2%)
Health records	86	(2%)
Privacy/dignity	66	(1%)
Hotel services	64	(1%)
Other	411	(8%)

Family Health Services (30% of total)

(n=2514)

Inappropriate treatment/care	680	(27%)
Diagnosis	366	(15%)
Staff attitude	288	(12%)
Referral	191	(8%)
Failure to visit	136	(5%)
Dispensing error/failure	107	(4%)
Admin Procedures	106	(4%)
Inappropriate charges	103	(4%)
Examination	83	(3%)
Lack of information	80	(3%)
Health records	74	(3%)
Poor access to services	68	(3%)
Waiting times	18	(1%)
Premises/facilities	13	(1%)
Privacy/dignity	10	(-)
Other	191	(8%)

Purchasing (2% of total)

(n = 184)

Purchasing decision	116	(63%)
Waiting lists	11	(6%)
Administration	10	(5%)
Handling of complaint	5	(3%)
Staff attitude	3	(2%)
Waiting times	3	(2%)
Other	36	(20%)

Ambulance services (1% of total)

(n = 102)

Waiting times	38	(37%)
Inappropriate treatment/care	21	(20%)
Staff attitude	13	(13%)
Equipment/facilities	12	(12%)
Lack of information	3	(3%)
Privacy/dignity	0	(0%)
Other	15	(15%)

5. The role of Community Health Councils

The way in which the database was used by some CHCs means that the total number of actions recorded is probably an under-representation of the amount of work actually carried out by CHCs on behalf of complainants.

Actions

Total no of actions 21343

Type of action

(n=16563)

Write a letter	8171 (49%)
Make a telephone call	3490 (21%)
Face-to-face interview	1746 (11%)
Reminder	1003 (6%)
Attend hearing/meeting	555 (3%)
Home visit	169 (1%)
Represent	163 (1%)
Other	1266 (8%)

Knowledge of the CHC

Most complainants find out about the services of the CHC through established and relatively formal mechanisms. Although the CHC's own publicity seems to be effective, very few complainants become aware of the CHC through the local press or other publicity.

(n=7459)

Not specified/No information= 4350 (excluded for percentages)

NHS	822 (26%)
Referral	698 (23%)
CHC's own publicity	520 (17%)
Friend/family	422 (14%)
Press/publicity	69 (2%)
Helpline/Charterline	66 (2%)
Directory	49 (2%)
Other	463 (15%)

Method of Receipt

It is interesting that at least one in five complainants make their first contact with the CHC by "dropping in" to the office. This seems to indicate a strong argument for the need for shop-front premises which are easily accessible.

(n=7864)	
Telephone	3647 (46%)
Letter/Fax	1675 (21%)
Personal Caller	1574 (20%)
Not specified	968 (12%)

Satisfaction with CHC help

Although only a minority of CHCs recorded the level of satisfaction, there seems to be little doubt from the figures which are available that the service is highly valued by complainants.

(n=7797)	
No comment	6201 (80%)
Satisfied	1478 (19%)
Mostly Satisfied	169 (2%)
Dissatisfied	49 (1%)

Nigel Ellis
September 1996

ⁱ ACHCEW NHS Complaints procedures - A submission to the Complaints Review Committee. (1993).

ⁱⁱ Most recently in the *Guidance on the implementation of the NHS complaints procedure*. NHS Executive (1996).

ⁱⁱⁱ In some cases, individual CHCs' statistics represent only part of the annual complaints workload - this is primarily where the complaints database was not used during the early parts of 1995.

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