

Annex C - Summary of community groups' reports on complaints and feedback systems

Background

In January 2017, Brighton and Hove CCG and Brighton and Hove City Council commissioned a number of community groups to gather feedback about the awareness of the organisations and protocols that are available to support residents in raising complaints and highlighting concerns about local health and social care services.

Detailed reports on the project were received from:

1. Brighton and Hove LGBT Switchboard [NHS Complaints, Concerns and Feedback Research Report](#)
2. Deaf Engagement Report - "NHS Feedback, Concerns and Complaints"
3. Trust for Developing Communities "NHS care: Feedback. Concerns and complaints - a consultation with BME Communities in Brighton and Hove"
4. Possibility People - "[NHS Feedback, Concerns and Complaints](#)"
5. MIND - "LiVE Project Service User Consultation - Giving Feedback or Making a Complaint about NHS Services LGBT Health and Inclusion Project"
6. Carers Centre Complaints - "Concerns and Feedback Consultation Report"

The reports covered a wide span of groups whose members were likely to contact health and social care services together with carers. There was no evidence that any members of the blind and partially sighted community had been included in the survey. Most of the results related to the health service with very little direct reference to social care. However the majority of the recommendations would be applicable to all providers.

The size of the groups and the number of participants varied widely. Most of them held a survey and a focus group to gather views. Brighton and Hove Speak Out used a set of guide questions as a framework to enable people to have an informal discussion of their first hand experiences.

Key findings

1. Understanding how to make a complaint
Some of the participants had no idea how to make a complaint. Others were worried that it would affect the quality of the care they received. Those who had raised a complaint had a variety of experiences, some good, others where they felt nobody listened.
2. Confidentiality
Confidentiality was a universal concern. Some felt that making a complaint would lead to a loss of confidentiality as so many people had to be involved. Others wanted the ability to make anonymous complaints, particularly about named members of staff. BME residents felt that if they complained all the members of their community would know about it.

3. Carers

Carers, particularly mental health carers have a perennial problem and suggested that all organisations should have clear protocols for confidentiality and consent issues.

Recommendations

The recommendations made by the various reports can be divided into the following:

Overall, there is considerable agreement in all the reports about what might be done to improve their experience and their ability to give both positive and negative feedback.

1. **Information-** how to give feedback easily, who and where to contact to raise a concern or complaint
 - They suggest it should be easier to give instant feedback, both positive and negative, as happens with most customer services.
 - Much more publicity inside health and social service buildings including GP surgeries about how to make a complaint.
 - Leaflets should be easily available, and provided in languages other than English. They should be 'easy read'.
 - Information should be made available in local newspapers and publications, including for specific groups such as South London Press for the black community
 - BSL interpreters and text messaging should be provided for the deaf community
2. **Complaints process** - how the process is supposed to work when making a complaint
 - A clear flow diagram of the process with timings which is readily available from an independent source is needed. Separate diagrams for different providers should exist, if necessary
 - A template for a complaint letter giving examples of information to be provided would be beneficial
 - Text messaging and BSL interpreters should be available throughout process
3. **Support and Advocacy**-how and where to get this independently from providers
 - More publicity on where to get this support
 - Advocates are needed with experience in learning difficulties
 - Advocacy services should provide text messaging and BSL for deaf people.
4. **Training** - some staff appear unaware of the complaints procedure
 - All staff should receive training on how to handle complaints
 - Complaint teams should have training in use of text messaging and how to book a BSL interpreter