



**Your experiences of  
making a complaint at  
Salisbury District Hospital**

# Contents

<b>Report summary</b>	<b>3</b>
<b>Introduction</b>	<b>4</b>
<b>What we did</b>	<b>5</b>
<b>Who did we hear from</b>	<b>6</b>
<b>What we found</b>	<b>7</b>
<b>What you told us</b>	<b>8</b>
Expectations	8
Making a complaint	9
Staying informed	10
Receiving outcomes	13
Reflecting on the experience	15
<b>Conclusions</b>	<b>17</b>
<b>Recommendations</b>	<b>18</b>
<b>Response</b>	<b>19</b>
<b>Appendix</b>	<b>20</b>

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# Report summary

## What is this report about?

This report highlights the findings from a survey that aimed to gather the views of people on the complaints handling process at Salisbury District Hospital, which is run by Salisbury NHS Foundation Trust (SFT).

## What did we do?

A survey was jointly prepared by Healthwatch Wiltshire and SFT. This was sent out to 87 people who had made a complaint to the Trust, which had since been closed. We received 26 responses to the survey in September 2022.

## What were the key findings?

- People found it difficult to find information about how to make a complaint.
- The Patient Advice and Liaison Service (PALS) was not always recognised, or its function fully understood.
- There was a lack of signposting to additional support, such as advocacy services.
- People didn't feel they were kept properly informed of the complaints process
- Timelines were not always adhered to, and updates not provided systematically.
- People sometimes found that staff were reluctant to take ownership of their complaint, particularly when different departments/staff were involved.
- People felt that having more open conversations would improve their overall experience of making a complaint.
- Complainants felt disempowered and that any progress on their complaint was controlled by the Trust.
- People thought that points or questions were not properly addressed in the Trust's final response, made at the end of the complaints process.
- People felt they could not challenge decisions made by the Trust unless they reopened the complaints process (Although we should note that a patient can complain to the Parliamentary and Health Ombudsman).
- Apologies for failings were not felt to be meaningful or sincere.
- People were not confident that the outcome of their complaint would help to drive improvements.

## Conclusions and recommendations

The results of the feedback show a need for the complaints handling process at SFT to be improved, and we have made a series of recommendations based on this. We will revisit this project later in 2023 to see what progress has been made with the introduction of a new Complaints Handling Policy at the Trust, which is due to be launched in April 2023.

# Introduction

**Healthwatch is your local health and social care champion. We're here to listen to the issues that really matter to people and to hear about your experiences of using local health and social care services.**

Healthwatch uses your feedback to better understand the challenges facing the NHS and other care providers and we make sure your experiences improve health and care for everyone – locally and nationally. We can also help you to get the information and advice you need to make the right decisions for you and to get the support you deserve.

In 2020 Salisbury NHS Foundation Trust (SFT) asked Healthwatch Wiltshire to facilitate a review of the complaints handling process at Salisbury District Hospital and use the findings to inform development of SFT's new Complaints Handling Policy. The new policy is due out in April 2023.

The project was interrupted by the Covid-19 pandemic, but was picked up again in May 2022.

The decision was taken to use a confidential survey to capture individual experiences of the complaints handling process. It was also agreed that Healthwatch Wiltshire would help develop and run the questionnaire, analyse the responses, and compile a report that would summarise findings, highlighting areas for improvement.

The objective was to use the insight we gathered to identify best practice and make recommendations on improving the quality of the complaints process.

# What we did

A survey was jointly prepared by Healthwatch Wiltshire and SFT to be sent to people who had been through the complaints process. This group of people represented an indicative sample of closed complaints that had been made to the Trust between April and June 2022.

The survey was reviewed by a readers' panel of Healthwatch Wiltshire volunteers whose suggestions were incorporated in the survey design in July 2022. The panel also reviewed a letter of invitation that would be sent out along with the survey.

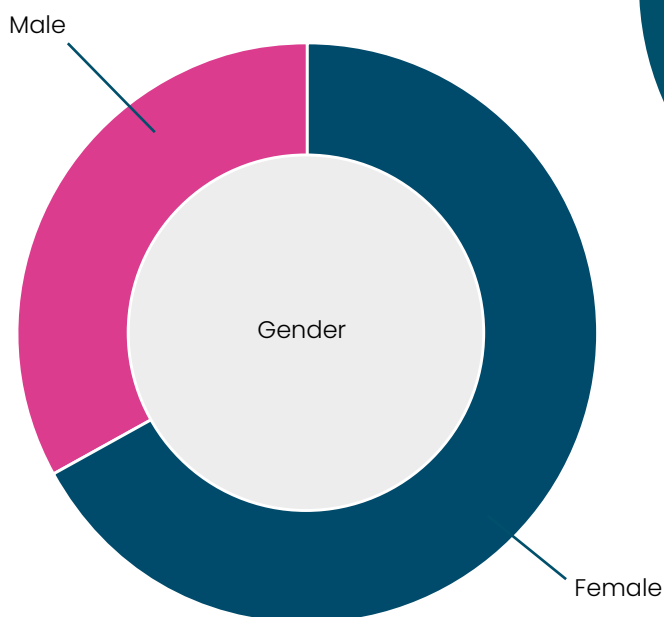
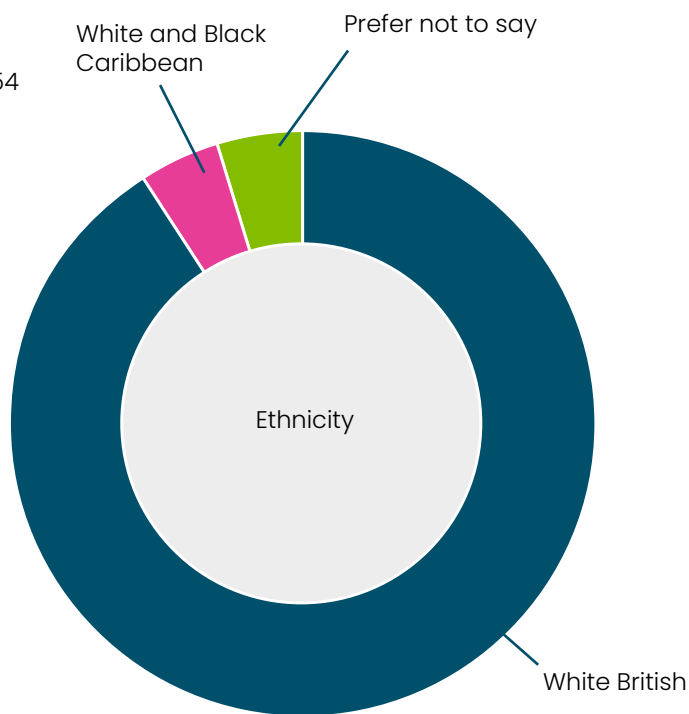
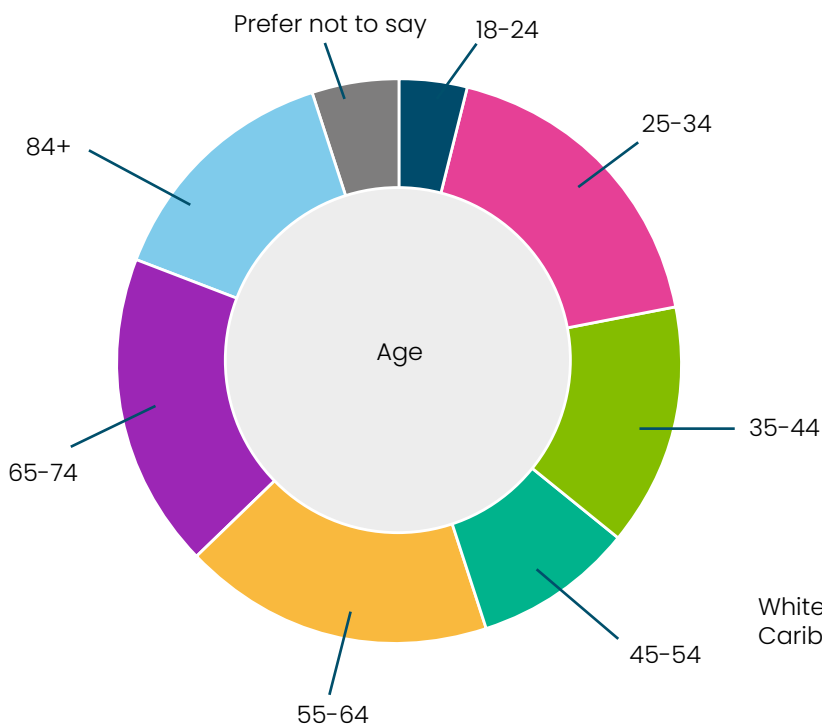
87 survey invitations in total were sent. 12 of which were via email and 75 by post.

By the closing date in September 2022, 26 survey returns were received, 4 of which were only partially completed.

We also conducted five qualitative telephone interviews with people who had provided contact details on their survey response.

The final analysis of this project was presented to SFT's Clinical Governance Committee in December 2022 and will be included in the Trust's Annual Report Update due in March 2023.

# Who did we hear from?



59% of respondents considered themselves to have a long term condition or disability which affects their daily life; 36% said they did not, with 5% preferring not to say.

# What we found

The survey findings provide a wide range of insight about the experience of raising a complaint from the patient/patient representative perspective.

Here is a summary of our findings which we will explore in more detail in this report.

We identified these issues from the feedback we received:

- People found it difficult to find information about how to make a complaint.
- The Patient Advice and Liaison Service (PALS) was not always recognised, or its function fully understood.
- There was a lack of signposting to additional support, such as advocacy services.
- People didn't feel they were kept properly informed of the complaints process
- Timelines were not always adhered to, and updates not provided systematically.
- People sometimes found that staff were reluctant to take ownership of their complaint, particularly when different departments/staff were involved.
- People felt that having more open conversations would improve their overall experience of making a complaint.
- Complainants felt disempowered and that any progress on their complaint was controlled by the Trust.
- People thought that points or questions were not properly addressed in the Trust's final response, made at the end of the complaints process.
- People felt they could not challenge decisions made by the Trust unless they reopened the complaints process (Although we should note that a patient can complain to the Parliamentary and Health Ombudsman).
- Apologies for failings were not felt to be meaningful or sincere.
- People were not confident that the outcome of their complaint would help to drive improvements.

Our analysis also identified four overlapping themes:

1. **Communications:** people need to be properly informed of the status of their complaint
2. **Information:** people find the information about the complaints process confusing
3. **Ownership:** people want staff to take ownership of their complaint
4. **Change:** people are sceptical that their complaint leads to changes that benefit others.

# What you told us

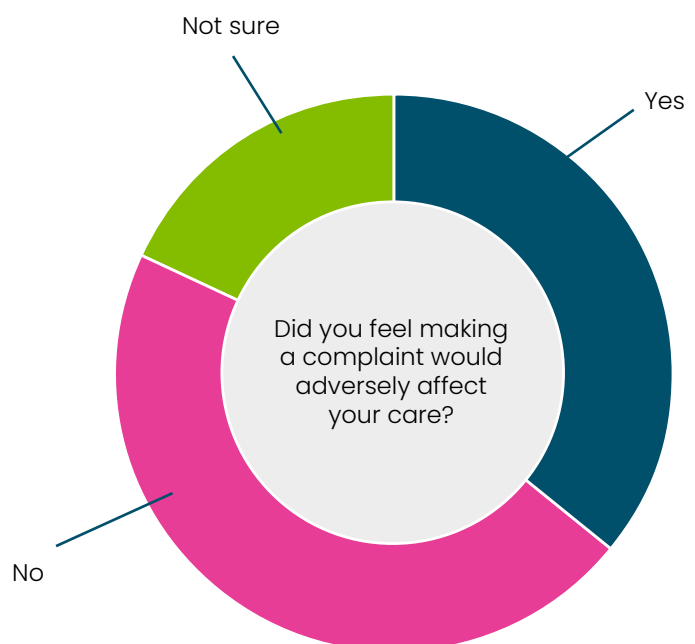
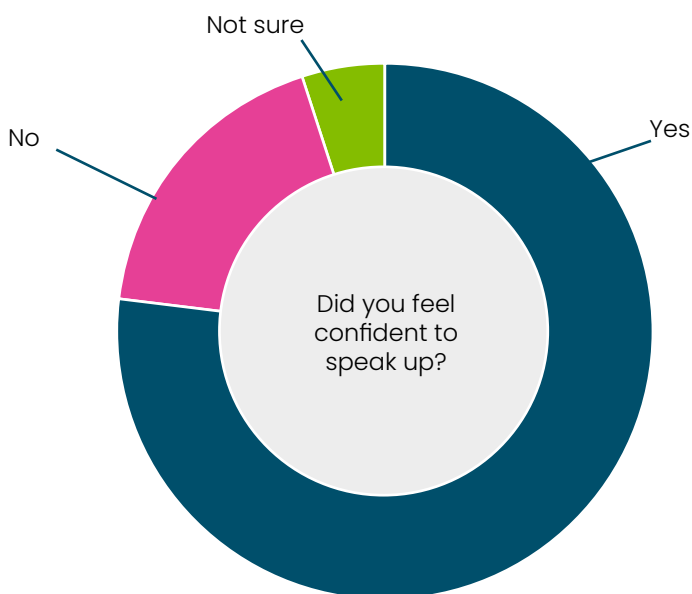
## Expectations

The expectation of the complainant is that their complaint will be taken seriously and acted upon in a timely manner. Respondents also expect that where a complaint is made the Trust will 'actually follow it through, gaining all aspects of the complaint and getting the answers required', as one respondent suggested.

Half of the 22 respondents found making a complaint 'a simple process'. But just under half (45%) felt that making a complaint might adversely affect their care.

More than three quarters (77%) felt confident enough to make a complaint but some felt they needed to pluck up the courage:

I felt that I should be apologising to the member of staff for making the complaint! It took me quite a time to muster the courage to complain.





One respondent made the case for a meeting to establish the main points of the complaint and formally agree these with the Trust:

They should offer at least one meeting at the start of the complaint to have somebody fully understand and you can read back the complaint so someone can say 'I've read your complaint and I understand that these are your issues, your points – do you agree that the response to the complaint should focus on these points?' [from phone interview]

## Making a complaint

People told us they found it difficult to find information about how to make a complaint. The Trust's Patient Advice and Liaison Service (PALS) was not always immediately recognised, or its function fully understood.

I was absolutely adamant I needed to make a complaint, but to find the procedure is just unreal (somebody told me the complaints team was called PALS but I would never have guessed!) The clinical stuff was brilliant from start to finish. It was just the whole process of getting in – that's the hard bit. [from phone interview]

One respondent acknowledged and appreciated the support they had received from the PALS team but did not feel the service had the authority to properly address their complaint.

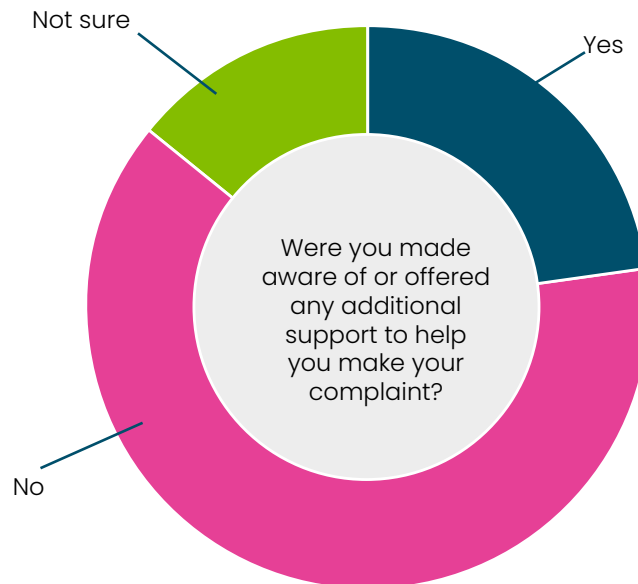
PALS themselves were very friendly and helpful. However, due to the nature of complaint about the consultant, I don't think he should be the one replying, it should be someone above him that can speak to him about it. The consultant in question just defends himself and staff. [from phone interview]

The experience of making a complaint is significantly influenced by the degree to which the complainant feels that their complaint is being taken seriously, and that it is being dealt with efficiently by the appropriate staff. In other words that it is 'owned' by the Trust. 'Ownership' in this context means taking the time to listen to the complainant and develop a trusting relationship, and some felt frustrated that the Trust appeared unwilling to take ownership.

My complaint being complex as it involved different departments wasn't satisfactorily concluded. It was investigated but key people didn't answer to the complaint.

A respondent who felt their complaint had been poorly handled and described how staff were 'defensive, and misunderstood key points', may well have benefited from having an assigned case officer, or advocate, to discuss the situation with. This would be an important role, particularly when complaints are made on behalf of others.

Communication by direct line, phone call, Zoom meeting – anything, just something where you've got open conversation because written words don't show the emotion behind it. Otherwise, it's all just policies and procedures, black and white words. [from phone interview]



## Staying informed

The principle of keeping complainants informed of the progress of their complaint is enshrined in the [guidance provided by the Care Quality Commission \(CQC\)](#), which states that *'complainants, and those about whom complaints are made, must be kept informed of the status of their complaint and its investigation, and be advised of any changes made as a result'*.

This best practice principle also informs the [Salisbury NHS Foundation Trust pledge](#) that if the complaint takes longer to investigate than expected, a member of PALS will contact the complainant to let them know the reason, and agree another response date.

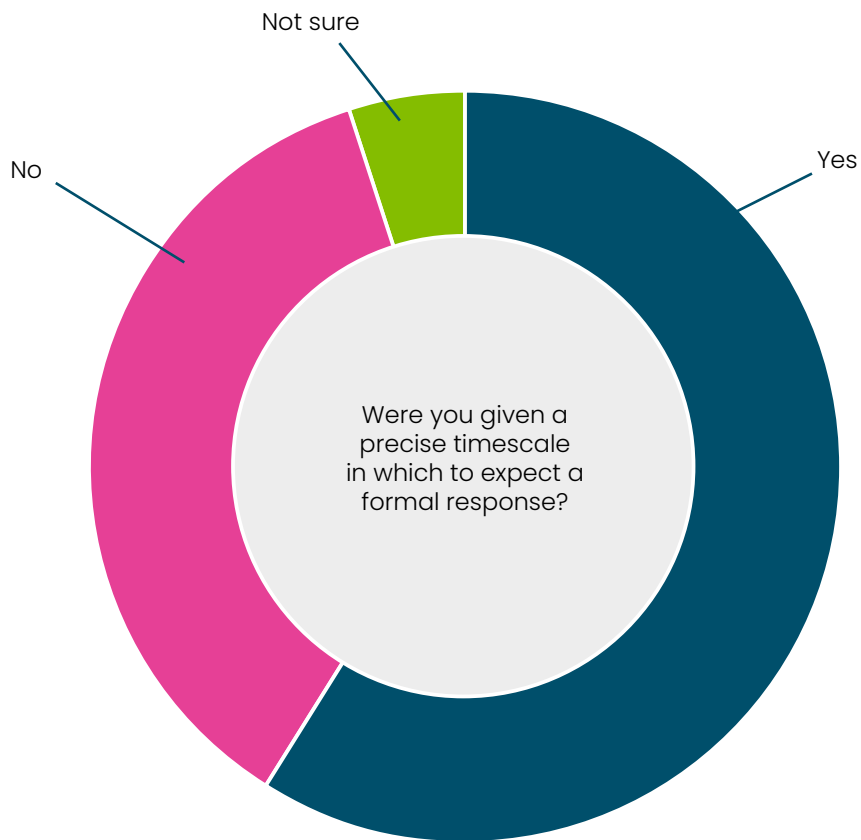
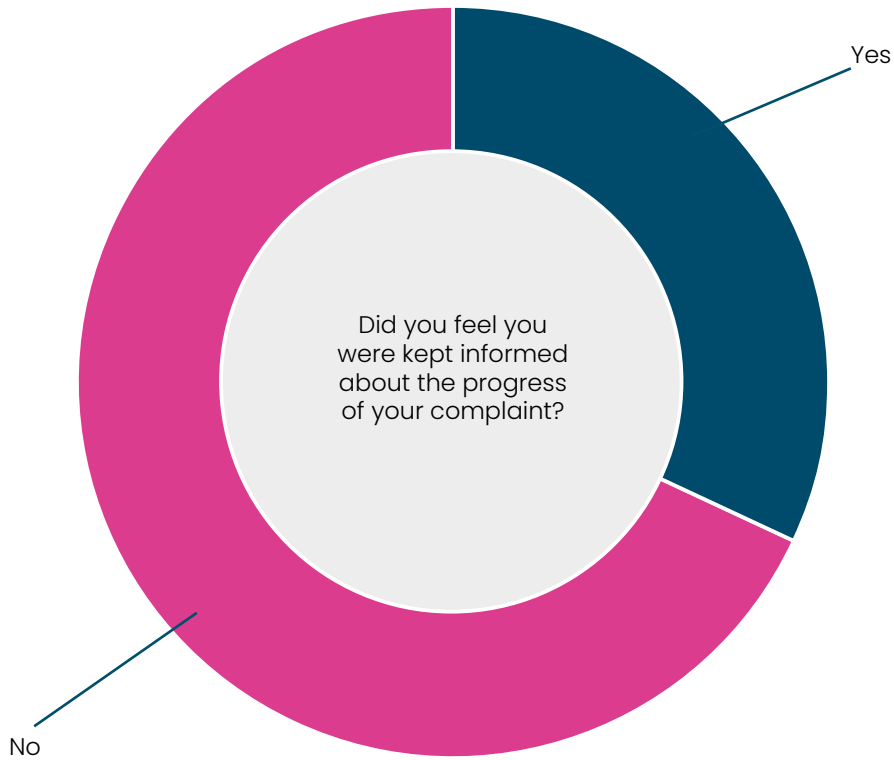
The expectation of complainants is expressed by one respondent who recommended that the Trust should:

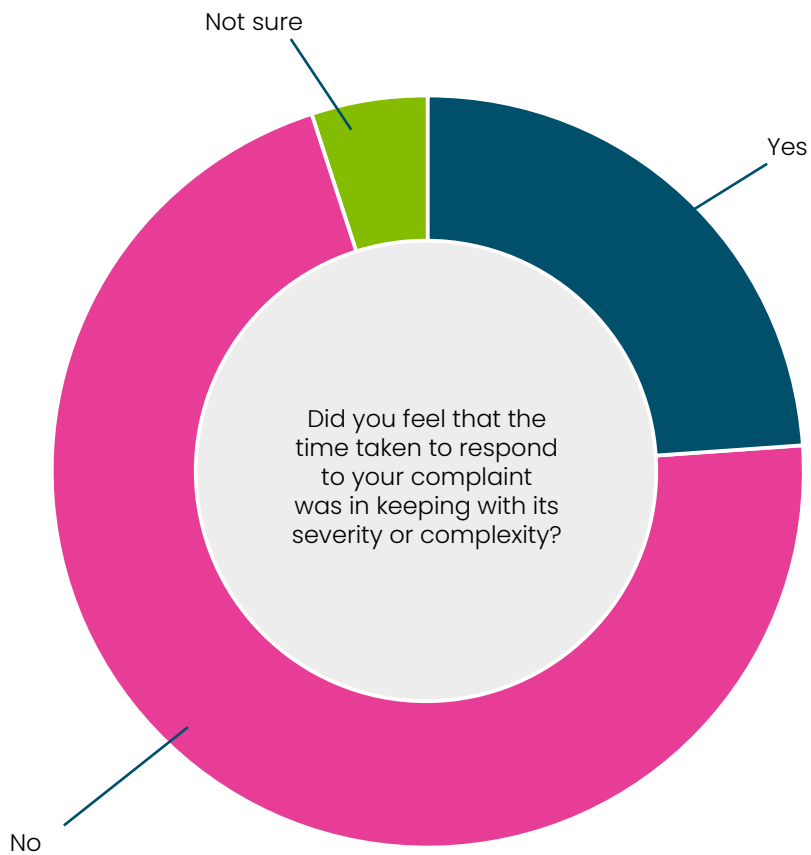
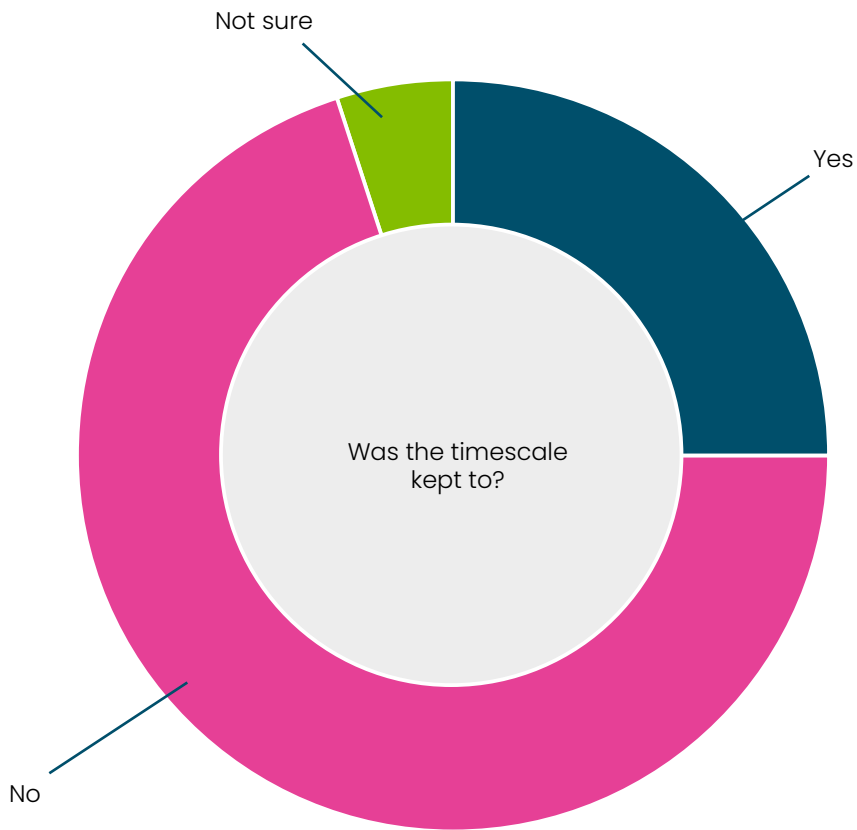
Track progress and inform complainant of any changes in timescale.

However, respondents told us that timelines were not always adhered to, and updates were not provided systematically.

A majority (59%) of respondents were given a precise timeline in which to expect a formal response to their complaint. But the timeline was not kept to in 70% of cases.

There was someone who said they were dealing with it but then when I had to push harder to get a response because they weren't meeting the deadlines that they gave and no one person had control of it. I had to chase. It would have been nice to have just had an email to say 'we're still working on this', and be given an update on the timeline' What's needed is an openness, a friendliness, just being on top of the job, having somebody that actively says where you are in the process. [from phone interview]





## Receiving outcomes

The majority (76%) of respondents felt that the time and effort involved in raising a complaint was not properly acknowledged and valued by relevant staff.

An even higher percentage (86%) felt that the final response of the Trust to their complaint, where it contained a apology, was not meaningful.

“The hospital would not acknowledge their negligence of my husband which caused his death earlier than it should have been. I can only hope that internally they might have improved their care of such vulnerable patients because of my complaint and it might prevent this happening to other families although it won't bring back my husband to me.”

People were left disappointed by the process and frustrated at a lack of attention to detail.

“Was extremely disappointed in the way I was spoken to and disregarded at my appointment which is why I complained, and the disrespect continued into the review of my complaint. The review was emailed after 14 days and just invalidated my experience without an apology, with an offer to refer me to another department which was unhelpful.”

“The written report had errors, including the patient's name.”

Some felt that staff were dismissive of their complaint, effectively denying the possibility that a mistake had been made.

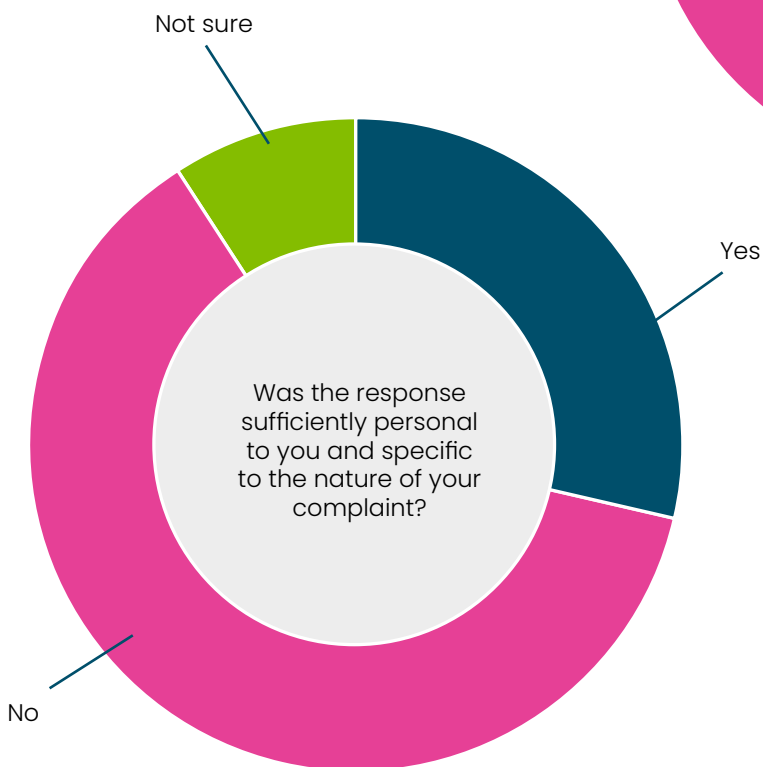
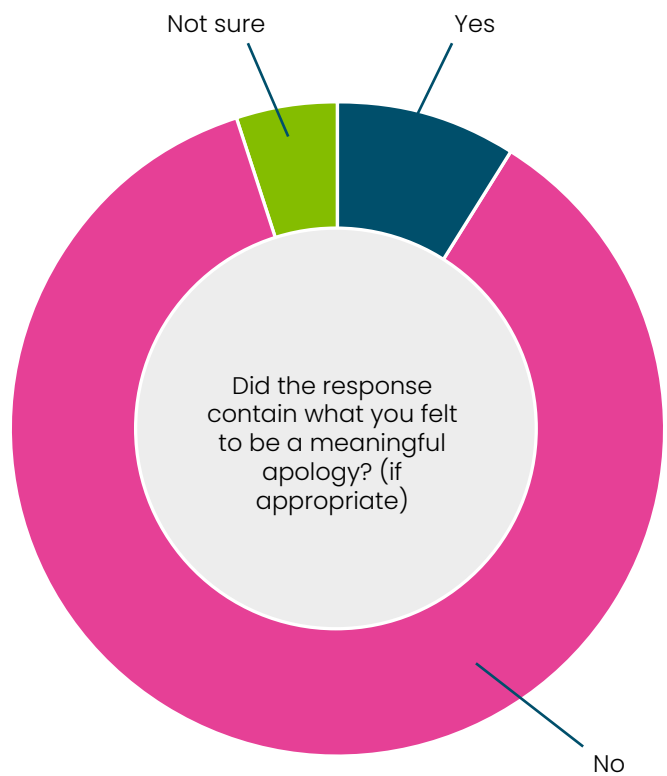
“Don't make excuses for everything and praise the staff who were mentioned as being fantastic in the complaint response.”

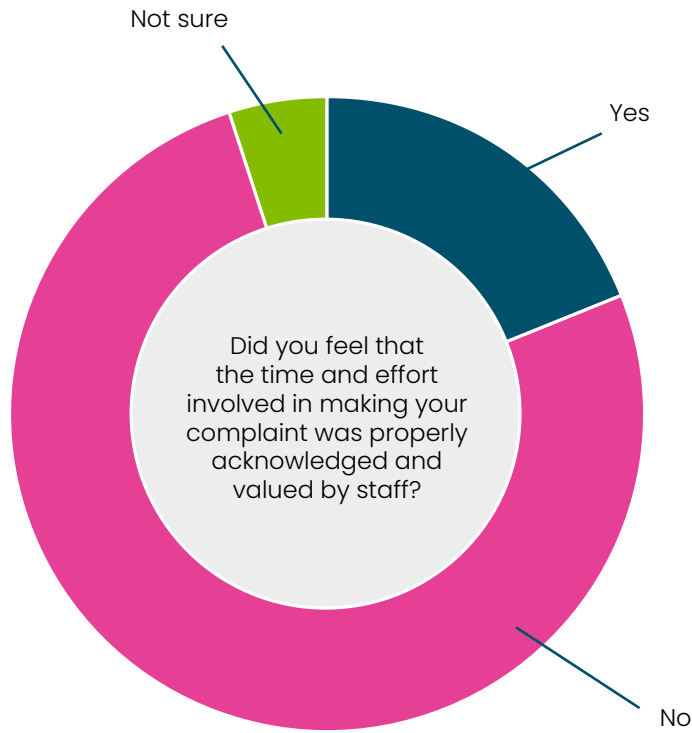
“It's very pointless making a complaint as it is brushed off, even in the event of damaging a patient's health the hospital still brushes it off and takes so long to reply it makes it not worth it unless a patient is able to afford legal help to tackle the hospital's negligence.”

“The word 'sorry' was not in their vocabulary.”

However, over 69% of respondents considered the response they received to be personal and specific to the nature of their complaint.

18% were satisfied that all their points or questions were properly addressed.

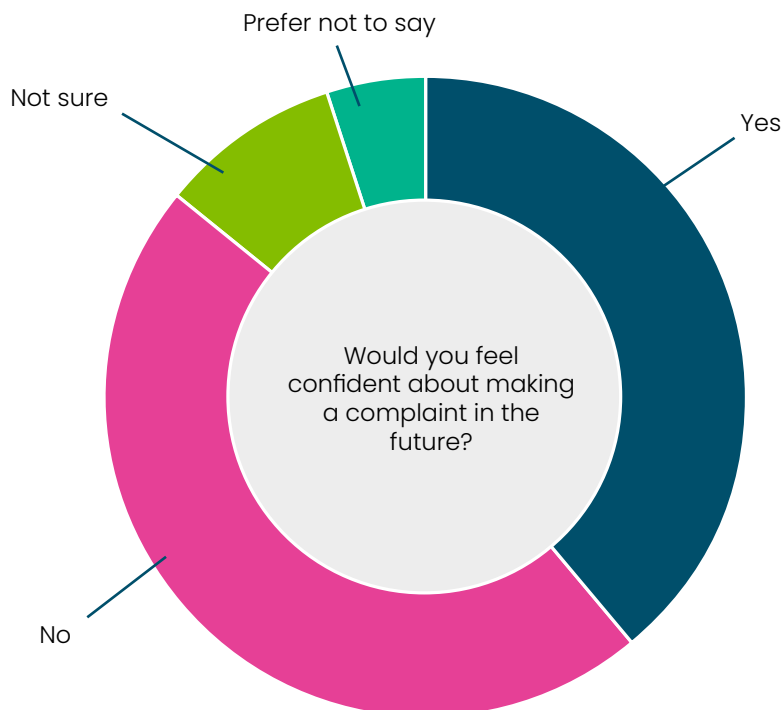




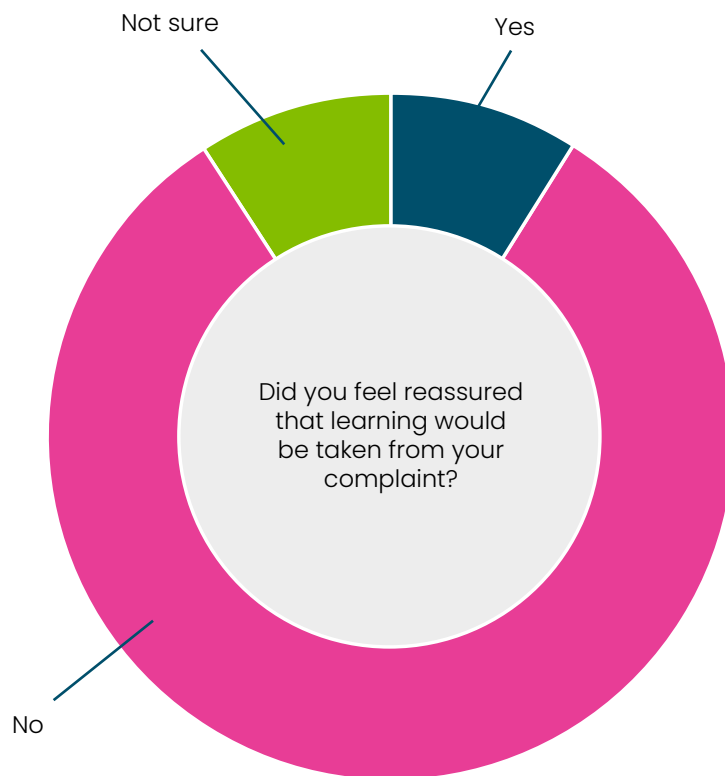
## Reflecting on the experience

While half of respondents found the process of making a complaint simple, and 70% described themselves as confident in speaking up, 47% did not feel confident about making a complaint in the future.

I have little faith that anything will change. What has happened is that we have adapted, we are a lot less trusting. We are learning to navigate hospital systems and protocols to ensure that at the very least we receive reasonable professional, informed treatment.



82% of respondents were also not reassured that learning was taken from their complaint, and did not think that their complaint would make a difference for future services.



16 respondents made suggestions regarding how the complaints process could be improved while 15 made further comments about their experience of the complaints process.

- It could cut the whole process down if they understood what you meant and took ownership of what you are saying.
- Taking the time to listen and understand the points raised, clarification of the problem raised. One phone call by a case officer would have helped.
- Actually follow it through gaining all aspects of the complaint getting the answers required.
- Make it easier for people to complain. To get the details of who I needed to speak to was confusing.



# Conclusions

Based on the feedback we received, Salisbury NHS Foundations Trust's complaints handling process is in need of improvement, and was not satisfactory or transparent enough for a large proportion of our survey respondents.

- People found it difficult to find information about how to make a complaint.
- The Patient Advice and Liaison Service (PALS) was not always recognised, or its function fully understood.
- There was a lack of signposting to additional support, such as advocacy services.
- People didn't feel they were kept properly informed of the complaints process
- Timelines were not always adhered to, and updates not provided systematically.
- People sometimes found that staff were reluctant to take ownership of their complaint, particularly when different departments/staff were involved.
- People felt that having more open conversations would improve their overall experience of making a complaint.
- Complainants felt disempowered and that any progress on their complaint was controlled by the Trust.
- People thought that points or questions were not properly addressed in the Trust's final response, made at the end of the complaints process.
- People felt they could not challenge decisions made by the Trust unless they reopened the complaints process (Although a patient can complain to the Parliamentary and Health Ombudsman if they are not satisfied with a response).
- Apologies for failings were not felt to be meaningful or sincere.
- People were not confident that the outcome of their complaint would help to drive improvements.

Complainants would welcome the opportunity to discuss and agree the main points of their complaint with the relevant Trust staff. This would ensure everyone was on the same page at the outset, and potentially resolve issues more quickly.

Further to this, the initial acknowledgement of the complaint should include information about [local advocacy services](#).

Keeping complainants informed about the progress of their complaint is a matter of courtesy and must be a priority for any Trust.

Resolving complaints means engagement with the complainant in an open conversation to discuss the final response, consider what potential improvements can be made, and celebrate improvements made on a 'You Said We Did' basis.

# Recommendations

Based on our findings, we make the following recommendations to Salisbury NHS Foundation Trust:

- Disseminate information about the complaints process across all Trust departments, with details of the relevant staff directly responsible for the initial handling of complaints.
- Ensure all staff can explain the role of the Patient Advice and Liaison Service (PALS).
- Identifying potential communication barriers with the complainant at first contact.
- Proactively inform complainants of the steps involved in the complaint process and allocate a case number for both the complainant and the Trust to refer to.
- Provide regular progress updates to complainants, adhere to the timescale given to the complainant but adjust and inform them of revised timescales as appropriate.
- Ensure all staff are aware of [NHS Complaints Procedures](#) in England, with specific reference to the role of PALS, and the independent [NHS Complaints Advocacy \(VoiceAbility\) service](#).
- Improve signposting to additional external support, eg from [advocacy services](#), and relevant information, such as [How to complain advice from the CQC](#), and Healthwatch's [Help to make a complaint](#) guide.
- Adopt a 'shared journey' stance that encourages mutual respect and consideration. Recognise the effort, time, and emotional impact of making a complaint.
- Design a shared online portal to track the progress of complaints.
- Publicise and celebrate improvements made to services as a direct result of complaints raised, as appropriate.

We will revisit this project later in 2023 to see what progress has been made with the introduction of a new Complaints Handling Policy at the Trust, which is due to be launched in April 2023.


## Thank you!

Thanks to everyone who shared their views and experiences of the complaints handling process at Salisbury District Hospital and to SFT's patient experience team and our volunteers for their support in designing our survey.

# Response

**Victoria Aldridge**

**Head of Patient Experience, Salisbury NHS Foundation Trust**

 We, at Salisbury NHS Foundation Trust have welcomed the opportunity to work with Healthwatch Wiltshire to develop a co-produced complaints review project. The aim of this project was to gain impartial and meaningful insight into how those who find themselves in the difficult position of having to raise a complaint experience this process.

This project has been critical in developing our understanding of these perspectives and demonstrates our commitment to improvement.

The Trust acknowledges and accepts the findings from this project and strongly supports the identified areas for improvement. We are currently working through a transformation period with the findings from this shaping both our new Complaints Policy (publication planned for April 2023), and improving the processes associated with this.

Our aim is to provide an accessible, supportive and robust complaints process, that commits to putting the complainant at its heart. Our priorities will also be to ensure that we are providing our staff with the necessary training and support for both responding to and learning from complaints - at all levels of the organisation.

We have identified the following immediate key actions in response to this feedback:

- Simplification of the initial process for raising a complaint and supporting complainants to clearly articulate their concerns and linking in with local advocacy services.
- Working more closely and supporting investigating managers to improve accountability and identify opportunities for early and appropriate resolution.
- Move towards a more tailored and individual management of a complaint. This includes regular communications, and clearer information from the outset on who is managing the complaint and support services that are available.
- Continue to develop the profile of PALS to ensure its functions are clear for patients, visitors and our staff. This will be an evolving piece of work initially mobilised through revised posters, leaflets, use of social media and internally through our ward based 'PALS Outreach Services'.
- Improved and more regular training programmes for staff on the management, investigation and learning from complaints. This will be underpinned by ensuring a clear understanding of the principles of the new PHSO Framework.
- Lastly, working with our Divisions to ensure we develop more effective methods of publicising and celebrating improvements made to services as a direct result of complaints and concerns raised.

Although we fully acknowledge that we will never achieve a zero complaints threshold, we are committed to ensuring that the process will be made as easy as possible and will be underpinned by a learning and just culture. We are committed to ensuring appropriate support and training for our staff and ensuring that complainants feel not only able to raise their concerns, but that they will be heard and changes will be made where required.



# Appendix



## Complaints Process Survey - Salisbury District Hospital

### Background and purpose

Healthwatch Wiltshire is the independent statutory champion for people using local health and social care services in Wiltshire. We listen to what people like about services and what they think could be improved and share their views with those with the power to make change happen. We also share these views with Healthwatch England, the national body, to help improve the quality of services across the country.

In 2020 Salisbury Foundation Trust (SFT) asked Healthwatch Wiltshire to facilitate a review of the Complaints Handling Process at Salisbury Hospital. The project was interrupted by the outbreak of Covid-19 and subsequent lockdowns and restrictions, and relaunched in May 2022, when the decision was taken to use a survey to capture individual experiences and ensure confidentiality of responses.

All responses are processed anonymously and are treated with the strictest confidence. No identifying information will be shared with Salisbury Hospital or any other organisation.

However, you are welcome to enter your contact details at the end of this survey should you wish to discuss your responses further with a member of the Healthwatch team.

### Considering a complaint

**1. When you were considering making a complaint did you feel confident to speak up?**

- Yes
- No
- Unsure
- Prefer not to say

**2. Did you feel that making a complaint might adversely affect your care?**

- Yes
- No
- Not sure
- Prefer not to say

## Making a complaint

**3. Was making the complaint a simple process?**

- Yes
- No
- Not sure
- Prefer not to say

**4. Were you offered or made aware of any additional support that was available to help you make your complaint?**

- Yes
- No
- Not sure
- Prefer not to say

## Staying informed

**5. Did you feel you were kept informed about the progress of your complaint?**

- Yes
- No
- Not sure
- Prefer not to say

**6. Were you given a precise timescale in which to expect a formal response to your complaint?**

- Yes
- No
- Not sure
- Prefer not to say

**7. Was this timescale kept to?**

- Yes
- No
- Not sure
- Prefer not to say

## Receiving outcomes

**8. Do you feel all your points or questions were properly addressed?**

- Yes
- No
- Not sure
- Prefer not to say

**9. If appropriate - did the response contain what you felt to be a meaningful apology?**

- Yes
- No
- Not sure
- Prefer not to say

**10. On receiving the final outcomes of your complaint, did you feel reassured that learning was taken, and that your complaint had made a difference for future services?**

- Yes
- No
- Not sure
- Prefer not to say

## Reflecting on the experience

**11. Do you feel the time taken to respond to your complaint was in keeping with the severity and/or complexity of your complaint?**

- Yes
- No
- Not sure
- Prefer not to say

**12. Do you feel that the time and effort involved in making your complaint was properly acknowledged and valued by relevant staff?**

- Yes
- No
- Not sure
- Prefer not to say

**13. Was the response sufficiently personal to you and specific to the nature of your complaint?**

- Yes
- No
- Not sure
- Prefer not to say

**14. Reflecting on your overall experience, would you feel confident in making a complaint in the future if you needed to?**

- Yes
- No
- Not sure
- Prefer not to say

**15. Do you have any suggestions about how the complaints process could be improved?**

Yes

No

Suggestions: (Please do not enter any Personal Identifiable Information)

**16. Are there any other comments you would like to make in relation to your experience of the complaints process?**

Yes

No

Not sure

Prefer not to say

Comments: (Please do not enter any Personal Identifiable Information)



# About You

We are fully committed to diversity, inclusion and equal opportunity for all and would very much appreciate your completing the following questions.

## 17. Your age

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 84 +
- I'd prefer not to say

## 18. Would you consider yourself to have a long term health condition or disability that limits your day-to-day activities?

- Yes
- No
- Not sure
- Prefer not to say

## 19. What is your ethnic group?

- Welsh
- English
- Scottish
- Northern Irish
- British
- Irish
- Gypsy or Irish Traveller
- Any other White background (please state in box below)

- White and Black Caribbean
- White and Black African
- White and Asian
- Other mixed background (please state in box below)
- Asian or Asian British
- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian background (please state in box below)
- Black or Black British
- Caribbean
- African
- Other Black background (please state in box below)
- Other ethnic group not listed (please state in box below)
- Prefer not to say

Comment:

## 20. Your gender

- Male
- Female
- Prefer to self-identify (please state in box below)
- Prefer not to say

Comment

## 21. What is your religion?

- No religion
- Atheist
- Buddhist
- Christian (incl. Church of England, Catholic, Protestant and all other Christian denominations)

- Hindu
- Jewish
- Muslim
- Sikh
- Other religion (please state in box below)
- Prefer not to say

Comment:

**22. Which of the following best describes your sexual orientation?**

- Heterosexual/straight
- Lesbian
- Gay
- Bisexual
- Prefer to self-describe (please state in box below)
- Prefer not to say

Comment:

## Getting in touch with Healthwatch Wiltshire

Healthwatch Wiltshire are able to assist you with completing your survey over the phone. Please call a member of the Team on 01225 434 218 to arrange this. By completing your survey over the phone your responses will still remain anonymous and your identifiable details will not be shared with Salisbury NHS Foundation Trust.

Alternatively, you can complete your survey online by typing the following link into your internet browser: [www.smartsurvey.co.uk/s/ComplaintsProcess/](http://www.smartsurvey.co.uk/s/ComplaintsProcess/)

Once you have completed your survey, if you would like a member of the Healthwatch team to contact you about your response – please add your name and contact details here. Your identifiable information will not be shared with Salisbury NHS Foundation Trust.

Name: \_\_\_\_\_

Preferred Contact Number: \_\_\_\_\_



# healthwatch Wiltshire

Healthwatch Wiltshire  
Freepost RTZK-ZZZG-CCBX  
The Independent Living Centre  
St George's Road  
Semington  
Trowbridge  
Wiltshire BA14

[healthwatchwiltshire.co.uk](http://healthwatchwiltshire.co.uk)

t: 01225 434218

e: [info@healthwatchwiltshire.co.uk](mailto:info@healthwatchwiltshire.co.uk)

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