



**Clackmannanshire  
Integrated Mental Health Service**

**REPORT ON ISSUES AND COMPLAINTS**

**2010-11**

## 1. Purpose of Report

The purpose of this report is to provide feedback to our customers, stakeholders and staff on the issues, complaints and suggestions that have been raised throughout the year, and what we have done or plan to do, to address those issues and improve the services we provide.

## 2. Types of Issues and Complaints

### a. Formal Complaints

A formal complaint is where the customer expects their issue to be investigated and to be provided with a full and formal response e.g. *"I wish to complain about the way staff have treated me"*.

### b. Informal Complaints and Issues

An informal complaint is where people may complain about a particular aspect of the service e.g. *"Why was there no-one available to take my call?"*.

Issues may also be raised informally or we may identify them through survey responses from service users, carers, stakeholders and staff.

### c. Suggestions

Suggestions are most likely to come from formal evaluations and surveys as well as verbal feedback to members of staff. e.g. *"It would be nice if the reception area was more welcoming"*.

## 3. Issues/Complaints Received and Action for Improvements

### a. Formal Complaints

We received one formal complaint within the reporting year. This was addressed at stage one in the formal complaints procedure.

The nature of the complaint was regarding when services would be provided for a relative. The outcome of this was that the person concerned was in receipt of services and this was working well.

### b. Informal Complaints and Issues

#### o Service User Survey

An annual survey was circulated to 150 random service users. The key issues identified from this survey are as follows:

A low percentage of service users agreed with the following statements:

- I have seen a written assessment of my needs completed by mental health services (34%).

- I have been offered a clear plan that describes the services I will receive (66%).

Action:

*A shared information system is currently being developed and this will allow a printed copy of assessment and care plans to be provided more easily.*

- At least once a year there is a review to discuss the services I receive (48%)

Action:

*This question only applies to people who are receiving services for a longer period of time, therefore, is not applicable to the majority of service users. Options for this question will be amended in future surveys to include "not applicable" to give us a clearer picture of the level of satisfaction in this area.*

○ **Carers/Key Person Survey**

An annual survey was circulated to known carers/key persons. However, this is an area where we are challenged and efforts to improve engagement with this group of people have been unsuccessful, with many carers telling us that they do not identify themselves in this manner. Although the feedback was satisfactory, there was a very low response which meant that the feedback was not representative of all carers/key persons views.

Action:

*To try and identify more carers/key persons, we included a section for service users to provide carer/key person details in our "Tell Us What You Think" leaflet which was introduced in February 2011.*

*We have also published an article about available carers support in the Council's newspaper, Clackmannanshire's View.*

*Due to low success with the above actions, support for carers will be included in the Service Development Plan 2012-2015 as a key priority.*

○ **Stakeholder Survey**

This year we introduced our first stakeholder survey which was distributed to our main referrers, partners and agencies we have established close working links with. The key issues identified from this survey are as follows:

Comments:

- "A leaflet explaining the referral pathway and the services provided, along with contact numbers would be excellent. This may already be available but possibly not widely available".

Action:

*We will develop a leaflet on the Single Referral Pathway for our referrers. Service leaflets are already available and we will ensure that these are also provided to our stakeholders.*

- “The initial communication is good, however, the final discharge summary for many of the services is not detailed enough”.

Action:

*A Discharge Protocol and guidance is already in place. This will be reinforced to staff.*

- “It would be very useful if one-off workshops or group sessions were done but not necessarily for people that are service users. People could come up for those one-off sessions and from that decide if maybe SRP is appropriate”.

Action:

*We will pilot a 2 hour Open Session and invite people who make referrals to attend. Future sessions will be decided based on attendance and feedback.*

- There were also several responses which indicated to us that we needed to improve awareness about our services and where information could be found.

Action:

*A visit programme to GPs is being reinforced and information on services will be provided during those visits.*

*Leaflets on services will be provided to our referrers.*

*Information on Clacksweb is in place and this has been improved to provide clearer details on the services we provide. We will also look into providing this information on the NHS website.*

○ **Informal Feedback**

- Concerns raised by the Community Access Team as they were unable to meet some service users needs as this would mean working out-with the 8pm watershed.

Action:

*It was agreed that staff could work out of hours to enable clients to engage in their chosen activity.*

- Service users had expressed concern about fire alarm testing at the Mental Health Resource Centre taking place during a busy part of the working day.

Response:

*Unfortunately, it is necessary for tests to be carried out during a busy part of the day in order for staff, service users and visitors to be aware of how the alarm sounds.*

- Feedback from service users at the Liaison and Development Group was that the door entry system at Carsebridge House was confusing.

Action:

*New signs were put in place to clear show service names.*

### c. Suggestions

- We received several suggestions on how to improve the courses provided by the Phoenix Centre. These included:

- Relaxation session within the Anxiety Management course is not required.

Action:

*Relaxation session was removed from course content.*

- The handouts are too complicated and wordy, jargon used and not colourful enough.

Action:

*Handouts were updated by staff and a Klacksun member.*

- The length of sessions (2 hours) is too long.

Action:

*Sessions were reduced to 1½ hours.*

- It would be encouraging and motivating if a previous participant attended to talk about their own experience of the course, at the start of the course.

Action:

*This was trialled in May 2011 and was successful, therefore, will now be incorporated into other courses.*

### 4. Evaluating the Outcomes of Issues / Complaints and our Complaints Process

It is important for us to maintain customer satisfaction in all areas of our service. We have recently developed a Complaints Satisfaction Survey which will be sent out to following our response to future issues and complaints that are raised by named individuals. This will evaluate:

- How satisfied customers are with the outcome of their issue or complaint.
- How satisfied customers are with the current process for formal complaints.

The responses to this survey will be used to identify further learning and improvements within the service.

Most of our surveys and evaluations are carried out anonymously but we would also welcome feedback from our survey participants on the actions we have taken in response to your issues.

*Lorna MacFarlane  
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