Survey of Complaints – Milton Keynes University Hospital

NHS Foundation Trust

About the organisation

The Milton Keynes University Hospital NHS Foundation Trust serves Milton Keynes and surrounding areas. The hospital has approximately 400 inpatient beds, and provides a broad range of general medical, surgical, paediatric and maternity services. They also have a busy Emergency Department that manages all medical, surgical, and child health emergency admissions.

Methodology

The Trust used the long pre-outcome and post-outcome survey. The pre-outcome survey was used to measure the overall handling of a complaint, and the post survey to measure whether they were responding satisfactorily. The Trust adapted the survey so it could be used on Survey Monkey and so it could be printed easily using Microsoft Word.

They chose to target the survey at complaints which were categorised as moderate or severe harm, excluding cases involving deceased patients or where the complainant was persistent. All complainants were spoken to regarding the survey and given opportunity both verbally and in writing to opt out.

The pre outcome survey was sent 2 weeks before the final response was due and the post outcome survey sent 4 weeks after the final response had been sent. Both surveys were sent by either post, email, or online, and reminders were sent for both surveys after 3 weeks.

Results were recorded on a spreadsheet and are reported through the annual complaints report which is overseen by the Trust’s Management Board, Quality Board, and Trust Board.

What changed?

By trialling the survey they established that where a complainant is made aware of the reason for the survey and the action taken upon receipt, they are more likely to respond. This was true for the pre outcome survey where they averaged a return rate of 29%.

The survey highlighted that complainants felt the investigating officer responsible for investigating their complaint was not aware of the points which would be investigated. This was despite the complaints officer agreeing the points with the complainant and then sharing those with the investigating officer. The Trust concluded this was because the investigating officer does not speak with the
complainant. They changed the process so that a meeting is now held between the complaints officer and the investigating officer to ensure the points raised are understood, the investigating officer will be encouraged to call the complainant to ensure a relationship is formed.

What challenges were there?

The return for the post-outcome survey was low, which prevented using it to draw wider conclusions. This was felt to be in part because the survey was sent 4 weeks after the response, which was considered too long.

The decision to run both the pre and post-outcome surveys resulted in the administration of the survey being quite time consuming. This also impacted on complaints officers who were required to inform the administration team which complainants needed to be surveyed. However, they felt the improved return rate justified the additional resource.

Using both surveys meant the spreadsheet which recorded outcomes was very long making it confusing to use.

Useful learning for others

The Trust found the toolkit to be extremely useful, and used the templates as initial and reminder letters. They would recommend other organisations use the tool kit to its full extent.

They recommend administrating the survey in the simplest format available so the data is easily to evaluate.

Administering two surveys was challenging and they will in the future operate the pre-outcome survey only on an ongoing basis and potentially use the post-outcome survey to measure the organisations responses to individual complaints on an ad hoc basis.