

# STATES OF JERSEY

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## ANNUAL BUSINESS PLAN 2007 (P.92/2006): SECOND AMENDMENT

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Lodged au Greffe on 24th August 2006  
by Deputy R.G. Le Hérissier of St. Saviour

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STATES GREFFE

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*In paragraph (a)(iv) after the words “pages 48 to 50 of the Annex” insert the words –*

– “except that in Objective 2, on page 49 of the Annex, after the existing performance/success criteria, insert the following new item –

*Introduce independent complaints process by January 2007.”*

DEPUTY R.G. LE HÉRISSIER OF ST. SAVIOUR

## **REPORT**

Although there is much justifiable praise for Jersey's Health Service, there remain a few instances where individuals feel they have a legitimate grievance and which they feel can only be resolved by a party independent of the Health Service. It would be expected that this mechanism would be activated only after internal attempts at achieving a satisfactory outcome had been exhausted.

Often, the nature of the issues is such that the aggrieved parties would be very reluctant to use established mechanisms like the Administrative Appeals system (soon to be renamed the States Complaints Panel).

In answer to questions posed by the writer (see Appendix) and in other contexts the Minister has acknowledged the need for an independent mechanism and has indicated that it is hoped to have it in place by the end of 2006.

My understanding is that the independent U.K. Healthcare Commission will be carrying out inspections of Jersey's Health Service and has agreed to take this aspect under its wing.

It is very important that there be a clear dated commitment to the introduction of this procedure. While it should not be required very often, it is essential that the ability to make a complaint to an independent body exists.

### **Financial and manpower statement**

It is assumed that the budget for the work of the independent Healthcare Commission has a notional amount allocated for these purposes. In addition resources are already expended on investigating complaints and I therefore see no need for additional resources.

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
BY DEPUTY R.G. LE HERISSIER OF ST. SAVIOUR**

**ANSWER TO BE TABLED ON TUESDAY 28th MARCH 2006**

**Question**

Will the Minister give the date, if any, upon which procedures for independent investigation of complaints will come into effect?

**Answer**

The former Health and Social Services Committee agreed to introduce a complaints policy in 1992 which has been effective since 1993. The Health and Social Services Department has reported annually on its number and nature of complaints since 1996. But it was only in 2004 that a dedicated complaints coordinator was introduced to the service so that a formal complaints procedure could be implemented. This has meant that patients, relatives and carers now have clear access to procedures to register formal complaints and feedback on the quality of services. The Department values the contribution that these complaints make to continuously improving services for patients and clients.

The reality of the situation is that the number of complaints that the Department receives is very low. In 2005 it received 154 complaints for all Health and Social Services areas. When one considers that the General Hospital alone dealt with over 170,000 attendances last year, (actual 174,727 - in patient, out patient, day cases and A&E attendances), that represents less than one complaint for every 1000 patient interactions. This figure becomes even lower when one includes all the activities and attendances for Social Services, Overdale and St Saviour sites.

The Department has just received an independent survey of patient satisfaction at the Jersey General Hospital by the Picker Institute in March 2006. It reveals high levels of satisfaction with the services provided with 96% of respondents reporting that the care they received is good, very good, or excellent. However, just under 20% of respondents reported that they didn't know how to make a formal complaint. Although this performance is better than the U.K. average, we still need to work to ensure that our patients know how to make a complaint. The Picker Institute independently carries out such assessment of all NHS Trusts in the U.K., and benchmarked to their performance, the Jersey General Hospital scored above U.K. average in overall performance across all domains.

We must be aware, however, that Jersey's Health and Social Care service is, largely speaking, a single provider for the people of Jersey. In terms of investigating complaints, one could argue that the Department can act as judge and jury. We must be confident that service users receive a fair response when they make a complaint and we must be assured that the Department acts appropriately on any concerns, and, where appropriate, makes changes to ensure improvements in service delivery.

To ensure that standards are independently inspected, the Department is in discussion with the Healthcare Commission to carry out an independent inspection of Health and Social Services in Jersey in 2007. The Healthcare Commission carry out all such inspections for NHS Trusts and independent healthcare providers in the U.K. They also act as the second stage independent complaints investigation for all of these U.K. providers. Senior Officers from HSSD will be meeting with representatives from the Healthcare Commission in early May 2006 to invite the Commission to provide this function for the States of Jersey's Health and Social Services Department. Such a process of second stage independent investigation of complaints may include the setting up of a local independent panel, guided by a case manager provided by the Healthcare Commission who would be brought in specifically to manage complaints. Although timescales, costs and consultation, both internal and external, are yet to be finalised, the Chief Officer will shortly establish a small, clinically led working group to move this objective forward and it is anticipated that such a system could be in place by the end of 2006.