

Muckamore Abbey Hospital Inquiry

Organisational Module 7 – MAH Operational Management

SECOND WITNESS STATEMENT OF CATHERINE MCNICHOLL

I, Catherine McNicholl, retired, make the following statement for the purposes of the Muckamore Abbey Hospital Inquiry (the MAH Inquiry):

1. This is my second witness statement to the MAH Inquiry. I provided my first witness statement dated 28 June 2024 in relation to Organisational Module 7.
2. The documents that I refer to in this statement can be found in the exhibit bundle attached to this statement marked “CMcN2”.
3. This statement is made in response to a request by the MAH Inquiry dated 15 October 2024 for an additional statement exhibiting an amended version of the exhibit behind Tab 5 of my first witness statement, (STM-293). A copy of the letter from the MAH Inquiry can be found behind Tab 1 of the exhibit bundle.
4. The document exhibited behind Tab 5 of my first statement was an April 2016 to March 2017 Adult Social and Primary Care (ASPC) Governance Dashboard (Exhibit 5).
5. The reason that the MAH Inquiry seek an amended version of Exhibit 5 is because it appears to include errors in Table 2, a table entitled “LD 2016/2017” with the subtitle “Incidents within Learning Disability Service” which can be found at page 46 of my statement.

6. As I explained in my oral evidence, that document was provided for illustrative purposes only. I was trying to illustrate the type of information considered at the ASPC Governance meeting. The document was referred to as an example of a dashboard. It was not being relied upon to refer to the specific content within the dashboard itself.
7. As I went on to explain in my evidence, the report which reflects the 16/17 year would not have been produced until the summer of 2017 and was not produced within my time in post, from which I retired in July 2016.
8. I cannot therefore speak to the accurate figures to be found at Exhibit 5 and I am informed by the Belfast Trust that it does not consider it to be appropriate to subsequently amend the historic document found at Exhibit 5 of my original statement. I understand that the Belfast Trust wrote to the MAH Inquiry in this regard on 18 October 2024, a copy of that letter can be found behind Tab 2 of the exhibit Bundle.
9. However, in an effort to assist the MAH Inquiry, the Belfast Trust has provided me with two other reports which date from March 2017 (the March 2017 Dashboards). The first is the Adult Social Primary Care Governance Dashboard March 2017, which can be found behind Tab 3 of the Bundle. The second is the Learning Disability Service Group Governance Dashboard March 2017, which can be found behind Tab 4 of the bundle.
10. Both of the March 2017 Dashboards contain a Table of "Incidents within Learning Disability Services" which records the same information as Table 2 of Exhibit 5, and contain the same column header and row header. These tables can be found at page 11 and page 16 of the exhibit bundle.
11. The figures recorded in the March 2017 Dashboards are identical to and verify each other.

Declaration of Truth

12. The contents of this witness statement are true to the best of my knowledge and belief. I have either exhibited or referred to the documents which I believe are necessary to address the matters on which the MAH Inquiry Panel has requested me to give evidence.

Signed: Catherine McNicholl

Dated: 25 October 2024

Catherine McNicholl Organisational Module 7 Exhibit Bundle "CMcN2"		
INDEX		PAGES
Tab 1	15 October 2024 MAH Inquiry Letter to DLS	5
Tab 2	18 October 2024 DLS Letter to MAH Inquiry	7
Tab 3	Adult Social Primary Care Governance Dashboard March 2017	10
Tab 4	Learning Disability Service Group Governance Dashboard March 2017	15

MAHI Muckamore Abbey Hospital Inquiry

MAHI Team
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31 Gordon Street
Belfast
BT1 2LG

15 October 2024

By Email Only

Mr John Johnston
Solicitor Consultant
Directorate of Legal Services
2 Franklin Street
Belfast
BT2 8DQ

Dear Mr Johnston

Re Muckamore Abbey Hospital Inquiry: Evidence of Catherine McNicholl

I refer you to Catherine McNicholl's statement to the Inquiry dated 18 June 2024, specifically at page 42 which relates to ASP Governance Dashboard Scorecards.

As you will be aware, this exhibit was put to Ms McNicholl's colleague, Ms Jacqui Austin who confirmed during her evidence to the Inquiry on 18 September 2024 that this exhibit contained numerical errors which needed to be rectified.

The Inquiry Panel requests a short supplementary statement from Ms McNicholl exhibiting an amended version of the related exhibit.

Please note that there is some urgency to this request owing to the Inquiry's current timescale for evidence. I would therefore be grateful if the supplementary statement could be provided by no later than **Friday 18 October 2024**.

Should you have any queries in respect of the above, please do not hesitate to contact solicitor@mahinquiry.org.uk

Yours faithfully,



Rachel Nethercott
Assistant Solicitor to the Inquiry



Directorate of Legal Services
2 Franklin Street, Belfast, BT2 8DQ

Rachel Nethercott
Assistant Solicitor to the Inquiry MAHI Team
1st floor, The Corn Exchange
31 Gordon Street
Belfast, BT1 2LG

18 October 2024
REF: MPIB006 00001

Dear Rachel

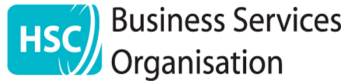
Re: Muckamore Abbey Hospital Inquiry: Evidence of Catherine McNicholl

Thank you for your letter of 15 October 2024.

Your letter seeks a short supplementary statement from Ms McNicholl exhibiting an amended version of the Tab 5 exhibit that was attached to the witness statement of Ms McNicholl (STM-293). The Tab 5 exhibit was an April 2016 to March 2017 Adult Social and Primary Care (ASPC) Governance Dashboard.

Please note, the exhibit was provided by Ms McNicholl for illustrative purposes only, illustrating the type of information considered at the ASPC Governance meeting. The document was referred to by Ms McNicholl as an example of a dashboard. It was not being relied upon by Ms McNicholl for the specific content of the dashboard itself. Indeed, Ms McNicholl retired before this dashboard was produced for the purposes of an ASPC Governance meeting in June 2017.





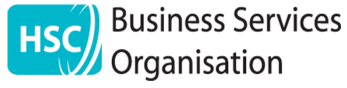
Directorate of Legal Services
2 Franklin Street, Belfast, BT2 8DQ

The Belfast Trust acknowledges the numerical errors in the ASPC Governance Dashboard, which was provided for illustrative purposes. The errors can be identified within the second table of the Dashboard at page 42 of Ms McNicholl’s statement. The table is entitled “LD 2016/2017” with the sub-title “Incidents within Learning Disability Service”. However, the Belfast Trust is not in a position to, nor does it think it would be appropriate to, retrospectively amend what is a historical document of record. The document was tabled at a meeting at the time, and it contained the errors to be found within the document. The Belfast Trust cannot and will not amend the exhibited document.

However, the same type of table as exhibited at Tab 5 of Ms McNicholl’s witness statement is contained within other monthly dashboards identified by the Belfast Trust that also date from March 2017. These other monthly dashboards contain what would appear to be the correct figures within the equivalent table. The Belfast Trust considers that it can provide a short addendum statement exhibiting those other contemporaneous monthly dashboards that have the accurate figures, and the statement can explain what is set out above.

You have asked the Belfast Trust to produce this further statement within a 3-day period. Respectfully, this timescale is unrealistic and unreasonable, particularly as witnesses of the Belfast Trust have been giving evidence to the MAH Inquiry throughout the same period. The Belfast Trust will be in a position to provide the supplementary witness statement, in the form set out above, by 25 October 2024, being only 7 working days since the request was received.





Directorate of Legal Services
2 Franklin Street, Belfast, BT2 8DQ

Yours sincerely

A handwritten signature in black ink, appearing to read 'John Johnston'.

Directorate of Legal Services | Business Services Organisation | 2 Franklin Street |
Belfast | BT2 8DQ

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INVESTORS IN PEOPLE®
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ADULT SOCIAL PRIMARY CARE Governance Dashboard March 2017



respect & dignity



openness & trust



leading edge



learning & development



accountability

ASPC - Governance Dashboard – March 17

incidents



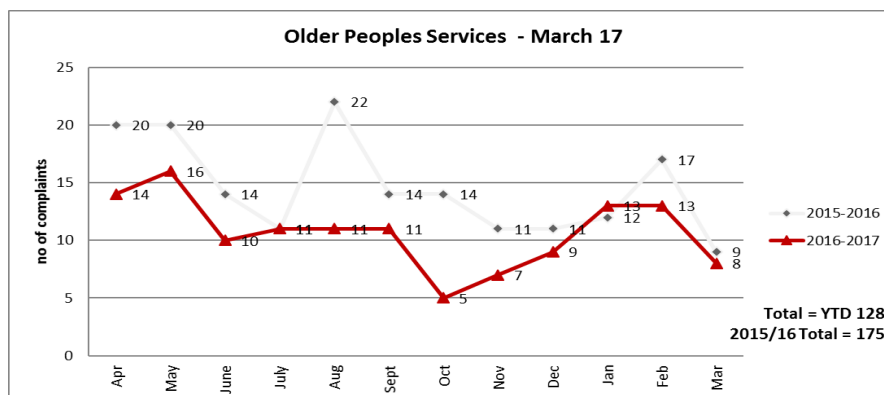
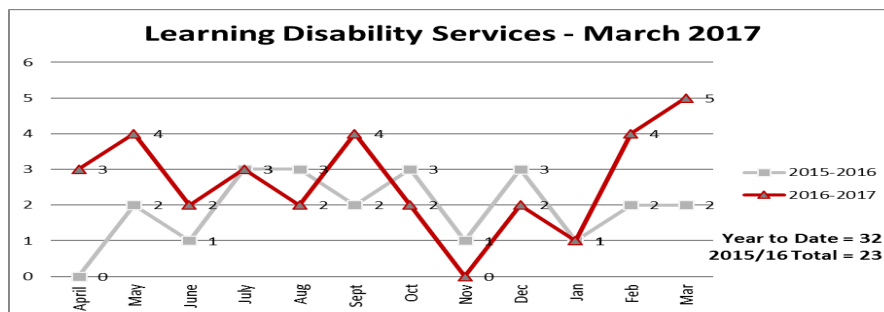
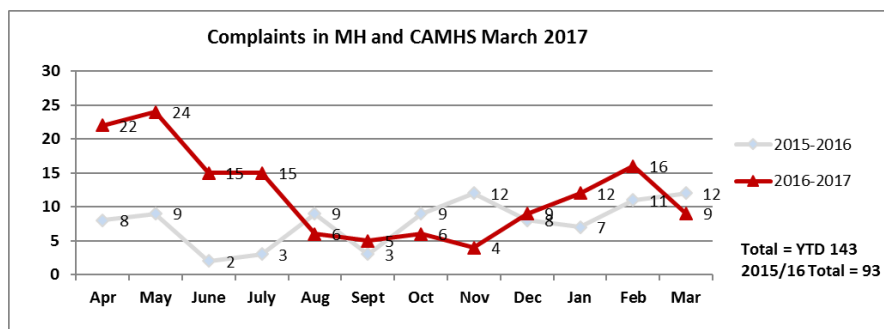
Incidents within Mental Health Services (including CAMHS)													
	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Average 2015 / 16
Abusive, violent, disruptive or self-harming behaviour	213	163	160	195	216	230	225	226	248	178	249	254	213
Access, Appointment, Admission, Transfer, Discharge	56	24	29	45	40	51	40	59	57	36	49	65	33
Accident that may result in personal injury	29	33	28	23	22	22	31	50	31	19	31	31	25
Consent, Confidentiality or Communication	2	3	1	0	5	5	1	4	4	1	1	3	1
Clinical assessment (investigations, images and lab tests)	0	0	0	0	0	0	0	0	0	0	0	0	0
Financial loss	0	0	1	0	0	0	0	0	0	0	0	0	0
Implementation of care or ongoing monitoring/review	5	3	5	3	1	2	0	1	0	0	2	2	2
Infrastructure or resources (staffing, facilities, environment)	5	2	9	2	1	3	7	6	8	5	2	4	3
Medical device/equipment	0	0	3	2	2	0	0	1	3	0	1	3	1
Medication	7	8	14	8	18	17	16	14	13	22	15	17	15
Other - please specify in description	1	3	3	2	6	3	3	5	9	1	7	1	3
Patient Information (records, documents, test results, scans)	1	2	2	7	3	2	3	2	1	6	0	4	1
Security	46	49	67	47	45	46	33	40	43	23	43	41	16
Treatment, procedure	1	0	0	0	0	1	3	0	0	0	0	0	1
Total	366	290	322	334	359	382	362	408	417	291	400	425	312
Avg per month 2015/2016	312	312	312	312	312	312	312	312	312	312	312	312	312

Incidents within Learning Disability Services													
	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Average 2015 / 16
Abusive, violent, disruptive or self-harming behaviour	262	312	332	294	326	294	326	329	287	266	328	274	279
Access, Appointment, Admission, Transfer, Discharge	9	4	1	8	5	7	6	5	3	3	3	6	7
Accident that may result in personal injury	36	44	56	42	48	45	47	38	43	46	55	61	50
Consent, Confidentiality or Communication	0	4	0	3	1	0	0	0	0	0	1	0	1
Financial loss	0	0	0	0	0	0	0	0	0	0	0	0	0
Implementation of care or ongoing monitoring/review	1	2	3	1	0	1	0	2	2	0	2	1	1
Infrastructure or resources (staffing, facilities, environment)	0	0	1	0	5	30	13	11	15	10	7	22	0
Medical device/equipment	0	2	9	0	1	0	0	2	1	1	1	1	1
Medication	8	16	0	10	5	9	17	10	3	5	9	8	8
Other - please specify in description	8	14	8	10	13	1	9	7	6	2	2	5	10
Patient Information (records, documents, test results, scans)	0	0	2	0	0	0	0	0	0	1	0	5	0
Security	1	1	3	5	4	1	0	2	3	1	2	0	3
Treatment, procedure / Clinical investigation	0	0	0	0	0	1	2	1	0	0	0	0	1
Total	325	399	415	373	408	389	420	407	363	335	410	383	360
Avg per month 2015/2016	360	360	360	360	360	360	360	360	360	360	360	360	360

Incidents within Older Peoples Services													
	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Average 2015 / 16
Abusive, violent, disruptive or self-harming behaviour	35	32	31	29	32	21	34	45	22	41	30	47	51
Access, Appointment, Admission, Transfer, Discharge	9	12	8	7	6	8	9	7	4	5	8	6	13
Accident that may result in personal injury	109	123	119	109	154	147	131	143	138	171	119	193	199
Consent, Confidentiality or Communication	4	9	7	4	8	7	10	7	10	4	3	7	9
Clinical assessment (investigations, images and lab tests)	0	1	0	1	1	2	1	0	1	0	1	0	0
Financial loss	0	0	0	0	0	0	0	0	0	0	0	0	0
Implementation of care or ongoing monitoring/review	53	39	68	64	55	78	44	59	54	53	53	69	67
Infrastructure or resources (staffing, facilities, environment)	2	28	3	5	7	12	4	4	7	6	3	6	6
Medical device/equipment	10	14	31	16	14	12	15	14	8	15	11	22	12
Medication	44	28	47	27	31	39	31	38	29	28	25	35	53
Other - please specify in description	11	5	6	13	8	12	4	12	4	7	10	10	13
Patient Information (records, documents, test results, scans)	4	7	17	10	8	4	4	7	6	8	3	8	9
Security	6	5	5	6	8	8	7	9	3	9	9	9	7
Treatment, procedure	0	1	1	3	2	1	4	3	2	1	2	2	2
Total	287	304	343	294	334	351	298	348	288	348	277	414	441
Avg per month 2015/2016	441	441	441	441	441	441	441	441	441	441	441	441	441

ASPC - Governance Dashboard – March 17

complaints



303 complaints in total from April 2016 – March 2017, as of from 08/05/2017.

ASPC Complaints Response Times			
Quarter 1		Quarter 2	
20 Working Days	30 Working Days	20 Working Days	30 Working Days
26%	41%	45%	59%
Quarter 3		Quarter 4	
20 Working Days	30 Working Days	20 Working Days	30 Working Days
26%	41%	48%	60%

291 complaints for previous year, April 2015 – March 2016

ASPC - Governance Dashboard – March 17

rqia inspections



	Unannounced Care Inspection	Unannounced Finance	Unannounced Inspection	Unannounced Medicines Management Inspection	Announced Premises Inspection	R'dations
Apr-16	None advised to date					
May-16	None advised to date					
Jun-16	None advised to date					
Jul-16			Beechcroft Ward 1			10
Aug-16	Ravenhill Day Centre					1
			Shannon Ward 1			16
			Shannon Ward 2			16
			Shannon Ward 3			16
Sep-16			NRU			2
			Mater Ward K			5
	Home Treatment House					4
					North Belfast Day Centre	6
Oct-16		Home Treatment House				1
Nov-16			Rathlin, KHCP			11
Dec-16	None advised to date					
Jan-17	Home Treatment House					3
			Avoca, Knockbracken			3
Feb-17				Home Treatment House		0
			Clare, Knockbracken			13
Mar-17	North Belfast Day Centre					5

Mental Health Services RQIA Inspections
 16 advised to date as of from 08/05/2017
 2015/2016 – 21 Inspections, 73 recommendations.

	Unannounced Care	Unannounced	Inpatient Progress Report	Announced Care Inspection	Announced Premises Inspection	No. R'dations
Apr-16	Trench Park					2
					Mica Day Centre	0
					Fallswater Day Centre	0
May-16	Hanna Street					0
	611 Ormeau Road					4
Jun-16		Donegore				12
Jul-16		Muckamore, Erne				0
Aug-16					Everton Day Centre	0
	Mica Drive Day Services					0
	Rigby Close					0
	Fortwilliam					0
	80 Malone Road					3
Sept-16	Merton Park					3
	Suffolk Day Centre					3
	Orchardville					0
		Muckamore, Moylena				2
Oct-16	Hanna Street					0
					80 Malone Road	9
					Edgumbe TRC	3
Nov-16	Trench Park	Muckamore, Killlead				1
					Rigby Close	4
		Muckamore, Cranfield				1
	Everton Day Centre					5
Dec-16	Erne, Muckamore					0
Jan-17	611 Ormeau Road					2
	Rigby Close					1
	80 Malone Road					2
			Erne Ward 1 & 2, Muckamore following July 2016 inspection			4
	Muckamore, Six Mile Ward					n/a
Feb-17	Hanna Street					2
	Rigby Close					1
	Ivesagh Centre					0
	Muckamore, Killlead					8
						1
March-17				LD Supported Housing		0
				Trench Park		0
				Annadale Ave		0
	Edgumbe TRC					2
	Mertoun Park					0

Learning Disability Services RQIA Inspections
 39 advised to date as of from 08/05/2017.
 2015/2016 – 32 Inspections, 84 recommendations.

Adult & Social Primary Care RQIA Inspections
 106 advised to date as of from 08/05/2017. 2015/2016 – 106 Inspections, 263 recommendations.

ASPC - Governance Dashboard – February 17

RQIA Inspections

	Unannounced Care	Announced Care Inspection	Unannounced Medicines Management Inspection	Announced Premises Inspection	Recommendations	Requirements
Apr-16	Fairholme				0	0
May-16			Pine Lodge		0	0
				Bruce House	2	0
Jun-16				Killynure House	4	0
Jul-16	Orchardville House				0	0
	Bruce House				0	0
	Grove Day Centre				3	0
Aug-16	Chestnut Grove				3	5
	Brae Valley				1	2
	Mourne Project				0	0
Sept-16	Knockbracken Day Centre				2	1
				Ballyowen Day Centre	2	0
	Community Stroke Team				0	0
	Community Rehabilitation Team				0	0
	Killynure House				1	0
	Shankill Day Centre				0	0
				Beechall Centre	4	0
				Whiterock Day Centre	6	0
	Knockbracken Day Centre				2	6
Oct-16			Ballyowen House		0	0
	Community Rehabilitation Team				0	0
	Step Up Step Down				0	0
	Intermediate Care Services				0	0
	Euler Day Centre				1	5
				Grove Wellbeing Day Centre	2	0
				Chestnut Grove	2	6
Nov-16	Hemsworth Court				0	0
	Brae Valley				1	0
				Pine Lodge	2	0
				Ballyowen Day Centre	2	0
	Glencairn Day Centre				2	1
Dec-16				Pine Lodge	2	0
	Ballyowen House					
42736	Sydenham Court				0	0
	Mullan Mews				0	0
	Woodlands				7	1
Feb-17	City Way Day Centre				4	1
	Bruce House				0	0
	Edgumbe				0	4
	Glencairn Day Centre				2	1
	Ballyowen House				0	0
	Mount Oriel				8	3
	Carlisle Day Centre				4	0
	Beechall				1	1
		Homecare Service - Cregagh			0	0
	Chestnut Grove				3	3
		Intensive Domiciliary Support Team			0	0
		Homecare Service - Shankill			0	0
	Valencia				6	
Mar-17	Killynure House				1	0
	Orchardville House				0	2

Older Peoples Services – RQIA Inspections

51 advised to date as of from 08/05/2017, 2015/2016 – 53 Inspections, 106 recommendations, 53 requirements.

Learning Disability Service Group Governance Dashboard March 2017



LD Service Group Governance Dashboard –March 17



Fig 1

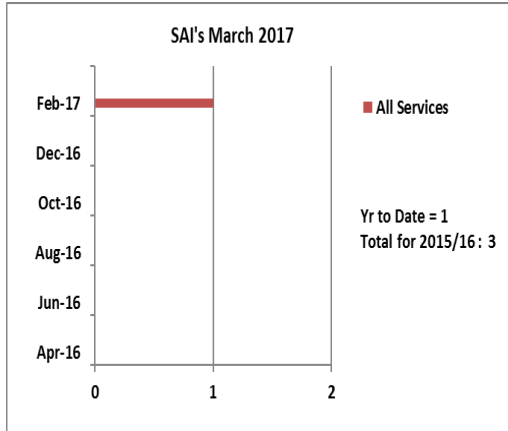


Fig 2

Incidents within Learning Disability Services													Average 2015 / 16
	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	
Abusive, violent, disruptive or self-harming behaviour	262	312	332	294	326	294	326	329	287	266	328	274	279
Access, Appointment, Admission, Transfer, Discharge	9	4	1	8	5	7	6	5	3	3	3	6	7
Accident that may result in personal injury	36	44	56	42	48	45	47	38	43	46	55	61	50
Consent, Confidentiality or Communication	0	4	0	3	1	0	0	0	0	0	1	0	1
Financial loss	0	0	0	0	0	0	0	0	0	0	0	0	0
Implementation of care or ongoing monitoring/review	1	2	3	1	0	1	0	2	2	0	2	1	1
Infrastructure or resources (staffing, facilities, environment)	0	0	1	0	5	30	13	11	15	10	7	22	0
Medical device/equipment	0	2	9	0	1	0	0	2	1	1	1	1	1
Medication	8	16	0	10	5	9	17	10	3	5	9	8	8
Other - please specify in description	8	14	8	10	13	1	9	7	6	2	2	5	10
Patient Information (records, documents, test results, scans)	0	0	2	0	0	0	0	0	0	1	0	5	0
Security	1	1	3	5	4	1	0	2	3	1	2	0	3
Treatment, procedure / Clinical investigation	0	0	0	0	0	1	2	1	0	0	0	0	1
Total	325	399	415	373	408	389	420	407	363	335	410	383	360
Avg per month 2015/2016	360	360	360	360	360	360	360	360	360	360	360	360	360

Fig 3

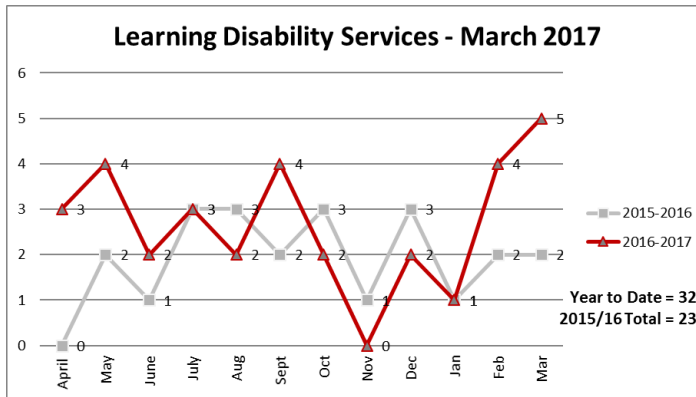
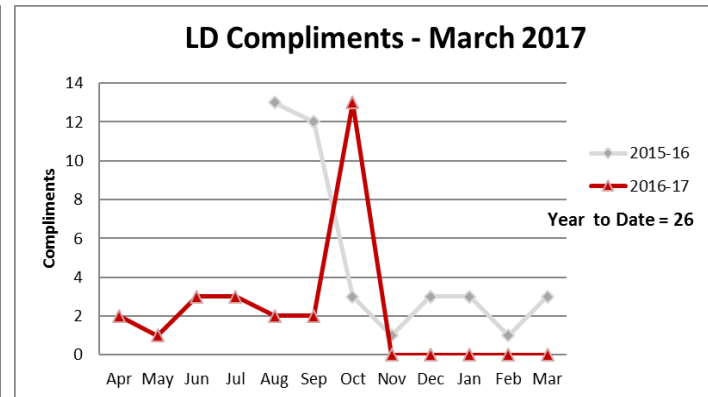


Fig 4



ANALYSIS BOX: This the LD Service Group Information Dashboard summarising the balanced scorecard safety & excellence reporting for; Fig 1. Serious Adverse Incidents 1 in year, Fig 2. Datix Incidents Fig. 3 Complaints, 32 in year to date. Fig 4. Compliments recording started in Oct 15. (source – R O'Connor / P McErlane)

LD Service Group Governance Dashboard – March 17

Fig 5



	Unannounced Care	Unannounced	Inpatient Progress Report	Announced Care Inspection	Announced Premises Inspection	No. R'dations
Apr-16	Trench Park					2
					Mica Day Centre	0
					Fallswater Day Centre	0
May-16	Hanna Street					0
	611 Ormeau Road					0
Jun-16		Donegore				4
Jul-16		Muckamore, Erne				12
Aug-16					Everton Day Centre	0
	Mica Drive Day Services					0
	Rigby Close					0
	Fortwilliam					0
	80 Malone Road					3
Sept-16	Merton Park					3
	Suffolk Day Centre					3
	Orchardsville					0
		Muckamore, Moylena				2
Oct-16	Hanna Street					0
					80 Malone Road	9
					Edgecumbe TRC	3
		Muckamore, Killead				1
Nov-16	Trench Park					4
					Rigby Close	1
		Muckamore, Cranfield				5
	Everton Day Centre					0
Dec-16	Erne, Muckamore					2
Jan-17	611 Ormeau Road					1
	Rigby Close					2
	80 Malone Road					4
			Erne Ward 1 & 2, Muckamore following July 2016 inspection			n/a
	Muckamore, Six Mile Ward					2
Feb-17	Hanna Street					1
	Rigby Close					0
	Iveagh Centre					8
	Muckamore, Killead					1
				LD Supported Housing		0
March-17				Trench Park		0
				Annadale Ave		0
	Edgecumbe TRC					2
	Mertoun Park					0

ANALYSIS BOX: This the LD Service Group Information Dashboard summarising the balanced scorecard safety & excellence reporting for; Fig 5. RQIA has undertaken 39 Inspections in the year to date as of 25/04/2017, previous year 32 inspections recorded with 84 recommendations. (R O'Connor).

LD Service Group Governance Dashboard – March 17



Fig 6
The Absence Rate Report

Absence Report & Target	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
ASPC Directorate - 7.06%	6.98%	7.01%	7.17%	7.13%	7.13%	7.26%	7.40%	7.53%	7.66%	7.74%	7.72%	7.72%
LD Service Group - 6.62%	6.45%	7.18%	8.10%	7.89%	7.86%	7.84%	8.05%	8.24%	8.49%	8.61%	8.61%	8.67%
MAH Services	9.28%	9.81%	10.42%	10.30%	10.15%	9.86%	9.92%	N/Avail	10.26%	10.29%	10.18%	10.12%
Day care / Res & SL	4.24%	5.39%	6.74%	6.52%	6.67%	6.78%	7.18%	N/Avail	7.78%	8.00%	8.13%	8.23%
Community Teams	3.42%	3.61%	3.82%	3.26%	2.99%	3.62%	3.65%	N/Avail	3.91%	4.04%	4.03%	4.43%
MH & LD OT	4.74%	3.01%	3.54%	4.06%	5.95%	5.48%	5.21%	4.83%	4.89%	4.98%	4.62%	4.98%
MH Medical Staff	4.74%	3.07%	6.29%		6.16%	6.06%	5.84%	5.85%	5.92%	5.92%	6.06%	6.33%

Fig 7
Quarterly RIDDOR Accident Report – January – March 2017

RIDDOR's reported – January, February and March 2017	Major Injuries	Over 3 day injuries
Learning Disability	0	6

ANALYSIS BOX: This the LD Service Group Information Dashboard summarising the balanced scorecard safety & excellence reporting

Fig 6. The Absence Rate Report, additional reporting MH Medical Staff and OT staff (S.Brady)
Fig 7. Quarterly RIDDOR accident report (V. Leggett)



Belfast Health and
Social Care Trust

COMPLAINTS & COMPLIMENTS

QUARTERLY REPORT

ADULT SOCIAL & PRIMARY CARE (JANUARY TO MARCH 2017)

During the period 1 January to March 2017 the Complaints Department managed **62** Formal Complaints, however consent on 14 remains outstanding. Therefore we will base our figures on **48** complaints received (this is an increase of 21 (77%) from the previous quarter. **19** General Enquiries (this is a decrease of 25 (57%) from the previous quarter for the Service Directorate.

9 revisited Formal Complaints (which is an increase equal to the previous quarter).

29 complaints were also recorded as resolved at local level (which is an increase of 16 from the previous quarter). The Complaints Department would appreciate notification of all complaints matters being resolved locally to allow for inclusion in future reports.

The following pages provide an overview of complaints activity for January to March 2017

Quarterly Comparison of Complaints (1 January to 31 March 2017)

Adult Social & Primary Care	Formal Complaint		General Enquiry	
	Jan to Mar 2017	Oct to Dec 2016	Jan to Mar 2017	Oct to Dec 2016
CAMHS	2	1	1	0
Learning Disability	8	5	0	7
Mental Health	16	7	8	22
Older People Services	21	14	10	15
Physical & Sensory Disability	1	0	0	0
TOTAL	48	27	19	44

 **Belfast Health and Social Care Trust**
Subjects of Complaints

Top Subjects — Adult Social & Primary Care	January to March 2017
Quality of Treatment and Care	16
Quantity of Treatment and Care	5
Staff Attitude/ Behaviour	7
Communication / Information to Patients	6
Professional Assessment of Need	3

Top Subjects — Adult Social & Primary Care	October to December 2016
Quality of Treatment and Care	9
Quantity of Treatment and Care	7
Staff Attitude/ Behaviour	6
Communication / Information to Patients	3
Discharge/ Transfer Arrangements	1

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Complaints Breakdown by Subjects for January to March 2017

	CAMHS	Learning Disability	Mental Health	Older Peoples Services	Sensory Support
Access to Premises	-	-	1	-	-
Aids/Adaptations/Appliances	-	-	-	-	-
Communication/Information	-	1	2	3	-
Contracted Regulated Domiciliary Agency	-	-	-	1	-
Confidentiality	-	-	-	-	-
Policy/Commercial Decisions	-	-	-	-	-
Clinical Diagnosis	-	-	-	-	-
Discharge/ transfer arrangements	-	-	2	-	-
Discrimination	-	-	1	-	-
Quality of Treatment and Care	1	5	5	5	-
Quantity of Treatment and Care	-	-	-	4	1
Staff Attitude/ Behaviour	-	2	1	4	-
Infection Control	-	-	-	-	-
Waiting List, Delay/Cancellation Outpatient Appointments	1	-	-	-	-
Waiting List, Delay/Cancellation Planned Admission to Hospital	-	-	1	-	-
Professional Assessment of Need	-	-	1	2	-
Property/Expenses/Finances	-	-	-	1	-
Waiting List, Delay/Cancellation Community Based appointments	-	-	3	-	-
Consent to Treatment and Care	-	-	-	-	-
Contracted Regulated Residential Nursing	-	-	-	-	-
Contracted Regulated Nursing Homes	-	-	-	-	-
Contracted Services (Other)	-	-	-	-	-
Other	-	-	-	1	-
TOTAL	2	8	17	21	1

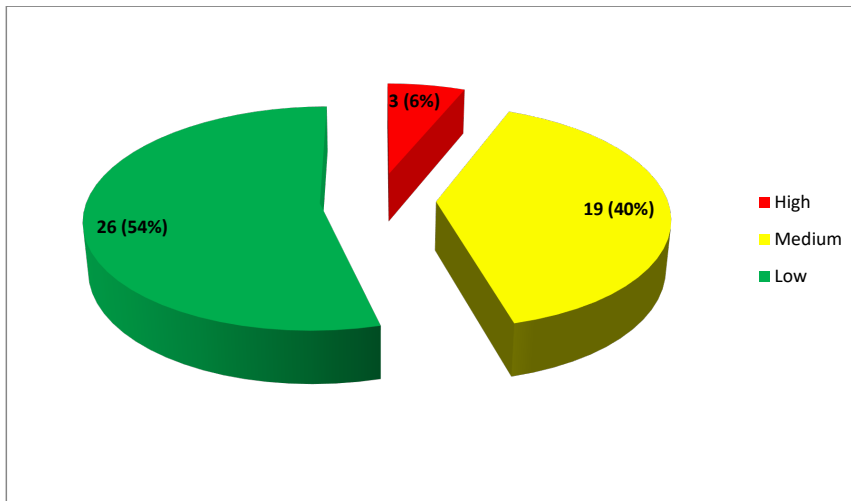


Grading of Complaints

All complaints captured across all sites and services are graded by Complaints Managers according to the Trust Risk Matrix. This determines response action at the outset of complaints handling. The grading noted below is the final grading for each formal complaint.

For comparison in October to December 2016 52% (14) of Formal Complaints were graded 'Low', 41% (11) were graded as 'Medium', 7% (2) were graded as 'High'

Formal Complaints Grading January to March 2017





Response Times

Quarter 3 has also been provided to give a comparison,.

	Quarter 4 (2016/17)		Quarter 3 (2016/17)	
	20 Working Days	30 Working Days	20 Working Days	30 Working Days
CAMHS	1 (50%)	2 (100%)	0	0
Learning Disability	5 (63%)	5 (63%)	2 (40%)	3 (60%)
Mental Health	5 (31%)	8 (50%)	0	1 (14%)
Older People Services	11 (52%)	13 (62%)	5 (31%)	7 (50%)
PHD & Sensory Support	1 (100%)	1 (100%)	0	0
TOTAL	23 (48%)	29 (60%)	6 (26%)	11 (41%)

20 working day response rate Quarter 4 – **48%** (this is an increase of **22%** from Quarter 3)

30 working days response rate Quarter 4 – **60%** (this is an increase of **19%** from Quarter 3)