

<b>Reporting to:</b>	<b>Trust Board, 3 December 2015</b>
<b>Title</b>	Complaints & PALS Report July - September 2015
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<b>Author(s)</b>	Jackie Harrison - Head of PALS & Complaints
<b>Previously considered by</b>	Quality & Safety Committee
<b>Executive Summary</b>	The purpose of this report is to provide the Trust Board with an overview of the formal complaints and PALS concerns received by the Trust during Quarter 2 (July - September 2015) and provide assurance that the Trust is handling complaints in accordance with the regulations. In quarter 2 the Trust received a total of 87 formal complaints. The Trust continues to maintain a high performance in responding to complaints with 93% of complaints being closed within the agreed timescales during this quarter.
<b>Strategic Priorities</b> <input checked="" type="checkbox"/> Quality and Safety <input type="checkbox"/> Healthcare Standards <input type="checkbox"/> People and Innovation <input type="checkbox"/> Community and Partnership <input type="checkbox"/> Financial Strength	<b>Operational Objectives</b> Deliver all key performance targets.
<b>Board Assurance Framework (BAF) Risks</b>	<input checked="" type="checkbox"/> Deliver Safe Care or patients may suffer avoidable harm and poor clinical outcomes and experience <input type="checkbox"/> Achieve safe and efficient Patient Flow or we will fail the national quality and performance standards <input type="checkbox"/> Clear Clinical Service Vision or we may not deliver the best services to patients <input type="checkbox"/> Good levels of Staff Engagement to get a culture of continuous improvement or staff morale and patient outcomes may not improve <input type="checkbox"/> Appoint Board members in a timely way or may impact on the governance of the Trust <input type="checkbox"/> Achieve a Financial Risk Rating of 3 to be authorised as an FT
<b>Care Quality Commission (CQC) Domains</b> <input checked="" type="checkbox"/> Safe <input type="checkbox"/> Effective <input type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input type="checkbox"/> Well led	<b>Outcomes</b> Standard 17
<b>Recommendation</b>	The Board is asked to: <input checked="" type="checkbox"/> <b>Receive</b> <input checked="" type="checkbox"/> <b>Note</b> <input checked="" type="checkbox"/> <b>Review</b> <input type="checkbox"/> <b>Approve</b>

# COMPLAINTS & PALS REPORT JULY - SEPTEMBER 2015

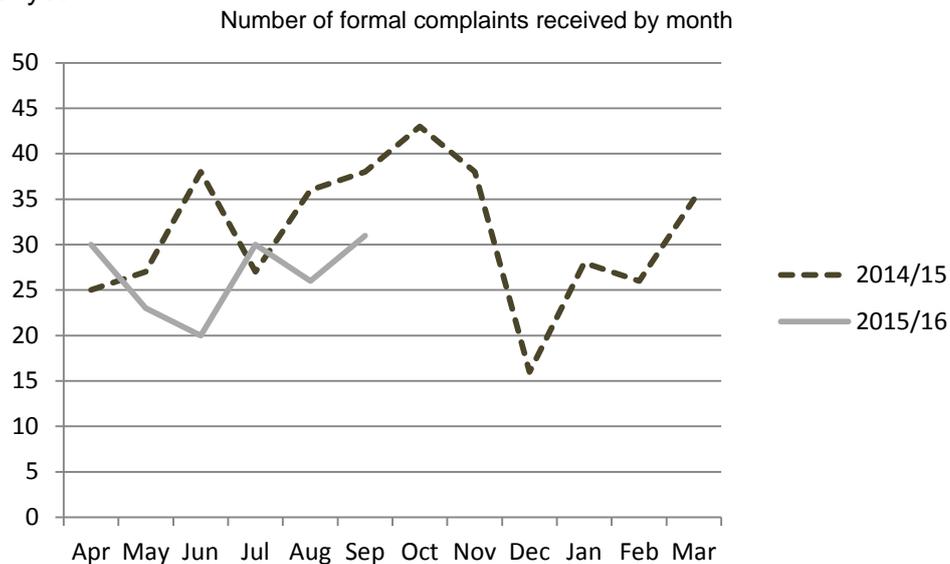
## 1. Introduction

The purpose of this report is to provide the Trust Board with an overview of the formal complaints and PALS concerns received by the Trust during Quarter 2 (July - September 2015). The report outlines the Trust's performance and includes the trends and themes arising from complaints and PALS contacts.

## 2 Formal complaints received

In Quarter 2, the Trust received a total of 87 formal complaints, a rise of 19% (14) from the previous quarter. However, in the first 6 months of the year we have seen a 16% reduction in the number of formal complaints received compared to the same period in 2014.

The graph below shows the number of formal complaints received by month in comparison with the previous financial year.



## 3 Performance

The Trust continues to maintain a high performance in responding to complaints with 93% of complaints closed within the agreed timescales during this quarter. Where the Trust is unable to respond within the response time initially agreed with the complainant, the complainant is kept fully informed of any delays and a new response date agreed. 32% of the complaints closed during the quarter were upheld, 37% were partly upheld and the remaining 31% not upheld by the Trust.

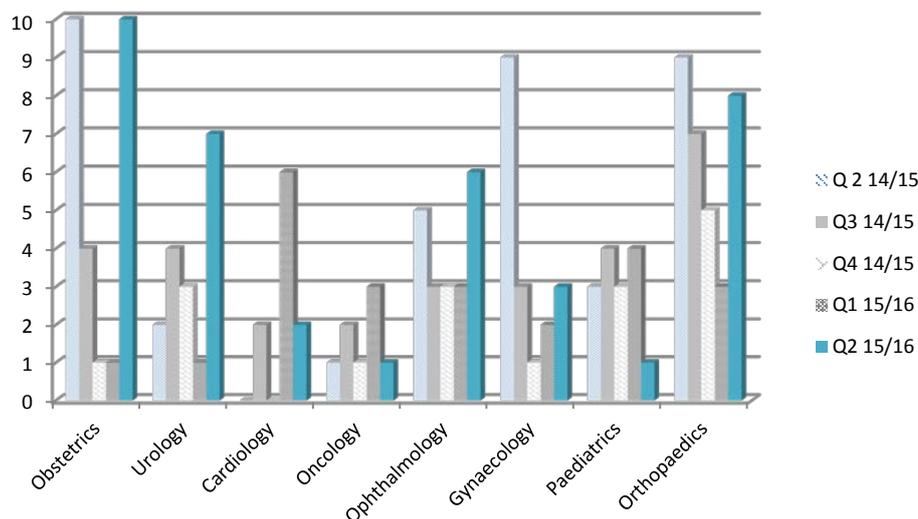
## 4 Formal complaints by specialty

The top specialties receiving complaints during the quarter were:

Emergency Medicine	16
Obstetrics	10
Orthopaedics	8
Acute Medicine	8
Urology	7
Ophthalmology	6

The graph below shows the overall trend of the specialties that received the highest number of complaints last year. The graph does not include Acute Medicine, Emergency Medicine and General Surgery as these specialties will have a higher number of complaints due to their level of activity.

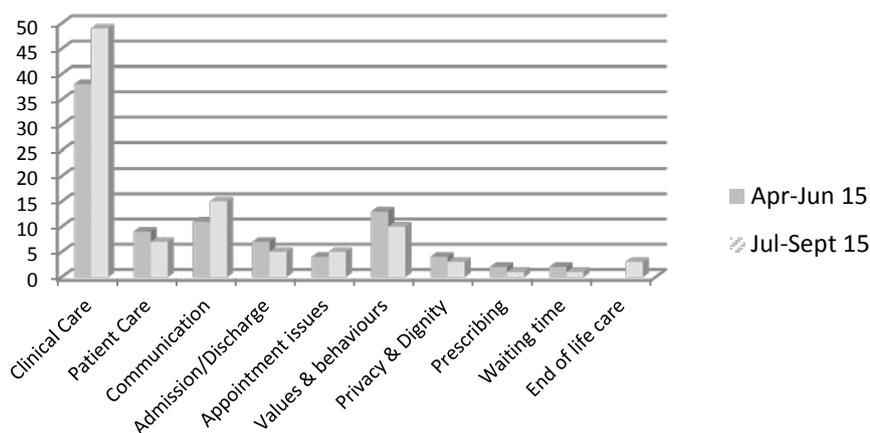
## Formal complaints received by Specialty



## 5 Key themes

In April 2015, the Department of Health increased the frequency of complaints data collection and at the same time, introduced new subject codes for use by all Trusts. This has resulted in a change of the way in which the Trust records key themes identified in complaints which makes it difficult to draw comparisons with previous years.

## Key themes



Clinical care/treatment relates to all aspects of a patient's treatment, both medical and nursing. Of the 49 complaints relating to clinical care, 36 relate to medical treatment, 7 to nursing, 5 to midwifery care and 1 to Allied Health Professionals. Pain management continues to feature as a theme arising in complaints with 5 complaints this quarter (8 complaints in the previous quarter); 2 of these relate to care in labour.

Complaints relating to diagnosis and treatment include:

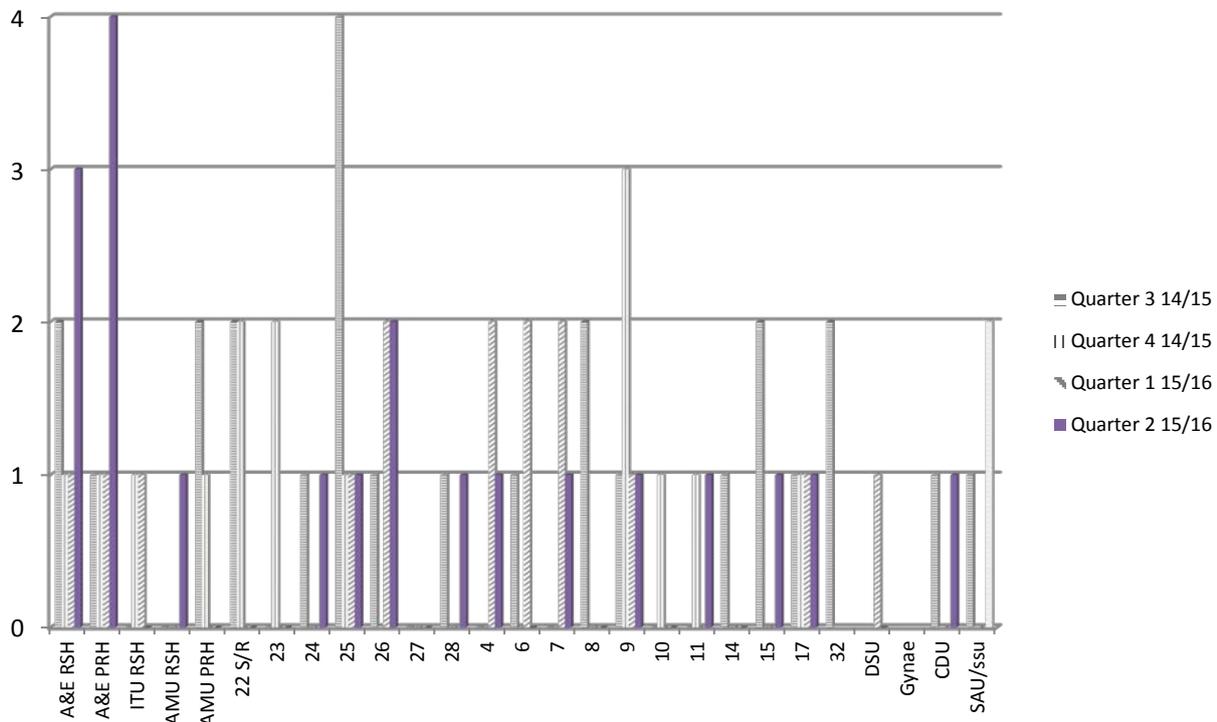
- Missed fractures - 3
- Alleged delay in diagnosis of cancer
- Alleged failure to detect DVT
- Failure to completely remove splinter from wound
- Damage to coccyx during labour
- 4<sup>th</sup> degree tear during labour
- Bladder perforation during cystoscopy

Patient care issues include falls, food/fluids left out of reach (1), care needs not adequately met and failure to adopt appropriate infection control measures (nurse – 1, medical staff - 1).

Issues that continue to feature in complaints about nursing care are pain relief, hygiene, record keeping, frequency of observations undertaken, discharge planning and communication with relatives.

## 6. Formal complaints by location

The following wards/departments have received complaints relating to nursing care, attitude of nursing staff or communication involving the nursing team during the quarter. Matrons and Head of Nursing are kept informed and where trends are emerging work alongside the Ward Managers to address this.



## 7. Actions and learning from complaints

- The Emergency Department plan to undertake an audit of compliance with head injury guidelines
- Robust system introduced to monitor the condition of any pot holes on site.
- Electronic appointment system introduced for new mothers wishing to access the TalkAbout session with a midwife.
- Additional clinics established in ENT
- Where a consultant is on leave, colleagues will now review and sign letters to avoid delays in communication with GPs
- Introduced standard approach to the care of patient with haematuria

## 8. Parliamentary & Health Service Ombudsman (PHSO)

Where a patient or relative remains dissatisfied following the Trust's response to their complaint, they may forward their complaint to the Parliamentary & Health Service Ombudsman for review. On receipt the Ombudsman will undertake an assessment and may take the following options:

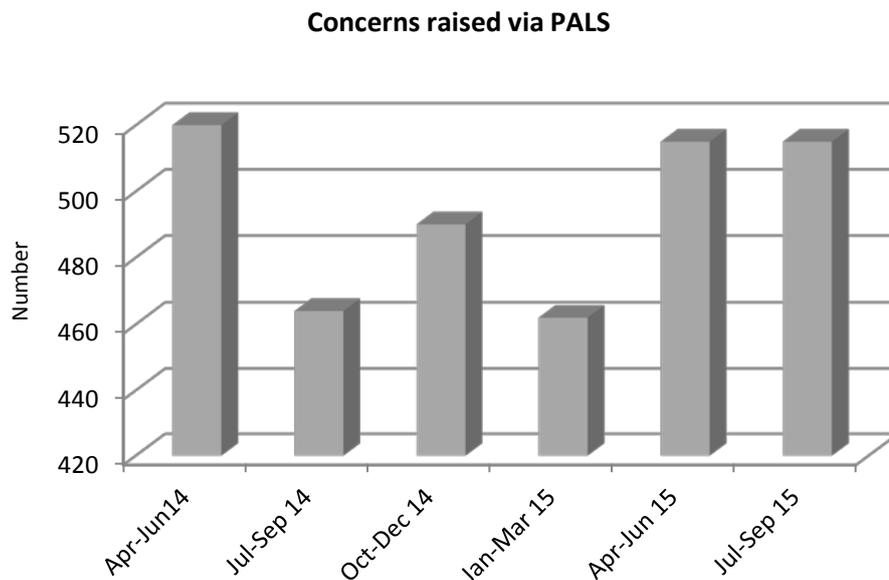
- Ask the Trust to take further steps to resolve the complaint
- Close the case without investigation
- Decide to investigate the case further.

During the quarter, the Trust was notified of 1 case referred to the Ombudsman.

In quarter 2, the Ombudsman concluded 3 investigations – 1 was not upheld with the remaining 2 being partly upheld. In the latter, the Trust developed action plans to address the failings which related to the assessment of pain in a patient who attended the Emergency Department and the availability of appointments in Ophthalmology. All other cases remain under investigation.

## 9. PALS

PALS is the first point of contact for patients and relatives wishing to raise concerns about their care and with prompt help these can often be resolved quickly. The majority of contacts are by telephone or in person. During quarter 2, the PALS team handled 515 concerns, the same as in the previous quarter. The graph below shows a comparison with previous quarters.



### **PALS Case**

The patient's family contacted PALS when the patient's PICC line became dislodged and when they contacted the hospital they were told that there was nobody on duty who could replace it until after the weekend. Once it was re-inserted it again became dislodged and this had consequential effect on when the patient could receive his next course of chemotherapy. With the involvement of PALS liaising with the Oncology Nursing team and Radiology an early appointment was made for the patient to have a Hickman line inserted and the patient's chemotherapy recommenced the same day. As a result the Oncology department intends to review the information/guidance that is given to patients.

### **Main themes arising from the concerns raised via PALS**

- Appointments
- Concerns about the patient's medical treatment and pathways.
- General attitude of staff

The majority of PALS contacts relate to concerns about access to care and appointment issues predominantly in the following specialties due to capacity constraints: Ophthalmology, Pain service, Orthopaedics and Oral Surgery. The PALS Manager will be providing Centre Managers with more in depth analysis of the concerns received in these areas.

### **PALS Case**

The PALS team were contacted by a patient's family seeking help as the felt their loved one's immediate care needs of feeding, having a bath/shower, were not being met, that the patient was lonely as she was in a side room and she was some distance from home. The family did not feel that these basic fundamental requirements were being met and wanted the care transferred to another hospital. Although the staff had already met with the family the PALS team worked with the Matron and the family to reach a resolution. Although initial request was to transfer the patient to another hospital due to the time spent with this family and the changes put in place this was no longer necessary. This is a good example of where PALS and the ward have worked well together to support a family and turn a strained relationship round to become a positive one for the benefit of the patient and family.

## **10. Patient Feedback**

In addition to the feedback we receive via PALS, patients and relatives may publish and share their views of the hospital and their care on the NHS Choices website. Once a patient or carer publishes their comments, these are all acknowledged by the PALS team and forwarded to the relevant department. The information posted on NHS Choices is anonymous and sometimes it is not possible to identify any further details such as the speciality involved or the location.

During July – September, 38 comments were published on the NHS Choices website, 71% of these were positive, 18% were negative and 11% had a mixture of positive and negative feedback. It is encouraging to see that many of the positive comments praised staff for the high standard of care received. Areas that received several positive comments were the Emergency Department, Therapies, Surgery and Acute Medicine. The negative comments focused mainly on the waiting time for appointments and treatment.

### **Brilliant basics....Magic touches**

*"My son recently broke his hand, then with luck against him two days later he broke his leg. Every single member of staff we met at the hospital was absolutely wonderful, from receptionists, triage nurses, doctors, radiographers, and plasterers. I would like to congratulate your whole team for its excellent care, we didn't have long waits in the A& E or at any of the follow up appointments."*

*"I gave birth to my daughter on the consultant led unit. Every single member of staff was amazing during a not particularly straightforward labour. Amongst other things, I lost almost 2 litres of blood and had a raised temperature so my baby and I had to spend 3 nights on the postnatal ward to be treated for an infection as a precaution. Again, every single member of staff was excellent. All involved in our care from start to finish were professional, caring and treated us with dignity. The new women and children's unit is an excellent facility and I was impressed with the standards of cleanliness and hygiene. Due to the problems in labour having an impact on breastfeeding, we have had to see the lactation experts on the MLU who have been so supportive and thanks to them, my baby's feeding and weight issues are now resolving. I cannot thank everyone enough for what they did for us and thanks to their care and dedication I have a beautiful, healthy baby girl asleep in my arms as I write this."*

### **Letters of thanks**

In addition to the feedback give via NHS Choices and the Trust's website, 25 letters of thanks and appreciation were received by the Chief Executive during the quarter. This is in addition to the cards and letters sent to wards and individual members of staff. Each letter received by the Chief Executive is acknowledged and a copy of the letter sent to the ward, department or individual involved.

### **Extracts from a selection of letters**

*"I cannot possibly leave ward 11 without attempting to express my gratitude to you and all the staff who have attended to my needs during my stay. Skills can be taught; attitude cannot, and it is the overall kindness and consideration and no little humour, which I have been treated that will endure in my memory."*

*"I attended the Acute Referral Clinic yesterday and received the most perfect, thorough and courteous treatment one could imagine. Nothing was too much trouble. Everything was exceptional, unhurried and kind. I felt that had I been royalty I could not have had better attention."*

### **Conclusion**

The Board is asked to consider the report and note its findings.