

Reporting to:	Trust Board, 30 June 2016
Title	Complaints & PALS Annual 2015-2016
Sponsoring Director	Sarah Bloomfield - Director of Nursing & Quality
Author(s)	Jackie Harrison - Head of PALS & Complaints
Previously considered by	Quality & Safety Committee
Executive Summary	<p>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 the year 2015-2016 and provide assurance that the Trust is handling complaints in accordance with the regulations.</p> <p>Overall, the Trust has continued to see a downward trend in the number of formal complaints receiving a total of 317 complaints in the year. The Trust has also maintained its performance in responding to complaints in a timely manner. The report demonstrates the learning and actions arising from complaints received.</p>
Strategic Priorities <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	Operational Objectives Deliver all key performance targets.
Board Assurance Framework (BAF) Risks	<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
Care Quality Commission (CQC) Domains <input checked="" type="checkbox"/> Safe <input type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input type="checkbox"/> Well led	Outcomes Standard 17
Recommendation	The Board is asked to: <input checked="" type="checkbox"/> Receive <input checked="" type="checkbox"/> Note <input checked="" type="checkbox"/> Review <input type="checkbox"/> Approve

ANNUAL COMPLAINTS & PALS REVIEW

2015-2016

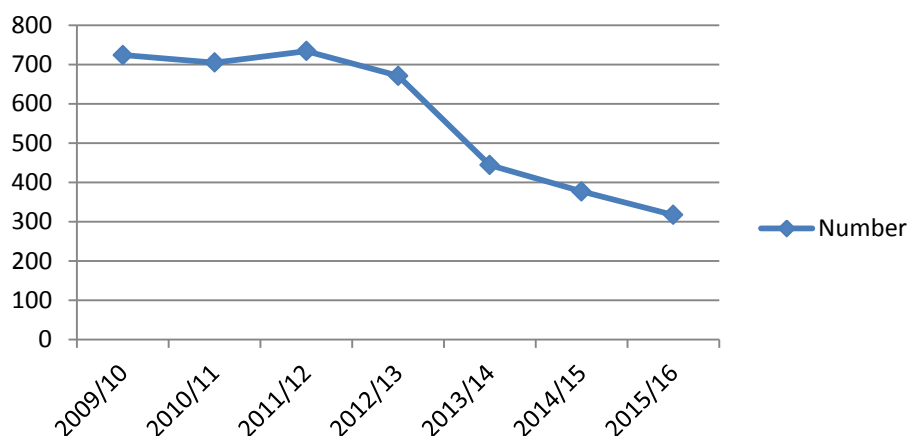
1. Introduction

The purpose of this report is to provide the Trust Board with an overview of the formal complaints received by the Trust and feedback received via PALS concerns during the year April 2015 to March 2016. The report outlines the Trust's performance and includes the trends and themes arising from complaints and patient feedback.

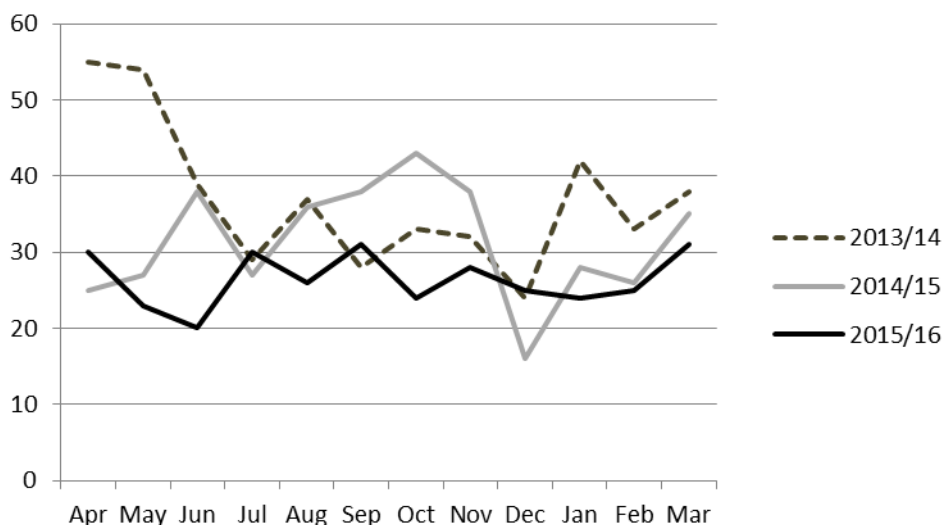
2. Formal Complaints received

During the year the Trust received a total of 317 formal complaints; a reduction of 15% (377) from the previous year. The graph below shows the number of complaints received over the last 7 years demonstrating the downward trend. Over the last two years the Trust has been more proactive in encouraging patients, families and carers to give their feedback enabling staff to resolve concerns as they arise. This has resulted in concerns being resolved at a much earlier stage rather than the need to make a formal complaint and has led to a continued downward trend in the number of formal complaints received.

Number of formal complaints



The following graph shows the number of formal complaints received by month in comparison with the previous financial years. The number of complaints received per month has been fairly consistent during the year in comparison with peaks of activity in previous years.



3. Performance

Acknowledgment

The Trust is required to acknowledge all complaints, either verbally or in writing, within 3 working days of receipt, in accordance with statutory regulations. The Trust achieved 100% compliance with this standard. Following receipt of the complaint the Case Manager handling the complaint will contact the patient/relative by telephone; this provides an opportunity for personal contact by the Case Manager and enables them to clarify the issues for investigation, discuss expectations, explain the investigation process and agree timescale for response. This is followed up with a written acknowledgment.

Response time

The timescale for responding to each complaint is dependent upon the nature of the issues raised and the level of investigation required. For the majority of complaints the Trust aims to respond within 30 working days; for more complex complaints, for example, those involving a number of different specialties/organisations or a serious incident that requires a root cause analysis, a longer timescale for response is agreed with the complainant allowing time to undertake a thorough and fair investigation – this may take up to 60 working days to complete. During the year the Trust responded to 90% of complaints within the timescale initially agreed. Where delays occurred, regular contact was made with the patient/family to keep them updated.

Formal complaints received per 1,000 occupied bed days

	2013/14	2014/15	2015/16
Formal complaints received	444	377	317
Formal complaints per 1,000 occupied bed days	1.7	1.2	1.1

Of the 317 complaints received 26% were fully upheld, 34% were partly upheld and 39% not upheld by the Trust.

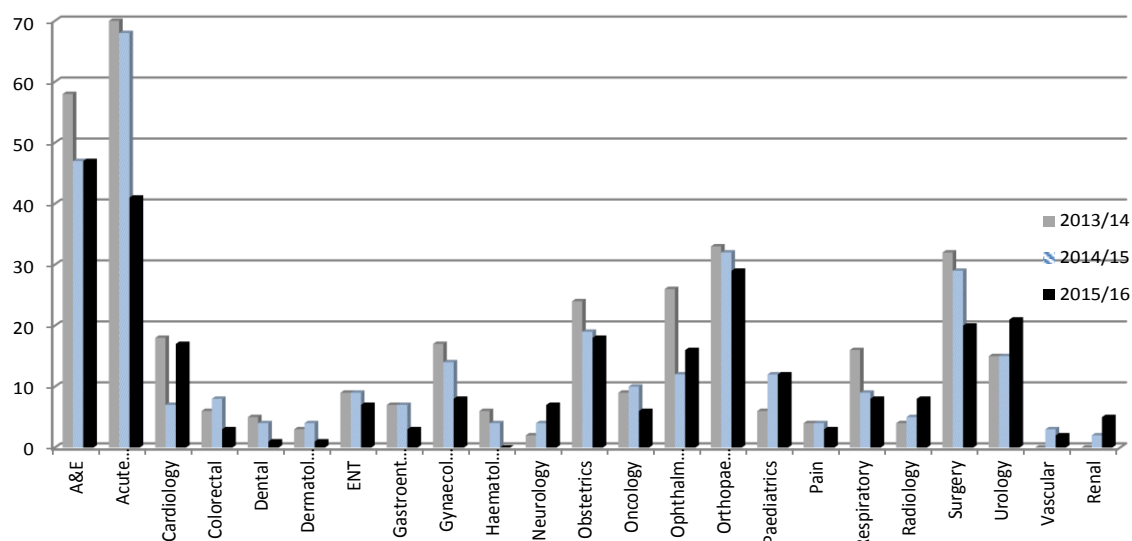
4. Formal complaints by specialty

The top specialties receiving complaints during the year were:

Emergency Department	47	(0.4 per 1,000 patients seen)
Acute Medicine	41	(0.4 per 1,000 bed days)
Orthopaedics	29	(1.0 per 1,000 bed days)
Urology	21	(3.0 per 1,000 bed days)
General Surgery	20	(0.7 per 1,000 bed days)
Obstetrics	18	(1.2 per 1,000 bed days)
Cardiology	17	(1.8 per 1,000 bed days)
Ophthalmology	16	(no data for comparison)

The following graph identifies the specialties receiving formal complaints during the year in comparison with previous years.

Formal complaints by specialty

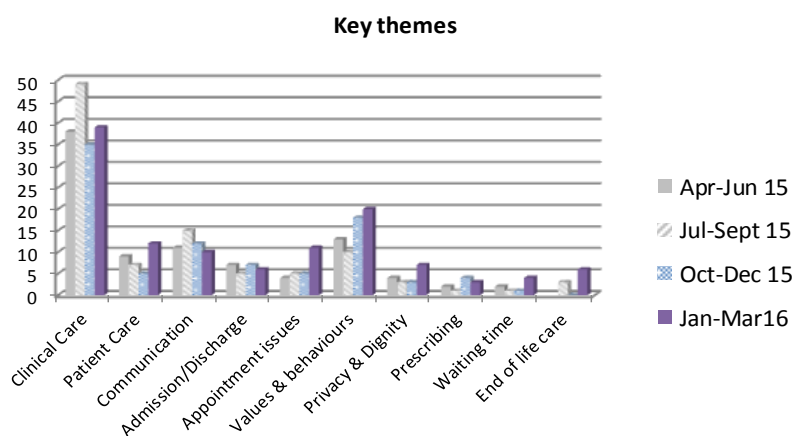


Due to the high volume of patients seen and the nature of the specialty, some areas consistently receive a higher number of complaints than others. Nevertheless, Acute Medicine and Surgery have seen a significant fall in the number of complaints received, whereas other specialties have been fairly consistent with previous years. In comparison with patient activity, Urology continues to receive a higher number of complaints than other specialties and details of all complaints relating to Urology are being reviewed by the Care Group Medical Director to identify trends and themes.

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 means that changes have been made to the way in which the Trust records key themes identified in complaints to meet Department of Health requirements; because these changes are so significant it makes it difficult to draw comparisons with previous years in some areas.

Each complaint may be multi-faceted, particularly where the complaint relates to inpatient care that involve the multidisciplinary team or events over an extended period of time. Each issue identified in the complaint is recorded which means that the total number of issues will exceed the number of formal complaints received. The graph below shows the number of complaints for the main themes identified in the complaints received each quarter.



Clinical care

Complaints that fall into this category may involve aspects of clinical care provided by health professionals, medical nursing/midwifery or allied health professionals. They involve complaints about the patient's diagnosis and treatment, complications that may arise either during or after treatment, pain management, as well as the management of labour and pregnancy complications.

During the year there were 161 complaints that fell into this category. The majority of these concern the patient's diagnosis and treatment and post treatment complications.

Patient Care

Complaints within this category may include complaints about patient falls, nutrition and hydration, infection control measures, hygiene, and pressure area care. The Trust received 31 complaints during the year where patients were concerned about this aspect of their care. All but one of these complaints involved the care provided by nursing and midwifery staff.

The majority of these complaints were related to:

- Patient falls
- Lack of oral hygiene
- Basic care needs not adequately identified or met
- Call bell left out of reach
- Concerns about nutrition and hydration

Values & behaviours

This category may include complaints about staff attitude, professional behaviour, failure of staff to introduce themselves and breaches of confidentiality

During the year, year the Trust received a total of 58 complaints relating to the values and behaviours displayed by staff; 51 of these about staff attitude. In comparison with the previous year, there was a 37% reduction in the number of complaints received about staff attitude (81 in 2014/15). Of the 51 complaints received about staff attitude, 55% (28) of these involved medical staff; 5 relate to staff working in Urology, 4 Paediatrics and 4 Orthopaedics. 43% (22) of the complaints about staff attitude involved nursing and midwifery staff - there were no trends identified with these. Complaints involving medical staff attitude reduced from 37 in 2014/15 to 28 this year, and those involving nurses and midwives from 43 in 2014/15 to 22.

Admission & Discharge

As the title suggests this category includes all complaints relating to a patient's admission and discharge plans. During the year the Trust received 25 complaints in the category. These included complaints about multiple moves whilst the patient was in hospital, delayed admission due to capacity, lack of discussion with relatives about the completion of the Continuing Healthcare Checklist, discharge at an inappropriate hour, lack of discharge planning and patients who felt that they were discharged too early.

Communication

This category includes all aspects of communication, both written and verbal and may relate to communication failures with the patient or family, between staff, communication with the GP and delays in receiving test results.

During the year the Trust received 47 complaints where communication was a prominent feature, compared with 57 last year. Complaints received included breakdown in communication between staff impacting upon the patient's care, lack of empathy when breaking bad news and failures to communicate the patient's treatment plan with either the patient or their relatives. The specialties where communication issues were higher than others were Urology (7), Acute Medicine (6), Orthopaedics (6) and Oncology (4).

Waiting time

This category includes complaints about waiting time in the Emergency Department and outpatient departments, as well as complaints about waiting time for an appointment or admission. During the year the Trust received a total of 8 complaints; 4 of these relate to waiting time in the Emergency Department, whilst the remaining 4 related to outpatient attendances.

Complaints involving medical staff

Overall, during the year there were 187 complaints received involving medical staff, the majority of these were about the patient's clinical care.

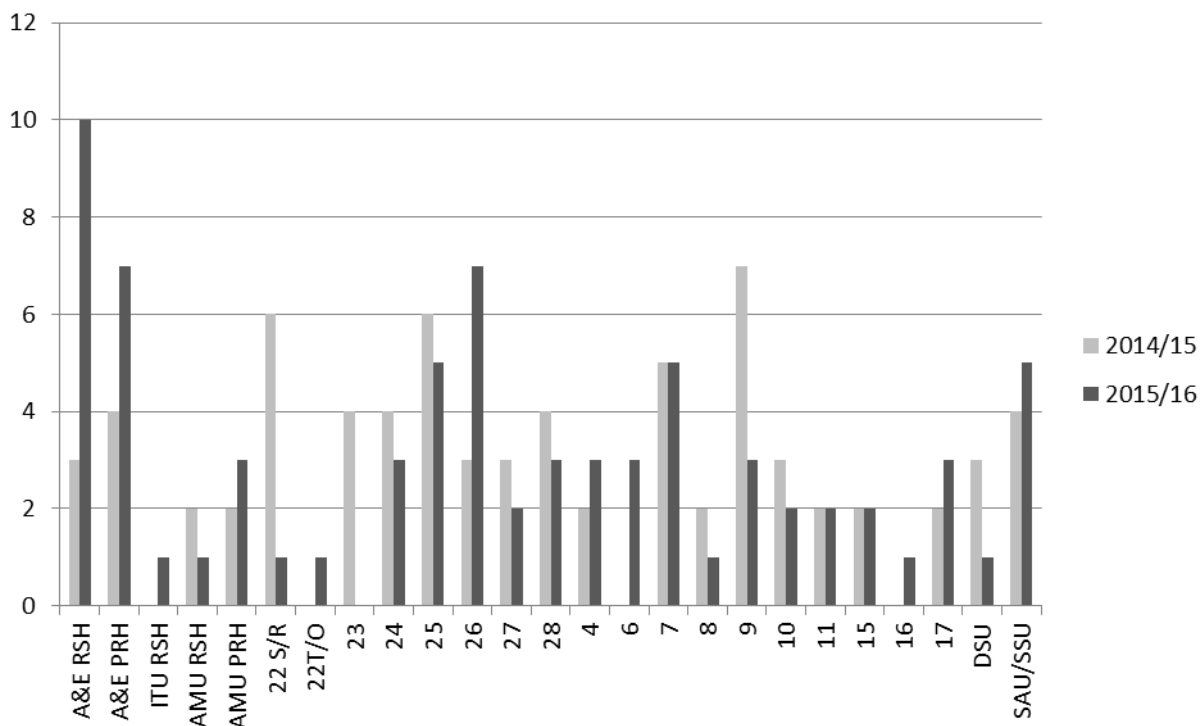
The main specialties receiving complaints about medical staff were:

Accident & Emergency	34 - (23 PRH – 11, RSH) 29 were complaints about clinical care (21 PRH), 1 prescribing 3 complaints were made about medical staff attitude and 1 communication.
Orthopaedics	22 – the majority involving clinical care including diagnosis and complications, 3 consent to treatment, 3 x communication and 4x attitude
Urology	21 – the majority relate to clinical care – delay in diagnosis, complications, lack of sedation during procedure, communication and attitude
Acute Medicine	16 – the majority relate to clinical care, 1x End of life care and 1 x communication
Surgery	12 – most of these relate to diagnosis and treatment, 2x attitude and 1 communication

6. Formal complaints involving nursing staff by location

The following wards/departments have received the highest number of complaints involving nursing staff – this includes care, communication, admission and discharge, privacy & dignity and attitude.

Formal complaints relating to nursing care by ward/department



Areas with the highest number of complaints involving nursing staff were A&E at both sites and ward 26; all 3 areas have seen a significant increase from the previous year. Complaints about staff attitude feature with

both ward 26 and A&E at the Royal Shrewsbury Hospital. Heads of Nursing and Matrons are aware of the wards receiving a higher number of complaints and are working closely with Ward Managers to address this.

7. Actions and learning from complaints

The Trust recognises the importance of learning from complaints and using the valuable feedback obtained to reflect on the care we provide and take steps to improve services for future patients. When service improvements are identified following investigation of a complaint, staff now develop action plans that are monitored until complete.

Some of the significant changes made as a result of complaints received are as follows:

- 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
- Staff in ITU have received training in the care of patients with spinal injuries
- Electronic appointment system introduced for patient attending the Nurse led cardiology clinic
- Patients who require admission and remain in A&E for over 4 hours and are at risk of developing pressure ulcers are now nursed on the appropriate mattress.
- Second CT scanner installed to reduce delays in radiology appointments.
- New prescribing policy introduced in A&E
- Closer liaison between health professionals to ensure the smooth admission process for patients with learning difficulties
- Review of guidelines and information given to parents about sleeping arrangements for their new baby
- Review of theatre procedures to ensure correct site of anaesthetic block
- PEG care training has taken place
- A pathway is being developed for patients who have problems with their jejunostomy tube out of hours.
- Maternity will update their transfer of patient standard operating procedure making it clear that maternal and fetal observations should be undertaken immediately prior to transfer and within 5 minutes of arrival.
- A review is being undertaken to ensure that the Antepartum haemorrhage guidelines reflect current NICE guidelines
- Additional weighing scales have been purchased by the Fertility Department for each consultation room
- The Midwifery Led Unit intrapartum guidelines have been updated to ensure that they conform to NICE guidance in relation to the frequency of intermittent fetal heart monitoring
- The Maternity Unit are updating their formal handover guidelines
- The Neonatal unit are developing a standard operating procedure for neonatal transfers.
- The Fertility department have increased the length of their first medical appointment slots to allow additional time for discussion with the doctor prior to any examination
- Changes have been made to the clinical outcome forms used by vascular surgery to ensure that patients receive notification of their surveillance scans.

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. If the Parliamentary & Health Service Ombudsman accepts the complaint they undertake their own investigation seeking clinical advice, where appropriate, prior to issuing their findings and recommendations.

Of the 317 formal complaints received during the year, only 1 has been referred to the Parliamentary & Health Service Ombudsman for investigation. This case is currently in the process of investigation.

In addition, 8 other complaints received in previous financial years were also referred to the Parliamentary & Health Service Ombudsman. 3 of these investigations were partly upheld and 3 not upheld. The remaining 2 complaints remain under investigation.

8 other investigations that were referred to the Parliamentary & Health Service Ombudsman in previous financial years were finally concluded during 2015/16; 3 cases were not upheld, 4 were partly upheld and 1 was upheld. In all but one case that was upheld or partly upheld the Ombudsman was satisfied that the Trust had already taken action to address any failings identified. In the remaining case, the Care Group involved identified actions required and this case is currently being monitored until the actions are complete.

9. PALS

The Patient Advice and Liaison Service offers an 'on the spot' service to patients, relatives and carers and is often the first point of contact when members of the public who wish to raise concerns about their care or seek advice. When patients or families contact PALS, the team are guided by the wishes of the caller and in the event that the patient or relative wishes to raise a formal complaint, the team will provide assistance and advice and refer the issues to the Complaints team. Often with prompt advice and intervention, the majority of these issues can be resolved to the satisfaction of all concerned.

During the year, PALS has assisted 1,957 patients/relatives resolving concerns about their care/pathway compared with 1,935 the previous year. As with the previous year, the team has continued to ensure that they record actual concerns raised by patients and families rather than recording callers who are simply asking for general advice, such as directions within the hospital etc.

Main themes arising from the concerns raised via PALS

- Appointments – calls relating to delays in receiving appointments and capacity issues in some specialties, errors with appointment times/arrangements, appointments being sent with short notice of clinic date, lack of communication when appointments are rescheduled patients being unable to make contact with departments to arrange appointments or change existing appointment times.
- Cancellation of appointments or operation.
- Communication issues – conflicting information being given regarding care,

9. 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, the comments are acknowledged by the PALS team and forwarded to the relevant department for action. All comments that are posted on the website are anonymous and often it is difficult to identify which specialty or ward the issues refer to so patients/relatives are encouraged to contact the PALS team so that their concerns can be addressed.

During the year, there were 166 comments shared on NHS Choices about the Trust compared to 187 in the previous year. 75% of patients who posted comments shared details of their positive experience, 10% shared a mix of positive and negative comments and 14% had a negative experience.

It is encouraging to see that the majority of positive comments praised staff for the high standard of care received reflecting the findings of the Care Quality Commission.

Patients told us that these are the things that we did well

- Staff are attentive, kind, professional and caring
- Staff will go 'the extra mile' and staff went out of their way to accommodate a patient with learning difficulties and enhanced their journey
- Staff provide support and comfort to families following the loss of a loved one
- Staff made patients feel important
- Staff took time to explain everything

Patients told us that we need to improve:

- The length of time patients wait for an appointment

- The number of outpatients appointments we cancel
- The times that we give patients conflicting information

In addition to the feedback give via NHS Choices and the Trust's website, 115 letters of thanks and appreciation were received by the Chief Executive during the year. 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.

"Extremely likely to recommend. I was clearly instructed and led to the right location and treated with courtesy and good humour. Great credit to the NHS."

"I was brought into A&E last Sunday following a collapse. I thought I should write to tell you how impressed and thankful I was for the care I was given. I was seen immediately and from then on, had constant care and attention.....I received constant care, kept advised at all stages and generally made to feel at east at all times".

"I wish to thank all the staff for the wonderful care given to my father during his last days. He died in peach and with as much dignity that could be afforded in a very busy ward. All of the staff were attentive and kind to all of us throughout this sad time for which we are very grateful".

11. Conclusion

The Trust has maintained its progress during the year in improving the handling complaints and using the feedback received to drive improvements in patient care.

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

Jackie Harrison
Head of PALS & Complaints
June 2016

