

Reporting to:	Trust Board
Title	Q1 Complaints & PALS Report: April - June 2015
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 Quarter 1 (April - June 2015) and provide assurance that the Trust is handling complaints in accordance with the regulations.</p> <p>In quarter 1 the Trust received a total of 73 formal complaints compared with 100 in the corresponding period last year. The Trust continues to maintain a high performance in responding to complaints with 92% of complaints being closed within the agreed timescales during this quarter.</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 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

COMPLAINTS & PALS REPORT APRIL – JUNE 2015

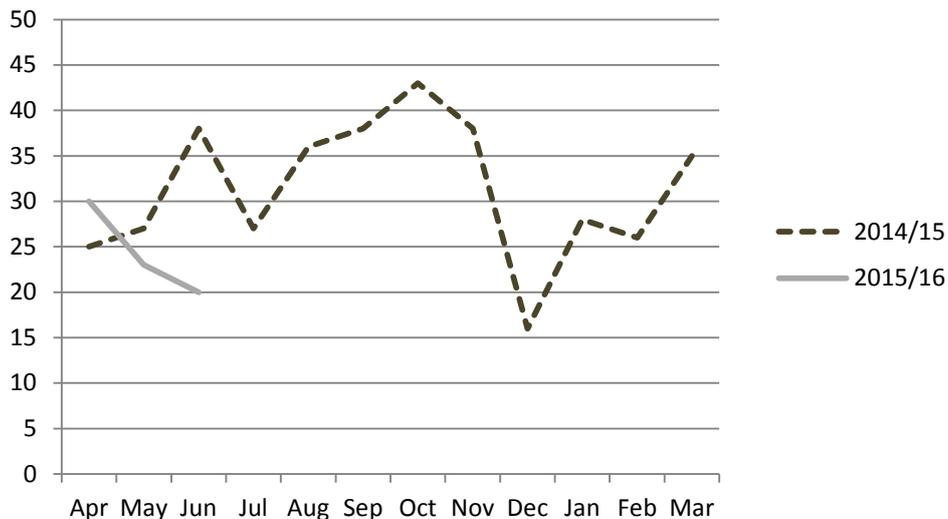
1. Introduction

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 1 (April – June 2015). The report outlines the Trust's performance and includes the trends and themes arising from complaints and PALS.

2 Formal complaints received

In Quarter 1, the Trust received a total of 73 formal complaints compared with 100 in the corresponding period last year.

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 92% of complaints being 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.

The number of formal complaints received during the quarter equated to 1.1% per 1,000 bed days (total - 1.2 per 1,000 in 2014/15).

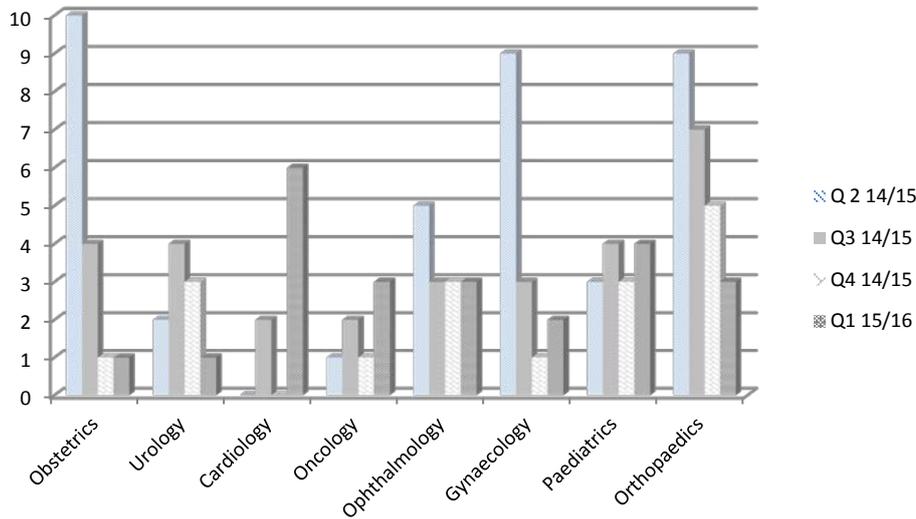
Of the complaints received, 32% were upheld, 26% were partly upheld and the remaining 42% not upheld by the Trust.

4 Formal complaints by specialty

The top specialties receiving complaints during the quarter were:

Acute Medicine	10
Emergency Medicine	11
Surgery	6
Cardiology	6
Paediatrics	4

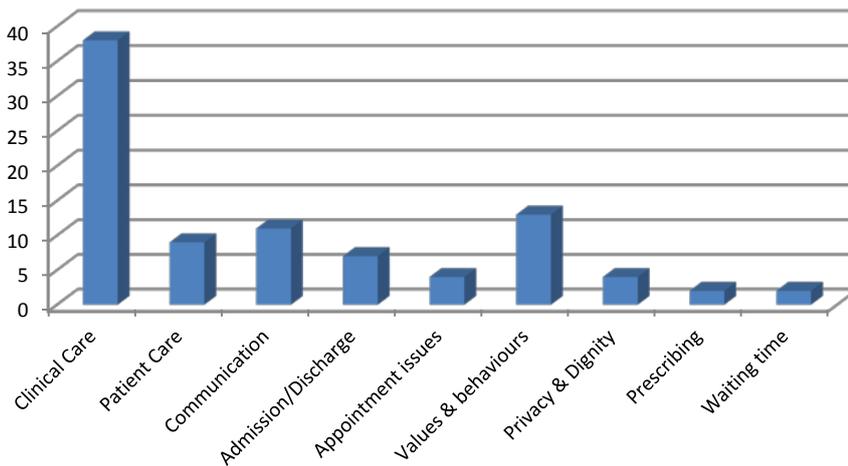
The graph below shows the overall trend of the specialties that received the highest number of complaints last year. The graph does not include Acute Medicine, Emergency Medicine and Surgery as these specialties will have a higher number of complaints due to their level of activity.



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.

Quarter 1 - Key themes



Clinical care/treatment relates to all aspects of a patient's treatment, both medical and nursing. Of the 38 complaints, 28 relate to medical treatment whereas the remaining 10 relate to treatment provided by the nursing team. Pain management continues to feature as a theme arising in complaints, as seen in previous quarters (8 complaints in this quarter); this relates to delays in receiving pain relief, assessment of pain and overall management of pain. This is currently being reviewed by the Director of Nursing & Quality.

Complaints relating to diagnosis and treatment include:

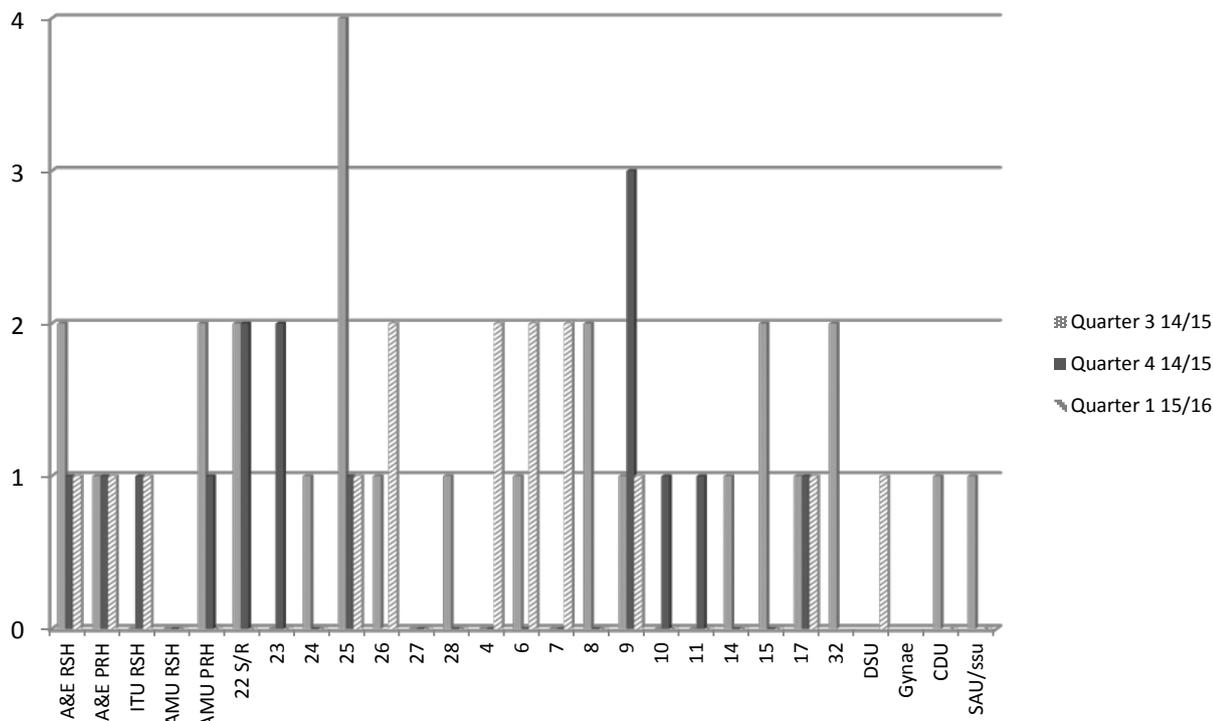
- Missed fractures
- Alleged delay in diagnosis of appendicitis
- On-going pain following shoulder surgery
- Delay in diagnosis of lis franc injury
- Anaesthetic block given in wrong site
- Haematoma following implantation of biventricular ICD

Patient care issues include food/fluids left out of reach, call bell left out of reach, falls, pressure ulcer care and care needs not adequately met.

Nursing issues have shown a steady fall over the last few quarters. Issues that continue to be highlighted in complaints are pain relief, hygiene, record keeping, failure to act on abnormal results, failure to record fluid balance, falls, noise at night and discharge planning.

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

- 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

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:

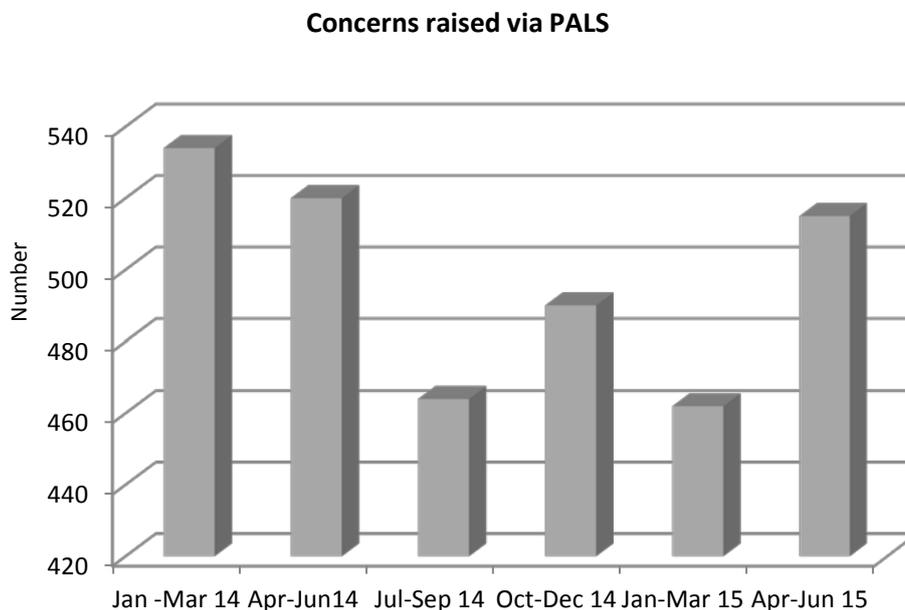
- Ask the Trust to take further steps to resolve the complaint
- Close the case without investigation
- Decide to investigate the case further.

During the quarter, the Trust was notified of 4 cases referred to the Ombudsman.

In quarter 1, the Ombudsman concluded 2 investigations – both were not upheld. All other cases are still 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 1, the PALS team handled 515 concerns. The graph below shows a comparison with previous quarters.



PALS Case

A patient contacts PALS as he found it difficult to find her way to her ophthalmology appointment at PRH. The clinic had recently been set up and changed its venue. As a result of the contact correct details are now included in the appointment letters and new signage has been arranged.

Main themes arising from the concerns raised via PALS

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

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.

During April - June, 65 comments were published on the NHS Choices website; 86% of these were positive, 6% were negative and 8% 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 Cardiology, Endoscopy, Therapies and the Emergency Department and Outpatients.

Comments include:

"Lovely bright clean hospital and friendly staff. Made our visit a good experience".

"I just want to convey my appreciation of the skill and care shown to me by your staff. In the current atmosphere of constant complaint about waiting times I want to say that the treatment I received for a deep cut on my index finger was exemplary. From triage to treatment all the staff worked quickly combined with a cheerful and caring approach. The doctor, and all the nursing and auxiliary staff were just lovely and I would like you to thank them for me. We have a wonderful NHS and we must defend it and fund it properly. (A&E PRH)

The negative comments focused mainly on the waiting time for appointments and this corresponds with the number of PALS contacts received. Over the next 3 months the newly appointed PALS Manager will be working with Centre Managers to highlight the specialties where we receive a higher number of concerns about waiting time and agree actions.

Letters of thanks

In addition to the feedback give via NHS Choices and the Trust's website, 34 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

"The nursing staff who looked after my father were all fantastic. I know that the way he was looked after during his illness could not have been bettered. On the day of his death, the staff were kind and caring not only to my father but of the eleven members of the family. They were competent in a way that inspired confidence in them. It was only later that I appreciated their thoughtfulness in making my father look his best for us all when he died." (ward 23)

"From the initial mammogram, through the assessment process, day surgery and treatment plan I have experienced first-class, support and compassion. The outcome of this wonderful service is that I can face the future in a very positive frame of mind". (Breast care team)

"Please convey to the ward my sincere thanks for the care, kindness and understanding shown by the team to my husband. It was obvious that they were extremely busy but still had time to comfort my husband who has dementia". (ward 9)

12. Conclusion

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