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MEETING: TRUST BOARD 19 SEPTEMBER 2007

ACTION:

For information

Lead: Director of Strategy & Performance

TITLE: PATIENT FEEDBACK REPORT AND DH COMPLAINTS CONSULTATION

SUMMARY: The attached report provides information on complaints and the work of the patient relations service for April to June 2007.

The drop in the number of the complaints during this quarter appears to be directly related to the opening of the stairs in the diagnostic block, although the overall number of complaints is still higher than for the equivalent period last year. This may suggest that the relocation of the Patient Relations Office to the main entrance, improving accessibility, has also been a factor. PALS have increased their workload quite substantially but are still managing to deal with complaints in 1 working day.

Also attached at Appendix B is the Department of Health consultation on changes to complaints management processes. Pages 22-25 outline the key aspects of the proposals, which involve establishing two levels of complaints investigation within organisations ("local service response" for straightforward issues, and "organisational response" for more complex complaints), and abolishing the current second stage of complaints (Healthcare Commission independent reviews), leaving the Ombudsman's role unchanged. The proposals also include the option for complainants to complain directly to the service commissioner if they choose.

The proposals are being discussed at various meetings, including Patient Experience Review Group and Clinical Governance Steering Committee. Closing date for responses is 17.10.07

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SPONSORED BY: Deborah Wheeler, Direct	tor of Nursing & Clinical Development				
Financial Validation	Not applicable				
Landa Discreta sa f Figures					
Lead: Director of Finance					
Compliance with statute, directions,	NHS (complaints) regulations, DH 2004				
policy, guidance	NHS (Complaints) amendments regulations,				
policy, galacine	DH 2006				
Lead: All directors	D112000				
Compliance with Healthcare Commission	Reference: C14				
Core/Developmental Standards					
l					
Lead: Director of Nursing & Clinical Development					
Compliance with Auditors' Local	Reference:				
•	Reference.				
Evaluation standards (ALE)					
Lead: Director of Finance					
Lead. Director of Finance					
Compliance with requirements of FT	Reference:				
application and monitoring regime					



1. SUMMARY

Complaints	2004/05	2005/06	2006/07	2007/08	Apr - Jun
Complaints Received					
Total complaints received	316	366	455	109	109
Total Informal complaints received	60	70	47	12	12
Total Out of Time complaints received	15	15	22	8	8
Total formal complaints received	256	296	386	89	89
Total formal complaints responded to on time	174	190	312	87	87
% Formal complaints responded to on time	67.97%	64.19%	80.83%	97.75%	97.75%
Escalation of complaints		·			
% Dissatisfied Complainants	17%	14%	8%	11%	11%
No of complaints referred to Healthcare Commission	2	11	13	1	1
No of complaints referred to Ombudsman	0	1	0	0	0
Service Improvements				,	
No of actions following on from complaints	22	14	7	6	6

PALS	2004/05	2005/06	2006/07	2007/08	Apr - Jun
Compliments Received					
Total compliments received	87	88	99*	32*	32*
Concerns and Enquiries					
Total Concerns and other enquires handled by PALS	611	588	828*	240*	240*
Average response time for patient enquiries	1.18 Days	1.04 Days	0.98 Days*	0.99 Days*	0.99 Days*

^{*} PALS figures are estimated because not all cases have a date attached to them

Quarter one saw a drop in the number of formal complaints compared with recent months. For April to June 2007, we:

- ✓ Acknowledged **94**% of formal complaints within 2 working days
- ✓ Answered **98%** of formal complaints within the required standard

The Patient Relations Team is handling a greater volume of concerns and enquiries from patients and visitors, with a total of 240 received so far in 2007/08. The team have responded to:

√ 100% of concerns and enquiries within 1 working day

2. COMPLAINTS RECEIVED

2.1 Total Complaints Received

Figure 1 gives the total number of complaints – formal, informal, and those designated 'out of time' (ie received more than six months after the event) – received each month since April 2004. Complaints that are subsequently withdrawn or where a patient has not consented to a third party complaining of their behalf have been excluded from these figures.

There have been a total of 109 complaints received in the first quarter (April-June) of 2007/08, which is considerably lower than those in the last quarter of 2006/2007.

The number of complaints increased significantly when the new building opened, and the patient relations office moved to the front entrance in November 2006. The numbers have fallen since April 2007, when the new staircase was opened, which has relieved pressure on the lifts and made it much easier for people to move around the building. Despite this, overall complaint numbers have remained slightly higher than previously, possibly due to the fact that the patient relations office is now much more accessible.

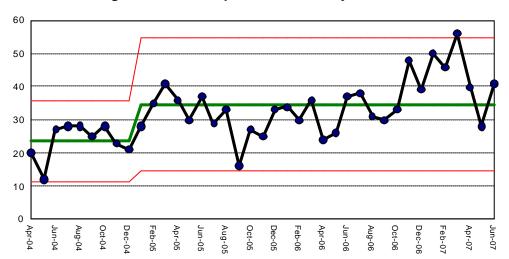


Figure 1: Total Complaints Received by Month Since 2004

2.2 Management of Formal Complaints

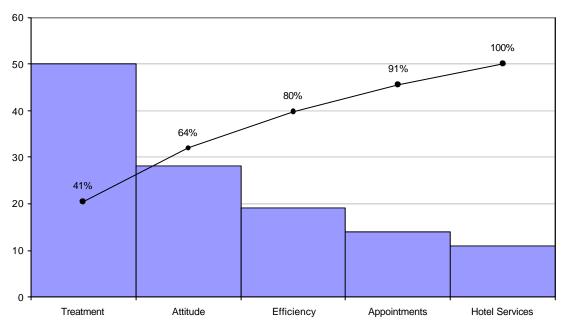
Whilst the total picture of complaints received by the Trust is presented above, only formal complaints are monitored and reported centrally to the Department of Health. In addition to the exclusions above, monitored complaints exclude informal complaints and those received 'out of time'.

On average in 2007/08, the Trust is receiving 29 formal complaints each month. The monthly pattern over the last two years is shown below:

Figure 2: Formal Complaints Received by Month since April 2004

2.3 Formal Complaint Issues

The analysis presented below shows, for 2007/08, the issues that have been raised. A third of formal complaints raise multiple issues and cover more than one department. In total 122 issues were logged from formal complaints in quarter 1 of 2007/08.



	Treatment	Attitude	Efficiency	Appointments	Hotel Services	Grand Total	%
Medicine	22	9	5		4	40	21.5%
Surgery and Cancer Services	18	10	7	6		41	22.0%
Women's & Children's Services	6	2	1			9	4.8%
Facilities		1	1		4	6	3.2%
Diagnostics and Therapies	3	5	3	8	3	22	11.8%
Other	1	1	2			4	2.2%
Grand Total	50	28	19	14	11	122	
%	40.9%	22.9%	15.6%	11.5%	9%		

2.4 Formal Complaint Response Times

To date, the Trust has acknowledged receipt of 94% of formal complaints within 2 working days of receipt in 2007/08.

Since September 2006, the Trust has been expected to respond to formal complaints within 25 working days of receipt. The improvement attained over the last half of 2006/07 has been maintained into the first quarter of 2007/08 with 100% of complaints responded to within time in both April and June. This is the first time this level of performance has been achieved.

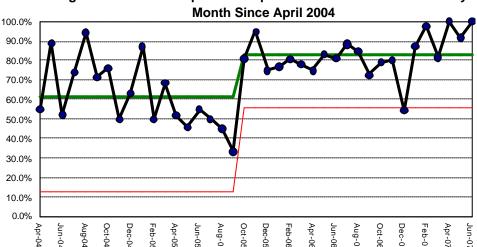


Figure 3: Formal Complaints Responded to Within the Standard by

The response performance by directorate for the issues raised in formal complaints in quarter 1 is presented below:

	Treatment	Attitude	Efficiency	Appointments	Hotel Services	Grand Total
Medicine	95%	100%	100%		100%	98%
Surgery and Cancer Services	94%	100%	100%	100%		98%
Women's & Children's Services	83%	100%	100%			89%
Facilities		100%	100%		100%	100%
Diagnostics and Therapies	100%	100%	100%	100%	100%	100%
Other	100%	100%	100%			100%
Grand Total	94%	100%	100%	100%	100%	98%

As the data in this table is based on issues raised within a complaint, the measured performance may differ slightly from the headline figure presented previously.

2.5 Dissatisfied Complainants

The numbers and proportion of dissatisfied complainants has risen on the previous 2 quarters, but remains significantly below the levels seen in the previous year.

	Formal Complaints	No. Dissatisfied	% Dissatisfied
Oct-Dec 2005	68	6	8.82%
Jan-Mar 2006	79	12	15.19%
Apr-Jun 2006	87	4	4.60%
Jul-Sep 2006	76	5	6.58%
Oct-Dec 2006	109	8	7.34%
Jan-Mar 2007	127	17	13.38%
Apr-Jun 2007	89		

2.6 Service Improvements in the last guarter

A significant number of complaint responses will contain explanations about the treatment the patient received, rather than any specific service improvements. Concerns about treatment are the most frequent issue raised in complaints, where patients either feel they have not received the correct treatment, or do not understand the plan made for them to be treated.

Specific service improvements in the first quarter of 2007/8 include:

- Ongoing reinforcement of customer care skills for outpatient reception staff
- A patient was referred back to their GP, as they had originally wanted to be referred to another hospital
- Improving communications between PALS and the mortuary, to ensure that relatives' requests are made clear
- A patient's procedure was rebooked, following a cancellation
- Additional training was provided for paediatric staff using the light source when inserting intravenous cannulae into babies
- A review was undertaken of a ward's cleaning schedule
- A new policy has been drafted on breaking bad news
- The patient transport policy has been reviewed
- The policy on management of patients' property has been reviewed
- A patient had the date for their operation brought forward
- ED patients who need a gynaecology opinion are now referred, under the protocol, to the specialist registrar, not the SHO
- An outpatient appointment was arranged for a patient who did not wish to proceed with their operation
- A review was undertaken of an ENT doctor's communication skills, with additional training
- Clear care plans have been implemented for patients who are vulnerable to falling when sitting in a chair
- A revised falls risk assessment tool has been piloted
- Patients are to be telephoned when their outpatient appointment is changed at less than two weeks' notice, rather than a letter being sent
- A nurse has been required to undergo a drug administration assessment
- A further review of the signage directing patients to blood tests has been done.

2.7 Independent Reviews

Total requests to date: 25

	Date of original complaint	Date of HC request for file
2002/3	2	
2003/4	3	
2004/5	4	2
2005/6	13	9
2006/7	3	13
2007/8		1

There has been one new request for an independent review from the Healthcare Commission between April and June 2007. There have been requests for additional information on some files that have already been sent to the Healthcare Commission.

During this quarter we have received five reports on outstanding independent reviews. Two of the complaints were not upheld by the Healthcare Commission. Three were upheld, and the Trust has now responded to all the recommendations made. A further summary is included in the separate paper on independent reviews (Appendix A).

Current status of independent reviews

Currently open	5	
Withdrawn	1	Legal claim
Resolved	19	6: complaint not upheld 6: complaint partially upheld 7: complaint upheld

Summary of Healthcare Commission findings

Inadequate complaint response	6
Inadequate management of treatment	8
Poor complaint handling	4
Action needed to prevent recurrence	7
Produce patient information	2
Inadequate documentation of treatment	3
Inadequate management of incident	2

2.8 Ombudsman Inquiries

None received during this quarter

2.9 Compliments

There were 37 compliments received by the Executive Office in the first quarter of 2007/08. A breakdown of the compliments is in the table below.

Compliment Category	Number
Treatment	23
Not Recorded	7
Attitude	4
Car Parking	1
Environment	1
Information	1

2.10 Other Enquiries and Patient Concerns

The PALS Office is currently dealing with more than 100 concerns and enquiries each month. The current response time for ALL enquiries is 1 day or less. Just over a quarter of all enquires relate to appointment issues with another quarter relating to efficiency.

