

### Healthcare Commission Independent Reviews of Complaints August 2007

#### Summary

Total requests to date: 25

*There have been no new requests since the last report in May 2007*

	original complaint	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

#### Current status

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Withdrawn	1	Legal claim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

## APPENDIX A

### Recent reports received from the Healthcare Commission

#### 1. 677: complaint upheld

Patient was unhappy following his complaint (February 2006) that his medical treatment had been substandard following his admission via ED. He also felt that his care in ED had not been acceptable. He did meet with the Chief Executive and Medical Director to discuss his concerns, but remained unhappy.

The report from the Healthcare Commission was received on 14.5.07. The complaint was upheld, with the following recommendations for the trust. The response to the patient and the Healthcare Commission was sent on 28.7.07

Recommendation	Trust response
The trust should acknowledge and apologise for the inadequate triage that was carried out on this occasion	Apology give
The Trust should contact the complainant and the Healthcare Commission and explain in more detail the triage system in operation at the A&E department of the Whittington Hospital NHS Trust. If the A&E department has chosen to use a system that differs significantly from the national standard, then there should be a robust quality assurance process to demonstrate the safety of this deviation and the trust should contact the Healthcare Commission providing full details of what procedures the trust has implemented to ensure that patient safety is not compromised by use of that system. The trust should also reconsider its position regarding using Manchester Triage System algorithms or physiological variables as part of this process as the independent adviser has stated that this is a significant governance risk	Detailed guidelines for triage sent with response. Trust did not accept clinical adviser's comments about the triage process, as the Manchester Triage System is in use in ED, but did accept that inadequate information had been sent to the Healthcare Commission to explain the process at the Whittington.  Processes for checking information prior to submission to the Healthcare Commission have been tightened.
The adviser has also stated that the documentation in the A&E is superficial and does not address the reasons for the delay or give an indication that staff were closely supervising patient during the prolonged stay. I therefore recommend that steps should be taken to improve this process	Standards on documentation now introduced in ED. All new staff have 2 week orientation, which includes documentation standards.
The trust should, indicate whether it has subscribed to the Surviving Sepsis Campaign programme led by the European Society of Intensive Care Medicine	It is not possible to subscribe to this programme. ITU consultants have been involved with it, and it is highlighted by DH as good practice part of "high impact changes". Most of the components are in place at the Whittington

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The trust should have a policy standard for performing patient review after a change in clinical condition	Medical Director is developing a policy
The trust review its procedures in this regard to ensure that any delays in prescribing antibiotics are kept to a minimum	Guideline on use of antibiotics in bacterial infections in adults currently being reviewed by Director of Infection Prevention & Control
<b>Returned for local resolution</b> (not addressed in original trust response)	
Failure to correct hypotension resulting in septicaemic shock	Following response outlined above, patient has written to say that he does not require any further action to be taken & considers the matter closed.

### 2. 659: complaint not upheld

Patient suffers from lupus and came to ED when pregnant. She felt that the treatment she received was too aggressive and that she was held down by security guards and nurses while she was mentally unwell. She subsequently had a miscarriage. Patient originally complained in February 2006, and remained unhappy with the Trust's responses in March and April 2006.

The report from the Healthcare Commission was received on 01.06.07. The complaint was upheld, with the following recommendations for the trust. The response to the patient and the Healthcare Commission was sent on 26.7.07

Recommendation	Trust response
The Healthcare Commission confirmed that the patient had been appropriately treated and managed at the Whittington	
Trust was asked to see whether patient still wanted copy of post mortem results for her baby	Patient had not attended original appointment to be given the results in March 2006. Patient did attend appointment in July 2007.
Healthcare Commission asked for a further copy of her nursing records, which were not in the file originally sent to them	Patient's medical notes are currently missing. Healthcare Commission have been informed.

### 3. 703 PH: complaint upheld

The patient was brought to ED in August 2005 with injuries after falling 9 feet. Some months later he was found to have injuries that had not been identified at the time and feels more x-rays should have been taken when he was seen in ED. Patient originally complained in March 2006, and remained unhappy with the trust's responses in April and July 2006.

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The report from the Healthcare Commission was received on 25.6.07. The complaint was upheld, with the following recommendations for the trust. The response to the patient and the Healthcare Commission was sent on 26.7.07

Recommendation	Trust response
The trust should consider reviewing the way it's A&E Department's triage procedure is undertaken, and the way in which patients are classified into pathways.	Further explanation of the triage process and confirmation that the Manchester Triage System is used. Trust confirmed that patient had been appropriately triaged.
The trust should also consider in this review, the extent to which patients are allocated into a pathway precludes assessment of areas outside of the selected pathway	Patient did not have documented secondary survey of injuries. Copy of new trauma management guideline and protocol sent, as evidence of review of processes within ED.