

ITEM: 10/120
Doc: 05

Meeting: Trust Board
Date: 27 October 2010

Title: Patient Experience Report

Executive Summary: The attached report provides information on Complaints, PALS and patient experience feedback for Quarter One 2010/11. Where possible comparisons with the same quarter in 2009/10 have been made, but as data for that was taken from the old Safeguard system and we are now using Datix, it has not been possible to draw direct comparisons in all areas. This will, however, be resolved in the next report.

The report format has also been changed, so that rather than categorising complaints by the Whittington Promise, which was very broad, an increased list of more useful categories has now been devised. This has been done to provide the directorates with more data relevant to them, so they identify themes, take action and use the report to drive service improvements.

The number of complaints for the quarter was 88, a decrease of nine from the same quarter last year. The complaints response time performance did, however, fall to an unacceptable level of only 59.09% meeting the trust's target, compared with 82.47% last year. (Target is 90% to be responded to within 28 days). An external review of the service was undertaken and actions are being put in place to improve this position.

The report also includes internally collected patient experience feedback obtained from the electronic devices available in kiosks in OPD and ED, and hand held devices on the wards. These surveys ask the same five corporate questions based on the national patient survey, with additional questions for the wards on single sex accommodation. The report also includes the net promoter score for each area. This is useful for benchmarking performance in the same area over time, and to compare areas, but work needs to be carried out to ascertain what a reasonable net promoter score should be.

Action: For information

Report from: Veronica Shaw
 Assistant Director of Nursing and Clinical Development

Sponsor: Bronagh Scott
 Director of Nursing and Clinical Development

Financial Validation Lead: Director of Finance	Name of finance officer
Compliance with statute, directions, policy, guidance Lead: All directors	Reference:
Compliance with CQC Regulations and Outcomes Lead: Director of Nursing & Clinical Development	Reference: Regulation 19 / Outcome 17 "Complaints" Regulation 17 / Outcome 1 "Respecting and involving people who use services"
Compliance with Auditors' Local Evaluation standards (ALE) Lead: Director of Finance	Reference:
Evidence for self-certification under the Monitor compliance regime Lead: All directors	Compliance framework reference:

Provider Registration with the CQC

1. Introduction

Subject to legislation, all health and social care providers are now required by law to register with the CQC in order to operate. Registration comes into force from April 2010 onwards for all NHS trusts, including primary care providers.

Trusts had to apply on-line for registration by 29th January 2010. A copy of the Provider registration form completed is attached for your information. During February the CQC reviewed our application and asked us for further information and evidence to assure them that we are compliant. We were informed on 24th February 2010 that our application was successful, and we will be registered without any compliance conditions from April 1st onwards.

2. The application process

As you will see from the application form, information was required on a number of key areas.

- **Location**

This refers to from where the regulated activities are carried out. In our case there is only the one location.

- **The regulated activities provided from the location.** These are: -

- Treatment of disease, disorder or injury
- Surgical procedures
- Diagnostic and screening procedures
- Maternity or midwifery services
- Termination of pregnancies

- Information on how we **respect and involve people** who use our services and on **equality and diversity**. Please see the application form for details.

- **Compliance with the 16 regulations relating to quality and safety of care.**

We declared compliance with all 16 regulations, as the relevant directors had identified appropriate evidence to support this. (Evidence chart attached). There are also a further 5 regulations that apply to acute trusts, concerned with management of the organisation, but we do not have to demonstrate compliance with these until after we are registered.

3. Board Assurance

It is usual practice for submissions such as this to be discussed and approved by the Audit Committee and / or Trust Board prior to submission. As, however, the time between the CQC confirming the regulations and deadline for applications to be made was so narrow, this was not possible, as the work required to identify evidence could not be completed in time for the January Board or Committee. In order to gain as much assurance as possible, the evidence was discussed by the Executive Committee at the end of January and was then reviewed by

the Chair and Vice Chair prior to submission. A full report has since been taken to the Audit Committee.

4. Conditions of registration

Conditions of registration will appear on our certificate of registration. It is important to note that all trusts will be registered with conditions, as there are two types of condition: -

- "Restrictive" conditions are routine and define the regulated activities that the trust is registered to carry out, the locations at which they may be carried out and whether there are any further restrictions, for example they may say we cannot provide a service to children of a certain age
- "Compliance" conditions may be applied where the CQC has concerns about non-compliance. These will require the trust to make improvements to the service in order to meet essential standards of quality and safety.

We have been registered without compliance conditions.

5. Post Registration

From April 1st onwards, the five regulations relating to suitability of management will come into being. We will also need to complete a statement of purpose for each regulated activity for which we are registered.