Complaints, PALS and Patient Experience report for April to June, Quarter 1 2010/2011

1. Introduction

This report sets out the Trusts Complaints and PALS performance for the first quarter of 2010/2011 (1st April to 30th June 2010). The data for Quarter 1 2009/10 was collected from the Safeguard database and the data for Quarter 1 2010/11 from Datix. It has not therefore been possible to exactly match the categories as the methods of collecting and presenting the data from the two systems are different. As all reports will now be taken from Datix, this issue will automatically resolve over time. The Patient Experience analysis for quarter one is also included.

The report shows that the response times fell significantly short of the "90% responded to in 28 days" internal target, during the period. In order to address this serious issue an external review of the trust's complaints service, including systems, processes and links to operations was undertaken. Following this, a number of changes have already been put in place, including a change in structure whereby the Complaints and PALS Manager now reports to the Head of Litigation. Not only does this enable a strong link to be forged between these two complimentary areas, but it also provides a day to day senior manager of the service, who can ensure its smooth operation and identify, report, and help resolve any issues promptly. The service is currently being managed by a previous post-holder with significant experience in managing complaints and appropriately involving clinical and managerial staff in the process. Although there is still some way to go, performance is already improving, which should be demonstrated in the next quarter's report.

The format of the Patient Feedback has also been updated to include a wider number of categories. This is to provide the directorates with more data relevant to them so that themes can be identified and corresponding actions taken. Feedback from the relevant staff on how else the report can be enhanced is welcomed, so that it becomes a tool that helps drive service improvements.

2. Complaints Summary

The total number of complaints received during this quarter was 88, a decrease of 9 over the same period in 2009.

The percentage number of complaints responded to in time was 59.09% in Quarter 1 2010/11, compared to 82.47% in Quarter 1 2009/10. The Interim Complaints Manager is working closely with managers and clinicians to improve this poor performance.

Table A: Subject area in which the complaints are categorised comparing Quarter 1 of 2009/10 to 2010/11

In the first quarter of 2009 there were times when more than one area was mentioned per complaint. These are listed as per the Whittington Promise for 2009/10, and they therefore do not match the categories in the table below. This will be resolved in the next report.

Complaints by Subject	Qtr 1 2010/11 Datix Actual No Complaints	Qtr 1 2009/10 Safeguard Whittington Promise
Attitude	25	33
Clinical care	32	76
Communication and Information	18	23
Environment / cleanliness	1	11
Waiting times / Delays	6	22
Documentation	0	
Appointments	0	
Hotel Services	2	

Discharge Arrangements	1	
Bereavement	2	
Medical Records	1	
Grand Total	88	165

Table B: Breakdown of all aspects of clinical care by sub category.

This information was not collected in 1st Quarter of 2009 in the same format. The figures are therefore only shown for the first quarter of this year.

	Qtr 1 2010/11	Qtr 1 2009/10
Level of Care Caused Further Complications	13	
Unacceptable Level of Clinical Care	20	
Diagnosis - Delay/Failure		
Dissatisfied - Nursing Care		
Diagnosis - Misdiagnosis		
Lack of Information – patient	15	
Disinterested /Uncaring Behaviour	25	
General Dissatisfaction with ward	2	
Breach of Confidentiality	1	
Waiting List for Treatment	1	
Incorrect information	1	
Patient Discharged Prematurely	1	
Wait in clinic	3	
Wait due to cancellation of Appointment	3	
Lost Records	1	
Deceased not prepared by porters for		
viewing	1	
Ward Untidy	1	
Total	88	

Table C: Breakdown of complaints received by each Directorate for 2009/10 and 2010/11

The table below shows the number of complaints received by each Directorate for the 1st Quarter of 2009/10 and 2010/11. As a different database this is not an exact comparison

	Qtr 1 2010/11	Qtr 1 2009/10
Access and Diagnostics		
Outpatients & Scheduled Services	12	19
Facilities & Estates	7	9
IM & T		0
Medicine & Therapies	29	54
Women & Children	15	29
Surgical	34	50
Nurse & Clinical Development	1	4
Pharmacy	2	
Operations	1	
Total	101	165

Table D: Quarterly response rates within deadline per division

	Qtr 1 2010/11	Qtr 1 2009/10
Access Diagnostic & Outpatients and		
Scheduled Services	49%	84%
Facilities & Estates	45%	89%
IM & T	100%	76%
Medicine & Therapies	41%	100%
Surgical	55%	86%
Women & Children	64%	86%

2. PALS Report

Table A: subject area in which the PALS records are categorised for 1st Quarter 2010/11

During the 1st Quarter of 2009/10 the PALS staff dealt with approximately 350 concerns and enquiries, compared with 447 for the same period this year. This is a positive increase as it means queries and minor concerns are being appropriately dealt with there and then at local level, without them escalating into formal complaints.

Table A: Breakdown of PALS records by subject area for 1st of 2010/11

PALS Records by Subject	Qtr 1 2010/11
Appointments	125
Attitude	26
Car Parking	18
Clinical Care	27
Communication and	99
Information	
Discharge Arrangements	4
Environment / Cleanliness	4
External Services	6
Financial	2
Hotel Services	1
Lost Property	10
Medical Records	10
Other	85
Privacy and Dignity	1
Request for Patient	4
Information	
Results	13
Transport	7
Waiting Times / Delays	5
Total	447

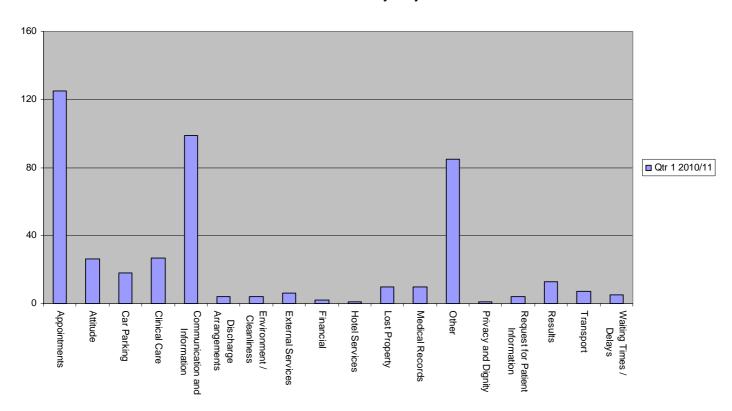


Table A: Breakdown of PALS Records by Subject for Quarter 1 of 2010/11

Table B: Breakdown of the all aspect of clinical care by sub category

All Aspects of Clinical Treatment	Qtr 1 2010/11
Concerns About Medication	3
Concerns About Treatment	5
Level of Care Caused Further	5
Complications	
Other	9
Unacceptable Level of Clinical Care	5
Total	27

3. Breakdown of PALS Records received by Directorate for Quarter 1 of 2010/11

Directorate Description	Qtr 1 2010/11
Access, Diagnostics and Planned Care	8
Corporate Secretariat	2
Diagnostic & Outpatients and Scheduled	237
Services	
External Organisation	37
Facilities & Estates	14
Finance	1
IM & T	3
Medicine & Therapies	64
Nursing & Clinical Development	22
Surgery & Oncology	31
Trust wide	3
Women & Children	25
Total	447

3. Whittington Compliments Report

29 formal compliments were received, compared with 27 in the same quarter of 2009. NB. This does not include all the thank you cards and gifts such as chocolates etc that are given to staff at local level.

Breakdown of Compliments received by Directorate for Quarter 1 of 2010/11

The majority of these compliments relate to staff attitude and good care and treatment

Total compliments received - Expression of Thanks	YTD	Apr-10	May- 10	Jun-10
Medicine & Therapies	11	1	6	4
Women & Children	9	6	2	1
Surgery & Oncology	1	1		
Diagnostic & Outpatients and Scheduled				
Services	7	4	3	
Facilities & Estates	1	1		
Total	29	13	11	5

4. Patient Experience Analysis April 2010 - June 2010

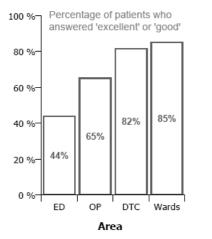
This section of the report shows the responses from patients who have completed the internal patient feedback surveys. The first quarter of 2010/11 saw a total of 2,507 validated surveys completed upon the electronic kiosks available in outpatients and the Emergency Department, and mobile handheld devices on then wards.

Of these, 407 were undertaken in ED, 1,369 in OP, 182 in the DTC and 549 on the Inpatient Wards.

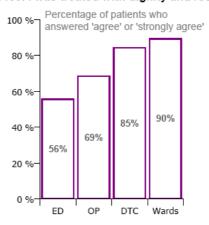
All Surveys ask the same 5 corporate questions with additional questions in inpatient environments regarding mixed sex accommodation and a small number of proprietary questions asked in other areas.

Percentage of patients who rated their care in the top 2 categories for the following questions:

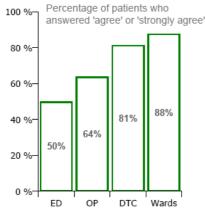
Overall, how would you rate the care you received?



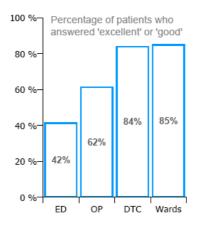
I feel I was treated with dignity and respect



I was involved as much as I wanted to be in the decisions about my care



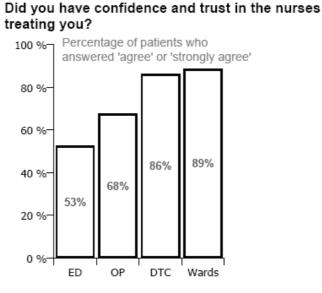
Please rate the cleanliness of the hospital



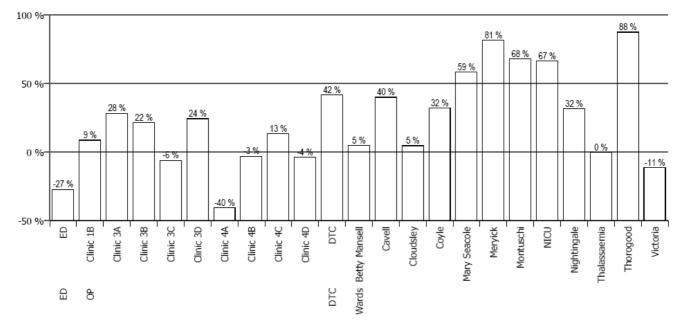
As historical performance has shown, results are consistent in their ranking, as ED and Outpatients have lower satisfaction results with those compared to that of the DTC and inpatient wards.

It is worthy of note that although the wards outperformed their counterparts significantly in most areas, the difference was considerably closer when it came to the notion of cleanliness. In this area ED performed significantly lower than all the other areas.

All areas performed reasonably better regarding the confidence in the nursing quality compared to the other questions, with roughly 75% of all respondents charting in the top two categories.



Looking at the NPS (Net Promoter Score) by individual area shows a huge disparity in performance. With the best performing being Thorogood Ward and the worst Clinic 4A, which performed lower than all its counterparts and ED. Significantly both these areas had poor response rates with 16 and 48 respectively. This shows how small volumes can be impacted positively or negatively/



Net Promoter Score by Location

NPS is graded 0-10 by respondents. 0-6 = detrator, 7-8 = passive, 9-10 = promoter. NPS is calculated by subtracting the number of detractors from the number of promoters and showing the resulting figure as a percentage of total responses. NPS ranges from -100% to 100%.

The response rate between areas varies as some locations are more productive than others. Areas of success in Outpatients in terms of response rates are predominantly in areas of large throughput where the device is located close to a location where people are waiting. Other areas of note are the increase in respondents within Clinic 3A that coincided with the Charter Mark application.

Inpatient response rates are determined by staff utilisation of devices and in times of staff shortages and/or ward moves the response rate is impacted accordingly.

During this period there were technical difficulties in ED reducing the optimum response level. Subsequent to this report the DTC has also seen an increase in the number of devices from a solitary standalone kiosk to an additional handheld device.

Survey Area	Survey Location	Total Surveys	NPS
Emergency Department	ED	407	-27 %
Outpatients	Clinic 1B	126	9 %
	Clinic 3A	75	28 %
	Clinic 3B	60	22 %
	Clinic 3C	223	-6 %
	Clinic 3D	41	24 %
	Clinic 4A	48	-40 %
	Clinic 4B	204	-3 %
	Clinic 4C	46	13 %
	Clinic 4D	546	-4 %
Day Treatment Centre	DTC	182	42 %
Inpatient Wards	Betty Mansell	47	5 %
	Cavell	18	40 %
	Cloudsley	23	5 %
	Coyle	40	32 %
	Mary Seacole	82	59 %
	Meryick	27	81 %
	Montuschi	151	68 %
	NICU	20	67 %
	Nightingale	103	32 %
	Thalassaemia	8	0 %
	Thorogood	16	88 %
	Victoria	14	-11 %
Total		2,507	8 %

Survey volumes by location

The demographic composition of respondents continues to more accurately reflect the population that visits the Whittington, as apposed to the composition of the annual CQC surveys.

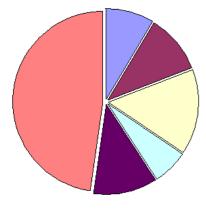
There is representation from all ethnic groups and an equal distribution of age groups, as with all national surveys Females form the bulk of responses.

Ethnic	Number of Surveys
Not given	216
Asian or Asian British	262
Black or Black British	384
Chinese or other Ethnic Groups	163
Mixed	283
White or White British	1199

Age	Number of Surveys
Not given	196
16 - 24	284
25 - 34	372
35 - 44	346
45 - 54	276
55 - 64	243
65 and over	381
Under 16	409

Sex	Number of Surveys
Not given	157
Female	1259
Male	1091

Ethnicity of Respondent





■ Asian or Asian British

Black or Black British

Chinese or other Ethnic Groups

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Age of Respondent

25 - 34
35 - 44
45 - 54
55 - 64
65 and over
Under 16

Gender of Respondent

