







Trust Board Report

Meeting Date:	22 April 2013
Title:	Complaints and PALS activity for quarter 4 2013
Executive Summary:	To provide the Trust Board with a summary of the numbers and themes of complaints and PALS activity from January to March 2013
Action Requested:	The Trust Board to note the report
Report of:	Chief Nursing Officer
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Resource Implications:	None
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	
Appendices/ References/ Background Reading	
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none">  Equality of treatment and access to services  High standards of excellence and professionalism  Service user preferences  Cross community working  Best Value  Accountability through local influence and scrutiny

Background Details

1.	<p>This report provides a review of complaints and PALS activity during the period January to March 2013 and includes:</p> <ul style="list-style-type: none"> • Numbers of serious complaints by Division • Numbers of formal complaints by Division • Number of PALS contacts across the Trust • Themes of PALS contacts • Numbers of formal complaints investigated and responded to within the 25 working day target or with consent by the complainant to breach this target • Numbers of formal complaints breaching the 25 working day target • Number of complaints referred to the Ombudsman • Number of complaints upheld by the Ombudsman • Number of complaints closed by the Ombudsman
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2.	<p>The report also includes a brief summary of the main themes highlighted in formal and serious complaints. The top 3 themes for Q4 remain consistent as in Q2 and Q3. Clinical Treatment (19), General Care (19) and Delays (14) although the total numbers are slightly higher.</p>
3.	<p>Appendix 1 is the Patient Experience Dashboard which highlights key points:</p> <ul style="list-style-type: none">• Number of complaints• Response times• Number of complaints reopened

Review of complaints: January to March 2013

	Division One	Division Two	Estates and Facilities	Corporate	Health Records and IT	Total
Received Complaints						
Serious formal complaints	3	6	0	0	0	9
Other formal complaints	30	46	0	2	0	76
Total	33	52	0	2	0	87
Concerns						
Number of PALS concerns	382					
Number of PALS concerns resulting in formal complaint	9					

Formal complaints by theme in Quarter 4 2012-13 (Jan to March 2013)

General Care	19
Clinical Treatment	19
Communication	6
Delay	14
Attitude	8
Consent to Treatment	1
Diagnosis	7
Waiting Times	2
Patient Discharge	5
Administration	1
Confidentiality	1
Information	1
Medication Problems	1
Resources	1
Organisational Problems	1
Total	87

Detail from Divisions

	Themes raised	Total	Formal complaint summaries
Division 1	Attitude	3	<p>Division 1 highest theme this quarter was clinical treatment as in previous reports of which General Surgery and Obstetrics & Gynaecology were the two highest directorates.</p> <p>General care of patients remains the second highest theme across several specialties.</p> <p>Delays covered a variety of services from a delay in receiving diagnosis and treatment to delays in receiving clinical information.</p>
	Discharge	1	
	Delays	5	
	Clinical Treatment	10	
	Diagnosis	1	
	General Care	7	
	Communication / Information	4	
	Consent to Treatment	1	
	Waiting Times	1	
	Total	33	

	Themes raised	Total	Formal complaint summaries
Division 2	Attitude	4	<p>General care of patients is the main theme for many complaints in Division 2 along with delays and clinical treatment. These complaints range from whether the appropriate treatment was received to patients feeling that they are waiting too long for assistance.</p> <p>Although the Emergency Department continues to receive the highest number of complaints (11) they have seen a decrease of almost half from the previous quarter (21). The 2 highest themes related to clinical treatment and diagnosis.</p> <p>As in Division 1 the complaints related to various points throughout the patients journey.</p>
	Discharge	4	
	Delays	9	
	Clinical Treatment	9	
	Diagnosis	6	
	General Care	12	
	Communication / Information	3	
	Administration	1	
	Medication Problems	1	
	Organisational Problems	1	
	Resources	1	
	Waiting Times	1	
	Total	52	

	Themes raised	Total	Formal complaint summaries
Estates & Facilities	No themes identified	0	No complaints received in this quarter.

	Total	0	(compared to 11 in Q3).
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	Themes raised	Total	Formal complaint summaries
Corporate	Attitude	1	1 complaint about attitude of head of department.
	Confidentiality	1	1 complaint alleging member of nursing staff accessing patients hospital notes and breaching confidentiality
	Total	2	

	Themes Raised	Total	Formal complaint summaries
Health Records & IT	No themes identified	0	No complaints received in this quarter.
	Total	0	

Resultant Actions arising from themes identified:

1. **Lack of Information and communication about clinical decisions:** Information for patients about how to ask important questions is provided at each bedside locker. This information also advises patients how they should go about raising any concerns about their condition or treatment.
2. **General care of patients:** At the point of discharge patients are now asked to give their views in an anonymous way about four specific elements of their experience. These questions are mapped to where Trust performance in the National Inpatient Survey was weakest (pain, buzzer response, being able to discuss worries and fears and discussions about discharge). Headline data will be made available by ward, division and at Trust level to allow ongoing monitoring and continuous improvement. Patients are also asked if they felt cared for and if a particular member of staff who they felt provided excellent care.

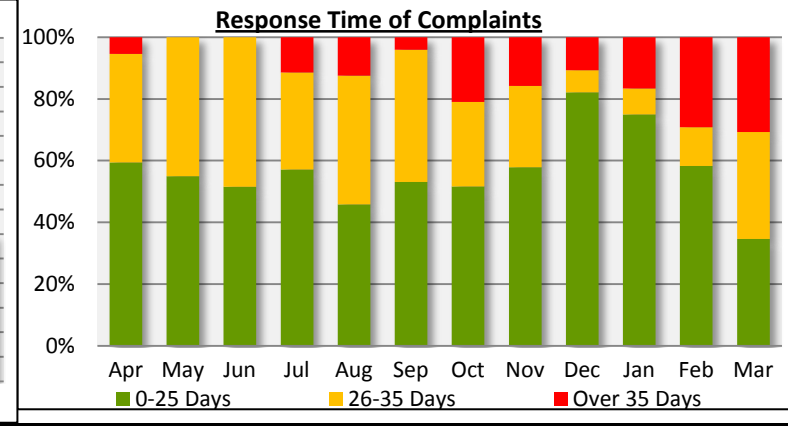
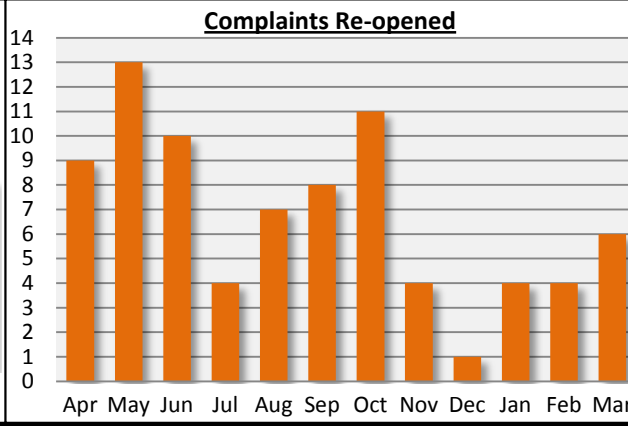
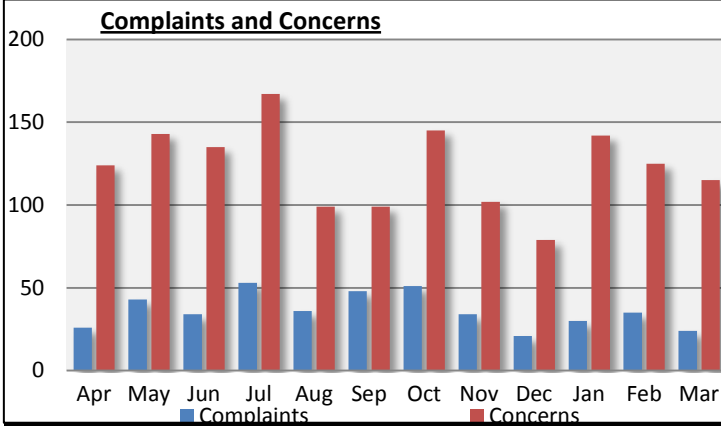
A feedback session on the findings of the National Inpatient Survey is arranged (9th May) and is open to all Trust staff. This is to provide teams the opportunity to understand the findings and consider ways in which they can make improvements. Analysis of all qualitative or 'hand written' comments has also been provided by specialty and division to triangulate with quantitative feedback, highlighting where patients report greatest satisfaction and areas to target for improvement.

A dedicated team of volunteers is being recruited and developed to assist with the feeding patients as support to ward teams and to enhance this area of experience.

3. **Patient discharge:** Patient's (or carer's/relative's) views of how the discharge has been managed will be asked and routinely monitored. The Integrated Health and Social Care Team pilot has now been working across three wards since January. This has seen working relationships develop, planning for discharge starting on arrival to wards as well as the timely involvement of Social Care due to the team meeting and prioritising patients for discharge. The availability and flexibility to meet patients and families both in and outside normal working hours has had a positive effect in some circumstances.

Initial findings suggest the pilot has contributed to developing better communication between the multi-disciplinary teams with increased awareness of roles and responsibilities. Processes developed have reduced administration tasks on the wards allowing focus onto care of the patient. The next steps are to analyse fully and develop the model alongside Wolverhampton City Council to agree a structure for the team going forward. During this time other pilots are being considered across other wards as well as the continuation of the current pilot to build and develop further best practice.

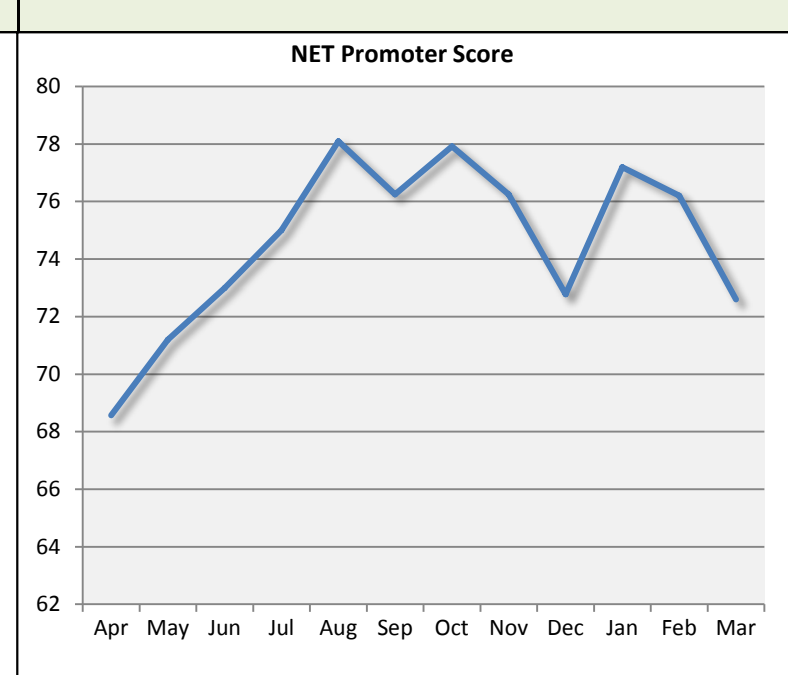
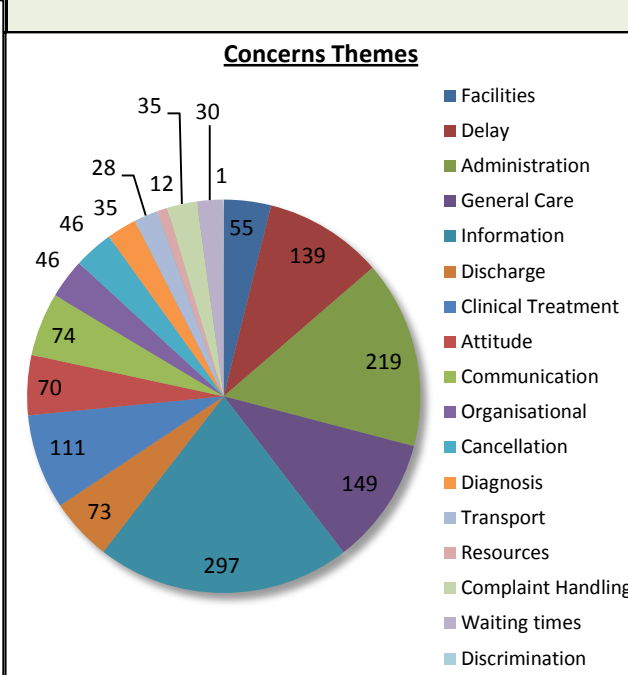
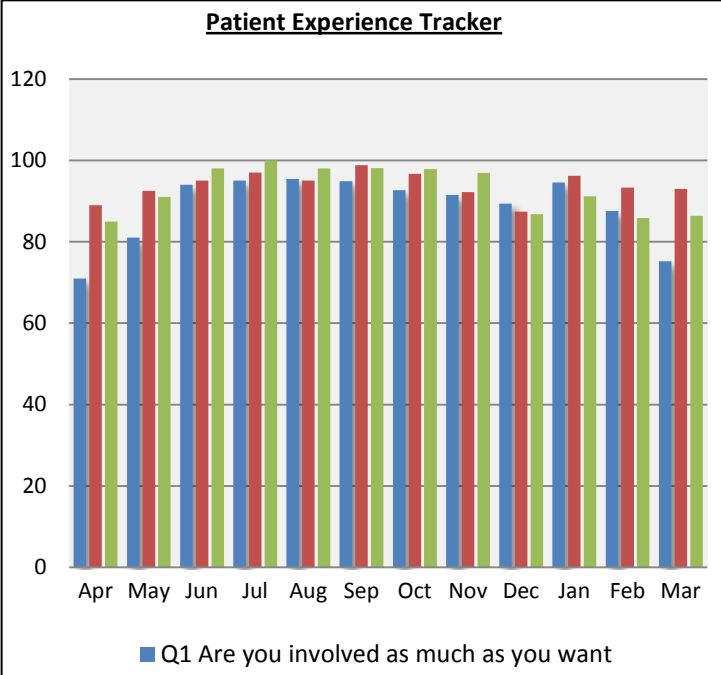
The step down criteria is still under review and measures have been implemented between the Trust and WCC Social Services to ensure quality access and monitoring throughout the step down process.



The Trust received 24 formal complaints in March 2013 in comparison to 37 received in the previous year (March 2012). PALS continues to be a valuable mechanism for raising concerns and had 115 contacts this month. The Quality Walk Round gained feedback from CHU (Clinical Haematology Unit) with PALS Outreach focussing on wards A5 and A6. As part of the continuing evolution of PALS Outreach the team also attended a

6 complaints were re-opened in March compared to 10 in March 2012.

March saw 8 complaints taking longer than 35 days for investigation and response, with 4 complaints not having an agreed extension.



The trend remains over 90%
Q1: Are you involved as much as you want? (Blue)
Patient rates overall satisfaction as good/excellent (Red)

The highest themes for PALS concerns remain Information (20.42%) and Administration (20.42%). Wayfinding enquiries have maintained the momentum due to the new signage.

The Net Promoter (Friends and Family test) has been implemented across all inpatient areas. The Accident & Emergency department have started this survey from October as it has been mandated by the SHA to implement across

Q3: Patient says yes they were treated with care and compassion (Green)	General Care (14.08%) and Delays (9.85%) are the next commonest themes.						A&E as well and to not undertake face to face surveying which has been RWT's approach preferring to do anonymous sampling. The Trust has already achieved the target to improve the score by 10 points in the first year.					
Ombudsman - Complaints Referred by By Outcome	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Issue upheld and recommendations made	0	0	0	0	0	0	0	0	0	0	0	0
Issues turned down	2	1	0	0	0	0	0	0	1	3	2	0
Recommended - Local Resolution Meeting	0	1	0	0	0	0	0	0	1	0	0	0
TOTAL	2	2	0	0	0	0	0	0	2	3	2	0

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Complaints	26	43	34	53	36	48	51	34	21	30	35	24
Concerns	124	143	135	167	99	99	145	102	79	142	125	115
Re-Opened	9	13	10	4	7	8	11	4	1	4	4	6
Q1 Are you involved as much as	71	81	94	95	95.4	94.9	92.7	91.5	89.4	94.6	87.6	75.2
Q2 Patient rates overall satisfac	89	92.5	95	97	95	98.8	96.7	92.2	87.4	96.2	93.3	93
Q3 Patient says yes they were tr	85	91	98	100	98	98.1	97.9	96.9	86.8	91.2	85.8	86.4
NET Promoter Score	68.57	71.2	73	75	78.1	76.25	77.92	76.25	72.78	77.2	76.2	72.6

Time Period Complaints	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
0-25 Days	22	22	17	20	22	26	32	22	23	18	14	9
26-35 Days	13	18	16	11	20	21	17	10	2	2	3	9
Over 35 Days	2	0	0	4	6	2	13	6	3	4	7	8

Concerns (PALS) Themes	Apr	May	June	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Facilities	3	1	1	1	4	12	22	0	1	3	6	1	55
Delay	4	7	7	16	10	11	18	13	10	14	17	12	139
Administration	16	13	26	35	13	10	26	11	13	29	18	9	219
General Care	12	8	9	21	10	10	8	13	7	20	15	16	149
Information	37	32	33	26	20	8	27	29	19	29	22	15	297
Discharge	4	8	10	9	2	8	6	8	6	5	2	5	73
Clinical Treatment	7	13	13	18	5	7	12	3	3	10	7	13	111
Attitude	3	10	4	12	8	6	6	4	3	2	8	4	70
Communication	7	8	11	1	10	5	3	6	4	11	5	3	74
Organisational	7	4	4	4	3	5	0	1	3	6	1	8	46
Cancellation	7	7	0	4	3	4	6	2	1	1	5	6	46

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