

**TITLE: PATIENT FEEDBACK REPORT FOR APRIL TO JUNE 2006
Presented to Hospital Management Board 6 September 2006**

SUMMARY:

The attached report provides information on complaints and the work of the Patient Advice and Liaison Service for **APRIL TO JUNE 2006**.

During this quarter we achieved the target of 80% responses sent out within 20 working days of receipt of the complaint.

PALS is dealing with about the same number of concerns as they did for each of the previous three quarters.

The number of compliments received was slightly up on last year.

A note regarding the analysis:

The primary form of analysis in this report makes use of statistical process control (SPC) charts. SPC charts present activity or performance data as dots joined by a black line. The variation between the dots is used to calculate the mean value (shown in green) and the upper and lower process limits (in red), which can be considered the 'normal' range of variation and describe the system in operation.

These lines are used to in a number of tests which illustrate whether a process is in or out of control and or whether a level of performance is being sustained. When the data shows that a test has been met the process limits are redrawn from the point at which the change in the system occurred.

ACTION: For Information

**REPORT FROM: Mathew Towers, Information Manager
Pam Hanbury-Hirst, Patient Relations Manager**

SPONSORED BY: Deborah Wheeler, Director of Nursing



1. SUMMARY

Complaints	2004/05	2005/06	Apr - Jun
Complaints Received			
Total complaints received	316	366	87
Total Informal complaints received	60	70	9
Total Out of Time complaints received	15	15	2
Total formal complaints received	256	296	76
% Formal complaints responded to within 20 working days	68%	64.2%	81.57%
Escalation of complaints			
% Dissatisfied Complainants	17%	14%	5%
No of complaints referred to Healthcare Commission	2	11	3
No of complaints referred to Ombudsman	0	1	0
Service Improvements			
No of actions following on from complaints	22	14	

PALS	2004/05	2005/06	Apr - Jun
Compliments Received			
Total compliments received	87	88	24
Concerns and Enquiries			
Total Concerns and other enquires handled by PALS Office	611	588	192
Average response time for patient enquiries	1.18 Days	1.04 Days	0.98 Days

The number of formal complaints received during the first quarter in 2006/07 was broadly similar to the last four quarters in which we have received between 68 and 82 complaints. For April to June 2006, we:

- ✓ Acknowledged **100%** of formal complaints within 2 working days
- ✓ Answered **81%** of formal complaints within 20 working days

An increasing number of complaints received were about the attitude of staff. There was also a higher than usual number of complaints about cleanliness.

The Patient Relations Team is handling a greater volume of concerns and enquiries from patients and visitors. We might assume that there will be over 750 such queries if the current quarter is representative of this coming year. So far in 2006/07, the team have responded to:

- ✓ **100%** of concerns and enquiries within 1 working day

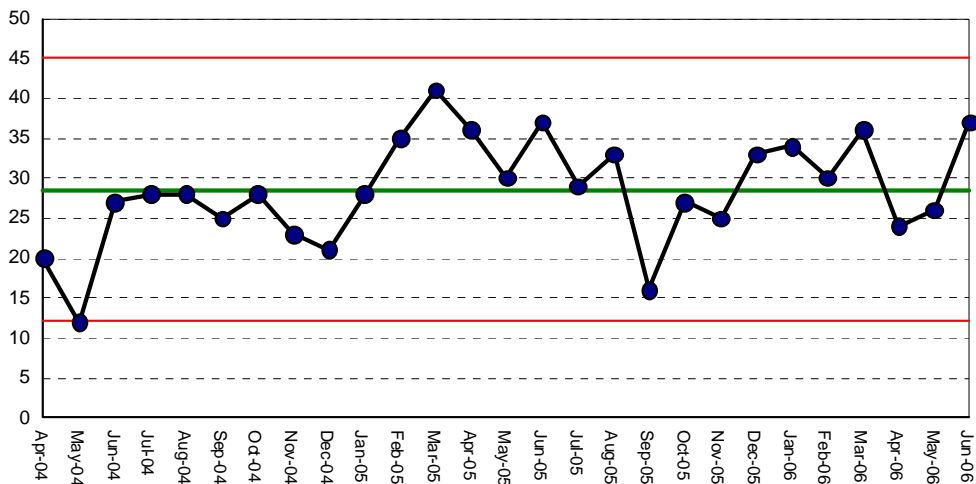
2. COMPLAINTS RECEIVED

1.1 Total Complaints Received

Figure 1 gives the total number of complaints – formal, informal, and those designated ‘out of time’ – received each month since April 2004. Complaints that are subsequently withdrawn or where a patient has not consented to a third party complaint of their behalf have been excluded from these figures.

There have been a total of 88 complaints received since April 2006. This is a 15% decrease on the same period in the previous year.

Figure 1: Total Complaints Received by Month Since 2004

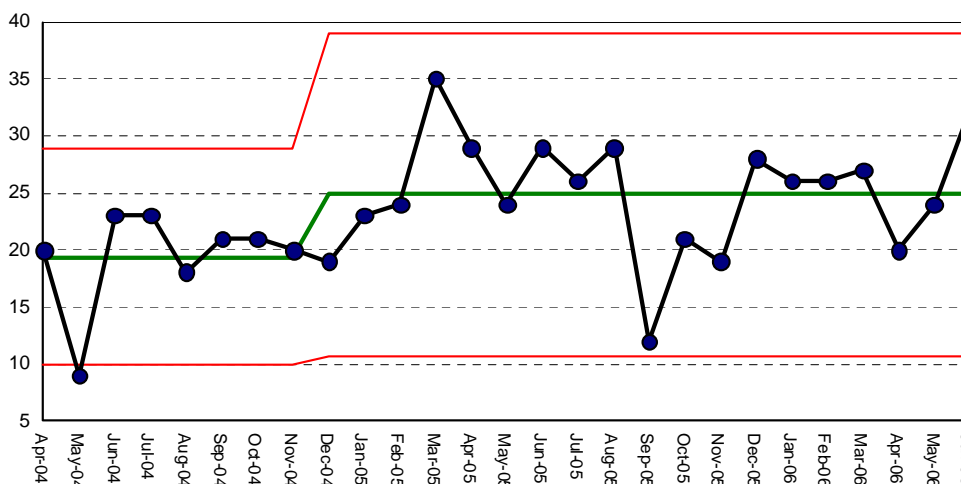


1.2 Management of Formal Complaints

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, the Trust receives 25 formal complaints each month with a normal range of anything from 11 to 39 complaints. The monthly pattern over the last two years is shown below:

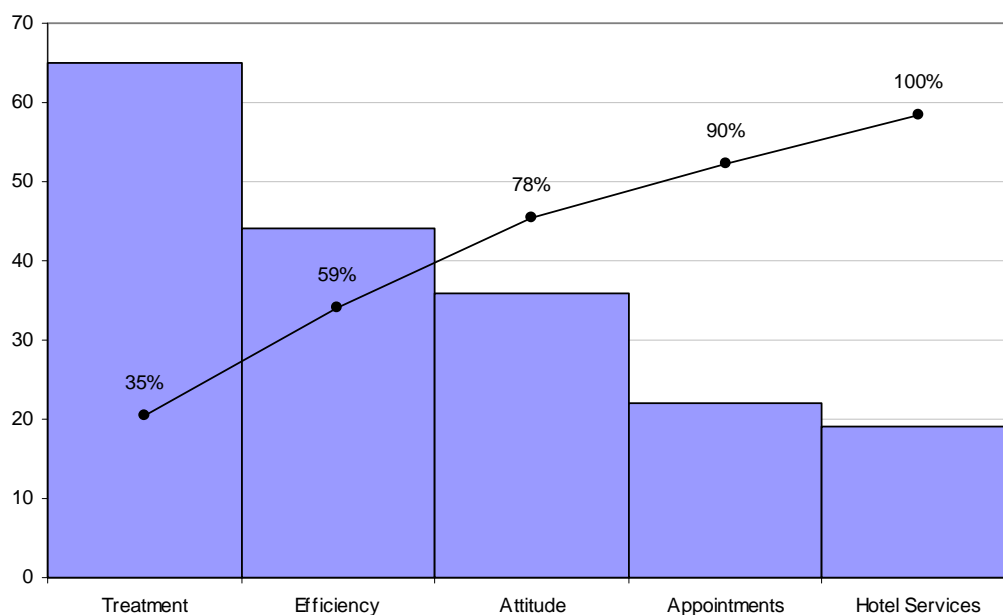
Figure 2: Formal Complaints Received by Month since April 2004



1.3 Formal Complaint Issues

The analysis presented below shows, for 2006/07, the issues that are raised in these complaints. Just under one third of formal complaints raise multiple issues and cover more than one department. We have seen over the last three months, a significant increase in the numbers of issues raised in each formal complaint.

In this period, the 77 formal complaints generated 186 issues. In the previous quarter, 79 formal complaints only generated 116 issues.



The matrix, below, shows the Directorate responsible for the area or department of the complaint by the type of complaint made.

	Treatment	Attitude	Efficiency	Appointments	Hotel Services	Grand Total	%
Medicine	21	15	13	4	5	58	42.6%
Surgery and Cancer Services	11	7	5	9	5	37	27.2%
Women's & Children's Services	11	2	5	1	0	19	14.0%
Diagnostics and Therapies	3	4	1	3	1	12	8.8%
Facilities	0	0	1	0	4	5	3.7%
Other	0	3	1	0	1	5	3.7%
Grand Total	46	31	26	17	16	136	
%	33.8%	22.8%	19.1%	12.5%	11.8%		

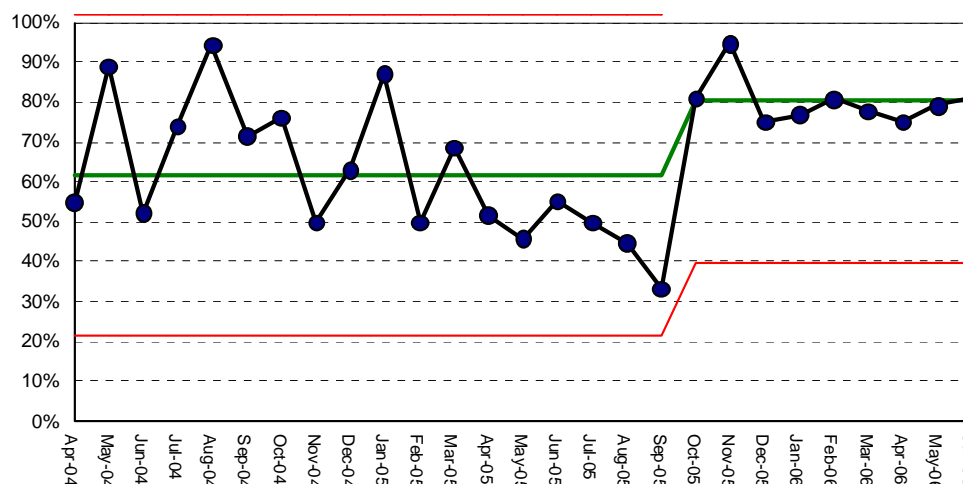
1.4 Formal Complaint Response Times

To date, the Trust has acknowledged receipt of ALL formal complaints within 2 working days of receipt.

The Trust is supposed to respond to a formal complaint within 20 working days of receipt. Figure 3 demonstrates that over the past two years, this standard has been met on average for just over 60% of cases. The improvement attained over the last half of 2005/06 has

been maintained into the first quarter of 2006/07. The step change drawn in for figure 3 illustrates the continued level of service for around 80% of complaints received.

Figure 3: Formal Complaints Responded to Within 20 Working Days by Month Since April 2004



SPC Analysis: Moving Range

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

	Treatment	Attitude	Efficiency	Appointments	Hotel Services	All
Medicine	81%	60%	100%	75%	80%	79%
Surgery and Cancer Services	91%	57%	100%	89%	100%	86%
Women's & Children's Services	45%	100%	60%	100%		58%
Diagnostics and Therapies	67%	75%	100%	33%	100%	67%
Facilities			100%		100%	100%
Other		100%	100%			100%
All	74%	65%	88%	76%	88%	76%

The performance has generally improved on the previous quarter- especially considering that there has been a significant increase in the multi-faceted nature of complaints received.

1.5 Dissatisfied Complainants

	Formal Complaints	No. Dissatisfied	% Dissatisfied
Apr-Jun 2005	82	13	15.9%
Jul-Sep 2005	68	6	8.8%
Oct-Dec 2005	68	6	8.8%
Jan-Mar 2006	79	12	15.2%
Apr-Jun 2006	87	4	5.0%

1.6 Service Improvements in last Quarter

- ✓ An alert has been put on the Emergency Department computer system to identify patients with special needs.
- ✓ The imaging department arranged for their staff to attend customer care training.
- ✓ Training was arranged for Emergency Department junior doctors on the need to liaise better with specialist medical teams.
- ✓ There has been a change of procedure on how results for the warfarin clinic are sent from the laboratory
- ✓ The signage on ITU regarding hand washing has been updated to target visitors. Their leaflet 'Information for Relatives and Friends' has also been updated.
- ✓ Monthly spot checks of the surgical waiting list are carried out to ensure correct operation is listed.
- ✓ Message now on patients bedside telephones telling callers what the charges are.

1.7 Independent Reviews sent April – June 06

1. Long standing complaint about discharge arrangements for young man who had been left paralysed after an accident. Parents live in Australia and felt that the hospital had not done enough to assist their son with his discharge. The file was sent to HCC on 12 April 2006 to date we have received no word as to the progress of the review. An update was requested in June but we did not receive a response.
2. This complaint is about a gentleman who was seen in ED and referred to the vascular clinic. When he attended the vascular clinic he was admitted and had surgery to remove 4 toes. He feels that had the ED doctor referred him to the surgical team on the night of his ED admission he would not have lost his toes. The file was sent on 24 May and to date we have not had a report on HCC findings.
3. This complaint was about an ultrasound appointment and the unwillingness of the imaging staff to give their names when requested. The u/s appointment took a long time and the gentleman asked for a letter to confirm his presence at the appointment so that he could send it to Islington Council as he had been given a parking ticket. It took us over three months to answer his initial complaint. The HCC recommended that we ensure all staff were aware that they must identify themselves and also that we improve our systems to ensure that we do not take so long to answer a similar complaint in the future. We also offered to pay the parking fine.

Independent Review Recommendations

1. The HCC asked us to further apologise to a gentleman whose infusion had leaked on the floor and he had inadvertently stepped in it making his dressings wet. These were not changed for some time and the HCC asked that nurses were advised on how to treat such cases. There was also a shortage of nurses that night and we were asked how nurses who were not going to arrive for a shift notified the hospital. This was explained to the patient and a copy of the letter sent to the HCC
2. A patient had complained that we had not diagnosed her breast cancer. The HCC asked that we improve the leaflet we give to patients in the breast clinic that explains their options and to explain the role of the multidisciplinary co-ordinator who works with the breast clinic team.
3. A gentleman complained that he had been encouraged to get out of his bed on the day surgery unit and his leg had collapsed under him. He had had an epidural and the nursing staff were not aware. He was also concerned that this fall had damaged him and he felt he received conflicting advice when he went to ED. We were asked to further apologise and explain that his nurse was fully trained although a junior staff nurse and she would receive further training. We also apologised for any misunderstanding between him and the ED doctors on what was wrong with him when he went there post surgery. The complainant was not happy with our further explanations and the case has been referred for a second review.

1.8 Ombudsman Inquiries

There were no requests during this quarter.

1.9 Compliments

There were **24** compliments received by the Executive Office in the first quarter of 2006/07. This is slightly more than the previous year which saw an average of 7 compliments received each month. Many thank you letters are sent direct to the wards and these are not counted in our total figures. Most of the compliments were about the attitude and care given by nurses and doctors. There were a number that also included the domestic staff.

1.10 Other Enquiries and Patient Concerns

The PALS Office deals with, on average, 64 concerns and enquiries each month. The current response time for ALL enquiries is 1 day or less. Nearly one-third of all enquires relate to efficiency issues (from the patient's point of view) such as discharge arrangements and intercommunication.

