Ashford and St. Peter's Hospitals
NHS Foundation Trust

COUNCIL OF GOVERNORS
5th June 2019

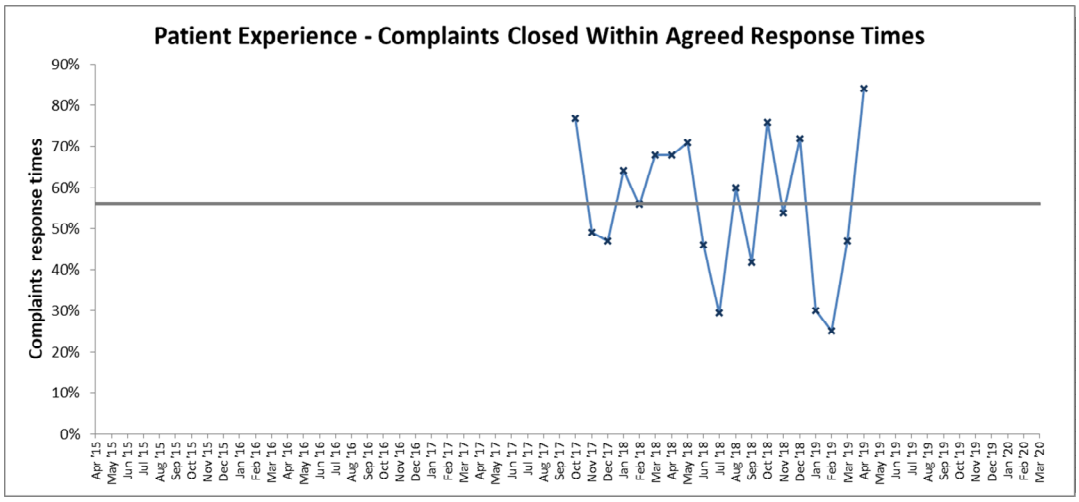
TITLE	**Complaints and PALS Update**
EXECUTIVE SUMMARY	This paper provides and update on Complaints and PALS and responds the Governors' query around the recruitment of patient experience staff and progress on the Evidence Based Workshop.
The Council is asked to:	Note
Submitted by:	Sue Tranka, Chief Nurse
Date:	June 2019
Decision:	For Noting

PATIENT EXPERIENCE

There were 43 new complaints received in April 2019. There has been special-cause variation in the number of new complaints received since November 2017, with an increase in the average number of complaints received increasing from 37 to 47 per month. The reasons for this are multifactorial and could reflect service changes, increased demand, waiting time issues, capacity issues for inpatient beds, cancelled procedures due to winter pressures, and prolonged operational pressures longer than usually occurs during winter months.

98% of these received a response within 3 working days. One complainant did not receive an acknowledgement on time due because the complaint was not forward to the Patient Experience Team as soon as it was received into the Trust due to delays in administrative processes.

There were 6 follow-up complaints reported in April 2019. The trend was that most of these cases were locally issued informal response letters which need greater quality assurance before sending to ensure that all matters raised in the original complaint are fully responded to. As part of our improvement programme all local letters will be quality assured by the Complaint Response Writer before being finally issued locally.



56 complaints were due to be closed in April 2019. ***95% complaints should be responded to within Trust target of 25 working days with performance of 84% for April***. 47 cases were closed within the 25 working day timescales (84%). This is a significant improvement from the previous month at 47% and a low of 25% in January 2019. The complaints handling process is currently under significant review with the aim to meet 95% within the next 2 months. 5 complaints were closed outside the 25 working days' timescale (9%) and 4 complaints due to be closed in April still remain open past the 25 working days timescale (7%).

The Patient Experience Improvement Programme is led by the Deputy Chief Nurse, Mrs Andrea Lewis. The programme has been updated in March 2019, and in order to deliver this plan a 4 month pilot was commenced in April 2019 to centralise the Complaint Officers from each clinical division into one team. Early indications have demonstrated a significant improvement in responding to complaints within 25 days and the team is working to clear the backlog of older complaints with weekly meeting with the Chief Nurse to assist with prioritising actions and developing resolution timeframes. Work is underway to ensure complaints and concerns are dealt with at the level closest to the area where the family has experienced an issue. This involves staff engaging effectively with patients and relatives, in order to provide a timely resolution to issues and therefore preventing escalation.

Workforce capacity issues have significantly impacted the team's ability to respond to complaints within 25 days hence the above backlog of 11 cases at the end of April. This is being addressed with the appointment of a Head of Patient Experience and Engagement, a Complaints Manager, and a Complaint Response Writer.

Complaints responded to in April have resulted in learning with changes to practice. Patients with certain mobility difficulties can sometimes find it uncomfortable to have an MRI scan using the mobile scanner, which is not as large as some fixed scanners. Two new MRI scanners are being installed in upcoming months. Signposting patients to the most appropriate scanner type for their needs was key learning.

At Ashford the Orthopaedics Ward has implemented tightened controls over discharging medications to patients after a patient was given another patient's medication list when going home. The ward nurse now stamps the discharge letter, and it is counter-signed by the patient, to evidence that information necessary for discharge has been provided covering a range of categories including medication understanding, follow-up appointments, and information for the community care nursing service.

PALS

PALS received 166 new cases in April and closed 156 cases. 159 PALS cases were due to be closed in April 2019.
123 (77%) were closed on time within 5 working days, 32 (20%) cases were closed late and 4 (3%) remain open that were due to be closed in April.

PALS themes are consistent with previous months' trends regarding enquiries about Outpatient services and the need to provide better information using clearer communication. There has also been a rise in appointments being cancelled and no notification received by the patient of this cancellation. There has been a slight increase in lost property concerns, along with concerns regarding care and treatment, medical records requests and delay with referrals.

BECOMING A LEARNING ORGANISATION USING PATIENT FEEDBACK

Outlined below are our key programmes within patient experience which support our Strategy aim of becoming a learning organisation.

A continuing patient experience priority aim this year is to ***work with patients and families to co-design care improvements.*** This is central to ensuring we learn from what both service users and staff say is important to them when making changes to our services. An experience-based co-design project for improving the complaints service started in Q3 2018 and will continue across the next 6 months. The second collaborative event is to be in June 2019 and will include feeding back on our 2 agreed improvement bundles which people at the inaugural event said mattered to them most. The bundles are promoting resolution of concerns when they first arise on the frontline, and agreeing the approach to handling a concern or complaint by working with the complainant at the outset to ensure a clear handling plan.

ELECTRONIC PATIENT FEEDBACK SOLUTION

It is vital that the Trust Strategy achievement, FFT information, and other forms of patient feedback to drive local service improvement is available in a timely manner so that services can see what they are doing well, and what needs fixing. This requires sufficient feedback volume as well as realtime access to the information.

Trust Strategy achievement will be measured with core patient experience KPIs, when formulated, using outputs from the newly piloted electronic feedback system, once the pilot finishes and procurement can be finalised.

In February 2019 the Trust commenced a pilot of a new real-time electronic patient feedback solution called R-outcomes https://r-outcomes.com/ in maternity services. The pilot questions measure the three Trust strategy aims, FFT and other priority areas including accessibility of information. The first pilot was in Maternity Services.

A tabletop exercise has been conducted with R-outcomes, the Communications Team, the Maternity Team, and the Patient Experience Team. A proposed rollout and improvement plan was then developed. Initial learning from patients and staff suggested that people are willing to complete surveys if they are asked by staff and the process is in real time. Patients also informed the pilot that terminals used to gain feedback need to be suitably private so that people can be assured that feedback is non-identifiable.

A new patient experience feedback system is to be trialled in ED in June 2019. The Viewpoint system can collect information in various ways to aid data capture from users. It is proposed the trial will use standalone devices situated in the waiting room and main department, as well as IPADs and hard copies for those patients who are less mobile. Next steps are to expand the pilot to the whole of Maternity and Women's Health Services, Medicine and the ED. The improvement and rollout strategy is currently in the process of being drawn up including setting a timeframe for the whole hospital.