

Council of Governors (in Public)

Item 7.3

Subject: Q2 Complaints & Annual Complaints Summary 2020/21
Date of meeting: Tuesday 1st December 2020
Prepared by: Laura Allwood, Patient & Family Support Manager
Presented by: Sue Pemberton, Director of Nursing & Quality

1. Executive Summary

This report outlines the informal concerns and complaints captured in Q2, 1st July 2020 – 30th September 2020. The Trust received a total of 5 formal complaints for Quarter 2.

In addition, 77 contacts were made, 40 informal concerns and 37 requests for information or advice.

Three of the informal responses were resolved by phone calls by the Consultant, Heads of Nursing and matrons to stop them advancing in to formal complaints. One was resolved via email and 11 were resolved by an informal written response, once an investigation was completed. All informal concerns were successfully resolved and any learning and actions required were managed and included in the monthly divisional complaints reports.

There were five formal complaints received in Quarter 2, one of which was a joint complaint with another Trust and was not led by LHCH. There was no trend in area or subject of the complaints and some related to different time periods. Of the five complaints three were not upheld, meaning no actions or learning was identified, one was partly upheld and one is still under investigation, awaiting final outcomes.

There were two formal complaints that had been carried over from Q4 2019/20. They had been delayed due to covid 19 as in mid-March the formal complaints process was put on a 'pause period' for 3 months from the end of March until the end of June. One was placed officially on hold in July as requested by the complainant's; this has now been reinstated in October 2020 and under full investigation. The second complaint was recommenced and completed by August 2020 which was not upheld.

Reopened complaints:

- One joint formal complaint that was responded to in March 2020, the family has submitted a response letter with further questions. This was reopened and further questions were answered, it was completed by July 2020. No further communication has taken place.
- A formal complaint that was responded to in November 2019 the family have provided a letter with further questions at the end of July 2020. LHCH has had to approach Whiston Hospital for their input which is still awaited, provisional response date within Dec 2020.
- A formal complaint that was responded to in October 2019, the complainant had approached the Ombudsman, however they advised for him to come to LHCH for further clarification on the complaint that was raised. It was reopened and completed by the Aug 2020. Further communication is still taking place between this gentleman

and the Trust.

The Trust has received 14 compliment letters/emails in this quarter - all shared and feedback to appropriate teams and directorates has been delivered.

2. Contacts - Informal concerns, Advice & Information Table1

Quarter 2 Contacts -Overall Total = 77	
40 Informal Concerns – themes	
<ul style="list-style-type: none"> • Covid 19- care received on a medical ward during which patient became positive of covid. Also, issues around medication were raised following discharge. • Patient not made aware of isolation which meant subsequent procedure was cancelled. • Patient refusing covid swab pre procedure. • Investigation over a cracked screen of a patient's phone on a ward- patient was reimbursed. • Surgery- awaiting/cancellations- ACHD surgery had to be cancelled patient anxious over employment. Awaiting surgery for removal of wires- patient becoming anxious. • Difficult bereavement meeting with a bereaved family, two family members were deaf and needed interpreters. Concerns raised around sudden deterioration of patient. MS teams meeting completed with Matron and Consultant - all resolved. • Appointments sent to deceased patient even though family had noted LHCH two weeks prior. 	
37 Advice & Information - Subjects include:	
<ul style="list-style-type: none"> • <i>Communication requests-</i> Inpatient update requests, patient had surgery but relative had not heard-incorrect number on the system, email sent for patient - wanted to check we had it, access to medical records, enquiries about appointments and discharge communications, awaited procedure since March was to be listed for September. Informal letter written regarding what caused delay- due to covid, Appointments- relatives attending at OPD, long wait for CT scan, long wait for ultrasound scan which was changed to CT scan. Had an appointment and a TOE in Nov 2019 and then no follow up phone call to the family • <i>Information requests-</i> post procedure exercise advice, wanted results and information from appointment, accessible information requests lost property. • Relative turned up to OPD in the evening very upset, father had been brought in following a heart attack. Had to phone Poccu - unable to visit as trying to get the patient stable. Reassured the family member and gave him advice on who to ring. • Covid advice for work and travel insurance- consultant provided letter. 	

3.

3.1 Complaints - Table 2 below provides details of complaints per month via division year to date

Number of complaints per month/division				
Total/month in brackets	Surgery	Medicine	Corporate	Clinical Services
April 20	0	1	0	0
May 20	1	0	0	0
June 20	1*	1	0	1*
July 20	0	1	0	0
Aug 20	2	0	0	0
Sept 20	1	1	0	0
Oct 20				
Nov 20				

Dec 20				
Jan 21				
Feb 21				
Mar 21				
Total	5	4	0	1

*joint

Table 3 below shows the complaints received in Q2 formal complaints and learning outcomes per division.

Ref:	Division	Q2 Summary of complaints	Outcome
5	Medicine	Care and Treatment Post Operatively: ACHD: Patient had surgery in Feb 2020, has had regular tissue viability appointments and wound has not healed and was concerned about the length of time and plan of care for the wound and antibiotics. Also raised concerns about the ACHD advice line.	Closed Not upheld Complaint shared for further learning and advice line is being audited.
6	Surgery	Joint being led by Arrowe Park Hospital: Two parts for LHCH to answer: Patient had a pacemaker urgently whilst as an inpatient, family wanted to know the reason why it was needed and family perceived that they had not received the discharge letter.	Closed- Not upheld
7	Surgery	Care and Treatment: Patient went in to AF and felt like she had a bad experience following this as felt unwell. Concerns were also raised around the noise levels on the ward.	Closed- partly upheld
8	Medicine	Procedure Query: Had angiogram in Dec 2019, since has had a further angiogram in Iran- Doctor there has suggested human error during our procedure.	Closed- not upheld
9	Surgery	Care and Treatment: Concerns raised there was neurological problem that was not observed in LHCH but on transfer to Stoke was awaiting spinal rehab. Other concerns raised around: DoLs, wound, sacral wound and communication.	Open- renegotiated timeframe

3.2 Parliamentary Health Service Ombudsman (PHSO)

One current complaint referred to the Ombudsman from August 2019 (original complaint received by the Trust in October 2018 and dealt with by the complaints process) regarding the communication and care awaiting a TAVI. Patient was provided with TED stockings post operatively then developed necrotic toes following discharge. Patient was later diagnosed with Peripheral vascular disease. A response was sent to the Ombudsman on 7/9/19 and we have now received a provisional recommendation in March 2020 from the PHSO. This has now been completed, complainant has received a cover letter and action plan that was completed at the time of the incident and also the monetary compensation that was set out by the ombudsman has also been completed.

3.3 Complaints Review Panel

Q1 none of the complaints were upheld which meant a Non-Executive Directors meeting didn't need to take place.

Q2 the complaints are not all formally completed. Once all completed date will be set for a review meeting as one is partly upheld so far.

4. Recommendations

The Council of Governors are asked to receive the report and the content and receive assurance that the complaints process, management and procedure is robust and monitored for effectiveness and is based upon the Trust's Complaint Policy, with the sharing of learning from each complaint review, being disseminated within the appropriate divisions and teams.