

## Council of Governors

### Item 8.3

**Subject:** Patient & Family Support Team Activity Report Q1  
**Date of meeting:** Monday 23<sup>rd</sup> September 2019  
**Prepared by:** Lisa Gurrell, 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 Q1, 1st April – 30th June 2019. The Trust received a total of 9 formal complaints for Quarter 1. The team received 81 contacts, 55 of which were informal concerns (25 of which were higher level) and requests for information or advice. No trend in subject, area or operator was noted.

All informal concerns were successfully resolved by liaising or escalating to appropriate manager/divisional team. Any learning and actions required were managed locally and included in the monthly divisional complaints reports. Consultants also copy the Patient & Family Support Manager into any letters to patients following action taken.

In addition to the informal complaints received 25 higher level informal concerns which required a more in-depth investigation/meeting/written response in order to reach a resolution. Three letters were received from MPs acting on behalf of patients, who had not made previous contact to raise concerns.

Of these 25 higher level concerns, 18 were provided with a written response, 2 meetings were held and 2 patients received reimbursement of expenses. All actions/learning were shared at divisional governance.

There were 9 formal complaints received in Quarter 1. There was no trend in area or subject of complaint and all related to different time periods from preceding 12 months. Of the 9 formal complaints 4 were partially upheld requiring action and learning, 3 not upheld meaning no actions or learning was identified. One meeting was held and 2 remain under investigation.

During Q1, 33 written compliments via the CEO or Patient & Family Support Team commending the care, services and staff.

#### 2. PALS Contacts - Informal concerns

**Table1**

Quarter 1 Contacts - Total = 81
<b>55 – Informal Concerns – themes</b> <ul style="list-style-type: none"> <li>• Car parking</li> <li>• Delays – waiting for results (including CT/MR)</li> <li>• Appointments – waiting times/cancelled appointments</li> <li>• Communication – phone lines busy/unable to contact departments including Robert Owen House</li> </ul>

<ul style="list-style-type: none"> <li>Waiting times - CT/MR</li> </ul>
<p><b>26 - Advice &amp; Information</b> - Subjects include:</p> <ul style="list-style-type: none"> <li>Access to health records</li> <li>Patient Property</li> <li>Enquiries Robert Owen House</li> <li>Interpreters advice how to book</li> <li>Clarification/information</li> </ul>
<p><b>25 Higher Level Informal Concerns in-depth investigation which prevented escalation to a formal complaint included:</b></p> <ul style="list-style-type: none"> <li>Reimbursement of Taxi fare following discharge/clarification of discharge information</li> <li>Support to patient and reimbursement of cost of mobile phone/purchased as could not access General Office over bank holiday weekend</li> <li>Meeting with patient to clarify information contained in clinic letter</li> <li>Experience of day-patient who took self-discharge</li> <li>Waiting time for procedure – MP letter</li> <li>Delay in reporting of diagnostic tests – MP letter</li> </ul> <p><b>This demonstrates that the proactive approach prevents the escalation to a formal complaint and a timely resolution for patients and families.</b></p>

### 3. Complaints

Table 2 below provides details of complaints received per month via division year to date

Number of complaints per month/division				
Total/month in brackets	Surgery	Medicine	Corporate	Clinical Services
April 19	0	2	0	0
May 19	0	3	0	0
June 19	0	3	1	0
<b>Total</b>	<b>0</b>	<b>8</b>	<b>1</b>	<b>0</b>

Any action plans/learning is presented to the relevant committee as a separate agenda item by the divisional leads.

**Table 3** below shows the complaints received in Q3 and learning outcomes per division.

Ref:	Division	Q1 Summary of complaints	Outcome
01	Medicine	Clinical Care – complications following ablation procedure Joint with Welsh Trust	Closed/re-opened <b>partly upheld</b> <b>Meeting pending</b>
02	Medicine	Clinical Care – patient with previous mastectomy advised right arm should not be used for procedure – patient developed post procedure complications with same arm.	Closed – <u>not upheld</u>
03	Medicine	Clinical Care - Multi NHS provider complaint Whiston/Clatterbridge COPD community team – relating to referral for COPD service.	Closed – <u>not upheld</u>
04	Medicine	Clinical Care - patient underwent ablation procedure	Closed – <b>partly</b>

		and experienced abdominal pain/admission to local trust. Queried if this was caused by the procedure.	<b>upheld</b>
05	Medicine	<b>Clinical Management Plan</b> - Patient felt the received incorrect information regarding diagnosis following sleep study.	Closed – <b>partly upheld</b>
06	Corporate/ Medicine	<b>COMMUNICATION</b> - Patient informed of diagnosis of dementia and daughter requested no correspondence to go to patient as she was unaware of diagnosis. Patient received a copy letter addressed to her home address after daughter speaking to TAVI co-ordinator.	Closed – <b>partly upheld</b>
07	Medicine	Clinical Care - patient experienced VF arrest during angiogram. Concerns regarding communication regarding this and no communication with husband. Unhappy experience and impact of this.	<b>Closed – Upheld</b>
08	Medicine	Clinical care – patient complained of communication/relating to management plan for CF	Closed – <b>partly upheld</b>
09	Medicine	<b>Clinical care</b> - Patient transferred from Whiston following - patient not taken to lab as established MI and planned for following day - patient deteriorated taken to lab/arrested/died. Family question why he was not taken sooner. Two meetings held but still disagree with information/explanation	Closed – two meetings held. Not upheld

Once all complaints are closed for Q1 the data/summary of learning is published on the Trust's website.

### 3.1 Parliamentary Health Service Ombudsman (PHSO)

The PHSO have requested the complaint file/health records relating to a complaint from the clinical services division raised in 2017/18 and have taken the decision to investigate this complaint further.

### 3.2 Complaints Review Panel

In Q1 a panel was held and complaints including investigations, responses and action plans were reviewed from Q4 by two of the Non-Executive Directors. They were assured that the investigations were comprehensive and assured that complaints management was robust and did not request to review any of the complaints further.

### 4.0 Recommendations

The Council of Governors are asked to receive the report and the content and be assured that the Trust has a robust complaints management process in place and all actions and learning from both informal and formal complaints are discussed at both divisional and organisational level.