

Council of Governors (in Public) **Item 8.3**

Subject: Q2 Complaints Report 2018/19
Date of meeting: 11th December 2018
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 Q2, 1 July – 31 September 2018. The Trust received a total of 13 complaints YTD from April 2018 at the end of Q2.

The team received 105 contacts, 49 of which requested advice/information. Trends included; general hospital enquiries, requests for information, signposting/support and car parking.

In addition, 56 informal concerns were raised. Trends for informal complaints included: accessibility of appointments for ACHD service which is a continued trend from previous quarters, in addition to: waiting times for appointments/referrals, communication issues and appointment issues/waiting time delays in outpatients. All informal concerns were successfully resolved and none escalated to a formal complaint although all are shared with and escalated to appropriate manager/divisional team. Any learning and actions required were managed locally and included in the monthly divisional complaints reports. Consultants will also copy the Patient & Family Support Manager into any letters to patients following action.

There were 5 formal complaints received in quarter 2, but one withdrew their complaint following swift resolution, making the total 4.

In addition to the 4 complaints, two other enquires were received from other Trusts relating to complaints they were investigating from patients who had attended LHCH, no concerns related to LHCH but supplementary information was provided by LHCH to support

There was no trend in area or subject for formal complaints and all related to different time periods from preceding 12 months.

Of the 4 complaints investigated, one was accepted out of time as this related to an admission from 2016. Two complaints required an extension to the response date, and this was agreed with the complainants. The other two complaints were responded to within the negotiated time frame, one patient preferred to meet with the consultant in clinic, as opposed to receiving a written response and reached a satisfactory resolution.

Overall, 2 were upheld requiring action and learning, 1 was partially upheld requiring some learning and 1 was not upheld meaning no actions or learning was identified. From the two enquires received from other Trusts, no concerns were raised relating to LHCH but clarity of information was provided to support their Trust's investigations.

During Q2 the CEO received 12 written compliments via letter or email commending the care,

treatment and services provided.

2. Contacts/Informal concerns

Table1

Quarter 2 Contacts - Total = 105	
49 – Requests for advice and information-	Themes include:
<ul style="list-style-type: none"> • General hospital enquiries • Requests for information • Signposting/support • Car parking 	
56 - Informal concerns	Themes include:
<ul style="list-style-type: none"> • Accessibility of appointments for ACHD service • Waiting times for appointments • Waiting times/enquires regarding referrals • Communication issues • Appointment issues/waiting time delays in outpatients 	
Learning included:	
<ul style="list-style-type: none"> • Improved communication processes • Self-check in kiosks now provide the approximate duration of when clinics are delayed so patients informed immediately at check-in • ACHD patients provided with helpline telephone number to ensure they have the required support they require 	

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	2	1	1	2
May	0	0	0	0
June	1	1	0	1
July	1	0	2	1
August	1	0	0	1
September	0	0	0	0
Total	5	2	1	5

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 and learning outcomes per division.

Ref:	Division	Q2 Summary of complaints	Status / Learning Outcomes
10	Surgery Medicine	COMMUNICATION/ CLINICAL TREATMENT patient initially informed they required cardiac surgery, after further investigations which took some time; the patient was referred to the cardiology team for interventional treatment as opposed to surgery. Patient did not receive timely or adequate communication regarding this and was not kept up-to-date with decision making.	Closed – Upheld Meeting held and resolution reached. Learning: <i>improved communication between divisions for complex/cross divisional complaints</i>

11	Clinical Services	CLINICAL TREATMENT - multiple questions regarding patient who had long stay in ITU before he died in 2016. Previous meetings and two home visits held to provide additional support to patient's wife.	Closed – Not Upheld Comprehensive response sent. Two previous meetings held. No actions/learning required
12	Clinical Services	DELAY IN DISCHARGE MEDICATION Patient incurred a delay and relative complained about the service provided at discharge.	Closed – Upheld Apology given for delay and explanation regarding reasons why prescription required clarification by doctor on two occasions to ensure patient received correct doses of medication. Learning: <i>Improved communication and access/training for nursing staff to access pharmacy TTO tracker.</i>
13	Surgery	CONSULTATION/ MEDICAL TREATMENT Patient attended OPD and unclear about management plan and required clarity regarding the content of clinic letter. He highlighted care and treatment since 2013.	Closed – Partially upheld Patient reviewed by consultant as this was his preference and clarity provided. Patient happy with outcome and expressed did not wish to receive a written response as management plan clearly explained. Learning: <i>Clearer communication</i>

Once all complaints are closed for Q2 the data/summary of learning is published on the Trust's website.

3.1 Parliamentary Health Service Ombudsman (PHSO)

There are no complaints currently under investigation although the PHSO have requested the complaint file/health records relating to a complaint from the clinical services division raised in 2017/18. The Trust has had no further communication from the PHSO after providing records.

In addition, the PHSO have requested the file/RCA report following an incident from 2016. This was not a formal complaint but the Surgical Division completed an RCA and met with the family following this and provided a written response. The Trust have had no further communication from the PHSO after providing records.

3.2 Complaints Review Panel

In October a panel was held and complaints including investigations, responses and action plans from Q2 were reviewed by two of the Non-Executive Directors. They were assured that the investigations were comprehensive and assured that complaints management was robust.

4.0 Recommendations

The Council of Governors is asked to receive the report and the content and be assured that all actions and learning from both informal and formal complaints are discussed at both divisional and organisational level.