

Council of Governors Item 10.3

Subject: Q3 Complaints Report 2023/24
Date of meeting: 5th March 2024
Prepared by: Laura Allwood Patient & Family Support Manager
Presented by: Joan Mathews Director of Nursing and Quality

1. Executive Summary

The purpose of this report is to provide an update on the numbers of formal and informal concerns received into the Trust. The report will provide an overview of contacts made to the patient and family support team for either advice or information.

Within quarter three (1st October- 31st December 2023) the Trust received a total of:

- 11 formal complaints
- 128 contacts comprising of- 55 informal concerns - 73 requests for information or advice.
- 18 compliments by letter or e-mail received (all shared with the appropriate teams)

The 11 formal complaints received in this quarter are all close except 1, 4 were partly upheld and 6 were not upheld. Regular communication is had with the complainant to ensure they are kept up to date with progress being made. All complaints are managed as per the Trust Policy.

2. Contacts - Informal concerns, Advice & Information

55 Informal Concern Themes

Subjects include:

- Inpatient- Family didn't feel informed on what was happening and had questions.
- **Cardiac surgery**- delayed surgery/cancelled and awaiting new date.
- Advised operation cancelled when arrived at the reception desk.
- Waiting for surgery and pressure from employer.
- No information following clinic- waiting surgery.
- Cancelled surgery 3 times, not sure of next steps following clinic appointment.
- Long wait and worsening symptoms.
- **Estates**- potential unsafe walkway outside birch ward- letter provided to the patient.
- CF- complex patient- unhappy can't start medication and self-discharged from last admission.
- Private patient- chasing echo results from 3 weeks ago.
- Cardiology procedure- patient raised issues around consent and staff introducing themselves in the procedure.
- Patient awaiting angiogram and not heard when date will be.
- ACHD- Medical/poccu and maple issues raised- team met with patient in clinic and discussed concerns.
- **Appointments**-
- Cardiac diagnostics appt query, not notified of an ECHO appointment cancellation.
- Aortic patient- symptoms worsening expedited tests and appointment.
- Thoracic patient chasing next steps- expedited appointment and scans.
- Patient stated no time set for telephone appointment so wasn't available- letter worded as a DNA- rescheduled appointment.
- Patient needed appointment cancelling due to family circumstances and couldn't get hold of anyone in central booking team to reschedule- need another appt.

- Cancelled appt- rescheduled for Feb 24- family and patient wanted sooner as urgently waiting for surgery.
- Follow up after cardiac surgery- appt changed several times and not within the 6-8 weeks post-surgery.
- Telephone appt didn't happen as scheduled.
- Outpatient and cardiac diagnostics appointments- 4 calls taken- patient not informed clinic was running late, and patient left as felt unwell, unhappy with the outcome of the consultation, unhappy seen by the GPSI, unhappy with appointment in Cardiac diagnostics.
- **Referral**- following clinic appointment needed referral to urology query cancer- was done 6 months later- raised as an incident to be investigated.
- **Holly Suite**- patient complained that staff had a mask on but seemed to have a cold and kept removing the mask and patient and family member became unwell over a week later.
- **Cardiac diagnostics**- experience in clinic.
- **Results**- chasing MRI results.
- Awaiting result after treadmill test.
- **Cedar**- family not told that patient went back to theatre. Daughter unhappy about the discharge of her father- complex issues.
- **Cardiology**- Unhappy with consultation and outcome and manner of the consultant.
- **CT scan**- unhappy with allocation of date and time of appointment and when arrived there was delays so appointment had to be rescheduled.
- **Abusive caller**- advised would come to the hospital to protest outside, patient has mental health problems. Wanted MRI results but only had test 5 days ago- escalated to security team.
- Chase echo results from 3 months ago
- **Oak ward**- Experience with staff on admission- fed back to the WM to review. Suture removal- unable to get treatment room/walk in.
- **Birch ward**- wife rang concerned wouldn't get procedure as 4th on the list.
- Unhappy with aspects of stay on birch- resolved by the WM.
- **Car park**- Costly for only 15-minute stay.

73 Advice & Information

- **Cancelled surgery/waiting times for cardiac surgery/cardiology procedures 4 calls**- 5 times cancelled for cardiac surgery- causing stress and strain on patient and family. Redo ablation waiting times as symptoms causing the patient problems.
- **Cardiac surgery**- Cancelled query for new date.
- Query over surgery date.
- Cancelled twice- new date.
- ACHD MDT waiting list. Advised September for cardiac surgery and been given November.
- Inpatient- patient awaiting angiogram and wanting more information on date and time, discharge concerns raised by son of a patient on ACU.
- Clinic letters- 2 calls chasing appointment letters.
- Private patient- 2 calls- invoice gone to patient's old address. Invoice dispute.
- TAVI- seeking medical advice x2 calls.
- Monitor advice as moving to Australia.
- Request for info/results- patient wanting scan report and images. Chasing results from August.
- Cardiology- not agreeing with clinical decision and seeking advice on next steps.
- Choose and book- cardiology patient- seeking advice on waiting times.
- **Appointments**- request for face 2 face. Father been referred for cardiac surgery and enquiring next steps. Chasing post op surgical appointment and driving advice. Lost letter-

<p>wanted date and time confirmation. Chasing waiting time for appointment and private query. Pain from wound still- appointment given.</p> <ul style="list-style-type: none"> • Appointment queries x2 • Wards- property queries • Death notification • Notes request • Research- in a trial wanted to ask questions. • Cardiology- patient awaiting cancer treatment needs some advice from cardiologist. • Stoma awareness – cherry ward. • Cancelled surgery enquires- x4 • Transport advice • Medication advice- x2 • Loop recorder wanting explant- advice needed. • Worsening symptoms whilst awaiting ablation. • PFT results- LUFT issue • Information to GP following OPD • Chasing letter RE transplant • Awaiting urgent MRI has PPM
<p>Administration related concerns</p> <ul style="list-style-type: none"> • DVLA forms x3 calls taken- chasing forms to be filled in and one unhappy with the content of the letter and employment now in doubt. • Administration- no return calls
<p>Higher level informal concerns:</p> <p>None</p>

3. 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 23	1	4	0	0
May 23	2	3	0	0
June 23	0	2	0	0
July 23	1	2	0	1
Aug 23	1	3	0	0
Sept 23	1*	2	1	0
Oct 23	1	0	0	0
Nov 23	2	3	0	0
Dec 23	2	3	0	0
Jan 24				
Feb 24				
Mar 24				
Total	11	22	1	1

*joint within LHCH

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

Q3 Complaints			
24	Surgery	Unhappy with follow up after Ross procedure – issues around medication and after care.	Under investigation Delay due to consultant sickness
25	ACHD- Medicine	Unhappy with the lack of follow up after a procedure in Leeds hospital. Had a clinic appointment in February 23 and didn't not receive the clinic letter until October 23.	Closed- partly upheld

26	Medicine	LINQ device fitted in 2019 had an accident which led it to be explanted in another hospital. Advised at an appointment this year that it may be located incorrectly when first implanted.	Closed-not upheld
27	Medicine/Surgery	Patient under target healthy lung and small nodule found and was rescanned and later diagnosed with lung cancer. Patient feels should have been diagnosed sooner.	Closed-not upheld
28	Surgery	5 cancellations and rescheduled whilst waiting for cardiac surgery.	Closed- partly upheld
29	Surgery	Multiple issues- unsafe discharge, guidance after discharge when felt unwell. Patient was later readmitted and treated for endocarditis and had a second operation. Has been left with a hernia to his lower sternum- has affected the patients physical and mental health.	Closed-not upheld
30	Medicine-community	Via Knowsley ICB- Unhappy with the waiting times for a cardiac MRI and their availability to patients. Unhappy that he is still awaiting the MRI results.	Closed-not upheld
31	Surgery	Joint- Led by Manchester RI- Cancelled surgery in November 23 and the effect it has had on the patient. Patient is Afro-caribbean descent and feels should have been considered in the plan for surgery.	Closed-not upheld
32	Medicine	Procedure in December 2020 had an injury to her arm and couldn't partake in cardiac rehab for some time due to this. Discharge summary letter inaccurate information provided.	Closed- partly upheld
33	Medicine	Via Knowsley ICB- Patient had a scan and was advised to wait for 6 weeks to have a scan and finish antibiotics. During that time patient passed away from cancer- could the diagnosis have been earlier?	Closed- not upheld
34	Surgery	Via Welsh health board- Cancellations and changes to surgery date- 8 times.	Closed- partly upheld

Key: Upheld = complaints considered well founded – requiring action/learning **Partly upheld** = action may be required for part of the complaint **Not upheld** = following investigation no evidence found to substantiate complaint, but acknowledgement of disappointment given and apologies where necessary

3.1 Parliamentary Health Service Ombudsman (PHSO)

Closed case- Historical case from 2019. Ombudsman final report received- letter sent to the complainant, with the action plan and updated protocols. These have also been to the NHS Improvement team. Complainant compensated £500.

Notification from the PHSO investigating a complaint- Case from July 21, patient had a heart attack and went via the catheter lab and then had urgent cardiac surgery during the same admission. Sadly, the patient passed away following sudden deterioration on cedar ward. Several family meetings took place, and a formal complaint process was undertaken. All medical records and complaints file sent to the PHSO in July 2023. Await outcome but likely to take time. A written letter from Dr Perry had to be sent to the family due to their aggression towards a member of the LHCH staff after one of the meetings.

3.2 Complaints Review Panel

The Non-executive review panel meeting for Q3 took place on the 17th January 2024 and they were satisfied with the complaint process and responses.

3.3 Medical Examiner concerns raised.

Lead of the ME's has changed to Dr Damien Cullington for the next year, Dr Amy Hill has been recruited to the medical examiner team from 1st February 2024 with the retirement of Mr Williams.

All deaths are scrutinised by the ME/MEO, any that raise any concerns are highlighted to Dr Raph Perry and Dr James Greenwood along with the Joan Matthews DON and Julie Roy DDON. In Q3, 3 deaths were highlighted to them for full MRG's to take place.

4.0 Recommendations

The Council of Governors are requested to note the report and the content.