

# Complaints Annual Report 1<sup>st</sup> April 2012 – 31<sup>st</sup> March 2013

**Date:** May 2013  
**Prepared By:** Steve McEwen, Complaints Manager

**1. Overview:**

The data collated between 1<sup>st</sup> April 2012 and 31<sup>st</sup> March 2013 shows that the Trust received a total of 663 complaints, 1,162 PALS contacts, 35 claims, 1,580 compliments and was involved in 36 inquests.

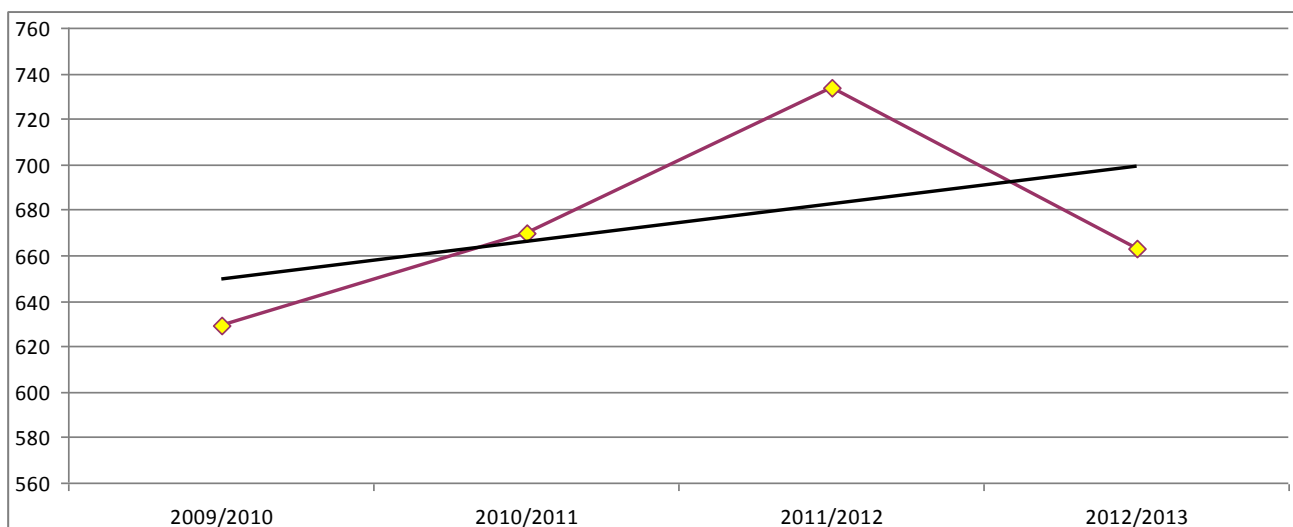
**2. Complaints:**

During year 2012/13, the Trust received a total 663 written complaints of which 556 have been closed. If this is compared to hospital episodes in the same period then this rate of complaint equates to 0.07% of attendances. **Section 4** provides further information in respect of the key performance indicators for written complaints.

**Figure 1a** shows via the purple line the total number of complaints received over the last 4 years since the introduction of the current complaints regulations. As can be seen, in the last 3 preceding financial years there has been an upward trend (blue line) in number of complaints received per annum. This year, however, we have seen there has been a decrease in the number of complaints received and we have achieved a reduction of 9.9% against our corporate objective of a 10% decrease.

We believe this has been achieved by a number of positive service changes introduced over the course of this year, which has delivered an increase of the ownership of complaints locally by the Business Units.

**Figure 1a: Complaints received over the last 4 years**



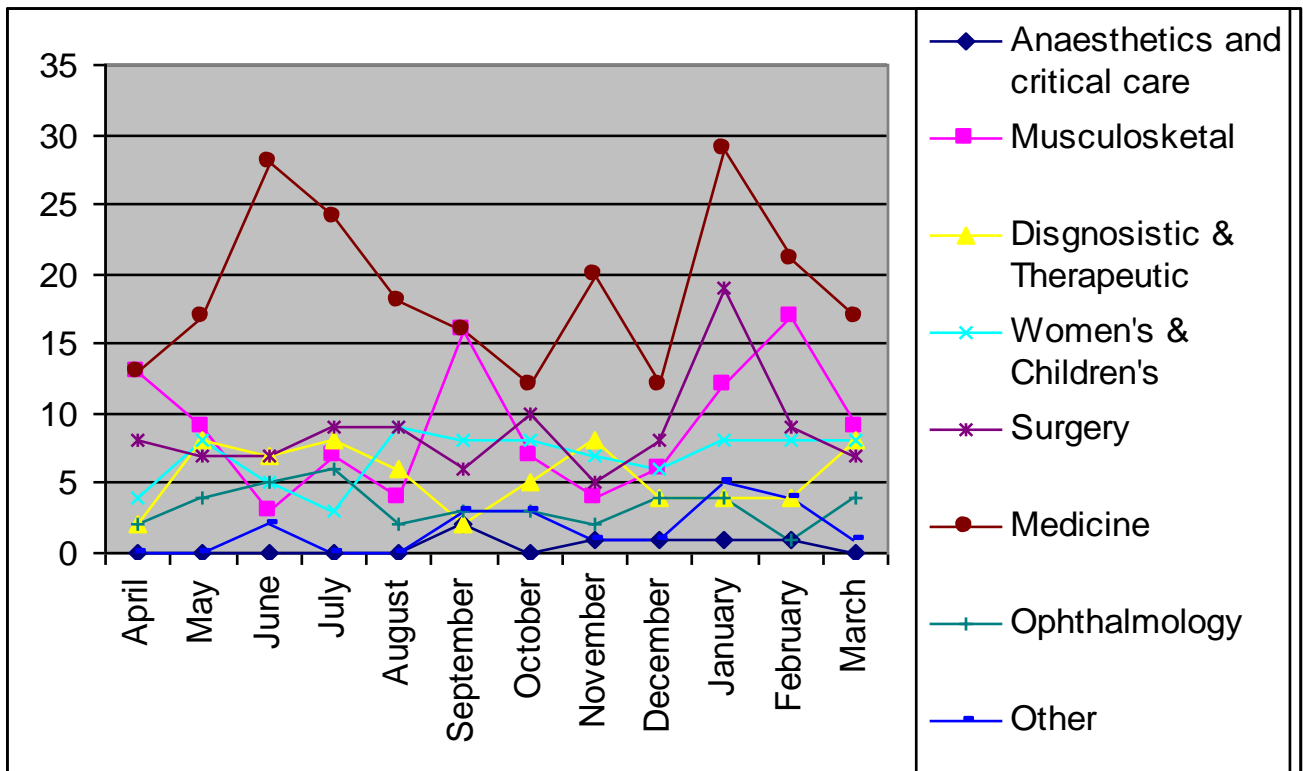
**Table 1b** shows the breakdown of complaints by business unit over the last 12 Months with this represented graphically in **Figure 1c**.

**Table 1b: Total number of Complaints by Business unit**

	Anaesthetics and critical care	MSK	D&T	W&C	Surgery	Medicine	Ophthalmology	Other
April	0	13	2	4	8	13	2	0
May	0	9	8	8	7	17	4	0
June	0	3	7	5	7	28	5	2
July	0	7	8	3	9	24	6	0
August	0	4	6	9	9	18	2	0
September	2	16	2	8	6	16	3	3
October	0	7	5	8	10	12	3	3
November	1	4	8	7	5	20	2	1
December	1	6	4	6	8	12	4	1
January	1	12	4	8	19	29	4	5
February	1	17	4	8	9	21	1	4
March	0	9	8	8	7	17	4	1
Total	6	107	66	82	104	227	40	20

**Figure 1c: Graph showing the total number of complaints by Business unit**

Although a 'busy' graph, it does allow recognition of peak periods of complaints received.

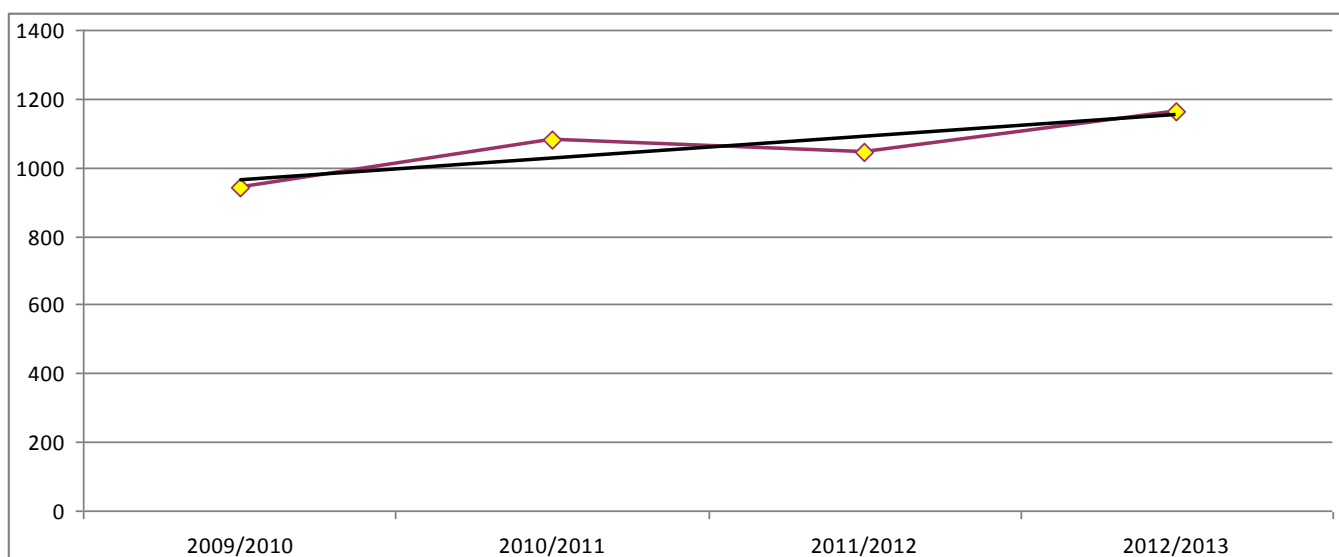


### 3. PALS:

During 2012/2013, the Trust received 1,162 PALS contacts. Compared to hospital episodes in the same period this equates to contact at the rate of 0.12% of attendances. **Section 5** provides further information in respect of the key performance indicators for PAL's issues.

**Figure 2a** shows the total number of PALS contacts received over the last 4 years. This does show an increase in contacts. It should be noted that PALS contacts do not necessarily involve complaints and it should be emphasised that better advertising, and promotion, of the service within the Trust has facilitated access and use of the service.

**Figure 2a: PALS received during the last 4 years**

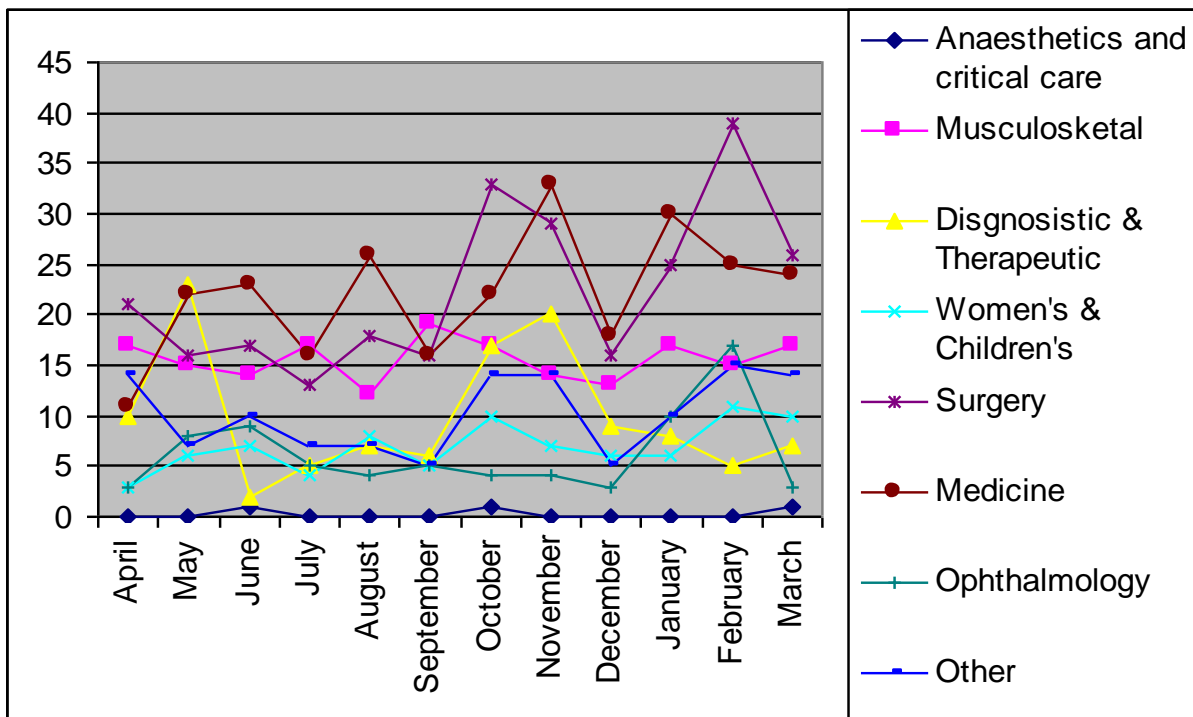


**Table 2b** shows the breakdown of PALS by business unit over the last 12 months with this represented graphically in **Figure 2c**.

**Table 2b: Total number of PALS contacts by Business unit**

	Anaesthetics and critical care	MSK	D&T	W&C	Surgery	Medicine	Ophthalmology	Other
April	0	17	10	3	21	11	3	14
May	0	15	23	6	16	22	8	7
June	1	14	2	7	17	23	9	10
July	0	17	5	4	13	16	5	7
August	0	12	7	8	18	26	4	7
September	0	19	6	5	16	16	5	5
October	1	17	17	10	33	22	4	14
November	0	14	20	7	29	33	4	14
December	0	13	9	6	16	18	3	5
January	0	17	8	6	25	30	10	10
February	0	15	5	11	39	25	17	15
March	1	17	7	10	26	24	3	14
<b>Total</b>	<b>3</b>	<b>187</b>	<b>119</b>	<b>83</b>	<b>269</b>	<b>266</b>	<b>75</b>	<b>122</b>

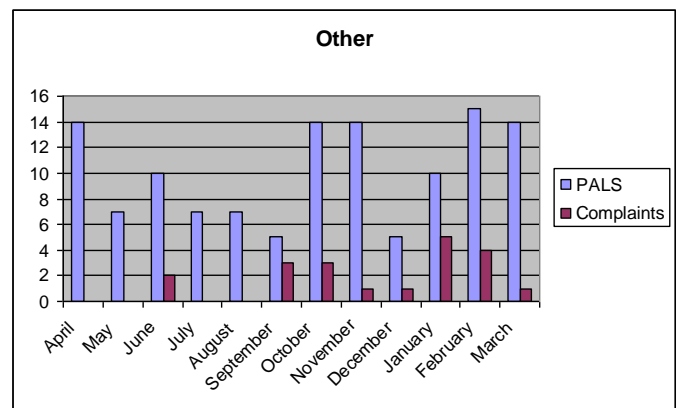
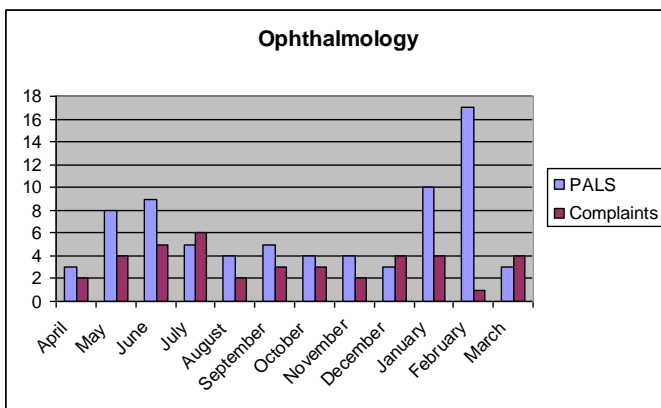
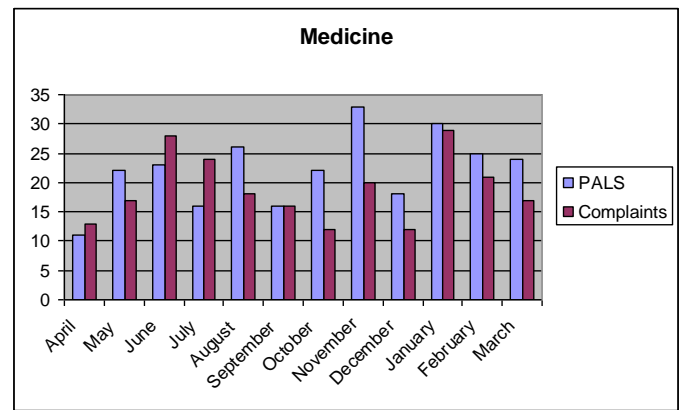
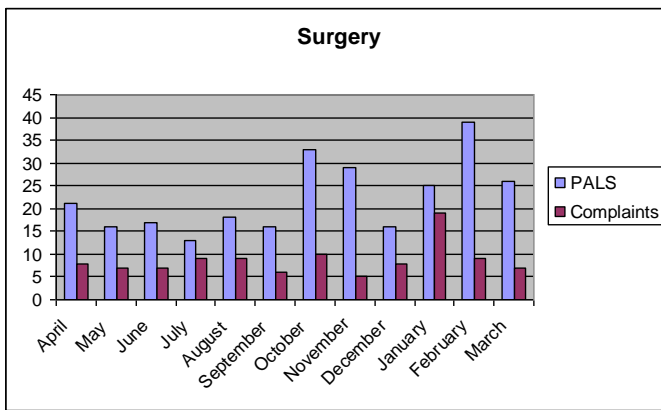
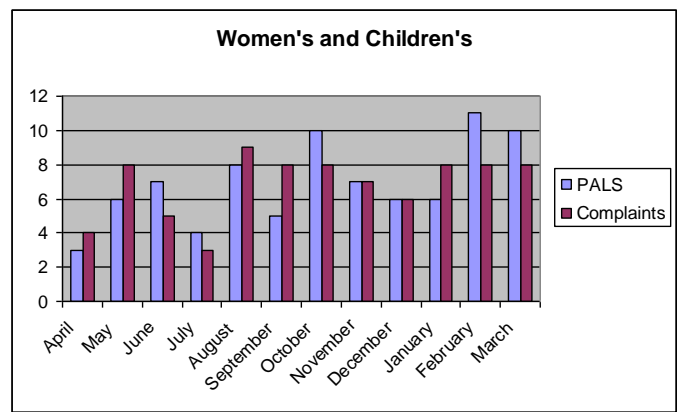
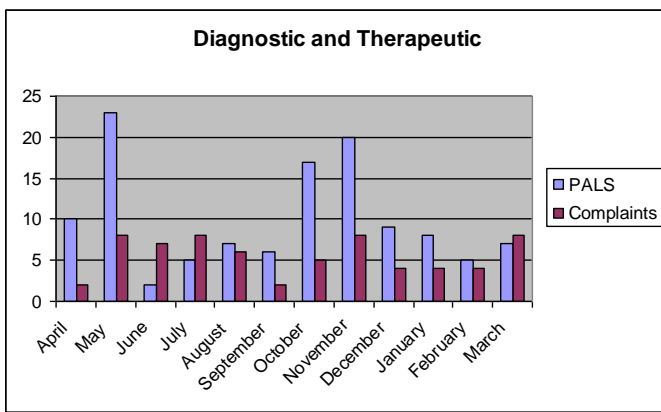
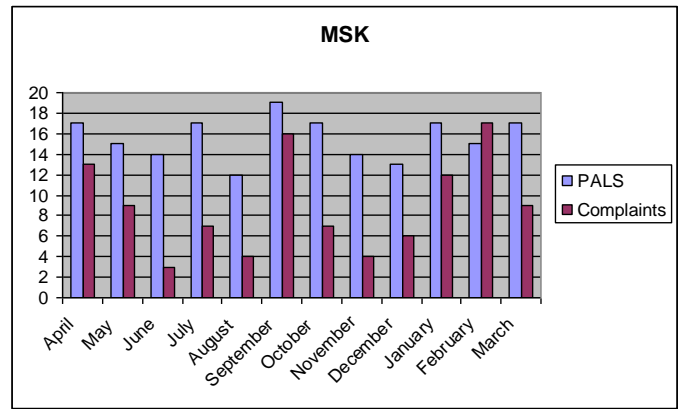
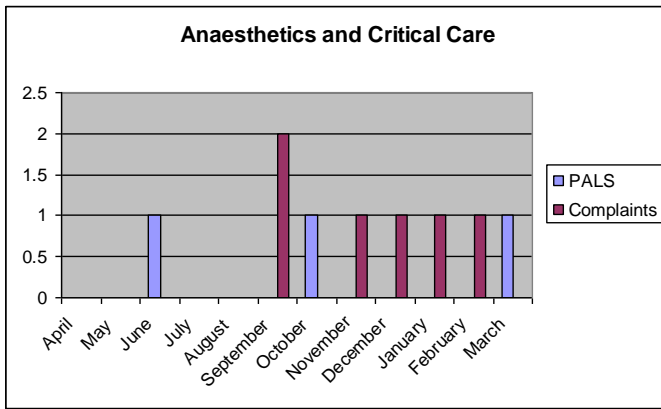
**Figure 2c: Graph showing the total number of PALS by Business unit**



The breakdown of PALS contacts falls broadly under the areas of general enquiries and concerns. The former are contacts where a patient (or their relative, carer) have an enquiry about an aspect of the hospital and its services. This could be to do with an appointment, asking the location of a department, trying to track down a loved one or finding out about visiting times.

Concerns covers verbal complaints where a patient (or their relative, carer) are unhappy with an aspect of our service. From 1<sup>st</sup> April 2013 there will be a more detailed breakdown of the themes raised via PALS to allow the Business Units an opportunity to further learn from this type of feedback.

The following graphs represent each business unit with the number of complaints and PALS contacts received monthly in the last year.



#### 4. Key Performance Indicators (KPI's) for complaints:

**Table 3a** compares our performance against the Key Performance Indicators for responding to written complaints over the last 4 years.

<b>Table 3a</b>	Complaints acknowledged within 3 working days	Complaints responded to within the negotiated deadline	Complaints reopened.
<b>2012/2013</b>	663 (100%)	404 so far (72% of the 556 completed)	90 so far (16% of the 556 completed)
<b>2011/2012</b>	736 (100%)	528 (72%)	152 (21%)
<b>2010/2011</b>	670 (100%)	523 (78%)	132 (19%)
<b>2009/2010</b>	629 (100%)	528 (84%)	130 (20%)

The performance measures within the local resolution process for written complaints require compliance at 85%, or above, in respect of:

- acknowledging letters of complaint within 3 working days and
- responding to the complainant within the negotiated deadline.

The majority of complainants who waited longer than the initially agreed timescale for a response agreed an extension of time, in line with the NHS Complaints Procedure (within agreed timescales) and were all offered a written apology as well as explanation for the delay.

Currently, the complaints team are working with the BU's to increase compliance with the internal target of 85%. This includes further monitoring of targets by the business unit and feed back to each BU about their performance on a monthly basis including a 'RAG' rating against the 85% internal compliance target. Business units failing to either meet the target, or show an improvement in performance, have this information escalated to their Business Unit Director through the monthly Executive/BUD performance meetings.

#### 5. Key Performance Indicators (KPI's) for contacts via PALS:

The Trust received 1,162 contacts via PALS during 2012/2013 of which 95% were responded to within a mutually agreed timescale. The outstanding 5% were contacted and a mutually re-negotiated timescale was agreed and adhered to.

#### 6. Learning from complaints - Action Plans:

Of the 161 action points identified in complaints investigations, 100 (62%) have been completed to date. Of the remaining 61 action points, 20 are on target for being completed within the specified time. In respect of the 41 overdue evidence is being sought from the business units involved confirming that actions have been taken. The vast majority of these include 'ongoing' actions and the complaints team are working with the Business Units to agree a date for closure of these actions moving forward. The graphs overleaf give a summary of the main complaints' themes and the actions taken for each business unit.

## 7. Compliments:

As can be seen from the Business Unit charts, a large number of compliments are received by wards and departments across the hospital. Reporting of these remains incomplete and a programme of reinforcement by the PALS, and Complaints team, is seeking to address the under reporting of a very important part of feedback to staff.

Next year 2013/14, starting in Q1, we will be looking at what learning can be taken from compliments received, and shared with the business units, to help improve services through raising awareness trust-wide of good practice. The report will start to breakdown information under a range of themes as reporting systems become more robust.

## 8. Themes:

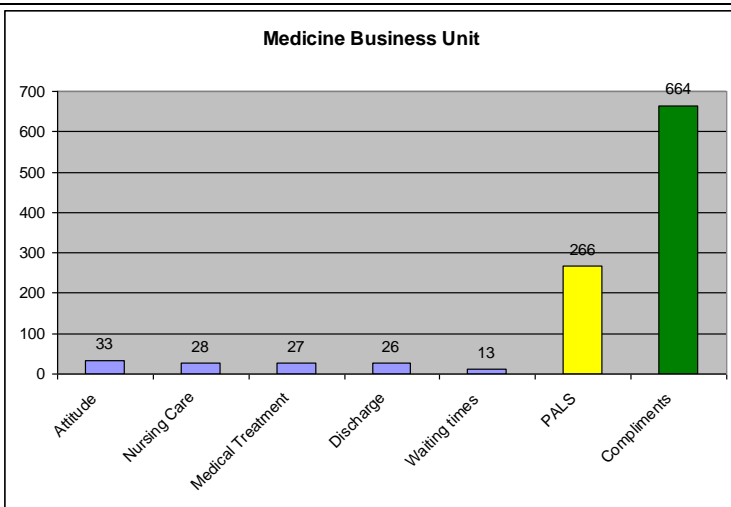
The following graphs show the main themes by Business Unit that have emerged during 2012/2013. Included for comparison are the numbers of PALS and Compliments received in the same period

<p><b>Anaesthetics and Critical Care</b></p> <table border="1"> <thead> <tr> <th>Theme</th> <th>Count</th> </tr> </thead> <tbody> <tr> <td>Waiting Time</td> <td>1</td> </tr> <tr> <td>Attitude</td> <td>2</td> </tr> <tr> <td>Medical treatment</td> <td>2</td> </tr> <tr> <td>Service Delivery</td> <td>1</td> </tr> <tr> <td>PALS</td> <td>3</td> </tr> <tr> <td>Compliments</td> <td>48</td> </tr> </tbody> </table>	Theme	Count	Waiting Time	1	Attitude	2	Medical treatment	2	Service Delivery	1	PALS	3	Compliments	48	<p><b>Anaesthetics and Critical Care Business Unit (complaints/main themes)</b></p> <p><b>Complaints:</b> There were 6 complaints this year. Please note that this business unit is new and is often not the focus of larger complaints. This relates to 1.2% of their activity.</p> <p><b>PALS:</b> There were 3 PALS inquiries which were all general in nature.</p> <p><b>48 compliments were received during the year.</b></p>		
Theme	Count																
Waiting Time	1																
Attitude	2																
Medical treatment	2																
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PALS	3																
Compliments	48																
<p><b>D&amp;T Business Unit</b></p> <table border="1"> <thead> <tr> <th>Theme</th> <th>Count</th> </tr> </thead> <tbody> <tr> <td>Attitudes</td> <td>12</td> </tr> <tr> <td>Waiting Times</td> <td>11</td> </tr> <tr> <td>Communication</td> <td>8</td> </tr> <tr> <td>Health Outcome</td> <td>5</td> </tr> <tr> <td>Information</td> <td>4</td> </tr> <tr> <td>PALS</td> <td>119</td> </tr> <tr> <td>Compliments</td> <td>96</td> </tr> </tbody> </table>	Theme	Count	Attitudes	12	Waiting Times	11	Communication	8	Health Outcome	5	Information	4	PALS	119	Compliments	96	<p><b>D&amp;T Business Unit (complaints/main themes)</b></p> <p><b>Complaints :</b> The business unit received 66 complaints representing 0.1% of their activity this year.</p> <p>The main reasons for complaints were related to attitudes and waiting times although these complaints were spread across the business unit and did not pertain to any specific area.</p> <p><b>Actions taken include:</b> There have been discussions with staff to address specific complaints. The team are reviewing checking practices in Pharmacy and procedures for the booking of Doppler scans.</p>
Theme	Count																
Attitudes	12																
Waiting Times	11																
Communication	8																
Health Outcome	5																
Information	4																
PALS	119																
Compliments	96																



**PALS:** 119 PALS were received, 50% of which were general enquiries.

**96 compliments were received during 2012/2013.**



**Medicine Business Unit (complaints/main themes)**

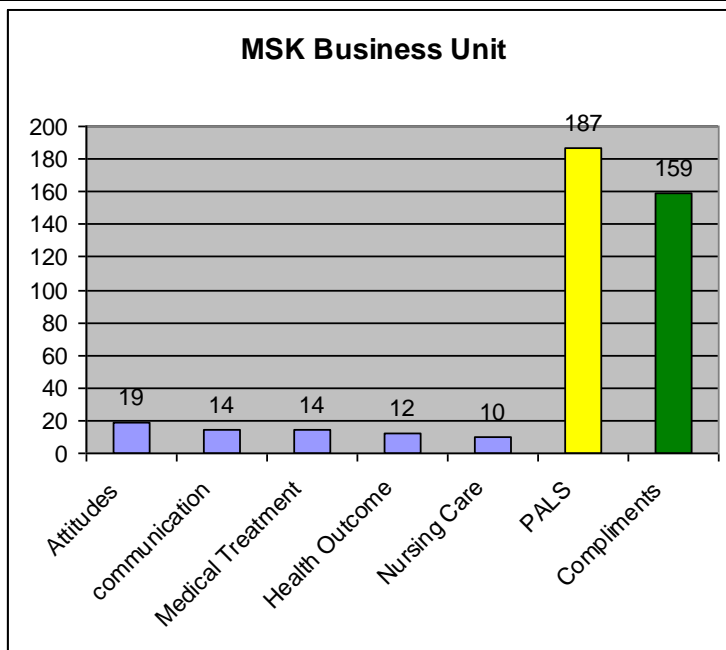
**Complaints:** The business unit received 227 complaints representing 0.09% of their activity this year.

The main reasons for complaints were related to the attitude of staff, 33% of which related to the A&E department. The others were spread across the business unit.

**Actions taken include:** Customer care training has now been commenced for all A&E staff to help address the attitude/communication problems raised. Improvements in communication were discussed with medical staff in A&E. Work has been carried out to ensure patients are given DVT prophylaxis as appropriate.

**PALS:** 266 PALS were received, 70% of which were general enquiries.

**664 compliments were received during 2012/2013.**



### MSK Business Unit (complaints/main themes)

**Complaints:** The business unit received 107 complaints representing 0.05% of their activity this year.

The main reasons for complaints were related to attitude, communication, medical treatment, nursing care and health outcome.

**Actions taken include:** HCAs on one of the wards are undertaking further clinical training.

Discharge booklets are to be given at pre-assessment.

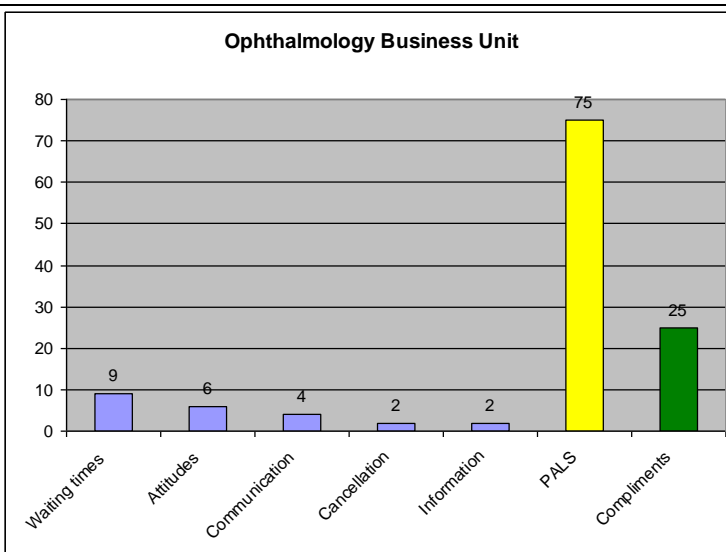
One of the information booklets is being reviewed.

Discussion has been held with Nursing staff regarding patient care issues on a number of wards and relates to the clinical training for the HCA's.

Work has also been carried out regarding DVT prophylaxis.

**PALS:** 187 PALS were received, 50% of which were general enquiries.

**159 compliments were received during 2012/2013.**



### Ophthalmology Business Unit (complaints/main themes)

**Complaints:** The business unit received 40 complaints representing 0.03% of their activity this year.

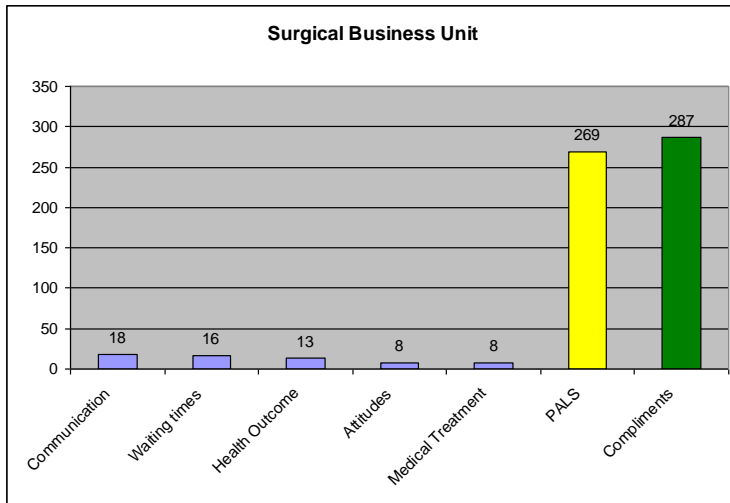
Top themes include waiting times, attitude, communication, cancellation and information

**Actions taken include:** Staff in the clinic are now providing patients waiting more robust information about delays in being seen.

Senior staff are proactively maintaining a presence in the reception area to respond to questions from patients and their families.

**PALS:** 75 PALS were received, 60% of which were general enquiries.

**25 compliments were received during 2012/2013.**



**Surgical Business Unit (complaints/main themes)**

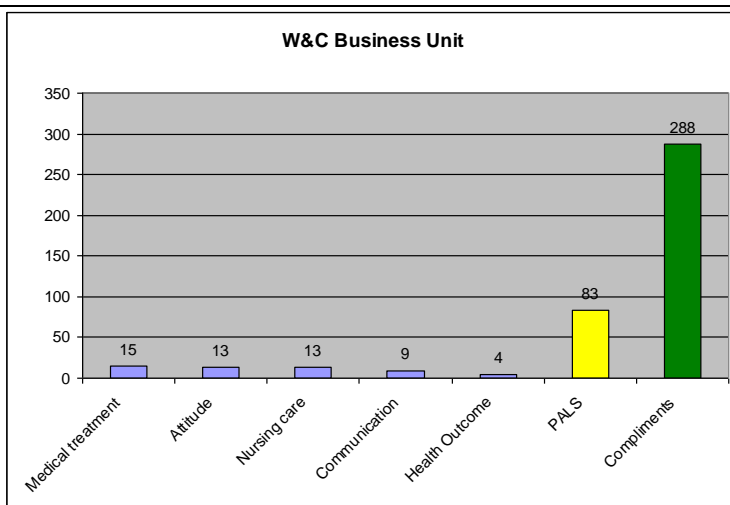
**Complaints:** The business unit received 104 complaints representing 0.08% of their activity this year.

The main reasons for complaint were Communication, waiting times, health outcome, attitudes and medical treatment.

**Actions taken include:** A new leaflet has been developed for patients with thyroid problems. Patients in outpatient clinics are being kept better informed of delays. CNS team to ensure follow-up appointments are booked. Teams are looking at ways of improving communication with medical equipment library.

**PALS:** 269 PALS were received, 62% of which were general enquiries.

**287 compliments were received during 2012/2013.**



**W&C Business Unit (complaints/main themes)**

**Complaints:** The business unit received 82 complaints representing 0.06% of their activity this year.

The main reasons for complaint include medical treatment, attitude, nursing care, communication and health outcome

**Actions taken include:** Review of pathways and assessment process for chemotherapy inpatient visits. Providing patients clear information regarding catheter use during their admission and discharge.

	<p>Leaflet to be designed giving information about child protection protocols Senior paediatricians are working with junior staff to improve communication. Maternity staff conducted a review to ensure care rounds are being carried out.</p> <p><b>PALS:</b> 83 PALS were received, 47% of which were general enquiries.</p> <p><b>288 compliments were received during 2012/2013.</b></p>
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### 9. Status of Parliamentary & Health Service Ombudsman (PHSO) Cases:

28 cases were referred by patients to the PHSO. Of these, 13 remain open and of the 15 closed cases no further action was required by the Trust in 10 of these cases. In 4 cases the Trust was required to provide further information and in 1 case recommended to make an ex-gratia payment which was implemented.

PHSO's 2011/12 report has been published and the table below shows this Trust's position in comparison to the 4 other acute trusts in the county.

Please note that the PHSO's figures are higher than our own as the Ombudsman counts contacts that we may not be made aware of.

Hospital	Number of complaints received by the PHSO	Number of complaints accepted by the PHSO for full investigation
Southend	35	2
Princess Alexandra (Harlow)	52	1
Colchester	60	2
Basildon	75	9
Mid Essex (Broomfield)	82	4

### 10. Ethnicity of Complainants

Data is collected regarding the ethnicity of the patient around whom the complaint is made (complexity of complaint levels 2-5 only). If the complainant is not the patient, then ethnicity is not recorded.

Ethnicity	Total
White British	549
White Irish	1
White Other	7
Mixed white and Asian	1
Other Mixed	1
Indian	5
Pakistani	1
Bangladeshi	1
Other Asian	2

Black Caribbean	1
Black African	3
Not Stated	66

## 11. Claims and Inquests

During 2012/13, the Trust has reported quarterly any open inquests.

Having regard to these reports a total of 35 claims were opened and the Trust was involved in 36 inquests.

No rule 43 recommendations relating to safety issues were issued by the Coroner directly involving the Trust. It should be noted that a rule 43 letter was written to the Chief Medical Officer concerning window safety (the Coroner being satisfied that this Trust had taken action to check the security of all its windows).

Following the Coroner's Rule 43 letter, a national Estates and Facilities alert was issued via the CAS alert system to all trusts requiring a review of the adequacy of window security.

Attention has been paid to ensuring improved use of Datix to record key management dates and claims' management progress in line with NHSLA requirements (and as detailed in the Trust's claims' management policy)

Claims' administrators have been working to ensure 100% rate of compliance in turnaround of reporting claims to the NHSLA which was achieved in each quarter save quarter 3.

Attention is now being focused on ensuring collation of this information, and responses to queries raised with clinicians, to enable submission of the preliminary analysis report within 6 weeks of the initial claim report.

Action is also being taken to identify and share potential risk management issues raised by claims. In due course, following the arrangements detailed above for complaints, information will be provided to BU's concerning types of claims and any recurring issues considered to require address to reduce the risk of recurrence. This approach will also better support aggregated analysis of information enabling us to focus resources more effectively on training and support.

**Sue Hardy**  
**Director of Nursing**