

**University Hospitals Bristol NHS Foundation Trust**

**Complaints Annual Report**

**and**

**Patient Advice and Liaison Service Annual Report**

**2008/2009**

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# Contents

<u>Section</u>		<u>Page</u>
Introduction	.....	4
<b>PART 1</b>	<b>COMPLAINTS SERVICE.....</b>	<b>5</b>
<b>Section 1</b>	<b>Formal Complaints.....</b>	<b>5</b>
1.1	Performance monitoring of formal complaints.....	6
1.1.1	Trust wide.....	6
1.1.2	Performance by division.....	7
1.2	Service areas of formal complaints.....	8
1.3	Formal complaints by profession.....	8
1.4	Formal complaints by ethnic group of patient.....	9
1.5	Formal complaints categories.....	9
1.6	Formal complaints by division.....	11
1.6.1	Division of Diagnostic and Therapies.....	11
1.6.2	Facilities and Estates.....	11
1.6.3	Division of Medicine.....	12
1.6.4	Division of Specialised Services.....	12
1.6.5	Division of Surgery, Head and Neck.....	12
1.6.6	Division of Women's and Children's .....	13
1.6.7	Trust Services.....	13
1.7	Service Improvements.....	13
1.7.1	Division of Surgery, Head and Neck.....	13
1.7.2	Division of Medicine.....	13
1.7.3	Division of Women's and Children's.....	14
1.8	Independent review by the Healthcare Commission.....	14
1.8.1	Healthcare Commission Complaint.....	14
1.9	Formal Complaints reporting.....	15
<b>Section 2</b>	<b>Informal Complaints.....</b>	<b>15</b>
2.0	Informal Complaints received by the central complaints team.....	15
<b>Section 3</b>	<b>Compliments.....</b>	<b>16</b>
3.1	Trust Compliments report.....	16
3.2	Compliments received by ward or department directly.....	16
3.3	Trust wide compliments.....	17
<b>Section 4</b>	<b>Achievements throughout the year.....</b>	<b>17</b>
<b>Section 5</b>	<b>Training.....</b>	<b>18</b>
<b>PART 2:</b>	<b>PATIENT ADVICE &amp; LIAISON SERVICE (PALS).....</b>	<b>19</b>
<b>Section 6</b>	<b>PALS Activity.....</b>	<b>20</b>
6.1	Informal complaints management.....	21
6.2	Category type.....	21
<b>Section 7</b>	<b>Information and advice.....</b>	<b>22</b>
<b>Section 8</b>	<b>Proactive support and facilitation.....</b>	<b>22</b>

<b>Section 9</b>	<b>Compliments.....</b>	<b>23</b>
<b>Section 10</b>	<b>Reporting.....</b>	<b>23</b>
<b>Section 11</b>	<b>Service Improvements.....</b>	<b>23</b>
<b>Section 12</b>	<b>Development work and achievements.....</b>	<b>24</b>
<b>Section 13</b>	<b>Key Objectives for 2009/10.....</b>	<b>24</b>

## INTRODUCTION

University Hospitals Bristol NHS Foundation Trust's (UH Bristol) structure for managing complaints comprises a corporate complaints team which co-ordinates and supports complaints management and reporting, and a Patient Advice and Liaison Service (PALS) which co-ordinates and responds to a range of enquiries, including informal complaints. Within UH Bristol there is divisional ownership of complaints, with the investigation and resolution of complaints largely taking place within the relevant division, supported by divisional complaints co-ordinators, resulting in local service improvements which can be shared across the Trust.

By their very nature, complaints come in a range of formats and through a variety of routes: in person, by telephone, in writing to the division or to the Chief Executive, directly to a division, to the PALS service, to the corporate complaints team, via a third party such as a Member of Parliament or the Independent Complaints Advocacy Service.

During 2008/09, the Complaints and PALS services have developed in four main areas:

1. To provide a more flexible and responsive service through review of structure and systems
2. To bring together complaints data from the various routes and start to produce more meaningful reporting
3. To improve the quality of written responses to complainants
4. To increase compliance with Healthcare Standards C14 a, b, and c.

Whilst there have been in-year improvements throughout 2008/09 and closer integration of the Complaints and PALS services, for practical reasons this annual report has been divided into two sections, one for each service. It is anticipated for 2009/10 a completely integrated report will be produced.

The University Hospitals Bristol NHS Foundation Trust Complaints and Concerns Policy was updated in February 2009 setting out how the Trust was to manage both formal complaints, as defined by the NHS (Complaints) Regulations 2004 and the NHS (Complaints) Amendments Regulations 2006, and informal complaints.

## **PART 1 COMPLAINTS SERVICE**

### **Corporate Complaints Team**

The Assistant Director of Governance and Risk Management, has overall responsibility for the Complaints and PALS services, reporting directly to the Chief Nurse and subsequently to the Medical Director and Chief Executive.

The complaints team has undergone some staff changes during 2008/09 with adjustments being made to some roles and responsibilities. From July 2008, the team has been managed by a Senior Nurse, initially on a trial basis, with a full time Complaints Officer and a part time Complaints Administrator. In the latter half of the year, the Senior Nurse hours were reduced and a further Complaints/PALS Officer role was developed working across both the Complaints and PALS services.

The trial of a Senior Nurse to manage the complaints department in July 2008, introduced a clinical perspective to proactive complaints management as well as providing clinical advice to the Patient Advice and Liaison Service (PALS). This more flexible approach to complaints management provided an alternative route for timely complaints resolution other than the formal, and therefore extended, process.

The corporate complaints team based at Trust Headquarters retained the responsibility for the central co-ordination of the formal complaints responses and the collation and storage of complaints case files for both The Healthcare Commission and The Parliamentary and Health Service Ombudsman's Office, as well and providing support for divisions in resolving complaints.

With the introduction of the Health and Social Care Complaints Regulations (England) 2009 on the 1<sup>st</sup> April 2009, the integration of the Complaints and PALS services will be further explored.

### **Cross Organisational Working**

Some complex complaints involve a range of issues arising from patient experiences as their care pathways span a variety of NHS and non-NHS organisations as well as UH Bristol. In these cases the team has continued to work with Complaints Managers in other organisations to resolve complaints which include both health and social care across organisational boundaries.

## **SECTION 1 FORMAL COMPLAINTS**

The Complaints Regulations 2004 (as amended 2006), which applied during 2008/09, defined and monitored complaints by their 'formal' nature. These complaints were generally directed to the Trust by telephone call or letter from the complainant and processed in the required 25 day time period, with a written response signed by the Chief Executive sent to the complainant.

As the year progressed, an increased flexibility of response, proportionate to the nature of the complaint developed, with the complaints department following an informal process where appropriate, similar to the approach used by the PALS department. This corresponded with a need to capture informal complaints data in a more complete, timely and co-ordinated manner.

The formal 25 day approach continued for clearly formal and complex complaints as required by the regulations.

The proactive and more flexible approach produced some successful outcomes with complainants benefiting from an increase in direct telephone communication from a Senior Nurse to resolve their concerns. There was one instance when this was not of benefit as the complainant changed her mind as to her intentions and this left the Division with a significantly curtailed time period to pursue the formal process.

## 1.1 Performance Monitoring of Formal Complaints

### 1.1.1 Trust wide

The completed response time relates to the 25 day target set for all formal complaints. The Trust received 562 formal complaints during the year, an increase of 20 cases (3.6%) on the previous year. The level remains within 6% variance of previous years. The percentage completed within response target had dipped by 5.2% from the previous year but remains an improvement on earlier years.

	08/09	07/08	06/07	05/06	04/05	03/04
<b>Number of Formal Complaints Received</b>	562	542	579	533	567	549
<b>% Completed within target response time</b>	91.3	96.1	89.6	81.4	77.9	82.0

Table 1: Comparison of performance achieved within target response time - last 5 years

Quarterly analysis of performance for 2008/09 in Table 2 below shows a decrease in percentage of responses completed within the target time in quarter throughout the year.

	Qtr 1 Apr – Jun 2008	Qtr 2 Jul – Sep 2008	Qtr 3 Oct – Dec 2008	Qtr 4 Jan – Mar 2009
<b>Number of Formal Complaints Received</b>	149	120	142	151
<b>% Completed within target response time</b>	96.3	92.0	89.3	87.3

Table 2: Number of formal complaints received each quarter during 2008/09

The number of formal complaints averaged 48 per month with the only month out of that range being August. There are two possible explanations for this:

1. A seasonal lull relating to the summer holiday season
2. The proactive approach by the trial of Senior Nurse input as described previously.

The Trust Board monitored performance in relation to formal complaints responses against the 25 day time frame specified in the Regulations. Figure 1 illustrates performance against this indicator for 2008/09. The percentage of responses outside of the 25 day time frame and the percentage of complainants who were dissatisfied with their responses indicate the need to further improve performance in this area but also demonstrates the problem of a “one size fits all” approach.

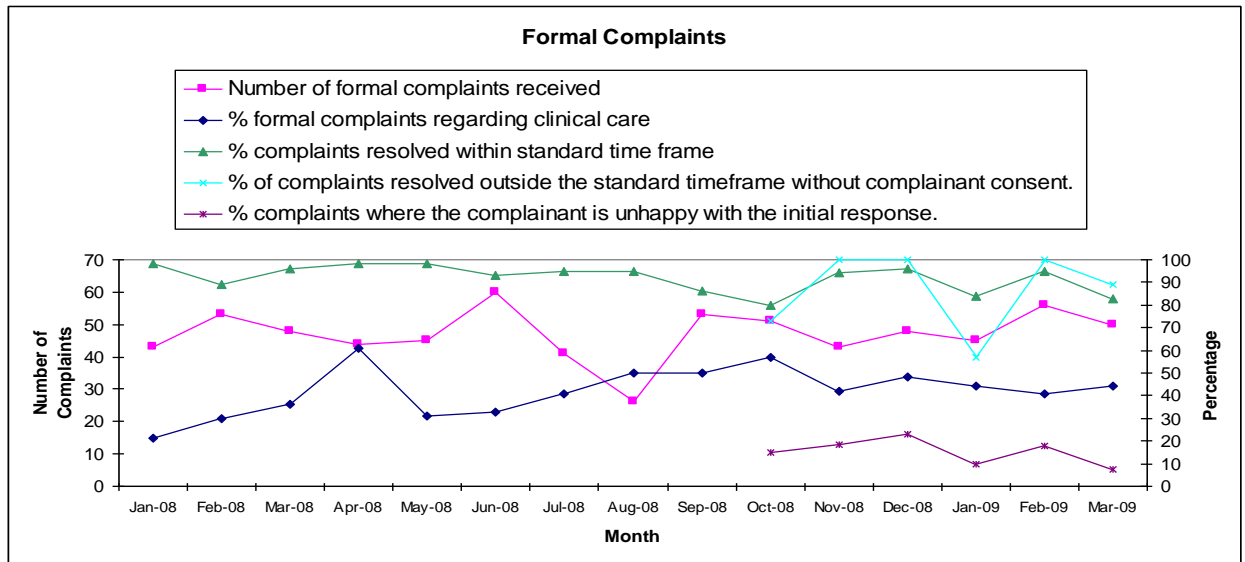


Figure 1: Trust response rates to Formal Complaints

As the year progressed, informal complaints data was captured more fully in order to see the complete picture of complaints activity across the Trust. In July 2008, data regarding formal complaints received centrally was recorded and reported more completely, and in October 2008 informal complaints received directly into the Divisions was collated centrally and added to the dataset. This evolving situation is illustrated in Figure 2.

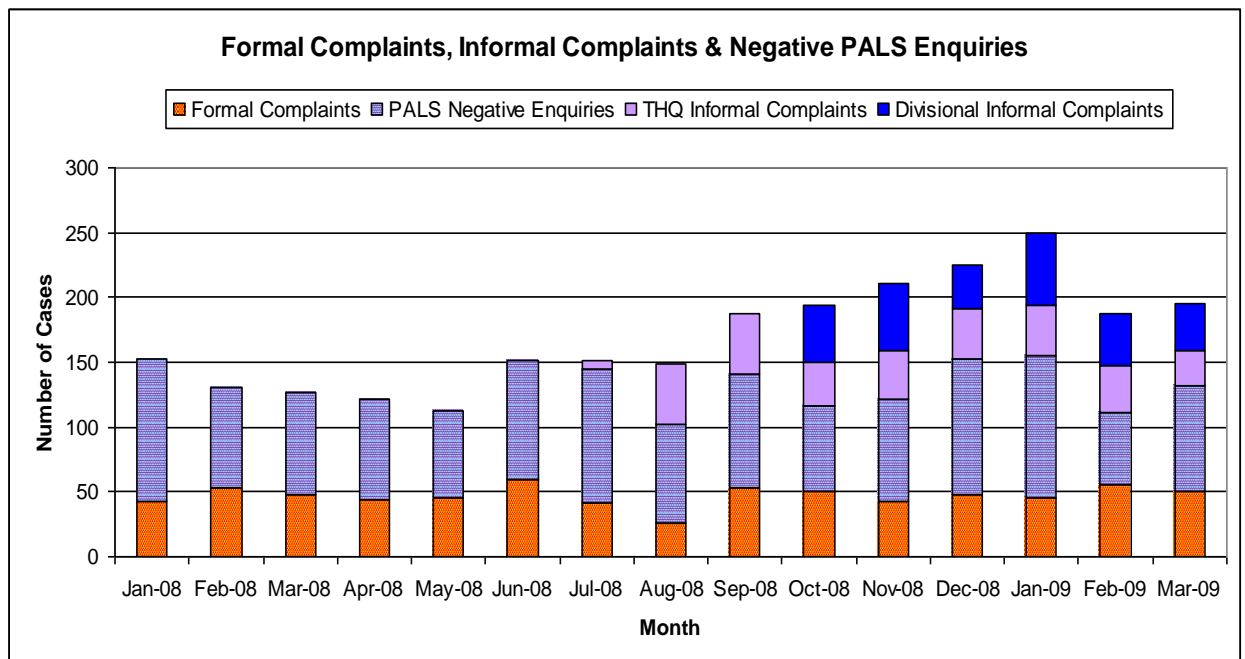


Figure 2: Formal Complaints, Informal Complaints received as Negative PALS Enquiries, Informal complaints received centrally, and Divisional Informal Complaints January 2008 – March 2009

### 1.1.2 Performance by Divisions against 25 day time frame for responses

Table 3 illustrates divisional performance against the 25 day formal complaints time frame. Overall the Trust achieved 92% of responses within the 25 day time frame.

Division	Number received	Responded within target	
		Number	%
Specialised Services	46	43	93
Facilities & Estates	11	6	55
Surgery	231	213	92
Medicine	125	119	96
Diagnostics & Therapies	19	19	100
Women & Children	123	113	92
Trust Services	5	2	60
<b>TOTAL</b>	<b>562</b>	<b>516</b>	<b>92</b>

Table 3: Divisional performance of formal complaints handling 2008/09

## 1.2 Service Areas of Formal Complaints

Information on the service areas of complaints and the profession of those involved in the complaint is recorded on the complaints database and forwarded annually to the Department of Health as part of the KO41a return.

Service Area		Complaints Received		
		2008/09	2007/08	2006/07
Hospital Acute Services	In-patient	215	211	245
	Outpatient	239	229	260
	Emergency Department	50	52	47
Care of the Elderly		10	21	n/a
Maternity		27	20	13
Community		4	9	14
<b>Total</b>		<b>535</b>	<b>542</b>	<b>579</b>

Table 4: Service Areas of Formal Complaint

N B: The total figure of 535 excludes 27 complaints that stemmed from areas beyond those included in the table, e.g. Facilities / Estates. There are also complaints in areas are not clearly defined e.g. Care of the Elderly could include patients within the community or in hospital.

## 1.3 Formal Complaints by Profession

The data concerning this group is inaccurate as there has been an historical error in collation. This error has now been addressed and the figures for 2009/10 will be accurate.

## 1.4 Formal Complaints by Ethnic Group of Patient

Ethnicity of patients who complained or on whose behalf a complaint was made.	Number	% of total
Any Other Asian Background	1	7
Any Other Black Background	2	
Any Other Ethnic Group	2	
Any Other Mixed Background	4	
Any Other White	12	
Asian or Asian British Bangladesh	2	
Asian or Asian British Indian	2	
Black or Black British African	4	
Black or Black British Caribbean	3	
Chinese	3	
Mixed - White and Black African	0	
Mixed - White and Black Caribbean	2	
White - Irish	5	
Not Stated/Given	106	17
White - British	479	76
	627	

Table 5: Formal complaints by ethnic category of patient 2007/08

N B: The total figure of 627 is greater than the total complaints (562) because more than one person may wish to be identified as the complainant for a particular complaint.

## 1.5 Formal Complaint Categories

The Trust records formal complaints by categories based on the main issue raised (primary category) and additional issues raised (secondary categories). During 2008/09 the list of categories has been developed to improve accuracy of recording of complainant's issues and is compared with previous years in Table 6.

There has been a rise in complaints concerning clinical care, although this is balance by a reduction in complaints concerning communication with patients and nursing care.

Formal Complaint Category	Year					
	2008 / 09	2007/08	2006 / 07	2005 / 06	2004 / 05	2003 / 04
Accident & Emergency– Length of Wait	3	0	0	1	3	10
Admission Arrangements	2	3	6	2	9	2
Aids & Appliances	0	1	0	3	0	3
Ambulance	2	Not recorded prior to 2008/09				
Appointment (In-patient) Cancellation	16	24	17	18	13	11
Appointment (In-patient) Delay	9	20	30	16	19	29
Appointment (Out Patient) Cancellation	14	30	30	23	20	37
Appointment (Out Patient) Delay	34	66	69	85	72	64
Attitude of Staff (Administrative)	8	11	8	14	9	7
Attitude of Staff (Ancillary)	3	3	4	7	7	2
Attitude of Staff (Medical)	22	17	30	27	25	32
Attitude of Staff (Nursing)	23	26	16	19	16	15
Attitude of staff (Support To Medicine)	2	4	2	Not recorded prior to 2006/07		
Clinical Care	142	112	102	124	144	113
Clinical Care - Dental	1	Not recorded prior to 2008/09				
Clinical Care – Medical / Surgical	30	Not recorded prior to 2008/09				

Formal Complaint Category	Year					
	2008 / 09	2007/08	2006 / 07	2005 / 06	2004 / 05	2003 / 04
Clinical Care Nursing / Midwifery	12	Not recorded prior to 2008/09				
Cancelled Appointment - Multi	6	Not recorded prior to 2008/09				
Cancelled Operation	3	Not recorded prior to 2008/09				
Cancelled operation multiple	5	Not recorded prior to 2008/09				
Car Parking	4	Not recorded prior to 2008/09				
Child protection	1	Not recorded prior to 2008/09				
Choose & Book	1	Not recorded prior to 2008/09				
Communication between Staff	7	16	10	15	7	6
Communication / Information to patients	48	77	98	64	72	73
Complaints Handling	0	1	Not recorded prior to 2007/08			
Consent to Treatment	0		1	0	2	1
Cross Infection	7	2	5	7	3	0
Delayed Admission	1	Not recorded prior to 2008/09				
Delayed appointment	9	Not recorded prior to 2008/09				
Delayed operation	2	Not recorded prior to 2008/09				
Delayed procedure / investigation	1	Not recorded prior to 2008/09				
Delayed treatment	1	Not recorded prior to 2008/09				
Diagnosis delayed	1	Not recorded prior to 2008/09				
Diagnosis Missed	23	23	21	12	2	3
Diagnosis Wrong	16	8	0	4	4	2
Discharge Arrangements	11	12	19	13	12	21
Discrimination	1	Not recorded prior to 2008/09				
Equipment	3	1	2	3	6	5
Expenses – Problem with Claim	0	3	1	0	1	3
Health & Safety issues	1	1	5	0	0	1
Hotel Services – Food Choice	0	2	0	0	1	3
Hotel Services – Food Quality	0	1	3	1	2	2
Hotel Services – Other	2	0	0	3	2	1
Hygiene facilities	1	Not recorded prior to 2008/09				
Infection control	4	Not recorded prior to 2008/09				
Lack of Funding	0	3	4	1	5	10
Loss of Personal Property	1	2	2	1	7	7
Medication Error – Dosage	4	6	4	2	4	1
Medication Error – Route	0	0	1	0	1	0
Medication Error – Wrong Drug	3	2	0	3	3	2
Medication Wait Pharmacy	2	1	6	1	3	4
Medication other	5	Not recorded prior to 2008/09				
Nursing Care	17	24	35	25	30	25
Patients Privacy & Dignity	1	5	3	0	4	5
Personal Records (Complaint)	1		0	0	1	1
Personal Records (Medical)	0	4	1	0	0	4
Policy & Commercial Decisions	0	5	27	3	0	6
Post Mortem Arrangements	0		0	0	1	0
Premises – Access To	3	9	6	1	2	6
Premises – Unclean	3	4	6	14	18	15
Premises – Unfit for purpose	0	1	Not recorded prior to 2007/08			
Transfer Arrangements	2	2	0	3	2	5
Transport (Hospital) – Late	2	1	1	1	3	0
Transport (Hospital) – Non Arrival	3	3	0	2	4	2
Waiting List – In-patient	0	2	0	2	3	0
Waiting List – In-patient Operation	1	3	0	4	16	4
Waiting List – Out Patient Consultant	1	0	0	3	2	3
Waiting time in clinic	5	Not recorded prior to 2008/09				
<b>Total</b>	<b>536</b>	542	579	533	567	549

Table 6: Comparing Formal Complaints by Categories for 2008 09 and the previous 5 years

N B: The total figure for 2008/09 – 536 excludes 26 complaints that have not been recognised within the categories represented due to database development in-year.

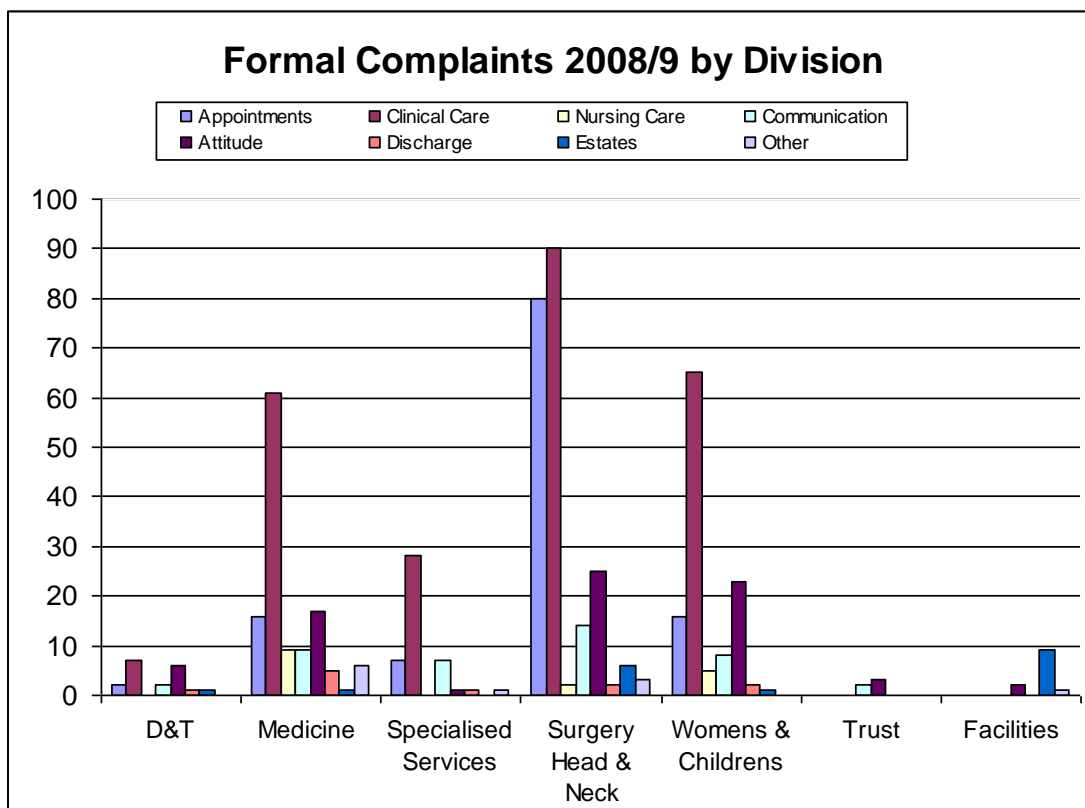


Figure 3: Themes for Complaints 2008/09 by Division.

## 1.6 Formal Complaints by Division

### 1.6.1 Diagnostics & Therapies

19 formal complaints were received during the year, a similar number to the previous year when 15 were received. All complaints were responded to within the 25 day time frame defined by the NHS Complaints Amendments Regulations (2006).

Top themes emerging from complaints in this division during 2008/09 were concerns regarding:

- Clinical care - 7
- Attitude of staff – 6

### 1.6.2 Facilities & Estates

The division led on 11 complaints and were involved in other complaints led by other divisions. 6 of the 11 were responded to within the 25 day time frame =54%.

Top themes emerging were:

- Parking issues - 3
- Attitude of security staff – 2

### 1.6.3 Medicine

The Division of Medicine received 125 complaints during the year compared to 113 during 2007/08, an increase of 11% 119 complaints (96%) were responded to within the 25 day time frame .

The top themes emerging were:

- Clinical care – 61
- Communication of information to patients – 9
- Attitude of nursing staff – 17
- Nursing care – 9

### 1.6.4 Specialised Services

The division received 46 complaints during the year, an increase of 3. 93% were responded to within the 25 day time frame.

The top themes emerging from complaints were concerns about:

- Clinical care – 28, an increase from 12
- Communication of information to patients – 7

### 1.6.5 Surgery, Head & Neck

The Division of Surgery, Head & Neck received 231 complaints which represents 40% of all complaints received by the Trust.

Site within the Division of Surgery, Head and Neck	Complaints	Main themes
<b>Bristol Dental Hospital</b>	20	<ul style="list-style-type: none"> <li>• Appointments – 6</li> <li>• Staff attitude – 2</li> <li>• Clinical care – 10</li> <li>• Communication – 2</li> </ul>
<b>Bristol Eye Hospital</b>	66	<ul style="list-style-type: none"> <li>• Appointments – 36</li> <li>• Staff Attitude – 9</li> <li>• Clinical care – 14</li> <li>• Communication – 5</li> </ul>
<b>Bristol Royal Infirmary</b>	126	<ul style="list-style-type: none"> <li>• Appointments – 33</li> <li>• Attitude of staff – 14</li> <li>• Clinical care – 63</li> <li>• Communication – 7</li> </ul>
<b>St Michael's Hospital</b>	9	<ul style="list-style-type: none"> <li>• Appointments / admission – 2</li> <li>• Clinical Care – 1</li> </ul>

Table 8: Hospitals and themes of formal complaints within Division of Surgery, Head & Neck

This table excludes 10 complaints that occurred within the Division that were not related to a specific hospital site.

### **1.6.6 Women & Children**

The Women's & Children's Division received 123 complaints, an increase of 10 % from the previous year. The division responded in 113 cases (92%) within the 25 day time frame.

The top themes and specialties complained about are as follows.

- Clinical care – 65
- Diagnosis – 11
- Communication with patient – 10

### **1.6.7 Trust Services**

There were 5 formal complaints regarding Trust Services. 4 concerning communication and 1 concerning the attitude of a staff member.

## **1.7 Examples of Service Improvements cited on Complaints Action Plans**

### **1.7.1 Division of Surgery, Head & Neck**

- Trauma Improvement Group set up to increase operating capacity to allow for peaks in demand
- Laminar Air Flow installed in theatre 7 to support increased trauma capacity
- Improvements to Vascular Studies appointment process
- Cashier hours extended to cover evenings
- Streamlining of process between the Choose and Book system and the Audiology department
- Training support given to District Nurse teams to assist with discharge of Patients with Pleural Drains.
- Purchase of laparoscopy equipment
- Customer training for Cashier Department.

### **1.7.2 Division of Medicine**

- Emergency Department: redesign of organ / tissue donation form resulted in increase in donations. This also resulted in a Staff Nurse in the Emergency Department being nominated for a Nursing Times award (Nurse was overall winner for the Emergency Department category).
- Learning Disabilities Nurse Alert system set up on Clinical Portal.
- Relocation and decoration of Ambulance Liaison Unit
- Introduction of Tissue Coordinator in the Emergency Department to educate and support staff.

- Improved Gynaecological training for Medical staff in the Emergency Department

### 1.7.3 Division of Women & Children

- Education provided to mothers regarding still birth based on guidelines.
- Promotion of Customer care within Division.
- Clarification and confirmation regarding the necessity of provision of investigative scans post miscarriage
- Protocols and training for vulval clinics reviewed.
- Standard Operating procedure implemented for use of swabs, needles and instruments.
- Patient information improved for hystero-salpingography
- Changes made to the referral process for children with co-ordination difficulties.
- Protocol revised for threatened miscarriages.
- Wheel chair tracking system introduced.

### 1.8 Independent Reviews by Healthcare Commission 2008/09

If a complainant is not satisfied with local resolution of their complaint, they may appeal to the Healthcare Commission for an independent review

<b>Division</b>	<b>No of Independent Reviews by the Healthcare Commission</b>	<b>Sent on to Parliamentary and Health Service Ombudsman</b>	<b>Not Upheld</b>	<b>Upheld</b>
<b>Surgery</b>	4	2	1	1
<b>Medicine</b>	2	1	0	1
<b>Diagnostic &amp; Therapies</b>	0	0	0	0
<b>Specialised Services</b>	1	1	0	0
<b>Women &amp; Children</b>	0	0	0	0
<b>Facilities &amp; Estates</b>	0	0	0	0
<b>TOTAL</b>	<b>7</b>	<b>4</b>	<b>1</b>	<b>2</b>

Table 9: Recommendations from the Healthcare Commission and action taken by the Trust

#### 1.8.1 Healthcare Commission complaint: C200805\_0435 / 4845

Ensure that the staff employed to undertake the Patient Environment Assessment Team (PEAT) inspection conduct them as per national standards

*Chief Nurse has reviewed the PEAT teams training programme.*

Ensure that the cleaning contractors are meeting the agreed cleaning schedules and that in light of your complaints, the cleaning schedules are reviewed.

*Supervising team capacity increased. Daily monitoring sheets introduced on the ward visible to staff and patients. Deep cleaning team established. Healthcare inspection during the summer produced a positive report.*

Implement a system to ensure that all staff are aware of and comply with the trusts privacy and dignity policy. If this is already in place, provide documentary evidence to support this.

*Documentation made available:*

*Audit results made available for privacy and dignity work plan.*

*Steering group meeting minutes.*

*Example of a staff notice issued in March*

*Bed Curtain notice piloted*

*Patient questionnaire.*

## 1.9 Formal Complaints reporting

The Trust Board receives a monthly high level report on formal complaints performance monitoring and the Governance and Risk Management Committee receives a quarterly more detailed report which integrates both formal and informal complaints.

## SECTION 2 INFORMAL COMPLAINTS

### 2.0 Informal Complaints received by the central Complaints Team

The central Complaints Team dealt with 360 informal complaints during the year. Figure 4 indicates that although the level of informal complaints referring to clinical and nursing care was low, the number referring to communication and appointments was much higher. In particular, the Division of Surgery Head & Neck received 180 contacts concerning these issues which were mainly concerning issues with appointments at the Bristol Eye Hospital.

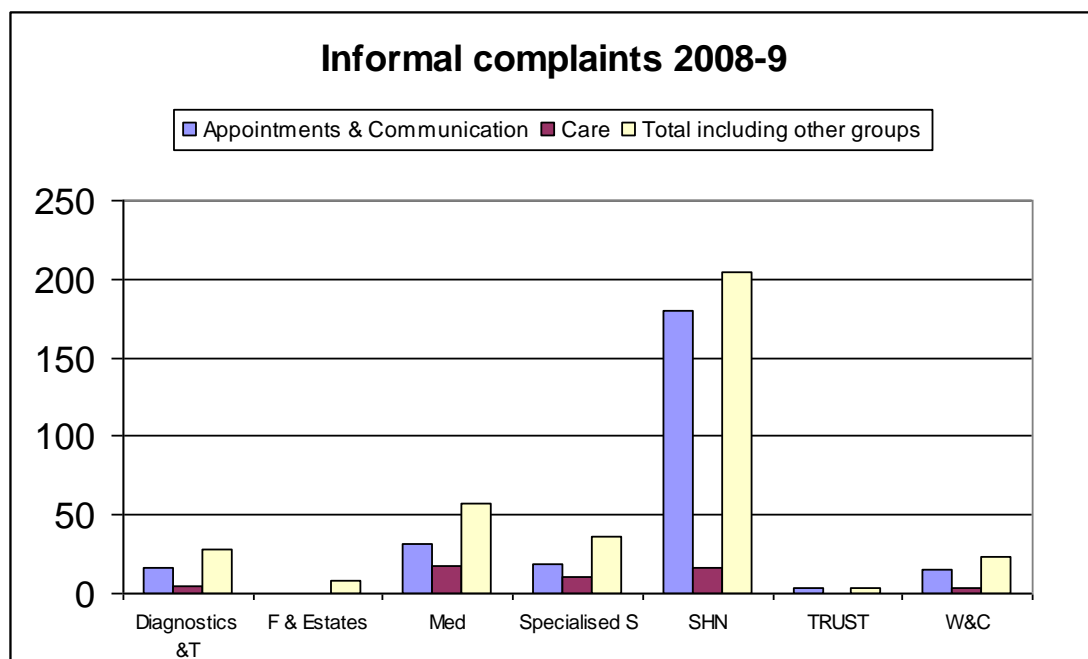


Figure 4: Informal complaints received by the central Complaints Department

## SECTION 3 COMPLIMENTS

### 3.1 Trust Compliments Report

Collation of compliments data across the whole organisation is a recent development which provided figures from October 2008 onwards. As with complaints, compliments are currently received within the Trust through several routes: directly to the wards and departments involved, and through the PALS and complaints teams.

### 3.2 Compliments received by Wards & Departments directly.

Since October 2008, the divisions have been reporting figures on the number of compliments received corporately to the complaints team at the end of each month.

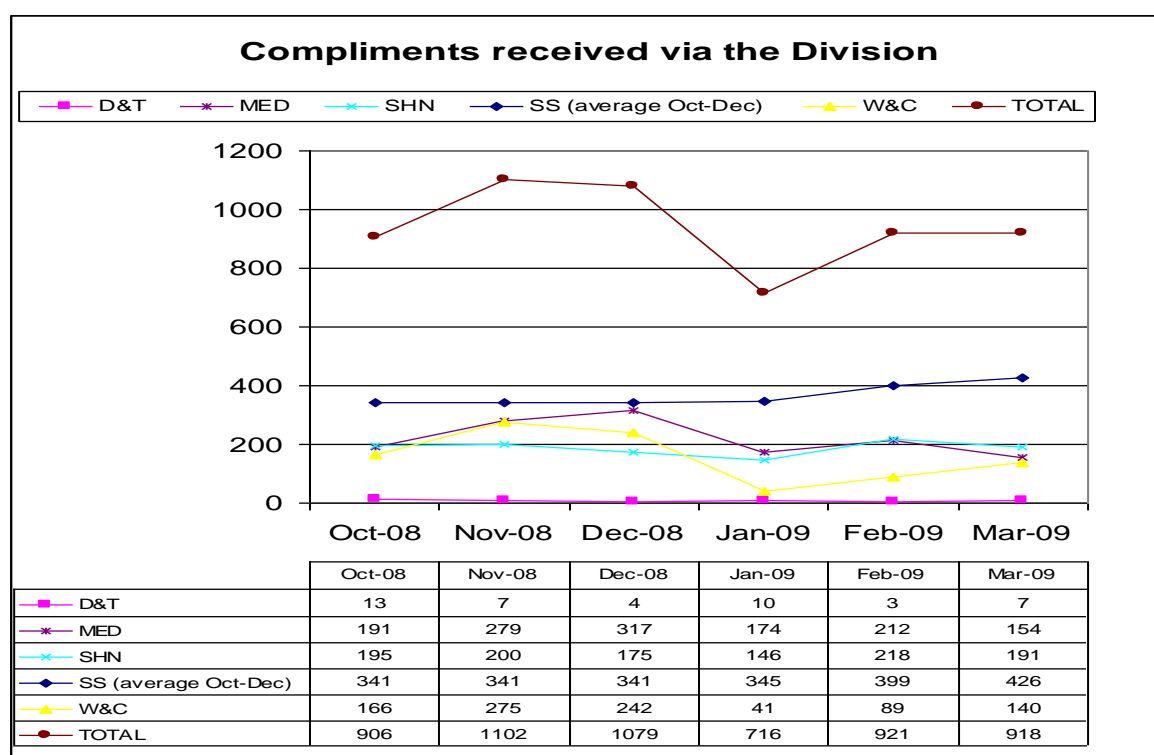


Figure 5: Compliments received by the Trust directly to Divisions October 2008 – March 2009.

Due to the Specialised Services Division collecting data quarterly for the period October – December 2008, the quarterly figure has been averaged to obtain a monthly figure.

### 3.2 Compliments received corporately

Compliments are also received via letters to the Chief Executive, and Chairman and to the complaints and PALS departments.

Division	Number of compliments received corporately					
	Oct 08	Nov 08	Dec 08	Jan 09	Feb 09	Mar 09
Diagnostic and Therapy	0	0	1	0	0	0
Medicine	1	1	0	3	4	4
Specialised Services	0	0	0	3	1	0
Surgery, Head and Neck	0	2	0	2	1	1

Women's and Children's	2	1	2	1	1	3
Trust Services	0	0	0	1	0	0
Trust wide	1	0	0	0	0	0
Total	4	4	3	10	7	8

Table10: Number of compliments received by the Trust Corporately by Division, October 2008 – February 2009

There has been a significant increase in the number of compliments received corporately since January 2009, predominately in the Division of Medicine. This may be due to improvements in the efficiency of data collection.

### 3.3 Trust wide compliments.

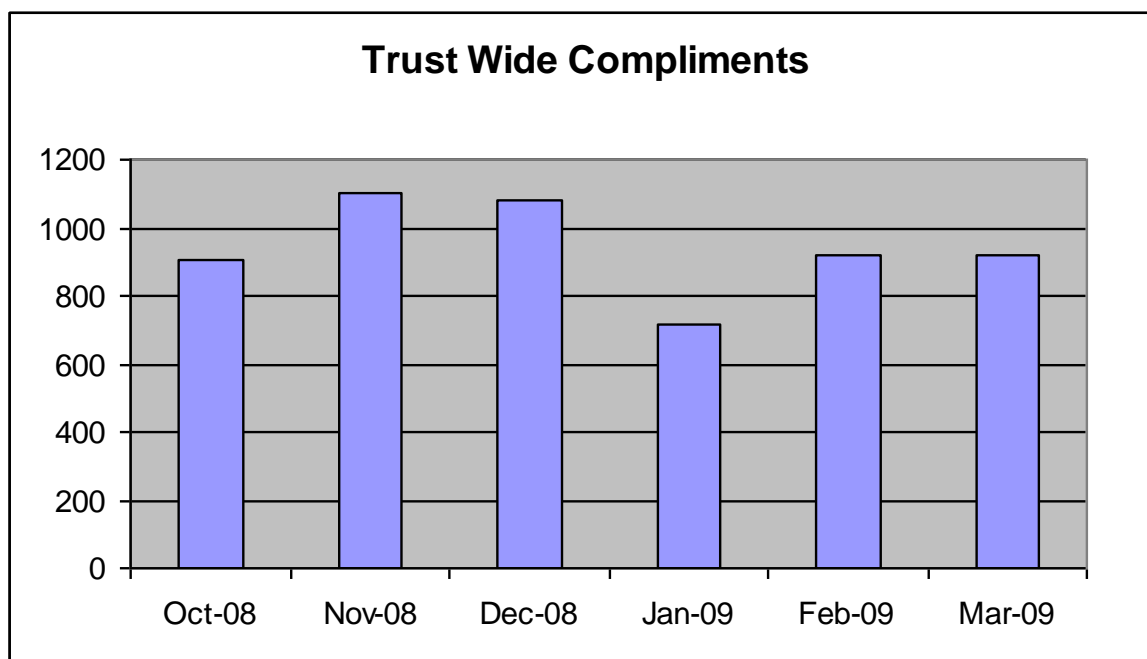


Figure 6: Number of compliments received Trust Wide October 2008 – February 2009

## SECTION 4 ACHIEVEMENTS THROUGHOUT THE YEAR

- An updated Complaints and Concerns Policy v3 was successfully introduced in February 2009 to reflect factual updates to include strengthened compliance with Healthcare Standard C14 a, b and c.
- Regular reports on complaints have been presented quarterly to the Governance & Risk Management Committee and any necessary issues brought to the attention of the Clinical Risk Assurance Committee.
- Complaints reports have been discussed at the Joint Review Group to pick up areas for service improvement which emerge across complaints, claims and incidents.
- Progress has been made towards developing an increasingly flexible service. Informal complaints have been increasingly resolved by the complaints team as the year progressed using a similar approach to the PALS team.
- The PALS module of the Ulysses database which holds the data for informal complaints now captures this data from all sources.
- In conjunction with the PALS team, preparation took place to comply with the new Health and Social Care Complaints Regulations (England) 2009 which came into effect on the 1<sup>st</sup> April 2009. This included a complete review of complaints processes in conjunction with complaints colleagues across the Trust, production of a new policy and

a number of training sessions and workshops. Information was gathered from the pilot adopter sites around the country, especially the Royal Cornwall Hospital (Treliske). Initial proposals were discussed with Divisions and the agreed new processes were successfully incorporated into a new complaints policy which is now being followed. This will be due for review during the first half of 2009/10.

## **SECTION 5 TRAINING**

Training on the new Complaints Policy based on the Parliamentary and Health Service Ombudsman's Principles of Remedy has been provided by the Complaints team. Support and advice has been provided to Managers to assist in writing formal letters of response, and all new managers have access to complaints training both via corporate training days and specific individual sessions with the Complaints Senior Nurse.

Complaints training has been included in governance training days provided to managers and medical staff. Complaints awareness has been enhanced as part of the governance session of the Trust's corporate induction programme which is attended by all new staff. The Trust's 'Treating People Well' programme now also includes a session on complaints handling.

A new Staff Complaints leaflet has been created, in addition to an updated patient information leaflet, which provides a reference guide and complaints contact information for all staff within the Trust.

## **PART 2: PATIENT ADVICE & LIAISON SERVICE (PALS)**

### **PALS team**

Changes were undertaken to both the structure and job roles within the PALS service during 2008/09, to facilitate closer working and integration with the Complaints service. The central PALS team maintained its responsibilities for the co-ordination and management of all PALS activity for the Trust, supported by the Family Information and PALS Officer at Bristol Royal Hospital for Children, in relation to paediatric activity.

The main focus of the PALS service at UH Bristol remains based at the main entrance of the Bristol Royal Infirmary, although since March 2009 the PALS Department also have an office base within Trust Headquarters.

The PALS Department has a staffing of 3.0 whole time equivalents, which comprises a full time PALS Manager, full time PALS Officer, and a part time PALS & Complaints Officer and part time PALS Secretary. The position of PALS Secretary is a new role which was introduced in March 2009 and provides a key role in the co-ordination of the team and provides a first point of contact for all telephone enquiries into the service.

During the last year, the activities of the Paediatric PALS service have widened, having led the successful recruitment process for a Young Person's Involvement Worker. This post was designed to compliment the PALS service in pro-actively reaching out to children and young people to find out about their experiences of hospital care. The two services work closely together, and have collaborated on a range of projects including 'My Hospitals, My Say', an event for young Foundation Trust Members which led to the development of a Youth Council. 'Moving On Up', an event for patients considering transition to adult services, has provided feedback on young peoples and parent/carers needs to clinical service providers and to the PCT. In addition, the Family Information and PALS Officer has met with the Youth Council to discuss the Trust's feedback processes and to review the Division's Website.

The Paediatric PALS service is also pleased to welcome a part time administrator to the team, covering both PALS and Young Persons Involvement, which has allowed a swifter response to telephone enquiries and increased the capacity of the PALS team to support more families. It has also allowed for more pro-active involvement in strategic groups such as the Disabled Children's Working group, the Child and Family Support group and the Food Provision group.

### **Cross Organisational Working**

The PALS Department manages informal complaints and enquiries which cut across other NHS and non NHS organisations.

The PALS Manager is a member of the South West Health & Social Care Complaints & PALS Network, which was created in October 2008 to facilitate the changes to Health and Social Care Complaints Procedures from 1<sup>st</sup> April 2009 and provide support for local managers. The Network has met with the Regional Co-ordinator for the Making Experiences Count Early Implementer Sites, in respect of the implementation of the new Health and Social Care Complaints Regulations (England) 2009, and also the Deputy Parliamentary and Health Service Ombudsman and local Officers, as part of the Complaints legalisation

changes. A Joint Working Protocol has also been produced by the group, to support the management and investigation of complaints and enquiries across organisational boundaries.

The Family Information and PALS Officer continues as a member of the National Paediatric PALS Network, where the involvement work has been presented and was very well received. The work was also highlighted as a good practice case study as part of the National Children's Bureau project, *PALS: Getting it right for Children and young people*.

### **Joint working with Complaints Department at UH Bristol**

The restructuring of both the central PALS and Complaints Teams at UH Bristol in 2008/09 has facilitated closer working relationships and practices. Both Departments have worked closely to implement the new Complaints Regulations from 1<sup>st</sup> April 2009 and have provided training and support to Divisional Complaints Co-ordinators during the transitional period.

During 2008/09 the separate reporting structures of the PALS and Complaints Departments have been more integrated. This now enables the Departments to provide combined and more robust reporting to both the Divisions and Corporate Groups across the Trust, on complaints and PALS activity both centrally and within Divisions.

## **SECTION 6 PALS ACTIVITY**

The number of people who contacted the PALS service in 2008/09 was 2,258 which is an increase of 4.8% from the previous year.

Since its introduction in 2002, the PALS service has seen an average activity increase of 4% each year, with the complexity, particularly in relation to the types of informal complaints received, also increasing each year.

PALS activity falls under four main headings:-

- Informal complaints management
- Information and advice
- Proactive support and facilitation (including bereavement support)
- Compliments

The following information shows the breakdown of PALS activity for the period April 2008 to March 2009:

<u><i>Activity Type</i></u>	<u><i>Total Number received</i></u>
Informal complaints management	979
Information and advice	980
Proactive support and facilitation	267
Compliments	32

## 6.1 Informal complaints management

The total number of complaints managed by the PALS team during 2008/2009 was 979, which is broken down as follows:-

<u>Division</u>	<u>2008/09</u>	<u>2007/08</u>
Diagnostics & Therapy	40	44
Facilities & Estates	17	23
Surgery Head & Neck	373	321
Medicine	176	218
Specialised Services	79	114
Women's & Children's	199	211
Trust Services	41	25
Other	54	

With the exception of Surgery, Head and Neck and Trust Services, all of the Divisions have seen a reduction in the number of informal complaints handled through the PALS service in the period 2008/2009.

The increase in Surgery, Head & Neck figures is attributable to complaints about appointment systems at Bristol Eye Hospital, which PALS are currently working proactively with the Division to resolve. The increase in Trust Services informal complaints relates to the Cashiers Office at the BRI in relation to attitude of staff and opening hours.

The "other" category includes complaints about other NHS organisations were not specific to one of the above Divisions.

## 6.2 Category Type

The following table shows the top 20 complaint categories for 2008/09, together with the total number of informal complaints received by category type for all Divisions:

<u>Category Type</u>	<u>Total</u>
Communication	196
Waiting time for appointment	103
Behaviour/Attitude of Medical staff	100
Transport	95
No accommodation available	90
Clinical Care (Medical)	71
Failure to answer phone	66
Choose & Book	58
Delayed appointments	51
Cancelled appointments	39
Behaviour/Attitude of Nursing & Midwifery staff	38
Discharge arrangements	38
Waiting time for procedure/investigation	35
Loss of personal property	35
Cancelled operation	34
Follow up treatment	32
Parking	28
Waiting time for correspondence	21
Complications during/after treatment	21
Lost/misplaced/delayed test results	18

## SECTION 7 INFORMATION AND ADVICE

The total number of information and advice enquiries managed by the PALS team during 2008/09 was 980, which is broken down as follows:-

<u>Division</u>	<u>2008/09</u>	<u>2007/08</u>
Diagnostics & Therapy	22	21
Facilities & Estates	12	6
Surgery Head & Neck	163	132
Medicine	89	77
Specialised Services	95	97
Women's & Children's	206	163
Trust Services	122	29

With the exception of Specialised Services, all of the Divisions have seen an increase of information and advice enquiries during the period 2008/09. The large increase of 321% in relation to Trust Services Division relates to changes in how activity was recorded during the last 12 months and also Freedom of Information Requests, which were received via the PALS Service and forwarded to Legal Services for responding.

There were also 271 information and advice enquiries which the service dealt with during 2008/2009 which were not attributable to a particular Division. These relate to the signposting of patients and relatives to other health and social care services and support / voluntary organisations outside of the Trust.

## SECTION 8 PROACTIVE SUPPORT AND FACILITATION

The total number of proactive support and facilitation enquiries managed by the PALS team during 2008/09 was 267, which is broken down as follows:-

<u>Division</u>	<u>2008/09</u>	<u>2007/08</u>
Diagnostics & Therapy	6	8
Facilities & Estates	1	5
Surgery Head & Neck	45	78
Medicine	31	44
Specialised Services	23	51
Women's & Children's	96	72
Trust Services	35	36

With the exception of Women's and Children's, all other Divisions have seen a decrease in the number of proactive support and facilitation enquiries during the period 2008/09. The increase of 33% in Women's and Children's relates to an increased profile of the service at Bristol Royal Hospital for Children through the greater involvement of PALS staff with the Children's Disability Group and their contact numbers being published in the new Welcome Leaflet, given to all parents.

There were also 30 proactive support and facilitation enquiries handled by the service during 2008/09 which do not relate to any of the above Divisions and /or relate to other NHS organisations.

## SECTION 9 COMPLIMENTS

The total number of compliments received by the PALS team during 2008/2009 was 32, which is broken down as follows:-

<u>Division</u>	<u>2008/09</u>	<u>2007/08</u>
Diagnostics & Therapy	1	0
Facilities & Estates	0	0
Surgery Head & Neck	6	8
Medicine	3	15
Specialised Services	2	10
Women's & Children's	13	4
Trust Services	3	0

The number of compliments received for the Division of Women's and Children's has increased, which may be due to the increased profile of the service. In other Divisions the numbers are so low as to not provide any specific trends.

The service also received 4 other compliments which were not related to any particular **Division**.

## SECTION 10 REPORTING

The Patient Advice and Liaison Service has robust reporting systems to Divisional Managers, Clinical Leads and Heads of Nursing for the reporting of key themes, trends and good practice, on a quarterly basis. In addition to this, reporting also occurs regularly to Trust wide Corporate Groups and/or leads, i.e. for Catering, Transport, Equality & Diversity, Older People, Disability, Bereavement and End of Life etc... This ensures that issues raised by service users can be monitored and appropriate action taken to remedy any concerns or problems promptly, where appropriate, and can also influence service change and improvements.

During this year the service has also been requested to send quarterly reports to the PCT commissioning groups for cardiac/cardiology, diabetes, respiratory and urgent care, so that they can address any concerns with the commissioning of these services.

## SECTION 11 SERVICE IMPROVEMENTS

The following are some examples of improvements which have been implemented across the Trust, as a result of PALS activity:-

- Customer care training provided to front line nursing staff using specific patient experience scenarios.
- Improvements to Bristol Eye Hospital Appointment systems (work ongoing)
- Implementation of local protocols and policies relating to complaints handling and answering telephone calls from the public.
- Improved support with the transition of paediatric patients with learning difficulties into adult services.
- Improved communication and liaison between medical staff and patient's relatives – BRI.

## **SECTION 12 DEVELOPMENT WORK AND ACHIEVEMENTS**

The following highlight the main areas of development work and achievements of the PALS Department during the period 2008/09:-

- Implementation of the new Complaints Legislation for Health and Social Care (April 2009), in conjunction with the Complaints Department.
- Restructuring of the PALS Department and creation of new Band 3 co-ordination post.
- Introduction of paperless real time recording of PALS activity from January 2009. This process enables the Department to provide more accurate and timely reporting for the Trust and supports more effective communication with patients.
- The PALS Manager has worked with the Senior Nurse Complaints, PALS and Patient Safety to produce a new complaints leaflet for staff.
- The PALS Manager has worked closely with the Trust's Training Officer to develop and deliver a Complaints Training session within the Trust's Treating People Well Training programme.
- The PALS Department have delivered complaints and customer care training to front line staff in several key areas across the Trust and have continued to meet with new nursing staff as part of their induction programme.
- The PALS Manager and Family Information and PALS Officer have delivered a training session, within the Trust's Bereavement Support Training Programme, to provide staff with skills to manage difficult situations within the bereavement process.
- Members of the PALS Department have worked with the Trust's School's Liaison Co-ordinator to provide communication training for Year 10 Health and Social Care Students both onsite and at the University of the West of England, Bristol.
- Members of the PALS Department have continued to have representation and have been actively involved in project work with the following Trust wide Groups:-
  - Race, Religion & Belief Group
  - Bereavement and End of Life Steering Group
  - Physical and Sensory Impairment Group
  - Nutritional Steering Group
  - Disabled Children's Working Group
  - Food Provision Group

## **SECTION 13 KEY OBJECTIVES FOR 2009/10**

The key objectives for the PALS Department focus on improved access to the service and supporting service improvement within the Trust. These are:-

- To develop and roll out a training programme for front line staff in relation to complaints handling skills, which can be used by staff to support the local resolution process of the new Complaints Legislation.
- Continuing to deliver PALS awareness and customer care training to wards and departments across the Trust.
- Active promotion of the service to under represented groups.
- Providing better access to the service in other hospital sites across UH Bristol and improving the profile of PALS within the Trust.
- Developing better links with other Governance activities.
- Developing more robust systems to capture and disseminate service improvements resulting from complaints and PALS activity within the Trust.

Informal complaints are received from three routes: centrally by the complaints team, via the Patient Advice and Liaison Service and directly to Divisions. The Trust aims for a responsive and local resolution to informal complaints via whichever route they are received, resulting in some overlap in role across the central Complaints Team and Patient Advice and Liaison Service.