

Board of Directors Meeting Report

Subject: Patient Experience Quarterly Report
Date: Thursday 5th November 2015
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Executive Summary

This report details the concerns, complaints and compliments received by the Trust from 1 July – 30 September 2015 (Quarter 2).

The Patient Experience Team provide a single point of access of all patient feedback, including concerns, complaints, compliments, Friends and Family Test and NHS Choices.

During Quarter 2 2015/16, the Patient Experience Team received the following contacts, this is shown below as a percentage increase or decrease compared to Quarter 1 2015/16:

- 1405 concerns – **74% increase**
- 65 formal complaints – 12% increase
- 341 compliments – 74% increase

The significant theme for concerns during Quarter 2 relates to the Outpatient Departments similarly to previously reported data, however in July, August and September the volume of contact from patients regarding these difficulties has increased by **74%**. The difficulties include:

- Access to the Appointments Team
- Cancellation of planned clinics without notification
- Delays in medical notes preparation (clinic prep) for patient attending outpatient clinics resulting
- Cancelled clinics on the day of attendance

The Trust continues to achieve the target, in accordance with NHS Complaints Regulations, of 90% all complaints to be managed within 25 working days. During this reporting period the Trust achieved a **96%** response rate. This response rate includes all complainants who have agreed to a local resolution meeting or an extension due to the complexity of the complaint / response.

In Quarter 2, the Trust received a total of 65 formal complaints, which shows a slight increase in the total number of complaints trust wide. The complaints relate to the following divisions as follows:

- Emergency Care and Medicine – 30 complaints received (30% increase)
- Planned Care and Surgery - 26 complaints received (8% increase)
- Diagnostics and Rehabilitation – 1 complaints received (50% decrease)
- Newark – 9 complaints received (11% decrease)

The Trust reviews all complaints and report on irrespective of their outcome status, and if a complaint is not upheld, there is still an opportunity to learn and review our procedures, for example through understanding the motives and feelings of the complainant. 44% of complaints were upheld/partially upheld during Quarter 2. The learning as a result of the investigation findings has formed an action plan, to ensure organisational learning is

embedded within our services.

From April 2015, new quarterly information on written complaints about NHS hospital and community care is now submitted nationally by all NHS Trusts which is published by the Health and Social Care Information Centre (HSCIC). Data on written complaints in the NHS, will be published quarterly, the first publication for Quarter 1 is due for publication in November 2015 which will provide an account of written complaints received by NHS organisations between 1 April and 30 June 2015 providing regional benchmarking including:

- Subject of complaint, such as clinical treatment, appointments and communications.
- Service, such as A&E, Mental Health and Maternity services.
- Profession, such as dental, nursing and ambulance staff.

The Trust is currently exploring the external providers for the Friends and Family Test as the current contract expires in December 2015. The new package will include additional methods of data collection with a view to improve the response rate in real-time and analysis of qualitative feedback, compared to the current mechanisms in place.

Recommendation

The Board is asked to note:

- Note the content of this report and the work undertaken during this reporting period.

Relevant Strategic Objectives (please mark in bold)

Achieve the best patient experience	Achieve financial sustainability
Improve patient safety and provide high quality care	Build successful relationships with external organisations and regulators
Attract, develop and motivate effective teams	

Links to the BAF and Corporate Risk Register	BAF 1.3, 2.1, 2.2 2.3, 5.3, 5.5
Details of additional risks associated with this paper (<i>may include CQC Essential Standards, NHSLA, NHS Constitution</i>)	Failure to deliver the Improvement Plan and be removed from 'special measures' Risk of being assessed as non-compliant against the CQC domains e.g. responsive domain
Links to NHS Constitution	Principle 2, 3, 4 & 7
Financial Implications/Impact	Indirect financial implications – patients not being referred to SFH or not choosing SFH as a consequence of poor patient experience. NHSLA and Ombudsman implications – gratuity payments
Legal Implications/Impact	Reputational implications of delivering sub-standard safety and care
Partnership working & Public Engagement Implications/Impact	This paper will be shared with the Divisions, the newly formed Patient Experience group, Governors and the Safety and Experience group
Committees/groups where this item has been presented before	Executive Team TMB
Monitoring and Review	Complaints performance is monitored weekly by the Director of Nursing
Is a QIA required/been completed? If yes provide brief details	No

