

2019/20 Trust PALS and complaints service annual report

1.0 Introduction

Last year the Patient Advice & Liaison Service (PALS) and Complaints Teams continued to maintain the standard of service achieved in the previous year, and met all key targets for timeliness and responsiveness to patients. There were a low number of complaints reopened and only two complaints investigated by the Parliamentary & Health Service Ombudsman (PHSO) were upheld or partly upheld upon investigation. This was the lowest yearly number on record. PALS built on the success of their Volunteer Service by expanding the service from St Mary's to Hammersmith and Charing Cross Hospitals. Our volunteers have allowed us to highlight a number of 'low level' issues which are concerning to patients which might otherwise have not been highlighted via the PALS and/or complaints channels. This had led to service improvements on our wards and improved patient experience. For example, the PALS team has been working closely with Patient Experience to develop and deliver deaf awareness training in cardiac services and outpatients at Hammersmith Hospital.

The headline performance figures for 2019/20 are:

- 1074 formal complaints received (target <1080) and 3375 PALS cases logged.
- 99.0% of complaints were responded to within their agreed deadlines (target 95%).
- 99.5% of acknowledgment letters were sent within 3 working days (target 100%).
- 1079 complaints were closed during the year with an average response time of 33 days (target < 40).
- 9 complaints were referred to the PHSO, the lowest to date.
- 5 outcomes from the PHSO were reported to the trust of which one was upheld and one was partially upheld; again the lowest to date.
- Only 2.5% of complaints were re-opened which was the lowest rate to date and lower than the 3% target set for the year.
- Various members of the complaints and PALS team have been nominated by directorates for awards. The Complaints Team was nominated for Team of the Year and the PALS Patient Support Volunteer team were shortlisted for Volunteer Team of the Year in the Third Sector Awards.

Engagement between the Central Complaints Team, PALS and the divisions remains strong and they collaborate to support colleagues to resolve complaints as swiftly as possible. There is a complaints presence at divisional monthly and quarterly governance meetings, as well as some of the specialty meetings when trends are identified that need to be brought to their attention. This is supported by quarterly reports provided by the Complaints & Service Improvement Manager. A fortnightly tracker is sent out to key staff. This shows a summary of complaints performance across the Trust and allows queries and delays to be identified and dealt with promptly. The report continues to highlight the great work being done around the Trust by including compliments. This helps balance feedback, ensures colleagues get recognition for the excellent work they do, and improves general engagement with the complaints team. Compliments received during the year is a new addition to this report and are shown in Table 10. Last year, 304 compliments were logged.

The complaints department supports the Chief Executive’s office by managing and preparing responses to “high profile” complaints such as those received from MPs and those that have been raised via social media.

The complaints department keeps track of all actions and learning arising from complaints investigations to make sure they are delivered and evidence is collected to ensure they take place. Additionally, the Complaints & Service Improvement Manager delivers ad-hoc training sessions to colleagues about complaints handling, as well as being a regular presenter on the nursing preceptorship and FY1 doctors’ training programme.

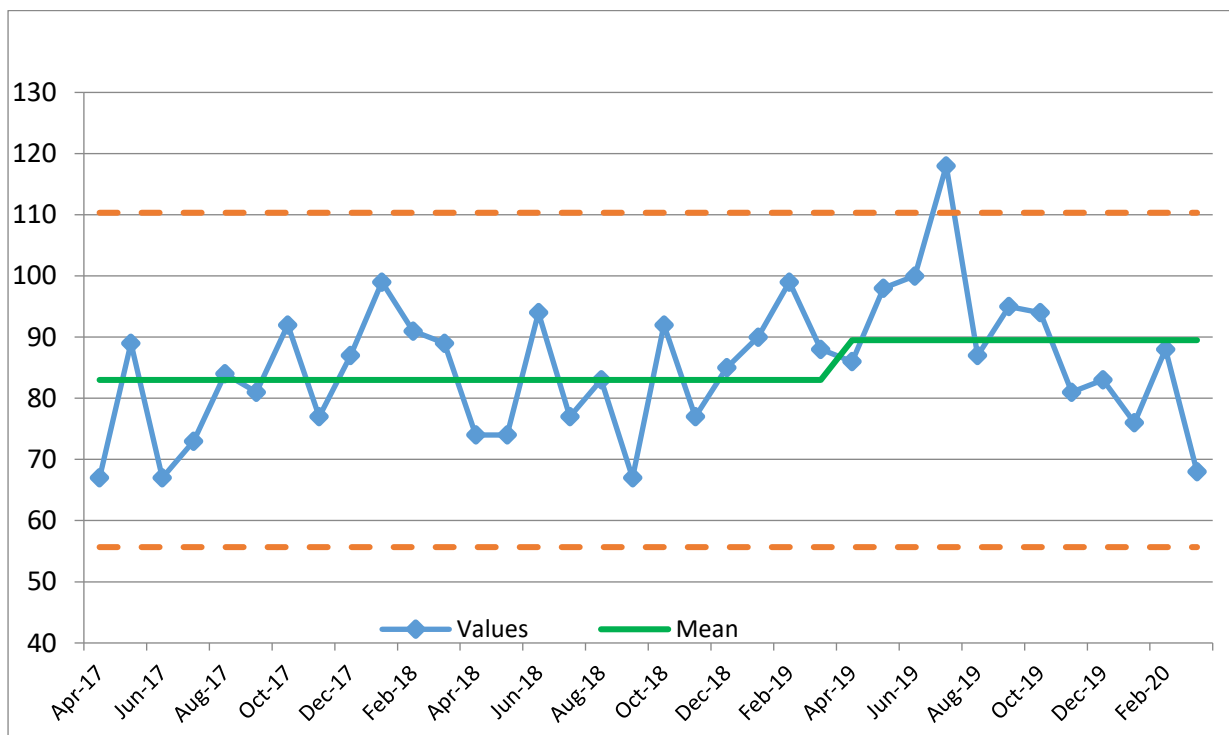
Members of the complaints team regularly attend a variety of “Big Rooms”, for example the Complaints & Service Manager participates in the End of Life Care Big Room providing valuable insight into the experiences of our patients and their loved-ones.

2.0 Numbers of Formal Complaints Received

Last year the Trust received 1074 formal complaints, which was just within the target of 1080 set for the year. This was a 9% increase on the 985 the previous year. There had been falls during the preceding years. This year’s increase was primarily a result of two factors: firstly, a change of patient transport provider which resulted in a large increase in transport related complaints; and also an increase in delays and cancellations to elective patients as a result of capacity issues across a number of specialties. These trends are discussed in more detail later in the report. The number of complaints received fell during March 2020 as the Covid-19 coronavirus situation started to affect services. This will have a significant impact on the service during 2020/21, which is discussed later.

The graph below shows the trend in the number of formal complaints raised over the last three financial years.

Graph 1: Numbers of formal complaints received for the last three years



3.0 Complaints cases

We report the subject of complaints using standardised categories, set by NHS Digital, which allow for benchmarking across NHS Trusts. Table 1 highlights the top 5 categories of formal complaints received in the year in comparison with the previous year (for reporting purposes Clinical Treatment and Patient Care have been combined as they are similar).

Table 1: Formal complaints by category

Category	2019/20	% of total	2018/19	% of total
Clinical treatment/patient care	301	28%	355	36%
Appointments	159	15%	123	12%
Values and Behaviours (Staff)	165	15%	150	15%
Communications	118	11%	134	14%
Transport	70	7%	21	2%
TOTAL	813	76%	783	79%

The proportion of formal complaints across the service areas has remained broadly the same from 2018/19 to 2019/20. However, there are a few changes to note. Firstly, the proportion of complaints about *Appointments* has increased which reverses a previous trend of these concerns falling during recent years. This was also despite PALS continuing to ensure that issues about appointment delays and cancellations are, where possible, dealt with quickly and at source without being escalated to the formal stage.

We have observed increases in complaints relating to *Appointments* as patients have experienced delays to elective appointments and procedures, and short notice, and sometimes repeated cancellations. This has been a particular theme in some services within the the Surgery, Cancer and Cardiovascular Services Division.

However, there has also been a significant fall in complaints about *clinical treatment/patient care* as a percentage of overall complaints, which is positive. It demonstrates that despite capacity issues causing delays and cancellations, patients are increasingly satisfied with the standard of care they eventually receive.

A new theme which has appeared in the top 5 during 2019/20 has been *Transport*. The Trust's contract for patient transport that had previously been provided by DHL, was transferred to a new provider, Falck. Unfortunately, this did not go as smoothly as expected and patients experienced significant delays, cancellations and other disruption to their journeys, which continued for several months. This had a particularly noticeable impact on our renal patients who often make several journeys per week to hospital sites for dialysis. A number of patient safety related incidents also came to light via the formal complaints process and they were investigated via clinical governance processes. Representatives from the PALS and complaints teams met weekly with the Trust's internal transport team and Falck to review cases and to ensure that feedback from complaints was taken seriously and led to learning and improvement.

Values and behaviours (staff attitude) and *Communication* were emerging themes during previous years and it is reassuring to note that the number of complaints about *Values and*

Behaviours has remained stable, and in the case of *Communication* has fallen year on year as a proportion of overall caseload. It is hoped that this is a reflection of the emphasis Trustwide on raising the profile of the Trust values via a number of initiatives to ensure that they are demonstrated by staff in their approach to colleagues as well as patients and their loved-ones.

Table 2 provides a breakdown by service area. During 2019/20 there were more complaints received concerning outpatients than inpatients. This is likely due to the aforementioned capacity issues which have resulted in complaints about delays and cancellations to elective outpatient appointments and procedures.

Table 2: Complaints by service area

Service area	2019/20	% of total	2018/19	% of total
Outpatients	501	47%	431	44%
Inpatients	432	40%	404	41%
A&E	85	8%	86	9%
Maternity	56	5%	64	6%
Total	1074	100%	985	100%

Table 3 shows the number of complaints received by division compared with the previous year. Table 4 shows the directorates that have attracted the most complaints.

Table 3: Complaints by division

Division	2019/20	% of total	2018/19	% of total
Medicine & Integrated Care	311	29%	288	29%
Surgery, Cancer & Cardiovascular	398	37%	392	39.8%
Women's, Children's & Clinical Support	180	17%	200	20.3%
Corporate (including IPH and Transport)	184	17%	102	10.4%
NWL Pathology	1	<1	3	<1
Total	1074	100%	985	100%

Table 4: Complaints by Directorate with the largest overall numbers of complaints

Directorate	2019/20	2018/19	% change year on year
Estates & Facilities (including Transport)	98	36	+272%
Urgent Care & Emergency Medicine	84	86	-2%
Trauma	82	91	-10%
Specialist Surgery	81	91	-11%
General Surgery & Vascular	76	70	+9%

The most significant increase in complaints during the year was in Transport, due to the changeover in provider mentioned previously. Towards the end of 2019/20 there was a reduction in transport related complaints as the service stabilised so we anticipate this year's high number of cases being a "one-off". The only other area to receive a notable increase in the proportion of complaints during the year was *General Surgery & Vascular*, with a 9% increase. These were mainly complaints related to delays and cancellations to certain surgical

procedures as a result of capacity issues. The other trend of note was that maternity services no longer feature on the above table, having previously been near the top of the list of directorates receiving the most complaints. This reflects improvement of maternity services which have recently been given a Care Quality Commission (CQC) Outstanding rating.

The Complaints & Service Improvement Manager and the Complaints Investigator allocated to the above areas will explore with the services the key challenges to support a reduction the number of complaints they are receiving.

All complaints are risk assessed upon receipt by the Complaints & Service Improvement Manager. They are assigned a risk grade which informs the timescale for completing the investigation as well as who approves and signs off the final response. Table 5 shows the number of complaints per division by risk grade. Although there were no 'high risk' complaints investigated under the complaints procedure, the complaints team flagged a number of issues with the Clinical Governance Teams which were declared SIs (Serious Incidents) and went on to be investigated and responded to via that process.

Table 5: Risk grade by division

Division	LOW	MEDIUM	HIGH
Medicine & Integrated Care	274	37	0
Surgery, Cancer & Cardiovascular	387	11	0
Women, Children & Clinical Support	173	7	0
Corporate (including) IPH	178	6	0
NWL Pathology	1	0	0
Total	1013	61	0

The outcome of trust complaint investigations is that the complaint can be "not upheld", "partly upheld" or "upheld". For those cases that are partly upheld or upheld, actions and learning are extracted and recorded on the complaints change register for follow-up. Table 6 shows the outcomes of the 1079 complaints investigations completed in 2019/20. This number is higher than the cases received because it includes cases opened the previous year but completed in 19/20.

A slightly higher proportion of complaints were upheld/partly upheld than not upheld during the year, which is a small change compared to previous years when the proportions have been more evenly split.

Table 6: Outcome by division

	Upheld	Partly upheld	Not upheld	Total
Medicine and Integrated Care	77	66	175	318
Surgery, Cancer and Cardiovascular	102	95	197	394
Women's, Children's and Clinical Support	54	51	94	199
NWL Pathology	0	0	1	1
Corporate (Inc. IPH)	86	36	45	167
Total	319	248	512	1079
Percentage	30%	23%	47%	

4.0 Parliamentary & Health Service Ombudsman (PHSO) Cases

Table 7 provides a breakdown of all the PHSO decisions last year. The PHSO reviewed 9 cases, which amounts to less than 1% of the Trust's annual caseload. This was a slight decrease on the 10 cases reviewed by the PHSO in 2018/19. The PHSO shared five outcomes (some cases were carried over from 2017/18) and two were upheld/partly upheld, with the other three being not upheld. The two upheld/partly upheld complaints were for the Surgery, Cancer & Cardiovascular Division.

We continued to follow a structured approach to managing PHSO cases. This ensures we report and share learning with our divisional triumvirates and that we involve them in devising any necessary service improvements.

Table 7: Decisions the PHSO made last year by division

Division	Upheld	Partly Upheld	Not Upheld
Medicine & Integrated Care	0	0	2
Surgery, Cancer & Cardiovascular	1	1	1
Women's, Children's & Clinical Support	0	0	0
TOTAL	1	1	3

In cases where there has been a financial loss, we are required to put a complainant back to the same financial position they would have been in had the problem not occurred.

The Trust made monetary payments totaling £15660.85 last year to help remedy complaints where a service failure occurred. £1210.55 came from the complaints team budget and the remainder £14450.30 came from the relevant services' budgets. One of the payments (£750) was made at the request of the PHSO for the case they upheld. This was in recognition of the distress caused by not informing a relative that her father was deteriorating in time for her to reach the hospital before he died.

The complaints team arranged some significant payments for valuables that were lost while patients were in the hospital, and the hospital was found to be at fault. Property loss has become an increasing theme of both PALS and Complaints cases over the year and will be a focus of attention in 2020/21. This is discussed further later in the report.

5.0 Learning and Service Improvements following a formal complaint investigation

The Complaints & Service Improvement Manager works with the wider complaints team to ensure that learning and actions are recorded when complaints are closed. The list is reviewed on a monthly basis and any outstanding actions are reviewed and flagged with the Divisional Governance Lead on a quarterly basis, at their Divisional Quality and Safety Committee meeting, until they are completed.

On a quarterly basis, the Complaints & Service Improvement Manager produces the Complaint & PALS Service Improvement report. This provides a regular update on numbers, themes and learning from formal complaints and PALS feedback. Learning and actions are also presented in a "You Said, We Did" section as well as a list of actions already undertaken.

This is presented at the divisional Quality & Safety Committee meetings so that staff are able to see how we have learned and improved because of a complaint investigation. It is also shared with Healthwatch and the Trust Executive.

As well as immediate improvements, the Complaints & Service Improvement Manager uses complaints data to identify and make significant service improvements. During 19/20, the Complaints & Service Improvement Manager carried out a piece of service improvement work with Sodexo staff who provided the Trust's facilities services until 31 March 2020. This work involved discussion about living the Trust values. The key finding of this research was that staff reported breakdowns in communication between Trust and Sodexo staff, particularly in terms of the 'kindness' value, which could lead to negative interactions, further complicating existing pressures. This piece of work was discussed at Executive level and was taken into consideration when the Sodexo contract was ended and the facilities staff were brought 'in house' to become Trust employees. The Complaints & Service Improvement Manager will follow up on this during 2020/21 with a piece of work to see if the transition from Sodexo to becoming Trust employees has led to an improved kind and collaborative relationship with colleagues, and if there is more work to be done, discuss and agree actions to achieve this.

Other examples where changes have been introduced as a direct result of complaints include:

- As part of wider Divisional work around patient fasting policy, an anonymised complaint will be used as a case presentation for the ward staff.
- As a result of complaints, a review of the IVF patient pathway has been undertaken by the service's Quality Manager.
- On the Marjorie Warren Acute Medical Unit the Lead Nurse has pledged to use feedback from a complaint to help design a quality improvement project to ensure care of dying patients is optimal and considers the experience of friends and relatives.
- As a result of a complaint about a patient given food to which she was allergic, the facilities team developed an improved flagging system for patients who have food allergies.
- We have completed a review of the radiofrequency ablation (RFA) pathway following complaints about delays to treatment.

6.0 The year ahead for the Central Complaints Team

Although it had a minor impact at the very end of the 2019/20 financial year, the Covid-19 pandemic will be the main factor influencing the work of the team in the year ahead. At the time of writing (June 2020) the number of complaints being received was starting to increase again following a significant decline during the height of the pandemic. During this period, members of the complaints team continued to run the complaints service whilst supporting colleagues in the Patient Affairs Team to manage the increase in paperwork relating to Covid-19 deaths in our hospitals.

An emerging national theme following the start of the Covid-19 pandemic has been patient property. This has been compounded by the unique circumstances that Covid-19 has presented, with the significant increase in admissions of critically ill patients and family members not being able to visit.

PALS staff have been working in close collaboration with the Patient Affairs team and ward staff to try and locate patient property; however, we are now seeing more complaints (both formal and informal) related to lost property items.

The Head of Patient Experience is working with PALS and Patient Affairs to develop a new Patient Property Policy and procedural document that will reflect learning from recent events.

As services start to return to 'normal' during the year ahead, we expect that complaints from our elective patients will start to increase, particularly as waiting times and cancellations had already been an issue in some areas prior to the Covid-19 pandemic. We will support those services by flagging the concerns we receive, highlighting trends and ensuring we provide as much clarity to our patients as we can about their treatment plans and timescales for these.

We will maintain the current high standard of our complaints handling, both in terms of timeliness, and most importantly, on providing high quality responses that reflect the Trust's values. We will continue to work hard to 'get it right' the first time, leading to fewer complaints being reopened, and ensuring that those that are escalated by patients to the PHSO are not upheld. We have set a maximum target of just one upheld/partly upheld cases for the year ahead.

The quality of our service will be demonstrated by a further reduction in the number of cases we re-open. Last year we set an ambitious target of reopening just 3% of cases in 2019/20 and we achieved this, reopening only 2.5%. In 2020/21 we will set a target of 2%. We will continue to respond to all complaints received in less than 40 working days.

We will continue to ensure that all complaints that are closed as 'partly upheld' or 'upheld' contain learning and, when appropriate, clear actions to ensure that services are improved. This will assure our patients that when they complain to us, we will improve services for other patients and ensure that failings are not repeated. We keep a log of actions from complaints and follow them up systematically with the Divisions to ensure they provide confirmation and evidence that agreed actions have happened.

During 2018/2019 we introduced a new key performance measure of "overall satisfaction" with the handling of patients' complaints, for which we have set ourselves a target of 70%. This is measured via an online feedback questionnaire that we are sending to complainants six weeks after conclusion of their complaint. During 2019/20 the score for overall satisfaction in the handling of complaints was 76%. Feedback gained via the questionnaire is given by the Complaints and Service Improvement Manager during regular 1:1 meetings with the Patient Complaints Investigators and this has led to improvements in complaints handling, for example in changing our acknowledgment letters to make it clearer what will happen next once patients have registered a complaint.

From 1 April 2020, all new complaints are being logged using the Healthcare Analysis Tool (HCAT), which has been developed in conjunction with the Patient Safety Translational Research Centre at Imperial College. HCAT is a method for systematically analysing complaints, and grouping key insights. The tool allows staff to reliably determine the problems reported in complaints at three-levels of specificity; to grade their severity, the harm caused to patients, and where in the hospital system problems occurred. The aim of this is to provide a much deeper layer of insight into the complaints we received than is possible using the current (KO41) system and it will change the way we report during 2020/21.

Finally, the Complaints & Service Improvement Manager will continue to offer expert advice to colleagues across the Trust and when it is possible to resume them, he will carry out regular training sessions with colleagues from all service areas on how to effectively manage and resolve complaints.

7.0 PALS cases

The PALS team resolved 3375 informal concerns and enquiries during 2019/20. Table 8 displays a breakdown of the cases received by Division.

Table 8: PALS cases by Division

Division	2019/20	% of total	2018/19	% of total
Medicine & Integrated Care	996	29%	990	34%
Surgery, Cancer & Cardiovascular	1510	45%	1303	45%
Women's, Children's & Clinical Support	493	15%	444	15%
NWL Pathology	6	<1%	6	<1%
Corporate (including Transport)	370	11%	170	6%
Total	3375	100%	2913	100%

This year has seen a 16% increase in the number of complaints being dealt with by PALS. PALS continue to offer a pro-active service, supported by PALS Volunteers, which aims to resolve issues before they have the chance to escalate unnecessarily. As noted in 2018/19, many of these cases relate to delays and cancellations in surgery appointments, which are a reflection of the capacity pressures within the division.

The proportion of PALS cases about transport have significantly increased over the past year. This is largely due to a planned change of service provider and the implementation of the new contract.

Table 9 shows the breakdown of PALS cases by specialty (for those specialties receiving more than 100 concerns in the year).

Table 9: PALS cases by specialty

Speciality	Number of cases	% of all PALS cases
Transport	295	9%
Orthopaedics	236	7%
Urology	212	6%
Ophthalmology	173	5%
General Surgery	154	5%
Neurology	144	4%
Ear, Nose & Throat	140	4%
Emergency Medicine	127	4%
Cardiology	107	3%
Gynaecology	105	3%
Dermatology	101	3%
TOTAL	1794	53%

Table 10 shows a breakdown of PALS cases by category (top 5 categories only)

Table 10: PALS cases by category

Subject	2019/20	% of total	2018/19	% of total
Appointments	944	28%	766	26%
Communications	392	12%	556	19%
Transport	298	9%	68	2%
Admissions and discharge	179	5%	242	8%
Clinical Treatment	119	4%	94	3%
TOTAL	1932	58%	1726	58%

The above table reflects the pressures the Trust is under in terms of demand for services as well as short notice cancellations of appointments and resulting delays to treatment. Additionally, Transport complaints have increased significantly as mentioned previously. On a positive note, complaints about *Communication* and *Values and Behaviours* have fallen and *Values & Behaviours* no longer appears in the Top 5. This downward trend was also evident in the complaints themes and is likely to be a result of the push to embed the Trust's Values and Behaviours.

PALS continue to support the complaints team in ensuring that issues such as appointment concerns, that lend themselves to swift resolution, are dealt with quickly without needing to be escalated.

Table 10: Compliments

Table 10 shows a breakdown of compliments received by Specialty during the year for those areas that reported 10 or more compliments:

Specialty	Number received
Emergency Medicine	36
Ophthalmology	28
Maternity	23
Imaging Clinical	13
Patient access	12
General Surgery	11
Orthopaedics	11
Cardiology	10
Ear, Nose & Throat	10
Gynaecology	10

8.0 The year ahead for PALS

The year ahead for PALS is difficult to predict at present due to the ongoing impact of the Covid-19 pandemic. The recent events have challenged our teams to work in different ways and to review how we provide our services. We have currently suspended front-line face-to-face PALS services due to the associated risks.

PALS have continued to offer telephone and email support to patients and their families, although the impact of the temporary suspension of visitors has meant a significant initial reduction in contact. PALS are supporting families and patients to stay connected by working with the patient experience team to deliver personal messages and photographs to patients on the wards.

Throughout the pandemic, PALS are working in close collaboration with the Patient Affairs team providing support to bereaved families and supporting with the management of patient property.

The future of the Patient Support Volunteers is unclear at present. The volunteers have all been working to support our staff and patients through these unprecedented times, delivering food and much needed supplies to our wards. Once we are through this period, the patient support volunteers' role will be reinstated. We are hoping this experience will enable us to increase recruitment across all sites.

Over the course of the year, we will reflect upon our experience and will review how we deliver our services to see if we can make any improvements to ensure we are delivering an accessible PALS service during times when access is somewhat limited.

9.0 Conclusion

Due to the Covid-19 situation it is much harder than in previous years to predict what will happen during 2020/21 for our PALS and Complaints services. However, we expect an initial sharp fall in the number in PALS and Complaints cases received at the beginning of the year to be followed by an increase, as delayed demand for elective procedures reappears when services are normalised. Additionally when visitors are permitted to return to the hospital this will inevitably lead to an increase in the reporting of PALS and complaints concerns.

The complaints team will focus in 2020/21 on maintaining the high quality of its responses, reducing the "re-open" rate further and continuing to ensure that cases are not upheld upon review by the PHSO. We will use the HCAT tool to transform the way we report and use this insight to support services in highlighting trends and themes. We will continue to ensure that complaints are used to drive improvements and learning, we will collect evidence that this has happened. To provide additional assurance, we aim to do more to follow up with patients to let them know when agreed actions have taken place.

Over the past year, the PALS service has become more integrated with the patient experience team and have been working in close collaboration on a number of improvement projects. The plan was to build upon this and to continue developing the role of the patient support volunteers. With the onset of Covid-19, the team has demonstrated its ability to adapt and respond to changing service and patient needs.