

# **COMPLAINTS AND FEEDBACK REPORT**

January to March 2016

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# Summary

The summary section provides an overview of key areas of performance ('risks' and 'highlights') and identifies any actions being taken as a result.

|                   | Risks   |
|-------------------|---|
| <b>Complaints</b> | <ul style="list-style-type: none"><li>• Between January and March 2016, 398 new formal complaints were received and 404 informal concerns. By combining formal complaints and informal concerns, 802 combined concerns were received this quarter, a decrease from 862 last quarter.</li><li>• Although the number of combined concerns has decreased this quarter, it still remains high and there has been a shift with a lower proportion of concerns being managed informally and an increase in the proportion of complaints being managed through the formal process.</li><li>• While analysing reasons for the increase in the proportion of complaints that were managed through the formal process, it was noted that over the past 6 months there has been significant change in the staff within the Patient Services Team who code informal concerns, and as coding is subjective, this may have had an impact on the consistency and may have also had an impact on the number of concerns being managed informally. There is now a full complement of staff within the team, and therefore this will improve consistency going forward. In addition, standard operating procedures were agreed and implemented during March 2016 so that existing and new staff all work in the same way.</li></ul> <p><b><u>ACTION:</u></b> The following actions will be taken to improve the consistency of coding for complaints and concerns:</p> <ul style="list-style-type: none"><li>- The shift in less concerns being managed informally and more complaints being managed through the formal process will be monitored over the coming months.</li><li>- An audit of the subject coding of complaints and concerns will be undertaken to determine the consistency of how the coding is being applied.</li><li>- Options will be considered for further improvement to the consistency of the coding of formal complaints and informal concerns.</li></ul> |

| Highlights  |
|---|
| <ul style="list-style-type: none"><li>• As a result of the measures implemented during 2015/16 to improve complaint response times, the year end response time was 85.3%, achieving the target of responding to minimum of 85% of complaints within 25 working days for the first time since 2012/13.</li></ul> |

# Summary

|                                      | Risks   |
|--------------------------------------|---|
| <b>Friends and Family Test (FFT)</b> | <ul style="list-style-type: none"><li>The FFT score for community between January and March 2016 is 9.1% lower than the 12 month national average while A&amp;E is 5.6% lower and inpatients is 0.5% lower.</li></ul> <p><b><u>ACTION</u></b></p> <p>The overall negative score for Community Services continues to be higher than the national average. It is a known and researched fact that methods used to carry out the FFT can affect the score, with some methods consistently producing lower scores than others. In order to test whether the method used to carry out the FFT is impacting on scores, or whether there is an issue with service quality, the individual services within community which regularly receive higher negative scores than the national average have been identified and the following actions are being taken:</p> <ul style="list-style-type: none"><li>- Some services have been selected to undertake an analysis of their negative comments and identify areas for improvement</li><li>- Other services will review the method used to carry out the FFT and will test other methods to identify whether they improve the quality of data available and whether they improve scores.</li><li>- An update of this work will be presented to the Patient Experience Committee in May 2016.</li></ul> |

| Highlights  |
|---|
| <ul style="list-style-type: none"><li>For January to March 2016, inpatient areas achieved a response rate of 31%, above the 30% target, A&amp;E areas achieved 23%, above the 20% target, and maternity achieved 24%, above the 20% target.</li><li>For January to March 2016, maternity (97%) and outpatient (94%) scores are higher than the 12 month national average.</li></ul> |

This section of the report aims to provide a comprehensive review of complaints activity over the past quarter. An analysis against other comparable periods is presented to indicate any trends or variation in activity.

If a complainant is unhappy with the response received from the Trust, they have the right to contact the Parliamentary and Health Service Ombudsman (PHSO) to request an investigation. Any PHSO requests and decisions are outlined in this section of the report.

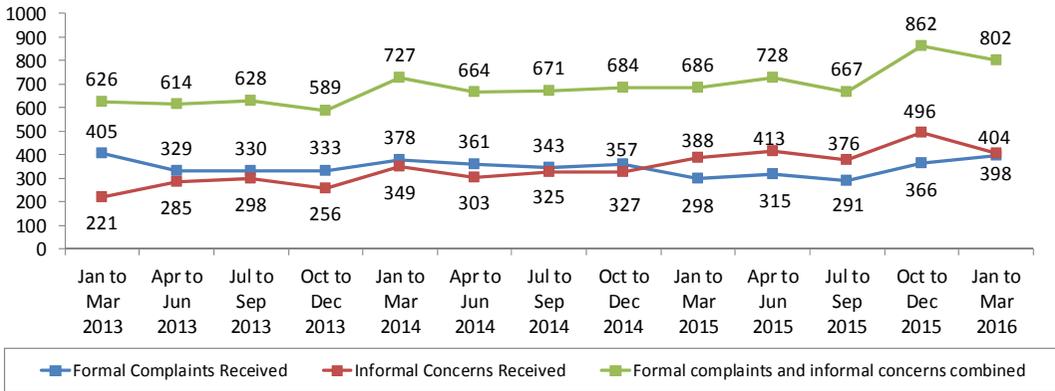
The Trust participated in the Patients Association's National Complainant Satisfaction Survey from April 2014 to November 2015. Following a review into the process for managing the complaints survey and making the best use of results, the Trust has introduced a new survey which will enable us to monitor complainant views in a more timely manner and to undertake a more detailed analysis of results. The first series of results from the new complaints survey are featured in this section of the report.

Across the Trust we take all complaints very seriously and wherever possible we use them to learn from and to make changes and improvements to our services. An example of actions that have been implemented over the past quarter is highlighted.

Where they are available, benchmarking data are provided to understand how the Trust performs against other similar sized NHS trusts to provide greater assurance regarding performance against key indicators.

# Complaints – Number of formal complaints and informal concerns received

Total number of concerns received by quarter



During this quarter 398 new formal complaints were received, an increase from 366 received last quarter. 404 informal concerns were received this quarter, compared with 496 last quarter. By combining the number of formal complaints received and the number of informal concerns, a total of 802 were raised between January and March 2016, an decrease from 862 received last quarter.

Although the number of combined complaints and concerns has decreased compared to last quarter, there has been a shift with fewer concerns being managed informally, and more complaints being managed through the formal process. This quarter the Trust has received the highest number of formal complaints since January to March 2013 (405). This will be monitored over the coming months.

The chart above shows that there has been an increase in combined informal concerns and formal complaints during October to December 2015 and although this has reduced during January to March 2016, still remains high.

This increase relates predominantly to informal concerns. A review of the themes raised in informal concerns between October and December has been undertaken and this has identified two sub-subjects which have seen an increase during this period. These are:

**Communication with patient**

Communication with patient received 50 informal concerns during December

2015, compared with a 12 month average of 28 per month. Of these 50 informal concerns, 18 (36%) related to Head & Neck (Neurosciences - 8, Ophthalmology - 7, Oral and Dental - 3), more than any other care group.

Head & Neck regularly receives more informal concerns relating to this subject than other care group, but during December 2015, the 18 received is considerably higher than the 12 month average of 7.

At the end of 2015, Ophthalmology implemented the Trust’s *Access Policy – Managing the 18 Weeks Referral to Treatment Waiting Times*, which resulted in concerns from patients who were unhappy at having to phone the Trust within a 7 day window to book an agreed appointment time. It is anticipated that over time the process will become embedded and will not cause concern.

During this period, there have been issues in relation to waiting for appointments within Neurosciences, and concerns have been raised with regard to the communication of these delays. The directorate are in the process of identifying methods of improving how these delays are communicated.

**Cancellation of appointment**

Cancellation of appointment received 11 informal concerns during November 2015, compared with a 12 month average of 6. Upon reviewing these 11 informal concerns, they do not relate to any specific care group, nor does there appear to be any underlying issue that may have caused this increase.

It should be noted that over the past 6 months there has been significant change in the staff within the Patient Services Team, who code informal concerns, and as coding is subjective, this may have had an impact on the consistency. This may have also had an impact on the number of concerns being managed informally.

There is now a full complement of staff within the team, and therefore this will improve consistency going forward. In addition, standard operating procedures were agreed and implemented during March 2016 so that existing and new staff all work in the same way.

An audit of complaints and concerns coded to ‘communication with patient’ will be undertaken to determine the appropriateness of how the coding is being applied.

# Complaints – Formal complaints received by patient activity

## Proportion of patients who have made a formal complaint

### Number of patients treated for each complaint received

|   | Last 12 months | Current Qtr<br>Jan to Mar 16 |
|---|----------------|------------------------------|
| <b>Combined Community &amp; Acute Care</b>                              | <b>1305:1</b>  | <b>1141:1</b>                |
| <b>Emergency Care</b>   | <b>498:1</b>   | <b>423:1</b>                 |
| <b>- Accident &amp; Emergency*</b>                                      | <b>986:1</b>   | <b>746:1</b>                 |
| <b>Head &amp; Neck Services</b>   | <b>1386:1</b>  | <b>1398:1</b>                |
| <b>Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology</b> | <b>1200:1</b>  | <b>1010:1</b>                |
| <b>Musculoskeletal**</b>  | <b>545:1</b>   | <b>504:1</b>                 |
| <b>Operating Services, Critical Care &amp; Anaesthesia</b>              | <b>524:1</b>   | <b>394:1</b>                 |
| <b>South Yorkshire Regional Services</b>                                | <b>835:1</b>   | <b>863:1</b>                 |
| <b>Specialised Cancer, Medicine &amp; Rehabilitation</b>                | <b>3075:1</b>  | <b>2687:1</b>                |
| <b>Surgical Services</b>  | <b>981:1</b>   | <b>714:1</b>                 |
| <b>Trust total</b>  | <b>1058:1</b>  | <b>917:1</b>                 |

### % of patients who have made a complaint

|  | Last 12 months | Current Qtr<br>Jan to Mar 16 |
|--|----------------|------------------------------|
|  | <b>0.08%</b>   | <b>0.09%</b>                 |
|  | <b>0.20%</b>   | <b>0.24%</b>                 |
|  | <b>0.10%</b>   | <b>0.13%</b>                 |
|  | <b>0.07%</b>   | <b>0.07%</b>                 |
|  | <b>0.08%</b>   | <b>0.10%</b>                 |
|  | <b>0.18%</b>   | <b>0.20%</b>                 |
|  | <b>0.19%</b>   | <b>0.25%</b>                 |
|  | <b>0.12%</b>   | <b>0.12%</b>                 |
|  | <b>0.03%</b>   | <b>0.04%</b>                 |
|  | <b>0.10%</b>   | <b>0.14%</b>                 |
|  | <b>0.09%</b>   | <b>0.11%</b>                 |

\* Accident & Emergency complaints are coded under their own category so have been separated in the table above, however, Accident & Emergency complaints are also included in the Emergency Care data.

\*\* Musculoskeletal went live on the 1<sup>st</sup> April 2015, therefore the figures above are based on 6 months of data

The table above shows the number of patients treated for each formal complaint received, as well as the percentage of patients that have made a formal complaint, for each Care Group (as well as A&E, which is coded separately). The Care Groups above are listed alphabetically.

The data above show that over the past 12 months, the Trust treated 1058 patients for every formal complaint received, which equates to 0.09% of patients treated making a formal complaint. Compared to the past 12 months, the number of patients making a formal complaint has increased for the current quarter (January to March 2016) with 917 patients being treated for every

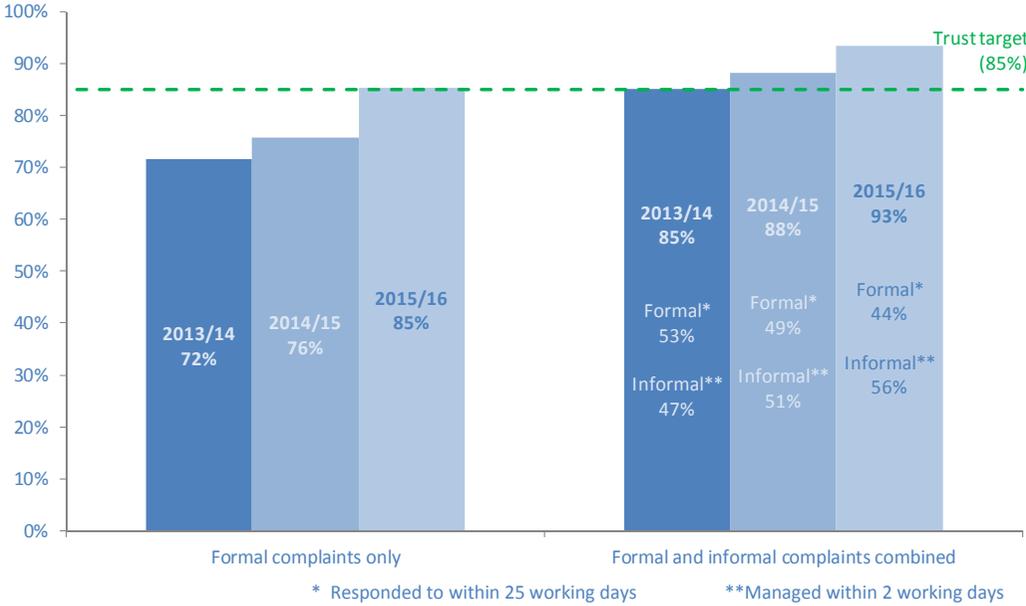
formal complaint received, however, this equates to 0.11% of patients treated making a formal complaint, the same as last quarter.

With regard to individual Care Groups, Musculoskeletal has seen the biggest increase in the proportion of formal complaints received with 0.20% of patients making a complaint between January and March 2016, compared with 0.14% between October and December 2015.

# Complaints – Response times

The Trust works to a locally set target of responding to at least 85% of formal complaints within 25 working days (or with an extension agreed with the complainant). In addition, all informal concerns are managed within 2 working days.

**Percentage of formal and informal complaints closed within 25 working days**

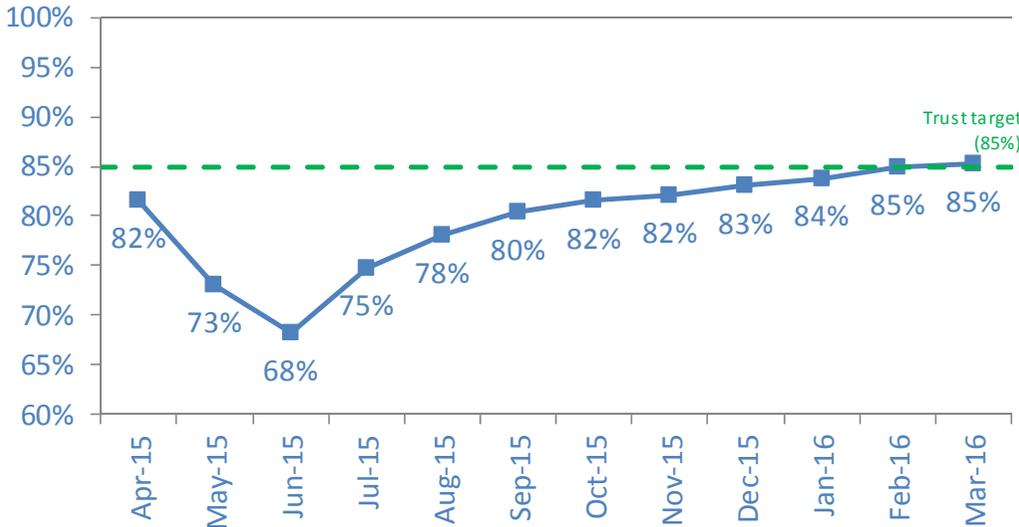


The columns on the left of the graph above show that the Trust has achieved the 85% target during 2015/16, doing so for the first time since 2012/13.

As highlighted in previous reports, a high proportion of concerns are managed informally, which means that those less complex complaints that would have been dealt with quickly in the formal process are managed informally. The columns on the right of the graph above show the Trust response rate when both formal complaints and informal concerns are combined. This illustrates that a high proportion of the concerns that are made to the Trust, formally and informally, receive a timely resolution.

During 2015/16, a number of measures were introduced to improve the response times of formal complaints, aiming to achieve the 85% target for the full financial year. Measures included daily monitoring of all complaints due to be closed, weekly reporting to the Deputy Chief Nurse, Nurse Directors, Deputy Nurse Directors and Complaint Co-ordinators on the current complaint caseload, and introducing an escalation process when a complaint is identified as potentially becoming overdue. This resulted in a significant improvement in monthly complaint response times.

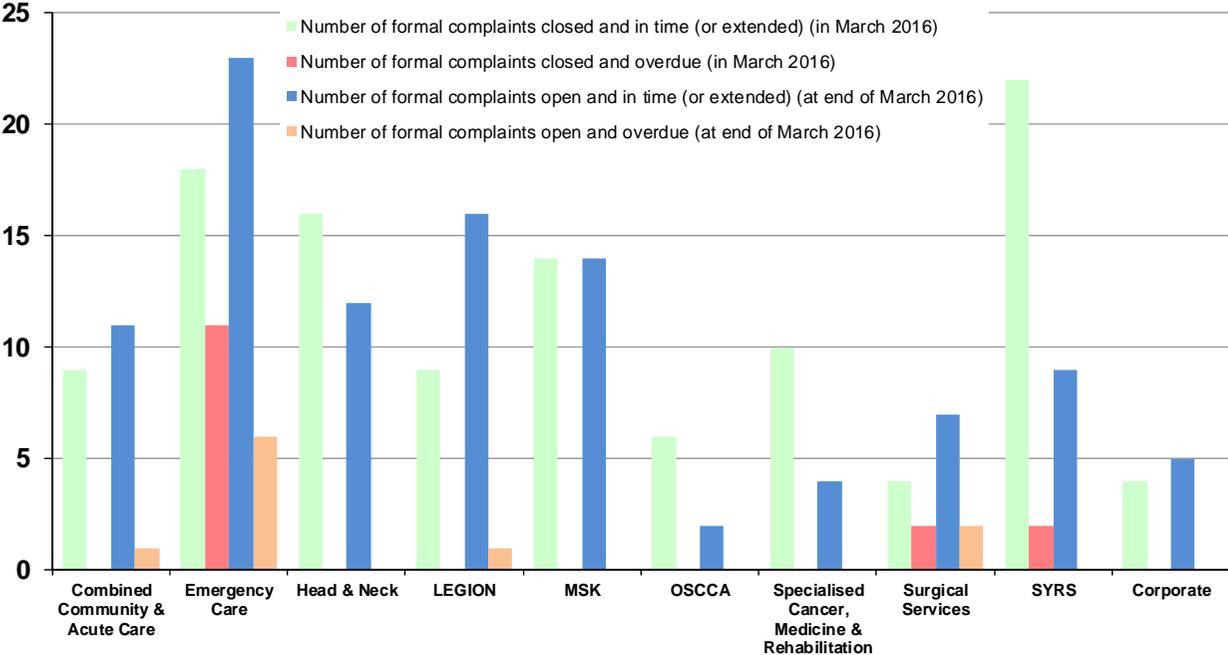
**2015/16 cumulative percentage of formal complaints closed within 25 working days (or with an agreed extension)**



The graph above illustrates how the 2015/16 performance against responding to at least 85% of formal complaints within 25 working days (or with an extension agreed with the complainant) has improved since the measures listed above were introduced.

# Complaints – Number of formal complaints closed

Formal complaints closed against the number of overdue complaints (end of quarter position)



The graph above shows the number of complaints that have been responded to within 25 working days or with an agreed extension (in time) and those that have not achieved the Trust 25 working day target (overdue).

The number of open but overdue complaints is a helpful predictor of complaint response time performance in the upcoming months and is useful as an early warning of potential problems which are developing. The data above are based on figures at the end of March 2016, as the number of overdue complaints changes daily as does the number of complaints closed.

Over the past quarter, 365 formal complaints have been closed, an increase from 357 formal complaints closed between October and December 2015. 9% (10) of all open complaints remain overdue, an increase from 3% (4) of all

open complaints being overdue at the end of December 2015. Emergency Care has the highest number of overdue complaints with 6, accounting for 21% of the groups overall open complaints caseload.

Daily monitoring of the complaints caseload and the status of overdue complaints will continue to be undertaken to ensure the number of overdue complaints is managed effectively so that early interventions can be made.

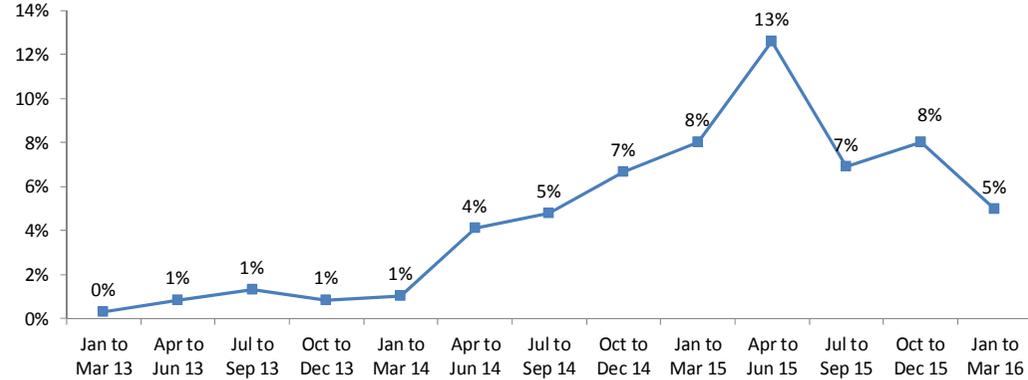
# Complaints – Re-opened complaints

The proportion of complaints which are re-opened is a useful indicator of how satisfied complainants are with the response they received from the Trust to the concerns that they raised.

Since July 2015, the Trust has significantly improved its response times, and whilst response times are one quality indicator in complaints management, another important aspect is the quality of the response.

The graph below shows the percentage of complaints closed each month that were subsequently re-opened, and highlights a steady increase in the percentage of re-opened complaints up to April to June 2015, and how this has steadily reduced over the past 3 quarters. However, it should be noted that the January to March 2016 figure is likely to increase as complaints closed in this quarter may be reopened in subsequent months.

Percentage of complaints closed that were subsequently re-opened (to date)



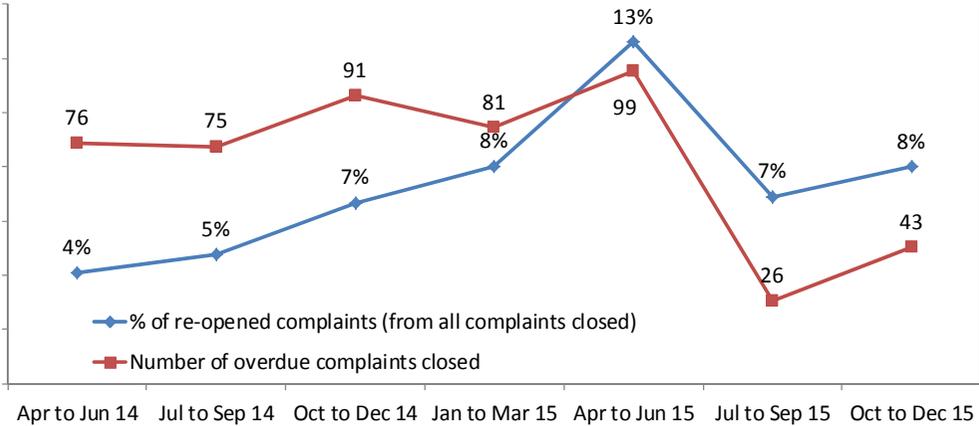
### Audit of re-opened complaints

An audit of re-opened complaints received between July and December 2015 has been undertaken and was presented to the Patient Experience Committee in February 2016.

The audit identified that, between April 2014 and June 2015, the number of re-opened complaints was gradually increasing, and peaked during June 2015

with 13% of complaints closed subsequently being re-opened. The data highlighted a link between the higher number of ‘overdue’ complaints being closed and an increase in complaints that are subsequently re-opened, suggesting that if a complainant experiences a delay in receiving a response to their complaint, then they may be less likely to be satisfied with the response from the Trust and therefore more likely to re-open their complaint.

% of re-opened complaints compared to the number of overdue complaints closed



Of all complaints closed between July 2015 and December 2015, 47% were ‘upheld’ and 53% were ‘not upheld’. Complaints closed in this period which were subsequently re-opened showed a higher proportion of ‘not upheld’ (71%).

Between July 2015 to December 2015, 41 complaints were re-opened, of which 38 have subsequently been closed (at the time of the audit). Of the 38 complaints which have been closed, 25% had been ‘upheld’ and 75% ‘not upheld’.

As a high proportion of re-opened complaints were ‘not upheld’, and the subsequent re-opened complaint often had the same outcome, this suggests that complaints are re-opened because the complainant was unsatisfied with

## Complaints – Re-opened complaints

the outcome of the complaint investigation, rather than because of the quality of the response.

A review of the reasons for re-opening a complaint showed that 56% were re-opened because the complainant was not happy with the outcome of the complaint investigation, 15% as a result of factual inaccuracies in the final response letter and 15% as further clarification was required on the information provided in the final response letter.

As a result of this audit, the Patient Experience Committee agreed the following actions:

- Review written complaint responses to formalise how the Trust acknowledges where mistakes have been made on 'upheld complaints', with particular emphasis on clearly acknowledging at the beginning of the letter that mistakes or poor quality service were found as a result of the investigation.
- Identify appropriate wording for 'not upheld' complaints to ensure the complainant feels listened to, acknowledged, and that their feedback has been valued.
- Pilot a project to increase the number of face to face meetings, where appropriate, instead of letters of response. Analyse whether this reduces the number of re-opened complaints.

# Complaints - Subjects raised in formal complaints and informal concerns

## Top 10 subjects raised in formal complaints and informal concerns over the past quarter compared to the last 12 months

### Current quarter (January 2016 to March 2016)

| #  | Subject                              | Qty | % of all subjects raised |
|----|--------------------------------------|-----|--------------------------|
| 1  | Communication with patient           | 102 | 13%                      |
| 2  | Appropriateness of medical treatment | 49  | 6%                       |
| 3  | Attitude                             | 40  | 5%                       |
| 4  | General nursing care                 | 38  | 5%                       |
| 5  | Communication with relative / carer  | 30  | 4%                       |
| 6  | Delay in treatment                   | 24  | 3%                       |
| 7  | Cancellation of appointment          | 21  | 3%                       |
| 8  | Unhappy with outcome of surgery      | 19  | 2%                       |
| 9  | Choice of medical treatment          | 18  | 2%                       |
| 10 | Access to information                | 17  | 2%                       |

### Last 12 months (April 2015 to March 2016)

| #  | Subject                                | Qty | % of all subjects raised |
|----|--|-----|--------------------------|
| 1  | Communication with patient             | 424 | 14%                      |
| 2  | General nursing care                   | 166 | 6%                       |
| 3  | Attitude                               | 143 | 5%                       |
| 4  | Appropriateness of medical treatment   | 139 | 5%                       |
| 5  | Communication with relative / carer    | 119 | 4%                       |
| 6  | Access to information                  | 105 | 4%                       |
| 7  | Cancellation of appointment            | 100 | 3%                       |
| 8  | Delay in treatment                     | 72  | 2%                       |
| 9  | Waiting time for follow-up appointment | 62  | 2%                       |
| 10 | Unhappy with outcome of surgery        | 61  | 2%                       |

Of the 102 subjects coded against 'communication with patient' between January and March 2016, 77 (75%) have been raised through informal concerns. This reflects the nature of informal concerns where the Patient Services Team can support patients and relatives in communicating with the relevant member of staff to resolve any concerns before they escalate into a formal complaint.

There are ongoing programmes of work across the Trust to improve communication with patients including the 'Improving Patient Experience' customer service workshops, and the Listening into Action programme which has supported a number of projects to improve communication.

# Complaints - Subjects raised in formal complaints

## Top 10 subjects raised in formal complaints by Care Group

|  | Appropriateness of medical treatment | General nursing care | Communication with patient | Unhappy with outcome of surgery | Attitude  | Choice of medical treatment | Delay in diagnosis | Missed diagnosis | Competence of medical staff | Delay in treatment |
|--|--------------------------------------|----------------------|----------------------------|---------------------------------|-----------|-----------------------------|--------------------|------------------|-----------------------------|--------------------|
| Combined Community & Acute Care                                  | 2                                    | 3                    | 1                          | 0                               | 1         | 2                           | 1                  | 2                | 1                           | 0                  |
| Emergency Care   | 7                                    | 8                    | 1                          | 0                               | 5         | 0                           | 1                  | 8                | 2                           | 3                  |
| Head & Neck Services   | 5                                    | 1                    | 7                          | 10                              | 5         | 3                           | 1                  | 0                | 3                           | 1                  |
| Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology | 5                                    | 2                    | 1                          | 2                               | 1         | 1                           | 3                  | 1                | 0                           | 2                  |
| Musculoskeletal  | 8                                    | 6                    | 2                          | 3                               | 1         | 4                           | 2                  | 0                | 1                           | 2                  |
| Operating Services, Critical Care & Anaesthesia                  | 1                                    | 1                    | 1                          | 1                               | 0         | 0                           | 0                  | 0                | 0                           | 0                  |
| South Yorkshire Regional Services                                | 6                                    | 3                    | 3                          | 1                               | 0         | 1                           | 1                  | 0                | 1                           | 0                  |
| Specialised Cancer, Medicine & Rehabilitation                    | 3                                    | 0                    | 2                          | 0                               | 1         | 2                           | 2                  | 0                | 2                           | 2                  |
| Surgical Services  | 7                                    | 5                    | 7                          | 2                               | 4         | 5                           | 1                  | 1                | 1                           | 0                  |
| Trust Wide Departments   | 0                                    | 0                    | 0                          | 0                               | 0         | 0                           | 0                  | 0                | 0                           | 0                  |
| <b>TOTAL</b>   | <b>44</b>                            | <b>29</b>            | <b>25</b>                  | <b>19</b>                       | <b>18</b> | <b>18</b>                   | <b>12</b>          | <b>12</b>        | <b>11</b>                   | <b>10</b>          |

The table above shows the top 10 subjects raised in formal complaints over the past quarter by individual Care Group. The cells which have been highlighted indicate the subject that has been raised most frequently for each Care Group.

The two most frequently raised subjects in formal complaints between January and March 2016 are 'appropriateness of medical treatment' (44) and 'general nursing care' (29).

'Appropriateness of medical treatment' is the most frequently raised subject for 6 Care Groups. 'Unhappy with outcome of surgery' has been raised more than any other subject for a single Care Group, being raised 10 times in Head & Neck.

Of the 10 complaints coded to 'unhappy with outcome of surgery' within Head & Neck, 8 were considered to be unfounded where patients had either an unrealistic expectation of the surgery or had suffered a recognised side effect/continued deterioration of their condition.

The 2 remaining complaints were as a result of a mistake or incident, and were 'well-founded'.

# Complaints – Parliamentary and Health Service Ombudsman (PHSO) cases

If a complainant is unhappy with the response received from the Trust, they have the right to contact the Parliamentary and Health Service Ombudsman (PHSO) to request an investigation into their complaint.

The PHSO is the final line in the NHS complaint process and offers an independent view on whether the NHS has reasonably responded to a complaint. The PHSO has increased the number of investigations it undertakes and consequently the Trust has seen an increase in the number of complaints investigated by the PHSO.

## The number of PHSO cases, decisions and outcome by quarter

|   | 2012/13 | Apr to Jun 13 | Jul to Sep 13 | Oct to Dec 13 | Jan to Mar 14 | 2013/14 | Apr to Jun 14 | Jul to Sep 14 | Oct to Dec 14 | Jan to Mar 15 | 2014/15 | Apr to Jun 15 | Jul to Sep 15 | Oct to Dec 15 | Jan to Mar 16 | 2015/16 |
|---|---------|---------------|---------------|---------------|---------------|---------|---------------|---------------|---------------|---------------|---------|---------------|---------------|---------------|---------------|---------|
| Number of new PHSO cases                    | 20      | 3             | 3             | 1             | 7             | 14      | 3             | 7             | 11            | 8             | 29      | 6             | 3             | 7             | 4             | 20      |
| Number of PHSO decisions                    | 15      | 3             | 0             | 1             | 1             | 5       | 4             | 10            | 3             | 6             | 23      | 9             | 8             | 7             | 4             | 28      |
| Number of PHSO cases fully or partly upheld | 1       | 0             | 0             | 0             | 1             | 1       | 2             | 1             | 0             | 0             | 3       | 3             | 1             | 1             | 1             | 6       |

### New PHSO cases this quarter

This quarter, 4 new information requests have been received, these relate to the following directorates:

- **Labs, Engineering, Gynaecology, Imaging, Obstetrics and Neonatology**  
- Gynaecology (1)
- **South Yorkshire Regional Services**  
- Cardiothoracic Services (1)
- **Surgical Services**  
- General Surgery (1)  
- Plastic Surgery (1)

### Fully or partly upheld decisions this quarter

There were 4 new decisions received from the PHSO during this quarter, of which 3 were not upheld, and one was partly upheld:

- **Gastroenterology (PARTIALLY UPHELD)**  
The complainant raised a number of concerns regarding the care and treatment that the Trust provided to her late mother, notably around pressure sores, the level of treatment provided, medication and the appropriateness of care from nursing staff.  
  
The Ombudsman investigation found that the medical care provided by Trust staff was in line with established good practice and relevant standards. However, some of the nursing care departed from the Trust's own standards and national guidance which was likely to have affected the frequency with which the patient was turned and repositioned. As this was a high risk patient, there is no way of determining if this alone resulted in the development of pressure sores. Therefore, the Ombudsman partially upheld the complaint and requested that the Trust write to the complainant to offer an apology.

# Complaints – Parliamentary and Health Service Ombudsman (PHSO) benchmarking

The table below presents the percentage of upheld complaints for members of the Shelford Group for the first 9 months of 2015/16, compared with the percentage upheld during 2014/15.

| Trust                                   | 2014/15    | 2015/16 (April 2015 to December 2015)    |                           |             |            |
|---|------------|--|---------------------------|-------------|------------|
|   | % Upheld   | Investigations fully of partially upheld | Investigations not upheld | Total       | % Upheld   |
| Guy's And St Thomas'                    | 60%        | 0  | 8                         | 8           | 0%         |
| <b>Sheffield Teaching Hospitals</b>     | <b>13%</b> | <b>5</b>                                 | <b>19</b>                 | <b>24</b>   | <b>21%</b> |
| Cambridge University Hospitals          | 50%        | 3  | 8                         | 11          | 27%        |
| Oxford University Hospitals             | 45%        | 3  | 6                         | 9           | 33%        |
| The Newcastle Upon Tyne Hospitals       | 41%        | 8  | 11                        | 19          | 42%        |
| University College London Hospitals     | 21%        | 3  | 4                         | 7           | 43%        |
| Imperial College Healthcare             | 64%        | 6  | 7                         | 13          | 46%        |
| <b>PHSO England Average</b>             | <b>44%</b> | <b>613</b>                               | <b>616</b>                | <b>1229</b> | <b>50%</b> |
| King's College Hospital                 | 65%        | 6  | 6                         | 12          | 50%        |
| Central Manchester University Hospitals | 38%        | 13                                       | 11                        | 24          | 54%        |
| University Hospitals Birmingham         | 53%        | 12                                       | 6                         | 18          | 67%        |

This shows that the percentage of complaints upheld for this Trust has increased from 13% during 2014/15 to 21% for the first 3 quarters of this year. Although this is an increase, this Trust has still had considerably fewer complaints upheld compared to the England average. Given this increase, we will continue to monitor our performance in relation to the number of upheld complaints.

## PHSO Report: Investigation case summaries

In March 2016, the PHSO published a report highlighting a selection of summaries of investigations which they have undertaken. The report contains 40 anonymised case summaries of investigations completed between April and June 2015 to provide examples of the complaints they handle and the outcome of investigations. The case summaries also show the profound impact which failures in public services can have on the lives of individuals and families.

Most of the summaries published in the report are cases which have been upheld or partly upheld. These are the cases which provide clear and valuable lessons for public services by showing what needs changing so that similar mistakes can be avoided in future. They include complaints about failures to spot serious illnesses and mistakes by government departments that caused financial hardship.

It is positive to note that of the 40 case summaries featured, none relate to this Trust. These case studies have been distributed across the Trust's complaints team in order for any relevant learning to be shared.

# Complaints - Actions taken as a result of a formal complaint

Agreeing and undertaking actions as a result of formal complaint investigations, where mistakes have been made, or where services have not been delivered to the standard we would expect, is the most important factor in learning from complaints.

Two examples of actions agreed this quarter as a result of formal complaints are presented below:

| Directorate                     | Background  | Actions agreed  |
|---------------------------------|---|---|
| <b>Musculoskeletal Services</b> | <p>A complainant raised concerns that his wife’s condition had deteriorated as a result of cancelled orthopaedic appointments during 2015 and the time she had waited to be seen by the consultant. He was also unhappy that on two occasions, when he contacted the Orthopaedic Outpatient Department by telephone, he was left on hold for approximately 30 minutes. The patient had undergone spinal surgery in 2010 and following a recent fracture, required further surgery.</p> <p>The complainant was also unhappy that delays had occurred during an appointment in January 2016 and that at this appointment the patient was seen by the registrar before being seen by the consultant.</p> <p>Sincere apologies were offered with regard to the cancelled appointments in 2015, due to more urgent cases, and reassurances were given that the time lapse has not affected the patient clinically. With regard to the delays on the telephone, the recent implementation of the Lorenzo patient record system was explained and that the department was experiencing some temporary delays as a result. Explanations were also given with regard to the current clinic arrangements and why patients are initially seen by a registrar or a physiotherapist.</p> <p>The investigation into the complaint identified that the automated message patients hear when they telephone the Orthopaedic Outpatient Department was not helpful. The message explained that the department was experiencing delays due to ‘a new system’ and advised that the caller could call back ‘later in the week’.</p> | <p>The Musculoskeletal group responded immediately to the concerns raised and agreed a formal action plan, this included the following:</p> <ul style="list-style-type: none"> <li>• The rota for outpatient department duties has been restructured to facilitate 2 members of staff being wholly dedicated to answering telephone calls</li> <li>• Training is to be provided to secretarial staff and ward clerks so that they can book appointments, rather than patients having to call the outpatient telephone line</li> <li>• Immediately removal of the automated message</li> </ul> |

# Complaints - Actions taken as a result of a formal complaint

| Directorate                    | Background  | Actions agreed  |
|--------------------------------|---|---|
| <b>Cardiothoracic Services</b> | <p>A complainant raised concerns that their operation had to be postponed as a specific piece of equipment required for the procedure had not been returned from the external contractor responsible for sterilising equipment.</p> <p>The complainant explained that they had undertaken all of the necessary pre-operative preparation such as being nil by mouth for the required time, only to be informed after a period of waiting that the operation would not be undertaken.</p> <p>The investigation identified that the operation was cancelled because of an error by the Trust's provider of our off-site decontamination service which found that the theatre tray needed for the operation had been used the previous day and should have been fast-tracked that night and delivered back to the Northern General Hospital (NGH) at 6am the next day. However, an item in the tray needed to be re-washed and, as a result, the turnaround time on the computer was erroneously changed to 1pm.</p> <p>Once the error was discovered, the contractor was contacted and they agreed to prioritise the tray's return to avoid the operation being cancelled. At the required time, the tray had still not arrived at NGH as the contractor's driver had not gone straight to the NGH as expected. When the driver did arrive at NGH, it was discovered that the tray was missing as it had been labelled for the Royal Hallamshire Hospital (RHH) by mistake. The tray was then located at RHH and the contractor's driver diverted to pick it up but, by this time, there was not enough time to complete the operation.</p> <p>Sincere apologies have been offered to the complainant by both the Trust and the contractor.</p> | <p>A root cause analysis was undertaken as part of the investigation so that we can prevent similar errors happening again. This recommended that:</p> <ul style="list-style-type: none"> <li>• A new labelling system be implemented to ensure theatre sets are loaded by contractor staff onto the correct trolley at dispatch</li> <li>• In the event that sets are delivered to the wrong site, this must be reported directly and immediately to the contractor site manager</li> <li>• The contractor's IT Department amend the authorisation process for changing the turnaround time on their system, to ensure times cannot be erroneously changed</li> <li>• A Trust escalation policy be developed for trays found on the wrong site which need to be transferred immediately</li> </ul> |

# Complaints – Complainant satisfaction survey

## Patients Association complaints survey

The Trust participated in the Patients Association's National Complainant Satisfaction Survey from April 2014 to November 2015. In the last quarterly report, we reported that between July and September 2015, 42% of complainants felt that the complaints process was 'very stressful', which was significantly worse than the 32% scored for all participating trusts. During October and November 2015, the number of respondents who selected 'very stressful' to this question had reduced to 36%.

The new complainant satisfaction survey, outlined below, suggests that questions relating to stress within the complaints process, such as ease of making a complaint, help available with making a complaint and being told how long it would take to answer the complaint, have scored well. Questions relating to stress within the complaints process will continue to be monitored and followed up during complainant satisfaction interviews.

## New complainant satisfaction survey

During 2015, the Trust reviewed the process for managing the complaints survey and making the best use of results. Following this review, the Trust has introduced a new survey which will enable us to monitor complainant views in a more timely manner with surveys being sent to complainants 2 weeks after their response, instead of the 10 week timescale prescribed by the Patients Association.

A further benefit of the new survey is that a more detailed analysis of results can be undertaken, including reporting results at directorate as well as Trust level.

Survey responses are anonymous unless the complainant chooses to provide their details. If complainants do leave their details, a process is in place to select up to 5 responses each month to follow up through interviewing the complainants to obtain more detail on their experience.

The new survey commenced on the 1st March 2016. Up to the end of March 2016, 15 responses have been received, providing initial results. The full breakdown of results is presented on the following page.

The questions where the Trust scored the highest were 'it was easy to make a complaint' and 'I was told what I could do if I was unhappy with my response', where 80% of responders either 'definitely agreed' or 'partially agreed'.

The question where the Trust scored the lowest was 'I am confident that improvements have been made as a result of my complaint', where only 20% of responders either 'definitely agreed' or 'partially agreed', and 27% answered that they were 'not sure'.

The next report will feature the first full quarter of results from the new survey and will introduce reporting at directorate level. Results will be compared against those presented on the following page to identify any changes in performance. In addition, the first group of follow up complainant interviews will also be featured.

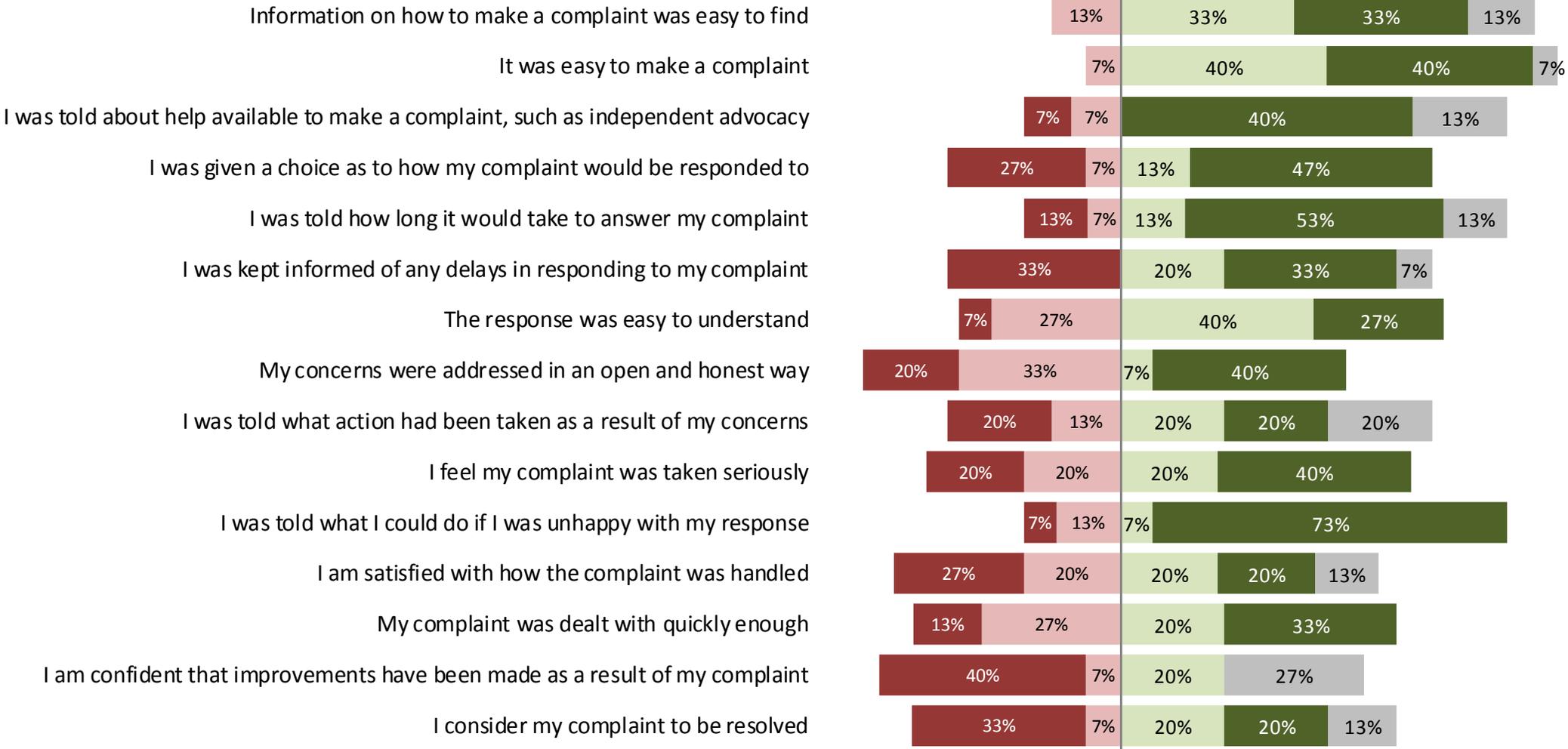
A number of complainants chose to leave comments in the complaints survey. A selection of these comments is presented below:

I hope that things will change for patients who end up in the same situation

We cannot turn the clock back, let us hope and pray lessons have been learnt from our dreadful and frustrating experience

# Complaints – Complainant satisfaction survey

## Complainant satisfaction survey results – March 2015



■ Totally disagree 
 ■ Partially disagree 
 ■ Partially agree 
 ■ Definitely agree 
 ■ Not sure

The Trust provides a number of methods for patients to provide unsolicited feedback. The Tell Us What You Think comment cards are available across the Trust and can be completed by patients whenever they wish, whether the feedback is positive or negative.

Patients can also submit feedback about their experience of the Trust anonymously via the Trust website ([www.sth.nhs.uk](http://www.sth.nhs.uk)) or via independent websites such as NHS Choices and Patient Opinion.

All feedback received is recorded and actioned by the Trust. Other sources of unsolicited feedback that may be received by other organisations' websites, such as Healthwatch, are also recorded and actioned, so the Trust can build a clear picture of what patients and relatives feel about their experience within the Trust.

Each piece of feedback received can cover a range of themes, and each theme is individually coded so that a thorough analysis can be undertaken.

The Trust also participates in a number of surveys that aim to give patients the opportunity to provide feedback on a range of aspects related to their care. These include:

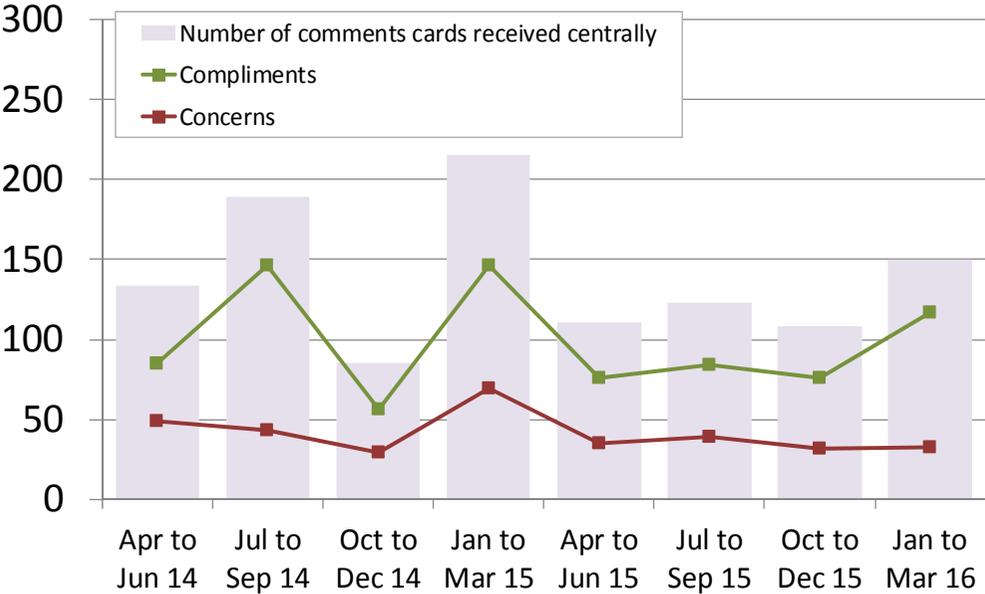
- The Friends and Family Test (FFT) which asks a simple, standardised question with response options on a 5-point scale, ranging from whether they are 'extremely likely' to 'extremely unlikely' to recommend our Trust to their family and friends. The FFT is carried out in inpatient, outpatient, A&E, maternity, and community services.

The Trust has also chosen to ask a follow-up question in order to understand why patients select a particular response.

- The Trust also participates in the CQC programme of national surveys. As and when results become available these will be featured in this report.

# Feedback - Comment cards

During the period January to March 2016, 150 comments cards were completed, of which 310 individual themes have been identified.



The chart above shows the comments cards received by quarter and the breakdown of these by compliments and concerns. Of all comment cards received this quarter 82% of the themes identified have been positive, compared to 73% last quarter.

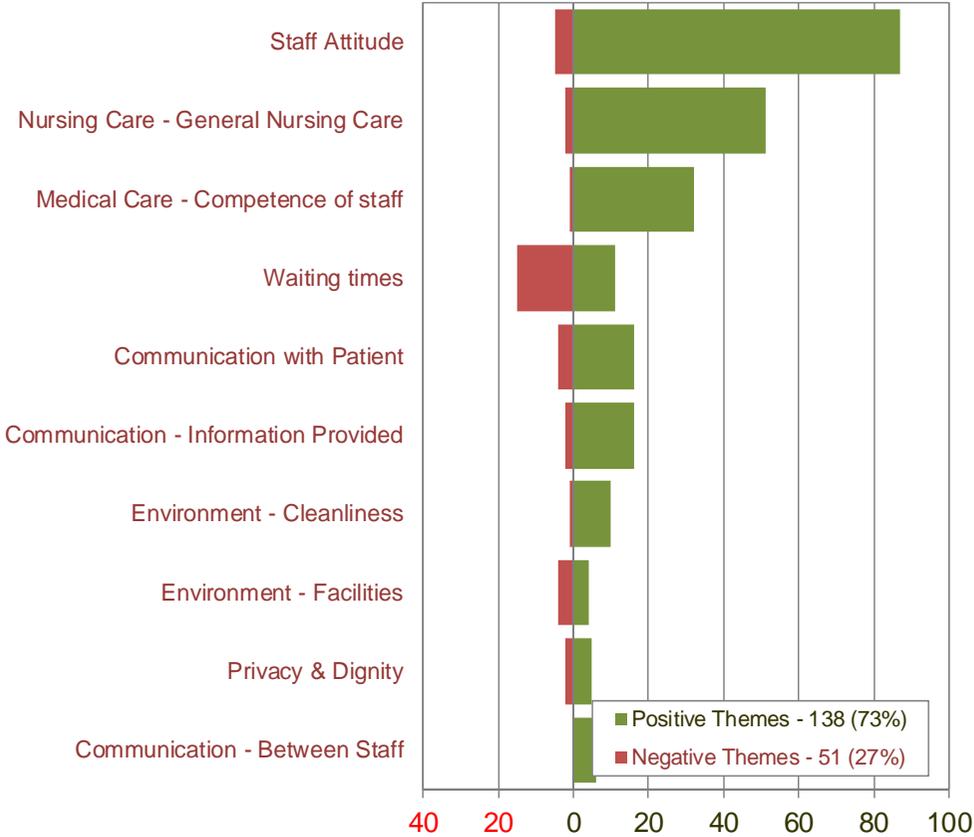
### % of positive comments from all comments received centrally

| Current Quarter (Jan to Mar 2016) |     | Last 12 months (Apr 15 to Mar 16) |     |
|-----------------------------------|-----|-----------------------------------|-----|
| %                                 | QTY | %                                 | QTY |
| 82%                               | 253 | 77%                               | 727 |

### % of negative comments from all comments received centrally

| Current Quarter (Jan to Mar 2016) |     | Last 12 months (Apr 15 to Mar 16) |     |
|-----------------------------------|-----|-----------------------------------|-----|
| %                                 | QTY | %                                 | QTY |
| 18%                               | 57  | 23%                               | 217 |

### Top 10 themes raised in comment cards between January and March 2016



Prompt, friendly, professional treatment

Pleasant staff very welcoming and explained what would happen whilst I was there

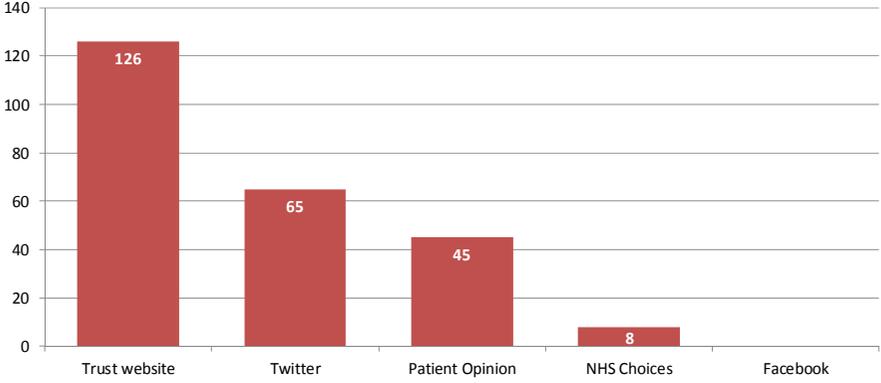
I was desperate for the toilet and no length of time was given when asked how much longer I would have to wait

I phoned up to change an appointment and was passed from person to person which is frustrating

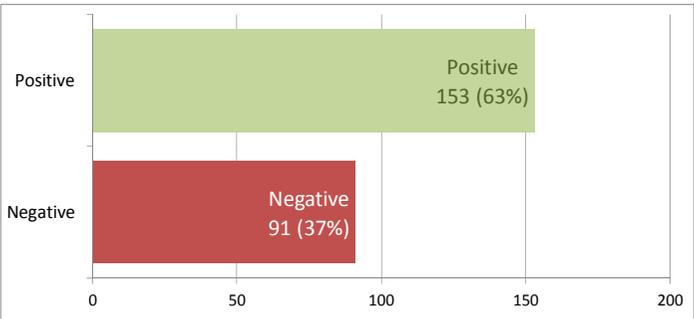
# Feedback – Website and social media feedback

As well as the formal feedback methods on offer, visitors to the Trust also comment about their experience using popular web and social media sites. We continue to work with our surveys provider to develop how we extract patient feedback from these sites and report it alongside the feedback we receive from other sources.

The table below shows that during the past quarter, 244 patient feedback comments have been left via popular social media and other websites about this Trust. It is expected that the number of comments received via Facebook will always be low due to the privacy settings that the site provides, as opposed to sites such as Twitter where the comments made are predominantly public, however, we are looking at the methods available to ensure we are capturing all comments made about this Trust. The breakdown of comments is as follows:



Overall the Trust has received more positive than negative feedback this quarter with 153 positive Comments and 91 Negative.



The table below shows a breakdown of the themes raised via web and social media sites relating to this Trust.

| Theme          | Positive | Negative | Positive and negative combined |
|----------------|----------|----------|--------------------------------|
| General Care   | 49% (98) | 26% (36) | 40% (134)                      |
| Staff attitude | 38% (76) | 15% (21) | 29% (97)                       |
| Communication  | 8% (15)  | 25% (34) | 14% (49)                       |
| Waiting times  | 4% (8)   | 19% (26) | 10% (34)                       |
| Environment    | 1% (1)   | 12% (17) | 5% (18)                        |
| Nutrition      | 1% (2)   | 3% (4)   | 2% (6)                         |

A selection of comments received from web and social media sites are presented below:

@SheffieldHosp one nurse went out of her way to give me some advice and I was put at ease by rest of staff thanks again x (Twitter)

The doctor fired questions and rushed through questions with little regard for my answers, concerns or needs (Patient Opinion)

The staff were first class, caring, and very efficient (Patient Opinion)

No one knew what they were doing, no one spoke to each other or me to ask what they should be doing (Trust website)

Further work is required to ensure we are extracting all the data received about this Trust from social media websites, and we are working with our surveys provider to develop this.

# Feedback – Letters of thanks

As well as the formal methods of leaving feedback such as comment cards, website feedback, and the Friends and Family Test, the Trust also receives a high volume of unsolicited positive feedback in the form of ‘letters of thanks’.

In addition to the ‘letters of thanks’ received centrally, many more are received directly by wards and departments throughout the Trust. These are shared with relevant staff but currently it is not possible to systematically record them all.

The table below shows the number of ‘letter of thanks’ received centrally over the past 12 months by quarter:

| April - Jun 2015 | Jul - Sep 2015 | Oct-Dec 2015 | Jan-Mar 2016 |
|------------------|----------------|--------------|--------------|
| 252              | 223            | 111          | 102          |

The following pages present a selection of thank you letters that have been received centrally and highlight how the care and attention from staff made the patient’s experience a positive one.

Each of the letters presented have been reproduced verbatim and consent has been given by all patients for us to publish their feedback.

**Robert Hadfield 3**  
My nan is currently being cared for on Hadfield 3 and the care has been nothing short of exceptional. Every single member of staff has been approachable and have cared for my nan with care and compassion. Nothing is ever too much trouble and it’s reassuring for all the family knowing nan has received the best care possible.

**Musculoskeletal Services**  
At the beginning of November last year I was admitted to your hospital suffering with a broken hip and was admitted to Vickers 4, where I stayed for 8 days. I was cared for by a wonderful staff – caring but firm – from whom I learned a great deal.  
  
May I take this opportunity to express my gratitude to everyone concerned.  
  
Following this episode, I came home, and was equally well looked after by various carers and nurses for several days, but unfortunately, I dislocated my hip and after the worst experience of my life I was re-admitted to Huntsman 4 where, once again, I was cared for beautifully, and was sent home. I am now being VERY careful, and hope, with the help of my physiotherapist, to make a complete recovery, and return to a normal life – driving my car and going to the gym where I do cycling.  
  
Perhaps you would be kind enough to pass on my thanks to all the staff concerned. Whatever would have happened to me without our wonderful National Health Service doesn’t bear thinking about.

**Breast Screening Unit**  
I visited the breast screening unit today and had a mammogram and an ultrasound. I am keen to feedback that my whole experience from start to finish was very positive from reception staff to the consultant and with all the clinical staff in between. All staff treated me with dignity and respect, made things as comfortable as possible and were friendly and helpful. It couldn’t have been a more positive experience of what was a difficult appointment in terms of possible content.  
  
I just wanted to pass on my thanks to your excellent staff.

### **Ward H2**

It is with sadness yet pleasure that I am writing to you to comment the staff of Ward H2 at the Royal Hallamshire Hospital for the treatment and care delivered to my late father.

At the time he was 92 years old and it would have been easy for your staff to just keep him comfortable and let him go, but they didn't. They successfully treated his complications and he was discharged to enjoy a few more months of life. Your staff were not to know, but those few months were very important to my father and he made full use of them, always grateful for the treatment he had received and the opportunity he had given.

In February this year he was once again admitted to Ward H2 and passed away a week later. During that week he was treated with dignity, care and respect and I want to thank the staff on Ward H2 for that. My father passed away peacefully and pain free.

During that final week he was attended 24 hours a day by at least one close family member and sometimes as many as 8, and we too were treated with care, compassion and respect by the ward staff. Thank you and well done.

### **Cardiology, Northern General Hospital**

I am writing to say a big thank you to everyone who looked after me during my recent stay in hospital. I was admitted by ambulance in the early hours and when I arrived there was a team waiting to take care of me. The ambulance people were really helpful and made me comfortable and calm and I will be eternally grateful to them for their work.

Everyone in the hospital who I came into contact with called me by my name and introduced themselves to me. I have been very fortunate not to have needed treatment in hospital on many occasions so the courtesy and hard work of everyone involved in my care was very reassuring.

I did leave a couple of boxes of chocolates but it simply didn't seem enough in view of the care and attention from people who bring round the meals, cleaners, porters, nurses and doctors. Thank you again to everyone organisers and practitioners alike – your system really worked for me and made me feel a whole lot better about being in hospital.

### **Emergency Eye Clinic**

I am writing to thank you for the exceptional treatment I received recently at the Royal Hallamshire Hospital. I went to the Emergency Eye Clinic on because I was concerned about a condition in the orbiting of my right eye. The condition was diagnosed as orbital cellulitis, and I was admitted right away to Head and Neck Ward I1 for further treatment. I was discharged on the following Sunday. I have since attended as an outpatient.

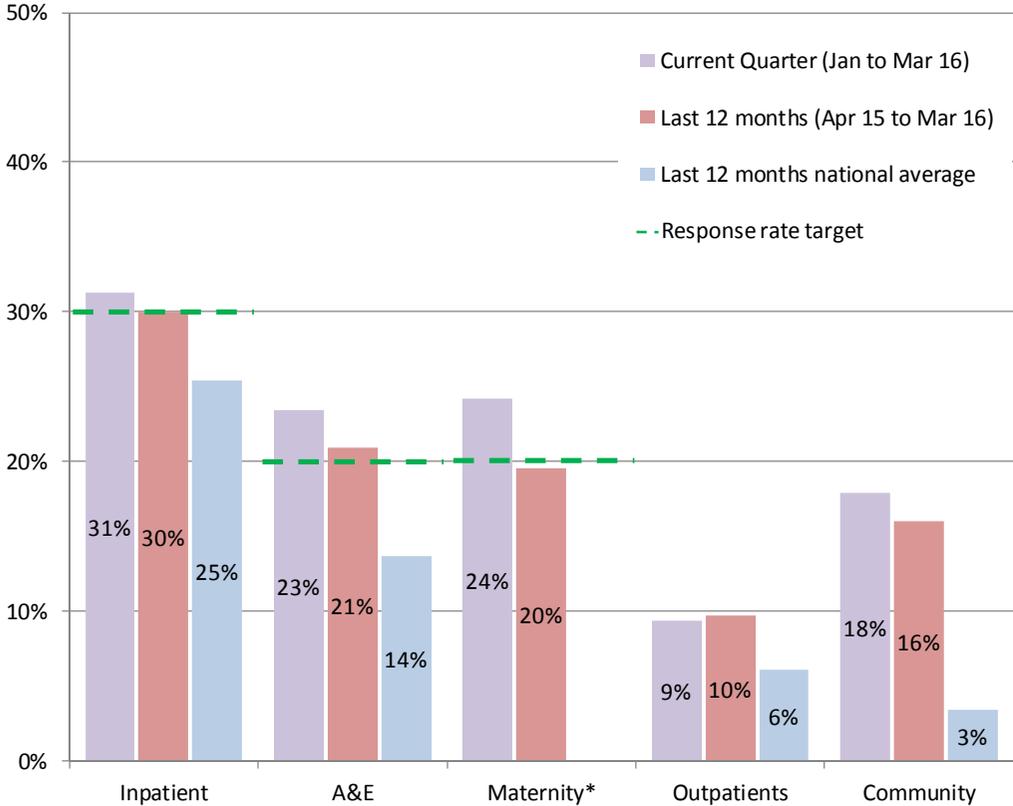
The treatment I have received throughout has been exceptional. All the staff I have met with have been courteous, attentive and kind, and have demonstrated the highest standard of skill and dedication.

I am very aware of the pressures which affect the NHS at present, and recognise the very positive commitment shown by the staff at the Hallamshire. I have already recommended the Eye Clinic to my friends and family!

# Feedback - Friends & Family Test

The Friends and Family Test (FFT) is carried out across the Trust in inpatient, A&E, maternity services, outpatients and community services.

### Response rates



\* Eligible patient numbers for maternity are not published nationally, therefore it is not possible to provide a national average response rate.

Between January and March 2016, 8840 inpatients, 3732 A&E patients, 1010 maternity services patients, 23811 outpatients and 4311 community patients from the Trust completed the FFT survey, giving a total of 41704 responses this quarter.

The chart above shows that the Trust performed better than the national average on all elements of the FFT during this quarter. To ensure there is an appropriate level of confidence in FFT scores, the Trust is working to

internally set minimum response rate targets to ensure an appropriate sample size for each area is achieved. For January to March 2016, inpatient areas achieved a response rate of 31%, achieving the 30% target, A&E areas (including A&E, Emergency Eye Centre and Minor Injuries Unit) achieved 23%, achieving the 20% target, and maternity services achieved 24%, achieving the 20% target.

Following a consistent decrease in response rates during October to December 2015 for the Accident and Emergency Department, we have reviewed the data. This highlighted a difference in the discharge figures being sent to our surveys provider, to those being reported to NHS England. The difference was found to be due to the transfer of data to the new Lorenzo patient record system which resulted in an additional departure code erroneously being submitted. This in turn led to incorrect discharge (eligibility) numbers which consequently affected the A&E response rate. The issue has now have been resolved and A&E response rates are now above the 20% target.

### Highest performing wards/departments by response rate

|                   | January to March 2016 |           |               | Last 12 months (Apr 15 to Mar 16) |
|-------------------|-----------------------|-----------|---------------|-----------------------------------|
|                   | Eligible Patients     | Responses | Response Rate |                                   |
| Osborn 4          | 19                    | 16        | 84%           | 91%                               |
| Robert Hadfield 4 | 302                   | 245       | 81%           | 51%                               |
| Burns Unit        | 33                    | 26        | 79%           | 72%                               |
| Osborn 1          | 13                    | 10        | 77%           | 67%                               |
| Ward F1           | 226                   | 172       | 76%           | 69%                               |

# Feedback - Friends & Family Test

## Lowest performing wards/departments by response rate

|                   | January to March 2016 |           |               | Last 12 months (Apr 15 to Mar 16) |
|-------------------|-----------------------|-----------|---------------|-----------------------------------|
|                   | Eligible Patients     | Responses | Response Rate |                                   |
| Ward P4           | 64                    | 1         | 2%            | 13%                               |
| Firth 2           | 429                   | 13        | 3%            | 16%                               |
| Robert Hadfield 1 | 137                   | 9         | 7%            | 38%                               |
| WPH Ward 2        | 481                   | 35        | 7%            | 11%                               |
| Firth 3           | 305                   | 29        | 10%           | 15%                               |

During this quarter maternity (97%) and outpatient (94%) scores are higher than the 12 month national average, however the score between January and March 2016 for inpatient is 0.5% lower than the 12 month national average while A&E is 5.6% lower and community is 9.1% lower.

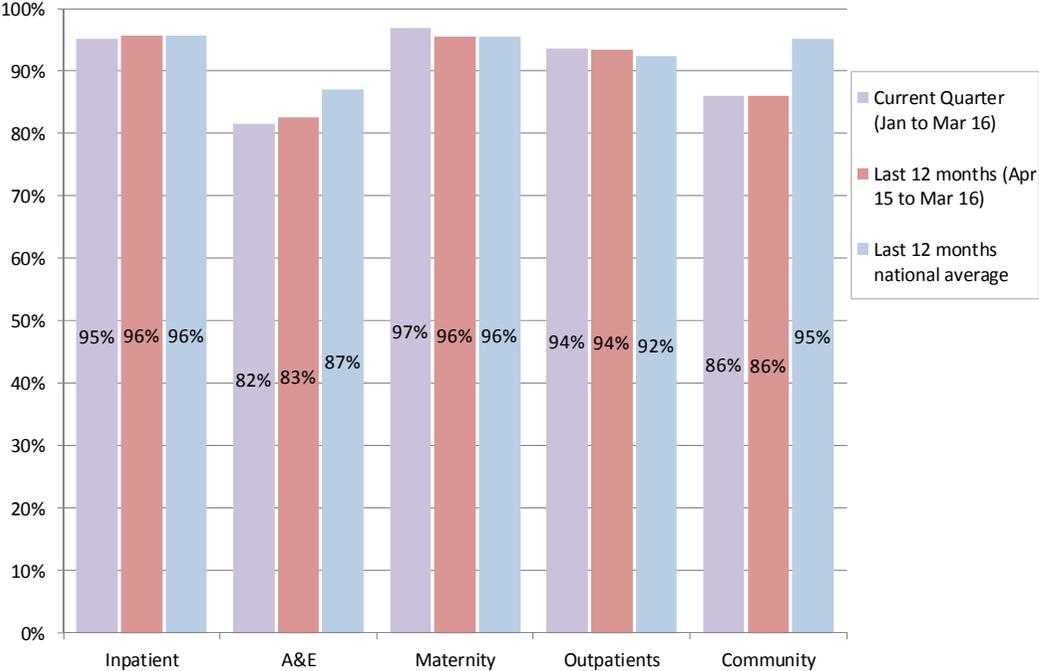
The overall negative score for Community Services continues to be higher than the national average. It is recognised that methods used to carry out the FFT can affect the score, with some methods consistently producing lower scores than others.

In order to test whether the method used to carry out the FFT is impacting on scores for community, or whether there is an issue with service quality, the individual services within community which regularly receive higher negative scores than the national average have been identified. These services will review how FFT is managed in their area, with some services being selected to undertake an analysis of their negative comments and identify areas for improvement. The other services will review the FFT method currently used and will test other methods to identify whether they improve the quality of data available and whether by doing this they improve scores.

An update of this work will be presented to the Patient Experience Committee in May 2016.

FFT scores have improved for A&E, achieving a positive score of 82% for January to March 2016, compared with 78% for the previous quarter.

## Scores



The overall percentage of patients who 'would recommend' our service to friends and family from all 5 elements of the FFT was 92.1% this quarter, an increase from 91.5% last quarter. The FFT continues to demonstrate that the vast majority of patients would recommend the Trust as a place to receive care and treatment.

# Feedback - Friends & Family Test

## Friends & Family Test Voice Messages

Between January and March 2016, 9539 patients responded to the FFT via Interactive Voice Messaging (IVM). Of these patients, 1002 left a comment via an electronic voice message.

91% of patients who left a voice message said they would be either 'likely' or 'extremely likely' to recommend the service where they were treated to family and friends, whilst only 3% stated that they were either 'unlikely' or 'extremely unlikely'.

A selection of these voice messages are embedded opposite, click on the quote to listen to the full recording:

...the staff, the environment, it's all been very good, I can't fault it...  
CCDH Outpatients

I have been very impressed with the treatment and information I have been given...  
Clinical Haematology Outpatients,  
RHH

I found the nurse that treated me very compassionate and understanding...  
Minor Injuries Unit, RHH

I think the staff at the Northern General Hospital are absolutely first class, I cannot fault them...  
Day Surgery Unit, NGH

My 34 year old disabled son was spoke to like a 3 year old...  
Accident & Emergency  
Department, NGH

... I think it was the most dreadful experience I've had  
Respiratory Medicine Outpatients,  
NGH

I asked for a blanket...the room they put me in had no heating...it was absolutely freezing...they brought me a blanket which was full of holes...  
Vascular Radiology, NGH

I watched everybody around me go in...then at quarter past 12 I was just told that they couldn't do me, they had ran out of time, operation was cancelled...  
WPH Day Case

# Feedback - Friends & Family Test benchmarking – Response Rates

The tables on the next two pages show the FFT performance for this Trust between January and March 2016. Scores and response rates are presented for inpatient, A&E, maternity, outpatients and community against other members of the Shelford Group who participate in each survey. Trusts are ranked in order of the highest response rate or score to the lowest, with this Trust and the England average being highlighted.

The table below shows that this Trust has achieved a higher FFT response rate than other participating members of the Shelford Trust for inpatients, and community, and achieved the 2<sup>nd</sup> highest response rate for A&E and outpatients. The Trust has achieved a higher response rate than the national average on all surveys.

## Response Rates\*

| Inpatient              |   |              | A&E                    |   |              | Outpatients            |   |             | Community              |   |             |
|------------------------|---|--------------|------------------------|---|--------------|------------------------|---|-------------|------------------------|---|-------------|
| 1                      | Sheffield Teaching Hospitals            | 31.3%        | 1                      | Oxford University Hospitals             | 24.5%        | 1                      | Oxford University Hospitals             | 12.7%       | 1                      | Sheffield Teaching Hospitals            | 17.9%       |
| 2                      | Imperial College Healthcare             | 29.8%        | 2                      | Sheffield Teaching Hospitals            | 23.4%        | 2                      | Sheffield Teaching Hospitals            | 9.3%        | 2                      | The Newcastle Upon Tyne Hospitals       | 6.0%        |
| 3                      | Guy's And St Thomas'                    | 29.2%        | 3                      | Cambridge University Hospitals          | 23.0%        | 3                      | Guy's And St Thomas'                    | 6.8%        | 3                      | Guy's And St Thomas'                    | 4.0%        |
| 4                      | University Hospitals Birmingham         | 27.6%        | 4                      | University College London Hospitals     | 19.7%        | <b>England Average</b> |   | <b>6.3%</b> | <b>England Average</b> |   | <b>3.5%</b> |
| 5                      | University College London Hospitals     | 26.2%        | 5                      | King's College Hospital                 | 16.5%        | 4                      | Imperial College Healthcare             | 4.5%        | 4                      | Central Manchester University Hospitals | 0.1%        |
| <b>England Average</b> |   | <b>24.4%</b> | 6                      | Guy's And St Thomas'                    | 14.9%        | 5                      | University Hospitals Birmingham         | 2.4%        |                        |   |             |
| 6                      | Oxford University Hospitals             | 16.8%        | 7                      | Imperial College Healthcare             | 13.8%        | 6                      | University College London Hospitals     | 2.1%        |                        |   |             |
| 7                      | Cambridge University Hospitals          | 15.8%        | 8                      | University Hospitals Birmingham         | 13.4%        | 7                      | Central Manchester University Hospitals | 1.7%        |                        |   |             |
| 8                      | The Newcastle Upon Tyne Hospitals       | 15.6%        | <b>England Average</b> |   | <b>12.7%</b> | 8                      | King's College Hospital                 | 1.0%        |                        |   |             |
| 9                      | King's College Hospital                 | 12.6%        | 9                      | Central Manchester University Hospitals | 8.5%         | 9                      | The Newcastle Upon Tyne Hospitals       | 0.6%        |                        |   |             |
| 10                     | Central Manchester University Hospitals | 11.9%        | 10                     | The Newcastle Upon Tyne Hospitals       | 1.8%         | 10                     | Cambridge University Hospitals          | 0.5%        |                        |   |             |

\* Eligible patient numbers for maternity services are not published nationally, therefore it is not possible to provide a national average response rate.

# Feedback - Friends & Family Test benchmarking - Scores

The table below shows that this Trust has achieved a higher FFT score than the national average for maternity and outpatients. However, the Trust has achieved lower scores than the national average for inpatients, A&E and community.

## Scores

| Inpatient              |   |              | A&E                    |   |              | Maternity              |   |              | Outpatients            |   |              | Community              |   |              |
|------------------------|---|--------------|------------------------|---|--------------|------------------------|---|--------------|------------------------|---|--------------|------------------------|---|--------------|
| 1                      | The Newcastle Upon Tyne Hospitals       | 97.9%        | 1                      | Imperial College Healthcare             | 95.4%        | 1                      | The Newcastle Upon Tyne Hospitals       | 97.9%        | 1                      | University Hospitals Birmingham         | 97.3%        | 1                      | Guy's And St Thomas'                    | 96.9%        |
| 2                      | Imperial College Healthcare             | 97.1%        | 2                      | Cambridge University Hospitals          | 93.3%        | 2                      | Sheffield Teaching Hospitals            | 96.9%        | 2                      | Imperial College Healthcare             | 95.2%        | 2                      | The Newcastle Upon Tyne Hospitals       | 96.9%        |
| 3                      | University College London Hospitals     | 96.9%        | 3                      | The Newcastle Upon Tyne Hospitals       | 92.7%        | 3                      | University College London Hospitals     | 95.7%        | 3                      | Sheffield Teaching Hospitals            | 93.6%        | <b>England Average</b> |   | <b>95.2%</b> |
| 4                      | University Hospitals Birmingham         | 96.8%        | 4                      | Central Manchester University Hospitals | 88.1%        | <b>England Average</b> |   | <b>95.6%</b> | 4                      | Oxford University Hospitals             | 93.3%        | 3                      | Central Manchester University Hospitals | 93.5%        |
| 5                      | Cambridge University Hospitals          | 95.8%        | 5                      | University College London Hospitals     | 87.1%        | 4                      | Cambridge University Hospitals          | 95.4%        | 5                      | Guy's And St Thomas'                    | 93.1%        | 4                      | Sheffield Teaching Hospitals            | 86.1%        |
| 6                      | Guy's And St Thomas'                    | 95.8%        | 6                      | University Hospitals Birmingham         | 85.2%        | 5                      | Oxford University Hospitals             | 94.5%        | 6                      | The Newcastle Upon Tyne Hospitals       | 93.1%        | <b>England Average</b> |   | <b>92.7%</b> |
| 7                      | Oxford University Hospitals             | 95.8%        | <b>England Average</b> |   | <b>84.9%</b> | 6                      | Central Manchester University Hospitals | 93.9%        | 7                      | University College London Hospitals     | 92.8%        | 8                      | King's College Hospital                 | 87.9%        |
| <b>England Average</b> |   | <b>95.7%</b> | 7                      | Guy's And St Thomas'                    | 84.0%        | 7                      | Imperial College Healthcare             | 93.3%        | <b>England Average</b> |   | <b>92.7%</b> | 9                      | Central Manchester University Hospitals | 86.7%        |
| 8                      | Sheffield Teaching Hospitals            | 95.2%        | 8                      | Oxford University Hospitals             | 82.8%        | 8                      | Guy's And St Thomas'                    | 92.8%        | 8                      | King's College Hospital                 | 87.9%        | 10                     | Cambridge University Hospitals          | 82.3%        |
| 9                      | King's College Hospital                 | 94.3%        | 9                      | Sheffield Teaching Hospitals            | 81.5%        | 9                      | King's College Hospital                 | 88.7%        | 9                      | Central Manchester University Hospitals | 86.7%        |                        |   |              |
| 10                     | Central Manchester University Hospitals | 93.1%        | 10                     | King's College Hospital                 | 81.2%        |                        |   |              | 10                     | Cambridge University Hospitals          | 82.3%        |                        |   |              |

# Feedback – Sheffield Critical Care Support Group

The following pages provide an overview from the Trust's Critical Care Outreach Sister on the establishment of the Sheffield Critical Care Support Group.

## **Background**

Patients recovering from Critical Illness are followed up by the Critical Care Outreach Team on the ward following their discharge from Intensive Treatment Unit (ITU) or High Dependency Unit (HDU). Often this group of patients struggle both physically and psychologically, recovering from what can be a very traumatic time in their lives.

The need for ongoing support after their discharge from hospital has long been recognised by Critical Care Outreach and a couple of years ago it was decided to follow the example set by other Critical Care Units and establish a Critical Care Support Group for patients and their relatives who have been in General Critical Care at both the Royal Hallamshire Hospital and the Northern General Hospital.

## **Process and Outcomes**

ICU Steps is a charitable organisation set up by former Critical Care patients from Milton Keynes, supported by Critical Care staff. It is now recognised nationally as a leading body in the establishment of Critical Care Support Groups.

One of the Trust's Critical Care Outreach sisters attended ICU Steps' inaugural Conference in November 2013, which included a lot of advice and guidance about setting up support groups and the opportunity to network with other Critical Care Units which have established or were in the process of setting up support groups. Advice such as an out of hospital venue, timing and frequency of meetings, contacting former patients etc. was very useful.

ICU Steps support groups, from various locations in England, were contacted via their website and also the National Outreach Forum. This gave the opportunity to ask further questions about practicalities. Unfortunately responses were limited, however we had good dialogue with the ICU Consultant in Brighton, who had established their group and we subsequently

attended that Group in July 2014. This provided useful insight regarding the group format, needs of attendees and general management of the Support Group.

We decided to go ahead with the project and identified The Circle in Sheffield as the venue and to hold the meetings on the first Wednesday of the month. Monthly meetings were more frequent than recommended, but we felt this would be easy to remember, rather than specific dates. The Circle is in a central location with good transport links, disabled access and refreshment facilities included. Funding was secured from Sheffield Hospitals Charity for the room rental, negotiating favourable rates.

## **Publicity**

Support Group meetings were booked monthly for six months from 3 September 2014 as a drop in session between 6pm and 8pm. A specific email address was established and posters, fliers and cards were printed. Selected former patients from within the previous two years were contacted by letter inviting them to the group. Subsequently, most patients who have been followed up by the Outreach Team are invited to attend the Support Group. They are given a flier while still in hospital and are also sent a letter six to ten weeks post hospital discharge. Secretarial support from Critical Care is essential in this process.

## **Group Structure**

Two Critical Care Outreach sisters facilitate the meetings. The groups are informal and we encourage people to chat about their experiences both in critical care and their recovery since hospital discharge. At the first few meetings Ground Rules were established, these are presented on the following page and are now displayed at each meeting.

## Sheffield Critical Care Support Group

### Ground Rules

This is a support group for people who have experienced being a patient or visitor on a Critical Care Unit. It will hopefully provide emotional and moral support for its members. The following ground rules facilitate the development of trust in the group and enable thoughts and feelings to be shared with each other.

- Respect all group participants and confidentiality
- Everybody's contribution is valued
- Share what you feel comfortable to share
- Allow others to talk
- Listen to others

### **Attendance**

Attendance at the meetings has varied with an average of 6 plus two staff members. After one year 36 individuals (19 patients and 17 relative/friend) had attended the Group, several on more than one occasion.

Once the Support Group had been running about eight months a questionnaire was circulated to attendees. Some of the feedback received includes:

#### Reasons for attending the Group included:

"I still needed support and the chance to chat to others who'd been in a similar situation"

"I wanted to fill in the gaps regarding what happened to me when I was so ill"

"...to get things off my chest and get support from the Sisters who attend the group"

"As a relative the whole experience was quite traumatic... wanted to hear other people's experiences"

#### Peoples' experience of the Group included:

"I've found the group informative and of great value"

"Different people need different kinds of support...opportunity to talk about individual experiences seemed to be as far as it went"

"It can take a long time to fully recover; having a support group is like a life line when feeling down and recovery seems so far away"

"There are so many questions you need to ask, as the time spent in Critical Care seems surreal. Being "out of it" you have no idea what happened"

### **Feedback**

Feedback from patients obtained at the Support Group has been incorporated into a poster for staff and displayed on all three general critical care units. This is presented on the following page.

During August 2015, an afternoon session about Patient Experience was held on the General Critical Care Unit. Three former patients and three relatives from the Support Group attended and gave much valued feedback to all members of the MDT at a very well attended session. Action points, such as the development of Patient Diaries, were made as a result of the patients' feedback. The session was also recorded and edited to allow an insight into the patient experience and learning points for Critical Care staff who were unable to attend the session.

### **Future**

The Support Group goes from strength to strength with increasing attendance. It is planned to invite different members of the MDT to attend over the next year, a psychologist and a pharmacist have already attended. We also plan to enable interested critical care nurses to help facilitate the Group.

# Feedback – Sheffield Critical Care Support Group Poster

The following poster for staff incorporates feedback from patients at the Critical Care Support Group and is displayed on all three general critical care units.

## Patient & Relative Experience in Critical Care

The Sheffield Critical Care Support Group was set up in September 2014 by the Critical Care Outreach Team to help support patients, and their relatives who have been discharged from hospital after a stay in General Intensive Care or the High Dependency Unit.

The support group meets one evening every month, inviting patients and relatives to "drop-in" for a cuppa and meet other patients who have also been in critical care allowing them the opportunity to chat about their experience and share their thoughts and feelings.

**Here are some comments from people who have attended the Group**



"Felt frustrated when the physio/nurse did not listen when I said I couldn't do something. I knew what my body could tolerate."

Nurses were good at giving information but felt I had to make an appointment to see a doctor.

When my relative was critically ill I wanted our child to visit, this wasn't made easy and depended on who was in charge until addressed by the senior nurses.

"Was difficult to hear staff talking about 'going for lunch' or having a drink when I couldn't."

"I am trying to fill in the gaps of what happened in critical care as I don't remember much"

Felt frustrated by the lack of continuity with nurses looking after me. I felt I didn't get to know the nurses and they didn't know me!

"I don't think staff realise what conversations patients can hear!"

One year on people around them appear fed up of hearing about their experience, as if they should shut up and get on with it! The experience is still very significant and they can feel angry that others don't seem to appreciate what they are still going through

Attending the Support group allowed her to "Off Load" and the support from other group members is valuable.

Visiting was more difficult 4-8pm, found flexible visiting helpful at the other ITU

Care was brilliant. Grateful to be able to attend the support group to give something back.

"Wish I had a film to watch what I went through in intensive care, it would make it easier to deal with the memory gaps and make sense of what my family are telling me."

Camaraderie with other patients was an important motivator in rehabilitation.

People suggested a photo taken by staff is kept as a legal document to be used to help the patient at a later date if they wish.

People shared their Patient's Diary started on other Units, others expressed a wish that they too had a diary and photos to reflect on, especially if memory gaps are an issue. Families had found writing in a diary therapeutic.

The comments are from patients and relatives who attended the Sheffield critical care support group between September 2014 and June 2015, following their stay in critical care.