

COMPLAINTS AND FEEDBACK REPORT

July to September 2014

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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
<p>Complaints</p>	<ul style="list-style-type: none"> At the end of September 2014, Emergency Care (23) and Surgical Services (26) have the highest number of formal complaints that remain open and beyond the 25 working day target for responding to new complaints. For both of these Care Groups, the number of overdue complaints equates to 46% of all open complaints. Due to the existing complaints backlog, the Trust has not achieved the target of responding to 85% of complaints within 25 working days for a quarter since July to September 2012. <p>ACTION: There is significant work ongoing to improve complaints performance overall. This includes:</p> <ul style="list-style-type: none"> A review of the existing complaints process has been undertaken and a pilot project to trial new ways of working and improve complaint responses is due to start in Surgical Services by end of January 2015. A new process is being implemented whereby a monthly target will be set for each Care Group clarifying the number of complaints they need to close in order to ensure the number of overdue complaints reduces, and that future backlogs do not develop. 'Attitude' and 'Communication' continue to feature in the top 3 most raised subjects in complaints. A number of initiatives aim to improve these aspects of our service including the introduction of the PROUD values and the ongoing programme of customer service workshops. These workshops support good customer care and 4 workshops take place each month. Formal evaluation of this training will be undertaken, with an interim report about the programme being presented during March 2015.
<p>Website Feedback & Comment Cards</p>	

Highlights
<ul style="list-style-type: none"> Following a review by the Parliamentary Health Service Ombudsman (PHSO) this quarter, the Trust were informed that the two complaints that had been reviewed by the PHSO were not being upheld.
<ul style="list-style-type: none"> Of all website feedback and comment cards received this quarter, 74% has been positive. 48% of all positive website feedback and comment cards received related to attitude (significantly more than any other subject), showing that when a patient has a good experience, it is often influenced by the people they come into contact with.

Summary

	Risks
Frequent Feedback	<ul style="list-style-type: none"> The Trust CQUIN target for measures of essential care (support at mealtimes, help getting to the toilet/bathroom, treated with dignity and respect, pain control) is 91.6% for the year 2014/15. At the end of this quarter, the year to date Trust score is 85.6%. Patients getting support at mealtimes is the lowest scoring measure achieving a composite score of 74.3% between July 2014 and September 2014. ACTION: The Voluntary Services Team are prioritising wards scoring low for mealtime support to place volunteers to assist patients at meal times.
Friends and Family Test (FFT)	<ul style="list-style-type: none"> A&E FFT scores have decreased this quarter, with September being the lowest score (37) for a single month since the Test was first introduced in A&E in April 2013. ACTION: A meeting has been planned with key staff in A&E to review FFT feedback alongside other patient feedback to agree an action plan to improve scores. A detailed analysis of A&E FFT feedback has also been undertaken in order to understand the issues causing negative responses. The 2 key issues identified were waiting times and staff attitude. Inpatient response rates have increased this quarter with September receiving the highest response rate for a single month since the FFT was implemented (Jul 2014 – 33.9%; Aug 2014 – 26.7%; Sep 2014 – 41.7%). However, there are a number of inpatient areas with low responses rates. These areas are supported and actions identified, such as increasing staff awareness and providing regular updates to ensure senior staff are aware of performance on a weekly basis. ACTION: The 5 inpatient wards with the highest activity levels and lowest response rates have been identified to pilot SMS texting and Interactive Voice Messaging (IVM), which proved successful in increasing response rates in A&E.

Highlights
<ul style="list-style-type: none"> 2876 Frequent Feedback inpatient interviews were undertaken between July and September 2014. This is the highest number of interviews recorded for a single quarter since the survey was introduced.
<ul style="list-style-type: none"> This quarter a total of 13994 patients participated in the FFT, an increase of 27% compared to the 11003 responses received last quarter. There were 5260 inpatient responses, 4125 A&E responses and 4609 maternity responses this quarter. Inpatient responses have increased this quarter, with September (41.7%) being the highest response rate for a single month since the FFT was implemented in April 2013 During July 2014, FFT has been piloted in outpatient, community and day case areas. Day case and outpatient areas are now fully prepared for early adoption from 1st October 2014.

Summary

	Risks
National Surveys	

Highlights
<ul style="list-style-type: none">• In the National A&E Survey, the Trust scored significantly better on 1 question compared to other participating trusts, and did not score significantly worse on any questions. Compared to the previous (2012) survey the Trust scored significantly better on 2 questions, and did not score significantly worse on any questions.• In the National Cancer Survey, the Trust was in the highest scoring 20% of trusts on 7 questions, and in the lowest 20% of trusts for 1 question. Compared to the previous (2013) survey the Trust scored significantly better on 3 questions, and significantly worse on 1 question. <p><u>ACTION:</u> Action plans are agreed following all national surveys</p>

Complaints

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.

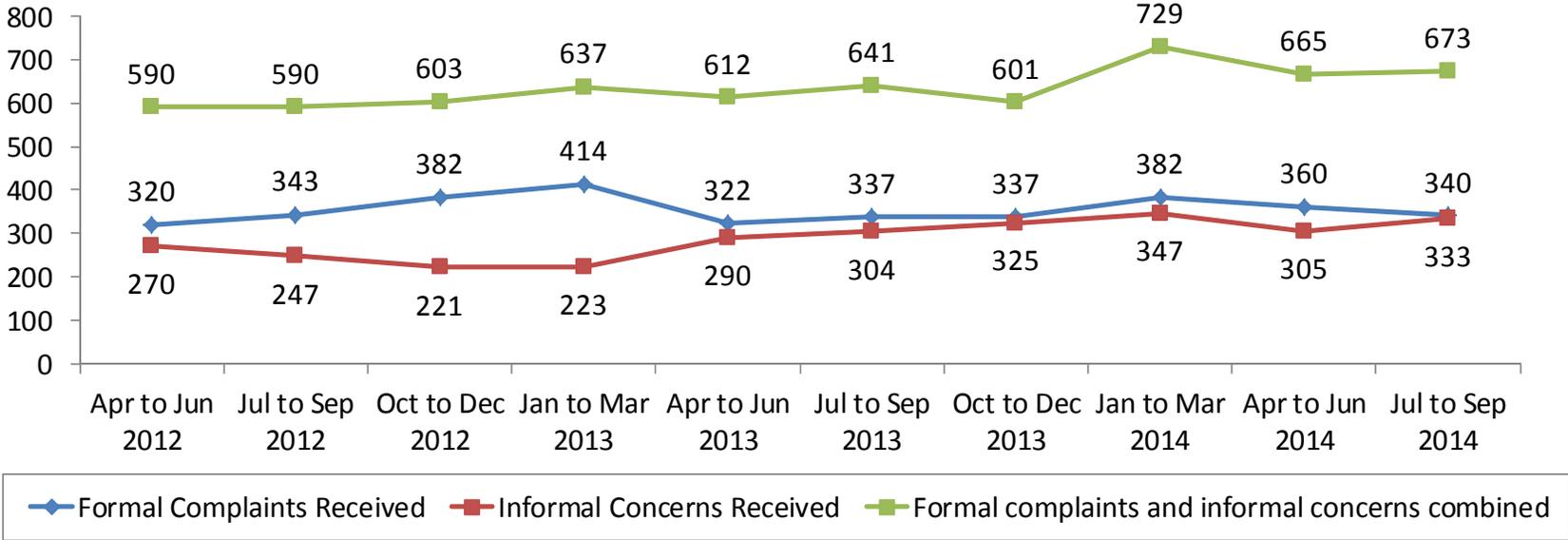
The Trust participates in the Patients Association complainant satisfaction survey, which asks for feedback from complainants on how the Trust managed their concerns. Results of the survey will be monitored and feature in future reports when they become available.

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. A selection of actions that have been implemented over the past quarter are highlighted.

Where it is available, benchmarking data is 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 340 new formal complaints were received, a decrease from 360 received last quarter. 333 informal concerns were received this quarter, compared with 305 last quarter. By combining the number of formal complaints received and the number of informal concerns, a total of 673 were raised between July and September 2014, an increase from 665 received last quarter.

It is also interesting to note that there is a correlation between the number of formal complaints received compared to the number of concerns managed informally. Since the quarter April to June 2013, the number of concerns managed informally has increased, this has resulted in fewer formal complaints. It is positive to note that over the past 18 months, concerns managed informally have increased which has less impact on resources and often results in a swifter resolution of the concern.

The graphs above show that when complaints data is presented as a quarterly breakdown rather than monthly, there are fewer fluctuations in the figures. There is a notable increase in the number of combined formal complaints and informal concerns received for the quarter, January to March 2014 and while numbers have reduced in the subsequent quarters, they have still remained higher than prior to this period.

Complaints – Formal complaints received by patient activity

Proportion of patients who have made a formal complaint

Number of patients treated for each complaint received

	Overall		Inpatient		Outpatient	
	Last 12 months	Current Qtr Jul-Sep 14	Last 12 months	Current Qtr Jul-Sep 14	Last 12 months	Current Qtr Jul-Sep 14
Community Services	1334:1	1807:1				
Diagnostic & Therapeutic Services	2042:1	3597:1				
Emergency Care	755:1	687:1	302:1	246:1	1595:1	1482:1
- Accident & Emergency*	942:1	991:1				
Head & Neck Services	1449:1	1576:1	559:1	436:1	1781:1	2237:1
Obstetrics Gynaecology, Neonatology	1593:1	1130:1	303:1	282:1	940:1	844:1
- Maternity Services*	1895:1	13294:1				
Operating Services, Critical Care & Anaesthesia	775:1	454:1	1029:1	875:1	649:1	334:1
South Yorkshire Regional Services	963:1	936:1	343:1	287:1	1556:1	1762:1
Specialised Cancer, Medicine & Rehabilitation	2223:1	2305:1	1051:1	848:1	2744:1	3276:1
Surgical Services	731:1	769:1	197:1	224:1	2026:1	1794:1
Trust total	1097:1	1123:1	1360:1	1332:1	1873:1	1950:1

% of patients who have made a complaint

	Overall		Inpatient		Outpatient	
	Last 12 months	Current Qtr Jul-Sep 14	Last 12 months	Current Qtr Jul-Sep 14	Last 12 months	Current Qtr Jul-Sep 14
Community Services	0.07%	0.06%				
Diagnostic & Therapeutic Services	0.05%	0.03%				
Emergency Care	0.13%	0.15%	0.33%	0.41%	0.06%	0.07%
- Accident & Emergency*	0.11%	0.1%				
Head & Neck Services	0.07%	0.06%	0.18%	0.23%	0.06%	0.04%
Obstetrics Gynaecology, Neonatology	0.06%	0.09%	0.33%	0.35%	0.11%	0.12%
- Maternity Services*	0.05%	0.01%				
Operating Services, Critical Care & Anaesthesia	0.13%	0.22%	0.1%	0.11%	0.15%	0.3%
South Yorkshire Regional Services	0.1%	0.11%	0.29%	0.35%	0.06%	0.06%
Specialised Cancer, Medicine & Rehabilitation	0.04%	0.04%	0.1%	0.12%	0.04%	0.03%
Surgical Services	0.14%	0.13%	0.51%	0.45%	0.05%	0.06%
Trust total	0.09%	0.09%	0.28%	0.30%	0.05%	0.05%

* Accident & Emergency and Maternity Services complaints are coded under their own category, and not as 'inpatient' or 'outpatient'

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 and maternity services, which are coded separately). The Care Groups above are listed alphabetically.

The number of patients treated is calculated by combining the number of elective and non-elective inpatient episodes with the number of new and follow-up outpatient attendances each month.

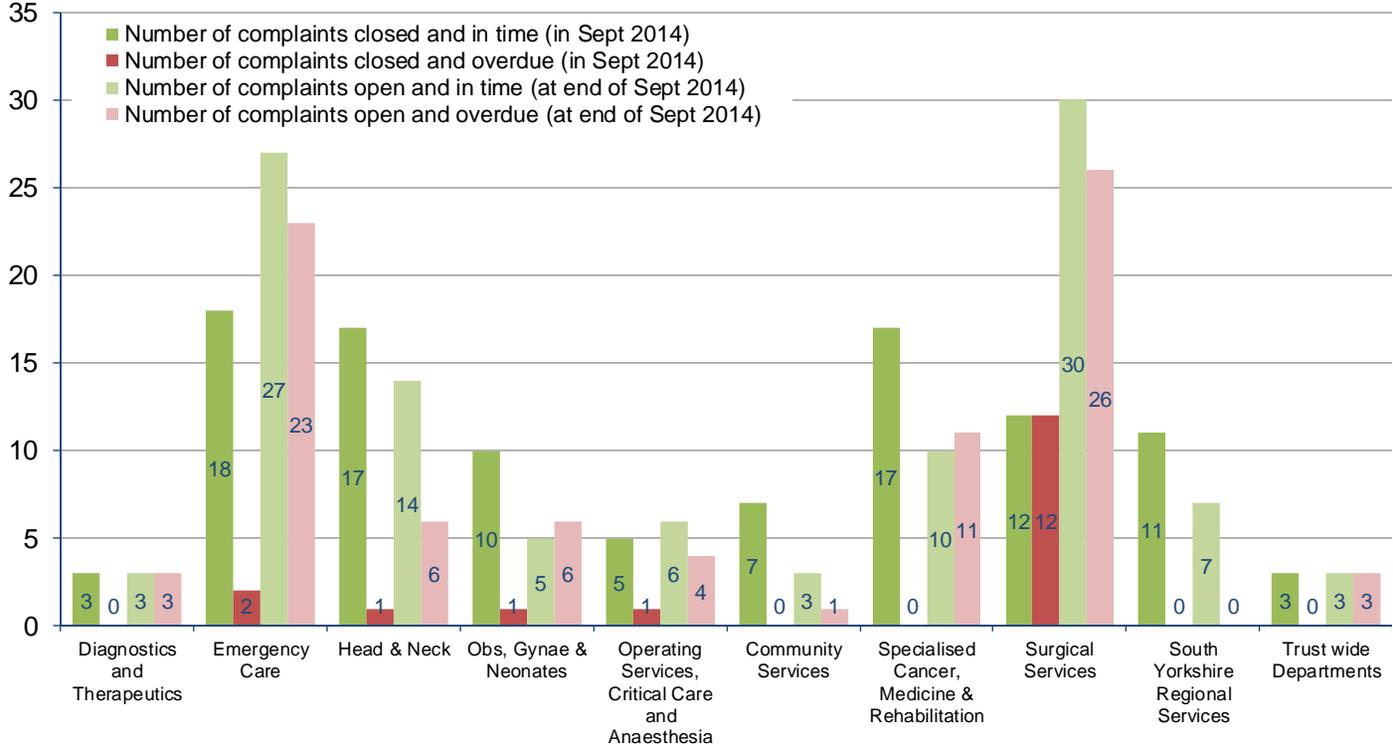
The data above show that over the past 12 months, overall the Trust treated 1097 patients for every formal complaint received, which equates to 0.09% of patients treated making a formal complaint. This rate has improved for the

current quarter (July 2014 to September 2014) to 1123 patients being treated for every formal complaint received, still equating to 0.09% of patients treated making a formal complaint.

With regards to individual Care Groups, Specialised Cancer, Medicine and Rehabilitation have received the lowest proportion of formal complaints over the past 12 months by treating 2223 patients for every formal complaint received, which equates to 0.04% of patients treated making a formal complaint.

Complaints – Number of formal complaints closed

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



The Trust feels it is important to provide a timely response to complainants and has set a local target of responding to at least 85% of formal complaints within 25 working days. The graph above shows the number of complaints that have been responded to within 25 working days (in time) and those that have not achieved the 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 is based on figures at the end of September 2014, as the number of overdue complaints changes daily as does the number of complaints closed.

Over the past quarter, 339 formal complaints have been closed, an increase from 319 between April and June 2014. However, 43% (83) of all open

complaints remain overdue. Surgical Services and Emergency Care are the Care Groups with the highest number of overdue complaints.

A review of the existing complaints process has been undertaken and a pilot project to trial new ways of working and improve complaint responses is due to start in Surgical Services by end of January 2015. Should the new ways of working prove successful, they will be rolled out to other Care Groups following the pilot period.

A new process is also being implemented whereby a monthly target will be set for each Care Group clarifying the number of complaints that they need to close in order to ensure the number of overdue complaints reduces, and that future backlogs do not develop.

Complaints - Subjects raised in formal complaints and informal concerns

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

Current quarter
(July 2014 to September 2014)

#	Subject	Qty	% of all subjects raised
1	Attitude	40	12%
2	Communication with patient	36	11%
3	Appropriateness of medical treatment	28	8%
4	Choice of medical treatment	20	6%
5	General nursing care	19	6%
6	Unhappy with outcome of surgery	16	5%
7	Missed diagnosis	12	4%
8	Delay in treatment	10	3%
9	Communication with relative / carer	8	2%
10	Waiting time for follow-up appointment	7	2%

Last 12 months
(October 2013 to September 2014)

#	Subject	Qty	% of all subjects raised
1	Attitude	153	11%
2	Appropriateness of medical treatment	110	8%
3	Communication with patient	103	8%
4	General nursing care	97	7%
5	Unhappy with outcome of surgery	61	4%
6	Choice of medical treatment	52	4%
7	Competence of medical staff	44	3%
8	Missed diagnosis	40	3%
9	Delay in treatment	32	2%
10	Inappropriately discharged	31	2%

These tables show that 'attitude' and 'communication' consistently feature in the top 3 most raised subjects in formal complaints and informal concerns. Changing staff behaviour is a slow process, but a number of initiatives are now integrated into normal practice, such as the introduction of the PROUD Values.

In addition, the Trust's 'Improving Patient Experience' workshops support good customer care and 4 workshops take place each month. Formal evaluation of this training will be undertaken, with an interim report about the programme being presented during March 2015.

Complaints - Subjects raised in formal complaints

Top 10 subjects raised in formal complaints by Care Group

	Attitude	Communication with patient	Appropriateness of medical treatment	Choice of medical treatment	General nursing care	Unhappy with outcome of surgery	Missed diagnosis	Delay in treatment	Communication with relative / carer	Waiting time for follow-up appointment
Diagnostics & Therapeutics	0	1	0	0	0	0	1	0	0	0
Emergency Care	12	4	13	3	7	0	5	4	4	1
Head & Neck	7	9	5	3	1	3	1	3	0	0
Obs, Gynae & Neonates	5	4	0	1	2	1	0	0	0	0
OSCCA	5	3	1	0	0	0	0	0	0	0
Community Services	1	1	1	0	1	0	2	1	1	0
Spec Cancer, Medicine and Rehabilitation	3	7	0	0	2	0	2	1	2	3
Surgical Services	1	3	4	10	6	10	1	0	1	1
SYRS	2	2	4	3	0	2	0	1	0	2
Trust Wide Departments	4	2	0	0	0	0	0	0	0	0
TOTAL	40	36	28	20	19	16	12	10	8	7

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

Between July and September 2014, the subject that has been raised the most for a single Care Group is 'appropriateness of medical treatment' which has been raised 13 times in Emergency Care.

The two most frequently raised subjects in formal complaints between July and September 2014 are 'attitude' (40) and 'communication with patient' (36).

The subjects of 'attitude' and 'communication with patient' are the most frequently raised. Attitude is the most raised subject for Obs, Gynae & Neonates, OSCCA and Trust wide departments, and 'communication with patient' is most raised subject in Diagnostics & Therapeutics, Head & Neck and Specialised Cancer, Medicine & Rehabilitation.

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 responded reasonably to a complaint. The PHSO has increased the number of investigations it undertakes and the Trust has seen an increase in the number of complaints the PHSO has investigated.

The number of PHSO cases, decisions and outcome by quarter

	Apr to Jun 12	Jul to Sep 12	Oct to Dec 12	Jan to Mar 13	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	2014/15 Year to date
Number of new PHSO cases	4	4	5	7	20	3	3	1	7	14	4	6	11
Number of PHSO decisions	3	4	2	6	15	3	0	1	1	5	2	2	4
Number of PHSO cases fully or partly upheld	0	0	0	1	1	0	0	0	1	1	1	0	1

New PHSO cases this quarter

This quarter, 6 new information requests have been received, these relate to the following directorates:

- Neurosciences (3)
- Orthopaedics (2)
- Community Services (1)

New PHSO decisions this quarter

There were two new decisions received from the PHSO during this quarter:

Acute Medicine (NOT UPHELD)

The complainant raised concerns regarding the care and treatment received by her husband including that his death may have happened prematurely.

The PHSO found that the Trust provided appropriate care to the complainant's husband and the care received did not hasten his death. The PHSO did however identify a number of areas where the Trust had failed to take appropriate action, such as not adhering to the moving and handling assessment which was in place and not fully recording the patients communication needs, however, it was determined that these did not impact on the care delivered. These areas have now been addressed and the PHSO is satisfied that the Trust has made the necessary changes.

Surgical Services (NOT UPHELD)

The complainant raised concerns regarding the cancellation of surgery and the fact this was cancelled by the consultant at the last minute.

The Ombudsman concluded that the Trust acted reasonably, that the surgery was correctly cancelled in the best interests of the patient and that no further action should be taken.

Complaints - Actions as a result of formal complaints

Agreeing and undertaking actions as a result of formal complaints 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.

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

Ward/Department/Service	Issues identified	Actions agreed
Intensive Home Nursing Service, Community Services	<p>A complaint was received from a patient who experienced that visits from the community Phlebotomy service often did not take place as planned, particularly after being discharged from inpatient care.</p> <p>On investigation, it was found that there had been communication issues regarding referrals between the local pharmacy and our community services, which led to confusion for the patient regarding their understanding of when, and who, would be visiting them.</p>	<ul style="list-style-type: none"> • A meeting between Trust and the local pharmacy took place and a process for referring patients into the Community Phlebotomy Service was agreed. • It was agreed to develop a 'patient header sheet' for faxed referrals so that patient details can be easily located and accurate records are maintained. • A series of tests on the agreed process are being undertaken to further identify where there may be points at which the system fails. • Trust based pharmacy staff will keep a log of issues identified in referrals from the Trust so that these can be followed up.
Huntsman 6, Orthopaedics	<p>A patient who was treated on ward Huntsman 6 complained that on discharge they were not given any written information regarding the fracture they experienced, or information regarding follow-up physiotherapy.</p>	<ul style="list-style-type: none"> • As a result of this feedback, the existing information booklet for lower limb fractures has been revised to include advice about follow-up therapy. Therapists will discuss this with the patients on discharge. • A new patient information booklet for patients who suffer the specific fracture that this patient experienced has now been produced in collaboration with the patient.
Dermatology Outpatients, Specialised Medicine	<p>A complaint was received which raised concerns with the existing process for patients who wear a wig, to be reviewed having to attend their GP on a yearly basis to then be referred into Dermatology for a wig prescription.</p>	<ul style="list-style-type: none"> • In response to this feedback, the directorate reviewed the process for the repeat prescription of wigs. • This resulted in a change to the process to prevent patients having to visit two doctors (their GP and the consultant) each year. In future, patients will simply be given a follow-up appointment with the consultant or, if clinically appropriate, a telephone consultation.

Complaints - Complaints activity compared to other Shelford Trusts

Every NHS organisation is required to submit details to the Health and Social Care Information Centre (HSCIC) on the number of formal complaints they have received each year.

The table below shows the total number of formal complaints for 2013/14, and the proportion of those that were upheld, for 10 large acute NHS providers that form the Shelford Group. The list below is presented in alphabetical order by NHS Trust/NHS Foundation Trust, with this Trust highlighted.

The figures show that there are significant differences in the percentage of formal complaints which are upheld. This highlights the subjective nature of the judgements being made and the varying practice across trusts.

The table below also shows the difference in the number of bed days for each complaint received, where the greater the number the better the performance. During 2013/14, this Trust received 1 complaint for every 617 bed days, whereas Imperial College Healthcare NHS Trust and University College London Hospitals NHS Foundation Trust received 1 complaint for every 338 bed days.

Shelford Group - number of formal complaints and the percentage upheld

	Total number of formal complaints received	Total number of bed days for each formal complaint received	Total number of formal complaints upheld	% of formal complaints upheld
Cambridge University Hospitals NHS Foundation Trust	465	676	346	74%
Central Manchester University Hospitals NHS Foundation Trust	1192	337	90	8%
Guy's And St Thomas' NHS Foundation Trust	926	345	616	67%
Imperial College Healthcare NHS Trust	884	338	380	43%
King's College Hospital NHS Foundation Trust	980	485	367	37%
Oxford University Hospitals NHS Trust	890	516	667	75%
Sheffield Teaching Hospitals NHS Foundation Trust	949	617	646	68%
The Newcastle Upon Tyne Hospitals NHS Foundation Trust	702	674	631	90%
University College London Hospitals NHS Foundation Trust	788	338	521	66%
University Hospitals Birmingham NHS Foundation Trust	664	549	344	52%

Complaints - Complaint subjects compared to other Shelford Trusts

The table below shows the top 5 subjects raised in formal complaints as reported to the Health & Social Care Information Centre (HSCIC) during 2013/14 for 10 large acute NHS providers that form the Shelford Group.

The percentages represent the percentage of formal complaints relating to that subject from all subjects received for each NHS Trust/NHS Foundation Trust.

The Trust has the same top subject, 'all aspects of clinical treatment', as all the other Trusts, and has the same top 3 subjects as 3 other Trusts (Cambridge University Hospitals NHS Foundation Trust, Guy's And St Thomas' NHS Foundation Trust and University College London Hospitals NHS Foundation Trust).

Shelford Group - subjects raised in formal complaints

Cambridge University Hospitals NHS Foundation Trust	Central Manchester University Hospitals NHS Foundation Trust	Guy's And St Thomas' NHS Foundation Trust	Imperial College Healthcare NHS Trust	King's College Hospital NHS Foundation Trust	Oxford University Hospitals NHS Trust	Sheffield Teaching Hospitals NHS Foundation Trust	The Newcastle Upon Tyne Hospitals NHS Foundation Trust	University College London Hospitals NHS Foundation Trust	University Hospitals Birmingham NHS Foundation Trust
All aspects of clinical treatment (73%)	All aspects of clinical treatment (46%)	All aspects of clinical treatment (48%)	All aspects of clinical treatment (51%)	All aspects of clinical treatment (51%)	All aspects of clinical treatment (42%)	All aspects of clinical treatment (55%)	All aspects of clinical treatment (62%)	All aspects of clinical treatment (46%)	All aspects of clinical treatment (44%)
Attitude of staff (6%)	Other (12%)	Attitude of staff (19%)	Appointments, delay / cancellation (outpatient) (11%)	Communication / information to patients (written and oral) (11%)	Appointments, delay / cancellation (outpatient) (13%)	Attitude of staff (10%)	Attitude of staff (8%)	Attitude of staff (14%)	Communication / information to patients (written and oral) (14%)
Appointments, delay / cancellation (outpatient) (5%)	Admissions, discharge and transfer arrangements (10%)	Appointments, delay / cancellation (outpatient) (12%)	Communication / information to patients (written and oral) (10%)	Attitude of staff (10%)	Admissions, discharge and transfer arrangements (12%)	Appointments, delay / cancellation (outpatient) (9%)	Communication / information to patients (written and oral) (8%)	Appointments, delay / cancellation (outpatient) (13%)	Appointments, delay / cancellation (inpatient) (11%)
Communication / information to patients (written and oral) (5%)	Communication / information to patients (written and oral) (10%)	Communication / information to patients (written and oral) (10%)	Attitude of staff (8%)	Appointments, delay / cancellation (inpatient) (8%)	Communication / information to patients (written and oral) (12%)	Communication / information to patients (written and oral) (8%)	Appointments, delay / cancellation (outpatient) (7%)	Communication / information to patients (written and oral) (11%)	Appointments, delay / cancellation (outpatient) (9%)
Admissions, discharge and transfer arrangements (4%)	Appointments, delay / cancellation (outpatient) (8%)	Transport (ambulances and other) (3%)	Admissions, discharge and transfer arrangements (6%)	Appointments, delay / cancellation (outpatient) (7%)	Attitude of staff (9%)	Admissions, discharge and transfer arrangements (5%)	Admissions, discharge and transfer arrangements (4%)	Admissions, discharge and transfer arrangements (6%)	Attitude of staff (7%)

Feedback

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) 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 question is asked on discharge and currently covers inpatients, A&E and maternity services.

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

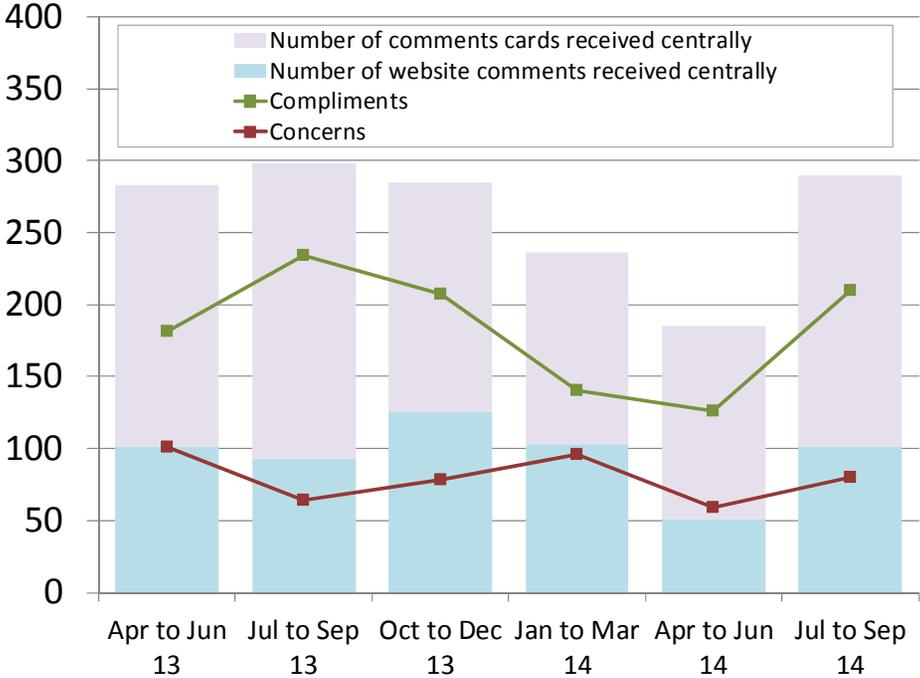
FFT will be introduced in day case and outpatient areas from October 2014 and results for these areas will be presented for the first time next quarter.

- The Frequent Feedback inpatient survey, which is undertaken by trained volunteers during the patient's stay on a ward. The inpatient survey covers a range of questions related to the patient's experience. Performance on questions which relate to CQUIN measures of essential care are featured in this report.
- The Trust also participates in the CQC programme of national surveys. As and when results become available these will be featured in this report. This quarter's report provides a summary of results from the National A&E Survey 2014 and the National Cancer Survey 2014.

Feedback - Website Feedback & Comment Cards

During the period July and September 2014, 189 comments cards were completed and 101 comments left via website feedback. Therefore a total of 290 individual comments have been received regarding the Trust during this period, of which 527 individual themes have been identified.

The chart below shows the number of comments cards and website feedback received by quarter and the number of which were compliments and concerns.



Of all the website feedback and comment cards received this quarter 74% have been positive and 26% negative, suggesting that the majority of people that leave unsolicited feedback have had a positive experience.

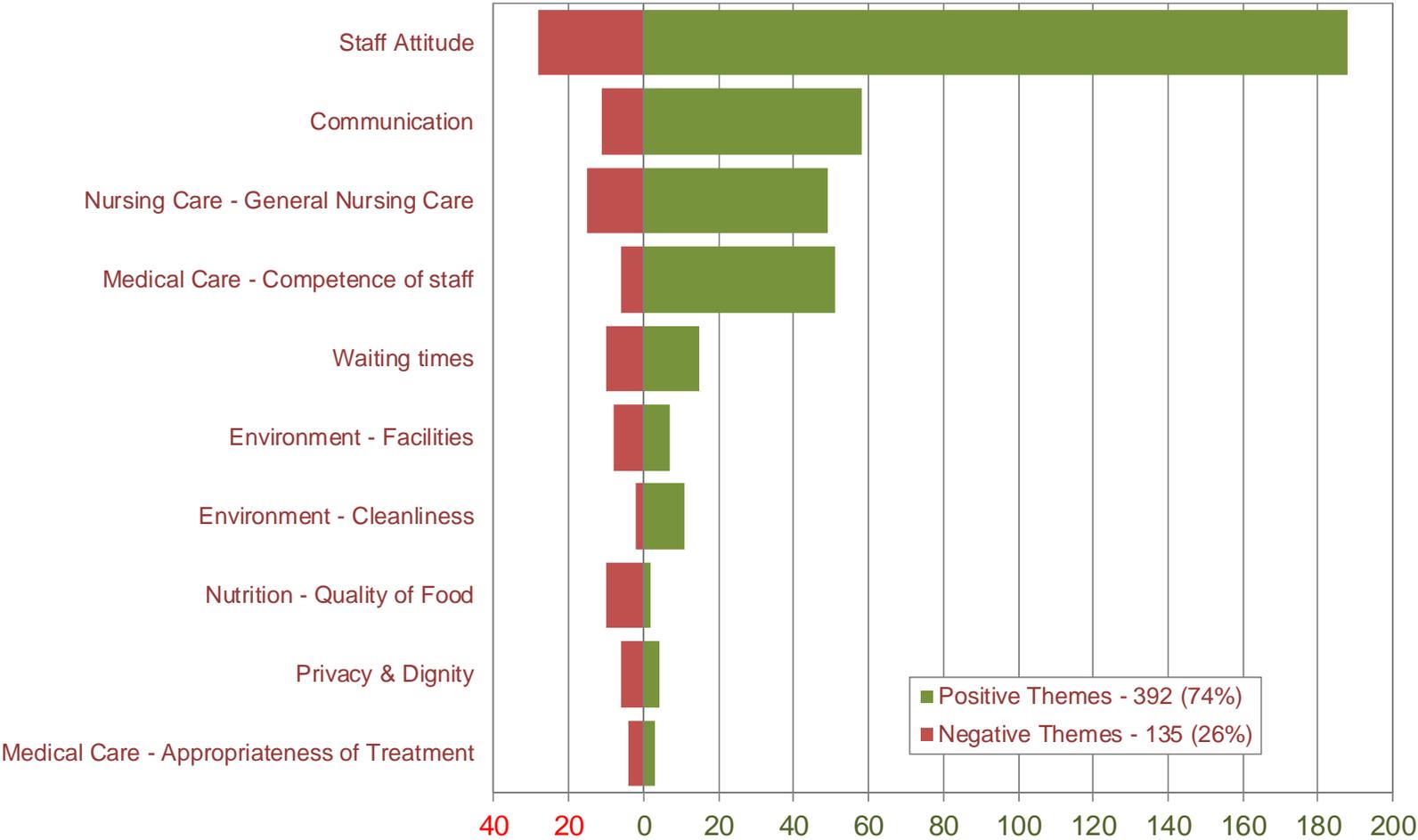
48% of positive feedback related to staff attitude, which demonstrates that when a patient's experience is good, it is often influenced by the people they come into contact with.

% of positive comments from all comments received centrally			
Current Quarter (Jul to Sep 2014)		Last 12 months (Oct 13 to Sep 14)	
%	QTY	%	QTY
74%	392	72%	1295

% of negative comments from all comments received centrally			
Current Quarter (Jul to Sep 2014)		Last 12 months (Oct 13 to Sep 14)	
%	QTY	%	QTY
26%	135	28%	492

Feedback - subjects raised in website feedback and comment

Top 10 subjects raised in website feedback and comment cards between July and September 2014



Competent, caring, and reassuring.

The nurses were cheerful and friendly and all the staff appeared to be happy at work

Total lack of continuity

From being told I was fit to go home I then had to wait at least 3 hours for my prescription so that I could be discharged

Feedback - Friends & Family Test

Introduction and background

The Friends and Family Test (FFT) was introduced nationally across all provider NHS Trusts from 1st April 2013. This Trust is now carrying out the FFT in inpatient, A&E and maternity services.

Response rates

Between July and September 2014, 5260 inpatients, 4125 A&E patients, and 4609 maternity services patients from the Trust completed the FFT survey, giving a total of 13994 responses this quarter. An increase of 27% compared to the 11003 responses received last quarter.

A&E and maternity services response rates for the Trust remained consistent this quarter. However, inpatient response rates have increased with September receiving the highest response rate for a single month since the FFT was implemented (Jul 2014 – 33.9%; Aug 2014 – 26.7%; Sep 2014 – 41.7%).

The CQUIN target for Quarter 4 (January to March) 2015 is to achieve a quarterly response rate of 30% for inpatients, 20% in A&E and a response rate of 40% for inpatients in March 2015 only. The Trust is now working towards achieving this.

Scores

Between July and September 2014, inpatient and maternity services scores for the Trust remained consistent. However, A&E scores have reduced over the quarter with September 2014 (37) being the lowest score since FFT was introduced.

A meeting has been planned with key staff in A&E to agree an action plan to make improvements based on FFT feedback and also feedback received from the National A&E Survey 2014 and complaints data.

As well as this, the A&E team are exploring the possibility of working with the Design Council, to look at improving the physical environment alongside the processes undertaken in that area, in order to improve the overall patient experience.

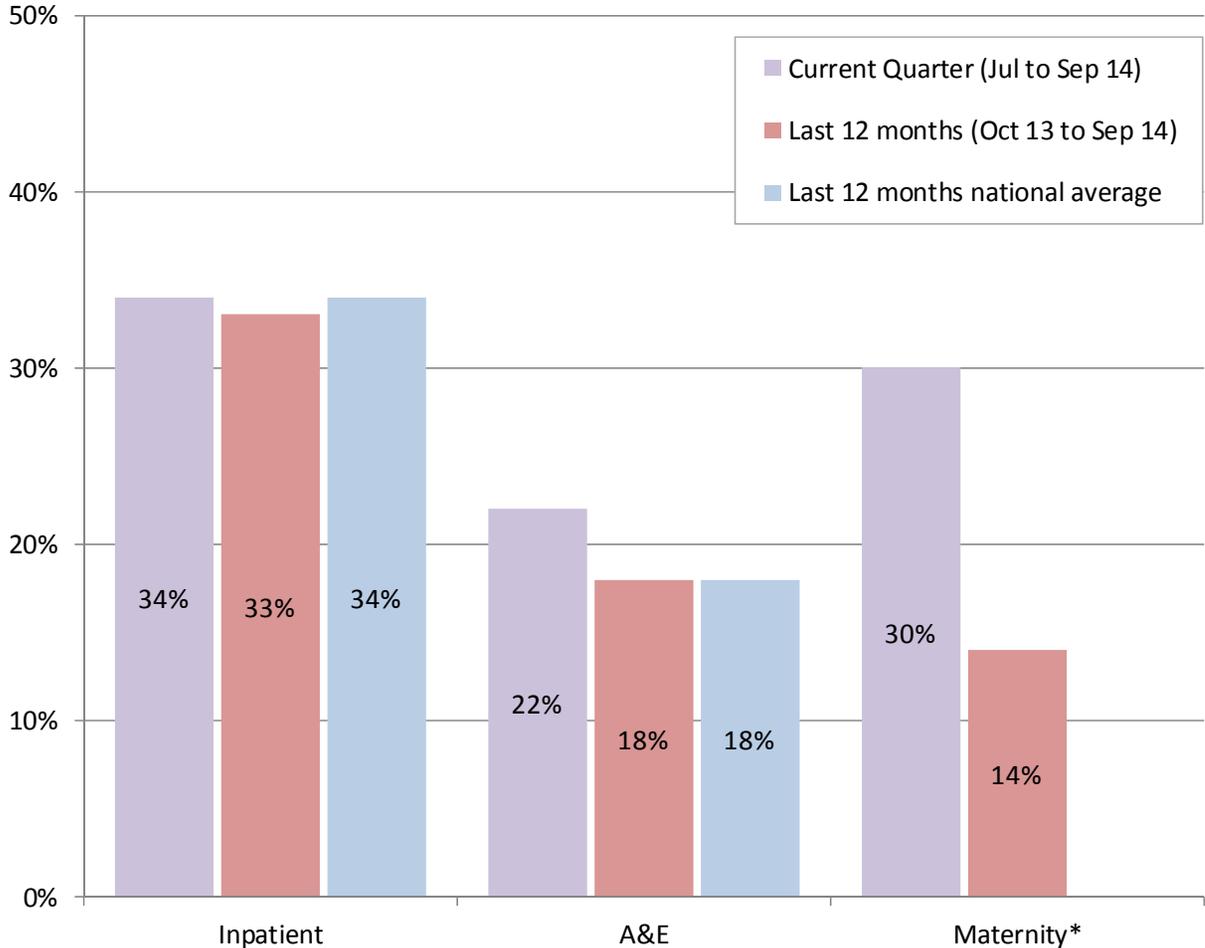
Next steps

The following steps to further develop FFT are now underway or planned:

- FFT has been piloted in day care areas, outpatients and community services, with early adoption in these areas on schedule for October 2014 in day case areas and outpatients, and January 2015 for Community Services.
- NHS England have announced that the net promoter scoring system will be replaced with a percentage based system where FFT scores will be recorded by taking the percentage of respondents who 'would recommend' our service which is taken from response ratings 1 (Highly Likely) and 2 (Likely). FFT reporting within the Trust will reflect this new scoring method from October 2014.

Feedback - Friends & Family Test Response Rates

Response Rates by survey



* Eligible patient numbers for maternity services are no longer published nationally, therefore it is not possible to provide a national average response rate.

Highest performing wards/departments by response rate

	July to September 2014			Last 12 months (Oct 13 to Sep 14)
	Eligible Patients	Responses	Response Rate	
P1 / CIU	177	181	102%*	95%
Chesterman 2	239	188	79%	45%
Robert Hadfield 4	72	49	68%	53%
Osborn 1	39	26	67%	54%
Renal Unit - E Floor	99	66	67%	60%

* Monthly FFT returns allow up to 10% of the previous month's late returns to be included. This explains why a ward may have a response rate that exceeds 100%.

Lowest performing wards/departments by response rate

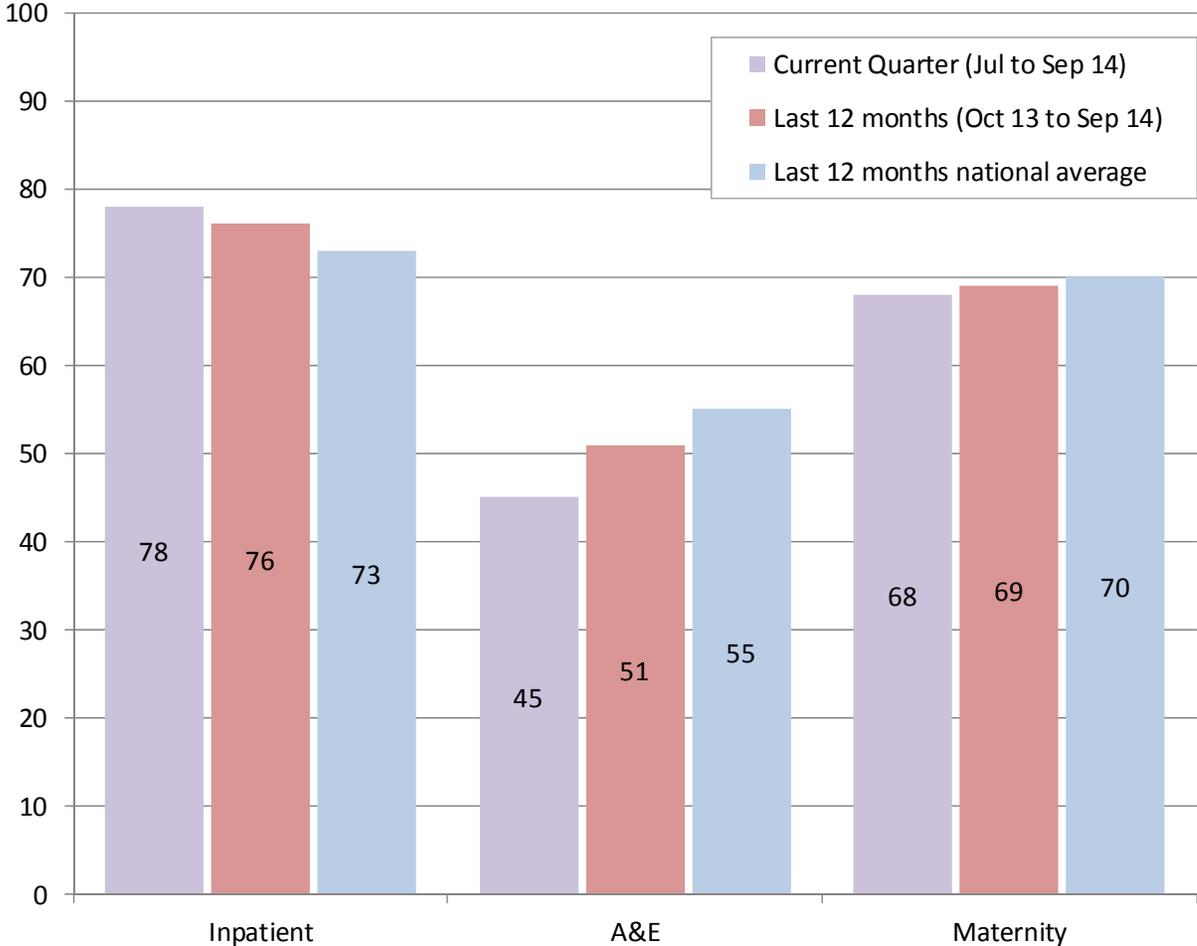
	July to September 2014			Last 12 months (Oct 13 to Sep 14)
	Eligible Patients	Responses	Response Rate	
Weston Park Ward 2	370	20	5%	8%
Robert Hadfield 5	97	8	8%	26%
Huntsman 5	802	88	11%	23%
Huntsman 6	229	30	13%	21%
H1 / H2	677	91	13%	13%

Feedback - Friends & Family Test Scores

FFT scores are calculated using a Net Promoter Score based on the number of patients who would be extremely likely to recommend our Trust and the number of patients who would not be likely to recommend our Trust. This gives a score of between -100 and 100.

From October 2014, the FFT scoring system will change. NHS England will no longer use the Net Promoter Score and will move to a percentage based system by taking the percentage of patients who 'would recommend' our service which is taken from ratings 'highly likely' and 'likely'.

Scores by survey



Feedback - Friends & Family Test Benchmarking

The tables below show the FFT performance for this Trust between July and September 2014. Results are presented for inpatient, A&E and maternity services scores and response rates against other members of the Shelford Group. Trusts are ranked in order of the highest response rate or score to the lowest, with this Trust and the England average being highlighted.

Response Rates

Inpatient			A&E			Maternity		
1	University Hospitals Birmingham	48%	1	King's College Hospital	27%	1	University College London Hospitals	36%
2	Imperial College Healthcare	39%	2	University Hospitals Birmingham	24%	2	Imperial College Healthcare	34%
3	Central Manchester University Hospitals	39%	3	Central Manchester University Hospitals	23%	3	Sheffield Teaching Hospitals	30%
4	King's College Hospital	39%	4	University College London Hospitals	23%	4	The Newcastle Upon Tyne Hospitals	26%
5	The Newcastle Upon Tyne Hospitals	38%	5	Sheffield Teaching Hospitals	22%	5	Oxford University Hospitals	22%
England Average		37%	6	Cambridge University Hospitals	22%	England Average		21%
6	Sheffield Teaching Hospitals	34%	England Average			6	Guy's And St Thomas'	13%
7	Guy's And St Thomas'	32%	7	Imperial College Healthcare	18%	7	Cambridge University Hospitals	12%
8	University College London Hospitals	31%	8	The Newcastle Upon Tyne Hospitals	14%	8	King's College Hospital	11%
9	Cambridge University Hospitals	28%	9	Oxford University Hospitals	14%	9	Central Manchester University Hospitals	11%
10	Oxford University Hospitals	25%	10	Guy's And St Thomas'	10%			

Scores

Inpatient			A&E			Maternity		
1	The Newcastle Upon Tyne Hospitals	81	1	The Newcastle Upon Tyne Hospitals	70	1	The Newcastle Upon Tyne Hospitals	83
2	Guy's And St Thomas'	79	2	Oxford University Hospitals	64	England Average		70
3	Sheffield Teaching Hospitals	78	3	Central Manchester University Hospitals	63	2	Sheffield Teaching Hospitals	68
4	University Hospitals Birmingham	76	4	Cambridge University Hospitals	58	3	Central Manchester University Hospitals	67
5	Oxford University Hospitals	75	England Average		54	4	Oxford University Hospitals	66
6	University College London Hospitals	74	5	University Hospitals Birmingham	53	5	University College London Hospitals	64
England Average		73	6	University College London Hospitals	53	6	Cambridge University Hospitals	63
7	Imperial College Healthcare	71	7	Imperial College Healthcare	50	7	Guy's And St Thomas'	58
8	Central Manchester University Hospitals	71	8	Sheffield Teaching Hospitals	45	8	King's College Hospital	51
9	Cambridge University Hospitals	66	9	King's College Hospital	45	9	Imperial College Healthcare	41
10	King's College Hospital	63	10	Guy's And St Thomas'	39			

Feedback - Inpatient Frequent Feedback Survey

The Frequent Feedback inpatient survey covers a range of questions related to the patient’s experience and is undertaken by trained volunteers during the patient’s stay on a ward.

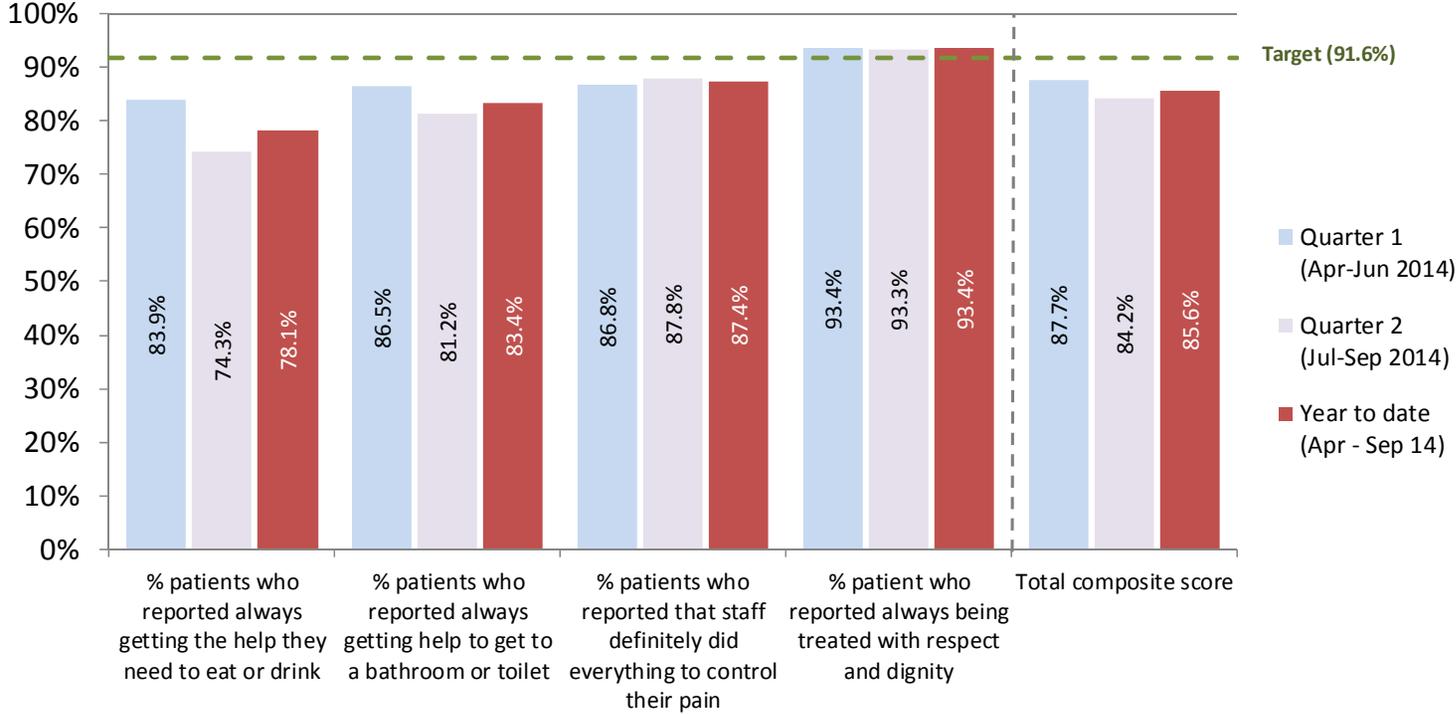
Completed Inpatient Frequent Feedback Surveys by quarter

	Apr to Jun 12	Jul to Sep 12	Oct to Dec 12	Jan to Mar 13	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	2014/15 Year to date
Number of completed Inpatient Frequent Feedback surveys	842	1684	1078	1332	4936	1339	1360	1401	2626	6726	1939	2876	4815

Essential care

The chart below shows the composite score for the four questions which are considered to be measures of essential care. The Trust CQUIN target is to achieve an overall composite score of 91.6%. At the end of this quarter, the Trust has achieved 85.6%.

Patients getting support at mealtimes is the lowest scoring measure achieving a composite score of 74.3% between July 2014 and September 2014. The Voluntary Services Team are prioritising wards scoring low for mealtime support to place volunteers to assist patients at meal times.



Feedback - 2014 National Accident & Emergency Survey Results

The National Accident and Emergency (A&E) Survey 2014 is the fifth Survey of A&E patients carried out by the Care Quality Commission, and involved 142 acute and specialist NHS trusts with a major accident and emergency department. Previous surveys were carried out in 2003, 2004, 2008 and 2012.

The survey was carried out on behalf of the Trust by the Picker Institute and the survey was sent to a total of 819 eligible patients who attended A&E between January and March 2014. 278 patients returned the completed questionnaire, giving a response rate of 34%. Nationally, the Care Quality Commission received nearly 40,000 responses from patients, giving a national response rate of 34%.

Performance compared to other Trusts

Compared to other trusts participating in the survey, Sheffield Teaching Hospitals NHS Foundation Trust scored significantly better on 1 question, did not score significantly worse on any questions, and scored average on 34 questions. The question where this Trust scored significantly better than other trusts is as follows:

Question	STH	National Average
Did you have enough time to discuss your health or medical problem with the doctor or nurse?	8.8 / 10	7.2 / 10

Performance compared to the 2012 survey

Scoring in the Care Quality Commission National Accident and Emergency Survey is based on the individual 'multiple choice' response options being converted into scores on a scale from 0 to 10. A score of 10 represents the best possible response and a score of zero the worst. The higher the score for each question, the better the Trust is performing.

In 2014, the Trust scored significantly better on 2 questions compared to 2012, did not score significantly worse on any question, and there was no significant difference on 33 questions. The questions where this Trust scored significantly better than in 2012 are as follows:

Question	2012	2014
Did you have enough time to discuss your health or medical problem with the doctor or nurse?	8.1 / 10	8.8 / 10
Overall...(patients rating their experience out of 10, with 10 being the most positive response)	7.5 / 10	7.9 / 10

Improving the experience of patients

Survey results and comments were shared with the A&E directorate who are considering the results alongside other patient experience data, in order to agree an action plan.

Feedback - 2014 National Accident & Emergency Survey Patient Comments

A sample of patient comments about our Trust from the National Accident and Emergency Survey 2014

Positive Comments

It was an organised and controlled department and I was grateful to the staff who were hard working and courteous.

The doctor I saw on the ward was excellent. I felt at complete ease and happy with the outcome of the treatment given.

I was given excellent treatment and advice.

From entering A&E to leaving was just over an hour, so I have nothing but praise for the A&E Department.

I had to wait around in all for just over 2 hours which can be a bit of a nuisance. However I was told to expect a wait for this length of time, so can't really complain.

When I first arrived at A&E, I felt very nervous and really upset but when I left I felt completely reassured as to my health problems, and for this I am extremely grateful.

Very good service from start to finish which allowed me to return to work immediately.

The doctors in A&E were fantastic; in fact they saved my life.

Negative Comments

I do feel the hospital approach should be kept cleaner. Otherwise everyone was very helpful having broken my wrist.

The food was disgusting not edible at all.

Waiting area is very noisy, dirty & unpleasant. Drinks machine broken.

We had to wait for blood test results for chest pains for 6 hours in a waiting room that resembles a bus terminal.

The staff were all very helpful and polite but I had trouble understanding the doctor and this caused me anxiety as I had been waiting in pain for 2 hrs.

I was in a lot of pain and I believe I should have been treated with more care and because of the communication barrier I felt isolated.

I wasn't shown how to use facilities in my room to alert a member of staff.

The booths when you initially explain the problem on arrival are not private enough, everyone already waiting can hear everything you said.

Feedback - 2014 National Cancer Survey Results

The National Cancer Survey 2014 was carried out across 153 acute hospital NHS Trusts on all adult patients (aged 16 and over) with a primary diagnosis of cancer who had been admitted as an inpatient or day case patient and discharged between September and November 2013. 2,877 eligible patients from this Trust were sent a survey, and 1,718 were returned, giving a response rate of 65%. This is compared to the national response rate of 64%.

Performance compared to other trusts

Compared to the other trusts that took part in the survey, Sheffield Teaching Hospitals NHS Foundation Trust was in the highest scoring 20% of Trusts on 7 questions, and in the lowest 20% of Trusts for 1 question.

Questions where the Trust scored in the highest 20% of Trusts in 2014:

Question	2014
Patient given a choice of different types of treatment	92%
Hospital staff gave information about support groups	89%
Hospital staff gave information on getting financial help	62%
Patient has seen information about cancer research in the hospital	90%
Taking part in cancer research discussed with patient	41%
Staff told patient who to contact if worried post discharge	96%
Staff definitely did everything to control side effects of radiotherapy	85%

Questions where we scored in the lowest 20% of Trusts in 2014:

Question	2014
Always given enough privacy when discussing condition/treatment	82%

Performance compared to the previous surveys

Compared to last year, the Trust scored significantly better on 3 questions in 2014, and worse on 1 question.

Questions where the Trust scored significantly better in 2014:

Question	2013	2014
Given easy to understand written information about test	86%	89%
Patient first told they had cancer by a hospital doctor	97%	98%
Had an outpatients appointment in the last 12 months	95%	97%

Questions where the Trust scored significantly worse in 2014:

Question	2013	2014
Patient definitely involved in decisions about care and treatment	77%	74%

Improving the experience of patients

Directorates and teams providing care for patients with cancer will use the patient comments, which provide substance and context to scores, to produce an action plan to improve services for patients.

Feedback - 2014 National Cancer Survey Patient Comments

A sample of patient comments about our Trust from the National Cancer Survey 2014

Positive Comments

The care was first class from start to finish.

I have been particularly impressed with the standard of care that I have received from Sheffield Hospitals.

I was seen very quickly after a routine mammogram showed a problem. Everything happened quickly after that.

The doctors, nurses and everyone involved are very good, as is the treatment I'm receiving.

The doctors and nurses at Weston Park Hospital have been amazing, very supportive, patient and kind.

My entire stay was made as comfortable as possible, nothing was too much trouble for the nurses, no matter what time of the day it was and the doctors were always at hand if they were needed.

Staff friendly and always very helpful and explained procedures in easy to follow steps i.e. what each medication's effect should feel like whilst being administered and any effects (physical) may be felt.

Throughout my treatment and operations I was given the best of care by the surgeons and nursing staff.

Negative Comments

The only complaint I have is the waiting times and delays that I have in day case at Weston Park. Last week it was 2 hours.

I was abandoned in the day room on the day of my admission for over 5 hours and no-one seemed to know or care about my situation.

Food served as an inpatient at Weston Park was frequently served cold and pre-ordered meals did not arrive, so you were given something you did not order or like.

I felt that initially after my operation I was expected to know what to do at clinic, no-one explained.

There were a few mistakes made regarding appointments. I think it was due to the lack of communication with different departments and staff.

Overall my treatment and aftercare was good, but the waiting times for me when I visited outpatients could be up to 4 half hours.

There were not enough nurses. When someone asks for a bedpan or commode they need it straight away, not half an hour later.

I think I was discharged too early. I was in a great deal of pain.

Feedback - Case Study

Using the real experience of patients alongside other feedback data is important in order to ensure the 'patient voice' is not lost. Patient stories are a powerful tool in understanding the needs and experiences of patients, their families and staff within the Trust. Often the experience of a service described by a patient can be quite different from that of staff.

Patient stories in the form of short quotes are incorporated throughout this report. However, each quarter one story will be presented in depth in the form of a case study, providing the experience of a service from the perspective of a patient.

This quarter, an in-depth review of a complaint has been selected to highlight the important lessons which can be learnt when things go wrong. This case also highlights the positive actions which are now being taken in order to improve services as a result.

The family have given their permission for their complaint to be used as a case study from which lessons can be learnt.

Overview

A patient was being treated at Weston Park Hospital having been diagnosed with cancer.

On a Friday afternoon, the patient's condition deteriorated and they became unwell. The most common reason for this would have been that their cancer had caused a blockage in the bile ducts and as a result an 'urgent' stenting procedure to clear the blockage was recommended.

The insertion of a stent is a skilled procedure and can only be done by specifically trained staff. Various attempts were made to contact the necessary staff who are trained in this procedure but no one was available. Contact was then made with the surgical team at the Northern General Hospital and at Barnsley Hospital to see if anyone could do the procedure locally, but no one was available to carry out the procedure.

In addition to this, if someone was available to carry out the procedure the patient would have required a transfer from Weston Park Hospital to the appropriate hospital, which would not have been possible before 5pm on the Friday in question. For safety reasons, these procedures are not performed at weekends as a full specialist team needs to be available to safely perform the stent.

This caused a lot of concern and anxiety for the family of the patient as the need for a stent was described as 'urgent' to which they expected immediate action and not a long and upsetting wait over the weekend. The doctor in charge of the patient's care has since explained that although the insertion of a stent was deemed 'urgent', it would not have been classed as an 'emergency', therefore the focus was on ensuring the procedure could be performed safely.

On the following Monday, a team was identified to undertake the stenting procedure and the family of the patient were informed that transport was arranged to transfer the patient from Weston Park Hospital to the Northern General Hospital.

Unfortunately on this day, Yorkshire Ambulance Service NHS Trust was reporting up to a four hour wait for non-urgent transfers. The family of the patient expected an immediate transfer and were not informed of any delays. They were also not made aware that the patient would need to be accepted onto a consultant's list before the transfer could take place. This resulted in the family calling the hospital on a number of occasions enquiring whether the patient had been transferred, and due to the information available, the wife of the patient visited the Northern General Hospital during visiting hours, when the patient had not yet been transferred from Weston Park Hospital, causing further anxiety and upset.

The stenting procedure took place on the following Wednesday and the patient was discharged from hospital on the Friday. Sadly, the patient died shortly afterwards as a result of their underlying condition.

Feedback - Case Study

In addition to the concerns raised regarding communication and the delay in transfer, concerns were also raised relating to pain management, personal hygiene and nutritional needs over the weekend of the patient's admission.

Impact on the patient's family

The patient was terminally ill and was admitted to the Trust on a Friday. He only had a few weeks left to share with his family and friends.

He was told he would need an urgent procedure, but his wife was not told that this would mean it would likely be performed during the following week. Due to this, his wife was worried that an urgent procedure was being delayed and that nothing was being done to help her husband.

Instead of considering sending the patient home to have more time with his family, he had been kept in hospital. During this time, he had not had his personal care needs met to his or his family's satisfaction. As her husband was a very proud man, this was very upsetting for his wife to see. The patient had regular pain relief, but there were occasions when he had been in pain.

The patient was due to be transferred to the Northern General Hospital on the Monday morning, but he was not transferred until the late evening. His wife was not told about the transfer and when she called the ward the following day, she was told that the stenting procedure would not take place until Wednesday – 6 days after his admission to the Trust.

Lessons to learn

There are key lessons to be learnt from this case around effective communication between staff and patients and their families.

The patient and his family were advised that the stenting procedure would be carried out 'urgently'. Although the procedure was prioritised and carried out 5 days after the patient and his family were informed, their interpretation of 'urgent' was that it would have been done sooner. It is therefore much better to give a timescale, such as '5 working days', in order to avoid misunderstandings.

As a result of this complaint and with the family's agreement, discussions have been held with the Professional & Practice Development Team so that this example can be built into communication training. A trial will commence in January 2015 where this case study will be incorporated into the newly qualified nurse and support worker training to identify the importance of effective communication. Should this trial prove successful, this case study will be used for future nurse and support worker training.

This case was also presented to and discussed at the Patient Experience Committee in October 2014.