

COMPLAINTS AND FEEDBACK REPORT

April to June 2015

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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
Complaints	<ul style="list-style-type: none"> At the end of June 2015, Labs, Engineering, Gynaecology, Imaging, Obstetrics & Neonatology (LEGION) has 11 formal complaints that remain open and beyond the 25 working day target for responding to new complaints, more than any other care group. The total number of open complaints for this Care Group accounts for 52% of all open complaints. <p>ACTION: The following areas of work are ongoing to improve complaints performance overall:</p> <ul style="list-style-type: none"> Throughout the next quarter (July to September 2015), daily monitoring will be undertaken of all complaints due to be closed each month with regular updates being sent to the Deputy Chief Nurse, Nurse Directors, Deputy Nurse Directors and Complaint Co-ordinators. Any complaints that are identified as likely to become overdue will be escalated to ensure the necessary information is available to respond to the complaint, within the appropriate timescales. The pilot project in Urology and General Surgery to trial new ways of working and improve complaint responses commenced on the 5th May 2015. Early signs show that that the pilot is progressing well, however at this stage there is insufficient data available to measure improvement. An update on the impact of the pilot will be featured in next quarter's report. Following a review by the Parliamentary Health Service Ombudsman (PHSO) this quarter, the Trust was informed that 1 of the 4 complaints that had been reviewed by the PHSO was partially upheld. This is outlined on page 14 of the report.
Website Feedback & Comment Cards	

Highlights
<ul style="list-style-type: none"> The total number of open and overdue complaints has reduced from 35 at the end of March 2015, to 21 at the end of June 2015. The biggest improvements have been seen in Emergency Care (from 9 open and overdue complaints at the end of March 2015 to 3 at the end of June 2015) and Surgical Services (from 12 open and overdue complaints at the end of March 2015 to 1 at the end of June 2015). Following a review by the Parliamentary Health Service Ombudsman (PHSO) this quarter, the Trust was informed that 3 of the 4 complaints that had been reviewed by the PHSO were not upheld.
<ul style="list-style-type: none"> 40% of all positive website feedback and comment cards received related to staff 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. In contrast, staff attitude accounts for only 14% of negative feedback received.

Summary

	Risks
Friends and Family Test (FFT)	<p>There has been a fall in the response rate for inpatients from 45% between January and March 2015 to 29% between April and June 2015. This was expected because:</p> <ul style="list-style-type: none">• From 1st April 2015, in line with national guidance, day case data was merged with inpatient data. Previously it was too complex to separate out day case patients who were on inpatient wards and therefore responses from these patients were included in the inpatient data, although they will not have counted as 'eligible' inpatients, thereby inflating the inpatient response rate.• Following the increased emphasis on response rates between January and March 2015 to meet the CQUIN target, response rates during this quarter increased at a rate which we were aware would not be maintained. It has been confirmed that there will be no FFT CQUIN target for 2015/16.• Patients are now asked to respond to the FFT at a number of different touch points, such as following appointments at GP surgeries, walk-in-centres and dentists. As a result, an element of 'survey fatigue' may affect our ability to maintain the current level of response rates. <p><u>ACTION:</u></p> <ul style="list-style-type: none">• The following minimum response rate targets have been established internally to ensure an appropriate sample size is achieved:<ul style="list-style-type: none">- Inpatient areas: 30%- A&E (including A&E, Eye Casualty and Minor Injuries Unit): 20%• From 1st June, volunteers have been visiting wards with a high number of discharges to help hand out FFT cards to patients who are being discharged that day.• A new survey contractor has now been appointed to assist in the delivery of the FFT across the Trust. A workshop event has been organised for July 2015 where the FFT and local surveys will be discussed and planned to identify how we can improve the way that these are delivered. Following this event, the Trust strategy for Patient Experience will be refreshed.

Highlights
<ul style="list-style-type: none">• The A&E response rate of 22% achieved this quarter is higher than the 12 month A&E response rate (21%) and the 12 month national average response rate (19%).• The overall percentage of patients who 'would recommend' our Trust to family and friends from all 5 elements of the FFT this quarter was 92%, a slight reduction from 93% last quarter, but this still demonstrates that the vast majority of patients responding to the FFT would recommend our Trust as a place to receive care and treatment. Nationally, 93% of patients 'would recommend' the trust where they were treated to family and friends this quarter, however, national data only includes scores from inpatient areas, A&E and maternity services. <p><u>ACTION:</u> An improved monthly FFT report has been produced from April 2015 which has a greater emphasis on patient comments and improving scores. This will enable each ward / department / service to identify any areas of their service which are receiving negative comments with a view to making improvements to address these comments. In addition, positive comments are used for assurance and to provide positive / motivating feedback to staff.</p>

Summary

	Risks
National Surveys	<ul style="list-style-type: none">• In the 2014 National Inpatient Survey, the Trust scored significantly better on 1 question compared to the 2013 survey, and significantly worse on 4 questions. It was acknowledged previously that the Trust achieved some very high scores during 2013 which would be difficult to replicate.• Compared to other trusts, in 2014, the Trust scored significantly better on 1 question and significantly worse on 2 questions.• These results are detailed on page 26 of this report. <p>ACTION: Action plans are agreed following all national surveys in order to address areas where improvements can be made. Actions will be reported in the next quarterly report.</p>

Highlights
<ul style="list-style-type: none">• Compared to the other 10 trusts in the Shelford Group, the Trust received the second highest score (8.4 out of 10) to the question which relates to patients who felt they had a good experience, and also achieved a higher score than the national average (8.1 out of 10).

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.

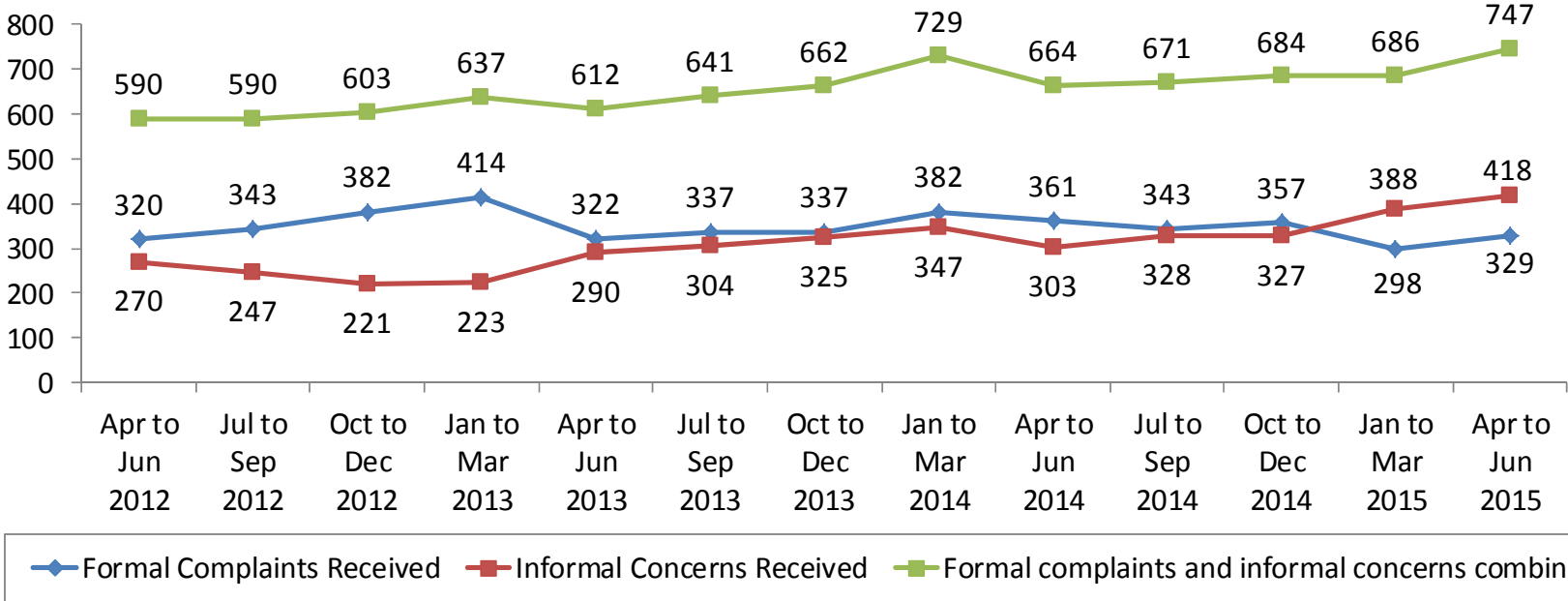
The Trust participates in the Patients Association complainant satisfaction survey, which asks for feedback from complainants on how the Trust managed their concerns. Results of the survey will be monitored and feature in future reports as and when they become available.

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 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 329 new formal complaints were received, an increase from 298 received last quarter. 418 informal concerns were received this quarter, compared with 388 last quarter. By combining the number of formal complaints received and the number of informal concerns, a total of 747 were raised between April and June 2015, an increase from 686 received last quarter, and significantly more than the 664 received in the same quarter of 2013/14.

The number of informal concerns recorded has continued to increase and more have been recorded between April to June 2015 than in any other quarter since informal concerns were first recorded back in December 2011. This is positive as when concerns are managed informally it often results in a swifter resolution of the concern for the complainant and has less impact on resources.

The graph above shows that when complaints data are presented as a quarterly breakdown rather than monthly, although there has been an increase for April to June 2015 compared to the previous quarter, over the past 6 months there has been a significant decrease in the number of formal complaints received overall.

Complaints – Formal complaints received by patient activity

Proportion of patients who have made a formal complaint

	Number of patients treated for each complaint received		% of patients who have made a complaint	
	Last 12 months	Current Qtr Apr- Jun 15	Last 12 months	Current Qtr Apr- Jun 15
Combined Community & Acute Care	1242:1	1290:1	0.08%	0.08%
Emergency Care	660:1	571:1	0.15%	0.18%
- Accident & Emergency*	1072:1	1499:1	0.09%	0.07%
Head & Neck Services	1751:1	1658:1	0.06%	0.06%
Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology	1140:1	1067:1	0.09%	0.09%
- Maternity Services*	5295:1	3405:1	0.02%	0.03%
Operating Services, Critical Care & Anaesthesia	615:1	537:1	0.16%	0.19%
South Yorkshire Regional Services	1034:1	845:1	0.10%	0.12%
Specialised Cancer, Medicine & Rehabilitation	2567:1	3815:1	0.04%	0.03%
Surgical Services	855:1	919:1	0.12%	0.11%
Trust total	1217:1	1162:1	0.08%	0.09%

* Accident & Emergency and Maternity Services 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, and Maternity Services complaints are also included in the data for LEGION.

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.

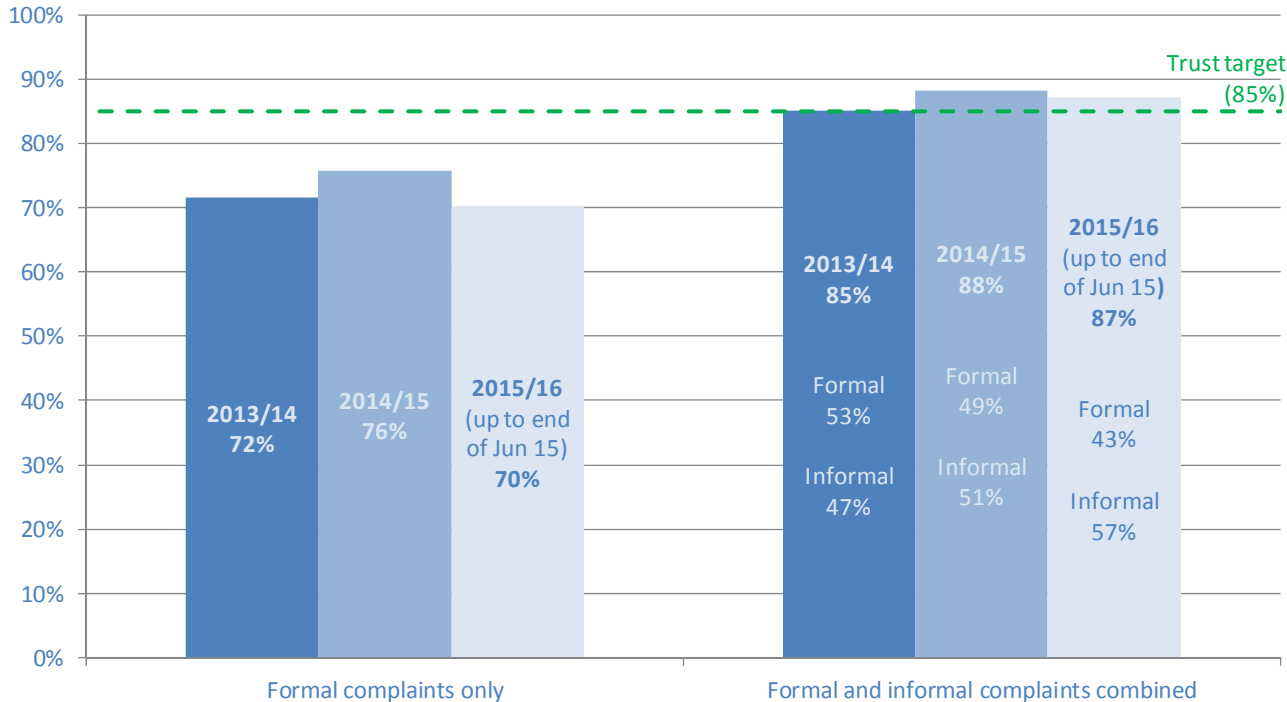
In previous reports, the data above has been separated into inpatient and outpatient areas, and was extracted from the KO41 return section on the complaints database. However, from the 1st April 2015, the method of how these data are collected and submitted to Department of Health changed, and a system update is required on the complaints database to be able to record these data. As a result, the Trust has been keeping manual records but we are not

able to report on complaints received by inpatient or outpatient areas this quarter. These data will be updated retrospectively on the complaints database once the system update has been rolled out.

The data above show that over the past 12 months, the Trust treated 1217 patients for every formal complaint received, which equates to 0.08% 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 (April to June 2015) with 1162 patients being treated for every formal complaint received, equating to 0.09% of patients treated making a formal complaint.

Complaints – Response times

Percentage of formal and informal complaints closed within 25 working days



The Trust works to a locally set target of responding to at least 85% of formal complaints within 25 working days. This is an aspirational target set at a high level which the Trust strives to achieve. In addition, all informal concerns are managed within 2 working days.

The columns on the left of the graph above show that the Trust has not achieved the 85% target for the past two financial years. However, emphasis has been placed on managing complaints informally, where appropriate, during this time.

As a higher proportion of concerns are managed informally, this means that those less complex complaints that would have been dealt with quickly in the formal process are now managed informally. This results in only the more complex complaints that take longer to resolve remaining in the formal

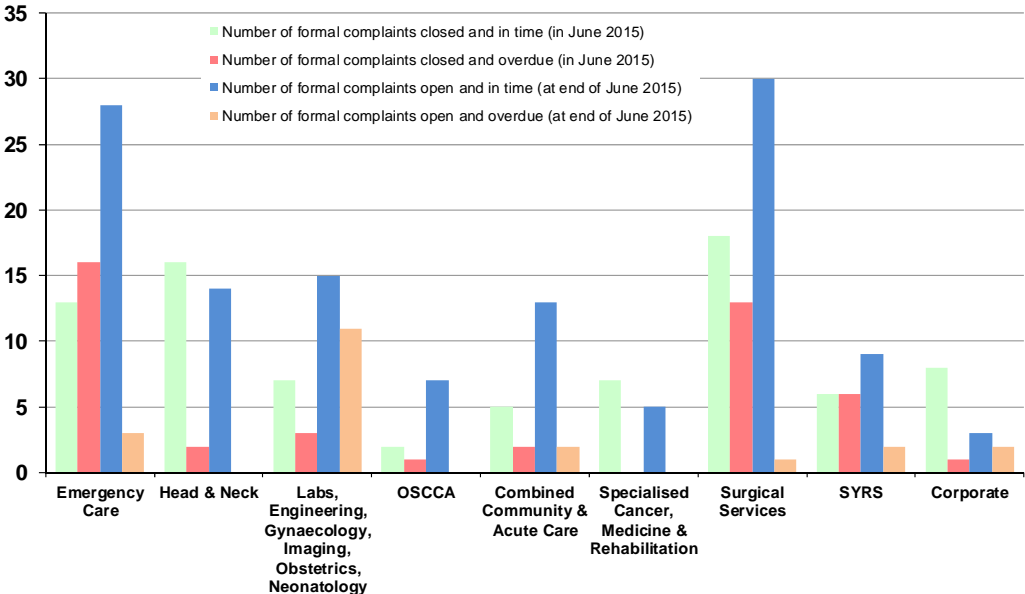
process, which has an impact on response times.

The columns on the right show the Trust response rate when both formal complaints and informal concerns are combined. This illustrates that a high proportion of concerns that are made to the Trust, formally and informally, receive a timely resolution.

Between July and September 2015, there will be increased emphasis to ensure all formal complaints are managed effectively and that every effort is made to ensure they are resolved within the 25 working day timescale. Close monitoring will be undertaken and any complaints that appear as though they may not achieve the target will be escalated when appropriate. This will ensure the response time improves and the Trust will start to regularly achieve the 85% target.

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 (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 June 2015, as the number of overdue complaints changes daily as does the number of complaints closed.

Over the past quarter, 317 formal complaints have been closed, an increase from 301 formal complaints closed between January and March 2015. 14% (21) of all open complaints remain overdue, an improvement from 24% (36) of all open complaints being overdue at the end of March 2015. Labs, Engineering, Gynaecology, Imaging, Obstetrics and Neonatology (LEGION) is the group with the highest number of overdue complaints with 11.

Both Emergency Care and Surgical Services have made a significant improvement in the number of overdue complaints over the past quarter. At the end of March 2015, Emergency Care had 9 overdue complaints, this has reduced to 3 at the end of June 2015. Surgical Services had 12 overdue complaints at the end of March 2015, this has reduced to 1 at the end of June 2015.

Weekly monitoring of the status of overdue complaints will continue so that early interventions can be made.

The pilot project in Urology and General Surgery to trial new ways of working and to improve complaint responses commenced on the 5th May 2015. Early indications are that the pilot is progressing well, however at this stage there is insufficient data available to measure improvement. An update on the impact of the pilot will be featured in next quarter’s report, when there will be nearly 5 months’ worth of data available.

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
(April 2015 to June 2015)**

**Last 12 months
(July 2014 to June 2015)**

#	Subject	Qty	% of all subjects raised
1	Communication with patient	93	14%
2	Communication with relative / carer	34	5%
3	Attitude	32	5%
4	Access to information	29	4%
5	General nursing care	24	4%
5	Appropriateness of medical treatment	22	3%
7	Waiting time for follow-up appointment	21	3%
7	Cancellation of appointment	19	3%
9	On waiting list for procedure	19	3%
10	Unhappy with outcome of surgery	13	2%

#	Subject	Qty	% of all subjects raised
1	Communication with patient	351	13%
2	Attitude	134	5%
3	Appropriateness of medical treatment	129	5%
4	General nursing care	103	4%
5	Communication with relative / carer	100	4%
6	Access to information	92	3%
7	Waiting time for follow-up appointment	71	3%
8	Delay in treatment	68	3%
8	On waiting list for procedure	64	2%
10	Unhappy with outcome of surgery	63	2%

Of the 93 subjects coded against ‘communication with patient’ between April and June 2015, 64 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.

whether the number of complaints relating to ‘general nursing care’ have reduced since the intervention by the Patient Experience Committee. The outcome of this review are featured on page 29 of this report.

The tables above show that ‘attitude’ and ‘communication’ consistently feature in the top 3 most raised subjects in formal complaints and informal concerns. They also regularly feature in the most raised subjects through website feedback and comment cards.

In September 2014, the Patient Experience Committee undertook a review into complaints relating to ‘general nursing care’. This review identified 4 directorates that received the highest number of complaints relating to this subject (Emergency Medicine, General Surgery, Orthopaedics and Geriatric & Stroke Medicine). A six month review has been undertaken to identify

Complaints - Subjects raised in formal complaints

Top 10 subjects raised in formal complaints by Care Group

	Communication with patient	Appropriateness of medical treatment	Attitude	General nursing care	Unhappy with outcome of surgery	Labour Care	Missed diagnosis	Choice of medical treatment	Pain / discomfort - medical	Communication with relative / carer
Emergency Care	5	3	6	5	0	0	1	1	3	0
Head & Neck Services	5	6	3	0	6	0	2	1	2	1
Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology	0	0	0	0	2	11	2	0	0	1
Operating Services, Critical Care & Anaesthesia	3	1	0	0	0	0	0	1	2	0
Combined Community & Acute Care	1	1	0	4	2	0	2	0	0	3
Specialised Cancer, Medicine & Rehabilitation	4	2	1	1	0	0	0	0	0	1
Surgical Services	9	2	2	3	2	0	2	3	1	0
South Yorkshire Regional Services	0	3	2	0	0	0	0	2	0	1
Trust Wide Departments	3	0	1	0	0	0	0	0	0	0
TOTAL	30	18	15	13	12	11	9	8	8	7

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 April and June 2015 are 'communication with patient' (30) and 'appropriateness of medical treatment' (18).

'Communication with patient' is the most frequently raised subject for 4 Care Groups, and with the exception of 'labour care' (which is specific to LEGION) has been raised more than any other subject for a single Care Group, being raised 9 times in Surgical Services.

Of the 9 complaints relating to 'communication with patient' for Surgical Services this quarter, upon investigation these complaints did not relate to a specific location or theme. Complaints relating to this subject for Surgical Services will continue to be monitored.

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

	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	Oct to Dec 14	Jan to Mar 15	2014/15	Apr to Jun 15	2015/16
Number of new PHSO cases	4	5	7	20	3	3	1	7	14	6	6	7	10	29	5	5
Number of PHSO decisions	4	2	6	15	3	0	1	1	5	4	8	3	5	20	4	4
Number of PHSO cases fully or partly upheld	0	0	1	1	0	0	0	1	1	2	1	0	0	3	1	1

New PHSO cases this quarter

This quarter, 5 new information requests have been received, these relate to the following directorates:

- **Emergency Care**
 - Gastroenterology (1)
- **Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology**
 - Gynaecology (1)
 - Obstetrics (1)
- **South Yorkshire Regional Services**
 - Cardiothoracic Services (1)
- **Surgical Services**
 - Orthopaedics (1)

New PHSO decisions this quarter are presented on the following page

New PHSO decisions this quarter

There were 4 new decisions received from the PHSO during this quarter:

- **Medical Imaging and Medical Physics (NOT UPHELD)**

The complainant raised concerns regarding the care and treatment provided during an endoscopy procedure undertaken in the Radiology Department.

The Ombudsman concluded that the care and treatment received by the patient was in line with accepted good practice and was carried out with the patient's safety in mind.

- **Urology (NOT UPHELD)**

The complainant raised concerns regarding the medical care received from the Urology Department.

The Ombudsman concluded that they identified no failings by the Trust in relation to the issues raised, and that the Trust responded to the complaint in a reasonable and accurate way.

- **Neurosciences (NOT UPHELD)**

The complainant raised concerns that they did not receive adequate diagnosis, care and treatment resulting in them suffering from unnecessary anxiety and distress.

The Ombudsman concluded that the care and treatment received by the patient was in line with recognised quality standards and established good practice.

- **Obstetrics (PARTIALLY UPHELD)**

The complainant raised a number of concerns regarding the postnatal care and treatment afforded to her and her child while on the Maternity Unit.

The Ombudsman identified failings in relation to some of the patient's concerns, namely communication regarding the time taken to move the patient from the labour ward, derogatory comments made about the patient by a midwife and missed meals. The Ombudsman concluded that in relation to these matters, the Trust has not taken appropriate action to put things right and/or demonstrate learning to prevent the same thing from happening again. Therefore the Ombudsman partially upheld this complaint.

The Ombudsman recommended the Trust write to the patient acknowledging the failings highlighted and offer an apology. It was also recommended that the Trust make a payment to the patient for the additional costs incurred when buying replacement meals. The Trust is to review, reflect and discuss how communications between ward staff and patients can be improved, and share the outcome of these discussions and any actions taken as a result with the patient.

Complaints - Actions as a result of formal complaints

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.

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

Ward/Department/Service	Issues identified	Actions agreed
Neurosciences	<p>A patient raised concerns that correspondence from the Trust had been sent to the wrong address on two occasions. On the second occasion the patient received their letter in a clear Royal Mail bag which suggested the letter had been opened and contained details of the patient’s medical condition.</p> <p>Upon investigation it was identified that the patient information system (PAS) did have the correct address recorded, however, the address was handwritten onto the envelope and was incorrectly copied from the PAS system.</p>	<ul style="list-style-type: none"> • The member of staff who wrote the address has been identified, and it has been made clear to the individual that this error has led to a potential breach of confidentiality as the letter was sent to the wrong address. • This matter is being considered under the Serious Untoward Incident reporting procedures. • As a result of this complaint systems and processes have been reviewed, and invitation letters will now be generated via the clinical appointments team, as opposed to the neuroscience research office. Any other letters that are sent out by the neuroscience research office will now be sent using computer generated stickers only.
District Nursing Team, Integrated Community Care	<p>A complainant raised concerns about the care received by their mother from the District Nursing Service.</p> <p>The District Nursing Team routinely visited the patient to treat leg ulcers. The patient had developed a new pressure ulcer elsewhere on their body which resulted in them contracting septicaemia and subsequently dying.</p> <p>The complainant asked whether, had the new pressure ulcer been attended to sooner, could it have been treated more successfully, as it had worsened beyond being treatable by the time it was treated.</p>	<ul style="list-style-type: none"> • Upon investigation, it has been determined that the pressure ulcer was treated appropriately as soon as nursing staff were made aware of it, and that the deterioration happened before staff were made aware of the ulcer. • As a result of the investigation, it has been acknowledged that a fuller more holistic assessment of the patients’ needs could have taken place, not just focusing on the need to redress the leg ulcers. • It is felt that this assessment should have included talking to the complainant, as the main carer, about anything else the service could have done to support the care of the patient. • This case has been discussed by the District Nursing Team who have reflected and learnt from the outcome. The team have produced a checklist for staff that will prompt them when assessing patients and the need to support the family who may be providing the care to the patient.

Complaints – Patients Association complaints survey

The Patients Association have developed the complaints survey to monitor the quality of complaint handling. The complaints survey is a resource for trusts to monitor the way they handle complaints against the Patients Association’s Good Practice Standards. These standards were recommended for adoption across the NHS in the Francis Report¹.

This Trust has been participating in this survey since April 2014, and the survey is sent to all complainants 10 weeks after the final response to their complaint.

In April 2015, the Patients Association published the 2014/15 Complaints Survey Annual Report which lists results for our Trust, as well as benchmarked data against all other participants in the survey.

The survey consists of 19 questions relating to every aspect of the complaints process, such as timeliness, how the complaint was handled, helpfulness of staff, and communication.

The report covers April 2014 to March 2015, during which time 23 trusts participated, of which 5 are acute trusts with community services (including this Trust, which is the only teaching hospital). The report is based on 1,527 survey responses, of which 258 relate to this Trust.

Overall, this Trust scored similar to the other participating trusts, and there were no areas where the Trust performed significantly worse.

The representative who spoke with me over the telephone was very helpful and told me exactly what would happen.

Our discussions by phone or letter were always amicable, and they fully understood my serious complaint.

The process was very formal, at the end of the day all I wanted to hear was “we are very sorry, your concerns have been addressed and to the best of our ability, that will not happen again”.

I felt it was my duty to inform the hospital regarding the actions of the consultant treating me. This was dealt with very quickly and treated seriously. I was completely satisfied with the action taken.

My point of contact was very caring and gave me plenty of time when I was distressed and also plenty of options on dealing with my initial complaint. Whilst she was very professional I really got a sense of care from her.

The table below presents results where the Trust has performed better than the average of all participating trusts:

Question	STH	All Trusts
% who felt the complaint was handled 'well' or 'very well'	34%	31%
% who said the timescale of the complaint was discussed at the beginning of the process	56%	54%
% who felt their complaint was dealt with 'quickly enough'	38%	32%
% who said they were kept 'very well informed' or 'well informed' about the progress of their complaint	30%	28%
% who said they were 'very satisfied' or 'satisfied' with the final response to the complaint	29%	26%

It is very pleasing that from the survey a number of positive comments have been made where individual members of staff have been named. All staff mentioned in comments have been notified. A selection of comments from complainants are presented at the bottom of this page.

The Trust is currently reviewing the survey in terms of how it is managed and how the results are used to drive improvements in the way complaints are managed.

¹ Francis RQC (2013) - Report of the Mid Staffordshire NHS Foundation Trust Public Enquiry: London; the Stationery Office

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 covers inpatients, outpatients, A&E, maternity services, 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. This quarter's report provides a summary of results from the National Inpatient Survey 2014.

As reported last month, the Trust has now completed the re-tendering process for our survey providers.

From the 1st June 2015, the Picker Institute have been selected as our provider for the national survey programme, and Healthcare Communications have been selected as our local surveys and Friends and Family Test (FFT) provider.

Moving to a single provider for local surveys and FFT with Healthcare Communications, who are already familiar with the Trust, having provided our telephone based surveys for the FFT for the past 18 months, provides us with an excellent opportunity to review and refresh our approach to patient surveys and to plan for the medium term.

The July Patient Experience Committee will be held as a 'time out' planning session with a focus on gathering views in relation to the Trust's new approach to patient surveys. The session will be attended by relevant people across the Trust who have an interest in surveys and will include managers, operational staff, governors, Sheffield HealthWatch and survey volunteers. The session will be facilitated by Healthcare Communications and will include a number of workshop group discussions to gather ideas and views on the Trust's approach to surveys over the next 3 years.

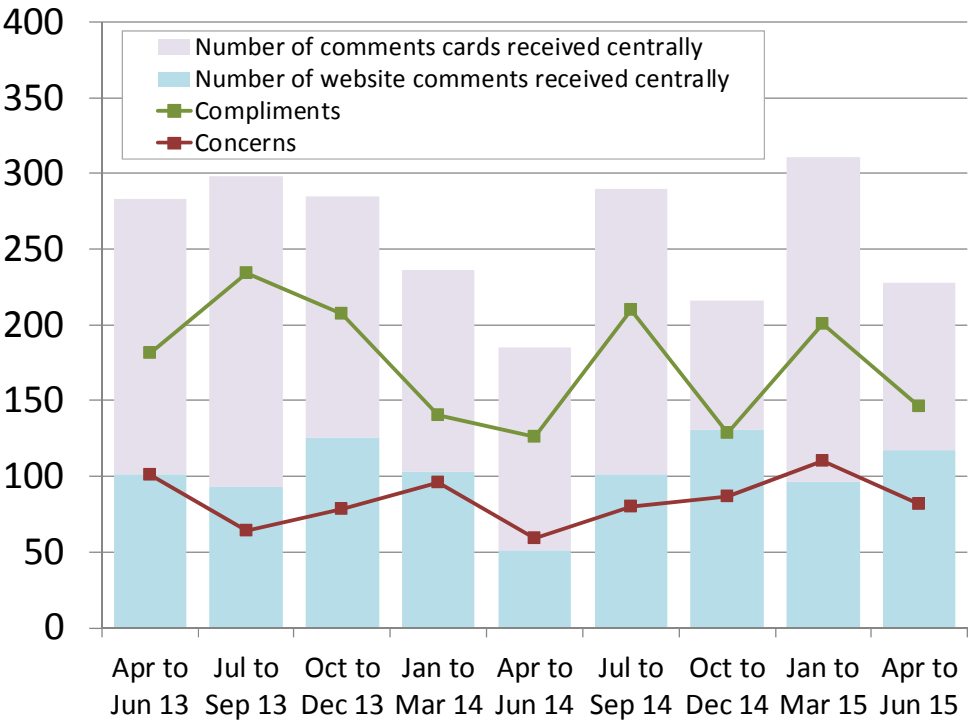
The outcomes from the workshop will feed into a new strategy and work programme for patient experience, which we hope will ensure a planned and coherent approach.

Feedback - Website feedback & comment cards

During the period April to June 2015, 111 comments cards were completed and 117 comments left via website feedback. Therefore a total of 228 individual comments have been received regarding the Trust during this period, of which 346 individual themes have been identified.

Of all website feedback and comment cards received this quarter 70% have been positive, which compares to 74% last quarter.

The chart below shows the comments cards and website feedback received by quarter and the breakdown of these by compliments and concerns.

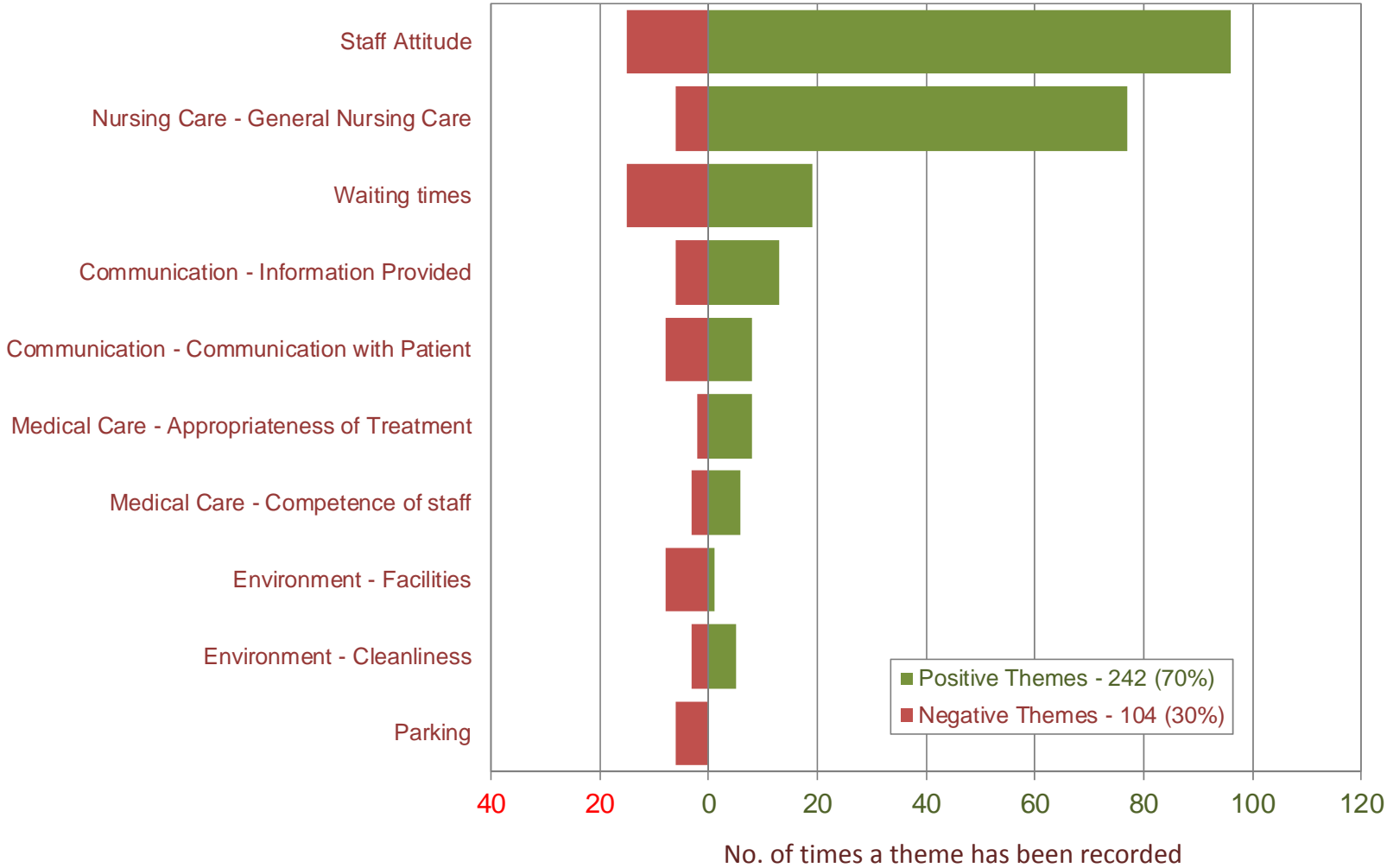


% of positive comments from all comments received centrally			
Current Quarter (Apr to Jun 2015)		Last 12 months (Jul 14 to Jun 15)	
%	QTY	%	QTY
70%	242	72%	1250

% of negative comments from all comments received centrally			
Current Quarter (Apr to Jun 2015)		Last 12 months (Jul 14 to Jun 15)	
%	QTY	%	QTY
30%	104	28%	496

Feedback - Themes raised in website feedback and comment cards

Top 10 themes raised in website feedback and comment cards between April and June 2015



The care and treatment I received from my consultant and all the team was first class

The professionalism and friendliness of the staff made me feel important

Kept waiting for over two hours, no one seemed to know what was going on

The staff were irritated, uncaring and made me feel very foolish

Feedback – Letters of thanks

As well as the formal methods of leaving feedback such as comment cards, the Friends and Family Test, and Frequent Feedback, 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. However, the complaints database is being updated to enable wards to record the number of ‘letter of thanks’ received locally each month; once operational this data will be included in this report.

The table below show the number of ‘letter of thanks’ received over the past 12 months:

Letter of thanks received by quarter:

Jul-Sep 2014	Oct-Dec 2014	Jan-Mar 2015	April - Jun 2015
273	183	146	251

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.

Consent has been given by all patients for us to publish their feedback.

Ophthalmology, Royal Hallamshire Hospital

I cannot praise your hospital enough, every service; food, nursing staff, cleaning staff, the politeness of everyone concerned, not forgetting the theatre staff who really put me at ease.

Big thanks, I would recommend the Hallamshire to everyone. You all are a credit to your profession and the NHS.

Cardiac Arrhythmia Team, Northern General Hospital

I am writing to thank you for the excellent care I have received over the past two years from the Arrhythmia Team at the Northern General.

In particular, I would like to commend the Cardiology Consultant for his careful honest explanations and patience in consultations with me, and above all good decisions on my care. I would also like to thank the excellent Arrhythmia Nurses who have been a great support during my care under this department, always helpful, friendly and professional.

I feel that this department and these staff in particular have really helped me to get my life back on track since my heart attack in 2012 and subsequent arrhythmia problems.

Ward M2, Royal Hallamshire Hospital

My father is at your hospital on ward M2, he has been there since Weds, and we are from North Wales.

We would like to praise the staff on M2 ward, they are fantastic and a credit to the hospital, just wished we had a hospital like this back home in North Wales.

The doctors are fantastic and all the staff; I have never experienced such service and professionalism in any other hospital.

And what really stands out is everyone is so friendly, I really can’t praise the Hallamshire enough I really can’t.

Feedback – Letters of thanks

Frith 7, Northern General Hospital

Two weeks ago I was admitted to Frith 7 to have a pacemaker fitted.

I just wanted to say how brilliant everyone was on a very busy ward. From the cleaners and tea ladies, etc. to the surgeon who operated on me they were fantastic.

I am very grateful for all the care and kindness I received.

MAU 2, Northern General Hospital

I just wanted to say a huge, huge thank you for everything you did to fix me up and make me better during my stay at Northern General.

Every single one of you treated me with nothing but care and compassion and I'm in no doubt that without your thoughtfulness and professionalism, I would still be in a pretty dire state.

It really was a pleasure to get to know some of you and I will be forever grateful.

Brearely 4 and Palliative Care, Northern General Hospital

My mother was admitted to NGH after being diagnosed with Mesothelioma and unfortunately coming to the end of her life.

As I am sure you can appreciate, this is a very traumatic time for myself and family members.

The reason for this e-mail is to express my appreciation for the way which she is being cared for with great dignity, care and professionalism throughout. Therefore this is making the very traumatic experience slightly easier by knowing that she is being cared for in this manner.

The doctor overseeing my Mum's care deserves recognition for his personal qualities and the care which he genuinely gives. Please pass on my thanks. In addition the staff of Brearely 4 and the Palliative Care team are truly a credit to yourself and the hospital. I feel that they deserve recognition for this.

Medical Imaging & Medical Physics, Northern General Hospital

I would like to say how grateful I am for the delightful way I have been treated over the last month by all your radiographers.

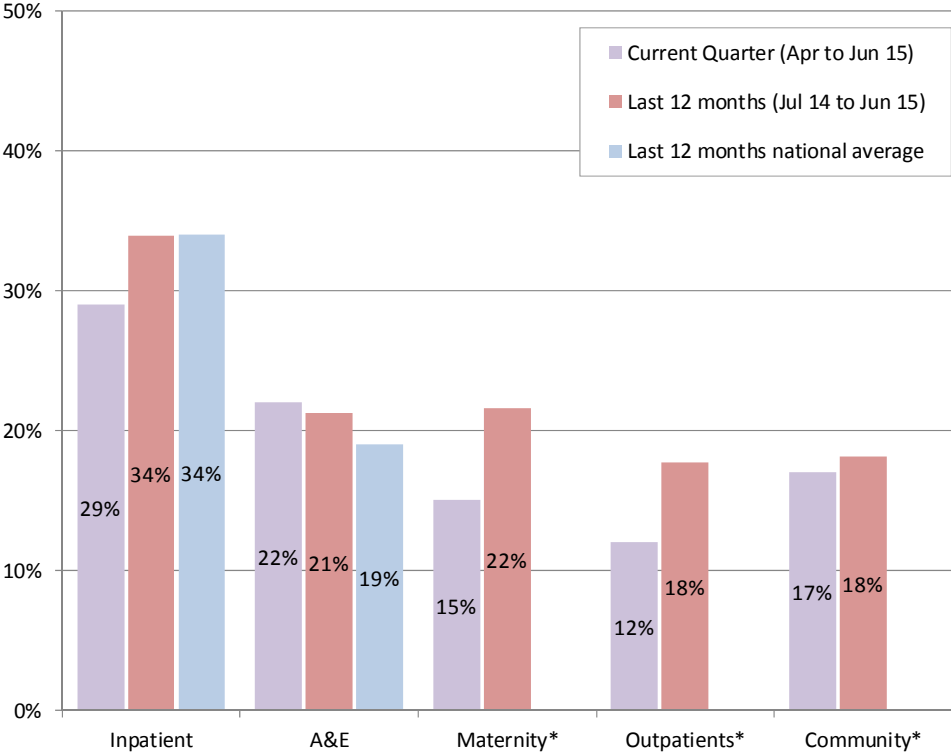
Their lovely manner, from the moment I arrived in the department, to the day I left having finished my treatment, made a grim situation so much more bearable.

I think it must be really difficult to keep up those levels of friendliness and pleasantness all day / shift long, but they never failed. I am very impressed that they can do that, and their work demonstrates a great ethos that you must have some part in promoting and encouraging – long may it be so; you and your team are what we should be so proud of in the NHS.

Feedback - Friends & Family Test

The Trust is now carrying out the Friend and Family Test (FFT) in inpatient, A&E, maternity services, outpatients and community services.

Response rates



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

Between April and June 2015, 7968 inpatients, 5312 A&E patients, 660 maternity services patients, 30004 outpatients and 5109 community patients from the Trust completed the FFT survey, giving a total of 49053 responses this quarter.

Although the inpatient response rate has decreased from 45% between January and March 2015 to 29% between April and June 2015, the table

below shows that there has actually been a 13% increase in the number of patients that have responded to the FFT.

	Jan to Mar 2015	Apr to Jun 2015	% difference
Inpatient	7075	7968	13%
A&E	3697	5312	44%
Maternity	1188	660	-44%
Outpatients	48229	30004	-38%
Community	5361	5109	-5%

From 1st April 2015, in line with national guidance, day case data was merged with inpatient data, so results for these areas have been combined under 'inpatient' data. This may have had an impact on the overall inpatient response rate as previously it was too difficult for staff to separate out those patients on inpatient wards who were day cases and therefore responses from these patients have always been included in the inpatient data, although they will not have counted as 'eligible' patients, thereby inflating the inpatient response rate.

There was increased emphasis on response rates between January and March 2015 due to the CQUIN target. It was expected that the response rates would drop following this period. It has been confirmed that there will be no FFT CQUIN target for 2015/16.

To ensure there is an appropriate level of confidence in FFT scores, minimum response rate targets have been established internally to ensure an appropriate sample size for each area is achieved. For April to June 2015, inpatient areas achieved a response rate of 29%, slightly below the 30% target. A&E areas (including A&E, Eye Casualty and Minor Injuries Unit) achieved 22%, above the 20% target.

Patients are now asked to respond to the FFT at a number of different touch points, such as following appointments at GP surgeries,

Feedback - Friends & Family Test

walk-in-centres and dentists. As a result, patients may not respond every time they are asked which could affect our ability to maintain the current level of response rates. In addition to this, patients who regularly attend outpatient or community appointments will only be asked to participate in the FFT once every 3 months; however these will still be counted as eligible patients for every visit.

Response rates are only reported nationally for inpatient, A&E and maternity birth. Therefore it is not possible to report national average response rates for the other elements of FFT.

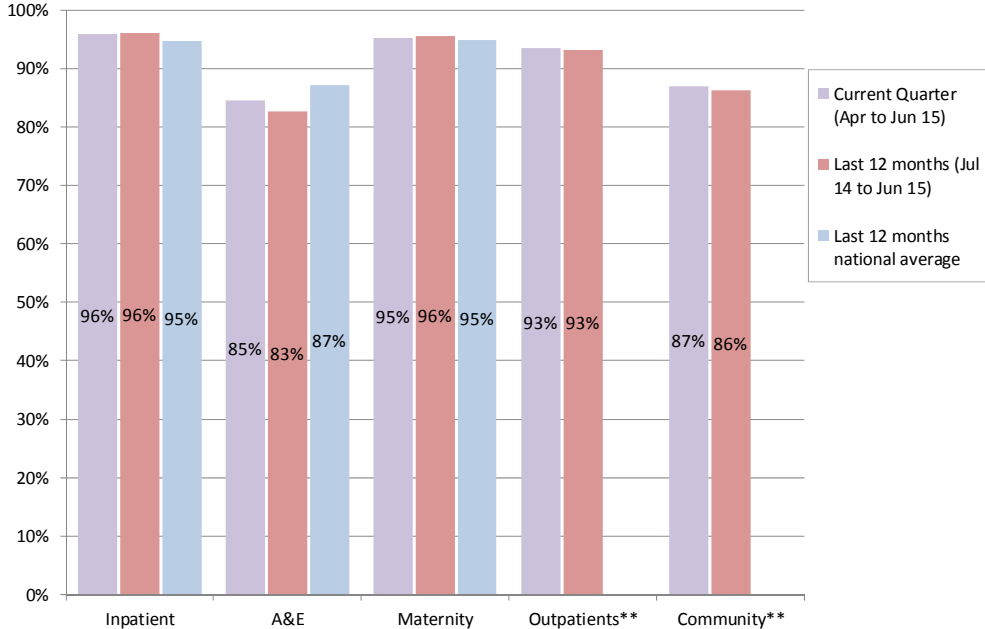
Highest performing wards/departments by response rate

	April to June 2015			Last 12 months (Jul 14 to Jun 15)
	Eligible Patients	Responses	Response Rate	
M2	63	62	98.4%	90.4%
Osborn 4	18	15	83.3%	70.9%
Osborn 1	26	21	80.8%	86.4%
P1 / CIU	279	204	73.1%	71.6%
Q2	57	39	68.4%	56.2%

Lowest performing wards/departments by response rate

	April to June 2015			Last 12 months (Jul 14 to Jun 15)
	Eligible Patients	Responses	Response Rate	
Brearley 6	83	5	6.0%	17.0%
Robert Hadfield 3	85	13	15.3%	18.2%
Brearley 1	114	19	16.7%	29.4%
Huntsman 6	262	45	17.2%	16.4%
Brearley 2	277	53	19.1%	28.4%

Scores



** FFT scores are not currently published nationally, therefore it is not possible to provide a national average scores at this stage.

The overall percentage of patients who ‘would recommend’ our service to friends and family from all 5 elements of the FFT was 92% this quarter, a slight reduction from 93% last quarter. This still demonstrates that the vast majority of patients responding to FFT would recommend the Trust as a place to receive care and treatment.

During this quarter both inpatient (95.9%) and maternity (95.2%) scores are higher than the 12 month national average, however the score for A&E between April and June 2015 is 2% lower than the 12 month national average. The Trust’s FFT score for A&E has improved from 82.9% between January and March 2015 to 84.5% between April and June 2015.

An improved monthly FFT report has been produced which has a greater emphasis on patient comments and improving scores. The new report

Feedback - Friends & Family Test

still lists the number of eligible patients, responses and the response rate for each ward, but also presents the positive and negative scores along with a link to all patient comments for each ward which will enable each ward to identify any areas of the service which are receiving negative comments with a view to making improvements to address these comments. In addition, positive comments are used for assurance and to provide positive / motivating feedback to staff. An example of the new monthly report is presented opposite.

Next steps

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

- A new survey contractor has now been appointed to assist in the delivery of the FFT across the Trust. A workshop event has been organised for 28th July where the FFT and local surveys will be discussed and planned to identify how we can improve the way that these are delivered.
- Future improvements will include a re-launch of FFT to raise awareness of the survey, including a more consistent approach to marketing material such as posters, surveys, leaflets and reports.
- From 1st June, volunteers have been visiting wards to help hand out FFT cards to patients who are being discharged that day. It is hoped that this will help increase response rates, particularly on wards with a high number of discharges.

New monthly FFT report:

Friends and Family Test Monthly Report June 2015								
Response rate target for A&E, Eye Casualty and Minor Injuries is 20%								
Response rate target for Inpatient is 30%								
Inpatient wards achieving 30% and above are highlighted in green								
Inpatient wards achieving 25% - 29% are in amber								
Inpatient wards achieving below 25% target are highlighted in red								
Care Group	Directorate	Ward	No. of Discharges	No. of Responses	Response Rate	Positive Score	Negative Score	Comments
Emergency Care								
A&E								
		A&E	6060	1213	20.0%	83%	8%	Comments
		Minor Injuries	1448	297	20.5%	85%	6%	Comments
Diabetes and Endocrinology								
		Robert Hadfield 1	81	41	50.6%	98%	0%	Comments
		Robert Hadfield 2	61	24	39.3%	92%	0%	Comments
Gastroenterology								
		P1 / CIU	167	67	40.1%	94.0%	0%	Comments
		Robert Hadfield 3	92	24	26.1%	96%	0%	Comments
		Robert Hadfield 4	83	41	49.4%	98%	2%	Comments
General Medicine								
		MAU 2	213	85	39.9%	93%	2%	Comments
		MAU 1	339	159	46.9%	99%	0%	Comments
		Huntsman 5	200	70	35.0%	89%	9%	Comments
Respiratory Medicine								
		Brearley 1	94	37	39.4%	100%	0%	Comments
		Brearley 2	118	29	24.6%	100%	0%	Comments
		Brearley 3	95	73	76.8%	100%	0%	Comments
		Brearley 4	46	22	47.8%	86%	9%	Comments
		Cystic Fibrosis Ward	50	4	8.0%	100%	0%	Comments
		M2	63	62	98.4%	100%	0%	Comments
Combined Community & Acute								
Integrated Geriatric & Stroke Medicine								
		Brearley 5	37	9	24.3%	100%	0%	Comments
		Brearley 6	29	1	3.4%	100%	0%	Comments
		Brearley 7	22	4	18.2%	100%	0%	Comments
		Frailty Unit	116	36	31.0%	97%	3%	Comments
		Q1	20	4	20.0%	75%	0%	Comments
		Q2	19	17	89.5%	100%	0%	Comments
		Robert Hadfield 5	36	23	63.9%	91%	0%	Comments
		Robert Hadfield 6	30	3	10.0%	100%	0%	Comments
		Vickers 1	164	13	7.9%	100%	0%	Comments
		Beech Hill	22	17	77.3%	100%	0%	Comments
		IC Beds	76	4	5.3%	75%	0%	No Comments
Therapeutic Palliative Medicine								
		Palliative Care Unit	14	8	57.1%	100%	0%	Comments

Robert Hadfield 3: The staff show care, compassion, empathy and a true sense of wanting to help the patient recover

Ward M2: This is a friendly ward with helpful staff and good facilities

Brearley 7: Extremely caring ward, lovely staff who are always busy and interacting with their patients. Very impressed

Feedback - Friends & Family Test benchmarking

The tables below show the FFT performance for this Trust between April and June 2015. 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			
1	University Hospitals Birmingham	39.9%	1	King's College Hospital	25.1%
2	Guy's And St Thomas'	32.8%	2	Sheffield Teaching Hospitals	21.8%
3	Sheffield Teaching Hospitals	29.2%	3	University College London Hospitals	21.2%
England Average		26.8%	4	University Hospitals Birmingham	20.3%
4	Cambridge University Hospitals	25.1%	5	Guy's And St Thomas'	17.8%
5	Imperial College Healthcare	22.3%	6	Cambridge University Hospitals	16.3%
6	University College London Hospitals	22.2%	England Average		14.7%
7	King's College Hospital	16.1%	7	Central Manchester University Hospitals	9.4%
8	The Newcastle Upon Tyne Hospitals	16.0%	8	Oxford University Hospitals	7.4%
9	Central Manchester University Hospitals	14.0%	9	Imperial College Healthcare	6.3%
10	Oxford University Hospitals	8.6%	10	The Newcastle Upon Tyne Hospitals	1.1%

Scores

Inpatient		A&E		Maternity				
1	The Newcastle Upon Tyne Hospitals	98.0%	1	University College London Hospitals	94.8%	1	The Newcastle Upon Tyne Hospitals	96.1%
2	University College London Hospitals	96.8%	2	Cambridge University Hospitals	91.8%	2	Cambridge University Hospitals	95.8%
3	Oxford University Hospitals	96.7%	3	The Newcastle Upon Tyne Hospitals	90.4%	England Average		95.7%
4	University Hospitals Birmingham	96.3%	4	Central Manchester University Hospitals	89.5%	3	Sheffield Teaching Hospitals	95.2%
5	Sheffield Teaching Hospitals	95.9%	5	Imperial College Healthcare	88.1%	4	University College London Hospitals	95.0%
England Average		95.7%	England Average		88.1%	5	Oxford University Hospitals	95.0%
6	Guy's And St Thomas'	95.5%	6	University Hospitals Birmingham	88.0%	6	Guy's And St Thomas'	92.3%
7	Cambridge University Hospitals	95.2%	7	Guy's And St Thomas'	85.3%	7	Central Manchester University Hospitals	92.1%
8	Imperial College Healthcare	94.8%	8	Oxford University Hospitals	84.6%	8	Imperial College Healthcare	90.5%
9	Central Manchester University Hospitals	94.4%	9	Sheffield Teaching Hospitals	84.5%	9	King's College Hospital	89.9%
10	King's College Hospital	93.7%	10	King's College Hospital	81.9%			

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

Feedback - 2014 National Inpatient Survey results

The National Inpatient Survey 2014 was carried out across 154 acute and specialised NHS trusts. All adult patients (aged 16 and over) who had spent at least one night in hospital and were not admitted to maternity or psychiatric units between June, July or August 2014 were eligible to be surveyed. 827 eligible patients from this Trust were sent a survey, and 380 were returned, giving a response rate of 46%. This is compared to the national response rate of 47%.

The number of respondents nationally has been in decline over the last decade where a response rate of 59% was achieved in 2005, compared to 47% in 2014. The Picker Institute have identified a number of factors that may have influenced the decreased response rate over the past 10 years, these include: survey fatigue as a result of the increased patient experience agenda and generational differences, as the highest rate of decline in responding to the survey has been seen in the 16-35 and 36-50 age ranges.

To improve response rates, the Picker Institute have implemented a number of initiatives, such as sending personalised letters with the survey and re-designing the survey layout and style. Other initiatives that may be implemented include incentives, reducing the length of the survey, and hand writing addresses on envelopes to make the approach more personal.

Performance compared to the previous surveys

Compared to last year, the Trust scored significantly better on 1 question in 2014, and worse on 4 questions.

Questions where the Trust scored significantly better in 2014

Question	2013	2014
Overall: not asked to give views on quality of care	1.8 / 10	2.3 / 10

Questions where the Trust scored significantly worse in 2014:

Question	2013	2014
Planned admission: specialist not given all the necessary information	9.3 / 10	8.4 / 10
Nurses: talked in front of patients as if they weren't there	9.4 / 10	8.9 / 10
Care: not always enough privacy when being examined or treated	9.7 / 10	9.4 / 10
Discharge: not fully told of danger signals to look for	5.9 / 10	5.4 / 10

Performance compared to other trusts

Compared to other trusts participating in the survey, this Trust scored significantly better on 1 question, significantly worse on 2 questions and scored average on 57 questions.

The question where this Trust scored significantly better than other trusts:

Question	STH	All trusts
Patient was told who to contact if they were worried about their condition or treatment after leaving hospital	8.7 / 10	7.8 / 10

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

Question	STH	All trusts
The hospital specialist had been given all the necessary information about the patient's condition/illness from the person who referred them	8.4 / 10	8.9 / 10
Length of delay to discharge due to waiting for medicines, to see a doctor or for an ambulance	6.6 / 10	7.2 / 10

Feedback - 2014 National Inpatient Survey benchmarking

The table below shows how this Trust performed against the 10 large acute NHS providers that form the Shelford Group on the question relating to the 'overall experience' of the patient:

Patients who felt they had a good experience

Trust	Score
1 The Newcastle Upon Tyne Hospitals	8.5
2 Sheffield Teaching Hospitals	8.4
3 University Hospitals Birmingham	8.3
4 Guy's And St Thomas'	8.3
5 Cambridge University Hospitals	8.3
6 Oxford University Hospitals	8.2
England Average	8.1
7 University College London Hospitals	8.1
8 Imperial College Healthcare	8.0
9 King's College Hospital	7.8
10 Central Manchester University Hospitals	7.8

Improving the experience of patients

Survey results and comments will be considered alongside other patient experience data, in order to agree an action plan to ensure improvements are made.

Examples of what the Trust is currently doing to improve the experience of inpatients across the Trust include:

- Reviewing the Emergency Care Pathway, looking at where delays occur on the day of discharge, and identifying ways to address these delays.
- A pilot exercise of contacting patients post discharge, giving them the opportunity to ask about issues which may be concerning them, such as what danger signals to look for, with a view to reducing the number of readmissions.

Feedback - 2014 National Inpatient Survey patient comments

419 individual comments were made by patients in the National Inpatient Survey 2014. From these comments, 890 individuals subjects were identified.

From the individual subjects identified, 55% of all patient comments were positive, 32% were negative, 9% were neutral, and 4% were a suggestion for improvement.

The most frequently raised positive comments related to staff (26%), nurses (12%) and doctors (12%). The most frequently raised negative comments related to staff (9%), discharge (6%) and food (5%).

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

Positive Comments

All the staff were friendly, helpful and looked after me wonderfully. Nothing was too much trouble for them.

The nurse was excellent. Very thoughtful, chatty, engaging, funny and made every effort to put me at ease. A true professional carer.

The consultant was excellent. He went to a lot of trouble to explain everything to me to put me at ease & I had every confidence in him.

Staff made me feel cared for and safe and secure which I very much appreciated as I was anxious to say the least so my thanks to one and all!

The food was excellent for my condition, and nicely served in a relaxed & friendly way.

Negative Comments

Staff gave me morphine, which I had asked not to have, as I had a bad experience with it previously. Resulting in me being sick all the next day.

I was waiting four hours for medication. This was disruptive to my family members who were waiting to take me home, not to mention parking fees!!

I have cancer of the oesophagus and this was not fully catered for, what food I can eat needs to be hot.

Staff talk to each other throughout 24 hours as if it was always day time and everyone on the ward was kept awake.

The doctor didn't have any sympathy towards me and on a few occasions she made me feel as if I was lying & discharged me too soon.

Feedback – Case study

staffing patterns.

- New bathing facilities have been installed on some surgical wards with more scheduled to be updated in the future.
- Staff ‘Friends and Family Test’ data were used to undertake staff engagement work in Orthopaedics and General Surgery where staff groups met to share views on how care can be improved and to ensure staff are aware of what is expected in terms of high quality care.

Within the Emergency Care Group, initiatives that were implemented include:

- 2 day wellbeing course aimed to educate nursing staff on preventing pressure ulcers, improving nutrition, sensory impairment, and end of life care, particularly focussing on the experience of the families of bereaved patients.
- A leadership study day was introduced which looks to ensure senior staff follow-up on concerns which have been raised by either patients or staff.
- A&E introduced the national ‘hello my name is...’ initiative which involves staff ensuring that they introduce themselves to the patient and ensure that their name is clearly displayed where the patient can see it.

In May 2015, the Patient Experience Committee undertook a follow-up review of the data for complaints relating to ‘general nursing care’ for General Surgery, Emergency Medicine, Orthopaedics and Geriatric & Stroke Medicine.

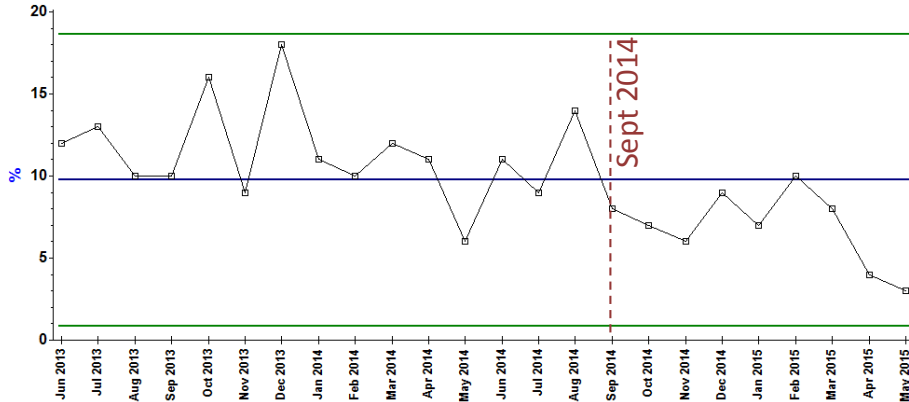
This data showed that complaints relating to ‘general nursing care’ had reduced in all four of these directorates since the issue was first discussed by the Patient Experience Committee in September 2014.

The percentage of complaints received relating to ‘general nursing care’ for each Care Group was:

	Original 12 month sample period (Jul 13 – Jun 14)	Current 12 month period (Apr 14 – Mar 15)	Current 6 month period (Oct 14 – Mar 15)
Emergency Medicine	26%	9%	5%
General Surgery	25%	15%	13%
Geriatric and Stroke medicine	36%	32%	25%
Orthopaedics	18%	13%	10%

The graph below shows the percentage of complaints received relating to ‘general nursing care’ from all complaints received by the Trust. This illustrates that from September 2014, when this was first discussed by the Patient Experience Committee, the percentage of complaints relating to ‘general nursing care’ has decreased across the Trust.

% of complaints relating to ‘general nursing care’ (from all complaints received)



Over the 12 month period which was reviewed, complaints relating to ‘general nursing care’ in Emergency Medicine (12%), General Surgery (11%), Geriatric and Stroke Medicine (15%) and Orthopaedics (14%) accounted for 52% of all ‘general nursing care complaints’.

Reviewing complaints for the remaining directorates shows that the percentage relating to ‘general nursing care’ becomes very small for each directorate, ranging from 5% to 0%.

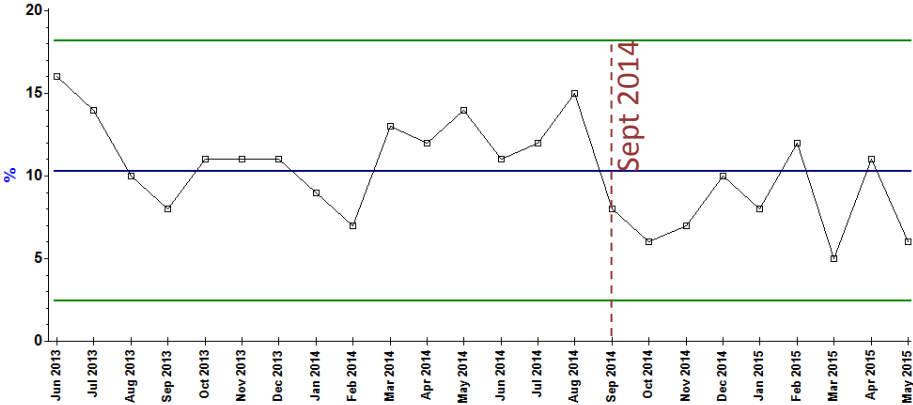
A further review of all other complaint subject codes has also been undertaken. This demonstrated that no other subject showed an increase as a result of ‘general nursing care’ decreasing, which suggests that the change is not relating to a coding issue.

It did however identify, that since ‘general nursing care’ was discussed by the Patient Experience Committee in 2014, the percentage of complaints relating to ‘staff attitude’ has also decreased.

Feedback – Case study

As has been reported previously, complainants often cite staff attitude as a secondary issue or as part of a complaint about something else. Therefore, it is interesting to note that the proportion of complaints received relating to 'staff attitude' has decreased along with complaints relating to 'general nursing care', suggesting that these may often be raised as part of the same complaint.

% of complaints relating to 'staff attitude' (from all complaints received)



Outcome

This review into complaints relating to 'general nursing care' is a good demonstration of how intervention at a senior level can encourage improvement at a local level and reinforce the importance of a specific area of care that has an impact on the patient experience.

Intervention by the Patient Experience Committee coincided with a number of Trust-wide initiatives such as 'care rounding', but also encouraged directorates to implement local initiatives to make improvements to nursing care.

Whatever the reasons for the improvement in complaints relating to 'general nursing care', and any correlation in complaints relating to 'staff attitude', this is an extremely positive outcome and demonstrates how the Trust continuously works hard to identify areas of concern and focusses on making improvements to the care, treatment and experience of the patients who use our services.