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5HSRUW 7LWOH	Customer Care Report Q4 2017-18			
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3UHSDUHG E\	Hazel Hardyman, Head of Customer Care			

together the themes from patient e

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This report brings together the themes from patient experience feedback e.g. comments, concerns, complaints, compliments, Friends and Family Test (FFT), real time feedback and NHS Choices. It also provides an overview of Patient and Public Involvement (PPI) activity and outcomes across the Trust to improve our services for patients.

- 60 complaints were received in Q4 compared to 62 complaints in Q3 and 65 complaints for the same period in the previous year.
- Highest reported categories remain unchanged as clinical treatment, communication and staff attitude.
- There were no requests for independent review by the Parliamentary and Health Service Ombudsman and none were reported on.
- A total of 242 inpatients were surveyed in the quarter. They made 166 positive comments and shared 112 comments where service could be improved.
- The responses to the Friends and Family Test remain overwhelmingly positive and the numbers are too low to identify any main area of concern.
- PPI activity - 4 new projects, 4 completed projects and the results from 2 national patient surveys.
- NHS Choices received 17 comments in Q4 with 13 positive, 2 negative and 2 mixed; relating to 9 different areas.

This report provides assurance that the Trust is responding and acting appropriately to patient feedback.

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Local Services - We will meet the needs of the local population by developing new ways of working which always put patients at the centre of all that we do	;

Innovation -

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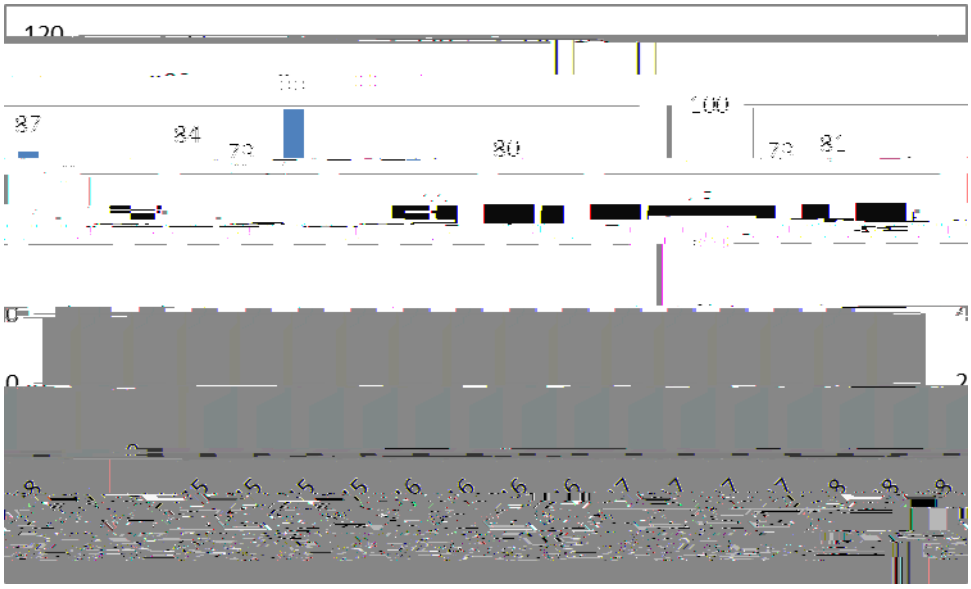
The following graph shows the trend in complaints received by quarter. There has been a very slight decrease in complaints in Q4 compared to Q3. The specialty areas with the most complaints are Orthopaedics (7) and the Emergency Department (7) with 8 related to clinical treatment, these are both high risk specialties.



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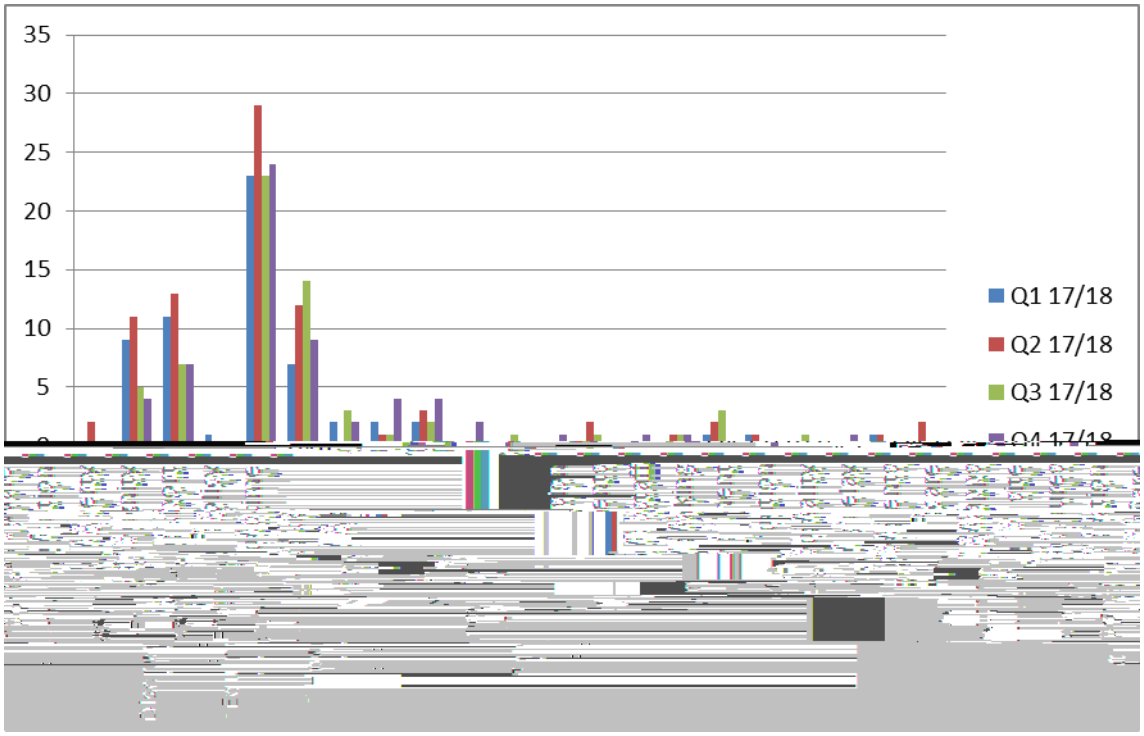
The following graph shows the trend in complaints by subject over the last four quarters. Complaints have decreased from the previous quarter by 2.



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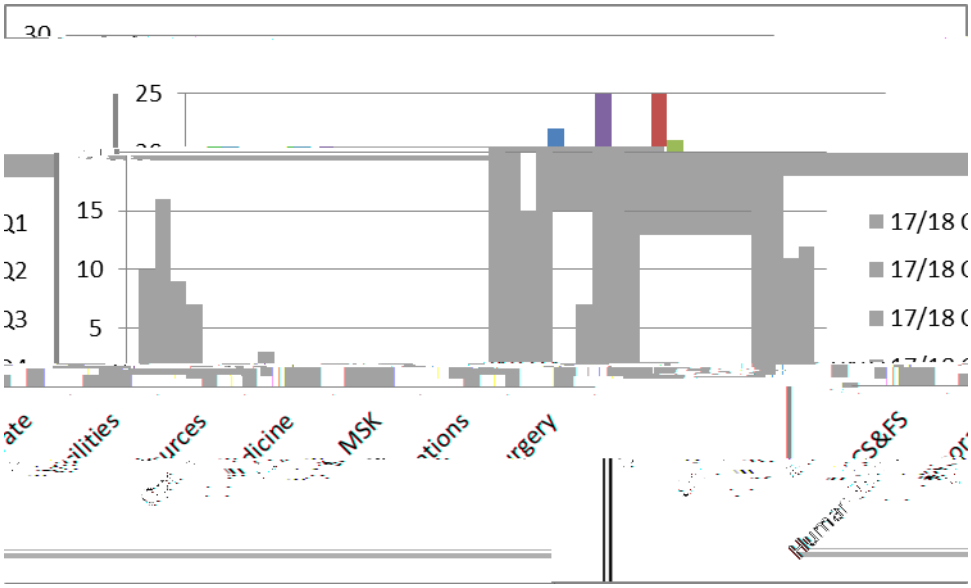
The following graph shows the number of complaints by directorate over the last four quarters. CS&FS and MSK have each seen a decrease in complaints from Q3, whilst Medicine and Surgery have seen an increase.



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	4XDUWHU	4XDUWHU	4XDUWHU
&RPSODLQWV	13	9	9
&RQFHUQV	21	10	35
&RPSOLPHQWV	94	36	173
5HRSHQHG FRPS	1	0	0
FRPSODLQWV UHVSRQGHG WR ZRUNLQJ GD\V	31%	33%	55%

- Complaints have remained the same as Q3 with 9 in total.
- The Gynaecology Department received the highest number of complaints (4) all relating to insensitive communication but there was no specific theme or person.
- No complaints were re-opened and one meeting took place.
- There has been an increase of 25 concerns compared to Q3. Children's Services received (11), Bowel Screening (9), and Maternity (7). 6 of the Children's Services concerns related to appointments where the clinic had been cancelled but there was no communication to the patient/carer; Bowel Screening - 3 related to the taste of the laxative; and 3 of the Maternity concerns related to communication.
- Response compliance within the 25 working day timescale has increased from Q3. Reasons responses were not completed within 25 working days, were due to awaiting statements from relevant staff and awaiting signature of the final letter.
- Total activity within the directorate was 9,062 and of this number 0.09% raised a complaint.
- Customer Care is awaiting 10 action plans outstanding from closed complaints since 1st April 2017 for this directorate. Action plans should be returned to Customer Care with the draft response letter. The Complaint Co-ordinators provide the directorates with weekly reports of any overdue concerns, complaints and outstanding action plans. The directorate are working through the backlog. This will continue to be followed up by the Customer Care Team and discussed at the Executive Performance Review.

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Obstetrics	Management and inconsistent interpretation of the 'Bruising in a non-mobile child policy' Lack of midwifery support in the second	x Plan to review this policy to incorporate a greater degree of professional judgement. x Self- reflection by staff involved.

	stage of labour.	
Gynaecology	Delay in receiving appointments Communication errors Attitude of staff.	x Expedited appointment x Surgery to look at booking form and see about getting an alert set up when patients are not to be cancelled x Self-reflection by staff members
Paediatric Outpatients	Appointments	x DSN liaised with secretary who was responsible for cancelling and re booking patient. Secretary contacted parents to discuss.

& R P S O L P H Q W V

In total 173 compliments have been received across the directorate with the breakdown as: Maternity = 56, Speech Therapy = 39, Child Health = 27, Screening = 15, NICU = 13, Endoscopy = 7, Radiology = 6, Clinical Psychology = 4, All clinical areas and Histopathology = 2 each, Genetics and Gynaecology OP = 1 each.

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	4 X D U W H U	4 X D U W H U	4 X D U W H U
& R P S O D L Q W V	15	15	23
& R Q F H U Q V	28	19	27
& R P S O L P H Q W V	112	102	

Several wards	End of life care Lack of communication and unsatisfactory care and treatment	x	Meetings being held with each family and appropriate staff in attendance to discuss the issues. End of Life team were involved with most with visits to the ward.

Several wards

x

) H H G E D F N D U H D	7 K H P H	$ F W L R Q V
& R P S O D L C	Clinical Treatment	x No themes, teams are taking specific actions to resolve issues. Head of Litigation is working with
	Communication	
	Staff Attitude	

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A total of 2 positive and 12 negative comments were received regarding the environment. The negative comments have been categorised as set out in the table below.

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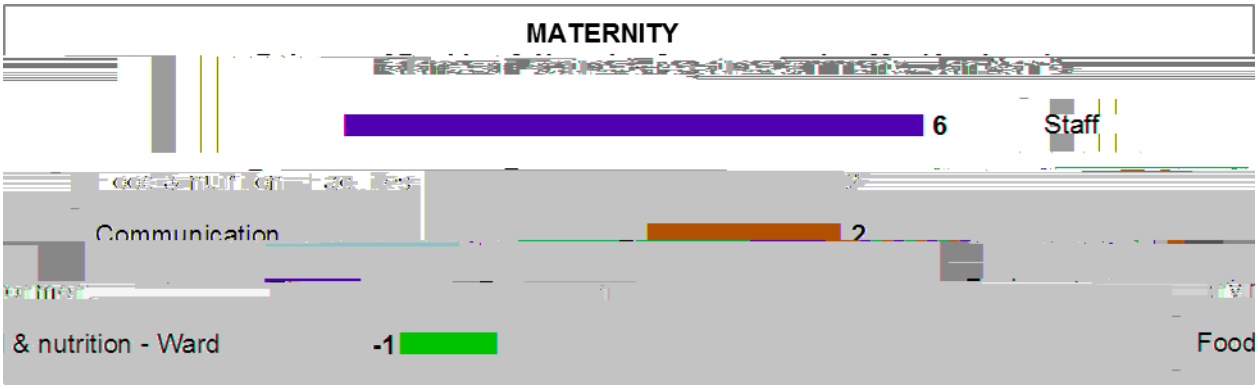
Temperature (8)



The negative comment related to the unavailability of snacks at night. Snacks and hot drinks are offered

- All of those who needed to ask questions felt they were able to do this, and felt satisfied with the answers given.
- 76% of the women felt the results were given to them in a way which they understood. Some of the women completing the questionnaire may have been at too early a gestation to have received results, so this may be reflected in this percentage.
- Their experiences of undergoing antenatal screening was very positive, with the majority scoring excellent, and the remainder good.

2. The Early Supported Discharge for hip fractures ï enhancing discharge planning by the therapistsô project was completed. In terms of patient opinion on what was important about their discharge, they rated the following as extremely important:

- having a telephone number to call for questions or problems;
- having opportunities to ask questions about discharge plans; and
- having worries or concerns about discharge listened to and understood.

Further information is available in the Healthwatch Wiltshire ñBetter Care Plan Engagementòreport.

- x mothers being given appropriate advice and support when they contacted a midwife or hospital at the start of labour.

Where possible, these are being addressed through the action plans.

The benchmark results are available on the Care Quality Commissionôs web site at:
http://www.cqc.org.uk/provider/RNZ/survey/5

6 X U J H U \ ' L U H F W R U D W H
& R P S O H W H G S U R M H F W V

1. The patient flow in Age ï related Macular Degeneration (AMD) Clinics project was completed with the following findings and actions:
   - x No department standard on time-keeping: development of time-keeping standard from reception to doctor's desk; and audit of time keeping in AMD clinics later 2018.
   - x

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The Board is asked to note this report.

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