

NHS West Essex CCG Patient Experience Annual Report

Introduction

The Patient Experience Team manages complaints, Patient Advice and Liaison (PALs) queries and compliments from service users, MPs, and members of the community. The team also responds to requests from the Parliamentary Health Service Ombudsman (PHSO) for information relating to complaints the CCG have led on. In addition to this, the team coordinates interpreter requests for Marie Stopes International.

This report provides details of contacts received between 1 April 2021 and 31 March 2022.

Compliments

15 compliments were received during 2021/22, nine of which were received during quarter 3. A compliment was received from the General Manager of a Care Home for the CHC Placements Team for the support provided when a patient was transferred to the care home. All compliments received are shared with the relevant teams and named individuals.

PALS

A total of 746 contacts were received in 2021/22. This is only slightly higher than the 744 contacts received the previous year 2020/2021. The following table shows the queries received by quarter

	Q1	Q2	Q3	Q4	Total
PALS received	207	209	173	157	746

Top Three Themes from PALS Queries

Communication (156): conflicting information, lack of a clear explanation, telephone issues, letters not received and information not provided.

Clinical Treatment (136): problems with medication, coordination of medical treatment, lack of continuity, delays with tests and/or results and face to face appointments.

Covid-19 Vaccination Programme (120): access to vaccination appointments, availability of the vaccine, alternative vaccines, concerns with side effects and requests for evidence of vaccination records for travel/work purposes.

The complexity of PALs contacts should not be underestimated, these are not complaints, but usually relate to people who require help and support to get access to the care and treatment that they need. Robust and timely management of a PALs query can very often help resolve concerns and prevent the need for a formal complaint.

MP Queries

89 MP queries were managed by the team. 40% (37) of these queries related to the Covid Vaccination Programme.

Top Three Themes from MP Queries

COVID Vaccination Programme (37): access to vaccination appointments, changes to the programme i.e. closures of centres and vaccinations in pharmacies, general enquiries and requests for support with obtaining evidence of vaccinations for travel/work purposes.

Clinical Treatment (17): availability of mental health services for adults and children, delays in consultant appointments, coordination of medical treatment and access to face-to-face appointments.

Communication (14): GP surgery telephone issues, conflicting information and information not provided.

Formal Complaints

37 formal complaints were received by the team in 2021/22. 33 of these complaints were coordinated by West Essex CCG, the remaining 4 complaints were shared with the relevant organisation for their management.

Complaints by Organisation

Organisation	Number of Complaints
NHS West Essex CCG	17
The Princess Alexandra NHS Hospital Trust	12
NHS England	3
Essex Partnership University NHS Foundation Trust	2
Mid and South Essex NHS Hospitals Trust	1
North East London NHS Foundation Trust	1
Ramsay Healthcare	1
Total	37

Top Three Themes from Formal Complaints

Clinical Treatment (20): coordination of medical treatment, errors with prescriptions, treatment delays and lack of continuity.

Covid-19 Vaccination Programme (3): access to vaccinations, appointment errors at vaccination centres and vaccinations for children.

Funding (3): Continuing Healthcare process including retrospective reviews and Personal Health Budgets along with CCG funding criteria for asymmetric breast augmentation.

Complaint Outcomes

Only one complaint received during 2021/22 remains open and under investigation at the time of reporting. This is a complex complaint relating to care at The Princess Alexandra Hospital. A meeting is being arranged for the patient to discuss their concerns directly with representatives of the Trust and they will be supported by the ICB Patient Experience Team.

16 complaints were partially upheld, 9 were not upheld, 2 were closed due to lack of consent and five were upheld. Details of the five upheld complaints are as follows.

Complaint ID	Description of Complaint	Learning
2882	Complaint relating to incorrect medication being dispensed twice.	The pharmacy reported the errors as clinical incidents. Incident review meetings took place with support from the CCG. The Pharmacy highlighted the patient's medication record to flag up the error and revised the process in their dispensaries to support staff to accurately dispense medications.
2894	Complaint regarding additional costs accrued towards a late patients care. A retrospective review request was also submitted as part of the complaint.	Apologies for the delay in carrying out the retrospective review were provided. The CHC Team has been expanded to ensure reviews can be carried out in a timely way.
3292	Patient was unhappy with how their concerns regarding their GP surgery were managed. These concerns were being coordinated by the CCG as a PALS query	Apologies were given for not providing updates on the progress of the query as regularly as the patient would have liked.
3311	Complaint about rude attitude of staff when patient attended the hospital for an appointment when it should have been a telephone appointment	The hospital will review and adapt their appointment letters to ensure it is clear what type of appointment is being offered to patients. Text message reminders are also being updated to ensure they are clear.
3912	Complaint regarding funding for breast augmentation surgery. Patient has had funding approved for one breast only.	Service restriction policy criteria changed as a direct result of this complaint. Patient has had funding approved to remove and replace both breast implants which was the clinical requirement initially identified by her consultant.

Priorities for 2022/23

ACTION	HOW WILL IT BE ACHIEVED?	TIMEFRAME
To ensure patient feedback processes are aligned across the three 3 CCGs as Hertfordshire and West Essex Integrated Care Board (ICB) from 1st July 2022	<ul style="list-style-type: none"> Align patient feedback processes across the team including the development of Standard Operation Procedures (SOPs) Develop an ICB Patient Feedback policy Develop SOPs to gather protected characteristics and ethnicity data sensitively from complainants/concerns. 	2022/23

ACTION	HOW WILL IT BE ACHIEVED?	TIMEFRAME
	<ul style="list-style-type: none"> • Develop SOPs to gather feedback from patients/other enquirers regarding their experience of the ICB Patient Experience Team process and the handling of their query. • To ensure the Datix system is aligned • To explore aligning telephone systems 	
<p>Share lessons learnt from Complaints</p>	<ul style="list-style-type: none"> • To begin recording lessons learnt and changes to practice in Datix for ICB learning. • Reflection sessions for team development to improve the quality of formal responses. • To ensure team wellbeing is in place, staff are supported and have opportunity to reflect on cases. 	<p>2022/23</p>
<p>To ensure timescales are adhered to for complaint responses.</p>	<ul style="list-style-type: none"> • To ensure regular auditing of open cases and discussions with the team 	<p>2022/23</p>