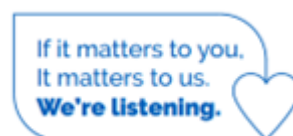




Annual Complaints and Patient Experience Report 2023-2024

Author: Sharon Latham, Head of
Patient Experience

Executive Sponsor: Nicola
Brockie, Chief Nurse



Introduction

As Head of Patient Experience, I would like to introduce the 2023/2024 Annual Report for Complaints and Patient Experience at the Royal Orthopaedic Hospital, Birmingham.

This report provides an overview of the PALS, Complaints and Compliments received by the Trust over the last year and details the achievements, decisions made and plans for the future.

Through the challenges that the team, the Trust and the NHS have experienced over the last twelve months the Patient Experience team and the Executives, Divisions and departments have continually striven to improve and enhance the experience that our patients, carers and visitors have when receiving treatment and care within our Trust.

The Royal Orthopaedic Hospital Birmingham has a strong learning culture throughout every strand of care delivered and this extends to our PALS, Complaints and Compliments processes where we use the information and feedback, we receive to improve our future patient care

Sharon Latham, Head of Patient Experience

1.0 Purpose of the Report

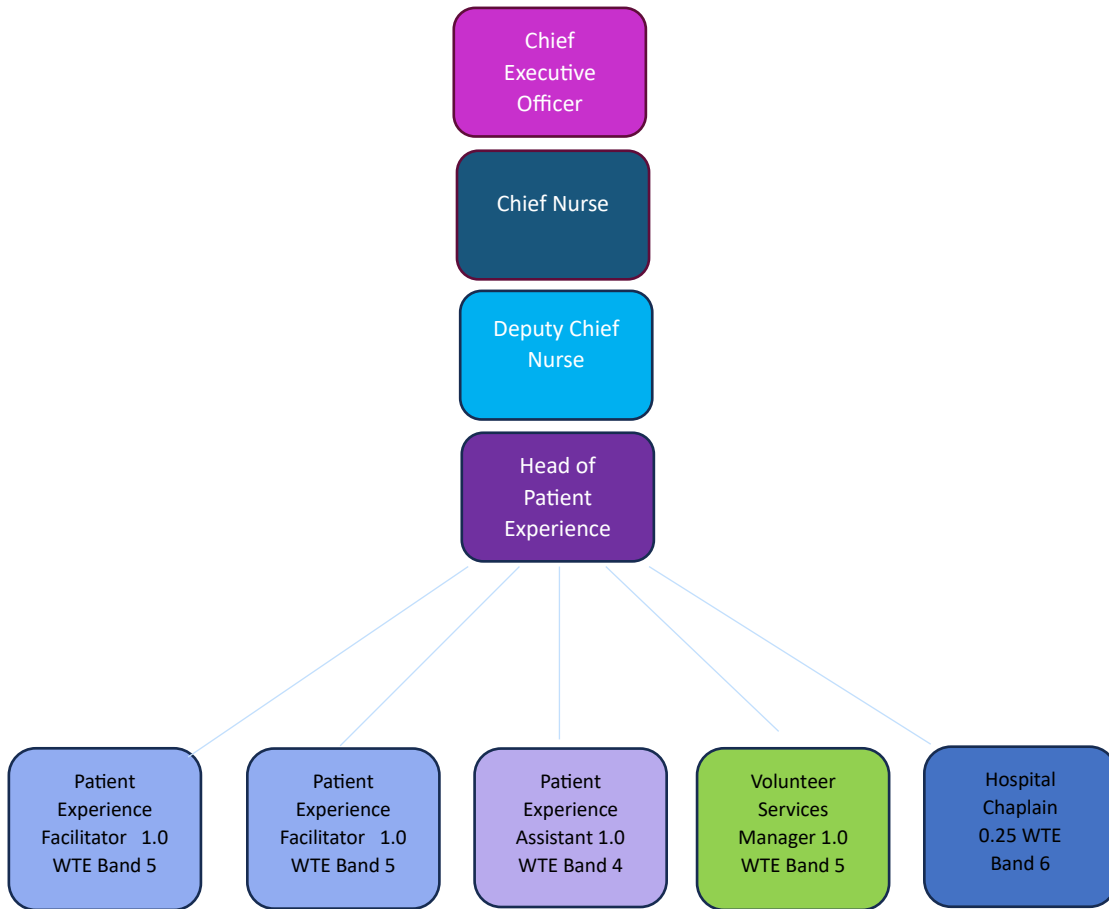
1.1 This Annual Report provides an overview of the activity and achievements of the Patient Experience Department at The Royal Orthopaedic Hospital Birmingham (ROH) from April 1st, 2023, to March 31st 2024 in relation to our responses to complaints, compliments and concerns raised by our patients and their families or carers.

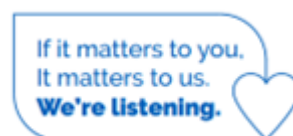
1.2 This report includes information regarding.

- The accountability within the Trust for responding to concerns and complaints.
- How the Trust responds to concerns raised
- The number of complaints and concerns received.
- Analysis of the concerns and complaints raised throughout the year.
- Achievements
- Plans for the future.



2.0 Patient Experience Team and Governance Structure





3.0 Key Points

From the 1st of April 2023 to the 31st of March 2024 the Trust received 47 formal complaints which is a reduction of 6 compared to the previous year

55% of Complaints received were resolved within the original timeframes agreed between the Trust and the Complainant

100% of Complaints were acknowledged within the Trust target of two working days.

Two Complainants referred their cases to the PHSO in this year, neither of these cases were progressed by the Ombudsman.

The Trust received 560 new PALS contacts, 21 of these PALS contacts were withdrawn and did not continue through the PALS process. 539 cases continued through the process.

63% of PALS received were resolved within the timeframes agreed between the complainant and the Trust

4.0 Background

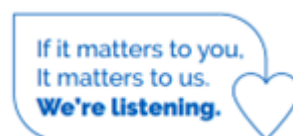
The Trust is committed to learning from feedback, complaints, and concerns that we receive and to continuously improve our service by listening to and acting upon these. Our processes are deeply patient focused and firmly based on the Parliamentary Health Service Ombudsman (PHSO) principles for good complaint handling, the Model Complaint Handling Procedure, and the NHS Complaint Standards.

As a Trust we are:

- Positively seeking feedback.
- Being thorough and fair.
- Giving fair and accountable decisions.
- Promoting a learning and improvement culture.

From a user perspective we want to ensure that our patients, families, and carers:

- Feel confident to speak up.
- Feel listened to and understood.
- Feel that the complaint made a difference.
- Find the process simple.
- Feel confident to raise a concern or complaint in the future if necessary.



The data for the different concerns raised including quantity, category, trends and themes is collated and reported on through Divisional and Organisational sub groups 2-4 weekly and then to executive level on a monthly, quarterly and annual basis.

5.0 Formal Complaints Process

5.1 A formal complaint can be raised in the following ways:

- Verbally by the patient or their representative
- In writing via email or letter
- Online using the submission form on the Patient Experience page of the publicly accessible website.

Once received the Patient Experience team will contact and work with the complainant to ensure that their concerns have been accurately heard and interpreted. Once the complaint details including time scales, method of contact and questions to be answered have been agreed with the patient / representative then it will be sent to the responsible divisional triumvirate to identify and agree a lead. The lead is provided with all information and the investigation will start.

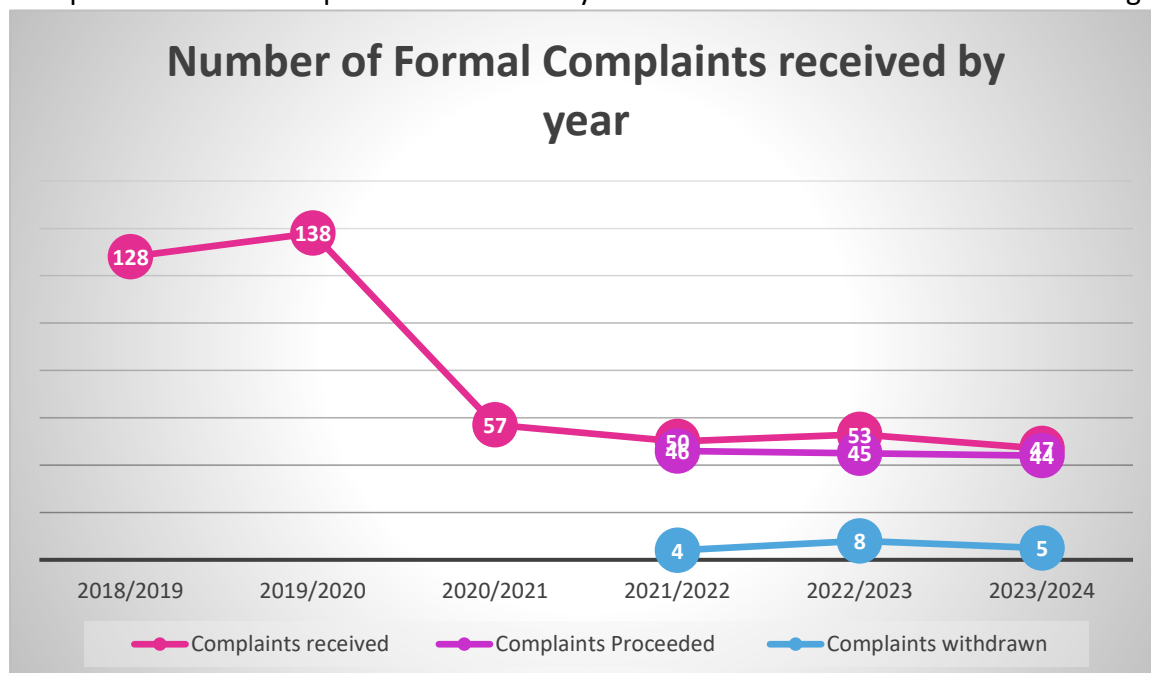
The complainant is kept updated as to the progress of their complaint and should there be any delay they will be informed and given an explanation.

Full details of the complaints process can be found within the Royal Orthopaedic Hospital PALS and Complaints Policy.

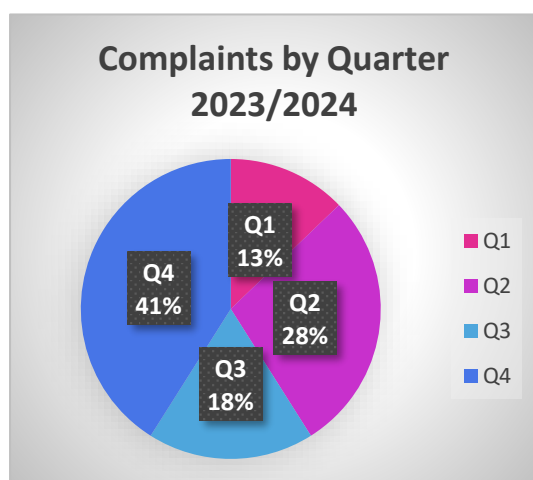
5.2 Formal Complaints Data 2023/2024

In 2023/2024 the Trust received 42 new formal complaints and 5 requests to re-open previous complaints (total 47). Of the 42 new requests 3 were withdrawn and did not continue through the formal complaints process either because they were managed in an alternative way, or the complainant did not want to proceed. Two of the new complaints were Private Patient

Complaints which are reported on differently and are not included in the benchmarking data.



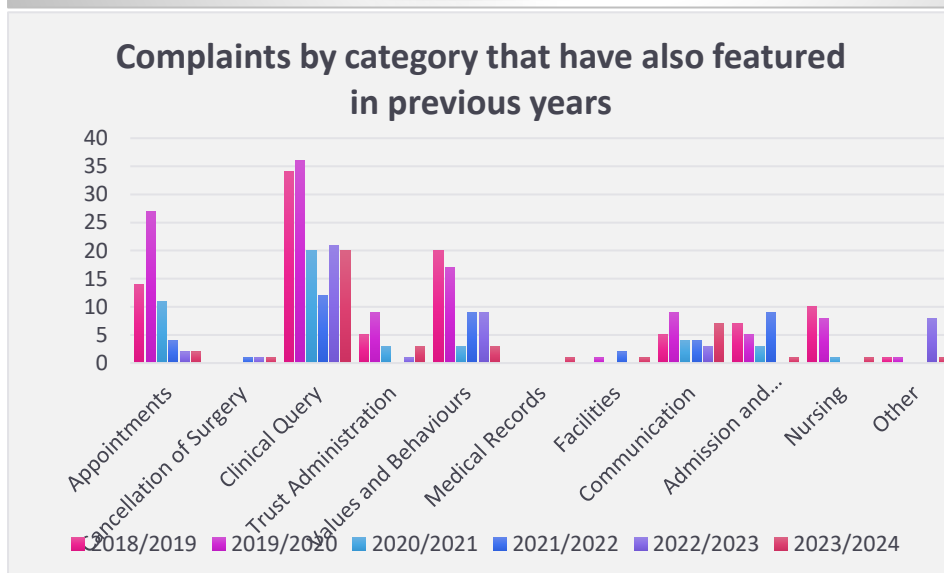
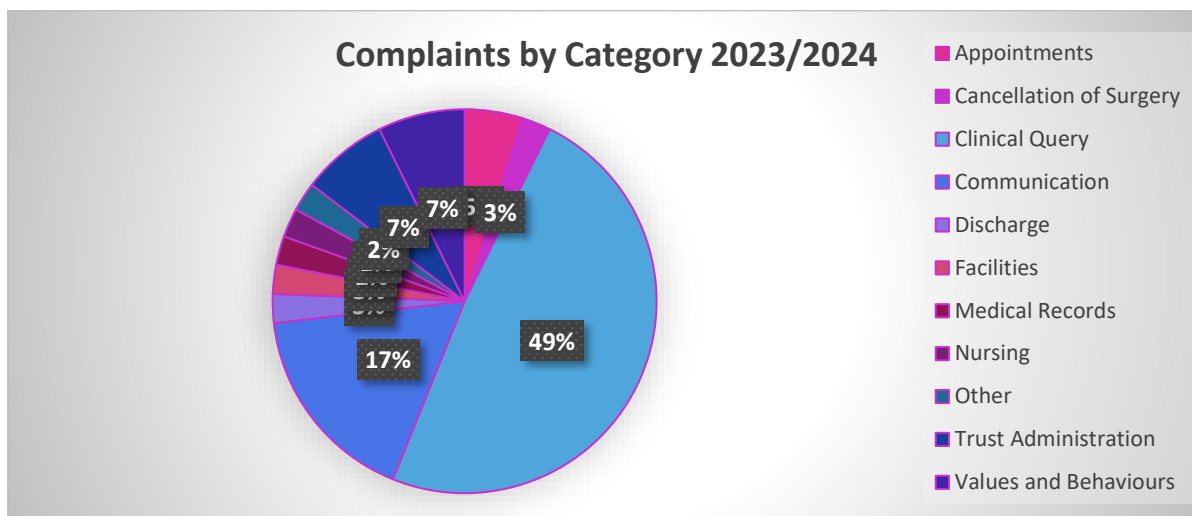
The number of formal complaints received by the Trust in the last three years has reduced slightly year by year. There is no comparable data as to whether any complaints were withdrawn between 2018 and 2021 although the number of complaints submitted are seen to be substantially higher.



The highest number of complaints received by quarter were in quarter four where 16 formal complaints were submitted.

The largest proportion of complaints throughout the year were for the Clinical Query category, this includes patient concerns regarding.

- Delays in diagnosis and/or treatment
- Inability to access treatment.
- Adverse Outcome.
- Lack of clinical information provided.



These complaint categories have remained consistent, however data evidence that the number of complaints for each consistent category is decreasing.

5.3 Trends and Themes

When recording Complaints they are registered on the system (Ulysses) under the cause group that is most prominent within the complaint and also that identified by the complainant. Complaints are taken from the patient perception and as such may not accurately reflect the factual event.

In 2023/24 the cause group for 49% of formal complaints received was “Clinical Queries” as a primary issue. These complaints included a reported “lack of care” during appointments and treatment, poor outcomes from surgery and failure to provide follow up care. Inadequate communication regarding diagnosis and ongoing referral features as a secondary factor in many of the complaints categorised as a clinical query.

Communication issues were cited as the primary complaint cause in 17% of formal complaints received in 2023/24, the concerns raised included lack of communication with providers also

involved in the patients care, failure to communicate effectively interdepartmentally and lack of communication with the patient which impacted on patient care.

5.4 Complaints resolved within agreed timescales.

There is no statutory timeframe for responding to complaints however, the Trust has set internal KPI Targets of 95% of Complaints should be responded to within the timescales agreed with the complainant. The timeframes for the Royal Orthopaedic Hospital in 2023/2024 are 25 working days for standard complaints and up to 60 working days for complex complaints.

Of the 40 Formal Complaints received and managed through the formal process 22 (55%) were resolved within agreed timeframes.

Those complaints that were not responded to within the agreed timeframe have been partly due to divisional delays from the identified leads and also to delays in receiving additional or supporting information. The Patient Experience Team continues to work alongside the divisional and executive teams to improve response processes and times.

5.5 Complaints referred to the Ombudsman.

Two complaints were referred to the Parliamentary Health Service Ombudsman (PHSO) in 2023/24. Neither of these complaints were from this reporting period with one original complaint being raised in 2021/22 and the other from 2022/23. Neither of these complaint referrals were progressed by the PHSO.

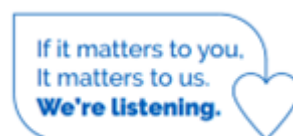
5.6 Actions and Improvements

All Formal Complaints received whether upheld or not will have actions identified. Even if the Trust is not found to be at fault for the incident or occurrence a patient or carer has had an experience that was unsatisfactory from their perspective and as a Trust, we take organisational learning from that experience.

Actions are reported through Divisional Governance meetings and outstanding actions are escalated through the responsible Triumvirate and Executive Teams if not achieved within the timescales set.

5.7 Benchmarking against Specialist Orthopaedic Trusts

Each Trust shares data on Complaints on a quarterly basis, this data is not comparable due to the differences in footfall and service delivery. It should be noted that Private Patient complaints, withdrawn complaints and reopened complaints are not included in the benchmarking data.



	Royal National Orthopaedic Hospital	Robert Jones Agnes Hunt Hospital	Royal Orthopaedic Hospital
	Number of Complaints received		
Q1	16	23	7
Q2	20	22	7
Q3	20	26	7
Q4	23	27	16
Totals	79	98	37

6.0 Patient Advisory Liaison Service (PALS)

The Patient Advice and Liaison Service offers confidential advice, support, and information on health-related matters. They provide a non-clinical point of contact for patients, their families, and their carers to support and improve patient experience.

6.1 PALS Process

A PALS concern or enquiry can be raised in the following ways:

- Verbally by the patient or their representative
- In writing via email or letter
- Online using the submission form on the Patient Experience page of the publicly accessible ROH website.

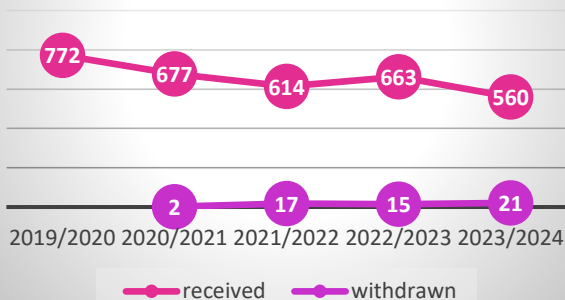
Once received the Patient Experience team will contact the complainant to ensure that their concerns have been accurately heard and interpreted and help to identify the patients desired outcome. They will then identify the appropriate person or department to address and resolve these concerns and the case details are shared with them. We aim to respond to and resolve PALS concerns within 5 working days of the case commencing with an internal KPI of 80%.

Full details of the PALS process can be found within the Royal Orthopaedic Hospital PALS and Complaints Policy.

6.2 PALS Data

In 2023/2024 the Trust received 560 new PALS contacts, 21 of these PALS contacts were withdrawn and did not continue through the PALS process. 539 cases continued through to PALS Resolution and these are broken down as below.

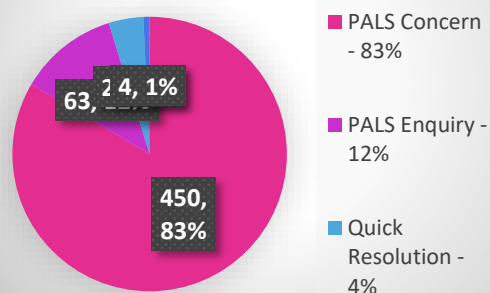
Number of PALS Contacts received by year



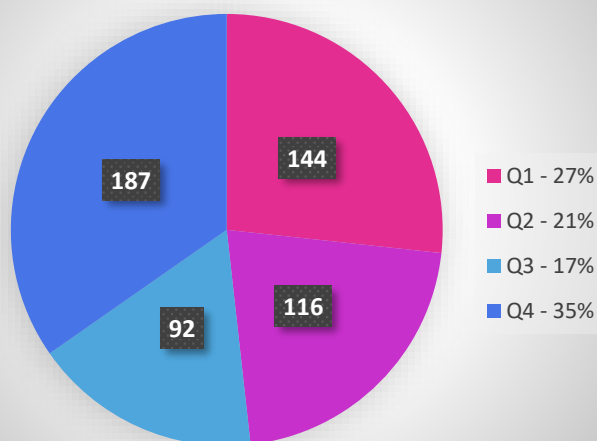
PALS contacts have remained fairly consistent for the last 4 financial years, however, the number of cases that have been withdrawn has risen. Cases are predominantly withdrawn because the issue has been resolved before progressing to a formal case.

83% of PALS received continue to be managed as PALS concerns. Those resolved by the Patient Experience team are now recorded as “Internal Investigations” and this percentage is expected to grow throughout the next reporting period.

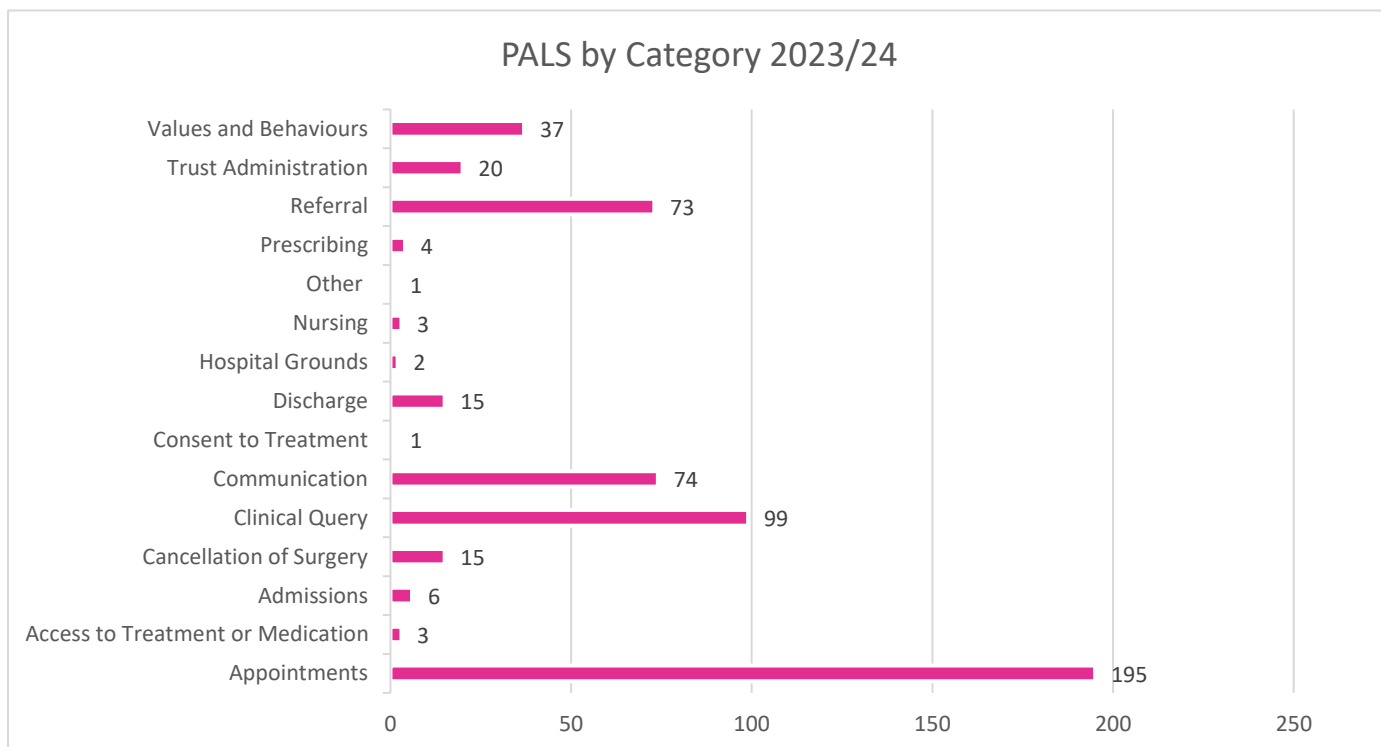
PALS Cases by Type 2023/24



PALS by Quarter 2023/24



As with Complaints, Q4 had the highest number of PALS cases submitted in 2023/24 with the highest numbers around appointments and clinical queries.



6.3 Trends and Themes

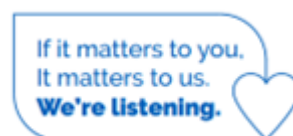
In 2023/24 35% (195) of all PALS Cases were regarding appointments, these cannot all be directly attributable to the appointments department as cancelled appointments are primarily actioned by the responsible specialities. The issues raised around appointments include delays in receiving or failure to access appointments, multiple cancellations or rescheduling of appointments and inability to contact departments and secretaries to access appointments.

The appointments department now hold weekly scheduling meetings with each of the specialities where an overview of the appointments available and the appointments required including urgent, new, overdue and follow up appointments, are discussed and bookings planned to help to reduce overdue and clinically urgent waiting times.

The Patient Experience Department report on cases around appointments as part of the reporting structure to each division and sub committees, a report was shared with the Operational Management Board (OMB) and also at Patient Engagement and Experience Group (PEEG)

6.4 PALS resolved within agreed timescales.

The Trust has set an internal response time of up to 5 working days to respond to PALS concerns, enquiries, and resolutions. The Patient Experience Team liaise with the divisions and departments to ensure that cases are responded to quickly and effectively. In 2023/2024 the

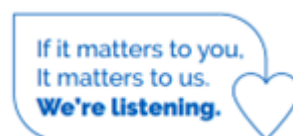


Trust responded to 340 of 539 within timescales agreed which equates to 63% of the KPI achieved.

6.5 Benchmarking

As with Complaints each Trust shares data on PALS cases on a quarterly basis, this data is also not comparable due to the differences in footfall, data recording and service delivery between the Trusts. The recording processes used by the designated PALS and Complaints Team at the ROH enables us to record against existing open cases rather than as individual contacts.

	Royal National Orthopaedic Hospital	Robert Jones Agnes Hunt Hospital	Royal Orthopaedic Hospital
	Q4 2023/24 Number of PALS received (not including compliments)		
PALS Concerns	476	129	163
PALS Enquiries	339	1123	19
	Q3 2023/24 Number of PALS received (not including compliments)		
PALS Concerns	343	90	66
PALS Enquiries	300	1305	21
	Q2 2023/24 Number of PALS received (not including compliments)		
PALS Concerns	245	111	89
PALS Enquiries	346	1135	29
	Q1 2023/24 Number of PALS received (not including compliments)		
PALS Concerns	256	94	136
PALS Enquiries	238	1048	8



7.0 Compliments

115 Compliments were recorded by the Patient Experience Service in 2023/2024. We have strengthened links with Communications team who monitor the Trust Social Media sites and also have direct links for patients, families and carers to get in touch to share their compliments, compliment letters and emails that are sent to our executive teams are also captured. As a Trust we continue to encourage the reporting of all compliments, but it is not always possible to capture them all due to gaps in processes and data collection. We will continue to strive to improve this on an ongoing basis.

Compliment themes were those of the quality of care delivered, staff approach and behaviour, kindness and compassion and all-round hospital experience.

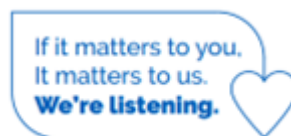
Compliments are captured separately when they have been shared on Healthwatch webpages and these are shared within QSC.

Some examples of the compliments received are;

"I just wanted to share mine and my mom's thanks for the care and attention she received today. My mom attended for an X-ray and a consultation, and then a pre-op assessment. Everyone was so caring, patient, and friendly. From the moment we arrived we were directed to the correct department and every step explained. There is a remarkable difference between the ROH and other hospitals. Thank you to everyone for taking the anxiety out of the day for my mom."

"To whom it may concern, My 17 year old son was operated on today (Saturday 20th April) in the day admissions unit by Dr A and his team (who were all amazing). He was looked after by a wonderful staff Nurse from the moment he arrived on the ward she and her assistant (a University student.... didn't catch her name) looked after him as if he were royalty. Everything was explained to both him and me and my husband fully and clearly. She was kind, funny and honest and had a lot of patience. The HCA (or student nurse) was incredibly polite and helpful and made sure Ethan was happy and comfortable from the moment he arrived to the moment we left. Unfortunately we have had some less than great experiences with operative hospital stays for Ethan in the past, so we were all a bit anxious coming in but ALL of the staff we encountered at ROH were beyond fantastic and have definitely rebuilt our trust and pride in the NHS in just a few hours. I just wanted to say Thank you so much for the care they showed today, you are very fortunate to have staff like them and their patients are incredibly lucky to be looked after by them."

"I went along today to my first ever appointment at ROH. The service received was first class. There was even a screen in reception to update patients regarding whether their appointment on that day was running behind. Very thoughtful. The consultation was extremely satisfactory and informative. All staff were friendly and professional. All in all, a wonderful hospital, and wonderful people."



8.0 Friends and Family Test (FFT) Update and Results

The Friends and Family Test (FFT) is an important feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience. Listening to the views of patients and staff helps identify what is working well, what can be improved and how.

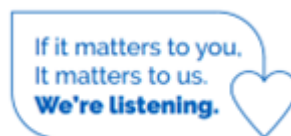
The annual completion rates of all departments that complete the FFT surveys can be seen below, feedback is generally very good. Ten individual areas complete the surveys and seven of those exceeded the KPI of a 40% completion rate against footfall.

Division 1&2		2023/2024		NHS The Royal Orthopaedic Hospital NHS Foundation Trust			
Division 1				0%-34% completion rates			
Division 2				35%-39% completion rates			
				40%-100% completion rates			
Division	Area	Number of reviews	Footfall	Completion rates	Positive rating	Negative rating	Neutral/Do n't Know
By Service							
Div. 2	ADCU	488	4455	11%	100.00%	0.00%	0.00%
Div. 2	HDU	582	726	80%	100.00%	0.00%	0.00%
Div. 2	POAC	1979	23,416	8%	99.65%	0.20%	0.25%
Div. 1	Ward 1	422	983	43%	100.00%	0.00%	0.00%
Div. 1	Ward 2	652	1090	60%	99.69%	0.31%	0.00%
Div. 1	Ward 3	439	644	68%	99.54%	0.00%	0.46%
Div. 1	Ward 4	522	751	70%	99.81%	0.19%	0.00%
Div. 1	Ward 12	522	749	70%	99.81%	0.19%	0.00%
Div. 1	Discharge Lounge	631	1973	32%	99.64%	0.20%	0.16%
Div. 1	Woodlands Suite	145	301	48%	99.29%	0.71%	0.00%
Div. 1&2	All Inpatients	6382	35088	18%	99.74%	0.18%	0.09%
Div. 1&2	All inpatient without Private Ward	6237	34787	18%	99.79%	0.12%	0.10%
Div. 1	Division 1 Inpatient -Wards	3333	6491	51%	99.68%	0.23%	0.09%
Div. 2	Division 2 Inpatients- ADCU and HDU	3049	28597	11%	99.88%	0.07%	0.08%

Where the KPIs were not met there is ongoing work to understand the reasons for that and to improve performance. Some patients will receive care in 2 or more areas in one clinical episode and cannot reasonably be expected to complete the survey for multiple places. We are working with the departments to ensure that patient feedback can be captured in a meaningful way.

9.0 Smiley Faces Surveys

In 2023/2024 some departments were using the “smiley faces” surveys to capture patient feedback. Unfortunately despite staff encouragement and ease of use, the completion rates against footfall did not meet any of the KPIs of 40% and it did not allow the Trust to secure any meaningful information regarding patient experience or improvement.



2023/2024				
Division	Department	Footfall	Number of reviews	Completion rate
Div. 1	OPD	54471	2092	4%
Div. 1	CYPD	3489	830	24%
Div. 2	Therapy services	29602	2566	9%
Div. 2	Griffins Brooke	8775	169	2%
Div. 2	Hydrotherapy	4748	523	11%
Div. 2	MRI	10160	1523	15%
Div. 2	X-Ray	24786	1084	4%
Trust Wide		136031	8787	6%

As the average completion rate across the Trust was 6% in 2023/24 the decision was made to discontinue this contract and move all departments to the Friends and Family Test surveys which will allow equitable information and patient comments via free text to be gathered.

10. JointCare Coffee Catch Ups

The JointCare Coffee Catch Ups (CCU) are held for all primary THR, TKR, BHR and UKR who had their surgery at the ROH between 3 and 6 months prior to the event. All patients are invited and for those who are unable to attend written feedback is encouraged via email or post. During the event there are question cards on each table for patients and their families to provide feedback alongside the discussions held.

The cards contained the following questions.

How well did we prepare you for surgery?

Considering your whole experience, what went well?

How was your care after discharge? – ROCS, Outpatient physio, clinic

Considering your whole experience, what could we have done better?

What advice would you give to a friend or family member attending the ROH for a hip or knee replacement?

In 2023/2024 the events were held :-

June 2023

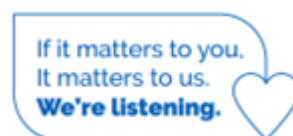
Attendance

578 were invited to attend

82 patients or friend/family members attended.

A further 15 patients sent written feedback via email or text, as they were unable to attend the session

105 comment cards were completed



September 2023

Attendance

489 were invited to attend

69 patients or friend/family members attended

A further 18 patients sent written feedback via email and DrDoctor text, as they were unable to attend the session

115 Comment cards were completed

December 2023

Attendance

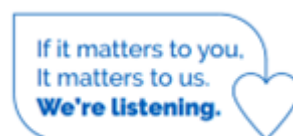
- 565 were invited to attend
- 75 patients or friend/family members attended
- A further 5 patients sent written feedback via email and DrDoctor text, as they were unable to attend the session
- 127 Comment cards were completed
- February 2024
- Attendance
- 537 were invited to attend
- 88 patients or friend/family members attended
- A further 4 patients sent written feedback via email and DrDoctor text, as they were unable to attend the session
- 175 Comment cards were completed

December 2023 was the 20th Coffee Catch Up Event and also welcomed the 1000th attendee!

Each event identified themes and actions we which were shared with the relevant departments and monitored through the Patient Experience Engagement Group.

11.0 Key Achievements for the team in 2023/2024

- Streamlining and advancing the accessibility to the PALS, Complaints and Compliments processes by improving online access and information on internal and external webpages.
- Reviewing and rewriting the PALS and Complaints Policy to ensure that our processes are aligned with the PHSO and new NHS Complaints Standards.
- Decision made to discontinue the “Smiley Faces” surveys to enable meaningful and measurable Patient Feedback to be captured more robustly and acted upon.
- Reporting has been streamlined to more accurately capture those cases that are resolved by the Patient Experience team before reaching the Divisions.
- Updating public facing webpage to ensure accurate information on the department and the processes are available to patients, families and carers.
- Ongoing work with the divisions and triumvirates to improve and reduce internal response times.



- In depth surveys rolled out for inpatients and outpatients.
- The National Health Service Complaints (England) Regulations 2009 and the Trust PALS and Complaints Policy states that an acknowledgement should be made within three working days of receipt by any method. In 2023/24 the Trust responded to 100% of complaint letters within the correct timescale.
- The Patient Experience Team has attended 75% of the “Coffee Catch-Up” meetings for Large Joints.
- Decision made to respond to all feedback submitted about the Trust on the Healthwatch Birmingham site, this will be reflected in next year’s report.
- Report writing reviewed and restructured to identify Trends and Themes alongside data for all reports provided.
- Compliments are now collated by Patient Experience Team in conjunction with the Communication and Media Department to allow for more accurate capture and sharing of best practice aligned with continuous improvement.
- Healthwatch Birmingham feedback will be collated annually as well as quarterly for sharing in this report moving forward.
- The Patient Experience team go onto the wards and proactively seek patient engagement.
- The team held a stand in May 2024 within outpatients to promote patient engagement and understanding of the service.
- Supporting patient and volunteers to attend Trust Board to share their experience.
- Collaboration with the new Youth Worker and Youth Forum to understand the experience of young people receiving care at ROH.

12.0 Plans for the Future

- An E learning course will be developed to support staff in managing complaints and PALS.
- Training to be delivered as part of workforce development to enhance knowledge and confidence when receiving, managing and responding to complaints.
- Further support packages to be developed and delivered around quality responses.
- Continued engagement with patients including joining Quality and Safety reviews and further public engagement stands.
- Strengthen the Patient Engagement and Experience Group to deliver key actions
- Commence Patient Forum