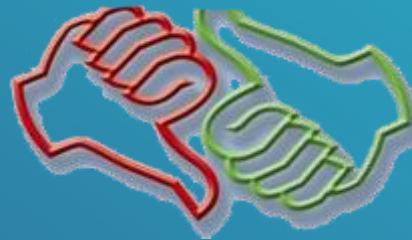


Putting Things Right Annual Report 2018-2019

**Concerns (Complaints,
Claims and Patient Safety
Incidents)
and Compliments**



GIG
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Iechyd Cyhoeddus
Cymru
Public Health
Wales

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Introduction



Public Health Wales recognises that effective patient, service user and public involvement/engagement is an important aspect of the organisations governance arrangements. As such, helps the organisation in the effective management of concerns (patient safety incidents, complaints and claims) and the importance of learning from events in order to support the development and improvement of services. Public Health Wales is therefore committed to the provision of an effective and timely process for responding to concerns, which enables the Trust to improve services based on lessons learnt.

The underlying principle of *Putting Things Right* is that whenever concerns are raised about treatment and care, whether through a complaint, claim or patient safety incident, those involved can expect to receive a prompt acknowledgement and response about how the matter will be taken forward, be dealt with openly and honestly and have an appropriate investigation undertaken into the concerns raised.

Public Health Wales is also committed to ensuring that the process for managing concerns is open, accessible and fair and for taking all reasonable steps to allow users of our services and their representatives to raise a concern in the most appropriate format. Furthermore, it is important that individuals feel that they have been heard, treated with respect and have received an open, honest and timely response to their concern.

Public Health Wales continues to be proactive in its management of concerns. The report builds on the strategic arrangements required to oversee the implementation of the NHS Concerns, Complaints and Redress Arrangements (Wales) Regulation 2011.



Putting Things Right: An Overview of 2018-2019

Formal
complaints: 59

Response times

Acknowledged in 2 working
days: 88%

Final response within 30
working days: 61%

Informal
complaints: 72

Compliments:
1701



Potential
Redress: 2

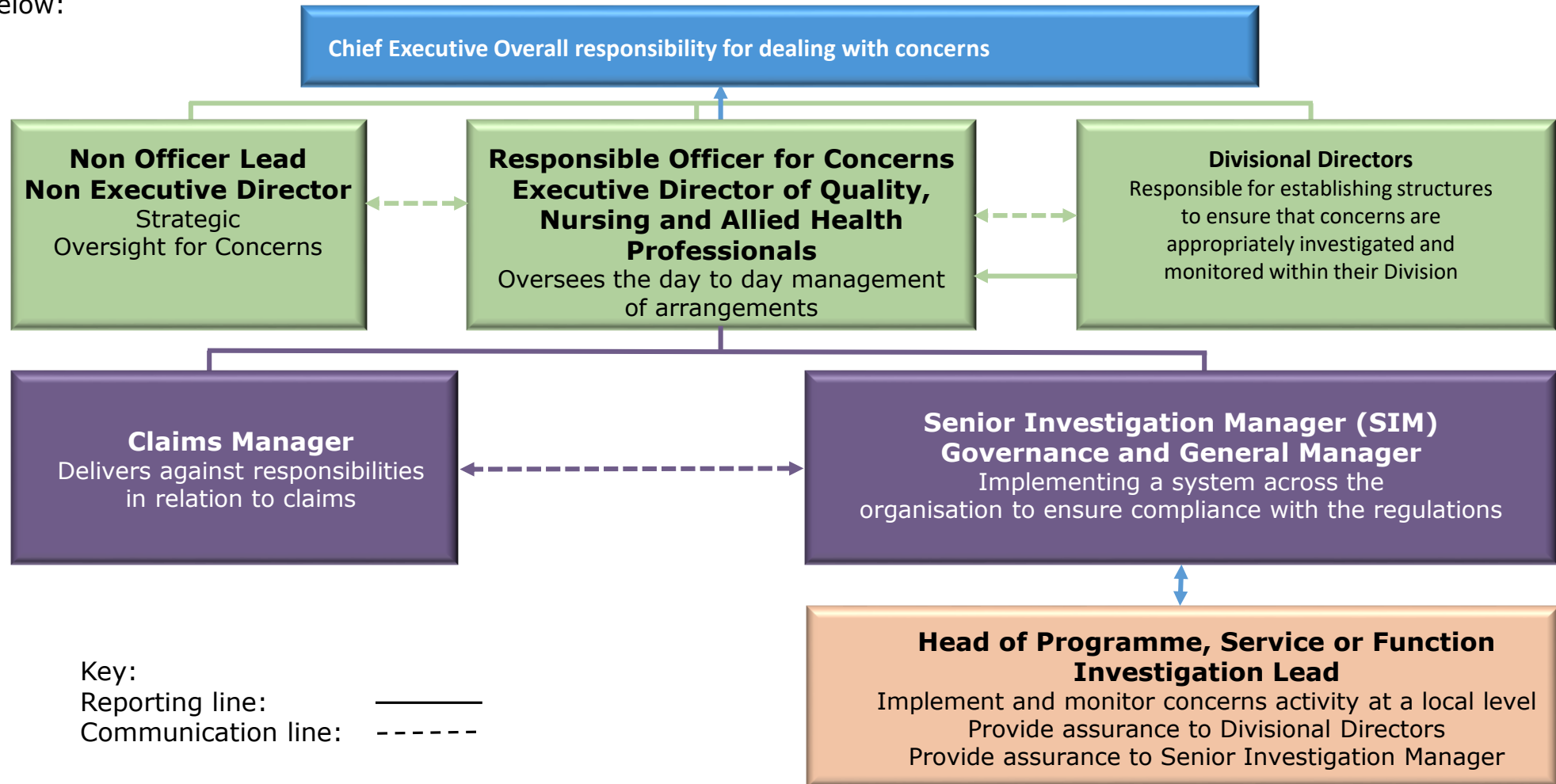
New Claims: 1

Serious
incidents: 7

Never events: 0





Overview Of Arrangements For Handling Concerns

The Chief Executive has overall responsibility and sign off for dealing with all concerns to ensure visibility is had in all areas where a concern may arise. Public Health Wales encourages staff from the service area of the concern to conduct their own investigations and appoint a named contact to interact with the individual. The handling concerns arrangements are detailed below:



Overview Of Arrangements For Handling Concerns Continued

Independent scrutiny, governance and reporting arrangements

-  In order to ensure scrutiny of the management of concerns and where a potential for redress is identified, the Executive Team acts as the Redress Panel for determining qualifying liability and level of compensation to be awarded. The panel is chaired by the Executive Director for Quality, Nursing and Allied Health Professionals (Responsible Officer).
-  A quarterly Putting Things Right (PTR) report is presented to the Executive Team and Quality, Safety and Improvement Committee. As part of the Performance Reporting Framework the Executive Team also received monthly updates on the number of concerns received and response rates as it is a Welsh Government Tier 1 performance target.
-  In addition to the quarterly PTR report service areas submit reports to the pan organisations Service User Experience and Learning Panel, which is chaired by the Executive Director for Quality, Nursing and Allied Health Professionals (Responsible Officer).
-  The reports detail the concerns and claims received, service user experience feedback, trends and lessons learnt. This enables patterns and possible 'hot spots' to be identified via the triangulation and analysis of incidents, complaints, claims and service user data. This assists with providing assurance to the Board, Executive Team, Quality, Safety and Improvement Committee and the public on the organisation's commitment to continually improve services, functions and programmes.



Complaints Process

All concerns received by Public Health Wales are handled in accordance with the regulation for concerns and redress arrangements. A single point of contact has been established which details the Responsible Officers contact information. However, the majority of concerns are sent directly to Divisional Directors due to the strong branding of some of the services within Public Health Wales.

Divisional Directors are responsible for appointing a lead investigator and for ensuring that investigations are carried out in accordance with the Putting Things Right Regulation, Guidance and Public Health Wales Operational Policy.

All final responses are reviewed by the Chief Executive prior to them being sent to the individual concerned. The aim is to provide a full response within 30 working days of receipt of the concern. However, in exceptional circumstances, where further investigation is required or there is involvement with other Health Boards or external organisations, this may not be possible.

Public Health Wales aims to ensure that where there are delays, the person raising the concern is advised and provided with an explanation as to why the delay has occurred.

The individual raising the concern is always invited to discuss their concern with an appropriate member of staff and / or the Responsible Officer.

Each response letter advises the person raising the concern of their right to refer their concern to the Public Services Ombudsman for Wales (PSOW) if they remain dissatisfied with the response or the organisation's investigation.

COMPLAINT



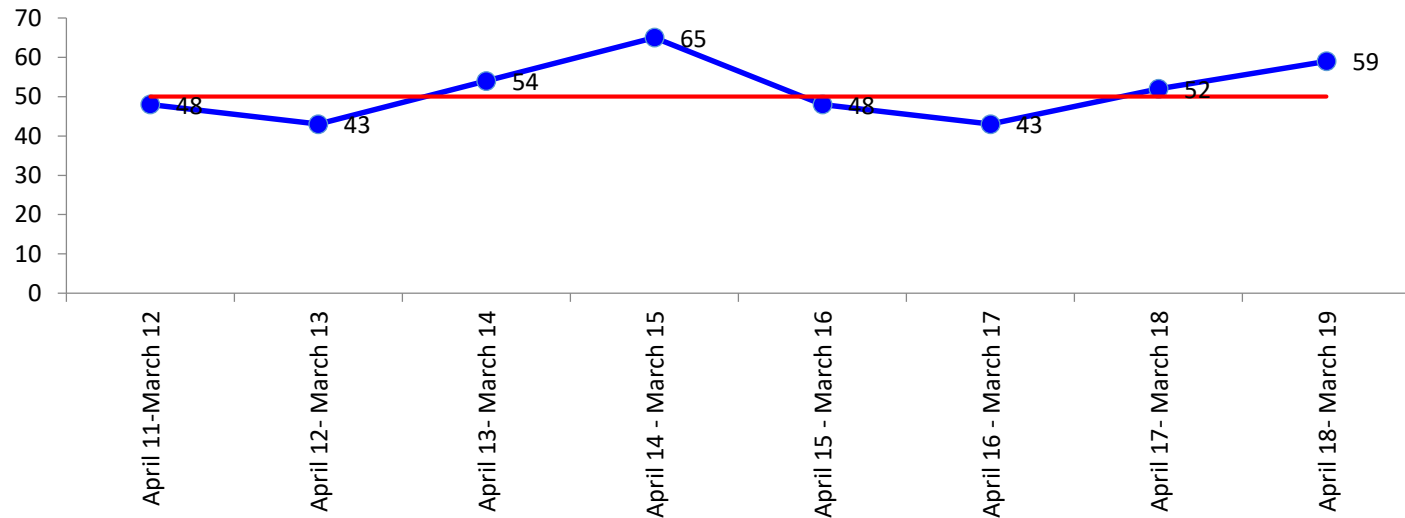
Complaints Activity

In 2018-2019, 59 formal complaints were investigated under the Putting Things Right – Handling Concerns regulation which is an increase of 7 when compared to 2017-18. In addition a total of 72 'on the spot' complaints were received for the period, which is also an increase on previous years. Staff are encouraged to deal with complaints on the spot if appropriate. This increase may indicate that staff are more comfortable with dealing with issues as they arise. Nevertheless, the increase in 'on the spot' complaints does not correlate with a decrease in formal complaints. However, it should also be noted that a number of new services, functions and programmes have joined/commenced in Public Health Wales in the past few years which may account for this.

The run chart below depicts the number of formal complaints received from 01 April 2011 to 31 March 2019 and shows that over this period the number of complaints received has remained relatively low and stable, with a slight increase of 7 complaints from March 18- March 19.



The pillars above demonstrate the difference in complaint numbers from April 2017- March 19.



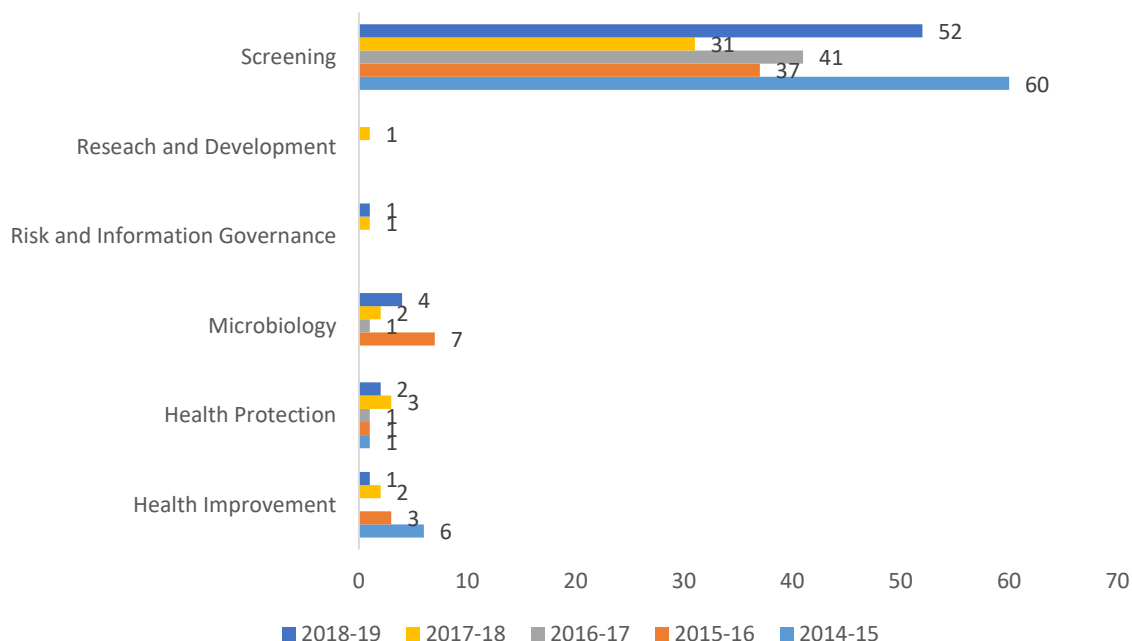


Complaints Activity by Division



Complaints by Division

The chart below details the complaints activity investigated under PTR by Division for the period March 2015 – March 2019.



- As Screening have contact with large numbers of the public it attracts the highest number of complaints. During 2018-19 the national population based screening programmes screened a total of 629,000 participants.
- The percentage of concerns received by the Screening Division in comparison to the number of individuals screened is approximately 1 per 12,096 screened and represents 0.008% of screening activity.



Complaints Activity by Screening Programme

The complaints received by the Screening Division have been broken down further by programme in the table below, along with the number of complaints received by each programme:

	2016-17			2017-18			2018-19		
Screen Prog	No of people screened	No of concerns received	% / ratio of concerns received	No of people screened	No of concerns received	% / ratio of concerns received	No of people screened	No of concerns received	% / ratio of concerns received
BTW	122,000	10	0.008% 1:12,200	115,000	16	0.01% 1:7,187	117,000	16	0.01% 1:7,312
CSW	175,000	5	0.002% 1:35,000	138,000	1	0.0007% 1:138,000	170,000	6	0.003% 1:28,333
BSW	152,000	7	0.004% 1:21,700	157,000	6	0.003% 1:26,166	165,000	3	0.001% 1:55,000
NBHSW	33,000	1	0.003% 1:33,000	32,000	2	0.006% 1:16,000	31,000	0	0% N/A
WAAASP	17,000	4	0.01% 1:4,250	15,000	2	0.01% 1:7,500	16,000	3	0.01% 1:5,333
DESW	140,000	14	0.01% 1:10,000	121,000	11	0.009% 1:11,000	130,000	24	0.01% 1:5,416
Total	622,152	41	0.006% 1:15,174	578,000	38	0.006% 1:15,220	629,000	52	0.008% 1:12,096

Complaints Performance

There has been a continuing focus to ensure that we effectively and efficiently answer concerns in a timely manner and continually use this information to improve our services. The table below sets out the organisations performance for 2018-19 compared to the previous 3 years:

	2016/17	2017/18	2018/19
Total Number of Formal Concerns	43	52	59
No of concerns acknowledged within 2 working days	38 (88%)	45 (87%)	52 (88%)
No of concerns responded to within 30 working days of receipt	31 (72%)	38 (73%)	36 (61%)
No of concerns responded to within a period exceeding 30 working days but within 6 months	12 (28%)	14 (27%)	23 (39%)

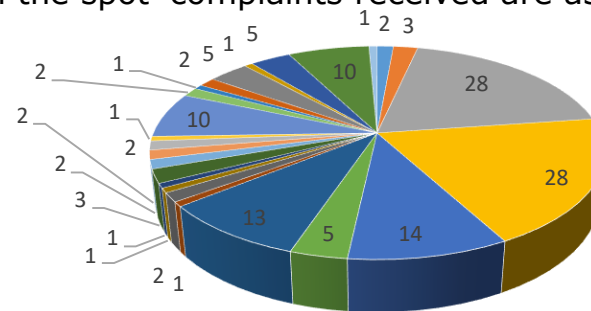
The importance of ensuring responses to complaints are provided without undue delay is recognised, although this needs to be balanced with ensuring that the quality of investigations and responses are not compromised in order to meet prescribed timescales.

However, it was not possible to respond to all complaints within the 30 day timescale as it is acknowledged that for those complaints that require clinical interval reviews or need to be investigated on a joint basis with another NHS organisation it can take longer than 30 working days.

Due to a decrease in the in the timeliness of responses during quarter 1 and 2 of the reporting period (2018/19) a review was undertaken to identify potential bottlenecks that may be contributing to the delays encountered. As consequence of the review findings change to the internal process has been implemented to achieve the Putting Things Right – Handling Concerns timescales. Monitoring is ongoing.

Complaints Categories

The categories for both the formal and 'on the spot' complaints received are as follows :



- | | | | | |
|--|---------------------|-----------------------|-----------------------------------|---------------------------------|
| ■ Access (bed availability)/ referrals | ■ Administrative | ■ Appointments | ■ Attitude/behaviour/assault | ■ Clinical treatment/assessment |
| ■ Communication Issues | ■ Concerns Handling | ■ Consent | ■ Delay's/Cancellation | ■ Delivery Issues |
| ■ Documentation | ■ Equality/Language | ■ Equipment | ■ Invitation Process | ■ Medication |
| ■ Other | ■ Patient Care | ■ Privacy/Dignity | ■ Result process/Delay in results | ■ Service Provision |
| ■ Staff competence | ■ Test Results | ■ Treatment/Procedure | ■ Waiting Times | ■ Welsh Language |

Most common themes:

Appointments: A demand and capacity review has been conducted and the work will be taken forward by the new Programme Manager when appointed.

Service standards have been adopted which protect clinics for participants who have been cancelled by the service on 2 previous occasions.

Attitude/Behaviour/Assault: ongoing customer care training is provided within the Screening Division.

Clinical Treatment/Assessment: the themes for this category vary due to the diverse nature of Public Health Wales, but include:

- pain during and following breast screening. Information leaflets are provided to raise awareness of this.
- requests for interval cancer reviews following the diagnosis of cancer.

Redress

When an investigation identifies that a breach or duty has occurred along with the potential for redress further investigations are undertaken in line with the Putting things Right regulations to determine whether there is a 'qualifying liability' in tort (a civil wrong).



Due to the small number of redress cases received by the organisation, the Executive Team acts as the Redress Panel. When a breach of duty and qualifying liability is identified the case is presented to the Redress Panel for consideration and to determine the level of compensation. When this occurs legal advice is sought from Legal and Risk Services.

During 2018-19 the Executive team approved 1 claim via the Redress panel whereby a qualifying liability was agreed along with an offer of compensation.

In addition to this, Public Health Wales conducted further investigations into 2 concerns to establish whether there was a qualifying liability in tort. Medical expert reports were obtained for both with the conclusion that there was no qualifying liability.

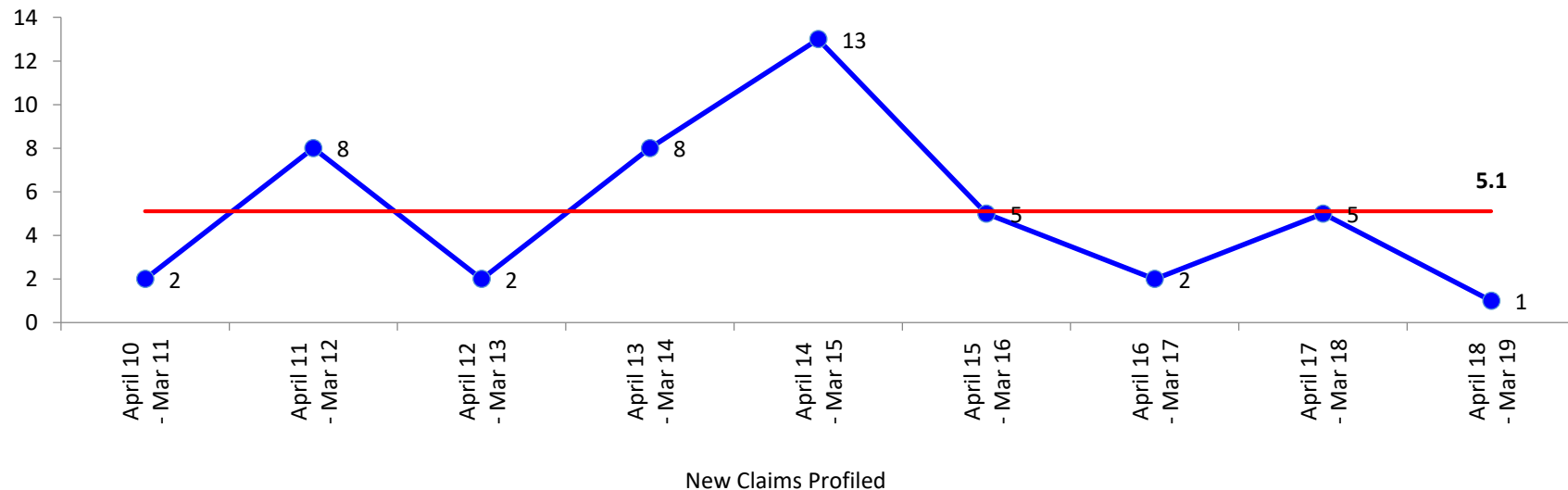
Claims

Public Health Wales has a relatively small claims profile. Claims are reported via Datix and managed with advice and support from Legal and Risk Services. All claims are managed and analysed to ensure that lessons are learnt in order to reduce risks of reoccurrence and improve services.

At the end of March 2019, there were 9 open claims, of which all relate to clinical negligence. During the reporting year 1 new clinical negligence claim was received. There were no personal injury claims during this period. No themes or trends were identified.

During the reporting period Public Health Wales closed 6 claims, consisting of 4 clinical negligence claims and 2 personal injury claim. In addition 2 claims were settled during the period.

The run chart below shows a comparison of new claims received during each financial year up to the end of March 2019.



External Assurance

Claims audit

In November 2018, an internal audit of the claims reimbursement process was undertaken by the NHS Wales Shared Services Partnership Audit and Assurance Service.

The objective of the audit was to evaluate and determine the adequacy of the systems and controls in place for the management of claims reimbursement in order to provide assurance to the Audit and Corporate Governance Committee that risks are managed appropriately.

Public Health Wales achieved **substantial assurance** and there were no recommendations as a result of the audit for Public Health Wales to action.



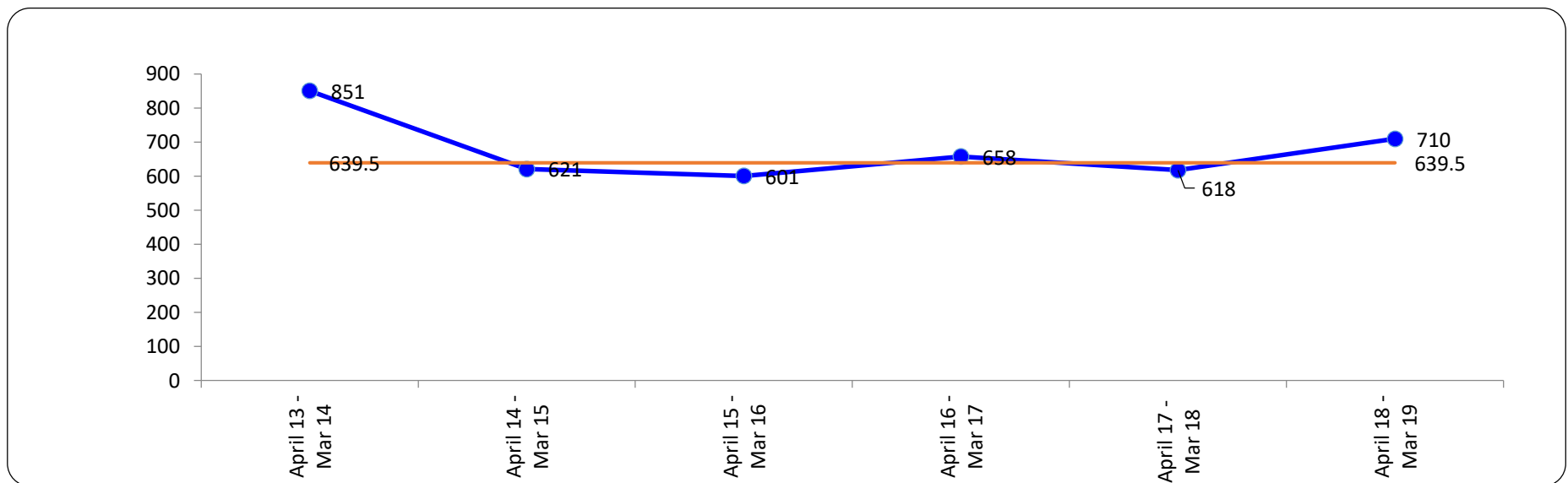


Patient and Client Incidents



Patient and client incidents are reported via Datix (an electronic database) and an analysis of these incidents are reported to both the Executive Team and the Quality, Safety and Improvement Committee via the quarterly Putting Things Right Report.

The below chart suggests that there has been little variation in the number of patient and client incidents and indicates that the number of incidents remains relatively stable.



Any incidents that have caused significant harm are reported to the Welsh Government and managed via the Serious Incident process. During 2018-19 the organisation reported 7 serious incidents to the Welsh Government which related to out of date vials.

Compliments

We value feedback and actively encourage people to contact us to share their experience. During 2018-2019 we received a total of 1,701 compliments which is a slight decrease on the previous year when 1,714 compliments were received.

Diabetic Eye Screening

A short thank you letter was in order after your prompt response to my recent eye test. Well done to all of you from a grateful patient.

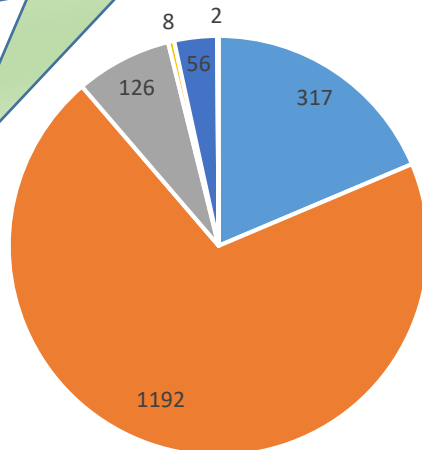
Microbiology

Just would like to say a big thank you to you and your team for making us so welcome on Tuesday and spending your time explaining and showing us what was involved when we send our slides to you for Genotyping. All three of us found the day interesting and very informative and it was great being able to have a go at the DNA extraction.

Breast Test Wales

I can't emphasize how wonderful all the staff were, from my initial call back on receiving the recall letter, the staff at your clinic, the first nurse who did the mammogram, the nurse on the telephone and the consultant and radiologist. They were all friendly, pleasant, informative and professional.

- Positive comments about service
- Positive attitude/behaviour of staff
- Professionalism of staff
- Timeliness of results
- Positive comments re waiting times
- Flexibility of appointment

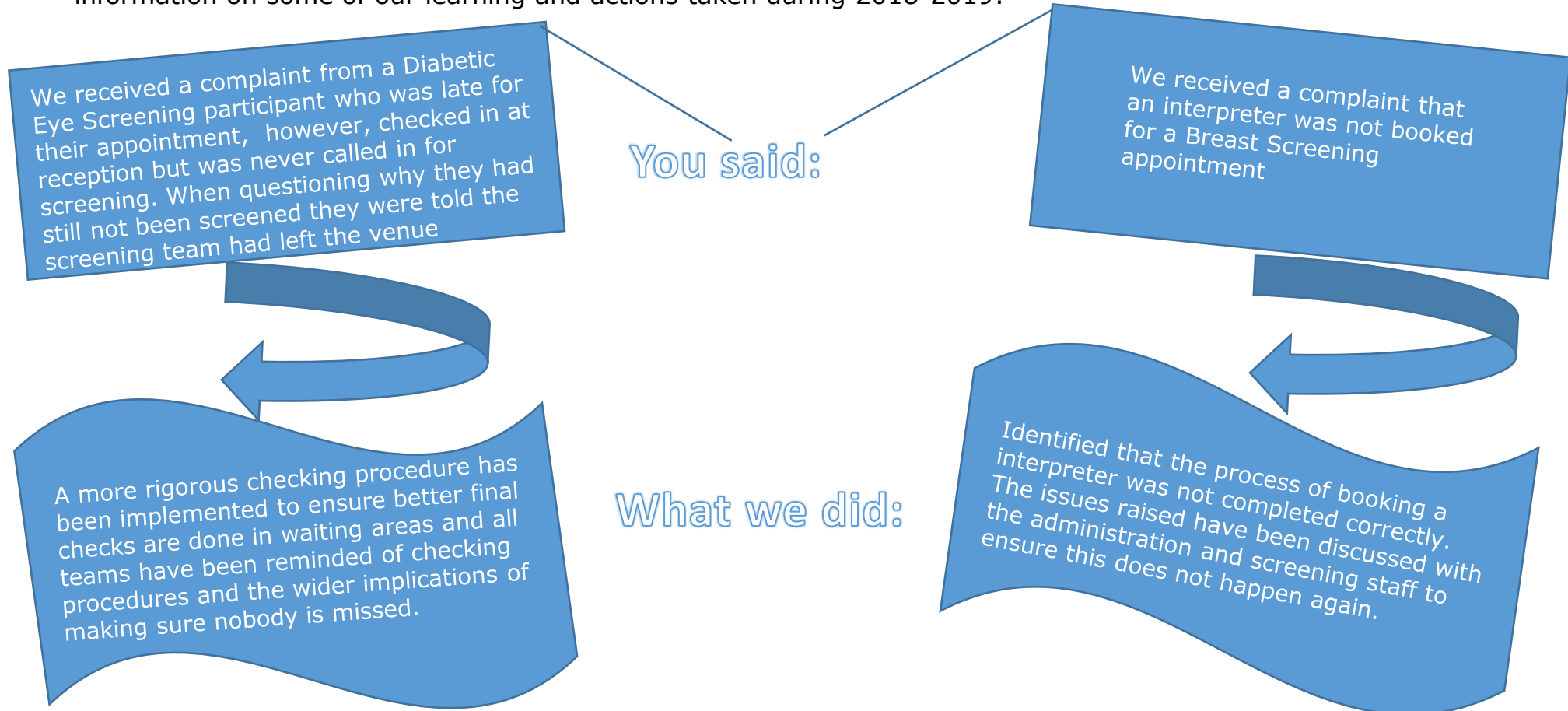


Ratio of Compliments to complaints:

29:1

Our Learning

We value the opportunity that each concern brings to learn and improve, along with recognising the importance of sharing learning across the organisation via the Service User Experience and Learning Panel. As a consequence all incidents, claims and concerns are reviewed to ensure that lessons are identified to help improve the quality and safety of services provided. The table below provides information on some of our learning and actions taken during 2018-2019:



Our Learning continued...

There have been a number of concerns surrounding the issue of obtaining consent in screening appointments.

You said:

A number of samples submitted to microbiology were not processed according to Standard Operating Procedures and results were not provided within urgent timescales. The complaint was seeking an explanation and assurance service will improve in order to prevent impacting patient management.

A consent task and finish group has been set up to look at the difficulties encountered with the consent process in the screening division.

What we did:

We highlighted with the pathology reception team the need to ensure "urgent" samples are transported to the microbiology laboratory as soon as they arrive & impressed upon the microbiology laboratory staff the need to process urgent samples as soon as possible upon receipt



Summary of our improvements during 2018-19



- ✓ All concerns are reported via the Datix system and the proactive analysis of the data provided assurance to the Executive Team and Quality, Safety and Improvement Committee regarding the governance arrangements throughout Public Health Wales.
- ✓ We continued to work towards improving the number of responses sent within the 30 working day timescale and a monthly review of Datix is undertaken to identify where potential delays may occur. However, further work is needed to improve compliance with the 30 day turnaround timescales to ensure the 75% target for responses to formal complaints, as set by the Welsh Government, is met.
- ✓ We participated in joint meetings with other health boards to share learning with regards to dealing with concerns under PTR.
- ✓ Set up weekly meetings with complaint co-ordinators to keep on top of complaints and develop a better working relationship with the concerns team and Programmes.
- ✓ Staff are still encouraged to make early contact for each complaint raised which has led to a further increase in 'on the spot' concerns for the year in comparison to last year.
- ✓ We produced a report which considered a 'Review of concerns response times'. This was presented to the Business Executive Team and at the Quality, Safety & Improvement committee. It assisted with identifying trends in order to improve response times of concerns.

Summary of priorities for 2019-20

- ✓ Continue to work with Divisions to manage complaints and improving the number of responses sent within the 30 working day timescale, ensuring that the timescale target is met through regular performance monitoring at Divisional/service area level, the ensure compliance with 75% response target set by the Welsh Government is achieved
- ✓ Undertake a review of lessons learnt to establish that identified actions have been completed and improvements realised
- ✓ Continue to improve the quality and learning from concerns by conducting deep dives to help the organisation to continually improve the services provided
- ✓ Continue to encourage early contact with the person or their representative raising the complaint
- ✓ Participate in the NHS wide peer review of the management of complaints and claims
- ✓ Review the Putting Things Right – Handling Concerns Policy and Procedure to ensure it is compliant
- ✓ Prepare for any changes in legislation and when the Quality Bill is passed.