

## QUALITY

### *QUALITY REPORT - CLINICAL GOVERNANCE INDICATORS: Quarter ending 30 June 1999*

#### 1. Risk Events

The CareKey database system for recording risk events is now fully operational. The first draft reports are being considered at divisional level, and by the Risk Management Group, to establish the format of future reports to ensure that the information collected is used effectively for service planning and to help meet the broader agenda of clinical governance.

The data available so far suggests that the most frequent incidents involving patients relate to falls, and for non patient incidents the most frequently reported event is assault.

#### 2. Clinical Audit

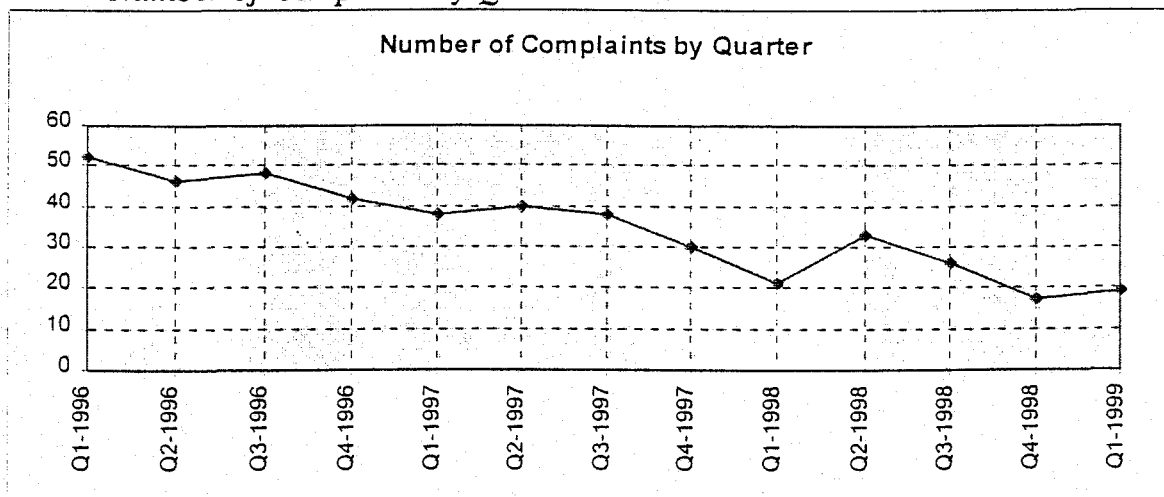
The following clinical audit projects were completed this quarter:

- \* Re-audit of Periodontal Standards (Dental Service)
- \* Child Growth Surveillance (Child Health)
- \* Appropriate use of Day Treatment Programmes (Adult Mental Health)
- \* Detection of Depression in the Elderly (Elderly Medicine)
- \* Re-audit of compliance with revised Handling Guidelines (Physio-therapy)
- \* C.A.P.S. - Audit of success of Winter Pressures Programmes

#### 3. Complaints

##### Local Resolution

##### ◆ *Number of Complaints by Quarter*

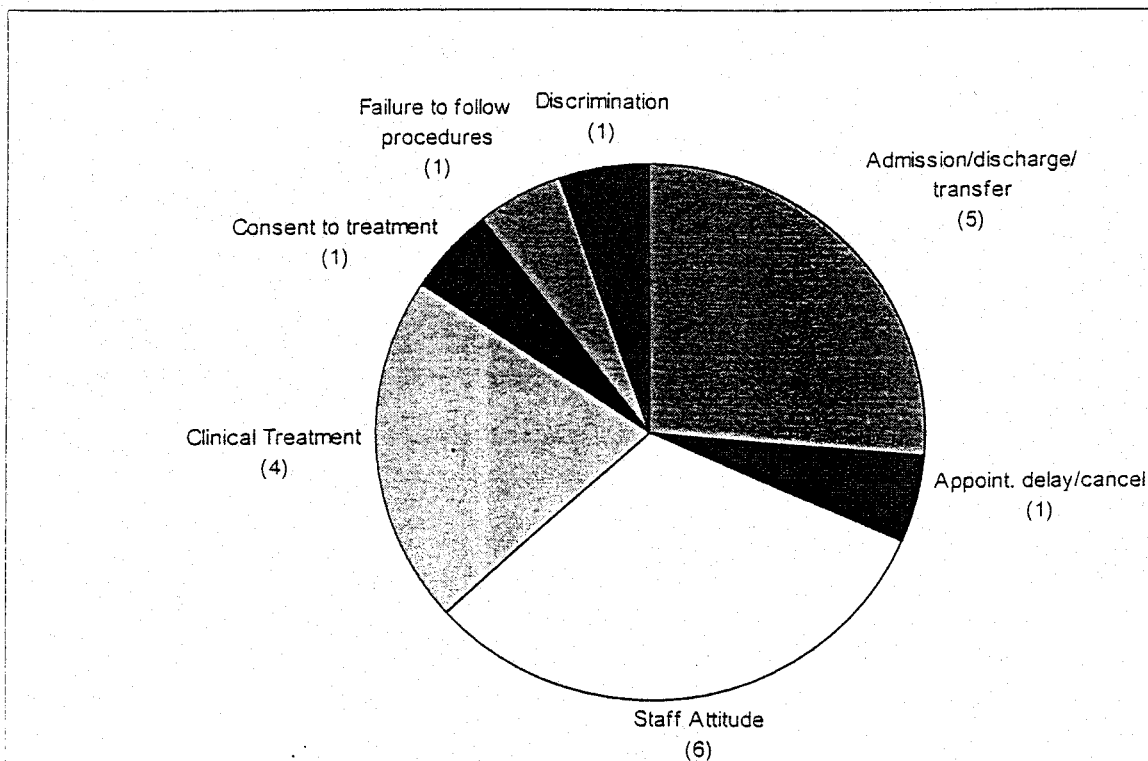


◆ *Response Analysis*

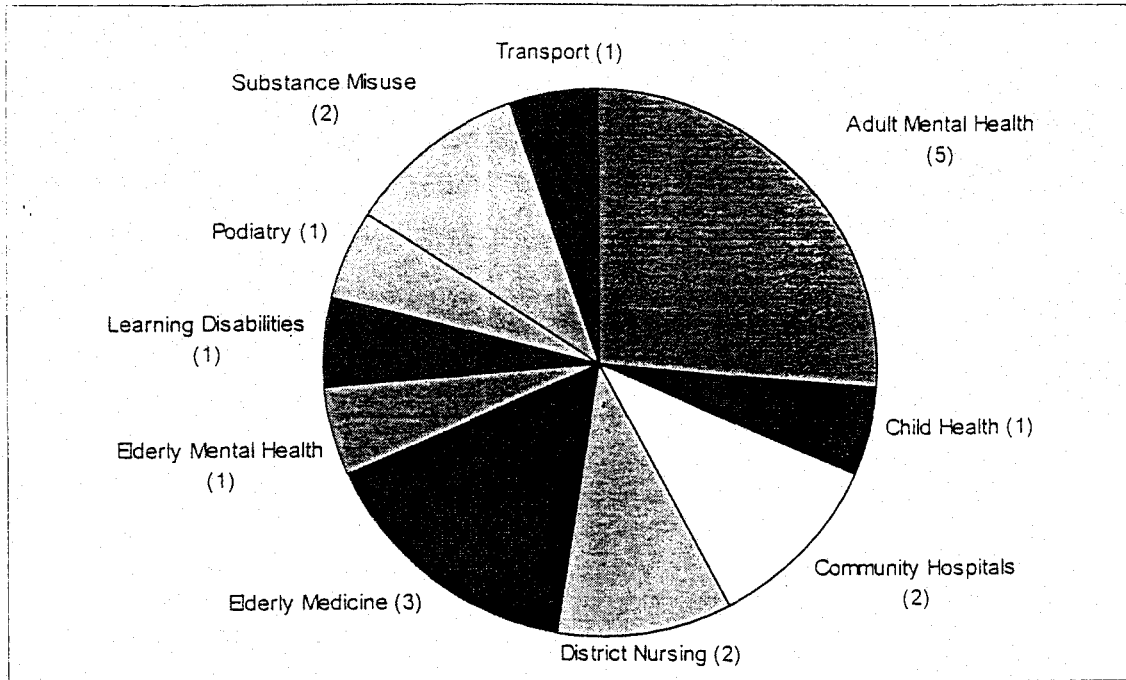
	Total Number of Complaints	Acknowledged within 2 working days	Response within 20 working days
Q1/99	19	80%	50%
Q4/98	17	73%	26%
Q3/98	26	100%	55%
Q2/98	33	89%	50%
Q1/98	21	100%	57%
<b>Total 98/99</b>	<b>97</b>	<b>91%</b>	<b>47%</b>

Four complaints were responded to in full within one week. Of the nine complaints not completed within 20 working days, five were completed within 30 working days, one after 44 working days, one took 66 working days and one was outstanding at the time of report. The two complaints which took over 30 days for response were complex and required in-depth investigation. A summary of all complaints has been provided to the Trust Board.

◆ *Types of Complaint Received This quarter*



◆ *Complaints by Service*



◆ *Action/changes resulting from complaints included:*

- \* Procedures for checking patient identity in the community revised
- \* CPA policy revised to include need for CPA review when key worker needs to withdraw
- \* Routine patient transport system, including use of taxis, under review

**Independent Review**

No requests for Independent Review were received this quarter. The panel report from a review hearing held in March 1999 was received; this report, and the resulting action plan developed by the service concerned, have been made available to the Trust Board. A follow up report, on achievements made against the action plan resulting from a panel hearing held in December, has also been made available to the Trust Board.

#### 4. Waiting Time for first OPD

The waiting time standard for the first outpatient appointment, following GP referral, is that 90% of people should be seen within 13 weeks, and 100% within 26 weeks; children should be seen within 6 weeks. The estimated exceptions to these standards (based on next available appointment) at 30 June 1999 were:

<i>Service</i>	<i>Q3/98</i>	<i>Q4/98</i>	<i>Q1/99</i>
<i>Adult Mental Health</i>			<i>18 weeks (one clinic only)</i>
<i>Child and Family Therapy</i>	<i>25-64 weeks</i>	<i>8-55 weeks</i>	<i>7-46 weeks (5 out of 6 clinics with wait of 17 weeks or less)</i>
<i>Community Paediatrics</i>	<i>6-9 weeks</i>	<i>6-10 weeks</i>	<i>7-20 weeks</i>
<i>Dental (children)</i>			<i>7-12 weeks (8 out of 13 clinics)</i>
<i>Family Planning (psychosexual) (Genetic Counselling) Vas. Ops. (GHC)</i>	<i>18 weeks</i>	<i>17 weeks 15 weeks 16 weeks</i>	<i>21 weeks 14 weeks</i>
<i>Physiotherapy - (Gosport) - (Waterlooville) - (Havant HC) - (QAH OPD + Neuro)</i>	<i>21 weeks 16 weeks 14 weeks</i>	<i>20 weeks</i>	<i>20 weeks 17 weeks 16 weeks (OPD)</i>
<i>Paediatric physiotherapy</i>	<i>9-17 weeks</i>	<i>10-24 weeks</i>	<i>6-14 weeks</i>
<i>Paediatric occupational therapy</i>	<i>9-12 weeks</i>	<i>15-24 weeks</i>	<i>8-22 weeks</i>
<i>Paediatric OT &amp; PT</i>	<i>23-25 weeks</i>	<i>10-36 weeks</i>	<i>24-30 weeks</i>
<i>Podiatry - (Denmead) (Havant HC) - (Hayling HC) - (Petersfield) - (Biomechanics) - (Waterlooville)</i>	<i>19 weeks 17 weeks 27 weeks 52 weeks</i>	<i>16 weeks 20 weeks 33 weeks 40 weeks</i>	<i>14 weeks 14 weeks 28 weeks 36 weeks 15 weeks</i>
<i>School Nursing - Enuresis clinics</i>	<i>7-8 weeks (3 out of 13 clinics)</i>	<i>7-12 weeks (5 out of 12 clinics)</i>	<i>10/12 weeks (2 out of 13)</i>

## Complaints Received during Quarter 1, 1999 (April-June) Summary Report

Complaint No.	Complaint Date	Complainant Name	Complaint Type	Complaint Status	Resolution Date
A99/001	15-04-1999	CONFIDENTIAL	Pat status, discrim(eg racial, sex, age)	Closed	21-04-1999
<p><b>Summary:</b> Code A wrote to complain about the attitude and behaviour of the taxi driver who transport his wife to the health centre.</p> <p><b>Resolution:</b> Problems have been experienced with taxi service. Apology given for distress caused to Code A</p>					
A99/002	16-04-1999	CONFIDENTIAL	Admission, discharge and transfer arrang	Closed	12-05-1999
<p><b>Summary:</b> Code A wrote to complain about being discharged early from a six week programme.</p> <p><b>Resolution:</b> A full explanation was given, and he was advised to reapply if treatment was still needed.</p>					
A99/003	16-04-1999	CONFIDENTIAL	All aspects of clinical treatment	Closed	18-06-1999
<p><b>Summary:</b> Code A wrote to complain about the podiatry care received by his late mother, Code A</p> <p><b>Resolution:</b> Full explanation given - Mother often cancelled appointments - care was appropriate.</p>					
A99/004	16-04-1999	CONFIDENTIAL	Admission, discharge and transfer arrang	Closed	06-05-1999
<p><b>Summary:</b> Code A wrote to complain about the way she was treated whilst on Ellen Cook Ward.</p> <p><b>Resolution:</b> A meeting with the service manager resolved her concerns.</p>					
A99/005	20-04-1999	CONFIDENTIAL	Attitude of staff	Closed	23-04-1999
<p><b>Summary:</b> Code A wrote to complain about the relocation of his mother's bed on George Ward, Queen Alexandra Hospital.</p> <p><b>Resolution:</b> As communication with the family and ward staff has again broken down suggestion made that Code A and his sisters meet with the Chief Executive, Consultant and General Manager to discuss way forward.</p>					
A99/006	22-04-1999	CONFIDENTIAL	Failure to follow agreed procedures	Closed	21-05-1999
<p><b>Summary:</b> Code A wrote to complain about the fact that a district nurse called on his aunt, Code A and collected blood and urine samples before realising that she was in the wrong flat and that Code A was not the patient she was supposed to see.</p> <p><b>Resolution:</b> Events did occur as outlined in Code A letter. Apology given. New procedures have been implemented to avoid a similar mistake being made in future.</p>					
A99/007	05-05-1999	CONFIDENTIAL	Attitude of staff	Open	05-08-1999
<p><b>Summary:</b> Code A wrote to complain about the attitude of the community mental health staff, of the fact that her support group was split into two, and about a holiday she took with the group.</p> <p><b>Resolution:</b> Matters investigated and full response sent. Conciliation meeting to be chaired by Health Authority conciliator arranged. To be attended by Code A relevant staff and community health council representative</p>					
A99/008	10-05-1999	CONFIDENTIAL	Consent to treatment	Open	18-06-1999
<p><b>Summary:</b> Code A wrote to complain about the fact that the consultant gave his father medication without his consent.</p> <p><b>Resolution:</b> He had been displaced as next-of-kin, and a second medical opinion fully supported the treatment given. Apology given for any distress caused.</p>					
A99/009	10-05-1999	CONFIDENTIAL	Admission, discharge and transfer arrang	Closed	14-05-1999
<p><b>Summary:</b> Code A wrote to complain about the problems experienced by her son and daughter-in-law.</p> <p><b>Resolution:</b> Matter fully investigated and apology given for distress caused to family. With hindsight Mrs. T.'s daughter-in-law and newborn baby should not have been sent to Petersfield Hospital but referred to the acute services.</p>					
A99/0010	11-05-1999	CONFIDENTIAL	Attitude of staff	Closed	11-06-1999
<p><b>Summary:</b> Code A wrote to complain about the attitude of the staff on Philip Ward, Queen Alexandra Hospital.</p> <p><b>Resolution:</b> Matters raised were investigated and full response sent to Code A Apology given and meeting offered.</p>					
A99/0012	25-05-1999	CONFIDENTIAL	All aspects of clinical treatment	Closed	16-06-1999
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<p><b>Summary:</b> Code A wrote to complain about the drugs given to her sister, Code A which she alleges have caused a brain haemorrhage.  <b>Resolution:</b> Consultant met with Code A and discussed situation fully. Code A has not, in fact, had a brain haemorrhage.</p>					
A99/0011	25-05-1999	CONFIDENTIAL	Appoint. delay/cancellation (outpatient)	Closed	28-05-1999
<p><b>Summary:</b> Code A wrote to complain about the difficulty she had in obtaining an additional appointment with the doctor for her husband.  <b>Resolution:</b> Consultant's clinics were fully booked so an additional appointment for Code A was not possible. He was, however, seen by a different consultant when he arrived at the Park Way Centre on 26th May, 1999.</p>					
A99/0013	07-06-1999	CONFIDENTIAL	Attitude of staff	Closed	30-06-1999
<p><b>Summary:</b> Code A wrote to complain about the attitude of the staff on the Nelson Unit in particular when he was taken ill during a group session.  <b>Resolution:</b> Full details of findings of investigation given to Code A. Apology given for distress caused.</p>					
A99/0014	11-06-1999	CONFIDENTIAL	All aspects of clinical treatment	Closed	23-07-1999
<p><b>Summary:</b> Code A and her sister, Code A, wrote to complain about the care given to their late mother, Code A.  <b>Resolution:</b> Code A and her sister Code A met with Service Managers to discuss concerns and letter summarised details of meeting. Apology given for distress caused by poor communication.</p>					
A99/0015	16-06-1999	CONFIDENTIAL	Admission, discharge and transfer arrang	Closed	09-07-1999
<p><b>Summary:</b> Code A wrote to complain about the way she was informed that her son would no longer be eligible for respite care at Tamarine.  <b>Resolution:</b> Apology given for totally inappropriate way Code A was given information which was, in fact, not true. Her son will still be eligible to use Tamarine.</p>					
A99/0016	22-06-1999	CONFIDENTIAL	Attitude of staff	Closed	30-07-1999
<p><b>Summary:</b> Code A wrote to complain about the attitude of two nurses at St. Christopher's Hospital where their late mother, Code A was a patient.  <b>Resolution:</b> Results of investigation into Code A concerns given to them in full. Offer made for them to meet with consultant to discuss further if they wish.</p>					
A99/0017	29-06-1999	CONFIDENTIAL	All aspects of clinical treatment	Open	
<p><b>Summary:</b> Code A wrote to complain about the lack of provision of therapy to her twin daughters at Rachel Maddocks School.  <b>Resolution:</b></p>					
A99/0018	28-06-1999	CONFIDENTIAL	Attitude of staff	Closed	27-07-1999
<p><b>Summary:</b> L&amp;S, Solicitors, wrote on behalf of Code A to complain about the attitude of the consultant psychiatrist.  <b>Resolution:</b> Consultant remains in some doubt as to way in which Code A feels mistreated as outcome of consultation was appropriate. Apology given for distress caused by communication.</p>					
A99/0019	29-06-1999	CONFIDENTIAL	Admission, discharge and transfer arrang	Closed	22-07-1999
<p><b>Summary:</b> Code A a district nursing sister, wrote to complain about the lack of communication to the district nursing service regarding the discharge arrangements in respect of Code A.  <b>Resolution:</b> There was disharmony amongst family and discharge destination was changed several times which resulted in community nursing service being overlooked. Apology given.</p>					

Grand Total Count: 19

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