

QUALITY

**QUALITY REPORT:  
QUARTER ENDING 31 DECEMBER 1998**

**1. Patient's Charter**

◆ *Waiting Times for first Outpatient Appointment*

Table 12

Estimated exceptions to the Health Authority's standard of 13 weeks for adults and 6 weeks for children at 31 December 1998, based on next available appointment were:

<i>Service</i>	<i>Q1/98</i>	<i>Q2/98</i>	<i>Q3/98</i>
<i>Adult Mental Health</i>	<i>15 weeks)</i>		
<i>Child and Family Therapy</i>	<i>31-66 weeks</i>	<i>45-54 weeks</i>	<i>25-64 weeks</i>
<i>Community Paediatrics</i>	<i>11-12 weeks</i>	<i>7-17 weeks</i>	<i>6-9 weeks</i>
<i>Dental (children)</i>	<i>10 - 14 weeks</i>		
<i>Elderly Medicine (Gosport War Memorial)</i>	<i>15 weeks</i>		
<i>Family Planning (psychosexual) (Genetic Counselling)</i>	<i>15 weeks 21 weeks</i>	<i>21 weeks 14 weeks</i>	<i>18 weeks</i>
<i>Physiotherapy - (Portchester)</i>	<i>14 weeks</i>	<i>16 week</i>	
<i>- (Gosport)</i>	<i>14 weeks</i>	<i>16 weeks</i>	<i>21 weeks</i>
<i>- (Hill Park)</i>	<i>16 weeks</i>		
<i>- (Petersfield)</i>	<i>15 weeks</i>		
<i>- (Waterlooville)</i>			<i>16 weeks</i>
<i>- (QAH OPD + Neuro)</i>		<i>14 weeks</i>	<i>14 weeks</i>
<i>Paediatric physiotherapy</i>	<i>7 &amp; 9 weeks)</i>	<i>13-24 weeks</i>	<i>9-17 weeks</i>
<i>Paediatric occupational therapy</i>	<i>8 &amp; 9 weeks</i>	<i>16 - 24 weeks</i>	<i>9-12 weeks</i>
<i>Paediatric OT &amp; PT</i>		<i>17-18 weeks</i>	<i>23-25 weeks</i>
<i>Paediatric Multidisciplinary clinic</i>	<i>17 weeks</i>		
<i>Podiatry - (Havant HC)</i>	<i>14 weeks</i>	<i>14 weeks</i>	<i>19 weeks</i>
<i>- (Hayling HC)</i>	<i>16 weeks</i>		<i>17 weeks</i>
<i>- (Petersfield)</i>	<i>20 weeks</i>	<i>18 weeks</i>	<i>27 weeks</i>
<i>- (Biomechanics)</i>	<i>44 weeks</i>	<i>14 weeks</i>	<i>52 weeks</i>
<i>- (Lake Road)</i>		<i>15 weeks</i>	
<i>- (Cosham)</i>		<i>15 weeks</i>	
<i>School Nursing - Enuresis clinics</i>	<i>8-9 weeks (4 out of 13 clinics)</i>	<i>10 &amp; 15 weeks (2 out of 13 clinics)</i>	<i>7-8 weeks (3 out of 13 clinics)</i>

Two clinical specialities still struggle with this standards; Child and Family Therapy and Biomechanics.

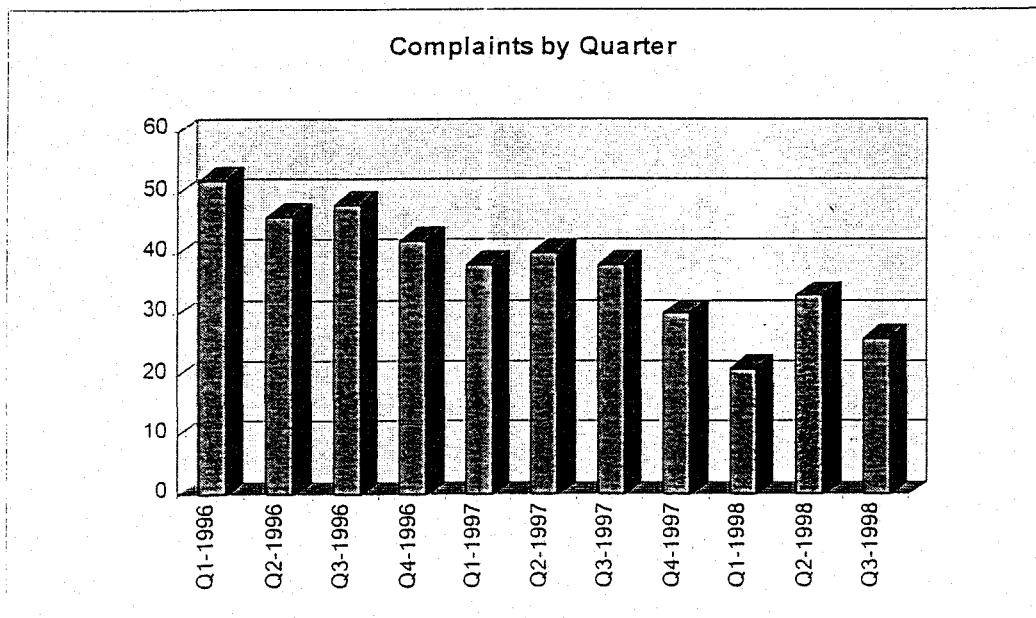
Each of the three locality teams for Child and Family Therapy experience different referral patterns, and general and ADHD referrals are separated out from each other. Each locality team is reviewing the waiting time problems. For instance two new, but replacement, consultants were recently appointed for Gosport and Fareham which led to a restructuring of the local service. There have been changes in the way referrals are handled and the type of cases taken on, making the service more flexible and responsive to client need. The target is to have reduced the waiting time to 4-6 weeks by the summer.

In Biomechanics referrals have outstripped capacity, the clinical being run single-handed by one podiatrist. This has now been recognised as a speciality in its own right, co-ordinated across the Trust. The podiatrist has been regraded and extra dedicated clinic time allocated, with the aim of reducing the waiting time at least by half within six months. A knock on effect however will be an increase in referrals for orthotics, which is already underfunded for current demand.

## 2. Complaints

### Local Resolution

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



#### ◆ *Letters of Thanks*

During this same period over 1,159 expressions of thanks were received.

◆ *Response Analysis*

	Total Number of Complaints	Acknowledged within 2 working days	Response within 20 working days
Q3/98	26	100%	55%
Q2/98	33	89%	50%
Q1/98	21	100%	57%
Q4/97	30	100%	60%
Q3/97	38	94%	70%

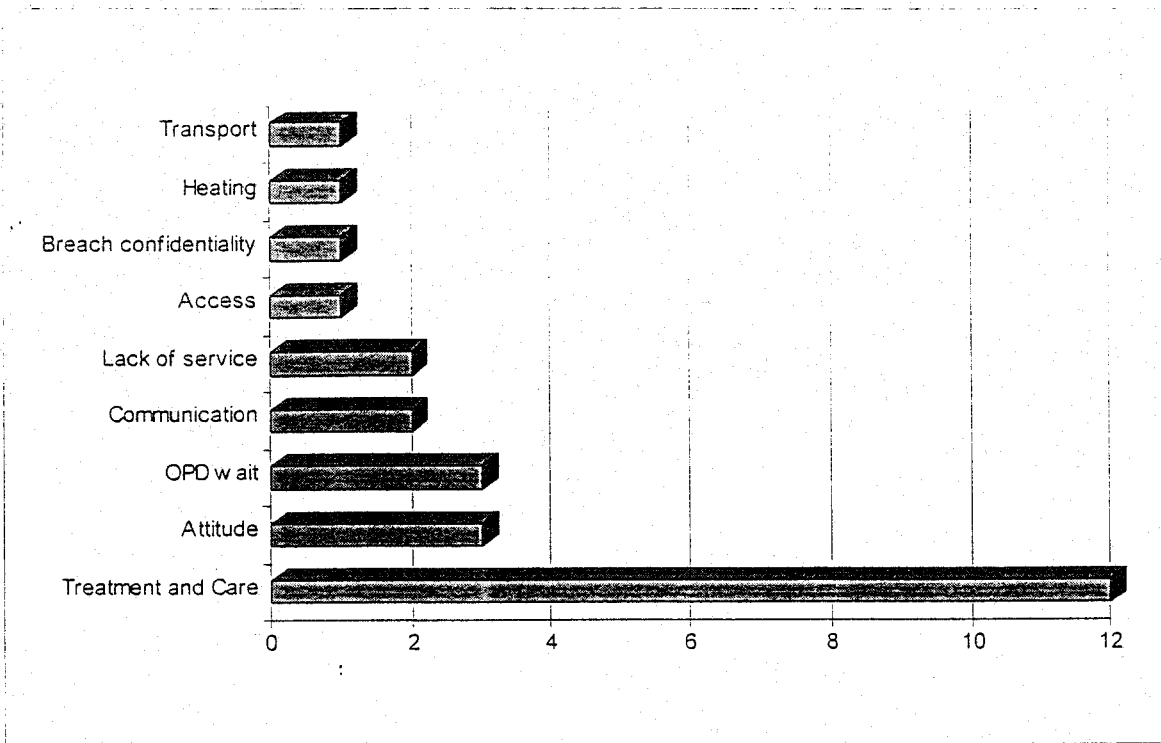
Four complaints were concluded by one letter, rather than acknowledgement and final response; three within five working days and one within seven. Of the 10 complaints not completed within 20 working days, all but one were completed within five and a half weeks. A summary of all complaints has been made available to Board Members.

◆ *Complaints by Service*

Service	Number Q4/97	Number Q1/98	Number Q2/98	Number Q3/98
Catering	0	0	0	0
Challenging Behaviour	1	0	0	0
Child and Family Therapy	0	0	0	4
Child Health	0	0	0	0
Children with special needs	1	0	0	1
Chiropody	0	1	0	0
Dental	1	1	0	0
District Nursing	2	1	2	2
Elderly Medicine	8	5	6	4
Elderly Mental Health	1	2	5	1
Family Planning	0	1	3	0
Health Visiting	0	0	1	0
Home Loans	0	0	1	0
Learning Disabilities	1	2	3	0
Mental Health	10	5	4	7
Occupational Therapy	0	0	1	2
Outpatients - GWMH	0	1	1	0
Physiotherapy	3	1	3	1
Premises	0	0	0	1
Psychology	0	0	0	0
Substance Misuse	0	1	1	1
Small Hospitals	2	0	1	1
Transport	0	0	0	1
Non- service issue	0	0	1	0
<b>TOTAL</b>	<b>30</b>	<b>21</b>	<b>33</b>	<b>26</b>

The number of complaints to each speciality vary each quarter, the only particular pattern is that those service with higher patient throughput receive more complaints.

◆ *Types of complaint received this quarter*



◆ *Action/changes resulting from complaints includes:*

- Review of system for transferring patients between mental health consultants
- Restructure of Child and Family Therapy Service, with a view to reducing waiting times
- Requirements for out of hours contact system for district nursing reviewed, service going to tender

### **Independent Review**

Two requests for Independent Review were received last quarter, in both cases the Convenor decided to hold a panel. The first has been held and the full panel report has been made available to the Trust Board, specific recommendations were made and an action plan will be drawn up in the near future. The second panel is due to be held in March, there has been some delay because of the work commitments of the complainant.

One request was received this quarter; the Convenor decided that most aspects of this complaint had already been handled satisfactorily, but referred one element back for further action at local resolution, which is now in hand.

**COMPLAINT SUMMARY***Complaints System*

22-Jan-99

**Period:** 01-Oct-98 to 31-Dec-98

REG: C98/056 RECEIVED: 02/10/98 ACK'GED: 02/10/98 REPLY: 06/10/98 TIME: 4  
 DIVISION CODE: SH SERVICE CODE: MH

MHA Sectioned?: 

COMPLAINT SUMMARY: **Code A** wrote on behalf of his brother, a patient on Foxleigh ward, St. James' Hospital, who has made allegations of assault by the nurse in charge of the ward.

SUM REPLY: **Code A** retracted his allegations and signed a statement to say that member of staff did not assault him. **Code A** brother advised that investigation would not now take place.

ACTION :

REG: C98/057 RECEIVED: 05/10/98 ACK'GED: 06/10/98 REPLY: 13/11/98 TIME: 39  
 DIVISION CODE: PC SERVICE CODE: CF

MHA Sectioned?: 

COMPLAINT SUMMARY: **Code A** wrote to complain about the format of a family meeting that took place with the child and family therapy service. She alleges that the session was used inappropriately and in particular that the psychologist was intimidating.

SUM REPLY: As a result of a full investigation it was considered that the service acted in the best interests of **Code A** daughter. Apology given for distress caused.

ACTION : Subsequent meeting with service manager and quality manager to discuss concerns.

REG: C98/058 RECEIVED: 05/10/98 ACK'GED: 06/10/98 REPLY: 06/10/98 TIME: 1  
 DIVISION CODE: SH SERVICE CODE: LS

MHA Sectioned?: 

COMPLAINT SUMMARY: Five clients from the Nelson Unit wrote to complain about the lack of heating on the Unit at the weekend.

SUM REPLY: Apology given. There were problems with the main heating system but it is accepted that alternative, temporary heating should have been provided.

ACTION :

REG: C98/059 RECEIVED: 05/10/98 ACK'GED: 06/10/98 REPLY: 11/11/98 TIME: 37  
 DIVISION CODE: FG SERVICE CODE: EM

MHA Sectioned?: 

COMPLAINT SUMMARY: **Code A** wrote to complain about several aspects of care that his late stepfather, **Code A** received at Gosport War Memorial Hospital and the difficulties he experienced in registering the death.

SUM REPLY: Full details of **Code A** care given. Lt. Cmdr. F. referred to Coroner's office regarding registration of death.

ACTION : Lt. Cmdr. F. offered opportunity to meet with consultant to discuss any outstanding concerns.

REG: C98/060 RECEIVED: 08/10/98 ACK'GED: 12/10/98 REPLY: 12/10/98 TIME: 4  
 DIVISION CODE: SH SERVICE CODE: MH  
 MHA Sectioned?:   
 COMPLAINT SUMMARY: **Code A** wrote to complain about the fact that her therapy session was cancelled at very short notice due to staff sickness and that she was unable to obtain a replacement appointment for a further month.  
 SUM REPLY: Apology given. Unfortunately there is no other therapist to work with particular clinic so delay was unavoidable.  
 ACTION: Service under review

REG: C98/061 RECEIVED: 19/10/98 ACK'GED: 19/10/98 REPLY: 19/11/98 TIME: 31  
 DIVISION CODE: FG SERVICE CODE: DN  
 MHA Sectioned?:   
 COMPLAINT SUMMARY: (complaint received via Community Health Council). **Code A** wrote to complain about the care and attention her late father received from the district nurses. In particular she was concerned about his medication.  
 SUM REPLY: District nurses were not involved in medication except to collect and deliver prescriptions; this was dealt with by his general practitioner and the carers, and this position was explained to **Code A**.  
 ACTION:

REG: C98/062 RECEIVED: 19/10/98 ACK'GED: 20/10/98 REPLY: 14/12/98 TIME: 56  
 DIVISION CODE: EH SERVICE CODE: EH  
 MHA Sectioned?:   
 COMPLAINT SUMMARY: **Code A** wrote to complain about the care and attention given to her mother, **Code A** by the staff of Anne Ward, Queen Alexandra Hospital, in particular that a fracture to the left femur was not diagnosed for 48 hours.  
 SUM REPLY: Full investigation held and investigating officer met with both **Code A** and **Code A**. Written reply suggested further meeting with **Code A** consultant, operational manager and an independent conciliator so that any further specific concerns could be discussed.  
 ACTION:

REG: C98/063 RECEIVED: 19/10/98 ACK'GED: 20/10/98 REPLY: 16/11/98 TIME: 28  
 DIVISION CODE: FG SERVICE CODE: MH  
 MHA Sectioned?:   
 COMPLAINT SUMMARY: **Code A** wrote to complain about the fact that although it was agreed three months ago that their son, a manic depressive, should be referred to the Maudsley for a medication review no letter had yet been sent.  
 SUM REPLY: **Code A** son was transferred from The Meadows to Rivendale with a consequent change of consultant and owing to a communication failure the referral to the Maudsley was not made. However, the new consultant is currently undertaking a medication review and does not feel that a referral would be appropriate at the present time. Apology given for problems experienced.  
 ACTION: Review of transfer system will be undertaken. **Code A** offered meeting with service manager.

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REG: C98/064 RECEIVED: 21/10/98 ACK'GED: 23/10/98 REPLY: 19/01/198 TIME: 7E+05

DIVISION CODE: HP

SERVICE CODE: MH

MHA Sectioned?:

COMPLAINT SUMMARY: [Code A] telephoned to complain about the refusal of Mrs. E.'s consultant and other member of the Cavendish House mental health team to see him or allow him to be present at her consultations.

SUM REPLY: The medical and nursing team feel that it is in [Code A] best interests to be seen alone and that she has benefitted from treatment. Consultant had, in fact see [Code A] separately to discuss situation.

ACTION : Meeting offered with service manager

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REG: C98/065 RECEIVED: 23/10/98 ACK'GED: REPLY: 03/11/98 TIME: 11

DIVISION CODE: EH

SERVICE CODE: EH

MHA Sectioned?:

COMPLAINT SUMMARY: [Code A] wrote to complain about the fact that when her mother [Code A] was admitted to Dickens ward there was another patient by the same name and on several occasions the two patients were mixed up, and [Code A] was given incorrect information.

SUM REPLY: Investigation proved that patients were not mixed up and [Code A] was not given incorrect information and at no time was [Code A] treatment and care put at risk because of the two similar names.

ACTION : Specialist registrar offered to meet [Code A] and her mother to discuss any outstanding concerns.

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REG: C98/066 RECEIVED: 20/10/98 ACK'GED: 27/10/98 REPLY: 27/10/98 TIME: 7

DIVISION CODE: EH

SERVICE CODE: EH

MHA Sectioned?:

COMPLAINT SUMMARY: [Code A] wrote to complain about the attitude of the consultant's secretary when she telephoned to enquire about her father's transfer from Haslar to a rehabilitation bed.

SUM REPLY: Arrangements for transfer had been arranged between Haslar and the consultant, and the secretary felt she was doing her best to get her the reassurance she needed as quickly as possible. Apology given for distress caused.

ACTION :

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REG: C98/067 RECEIVED: 30/10/98 ACK'GED: 30/01/98 REPLY: 02/12/98 TIME: 33

DIVISION CODE: FG

SERVICE CODE: CT

MHA Sectioned?:

COMPLAINT SUMMARY: Letter received from MP on behalf of constituent [Code A] who wrote to complain about the fact that there is a 40 week wait for a child and family therapy appointment in Fareham.

SUM REPLY: When [Code A] son was referred the waiting list was 40 weeks and she was advised that if her son's problems got worse to contact her general practitioner again. This she did and an appointment has now been offered.

ACTION : Service will be restructured with the aim of all new referrals being seen within four to six weeks.

REG: C98/068 RECEIVED: 02/11/98 ACK'GED: 02/11/98 REPLY: 01/12/98 TIME: 29  
 DIVISION CODE: FG SERVICE CODE: OT

MHA Sectioned?:

COMPLAINT SUMMARY: **Code A** wrote to complain about the assessment made on his son by the senior occupational therapist.

SUM REPLY: **Code A** was concerned that assessment was based on only one appointment in twelve months but this was not the case. Further assessments are to be undertaken in the near future and the consultant will see **Code A** after the results are available to discuss the way forward.

ACTION :

REG: C98/069 RECEIVED: 04/11/98 ACK'GED: 05/11/98 REPLY: 23/11/98 TIME: 19  
 DIVISION CODE: PC SERVICE CODE: SM

MHA Sectioned?:

COMPLAINT SUMMARY: **Code A** an outreach worker for the rough sleepers initiative in Portsmouth wrote to complain about the problems one of her clients experienced in trying to access the drop in service at Kingsway House.

SUM REPLY: On occasions the demand for the service can exceed the resources to respond. In such cases advice is offered. The client concerned has been seen and is progressing well.

ACTION : Offer made for **Code A** to meet clinical manager.

REG: C98/070 RECEIVED: 10/11/98 ACK'GED: 10/11/98 REPLY: 07/12/98 TIME: 27  
 DIVISION CODE: FG SERVICE CODE: OT

MHA Sectioned?:

COMPLAINT SUMMARY: **Code A** wrote to complain about the fact that her son had been referred for occupational therapy assessment in November 1997 and one year later she has heard nothing.

SUM REPLY: **Code A** son was not, in fact, re-referred to occupational therapy until September 1998 and was seen on 27th November. Apology given for misunderstanding arising from school medical in November 1997.

ACTION :

REG: C98/071 RECEIVED: 16/11/98 ACK'GED: 17/11/98 REPLY: 03/12/98 TIME: 17  
 DIVISION CODE: HP SERVICE CODE: SH

MHA Sectioned?:

COMPLAINT SUMMARY: **Code A** wrote to complain about the fact that when she called at the minor injuries department at Petersfield Hospital with a swollen left thumb she was told it was not broken. However, she subsequently had to attend St. Richard's Hospital and after an x-ray it was confirmed that the thumb was broken and mis-shapen.

SUM REPLY: The nurse on duty did in fact consult with another nurse and both agreed symptoms suggested that thumb was not broken. X-rays are not taken unless essential which does mean that occasionally fractures are missed, as on this occasion. Patient is always told to return or go to his/her general practitioner if the injury continues to cause concern.

ACTION : Apology given.



REG: C98/072 RECEIVED: 16/11/98 ACK'GED: 17/11/98 REPLY: 17/12/98 TIME: 31  
 DIVISION CODE: PC SERVICE CODE: CD

MHA Sectioned?:

COMPLAINT SUMMARY: Code A wrote to complain about the length of time her son had been on the waiting list for Battenburg Avenue Clinic.

SUM REPLY: Code A advised that referrals are seen strictly in order of clinical priority followed by time waited for those of same priority. The number of referrals is currently more than the service is able to cope with. Service is now establishing a small team to see children with ADHD which should reduce pressure on service. Apology given for delay.

ACTION :

REG: C98/073 RECEIVED: 01/12/98 ACK'GED: 02/12/98 REPLY: 21/12/98 TIME: 20  
 DIVISION CODE: PC SERVICE CODE: CT

MHA Sectioned?:

COMPLAINT SUMMARY: Code A wrote to complain about the child and family therapy service at Battenburg Avenue Clinic, and in particular about communications concerning meetings about his son.

SUM REPLY: Options for conciliation meeting with the clinical team offered.

ACTION :

REG: C98/074 RECEIVED: 02/12/98 ACK'GED: 04/12/98 REPLY: 30/12/98 TIME: 28  
 DIVISION CODE: PC SERVICE CODE: PH

MHA Sectioned?:

COMPLAINT SUMMARY: Code A wrote to complain about the lack of physiotherapy for her son.

SUM REPLY: Code A son was re-referred for physiotherapy in September but unfortunately the physiotherapist broke her foot which caused a longer delay than would be normal. He has, however, now been given an appointment for mid January. Apology given for poor communication.

ACTION :

REG: C98/075 RECEIVED: 04/12/98 ACK'GED: 07/12/98 REPLY: 08/01/99 TIME: 35  
 DIVISION CODE: FG SERVICE CODE: EH

MHA Sectioned?:

COMPLAINT SUMMARY: Code A wrote to complain about the care and treatment given to his late mother, Code A at Gosport War Memorial Hospital.

SUM REPLY: Investigation carried out and full details given to Code A. Staff provided best possible care but acknowledged that Code A views differed from theirs.

ACTION :

REG: C98/076 RECEIVED: 07/12/98 ACK'GED: 07/12/98 REPLY: 30/12/98 TIME: 23  
 DIVISION CODE: EH SERVICE CODE: TR

MHA Sectioned?:

COMPLAINT SUMMARY: Code A wrote to complain about the treatment his father received from the transport service on his discharge home from Victory Ward, Queen Alexandra Hospital.

SUM REPLY: Matter investigated and apologies given by Patient Transport Services Ltd. and by Trust.

ACTION :

REG: C98/077 RECEIVED: 08/12/98 ACK'GED: 09/12/98 REPLY: 15/01/99 TIME: 38  
 DIVISION CODE: HP SERVICE CODE: MH

MHA Sectioned?:

COMPLAINT SUMMARY:  Code A wrote to express her concern about her next-door neighbour who she does not believe is receiving the care he needs. She feels that he is now becoming a danger to others as well as himself.

SUM REPLY:  Code A advised that neighbour cannot be compulsorily admitted to hospital but all agencies have been informed of potential risk.

ACTION :

REG: C98/078 RECEIVED: 09/12/98 ACK'GED: 10/12/98 REPLY: 07/01/99 TIME: 29  
 DIVISION CODE: FG SERVICE CODE: PT

MHA Sectioned?:

COMPLAINT SUMMARY:  Code A wrote to complain about the attitude of the physiotherapist who was treating her.

SUM REPLY: Physiotherapist involved was surprised that  Code A had been upset and apologises sincerely for distress caused.

ACTION :

REG: C98/079 RECEIVED: 14/12/98 ACK'GED: 15/12/98 REPLY: TIME:  
 DIVISION CODE: FG SERVICE CODE: MH

MHA Sectioned?:

COMPLAINT SUMMARY:  Code A wrote to complain about a breach of confidentiality on the part of a member of staff at the Meadows.

SUM REPLY:

ACTION :

REG: C98/080 RECEIVED: 21/12/98 ACK'GED: 21/12/98 REPLY: 21/01/99 TIME: 31  
 DIVISION CODE: HP SERVICE CODE: DN

MHA Sectioned?:

COMPLAINT SUMMARY:  Code A was unable to contact the district nurses via the air call system on 20th December.

SUM REPLY: Problems with British Telecom line corrected but still uncertainty about some aspects of Health Call service. Apology given.

ACTION : Service requirement reviewed and going out to tender.

REG: C98/081 RECEIVED: 29/12/98 ACK'GED: 30/12/98 REPLY: 15/01/99 TIME: 17  
 DIVISION CODE: HP SERVICE CODE: MH

MHA Sectioned?:

COMPLAINT SUMMARY:  Code A wrote to complain about the care given to her by the mental health service.

SUM REPLY: Apology given for failings in service.

ACTION :