



Complaints, PALS and Bereavement Services

Annual Report 2020-2021





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You can also see further information about complaints and PALS on the Trust's website at www.ekhuft@nhs.net





Background

We are one of the largest hospital trusts in England, with five hospitals and community clinics serving a local population of around 695,000 people, employing over 9000 staff. We also provide some specialist services for a wider population, including renal services in Medway and Maidstone and a cardiac service for all of Kent based at William Harvey Hospital, Ashford.

The Trust is committed to providing *Great Healthcare from Great People*, valuing and using valuable feedback from complaints, compliments and Patient Advice and Liaison Service (PALS) as an opportunity to learn and improve the care and services we provide. We encourage people to provide feedback, both critical and complimentary. The compliments, complaints and PALS are some of the ways the Trust gets important feedback from our patients and their relatives, carers and friends. This feedback provides important insight into how we are doing and how people feel about our services and our staff. It is important we learn from our mistakes and also share great working practices across our Trust.

It is recognised some clients (patients, friends, families, advocates or person representatives) are nervous about raising concerns with the complaints or PALS teams, in case this adversely affects the way they are treated. We endeavour to allay such fears by responding professionally, without judgement and openly when concerns are raised. We also reassure the client no negative feedback will have any impact on the care provided to the patient.

Complaints, PALS and compliments are highlighted to the Executive Board in a monthly report and is also shared across the organisation.

The Trust's process for managing the complaints, compliments and PALS is patient-focused and based firmly on the Parliamentary Health Service Ombudsman (PHSO) six principles for good complaint handling:

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement.

1. Introduction

This Annual Report provides an overview of the activity and progress made during the year 01 April 2020 to 31 March 2021 (2020-2021) regarding East Kent Hospitals University NHS Foundation Trust (Trust) responses to feedback via complaints, compliments and PALS.

In 2020-2021 we saw a 9.6% decrease in formal complaints, a 15% increase in PALS and a 50% reduction in compliments:

Contact received	Year received		
	2018-2019	2019-2020	2020-2021
Total number of complaints received	773	780	705
Complaints responded to within agreed target date	87%	71%	65%
Complaints responded to within 30 working days or	*	69%	62%
an agreed extension			
Complaints responded to within 45 working days or	*	75%	65%

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an agreed extension			
Compliments received	33,116	39,426	19,392
PALS issues received	4104	5067	5837
Total number of feedback contacts received	37,993	45,273	25,720

^{*}Time frame not applicable at this point.

More in depth detail about each of the contacts: complaints, PALS and compliments is included in the individual sections of this report.

Themes (subjects) for raising a complaint, PALS or compliments

When we receive feedback, we break it down into theme/s, which can mean some complaints, PALS or compliments may have one or more subjects. This information is reported monthly and is used by the Trust as part of continuous improvement work. Using the information of themes and trends from complaints and PALS is powerful and helps identify areas of concern for wards and service. It is also useful to share the themes from compliments, as there might be local practice or process other areas of the Trust may benefit from.

2020-2021	Complaint	PALS	Compliments
1	Clinical treatment	Patient eexperience	Nursing care
2	Communication	Communication	Attitude
3	Values and behaviours	General enquiries	Communication
4	Patient care	Appointments	Clinical management
5	Admission/discharge	Delays	Service provision

2019-2020	Complaint	PALS
1	Clinical treatment	General enquiries
2	Communication	Appointments
3	Values and behaviours	Delays
4	Patient care	Communication
5	Admission/discharge	Clinical management

Interestingly for complaints there has been no change in the top five themes for the past two years. There has been a change in PALS, which reflects the experience of patients and their families during the pandemic. Patient experience became the number one theme due to the messages for loved one scheme. When the Trust made the difficult decision, during the periods of high infection control, when no visitors were permitted due to Covid-19, the PALS team set up the 'message to a loved one' service. This allowed friends and families to send personal messages, with photos, to patients.

We are unable to provide the themes for compliments for 2019-2020, the reporting system underwent changes and enables the reporting from 01 April 2020 onwards.

More details about the themes is included for the specific sections in this report.

2. The process for raising complaints, compliments and PALS

The main role of the complaints team is to assist and support clients in making a formal complaint. To ensure an investigation is carried out by the department providing the service and for a formal written response to be provided. The Trust will also offer meetings to explain and help resolve a p

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problem. The complaints team consists of one manager and 3.6 full time equivalent complaint managers.

PALS provide advice, information and support to help resolve concerns a service user or their family/carers may have, as well as providing information on Trust services and signposting. The PALS Officers works closely with service leads to resolve concerns quickly and effectively; they also encourage staff to record concerns appropriately to ensure themes are identified and practice improved. If we are unable to resolve concerns raised through the PALS team or the PALS team feel a more in-depth investigation is required, a PALS may be escalated to the level of a formal complaint for resolution.

The PALS team also manage compliments; the wards and services record compliments they receive in order that information can be shared. The team consists of one part time manager and the equivalent of five full time PALS officers.

Our Trust upholds a set of values that contribute to a working environment where patients are encouraged and supported to raise concerns or give compliments directly and immediately. All members of staff are expected to respond positively when concerns are raised with them and where possible, to resolve the problem locally and promptly.

3. Care groups

The Trust's clinical services are clustered into seven care groups: Cancer; Clinical Support Services; Corporate; General and Specialist Medicine; Surgical and Anaesthetics; Upper Surgery – Head Neck Breast and Dermatology; Urgent and Emergency Care; Women's and Children. Non-clinical departments, such as complaints, governance and legal are grouped under another care group: Corporate. In April 2021 Women's and Children's care groups devolved into two care groups: Women's Health, and Children and Young People Health.

Each care group also has a governance structure to ensure learning from PALS and complaints received is used and service changes are made where necessary.

The complaints team liaises closely with the care groups to monitor complaints performance within the organisation and adherence to the complaints policy.

The following table sets out how many complaints, compliments and PALS have been received by each care group during 2020-2021 and 2019-2020.

Care group	Complaints F		PALS	PALS		Compliments	
	2020-2021	2019- 2020	2020-2021	2019-2020	2020- 2021	2019-2020	
Cancer	23	12	80	90	1655	1647	
Clinical Support	44	29	589	647	508	695	
Services							
Corporate	4	7	1597	347	109	3887	
General and	196	163	1244	1278	3669	11,182	
Specialist Medicine							
Surgical and	40	48	770	965	11,282	16,327	
Anaesthetics							
Upper Surgery –	134	182	418	606	877	967	

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Head, Neck, Breast						
and Dermatology						
Urgent and	176	176	555	547	551	241
Emergency Care						
Women's and	151	126	332	450	741	4484
Children						
Other	0	0	252	137	0	0
Total	768	743	5837	5067	19,392	39,426

The main significant difference in data for the last two years is the drop in compliments received during 2020-2021. In the ratio of compliments to complaints, in 2020-2021 we received one complaint to 25 compliments; in 2019-2020 for every one complaint, 53 compliments were received. It is noted the drop in compliments during 2020-2021 is due to the lack of visitors and outpatients coming into our hospitals during the pandemic. Another factor is staff being pulled into caring roles, rather than administration tasks over the last year.

It should also be noted General and Specialist Medicine are the Trust's largest care group, covering many specialisms such as stroke, cardiology and health care for the older person.

4. Complaints

The total number of complaints in 2020-2021 has decreased by 7%, compared to 2019-2020. This number does not include complaints withdrawn by patients. During 2020-2021, the Trust received a further 117 formal complaints which were then withdrawn by clients.

Complaints follow a structured process used for all concerns raised requiring a thorough investigation and formal response. Policies for a formal complaint and PALS are published on the Trust's website. When a formal complaint is received, we acknowledge this within the Trust target of three working days, which is in line with the requirements of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (statutory regulations). We also set a timescale for a resolution, this is either 30 or 45 working days, depending on the complaint complexity.

Our complaint process is in four stages:

Stage 1	First complaint response
Stage 2	Second complaint response
Stage 3	Final complaint response
Stage 4	Referral to the Parliamentary and Health Service Ombudsman (PHSO)

At each of these stages a letter and/or meeting will be provided in response to the concerns raised.

If a complainant is unhappy with the outcome of their complaint, we will work with them to find a resolution. In some cases, this may not be achieved and all complainants have a right to take their complaint to the PHSO for their consideration.

During the Covid-19 pandemic we continued to work on formal complaints, although NHS England had given NHS organisations flexibility. We did amend our time scales for response and for the majority of 2020-21 a timescale of 45 working days was set, irrespective of the complaint complexity. This ensured front line staff were not distracted from their priority work during the peak periods of the Covid-19 pandemic and ensured all complaints were investigated.

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5.2 Themes of complaints

The figures below will be different to the number of complaints we have received. As detailed above if a complaint has more than one subject, we record these to identify areas of concern. The subject of complaint figures are reported by all NHS healthcare providers on a quarterly basis. This table demonstrates the differences in the complaint subjects for the last two years.

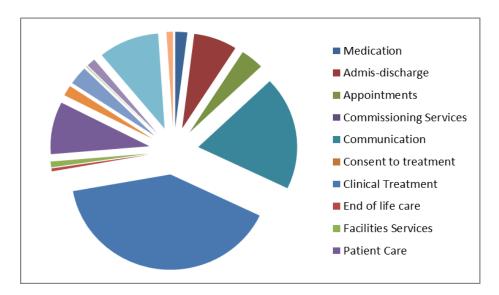
Subject of complaint (categories set nationally)	2019-2020	2020-2021
Medication	52	27
Admission-discharge	188	195
Appointments	101	86
Commissioning Services	0	0
Communication	511	527
Consent to treatment	0	0
Clinical Treatment	1064	954
End of life care	13	7
Facilities Services	26	24
Patient Care	236	243
Mortuary	0	0
Prescribing errors	47	25
Privacy and Dignity	83	70
Staffing numbers	0	0
Transport	4	0
Admin	38	31
Values and Behaviours	263	255
Waiting times	28	8
Other	0	13
TOTAL	2654	2465

In comparison with the previous year there has also been a decrease of 7% in the overall number of complaint subjects. In 2019-2020 there were 2654 different subjects recorded compared to 2020-2021, 2465 different subjects. Of note there has been a 10% reduction in the number of concerns about clinical treatment compared to 2019-2020 of 110.

There was an increase in the number of concerns around communication recorded. We recognise the regrettable impact of the necessary Covid-19 infection controls on friends and families, who were unable to visit and would normally have been updated about their loved one on the ward. The status of the top five complaint themes remains the same as 2019-2020.

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5.3 Responding to complaints

There are no statutory timeframes for responding to complaints. The complaints team agrees a timeframe with the complainant at the outset of the investigation, as set out in the Trust's complaints policy. We aim to respond to complaints: either 30 or 45 working days, depending on the complexity of the complaint. As stated earlier in the report, during the pandemic, the majority of complaints were set a 45 working day target. We continue to report on the number and percentage of complaints responded to within these agreed timeframes; recording the timeframes we respond to complaints. We monitor this in three ways:

1. Complaints responded to within agreed timescales – this is when we have agreed a response time directly with the complainant, usually when it will take longer than our usual set response times to provide a full response:

2020-2021	2019-2020	2018-2019	2017- 2018
65%	71%	87%	86%

2. 30 working days – this is the timescale we set with complaints are more straight forward and may only require one of our services to investigate and respond.

2020-2021	2019-2020	2018-2019	2017-2018
62%	69%	28%	22%

3. 45 working days – this is the timescale we set when complaints are a more complex and several of our services are required to investigate and respond, or we may also need to include information from an organisation outside of our Trust.

2020-2021	2019-2020	2018-2019	2017-2018
65%	75%	23%	No Timescale

The Trust is committed to reducing the timeframe for responding to complaints care groups are challenged to improve the response times to complainants, in particular within agreed timescales.

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It is noted and agreed the drop-in performance from 2019/2020 is as a direct result of front-line staff working clinically during the pressures of the Covid-19 pandemic. Our clinical staff are empowered to

take an active role in responding to concerns, so while we consider work on complaints to be a priority, this did compete with the pressures of the frontline response to Covid-19 at the time.

5.4 Clients who are dissatisfied with the first response to their complaint

In order to make sure we get the quality of our responses right first time, the complaints team are working with all care groups to improve the quality of responses, meetings with clients and providing clients with information about any improvements or actions we were undertaking or planned.

We aim to respond to complaints fully, the first time of writing; we may not always get this quite right, or complainants have further queries, or on reflection need more information. We check the cases who return, this is stage two and three of our complaints process. The data for returned complaints helps us to monitor the quality of our responses. During 2020-2021, the Trust received 119 stage two and three returner complaints, this is a decrease of 32% compared to 2019-2020.

Returner Complaints Received Data Mean 10 - • U.P.L. 19 20 18 16 14 12 10 8 6 4 2 2020 04 2020 05 202103 2020 06 2020 11 2020 12 202101 202102 2020 07 202008 202009 2020 10 Month Received

However, we can see during the high periods of the pandemic the stage 2 and 3 complaints

5.5 PHSO referrals

increased.

The PHSO is stage four of the Trust's complaints process and is the last stage of the national NHS complaints system. In 2020-2021 the Trust received five referrals from the PHSO where they intended to carry out a formal investigation. This is a reduction compared to 2019-2020 (ten), representing a decrease of 50% for this year. However, it should be noted the PHSO closed their offices during the pandemic, with a limited service being offered.

The following table shows the cases received in 2020-2021 with comparative data for 2019-2020:

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Status of Cases	Number of referrals to PHSO	
	2019-2020	2020-2021
PHSO Complaints received	10	5
PHSO Complaints closed	11	4
Investigated complaints upheld by the PHSO	0	0
Investigated complaints partly upheld by the PHSO	4	3
	(36% of the total	(75% of the total)
Investigated complaints not upheld by the PHSO	7	1
	(64% of the total)	(20% of the total)

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5.6 Lessons learnt and actions from complaints.

This table gives some examples of the some of the action and improvements made during 2020-2021 as a result of complaints raised:

Improvements to process:	Improvements to staffing:	Improvements to services
In light of the increased attendance in the Emergency Department (ED), the department has been extended to include the provision of two triage rooms; which should prevent delays in the future.	A review was undertaken of staff cover on cancer specialist units and the Cancer Care line for bank holidays, along with a review of the pathway for unwell chemotherapy patients. More staff have been recruited to cover bank holidays.	More support was required for patients experiencing mental health issues over the pandemic. A new senior mental health nurse is now in place in the EDs and the Psychiatric Liaison team provided training and support for junior ED staff.
During the restrictions on patient visiting, a system was put into place for doctors to contact patient's families with updates, after the ward round had taken place. A clear documentation sticker was introduced to be placed in patient's medical records when relatives had been updated that day.	In the Acute Medical Units, training was arranged for staff to understand how to support patients with chronic fatigue.	Mobile phones and iPads were purchased for wards during the pandemic, this provided a means for the relatives to be able to speak directly with the patient. As a response to this the ward phone was not as busy, so relatives could get through to staff.
A property policy is being introduced for protecting and claiming patients' property and valuables. Safes are being introduced centrally to all ward areas and purple property boxes have been ordered for patients to keep personal property in one place. These boxes will prove particularly useful for dementia patients.	Due to the increased attendance in ED, staffing levels were increased and the Trust reduced it's recruitment time in order to fill any vacant posts.	The Early Pregnancy Unit devised a map with clear instructions for accessing the scan department and an information leaflet was produced on the management of bleeding in an early viable pregnancy.
Annual refresher training was implemented for all chemotherapy nurses to ensure competencies remain up to date, including sepsis and the safe handling of chemotherapy drugs.	Compassionate communication training has been introduced across the Trust.	A new system was introduced in maternity whereby screening results would be immediately added to show they were available and the system would flag up any results which were not received within ten working days.
The triage team in ED will be trained in providing pain relief when training recommences.	Training was introduced to ensure more members of the gastroenterology team are able to undertake procedures.	A process was introduced to ensure patients in the ED for an extended period of time, due to the pandemic and high levels of demand, were provided with refreshments.
A standard operating procedure (SOP) was	A support package for haematology is place,	Canvasses were introduced to cover trolley mattresses in

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developed clearly defining the process for patients fitted with defibrillators for end of life patients who had been discharged home. The SOP addressed early communication between community and teams, to ensure deactivation, before becoming an emergency.	with more administrative staff Covid-19 testing, with assistance from other pathology teams. Extra shifts and recruitment for additional fixed term posts to support microbiology during the pandemic.	the ED between use.
The Surgical Care Group ensured lists submitted to theatres were, allowing for the extra measures in place due to pandemic requirements.	The Cancer care group has introduced compassionate communications training for staff, along with a communications book on the cancer specialist unit.	Trust audits on hand hygiene were increased.
	The number of cleaners working 24 hours in the ED has expanded, with dedicated staff for the waiting areas, to clean chairs, wheelchairs, toilets and equipment.	
	Extra shifts and recruitment for additional fixed term posts to support microbiology during the pandemic.	

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5. PALS

We are able to take PALS enquiries through several methods; the main contact is by phone to the PALS helpline. The Trust has seen an increase year on year in PALS enquiries; in the last two years there has been targeted work to promote local resolution of concerns on the ward/clinic. There is also a drive to resolve concerns more quickly, rather than escalating to a formal complaint.

We monitor how many calls we are able to answer and pass on for resolution. In 2020/21 79% of calls were answered 'live' by the PALS team. This means during working hours 79% of calls were answered straight away and not picked up by voicemail.

The following table shows the number of PALS enquiries received annually:

	2020-2021	2019-2020
PALS enquiries received	5837	5067

The Trust saw a significant decrease in the number of PALS contacts received in quarter one of 2020/21; due to the Covid-19 pandemic and our patients and their families allowing the Trust to focus on front line clinical work. Apart from our emergency care, the Trust's services were also greatly reduced during this time. Despite the annual increase in PALS contacts, Urgent and Emergency Care, saw a decrease in PALS contacts.

Care Group	2020-2021	2019-2020
Cancer	80	90
Clinical Support Services	589	647
Corporate	1597	347
General and Specialist Medicine	1244	1278
Surgical and Anaesthetics	770	965
Upper Surgery – Head, Neck, Breast and	418	606
Dermatology		
Urgent and Emergency Care	555	547
Women's and Children	332	450
Other (external agencies)	252	137
TOTAL	5837	5067

The PALS team also deal with enquiries regarding other external organisations including other hospital trusts and GPs. These are recorded under 'Other' in the information provided.

There was a significant increase in PALS contacts recorded for the Trust's Corporate division in 2020/21 of 360%. This rise is directly attributable to the messages to loved one work undertaken by the PALS team during the pandemic. During 2020-21 the PALS team delivered 1388 messages and hearts to patients, accounting for 66% of the corporate contacts received.

The PALS team also became the ITU family liaison for patients who were transferred to another hospital when our ITU wards were under pressure.

Site	2020-2021	2019-2020
William Harvey Hospital	2102	1862
Queen Elizabeth the Queen Mother	1900	1455
Kent and Canterbury Hospital	1522	1480

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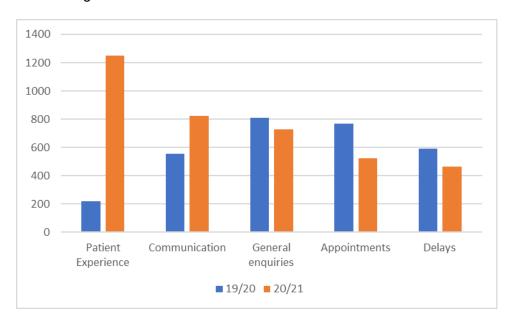


Buckland Hospital, Dover	69	76
Royal Victoria Hospital, Folkestone	36	58
Other	0	136
TOTAL	5837	5067

The highest number of PALS enquiries received were regarding the William Harvey Hospital for both years. William Harvey Hospital is the Trust's largest hospital and is a centre for specialisms such as stroke and cardiology.

6.1 Themes and trends of PALS

The top four themes identified from PALS during 2020/21 are the same as the top four themes in 2018/19 and 2019/20; general enquiries, appointments, delays and communication. However, patient experience has displaced clinical management in the top five. This is not unexpected given the pandemic and services being closed resulting in delays to treatment and surgery, along with the messages for loved ones.



Communication is the main theme of PALS enquiries received. This was escalated as improvement projects for several care groups: General and Specialist Medicine, accounting for 42%, Clinical Support Services and Cancer.

General and Specialist Medicine focused on attitude and communication, and undertook behaviour and culture workshops. The care group also introduced the Matron's Golden Hour and the Matrons Round Evidence, to ensure consistent safety checks and communication are maintained on the wards.

The Compassionate Communication project is underway within Cancer Services to improve communication within the care group and to their patients. This has resulted in a staff guide for written and verbal communications and a training package.

The two top themes for Clinical Support were problems with appointments and health records, specifically requests for access to medical records.

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As part of the improvement work Pathology have now appointed four members of staff to manage these calls on a daily basis and are working with IT to set up a queuing system so patients know where they are in the queue. Pathology have seen a reduction in PALS and complaints regarding this as a result.

6.2 Response timeframes for PALS in 2020/21

The PALS policy sets out a timeframe of ten working days for the Trust to respond to PALS enquiries. PALS Response timeframes in 2020/21 were:

Care group	No. of PALS responded to within 10 working days	% of PALS responded to within 10 working days	
Cancer	69 of 80	86%	
Clinical Support Services	528 of 589	90%	
Corporate	1540 of 1597	96%	
General and Specialist Medicine	1045 of 1244	84%	
Surgical and Anaesthetics	557 of 770	72%	
Upper Surgery – Head, Neck, Breast and Dermatology	329 of 418	79%	
Urgent and Emergency Care	480 of 555	87%	
Women's and Children	233 of 332	70%	
Other	236 of 252	94%	
TOTAL	5017 of 5837	86%	

Targeted work has been undertaken to improve the timeliness of responses. The Trust is focusing on early resolution of concerns into the Trust by promoting resolution at ward/clinic level.

86% of the 5838 PALS enquiries received in 2020/21 were responded to within ten working days. Monthly reports are sent to Heads of Nursing for each care group outlining the current open PALS, including timescales of how long those PALS have been open.

During 2020/21 12% of new complaints (83 of 705) were escalated from a PALS enquiry to a formal complaint. The reasons behind PALS contacts escalating to formal complaints is monitored.

6. Compliments

The following table shows the number of compliments received annually over the last three years:

	2020-2021		2019-2020		2018-2019
Compliments received	19,392	-51%	39,426	+19%	33,116

In 2019-2020 the compliments database was introduced, which allows for more accurate recording of the number of compliments received around the Trust and therefore increased the number of compliments reported. Ward/clinical areas are able to directly capture compliment in real time.

The Trust usually receives a huge volume of compliments regarding particular staff and/or teams and it is important we celebrate and share good practice from these. Care groups are aware of the

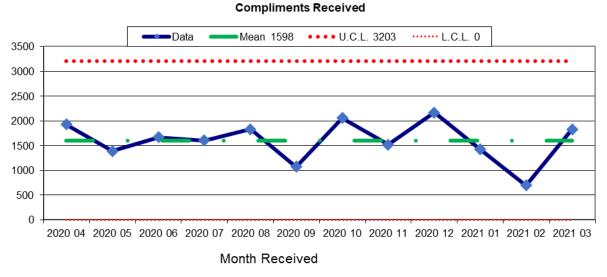
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compliments received about their departments/wards and take pride in reporting these into the Trust.

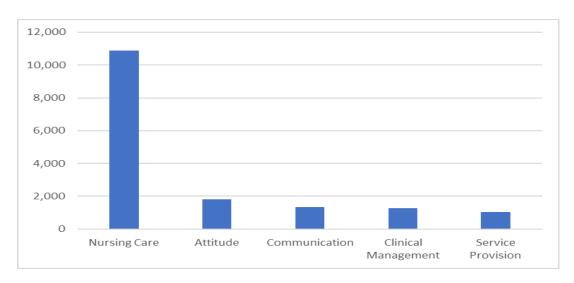
The ratio of compliments to formal complaints received for 2020-21 is 25:1. The Trust has seen a significant decrease in the recording of compliments during 2020/21; attributable to many services being restricted during the pandemic, a reduction of patients and visitors coming into our hospitals and staff prioritisation of clinical care.

The number of compliments received each month during 2020/21 is demonstrated in the following graph:



7.1 Themes and Trends of Compliments

The top five themes of compliments in 2020-21:



The top five themes identified from compliments during 2020/21 are nursing care, attitude, communication, clinical management and service provision. It is pleasing to see the majority of compliments received relate to nursing care. The compliments logging system was updated in 2020-2021 to enable reporting on the themes and trends of compliments received. In 2021-2022

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the Trust will be able to compare any changing themes within compliments. We can show the number of compliments received by care groups, as follows:

Care group	2020/2021	2019/2020
Cancer	1655	1647
Clinical Support Services	508	695
Corporate	109	3887
General and Specialist Medicine	3669	11,182
Surgical and Anaesthetics	11,282	16,327
Upper Surgery – Head, Neck, Breast and Dermatology	877	967
Urgent and Emergency Care	551	241
Women's and Children	741	4484
TOTAL	19,392	39,430

7. Achievements in 2020-2021

The main highlights from 2020-2021 are:

- The Complaints, PALS and Bereavement Services department has had a review of its structure, processes and procedures. A new staffing structure was implements in June 2020, which provided more distinction between the three workstreams, a better staffing structure and as a result more resilience for the three teams.
- As part of the restructure the complaints team was centralised to Kent and Canterbury
 Hospital, with the PALS team being based and having a presence across the three main
 sites.
- The whole department had to be extremely flexible to meet the changing requirements for Covid-19, some due to legislation changes and included process changes. The team ensured any contact to the department was responded to as quickly as possible, in order not to add to any distress.
- NHS England allowed trusts to pause their complaints process during the first wave of the complaints process. In order to ensure complainants did not feel abandoned or disregarded, the Trust did not pause complaint working.
- The department has developed eLearning for customer service, which will be mandatory for all Trust staff. This training outlines the Trust's expectation around behaviours and also how to deal with difficult situations, or complaints at a local level.
- A project to write a Trust-wide process for patient belongings was started. The policy has been ratified and the final stages of installing safes, providing sensory boxes and setting up the administration process is to be finalised.
- The Trust introduced an electronic system of reporting compliments in September 2019, this has been refined and has improved the data quality of compliments recorded.
- The compliments logging system was improved to allow for analysis and reporting on the themes and trends of compliments received into the Trust
- A new PALS policy, separate to that of the current Complaints Policy, has been published and disseminated across the Trust. This includes a new response timeframe of ten working days for resolution of PALS contacts.
- A new escalation process has been implemented if a care group has not responded to a PALS, the PALS Manager escalates this to the relevant Head of Nursing for immediate action.

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- PALS and complaints now forms part of the new starter induction process, all new are aware of what we do and how we can help.
- The complaints and PALS team supported the Trust's Bereavement Services during the pandemic helping families of our deceased patients with the medical cause of death certificate and returning their loved one's belongings.
- The PALS team supported out ITU colleagues by acting as the family liaison for those families where their loved one had been transferred to another hospital.
- The PALS team have seen a significant improvement in 2020/21, answering 79% of calls live.
- The PALS team set up the 'message to a loved one' service for families to be able to send messages to their loved ones. This will continue moving forward for friends and families who do not live locally to our hospitals.

9. The next steps - the future:

Moving forward there are further improvement works to be implemented and projects we would like to focus on:

- Focused work will be undertaken to encourage wards and departments to record and log their compliments on the Trust's information portal.
- To restart the project to set up a patient engagement group for complaints, ensuring complaints handling and responses are meeting the needs of our patients and their families.
- The current compliments logging system will be reviewed in 2021/22 to ensure compliments are captured for all wards and departments and to identify any further improvements to the system.
- To continue to improve the response timeframes for PALS enquiries through monitoring response timeframes within the PALS team and in the care groups and to introduce formal Key Performance Indicators (KPI) for responding to PALS.
- To work with care groups to better capture outcomes and learning from complaints and PALS to implement sustainable improvements as a result.
- To work with the Patient Safety team to share actions and learning from complaints, PALS and incidents Trust wide.
- To finalise the customer service eLearning training and to provide more in-depth face to face training services of the Trust are identified as needing improvement.
- To develop a course for all staff involved in complaints. The course will include regulatory requirements, responsibilities, how to investigate a complaint and writing a great response.
- To finalise the patient property project, including the siting of new departmental safes, clear sensory boxes for patient's personal aids, transparent property bags and a new patient property tracking book, along with the agreed process will be implemented in July 2021.
- The PALS team will be setting up and managing lost property offices across the three main sites. A new policy and process have been developed to support this. The lost property offices will be opened in July 2021.
- PALS need to be both visible and accessible for our patients and their families to ensure they can raise any queries or concerns easily and quickly. The current location of the PALS offices on all three sites are not suitable. A review of the current location of PALS offices is to be reviewed in 2021/22.
- To work with the volunteer service to boost the PALS experience and provide more accessibility.

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- To continue the work of ensuring full accessibility to making a complaint, compliment or PALS is finalised. This includes all of the information provided on the Trust's web pages for this service, written complaint responses and any interaction with users of the service.
- To continue to work on the quality of complaint responses to ensure they meet the needs of the recipient.

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