





# Using QI and Patient Involvement to Improve Patient Experience of the Complaints Process

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#### 1. BACKGROUND

Patient Support services (PSS) at University Hospitals Southampton (UHS) receive 500 formal complaints and 400 complex concerns every year. In addition to this a further 4000 concerns and enquiries are dealt with through out Patient Advice and Liaison Service (PALS). Communication and clinical treatment are the top two reasons for a formal complaint being made. This is in line with the national picture. Although there is no NHS national target for complaint closure time, the trust target to close formal complaints is 35 working days.

#### 2. INTRODUCTION

There were two factors to consider when starting this project:

- 1. What do we already know and what data do we have to really understand the current complaints process?
- 2. A new Chief Executive started at UHS in September 2018. She wanted the trust to get the formal complaint response time down to 25 working days over the next 2 years.

How UHS were recording and reporting their response times at this time was very deceiving as we were reporting 'complaints closed in the agreed timeframe' but this timeframe had often been extended two or three times, as agreed with the complainant, therefore was not a reflection of how well we were meeting the target. Diagram (a) shows the data collected for complaints, the green columns are during the implementation of the QI project.

#### 3. AIM

To improve complaints at UHS. Specifically a) to reduce time to resolution from 35 days to 25 days in 2 years and b) to reduce the number of dissatisfied complaints from 16% to 12% in year 1 and 8% in year 2. See diagram (b).

### 4. METHODS

a) To take a closer look at the complaints process from the time it comes to PSS, to the posting of the final response letter. We can start by looking what we can change internally that will make a difference before we work on external factors.

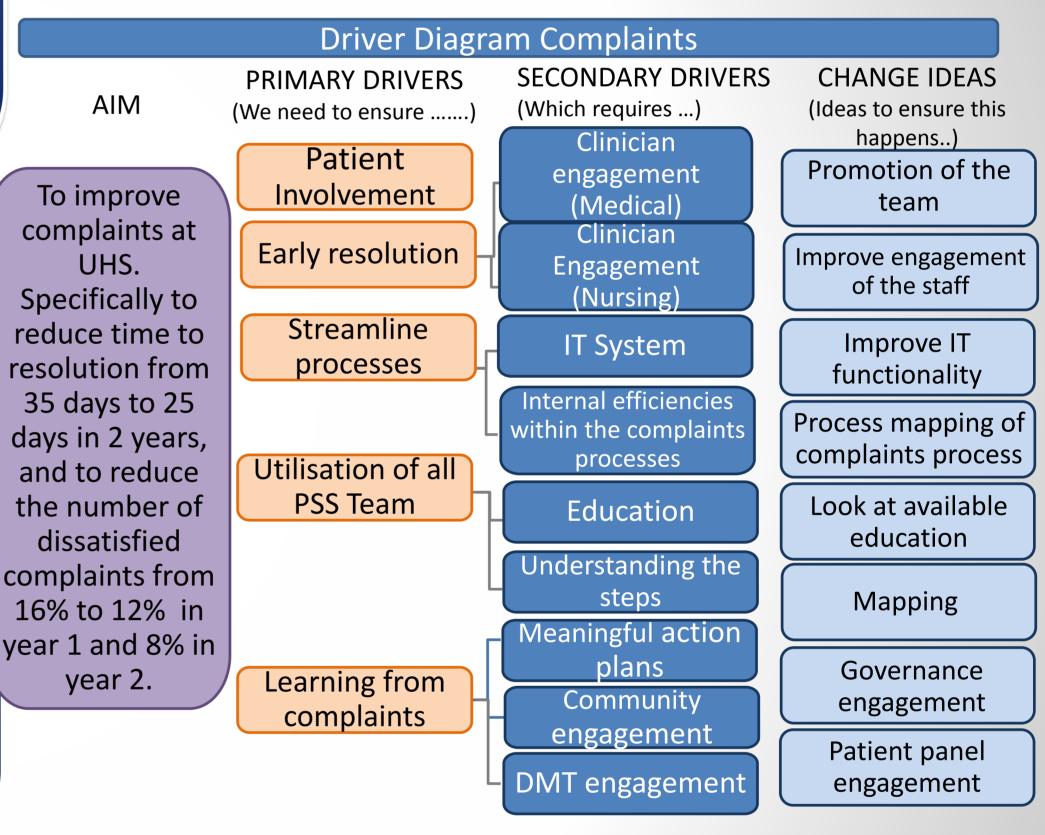
A process mapping event then took place, involving all the staff in PSS.

b) To use patient involvement by way of a patient panel to look at the quality of the response letters. A complaints patient panel was set up in November 2018.

Diagram (a)	Q1	Q2	Q 3	Q4	Q1
	18/19	18/19	18/19	18/19	19/20
Complaints received for	124	120	107	96	125
investigation					
<b>Total Number of</b>	88	91	111	118	72
<b>Complex Concerns</b>					
Trust average response	35	32	38	30	26
time for Complaints					
% of Complaints closed	63.3%	59.2%	41.5%	82.5%	86%
within 35 days					
% complaints closed	100%	98.65%	100%	93.1%**	97.9%
within agreed timeframe					
PALS enquiries	432*	532*	693*	953	954

<sup>\*</sup>Not all PALS contacts recorded electronically; \*\* Extensions stopped with out a very good reason

### Diagram (b)



### 5. RESULTS

The process mapping led to a very complex flow chart of the complaint process, but it quickly identified where time savings could be made. After streamlining the process complaints at UHS now have a turnaround time of 26 days. Diagram C shows that since the QI project made changes to the process, trust target has been met every month since January 2019. Due to the improvements in Q4, the target was raised to 80% in Q1. From the patient panel a new response format was designed which gave a much shorter response and targeted apology. Any long explanations or case reviews that may be required now go in the response as an appendix; this has saved time in writing the response and ensures that the complainant gets the key messages quickly and with empathy rather than NHS jargon. Following the PLAN, DO, STUDY, ACT cycle, this was amended a number of times.

100% 80% Complaints 60% closed in 35 40% days % 20% Target 0% 06/18 07/18 02/18 03/18 08/18 05/18 10/18 04/18 09/17 10/17 12/17 11/17 **Diagram C** 

# **Personal Lessons Learnt:**

- 1. Split the project into bite sized pieces and don't try to do everything at once
- 2. Separate your time so you can really focus on the project and not get bogged down with your day to day job
- 3. Write your reflection as you go and it will help you realise how much you have achieved, even when it doesn't feel like it

## **What Next:**

- 1. Embed learning from feedback in all clinical and non-clinical services at UHS
- 2. Ensure that patients know how to raise a concern or complaint and make it easier for them with a visible mobile PALS service, showing them that UHS is an open and honest organisation
- 3. Ensure all staff groups are trained in early resolution solutions
- 4. Ensure patients' are involved in how we learn from complaints and how we take the actions forward to make change.

Acknowledgements: Ellis
Banfield, Head of Patient
Experience and Involvement;
The whole team in Patient
Support Services; Kate Pryde,
QI Clinical Lead; HEW Quality
Improvement Team
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