

Meeting of Governing Body

Date: Tuesday 6 November 2018

Time: 9.00 am

Location: Batch Country House, Lympsham, Nr Weston-super-Mare, Somerset, BS24 0EX

Agenda number: 7.2

Patient Experience Report 2018 – 2019 (Q1)

Report Author: Lucy Jones, Customer Services Manager and Marie Davies, Associate Director – Patient Experience

Report Sponsor: Anne Morris, Director of Nursing

1. Purpose

To provide a paper summarising triangulated information relating to patient experience across Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) in order to identify areas of good practice and those in need of improvement. This includes the Q1 report previously shared in the Quality Committee in September 2018 updated to reflect the work currently underway in development of a BNSSG Quality Strategy.

2. Recommendations

The Governing Body is asked to:

- Note the content of this report
- Note the current conversations around the development of the Quality Strategy of which Patient Experience is a priority focus.
- Note that this report has been received and commented on by the CCG Quality Committee at their meeting in October 2018.

3. Executive Summary

During Quarter 1 2018/19 the Customer Services Team received 365 contacts across the range of feedback mechanisms in place and the themes have been identified as follows:

- **Individual funding:** As CCG policies and processes regarding funding are implemented, more patients are complaining when their applications are refused.
- **Access and Waiting:** The waiting times for appointments, particularly in relation to mental health services for both adults and children are increasing which is leading to

more patients and families feeding back their unhappiness, and seeking clarification of the steps being taken to address the issues. In addition, patients are reporting difficulties obtaining GP appointments and also accessing appointments in the acute trusts.

- **Entitlement to NHS Services:** Since the availability of the Abbott Freestyle Libre in November 2017 the CCG has seen a marked increase in the number of contacts we are receiving in this regard, particularly as the CCG Commissioning Executive declined to fund this equipment for any patient group. In quarter 1, the CCG received 34 enquiries across the spectrum of patient feedback mechanisms in relation to this topic.

You said, We did

- Feedback regarding the Abbott Freestyle Libre device was brought to the attention of the Medical Director (Clinical Effectiveness) and a review of the evidence will be commencing in October.
- The high waiting times for mental health services have been brought to the attention of the relevant senior commissioning managers for their awareness and negotiation with the providers as to how these can be addressed.
- Where the CCG has coordinated a multi-agency response to a complaint, face-to-face meetings are now taking place including providers, commissioners and where possible patients and/or their families to discuss the findings and agree the learning outcomes. These meetings are led by the CCG.
- Intelligence gained from a triangulated approach to quality and safety will be shared with the Quality Sub Groups, enhancing the CCGs' ability to monitor performance with providers more effectively and support them to improve services.

4. Financial resource implications

While there are no direct financial resource implications associated with complaints handling, there is the potential for the Parliamentary and Health Services Ombudsman to recommend financial remedy as an outcome where their investigation shows failings and a level of harm to the patient.

5. Legal implications

The CCG is required to handle all complaints in line with the NHS Complaint Regulations 2009.

6. Risk implications

Any risks, or potential risks identified through patient experience are brought to the attention of the relevant commissioning manager so that mitigations can be considered.

7. Implications for health inequalities

The NHS Complaint Regulations 2009 and the CCG Policy on the Management of Compliments, PALS enquiries and Complaints are inclusive and where a patient has a particular need the team will adapt their approach to meet this.

8. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

The NHS Complaint Regulations 2009 and the CCG Policy on the Management of Compliments, PALS enquiries and Complaints are inclusive and accessible to all and do not discriminate against any of the nine protected characteristics.

9. Implications for Public Involvement

The triangulation of the patient experience information will provide an evidence base from which commissioners can accurately monitor the quality of commissioned services across BNSSG.

Agenda item: 7.3

Patient Experience Report 2018 - 2019 (Q1)

1. Background

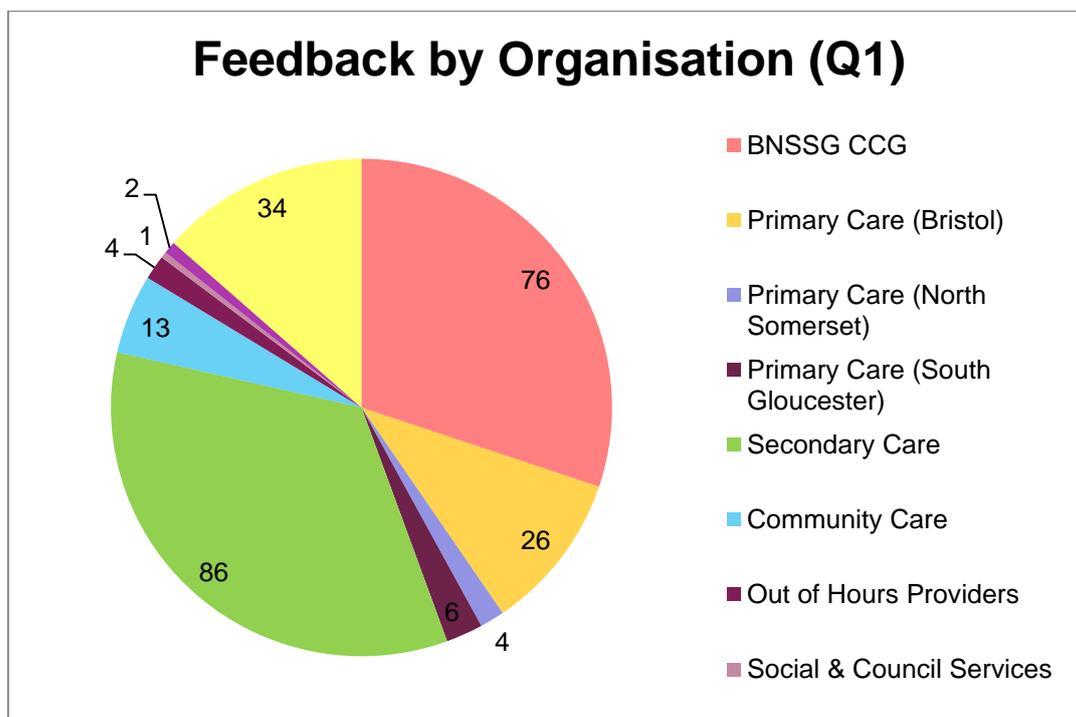
Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) recognises that good patient experience is a fundamental component of good quality care. Understanding patients' views of commissioned services is an essential feature of monitoring the services commissioned. One of the key challenges facing commissioners is not how to obtain patient experience data, but how to use it intelligently to lead to real improvements in patient experience. By analysing and triangulating patient experience information, themes and trends can be ascertained to better understand this.

A range of mechanisms are used to gather feedback from patients including but not limited to complaints and compliments, advice and liaison queries, patient surveys, professional feedback and Healthwatch reports. We are currently exploring with the Transformation Directorate the use of Insights to contribute to our understanding of patient experience.

Since the BNSSG CCG was established, patient feedback and experience has been coordinated by the Customer Services Team and this report is based on the contacts received during that time. It should be noted that this report is newly developed and will be further refined and expanded as we move forward.

2 General Overview of Feedback Received by Organisation

The CCG receives feedback relating to our own in-house services such as individual funding and continuing healthcare but also regarding a number of services which we commission. In quarter 1, the feedback we received was attributed as follows:



3 Formal Complaints Received in Quarter 1

As described in the CCG's policy on the Management of Compliments, Patient Advice and Liaison Enquiries and Complaints, a formal complaint is "A matter relating to CCG business which cannot be resolved within 24 hours and requires investigation".

When a formal complaint is received it is handled in line with the NHS Complaint Regulations 2009 meaning that it is acknowledged on receipt (usually within 3 working days), it is investigated internally and the findings are summarised in a signed letter from the Chief Executive.

In quarter 1 the CCG received a total of 15 formal complaints which related to a number of CCG areas including:

- **Individual Funding Requests**, particularly where funding is not approved.
- **Access and Waiting**, mainly Patient Transport Services and the application of the eligibility criteria
- **Commissioning Decisions**, predominantly regarding the Commissioning Executive decision not to approve the funding of the Abbott Freestyle Libre blood glucose monitoring device
- **Continuing Healthcare** and a variety of aspects relating to the process of eligibility and appeal.

Further detail can be found in Appendix 2.

4 Informal Complaints Received in Quarter 1

In line with the NHS Complaint Regulations 2009 an informal complaint is one where the matter can be dealt with immediately or can be satisfactorily resolved to the patient's satisfaction no later than the end of the next working day. It is also how the CCG records complaints received which solely relate to a provider. On these occasions, the details are shared with the provider for investigation and direct response back to the complainant, unless the content is particularly complex and involves multiple organisations. In these circumstances, the CCG may work with the providers and coordinate a single, multi-agency response.

In quarter 1, the CCG received 26 informal complaints of which we coordinated multi-agency responses to 7. The main themes of the complaints received related to:

- **Acute Inpatient Issues** but could not be attributed to any particular specialty or Trust
- **Child and Adolescent Mental Health Services (CAMHS)**, especially waiting times for SCAMP and Attention Deficit Hyperactivity Disorder (ADHD) assessments.
- **Adult Community Services**, particularly the Musculoskeletal and Assessment Triage Service (MATS)

Further detail can be found in Appendix 3.

5 Advice and Liaison Enquiries Received in Quarter 1

During Q1 the CCG received a total of 217 contacts from patients and family members requesting information or help with a concern or query regarding their healthcare.

The majority of the contacts in this quarter fell into 3 broad categories:

- **CCG Policy / Entitlement to NHS Services** – of the 42 enquiries received in this category, 36 related to the CCG's decision not to fund the Abbott Freestyle Libre blood glucose monitoring device.
- **Delays to Specialist Referral** – while the contacts received in this category were broad, they predominantly related to mental health and acute services.
- **Request for General Information** – These enquiries covered a wide spectrum of issues from both patients and professional colleagues and ranged from simple requests for information to patients seeking clinical advice on their symptoms. Where clinical advice is being sought, the patient is always redirected to an appropriate clinician for assistance.

Further details can be found in appendix 4.

6 Compliments received in Quarter 1

In quarter 1 the CCG received 6 compliments

The patient was very happy and said a very big thank you and that this was all down to me, he said that if ever I was his way I had to call in for a cup of tea!
(Customer Services Officer)

"Words will never be enough to thank you for what you have done for us, if it wasn't for your care and support, we wouldn't now be X weeks pregnant! Thank you from the bottom of our hearts.
(IFR Team)

Thank you, you have been extremely helpful and gone above & beyond to sort out the issues my husband and I had with our referral. If it wasn't for your efforts we would be none the wiser and we wouldn't have known what was happening. XXX is an extremely sensitive and difficult issue to deal with, and you have taken excellent care and consideration throughout this process.
(IFR Team)

General compliment regarding the care and treatment provided during an endoscopy that took place at Prime.
(Prime Endoscopy)

"They provide a lovely service to their customers"
(Tesco pharmacy Bradley Stoke)

Heather and Pennie were both so lovely and so helpful to her and she wanted to say thank you to you both
(Customer Services and Admin staff)

7 Feedback from MPs

During quarter 1, the CCG received 24 MP enquiries the majority of which fell within two particular categories:

- Access and Waiting particularly in regard to mental health services
- Financial and Policy Issues which largely related to the availability of the Abbott Freestyle Libre blood glucose monitoring device and the testing for Lynch Syndrome for patients who have been diagnosed with bowel cancer.

Further detail of the MP enquiries can be found in Appendix 5.

8 Feedback on quality and patient experience from GPs

Since the establishment of BNSSG CCG the Quality Team have been working to implement a single process for the recording of quality concerns from health professionals, which has historically been from GPs in primary care. With effect from May 2018 this data is being recorded in its entirety through Datix.

As Datix was previously used by North Somerset CCG to record professional / GP feedback this is a familiar mechanism which may account for the difference in the number of issues reported by Trusts for whom the use of Datix is new.

In quarter 1, the CCG received 79 contacts between May and June 2018 which has been summarised and the top 5 themes identified are described below.

Contacts by month Q1	Apr 2018	May 2018	Jun 2018	Total
GP Care	0	0	1	1
NBT (North Bristol NHS Trust)	6	4	3	13
NSCP (North Somerset Community Partnership)	0	1	0	1
Other Secondary Provider	0	0	1	1
UHB (University Hospitals Bristol NHS Trust)	6	3	4	13
WAHT (Weston Area Health Trust)	18	15	17	50
Total	30	23	26	79

Top Themes Q1	Apr 2018	May 2018	Jun 2018	Total
Other - please specify in description	2	3	8	13
Discharges- Patient discharged with IV Cannula in situ	3	5	5	13
Pressure Ulcer Incidents	8	2	2	12
Discharges- Discharge planning failure	3	6	6	13
Discharges- Other problems with medication at discharge	3	0	2	5
Discharges- Inappropriate or unsafe discharge	2	2	0	4
Discharges- Patient discharged with inaccurate discharge letter	1	1	1	3
Failure to follow up result of clinical test	1	1	0	2
Outpatients- No prescription provided at outpatient appointment	0	1	1	2
Total	23	21	23	67

9 BNSSG Overview of Healthwatch reports

Across the BNSSG footprint there are 3 Healthwatch teams who each undertake an extensive amount of work to help better understand patient experience and how this can be used to improve services. This tends to be through specific and focussed pieces of work, the results of which are published on their website and used by the commissioners as another way of understanding patient experience and where this can be improved.

The information on the following page is extracted from the quarterly Healthwatch reports from Bristol, North Somerset & South Gloucestershire.

Healthwatch Area	Top 3 Issues Reported in Q1
Bristol	Failure to make a reasonable adjustment in hospital
	Use of agency staff and continuity of care in hospital and social care
	Waiting lists in primary and secondary care
North Somerset	Appointments (primary care)
	Access to appointments particularly in primary care and CAMHS
	Waiting times for appointments (Acute Trusts, Primary Care and CAMHS)
South Gloucestershire	There was no specific intelligence received which either identified new themes or supported the themes that were already recognised in this report.

10 Triangulation of themes

Formal Complaints	Individual Funding Continuing Healthcare Access and Waiting Commissioning Decisions
Informal Complaints	Acute Inpatient Child and Adolescent Mental Health Services Adult Community Services
Advice and Liaison	Entitlement to NHS Services Requests for general information CCG policy - general Delays to specialist referral
MP Enquiries	Access and Waiting Financial / Policy Issues
Feedback from GPs	Discharges with IV cannula in situ Pressure Ulcer Incidents Discharges – Planning Failure
HealthWatch	Waiting times Access Appointments

The information available has been analysed and the following themes have been identified for Quarter 1 2018/19:

- **Individual funding:** As CCG policies and processes regarding funding are implemented, more patients are complaining when their applications are refused. A new series of commissioning policies were introduced in 2017 which have further restricted access to routinely funded treatment for patients and since then we have seen an increase in the number of complaints from patients refused funding. Whilst an increase in complaints was an identified and mitigated risk during policy development, the IFR team and the Complaints team are working together to reduce the impact of these complaints for the patients and the CCG whilst identifying any learning from these complaints.
- **Access and Waiting:** The waiting times for appointments, particularly in relation to mental health services for both adults and children are increasing which is leading to more patients and families feeding back their unhappiness, and seeking clarification of the steps being taken to address the issues. In addition, patients are reporting difficulties obtaining GP appointments and also accessing appointments in the acute trusts.
- **Entitlement to NHS Services:** Since the availability of the Abbott Freestyle Libre in November 2017 the CCG has seen a marked increase in the number of contacts we are receiving in this regard, particularly as the CCG Commissioning Executive declined to fund this equipment for any patient group. As this is not the position in local surrounding areas, patients are feeling like they are involved in a 'postcode lottery' and the decision of the CCG is unfair. In quarter 1, the CCG received 34 enquiries across the spectrum of patient feedback mechanisms in relation to this topic.

11 You said, We did

- The high volume of contact regarding the Abbott Freestyle Libre device was brought to the attention of the Medical Director (Clinical Effectiveness) and a review of the evidence will be commencing in October.
- The high waiting times for mental health services have been brought to the attention of the relevant senior commissioning managers for their awareness and negotiation with the providers as to how these can be addressed.
- Where the CCG has coordinated a multi-agency response to a complaint, face-to-face meetings are now taking place including providers, commissioners and where possible patients and/or their families to discuss the findings and agree the learning outcomes. These meetings are led by the CCG.
- Intelligence gained from a triangulated approach to quality and safety will be shared with the Quality Sub Groups, enhancing the CCGs' ability to monitor performance with providers more effectively and support them to improve services. Providers will also be encouraged further to design and implement improvement plans to enhance patient experience in specific areas of underperformance and communication with patients including the areas of difficulty highlighted in this report.

12 Future Plans

- Discussions are taking place with Healthwatch to try and ensure a consistent approach to reporting across BNSSG and to determine where more joined up working with the CCG can be undertaken to improve and learn from patient experience.

- Discussions are taking place with key colleagues involved in Patient and Public Involvement (PPI) to further consider the intelligence gathered from complaints, PALS, and other feedback mechanisms in order to evolve the content of this quarterly report. PPI staff are keen to be involved and the team will work together to incorporate issues raised in workshops and through engagement exercises which are highly transferable into reports such as this.
- Where patient feedback necessitates, the CCG will undertake assurance visits with our providers to help identify where future improvements in commissioned services can be made.
- Consideration of a wider 'Enter and View' to span across other MIU's and services within BNSSG will also be considered.

13 CCG Quality Strategy

The Customer Services Team has recently been involved in the development of the CCG's Quality Strategy and particularly how we will ensure that patient experience is at the heart of everything the CCG does. To ensure this happens, we will be accessible, visible and approachable ensuring we are in attendance at appropriate CCG and partner events and circulating details of how we can be contacted. We will respond to all enquiries in line with protocol, process and national requirements ensuring that the information we provide is accurate, efficient and timely.

To ensure our service is equitable and available to all, including hard to reach and protected groups, we monitor how patients have heard about our service and analyse this information to identify the places where we are not receiving any feedback so that targeted work can take place to reach out to these areas. A satisfaction questionnaire is also being developed so that we can continually assess and improve our team performance and ensure this is meeting and exceeding the expectations of those who contact us.

We also pledge to learn from the feedback we received and will use this to help improve and deliver high quality services and inform future commissioning decisions. We do this by ensuring concerns and complaints are investigated and where a shortfall or breakdown in process is identified, we will work with the commissioning team or service provider to prevent this happening again. Where learning is identified that is applicable to the wider services that we commission this will be shared anonymously to ensure that the opportunity to learn is maximised.

The progress against these Quality Strategy pledges will be recorded in the quarterly reports which are produced by the team and presented to the CCG's Quality Committee.

14 Financial resource implications

While there are no direct financial implications associated with complaints handling, there is the potential for the Parliamentary and Health Services Ombudsman to recommend financial remedy as an outcome where their investigation shows failings and a level of harm to the patient.

15 Legal implications

The CCG is required to handle all complaints in line with the NHS Complaint Regulations 2009.

16 Risk implications

Any risks, or potential risks identified through patient experience are brought to the attention of the relevant commissioning manager so that mitigations can be considered.

17 Implications for health inequalities

The NHS Complaint Regulations 2009 and the CCG Policy on the Management of Compliments, PALS enquiries and Complaints are inclusive and where a patient has a particular need the team will adapt their approach to meet this. This includes but is not limited to taking a written account over the phone where the patient does not have access to email or would find it difficult to put their concerns in writing and arranging for interpretation services where English is not the patients first language.

18 Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

The NHS Complaint Regulations 2009 and the CCG Policy on the Management of Compliments, PALS enquiries and Complaints are inclusive are accessible to all and do not discriminate against any of the nine protected characteristics.

19 Consultation and Communication including Public Involvement

The triangulation of the patient experience information will provide an evidence base from which commissioners can accurately monitor the quality of commissioned services across BNSSG.

20 Recommendations

The Quality Committee is asked to:

- Note the content of this report and the inclusion of a newly devised performance dashboard for the Customer Services Team (Appendix 1)
- Note that this report has been received and commented on by the CCG Quality Committee at their meeting in September 2018.

Report Author: Lucy Jones, Customer Services Manager
Marie Davies, Associate Director Quality (Patient Experience)

Report Sponsor: Anne Morris, Director of Nursing

Appendices

Appendix 1 – Customer Services Team Performance Dashboard

Appendix 2 – Analysis of Formal Complaints

Appendix 3 – Analysis of Informal Complaints

Appendix 4 – Analysis of Advice and Liaison Contacts

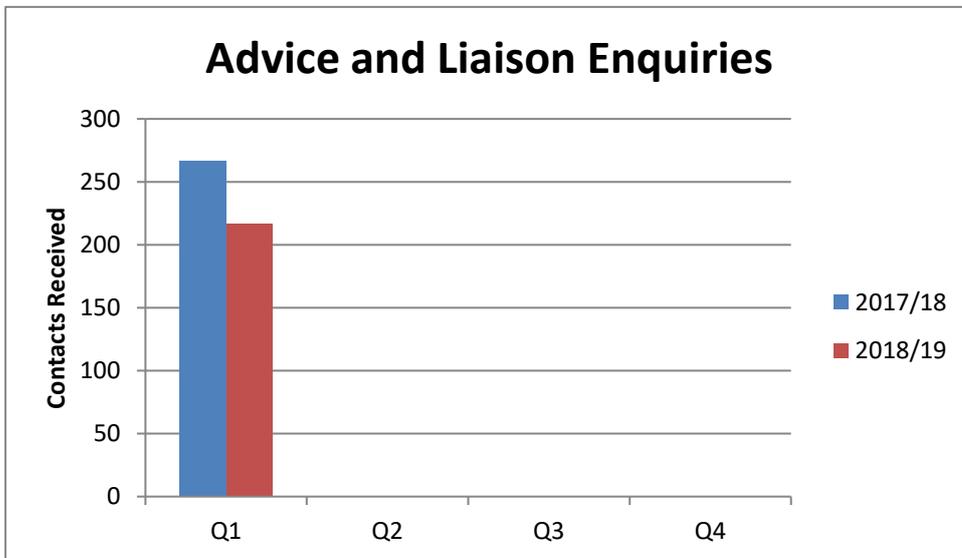
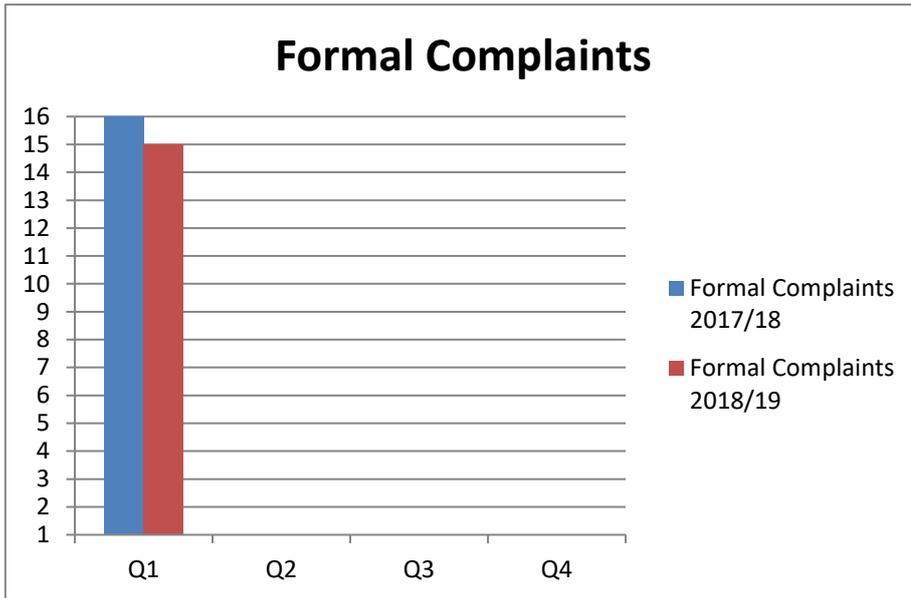
Appendix 5 – Analysis of MP Enquiries

Appendix 6 – Year on Year comparison

Glossary of terms and abbreviations

BNSSG	Bristol, North Somerset and South Gloucestershire
CCG	Clinical Commissioning Group
IFR	Individual Funding Request
CAMHS	Child and Adolescent Mental Health Service
MATS	Musculoskeletal Assessment and Triage Service

Comparison of Contacts Between 2017/18 and 2018/19 *



* Where available data is held