

NHS Hertfordshire and West Essex Integrated Care Board
Patient Experience (complaints and other feedback)
Annual Report 2023/2024

Introduction

The Patient Experience Team (PET) manages; complaints, Patient Advice and Liaison (PALs) queries and compliments from; patients/service users and their families, MPs, and other members of the community. The team also responds to requests from the Parliamentary and Health Service Ombudsman (PHSO) and the Local Government Ombudsman (LGO) for information relating to complaints the Integrated Care Board (ICB) has managed.

This report provides details and learning from patient feedback between 1 April 2023 and 31 March 2024.

In July 2023 the responsibility for the management of primary care complaints (and informal queries) covering; general practice, dental practice, optical services and pharmacies was delegated by NHS England to ICBs across England. This change has had a significant effect on the ICB team due to the increased volume of queries and complexity of some cases. As part of the delegation, HWE ICB Patient Experience Team welcomed two full time staff from NHS England, into the team.

Within the year the team managed a total of 2555 queries (1377 in 22/23)

2023/24	Q1	Q2	From 1 July 23	Q3	Q4	Total
Total queries by quarter (all types)	343	640	Delegation of NHSE primary care concerns	843	729	2555
Queries relating to general practice/dental/optometry/pharmacy	52	265		334	316	967

Compliments

21 compliments were received during 2023/24 (50% less than the year before), 25% of the compliments were for NHS 111 services. Compliments received from patients, families or staff are passed onto the relevant team and any named individuals.

PALS

A total of 1986 PALS contacts were received in 2023/24 – this is an increase of more than 1000 on the previous year (2022/2023 figures in brackets).

	Q1	Q2	From July 23	Q3	Q4	Total
PALS received	259	483	Delegation of NHSE primary care concerns	685	559	1986
	(225)	(240)		(203)	(259)	(927)

Top Three Themes from PALS Queries

Access to Services (33%): there have been a combination of queries relating to access to services covering; primary care, ability to contact practices, availability of appointments and access to secondary care, waiting times for first and follow up outpatient appointments and surgery, waiting times to access wheelchair provision.

Communication (26%): queries range from; receipt of conflicting information, lack of a clear explanation, accessing services by telephone, letters not received, and information not provided. Lack of updates regarding third party provision of components, relating to the provision of equipment including wheelchairs.

Medication (9%): queries range from; emergency access to medications – via NHS111, access to regular prescriptions, red listed medications (that can only be prescribed in hospital), privately initiated prescribing and NHS follow up including shared care.

The team resolve the queries in liaison with the relevant provider or organisation and seek confirmation that any changes needed to improve the process for patients have been made.

The complexity of PALS contacts should not be underestimated, these are not complaints, but are usually raised by people who require help and support to access the care and treatment that they need. Robust and timely management of a PALS query can help resolve concerns and prevent the need for a formal complaint.

The timely aspect of resolution is becoming increasingly challenging due to the complexity of some queries and the ability of the providers to respond in a timely way. The Patient Experience team have fortnightly meetings with the three acute providers within the ICS to review any open PALS/ complaints/ MP queries. Relationships between ICB and provider patient experience teams are improving as a result.

MP Queries

165 MP queries were managed by the team in 2023/24. The majority of queries were on behalf of individual constituents or their family members. A minority were general queries for the benefit of the MPs knowledge and understanding of an issue/ healthcare pathway.

Top Three Themes from MP Queries

Access to services (39%): combination of access to primary care, ability to contact practices, availability of appointments and access to secondary care, waiting times for first and follow up outpatient appointments and surgery.

Commissioning (21%): these queries relate to a variety of issues from funding for specific procedures, Continuing Healthcare (CHC) funding concerns and the local implementation of National Institute for Health and Care Excellence (NICE) guidance.

Communication (14%): Queries relating to health care premises, electronic booking systems for blood tests and transition from child to adult services.

Formal Complaints

350 formal complaints were received by the team in 2023/24. Of these 83 were not progressed as consent to do so was not received from the complainant.

Complaints by Organisation

Organisations are listed where five or more complaints were received by Commissioners within year.

Organisation	Number of Complaints	Number not progressed due to no consent /no further contact
General practitioners	159	49
Herts and West Essex ICB	67	3
West Hertfordshire NHS Trust	16	2
East and North Hertfordshire NHS Trust	15	3
Dental practitioners	15	5
Herts Urgent Care	14	6
Hertfordshire Partnership NHS Foundation Trust	11	1
The Princess Alexandra NHS Hospital Trust	10	4
Enhanced Community Gynecology Care	6	1

Top Three Themes from Formal Complaints

Clinical Treatment (37%): coordination of medical treatment, errors with prescriptions, treatment delays and lack of continuity of care.

Communication (23%): verbal and electronic communications from health care providers, dissatisfaction with consultations, blood test booking process.

Access to Services (20%): primary care, ability to contact practices, availability of appointments and access to secondary care, waiting times for first and follow up outpatient appointments, surgery and NHS Attention Deficit Hyperactivity Disorder (ADHD)/ Autistic Spectrum Disorder (ASD) assessment, waiting times to access wheelchair provision.

Learning from Complaints

- The clarity and manner in which staff within ICB teams and providers communicate with patients and their families, both on the phone and in writing (email and letters) is a significant factor in the majority of complaints, regardless of the subject of the complaint.
- Patients and families have difficulty navigating the health system which can be complicated by systems and organisational pathways.
- Commissioning changes to pathways of care, including the relationship between private and NHS provision has led to levels of concern and dissatisfaction that patients are not able to access the care they consider that they require.
- Care pathways are complex and are frequently focused on conditions rather than patients.
- Not all health conditions have a dedicated care pathway, which can result in some patients feeling that the service cannot help/support them.
- Not all NHS patients can safely be treated at independent hospitals, due to the complexity of their medical conditions and the facilities available at the independent hospital. This can lead to misunderstandings and potential delays for patient care.

Changes as a result of complaints 23/24

- Improvements to the process of communicating with patients and their families have been made within the ICB CHC team, to ensure communication is clear, concise, compassionate and timely.
- The CHC Team has developed an investigation tool and Standard Operating Procedure for the management of concerns and complaints to aid investigation and improve the quality of responses.
- Updating of ICB position statements on (which can be used for similar queries):
 - Continuous Glucose Monitoring
 - ADHD and ASD referrals
 - Private to NHS prescribing (when shared care can be used)
- Commitments from providers to improve clinical documentation as part of their complaint responses.

Parliamentary and Health Service Ombudsman (PHSO)/Local Government Ombudsman (LGO)

The Patient Experience Team are aware of eight cases raised to the PHSO by complainants that were not content with the response from the ICB.

In seven cases either the Parliamentary and Health Service Ombudsman (PHSO) or the Local Government Ombudsman (LGO) requested the complaint file from the ICB, which was provided.

The relevant ombudsman reviewed the files provided -the table below shows the decisions made and actions taken;

PHSO/LGO decision following review of complaint file	Number of ICB complaint cases	Comment/action advised and taken
The ombudsman advised the ICB to take specific action/review the file to establish whether further investigation was required to conclude the complaint	3	<ul style="list-style-type: none"> • 1 case - ICB to review the complaint – conclusion no further investigation required all points had been answered. • 1 case - Legacy case from NHS England, the ICB were advised to answer one outstanding question. • 1 case - the PHSO required the ICB to send a separate apology to the complainant.
PHSO decided that no investigation was required.	2	
PHSO are currently reviewing these cases – decision awaited.	2	
Ombudsman decision to carry out an investigation	1	<p>This is in progress.</p> <p>It is joint complaint between the ICB and a County Council therefore the investigation is being led by the Local Government Ombudsman</p>

Feedback on priorities 2023/24

The achievement of the priorities set for 23/24 were significantly affected by the adaptations and adjustments required within the team to manage the delegation of primary care complaints from NHS England.

ACTION	Achievement	RAG rating	Outstanding actions
Adapt the Patient Experience process and team to accept delegation of complaints from NHS England regarding all aspects of primary care services	<ul style="list-style-type: none"> • All relevant changes made. • Management of primary care service complaints are part of business as usual 		

ACTION	Achievement	RAG rating	Outstanding actions
Share lessons learnt from Complaints /queries	<ul style="list-style-type: none"> Learning from queries to be formally analysed and shared within the ICB in a systematic way in order to ensure the patients voice is heard. 		<ul style="list-style-type: none"> Adapt software system to ensure lessons learnt and changes to practice as a result of queries can be recorded and extracted Design appropriate reports of this data for learning. Identify frequency and relevant groups to receive the information
Developing relationships with providers	<p>All relevant actions taken</p> <ul style="list-style-type: none"> Regular meetings with acute providers in place Discussed shared supervision for Patient experience teams with west Essex acute hospital – this is not feasible to proceed at the current time 		<ul style="list-style-type: none"> Incorporate regular meetings with other relevant providers to discuss open queries Scope the feasibility of developing a virtual support network for Patient Feedback across the ICB
Continue to collect Equality, Diversity and Inclusion Data from people that raise concerns with the Patient Experience Team	<p>Actions taken for collection and recording of data</p>		<p>Monitor EDI data and level of returns quarterly</p> <p>Analyse data and take action as appropriate in terms of widening access to the service</p>

Priorities for 2024/2025

ACTION	How will it be achieved/	Date
Follow up outstanding actions from 2023/24	As above	January 2025 Review quarterly
Develop process to gather feedback from persons contacting the ICB Patient Experience team to improve service/standards as necessary	<p>Options for feedback will be developed and requested from patients/relatives following completion of their enquiry.</p> <p>Process to be developed for analysis of the data and consideration of any changes to practice.</p> <p>Develop relationships with the ICB Patient Engagement Team.</p>	March 2025 Review quarterly
To develop regular reporting on the handling of patient feedback, themes and learning	To develop robust mechanisms to report on internal team performance as well as capturing of themes and learning.	December 2024 Review quarterly

	<p>To develop reporting templates meeting the needs of relevant forums.</p> <p>To ensure a reporting timetable is in place to include updates to forums including the Executive Team and System Transformation and Quality Improvement Committee.</p>	
<p>To review internal processes against the PHSO guidance on good complaint handling (2024)</p>	<p>To undertake gap analysis against revised PHSO guidance.</p> <p>Develop and deliver implementation plan, noting any gaps/ risks associated with the revised guidance.</p> <p>Review and update ICB complaints and patient feedback policy as appropriate.</p>	<p>March 2025 Review quarterly</p>