

HSE
Your Service
Your Say

5 Complaints

Anonymised
Feedback Learning
Casebook

12 Cases

7

Compliments





Quarter 1 2024





Introduction

Welcome to the first quarterly edition of the 2024 national feedback learning casebook. The casebook presents a total of 12 cases covering both complaints and compliments received by Hospital Groups, Community Healthcare Organisations and National Services.

The cases presented in the casebook contain themes and issues that need to be examined in the context of quality and service improvement. The learning gained from Patient and Service User feedback helps target and prioritise improvement efforts as well as highlighting good practice to be promoted and replicated.

The casebook features a total of **5 complaints**; 2 complaints from Hospital Groups, 2 from Community Healthcare Organisations and 1 from National Services that were investigated and/or reviewed along with their outcomes. The casebook also features **7 compliments**; 5 from Hospital Groups, 1 from Community Healthcare Organisations and 1 from a National Service, which highlight the learning to be gained from positive patient and service user feedback.

Key Categories

Complaints

- Communication and Information
- Safe and Effective Care
- Dignity and Respect
- Access

Compliments

- Communication and Information
- Dignity and Respect
- Safe and Effective Care
- Participation
- Access





Complaints

The dominant theme for complaints for the first quarter of 2024 was *Communication and Information* with this category featuring in all five complaints presented. This was followed by *Safe and Effective Care* which featured in 4 of the 5 of complaint cases. Other categories such as *Access and Dignity and Respect* also featured.

Communication and Information related to issues such as accessing and being provided with sufficient or appropriate information as well as ensuring the availability of accurate service information as this can be a barrier to supporting people to access services. There were also issues raised around general communication skills such as how those using our services were spoken with.

Safe and Effective Care issues concerned the care provided as well as follow up care following initial treatment.

Access related to having the appropriate facilities available to accommodate patients/service users with different or additional needs to support an appropriate and positive service experience.

Dignity and Respect concerned the delivery of care that is responsive to and respectful of individual needs.

Compliments

The positive feedback received mainly related to the category of *Dignity and Respect* and *Communication and Information* with these categories featuring in 5 and 4 of the compliments presented respectively,

The other categories of positive feedback featured are *Safe and Effective Care*, *Access* and *Participation*.

HCAT Classification

New for 2024 is the highlighting of the HCAT rating applied to complaints.

The Healthcare Complaints Audit Tool or HCAT is an innovative method of classifying complaints developed by the London School of Economics (LSE). The HCAT tool is a reliable method of coding and systemising healthcare complaints that also supports international comparability of data.

Service users and their families process a huge amount of data; observing and evaluating all care interactions. Complaints are often written with the aim of contributing to the improvement of services. However, the tools for harnessing the potential of these insights have been limited.

By applying HCAT to complaints, it can assist services to identify 'hot spots' for harm, i.e. an area in care where harm occurs frequently, as well as 'blind spots', i.e. areas in care that are not easily observed.





Following an extensive project with NUIG and the London School of Economics to examine the suitability of HCAT within the Irish healthcare context and piloting the use of HCAT in both community and acute services, HCAT is now a mandatory feature of complaints recording on the national Complaints Management System (CMS).

The improved classification system will support the identification of systemic issues and trends within services leading to improvements in healthcare delivery and ensuring high standards of quality and safety.

Learning from feedback is fundamental in providing high quality healthcare services. Listening to and acting on the views, concerns and experiences of Patients, Service Users and their families enable us to guide decision making to improve services and provide the best possible care.

Publication of the casebook is part of the HSE's commitment to use Patient and Service User feedback as a tool for learning and to facilitate the sharing of that learning.

The casebook will be widely circulated to staff within the HSE and shared with Complaints Managers who will consider the learning from these cases.





Category: Access (Hospital Facilities); Communication and Information (Information) (Communication Skills); Dignity & Respect (Delivery of Care), (End of Life Care); Safe and

Effective Care (Treatment and Care)

Status: Compliment

Background to Compliment

A patient with a diagnosis of advanced Alzheimer's disease who was being cared for at home by their daughter for 13 years, experienced a sudden acute episode. The daughter immediately called an ambulance which arrived promptly. The Advance Paramedic immediately recognised the signs of sepsis and advised of the necessity of immediate acute care.

Nature of positive feedback

Care Setting - Ambulance: Paramedics were described as 'calm and gentle in the middle of a crises', identified sepsis immediately, explained everything and talked calmly, respectfully and continually to the patient throughout the journey to the hospital.

Care Setting - Emergency Department: The patient and their family were met by Emergency Department staff who explained the requirement to immediately bring the patient into the Resuscitation area. At all times, the family were kept abreast of the evolving situation and permitted to have key family members accompany the patient. The doctor outlined the surgical treatment necessary to address the case of sepsis while also explaining the risks and the reasons why palliative care was the most appropriate pathway of care in the circumstances. The family welcomed the clear, honest communication and the realistic expectation of outcome.

Care Setting - Medical ward: Following swift transfer to the medical ward, the handover of care was described as seamless. The aspects of care that stood out for the family were described as: time to process the evolving situation – kindness – empathy – the freedom to leave to avail of breaks knowing that nursing care was exceptional and pain relief was managed promptly. The family were made to feel welcome at all times and this welcome was extended to the grandchildren who also stayed the night. A palliative care referral was made on a Friday night with a consultation within 36 hours and ongoing input from palliative care team as required - continuous explanation of the evolving situation was to the fore which included how patient care would be managed and the rationale behind this.

End of Life Care: The family related that there was never any pressure to stay with their loved one or to leave. They welcomed the calm compassionate approach to the delivery of care and were given time plenty to say goodbye. They greatly appreciated that their mum was transferred into a single room which afforded both their mum and the wider family with privacy, dignity and respect. The End of Life symbol was placed on the door. Family who stayed overnight were offered a mattress to sleep on if they wished. Particular gestures were greatly appreciated, such as a doctor making a cup of tea for the patient's grandson after the patient had passed, knowing that it was this young man's first time to experience a death. The catering staff were greatly appreciated as they continually offered the family tea and a sandwich which eliminated concern around the requirement to leave their loved one alone to avail of food.

The family related their experience to be overwhelmingly positive.





Outcome and Learning

This positive experience demonstrated;

- The value and importance of continuity of care to provide seamless care throughout a patient's journey.
- The importance of including and involving the family throughout the patient's journey.
- The value and importance of clear communication and information were demonstrated in that at all times, the family knew what was happening, and were offered the care options together with an explanation of reasons for the most appropriate care pathway.
- A person centred care approach ensured the patient was at the centre of all decisions.
- A culture that demonstrated the HSE Values of care, compassion and trust were to the fore.
- The healthcare team, worked as a team with each discipline and staff member contributing
 to the needs of the patient and wider family, with each addressing the needs unique to their
 own service and potential.
- The overall experiences of this family in using our health services has been extremely positive impacting three generations of the one family and ensuring a positive foundation built on trust.





Category: Access (Hospital Facilities); Information & Communication (Information) (Communication Skills); Participation (Patient, Family, Relatives); Dignity & Respect (Delivery

of Care); Safe & Effective Care (Treatment and Care)

Status: Compliment

Background to Compliment

A gentleman and his wife were visiting the West Coast of Ireland to celebrate a significant wedding anniversary. Just before they were due to return home to their country, the gentleman suffered a heart attack. The person described this as 'an extremely frightening experience, especially as both he and his wife were a continent away from home and loved ones. The gentleman related that he was extremely fortunate to be very close to a University Hospital.

Nature of Positive Feedback

Coronary Care - Acute Hospital:

The gentleman related that he was 'incredibly fortunate' to have received great care within the Coronary Care Unit. He described the nursing care as 'excellent and absolute models of caring professionals', adding that he was treated with 'care, warmth and dignity'.

The patient related that the doctors, nurses, technician and other staff were attentive, warm, and patient throughout his one week stay. He described the communication as 'clear' and at all times the treatment and care provided was explained to him. He emphasised the added appreciation to staff for dealing with repeated requests for information from his home country insurance company.

The gentleman was very appreciative that the nurses linked his wife with 'Croi', a West of Ireland Cardiac Foundation and registered Charity, who were able to provide her with a place to stay close to the hospital and which also served as a place for the gentleman to fully recover following discharge from hospital.

The gentleman praised the Coronary Care Unit for its warm, calm and peaceful environment where care was 'attentive and warm' where he was treated with 'warmth and respect' at all times.

Medical ward – Acute Hospital.

The gentleman related that he was discharged from the Coronary care Unit to a medical ward, when in a less critical condition, appreciating that the specialist bed was required for incoming patients. The gentleman described his experience on the medical ward as "less comfortable, less peaceful and altogether more difficult to bear" emphasising that none of that was due to the "unequivocally dedicated nurses and staff". The gentleman observed what he described as 'understaffing', with staff being overworked and under resourced, but despite this, they were "heroically good natured, caring and expert", adding that although the environment was less comfortable, he felt he was in 'just as good hands'.





Feedback focused in particular on the warmth, communication, good positive nature of staff and the security he experience because of the information and clear communication from staff throughout his entire stay.

The gentleman requested that his experience be shared with the administrators and managers that oversee hospitals operations requesting that the "nurses in Coronary Care and the Medical ward receive the highest recognition for their professionalism and humanity emphasising the need for increased funding, better working conditions and improved workload".

Outcome and Learning

- The gentleman has related his experience as occurring over a year ago and related that he and his wife are "forever grateful to everyone who cared for them in the hospital and that the hospital itself should be very grateful for their staff, adding that as a result of the care and information he received, he is in better shape than he has been for decades.
- Although physical infrastructure is not always sufficient and as modernised as we would like, the attitude, communication, dignity and respect from staff to our service users can mitigate aspects of healthcare which staff often have no control over.
- The importance of participation and person centred care, in the provision of healthcare cannot be underestimated and this was demonstrated in this situation whereby a non-statutory stakeholder (Croi) was contacted and utilised effectively to provide accommodation close to the hospital for the gentleman's wife and for the gentleman himself as a place to recuperate prior to returning home to the USA.





Category: Communication and Information (Information); Safe and Effective Care (Treatment

and Care)

HCAT Severity: n/a HCAT Harm: n/a

Status: Resolved informally at first point of contact

Background to Complaint

A patient contacted the hospital advising that they were a public patent due for surgery but was referred to a private provider because of delays. The patient underwent the surgery, received an assessment 3 months post surgery and was signed off. The patient returned to normal everyday living and work but has been struggling with constant knee pain and swelling.

Investigation

The patient complained to the referring hospital that if they return for a further assessment to the private provider that they will be charged for scans and assessments when the referring hospital should see them first to assess what the ongoing issue it.

PALS contacted the outsourcing department in the hospital, who advised that the patient had two follow-up appointments scheduled at the private provider's facility.

The referring hospital's outsourcing department contacted the private provider who in turn arranged for a third appointment with the surgeon.

Outcome and Learning

The patient was very grateful for the further appointment and the comprehensive follow up.

The additional concern regarding the cost of attending the private provider was a worry for the patient.

Where possible, being able to respond to the patient's concerns, at the first point of contact and without delay resulted in a satisfactory outcome.





Category: Dignity and Respect (*End of Life Care*)

Status: Compliment

Background to Compliment

A patient's family sent in a thank you card following the death of their loved one.

Nature of Positive Feedback

The card stated that this is, "just a very belated and small gesture to express our thank you for all you did for our precious and most wonderful father in his final days from the moment he was admitted to the ward in your hospital. Dad was so blessed to have been cared for by such a dedicated team from catering, cleaning, care assistants, nurses and doctors — at each touchpoint he was treated with such wonderful care and respect during his final weeks. One of our family remarked on the sense of teamwork and comradery that we never experienced on other wards (and during the last 2 years we have experienced many wards in many hospitals), but your ward was a little different. We remarked saying this to the consultant one day who advised "it is because each person treats the patient as if it was their mother or father was been cared for", and this was very evident. The last number of weeks have been hard and lonely, but it is such a comfort that, in our dad's final days, he was treated with care, respect, dignity and we could not have asked for more."

Outcome and Learning

A copy of the feedback was shared with all relevant staff including the Director of Nursing & Integrated Care. The Director of Nursing & Integrated Care wrote to the staff directly thanking them for their kindness and dedicated care to the patient and their family. The End of Life Coordinator brought the feedback to the attention of the End of Life Committee

Learning:

Acknowledging, supporting and being sensitive to the end of life journey of a patient and their family member is important. The experience will remain with the family for many years and we have only one opportunity to get it right.

The approach and care demonstrated by the clinical and support staff reflects the culture of positive team work and this is evident to patients and families.

Sharing positive feedback is meaningful and encouraging for all staff.





Category: Safe and Effective Care (Treatment and Care)

Status: Compliment

Background to Compliment

A hospital received feedback from a long term patient with regard to their recent experience as an inpatient.

Nature of Positive Feedback

The patient wrote to the hospital states that, 'once again it is my pleasure to write to the Board of the Hospital to commend the wonderful medical and clinical care I received during my recent stay. My condition has become increasingly complex over the years. However, nothing was too much trouble to ensure my treatment, comfort and care in seeking to afford me the opportunity to have the best quality of life going forward. My medical treatment encompassed the care of a number of clinicians and I was privileged to avail of their exceptional expertise and world class professional care.

The management of the Ward ensured quality nursing care was provided to patients in a very pleasant ward atmosphere. As I witnessed on the Ward in the past, the standard of care, kindness and attentiveness I received from all of the nurses, nursing assistants and phlebotomists during very busy days was always evident.

The catering staff went out of their way to facilitate the needs of my awkward diet. I very much appreciated the cheerfulness and hard work of the cleaning staff.

Since my previous long stay in you hospital in 2017 I have noticed a general improvement in efficiency in all aspects of my care. As our hospital services constantly receive adverse media attention, I would like to commend all who work in your hospital for a job well done and for demonstrating such pride in their patient care.'

Outcome and Learning

- PALS acknowledged and thanked patient for their feedback
- A copy of the feedback was forwarded to relevant managers
- PALS logged the feedback onto the software system.

Learning:

- All members of the hospital team have a role to play in the experience of a patient while in hospital
- Patients appreciate how staff make them feel as well as the clinical care provided to them.
- Sharing positive feedback is meaningful and encouraging for all staff.





Category: Safe and Effective Care (Treatment and Care); Communication and Information

(Information) (Communication Skills); Dignity and Respect (Delivery of Care)

Status: Compliment

Background to Compliment

A parent of a patient wrote to the hospital to relay their thanks to a number of staff who treated their child during a long stay in hospital.

Nature of Positive Feedback

The parent highlighted how "every nurse, doctor and staff that interacted with us was so nice and understanding" and also "kind and professional". The parent wanted to give special thanks to their child's consultant in the Intensive Care Unit (ICU).

The compliment highlighted how a number of doctors always spoke to them professionally and calmly and saw the scared family who were beyond the child's medical condition. They highlighted the ICU doctor's frankness, calmness, honesty, and how they managed their expectations well with regard to the seriousness of their child's medical condition. The parent also valued the information leaflets provided by the doctor.

The parent detailed one particular experience in which they witnessed their doctor strongly advocate for their child. The experience involved a large number of medical staff discussing the next steps for their child's care as their condition had worsened; the ICU doctor advocated for a specific treatment plan which was ultimately successful and contributed to the significant improvement of the child's condition. The parent felt the actions of the doctor in advocating for their child "had a hugely positive influence" on their child's outcome which ultimately led to their eventual discharge home.

The parent concluded that the ICU doctor is an "exceptional talent and human being" and their name would always be spoken of fondly in their home.

Outcome and Learning

The hospital acknowledged the compliment with the parent and thanked them for their feedback which was in turn brought to the named staff.

The compliment highlights how good communication can have a huge impact on the experience of families during particularly difficult times in hospital. This family appreciated being spoken to honestly and also being provided with information leaflets that they could refer back to when needed. The compliment also highlights how staff with the relevant medical expertise can advocate for the best needs of a child, which parents are not always in a position to do themselves.





Category: Safe and Effective Care (*Treatment and Care*), Dignity and Respect (*Delivery of Care*); Communication and Information (*Information*) (*Diverse Needs*); Access (*Hospital*

Facilities)

HCAT Severity: Not Available **HCAT Harm:** Not Available

Status: Upheld

Background to Complaint

The parent of a neurodivergent patient submitted a complaint regarding their poor experiences with both staff and hospital facilities. They felt that their child's additional needs were not accommodated for, and as their parent, they constantly had to advocate for better services.

The following issues were identified:

- A lack of staff awareness regarding the needs of neurodivergent children
- Planned admissions being cancelled that can lead to a need to present to the Emergency Department (ED)
- ED environment and facilities do not adequately cater for the needs of neurodivergent children e.g. overcrowding, long waiting times and poor communication regarding this, loud and bright surroundings.
- No access to sensory areas for neurodivergent children with sensory needs

Investigation

The Complaints Officer spoke with the parent and apologised for their experience, and assured them that their feedback would be brought to the attention of relevant hospital staff. The Complaints Officer then shared the parent's experience with the ED management team and with the hospital's Access Officer (AO).

The ED team apologised that this family had a negative experience and felt that communication from staff was poor. They highlighted the limitations of current infrastructure and that trying to accommodate the needs of all patients can be challenging, considering the large volume of patients treated on a daily basis. They accepted that ED does not have a specific waiting area or room to appropriately accommodate children with sensory needs, however they provided reassurance that appropriate transition spaces for neurodivergent children have been taken into account as future infrastructure designs include sensory rooms in the ED.





The AO engaged with the parent directly, they discussed Disability Awareness Training that is available to hospital staff and the AO assured the parent that ED staff would be reminded of this training. The AO also informed the parent about some upcoming initiatives that may help the parent in communicating their child's needs and in turn improve staff's understanding of their child's needs.

Outcome and Learning

This complaint highlighted the importance of staff awareness when treating and communicating with neurodivergent children, children with sensory needs, and their families.

With appropriate training, staff can be better equipped to manage the needs of neurodivergent patients even when working in an environment without appropriate facilities.

Consideration and implementation of appropriate transition spaces in new infrastructure designs will help to improve the overall experience for patients in the future, taking into account space and funding implications.

This complaint also highlighted the importance of the role of the Access Officer.





Community Healthcare Organisation

Category: Communication and Information (Information)

HCAT Severity: Low HCAT Harm: N/A Status: Upheld

Background to Complaint

A service user was dissatisfied at not being correctly advised about what information was necessary to make an appointment at the Public Health Nursing department.

The service user wished to arrange an appointment for their child following a visit by the Public Health Nurse.

On contacting the department by phone the Service User was advised by the staff member that the name of the Public Health Nurse was required to make an appointment.

During subsequent contact the Service User established that appointments were allocated according to area/address only – irrespective of which Public Health Nurse was assigned the case.

The Service User was dissatisfied at being required to provide unnecessary information and submitted a complaint.

Investigation:

On examination it was established that the staff member who had taken the call had not been fully informed about the specific appointment arrangements and requirements for that department.

Outcome and Learning:

The circumstances were explained to the Service User with an apology and the complaint was upheld.

Learning was identified in relation to the need for accurate information being available to reception staff for effective advice to service users.

In this instance a recommendation was made and implemented by local governance to review with phone reception staff their understanding of the specific requirements for making appointments within that department.





Community Healthcare Organisation

Category: Dignity and Respect (End of Life Care); Participation (Patients, Family, Relatives)

Status: Compliment

Background to Compliment

A gift and thank you card was received by the Integrated Care Programme for Older People (ICPOP) Multi-disciplinary Team (MDT) from the family of a loved one who passed away peacefully in their own home.

Nature of Positive Feedback

The family wished to express their gratitude to the team for helping to keep their loved one at home in the last months of their life which was the wishes of the person.

The Integrated Care Programme for Older People (ICPOP) are community specialist teams that provide services for older people with complex needs and who require specialist multidisciplinary intervention to help maintain their independence and live well at home.

Outcome and Learning

The positive feedback was brought to the attention of the ICPOP multi-disciplinary team members.

- The ICPOP service provides patient-focused and person-centred care. The significant holistic approach to patient care contributed to the service user's wider quality of life while in their own home and highlighted the extent to which this can have a positive impact at the end of a person's life.
- The importance of the ICPOP care team to the most vulnerable in helping them to live a safe and holistic life in their own home was recognised by the family.
- Supporting people to live independently and safely in their own home is a key aim of community healthcare. The compliment highlighted and acknowledged the work and commitment delivered by the ICPOP dedicated team.
- Such initiatives also empower people to participate in maintaining their well-being. The ICPOP approach of providing support in a person-centred manner encourages people to get involved and be more proactive in their care and well-being for as long as possible.





Community Healthcare Organisation

Category: Dignity and Respect (Alleged Inappropriate Behaviour); Communication and

Information (Communication Skills); Safe and Effective Care (Treatment and Care)

HCAT Severity: Low HCAT Harm: N/A Status: Upheld

Background to Complaint

A Service User had a bad experience while attending a primary care service for an assessment with their child. They found the staff member to be 'extremely unprofessional' with them 'rudely dismissing the assessment earlier than anticipated'. The staff member undertook to make a further referral on the day but this had never materialised. Despite numerous efforts to make contact with the staff member, the Service User was unable to do so.

Investigation

The complaint was investigated and an apology issued for the unpleasant experience on the day which also included an apology for the unnecessary delay that ensued for the further referral.

Outcome and Learning

- Staff within the service were reminded of the HSE's code of conduct supporting a culture of safety, quality and kindness.
- Staff are reminded of appropriate communication, follow-up and engagement regarding next steps care and the avoidance of abandonment felt by the service user which is contrary to the MPS teachings in the ASSIST model of communication.
- A reminder to staff to complete HSeLanD 'Effective complaints handling training' which highlights the impact of individual behaviour and the benefits of positive and respectful interactions on service user experience.
- At all times upholding and delivering on the Sláintecare vision, providing the right care, in the right place, at the right time.





National Service

Category: Safe and Effective Care (Treatment and Care); Communication and Information

(Information) (Delay and failure to communicate)

HCAT Severity: Low

HCAT Harm: Minimal Harm

Status: Upheld

Background to Complaint

A complaint was received from a Service User who had recently attended for an appointment. Following the appointment the Service User wrote to complain about the discomfort felt during and after assessment.

The Service User felt that their physical requirements were not taken into account during the assessment which directly resulted in the discomfort experienced during the assessment and in the days that followed.

Investigation

On receiving the complaint, the unit manager telephoned the Service User to apologise for their experience and to reassure them that experiencing some discomfort or pain following this kind of assessment is not unusual and to offer advice on aftercare. The Service User remained dissatisfied, so the unit manager arranged a call to the Service User from a member of the clinical team. They were unable to reach the Service User, so the complaint was progressed by the Complaints Officer.

The Complaints Officer acknowledged the complaint and advised the Service User that a formal response will be issued once a thorough investigation takes place. As part of the investigation, the Complaints Officer engaged with the relevant programme staff, including the programme manager and the unit manager, to address the concerns raised and to investigate what information was required to provide a full explanation to the Service User.

An explanation was provided to the Service User that outlined all of the factors that contribute to ensuring a high-quality outcome following assessment. It also explained that physical positioning together with the limitations of the machinery used, can result in discomfort for some patients.

The team explained that they do try to make patients aware that the assessment can cause some patients to feel discomfort by informing them through leaflets issued with appointment letters, and the website information, so that they can prepare in advance of their appointment.

The team apologised to the Service User for the upset caused as a result of their experience.

Outcome and Learning

The Programme Manager discussed the issues raised in this complaint with the relevant staff to reiterate the importance of reassuring clients about the possibility of pain or discomfort following examination and communicating the challenges of positioning during examination.

This complaint will be anonymised and shared with the wider teams to ensure the shared learning opportunity from this complaint positively impacts on the service going forward.





Following receipt of the final response issued, the Service User contacted the programme to advise that they were satisfied that their complaint was dealt with in a thorough manner.

National Service

Category: Safe and Effective Care (*Treatment and Care*); Communication and Information

(Communication Skills)
Status: Compliment

Background to Compliment

A Service User had recently attended for an appointment at a screening clinic. Following the appointment, the Service User sent an email to the screening programme to compliment the staff who attended to them on the day of their appointment.

Nature of Positive Feedback

The Service User advised that this appointment was not one they were particularly looking forward to. However, the treatment received was absolutely brilliant. The Service User stated that all the staff were fantastic but in particular, the two members of staff in charge of the clinic that day.

The Service User also added that the staff member who performed the screening examination that day was very kind, patient and understanding, and highlighted that this staff member was an asset to the team.

The Service User also requested that their positive feedback be passed on and shared with the relevant members of staff at the clinic.

The unit manager thanked the Service User for taking the time to send in the positive feedback to the screening programme.

Outcome and Learning

This compliment was brought to the attention of the relevant staff who were happy to receive such positive feedback. This demonstrates that effective treatment and care is essential and provides comfort to service users when attending the screening service.