





Meeting Date	26 May 2020		Agenda Item	3.4
Report Title		cidents relating	to COVID-19 a	nd Update
	on Amazon V	Vishlist		
Report Author	Hazel Lloyd, Head of Patient Experience, Risk & Legal			
	Services			
Report Sponsor		Director of Gove		
Presented by	Hazel Lloyd, Head of Patient Experience, Risk & Legal			
	Services			
Freedom of Information	Open			
Purpose of the	The purpose of this report is to provide the Committee with:			
Report	a grantian of the concerns and incidents received			
	 overview of the concerns and incidents received relating to Covid-19 during the pandemic and: 			
	an update on the Amazon Wishlist			
Key Issues	 The Patient Experience, Risk & Legal Services Team took the following actions to support incident reporting during the pandemic, respond to complaints timely and deal with the effects of the restrictions on visiting in the hospitals. The actions included: COVID19 Short Incident Report Form Answer phone option to report incidents New codes for COvid-19 incidents/complaints. Changed their working pattern in response to the demand and started working 7 days a week 9 – 5pm. Corporate Patient Feedback Team supported Units to respond to complaints, in particular complaints which were Covid-19 related. Established Task & Finish Group to implement the changes required in relation to the reduction in visors to support virtual visiting and availability of clothing and toiletries to patients. 			
Specific Action	Information	Discussion	Assurance	Approval
Required			\boxtimes	
(please choose one only)				
Recommendations	Members are asked to:			
	NOTE the contents of the report			

Concerns/Incidents relating to COVID-19 and Update on Amazon Wish list

1. INTRODUCTION

The purpose of this report is to provide the Committee with:

- overview of the concerns and incidents received relating to Covid-19 during the pandemic and:
- an update on the Amazon Wish list

2. BACKGROUND

2.1 Concerns and Incident Reporting – COVID19

At the start there was recognition that analysis of the Covid-19 related concerns and incidents would be required to ensure, as an organisation, we understood the concerns during the pandemic and responded to them. A number of actions were taken to support reporting and supporting the public and staff at this difficult time. The actions included:

- COVID19 Short Incident Report Form link to the form on the Health Boards intranet is: http://howis.wales.nhs.uk/sites3/page.cfm?orgid=743&pid=36595
- Answer phone option to report incidents Staff can report an incident by leaving an answerphone message by calling Ext: 44392 or 01639 684392.
- **New codes** in the system to make it easier to analyse the concerns and incidents and report in to the Covid-19 Gold supporting structures so action could be taken across the Health Board as well as at Unit level.
- The Corporate Patient Feedback Team changed their working pattern in response to the demand and started working 7 days a week 9 5pm.
- Corporate Patient Feedback Team supported Units to respond to complaints, in particular complaints which were Covid-19 related.

2.2 Change in Visiting Policy

In March 2020 measures to restrict social contact were announced across the UK. As a result restrictions on visitors to patient healthcare settings took effect.

This moved away from our person-centred flexible approach to visiting, although was essential from a safety perspective in this unprecedented time. The advice followed can be found on the gov.uk website. This highlighted that there may need to be some exceptions to this general advice:

Visiting patients who are not infected with COVID-19 were permitted for:

- one parent or guardian for paediatric inpatients and neonates;
- people receiving end of life care, with permission to visit secured in advance from the ward sister/charge nurse and if agreed, this should be one visitor at a time for a specified amount of time;
- women in labour permitted a birthing partner [from their household.

A Task & Finish Group was established to consider the change in the visiting policy and the effect this would have in terms of:

- relatives not being able to drop off/collect clothes and essential items; and
- Impact on communication between the patient and their relative(s).

3. Covid-19 Incidents reported during 10th March to 14th May 2020

A total of 185 incidents were reported during the period 10th March to 14th May 2020 which have been coded as Covid-19 related incidents. The Table below provides a breakdown of the incidents by type.

COVID-19 Codes	Total	%
Acquired COVID-19 during admission	40	21.62%
Lack of communication (e.g received potential COVID-19 patient/staff not informed		
COVID-19 patient on Ward)	25	13.51%
Aggressive/Inappropriate behaviour due to restrictions	22	11.89%
PPE not available	20	10.81%
Contact with Patient/Staff with suspected COVID-19	16	8.65%
Contact with Patient/Staff with confirmed COVID-19	14	7.57%
Lack of staff to treat COVID-19 patient(s)	14	7.57%
Delay in Diagnosis/Testing for COVID-19	7	3.78%
Person initially tested negative for COVID-19 but are in fact COVID-19 positive	6	3.24%
Cancellation of treatment/appointment/Clinic due to COVID-19	5	2.70%
Missing Property	5	2.70%
Room/location unable to be used/unavailable	5	2.70%
Access to other treatment	3	1.62%
Incorrect PPE	1	0.54%
Infection Control (contamination)	1	0.54%
Lack of Testing	1	0.54%
Grand Total	185	

Hospital Acquired Covid-19 relates to 21.62% of the incidents reported relating to Covid-19 and separate investigations will be undertaken. All Wales work is progressing in terms of ensuring consistency in approach to these investigations being undertaken and the level of investigations in line with the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011.

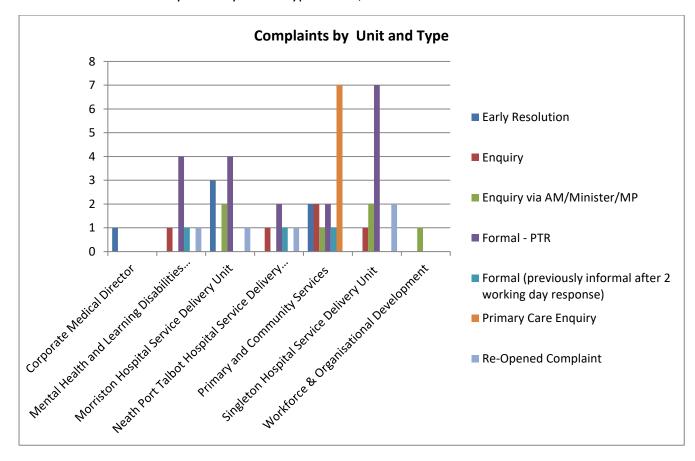
Lack of communication related to the fast pace of change in terms of services and hand over information and information relating to PPE requirements.

Aggressive/Inappropriate behaviour related to patients/clients whose usual activities were disrupted. Using the Amazon Wish list items were donated to support the individuals carrying out activities in the care settings.

PPE not available – these incidents were reported into the lead overseeing PPE.

4. Covid-19 Concerns reported during 15th April to 1st May 2020.

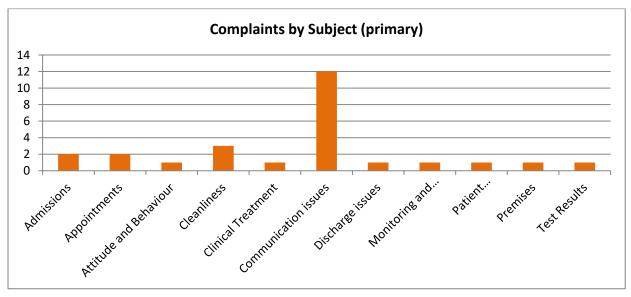
Since 15^{th} April $2020 - 1^{st}$ May 2020 the Health Board has received 51 complaints/enquiries. Please see breakdown by delivery unit & type below;-



Out of the 51 complaints, 26 were COVID related

COVID Complaints

From the 15.4.20 - 1.5.20 there were 26 complaints COVID related, please see breakdown of complaints below;-

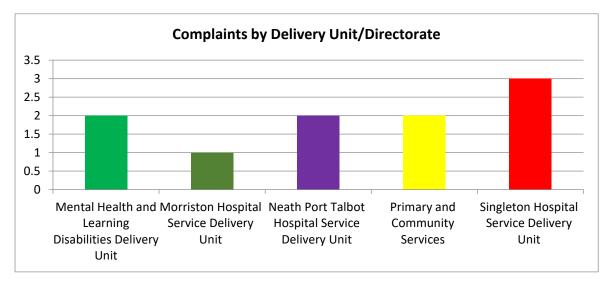


Admissions	2
Appointments	2
Attitude and Behaviour	1
Cleanliness	3
Clinical Treatment	1
Communication issues	12
Discharge issues	1
Monitoring and observation issues	1
Patient Property/Expenses	1
Premises	1
Test Results	1

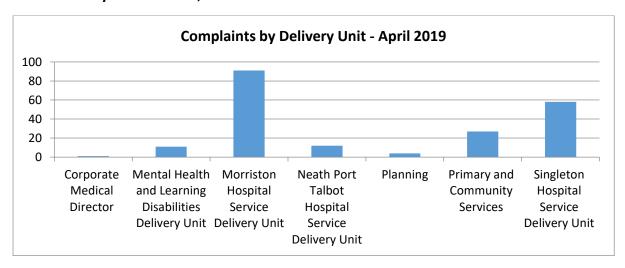
Out of the complaints that have been coded against the new COVID codes, breakdown is below;-

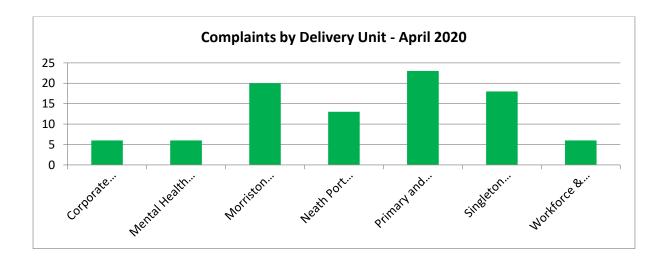
Lack of communication (e.g received potential COVID-19 patient/staff not informed COVID-	
19 patient on Ward)	9
Lack of staff to treat COVID-19 patient(s)	2
PPE not available	2
Incorrect PPE	1
Hand Gel/Soap Unavailable	1
Cancellation of treatment/appointment/Clinic due to COVID-19	1
Room/location unable to be used/unavailable	2
Access to other treatment	7

Out of the 51 complaints, 10 are still open, broken down by unit below;-



There was 204 complaints received during April 2019 compared to 92 in April 2020, a breakdown by unit is below;-





4.1 All Wales Analysis of Complaints

Welsh Government have requested complaints data from Health organisations in Wales to be sent to Welsh Risk Pool, Once for Wales Team on a weekly basis so that they can undertake an analysis across Wales in terms of the complaint themes being reported during the pandemic. Welsh Government have written to all Health organisation requesting their support in relation to the data request.

The Health Boards were asked to initially submit data for the period 1st March to 26th April 2020 and thereafter on a weekly basis. The data for the period 1st March to 26th April can be summarised using the Subject and Sub Subject in the tables below:

Subject (Primary)	Total	%
Communication issues	40	23.67%
Admissions	26	15.38%
Appointments	24	14.20%
Clinical Treatment	19	11.24%
Attitude and Behaviour	13	7.69%
Cleanliness	13	7.69%
Discharge issues	5	2.96%
Medication	5	2.96%
Patient Property/Expenses	4	2.37%
Test Results	4	2.37%

Sub-Subject	Total	%
Insufficient information	15	8.88%
Incorrect information	13	7.69%
Cancelled admission-elective	11	6.51%
No admission date	10	5.92%
Delay in diagnosis	9	5.33%
Delay in receiving outpatient appointment	10	5.92%
Appointment cancelled	7	4.14%
Availability of protective clothing	7	4.14%
Unable to contact	6	3.55%
Attitude of Allied health professions to patient	5	2.96%

5. Supporting patients and families through the COVID-19 crisis

Virtually all hospital visiting stopped in the fight against COVID-19 in March 2020. As a result, a Task & Finish Group was set up to consider the impact on patients and relatives and actions to be taken to mitigate the effects of the sudden change and the impact of no visiting. The priority was for the Health Board to consider alternative ways for patients and relatives to connect; ensure families are kept informed, and deal with practical issues like providing patients with clean clothes and toiletries.

Virtual visiting

The Communication team ensured messages were shared on social media notifying the public of the free WiFi in all hospital sites and encouraged families and carers to speak to patients via smartphones and tablets. Apps like Skype, WhatsApp and FaceTime enabled video communication. WiFi assisted phone calls and plain emails were also options.

Electronic Tablets were donated and also bought by the health board, which enabled the PaLS Teams in the hospital to assist and support patients who did not have their electronic devices to stay in touch with their relatives.

• Laundry and toiletries

Usually, visitors will bring in fresh clothes for patients and take away soiled laundry, and also replace toiletries. With this no longer in place alternative systems were put in place.

Drive-through laundry swaps at Morriston, Singleton and Neath Port Talbot hospitals were set up supported by the PaLS Teams in the hospital and they were supported by a central call centre team (Outpatient Boking Team) who are liaising with relatives and carers to arrange the drop off of clearly labelled clean laundry and collection of soiled clothing.

In the expectation that the pandemic would intensify it was not certain if the soiled clothes could be retuned and relatives were made aware of this and asked not buy expensive items.

Only relatives and carers who were **not** self-isolating with suspected or confirmed COVID-19, or who were **not** living with someone who is self-isolating would mean that an increasing number of patients would not receive clean clothes and or toiletries. In recognition of this a social media appeal launched on Friday, 27th March, asked the public to donate clothing and toiletries via an Amazon wish list through the Swansea Bay Health Board Charitable Funds Team.

The response from the general public was overwhelmingly positive and this allowed for staff to set up a distribution hub, based in Head Quarters to receive the clothing and toiletries for distribution across our sites as needed. As an example of the generosity of the public and business by Tuesday 31st March over 2,000 boxes of donations had arrived at Swansea Bay UHB, with more arriving by the hour. Amazon also donated 1,500 items of clothing, and one of the clothing companies included on the wish list donated profits from the sale to the health board.

As a quick snap shot of what has been received:

- ➤ 27000 toiletry items e.g. shampoo, shower gel, shaving items, sanitary items, toothbrushes and paste etc
- 900 packs of men's underwear and 500 items of men's nightwear
- > 2900 packs of women's nightwear and 1200 items of women's nightwear

72 tablet computers to facilitate virtual visiting

The approximate financial value of these items is around £204,000

All hospital sites across the health board have benefited from this campaign. Feedback has been very positive. One nurse remarked:

"Patients being able to wear proper nighties/pjs donated and not backless hospital gowns has given them dignity, and the pure joy virtual visiting has brought happy tears to many. What you do is invaluable. Thank you"

The wishlist will continue to be managed moving forward.

The wishlist has received media coverage on the BBC website, local radio and the Independent newspaper. We also supported Cwm Taf Morgannwg and Hywel Dda in getting their wishlists established.

Communications - Checking on patients

Families often get updates on patients' progress when they visit, or they call the ward to find out.

With face-to-face information now suspended and COVID-19 pressures growing, there was a real risk that families and carers would find it increasingly difficult to find out how their loved ones are doing.

Dedicated email addresses were established requesting the patient's name, address, date of birth and Ward details (if known) to help identify their relative.

SBU.MorristonPatientContact@wales.nhs.uk

SBU.SingletonPatientContact@wales.nhs.uk

SBU.NeathPatientContact@wales.nhs.uk

A telephone number with answer phone facility was dedicated for anyone who did not have access to email, you can ring 01792 583700 to leave a message and which was then relayed to the ward once a day.

6. RECOMMENDATION

Members are asked to:

NOTE the contents of the report.

Link to	Supporting better health and wellbeing by act		
Enabling	empowering people to live well in resilient communities		
Objectives	Partnerships for Improving Health and Wellbeing		
(please choose)	Co-Production and Health Literacy		
	Digitally Enabled Health and Wellbeing		
	Deliver better care through excellent health and care soutcomes that matter most to people	services achieving the	
	Best Value Outcomes and High Quality Care		
	Partnerships for Care		
	Excellent Staff		
	Digitally Enabled Care	\boxtimes	
	Outstanding Research, Innovation, Education and Learning		
Health and Ca	9	· B E	
(please choose)	Staying Healthy		
(J-10222 0110000)	Safe Care		
	Effective Care		
	Dignified Care		
	Timely Care		
	Individual Care		
	Staff and Resources		
Quality Safet	y and Patient Experience		
	and complaints have been reviewed by the Units Q	uality & Safety	
	forward any learning to mitigate recurrence.	danty & Carcty	
Financial Imp			
		o investigations	
Filianciai impii	cations will be assessed following completion of the	e investigations.	
Logal Implian	tions (including equality and diversity assessm	ont)	
	tions (including equality and diversity assessm		
	re ongoing in relation to the incident and complaint		
_	cordance with the Civil Procedure Rules of the NH	S Concerns,	
	d Redress Arrangements Wales Regulations 2011		
Staffing Impli			
	tient Feedback Team have changed their work pa		
	required in relation to the Covid-19 complaints wo	rking a 7 dya rota 9	
– 5pm.			
	plications (including the impact of the Well-bei Wales) Act 2015)	ng of Future	
	s for the Team to be notified of.		
Report Histor	Covid-19 incidents and complaints	have been	
	reported to the Quality & Safety Go	Wernance Group	

• No appendices.

Appendices