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Swansea Bay University Health Board

Patient Feedback & Incident Report

Quarter 4, 2022/23

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Report Summary and Overview

COMPLAINTS	Jan	Feb	Mar
Total number of complaints received	170	177	239
Complaints acknowledged within set timescale	100%	100%	100%
Number of re-opened complaints	5	7	11
	Nov	Dec	Jan
Complaints responded to within agreed timescale - formal	69%	73%	78%
OMBUDSMAN	Jan	Feb	Mar
Number of Ombudsman Investigations received	1	0	0
Number of actions outstanding (within timescale)	1	3	10
Number of actions overdue	1	2	2
PATIENT EXPERIENCE	Jan	Feb	Mar
No. of Friends & Family surveys received	5,073	4,425	5,358
Recommendation score	92%	92%	92%
New Bespoke Surveys	3	2	2
NATIONAL REPORTABLE INCIDENTS	Jan	Feb	Mar
Number of National Reportable Incidents reported	10	5	9
Number of Never Events	0	1	0



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Successes	Priorities
<ul style="list-style-type: none"> 100% formal complaints acknowledged within target. Increase in complaints performance achieving 78% in January. Further communication training sessions scheduled with the Ombudsman's Training Officer for 2023 due to positive feedback received from Health Board staff March 2023: This is the third month in a row the Patient feedback satisfaction score has stayed at 92%. 	<ul style="list-style-type: none"> Produce themes and learning reports for Service Units relating to Ombudsman cases
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Concerns Redress Assurance Group (CRAG) meetings with each Service Group are arranged monthly to ensure feedback, learning and improvement by reviewing complaint responses – feedback reports are now provided following each meeting to share the learning wider throughout the Service Group. The Complaints Network with other Health Boards is an opportunity to discuss issues relating to concerns and share learning. A number of Task & Finish Groups have been set up by the overall Once for Wales Team who manage the Datix system. These meetings are an opportunity to discuss and improve the current system with input from each Health Board. Met with the health boards Digital Team who support the PIMS (Patient Information Management System) and PIMS + platform which is used to record patient identifiable information regarding their contact with the NHS. We are aiming to automate SMS text messages to patients from that system to collect feedback. This cohort are mainly primary care and therapies patients. The Primary Care leads are keen to increase their feedback numbers. 	<ul style="list-style-type: none"> Small number of dissatisfied and complex complaints. Delay with launching British Sign Language (BSL) Friends and Family Survey. Functionality issues with the platform is being reviewed with Civica, this is an All Wales issue. No timescale to resolve at present.

1. COMPLAINTS

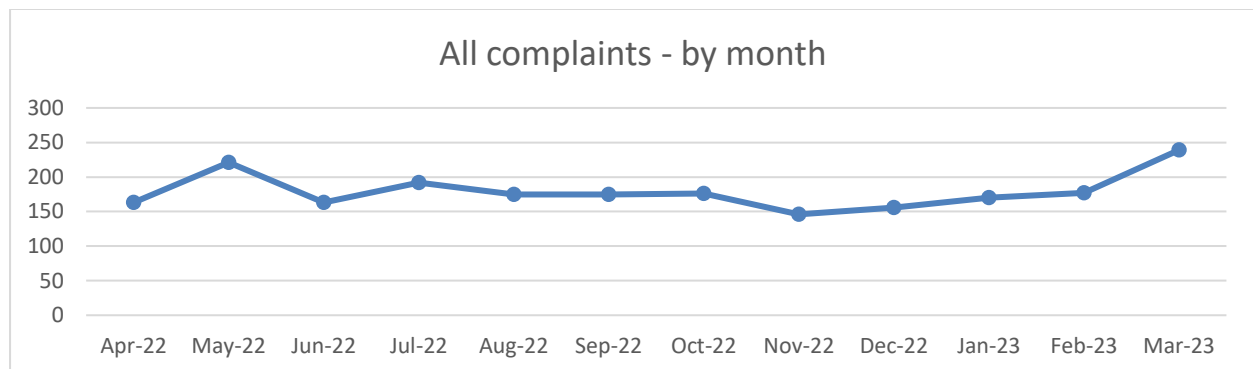
1. Complaints performance –

The Health Board is committed to supporting patients, relatives and carers in resolving their concerns. Our service is visible, accessible and impartial, with every issue taken seriously. Our aim is to provide honest and open responses in a way that can be easily understood by the recipient.

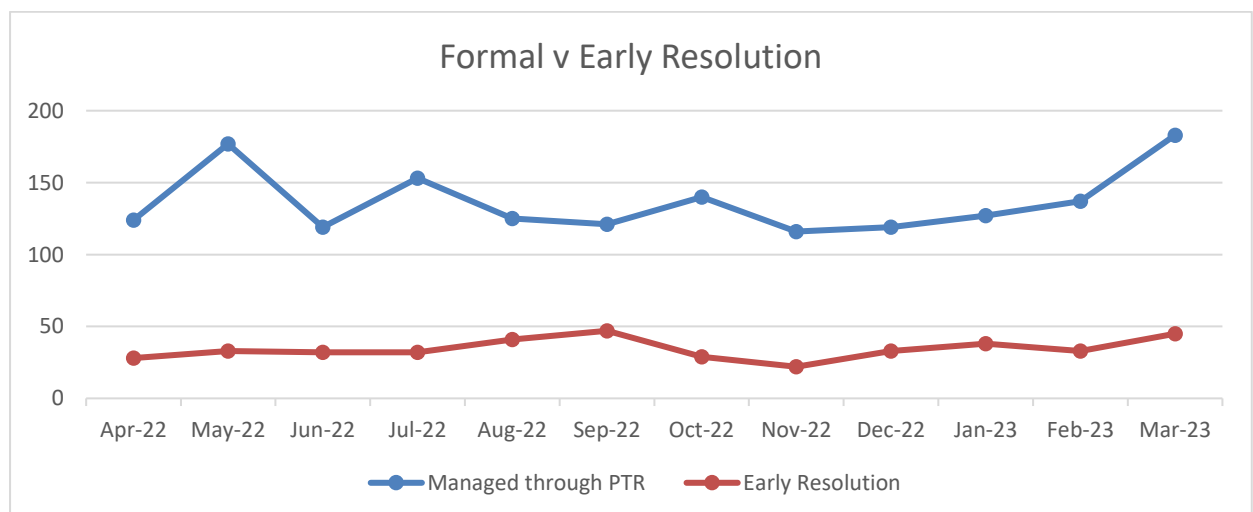
1.1 Total complaints received

The Health Board received 586 complaints in quarter 4 (Q4) of 2022/23 (January, February, March). This compares with 478 complaints in quarter 3 (Q3) of 2022/23 (October, November, December). The totals include complaints received and managed via either formal, early resolution and any re-opened complaints. Graph 1 provides a long-term view of complaints received per month.

Graph 1: Total number of complaints per month



Graph 2: Formal v Early resolution complaints per month



Graph 2 (above) shows complaints dealt with via the Formal Putting Things Right (PTR) investigation process compared with those dealt with via the early resolution investigation process, over the same period. We continue to deal with a higher proportion of complaints via the formal process, this is due to the tight timescale of two working days for early resolution complaints. Any early resolution that is not resolved within two working days, converts to a formal following guidance issued by Welsh Government.

1.2 Complaint responses within agreed timescale

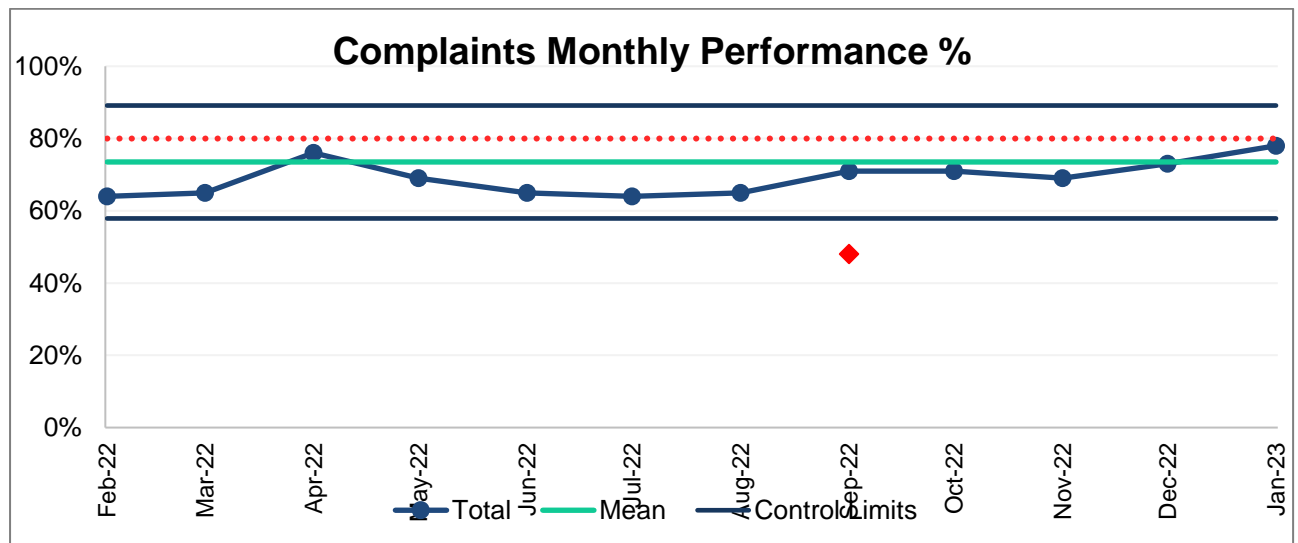
Whenever a complaint is managed through the formal PTR process, the Health Board is required to investigate the complaint and write to the complainant with our findings, within 30 working days. If this target is not achievable, it is essential that the complainant is kept up to date throughout and any delays are explained.

1.2.1 Formal Investigations

The Health Board's target is to respond to at least 80% of formal complaints within the agreed timescale. Welsh Government also issue a target for all Health Board's to achieve at least 75% each month.

Graph 3 shows the Health Board's performance in responding to complaints since January 2022. The Health Board saw an increase in performance last month with 78%. The Corporate team are working closely with the Service Groups to monitor and increase performance.

Graph 3: Percentage of formal complaints responded to within agreed timescale

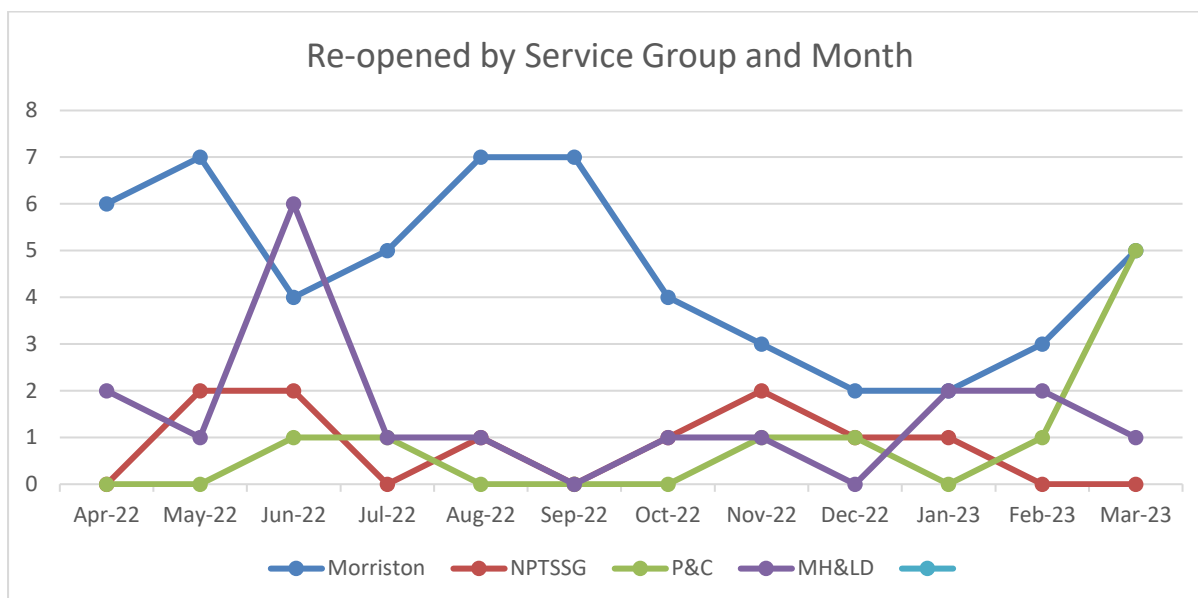


1.2 Re-opened complaints

The Health Board aims to resolve all complaints within the first response however, there are times when the complainant remains dissatisfied or needs further clarification. If the complainant writes back to the Health Board expressing their dissatisfaction, the correspondence will be reviewed by the Corporate Complaints Team and a decision made as to whether the complaint should be re-opened. This may be when the complainant feels not all issues raised in the initial complaint have been addressed or if a meeting is required.

Graph 4 shows the number of re-opened complaints per month since April 2022.

Graph 4: Number of re-opened complaints by Service Group per month



2. Complaints Themes

2.1 – Themes - Health Board overview

Every complaint received by the Health Board is coded in the Datix Once for Wales system against the relevant subject codes. This allows the Health Board to identify any themes in the complaints received.

Table 1 provides a breakdown of complaints received by primary subject in Q4 2022/23 compared with Q3 for 2022/23.

Table 1: Complaints by primary subject

Subject/Theme	Q3 2022/23	Q4 2022/23
Communication Issues	89	95
Appointments	76	79
Clinical treatment/Assessment	86	120
Admissions	50	60
Attitude and Behaviour	39	57
Medication	30	54
Test and Investigation Results	18	24
Referral	12	21
Discharge Issues	18	26



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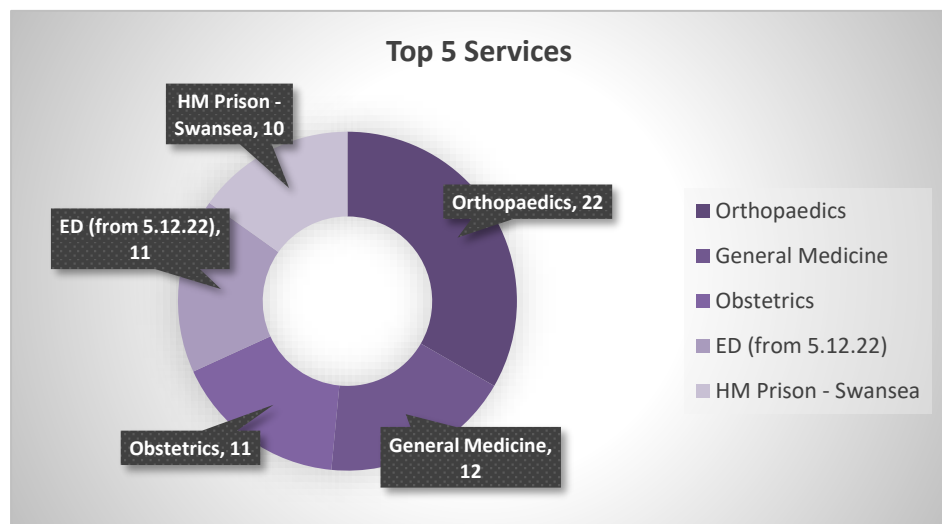
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Environment/Facilities	11	7
Monitoring/Observation Issues	6	5
Equipment	6	2
Personal Property/Finance	5	3
Assault	1	0
Confidentiality	3	4
Consent	0	2
Record Keeping	3	6
Access (to Services)	6	6
Accident/Falls	1	1
Catering	0	0
Cleanliness	2	1
Infection Control	1	1
Nutrition/Hydration Issues	6	5
Other	2	2
Patient Care	3	3
Resources	2	1
Skin Damage	0	1
Privacy and Dignity	2	0

Top theme; Clinical Treatment;

During Q4, 164 complaints were received relating to clinical treatment. A breakdown of the clinical treatment sub-subjects are below – please note, some complaints include more than one of these issues.

Clinical Treatment	
Delay in receiving treatment	76
Delay/Lack of treatment or Assessment	63
Reaction to procedure/ treatment	18
Delay/Lack of diagnosis	17
Incorrect diagnosis	14
Incorrect/insufficient treatment or Assessment	7
Unintended retention of a foreign object after surgery/procedure	2

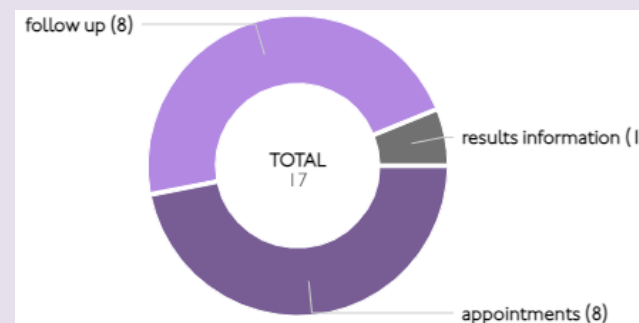


What we are doing about this?

- Virtual clinics to continue to help reduce clinic waiting times
- Outsourcing of patients to other Healthcare providers to help reduce waiting times;
- Project plans in place for changes in theatre developments
- Discharge Lounge at Morriston to support patient movement across site.
- Rapid Diagnostic Centre expansion.
- Patients waiting/delays comments for Orthopaedics (Fracture Clinic, Clydach Ward, Ward A (Trauma & Orthopaedics), Ward B (Trauma & Orthopaedics)).



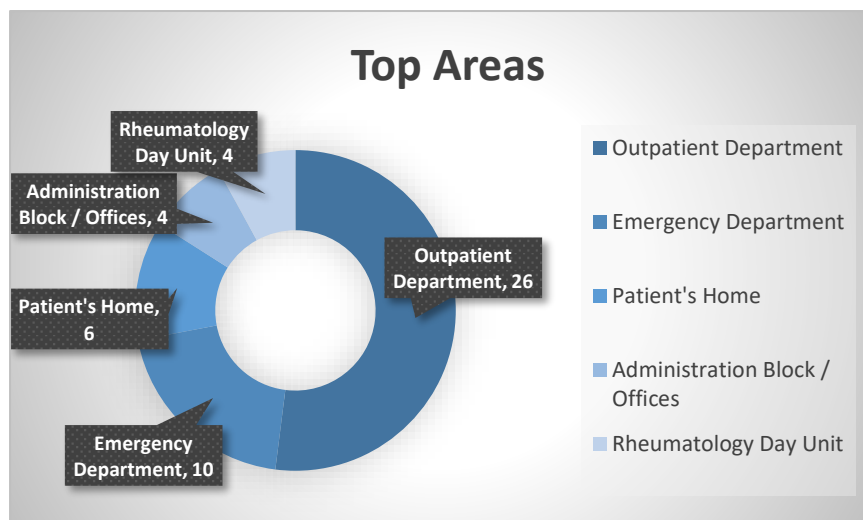
'On time';



Theme 2: Communication;

During Q4, 152 complaints were received regarding communication. A breakdown of the sub-subjects are below – please note, some complaints include more than one of these issues.

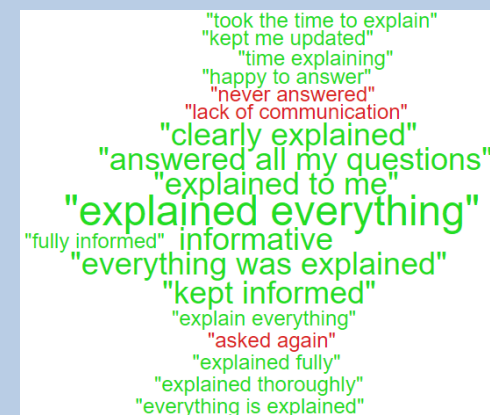
Communication Issues	
Insufficient/Incorrect information	73
Unable to contact	30
Incorrect information	27
Family involvement in care decisions	21
Availability of brail, sign, texting service, language line	2
Patient involvement in care decisions	2
Concerns relating to DNR decision	1
Delivery of bad news	1



What we are doing about this?

- Communication training sessions with the Ombudsman have been well attended further dates running up until May 2023.
- The Training Officer within the Patient Feedback Team has provided Communication/Customer Care Training to Health Board staff throughout October – December 2022.
- Rolling training programme for complaints to be progressed throughout 2023

Main Outpatients Department, Morriston. Patient Experience feedback for Quarter 4. The overall score was very good at 94%. As you can see from the words below, there were mainly positive comments. Please see below:



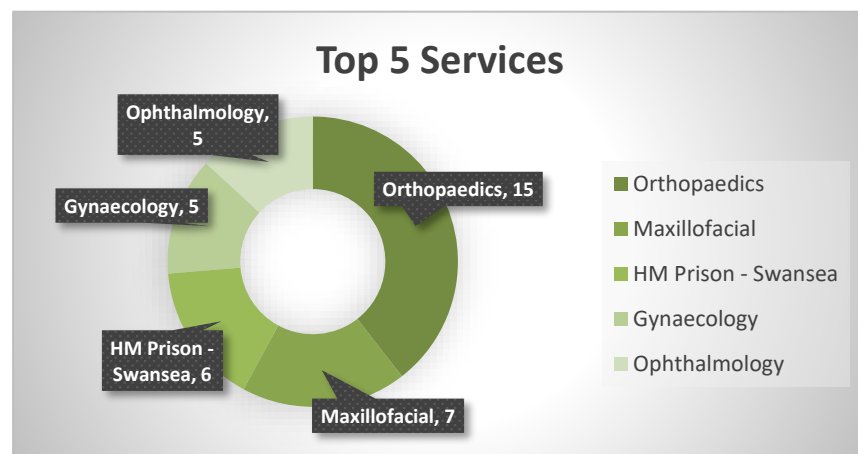
Comments breakdown for Main Outpatients Department, Morriston only.

- Communicating to Patients 79 positive, 3 negative

Theme 3: Appointments;

During Q4, 91 complaints were received regarding appointment issues. Many of these complaints will have more than one sub-subject, see breakdown below;

Appointments	
Delay in receiving outpatient appointment	52
Appointment cancelled	16
Delay in appointment/waiting time/transport	7
Validation Issues	5
Cancelled appointment/transport	3
Continuity of staff	3
Patient lost to follow-up	3
Capacity of clinics	1
Location of appointment unsuitable	1
Patient booked into wrong outpatient clinic	1



What we are doing about this?

- Virtual clinics to continue to help reduce clinic waiting times
- Outsourcing of patients to other Healthcare providers to help reduce waiting times;
- Attendance at Service Unit Group meetings to provide feedback on concerns received for specific areas in relation to clinical treatment themes
- Rapid Diagnostic Centre expansion.

All Wales questions do not have 'appointments' as a question set. Therefore we searched the words delay/delays/appointment for the areas mentioned.

Here are some comments we found relating to 'appointments' for these areas:

- *Appointment on time and very friendly staff.*
- *I had an appointment on ward 16 in Singleton Hospital. The consultant and nurse were amazing. Very informative and a pleasant.*
- *Was seen minutes after appointment time. Very prompt and very efficient. Doctor and staff very friendly. Could not have gone any better. Felt very much at ease during and after consultation.*

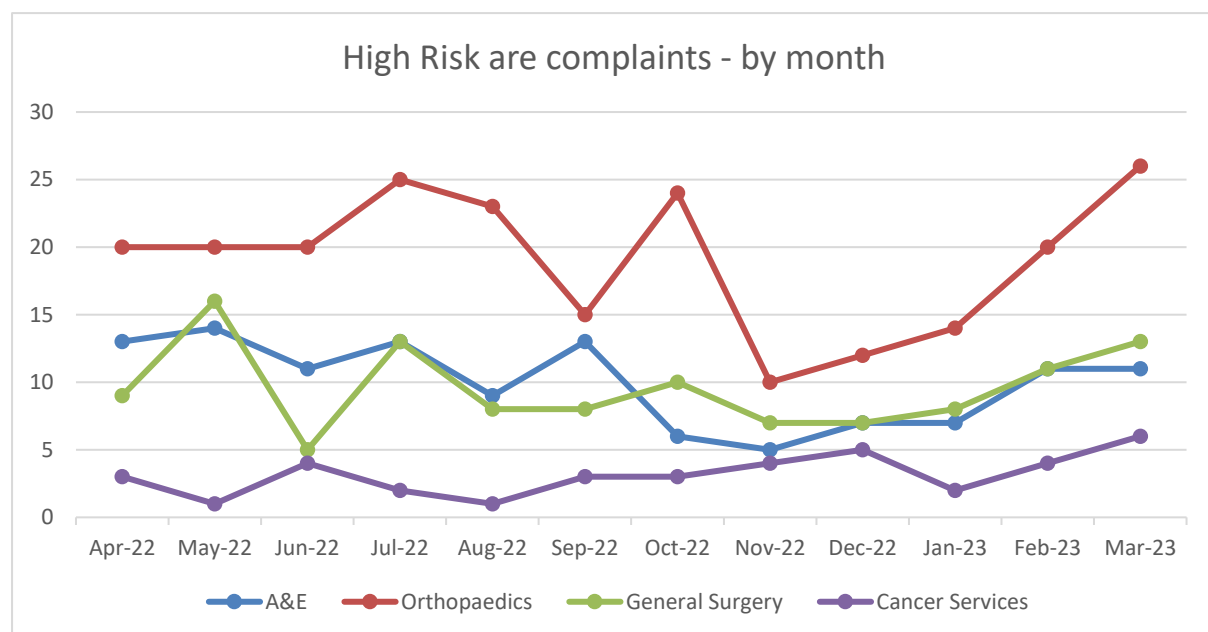
3. HIGH RISK AREAS

As part of the Health Board's focus on Urgent Care, Planned Care and Cancer Services the following section highlights complaints received in:

- A & E
- Orthopaedics
- General Surgery
- Cancer Services

Graph 1 below shows the number of complaints each of the Health Board 'High Risk' areas has received per month since April 2022.

Graph 1: High risk area complaints per month



As Orthopaedics has the highest amount of complaints, a breakdown of the issues raised can be found below compared with Q3. As you can see from the graph above, there appears to have been an increase in March with 26 complaints received.

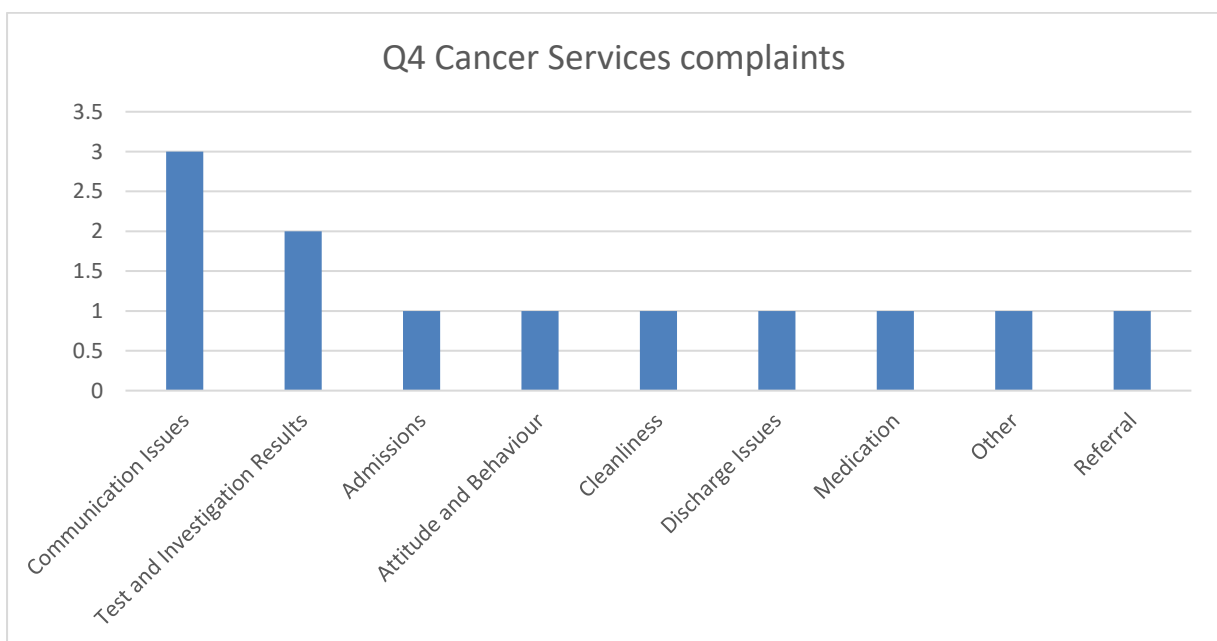
3.1 – Orthopaedic Complaint themes

Orthopaedics Themes	Q3 2022/23	Q4 2022/23
Admissions	17	19

Communication Issues	9	5
Clinical treatment/Assessment	7	18
Appointments	7	12
Attitude and Behaviour	1	0
Referral	0	2
Accident/Falls	0	0
Medication	0	1
Nutrition/Hydration Issues	1	1
Discharge	2	1
Infection Control	0	0
Patient Care	1	1
Post Death Issues	0	0
Test and Investigation Results	0	0
Personal Property/Finance	1	0

3.2 – Cancer Services Complaints

As cancer waiting times are currently a concern for the health board, a breakdown of the 12 complaints received in Q4 is below;



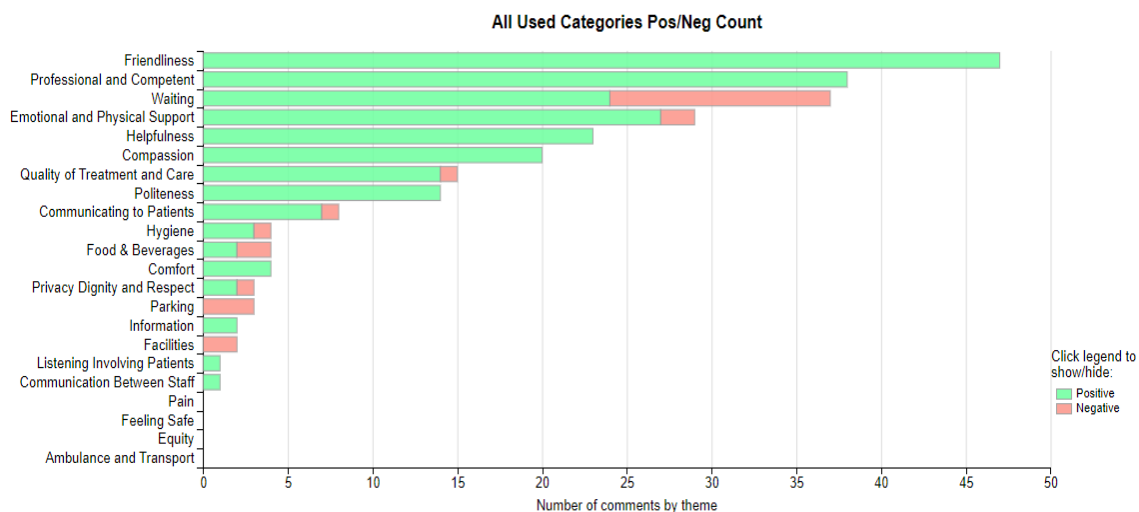
Patient Experience Feedback: Cancer Services

As Cancer is classed as a 'High Risk Area', the Patient Experience Team have looked into the feedback for Cancer Services. In total, Cancer Services received 319 responses to the Friends and Family Survey during Quarter 4.

Results by Ward/Clinic

Ward/Clinic	% Good	% Poor	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	96.9%	1.9%	319	273	36	3	2	4	1
Chemotherapy Day Unit	94.8%	3.4%	58	48	7	0	0	2	1
Haematology Day Unit	96.8%	2.1%	94	78	13	1	1	1	0
Haemophilia Centre	100.0%	0.0%	4	3	1	0	0	0	0
Older Peoples Cancer Service	100.0%	0.0%	1	1	0	0	0	0	0
Ward 12 (Oncology)	96.4%	1.8%	112	94	14	2	1	1	0
Y Rhosyn - Day Care	100.0%	0.0%	50	49	1	0	0	0	0

Below are the top themes for Cancer services:



We have looked into 'Waiting' as this has a lot of negative responses. As you can see below, there are a mixture of positive and negative responses.

"within ten minutes"
"sat for half an hour"
eventually
waits promptly
speedy "on time" promptly
"for ten hours" wait waited
waiting delay
"didn't have to wait"
"within 5 days"
"seen very quickly"

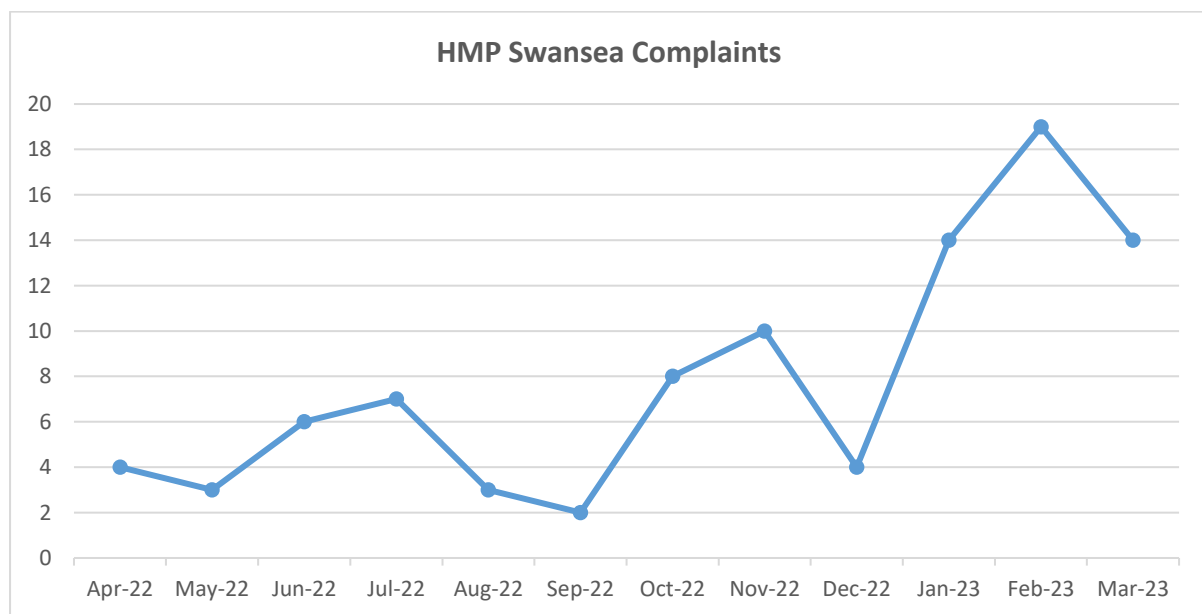
4. HMP SWANSEA

During Q4 of 2022/23 (January, February, March) the Health Board has received 47 complaints from HMP Swansea. Regular meetings have been held with the Prison to discuss and agree the best way forward in regards to recording feedback and complaints received directly by the Prison.

Most of the complaints received are dealt with in the Prison prior to sending to the Health Board for recording. It was agreed that in order to identify themes and trends, these should be sent to the complaints team for recording.

Graph 1 below shows the number of complaints received per month from the Prison since April 2022.

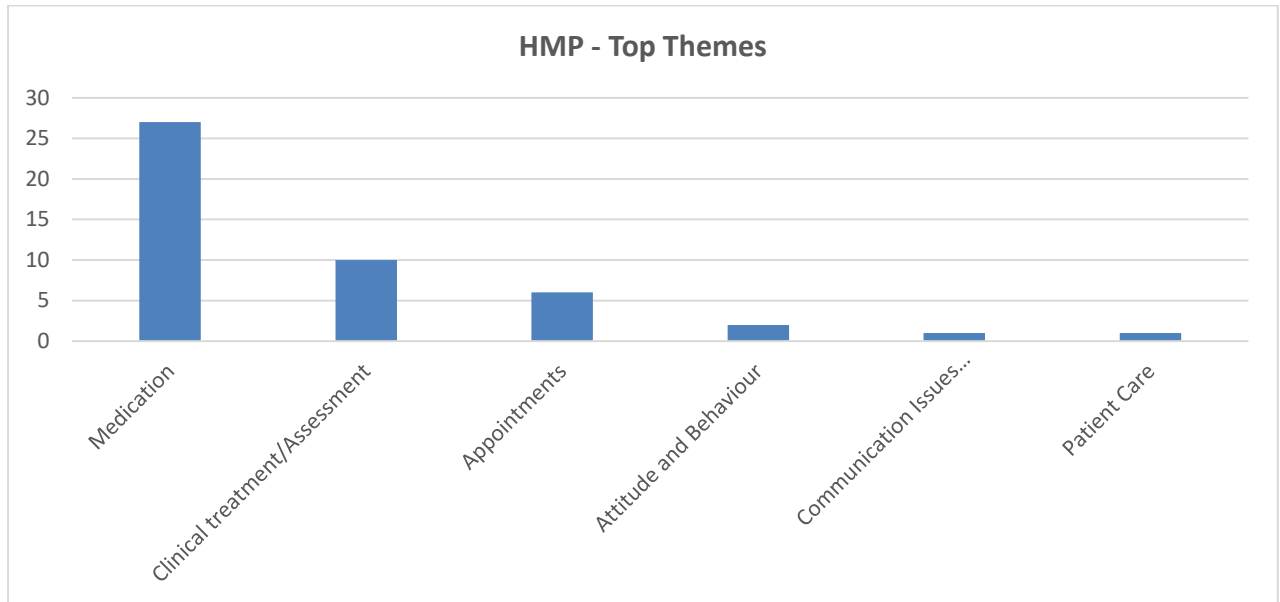
Graph 1: HMP Swansea Complaints



As shown in the graph, there appears to have been an increase in complaints received since January 2023. This was following the meetings held with the prison where it was agreed that every complaint received needed to be forwarded to the Health Board to ensure accurate reporting.

Graph 2 shows the top themes from the complaints received during Q4 of 2022/23 (January, February, March)

Graph 2: Top Themes from HMP Swansea complaints



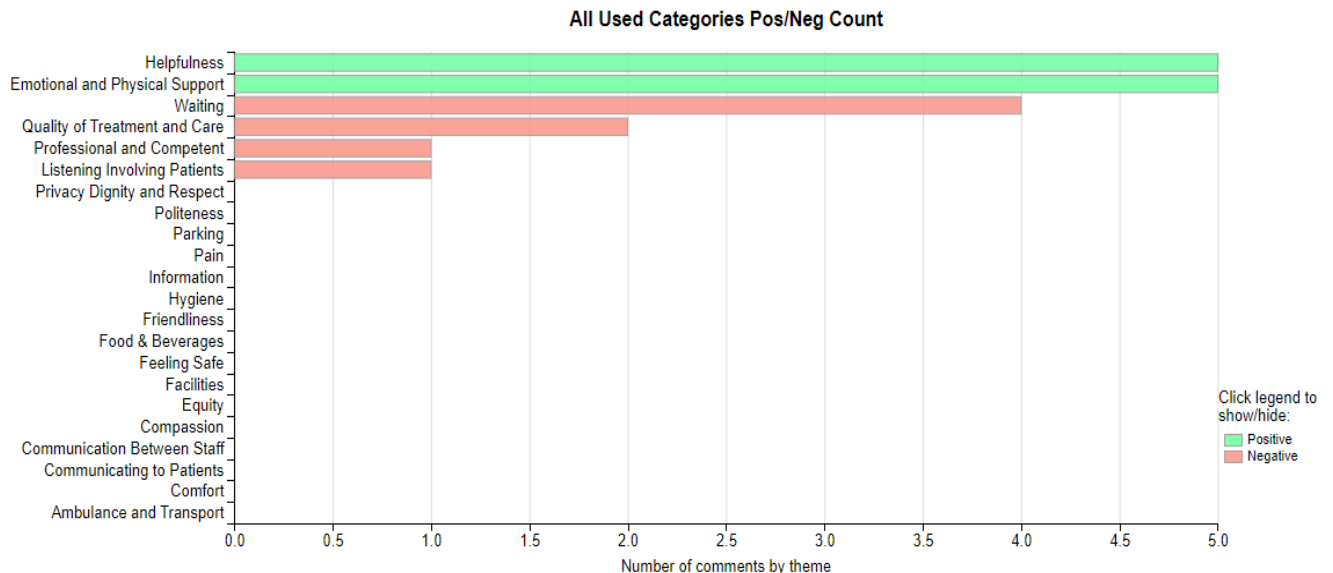
As shown in the graph, 27 complaints related to medication issues. A further breakdown of these medication issues is below;

Medication Issues;	
Medication not prescribed	7
Incorrect dosage given	6
Delay/Frequency in providing medication	4
Incorrect medication given	3
Availability of medication	2
Failure to provide medication	2
Poor pain control	2
Frequency of providing medication	1

Patient Experience Prison Survey Feedback

The Prison service are now providing feedback, which sits within Primary Care. For Quarter four, there were 31 responses. These responses were from January. We did not receive any feedback for February and March.

We have looked into the themes for the HMP Prison survey.



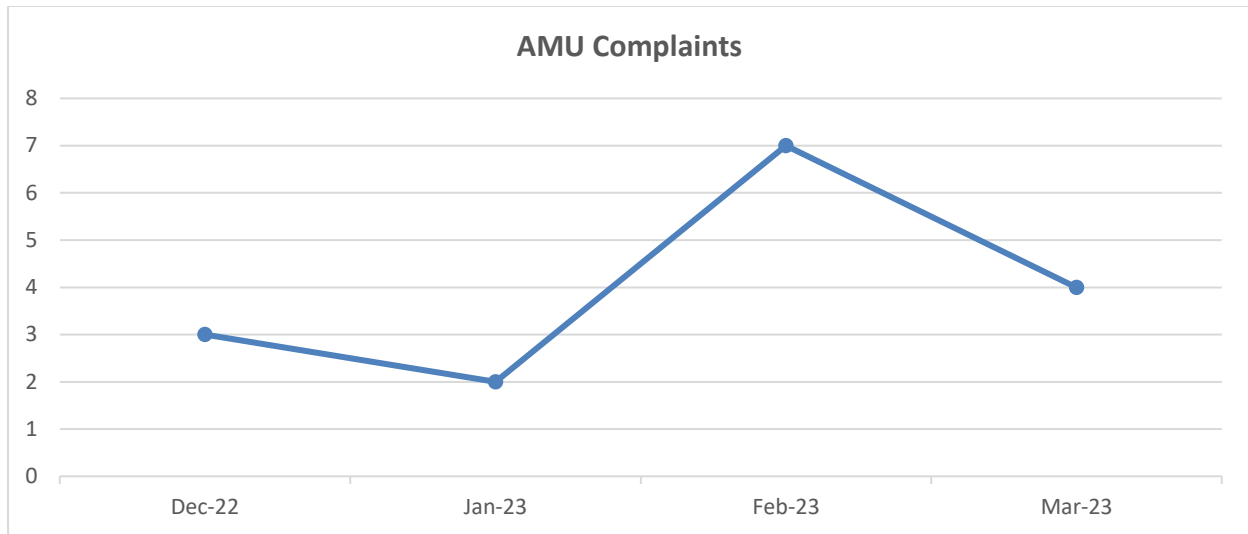
Waiting:

"takes too long"
waiting
wait
"take too long"
delay

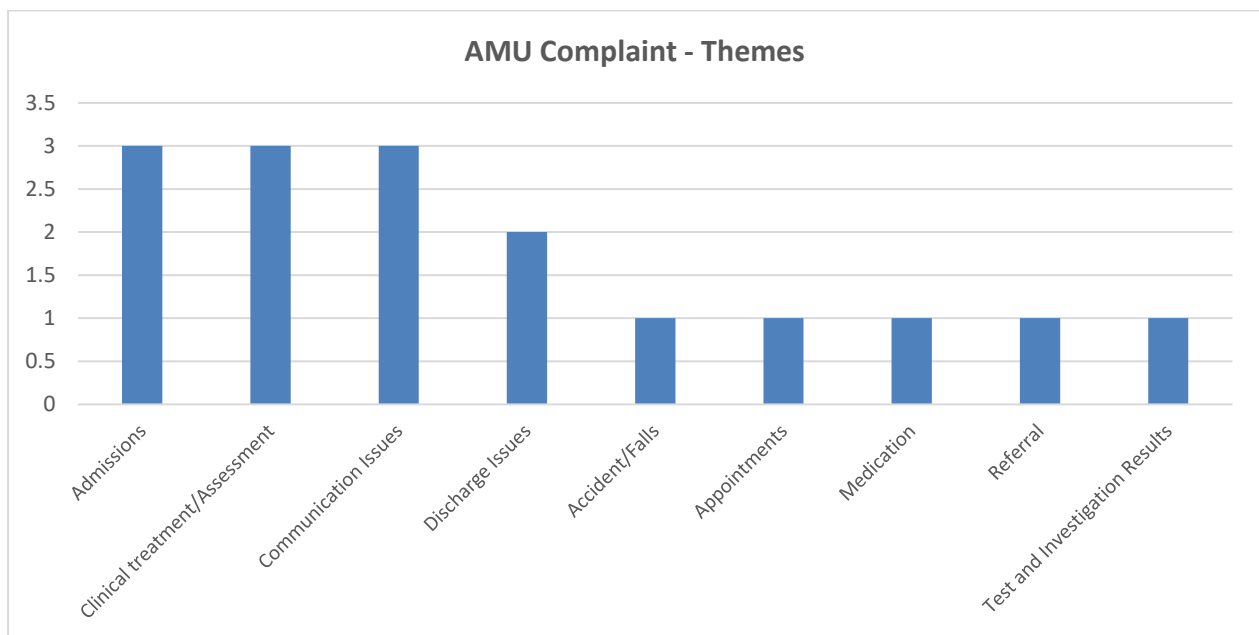
5. AMSR – ACUTE MEDICAL UNIT (AMU)

Since the 5th December 2022, following the Health Board's Acute Medical Services Redesign (AMSR), the new Acute Medical Unit (AMU) has received 16 complaints. 7 of which were received during February. Graph 1 below shows the number received per month since the redesign.

Graph 1: AMU complaints per month

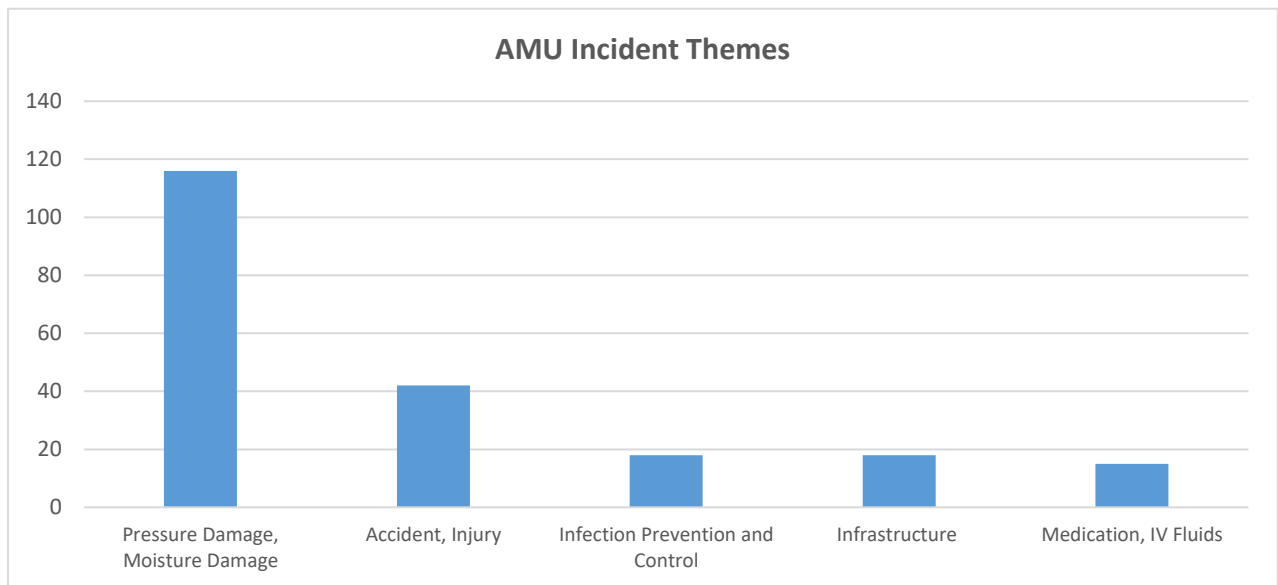


Graph 2 below shows the themes identified from the 16 complaints.



Since 5th December 2022 to 31st March 2023, the Acute Medical Unit has reported 255 incidents. Graph 3 below shows the themes from these incidents.

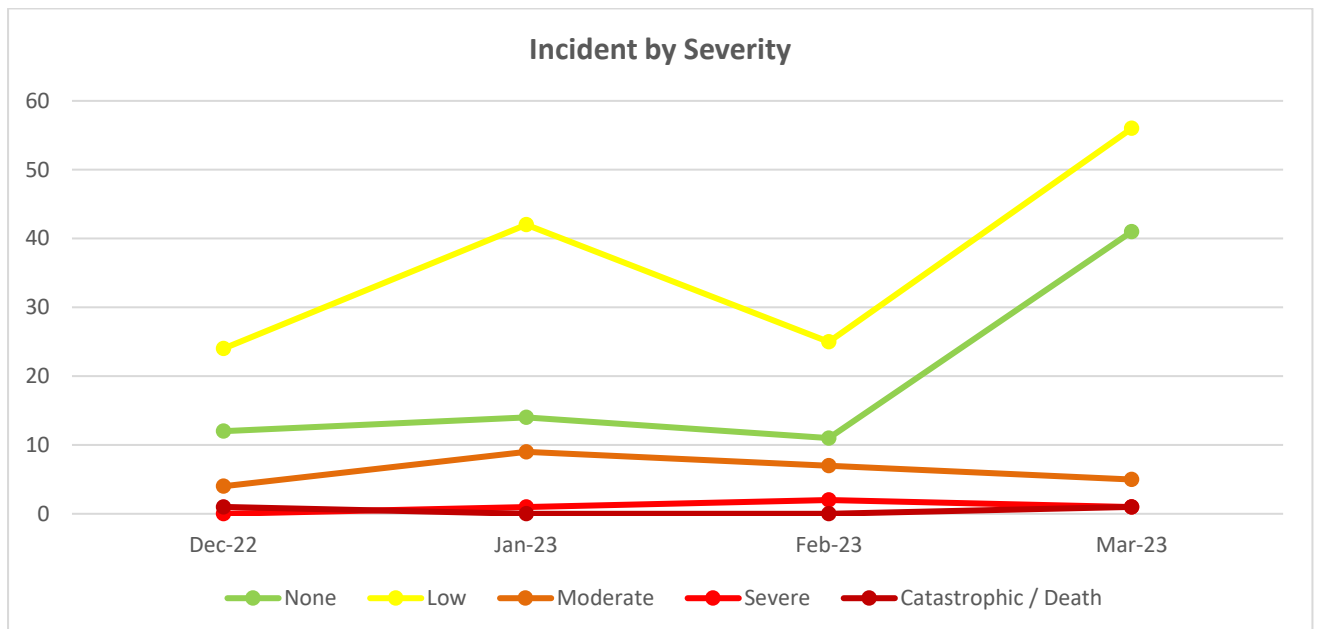
Graph 3: AMU Incident Themes



As seen in the graph, the majority of these incidents relate to Pressure Ulcers.

Graph 4 breaks these incidents down by severity. As shown in the graph, there has been 6 severe or death incidents on AMU since 5th December 2022.

Graph 4: AMU Incidents by severity



The 6 severe or death incidents were;

- 1 x Patient Fall
- 1 x Resuscitation Event
- 1 x Needle accident



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1 x Communication error

1 x Staffing issue

1 x Unexpected death

There was no Patient Feedback collected for this area during Quarter four. There are ongoing discussions on how to improve the collection of feedback from AMU. This will be added in the next quarters report.

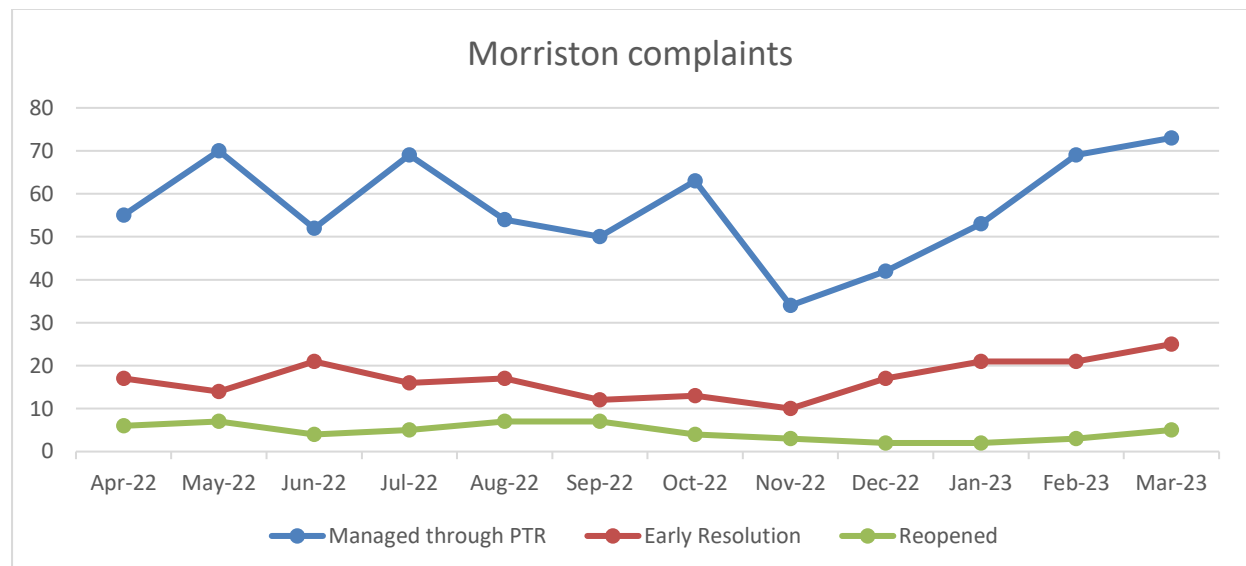
6. SERVICE GROUP COMPLAINTS, INCIDENTS, COMPLIMENTS AND PATIENT FEEDBACK HIGHLIGHTS

MORRISTON SERVICE GROUP

6.1 – Morriston Service Group complaints

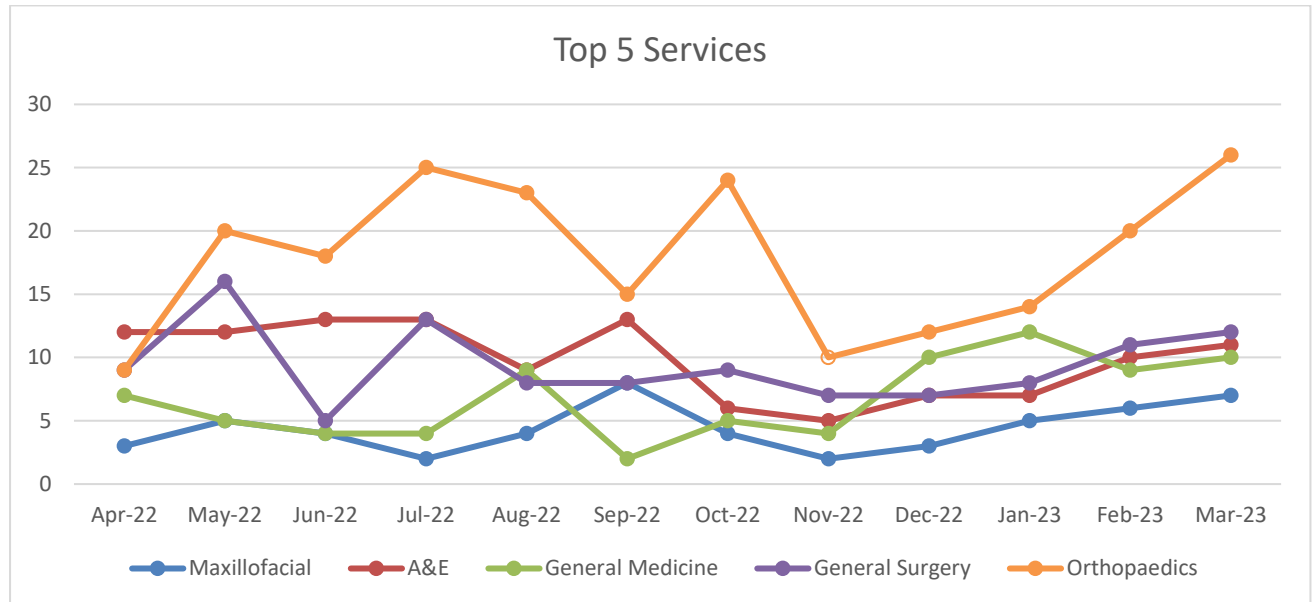
Morrison Service Group received a total of 272 complaints during Q4 2022/23. Graph 1 below shows the total number of complaints received relating to Morrison Service Group since April 2022. The graph breaks the total number received down by Formal PTR, Early Resolution and Re-opened complaints.

Graph 1: Morrison Service Group complaints by month and type



Graph 2 shows the top five services that had the most complaints since April 2022. As seen in the graph, Orthopaedics received the highest number of complaints which appears to have decreased since November 2022 but has increased significantly again in February and March 2023.

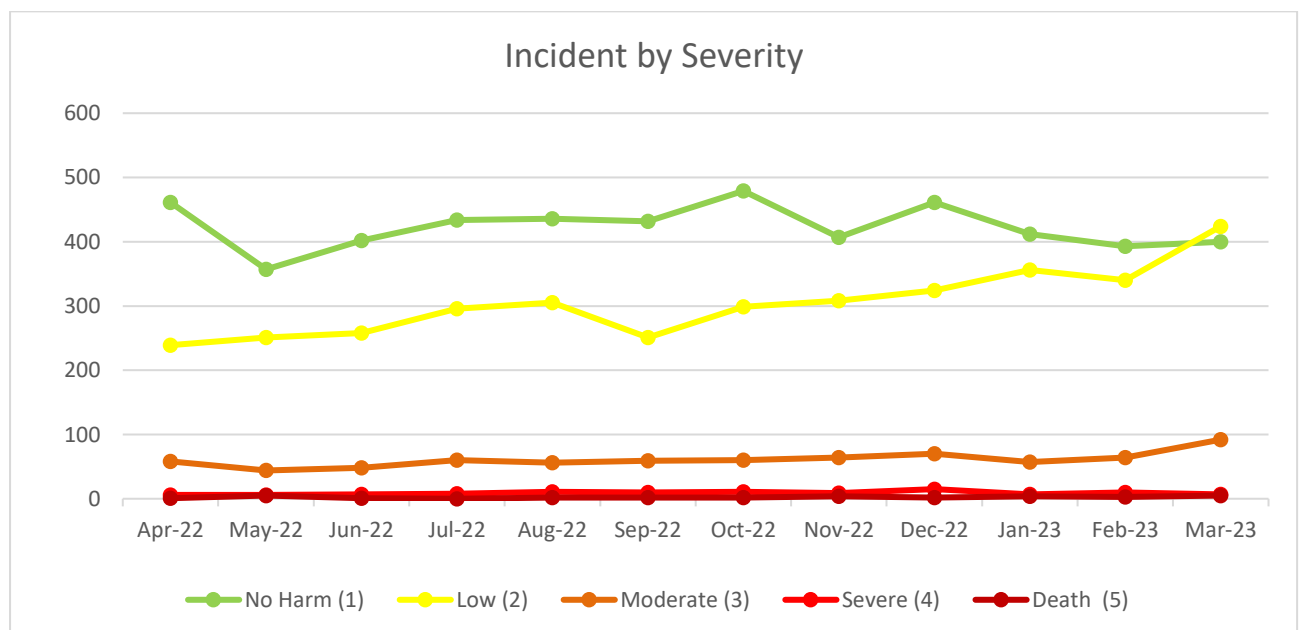
Graph 2: Top 5 Services by month



6.2 – Morriston Service Group Incidents

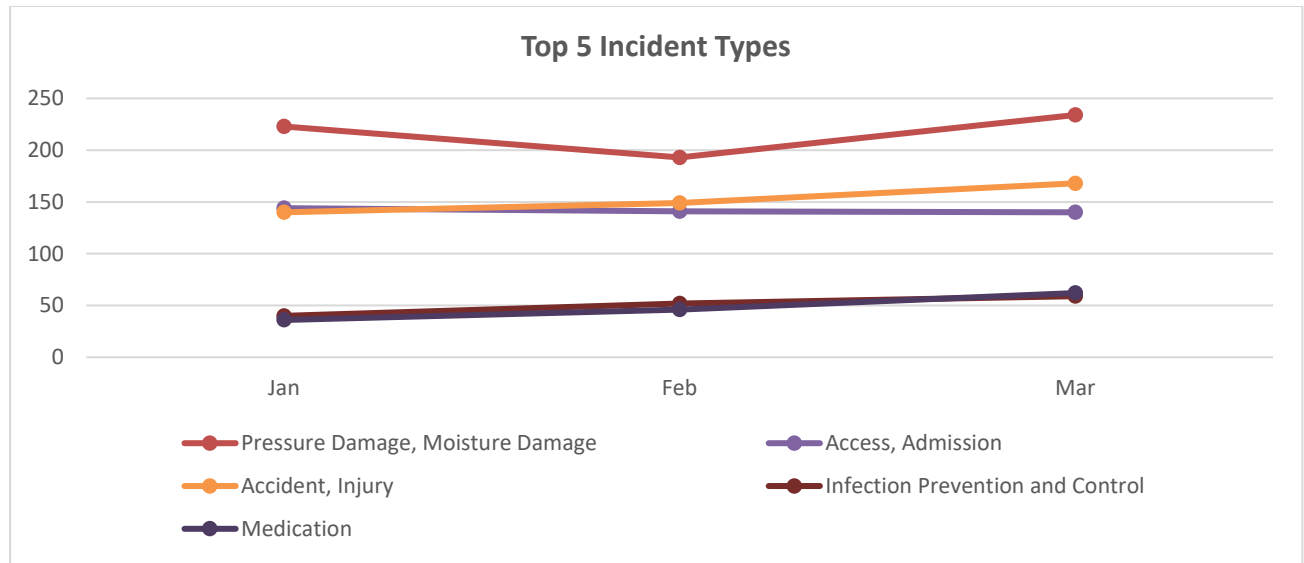
Morriston Service Group reported 2576 incidents in quarter 4 (Q4) of 2022/23 (January, February, March). This compares with 2516 incidents in quarter 3 (Q3) of 2022/23 (October, November, December). Graph 1 shows the number of incidents per month broken down by severity.

Graph 1: Morriston Incidents by Severity and month



Graph 2 shows the top 5 incident types, of all incidents reported by Morriston Service Group since October - December 2022. As you can see from the graph, the amount of Access & Admission incidents has increased during September 2022.

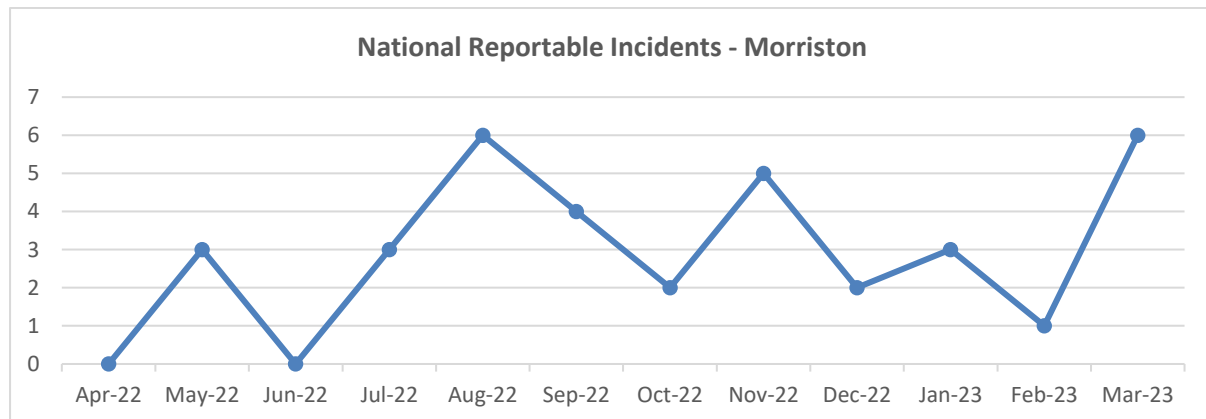
Graph 2: Top 5 incidents per month



4.3 – Morriston Service Group National Reportable Incidents

Morriston Service Group reported 10 Nationally Reportable Incidents (NRI's) during Q4 2022/23, this compared to 9 reported during Q3 of 2022/23. Of the NRI's reported, 5 related to patient falls, 2 clinical treatment/diagnostic, 1 monitoring/observation, 2 unexpected deaths. Graph 1 shows the number of NRI's reported per month.

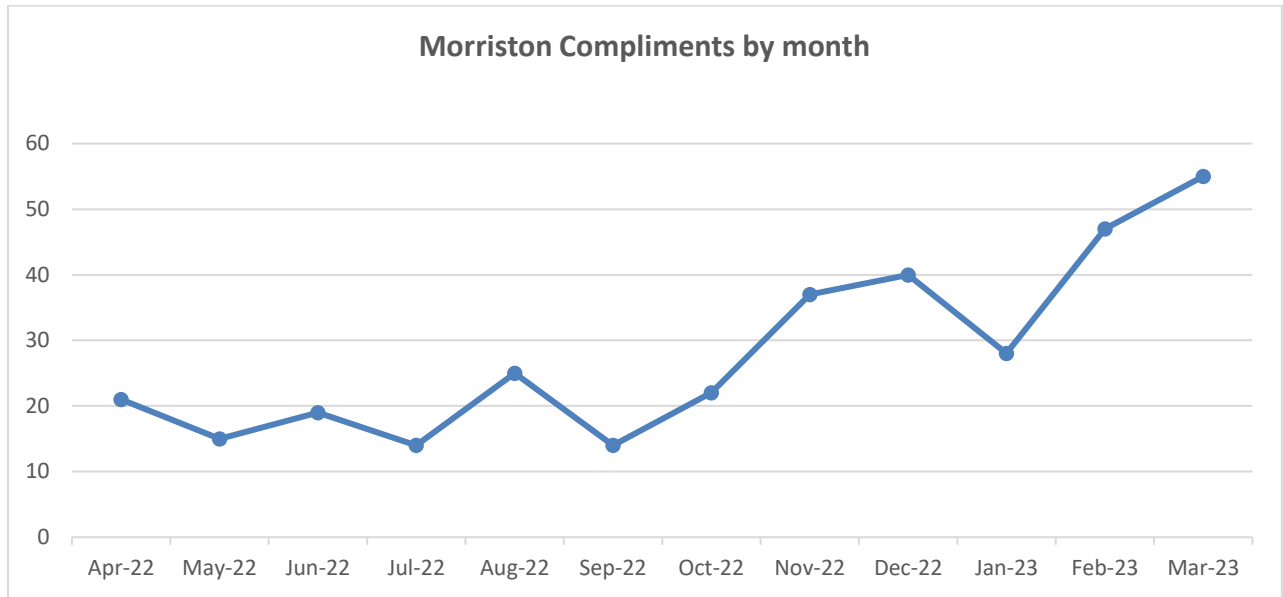
Graph 1: Nationally Reportable Incidents reported per month by Morriston Service Group



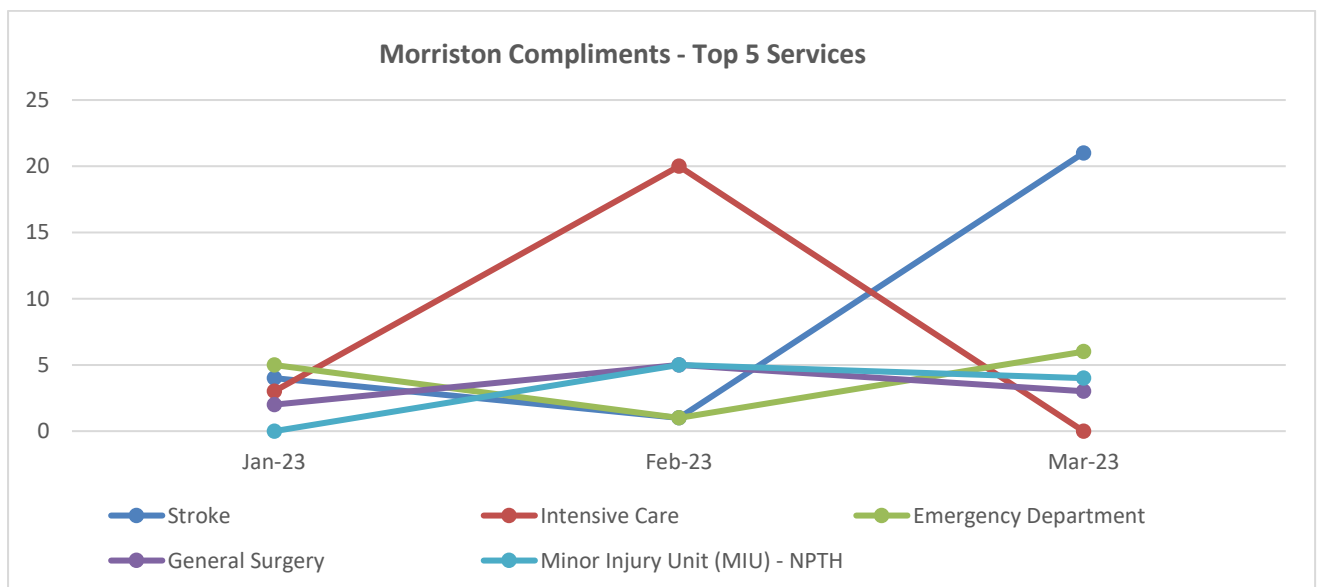
4.4 – Morriston Service Group Compliments

Morriston received 130 compliments during Q4 of 2022/23. Graph 1 shows the number received per month since April 2022.

Graph 1: Morriston compliments per month



Graph 2: Morrison compliments – Top 5 Services



Since the Acute Medical Services Redesign, Morrison Service Group now manage Minor Injuries Unit.

4.5 Morrison Service Group Patient Experience Feedback

Overall, during quarter four there were 98,694 number of patients seen under Morrison Service Group (This includes ED).

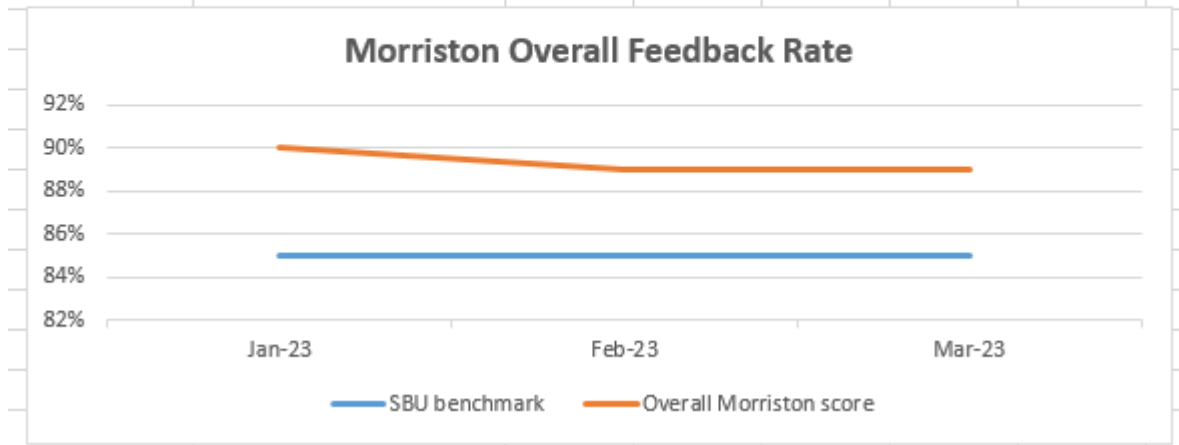
There were 6,568 Friends and Family survey returns which equates to 7% responding to the survey. Out of the 7% who responded, 90% of people stated they would highly recommend the Health Board to Friends and Family.



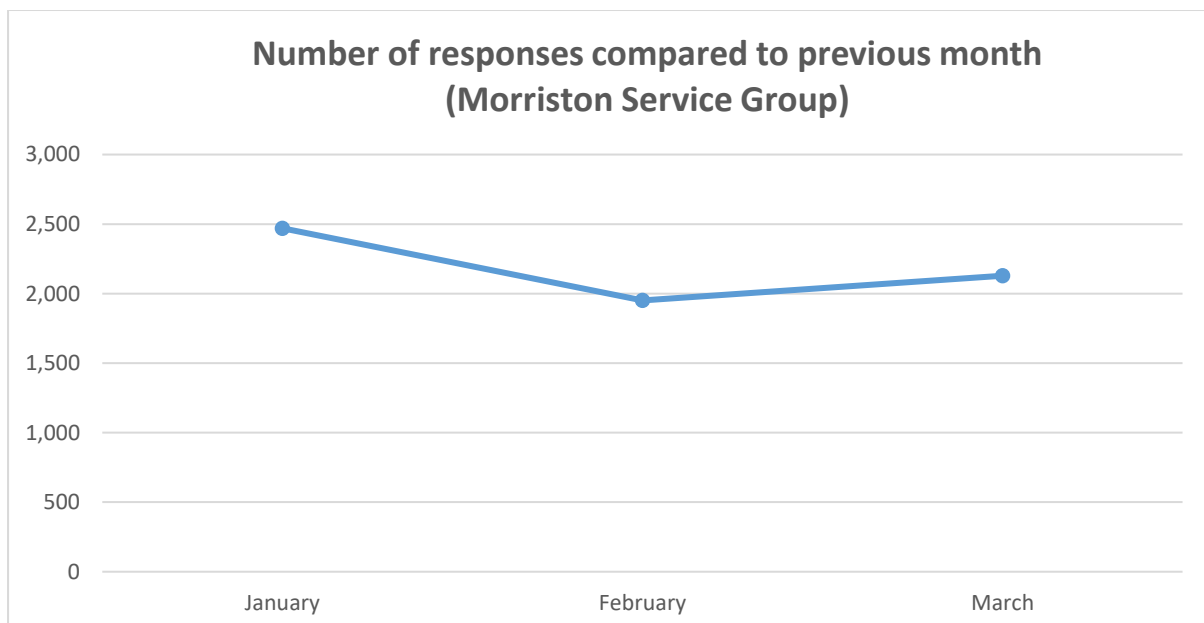
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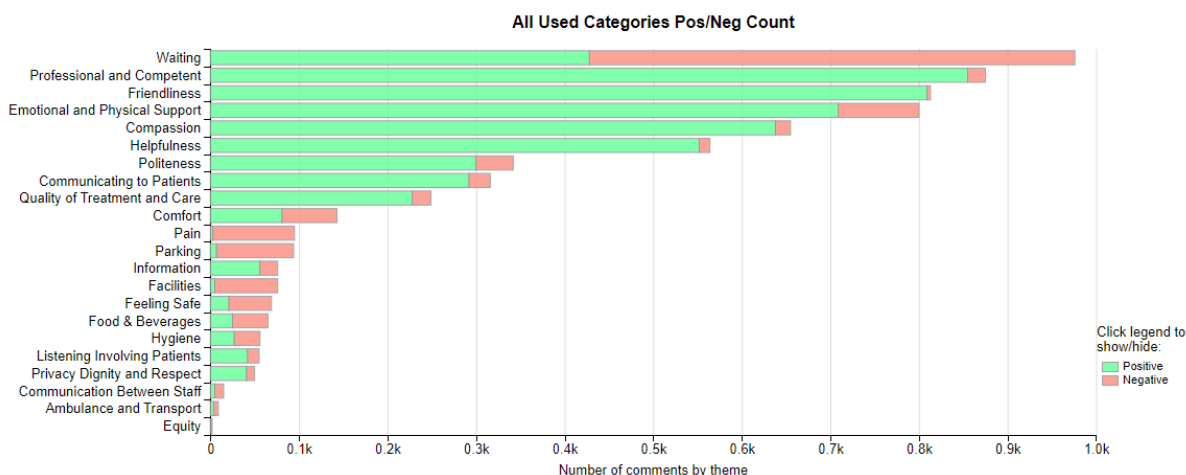
	Jan-23	Feb-23	Mar-23
SBU benchmark	85%	85%	85%
Overall Morrision score	90%	89%	89%



Below are the number of responses in a line graph:



Below are the main themes mentioned for Morriston:

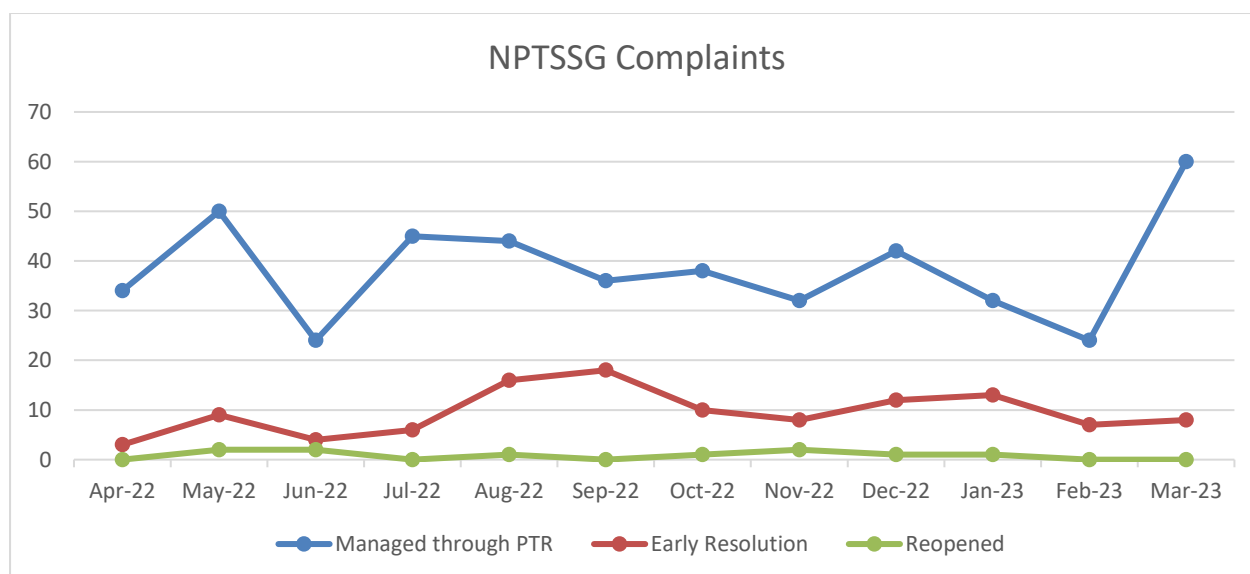


NEATH PORT TALBOT SINGLETON SERVICE GROUP

6.6 – NPTSSG Complaints

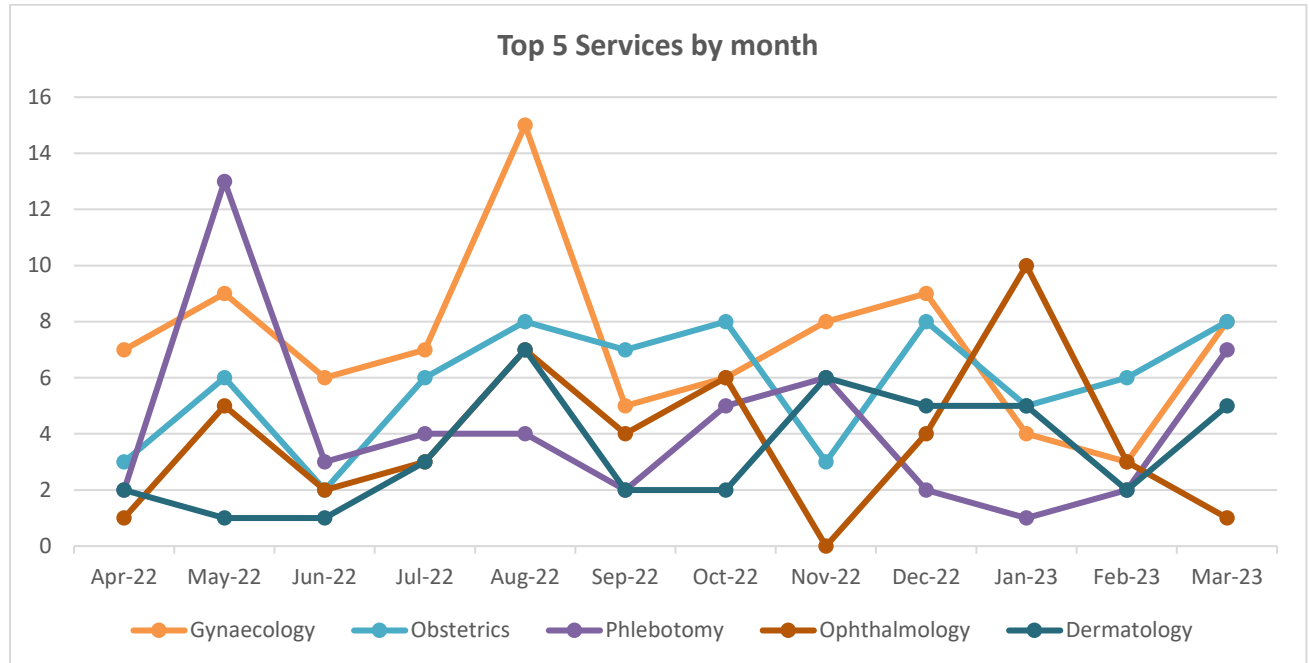
NPTSSG received a total of 145 complaints during Q4 2022/23. Graph 1 below shows the total number of complaints received relating to NPTSSG since April 2022. The graph breaks the total number received down by Formal PTR, Early Resolution and Re-opened complaints.

Graph 1: NPTSSG complaints by month and type



Graph 2 shows the top five services that had the most complaints since April 2022. As seen in the graph, Gynaecology appear to have had an increase in August but have decreased since. Ophthalmology also had an increase during January with 10 complaints received, these appear to have decreased again with only 1 being received during March.

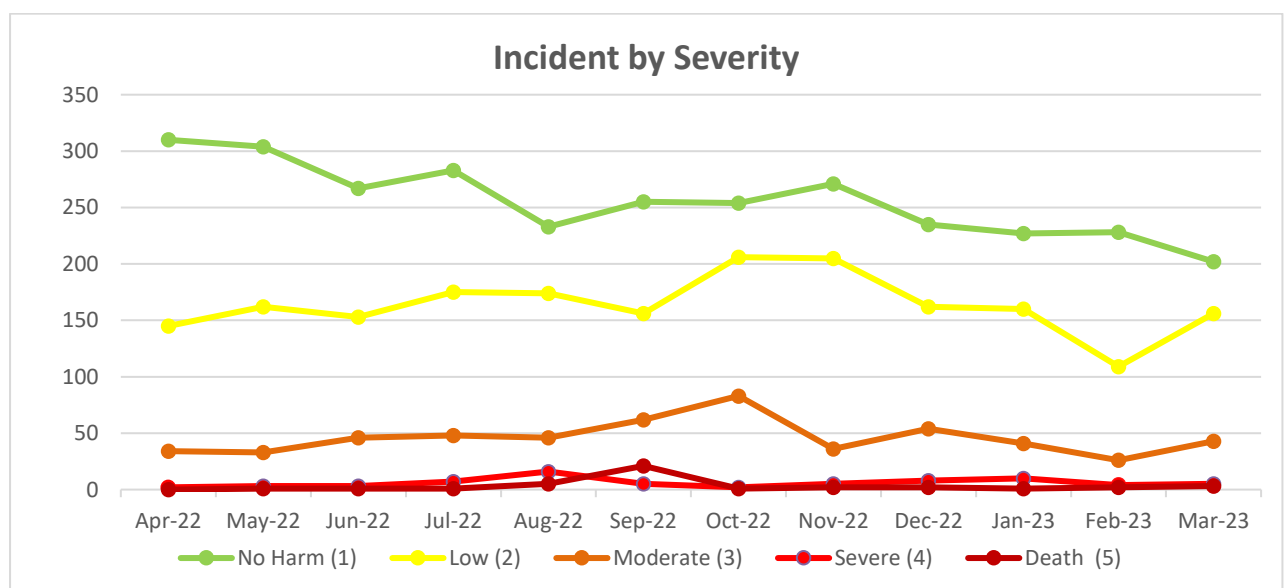
Graph 2: Top 5 Services by month



6.7 – NPTSSG Incidents

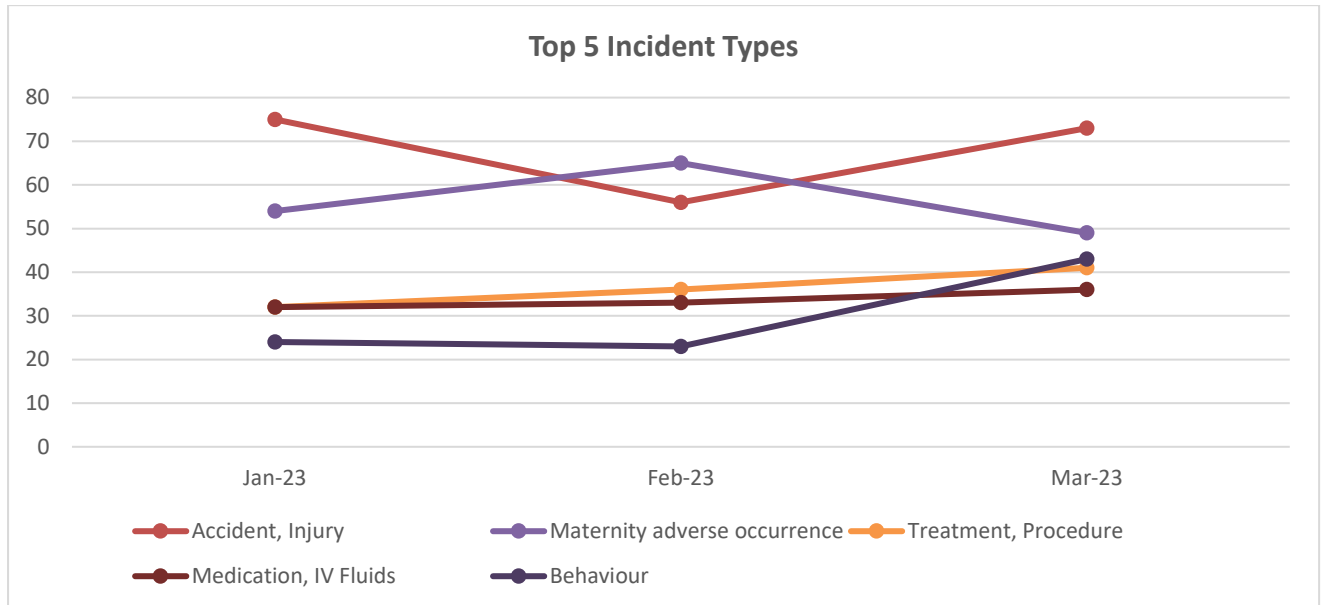
NPTSSG reported 1217 incidents in quarter 4 (Q4) of 2022/23 (January, February, March). This compares with 1526 incidents in quarter 3 (Q3) of 2022/23 (October, November, December). Graph 1 shows the number of incidents per month broken down by severity.

Graph 1: NPTSSG Incidents by Severity and month



Graph 2 shows the top 5 incident types, of all incidents reported by NPTSSG since January to March 2023.

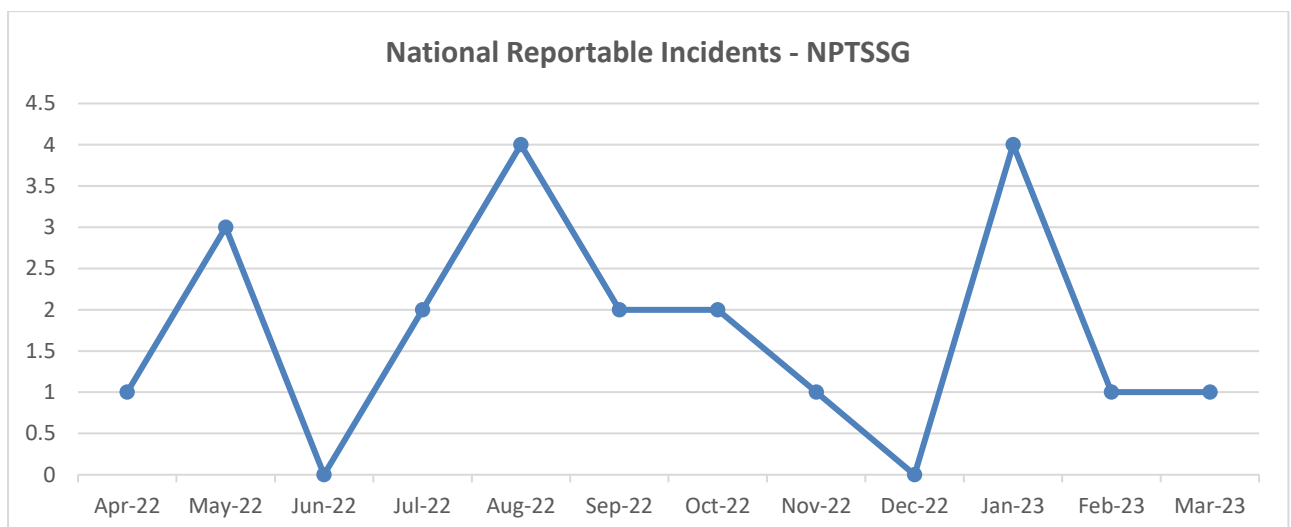
Graph 2: Top 5 incidents per month



6.8 – NPTSSG National Reportable Incidents

NPTSSG reported 6 Nationally Reportable Incidents (NRI's) during Q4 2022/23, this compares to 3 being reported during Q3 of 2022/23. Of the NRI's reported 4 related to In-Patient Falls, 1 Neonatal incident and 1 Never Event – Retained swab. Graph 1 shows the number of NRI's reported per month.

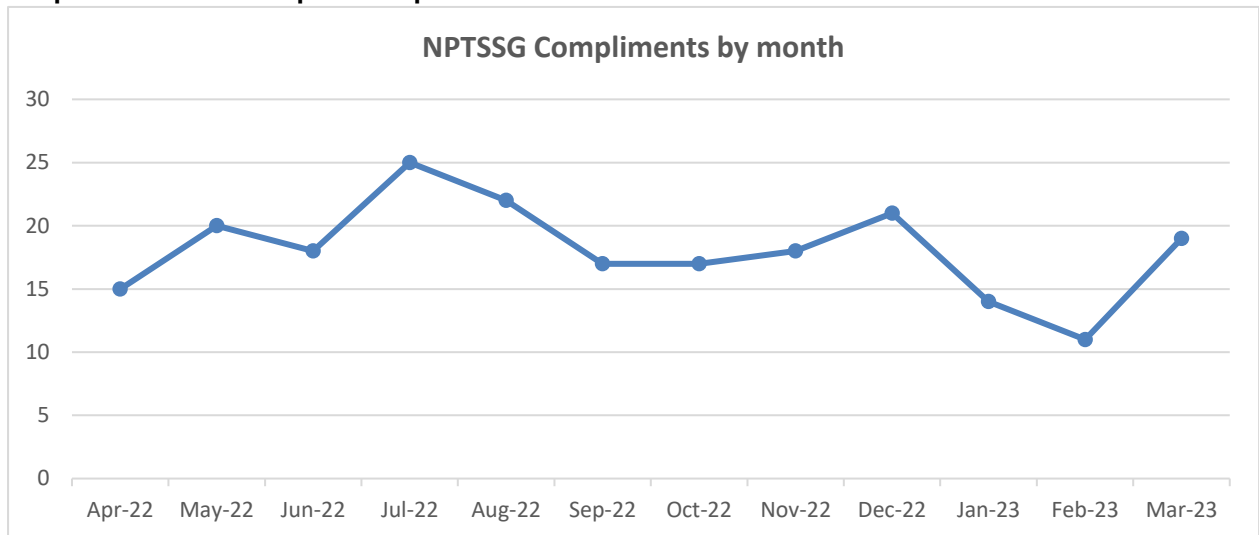
Graph 1: Nationally Reportable Incidents reported per month by NPTSSG



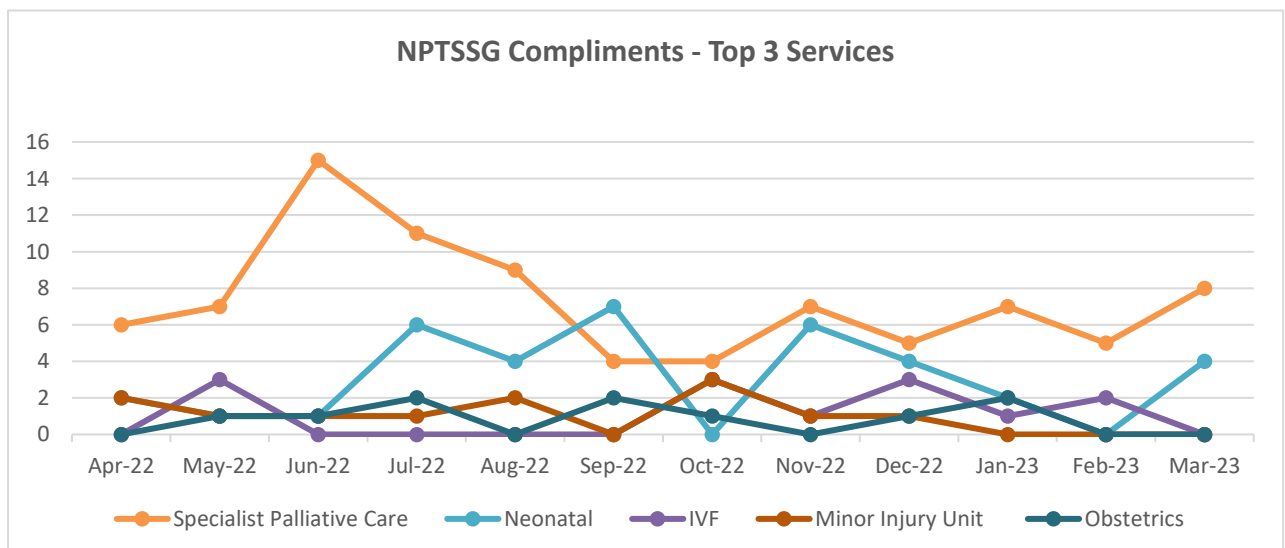
6.9 – NPTSSG Compliments

NPTSSG received 44 compliments during Q4 of 2022/23. Graph 1 shows the number received per month since April 2022.

Graph 1: NPTSSG compliments per month



Graph 2: NPTSSG compliments – Top 3 Services





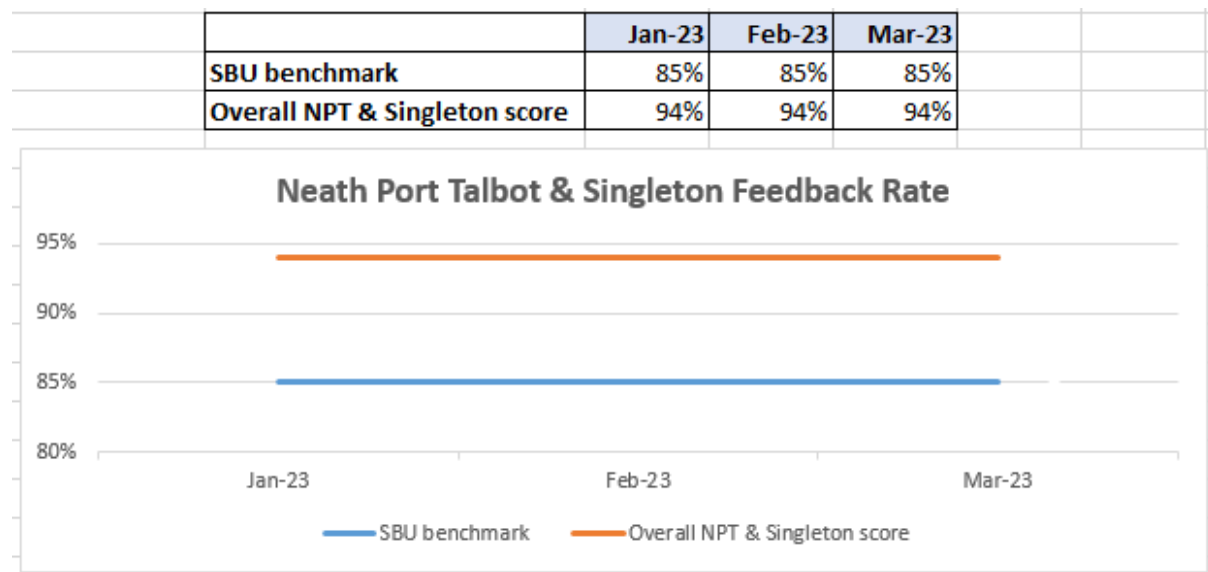
GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

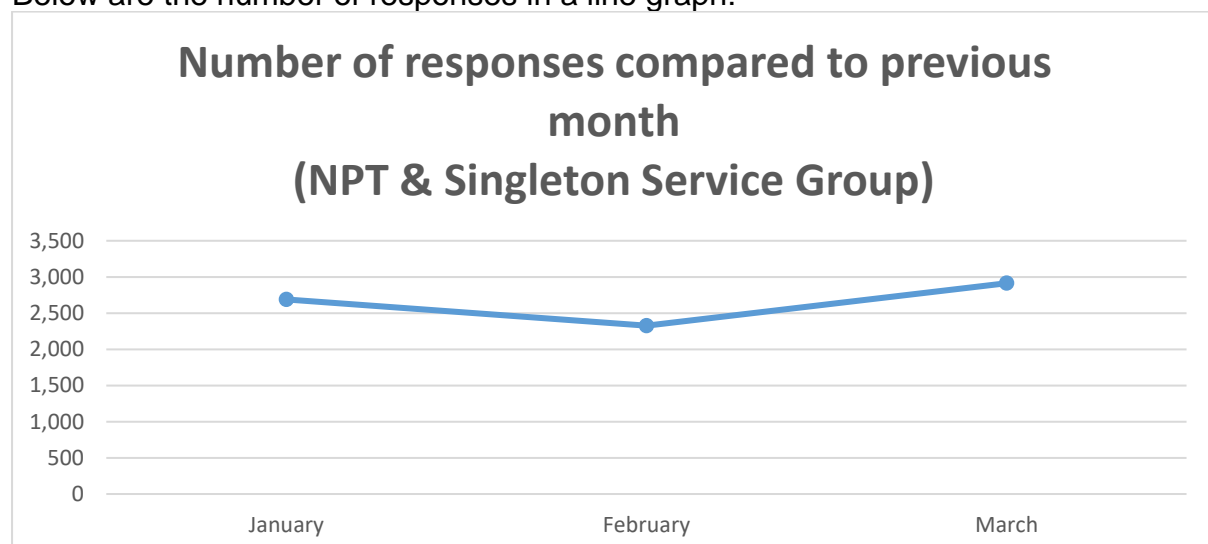
4.10 NPTSSG Patient Experience Feedback

Overall, during quarter four there were 85,020 number of patients seen under Neath Port Talbot and Singleton Service Group (This includes MIU).

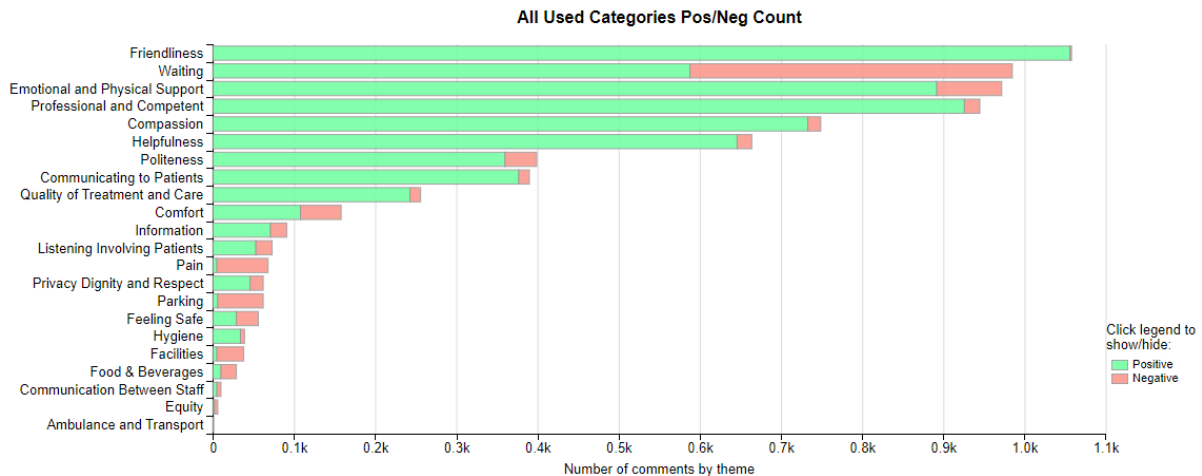
There were 7,931 Friends and Family survey returns which equates to 9% responding to the survey. Out of the 9% who responded, 94% of people stated they would highly recommend the Health Board to Friends and Family during this quarter.



Below are the number of responses in a line graph:



Below are the main themes mentioned for NPT & Singleton:

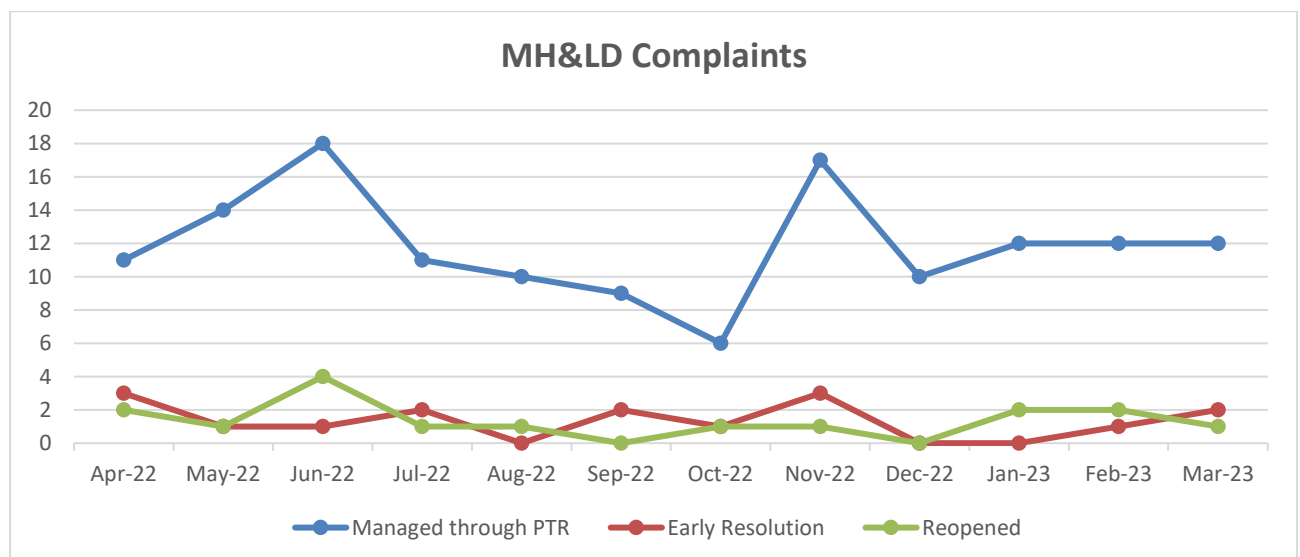


MENTAL HEALTH AND LEARNING DISABILITIES SERVICE GROUP

6.11 – MH&LD Complaints

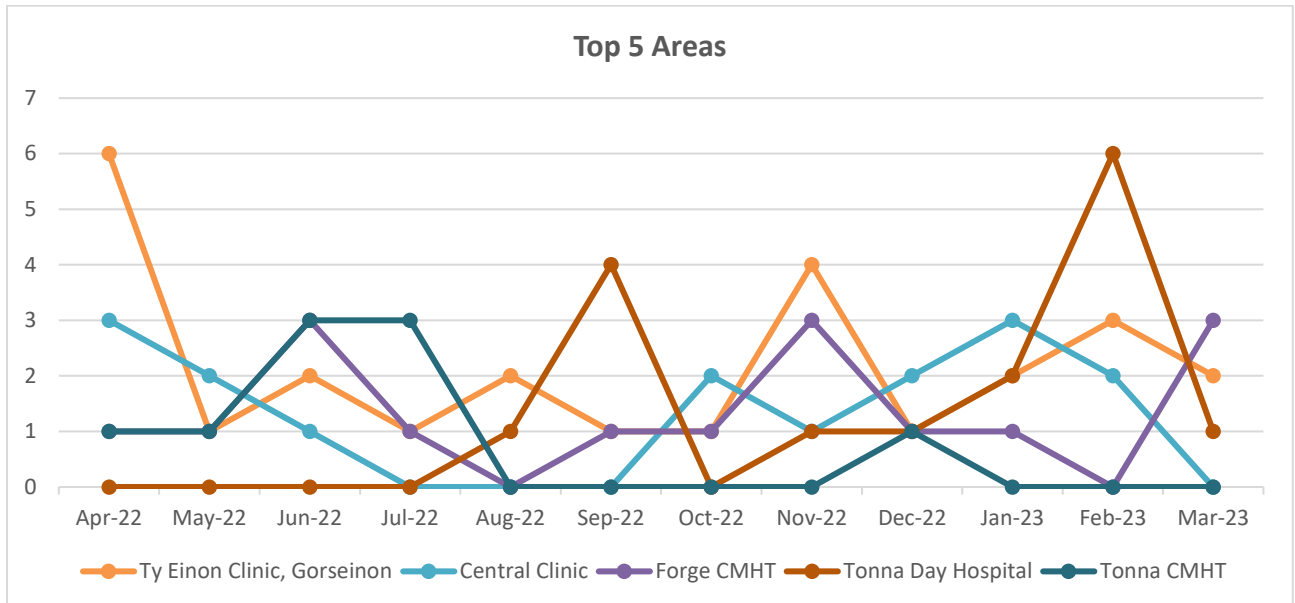
MH&LD received a total of 44 complaints during Q4 2022/23. Graph 1 below shows the total number of complaints received relating to MH&LD since April 2022. The graph breaks the total number received down by Formal PTR, Early Resolution and Re-opened complaints.

Graph 1: MH&LD complaints by month and type



Graph 2 shows the top five areas within MH&LD that had the most complaints since April 2022. As shown in the graph, Tonna Day Hospital appears to have had an increase during February 2023 with 6 complaints received however, these decreased again during March.

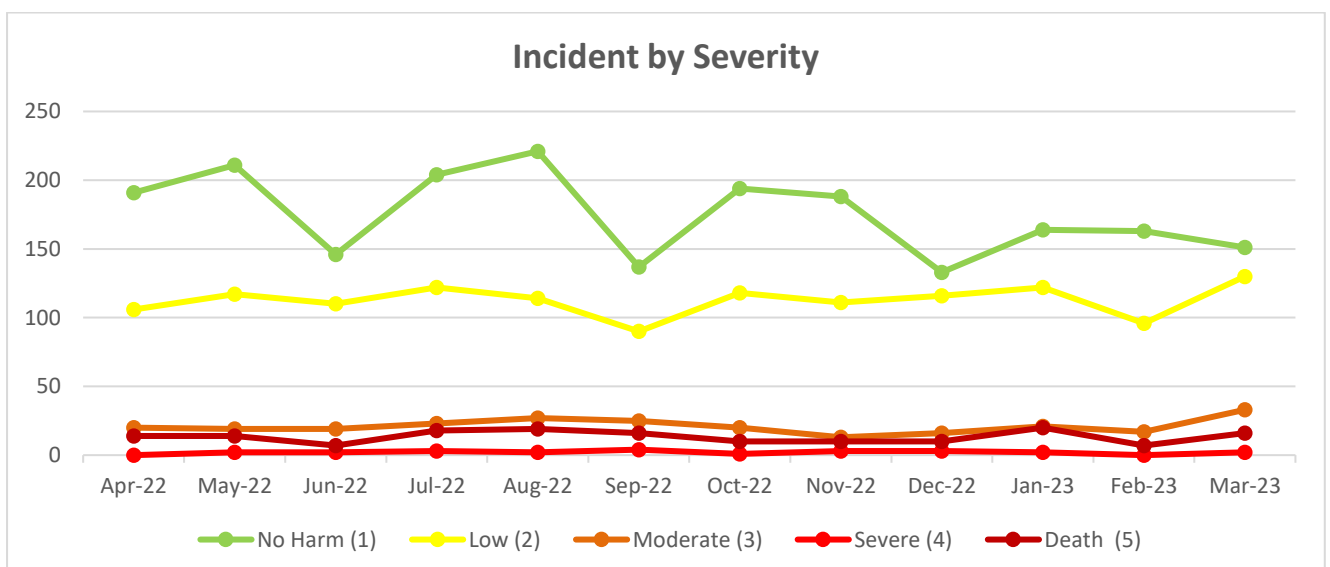
Graph 2: Top 5 Services by month



6.12 – MH&LD Incidents

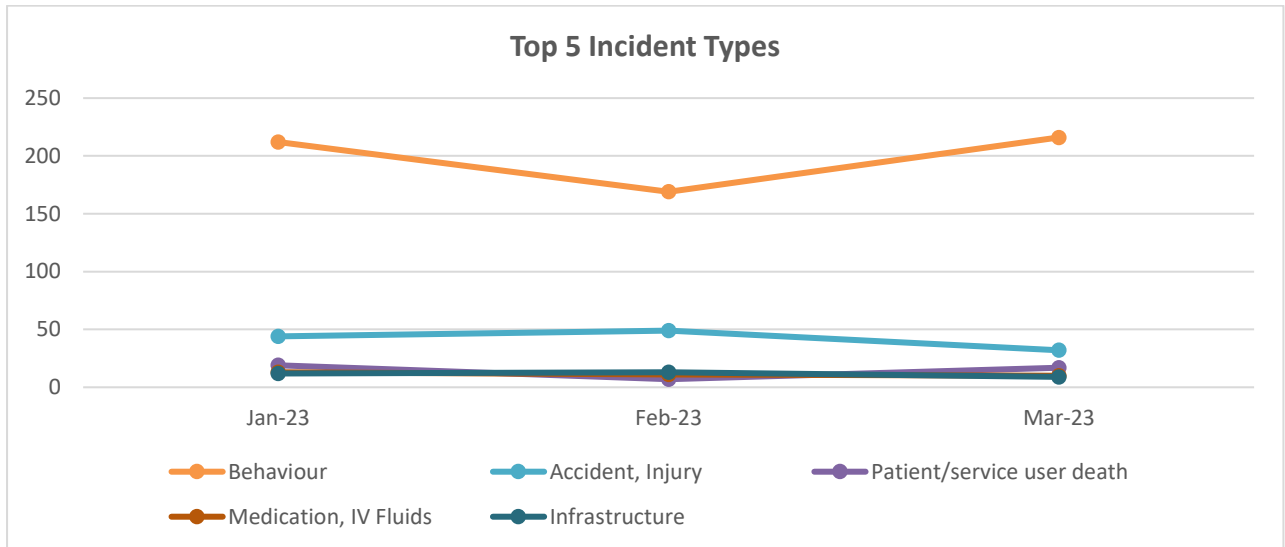
MH&LD reported 944 incidents in quarter 4 (Q3) of 2022/23 (January, February, March). This compares with 946 incidents in quarter 3 (Q3) of 2022/23 (October, November, December). Graph 1 shows the number of incidents per month broken down by severity.

Graph 1: MH&LD Incidents by Severity and month



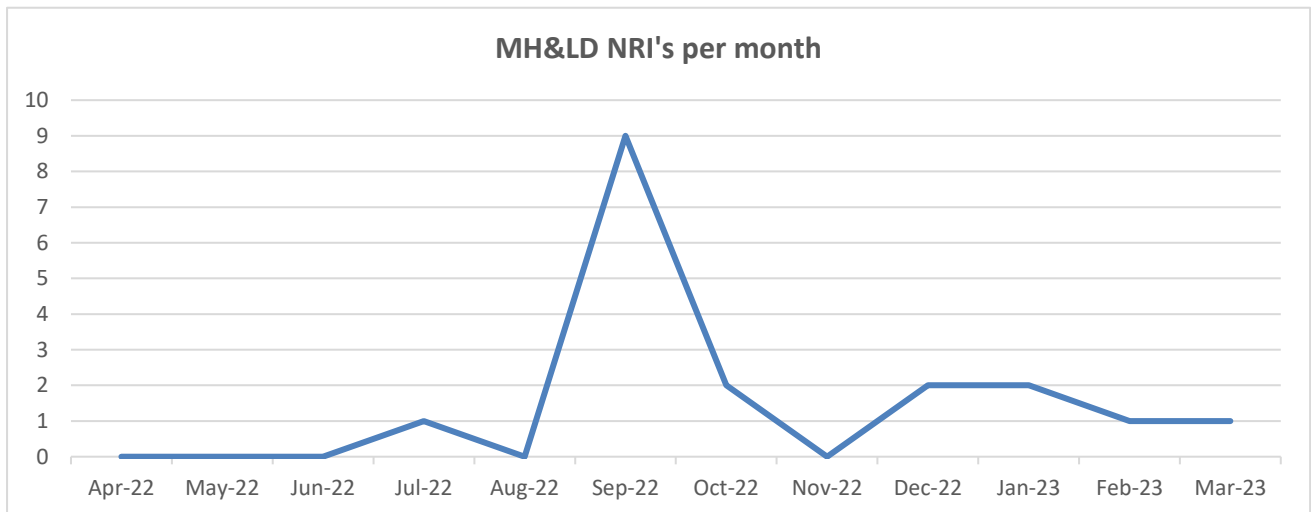
Graph 2 shows the top 5 incident types, of all incidents reported by MH&LD since January – March 2023.

Graph 2: Top 5 incidents per month



6.13 – MH&LD National Reportable Incidents

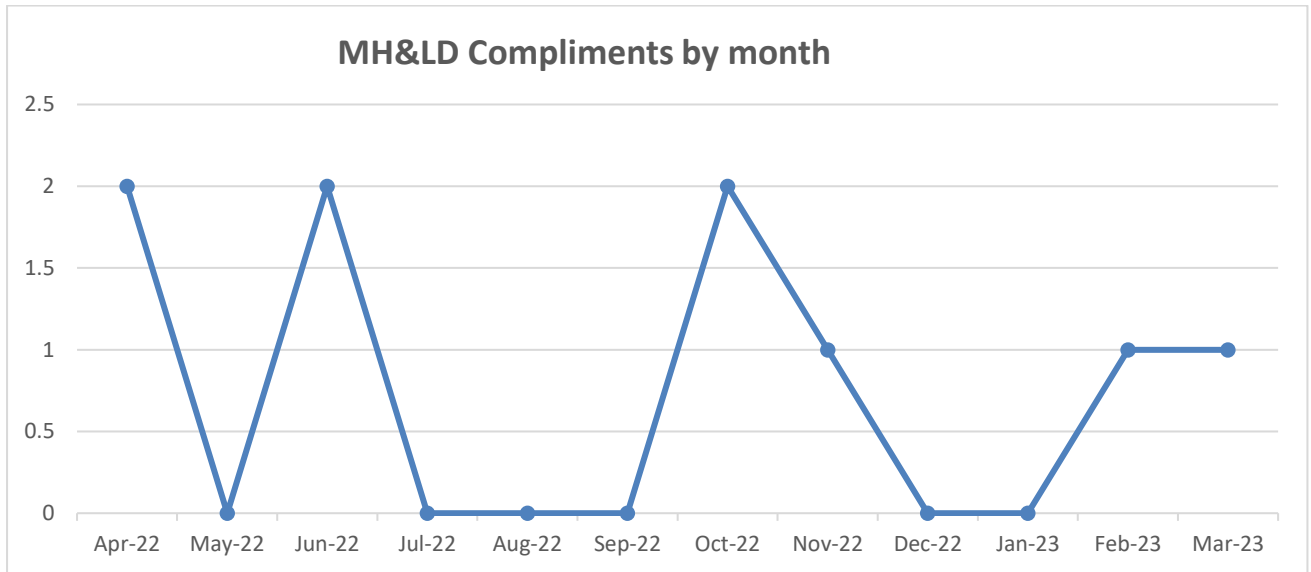
MH&LD reported 4 NRI's during Q4 of 2022/23. This compares to 4 reported during Q3. Of these, there were 3 falls, and 1 behaviour incident.



6.14 – MH&LD Compliments

MH&LD received 4 compliments during Q3 of 2022/23. This compares to 3 compliments during Q3 of 2022/23. Graph 1 shows the number received per month since April 2022.

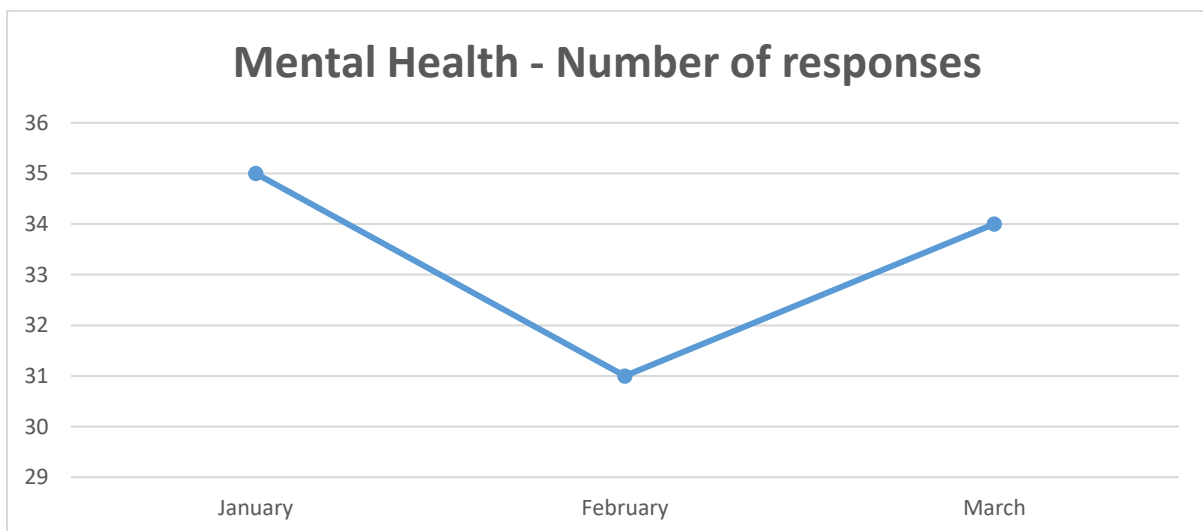
Graph 1: MH&LD compliments per month

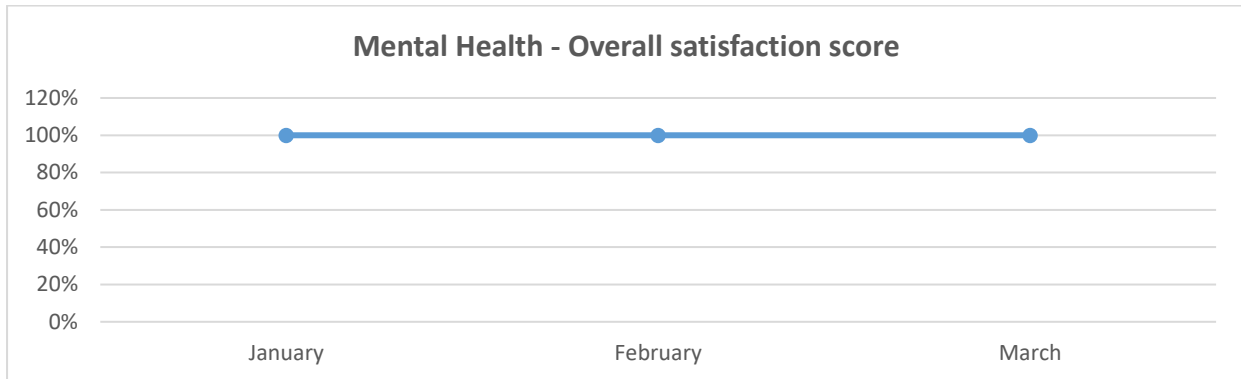


4.15 MH&LD Patient Experience Feedback

This data is from Quarter Four.

The Mental Health and Learning Disabilities Service Group are using a different set of survey questions. The roll out of the semi structured interview surveys have been managed in stages. Roll out, awareness posters and meetings with managers and teams continues.



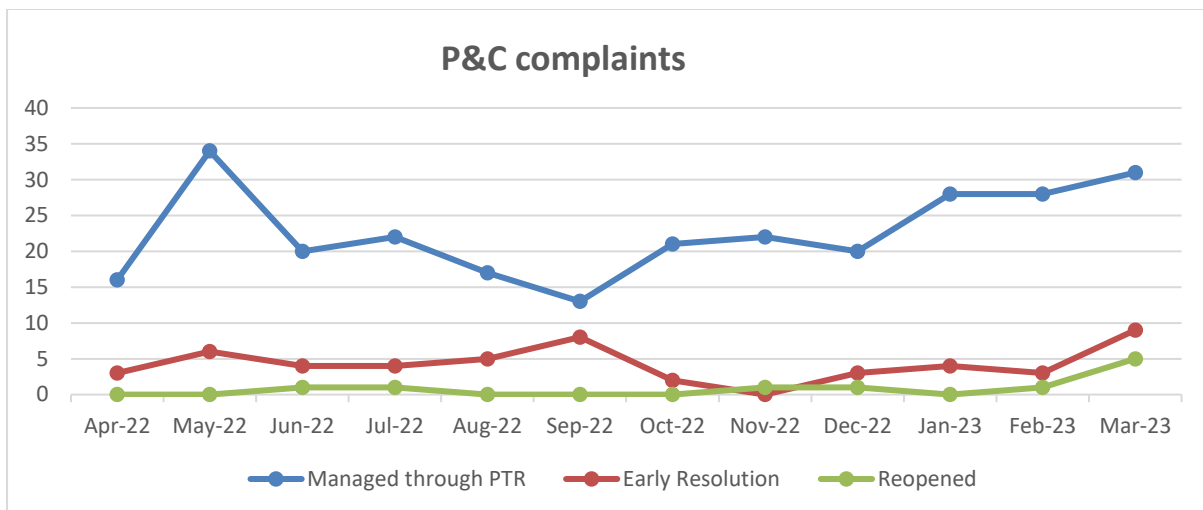


PRIMARY AND COMMUNITY SERVICE GROUP

6.16 – P&C Complaints

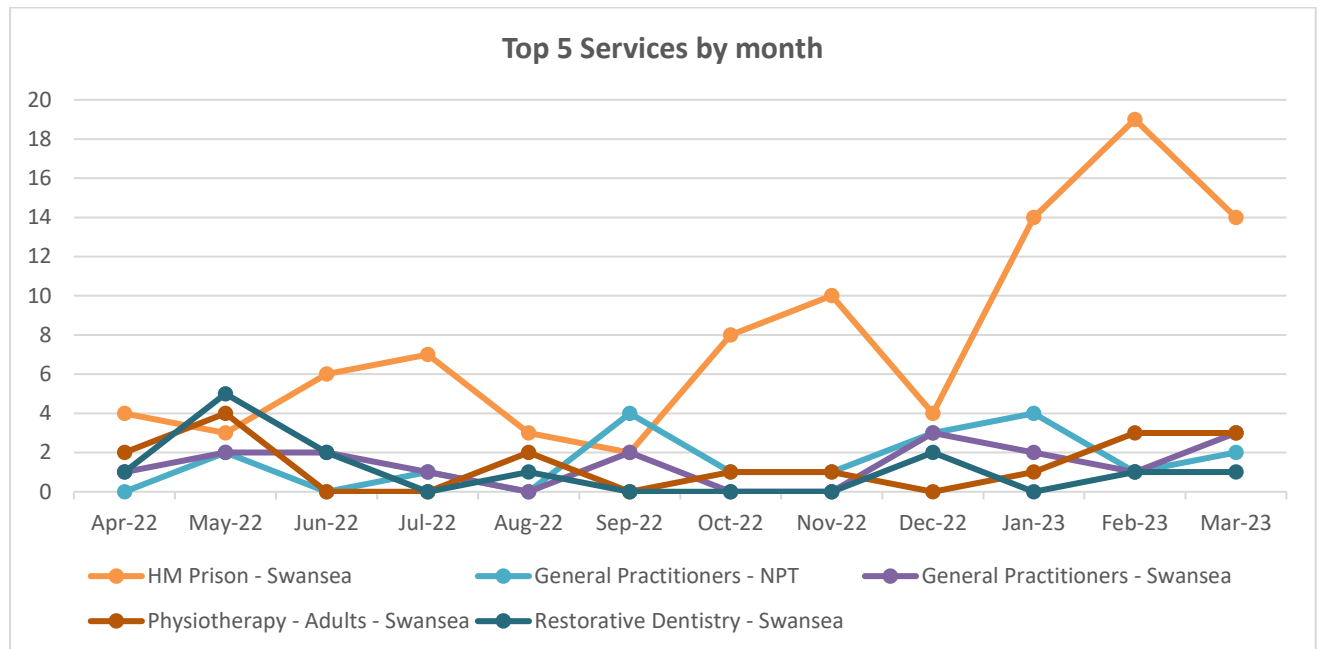
P&C received a total of 109 complaints during Q4 2022/23. Graph 1 below shows the total number of complaints received relating to P&C since April 2022. The graph breaks the total number received down by Formal PTR, Early Resolution and Re-opened complaints.

Graph 1: P&C complaints by month and type



Graph 2 shows the top five services that had the most complaints since April 2022. As seen in the graph there appears an increase in complaints relating to HMP Swansea since January 2023. This was following a meeting with the prison where it was agreed that any complaint received and resolved in the prison, would be forwarded to the Health Board's complaints team for logging on Datix. This ensures all complaints are recorded on the system and any themes can be identified by Primary & Community Services.

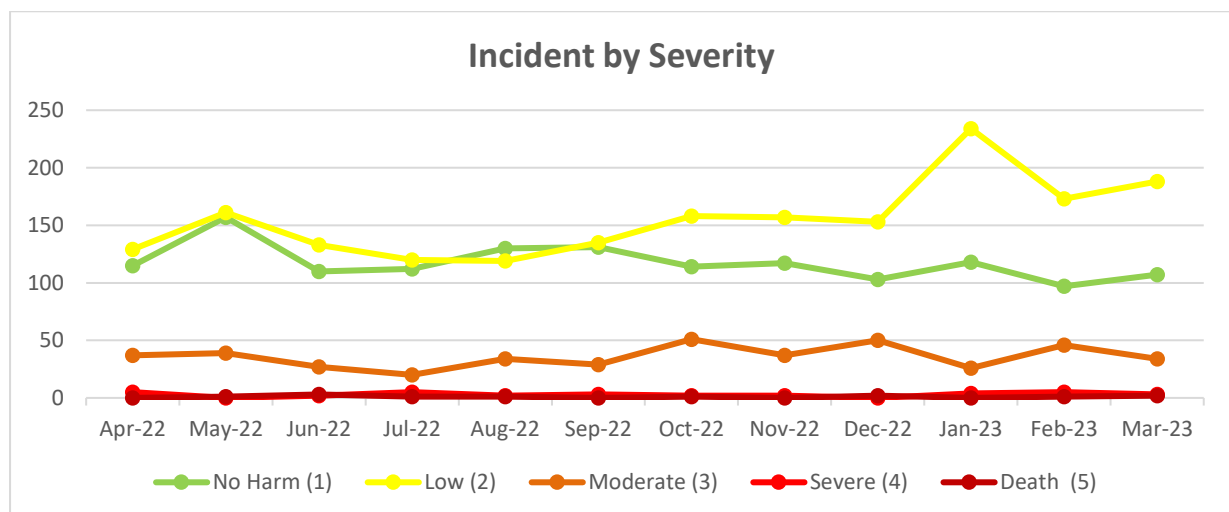
Graph 2: Top 5 Services by month



6.17 – P&C Incidents

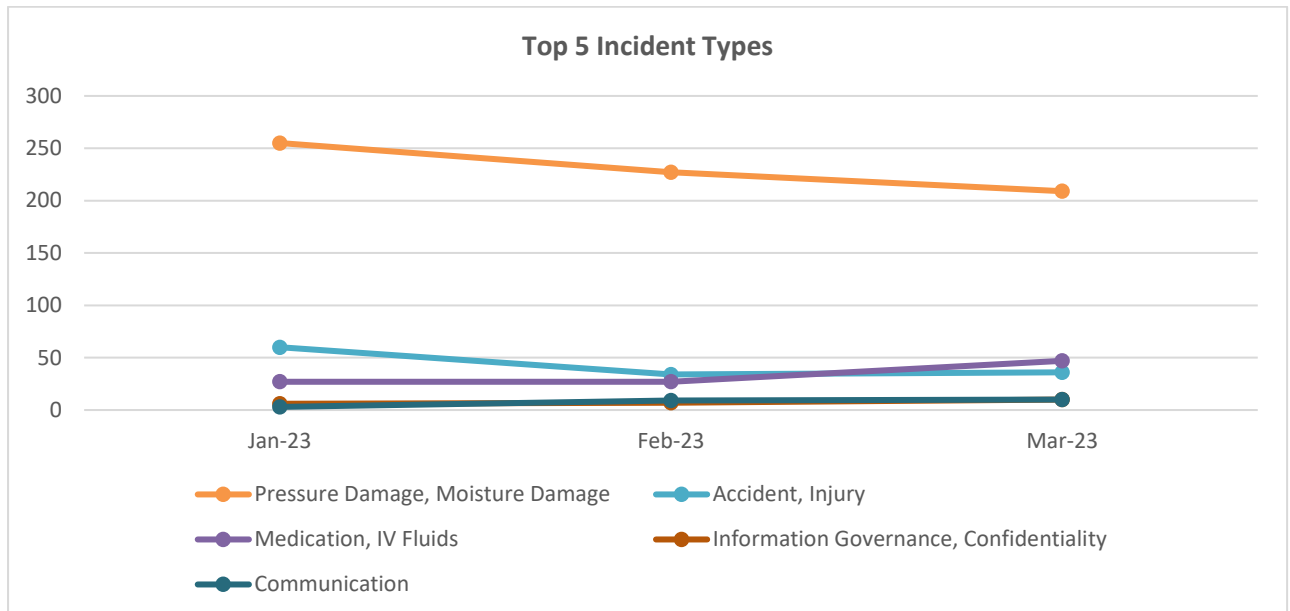
P&C reported 1079 incidents in quarter 4 (Q4) of 2022/23 (January, February, March). This compares with 970 incidents in quarter 3 (Q3) of 2022/23 (October, November, December). Graph 1 shows the number of incidents per month broken down by severity.

Graph 1: P&C Incidents by Severity and month



Graph 2 shows the top 5 incident types, of all incidents reported by P&C since January – March 2023.

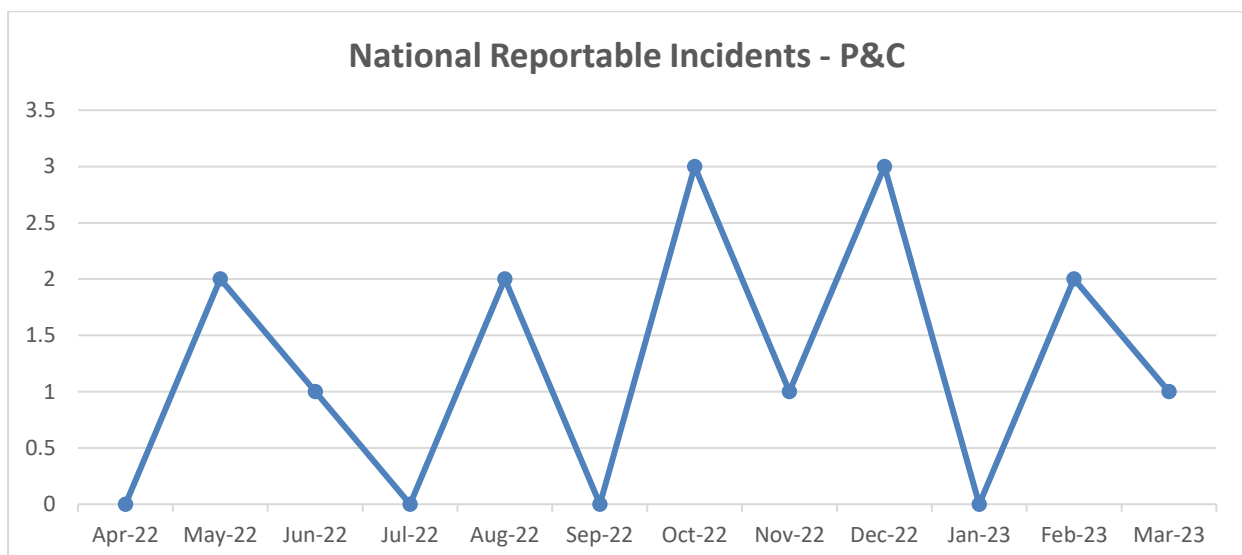
Graph 2: Top 5 incidents per month



6.18 – P&C National Reportable Incidents

P&C reported 3 Nationally Reportable Incidents (NRI's) during Q4 2022/23, this compares to 7 being reported during Q3 of 2022/23. Of these incidents, 2 related to pressure ulcers and 1 failure to clinically assess.

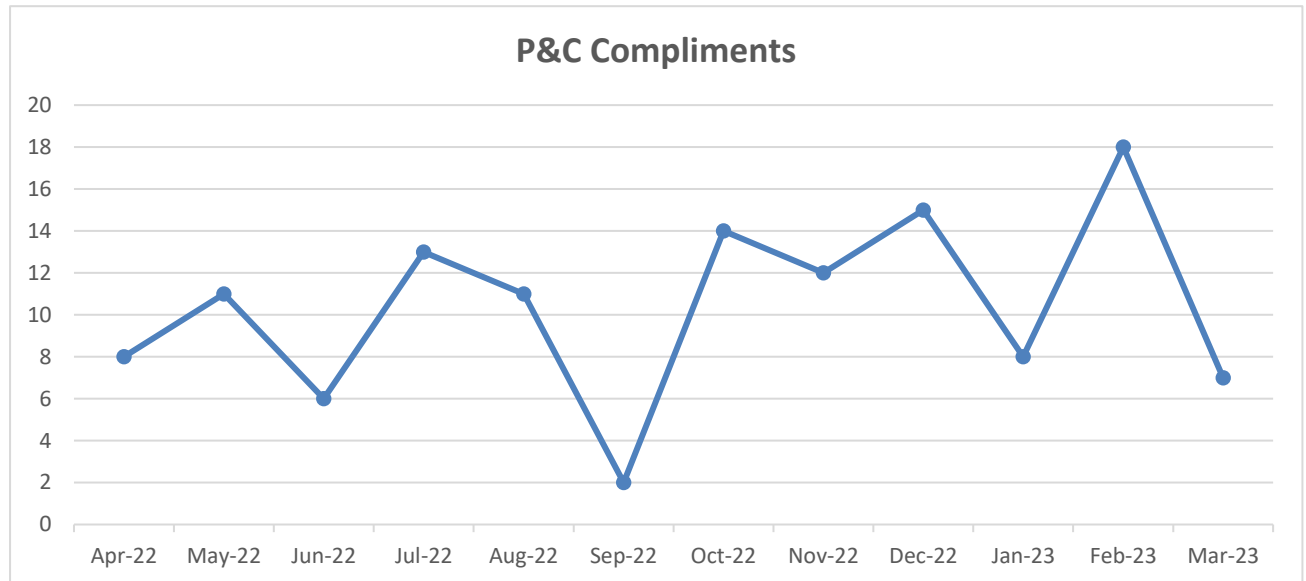
Graph 1: Nationally Reportable Incidents reported per month by P&C



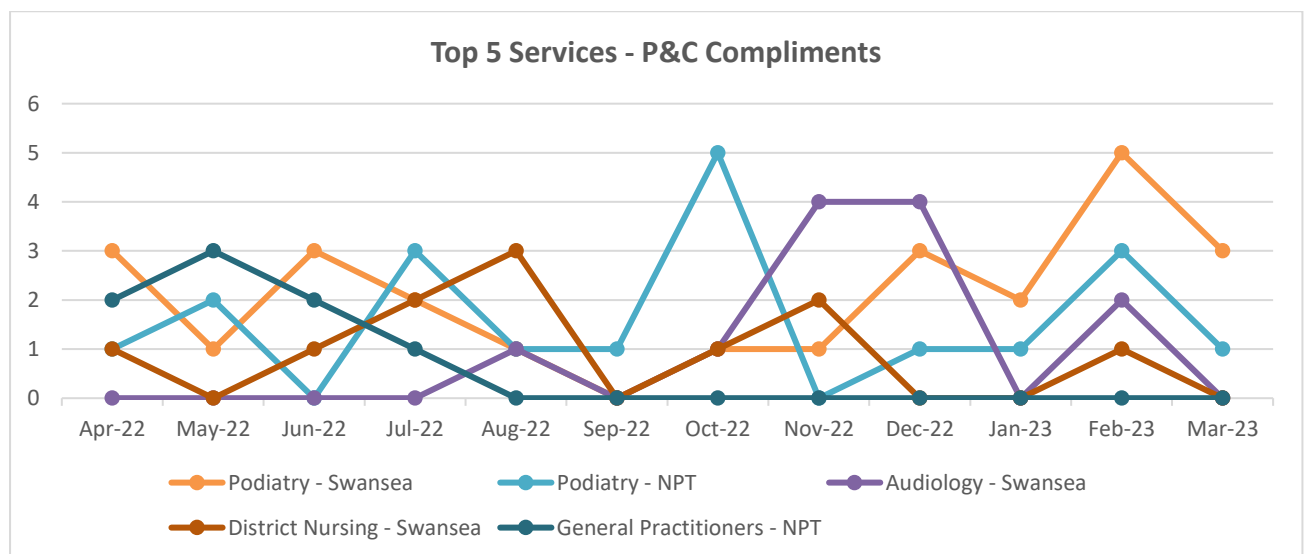
6.19 – P&C Compliments

P&C received 33 compliments during Q4 of 2022/23. Graph 1 shows the number received per month since April 2022.

Graph 1: P&C compliments per month



Graph 2: P&C compliments – Top 5 Services



4.20 P&C Patient Experience Feedback

Overall, during quarter four there were 6,236 number of patients seen under Primary and Community Service Group.

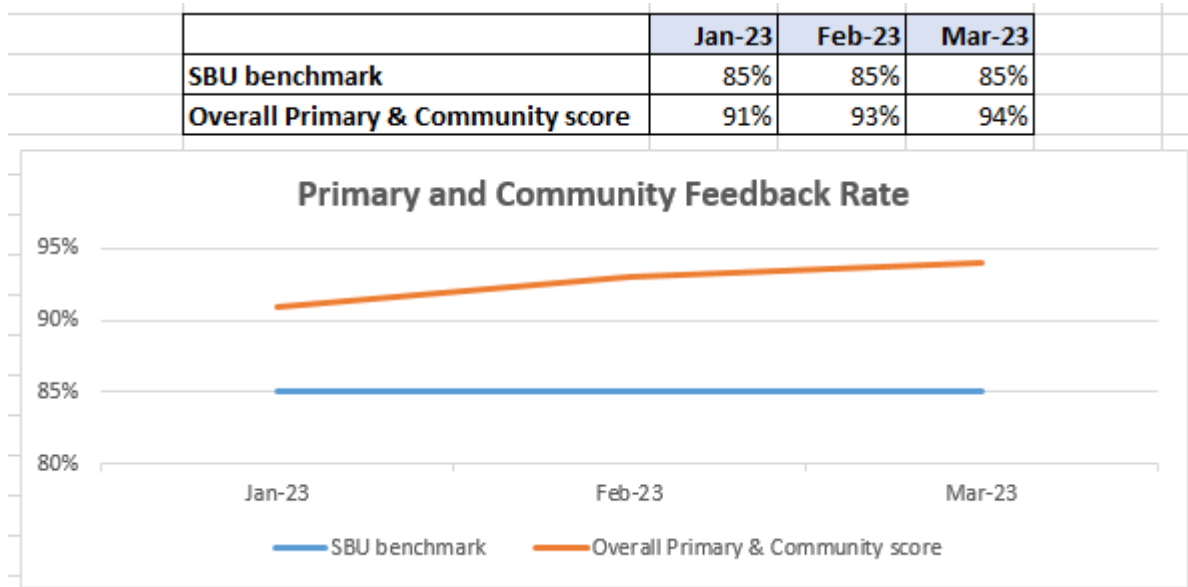
There were 600 Friends and Family survey returns which equates to 10% responding to the survey. Out of the 10% who responded, 93% of people stated they would highly recommend the Health Board to Friends and Family during this quarter.



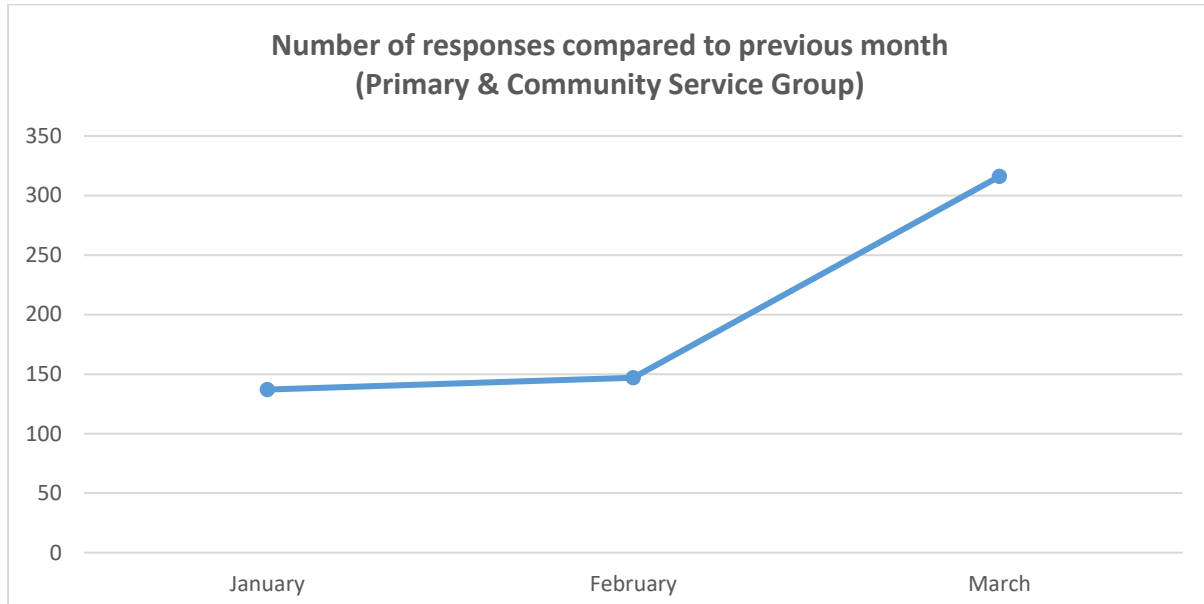
GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

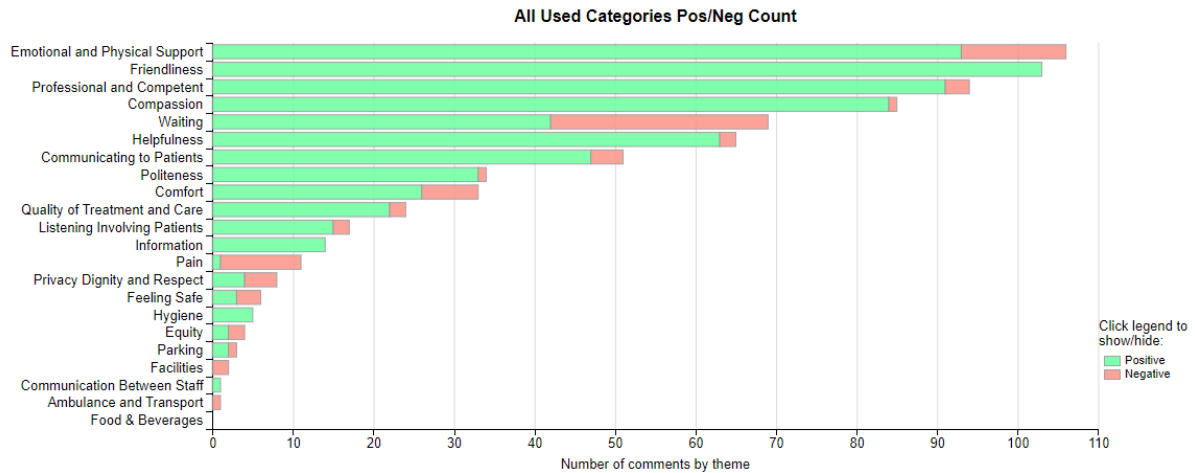
Patient Experience Team are currently working with I.T to automate SMS messages from the PIMS, PIMS+ platform to automate SMS survey messages to Primary Care and Therapies patients. This will increase the number of returns.



Below are the number of responses in a line graph:



Below are the main themes mentioned for Primary & Community:

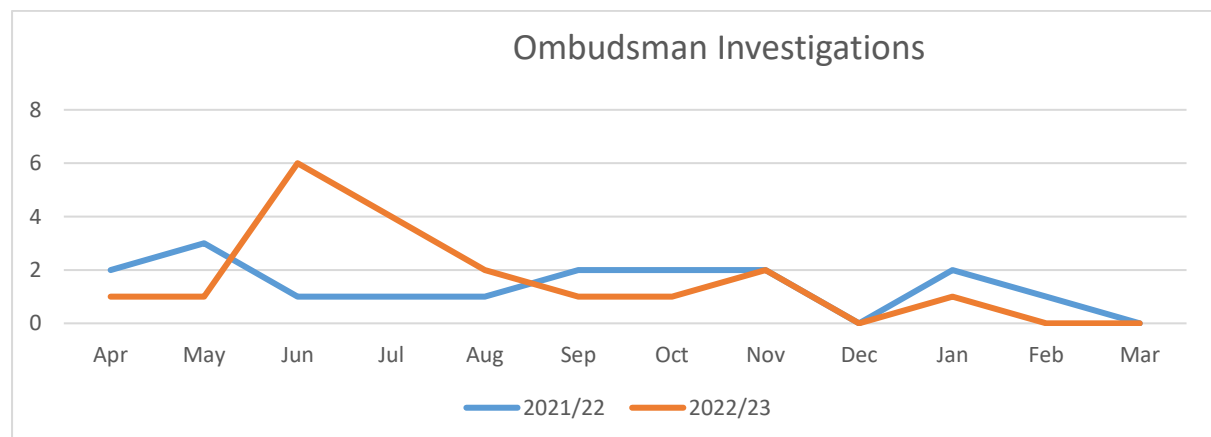


7. OMBUDSMAN CASES

7.1 Ombudsman investigations

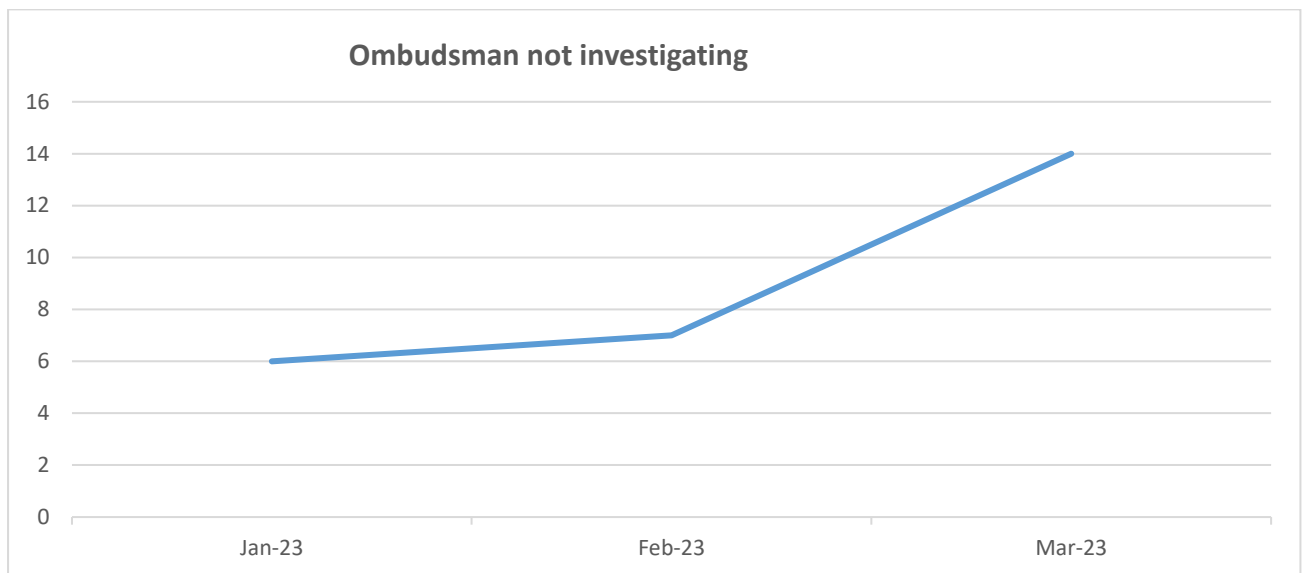
1 new Ombudsman investigation was received during Q4 2022/23, this compares to 3 in Q3 2022/23. Graph 1 shows the number of investigations received per month;

Graph 1: Number of Ombudsman investigations per month



The Health Board has also received 28 decisions not to investigate from the Ombudsman during Q4. Graph 2 below shows these by month.

Graph 2: Ombudsman decisions not to investigate



There are a number of different reasons why the Ombudsman decided not to investigate these complaints, a few of these reasons are detailed below;

- Complaint deemed out of time
- Thorough and detailed response from Health Board to original complaint
- Waiting list complaints - Ombudsman unable to intervene with waiting lists
- Complaint not investigated previously by Health Board therefore, deemed premature.

The Health Board is now in receipt of the Ombudsman's Strategic Plan for 2023-2026.