



University Health Network

Patient Relations,
Office of the Ombudsman Annual Report
2009 - 2010

Toronto General Hospital
Toronto Western Hospital
Princess Margaret Hospital

1. What does Patient Relations do?

The Patient Relations Department (Office of the Hospital Ombudsman) continues to evolve its practice in response to UHN's needs. In addition to complaints management (mediation, conflict resolution and option building) we are increasingly involved in providing consultation and educational services to staff and physicians. Our focus is two fold: first to be there to assist patients and family members as they access services at any one of our UHN sites and second, to advocate for change within our system.

In addition to complaint management, we are regularly involved with:

- Collection of complaint information
- Analysis of our data in order to identify trends and patterns
- Advocating for appropriate changes within UHN
- Education and capacity building in the organization through in-services and educational sessions to front line staff and physicians through the very popular "Patient Relations Road Show", now an educational DVD
- Ongoing management of the "You're a Star to Us" program and the famous gold star to acknowledge those UHN staff and physicians who have "gone above and beyond the call of duty"
- Ongoing management of the Virtual Patient Focus Group (VPG), an on-line virtual group of patients and family members of UHN who are asked to provide advice and suggestions on specific issues / programs / initiatives being contemplated in the hospital
- Patient Relations at UHN continues to be identified as demonstrating "best practices" and has received acknowledgement provincially, nationally and internationally.¹
- It is our hope that this report provides meaningful information to all users and we look forward to your comments and suggestions so that we might improve this report next year.

2. What is our process?

By policy, all front line staff and physicians are encouraged to try to resolve patient / family concerns as they arise. However, if the patient / family member does not feel that their concerns have been adequately addressed or when there is a recognized need for additional conflict resolution support, accessing the Patient Relations Department is encouraged.

It is somewhat discouraging to know that despite over 25 different strategies developed to advertise the existence of the Patient Relations Department to patients / family members, staff and physicians, we are continually hearing that there are segments of our UHN community who are unaware of the existence and role of Patient Relations. Feedback from the UHN community to increase awareness is encouraged...if you have an idea please share with us!

3. Activity Indicators

3.1. Total Number of Telephone Calls Received by fiscal year:

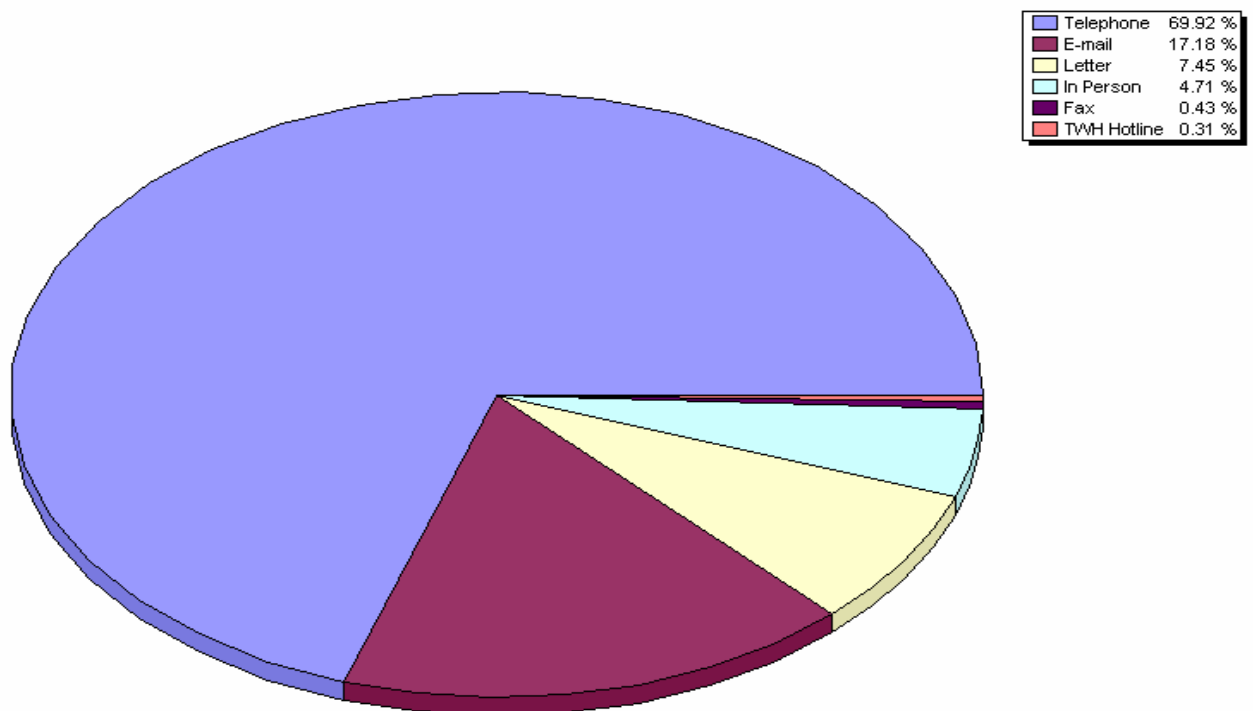
	2009 - 2010	2008 - 2009
Calls received per year	5635	6000
Monthly average	470	500
Daily average *	23.5	25

*(on average 20 working days per month)

Analysis: The number of calls received in 2009/2010 has decreased slightly over the previous year. However, Patient Relations staff report that the intensity of each call and the time required for each call has increased. This pattern is experienced in other Patient Relations department across the province.

3.2. How did patients/ family members contact Patient Relations?

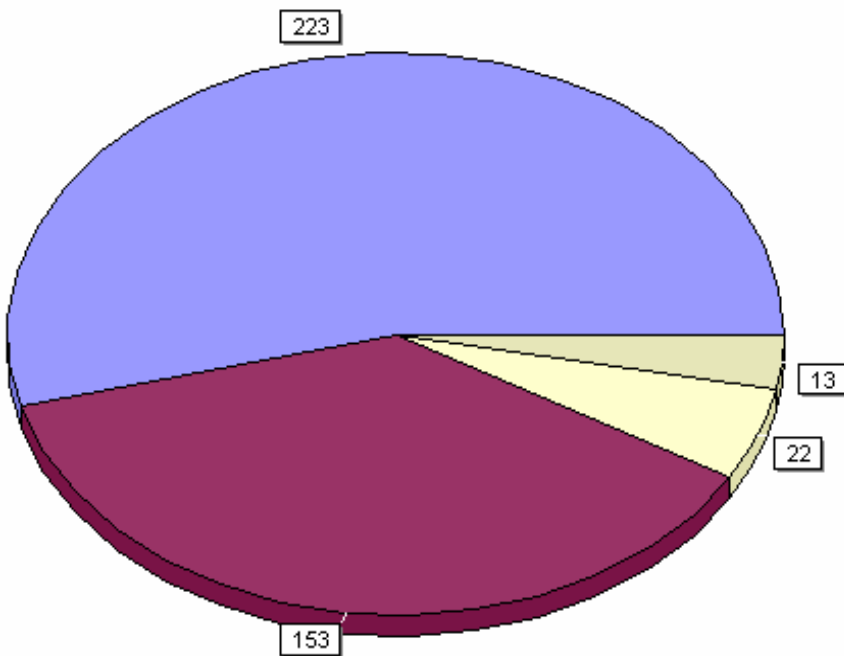
Analysis: As in the past, most contacts with the Patient Relations office are made by telephone. However, communication by email (internet) is steadily increasing and has surpassed letter writing as the mode of written contact.



3.3. Number of calls by staff to Patient Relations as “heads up”, support or specific requests:

As part of this department’s educative / mentoring objectives, staff and physicians are encouraged to contact the Patient Relations Department for advice, support, option building, coaching or mentoring.

Pre-emptive / Heads Up	223
Inquiry/Support - Staff / Inquiry/Support	153
Pre-emptive / Request for Information	22
Pre-emptive / Incident Reports	13



Analysis: The pattern of staff proactively calling Patient Relations has now been established at UHN. Staff contact us so frequently, that we have further classified our feedback to “Heads up from staff”, “inquiries / support”, “request for information” or “to advise us of an incident that may require patient relations intervention”. Total staff interactions account for 411 of our cases. Staff and physicians tell us that they are increasingly aware of the positive outcomes of the Patient Relations Department and they value our advice and recommendations.

3.4. Patient Feedback

Patients / Family Members contact Patient Relations for a number of reasons. Breakdown by type of feedback is as follows:

Complaints: 1072
Patient Inquiry / Support: 384
Pre-Emptives: 305
Compliments: 235

Patient feedback is categorized in four different ways: complaints, inquiries / support, pre-emptive calls (file opened but no investigation required) and compliments. Although most cases start off as a complaint, when analyzed, it appears that 35 percent of all feedback is actually patients and family members "reaching out" for support or to inquire about what they might do to prevent the problem from occurring / getting worse. This type of conversation appears to be extremely valuable and has resulted in many positive outcomes.

3.5. Number of Complaints requiring Administrative Review:

While the Patient Relations office received 5635 telephone calls this year, the Patient Relations staff were able to help bring about resolution to a majority of these concerns by direct discussion. In fact, only 19 percent of these calls remained a complaint and required the opening of a file and the initiation of an administrative review.

This confirms yet again that while many people call "to complain", their concerns are effectively managed through supportive listening, counseling, education and option building.

	2009 – 2010	2008 – 2009
Number of Administrative reviews (Complaints)	1072	816

Analysis:

Even though we had a decrease in the number of calls, there is a significant increase (24 percent) in the number of files / administrative reviews over the last fiscal year. The data supports Patient Relations perception that the calls are becoming increasingly more intense and that this intensity of content/ issue requires a review. Please refer to the attached appendices for more site specific related complaints.

3.6 Total Number of Compliments:

The receipt and acknowledgment of compliments has traditionally been part of this department's employee recognition programs.

	2009 – 2010	2008 – 2009
Number of Compliments processed	235	187

Analysis: This year we have seen a 20 percent rise in the number of compliments processed by this department. However, this statistic is still relatively low compared to the number of complaints that we receive. This pattern has prompted the department to consider ending the time / resource consuming "compliment acknowledgement process" but because it is so important to staff and

physicians, we are continuing this for another year. We believe that the decline in the numbers of compliments to the Patient Relations Department is due to three factors:

Patients / families compliment staff and physicians directly
 The adoption of the "Star Program" by the Toronto General / Toronto Western Hospital Foundation has redirected compliments to that program
 The development of the Staff Recognition program by the Human Resources department has redirected compliments to that program

We want to express our pleasure that both the Foundation and the Human Resources department has borrowed our program and our trademark "star" and we encourage and support these programs completely.

3.7. How many days does it take to resolve a complaint?

	2009 - 2010	2008 - 2009
Avg. no. of days for TGH	10	12
Avg. no. of days for TWH	9	11
Avg. no. of days for PMH	8	9
Avg. across UHN	9	10.7

Actual Resolution Days by Site

No. of Days	TGH	TWH	PMH	UHN	Total Files
0-3	136 (37%)	163 (34%)	69 (36%)	17 (46%)	385 (36%)
4-7	82 (22%)	134 (29%)	54 (28%)	6 (16%)	276(26%)
8-Max	153 (41%)	173 (37%)	70(36%)	14 (38%)	410 (38%)
Grand Total	371	470	193	37	1071

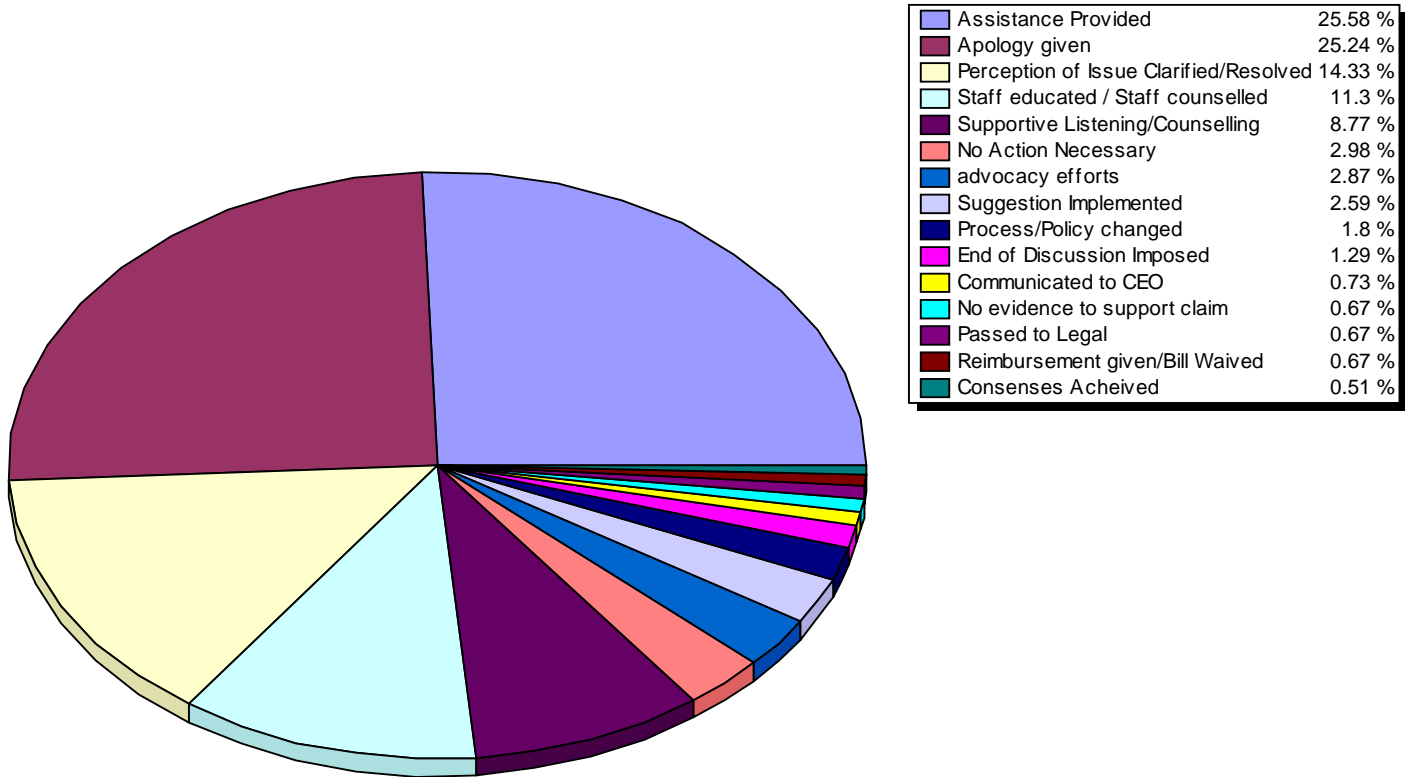
Analysis:

The above statistics indicates that on average, the time that it takes to resolve complaints varies slightly between sites. When further stratified by actual days, on average, 62 percent of all complaints are resolved within 7 days. Individual sites demonstrate this same pattern more or less. We believe that this fast response time is likely due to the following factors:

1. Management and physicians recognize that a comprehensive and speedy response to a patient / family complaint is one of the most effective ways by which we can resolve and bring to closure, that complaint. Complaints that are dealt with and resolved in a satisfactory manner, prevent more serious grievances from occurring. Most importantly, complaint resolution is an important indicator of patient satisfaction, patient safety, patient centered care and effective risk management.
2. Management and physicians are increasingly comfortable in reviewing concerns and in providing responses in writing to the Patient Relations department. It is particularly gratifying that CMPA has supported the work of Patient Relations when they have discussions with UHN physicians. It is also satisfying to hear that physicians who have appointments at other hospitals have provided very positive feedback to UHN Patient Relations about our processes, our achievements and our credibility.

3.8. Outcomes of complaints:

Each administrative review is evaluated at completion to determine what outcomes have been achieved.



Most of our complaints are resolved by providing assistance to our patients. This assistance takes a number of forms. For example, many patients / family members need clarification about what has been said to them previously by members of their healthcare team. At other times, patients/ family members need an explanation or clarification about the healthcare system generally or UHN hospital processes specifically. Often patients / family members recognize that incidents occurred that were not satisfactory and cannot be reversed but because they are angry or frustrated about that incident, they require acknowledgement and affirmation. This type of acknowledgment often takes the form of supportive listening, counseling and the offer of an apology.

We are extremely pleased to see that many of our interventions and actions, which arose initially because of patient complaints, have resulted in organizational changes. Our data indicates that of all outcomes, 342 instances resulted in staff education, advocacy efforts, process or policy changes or reimbursement.

4. Major Initiatives undertaken and accomplishments in 2009-2010

4.1. "Going Electronically Live" In the past, our department would track all of our data (complaints and compliments) using paper forms and then manually input this feedback onto our complaints data base software supplied by RL Solutions. This process was not an efficient use of our time (due to the high demands of our work). RL Solutions, our external vendor, developed software that is "live" and web based so our department decided to "go live" to increase our productivity. This initiative has resulted in real time data availability and more accurate reports.

UHN staff, management and physicians have told us that using our reports has been extremely helpful for them and has assisted them in identifying issues and focusing their quality of care improvement efforts. This accomplishment is featured in a case study published on the RL Solutions website http://www.rl-solutions.com/Case_Study_UHN.aspx.

4.2. The Patient Relations Road Show was launched in December 2006. This program was created as a result of the success of the Patient Relations Rotation program. The Rotation program offered UHN staff a 4-hour opportunity to work in our department and thereby develop their skills in responding to challenging patients and visitors. Based on the feedback received from the Rotation, an in-service was developed by Patient Relations in order to educate more staff at one time. Patient Relations staff members Terry Gordon, Vasiliki Bakas and Erika Sedge trained nearly **3000 UHN staff members, physicians and volunteers** (almost 30 percent of all staff!!!) across all 3 sites. The cost for the development of this program, its materials and the resources spent of "reaching out to all sites" was entirely absorbed by the Patient Relations Department. The results of this program have been extremely positive. The Patient Relations team has written an article summarizing the results of the Road Show, which has been published in Healthcare *Quarterly*. Given the success of this initiative and the unremitting number of requests for this program, an educational DVD was developed and is now available for purchase by individual departments.

4.3. In October 2006, the **Virtual Patient Focus Group (VPFG)** was created. Currently there are nearly 300 individuals listed as members and the number keeps growing. The VPFG is a group made up by UHN patients who have previously contacted Patient Relations with either complaints or compliments. We are engaged in a bi-monthly survey dialogue via email. The surveys are developed by any department at UHN who would like to receive timely patient feedback / advice on a proposed program / plan or initiative. Some departments, which have submitted survey questions to the VPFG and the types of questions asked are as follows:

- The Human Resources Department wanted to find out how patients / visitors were treated by hospital staff,
- The Patient Education Department wanted patient feedback / advice about the soon to be launched audio brochures,
- The Post Operative Care Unit (PACU) wanted to improve their processes and communication with patients when surgeries were cancelled at the last moment,
- The Public Affairs Department wanted feedback from patients on the newly redesigned PMH Website,
- The Princess Margaret Hospital Foundation wanted to receive patient feedback about the idea of distributing brochures at all clinic areas regarding fundraising and donating

A fuller article on the VPFG along with its processes and achievements will be published in a forthcoming Hospital Quarterly journal.

4.4. Sharing our knowledge is achieved by publication of our most recent articles

Patient Relations, like other departments at UHN is engaged in sharing its knowledge with others in the healthcare system (locally, provincially or nationally). Some examples of recent articles are as follows. A full listing of all articles published by Patient Relations is available upon request.

Client Case Study: University Health Network [RL Solutions Website](#) 2010

Patient Relations "Road Show" at University Health Network [Healthcare Quarterly](#) Vol. 12 No. 4, 2009

Virtual Patient Focus Group An Innovative and creative approach to soliciting patient feedback [Canadian Journal of Nursing Informatics](#), Vol. 2 No 3, 2007

4.5. Continued support of "You're a Star to Us" employee recognition programs.

Although the Human Resources Department has adopted the aspect of our program (whereby staff are recognized by their own UHN colleagues) and the Toronto General /Toronto Western Hospital Foundation has used segments of our star programs for their "Honour your Hero" program, Patient Relations continues to support our own "You're a Star to Us" program. Our program is meant for those patients and family members who may not want or do not have the financial means to make a financial donation to the hospital but still would like to express thanks and gratitude to individual healthcare providers, UHN staff or the organization itself.

4.6. "Patient Relations Case made into an educational video". This year, the Nursing Channel announced the launch of **One Woman's Experience: Our Patient-Centred Response**. Since Patient Centred Care (PCC) was introduced at UHN over 5 years ago, policies / procedures have been changed along with systems to improve the patient's experience. As we continue our PCC journey, patient feedback creates new opportunities for change. Involvement in the UHN PCC Council by the Patient Relations department has been extremely important in highlighting specific patient experiences and in fact some excellent changes have occurred as a result of this involvement. Please feel free to see the video at the following link for more information: <http://www.nursingchannel.ca/programs.html>

4.7. Responsible for leading and assembling the Family Information Support Centers (FISCs) as part of UHN's Emergency Preparedness Planning related to the G20 Meeting (June, 2010). Patient Relations took the lead in designing, developing and drafting policies and processes for code orange situations due to the G20 summit. Patient Relations was responsible for the development, resourcing and setting up of FISCs at both the TGH and the TWH for the G20 weekend as well as for the training of the volunteer staff.

5. Corporate committee involvement - Tabling the Patient's viewpoint

Patient Relations department members are expected to participate in a hospital committee each year. Participation in committees is important since we are able to table our observations about the patient's experience based on the complaints logged with our department. Internal advocacy through committee involvement has been exceedingly effective and helpful to the organization generally. Involvement in various committees across UHN, has enabled Patient Relations staff in understanding UHN departments more comprehensively. This knowledge has been invaluable since it gives better explanation and understanding to patients who lodge complaints.

This year we participated in the following committees:

- Quality Committee of the Board of Trustees
- UHN PCC Council
- Clinical Quality of Care Committee
- Committee of the Elimination of Hospital Acquired Infections (CEHAI)
- Medical Advisory Committee
- G20 Planning Committee
- Provincial Transplant Action Committee
- Wireless Guest Communication Committee
- TGH Operations
- Workplace Violence

- Signage Committee
- Nutrition Tasting Panel Group
- Accessibility Committee
- Recognition Committee
- Positive Deviance Committee
- Patient Education Television Working Group
- Patient Information Newsletter Committee

Patient Relations has continued membership this year with:

Ontario Patient Representative Association (OPRA)
Society of Healthcare Consumer Advocacy (SHCA)

6. Our Observations about UHN

6.1. Major Issues Identified after Administrative Review:

	2009 - 2010	2008 - 2009
Communication	299	231
Care	293	214
Attitude	263	217
Coordination of Care	193	127
Service Accessibility	93	95
Facilities	44	24
Patient Information	41	29
Safety	33	24
Discharge Issue	28	28
OR scheduling	27	44
Financial Issues	26	25
Others	101	177
Total	1525	1211

N.B. Each complaint logged may involve more than one category; therefore, total numbers for these issues exceed our total number of complaints.

Analysis: This year, Communication is the number one issue of concern for patients / family members, followed closely by care and attitude. The actual standing is not surprising to us in Patient Relations since we consistently see these top 3 factors present in our cases.

6.2. Issues by Professional discipline:

Group Involved	2009 - 2010	2008 - 2009
Physician	107	117
Secretary / Admin Staff	55	22
Physician's Office - Surgical	50	36
Nurse	48	36
Unit / Clinic Clerk	23	35
Physician's office- Medical	16	24
Resident	13	13

Analysis: The physician group is consistently the number one group we hear complaints about. Those complaints are about communication, care, coordination of care and attitude. What is

interesting to note is that the secretary professional discipline and surgeon's offices has surpassed nursing in complaints logged. When the data is reviewed in comparison to last year's data, the secretary group has doubled in the total number of complaints received. Complaints related to secretaries / surgeon's / physician's offices are mostly surrounding communication (telephone calls, information not being responded to timely). Nursing complaints are mostly related to attitude. Ongoing efforts in PCC continue to impact positively on both attitude and communication at UHN and these efforts are encouraged to be continued.

6.3. Opportunities for improvement at UHN

TGH	TWH	PMH
Emergency –18%	Emergency – 13%	Breast Centre – 8%
General Internal Medicine Wards – 7%	Orthopedics Offices, clinic and Ward – 12%	Hematology Clinic and offices- 7 %
Ambulatory Transplant and Inpatient Unit – 6%	Ophthalmology Clinic and Offices – 7%	Chemo Day Care – 6%
General Surgery Ward and Offices –6%	Family Health Clinic – 5%	MRI / Booking Office – 6%
CV Surgery Ward – 3%	General Internal Medicine Wards – 5%	Mammography – 5%
Hemodialysis – 2%	Urology Offices & Neurosurgery Offices - 4 %	GI Clinic - 4%

Analysis: At the TGH (58 percent) and at the TWH (56 percent), the Emergency Department continues to receive the most complaints with Patient Relations. Many of the issues are related to the patient expectations of the Emergency Department, which are often inaccurate or inappropriate. The Chief of Emergency Medicine reviews all clinical issues and all review outcomes are reported back to the patients.

The above table indicates the other clinical areas about which patients have contacted patient relations with concerns. Not reported above are administrative or non-clinical areas.

At Princess Margaret Hospital, the Breast Center area appears to account for the largest percentage of complaints, followed closely by the Hematology area. This is most likely attributed to the high volume of patients seen in these areas.

6.4. Feedback broken down by Site

6.4i TGH Breakdown

Please see **Appendix 1** for a breakdown of the total feedback received for TGH along with the types of complaints.

6.4ii TWH Breakdown

Please see **Appendix 2** for a breakdown of the total feedback received for TWH along with the types of complaints.

6.4iii PMH Breakdown

Please see **Appendix 3** for a breakdown of the total feedback received for PMH along with the types of complaints.

6.4iv UHN Breakdown

Please see **Appendix 4** for a breakdown of the total corporate related complaints UHN received.

7. Summary of Hospital issues / trends

At the hospital level, several system issues continue to be problematic for the public. These are:

Communication and attitude of the health care team
Accessibility and facilities, especially with new construction initiatives
Reductions in staff and budget
General system changes
Waiting times for appointments and waiting time in clinics
Appointment mix-ups
Medical records related issues
Disagreement with discharge policies

7.1. A Selection of Clinical and Administrative Changes because of Patient Relations Advocacy:

While many changes have come about because of our involvement in the complaint management process, the following changes are a small selection of change where patients have expressed the most gratitude or which have been particularly gratifying to Patient Relations department staff:

- Participation in nutrition food tasting panel. Our feedback directly impacts on how hospital menu items are selected.
- Supporting patients on the Psychiatry unit in their advocacy for the return of whole fresh apples to inpatient meals.
- Advocating for the first floor doorway to be repaired due to recent construction at TGH.
- Persistent advocacy to improve signage across all three sites to support way finding and patient safety.
- Advocacy to support the placement of benches added in corridor of TGH connecting West Elevators to East Elevators in order to improve Patient Centered Care.
- Extensively involved in Emergency Preparedness planning for H1N1 and G20 service disruptions.
- Patient Relations Data being used for corporate decisions on clinical program levels and infrastructure. i.e. development of the TWH Service Charter – Person Centered Care and the Service Conversation.
- Development of a scent free policy.
- Continued educational awareness and at times intense customer service training to staff and physicians on how patients perceive their interactions across all three sites.
- Wireless Internet

- Due to recent audit with Housekeeping, our feedback was used to implement more coverage to ensure high traffic areas were being maintained at all three sites.
- Improving written instructions in CT to reflect verbal orders.
- More regular and staxis wheelchairs ordered.
- Updating provincial Ontario Breast Screening Program letter to patients to reflect accurate booking times.
- Advocacy efforts successful in order to get more clarity regarding funding of certain cancer drugs.
- Better communication achieved via switchboard to ensure correct information regarding clinics are being provided since impacts patient safety.
- Continued advocacy for accessible parking, especially regarding rates and provide refunds / vouchers when necessary.
- More hand washing stations installed in clinic areas.
- Advocacy efforts successful in providing vegetarian meal option at Women's Own Detox Shelter.
- Patient offered to start volunteer support group for young people with cancer. Coordinated with Healing Beyond the Body Volunteer Program to make this possible.
- Change tables installed in male bathrooms at TWH.

8. Observations that may minimize conflict in the future

8.1. Rising Frustration:

Patients / family members continue to be increasingly anxious about changes to the health care system. Furthermore, they are experiencing increased levels of frustration by what they perceive to be a decline in the service and quality of health care. Often both of these sentiments are exacerbated by unrealistic expectations of what individual care providers or the hospital can provide. Furthermore, there is an increased level of anger / frustration, in part, prompted and heightened, by media reports. The culmination of these factors result in conflicts between the patient / family and the members of the health care team. Recognizing the existence of a constant level of frustration may alter some of our own approaches to the patient / family.

8.2. Early Identification/ Early Access of Patient Relations Services Established:

The Patient Relations department has found that early identification of a problem situation and early accessing of the Patient Relations service has been extremely helpful in pre-empting conflicts and in limiting grievances. Based on our data for the last two years, staff and Physicians are contacting us earlier than before and this has resulted in successful resolution of issues. We are hopeful that this trend will continue in 2010/2011.

8.3. Communication:

The issue of communication is a complex complaint, which can be frustrating to everyone involved. We have found that often patients / family members have questions about issues, which have little or no substantive clinical importance, but the questions are important to them. Recognition that what might be most important to patients is not necessarily most important to health care providers is an important part of improving ongoing communication / information sharing.

8.4. Attitude:

We find that if staff do not present themselves in a professional, courteous manner then patients and visitors are left with the perception that they are rude and disinterested and that they did not receive good clinical care. Our department will continue to educate staff on how important that "first impression" is and we are hopeful that the Service Charter that is currently being explored at the Toronto Western Hospital will be adopted and used across all three sites.

8.5. Patient / Family knowledge of the healthcare system:

Patients / family members are more interested in knowing about their illness and they do more research than any generation before. The media (television, websites, blogs etc.) often give patients a skewed version of what occurs or what doesn't occur in hospitals. Patients / family members should be encouraged to use the excellent resources available in the Patient Education centers as much as possible in order to get a more realistic and accurate view of their illnesses and the processes / resources available at UHN.

Conclusion:

As we review our activities and achievements this year, the Patient Relations department feels that it has successfully supported UHN goals of providing exemplary patient care, research and education. Our work has contributed to patient safety, patient centered care and quality improvement initiatives. We have demonstrated our commitment to creativity, accountability and education for our patients and our community through our work directly or indirectly through our association with other departments. Our department has been acknowledged for its demonstrated excellence in terms of best practices, publications and system leadership. We feel that our day-to-day actions and behaviours as individuals and as a department demonstrate and model UHN's values of caring, integrity, teamwork, respect, innovation, excellence and leadership.

As in previous years and in the spirit of transparency, the Patient Relations department will be sharing this report broadly, in hard copy and via the UHN intranet.

We look forward to a positive reception to this report and we look welcome your suggestions and feedback.

Respectfully submitted,

Sharon Rogers
Hospital Ombudsman
Director, Patient Relations

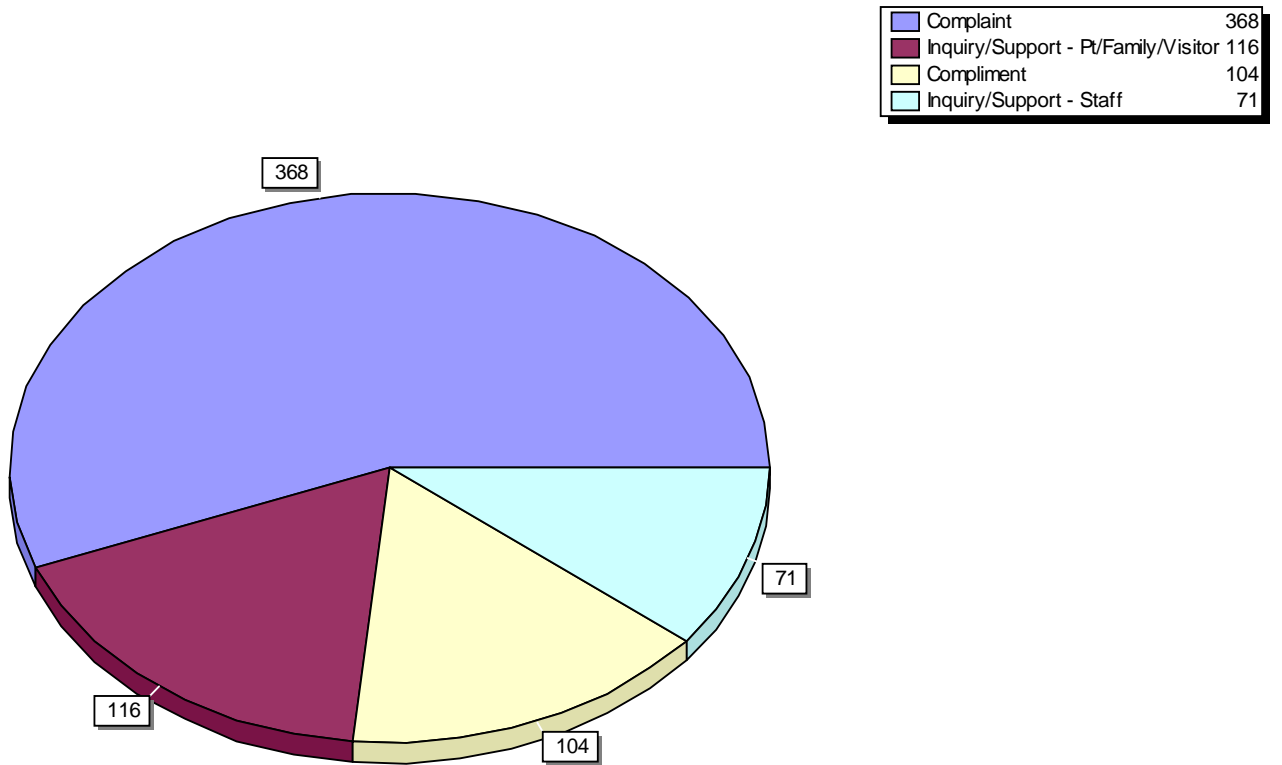
Vasiliki Bakas
Coordinator, Patient Relations
Office of the Ombudsman

At this time we make special recognition of the wonderful staff in the Patient Relations office: Mrs. Terry Gordon and Ms. Erika Sedge.

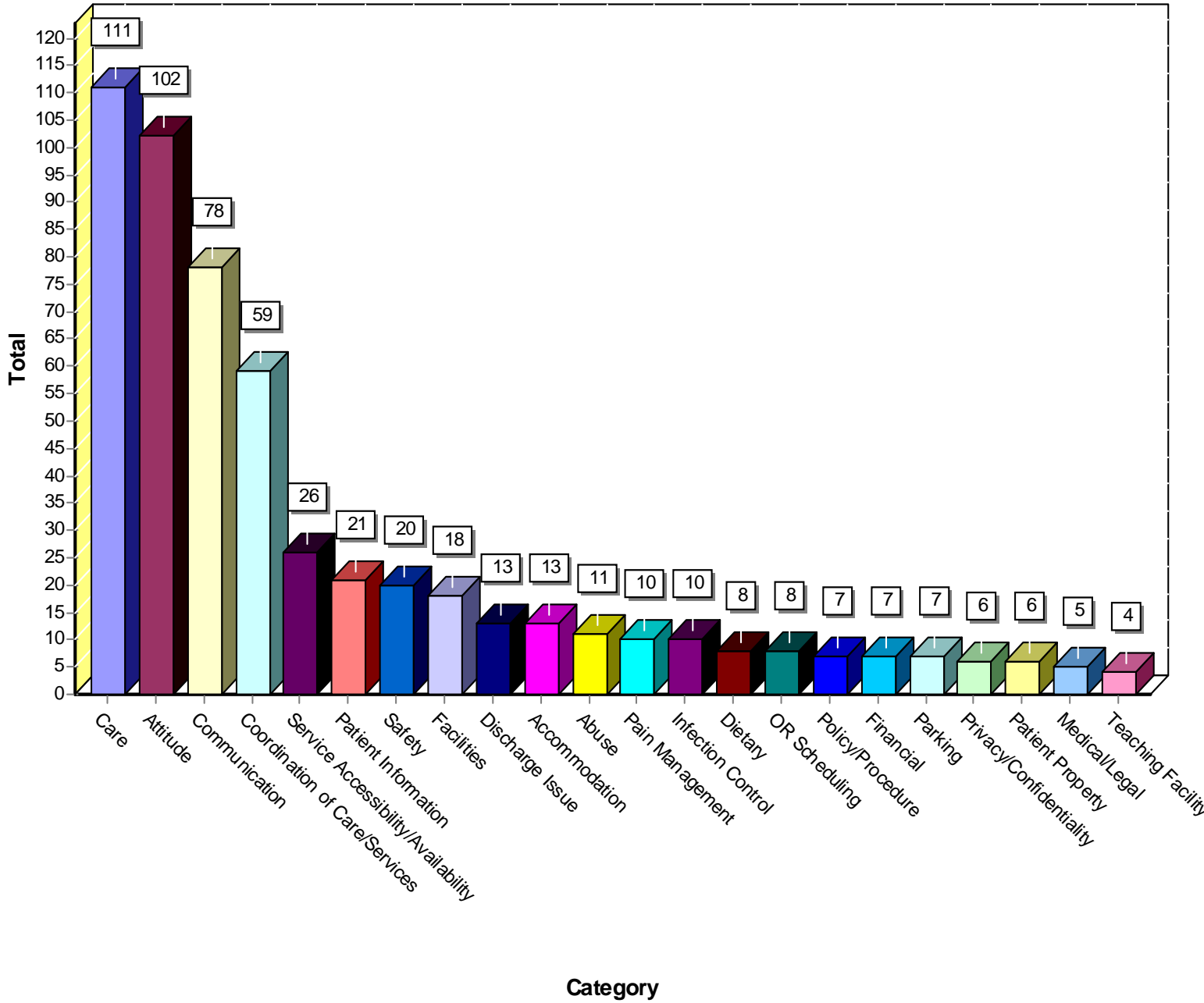
¹ Founding Member of the Ontario Patient Representatives Association and lead from 1994 to 2004.
Founding Member of the Canadian Patient Representatives Association and Ontario lead, from 1995/6 to 2004.
Winner of the 2006 National Patient Advocacy Award, Society of Healthcare Consumer Advocates. (international)

APPENDIX 1

TGH BREAKDOWN OF FEEDBACK RECEIVED



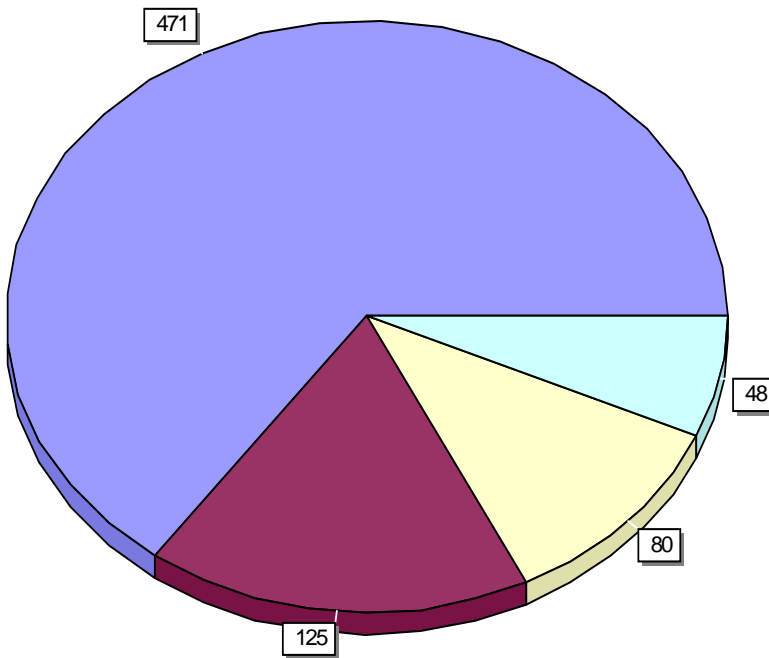
TGH Complaints By Category



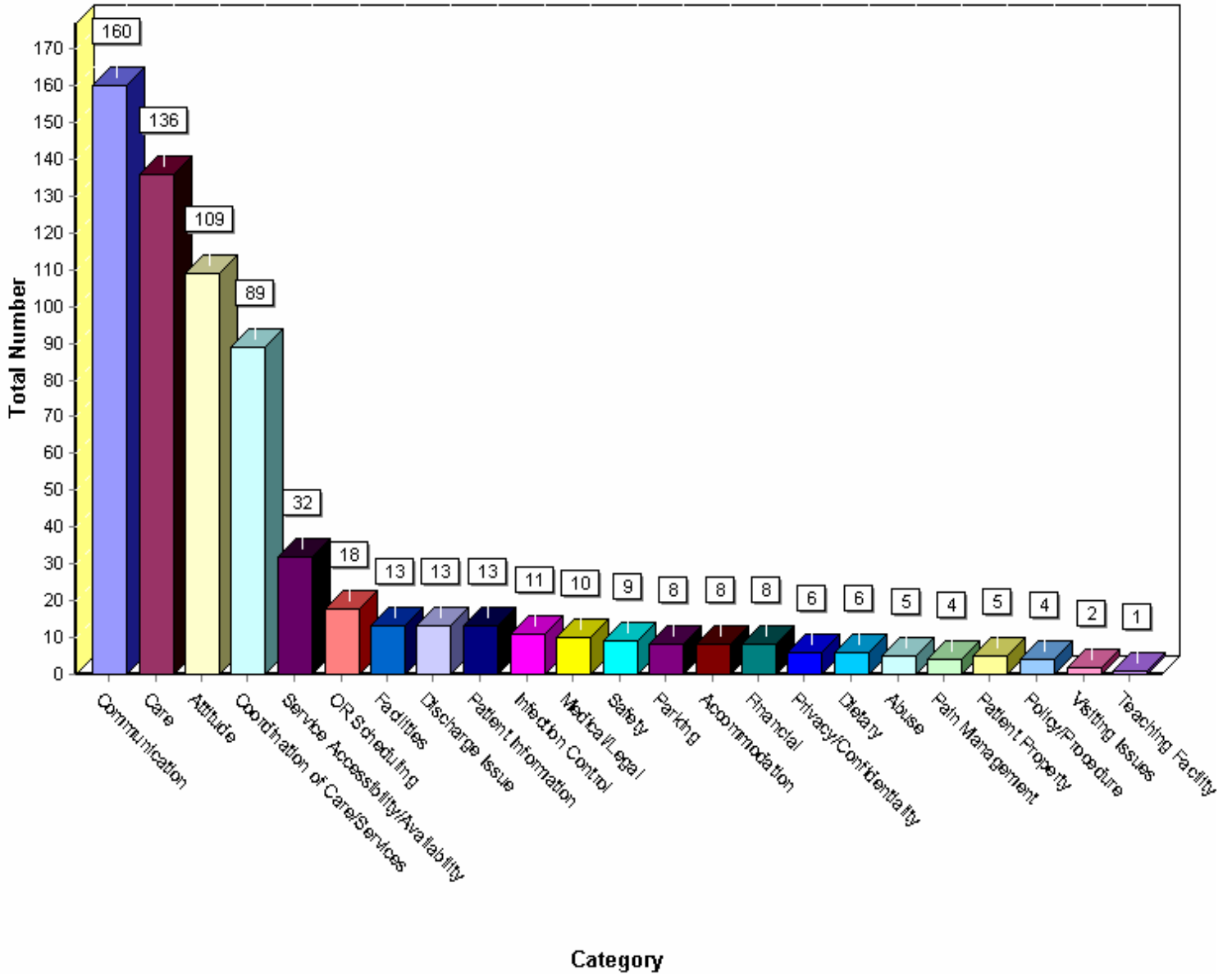
APPENDIX 2

TWH BREAKDOWN OF FEEDBACK RECEIVED

Complaint	471
Inquiry/Support - Pt/Family/Visitor	125
Compliment	80
Inquiry/Support - Staff	48

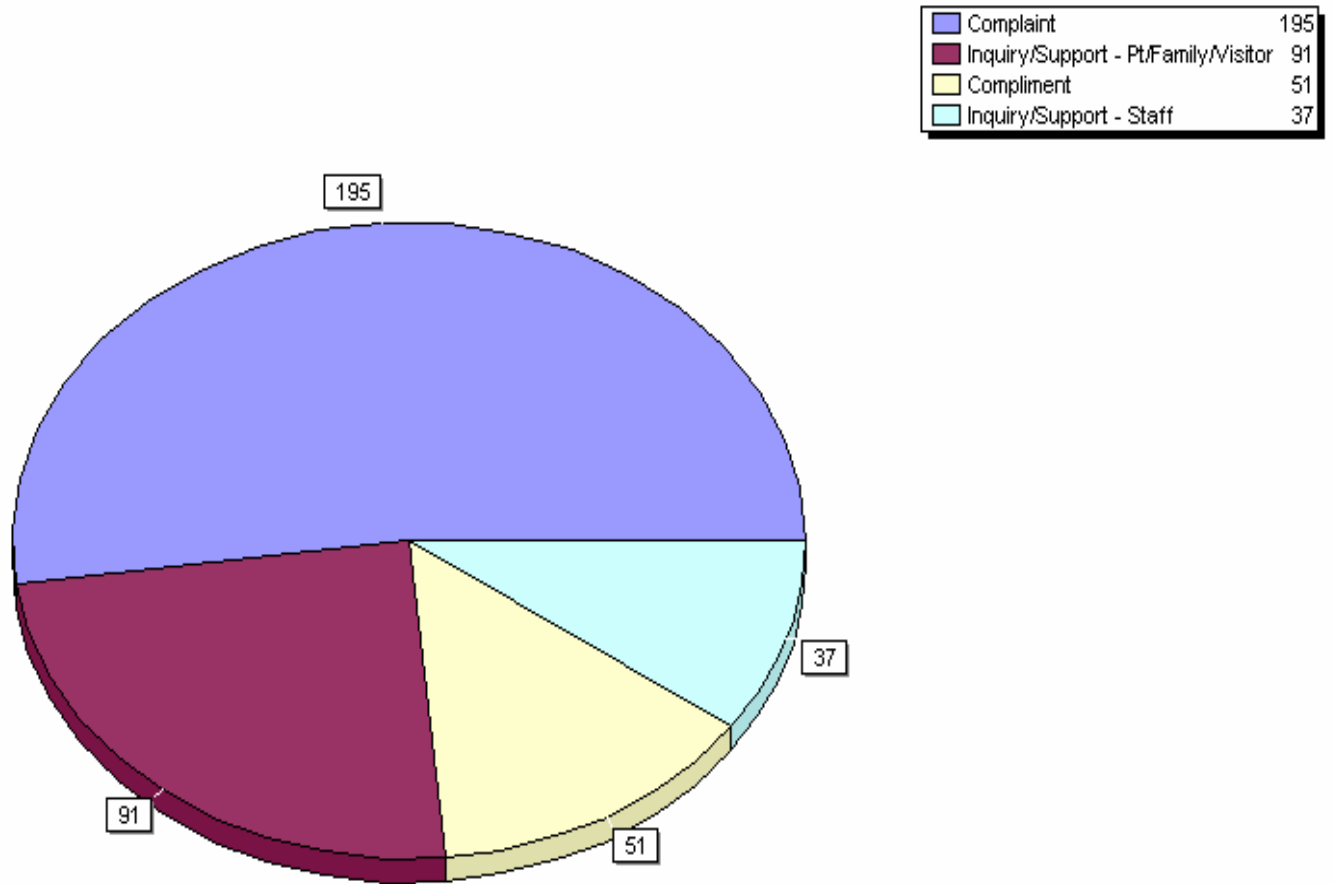


TWH COMPLAINTS BY CATEGORY

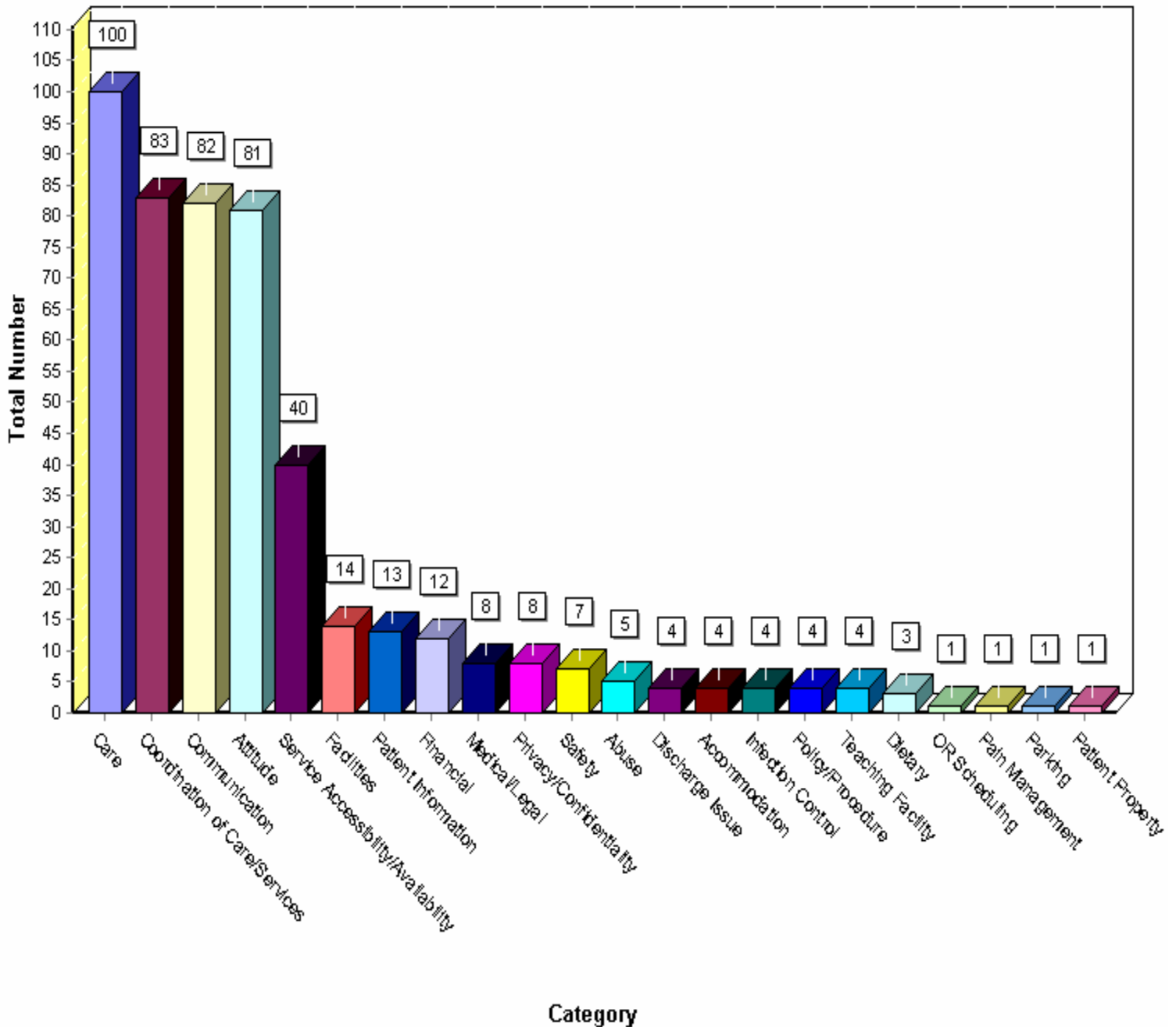


APPENDIX 3

PMH BREAKDOWN OF FEEDBACK RECEIVED

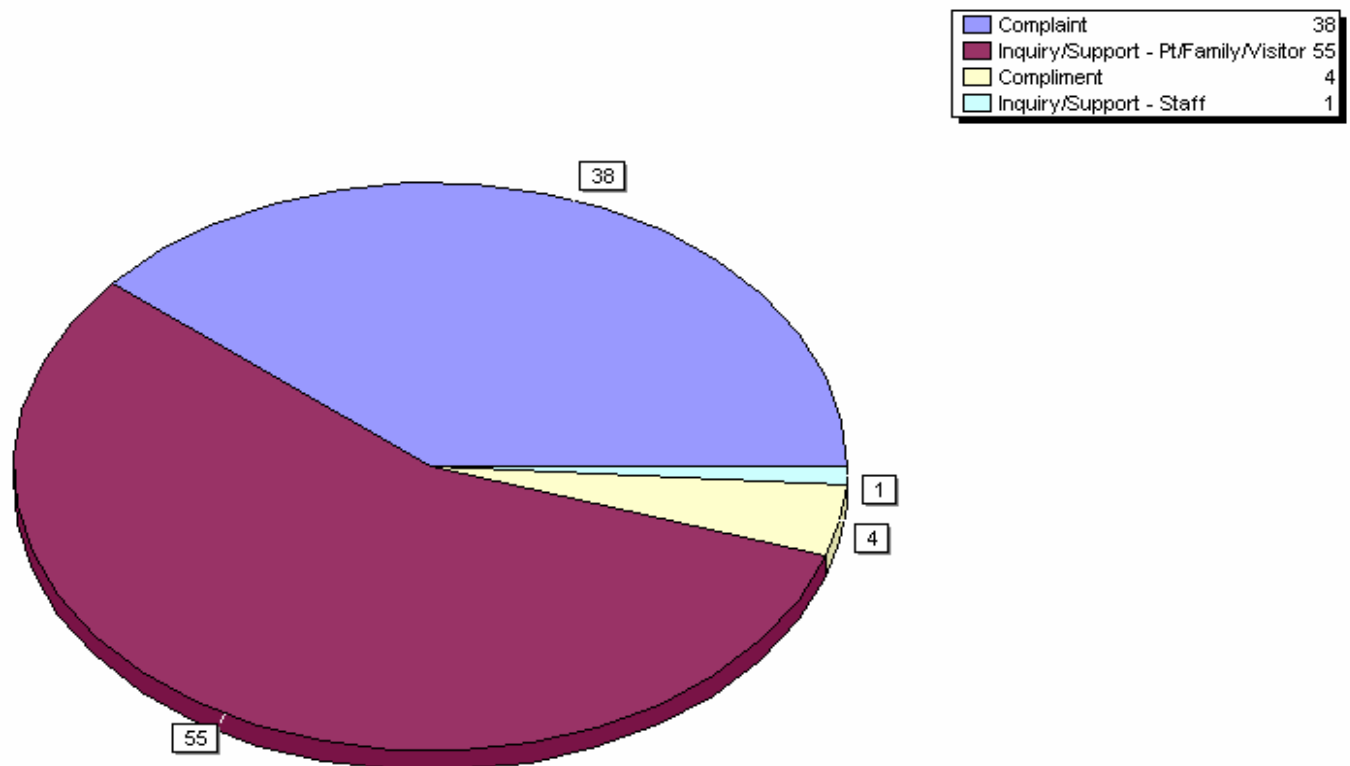


PMH COMPLAINTS BY CATEGORY



APPENDIX 4

UHN BREAKDOWN



The remaining 38 complaints pertain to UHN functions, such as administration and Finance. The majority of the UHN feedback received are patient inquiries and supports. Most of this feedback is mostly about finding out more information about administration and Patient Relations.