

**Freedom of Information Act 2000**

**The Royal Cornwall Hospitals NHS Trust Response to Information request**

**Date Request Received: 4<sup>th</sup> June 2025**

**FOI Ref No 29075**

**Requested Information:**

1. A copy of your current **Patient Experience and/or Engagement team structure** (organogram or equivalent), including job titles and Agenda for Change bandings.
2. A copy of your current **Quality Governance structure** (organogram or equivalent), including job titles and Agenda for Change bandings.
3. The **number of WTE staff** within the Patient Experience/Engagement team, along with the **banding and job titles** for each role.
4. Details of the **directorate or division** this team sits within (e.g. Quality, Governance, Nursing).
5. Your Trust-wide **target timescales** for formal **complaint responses** (e.g. 25, 35, or 60 working days) and any **tiered or risk-based approach** used.
6. A brief summary of how the Patient Experience and Engagement function **feeds into the wider quality governance structure**, including:
  - o Reporting lines
  - o Committees or Boards it reports to (e.g. Quality & Safety Committee, Patient Experience Group)

Whether the team contributes to formal **Board reporting** or statutory returns (e.g. complaints, surveys)

**Response:**

1. Please see appendix one
2. Please see appendix one
3. Please see appendix one
4. This team sits within the Directorate of Clinical Governance.
5. The Trust operates a single standardized timeframe of 30 working days for all formal complaint responses. We do not currently use a tiered or risk-based

approach. All complaints are managed within the same 30-day target to ensure consistency and clear expectations for complainants. Where exceptional complexity requires additional time, we contact complainants to discuss and agree appropriate extensions.

## 6. Reporting Line:

Patient Experience Manager → Associate Director of Quality Governance → Director of Nursing, Midwifery, Allied Health professionals → Chief Nursing Officer

### **Committee/Board Reporting:**

#### **Monthly reporting to:**

- Patient Experience Group
- Nutritional Steering Group Report
- Patient Safety Incident Response & Oversight Group Report

#### **IPR monthly reporting:**

- Complaint response times
- Formal/Informal Complaint received by location exact
- FFT Survey response rate

#### **Quarterly reporting to:**

- Children And Young People Committee
- Quality Assurance Committee of the Board
- Patient Experience Group (Complaints analysis and themes, Friends and Family Test response rate, Volunteers Report)
- CQC Engagement Report:
- Reports for other clinical governance group and other sub – committee groups

#### **Statutory Returns:**

- KO41
- National Patient Survey results

### **Attachment(s):**

Appendix One - FOI Ref 29075 Structure Chart Clinical Governance June 2025

**Date Response sent: 25<sup>th</sup> June 2025**