



Handling and
Learning From



Feedback

Annual Report

2020 - 2021

On behalf of Dr June Brown, Executive Nurse Director
this report was produced by:

Lisa Blues, Complaints and Feedback Advisor, NHS Grampian

Kirsten Dickson, Quality Improvement & Assurance Facilitator,
NHS Grampian

Jenny Ingram
Associate Director, Quality Improvement and Assurance,
NHS Grampian

If you have any feedback you would like to share with us please
email: gram.nhsgrampianfeedback@nhs.scot

Contents

2	Foreword
3	2020 – 2021 At a Glance
4	Encouraging and Gathering Feedback
11	Handling Complaints
21	Service Improvements
23	Staff Development
25	Accountability and Governance
27	What Next?

Foreword

With the arrival of the COVID-19 pandemic in 2020, NHS Grampian has faced some of its most challenging periods in time, pushing our core values of Caring, Listening and Improving to the boundaries of possibility. The way we used to work has changed and we have had to adapt to the new pressures and challenges faced from COVID-19 pandemic, including how we listen and respond to the feedback shared by the people of Grampian.

Now more than ever, it is essential we hear from the people who use our services to seek views and learn from their experiences, allowing us to continually build, design and improve the services we deliver.

NHS Grampian's response to COVID-19 will remain part of our everyday lives for the foreseeable future. It is important we continue working together to manage COVID and design our systems collectively, based on much valued learning from experiences of our patients, staff, visitors, carers and support networks.

This annual report provides a summary of NHS Grampian's feedback and how the information has been utilised to inform improvements within the system.

Dr June Brown
Executive Nurse Director



2020 – 2021 at a Glance



436 Compliments

A total of 436 formal compliments received by the Feedback Service.



1,206 Complaints

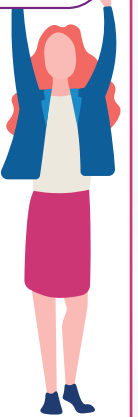
We received 1,206 complaints during the year, of which 177 were related to prison healthcare.

27 SPSO

The Scottish Public Service Ombudsman contacted NHS Grampian about 27 complaints.



- 373 stories were shared on Care Opinion about NHS Grampian
- 69% of those stories were positive



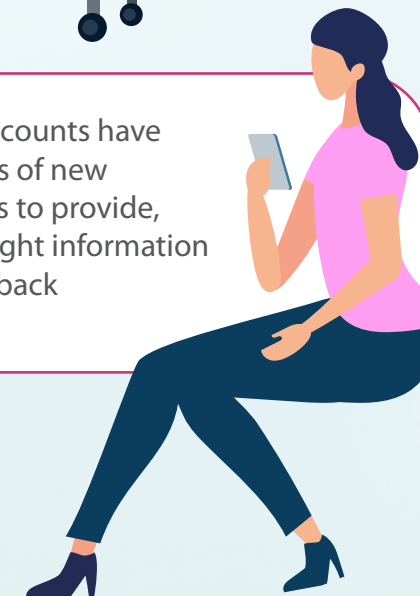
These stories have been read 188,425 times, averaging 505 times per story.

2,314 Patients

We are grateful to the 2,314 patients who provided feedback to us about their hospital stay using the Care Assurance and Reflection (CAR) Tool.



Our social media accounts have attracted thousands of new followers helping us to provide, promote and highlight information and to receive feedback



2,244 Staff Trained

During the year we have trained 2,244 staff in:

- Complaints Handling online
- Equality and Diversity



Encouraging and Gathering Feedback

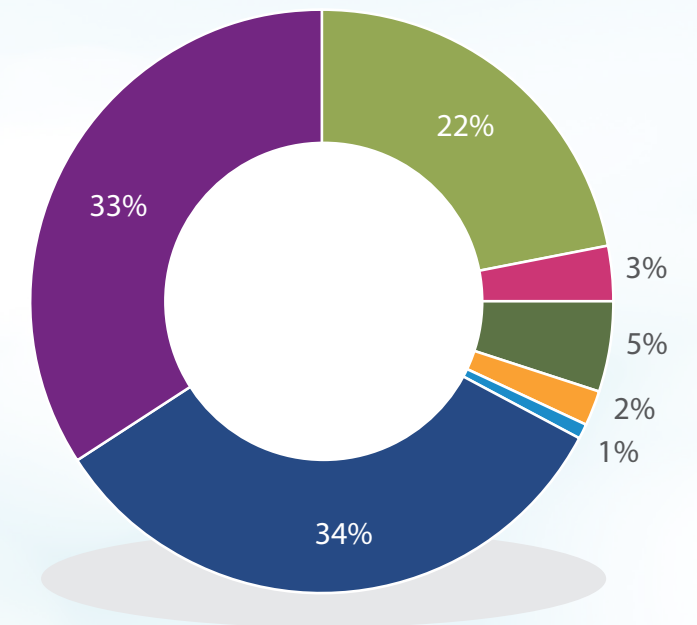
A wide variety of methods to encourage and gather real time experience are used, with the aim of making people feel their feedback is welcomed. Local processes and procedures have been developed to comply with the principles and policy intentions of the Patient Rights (Scotland) Act 2011 to support delivery of compassionate, person centred care.



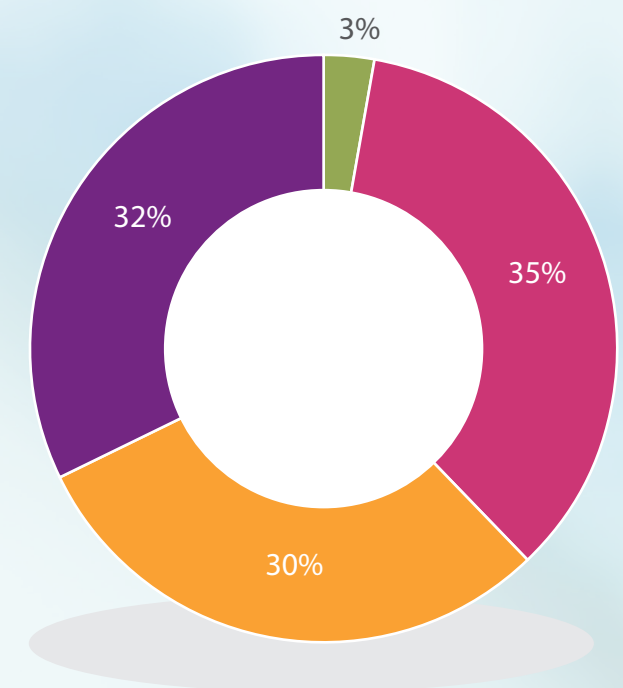
Compliments:

We received 436 formal compliments. The charts below show the themes of these compliments and the staff groups these related to.

- Admin Staff
- Facilities Staff
- Nursing staff
- Pharmacy Staff
- Allied Health Professionals
- Medical staff
- Multiple staff Groups



- Attitude and Behaviour
- Clinical treatment
- Communication
- Facilities (inc. environment, catering etc.)



Care Opinion:

With the growing recognition of people's voices shaping the future of our health services, NHS Grampian encourage all services to actively engage with Care Opinion as a way of listening to what people have to say and provide empathetic and individualised responses.

Between 1st April 2020 and 31st March 2021, 373 stories were shared on Care Opinion about NHS Grampian, a decrease of 2.0997% since last year.

What Was Good?

- This year NHS Grampian's stories have been read 188,425 times. This averages 505 times per story
- 69% of stories were positive
- Stories most commonly show people think staff were friendly, caring and supportive.

What Could Be Improved?

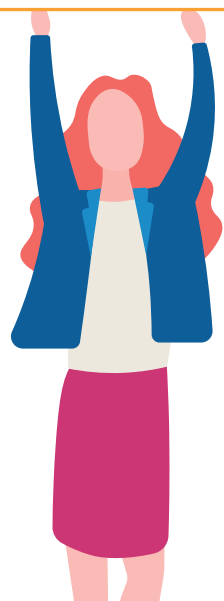
- Communication and staff attitude were identified as the most common aspects for improvement
- Although support was the 3rd most commonly used positive tag, thirteen stories highlighted this as a specific area to be improved

How Did You Feel?

- The most common terms used were thank you, grateful and at ease.
- There were additional terms that can be used to identify areas for improvement e.g. let down, rushed and given up on.

How Do We Use Feedback?

- Stories are live on the intranet
- Stories are shared regularly on our social media sites, at various local meetings and events and the Engagement & Participation Committee



69%

Stories were
Positive

NHS Grampian's
Stories have been read
188,425 times

Care Assurance

Excellence in Care is a national approach which aims to improve, integrate and coordinate the way nursing and midwifery services are delivered. One of the key deliverables is care assurance. The Care Assurance Tool (CAT) is used in NHS Grampian to help us to deepen our understanding of staff, patient and carer experience. The requirement is for five CATs to be completed per ward per month. This gives a rich picture on the care and experience we provide as told to us by our patients and families. Outputs from the use of the CAT help guide and direct improvement initiatives.

2,314 Patients told us:

The best thing about being in hospital

- Feeling safe
- Needs were met
- Involved in my care
- Buzzer answered promptly
- Having my own room
- Well looked after
- Friendly staff
- Kept informed
- Supportive staff

What would have made your hospital stay better

- Buzzers aren't always answered quickly
- Having more time with staff
- Getting home quicker
- More information about getting home
- Seeing my family more
- Getting test results





Public Involvement Team

The Team encourage and support people from a range of backgrounds and experiences to be involved and have their say about services provided by NHS Grampian. Opportunities to get involved vary greatly, from attending focus groups or meetings, giving views by email, phone or through electronic questionnaires shared on social media platforms.

The COVID-19 Pandemic has changed the way members of the public can be involved which has brought benefits as well as challenges. It is now easier than ever to get involved 'digitally or virtually' without having to leave your home, providing you have access to a smart phone, device, laptop or PC.

There is also more convenience for members of the public who sit as Public Representatives on our Board, Committees and other meetings, as these now all take place on MS Teams, meaning there is no travel time or expenses to claim. However if you don't have digital access then it is more difficult to get involved. To reduce this barrier we are making engagement activities available through post, tapping into community groups that already take place and will continue to try and reach members of the public who may find it more difficult to have their voice heard.

As well as engaging with members of the public, the Team also engage and consult with staff to ensure their views are represented in service changes. The Team also providing advice and guidance about how they can best involve patients, carers and members of the public in their work.

Social Media

Communication tools are used to promote opportunities to provide feedback. NHS Grampian established a presence on Facebook and Twitter in 2011, also establishing a presence on LinkedIn and Instagram. These accounts can be viewed by anyone and are used to provide, promote and highlight relevant information, as well as receiving feedback.

The main updates posted in 2020-21 have concerned the COVID-19 pandemic, namely sharing information and advice on staying safe, highlighting changes to restrictions, providing details about testing, reminders about test & protect, details about the vaccine and the delivery of it to the population across the region.

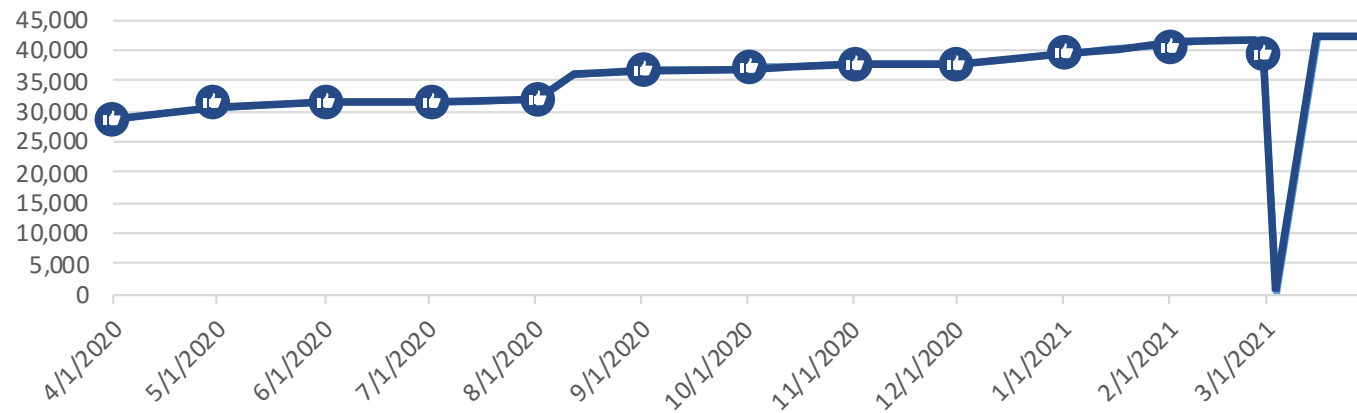
During the pandemic there has been a steady increase in the number of users using these platforms to get in touch to ask questions and provide feedback, for example relating to the vaccination programme and hospital visiting arrangements.

Our Facebook posts reached a total of 4,203,259 people during the financial year (that's an increase of 417.3% on the previous year).

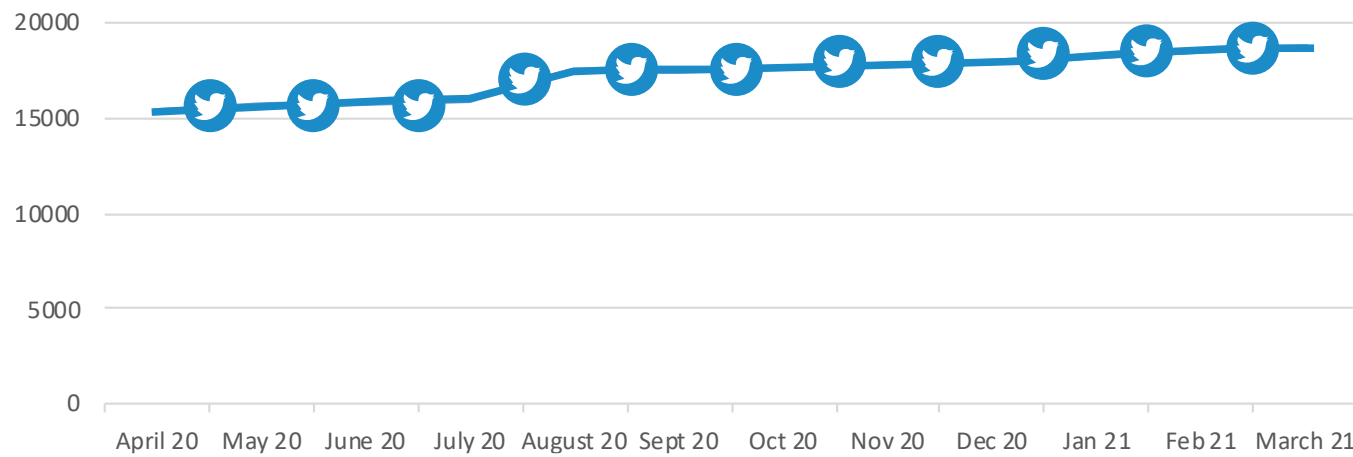
The total number of Twitter followers increased from 15,392 (in April 2020) to 18,705 (in March 2021) – an increase of 21.5%. During this period, our tweets were viewed 11,975,000 times.



Total Number of Facebook Page Likes



Total Number of Twitter Followers



Equality and Diversity

NHS Grampian has three active Working Groups and one active Committee dedicated to ensuring that members of our local equality and diversity communities have an active voice to support continuous improvements to the design and delivery of services.

REWG Racial Equality Working Group

- Membership includes:**
- Grampian Regional Equality Council
 - Local ethnic communities
 - NHS Grampian Staff

- 5 multilingual involvement yearly consultations events
- Information from local ethnic community groups
- NHSG staff working with local ethnic communities and individual members

DWG Diversity Working Group

- Membership includes:**
- Local diversity community groups
 - NHSG staff who provide services to local diversity communities

- Agenda and discussions include, sex (male or female), sexual orientation, gender reassignment, pregnancy and maternity, marriage & civil partnership

DDARG Disability Discrimination Act Review Group

- Membership includes:**
- Disabled persons
 - Chairs of disability groups
 - Carer or age related & organisations

- Yearly Involvement & Consultation seminars
- Drives disability and age related agendas and implementation of Annual Disability and Age Actions

SCC Spiritual Care Committee

- Membership includes:**
- Local faith communities spiritual care staff and volunteers
 - Representatives of faith and life stance groups

- Chaired by non-executive member of NHSG and Sub-Committee of Board.
- SCC is able to involve and consult widely through wide membership

Handling Complaints

Complaints come into the NHS Grampian Feedback Service from various routes, with the majority by Email. Once a complaint is received, an Email communication takes place with the relevant complaint lead on the day the complaint is received. This is to encourage prompt investigation and resolution of the complaint by telephone, where appropriate. All complaints, associated documents and communications are held centrally within our electronic risk management system, Datix.

Complaint leads are encouraged to make direct contact with individuals involved by telephone providing a more person-centred approach to complaint handling. We understand how important this is for complainants to clarify the issues they wish to raise and the outcome they are looking for. Meetings can also be offered to allow further discussion of the concerns raised. If the complaint can be resolved at an early stage, a written response to confirm the outcome, and any agreed actions to be undertaken by the service is offered.

Clinical treatment, bereaved, sensitive and complex complaints are, when suitable, supported by a named Feedback Officer, who will make contact with the individual to clarify issues, explain the process and to ask if they would like a meeting. This helps to ensure that individuals are aware of who to contact, the process and helps understanding that complex or cross sector complaints may take longer than 20 working days to complete. In addition the Feedback Officers are always available should any of the Independent Contractors require assistance dealing with a complaint. The Feedback Service remain in contact with independent contractors throughout the year.

To ensure learning occurs from feedback, service managers identify the learning opportunities for improvement, and record actions taken on Datix. Learning outcomes are included in shared learning events and assurance reports to demonstrate the learning and actions taken across NHS Grampian.

The Team Leader for the Feedback Service is a clinician and is also the NHS Grampian lead for adverse events. This has afforded the opportunity for triangulation of learning from complaints, adverse events as well as duty of candour and clinical risk. The Team Leader attends the weekly Clinical Risk Meeting led by the Medical Director and Executive Nurse Director. This meeting enables system-wide discussion, action and appropriately managed performance against national standards, in this case supporting timely responses to complaints.

NHS Grampian understands the importance of striving to improve the complaints handling process and in previous years an electronic survey link has been sent to all complainants to offer the opportunity to share feedback. As a result of the pandemic collection of data has been paused but will resume as soon as possible.



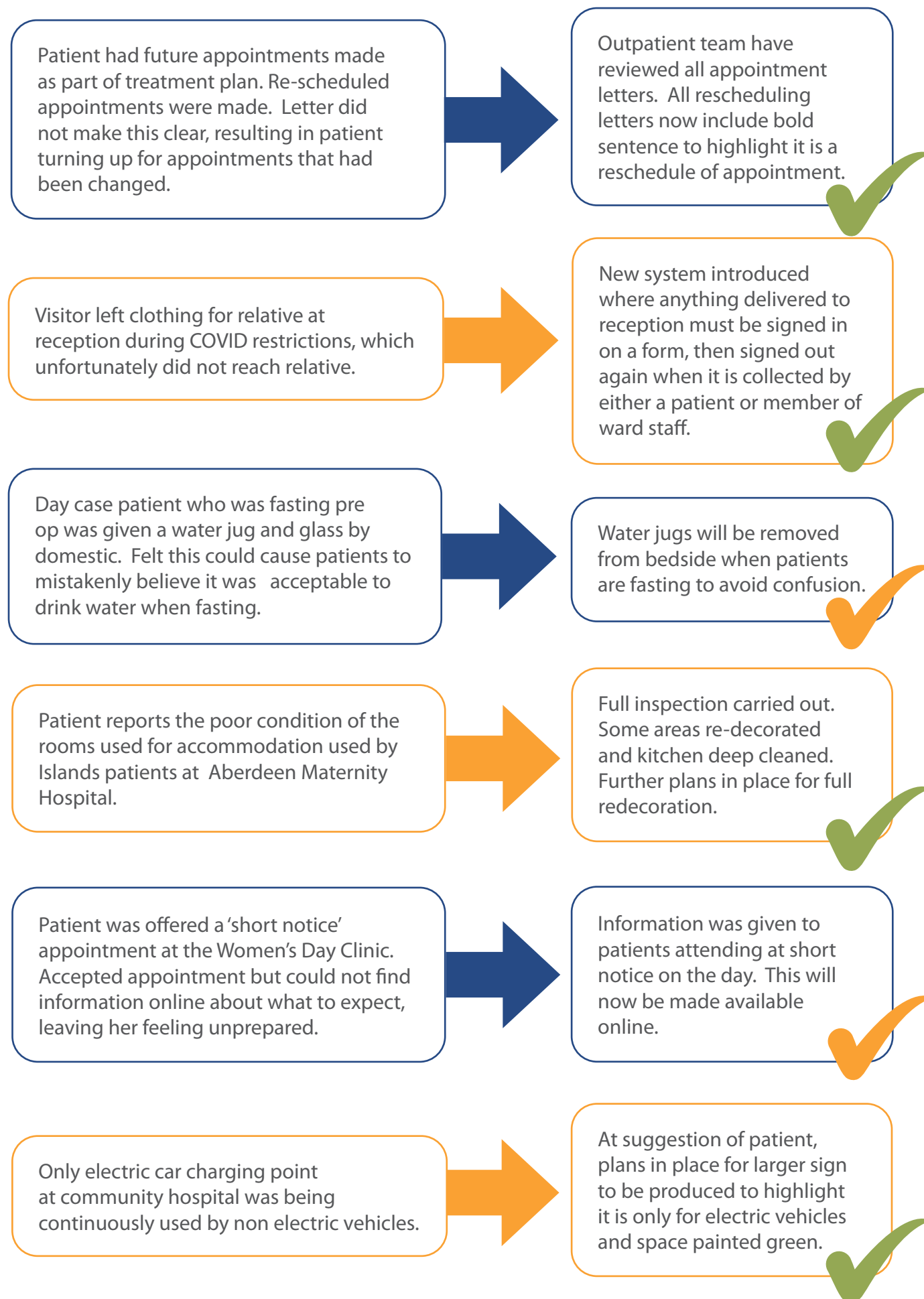
Learning & Action

Service Leads are responsible for ensuring that the learning from complaints is identified and action recorded in the appropriate fields in Datix. The learning and actions fields are reviewed by the Feedback Service to support services and share, as appropriate transferrable learning across the organisation.

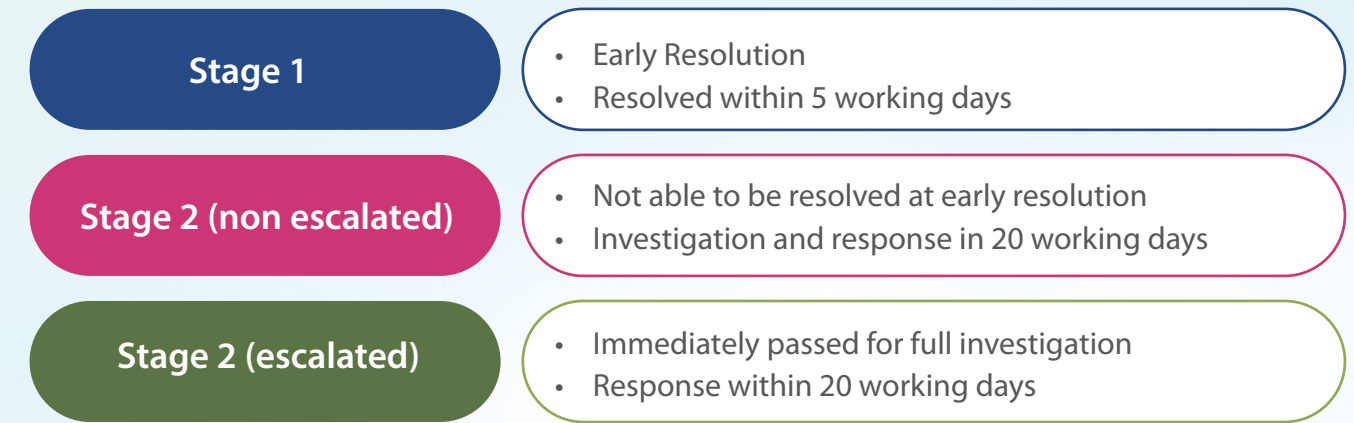
Actions taken as a result of a complaint	Total
Improvements made to access to services	48
Improvement plan(s) created and instigated	53
Improvements in communication staff-staff or staff-patient	440
Professional issues addressed	25
Staff development	107
Policy reviewed and amended	9
Risk issues identified and managed	29
Changes to systems/processes	46
Lessons shared with staff/patient/public	138
Review of waiting times to support improvement	82



Actions taken as a result of a complaint

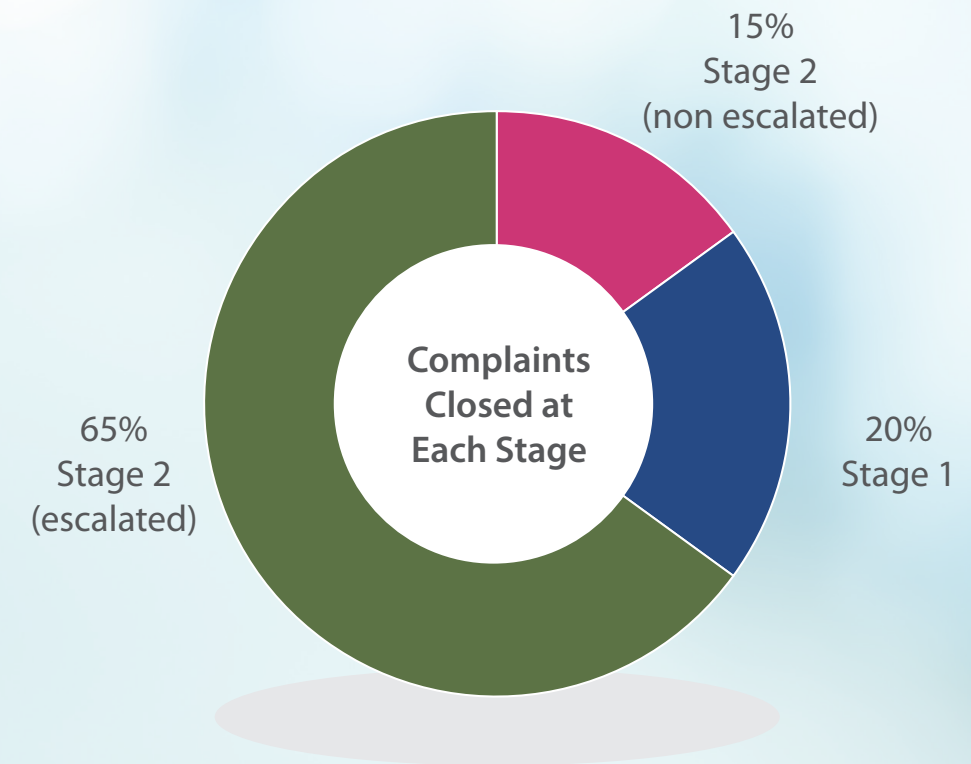


Complaints Response Times and Outcomes:

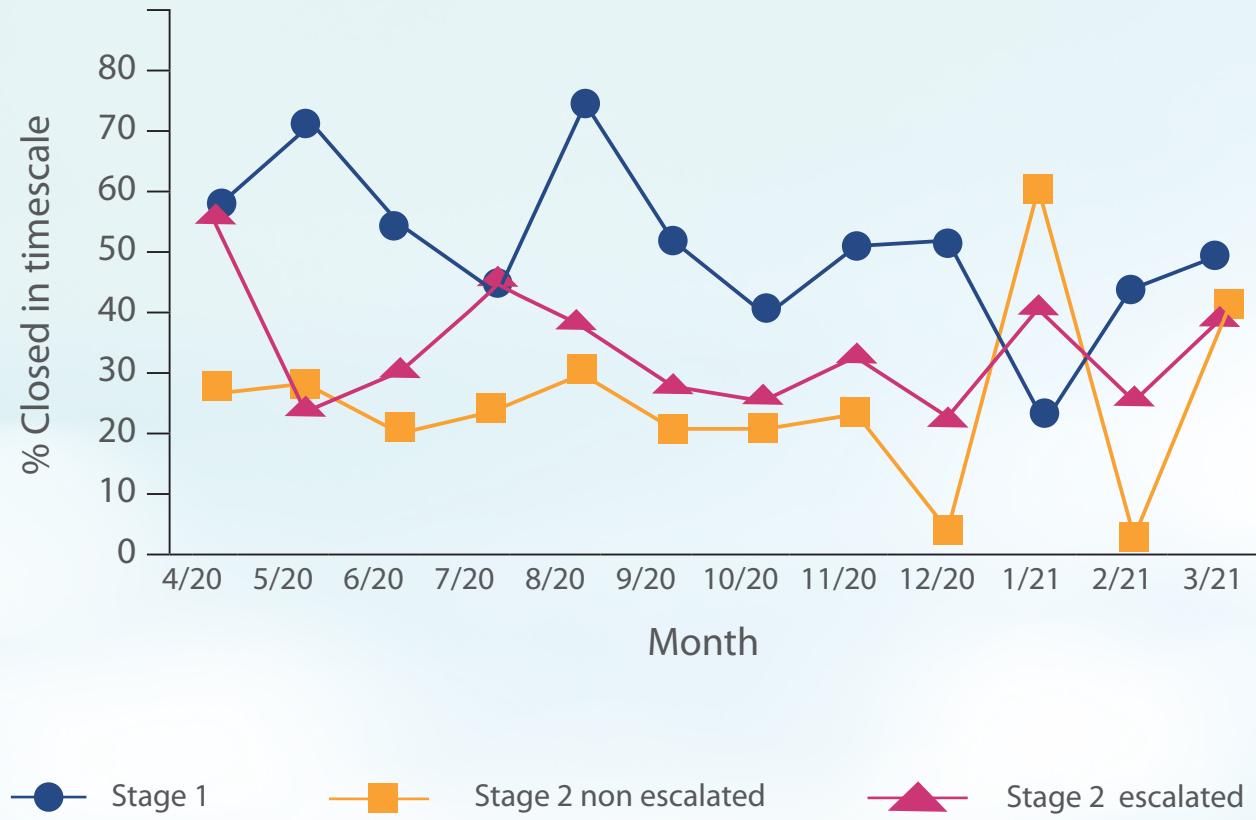


Complaints Closed

This chart illustrates the percentage of complaints closed this year at each stage. The chart below shows the complaints closed, in full, within timescales for each stage per month.



Complaints closed in full within timescale

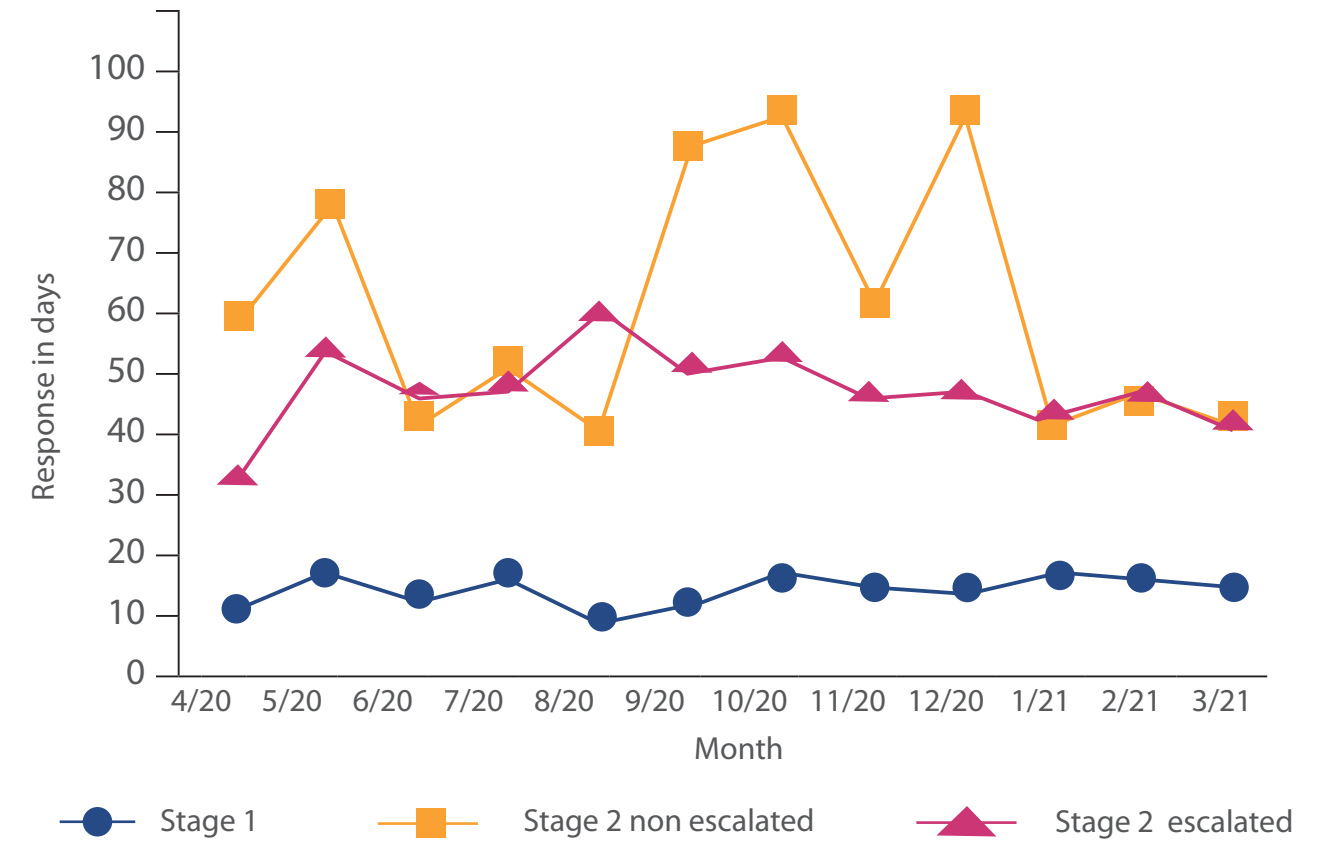


Average Response Times

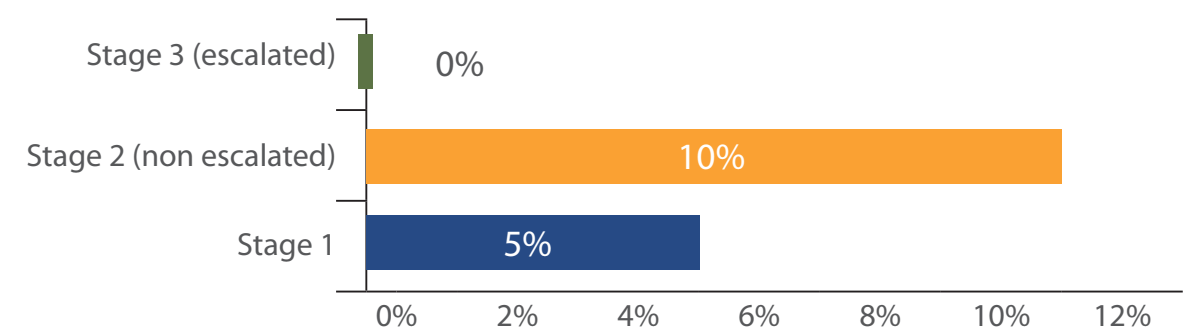
The response times for each stage in working days, is illustrated in the chart below, along with complaints closed within timescales. This remains an area for further work to show sustained improvement.

Some complaints may involve multiple services. In order to ensure that a full investigation of the complaint is completed there are times when an extension to the response time is authorised. This is to ensure a comprehensive response answering all concerns is provided to the complainant. As can be seen from this chart the percentage of complaints that require this authorisation are small in number.

Average Response Times (in days)



Percentage of cases where an extension was authorised



Complaints Outcomes

These charts illustrate the outcomes for complaints closed at each stage. Chart 1 shows that on average over the year 65% of Stage 1 complaints were upheld, 22% were not upheld and 13% were partially upheld.

Chart 2 illustrates an average of 45% of Stage 2 non-escalated complaints were upheld, 30% were not upheld and 25% were partially upheld.

Chart 3 for Stage 2 escalated complaints shows a similar pattern with on average 43% of complaints upheld, 38% not upheld and 19% partially upheld.

The learning from these outcomes will be factored into our sharing learning events

Chart 1

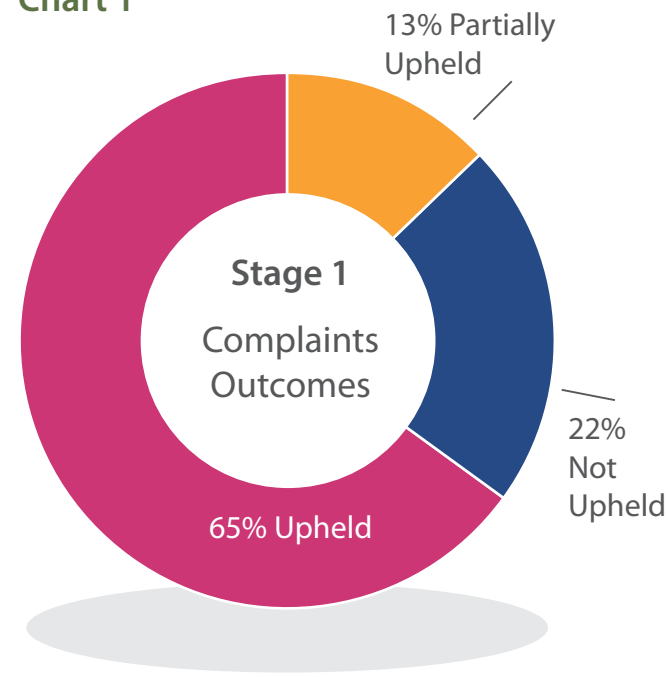


Chart 2

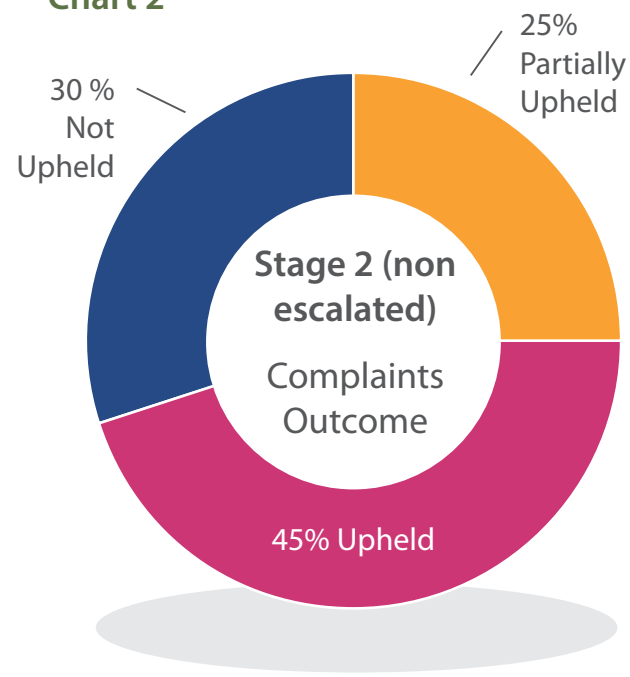
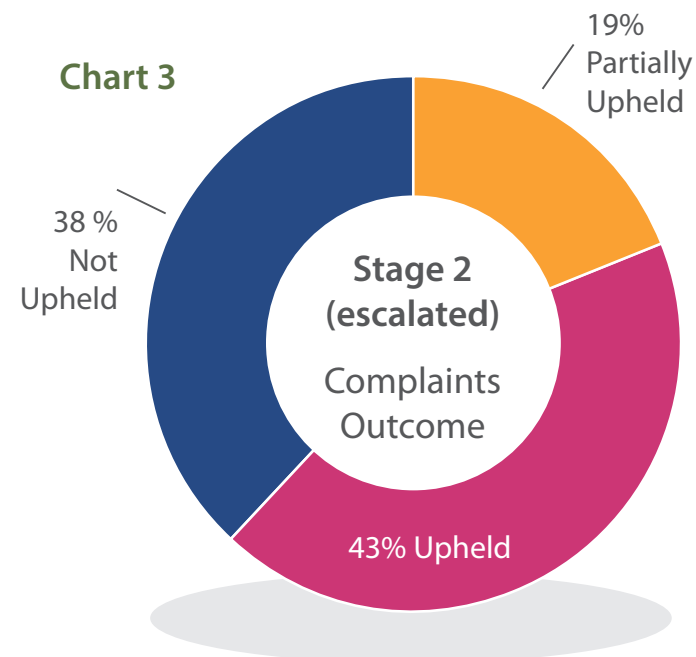


Chart 3

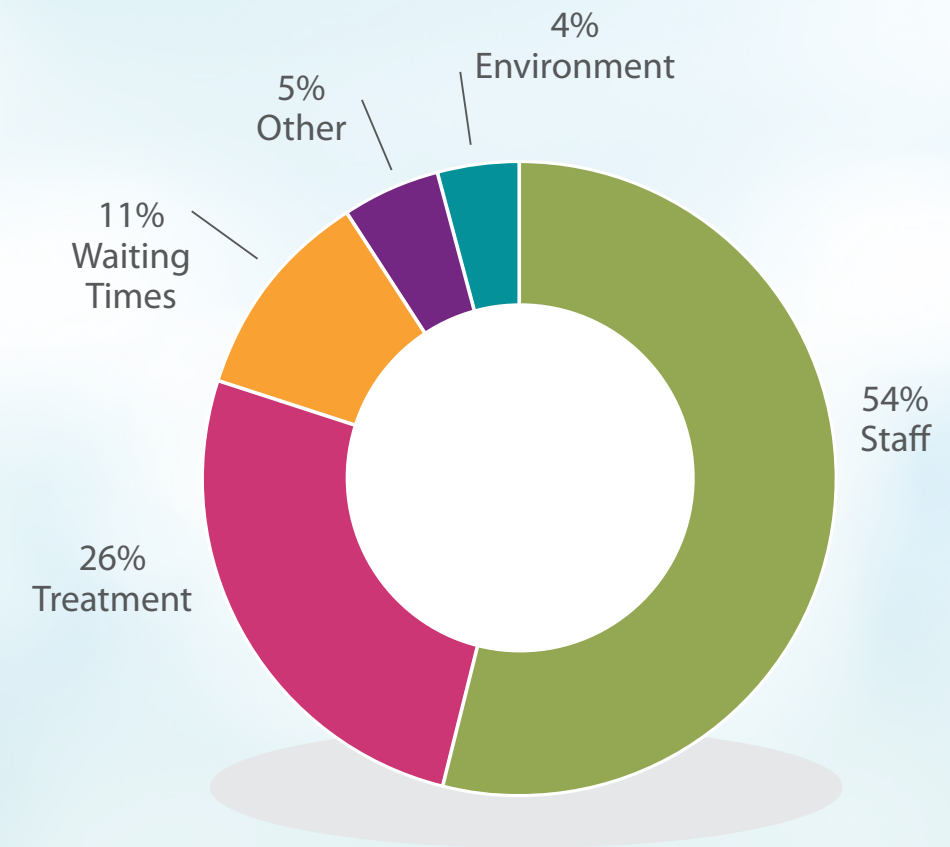


Complaints Summary

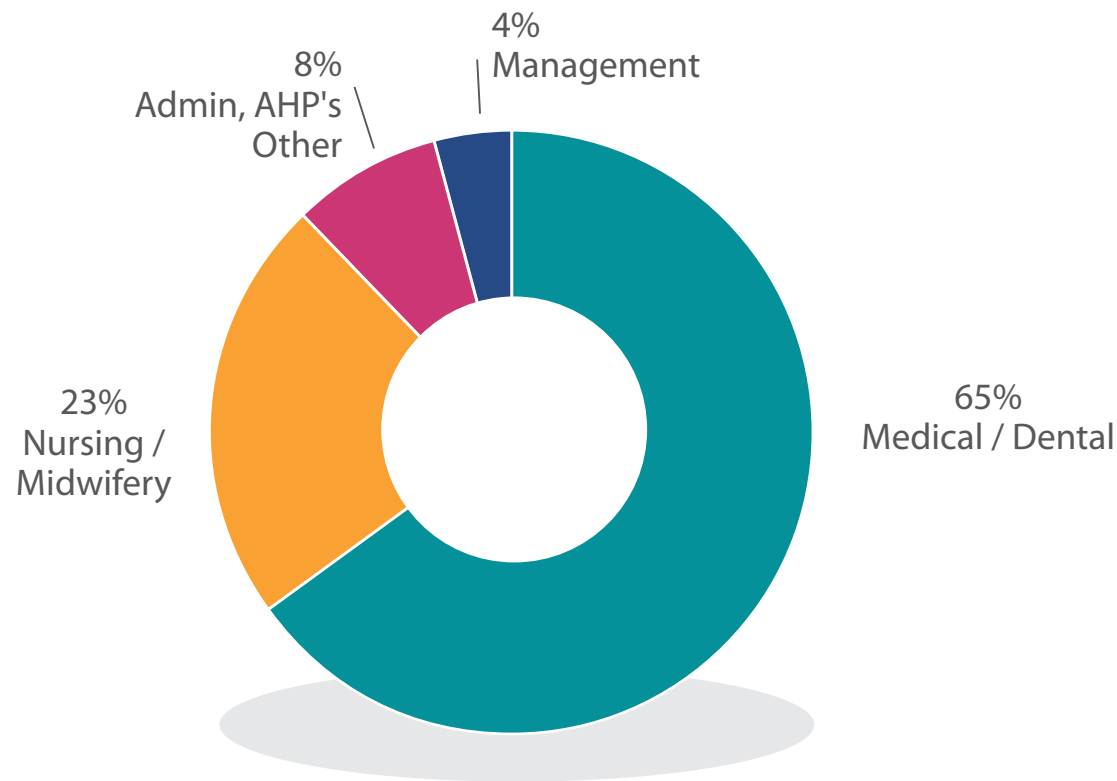
The charts below show the themes of the complaints we received over the year and the staff groups these complaints related to.

It is important that NHS Grampian utilises all feedback not just the lessons from moderate and major complaints, in order to identify common themes that can support changes to our processes and services.

What people complained about

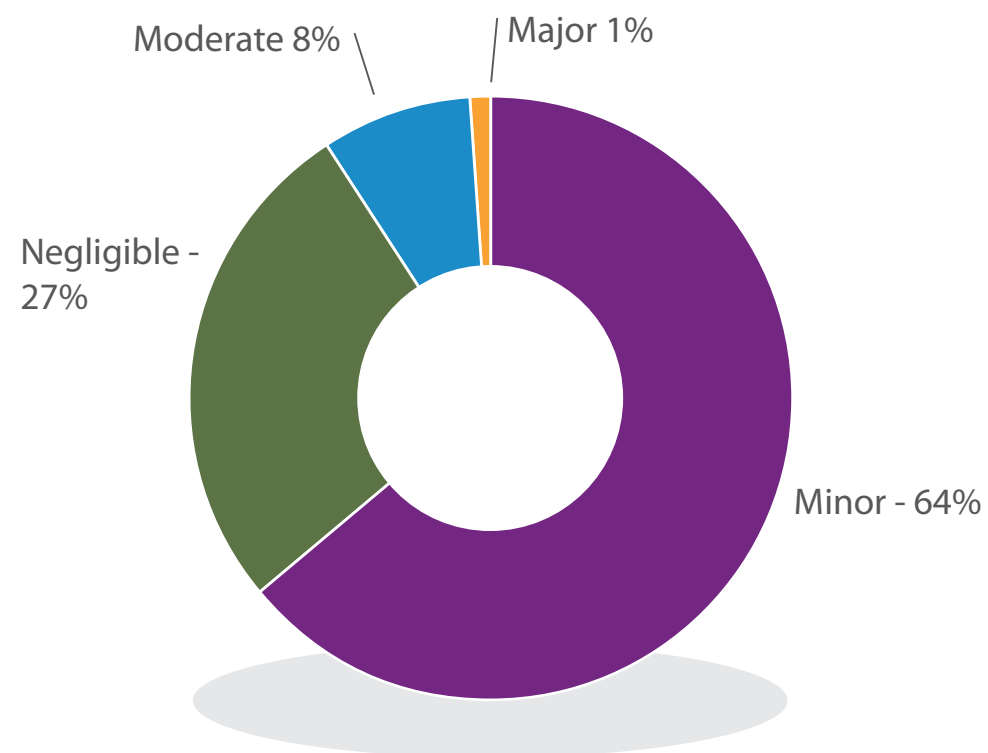


Staff groups people complained about



Complaint Severity

In looking at the severity of the complaints that are recorded on Datix we can see that the majority of complaints can be categorised as negligible or minor.



Service Improvements

NHS Grampian recognise this as crucial to maximise the value of the feedback we receive and has taken steps to support learning and improvement are recognised as the main outcome from feedback:

- Feedback is discussed at multidisciplinary clinical quality/governance meetings;
- Clinical treatment complaints are shared at a wide variety of learning events;
- Analysis of feedback is part of service reviews to identify any learning or themes that are transferrable and may require focussed improvement support.

Change Example 1:

Service Response: "I was admitted for an amputation and only bought trousers to wear afterwards. Due to the pandemic my family aren't able to travel or visit and the trousers are awkward and uncomfortable. A small supply of clothes on the ward to access would be really helpful."

Ward Response: "Staff have collected 2nd hand clothing including shorts and t-shirts which are now kept on the ward to help patients who don't have suitable clothing with them for after their amputation – this is sometimes because they haven't had the time or resources before arriving at hospital or the don't have family support."

Change Example 2:

Service Response: "The ward looks untidy with wheelchairs and medical equipment at the sides of the corridors."

Ward Response: "We've had the joiner from the facilities team build us a large cupboard to store spare equipment. This makes it easier to keep the ward looking tidy and also the equipment clean."

Change Example 3:

Rosewell House, which offers ongoing acute and rehab care to patients as they move from hospital to community, gathered feedback from patients which identified that access to a newspaper would have improved their experience and stay at Rosewell.

Staff contacted the local paper, who kindly agreed to supply newspapers free of charge, these are picked up daily by staff on their way to work. The reaction of some of the patient's on receipt of their paper has been quite emotive. It really is the little things in life that matter the most and make a difference.

"What Matters for Patients" - at Rosewell House 'Newspaper Quality Improvement'



The introduction of newspapers for patients has been influential for patients with a variety of medical conditions alongside dementia. Some of the statements gathered were from individuals displaying cognitive difficulties and dementia and go a long way to convey the isolation some individuals feel whilst in hospital and how a simple newspaper can bring sense of escapism, belonging, routine and aid with orientation all of which we can't put a price on.

Staff Development

NHS Grampian provided a range of opportunities to support development of person centred experience this year:

144 staff

Completed an eLearning module ensuring that staff are aware of the complaints handling process and the work of the Scottish Public Services Ombudsman. Real cases, anonymised, are discussed and staff are always interested to follow a case from beginning to end and learn about a person-centred approach to complaints.



Over the last year we have focused on updating our NHS Grampian Managing Adverse Events Policy and have developed new e-Learning training modules for staff involved in Adverse Event Reviews. The modules are designed to allow staff to complete the sections most relevant to the area of adverse events they are involved with, without the need for a face to face training session. Staff completion data will be available for the 2021-2022 reporting year.



2,100 staff

Completed a comprehensive Equality and Diversity programme ensuring staff are aware of their responsibilities in this field.



Training delivered by the Scottish Public Service Ombudsman to support staff with complaints handling has been paused this year. 5 cohorts of training are planned for 2021-2022.

Accountability and Governance

In March 2020 NHS Grampian activated its Major Infectious Disease plan in response to the COVID-19 pandemic. This required the organisation to consider which services and processes must be continued, amended or stopped. Clinical Governance arrangements continued throughout the pandemic with amendments to processes to support the discussion and addressing of cross system operational clinical and care governance matters, thus establishing and reflecting a system-wide assurance process. A summary of the accountability and governance structures to support this are detailed on page 25.



Clinical and Care Governance Groups

- Each service is accountable for clinical and care delivery and has their own clinical quality meeting. This in turn supports the sector/partnership clinical and care governance groups.
- The Clinical and Care Governance structure provides local ownership and accountability, in terms of governance, in dealing with and learning from complaints, adverse events, duty of candour, risk management and the identification and delivery of improvement actions.

Weekly Clinical Risk Meeting (CRM)

- Chaired by the Associate Medical Director. Members are the Medical Director, Executive Nurse Director, Employee Director and organisational leads for adverse events, feedback, duty of candour, public protection, organisational development, risk management, health & safety, values based reflective practice, quality informatics, information governance, infection prevention and control.
- Data collated over the previous 7 days is discussed to identify clinical risks, enable system wide discussion and appropriately manage performance against national standards.
- The report is shared with the Chief Executive Team, including escalated items.

Chief Executive Team (CET)

- The weekly CRM report provides the CET with an appropriately raised awareness of the current management of cross-system clinical risks, allows for action and, in turn reduces the likelihood of potential negative reputational impact.
- Leadership decision making to support Board quality of care priorities.

NHS Grampian Board

- Information and escalation of issues received from CET.
- Following each CGC and EPC, an overview paper is written and submitted to the Board, highlighting key discussion points, learning opportunities and potential quality of care risks that have been identified.

Clinical Quality and Safety Group

- Chaired by the Associate Director, Quality Improvement and Assurance and meets six weekly.
- The aim is to provide a cross system focus for learning, mitigation of clinical risks and identification of areas for improvement.
- Provides a framework of escalation to CET and assurance to the Clinical Governance Committee (CGC) that suitable processes are in place to take cognisance of quality and safety of care.
- Reports at each CGC with an update on the topics discussed, supported by the intelligence reviewed at the weekly CRM.

Clinical Governance Committee (CGC)

- Executive Nurse Director, Medical Director, Director of Public Health present reports to provide assurance on behalf of CET.
- During 2020 the CGC met monthly in response to the pandemic and returned to quarterly meetings in 2021. The agenda was amended to focus on response, recovery, remobilisation and renewal.
- CGC is responsible for providing the Board with assurance on the quality of care provided.

Engagement & Participation Committee (EPC)

- Seeks assurance on matters of equality and diversity, feedback, carer involvement, advocacy, use of volunteers.

What Next?

At the time of writing this annual report it is acknowledged that the Grampian Health and Care system remains under very significant pressure accentuated by the COVID-19 pandemic. However, it is important that we continue to ensure all feedback is encouraged, demonstrates compassion and is person centred with a commitment to utilise the learning to support improvements to the services we deliver. Over the next 12 month period we will work to:

- Explore further opportunities for gathering feedback in real time for patients, families, carers, the public and staff.
- Increase the recording of feedback that has led to a planned change.
- Recover and improve response times for both Stage 1 and Stage 2 complaints.



This publication is also available in other formats and languages on request. Please call Equality and Diversity on 01224 551116 or 01224 552245 or email grampian.communications@nhs.scot
Ask for publication CGD 210514