

**Handling and Learning From  
Feedback Annual Report  
2018-2019**

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**NHS Grampian**

**Caring – Listening – Improving**

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During 2018/2019 throughout NHS Grampian there was over 1 million (1,121,438) patient contacts in hospital settings, this includes outpatients, but not independent contractors such as General Practice and Dentistry etc. It is therefore, encouraging to note that during this period we received 1,817 (0.16%) complaints, indicating that most people who come into contact with our services have a positive experience. NHS Grampian invites and welcomes all feedback from patients/relatives/carers and visitors to understand their experience of care.

## Section 1 - Encouraging and Gathering Feedback

### 1.1 Methods used to encourage feedback:

NHS Grampian values all feedback and is committed to ensuring that the information and learning gathered from all our feedback systems informs the aspiration of continuous improvement and the further development of a person centred approach to service planning. NHS Grampian encourages and receives feedback through a variety of sources:

- Feedback Cards – with a prepaid, addressed envelope (available throughout NHS Grampian).
- All letters received by Chief Executive/Clinical Areas/staff are forwarded to the Feedback Service.
- E-mails received via:
  - the Feedback Service's generic email address which is available NHS Grampian's website, information leaflets and feedback cards.
  - via the Chief Executive's email address.
- Phone calls (received directly by the Feedback Service or redirected from anywhere in the organisation).
- Letters from members of the public addressed to the organisation.
- Letters and email correspondence from MSPs and MPs on behalf of members of the public.
- Letters from the Patient Advice and Support Service on behalf of members of the public.
- Letters from the Advocacy Grampian area on behalf of members of the public.
- NHS Grampian's Website.
- Facebook.
- Twitter.
- Care Opinion Website.



Services in the

### Care Opinion:

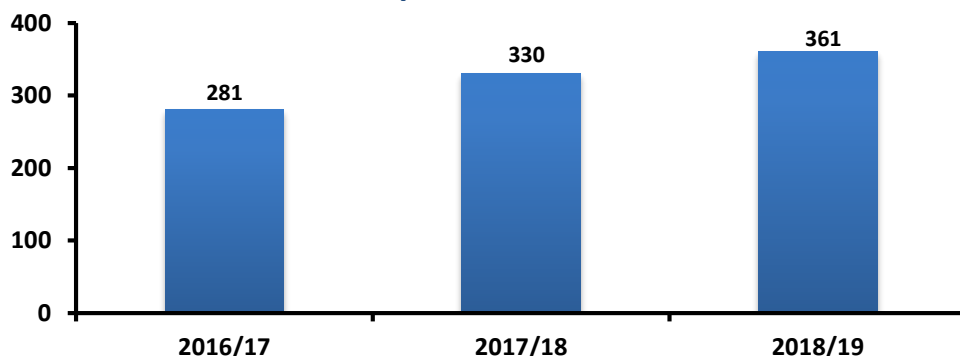
Care Opinion was publicly endorsed by the Scottish Government in 2013 as an independent, open and transparent way for people to share their experiences of health services.

Care Opinion's independent, not for profit social enterprise, works in addition to other mechanisms for gathering feedback in NHS Grampian but is unique in offering anonymity for the author – allowing for honest feedback without fear of repercussion. It also displays visible interactions and any resulting changes for the public to see.

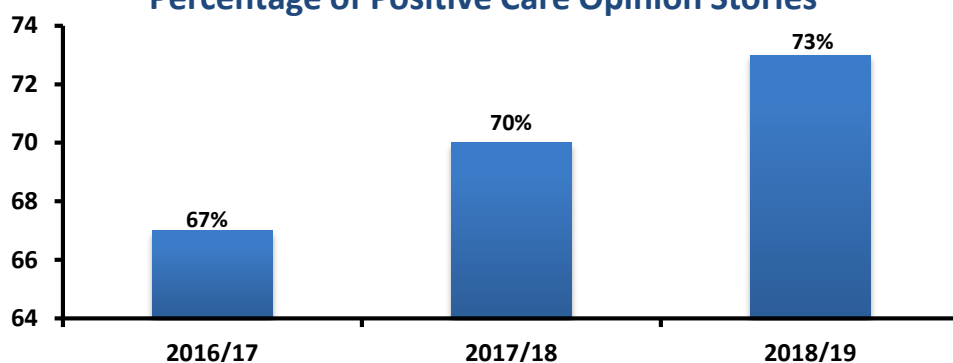
With the growing recognition of people's voices shaping the future of our health services, NHS Grampian encourage all services to actively engage with Care Opinion as a way of listening to what people have to say and provide empathetic and individualised responses that demonstrate a culture of caring, listening and improving. We do this by sharing stories regularly on our social media site as well as promoting Care Opinion at local events. Care Opinion activity reports are shared at the Engagement and Participation Committee and various local meetings.

Between 1 April 2018 and 31 March 2019, 361 stories were shared on Care Opinion about NHS Grampian. 73% of these stories were positive. They have already been viewed 226,048 times. This is an increase from 281 stories in 2016/17 and 330 stories in 2017/18.

**Care Opinion Stories Posted**



**Percentage of Positive Care Opinion Stories**



Stories shared on Care Opinion in 2018/2019 consistently show people think staff were ‘friendly’ ‘professional’ and ‘caring’. Although ‘care’ was the most commonly used tag, 6 stories highlighted this as an area to be improved. ‘Communication’ and ‘information’ were identified as the most common aspects for improvement.

**Real Time Experience:**

Compassionate, person-centred care is an integral part of the Quality Ambition for NHS Scotland and is described within the Quality Strategy as: ‘care which delivers mutually beneficial partnerships between patients, families and those delivering health care services.’ This care needs to reflect individual needs and values and demonstrate compassion, continuity, clear communication and shared decision making.

We gather feedback by involving; family and carer involvement, ward rounds, viewpoint (electronic questionnaire units), Public Involvement and many other ways.

**1.2 Making people feel their feedback is welcomed:**

Local processes and procedures have been developed to ensure NHS Grampian comply with the principles and policy intentions of the Patient Rights (Scotland) Act 2011, which means they:

- Encourage, welcome and view feedback, comments, suggestions, concerns and complaints as opportunities for ensuring we provide compassionate, person centred care.
- Promote learning and improvements from all forms of feedback.
- Are effective, fair and consistently applied.
- Are easily accessible to all and that information is available in other formats where this is required.

- NHS Grampian appreciates all learning opportunities that service users provide.

### **1.3 Accessibility for people to give feedback:**

The Patient Advice and Support Service (PASS) provides free, confidential information, advice and support for anyone wishing to give feedback about the treatment and care provided by the NHS in Scotland. NHS Grampian and representatives of PASS work collaboratively to ensure that patients and equalities groups are aware of this service, and are appropriately supported to give feedback. PASS activity, performance reports and case studies are shared and discussed to demonstrate how patients' needs are being met in Grampian.



Local support is also available to people who wish to give feedback through local Advocacy Services. PASS and Advocacy services are publicised on NHS Grampian's website and information and contact details are given to members of the public over the phone by the Feedback Service. PASS leaflets are available in health points and our complaint acknowledgment letters also provides information about the support PASS can offer.

### **Involvement and consultation to ensure equality for our diverse communities:**

Meeting the health care needs of everyone in our communities is an integral part of our comprehensive healthcare service. In addition, we also carry out specific targeted healthcare work and campaigns to benefit people within these communities.

When developing equality objectives, we meet our legal duty to involve people with a relevant protected characteristic and their representative organisations. We also consider other evidence relating to people with a protected characteristic.

To help us take this work forward, NHS Grampian has three groups and one committee with wide community representation. The Racial Equality Working Group drives forward the racial equality agenda. The Disability Discrimination Act Review Group address disability and age related issues. The Diversity Working Group addresses issues relating to sex (male or female), sexual orientation, gender reassignment, pregnancy and maternity, and marriage and civil partnership. The Spiritual Care Committee addresses religious and faith issues. We also carry out regular involvement and consultation events.

### **Equality and Diversity Staff Training:**

NHS Grampian has in place a comprehensive Equality and Diversity Training Programme for staff. This Programme is essential to ensure that staff are aware of their responsibilities in this field and to ensure compliance. All of the material used in training is checked and updated on a monthly basis, if required.

In 2017/18 1,205 staff attended an Equality and Diversity Seminar at a level appropriate to their role. In 2018/19 the number attending training was 1,318. Training is evaluated on a regular basis by participants

### **Foreign language communication:**

When healthcare is provided, it is important to ensure that effective two way communication arrangements are in place. Our local ethnic communities now make up 15% of the population of Grampian. Our annual involvement events and other research carried out jointly with the Grampian Regional Equality Council have shown that over 90% of recent migrant workers and their families are non-English speaking when they first arrive in Grampian. This barrier to communication is overcome in a number of ways:

### **“Language Line” telephone interpretation:**

This gives staff access to expert interpreters, on the telephone in 60-90 seconds for over 170 different languages. It is live in 1,089 locations across NHS Grampian and was used on 6,875 occasions in 2018. Every clinic, Hospital and GP Practice in Grampian is equipped and over 4,500 staff have been trained in its use.



### **“Face to face” interpreters:**

NHS Grampian has funded the training of 154 “face to face” qualified interpreters who were used on 3,270 occasions in 2017/18 and 2,864 occasions in 2018/19. Most recently, 8 Arabic/English interpreters were recruited and trained to provide support to our New Syrian Scots.

### **Materials in translation:**

All requests for materials in translation are met. In addition, a wide range of local healthcare information is available pre-translated. On average, we translate five pieces of personal healthcare information per week, mostly from Eastern European languages into English, to help staff understand the previous treatments and health issues of patients.

### **Communication disability:**

The 2011 Census, showed that one in five of the population of Grampian have a communication disability. The measures NHS Grampian have put in place help people with a communication disability include:

- Four qualified British Sign Language (BSL) interpreters are under contract to NHS Grampian. All requests for BSL interpretation are met.
- NHS Grampian is currently expanding the availability of BSL by the introduction of Video BSL to supplement our “face to face” BSL service. This is now live in the Acute Sector and is currently being rolled out elsewhere.
- For people who use a hearing aid, over the last five years, NHS Grampian has purchased and issued over 250 Portable Induction Loops. We also provide more specialist equipment for in-patients and staff.
- For people with a Learning Disability or Aphasia (the partial or total loss of the ability to communicate verbally or using written words) accessible/pictorial is provided. All requests for accessible/pictorial material are met.
- For people with a sight problem, all NHS Grampian published material complies with the Royal National Institute for the Blind “Good Practice” Guidelines on making information accessible for people with a sight problem. All requests for information in large print, audio and Braille formats are met.
- All NHS Grampian published material includes the offer at the front to make the information available in any other language or format, upon request and also give details of who to contact to obtain this.



## **1.4 Publicising our feedback methods:**

Communication tools are used to promote opportunities to provide feedback. These include; Facebook, Twitter, articles in NHS News, a public facing newspaper published twice a year and information given on our website.

## Section 2 - Encouraging and Handling Complaints

### 2.1 Using feedback to identify improvement opportunities:

NHS Grampian encourages feedback. To ensure learning occurs from feedback, service managers must identify the learning opportunities for service improvement, and record actions taken as a result. Learning outcomes are documented on Datix (our clinical risk database) and are included in assurance reports to demonstrate the learning and actions taken across NHS Grampian, as a result of feedback.



The number of meetings with staff and patients/ families continues to increase over the last year, and staff are meeting complainants earlier in the complaints process, sometimes at first point of contact or following investigation.

### 2.2 Involving people who raise complaints:

Clinical treatment, bereaved, sensitive and complex complaints are, when suitable, managed 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 them to understand that complex or cross sector complaints may take longer than 20 working days to complete.

Complaint Leads are encouraged to make direct contact with individuals involved to provide a more person-centred approach to complaint handling. We understand how important this is for members of the public and continue to encourage and monitor early contact. Key issues should be clarified during the telephone call and the complainant is asked what outcome they would like. Meetings can 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.

A Family Liaison role has recently been introduced, and is being developed as a single point of contact, independent to the Service Manager and Feedback Team to support families, if required.

### 2.3 Encourage early resolution and ownership of complaints:

Email communication to alert of a new complaint takes place with the relevant Complaint Lead on the day the complaints are received, to encourage quick investigation and resolution of the complaint by telephone, where appropriate.

### 2.4 Measuring complainant satisfaction with the process:

NHS Grampian have reviewed the process for Complaints Experience Feedback Survey. Each month people who have shared their experience will receive an email to give feedback on their experience of the process. The questions asked allow us to produce a report on the Key Performance Indicators (KPIs) that are described in the Complaint Handling Procedure (CHP).

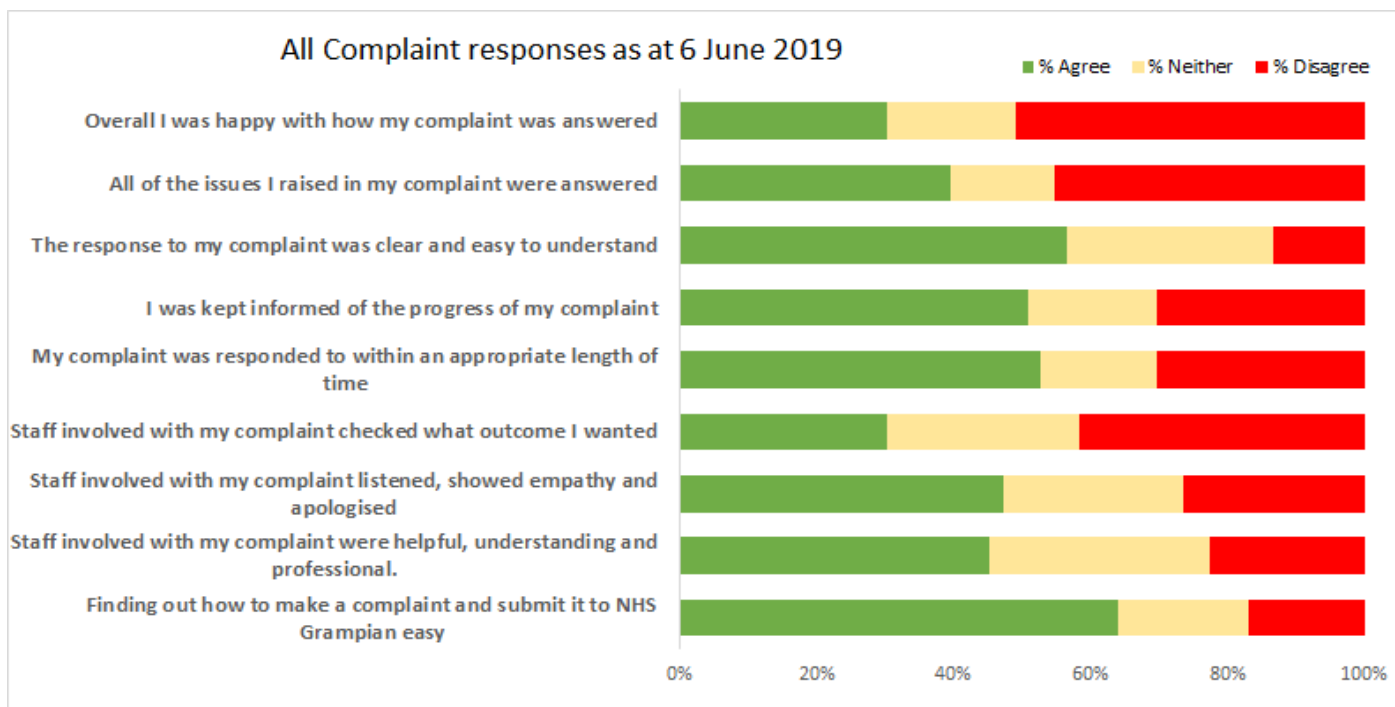


Benefits of the electronic survey are that no postage is needed, and it is easier for complainants to respond, and for us to extract the data for reports.

## NHS Grampian Complainant Experience Report

Electronic survey links were sent to complainants asking them to give feedback on how satisfied they were with the handling of their complaint. There were 143 survey links sent and 5 response which gave a participation rate of 37%. This was an increase from last year's participation rate of 24%.

With the new improved approach, there will be an increase in the number of survey links sent. The approach uses a Likert scale and also the opportunity to give qualitative feedback. The results from April – June 2019 are shown below. Areas for improvement in response to the results are under development.



### **2.5 - Learning from complaints relating to each area of the Board:**

Sector Leads are responsible for ensuring that their Complaint Leads record the learning identified and action taken in the appropriate fields in Datix Complaints Module. The learning and actions fields are reviewed by the Feedback Service to ensure actions have been recorded, implemented, sustained and shared across the Organisation, as appropriate. Where there is limited information or a field is blank the Leads are contacted and asked to provide the relevant information.

Below is a summary of action taken as a result of complaint received 2018/19:

Action taken as a result of complaints received 1 Apr 2018 - 31 Mar 2019	Total
Access - Improvements made to service access	154
Action plan(s) created and instigated	129
Communication - Improvements in communication staff-staff or staff-patient	695
Conduct issues addressed	47
Education/training of staff	123
No action required	735
Policy reviewed	18
Risk issues identified and passed on	70



<b>System - Changes to systems</b>	<b>46</b>
<b>Share lessons with staff/patient/public</b>	<b>171</b>
<b>Waiting - Review of waiting times</b>	<b>178</b>
<b>Total</b>	<b>2366</b>

**NHS Grampian Complaints Response Times and Outcomes:**

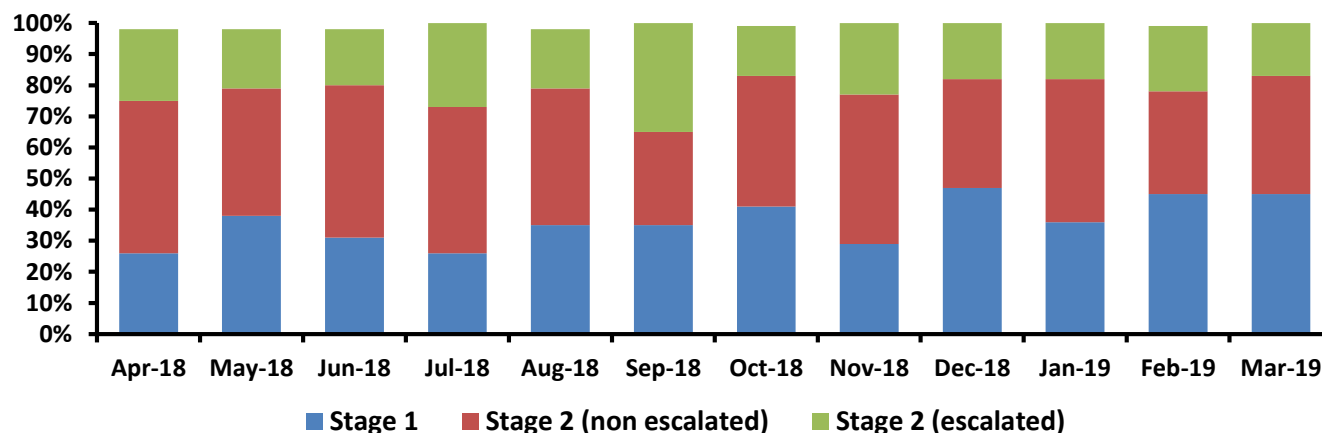
The new CHP introduced in April 2017 highlighted that complaints should be responded to within five working days to achieve Early Resolution - 'Stage 1'. 'Stage 2' complaints, are acknowledged within three working days and responded to in 20 working days.

Stage 1	Stage 2 (non escalated)	Stage 2 (escalated)
Early Resolution, resolved within five working days	Complaints which were initially thought would be resolvable within five working days but this was not achieved. They required a full investigation.	Complaints which are immediately escalated for full investigation as not suitable for early resolution

There has been encouraging increase of 10% for Early Resolution (Stage 1) of complaints resolved within five working days, to an average of 36% in 2018/19.

The chart below illustrates the percentage of complaints closed at each stage, between April 2018 and March 2019. The majority of complaints are resolved within 20 days (Stage 2) but between 26% and 47% were closed at Stage 1. In addition between 16% and 35% of complaints were escalated on receipt of response.

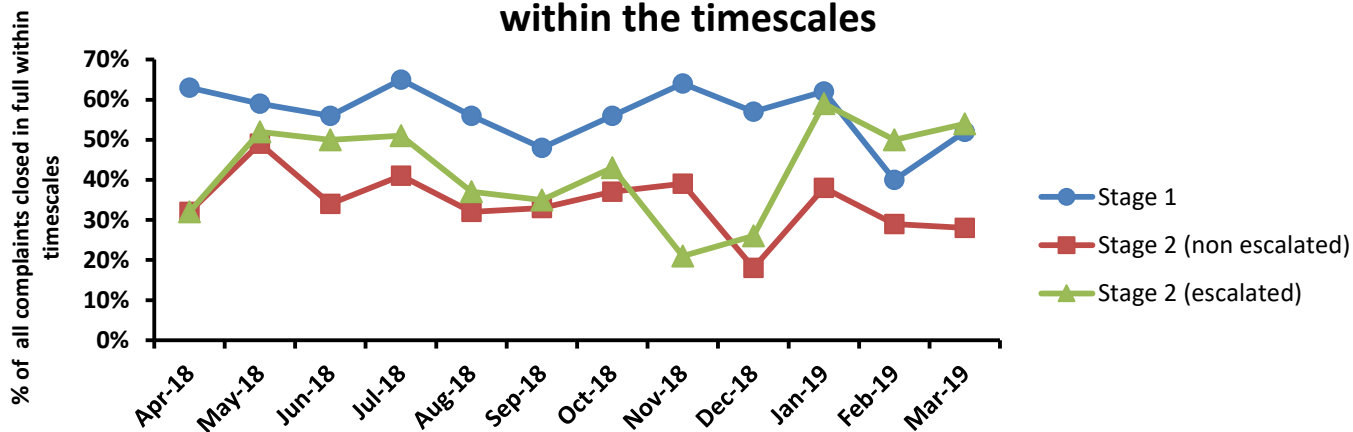
**Complaints Closed at Each Stage**



The chart below illustrates response times by stage between April 2018 and March 2019. On average more than half of Stage 1 complaints were responded to within five working days, peaking at 65% in July 2018.

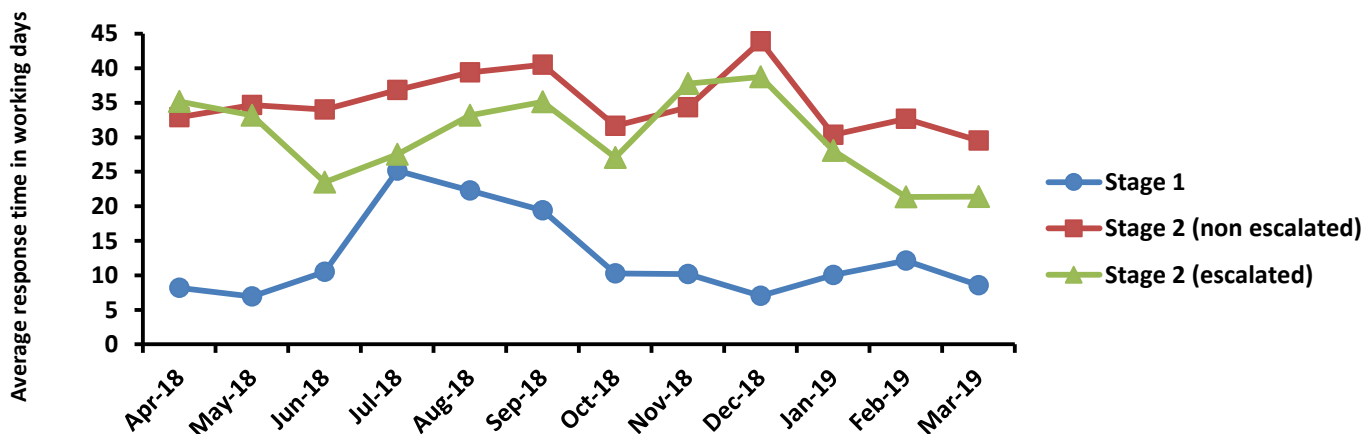
Response times were variable, but much lower for non-escalated Stage 2 complaints with well under half of all complaints closed off within 20 working days each month. Response times were also variable, but slightly improved for escalated Stage 2 complaints with a low of 21% in November 2018 and a high of 59% in January 2019.

### Percentage of all complaints closed in full within the timescales



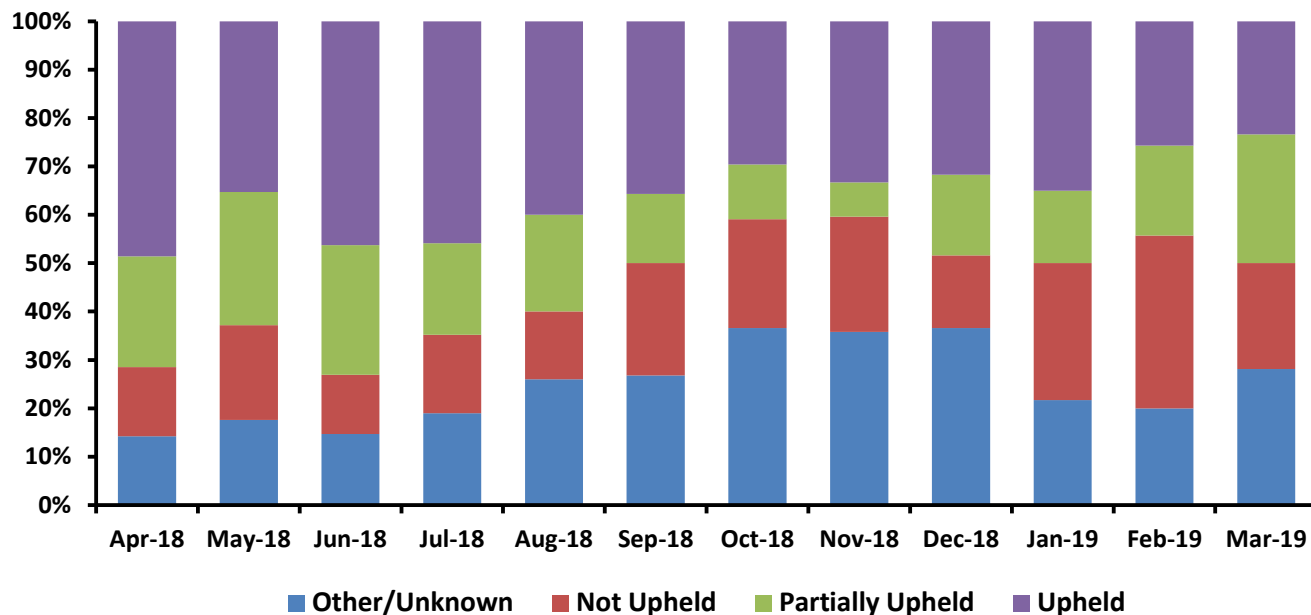
Average response times, in working days, are illustrated in the chart below. In July 2018, the increase in complaint response times can be explained by a new service, who had previously not used Datix for complaint handling, not closing complaints on the information system when they resolved them with the individual(s) raising the complaints. The service has now addressed this and integrated the process as part of their complaints handling.

### Average complaint response times



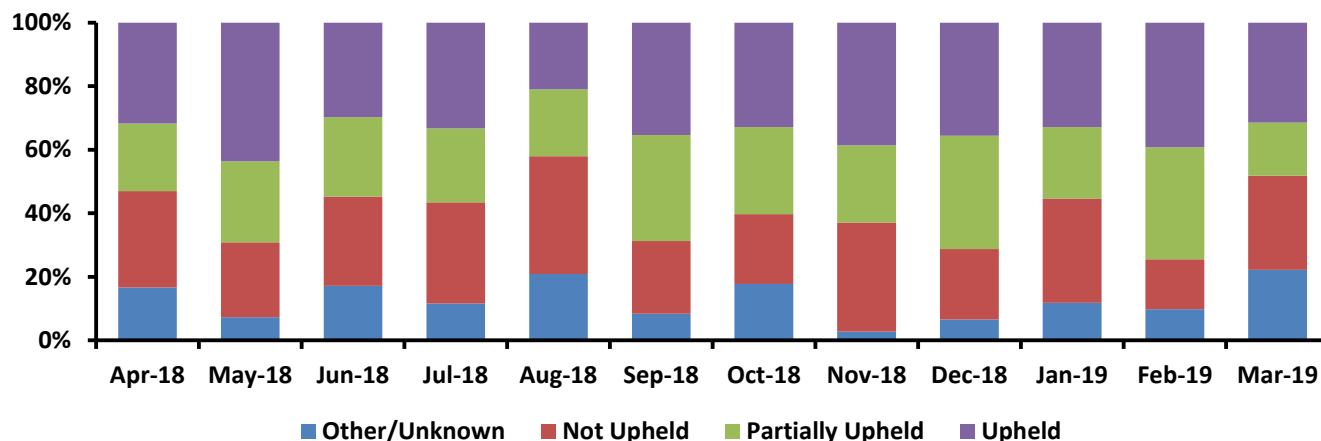
The chart below illustrates outcomes for complaints closed at Stage 1. Less than half of all Stage 1 complaints were upheld with a very low amount upheld in March 2019, which also recorded a higher than usual amount of partially upheld complaints.

### Complaints Outcome: Stage 1



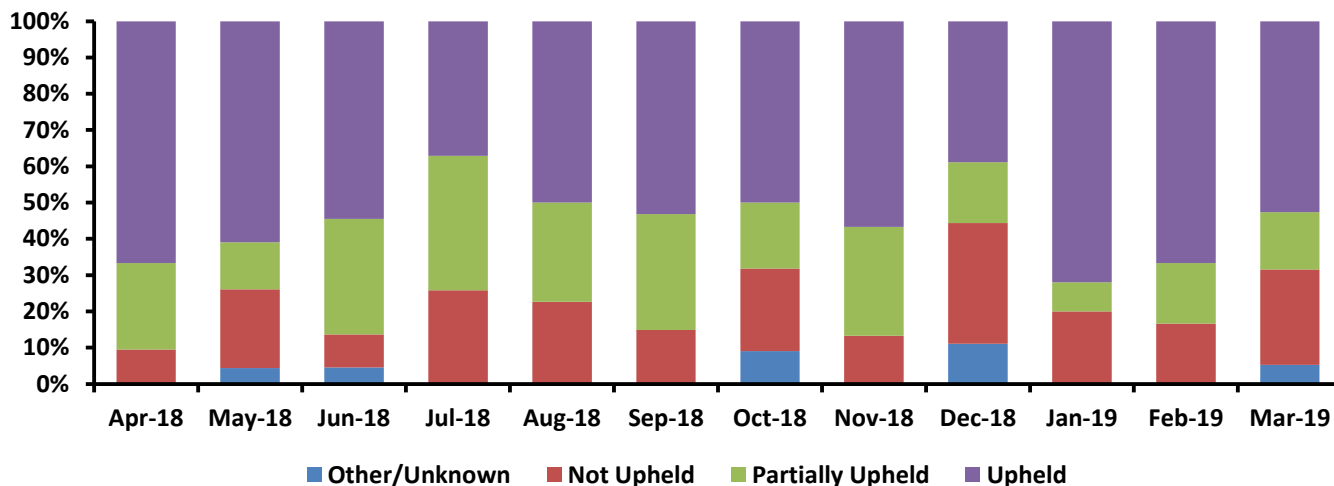
The chart below shows that a slightly lower proportion of non-escalated Stage 2 complaints are upheld, with an average of 33.8%.

### Complaints Outcome: Stage 2 (non escalated)



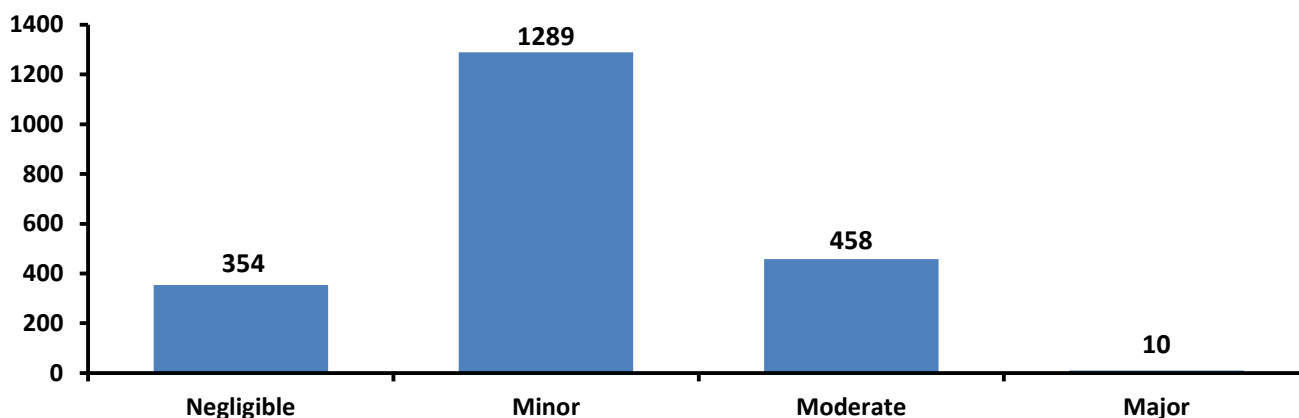
The chart below shows that there are more upheld escalated Stage 2 complaints, although this can be variable, peaking at 72% in January 2019 in comparison to 37.1% in July 2018.

### Complaints Outcome: Stage 2 (escalated)



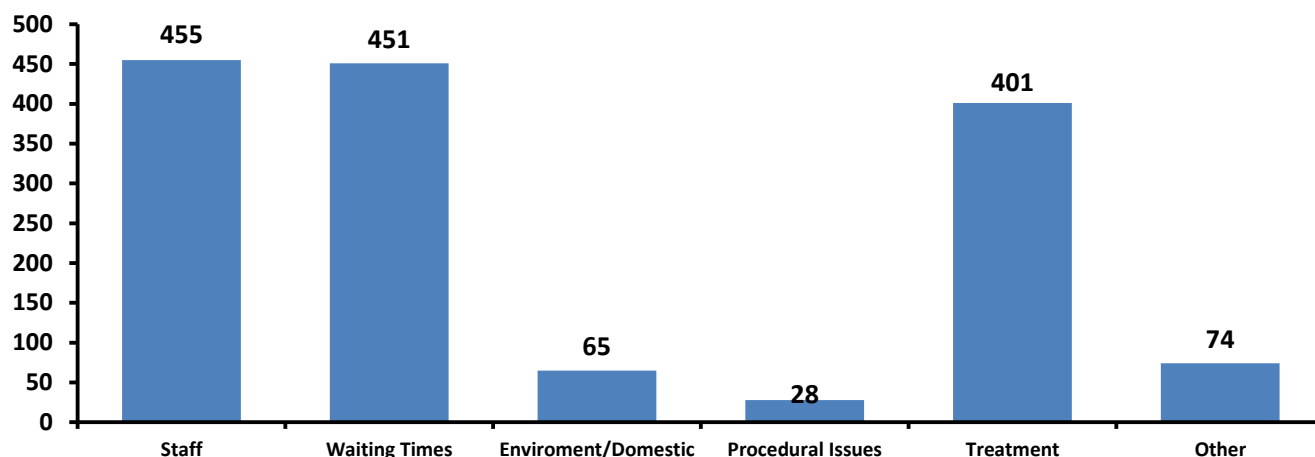
### The complaint severity:

Patient Experience Severity 1 Apr 2018-31 Mar 2019



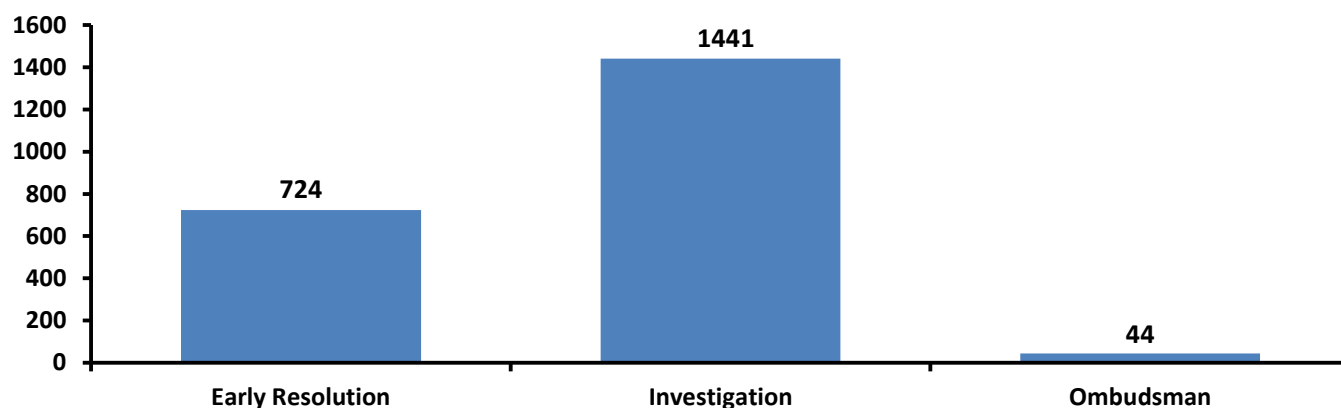
### The types of issue complained about:

### Complaint Issue - 1 Apr 2018-31 Mar 2019



### Current stage:

### How complaints were resolved - 1 Apr 2018-31 Mar 2019



### 2.6 - The links between the management of selected complaints to the management of serious and adverse events:

The Feedback Manager attends a weekly Grampian wide Clinical Risk Meeting (CRM). This meeting is chaired by either the Board Director of Nursing, Midwifery & Allied Health Professions or the Medical Director. Attendees include organisation leads for quality informatics, feedback, quality improvement and assurance, health and safety, infection prevention and control, organisational development and values based reflective practice.

The CRM affords the opportunity for triangulation of learning for risks, adverse events and feedback. This also offers the Feedback Manager the opportunity to raise good practice, concerns or seek support from the Executive Directors if required.

A Level One Adverse Event Review is commissioned following a significant event. This may be triggered by a complaint. A meeting is offered to the patient/family/carer to invite them to be part of the process. Where the patient/family/carer wish to be involved their views will be included in determining the scope of the review, and the final review report including associated learning is shared with them.

## 2.7 - Working with local independent contractors to monitor how feedback is used to drive improvements:

Independent contractors include GPs, dentists, opticians and pharmacies who are not employed by NHS Grampian but provide services for people who live within NHS Grampian area. A questionnaire is sent every quarter to the independent contractors to ask them to inform us about their performance in relation to their complaints handling.



Feedback Officers are always available should any of the Independent Contractors require assistance with dealing with complaints.

In 2018-2019 NHS Grampian's Family Health Services Providers received the following complaints:

	April to June 2018	July to Sept 2018	Oct to Dec 2018	Jan to March 2019
GP	186	197	164	227
DENTAL	4	23	11	9
OPTICIAN	1	1	3	0
PHARMACY	42	60	38	50

## Section 3 - Staff training and development

### 3.1 - Challenges encountered in embedding a culture that actively encourages feedback:

To overcome challenges and to embed a culture that encourages all types of feedback, NHS Grampian appreciates the importance of:

- Local ownership and accountability, in terms of governance, in dealing with and learning from complaints.
- Adhering to national guidelines.
- A central team managing the feedback system, to ensure an overview of activity and for this team to be properly resourced.
- Managers and staff within services being clear of their roles and responsibilities in dealing with complaints - both formal and informal.
- The Feedback Team and the health informatics team working collaboratively to ensure the effective use of the information management system, and to provide advice and support to the services.
- Continuing to develop how we learn from complaints and monitor success.
- Further enhancing the monitoring and reporting systems.

### 3.2 - Staff training:

The Feedback Officers offer support and advice with regards to adopting a compassionate, person centred approach when dealing with patients, relatives and carers. They are available to attend at any location.

Training sessions for complaints handling have been delivered to Registrars, Support Managers, and Divisional General Managers. These training sessions ensure that all staff are aware of the complaints process and the work of the Scottish Public Services Ombudsman.

In addition regular training sessions are delivered to multi-professional teams on investigation skills and root cause analysis. The organisation has eLearning on complaints handling which is accessible to all staff. An eLearning module focusing on the importance of apology and the duty of candour is also available.

## **Section 4 –Service improvements as a result of complaints and feedback**

### **4.1 - Steps taken to ensure the focus on learning and improvement are recognised as the main outcome from feedback:**

- Feedback is discussed at multi-disciplinary clinical governance/quality meetings.
- Clinical treatment complaints are discussed and shared at a variety of learning events.
- Analysis of feedback is a part of service reviews to ensure any themes or significant events that require service improvement or resource to improve are identified.

This is an area that NHS Grampian recognise as crucial to maximise the value of feedback we receive and an area we are committed to continuing to develop.



## **Section 5 - Accountability and Governance**

### **5.1 - The reporting processes for complaints and feedback:**

The Complaints and Feedback Service prepare a report every week and share it with the attendees at CRM.

The Feedback Service report includes:

- Patient experience severity scoring.
- Complaints which are still open/in progress after 20 working days.
- Ombudsman complaints, which have recently been reported on to allow discussion of recommendations made and ensure learning and action is taken and shared.
- NHS Grampian is testing in Aberdeen Royal Infirmary a new Standard Operating Procedure (SOP) process for handling Ombudsman cases.

The feedback manager reports to the Engagement and Participation Committee. Information provided includes; the severity and outcomes of complaints and Scottish Public Services Ombudsman (SPSO) findings, and the learning identified and action taken as a result of feedback and complaints.

This 'Handling and Learning from Feedback' annual report will be available on NHS Grampian's public website, and will also be presented to the Engagement and Participation Committee.

### **Scottish Public Services Ombudsman (SPSO)**

NHS Grampian are currently reviewing the process for SPSO cases. Staff are supported following the outcome of the SPSO review to ensure learning is embedded.

## **5.2 - Supporting NHS Board Non-Executive Directors to seek assurance that improvements can be systematically and reliably demonstrated:**

There are systems and processes in place to offer NHS Grampian Board members assurance that feedback is handled as per national guidance.

NHS Grampian is complies with the model complaint handling procedure developed by SPSO, in line with the Patient Rights (Scotland) Act 2011, and aims to ensure that appropriate action is taken, as necessary, following the outcome of any feedback.

### **In conclusion**

The feedback system is constantly being developed to ensure mechanisms are in place to support fast, effective and efficient responses to people across NHS Grampian.

Specialist advice and support continues to be given to patients and staff on the management of this process, and there is a commitment to deliver local training and awareness-raising to ensure achievement of our aim to provide high quality, effective feedback and complaints handling is the norm across the organisation.



NHS Grampian throughout the next 12 month period, will continue to:

- strive to listen carefully to patients, families, carers, the public and staff, on an ongoing basis and at every stage of their health care interaction.
- work to make it easier for people to share their experiences, ideas and opinions and to remain genuinely engaged in decision making at all levels.
- demonstrate a consistent and system-wide culture of learning from and taking action as a result of feedback received.

This report was produced on 20 June 2019 by:

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