## involvingyou



# Handling and Learning From Feedback Annual Report 2016 - 2017

**NHS Grampian** 

Caring – Listening – Improving

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#### **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 in all clinical areas).
- Letters (received in clinical areas, addressed to the Feedback Service or the Chief Executive).
- E-mails (received through the Feedback Service's email address available on NHS Grampian's website, information leaflets and feedback cards, through the Chief Executive's email address, through the general NHS Grampian contact address on the website or directly to senior officers)
- Phone calls (received directly by the Feedback Service or redirected from anywhere in 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 Services in the Grampian area on behalf of members of the public.
- NHS Grampian's email address.
- NHS Grampian's Website.
- Facebook.
- Twitter.
- Care Opinion Website.





#### **Care Opinion (Previously called Patient Opinion):**

A valuable mechanism through which patients and members of the public can give feedback on their experiences is by posting comments on the Care Opinion Website. Patient Opinion was launched in 2013, and changed its name to Care Opinion on 1 May 2017. It is a great addition to NHS Grampian's other feedback mechanisms.

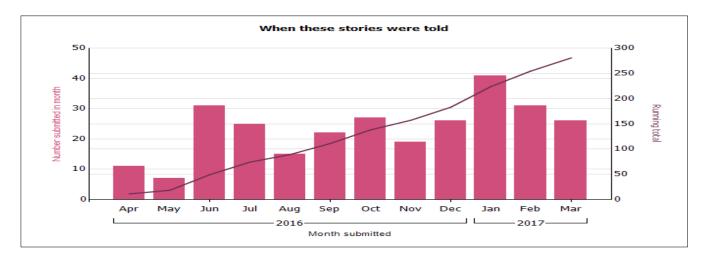
Work is continuing to encourage services to promote Care Opinion as a way of listening to patients relatives, friends, carers, advocates, volunteers and even staff who would like share their stories to help make a difference.

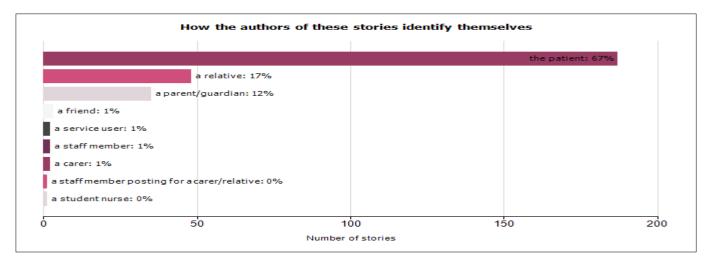
Recently the staff at Royal Aberdeen Children's Hospital have begun promoting the Monkey interface of the Care Opinion website to encourage children to have their say about how they feel about the care and services they receive. Posters are now on display throughout the children's hospital and information is available for parents and carers within the parent's room. Corporate Communications are also to help raise awareness through social media.

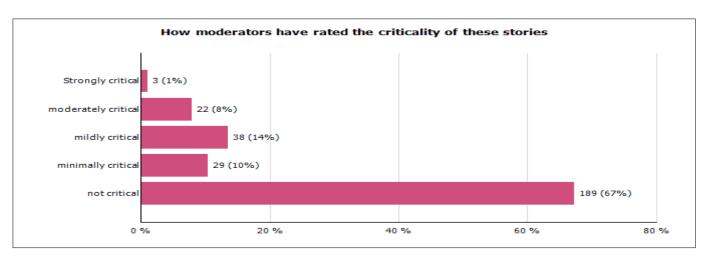
Care Opinion reports are presented at the Engagement and Participation Committee and the Clinical Governance Committee four times a year. Posts about Acute Services are also discussed at a weekly Clinical Risk meeting.

281 stories were posted on Care Opinion about NHS Grampian between 1 April 2016 and 31 March 2017. To date, these stories have been viewed on Care Opinion 321,215 times. The three most viewed posts were (please click on link to read the post online):

- 1. Cardiac Arrest with Paramedic and Passers-by intervention.
- 2. The warmth and sincerity of every single one of them was such a credit to them, the hospital and the profession
- 3. When I broke my leg







#### The number of times issues and staff members where mentioned:

#### What's good?

82
78
21
21
18
12
12
11
10
10
10
10
10

#### What could be improved?

communication	22
more staff	9
staff attitude	7
food	5
waiting time	5
Care	4
<b>Consultant Attitude</b>	4
education	3
health visitor	3
hygiene	3
poor food	3
support	3
treatment	3
waiting times	3
I	

#### **Real Time Experience:**

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 involve the public and ask for views and feedback in a number of ways before, during and after care:

- Involved in decisions.
- Family and carer involvement.
- Involved in ward rounds.
- · Real time feedback.
- Discharge portfolio and ticket home.
- Patient diaries.
- Viewpoint electronic questionnaire units.
- · Getting to know me/Must dos with me.
- Patient Admission/Assessment Document.
- Care planning.
- Care Assurance Tool.
- Verbal feedback
- Care Opinion
- Telephone follow up
- Patient postcards
- Survey/audit work
- National surveys
- Public involvement Participation Standard.
- Patient Action Co-ordination Team (PACT).





A huge range of activity is underway to embed person-centeredness in the care delivered in NHS Grampian. The above mentioned activity is not exhaustive and there are many other person-centred activities being undertaken independently by various staff groups.

#### 1.2 - Making people feel their feedback is welcomed:

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

- Encourage, welcome and view feedback, comments, suggestions, concerns and complaints as opportunities for ensuring we provide 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.

Everyone who provides feedback should be thanked verbally or through an acknowledgement letter or email. NHS Grampian appreciates all learning opportunities that service users provide us with, and would like everyone who gives feedback to know that we value the time it has taken for them to tell us about their experience.

Patient Advice & Support Service

Free, confidential & independent advice & support

#### 1.3 - Engaging with equalities groups:

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 the 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 Team. PASS leaflets are available in health points and our complaint acknowledgment letters also give information about the support PASS can offer.

## Involvement and consultation with our local equality and diversity communities:

The Equality Act 2010 defines the "protected characteristics" which make up equality and diversity:

- Race
- Disability
- Age
- Sex (male or female)
- Sexual orientation
- Gender reassignment
- Pregnancy and maternity
- Marriage and civil partnership
- Religion or belief

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

When developing equality objectives for each of these nine areas, 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. We also carry out regular involvement and consultation events.

#### 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 13.5% 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 over 990 locations across NHS Grampian and was used on 6,250 occasions in 2016. 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 2.684 occasions in 2016/17.

#### **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 5 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 has put in place help people with a communication disability include:

- For people who are deaf, all four qualified British Sign Language (BSL) interpreters in Grampian are under contract to NHS Grampian.
   All requests for BSL interpretation are met.
- For people who use a hearing aid, over the last four years, NHS

Grampian has purchased and issued over 250 Portable Induction Loops. We also provide more specialist equipment for in-patients.

- 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.

#### NHS Grampian Multicultural Health and Wellbeing Forum:

The NHS Grampian Multicultural Health and Wellbeing Forum (MCHWF) was formed by the NHS Grampian Public Involvement Team in 2015, and continues to go from strength to strength.

The members of the MCHWF meet regularly to work on a range of activities which promote health and wellbeing and encourage positive engagement between NHS Grampian and diverse communities.

The aims of the MCHWF were created in partnership between NHS Grampian and the Forum members to:

- Organising events to promote health and wellbeing
- Raising awareness around health and wellbeing issues which can affect people from minority ethnic backgrounds
- Training and other personal development opportunities
- · Promoting social connectivity and reducing social isolation
- Facilitating and promoting opportunities for social, cultural and community development and participation



- Holocaust Memorial Day
- Multicultural Movie Night
- The GREC Anne Frank Awards
- Aberdeen Mela One World Day
- International Women's Conference 2017
- The impact of faith on Health and Wellbeing
- Breaking the Silence' Domestic Violence in a Faith Context
- International Day for the Elimination of Racial Discrimination
- Ethnic Minority Forum (EMF) 'Spotlight on the Polish Community'



#### **NHS Grampian Youth Forum:**

The NHS Grampian Youth Forum has also continued to evolve and develop. This was achieved by:

- Producing a banner and pocket card to promote the Youth Forum at public events.
- Using Twitter and talking to members of the public and staff.
- Creating a 'closed' (invitees only) Youth Forum Facebook page, enabling, communication and meeting organisation online, in a safe environment.
- Working in partnership with the Scottish Health Council, which has been a very successful collaboration in terms of evolving the group.

The aims of the Youth Forum were created in partnership with young people aged between 14 and 25 to enable them to:

- "Have a say about local services for young people"
- "Share ideas to promote health and wellbeing"
- "Make a difference by influence decision making"
- "Meet and network with like-minded young people"
- "Increase their knowledge of the NHS (supporting their personal statement)"



This Forum is a valuable involvement and listening mechanism for NHS Grampian, and partnership opportunities continue to be explored to ensure a fair representation of youths.

## 1.4 - Publicising our feedback methods and ensuring people know what to expect:



Feedback methods are publicised on posters, feedback cards and on NHS Grampian's public facing website. Other communication tools are used to promote opportunities to provide feedback. These include Facebook, Twitter, articles in NHS News, a public facing news paper published twice a year. People can find out what to expect when they give feedback by the information given on the website, the information provided in acknowledgement letters and also through the advice offered over the phone.

#### 1.5 - Streamlining the way feedback is recorded across the board:

Working practices, processes and procedures are continuously reviewed to ensure they are efficient, effective and person centred. Monthly Feedback Service meetings are held to discuss our protocols and procedures and to share any learning that has been highlighted to improve the system of recording. Meetings are also held with Service Managers to ensure recording is appropriate and if anything requires to be changed to enhance the Feedback system.

A protocol is sent to all complaint investigators on a quarterly basis, outlining what they must do to ensure comprehensive recording takes place to streamline the recording process.

There is also a protocol for any complaints that come from the Scottish Public Services Ombudsman sent to the complaint investigators on a quarterly basis to ensure comprehensive recording.

## 1.6 - Using feedback to identify improvement opportunities:

NHS Grampian encourages feedback and passes all forms of feedback to the relevant staff, to encourage sharing of patient experiences and providing valuable learning opportunities. To ensure learning occurs from feedback, service managers must demonstrate what the feedback tells them about their service; identify their learning opportunities for service improvement, and record actions taken as a result.



Learning outcomes are documented on Datix (our electronic complaints system), and are included in Clinical Governance reports to demonstrate the learning and actions taken across NHS Grampian as a result of feedback.

Meetings are encouraged with staff and patients, relatives and carers, so that staff can learn firsthand how the care delivered has affected the people involved and what improvements can be introduced as a result.

#### **Section 2 - Encouraging and Handling Complaints**

#### 2.1 - Involving complainants to the level they wish:



When complaints are received over the phone, the Feedback Team ask if the complainant would be happy for someone from the service to call them and if they would find it helpful to attend a meeting. The key issues are clarified during the call and the complainant is asked what they would like to happen as a result of their complaint.

When more sensitive or complex complaints are received the Complaint Lead should phone the complainant to introduce themselves and ask how they would like to be involved and what outcome they would like. To help set expectations, it is explained that complex complaints can take longer to thoroughly investigate, and reassurance is offered that all complaints are taken seriously and that they will be kept informed of the progress of their complaint.

Complaint Leads are increasingly making direct contact with complainants to provide a more person-centred approach to complaint handling, which helps to establish what the key issues are for the complainant. Meetings can be offered at this stage to allow further discussion of the concerns raised, if desired by the complainant, and this would be followed by sending a written response to confirm the complaint outcome and any agreed actions to be undertaken by the service.

Alternative dispute resolution (ADR) can be used when independent support or facilitation is required to achieve complaint resolution. NHS Grampian has received no requests for ADR to be provided during 2016/17, but the Feedback and Complaints Officers attend complaint meetings to support complainants and staff as desired. A Family Liaison role is now also being developed, as a single point of contact independent from the Service and the Feedback Team, to support families as required.

#### 2.2 - Encourage early resolution and ownership of complaints:

The Feedback Service continues to triage feedback as it comes in. This allows identification of simple complaints that are suitable for early resolution. Email communication takes place with the relevant complaint lead on the day these complaints are received, to encourage quick investigation and resolution of the complaint over the phone.



#### 2.3 - Measuring complainant satisfaction with the process:

The Feedback Team have previously used electronic questionnaires to measure satisfaction by sending an email containing a link to the survey to recent users of the Feedback Service. The questionnaire was created with support from the Public Involvement Team and was designed to capture the Feedback Service Users experience and satisfaction level.



The results from these surveys will be used as a benchmark as we now encourage all complainants to tell us about their experience of making a complaint with new key performance measures introduced by the Scottish Government.

An electronic survey link will be included with all our responses encouraging feedback to identify areas for improvement. Paper copies of the survey will also be made available to anyone preferring to provide comments this way, to ensure no-one is excluded from giving feedback.

#### 2.4 - 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 Datix Complaints Module. The learning and actions fields are audited by the Feedback Service to ensure actions have been recorded, implemented, sustained and shared across the organisation as appropriate.

#### **Complaint Handling Target Achievement:**

Prior to the implementation of a new Complaint Handling Procedure on 1 April 2017, Complaint Handling Regulations required that if complaints are not responded to verbally within 3 working days, they were acknowledged within 3 working days and responded to in writing within 20 working days, or as soon as possible.



**3 Working Day Acknowledgement Target Achievement:** Over the past two years NHS Grampian has maintained its acknowledgment rate of an average of 100% of complaints within the 3 working day target.

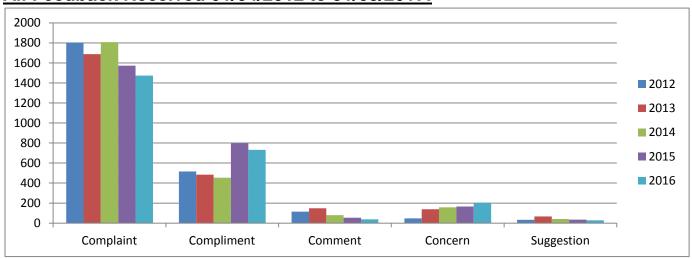
#### 20 Working Day Response Target Achievement: In 2015/16 NHS

Grampian's 20 working day performance fell between 62-86%. Our average performance for 2016/17 was 62%, which is disappointingly lower than we would want it to be. However, with the introduction of the new Complaint Handling Procedure in April this year, it is hoped that our performance will improve again as we adopt a more person-centred approach to complaint handling.

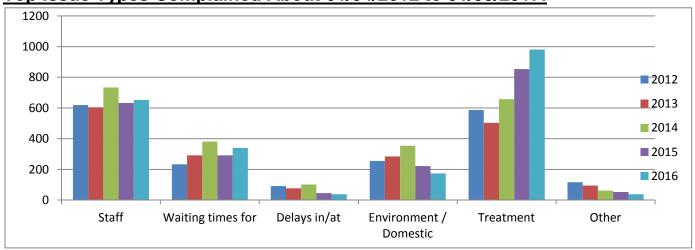
Between 1 April 2016 and 31 March 2017, NHS Grampian received: 1474 complaints, 732 compliments, 38 comments, 204 concerns and 28 suggestions. We had no requests for alternative dispute resolution, but the Feedback Team has supported many complainant meetings.

The below graphs show a five year trend of feedback received, issues complained about and the outcome of complaints.

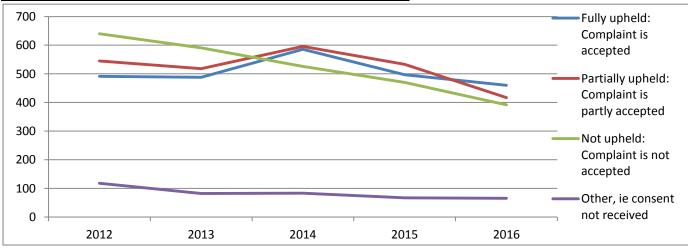
#### All Feedback Received 01/04/2012 to 31/03/2017:



#### Top Issue Types Complained About 01/04/2012 to 31/03/2017:



#### Complaint Outcomes 01/04/2012 to 31/03/2017:



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

The Public Involvement and Feedback Manager attends weekly Clinical Risk meeting with the Acute Sector. Attendees include the, Associate Nurse Director, Associate Medical Director, Head of Operations, Head of Performance and Governance, and the Quality Informatics Manager, Head of Quality Governance and Risk Unit, Deputy Head of Health and Safety, Head of Organisational Development, Divisional Clinical Director.



This meeting allows for an overview and connections to be made for complaints and adverse events and for the Public Involvement and Feedback Service Manager to raise concerns or seek support from the Directors if required.

When feedback or a complaint identifies a major or extreme event, or events, it is usual practice for the service involved to initiate a Significant Event Analysis (SEA). An SEA is an indepth investigation into any event thought to be significant in the care of patients. Once the investigation is complete, a meeting is usually offered to the complainant and their family to discuss the findings, identifying any learning opportunities and actions to be taken, as required.

Appropriate investigation and follow-up of adverse events, near misses and complaints increases our knowledge of why these events happen and improves our ability to prevent them recurring. The opportunity to share transferable lessons from the outcomes of investigations is vital in the prevention of reoccurrence of similar events.

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



In 2013, The Feedback Service developed an electronic questionnaire on Lime Survey, to allow the collection of Independent Contractors' (GPs, Dentists, Pharmacists and Opticians) complaint information. This questionnaire was further developed in 2014, to allow the collection of more detailed information including; key complaint themes, the learning identified and actions taken.

The Feedback Service sends an email to all Contractors across Grampian, which contains an electronic link to a Lime Survey questionnaire. This email also includes a reminder of all Contractors obligation under The Patient Rights (Scotland) Act 2011, to produce complaint information. The questionnaire is available for one month to allow Contractors to enter their complaints data. After this time the Feedback Service produces a report to allow the information to be submitted to the Scottish Government through ISD (Information Services Division) Scotland.

The Feedback Service has provided feedback and complaints training and awareness sessions to various staff groups in Primary Care, including: GP Practice Managers, Health Visitors, School Nurses, the Eye Health Network Group and have also attended Primary Care Organisation Advisory Group Meetings to give updates on complaint handling, reporting requirements and to feedback on the complaint reports submitted to ISD.

#### Section 3 - The culture, including 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 DATIX 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 - Supporting staff and the public enabling openness and confidence:

Being open and ensuring communication flows freely makes valuable knowledge available across the organisation, from front-line staff to strategic decision makers. Good communication and openness actively encourages service users' views and will embed a culture that values both positive and negative feedback. The development and improvement of these skills is a high priority for NHS Grampian.



NHS Grampian has developed bespoke training to give front line staff the skills, knowledge and confidence required to interact with members of the public effectively and empathetically in all situations they may encounter. There is a focus on being open, approachable, welcoming and encouraging feedback, responding effectively to feedback, dealing with difficult behaviours and understanding the value of a meaningful apology.



The staff training was tested on Out-patient Administrative Staff (approximately 150 staff). The content and materials for this training was developed using an electronic survey, which was sent to this group of staff to ask what type of training they would find useful and how they would like the training to be delivered. Evaluation questionnaires were used following the training session to assess and adjust the training as required. Once the trial was completed the training was made available and encouraged for all front line staff across the organisation.

#### 3.3 - Staff training plans:

NHS Grampian has a responsibility to ensure staff are competent and confident to deal with feedback. Issues should be resolved as they arise in a person-centred way. Learning and improvement from all feedback received should be promoted and monitored. Staff must be supported by their managers to ensure thorough investigation and administration of feedback occurs, including capturing learning and actions taken, and be held accountable for their role in terms of its effective management.

Effective utilisation of the Datix Complaints Module is encouraged and supported with a 'Datix User Guide'. Complaint handling support is provided by the Feedback Service for all Complaint Leads and their support managers, to enable the effective flow of feedback across the organisation.

The Feedback Service also provides tailored training sessions for individuals and groups to ensure a high quality and consistent approach to complaint handling. Complaint Leads are supported to adopt a standardised approach to investigating and



responding to complaints based on the e-learning module on complaint investigation skills, which was jointly produced by the Scottish Public Services Ombudsman (SPSO) and NHS Education for Scotland (NES).

The Feedback Team works closely with Complaints Leads, particularly in the Acute Sector, where a number of process and procedural changes have been agreed and implemented.

Complaints and Feedback Officers have also met with members of staff throughout NHS Grampian prior to the introduction of the new Complaints Handling Procedure on 1 April 2017, to highlight the changes and to empower staff to deal with complaints at the new early resolution 5 working days stage. This training is continuing throughout the year. Managers actively contact the Feedback Team to arrange training sessions for their staff.

Staff will continue to be encouraged to complete the e-learning modules, which educate staff to welcome and deal effectively with feedback. As staff become more confident asking for feedback, patients and members of the public should feel more confident in giving feedback. The Feedback Team also perform spot-check audits to ensure that posters and feedback cards are visible and available in all clinical areas.

## Section 4 - Improvements to services as a result of complaints and feedback

#### 4.1 - Action taken to improve services as a result of complaints and feedback:

Below are some examples of the lessons learned and action taken from complaints:

Examples Of Complaints Received 01/04/16-31/03/17	The Lessons Learned/ Action taken
Complaint from a patient about an appointment attended at an Antenatal Clinic, which she felt was a waste of time.	A new midwifery led clinic is being developed but in the meantime awareness will be raised at meetings to ensure communication is improved.
Complaint about a tripping hazard in the car park.	The new multi-story car park will be completed later this year but in the meantime a generator will be set up to offer temporary lighting.
A visitor to the hospital site slipped on black and complains about the lack of salt/grit used in the area which had frozen during the night.	Issue discussed with Hospital Management to ensure that the First Responder Service is contacted for gritting as required.
Complaint received that there is a growing pile of discarded rubbish at the rear of a hospital building.	A skip has been ordered to allow the rubbish to be cleared.
Complaint about an administrative error which resulted in a confidentiality breach.	Staff have been retrained in the letter folding machine and reminded to count at start and finish.

Examples Of Complaints Received 01/04/16-31/03/17	The Lessons Learned/ Action taken
Patient who is registered disabled and has regular appointments at Aberdeen Royal Infirmary (ARI), complained about the abuse of disabled parking taken up by vehicles not displaying a blue badge.	Investigation undertaken into why there were so many breaches of disabled parking at this time. Parking patrol staff will patrol this area more vigilantly.
Complaint from a patient about the Outpatient Clinic Appointment System.	Departmental Meeting will discuss how they can change system to prevent patients having to wait.
Complaint received about a Plastic Surgery Outpatient Clinic Appointment.	Apology given for lack of communication and as a result the service will be going back to usual supplier for tape to secure dressings.
Patient attending GMED complained about smokers congregating around entrances at ARI.	Tobacco Group have been made aware and to develop a plan to stop people smoking on site.
Complaint received about people smoking outside Dr Gray's Hospital.	Further communication sent to remind patients of the revised Policy. Looking into if further signage required.
Complaint received regarding smokers at ARI.	Further communication to be done and notices going in payslips.
Patient complaint about the care they received following chemotherapy treatment.	Raigmore Oncology Department to provide support to ensure consistency between Highland and Grampian. Also discussing how we can improve regional working.
Daughter complained about her father's discharge from hospital, as it was not discussed with the family.	The details of this patient experience was shared at the team meeting as an opportunity for reflective learning-input on patient opinion was also shared across the site.
Family complaint about discharge planning.	Processes put in place to ensure liaison with the Discharge Hub to access support for patients and families as required.
Mother of a young patient complained about the treatment her son received from a nurse who was tasked with removing his cast.	Staff training sessions have been arranged to educate on how to communicate information to the younger child.
Complaint from a family unhappy with the care and treatment their relative received at Woodend Hospital.	Improvements required discussed with members of staff, an afternoon pause and a 'Communication and Jobs Book' has also been introduced.
Complaint received about NHS Grampian's booklet called "Coming for Colonoscopy".	The complainant's views have been welcomed and used to update and improve this patient experience booklet.
Patient complaint received about the maintenance in and outside of Cornhill Hospital.	Thanks given for the issues raised as they were all previously unreported. All issues are now being addressed.

#### Below are some examples of the lessons learned and action taken from feedback:

Examples of Informal Feedback 01/04/16-31/03/17	The Lessons Learned/ Action taken
Patient who gave birth at Aberdeen Maternity Hospital (AMH) raises various concerns about her experience.	Meeting was offered and held with parents. Service working towards improved facilities for partners and more access to in late evening and early hours, especially if labour is predicted. Lots of positive work has just been done to improve breast feeding support. More person centred visiting being encouraged within AMH.
Concern from a patient about his appointment letter giving contradictory information to what they received from their consultant.	This was due to an administrative error and the template letters have now been amended to prevent this happening again.

Examples of Informal Feedback 01/04/16-31/03/17	The Lessons Learned/ Action taken
Concern raised from the mother of a patient about the Ear, Nose and Throat (ENT) waiting list for Dr Gray's hospital.	Work is in process to create a Standard Operating Procedure to amalgamate waiting lists to create equity across NHS Grampian.
Patient unhappy about travelling from Elgin to Aberdeen for an MRI scan and would like to know if they could have been seen at Raigmore or at a mobile scanner?	Dr Gray's Hospital are in the process of trying to secure funding for new MRI Unit.
Question raised from a neighbouring house about the pruning programme at ARI, as some of the trees are very big and branches are hang over their garden.	The trees are being reviewed and the necessary work will be carried out.
Patient commented that their appointment letter was formatted over two sheets of paper instead of one, and that savings could be made on using less paper.	The templates are unfortunately formatted this way but management is exploring if this can be improved in the next Patient Management System (PMS) upgrade.
Patient who underwent breast surgery suggests that more explanation needed about the difference between symptomatic and routine mammograms; and that patients' undergoing reconstruction should be reassured that the initial appearance may not look good but it does improve over time.	The Surgeon thanked the patient for bringing these areas to light and will now inform patients more clearly in the future.
Patient is unhappy about their Orthopaedics Outpatient Appointments as they feel the appointments are not long enough.	Patient has been offered a further appointment with their Consultant if this would be helpful.
Patient was not as happy with their stay in the ward as they were with their previous stay.	Patient was invited to speak with the Ward Manager about these issues to input to a ward review that was being carried out
Parental concern raised about the care provided to their child by Royal Cornhill Hospital (RCH,) has been interviewed and rejected for admission on more than one occasion.	Explanation of service provision arrangements of close working between GPs, Community Mental Health Teams, Substance Misuse services and RCH and confirmed the patient was being monitored and cared for.

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

- Feedback and complaints are discussed at weekly multi-disciplinary clinical governance/quality meetings and appropriate actions are taken to improve on identified areas of concern.
- Clinical treatment complaints are discussed through peer review.
- Learning points are identified from patient feedback by service managers and these are shared with their teams.
- Action points from patient feedback are implemented to ensure that the same things don't happen again.
- Analysis of complaints and feedback is a part of service reviews to ensure any themes or significant events that require more significant service improvement or resource to improve are identified.
- NHS Grampian will continue to embed a more robust system to maximise the learning from complaints by providing the appropriate training and practical support to services. One

## 4.3 - Learning being brought together with learning from other sources, e.g. adverse events, to provide an integrated approach to improvement planning:

Complaints are reviewed every week when the Public Involvement and Feedback Manager attends the weekly Clinical Risk meeting with the Acute Sector. Attendees include; the Associate Medical Director, Associate Nurse Director, Deputy Associate Medical Director, Head of Operations, Head of Performance and Governance, and the Quality Informatics Manager. This allows for an overview and connections to be made for complaints and adverse events and for the Risk Manager Advisor and the Feedback Service Manager to seek support from the Directors if required.

Both complaints and adverse events are discussed during this meeting to allow linking of incidents, investigations and their outcomes. There is a focus on the learning that has occurred and the actions taken as a result, and these can be shared through learning notices distributed across the organisation, as required.

A joint policy for the Management of and Learning from Adverse Events and Feedback was produced in 2015.

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

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

As previously mentioned, the Feedback Service prepares a report every week and shares it with the attendees mentioned above in Paragraph 4.3.

The Feedback Service report includes:

- New complaint descriptions and patient experience severity scoring.
- Complaints which are still open/in progress after 20 working days.
- Recently closed serious, sensitive or complex complaints to ensure full learning and action has been taken and discuss shared learning opportunities.
- Ombudsman complaints which are open and have recently closed, to allow discussion of recommendations made and ensure learning and action is taken and shared.
- Complaint Handling Performance, including acknowledgement and response target achievement, how many complaints are open and overdue.
- Early Resolution report, highlighting which services have achieved the 5 working day early resolution since the introduction of the New Complaints Handling Procedure on 1 April 2017.

A 'Learning from Complaints and Scottish Public Services Ombudsman Cases (SPSO) Report' is prepared four times a year by the Public Involvement and Feedback Manager. This report is presented to the Clinical Governance Committee and the Engagement and Participation Committee. The report includes information on feedback, complaints and SPSO cases closed over the previous three months. Some feedback information includes; feedback types (compliments, comments, suggestions, concerns and complaints), numbers received, locations and themes of feedback and complaints. The severity and outcomes of complaints and SPSO findings, and the learning identified and action taken as a result of feedback and complaints.

The 'Handling and Learning from Feedback' annual reports are available on NHS Grampian's website and are also shared with and presented to the Engagement and Participation Committee.



## 5.2 - Supporting NHS Board non-executive Directors to seek assurance that improvements can be systematically and reliably demonstrated:

NHS Grampian Board is assured that:

 Feedback and complaints are administered in line with national guidance, including managing the flow of information, issuing the responses in a timely manner and responding to SPSO investigations.



- The necessary advice and training is provided across the organisation, to enable long term sustainability.
- The Feedback Service enables liaison between service teams and the central services (DATIX and Feedback Officers) to facilitate greater levels of collaboration, which ensures that NHS Grampian has the information necessary to use the learning identified and make service improvements as a result of the feedback received.
- NHS Grampian is fully compliant with complaint handling arrangements, in line with the Patient Rights (Scotland) Act 2011, and in particular ensures that action is taken, as necessary, following the outcome of any feedback.
- The feedback system is constantly being developed to ensure mechanisms are in place to support fast, effective and efficient responses 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 high quality, effective feedback and complaints handling is the
  norm across the organisation.

NHS Grampian has a strong organisational commitment to stakeholder engagement, through our core values of "Caring, Listening, Improving" and the strategic themes of "involving our patients, public staff and partners" and "developing and empowering our staff". A 'Stakeholder Engagement' paper was produced in 2014, and demonstrates how NHS Grampian achieves the core values through engagement with staff and the public before, during and after care. This paper is still referred to regularly to ensure we continue to improve and achieve our core values.

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



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