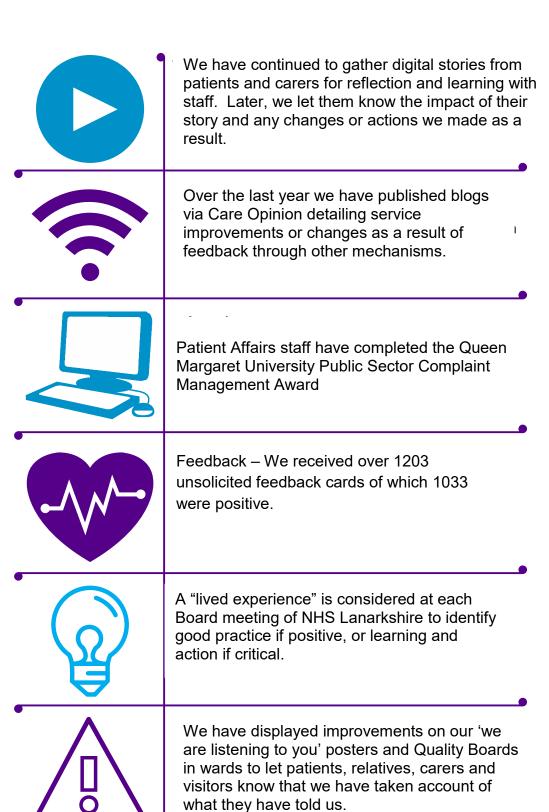


## Annual Report on

# Feedback, Comments, Concerns and Complaints

### At a Glance 2019/2020

Care Opinion What's your story?	<ul><li>More than 900 submissions</li><li>More than 200 staff registered</li></ul>		
2	NHS Lanarkshire Public Reference Forum – have reviewed and endorsed this report and made contributions throughout the year to:  • Monklands Replacement Project  • Emergency Department information for the public  • NHS Lanarkshire Communication & Engagement Strategy  • Compassionate Lanarkshire "No-one dies alone project		
	Facebook and Twitter – social media is managed by our communications team to provide information and signpost people		
2592 complaints	We received 2592 complaints during the year of which 483 related to prisoner healthcare.		
96	96 % of Stage 2 complaints were acknowledged within the national target of three working days.		
46	Scottish Public Service Ombudsman investigation reports were received in 2019-2020.		



#### 1. Introduction

We want to hear about people's experiences of using our services so that we know what we do well and where we could do better. In this report we describe some of the arrangements we had in place to receive feedback, comments, concerns and complaints between April 2019 and March 2020 and some of the improvements we have made as a result.

#### 2. Feedback

2.1. **Encouraging and gathering feedback -** we have continued to promote the mechanisms available to people and accessing our services through posters, leaflets, letters and our website.



We have continued promoting our "We are listening" brand with both staff and the public to highlight the different ways that unsolicited feedback can be provided. All staff are encouraged to invite feedback from people accessing our services.

Staff recognise the value of positive and critical feedback and the opportunity it provides for reflection, learning, celebration and action. Our Outpatient Information Sheet provided to all new appointments has been updated to include information on Advocacy during the reporting period.

The Scottish Health Council's (SHC) report "Listening and Learning", published in April 2014, highlighted three main barriers to people providing their feedback on health services:

- Fear of Repercussions
- Not knowing how to make contact
- A lack of confidence that anything will be done

Staff training through e-modules and face-to-face training has continued to raise awareness around the barriers to providing feedback and the

mechanisms available for providing feedback and how we should respond and use it.

We have continued to invite and encourage the public to provide feedback about their healthcare experiences using a **blended approach**.

2.2 **Solicited Feedback** - we have changed our approach to gathering solicited feedback from inpatients at point of care. Historically we have held a brief themed conversation using the "Must do with me" person-centred framework:

#### What matters to you?

Your personal goals and the things that are important to you have been discussed and form the basis of your care or treatment.

#### Who matters to you?

We have asked you about the people that matter most in your life and we have given you the opportunity to involve them in the way that you choose.

#### • What information do you need?

We have provided you with understandable full information and supported you to make decisions that take account of your personal goals and the things that are important to you.

#### Nothing about me without me

You will always be given the opportunity to be involved in discussions. All information exchanges and communication between professionals or between different services or supports are transparent and always provide you with the opportunity either to be present or to contribute to the process.

#### Personalised contact

As much as possible, the timing and methods by which you contact and use services or supports are flexible and can be adapted to your personal needs.

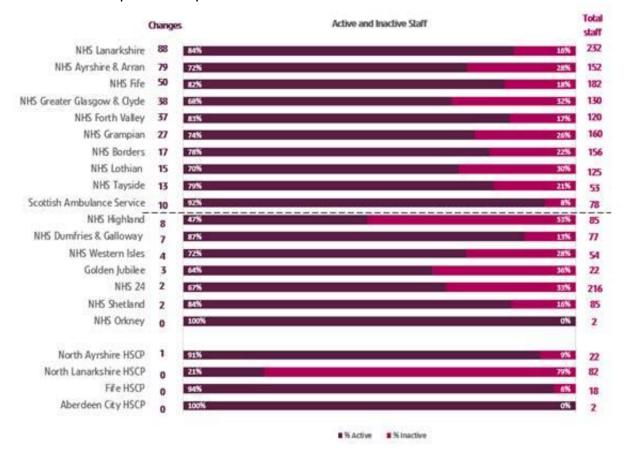
Historically, this information was gathered anonymously and then shared with staff before being recorded on the Lanarkshire Quality Improvement Portal, an IT system only accessible to staff. This system did not allow us to close the loop and let the individual know what the learning or actions were from their feedback.

We now have public volunteers as interviewers who gather feedback anonymously using the person-centred framework, but the feedback is recorded on "Care Opinion" a public facing feedback platform. Typically a Service Manager, Senior Nurse or Team Leader will respond to the feedback so that the loop is closed and the person knows what we have, or have not done. This also provides transparency and learning opportunities for all staff,

not just the team involved, as well as enabling members of the public to see what people are saying about our inpatient services in real-time.

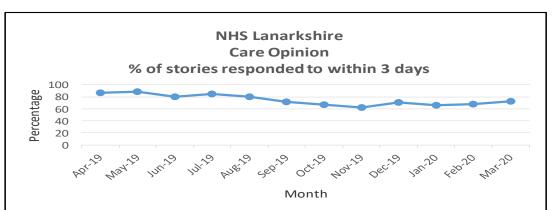
2.3 Unsolicited Feedback - We know that it is important to the public that staff close to, or with responsibility for the delivery of care and services are listening to feedback, are able to congratulate staff on their professionalism and have the ability and authority to identify and drive change and improvement. We have more staff listening and responding to feedback through Care Opinion than any other Health Board in Scotland (Data Source: Care Opinion Q3 Report 2019)

Table 1 – Care Opinion Responders



950 submissions were received through the Care Opinion platform during the reporting period, 604 were wholly positive and 346 had an element of criticism as moderated by Care Opinion. All 950 stories received were responded to and shared with the staff involved in order to celebrate success and identify opportunities for **learning and improvement**.

Table 2 – Response Times on Care Opinion



We have developed an inductive framework to report how we are using the feedback through Care Opinion based on the responses published by staff:

- Sharing Sharing good/exemplar practice with identified staff and wider
- Learning Issues/opportunity identified that requires staff to review evidence, address gaps in knowledge, training required
- Reflection Sharing critical feedback (behavioural/attitudinal) at safety briefs/daily meetings etc
- Review Reviewing practice/process/system
- Action Undertaking a physical action around process/system
- Change system, process or change in practice
- Contact Invitation to author to make contact to provide further detail for consideration and targeted response/action
- Complaint Contact made and progressing through CHP

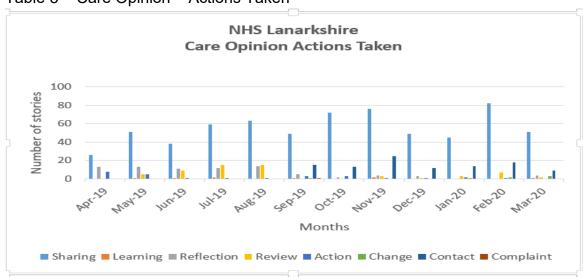


Table 3 - Care Opinion - Actions Taken

We continue to work with Care Opinion on how the system can best serve the public to provide feedback and support staff to receive and respond to feedback.

Feedback on people's experiences was recorded on our electronic database (LanQIP) or in **DATIX** (where we record feedback, incidents and complaints). The chart below illustrates the positive feedback received through our unsolicited feedback mechanism "We are listening". We received a total of 826 unsolicited **We are listening cards** between April 2019 and March 2020; of which 699 were positive and 127 provided opportunities for learning and improvement.

Management and Senior Charge Nurses have access to systems, or are provided with information / reports to share with their teams for reflection and to drive improvement at a local level.

2.4 Changes and Improvements from feedback - we have continued to publish blogs via the Care Opinion website detailing activities and changes we have made as a result of feedback received through other mechanisms.

Changes, or planned changes as a direct result of feedback includes:

- Parking
- Catering
- Information
- Communication
- Access

Details can be viewed via this link

https://www.careopinion.org.uk/opinions?nacs=sl9#/?tab=2

#### 2.5 Not knowing how to make contact



Welcome and departure boards throughout NHS Lanarkshire premises detail the different ways the public can provide feedback or get in touch. Staff **encourage** patients and carers to provide unsolicited feedback; if not at point of care then at a later date when they have been able to reflect on their experience. All patients and carers who participate in the solicited feedback programme are given a "we are listening" feedback card and/or invited to provide additional feedback through the Care Opinion website following their episode of care.

Comments, compliments and suggestions cards are included in all packs for people receiving care in their own homes. The cards advise people of the different ways they can provide feedback; alternatively these cards ensure people can provide positive or critical feedback safely as they can simply complete and return the feedback card by free post.

NHS Lanarkshire's **Facebook** and **Twitter** accounts continue to be used to provide information to patients, their relatives and carers, the public and staff. By using these people could give us feedback "as it happened". These accounts were monitored daily, including evenings and weekends, to ensure a timely response and that issues were quickly shared with appropriate staff.

https://twitter.com/nhslanarkshire - 15.4k followers https://www.facebook.com/nhslanarkshire 11,638 friends

2.6 A lack of confidence that anything will be done - our public partners have continued to work with us through the Public Reference Forum (PRF) and the Public Partnership Forums (PPFs). In addition to attending the routine meetings, members are invited to participate in Short-Life Working Groups to progress work as required.

The NHS Lanarkshire Public Reference Forum continues to represent a diverse mix of people accessing our services. The Forum is comprised of people with lived experience, with representatives from Deaf Services Lanarkshire, Deafblind Scotland, Scottish Health Council, People First (advocacy group for people with learning disabilities), Mental Health and Carer organisations. The Forum meets quarterly and provides an opportunity for open discussion of subjects of public interest in relation to health and social care within NHS Lanarkshire by:

- Promoting collaboration between NHS Lanarkshire and service users to the benefit of both
- Obtaining the views of our service users with a view to improving our services both in terms of clinical quality and usability
- Facilitating greater understanding of NHS priorities and drivers and working in partnership to meet both service requirements and those of patients, families and carers.

During 2019 / 2020 the Forum has considered:

Topic			
Monklands Replacement Project	Members co-opted onto the 1:200		
	design group		
Emergency Department information	Development of information for the		
	public attending hospital		
NHS Lanarkshire Communication	Consulted on the DRAFT and		
Strategy	feedback used to develop strategy		
Compassionate Lanarkshire "No one	Shared information about this		
dies alone" project	developing project with their		
. ,	constituents		
NHS Lanarkshire Complaint Handling	Consulted on the Plan.		
Development Plan			

Annual infection prevention & control communication plan	Informed approaches to be taken and additional avenues to cascade key messages	
Staff Awards	A member was co-opted onto the judging panel	
Hospital Signage	Member co-opted onto working group	
Monklands Replacement Project	Members provided with dates of public meetings to encourage constituents and peers to attend	

#### Additionally information was shared on:

- Annual Report on Feedback, Comments, Concerns and Complaints
- NHS Lanarkshire Quality Week 2019

We have continued to gather **digital experiences** from patients and carers. These are shared with staff for reflection and learning. Every Lanarkshire NHS Board meeting is presented with a digital story outlining actions and outcomes.

#### 3. Encouraging and handling complaints

This section of the report gives information about complaints received by NHS Lanarkshire and our Family Health Service (FHS) contractors (GPs, General Dental Practitioners, pharmacists and opticians).

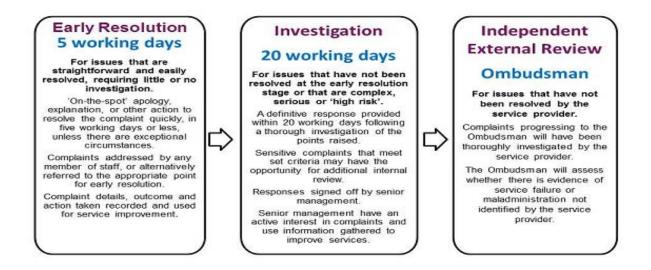
#### **Complaint Handling Procedure**

The Complaint Handling Procedure (CHP) for NHS Scotland changed from 1 April 2017. The procedure aims to provide a quick, simple and streamlined process.

The procedure provides two opportunities to resolve complaints internally:

- 1. Early Resolution (Stage 1)
- 2. Investigation (Stage 2), for issues that have been unresolved at Stage 1, or that are complex, serious or high risk.

#### The NHS Model Complaints Handling Procedure



Complainants who remain unhappy with the response they receive from NHS Lanarkshire can ask the SPSO to review their complaint.

#### Development of complaint handling in NHS Lanarkshire

NHS Lanarkshire have devised a Complaint Development Plan, to ensure that our processes and procedures support the principles of effective, evidence-based complaint handling.

The Development Plan endorses NHS Lanarkshire's commitment to achieving the key aims of the introduction of the Complaint Handling

#### Procedure:

- i. To take a consistently person-centred approach to complaints handling across NHS Scotland
- ii. To implement a standard process
- iii. To ensure that NHS staff and people using NHS services have confidence in complaint handling
- iv. Encourage NHS organisations to learn from complaints in order to continuously improve services

#### **Complaints Performance Indicators**

The Complaints Handling Procedure (CHP) introduced nine key performance indicators, by which NHS Boards and their service providers should measure and report performance. These indicators, together with reports on actions taken to improve services as a result of feedback, comments and concerns will provide valuable performance information about the effectiveness of the process, the quality of decision-making, learning opportunities and continuous improvement.

#### **Indicator One: Learning from complaints**

NHS Lanarkshire remains committed to learning from complaints, and recognise this as a key driver and principle of the CHP.

We continue to progress developments in this area. Examples include:

- i. Patient Affairs staff have completed an aEquip (internal QI programme) project to ensure that actions are recorded for all complaints that have been upheld or partially upheld at Stage 2 (investigation)
- ii. We have prepared a method to improve recording of complaint learning, to enable easier organisational identification and monitoring of progress of agreed actions from upheld or partially upheld complaints. This will be implemented with complaints received from 1 April 2020.
- iii. Developing quality assurance mechanisms to ensure that complaint responses clearly communicate the learning and supporting remedial actions to the complainant.

Examples of actions/improvements taken in response to complaints during the period, include:

- Using complainant feedback to facilitate staff reflection and learning, and for discussion at educational meetings and safety briefs
- ii. Reminders about the need for clear communication with relatives
- iii. Amended patient information
- iv. Change in process, for example record keeping, with follow-up audits to confirm understanding and compliance of agreed changes
- v. Reminders to nursing staff relating to pain relief
- vi. Policy developed on discharging patients with abnormal observations from Accident and Emergency
- vii. Improvements identified in relation to delirium screening

viii. Reminders in relation to informed consent for surgical procedures

#### **Indicator Two: Complaint Process Experience**

NHS Lanarkshire remain committed to the recommendations from the Scottish Government Report *The New Model NHS Complaints Handling Procedure – Review of First Year* (March 2019), which included:

- i. A national approach to address concerns and challenges around this indicator and identify solutions
- ii. Involvement of the Scottish Health Council to identify a national approach
- iii. Guidance from the Information Commissioner

In early 2020, we concluded liaison with Information Governance and our Equality and Diversity Manager. An anonymised electronic survey has been developed, recognising that a significant number of complainants now provide email addresses. We had planned to test this on closed complaints, but in light of Covid-19, this activity was paused.

Our sampling approach will also recognise the potential sensitivities of further contact with certain complainants, and as such, will apply an exclusion criteria to those selected for survey. For example, complainants who have raised concerns about a death.

#### **Indicator Three: Staff Awareness and Training**

With an emphasis on Early Resolution (Stage 1), staff were provided with continued guidance, training and support during 2019/20.

We have also continued to deliver awareness training on how to respond to feedback and complaints at induction programmes. Patient Affairs staff are also regularly invited to attend staff and other adhoc meetings.

Achievements in this period also include:

- i. Patient Affairs staff attended the Queen Margaret University (QMU) accredited Public Sector Complaint Management Award, which incorporated a reflective submission of complaint handling experiences, and identification of learning and improvements. Post-certification, QMU have asked if these staff will participate in a further reflective exercise, considering the impact this learning has had on their complaint handling practices.
- ii. 3 Power of Apology workshops have been held, facilitated by Dorothy Armstrong, DA Professional. The workshops provided staff with learning on the nature, elements and psychology of complaints.
- iii. An Early Resolution workshop (50 staff) took place during Quality Week (November 2019), also facilitated by Dorothy Armstrong.

iv. Patient Affairs staff attended the Scottish Public Service Ombudsman's Unacceptable Behaviour Programme.

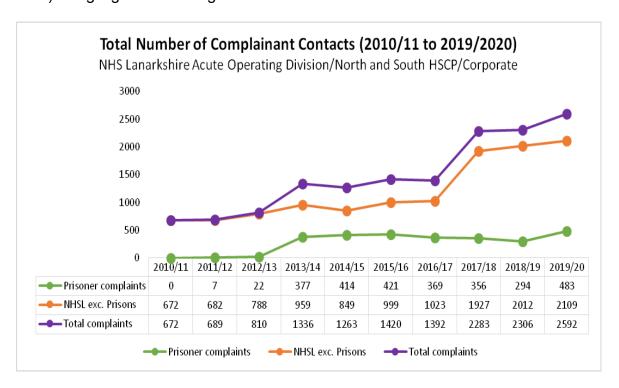
#### Indicator Four: The total number of complaints received

From 1 April 2019 – 31 March 2020, NHS Lanarkshire received **2,592** complaints, a rise from 2,306 in 2018-2019.

Of the 2,592 complaints received, **483** were from prisoners at HMP Shotts, a rise from 294 in 2018-2019.

**TBC** were received from Primary Care Contractor/FHS contractor complaints including GP, Dental, Pharmacy and Ophthalmology.

Complainant contacts to NHS Lanarkshire over the last 10 years (excluding FHS) is highlighted in the figure below:



#### Indicator Five: Complaints closed at each stage

NHS Lanarkshire closed **2,410** complaints in 2019-2020. This does not include FHS contractors, complaints that have been withdrawn or complaints where consent was not received.

The table below highlights that 1415 (59%) complaints were closed at Stage 1, with 904 (37%) closed at Stage 2. 91 complaints (4%) that had escalated from Stage 1 to Stage 2 were closed.

Stage of closure	Number	As a % of all complaints closed
Stage One	1,415	59%
Stage two – non escalated	904	37%
Stage two - escalated	91	4%
Total complaints closed	2,410	

#### Indicator Six: Complaints upheld, partially upheld and not upheld

In 2019-2020, at:

#### Stage One:

27% of complaints were upheld at stage one

56% of complaints were not upheld at stage one

17% of complaints were partially upheld at stage one

#### Stage Two:

20% of complaints were upheld at stage two

40% of complaints were not upheld at stage two

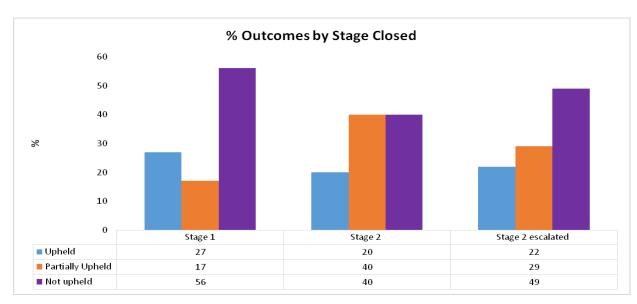
40% of complaints were partially upheld at stage two

#### Stage Two escalated (from Stage One):

22% of complaints were upheld

49% of complaints were not upheld

29% of complaints were partially upheld



#### **Indicator Seven: Average times**

This indicator represents the average time in working days to close complaints at Stage 1 and complaints at Stage 2 of the model CHP.

The average time in working days to respond to complaints at Stage 1 was 4 working days.

The average time in working days to respond to complaint at Stage 2 was **24** working days.

#### Indicator Eight: Complaints closed in full within the timescales

The model CHP notes that Stage 1 complaints should usually be dealt within 5 working days. Stage 2 complaints should be responded to within working 20 days, but as the SPSO Statement of Complaint Handling Principles state, 'thoroughness of investigation should not be compromised by attempts to meet timescales and flexibility must be afforded for particularly complex cases'.

Of the complaints closed by NHS Lanarkshire in 2019-2020:

81% (1142/1415) of Stage 1 complaints were closed within 5 working days.

62% (564/904) of Stage 2 complaints were closed within 20 working days.

87% (79/81) of escalated complaints were closed within 20 working days

#### Indicator Nine: Number of cases where an extension is authorised

The model CHP recognises that in cases where timescales cannot be met for good reason, an extension to the timescales can be authorised, and the complainant must be kept informed of those reasons.

In 2019-2020:

2% (30/1415) of all complaints closed at Stage 1 had an extension authorised.

**16%** (159/995) of <u>all</u> complaints closed at Stage 2 had an extension authorised.

# <u>Feedback, comments, concerns and complaints about services</u> <u>delivered by our FHS contractors</u>

The table below gives information about complaints received by our **FHS contractors** between 1 April 2019 and March 2020:

	GP	Dental	Pharmacy	Ophthalmology
Number of complaints	924	73	377	29
received				

#### 4. Accountability and Governance

4.1 **Reports** on feedback received from patients, their relatives and carers, and visitors were provided by NHS Lanarkshire to representatives of the PPFs and to Non-Executive Directors. Digital patient stories were heard at Lanarkshire NHS Board meetings.

A **mid-year report** is produced NHS Lanarkshire on feedback, comments, concerns and complaints. This was discussed at the Healthcare Quality Assurance & Improvement Committee of the Board.

**Monthly reports** were also produced for management teams on solicited and unsolicited feedback received.

- 4.2 Anonymised summaries **of individual complaints** (where the SPSO upheld the complaint and / or made a recommendation) and the associated action plan were considered by the Healthcare Quality Assurance & Improvement Committee, which is chaired by a Non-Executive Director.
- 4.3 NHS Lanarkshire worked with the PPFs to develop the **Annual Report** on Feedback, Comments, Concerns and Complaints for 2018/19. The report was published in June 2019 and was considered by the Healthcare Quality Assurance & Improvement Committee of the Board at its July 2019 meeting.
- 4.4 NHS Lanarkshire continue to produce our Annual report in the format endorsed by the Scottish Health Council at the last Participation Standard review.