




Annual Report on

Feedback, Comments, Concerns and Complaints

June 2021

At a Glance 20/21

	<p>584 people submitted their stories on care opinion to share their experience</p> <p>262 staff registered as responders on care opinion so that people who post their stories receive an answer from staff working in the service</p>
	<p>NHS Lanarkshire Public Forums – unfortunately due to covid19 our Public Reference Forum were unable to meet face to face and the membership were not able to meet virtually. Our North and South Partnership Forums did meet virtually throughout the year.</p>
	<p>Facebook and Twitter – social media is managed by our communications team to provide information and signpost people to how to provide us with feedback on their experiences.</p>
	<p>Due to restrictions of the pandemic we have been unable to gather digital stories from patients and carers. Later, this year we hope to be able to re-establish our digital stories approach.</p>
	<p>We received 162 unsolicited feedback cards from people using our services of which 90% were positive.</p>
	<p>We have displayed improvements on our 'we are listening to you' posters and Quality Boards in wards to let patients, relatives, carers and visitors know that we have taken account of what they have told us.</p>

<h1>2122</h1>	2122 complaints were received in NHS Lanarkshire
 <p>SCOTTISH PUBLIC SERVICES OMBUDSMAN</p>	The Scottish Public Services Ombudsman (SPSO) determined 80 NHS Lanarkshire complaints, 27 at their Investigation Stage

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 2020 and March 2021 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 feedback mechanisms available to people accessing our services through posters, leaflets, letters and our website.

Outpatient Information Sheet

NHS Lanarkshire

BEFORE YOUR APPOINTMENT
We may check your hospital or GP summary records before your appointment. This is to make sure we have your latest up-to-date clinical information.

YOU CAN HELP BY

- ◆ Attending your agreed appointment. If you can't attend; or, if you are going to be unavailable for a period of time, you should contact us as detailed in your appointment letter.
- ◆ Following any instructions to prepare for your appointment as detailed in your letter.
- ◆ Please bring the card or letter with you.

YOUR APPOINTMENT
Please try and arrive at the Department 5 - 10 minutes before your appointment so that you can book in. If you need to have tests such as an x-ray, you may need to go to other departments before or after seeing the doctor. If this is the case, your clinic visit may take one to two hours.

FACILITIES
Toilet facilities, including wheelchair access are available within the Outpatient Departments, as are baby changing facilities and breastfeeding facilities.

SPECIAL ARRANGEMENTS
Please contact the Outpatient Department as soon as possible if you need us to arrange support for your appointment. This might be:

- ◆ A language interpreter, or someone to sign if you are deaf.
- ◆ Assistance if you are visually impaired.
- ◆ Lifting equipment if you have difficulty standing, or transferring from a wheelchair.
- ◆ Guide and hearing dogs are permitted within the Outpatient Department.

TRAVEL INFORMATION
Full details of public transport services can be obtained from Traveline on 0871 200 22 33 or www.travelinescotland.com. Disabled parking facilities are available at all NHS Lanarkshire Acute Hospitals.

We are listening - how did we do?
Your feedback is important as it helps us evaluate the services we provide. It allows us to identify areas where we are doing well but also areas that we can try and improve.

If you would like to tell us about your healthcare experience you can:

- ◆ speak to a member of staff
- ◆ complete the reverse of this form and hand it to a member of staff
- ◆ contact us via our website www.nhslanarkshire.org.uk
- ◆ call us on Tel No: **01698 858321** Monday - Friday from 1pm - 4pm
- ◆ share your story at www.careopinion.org.uk or call Tel No: **0800 122 31 35**

Care Opinion
What you think!

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 in view of covid19 restrictions and guidance but still promotes feedback using Care Opinion

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** - Prior to covid-19 we utilised public volunteers as interviewers to gather feedback anonymously using the person-centred framework, with the feedback being 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. This practice was put on hold during Covid-19 but it would be our intention to resume this programme of volunteer input when it is again safe to do so.

During this reporting period solicited feedback was captured by the Quality Directorate Improvement Team in the COVID19 mass vaccination clinics in Lanarkshire. A 7 Question Smart Survey was developed and patients attending for their vaccination appointment were asked to provide feedback on their experience. Of the first 100 patients who took part 72% rated their experience as “Excellent” and as the number of patients taking part increased of 349 patients, 92% of patients rated their experience “Excellent” or “Very good”.

- 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 Annual Report 20/21)

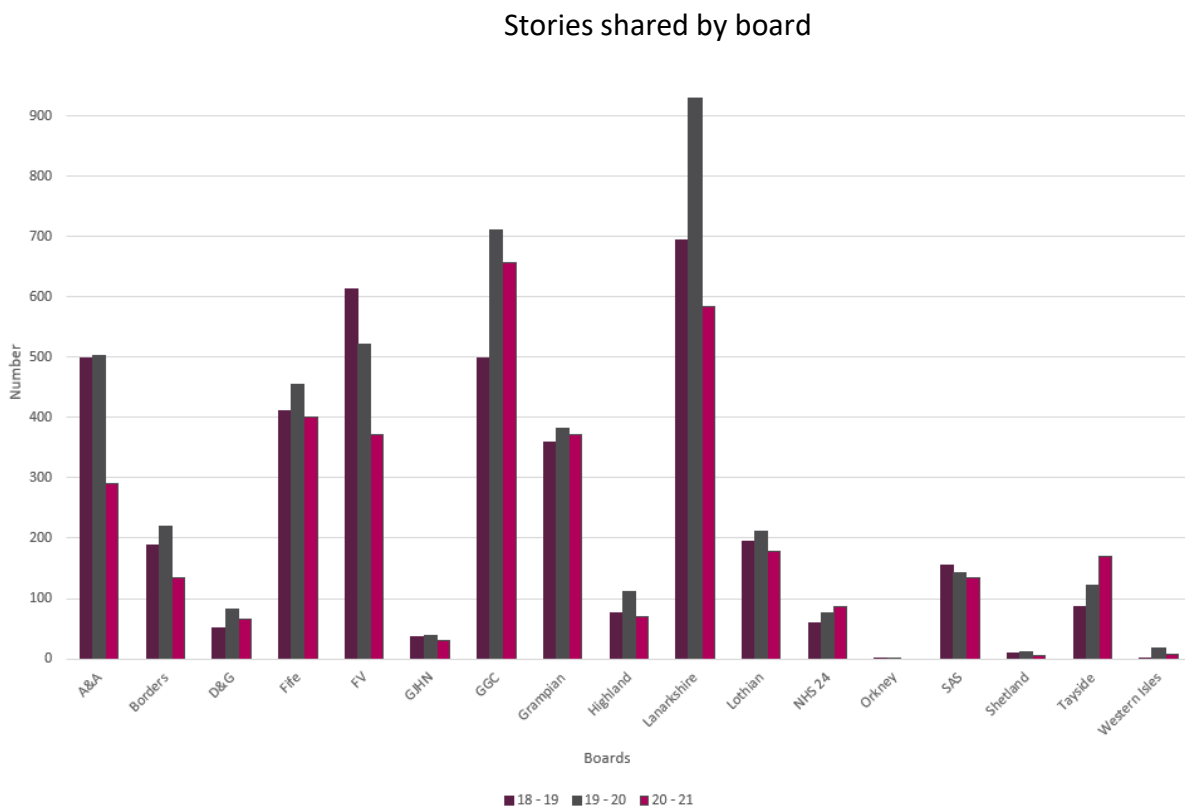
Care Opinion is a national social enterprise which enables the public to tell their stories of their experience of health and social care. It has been running for 14 years and is an open online feedback system, with the aim of public service improvement. It has continued to grow nationally and internationally year on year.

In Lanarkshire Care Opinion covers several NHS Lanarkshire services; acute hospitals, community hospitals and community and primary care health services. It does not cover independent contractors such as GPs, Dentists and Optometrists.

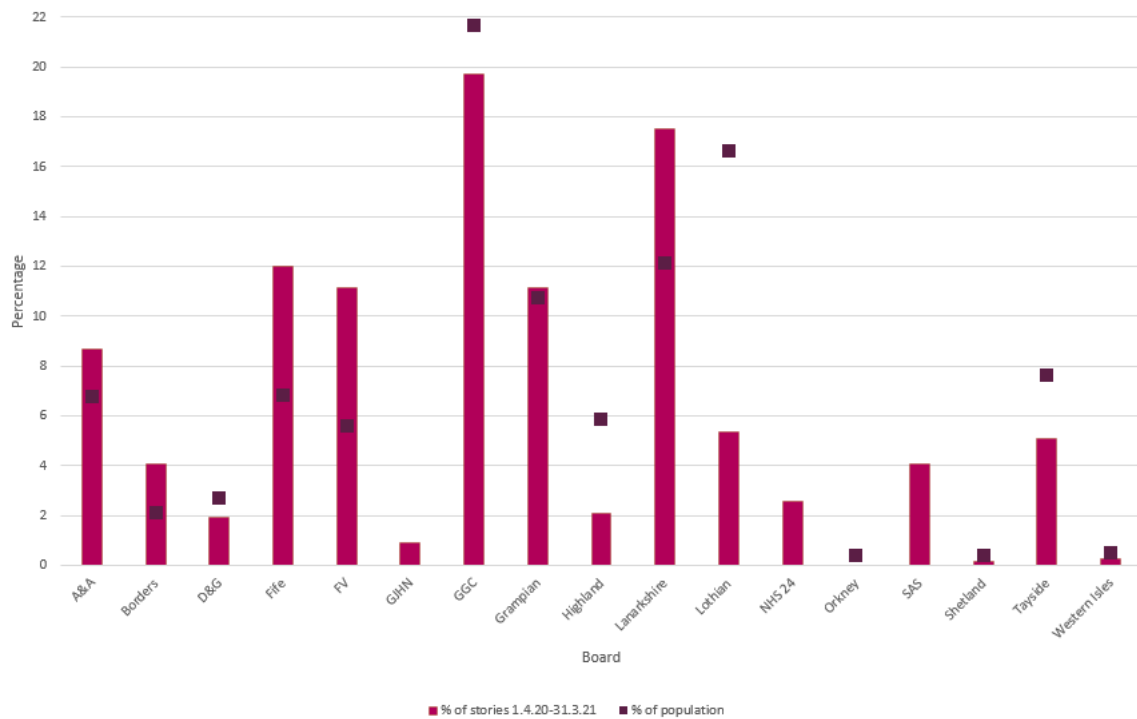
Care Opinion is a key part of our Quality Strategy Person Centred Care Plan and is the main way we receive unsolicited feedback from service users and their families. Care Opinion plays an important part in creating an open dialogue between people accessing our services and the direct providers of those services.

During the pandemic it was noted that patient feedback was reduced across most Board areas and while we still actively encouraged use of Care Opinion the uptake by the public was less than in the previous years.

In 2020/21 in Scotland 3,333 people shared their stories of health and care services on Care Opinion. Of these 584 were Lanarkshire stories. The 584 stories in 20/21 is a 39% decrease from 2019/20, we know that across Scotland most Boards saw a reduction in stories received during this year. We continue to actively encourage the use of Care Opinion to the public as a way of telling us what went well and what could be even better with our services.



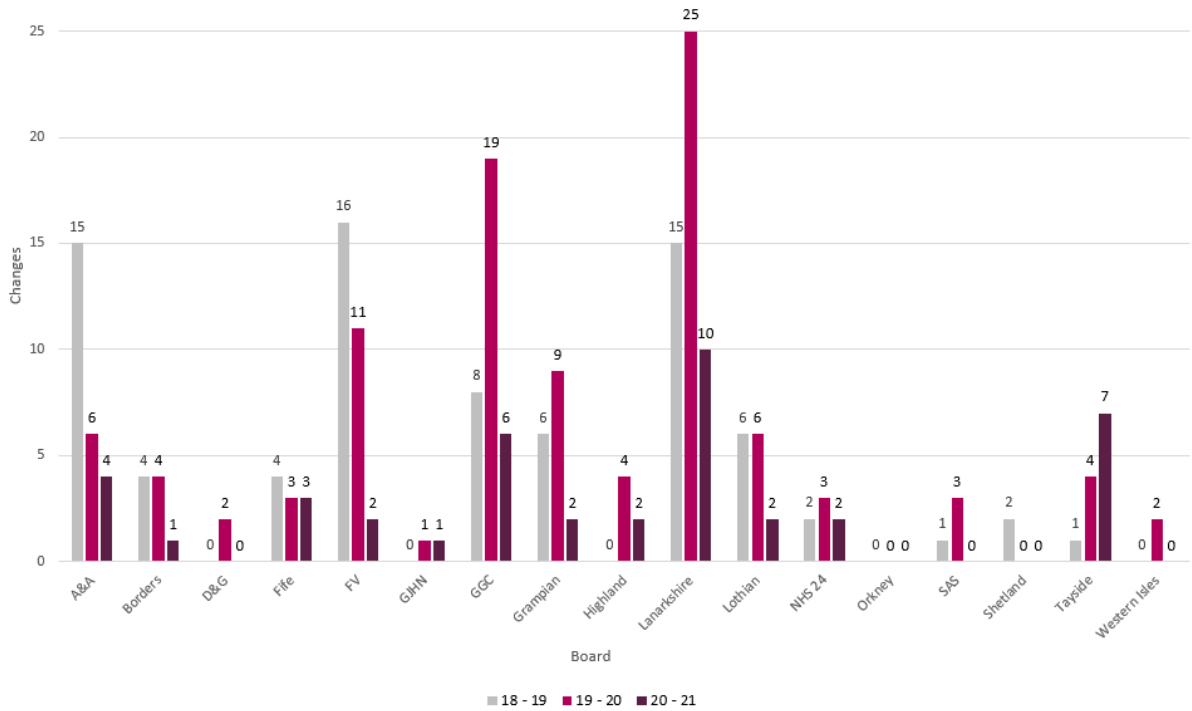
% of stories vs % of total population



Of these stories, 69% reported positive experiences with the remaining 31% giving critical feedback of the service they received. This is a slight increase in the number of positive stories from the previous year. For both types of stories, 100% received a reply to their story. The stories received in 2020/21 have already been read 97,592 times.

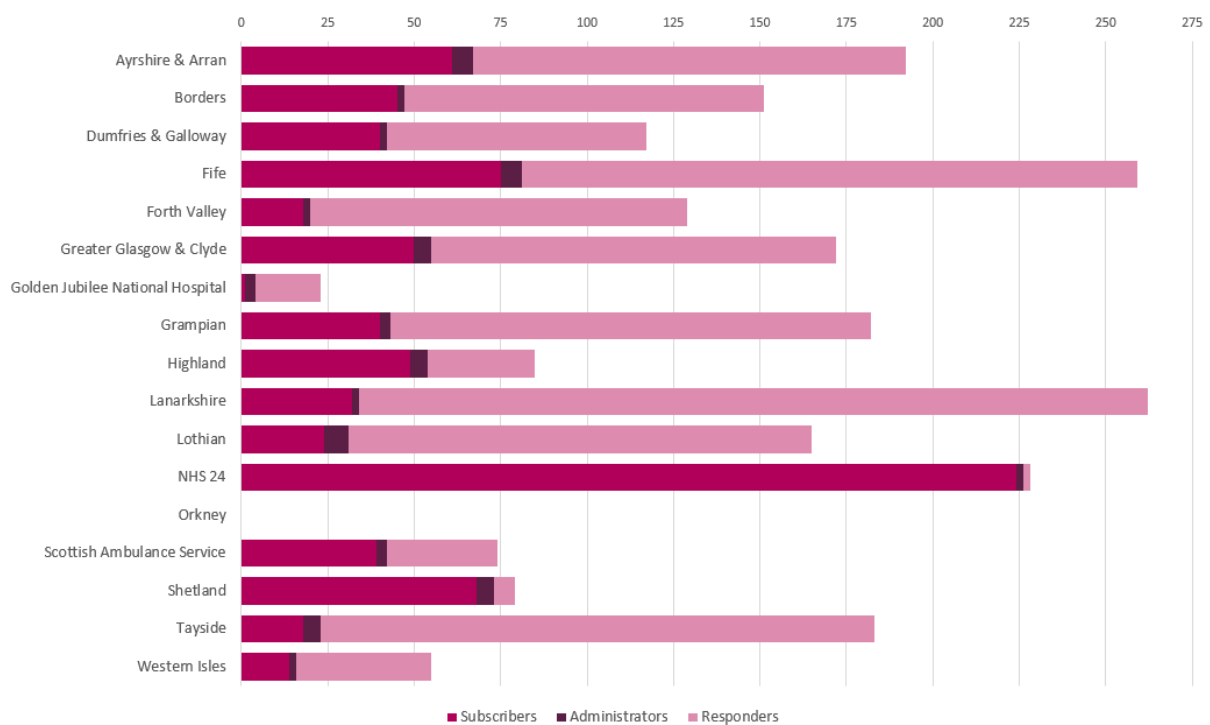
Of the 31% of the stories which highlighted critical feedback, 6% (10 stories) resulted in changes being made to the service in view of the care opinion story. This is a decrease in number on previous years and we continue to encourage Care Opinion feedback to be used a way of informing service change

Changes made/planned



We are continually recruiting staff to be care opinion subscribers and currently have 262 members of staff registered as responders. Our numbers of staff reading Care Opinion continues to increase each year.

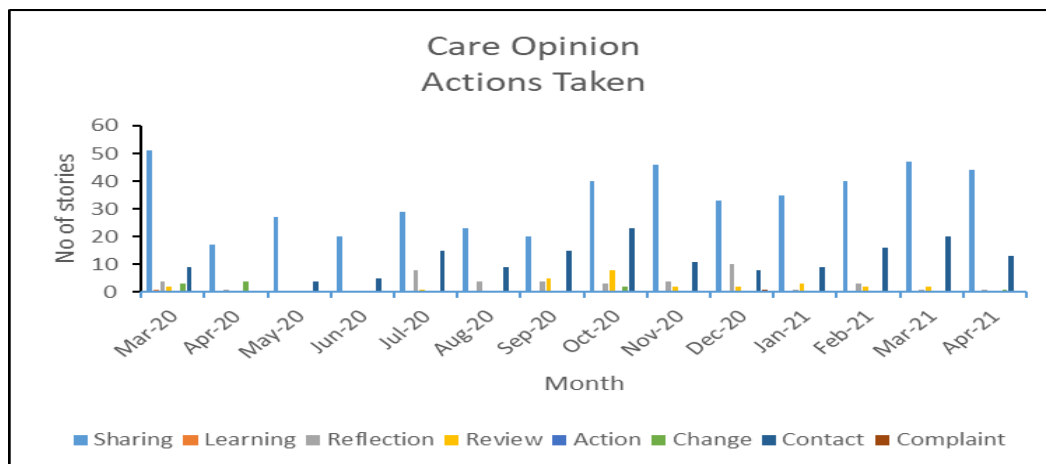
Members on subscription



We have developed an inductive framework to report how we are using the feedback through Care Opinion based on the responses published by staff. This framework has 8 themes:

- 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

The graph below shows the breakdown of the actions taken as a result of the stories received during this reporting period.



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.

We Are Listening Cards - We received a total of 162 unsolicited **We Are Listening cards** between April 2019 and March 2020; of which 146 were positive and 16 provided opportunities for learning and improvement. Feedback on people’s experiences noted in these cards was recorded on our **DATIX** system where we record feedback, incidents and complaints.

Managers and Senior Charge Nurses have access to the DATIX system, and 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** – During covid-19 we have been unable to continue our programme of publishing blogs via the Care Opinion website. We intend to commence this programme of blogging in the near future, once staff are in a better position to do so, so that we can detail activities and changes we have made as a result of feedback received through other mechanisms.

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

- Parking
- Catering
- Information
- Communication
- Access/Appointments

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 using either Care Opinion or a “we are listening” feedback card.



The different ways that people can contact us were also outlined as part of routine messaging in NHS Lanarkshire **patient information leaflets** and on the “Your Feedback” section of the **NHS Lanarkshire website**

www.nhslanarkshire.scot.nhs.uk

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> - 24.7k followers

<https://www.facebook.com/nhslanarkshire> 32,508 friends

2.6 A lack of confidence that anything will be done – The NHS Lanarkshire Public Reference Forum has been paused during the pandemic. The Forum represents 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 normally meets quarterly and provides an opportunity for open discussion / table top workshops on 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.

Unfortunately the membership of this Forum were not able to meet virtually and as face to face meetings were out with the pandemic restrictions this Forum was paused during this reporting period. It is planned to review how the members of this Forum can continue to engage with NHS Lanarkshire during 2021.

Our public partners have continued to work with us through the North Public Partnership Forum and South Lanarkshire Health & Social Care Forums. In addition to attending routine virtual meetings (via Zoom), members are invited to participate in Short-Life Working Groups to progress work as required.

During 20/21 the North and South Forums have represented stakeholders on various groups including:

Topic	Membership input
Monklands Replacement Project	Members co-opted onto the design group
South Integrated Joint Board	Chair of South attends
Acute Governance Group	Chairs of North and South attend
Emergency Department information	Consulted on development of information for the public attending hospital

NHS Lanarkshire Communication Strategy	Consulted on the DRAFT and feedback used to develop strategy
Infection Prevention & Control group	Member co-opted onto working group
Staff Awards	Two members were co-opted onto the judging panel
Hospital Signage	Member co-opted onto working group
Monklands Engagement Group	Development / design of hospital interior
Trauma & Orthopaedic Programme	Members co-opted onto working group
Falls Strategy	Members co-opted onto working group
Patient Experience Committee for St Andrew's Hospice	Members co-opted onto working group
Car Parking within NHS acute sites group	Members co-opted onto working group
Out Of Hours clinical modelling group	Member co-opted onto working group
NHSL Acute Discharge group	Member co-opted onto working group

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).

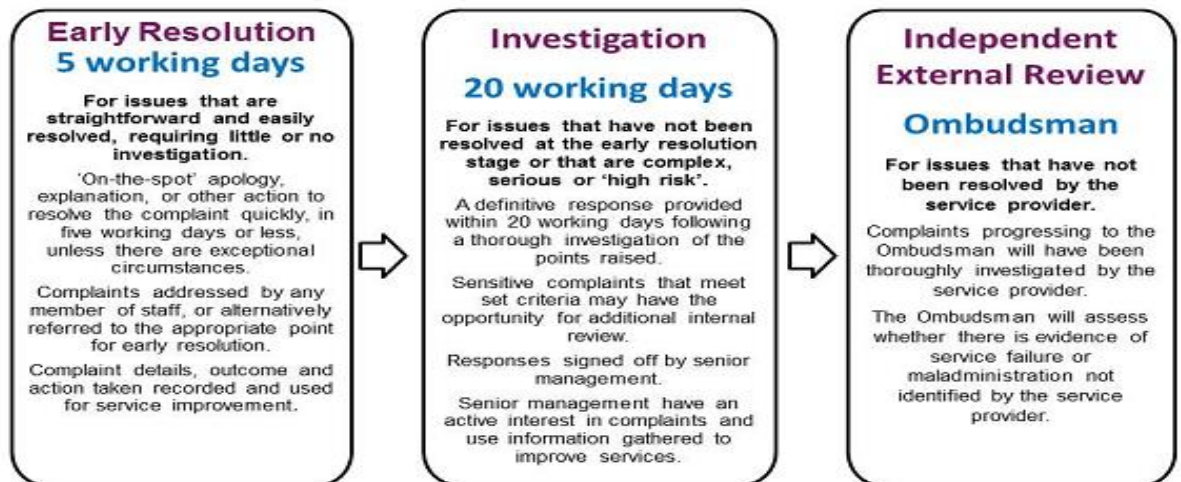
Complaint Handling Procedure

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 Scottish Public Services Ombudsman (SPSO) to review their complaint.

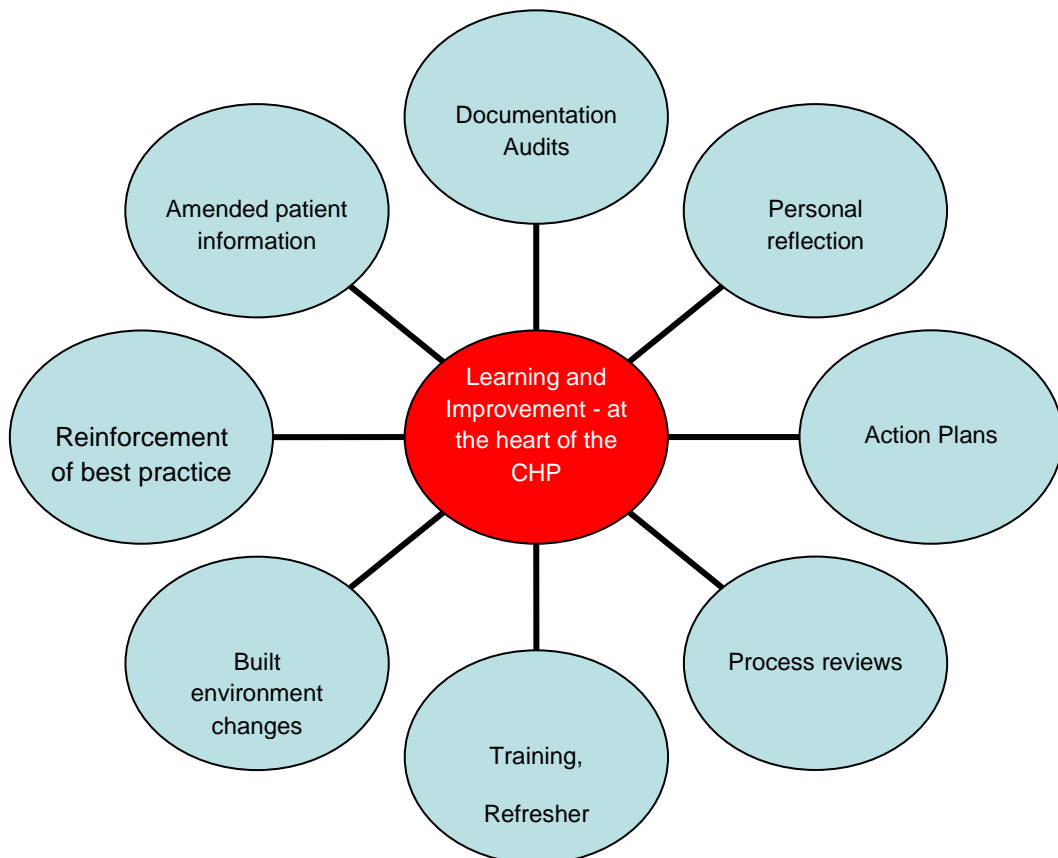
Complaints Performance Indicators

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.

Learning from complaints has resulted in:



NHS Lanarkshire's Complaints and Patient Affairs Lead is currently completing the Scottish Improvement Leader (SciL) programme, with their project focusing on processes to support the multi-level 'learning loop' from complaints (complainant, staff, and organisation).

In this reporting period, the complaint recording system has been able to record multiple issues, multiple locations, and outcomes (upheld, part upheld, fully upheld) for each issue received, in addition to recording an overall outcome. This assists with identifying recurring issues against specific locations.

Given the availability of this information, we had preliminary discussions about implementation of a thematic analysis tool, which will be progressed in 2021-2022.

In 2020-2021, the SPSO determined 27 cases at Investigation Stage. Seven (26%) were fully upheld and 10 (37%) were partly upheld. The recommendations and learning from these cases are discussed with the staff and the service involved, but also summaries are circulated to promote wider organisational learning.

Indicator Two: Complaint Process Experience

An operating procedure was developed and circulated to test mechanisms for gathering post-complaint feedback, with a particular focus on closed Stage 2 complaints.

From early 2021, an anonymised electronic survey was deployed on the NHS Lanarkshire public website. The website advises complainants that they can contact the Corporate Patient Affairs Team if they would like to provide feedback in an alternative format.

Unless an exemption applies, recognising the potential sensitivities of further contact, complainants are signposted to the website survey as an addendum to their Stage 2 written response.

Response rates are too low to enable reliable analysis. We understand that this is broadly in line with the national picture.

Indicator Three: Staff Awareness and Training

Delivery of training was impacted by the COVID-19 pandemic. Training and support were available on an as requested basis via Microsoft Teams. We are reviewing training delivery options. For example, a digital complaints session has been recorded for use in medical education.

Dr Dorothy Armstrong, DA Professional, facilitated 2 staff webinars on *Facing criticism, concerns or complaints during Covid-19*.

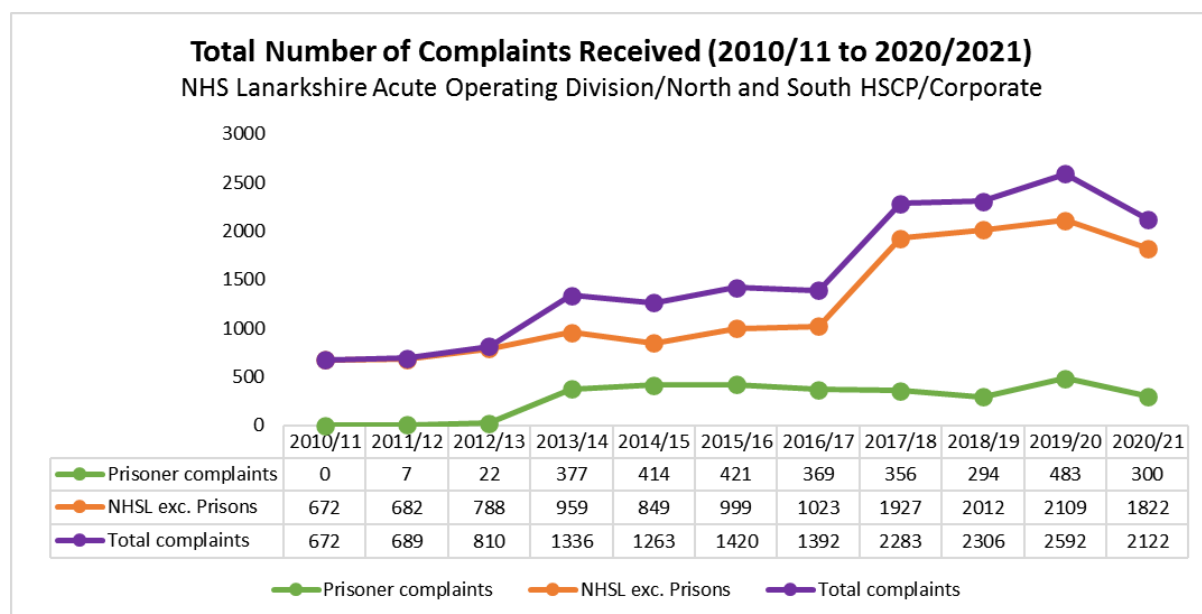
NHS Lanarkshire also launched a development programme for staff managing feedback and complaints, also facilitated by Dr Dorothy Armstrong. The course was delivered online, with a maximum cohort of 24 staff attending five

two-hour webinars from January 2021-May 2021, with additional reading and resources provided. This programme is currently being evaluated.

Two staff commenced post-graduate studies on Dispute Resolution with Queen Margaret University.

Indicator Four: The total number of complaints received

Complaints received by NHS Lanarkshire over the last 10 years (excluding FHS) is highlighted in the figure below:



The board received **2122** complaints from 1 April 2020 – 31 March 2021, a fall of 18% from 2019-2020 (2592). We understand that this fall is broadly consistent with the national picture as a result of COVID-19.

300 complaints were received from prisoners. This represented a 38% fall (483 in 2019-2020).

Primary care contractors (GP, Dental, Ophthalmic and Pharmacy) received **1148** complaints, also a fall of 18% from 2019-2020 (1403).

Indicator Five: Complaints closed at each stage

NHS Lanarkshire closed **1842** complaints in 2019-2020. This does not include FHS contractors, complaints that have been withdrawn or complaints where consent was not received.

NHSL increased the percentage of complaints closed at Stage 1 by 4% (1158/1842).

	2019-2020	2020-2021
Closed at Stage 1	59% 1415/2410	63% 1158/1842
Closed at Stage 2	37% 904/2410	31% 568/1842
Closed at Stage 2 (escalated)	4% 91/2410	6% 116/1842

Indicator Six: Complaints upheld, partially upheld and not upheld

In 2020-2021, at:

Stage One:

28% of complaints were **upheld** at stage one
54% of complaints were **not upheld** at stage one
17% of complaints were **partially upheld** at stage one

Stage Two:

15% of complaints were **upheld** at stage two
43% of complaints were **not upheld** at stage two
40% of complaints were **partially upheld** at stage two

Stage Two escalated (from Stage One):

17% of complaints were **upheld**
56% of complaints were **not upheld**
27% 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, but is not collected as part of national statistics.

The average time in working days to respond to complaints at Stage 1 was **5 working days**.

The average time in working days to respond to complaint at Stage 2 was **30 working days**.

Indicator Eight: Complaints closed in full within the timescales

The model CHP notes that Stage 1 complaints should usually be dealt with within 5 working days. Stage 2 complaints should be responded to within 20 working 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'.

Closure timescales were adversely impacted by COVID-19.

NHS Lanarkshire responded to **80%** of Stage 1 complaints within 5 working days, falling marginally from 81% in 2019-2020.

For Stage 2 responses, there was a dip to **51%** within 20 working days, falling from 62% in 2019-2020.

NHS Lanarkshire advised complainants of these likely delays.

Indicator Nine: Number of cases where an extension is authorised

In 2020-2021:

6.65% of all complaints closed at Stage 1 had an extension authorised.

46% of all complaints closed at Stage 2 (including escalated) had an extension authorised.

Feedback, comments, concerns and complaints about services delivered by our FHS contractors

The table below gives information about complaints received by our **FHS contractors** between 1 April 2020 and March 2021:

	GP	Dental	Pharmacy	Ophthalmology
Number of complaints received	783	50	304	11

4. Accountability and Governance

4.1 We gave **reports** on feedback we had received from patients, their relatives and carers, and visitors to representatives of the PPFs and to Non-Executive Directors.

We produced a **mid-year report** on feedback, comments, concerns and complaints which was discussed at the Healthcare Quality Assurance & Improvement Committee of the Board.

We also produced **monthly reports** 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 recommendations were considered by the Healthcare Quality Assurance & Improvement Committee, which is chaired by a Non-Executive Director.
- 4.3 We continue to produce our annual report in the format endorsed by the Scottish Health Council at the last Participation Standard review.

NHS Lanarkshire

Annual Report on Feedback and Complaints Performance Indicator Data collection 2020/21

Performance Indicator Four:

4. Summary of total number of complaints received in the reporting year

4a. Number of complaints received by the NHS Territorial Board or NHS Special Board Complaints and Feedback Team	2122
4b. Number of complaints received by NHS Primary Care Service Contractors (<i>Territorial Boards only</i>)	1148
4c. Total number of complaints received in the NHS Board area	3270

NHS Board - sub-groups of complaints received

NHS Board Managed Primary Care services;	
4d. General Practitioner	-
4e. Dental	-
4f. Ophthalmic	-
4g. Pharmacy	-
Independent Contractors - Primary Care services;	
4h. General Practitioner	783
4i. Dental	50
4j. Ophthalmic	11
4k. Pharmacy	304
4l. Total of Primary Care Services complaints	1148
4m. Total of prisoner complaints received (<i>Boards with prisons in their area only</i>)	300
Note: Do not count complaints which are unable to be concluded due to liberation of prisoner / loss of contact.	

Performance Indicator Five

5. The total number of complaints closed by NHS Boards in the reporting year (do not include contractor data, withdrawn cases or cases where consent not received).

Number of complaints closed by the NHS Board	Number	As a % of all NHS Board complaints closed (not contractors)
5a. Stage One	1158	63%
5b. Stage two – non escalated	568	31%
5c. Stage two - escalated	116	6%
5d. Total complaints closed by NHS Board	1842	(Should = 100%)

Performance Indicator Six

6. Complaints upheld, partially upheld and not upheld

Stage one complaints

	Number	As a % of all complaints closed by NHS Board at stage one
6a. Number of complaints upheld at stage one	329	28.4%
6b. Number of complaints not upheld at stage one	629	54.3%
6c. Number of complaints partially upheld at stage one	200	17.3%
6d. Total stage one complaints outcomes	1158	(Should = 100%)

Stage two complaints

	Number	As a % of all complaints closed by NHS Boards at stage two
Non-escalated complaints		
6e. Number of non-escalated complaints upheld at stage two	88	15.5%
6f. Number of non-escalated complaints not upheld at stage two	248	43.7%
6g. Number of non-escalated complaints partially upheld at stage two	232	40.8%
6h. Total stage two, non-escalated complaints outcomes	568	<i>(Should = 100%)</i>

Stage two escalated complaints

	Number	As a % of all escalated complaints closed by NHS Boards at stage two
Escalated complaints		
6i. Number of escalated complaints upheld at stage two	20	17%
6j. Number of escalated complaints not upheld at stage two	65	56%
6k. Number of escalated complaints partially upheld at stage two	31	27%
6l. Total stage two escalated complaints outcomes	116	<i>(Should = 100%)</i>

Performance Indicator Eight

8. Complaints closed in full within the timescales

This indicator measures complaints closed within 5 working days at stage one and 20 working days at stage two.

	Number	As a % of complaints closed by NHS Boards at each stage
8a. Number of complaints closed at stage one within 5 working days.	913	79.84%
8b. Number of non-escalated complaints closed at stage two within 20 working days	291	51.23%

8c. Number of escalated complaints closed at stage two within 20 working days	68	58.62%
8d. Total number of complaints closed within timescales	1272	69.05%

Performance Indicator Nine

9. Number of cases where an extension is authorised

This indicator measures the number of complaints not closed within the CHP timescale, where an extension was authorised* .

	Number	As a % of complaints closed by NHS Boards at each stage
9a. Number of complaints closed at stage one where extension was authorised	77	6.65%
9b. Number of complaints closed at stage two where extension was authorised (this includes both escalated and non-escalated complaints)	317	46.35%
9c. Total number of extensions authorised	394	21.38%

***Note:** The SPSO confirm that there is no prescriptive approach about who exactly should authorise an extension – only that the organisation takes a proportionate approach to determining an appropriate senior person – and this is something that NHS Boards should develop a process for internally. This indicator aims to manage the risk of cases being extended beyond the CHP timescale without any senior officer approval.

Completed by:

Name: Kevin Rooney	Position: Patient Affairs and Complaints Lead
Tel: 01698858208	E-mail: Kevin.Rooney@lanarkshire.scot.nhs.uk
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