



Handling and Learning From

Feedback

Annual Report

2022 - 2023

NHS Grampian - caring • listening • improving



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Foreword

Over the last year, NHS Grampian has continued to remobilise from the COVID-19 pandemic and support our teams working under unprecedented pressure due to system capacity issues.

NHS Grampian's core values of Caring, Listening and Improving remain our focus as a Board through the development of NHS Grampian's Plan for the Future 2022-2028, and learning lessons when responding to feedback received.

It is essential we hear from people who have experience in using our services, so we both learn and build on these for future service design.

We have seen a percentage increase of complaints relating to waiting times and treatment, and a reduction on those relating to staff, which feels reflective of the pressures on our system and the continued increase each year we have on our staff training figures, and our commitment to embed learning from previous feedback on improvements required on our staff communication.

Overall, we notice a reduction in the compliments received, against a year-on-year comparable number of complaints, and a recognised increase in our numbers on both Care Opinion and Care Assurance Tool. Care opinion is a two-way tool used to actively engage and hear from service users.

NHS Grampian sits 5th for subscription members and 2nd for story reads in Scottish Boards.

We have a range of ways feedback is collected, and we continue to embrace opportunities to be at the forefront of any National changes, such as embarking as a pilot Board for child friendly complaints handling.

In conclusion, this annual report provides a summary of the many routes we receive feedback into NHS Grampian, and how the information is being used to support improvements within our system.

Dr June Brown

Executive Nurse Director



2022 – 2023 at a Glance



289 Compliments

A total of **289** formal compliments were received by the Feedback Service.



1,751 Complaints

We received **1,751** complaints during the year, of which **164** related to prison healthcare.



51 SPSO

The Scottish Public Services Ombudsman contacted NHS Grampian about **51** complaints.



2,651 Patients

We are grateful to the **2,651** patients who provided feedback to us about their hospital stay using the Care Assurance Tool (CAT).



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



- **512 stories shared** on Care Opinion about NHS Grampian.
- **70%** of those stories were completely positive.
- These stories have been read **187,273** times, averaging **366** reads per story.



3,073 Training Modules

During the year staff have completed 3,073 training modules in:

- Complaint Handling online
- Equality and Diversity
- Adverse Events

Encouraging and Gathering Feedback

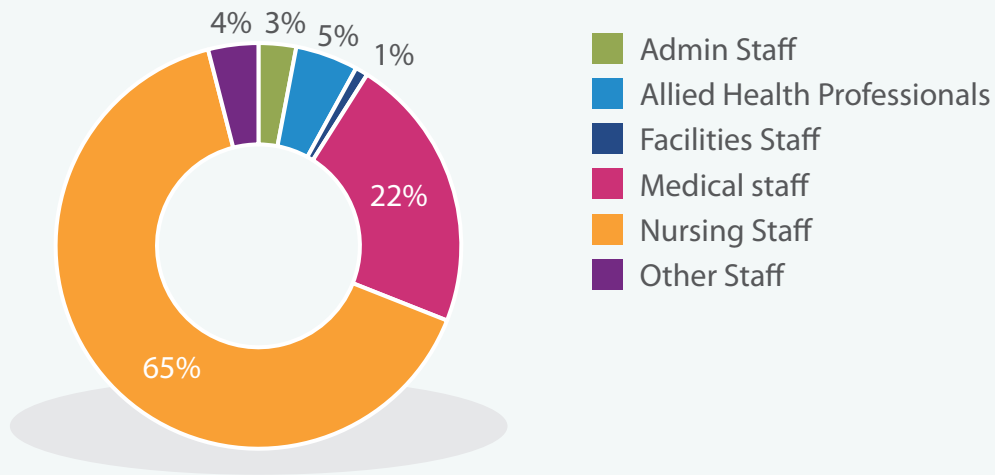
A wide variety of methods to encourage and gather real time experience are used, with the aim of making people feel their feedback is welcomed. Local processes and procedures have been developed to comply with the principles and policy intentions of the Patient Rights (Scotland) Act 2011 to support delivery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



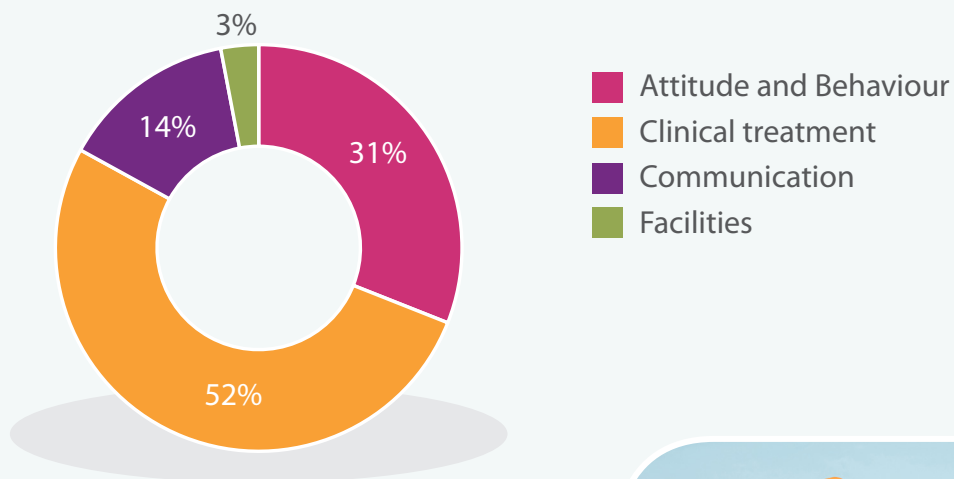
Compliments:

We received 289 formal compliments. The chart below shows the themes of these compliments and the staff groups these related to.

Compliments - Staff Groups



Compliments -Themes



Care Opinion:

With the growing recognition of people's voices shaping the future of our health services, NHS Grampian encourage all services to actively engage with Care Opinion as a way of listening to what people have to say and provide empathetic and individualised responses. Between 1st April 2022 and 31st March 2023, 512 stories were shared on Care Opinion, an increase of 9.16% since last year.

What Was Good?

- This year NHS Grampian's stories have been read 187273 times. This averages 366 times per story.
- 70% of stories were completely positive.
- Stories most commonly show people think staff were caring, friendly and professional.

What Could Be Improved?

- Communication, staff attitude and compassion were identified as the most common aspects for improvement.
- Although communication was the most commonly used negative tag, 40 stories highlighted communication as good.

How Did You Feel?

- The most common terms used were grateful, supported and reassured.
- There were additional terms that can be used to identify improvement including, information, waiting time and pain relief.

Where do we share these stories?

- Stories are live on the intranet.
- Stories are shared regularly on our social media sites and at various local meetings and events.



70% 
Stories were
Positive

NHS Grampian's
Stories have been read
187,273 times



Care Assurance

Excellence in Care is a national approach which aims to improve, integrate and coordinate the way nursing and midwifery services are delivered. One of the key deliverables is care assurance. 'Section 1' of the Care Assurance Tool (CAT) is used in NHS Grampian to deepen our understanding of staff, patient and carer experience. The requirement is for five CATs to be completed per ward per month. This gives a rich picture on the care and experience we provide as told to us by our patients and families. Outputs from the use of the CAT help guide and direct improvement initiatives. Last year section 1 of the CAT was completed 2,651 times.

Public Involvement Team

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

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

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

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



Social Media

NHS Grampian continues to develop and pioneer its use of social media as one vital resource for engaging with its various stakeholders. As well as posting to these sites, colleagues respond to any appropriate feedback (such as comments, questions etc) posted in response to items published, or via direct messaging on sites where that feature is enabled. Colleagues liaise with the relevant departments to provide clear information in response to any queries or feedback received and also to source useful information to share.

NHS Grampian first established a presence on Facebook and Twitter in 2011 and has subsequently set up accounts on LinkedIn, Instagram and YouTube. Departments and services within NHS Grampian can also set up and manage accounts on these sites, within the scope of the organisation's social media for business use policy.

The main updates posted during 2022/2023 have concerned ongoing developments around the COVID-19 pandemic, particularly focusing on vaccinations, the resumption of services and changes to (and the phased lifting of) various restrictions. The launch of NHS Grampian's Plan for the Future (and what it means and involves) has featured (and continues to) prominently on social media. Various updates have also been posted about operational issues, media releases, human interest updates (such as highlighting/celebrating the work of our staff and partners), updates on various projects and highlighting/supporting various local, national and global health awareness/improvement campaigns/messages.

The number of Facebook page likes has increased from 48,248 on 1st April 2022 to 51,041 on 31st March 2023 – an increase of 5.8%.

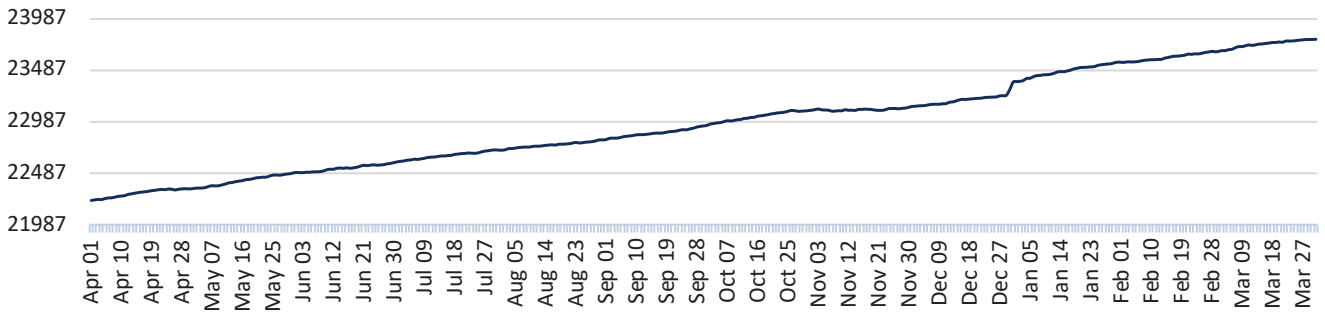
The total number of Twitter followers increased from 22,222 (on 1st April 2022) to 23,787 (on 31st March 2023) – this represents an increase of 7%.

Our LinkedIn page followers increased from 11,469 on 1st April 2022 to 14,464 on 31st March 2023 – an increase of 26%.

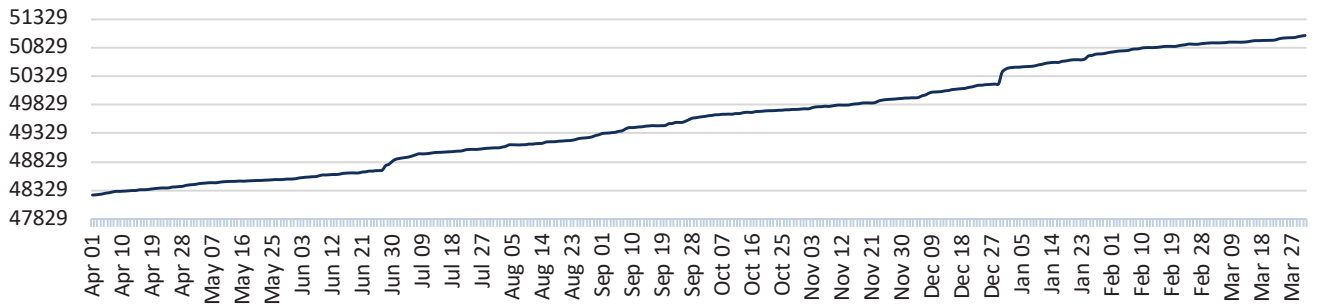
Our Instagram account followers increased from 12,017 on 1st April 2022 to 12,498 on 31st March 2023 – an increase of 4%.



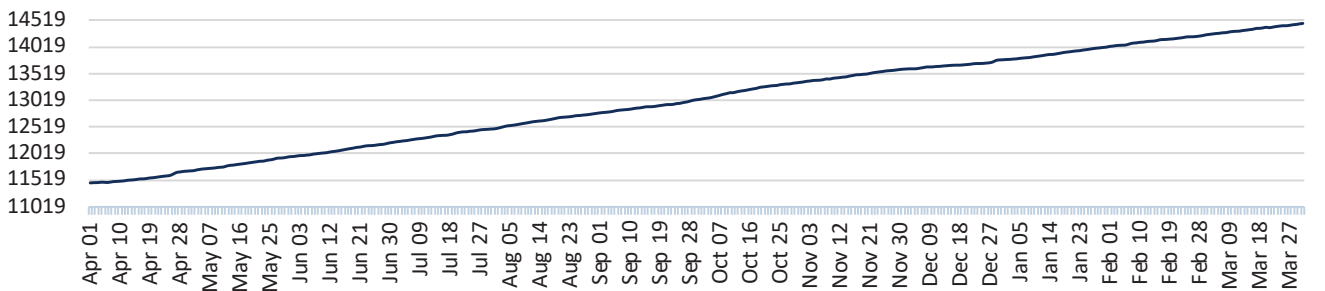
The number of people following your Twitter accounts



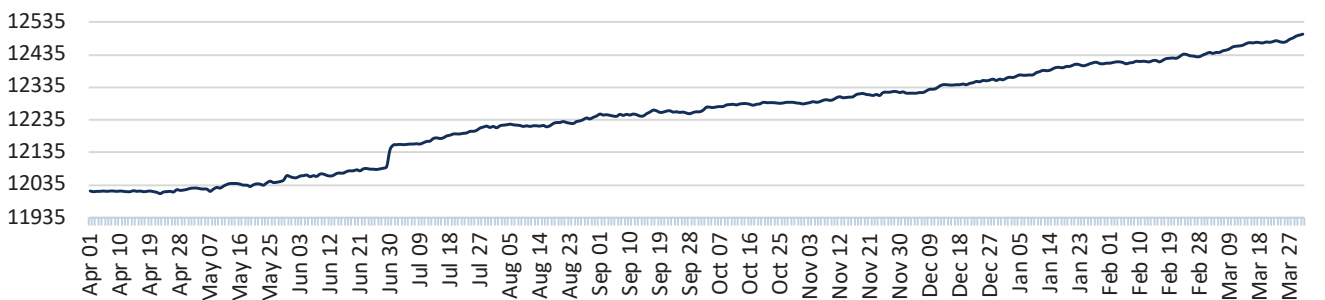
The number of people who like your Pages



The total number of followers for your Pages



The total number of people following your Instagram accounts



Equality and Diversity

NHS Grampian engages with local communities by linking with local third sector equality groups and directly supporting individual or specific groups.

The Disability Discrimination Act Review Group (DDARG) commissioned a survey of disabled people in Grampian in June 2022 to gauge the effects of COVID-19 and the lockdown. Loneliness and mental health issues were the most common problems.

The Equality and Diversity Team supported the work of Grampian Regional Equality Council in the health care input of the projects with how the NHS works. The E&D Team worked with primary care and specialist teams in delivering healthcare information and provisions to Ukrainians, Afghans and asylum seekers.

Individuals who directly contact the Equality and Diversity Team also get supported by translating documents, providing interpreters and access to healthcare services.

NHS Grampian staff took part in the Grampian Pride in May 2022. This event enabled us to show our local LGBT+ communities that NHS Grampian is an ally to progress and that there is no place for discrimination or harassment of any kind in NHSScotland.



Handling Complaints

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

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

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

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

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

NHS Grampian understands the importance of striving to improve the complaints handling process and electronic survey link is sent to all complainants to offer the opportunity to share feedback on how their complaint was handled.

Learning & Action

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


Actions taken as a result of a complaint	Total
Improvements made to service access	114
Improvement plans created and instigated	88
Communication - Improvements in communication staff-staff or staff-patient	576
Professional issues addressed	12
Staff Development	37
Policy reviewed	1
Risk issues identified and managed	13
System - Changes to systems/processes	15
Share lessons with staff/patients/public	26
Waiting - Review of waiting times	168

Actions taken as a result of a complaint


A chemotherapy patient from the Orkney reported that they had been unable to receive a folfusor infusion device for their treatment as it couldn't travel on an unpressurised aircraft for safety reasons. This resulted in the patient having to receive their treatment as an inpatient rather than at home with the pump which was not a good use of NHS resources as well as being less preferable for the patient.

We have worked with the airline to now receive guarantees that flights between Aberdeen and Orkney will be undertaken with a pressurised baggage hold. As a result of the helpful feedback we have sought and received clarification on the safety of the folfusor infusion device when being transported by air. This will undoubtedly make treatment easier for patients receiving similar treatment.


A patient at Aberdeen Royal Infirmary reported a lack of comfortable suitable chairs in a clinic area during a wait to be seen when they were very unwell.




We apologised to the patient for the lack of facilities, recognising the impact that had on them whilst they were waiting to be seen. New suitable seating has been purchased for the clinic.




A patient in Aberdeenshire raised concerns about the location and availability of Secondary Care Hubs in their area which resulted in a long journey for blood tests.




We have secured funding for additional hubs which has resulted in an increase in days of operation in existing hubs and the opening of two further hubs in Ellon and Banff.



Patient reported bleeding following an outpatients procedure which resulted in their having to attend the Emergency Department later that evening.



As a result of the complaint and subsequent investigation, we implemented a change in practice so that the clinicians in this clinic must monitor bleeding arising during examination more closely before the patient leaves. This may involve remaining on the examination couch for a longer period of time or repeat examination.

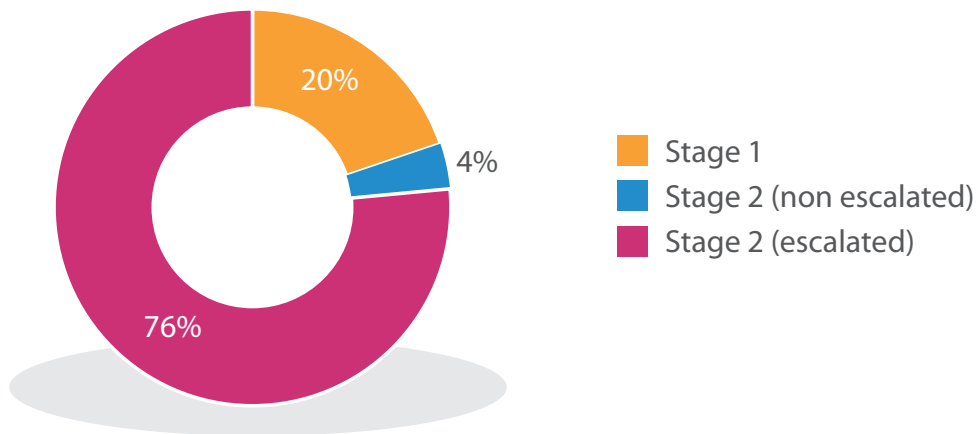


Complaints Response Times and Outcomes:

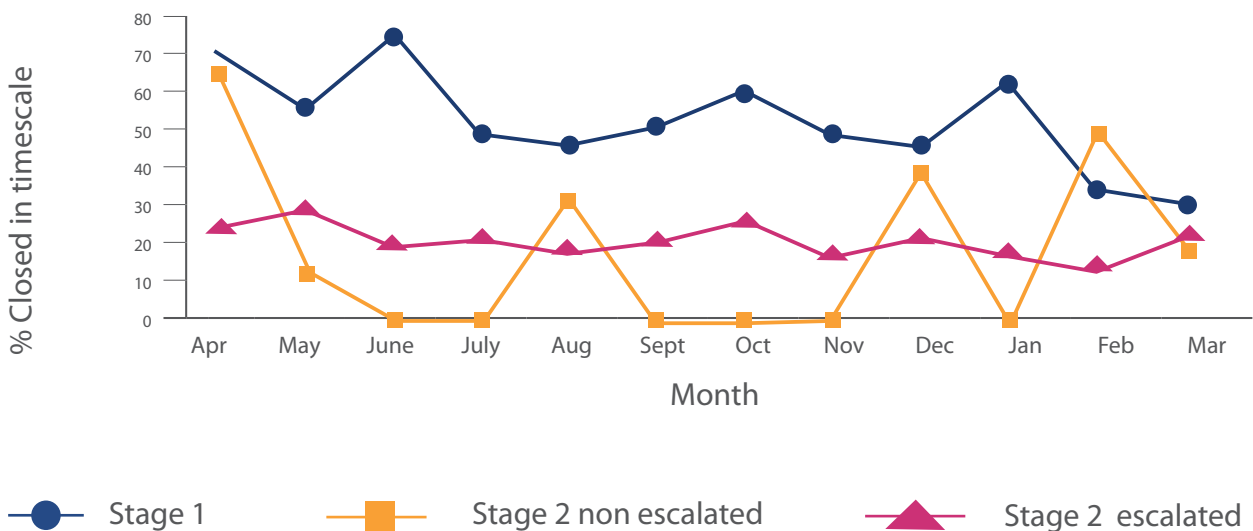
Stage 1	<ul style="list-style-type: none"> Early Resolution Resolved within 5 working days
Stage 2 (non escalated)	<ul style="list-style-type: none"> Not able to be resolved at early resolution Investigation and response in 20 working days
Stage 2 (escalated)	<ul style="list-style-type: none"> Immediately passed for full investigation Response within 20 working days

Complaints Closed

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



Complaints closed in full within timescale

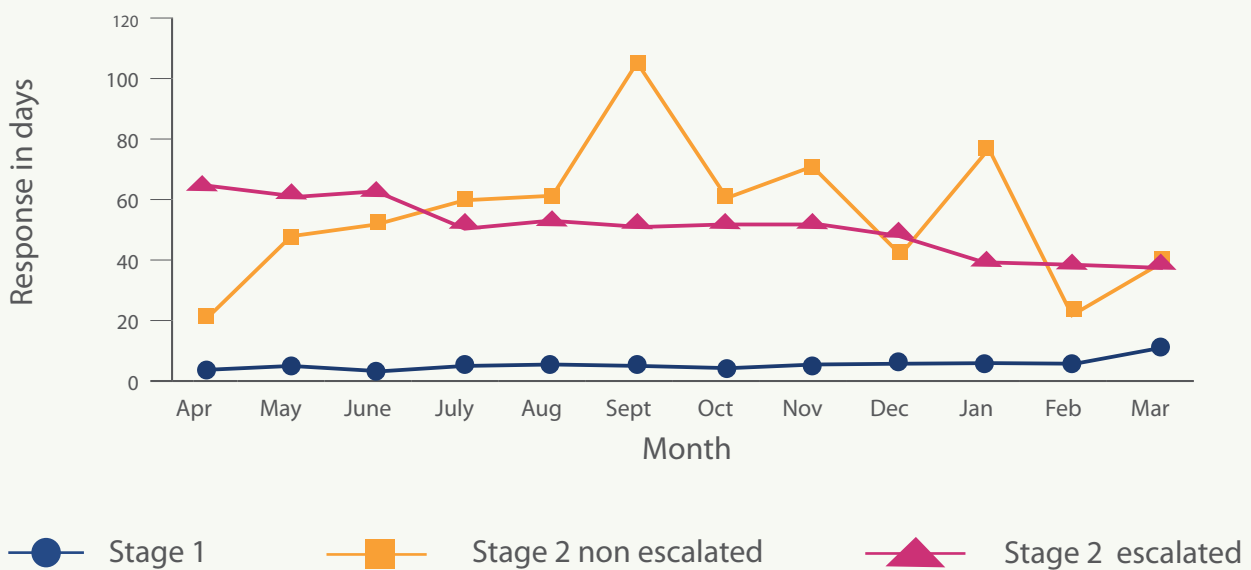


Average Response Times

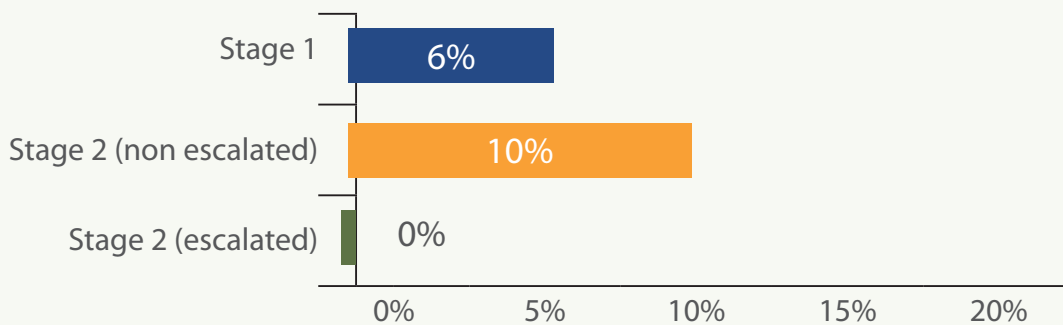
The response times for each stage in working days, is illustrated in the chart below, along with complaints closed within timescales. This remains an area for further work to show sustained improvement.

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

Average Response Times (in days)



Percentage of cases where an extension was authorised



Complaints Outcomes

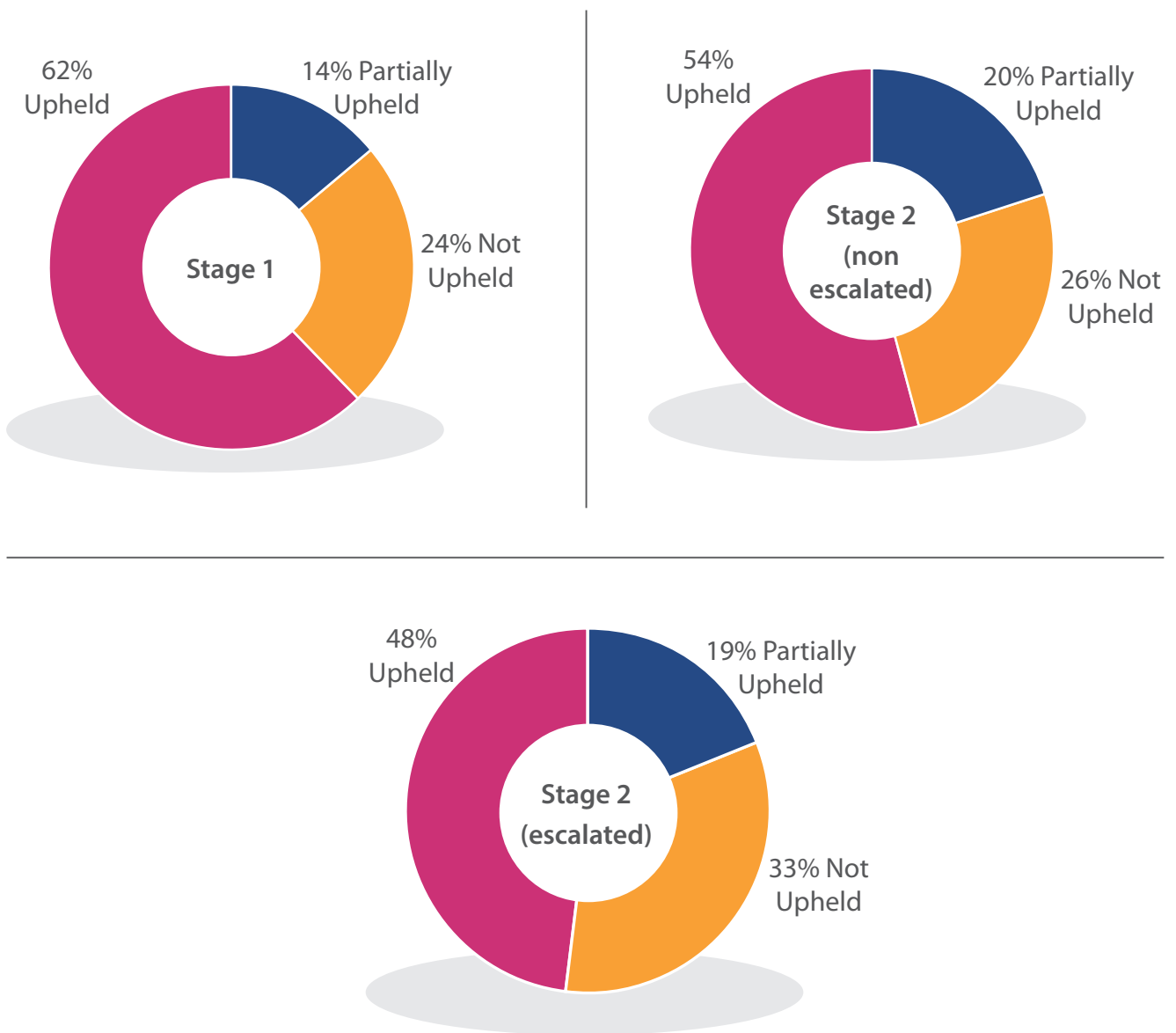
These charts illustrate the outcomes for complaints closed at each stage.

Chart 1 shows that on average over the year 62% of the complaints were upheld, 24% were not upheld and 14% were partially upheld.

Chart 2 illustrates an average of 54% of complaints were upheld, 26% were not upheld and 20% were partially upheld.

Chart 3 for Stage 2 escalated complaints shows a similar pattern with an average of 48% of complaints upheld, 33% not upheld, and 19% partially upheld.

The learning from these outcomes will be factored into our shared learning events.

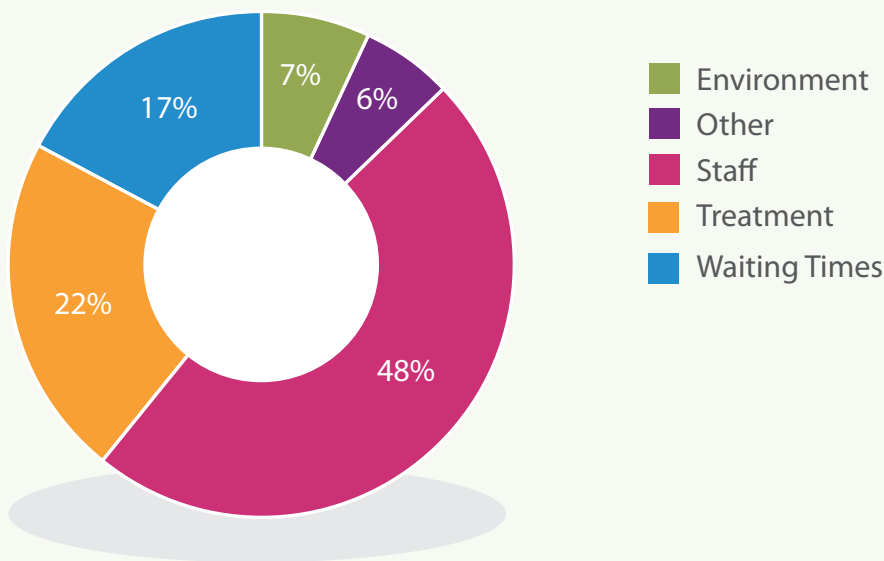


Complaints Summary

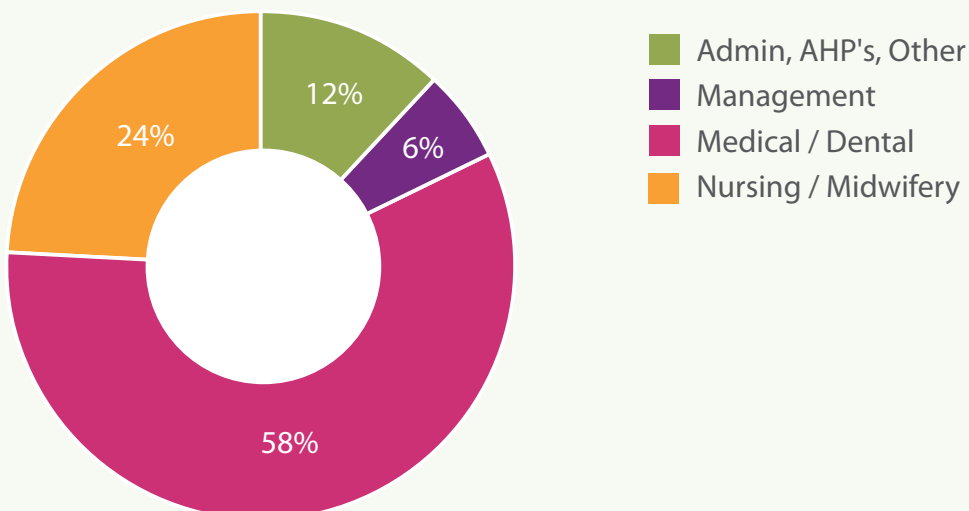
The charts below show the themes of the complaints we received over the year and the staff groups these complaints related to.

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

Complaints Summary

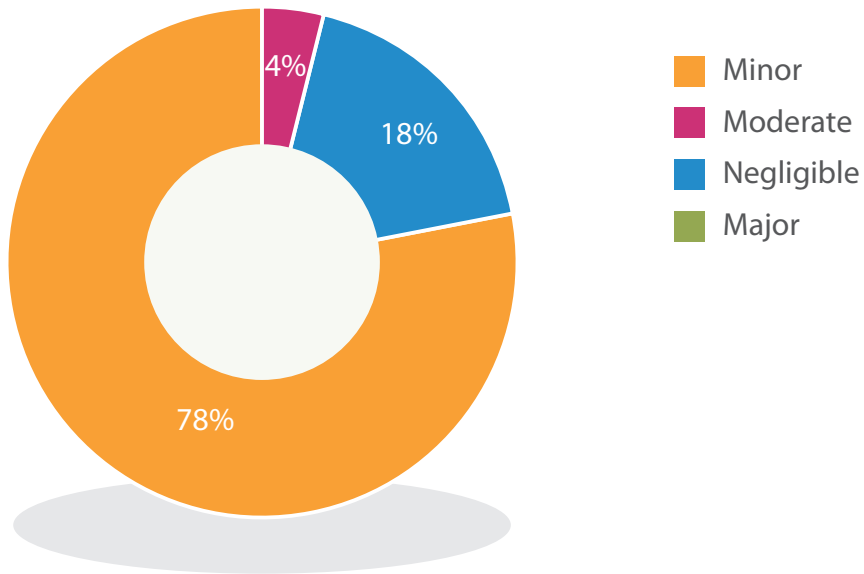


Staff groups people complained about



Complaint Severity

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



Service Improvements

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

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

Change Example 1:

Patient Feedback: There is nowhere to put toiletries in the shower room and my surgery makes it difficult to reach for them.

Ward Response: We added shelves in the shower room so patients can have their toiletries to hand.

Change Example 2:

Patient Feedback: It's too hot and the air is dry. Is there anything that can be done to help?

Ward Response: All top air vents fixed to bring the ward temperature down. Air conditioning unit in place now too.

Change Example 3:

Ward 402/403 is a cardiology and respiratory stepdown ward which cares for patients who require ongoing medical care, have upcoming surgery or procedures, or are awaiting rehabilitation and/or social work input. From our care assurance audits we identified that many patients felt bored due to lack of activities or television/ radio to keep them occupied during the day.

By using endowment donations, we were able to create a dayroom on the ward which has television, radio, books and games for patients and relatives to use. The space allows patients to be away from their bedspace for a period of time, spend time with their visitors and a distraction from being in hospital. It is decorated in such a way to try and make the space non-clinical and calming.

"What Matters for Patients"

"My family cannot come and visit me as they are so far away, going through to the day room allows me to keep busy and passes the time."

"The dayroom allows for a space to get away from the busy ward and have some quiet time."



"It is nice to have a selection of books and magazines available."

"I was sitting watching the TV one evening and I actually forgot I was in hospital, it is a home from home."



"Having patients walking through to the day room limits hospital deconditioning and allows them to rehab quicker therefore reducing their hospital stay."

"It can be a very long day in the hospital waiting for surgery, watching the tv helps pass the time."

Staff Development

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



934

934 eLearning complaint handling process modules have been undertaken by staff. The training helps ensure staff are aware of the complaints handling process and the work of the Scottish Public Services Ombudsman. Real cases, anonymised, are discussed and staff are always interested to follow a case from beginning to end and learn about a person-centred approach to complaints.



444

444 Modules of NHS Grampian Adverse Event Review training have been completed by staff. The recently developed eLearning is a valuable opportunity for staff to learn the keys skills needed for review of an adverse event and to support the safety of our healthcare system for everyone. The modules are designed to allow staff to complete the sections most relevant to the area of adverse events they are involved in.



1,695 Staff completed a comprehensive Equality and Diversity programme ensuring staff are aware of their responsibilities in this field.



1 Cohort (with 10 delegates) completed Stage 1 Good Complaints Handling. 1 Cohort (with 15 delegates) completed Stage 2 Complaints Investigation Skills delivered by the Scottish Public Services Ombudsman. Both modules are designed to support staff with handling complaints and improve the complaints experience.

Accountability and Governance

A summary of the accountability and governance structures are detailed below:

Clinical and Care Governance/Committees

- Each service is accountable for clinical and care delivery and has their own quality assurance system. This in turn supports the Portfolio/Partnership clinical and care governance groups/committees.
- The Clinical and Care Governance structure provides local ownership and accountability in terms of providing assurance for: learning from adverse events/complaints/duty of candour, risk management and the identification and delivery of improvement plans.

Weekly Clinical Risk Meeting (CRM)

- Chaired by the Associate Medical Director with the purpose of utilising system-wide intelligence, qualitative and quantitative, to identify potential themes or trends and emerging or current clinical governance risks impacting on NHS Grampian.
- The membership includes the Medical Director, Executive Nurse Director, Employee Director, Associate Directors and organisational leads for risk management, adverse events, complaints and feedback, duty of candour, infection prevention and control, health and safety, organisational development, values based reflective practice, Specialist leads (e.g. Tissue Viability, Falls, Public Protection).
- Data collated over the previous 7 days is discussed to identify clinical and care risk, enable system wide discussion and appropriately manage performance against national and local standards.
- A weekly report is shared with the Chief Executive Team including items for escalation.

Chief Executive Team (CET)

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

NHS Grampian Board

- Information on clinical and care risk is shared with the NHS Grampian Board by the CET and/or escalated by the NHS Grampian Clinical Governance Committee.

Cross-System Quality, Safety and Assurance Group

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

NHS Grampian Clinical Governance Committee

- The Clinical Governance Committee is a sub-committee of Grampian NHS Board (Board) and obtains assurance on behalf of the Board for the quality of clinical care delivery.
- Executive Nurse Director, Medical Director, Director of Public Health present reports to provide assurance on behalf of CET.
- The CGC meets quarterly.

Engagement and Participation Committee

- Seeks assurance of equality, diversity, feedback, carer advocacy, use of volunteers.
- As part of a review of board structures in NHS Grampian, the Board agreed to the development of a more strategic approach to engagement and participation. A new 'Population Health Committee' that has 'people powered health', equalities and inequalities, to support the future strategic development of NHS Grampian as defined in the 'Plan for the Future'.

What Next?

It is acknowledged that the Grampian health and care system remains under very significant pressure accentuated by the COVID-19 pandemic. However, NHS Grampian is committed to continue to ensure that all feedback is encouraged, demonstrates compassion and is person centred with a commitment to utilise the learning to support improvement to the service we deliver. Over the next 12 month period we will work to:

- Review our processes to ensure that they are efficient and enable timely responses.
- Review how we advertise the feedback methods we have to ensure they are accessible and information is readily available.
- Ensure that complaints handling training continues to be an integral part of staff training and development across NHS Grampian.



