

Annual Report on Feedback and Complaints 2020/21

NHS Fife understands and values the importance of gathering patient, families and carer feedback to support a culture of listening and learning. We are committed to enhancing patient and staff experience by using feedback to identify change and make improvement to the delivery of our services.

We continue to use a range of methods to obtain feedback and are encouraged by the high level of positive feedback we continue to receive. A new Care Experience Improvement Model was developed to ensure a continual cycle of feedback and improvement across services. Unfortunately due to the impacts of the Covid-19 pandemic this piece of work has not progressed as we would have liked and will be revisited in 2022.

The use of Care Opinion continues to grow and NHS Fife is proud to have one of the highest response rates in Scotland. A large number of frontline staff respond to stories and there is evidence that the many positive stories have boosted moral and confidence among our teams.

Our revised model for community engagement enhances our commitment to involving the public in the co design and production of our services and we continue to focus on engaging with the right people at the right time.

We continue to face challenges in responding to complaints in a timely manner. With the Covid-19 pandemic, the last 12 months have been exceptionally challenging for all and have taken their toll on the wider workforce. Clinical services have had to focus their efforts on responding to the pandemic and delivering safe, effective and person centred care, which has resulted in delays in responding to complaints within the national timeframes. We have seen an increase in the complexity of complaints, and have managed several complaints and enquiries in relation to delay in treatment as a result of the pandemic. We have also been inundated with calls, complaints and enquiries in relation to the Flu and Covid-19 vaccination programmes.

This being said, we are committed to delivering a quality feedback and complaints service to the public. We will continue to work collectively with the public, our health and social care services, the SPSO, Scottish Government and all Third Party Sectors to ensure this happens as we work towards recovery.

In presenting the 2020/21 Annual Report I would like to extend my grateful thanks to every person who has taken the time to provide us with feedback and to every staff member who has responded to it. I would also like to extend my thanks to those who have supported this work, including; Patients, Carers, Volunteers, Public Partners, Staff, Patient Relations, Care Opinion and Third Sector Partners, which includes Advocacy providers, Health Improvement Scotland Community

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Engagement Team, Scottish Government, Patient Advice and Support Service and the wider community.

Janette Owens
Director of Nursing

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INDICATOR 1: LEARNING FROM COMPLAINTS

INDICATOR 2: COMPLAINT PROCESS EXPERIENCE

SECTION 3: COMPLAINTS PERFORMANCE

SECTION 4: ACCOUNTABILITY AND GOVERNANCE

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Indicator 1: Learning From Complaints

NHS Fife values complaints alongside all other forms of feedback. Our staff actively welcome and encourage patients, carers, service users and members of the public to let us know what we do well and what we can do better, in order that we can share good practice and make improvements to maintain the quality and safety of the care we deliver.

A range of promotional materials are on display in wards, departments, units to promote the Board's desire to receive feedback. We have used every opportunity as part of our wider Participation and Engagement activities to encourage people to tell us what they think about our services. When attending community groups about other aspects of business we have taken the opportunity to deliver the message that NHS Fife welcomes all forms of feedback and are committed to improving and learning as a result.

NHS Fife provides British Sign Language (BSL) interpreting for all BSL speaking patients. We achieve this by providing a face to face BSL interpreter or an online video relay interpreting service, provided via ipads and Interpreter on Wheels devices.

NHS Fife works closely with BSL speakers and is a leading organisation facilitating and supporting the local Deaf Action Plan, Deaf Forum which guides our health-related activity and our delivery of the local BSL action plan.

In 2020/21 NHS Fife received 460 Stage 1 complaints and 259 Stage 2 complaints. Below is an example of feedback received and the learning and change that has occurred as a result.

Acute Services Division (ASD)

A patient receiving a cancer diagnosis was prescribed a new medication to treat this while awaiting further investigations. The patient felt overwhelmed with their diagnosis and that the medication had not been fully explained to them. No information had been shared with them about the medication.

Following the complaint, apologies were given to the patient that they had not received any information to explain the new medication, and for any upset or worry this had caused. The service developed a new patient information pack which will be given to all newly diagnosed patients, which provides all relevant patient leaflets and information to support them with their diagnosis and new medication. This was a successful outcome and an example where a complaint has led to positive change for future patients and service users.

Shared learning from complaints continues across the Boards. We explore every opportunity to discuss the learning and share stories via our internal mechanisms to improve services and patient care. Discussions are taking place about how we review, improve and capture learning from complaints and adverse events.

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Care Opinion

We continue to promote care opinion across the Board. There has been a significant increase in the number of responders at local level with department managers and senior charge nurses embracing the opportunity to responding to stories about their service.

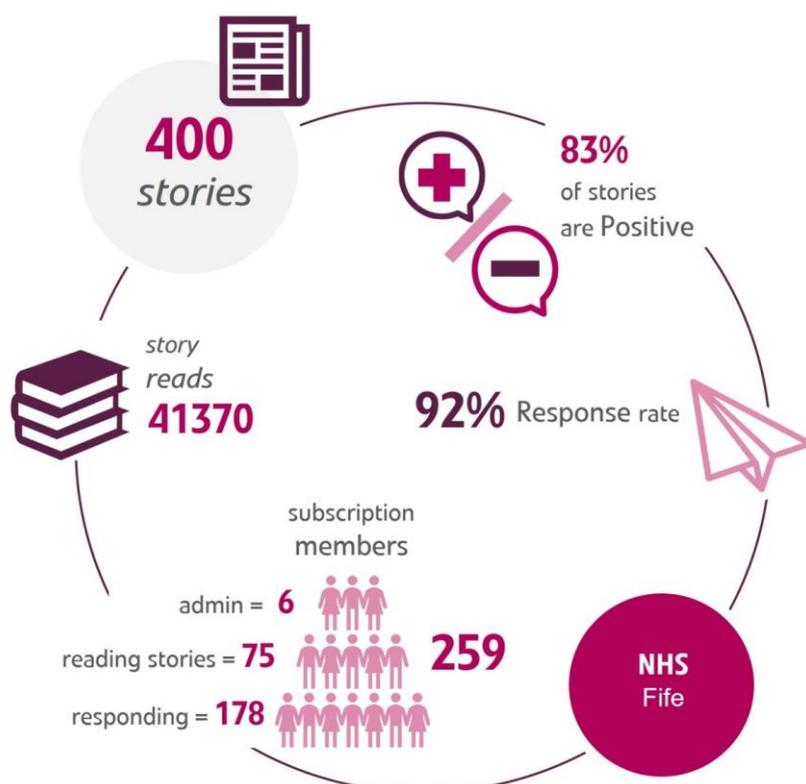
A large percentage of our stories are positive in relation to staff and care, however, we are aware of the stories where improvement is required. While we continue to address the concerns raised, we continue to monitor the information closely and compare with our complaints data.

During the pandemic, we have seen an increase in Care Opinion posts in relation to patient visiting as a result of the restrictions. This was to be expected, however, it is encouraging to note that any concerns raised have been dealt with quickly at service level to ensure patient centred visiting has been accommodated in accordance with the Scottish Government guidance.

The following demonstrates that we have achieved what we set out to do and more:

- 17% decrease in stories posted; 386 stories compared to 455 stories posted in the previous year. The decrease in stories posted is due to Covid-19
- 371 of stories responded to; 246 (66%) within 5 days compared to 431 (73%) in previous year
- 87% of stories posted were non-critical (79% in previous year)
- 2 stories led to a change being made
- 73% increase in the number of responders

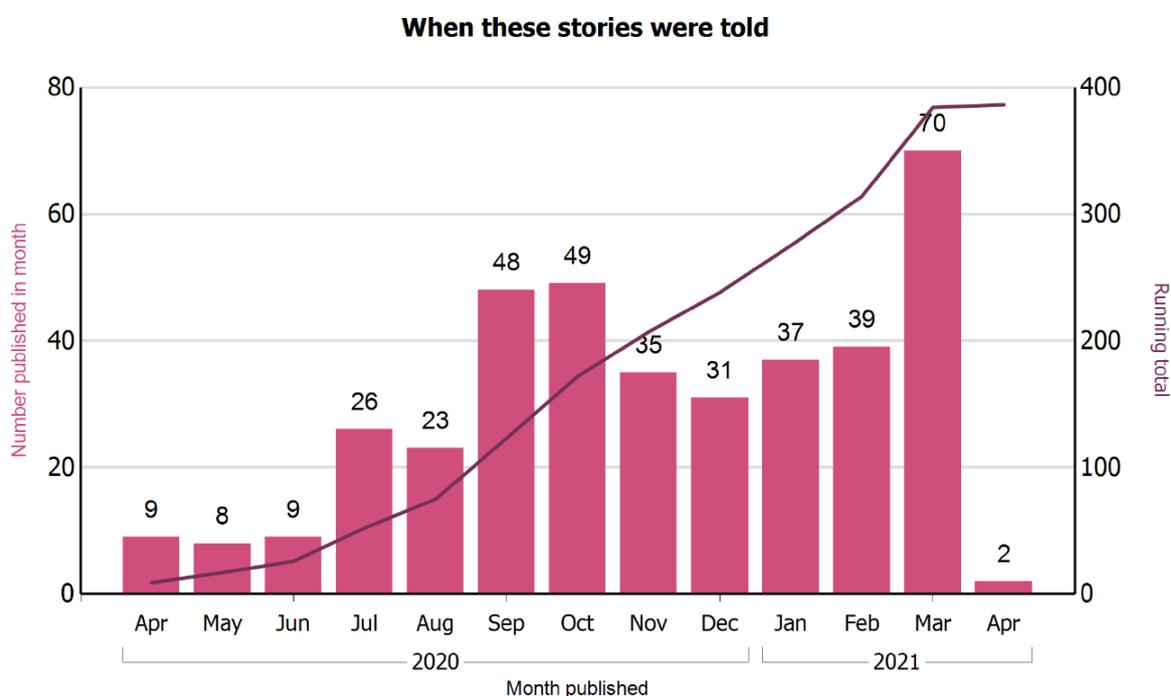
The below graphic shows the Care Opinion activity across NHS Fife during 2020/21:



As previously advised, a large number of frontline staff respond to stories. Care Opinion provides the opportunity for staff reflection and learning in the moment. Below is a quote from a member of NHS Fife staff which evidences their experience of Care Opinion:

“It’s a real honour when a patient, or their carer, takes their own time to provide us with feedback about our service. We all get a real ‘buzz’ if we are mentioned personally. Whether the feedback is positive or constructive, it can help us shape our service delivery in a way that is patient centred. We are thrilled if we can make a change, however small, that enhances our patient experience when using our service.”

The graph below shows the distribution of stories received. There was a decrease in the number of stories received in April, May and June 2020 however; this will be directly linked to a reduction in the delivery of services as a result of Covid-19.



The graphic “Tag Bubbles”, accessed via <https://www.careopinion.org.uk/vis/6w56z>, highlights themes extracted from individual stories posted on Care Opinion. Green indicates positive opinions with pink identifying areas for improvement. Specific examples are:

- Staff: 170 positive opinions
- Care: 114 positive opinions / 6 negative opinions
- Communication: 26 positive opinions / 14 negative opinions
- Staff Attitude: 10 positive opinions / 3 negative opinions
- Friendly: 67 positive opinions

Indicator 2 - Complaint Process Experience

NHS Fife is committed to ensuring all complainants have a positive experience when making a complaint. Last year we undertook a public engagement exercise to seek public opinion on how easy it is to find information on making a complaint or to make a complaint using our website. This included individuals from hard to reach groups. This feedback was used to further develop the website and the new website went live in September 2020.

When processing complaints we believe it is important to find out what matters to the person raising the complaint and to determine from the outset what it is they would like to achieve as a result of the complaints process. To do this we speak to people to ensure that no assumptions are made and to make sure that people understand and feel able and have access to support to be involved in the complaints process. The Patient Relations Team in NHS Fife supports this by establishing contact on receipt of a complaint.

To enhance people's experience and to ensure the Patient Relations Team has all the relevant information necessary to process a complaint, a new electronic feedback and complaint form was developed with the support from other services to ensure the form is fit for purpose, accessible to users and complies with relevant guidance and regulations. The feedback and complaints form is now available to the public through a link on our new website and can also be provided to members of the public contacting the Patient Relations Team directly.

In order to reflect and make improvements in the complaint process it is important we gather feedback from complainants however, this has been challenging. We have tested a number of methods to obtain feedback with poor results. Our feedback forms were often returned only when the complainant was dissatisfied with the complaint outcome and so we ceased to use these. The feedback and complaint form contains an 'opt in' feedback section, and the plan was to obtain feedback each month by contacting a random selection of complainants who have opted in. However, as a result of the Covid-19 pandemic, the collation of feedback has ceased and not progressed as we had planned. This has been as a result of the pressures on all services in our response to the pandemic.

We understand the importance of collating feedback on the complaint process and that not all complaints are submitted electronically. We need to consider additional ways of capturing feedback and as services remobilise, this is something we will revisit when there is capacity to do so, to ensure we are capturing this valuable feedback.

As part the overall quality assurance checks, the Patient Relations Team undertake a monthly review of closed complaints. This focuses on compliance with the national complaints procedure. Any learning or areas for improvement are shared with the team and individual officers.

The Patient Relations Team also carries out in house quality assurance checks, which involves the review of complaint responses in the moment. This ensures the response adheres to the Scottish Public Services Ombudsman Framework guidelines on what a quality response should look like. It also identifies any areas of learning or themes within the clinical service area, which allows feedback to be provided in the moment.

Indicator 3 – Staff Awareness and Training

To support the ongoing development of a person centred culture the Board supported more staff to undertake training in relation to adopting a personal outcomes approach. Good conversations training is available for all staff across the organisations to support staff in their conversations with patients/carers and families at local level.

The Patient Relations Team continually develops their own skills in relation to listening and communicating to ensure an efficient and effective service is delivered. The Patient Relation Officers also participate in supervision and reflective based learning.

The Patient Relations and Clinical Governance Teams had previously aligned common elements of work and were delivering joint induction training for staff which covers safe, effective and person centred care. However, this was reviewed following feedback from both Teams. The outcome was that each Team would deliver separate presentations specific to their role. Staff have felt more confident in delivering the presentation and Patient Relations have been focussing more on the role of the department and the Power of Apology. Induction is on hold currently due to the Covid-19 pandemic.

We continue to encourage staff to complete the elearning feedback and complaints training developed nationally. The Patient Relations Team also supports the delivery of bespoke training sessions with individual services.

Due to the Covid-19 pandemic, face to face training has not taken place. There has also been a reduction in the ability to deliver virtual training, and a reduction in the overall uptake of virtual training due to the pressures on services caused by the pandemic.

The Patient Relations Team are exploring the opportunity of expanding the elearning and training programme for feedback and complaints with the aim of making this training mandatory for all staff. This piece of work is on hold, but we will revisit this as services recover post pandemic.

The following information relates to additional training delivered.

Medical Staff Core Training

Course – FY2 Term 3 Programme	Attendance
Power of Apology	7

Corporate Induction	Attendance
Delivery of induction training in relation to Patient Relations and Clinical Governance roles. Corporate Induction has been delivered virtually as an online programme during the pandemic.	417

SAER / Duty of Candour

NHS Fife is committed to delivering training on Adverse Event and the following table demonstrates number of staff trained in 2020/21.

Course	Attendance
NES Duty of Candour module	545
NHS Fife Datix Reporting learn pro	360
NHS Fife Datix Reviewer learn pro	98

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	853
4b. Number of complaints received by NHS Primary Care Service Contractors (<i>Territorial Boards only</i>)	683
4c. Total number of complaints received in the NHS Board area	1536

NHS Board - sub-groups of complaints received

NHS Board Managed Primary Care services;	
4d. General Practitioner	9
4e. Dental	5
4f. Ophthalmic	0
4g. Pharmacy	0
Independent Contractors - Primary Care services;	
4h. General Practitioner	556
4i. Dental	7
4j. Ophthalmic	5
4k. Pharmacy	115
4l. Total of Primary Care Services complaints	697
4m. Total of prisoner complaints received (<i>Boards with prisons in their area only</i>)	N/A
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	460	64%
5b. Stage two – non escalated	207	29%
5c. Stage two - escalated	52	7%
5d. Total complaints closed by NHS Board	719	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	190	41%
6b. Number of complaints not upheld at stage one	168	37%
6c. Number of complaints partially upheld at stage one	102	22%
6d. Total stage one complaints outcomes	460	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	44	21%
6f. Number of non-escalated complaints not upheld at stage two	75	36%
6g. Number of non-escalated complaints partially upheld at stage two	88	43%
6h. Total stage two, non-escalated complaints outcomes	207	100%

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	10	19%
6j. Number of escalated complaints not upheld at stage two	23	44%
6k. Number of escalated complaints partially upheld at stage two	19	37%
6l. Total stage two escalated complaints outcomes	52	100%

Performance Indicator Seven

Indicator Seven – Average Times	
7a - The average time in working days to respond to complaints at Stage One	8 days
7b - The average time in working days to respond to complaints at Stage Two (Not escalated)	41 days
7c - The average time in working days to respond to complaints after escalation	48 days

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.	369	81%
8b. Number of non-escalated complaints closed at stage two within 20 working days	85	19%
8c. Number of escalated complaints closed at stage two within 20 working days	0	0%
8d. Total number of complaints closed within timescales	454	100%

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	43	19%
9b. Number of complaints closed at stage two where extension was authorised (this includes both escalated and non-escalated complaints)	181	81%
9c. Total number of extensions authorised	224	100%

***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:

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