

NHS Highland Complaints Annual Report 2020/21

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Introduction

NHS Highland Feedback and Complaints Annual Report 2020-2021 is a summary of the feedback received by NHS Highland from 1 April 2020 to 31 March 2021. This includes a description of the lessons learnt and improvements made. A summary of the approaches taken to proactively gather feedback to inform and develop local services is also included in this report.

Encouraging and Gathering Feedback and Complaints

NHS Highland welcomes and encourages feedback from patients, carers and family members about the services we provide. Information about how to provide feedback is made available to patients, carers and family members via the NHS Highland website Giving us Feedback (scot.nhs.uk) the Feedback information leaflet for patients, relatives and carers both of which encourage individuals how to provide feedback and make a complaint. Sign posting to the Care Opinion website and complaints leaflets are advertised throughout all of NHS Highland patient areas.

NHS Highland gathers patient feedback in a number of different ways; this includes but is not limited to:

- Patients, carers and family members can provide feedback to any NHS
 Highland member of staff who will be happy to help them. Correspondence
 can be received via letter, email, telephone and in person. Alternatively they
 can contact the Feedback Team as follows:
 - NHS Highland Feedback Team PO Box 5713 Inverness IV1 9AQ 01463 705997 Nhshighland.feedback@nhs.scot

Patient feedback provided by other organisations

- Online feedback through Care Opinion www.careopinion.org.uk
- NHS Highland website Giving us Feedback (scot.nhs.uk)
- Feedback in the local press
- National patient experience surveys
- Letters and information from elected members of Parliament on behalf of patients and families.

Based on feedback received during 2020/2021 we know that the majority of our patients are happy most of the time with the care and treatment provided by NHS Highland. However, on occasion the care and treatment provided does fall short of the high standards we expect. When this happens it is very important that we hear about it in order that we can learn from mistakes made and improve the way we do things in future.

NHS Highland has a dedicated centrally based Feedback Team which supports patients to provide feedback and make complaints. This provides a single point of contact, offers ease of access and a level of consistency for the patient or member of

public. All NHS Highland staff are also open to providing front line resolution of complaints were applicable.

To support patients to provide feedback the Patient Advice and Support Service (PASS) is delivered by the Citizens Advice Bureaus in:

 Argyll and Bute Riverside, Oban Road Lochgilphead, Argyll PA31 8NG

Tel: 01546 605 550

Tel: 01546 605556 (Direct)

Inverness, Badenoch & Strathspey
 29 Union Street
 IV11LX

Tel: 01463 237 664

Ross & Cromarty
 Suie House
 Market Square
 Alness

IV17 0UD

Tel: 01349 885937 (Direct)

Skye and Lochalsh Citizens Advice Bureau
The Green
Portree
IV51 9BT
01478 612032

Lochaber Citizens Advice Bureau

Dudley Road Fort William PH33 6JB

Main number: 01397 705 311 Direct dial: 01397 709 098

At the Clinical Governance Committee complaint reports and SPSO reports are tabled on a quarterly basis. The SPSO report details the outcome of the SPSO investigation and what action the Board has taken.

Care Opinion Report 1 April 2020 to 31 March 2021

NHS Highland received 70 stories within this timeframe with over 10,000 views. Not all the stories were about NHS Highland but were made by either NHS Highland residents attending NHS Highland or other Boards as well as visitors utilising NHS Highland's services. This is a reduction of approximately 37.5% in the number of stories reported for the previous reporting period. The number of views to NHS Highland stories has decreased by 20% from the last reporting period.

Care opinion continues to provide a useful tool for learning and improving our services, however, we are still not fully utilising the service due to ongoing review. The large increase of views to our stories shows the great potential for using Care Opinion as an open forum for sharing information and has possible implications of reducing the number of complaints and enquiries if used to its optimum.

We saw a down turn in our figures from last year as our positive stories dropped from 83% in 2019-2020 to 77%. There was no strong criticism in any of the stories but we did have an increase in mild criticality from 8% to 19%. Minimal criticality stayed the same at 3% and we did have an improvement on moderate criticality reducing from 5% to 4%.

Changes are planned to services from 2 stories and we have responded to 86% of the stories which is a decrease of 4% from last year, although, we managed to maintain our response rate of 67% for responding within a week. It is likely that more changes have been made or planned but that these have not been fed back to the writers or the forum.

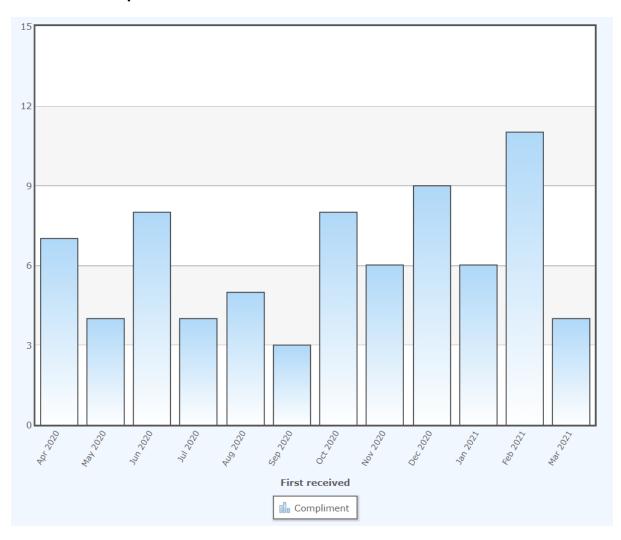
Due to Covid there has been some delay to NHS Highland reviewing the way it responds to Care Opinion stories, however, the process is still ongoing with discussions between the Board and Care Opinion as to how we can best utilise the system. NHS Highland continues to look at improving response times to patient stories and how the information is used to improve our services and feedback on the open forum.

They told us that NHS Highland's staff and care are good but that there is room for improvement with regards communication, conflicting information, hospital discharge and referral.

The biggest area for improvement continues to be communication (including provision of information and understanding) as although improvements have been made, frustrations with these issues are still being reported. It is hoped that the review will provide a structure which will enable the stories to be updated with actions taken and full responses on Care Opinion rather than the issues being responded to in another forum.

Indicator One – Learning from Complaints

2020/2021 Compliments Received



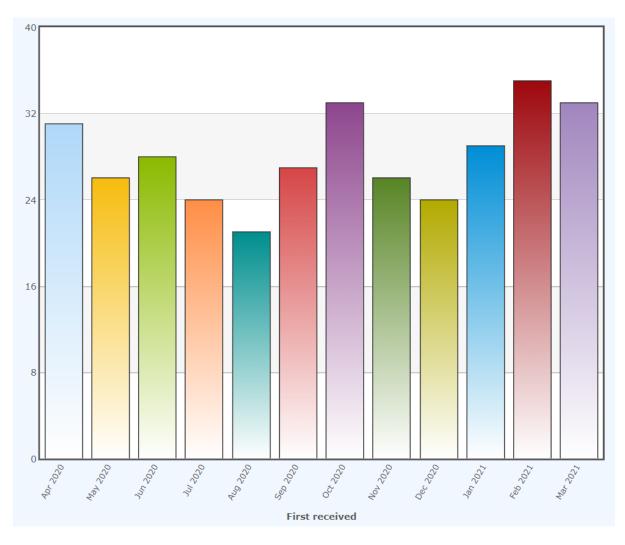
During 2020-2021,75 compliments were received by the Feedback Team. These compliments were forwarded to the staff involved and the Chief Executive. Examples are used in the Chief Executive's weekly communication with staff.

Comments

- "I had a Hernia Repair on 30/06/2021. I was, and am, completely satisfied with my treatment from start to finish. I would appreciate it if you could pass on my thanks to the consultant and her team, the Anaethesist and her team and the nurses in the recovery ward and in Ward 5C. I was looked after with the utmost care possible. I would also like to pass on my thanks to Preassessment clinic for their care and help during the tests. I found the "Patient Information for Consent" document (GS01) very informative but would have preferred to have had it before my Pre-assessment. Many thanks for all you did, especially under the present circumstances."
- "Both the physiotherapist and the treatment received have been excellent in supporting a quick recovery and allowing me to get fully mobile again."

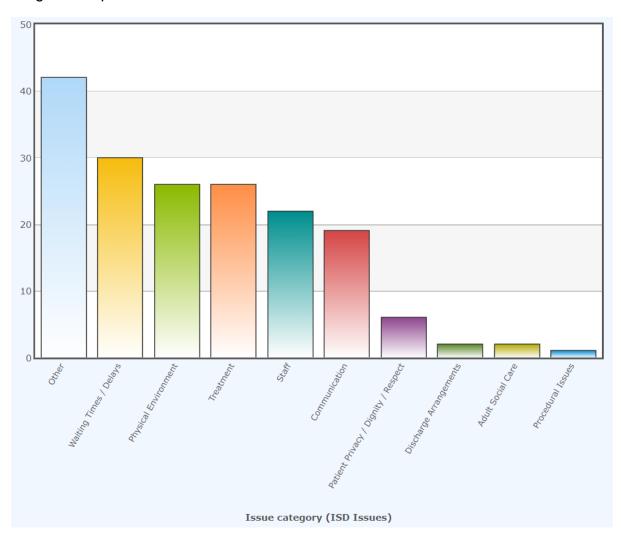
- "This email is to offer my thoughts and gratitude to a Dr Xxxxx of Burnfield Medical Practice.
 - I have had a very anxious few years with Cancer concerns and it came down to terminal with the Oncologist giving me a set time frame of life. I however chose Quality of life over the gruelling period of Chemotherapy which was not a cure anyway. The phone consultations I have had with Dr Xxxxx have been reassuring and comforting during this trying time. I insisted on quality of Life and Dr Xxxxx did not hold back on giving me the reality of it all, but in such a way that he was thorough, precise and optimistic the whole time. His calming confident guidance makes this period of concern much easier to cope with and he is always ready to respond or advise at a moments notice. The NHS has a good man in their team and I thank him and of course the NHS for all of the wonderful work in this difficult time."
- "I just wanted to say thank you to the team for the consideration they gave him and for being so kind and efficient in helping ensure that people with needle phobia's could still get the covid jab. Most of us don't love the jab but we're happy to go with the flow, but for people with real phobias, the extra care and consideration shown makes all the difference. So thank you!"
- "Was just to say how amazing Dr Xxxxx is. Had a wee procedure with him last Tuesday up in Golspie and as always, he was fantastic. He talks to you like a human and values opinion and his secretary 'C' such a nice lady. She's been an amazing help and can't thank her enough."

In 2020-2021, 338 concerns were received. Concerns were dealt with by the service in which the concern was raised.



Comments

- Enquiry re treatment for dry macular degeneration can anything be done to improve eyesight? Cannot see to read or write, or watch TV very clearly wants to have his driving license back. (DVLA notified)
 Ophthalmologist confirms that there is no treatment. Advised of 6 monthy eye tests. He (patient) was accepting of this and understood his limitations.
- Enquiry patient unable to get vaccine due to medical conditions. Concerned that she will be unable to travel and unable to get a passport for use.
 Discussed this with Primary Care - called patient back and relayed information.
- Enquiry about dental treatment by PDS as has allergy to Amalgam fillings. Passed to Dental department to respond.
- Enquiry into vaccination's for 16-25s year olds. Passed to the Vaccination Team to provide a response.
- Requests for Covid status certificates.
 Passed to the Covid Teams and Data Quality Teams for review and resolution.



*Other – this relates to covid related complaits.

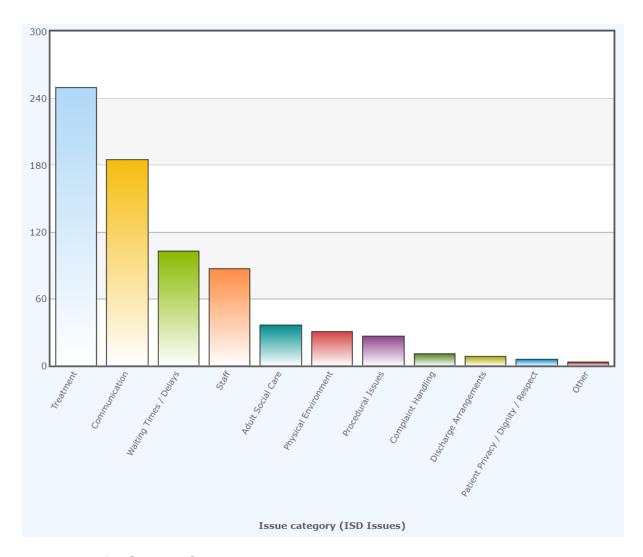
The issues for Stage 1 Complaints

- Care and treatment concerns on calling NHS24 and OOH at Raigmore
 Case passed to the Operational Units to review calls and respond directly to
 the client.
- Care of Father on Ward 3A
 Ward explained to the complainant that the ward was particularly chaotic on
 that day and that the staff involved have taken time to reflect. Complainant
 understood and was grateful that SCN had taken the time to contact, explain
 and apologise.
- Care and treatment received and length of time a baby is waiting for a tongue tie operation.
 Consultant ENT Surgeon saw patient on 6 December 2019 to give a second opinion. Parent was happy with the consultation and the explanation given and patient was discharged from clinic.
- Complainant is claiming that a letter has gone missed referring him for CBT. The letter was from his Psychiatrist and went to his GP and the Invergordon

Community Mental Health Team. His GP received the letter but the MH team said it must have gone missing in the post.

Passed to the Operational Unit for review and response.

Stage 2 complaint Issues



The issues for Stage 2 Complaints

- Care and Treatment your mother received at Portree Community Hospital.
 The communication with nursing and ambulance staff. The incorrect
 information given to you with regards to your mother. The Delay in your
 mother receiving treatment at Raigmore by the staff at Portree Hospital.
 Apology Given. As a result of the complaint we have asked that this case is
 examined and reviewed by a panel of clinicians who ensure patient safety and
 governance through the clinical guardian system.
- Care and treatment provided by the care at home provider for your Grandmother. Lack of communication from the Enablement team regarding the change of provider for your grandmother's care. The Home Care Scotland not being suitable for your Grandmother's care.
 Apology given. New Care Provider found.

- Care and treatment you received at Raigmore hospital. Attitude and behaviour
 of senior midwife. Why wasn't your son placed on oxygen. Why wasn't there a
 doctor present. Why was the senior midwife not aware of the medication you
 were on and your history. Why wasn't the senior midwife competent at scoring
 on the scoring tool for your son.
 - Apology The staff involved are reflecting on how their interactions with each other may be perceived. Meeting offered with midwives
- Care and treatment in the maternity unit Attitude of midwives Your baby was given the wrong breast milk.
 Apology Given. Explanantion regarding the breast milk given.

All actions taken and improvements made as a result of complaints are recorded on datix. Example of actions taken/improvements made are:

- Admin support identified to ensure each patient following clinic/surgery has a plan in place for follow up.
- Cataract Surgery New Referral Booklet has been updated to reflect specific clinical findings and a section available for additional comments.
- Improved communication with family and professionals
- Patients seen at 'fast track' clinics are reviewed at the weekly Performance and Planning Group in order to express priority and progress
- The Feedback team will clearly document & file reasons for requests of information from SPSO
- Signage updated within department
- Changes are going to be made to the information leaflet to ensure it highlights that assessments are ideally done without parent/carer present
- Each patient at RNI will have their own individual plan for discharge and their situation reveiwed regularly
- Senior Nurse phone & Bleep system updated to inform all staff immediately and referrals are accepted

The Feedback Team are responsible for ensuring that actions are progressed.

Indicator Two - Complaint Process Experience

It was decided that throughout the pandemic the patient experience surveys would be put on hold, therefore, there is no data provided for this section of the report this year.

Indicator Three – Staff Awareness and Training

Complaints training has been restricted this year due to Covid-19. Ad hoc training has been provided as required.

Larger planned training sessions have now being planned via Teams and will commenced late in the summer 2021.

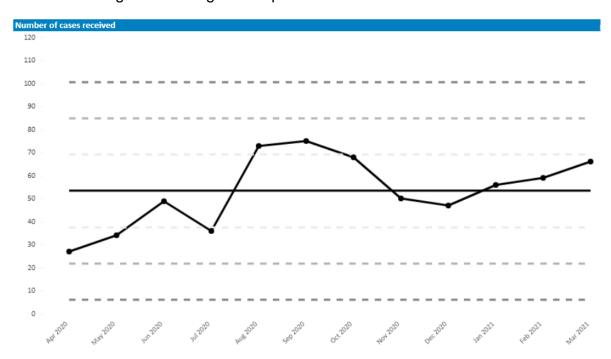
Indicators

- Indicator four
 - o The total number of complaints received
- Indicator five
 - o Complaints closed at each stage
- Indicator six
 - o Complaints upheld, partially upheld and not upheld
- Indicator seven
 - o Working days to respond
- Indicator eight
 - o Complaints closed in full within the timescales
- Indicator nine
 - o Number of cases where an extension is authorised

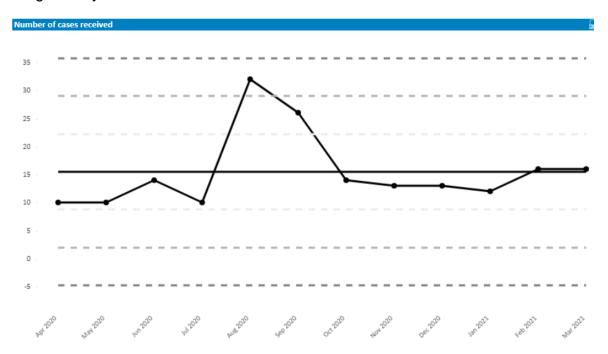
Indicators

Indicator four - Number of complaints received

Number of Stage 1 and Stage 2 complaints combined

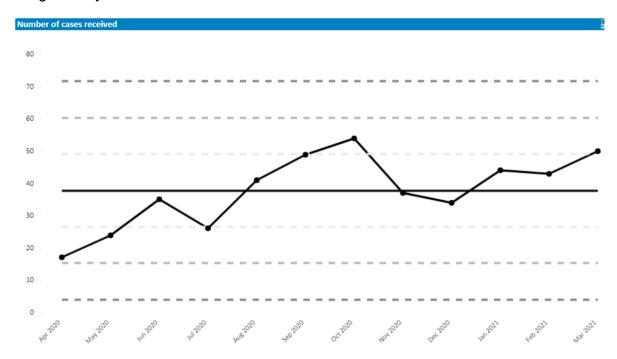


Stage 1 only



The number of stage 1 compliant received decrease in the last six months.

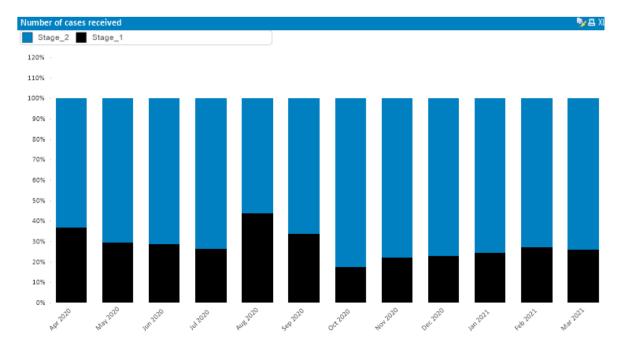
Stage 2 only



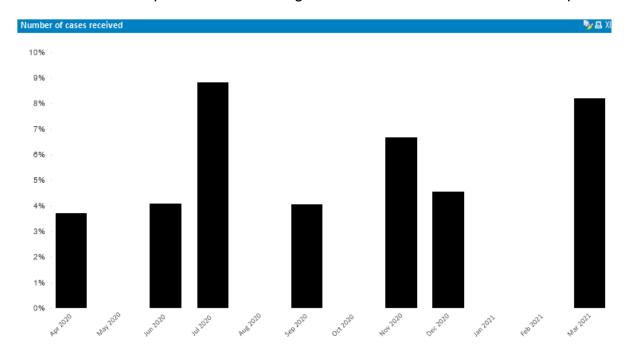
The number of stage 2 complaints received reduced reduced significantly at the beginning of the pandemic and started to increase before reducing again. Stage 2 complaints started to rise again towards the end of the financial year.

Indicator five - Complaints closed

The number of complaints closed at stage one and stage two as % of all complaints



The number of complaints closed at stage two after escalation as % of all complaints

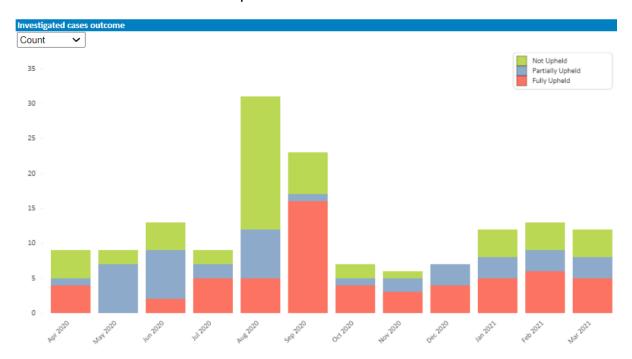


The empty months represent no escalated stage 1 complaints in that month.

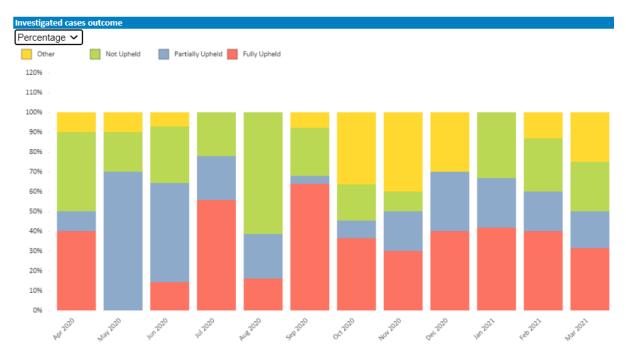
Some stage 1 complaints are escalated and they are not resolved. This graph shows the percentage of stage 1 complaints escalated as a % of all complaints, which is therefore small.

Indicator six - Complaints outcome

The number of stage 1 complaints not upheld, partially upheld and fully upheld. An assessment is made of the complaint outcome.

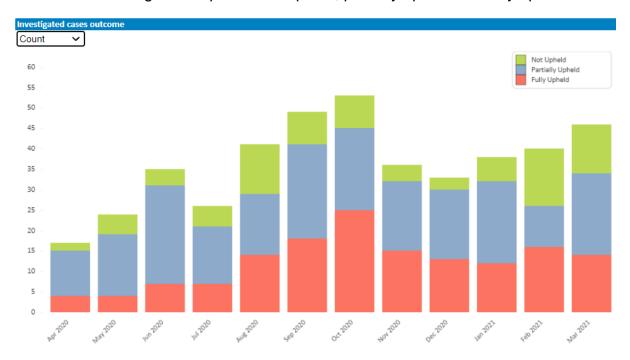


Stage 1 complaints not upheld, partially upheld and fully upheld as a % of all closed stage 1 complaints

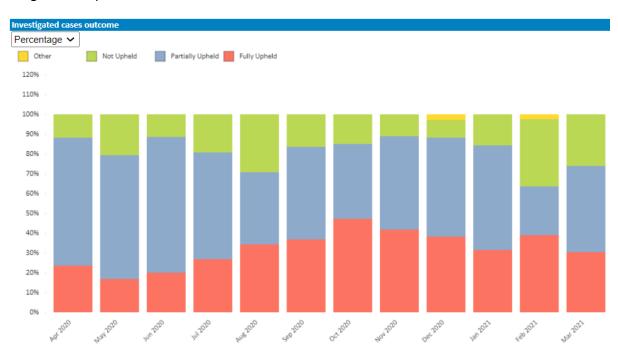


'Other' represents the grouping of other codes selected in the outcome field. These include 'transferred to another unit', 'irresolvable', 'unreasonable complaint', 'concilation', 'complaint withdrawn'. In most cases this in irresolvable and they are escalated to be dealt with as a stage 2 complaint.

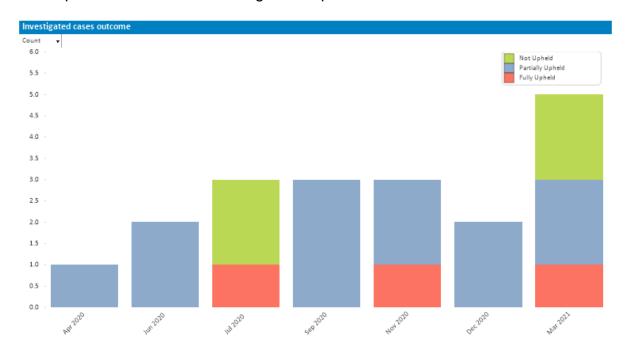
The number of stage 2 complaints not upheld, partially upheld and fully upheld



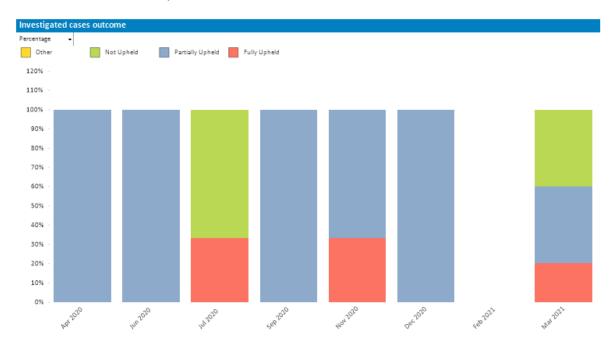
Stage 2 complaints not upheld, partially upheld and fully upheld as a % of all closed stage 2 complaints



The number of escalated complaints not upheld, partially upheld and fully upheld. This represents the number of stage 1 complaints that have been escalated.



Escalated complaints not upheld, partially upheld and fully upheld as a % of all closed escalated complaints



Indicator seven - Average time in working days to respond (closed only)

Average time in working days to respond to complaints at stage 1. Stage 1 complaints should be responded to within 5 working days (extended to 10 working days)

Month -	Average of Working days
Apr 2020	6
May 2020	9
Jun 2020	3
Jul 2020	3
Aug 2020	6
Sep 2020	5
Oct 2020	12
Nov 2020	12
Dec 2020	5
Jan 2021	12
Feb 2021	4
Mar 2021	5

Average time in working days to respond to complaints at stage 2. Stage 2 complaints should be responded to within 20 working days.

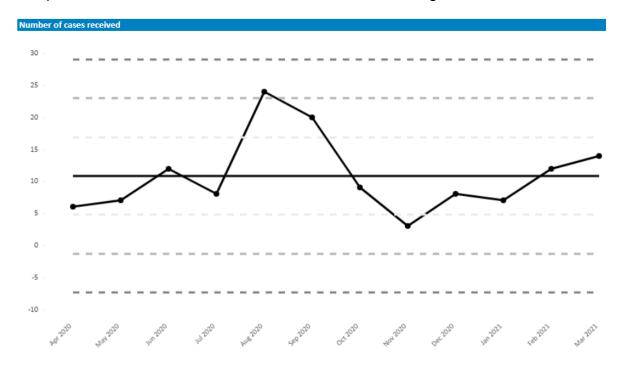
Month Average of Working	days
Apr 2020	25
May 2020	27
Jun 2020	20
Jul 2020	24
Aug 2020	25
Sep 2020	25
Oct 2020	24
Nov 2020	36
Dec 2020	33
Jan 2021	29
Feb 2021	28
Mar 2021	29

Average time in working days to respond to escalated complaints (only)

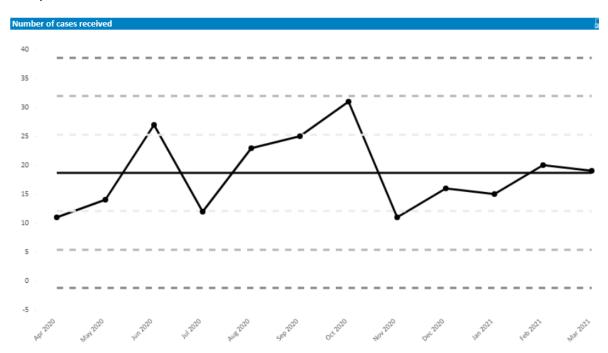
Month	■ Average of Working days
Apr 2020	27
Jun 2020	24
Jul 2020	32
Sep 2020	16
Nov 2020	21
Dec 2020	9
Mar 2021	20

Indicator eight - Complaints closed in full within the timescales

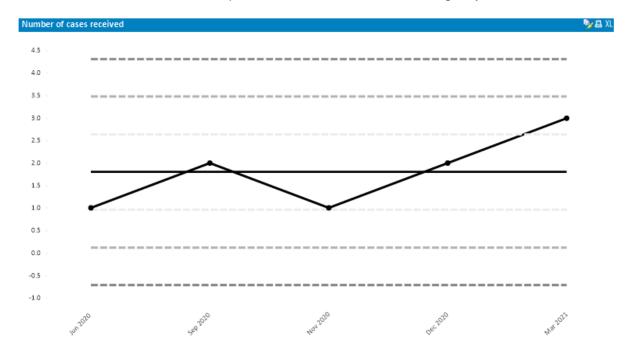
The number of stage 1 complaints closed within 5 working days. The number of complaints closed in desired timescale decreased after August 2020.



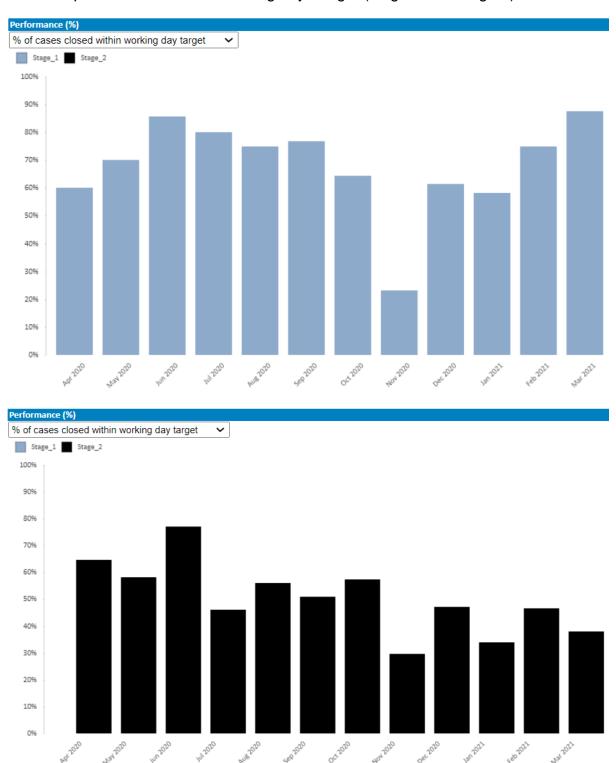
The number of stage 2 complaints closed within 20 working days. The number of complaints closed in desired timescale decreased after October 2020.



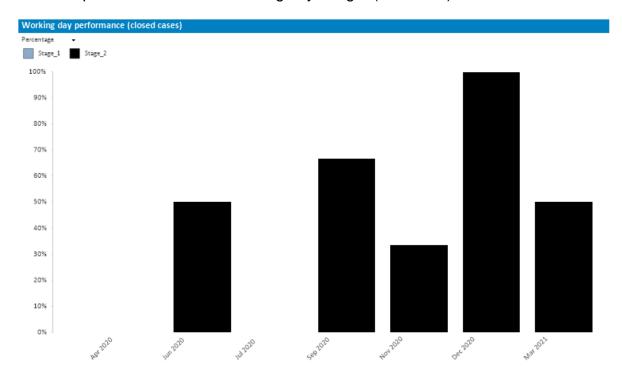
The number of escalated complaints closed within 20 working days



% of complaints closed within working days target (stage 1 and stage 2)



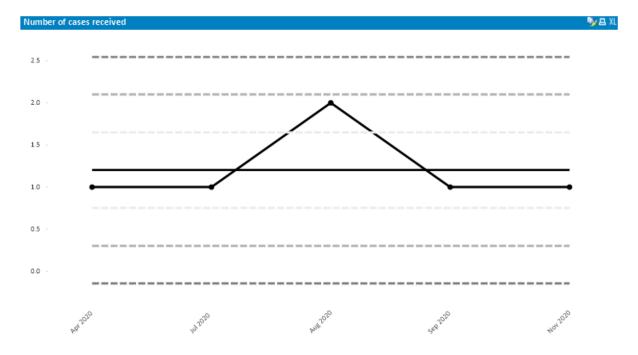
% of complaints closed within working days target (escalated)



The empty months represent no stage 1 complaints were escalated for the month that had escalated complaints

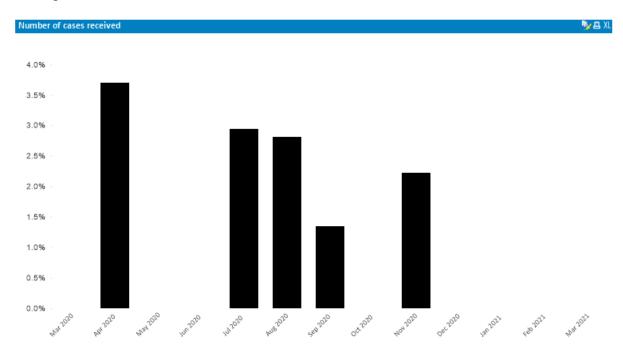
Indicator nine - Authorised extensions

Number of complaints closed at stage 1 where extension was authorised



Complaints response timescale can be extended to 10 working days with approval

Closed stage 1 complaints where extension was authorised as a % of all complaints at stage 1



The empty months represent stage 1 extensions in that month

Complaint Improvement Activity

Work commenced in May 2021 to improve performance. An Board wide improvement plan is being developed to include:-

- 1. A range of performance measures for complaints
- 2. A training programme to include training for complaints investigators, feedback team, executive team and operational unit management team
- 3. New weekly monitoring reports
- 4. Reintroduction of a Feedback Newsletter

NHS Highland

Annual Report on Feedback and Complaints Performance Indicator Data collection 2020/2021

Performance Indicator Four:

Summary of total number of complaints received in the reporting year

*Does not include withdrawn, SPSO or further corresponance complaints

Number of complaints received by the NHS Territorial Board or NHS Special Board Complaints and Feedback Team	637
Number of complaints received by NHS Contractors (<i>Territorial Boards only</i>)	n/a
Total number of complaints received in NHS Board area	637

NHS Board - sub-groups of complaints received

Prisons		26
NHS Board Managed Primary Care services:		39
	GP	27
	Dental	11
	Ophthalmic	0
	Pharmacy	1

NHS Contractors – complaints received

GP	n/a
Dental	n/a
Ophthalmic	n/a
Pharmacy	n/a
Total	n/a

Performance Indicator Five

The total number of complaints closed by NHS Boards in the reporting year (do <u>not</u> 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)
Stage one	172	29%
Stage two	415	68%
Stage two - Number of escalated complaints	19	2%
Total complaints closed by NHS Board	606	

Performance Indicator Six

Complaints upheld, partially upheld and not upheld

Stage one complaints

	Number	As a % of all complaints closed by NHS Board at
		stage one
Number of complaints upheld at stage one	59	34%
Number of complaints not upheld at stage one	52	30%
Number of complaints partially upheld at stage	40	23%
one		
Total stage one closed complaints	172	

^{*%} scores do not total 100%, as the total complaints closed includes outcomes that are not fully held/partially upheld/not upheld

Stage two complaints

	Number	As a % of all complaints closed by NHS Boards at stage two
Number of complaints upheld at stage two	144	35%
Number of complaints not upheld at stage two	77	19%
Number of complaints partially upheld at stage	194	47%
two		
Total stage two closed complaints	415	

Stage two escalated complaints

	Number	As a % of all escalated complaints closed by NHS
Escalated stage 2 closed complaints only		Boards at stage two
Number of escalated complaints upheld at stage	3	16%
two		
Number of escalated complaints not upheld at	4	21%
stage two		
Number of escalated complaints partially upheld	12	63%
at stage two		
	19	
Total stage two closed escalated complaints		

Performance Indicator Eight

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
Number of complaints closed at stage one within	129	36%
5 working days.		
Number of complaints closed at stage two within	223	62%
20 working days		
Number of escalated complaints closed at stage	9	2%
two within 20 working days		
	361	
Total number of complaints closed within		
timescales		

Performance Indicator Nine

Number of cases where an extension is authorised

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

	Number	As a % of complaints closed by NHS Boards at each stage
Number of complaints closed at stage one where extension was authorised	6	100%
Number of complaints closed at stage two where extension was authorised	0	n/a
Total number of extensions authorised	6	

^{*}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:	Position:
Tel:	E-mail:
Date:	