

Complaints and Feedback Annual Report 2019/2020.

Introduction

Patients, carers, relatives and families use and experience our services every minute of every day. No one else has that unique perspective, and therein lies one of the greatest opportunities continuous improvement.

Whatever that experience, each person offers, our aim is to provide reliable, person centred care and services using all the resources we have to deliver to the highest quality and safest possible care. Continually driving the standards of care upwards is dependent on NHS Western Isles (NHSWI) being an open, listening, learning and adaptive organisation. It is only through the receipt of constructive feedback from patients, families and the wider public, that we can reflect on the experiences of our patients and make any necessary improvements to our care systems and services. Our pledge is that we will encourage, listen to, and act in response to the experiences of our population, working together to improve the experience of those who will need our services.

Boards are required to produce an Annual Report on the use of feedback, comments, concerns and complaints, which stems from The Patient Rights (Scotland) Act 2011, The Patient Rights (Complaints Procedure and Consequential Provisions) (Scotland) Amendment Regulations 2016 and the Patients Rights (Feedback, Comments, Concerns and Complaints) (Scotland) Directions 2017 (CHP) which Came into force on 1 April 2017. The Board itself is committed to, and expects continuous improvement and requires the re-assurance that systems are in place and working effectively to deliver that improvement.

Our Approach

Patient Feedback

All staff should be actively listening, reflecting and responding to feedback, comments, concerns and complaints appropriately, effectively and efficiently.

Best Use of Resources

Healthcare staff and patients should make sure that all resources at our disposal are used as effectively and efficiently as possible.

New Complaint Handling Procedure

What is a complaint?

‘An expression of dissatisfaction by one or more members of the public about the organisation's action or lack of action, or about the standard of service provided by or on behalf of the organisation.’

What is Feedback?

Feedback may be in the form of views expressed orally or in writing as part of a survey, patient questionnaires or initiatives such as patient experience surveys or via stakeholder electronic portals.

What are Comments?

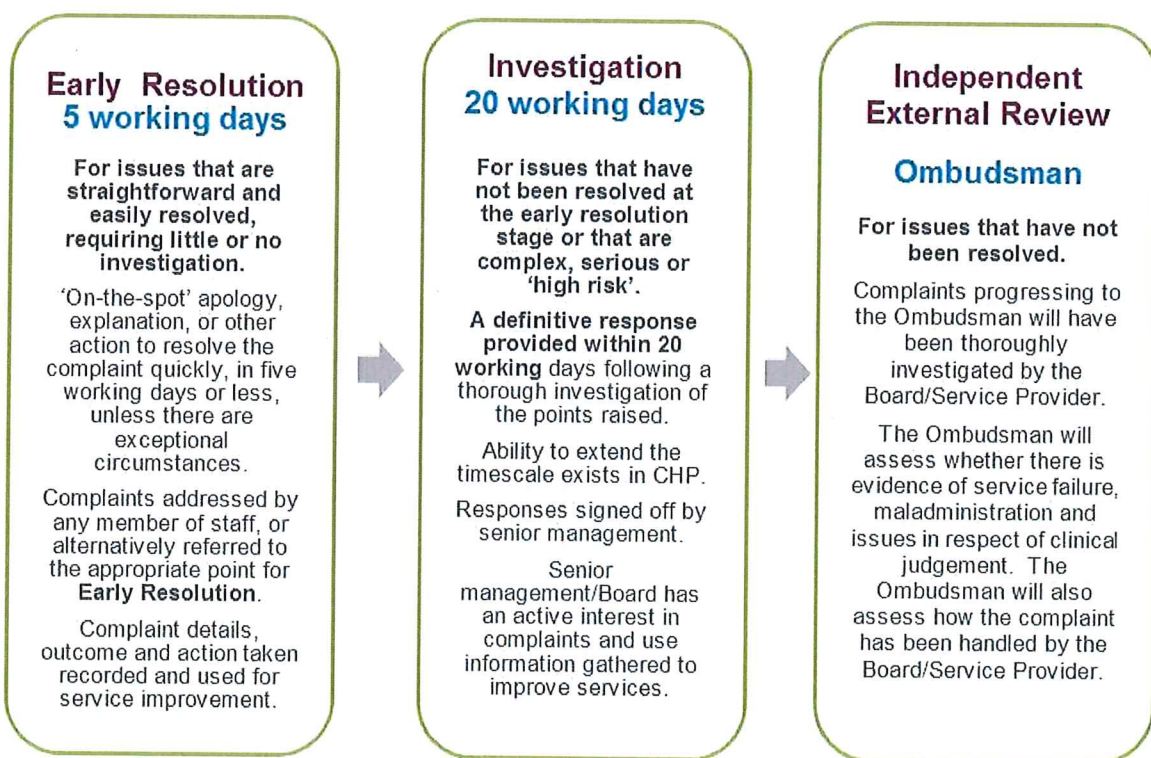
Comments may be comments, compliments, feedback or observations offered orally or in writing for example on ward or hospital suggestion cards, which reflect how someone felt about the service.

What are Concerns?

Concerns may be expressed in relation to proposed treatment or about any aspect of the service, from timing of appointments to getting to hospital for the proposed treatment or the actual treatment received.

On 1 April 2017 the new Complaints Handling Procedure commenced across NHS Western Isles. The new Complaint Handling Procedure (CHP) is now embedded across the organisation. The complaint handling Procedure is summarised below:

The NHS Model Complaints Handling Procedure



Indicator 1. Learning from complaints.

We use informed comments, feedback, concerns and complaints to adapt, improve our systems and processes for care delivery and services in the pursuit of continuous improvement and enhancing the everyday experiences of our patients.

The Health (Tobacco, Nicotine etc. and Care) Scotland Act 2016 ("The Act") introduced an Organisational Duty of Candour on health, care and social work services. The Act is supplemented by the **Duty of Candour Procedure (Scotland) Regulations 2018**, which highlight the procedure to be followed whenever a Duty of Candour incident has been identified.

For the period **1st April 2019 to 31st March 2020** NHS Western Isles had **(4)** significant adverse events which fulfilled the criteria for the Duty of Candour, i.e. an unintended or unexpected act/incident that resulted in death or harm, as defined within the Act, and did not relate directly to the natural course of a person's illness or underlying condition.

Currently there are many ways for us to receive comments, concerns, feedback and complaints and we encourage the responsible and systematic use of all methods. Whilst the single biggest area of growth is the increasing use of social media and web based forms of feedback, we are aware and acknowledge that many people living in our community do not, and will never access or use these forms of feedback. We must therefore maintain a balanced range of systems to enable equal opportunity for all to communicate and give us the benefit of their unique experience and perspective. The Complaints Officer is regularly in contact with complainants where appropriate, and or necessary.

Learning/Service Improvements as a Result of Complaints.

Each complaint provides us with an opportunity to review and reflect on the care and services we provide and to learn and improve patients' experiences. The priority of the NHS Board is to scrutinise the learning and sustained service improvements.

Through the complaints process, the following are examples of service improvements that have been put in place:

- Where complaints have been received about staff attitude, the Chief Executive will monitor for trends developing in an area or for an individual, ensuring adequate and effective support.
- The Orthopaedics Team will use the image intensifier screening in all elective foot procedures where screws/plates/other implants are used. This will provide an additional check and document that the fixation has been achieved.
- Complaints information leaflets have been distributed to all three Western Isles Hospitals.
- Awareness raising of the condition developmental dysplasia of the hip highlighted with appropriate staff.
- NHSWI staff and Optometrist staff have discussed and corrected how an administrative error led to a patient showing on NHS system as a fail to attend appointment.
- A working group was established to explore and examine ways to shorten patient escort authorisation and policy to ensure the information necessary for those using the service is clear and informative and a decision is reached quickly.
- 'Good conversations' training cascaded to staff as a result of complaint about member of staffs attitude and unsatisfactory letter writing.
- Review of recruiting practices undertaken and implemented due to an error in the selection of candidates for interview process.
- Reminder sent to all staff about patient confidentiality and the consequences intentionally or unintentionally of any breaches.
- Midwifery service now advertise midwife as first point of contact to minimise anyone else needlessly knowing about any woman's pregnancy.
- The discharge process for patients has been reviewed to ensure potential discharge challenges are identified at the earliest opportunity and that families/carers are engaged, informed and work in partnership with the multidisciplinary team approach to discharge planning, whilst still adhering to national guidelines and the consideration of the role of the proxy acting in the best interests of the patient. As part of building this into a process, it is part of a refresh of the daily dynamic discharge multi disciplinary team meeting.
- Hospital Manager has ensured Emergency Department staff understand the roles and responsibilities in respect of the release of remains for Post Mortem examinations, and the associated identification process. A process map will also be created for staff

in our Emergency Department and Chaplaincy Department that explains the steps and responsibilities placed on our staff.

- Where there are short notice changes to the availability of Scottish Ambulance Service crews, ward staff should ensure that the discharge can satisfactorily proceed by confirming with Ambulance Control and patient transport staff that the correct equipment is available to facilitate the transfer from vehicle to destination.
- Staff should not presume that family members present to receive the patient are in a position to assist with transfers. The ability to assist should be confirmed before the patient leaves hospital.
- Carry out a review with Scottish Ambulance Service in respect of the transport process and procedures.
- The Reception Staff Team were reminded of the internal and external telephone numbers for Patient Travel to ensure that the correct telephone numbers are stored on the Reception telephone console which will prevent incorrect information being given out to the public.
- Mental Health service Head to liaise with the IT project lead for MORSE, the electronic patient record system, to see if there is a section within the system for recording details of the named person and for recording when consent to share information is given, and withheld, so that there is a contemporaneous record that can then inform a plan of care.
- Carry out periodic audits of the MORSE system to include evidence of care planning and evaluations of care.
- Reassure Mental Health team about how services should respond to a patient's decision to withdraw consent to share information with next of kin, and family members and to stress the importance of evidencing attempts to encourage the patient to reconsider his/her decision.
- Emergency Department staff have been reminded of the need to consider x-ray wounds with high force injuries (depending on individual case) are considered for x-ray to confirm or exclude presence of foreign bodies.
- Moving and handling training is a mandatory requirement for staff which requires yearly updates and both staff involved will be attending refresher training. Moving and handling aids are available on the ward.
- Staff have been reminded of the importance of clear and accurate nursing documentation as per national guidelines.
- Review of case carried out by group of out of hours clinicians as it raised issues of managing chronic pain in the out of hours period. Significant Event Analysis Review conducted and discussed at Out of Hours meeting.
- Patients email addresses are now being taken as an additional appropriate method of communication.
- The Epilepsy Nurse is working with colleagues in Glasgow and Inverness to develop a shared documentation which will assist with continuity of care whilst working with the maternity team.

It is important to recognise the above as positive improvements as a result of reflective review and the learning derived from that.

The Learning Review Group is responsible for ensuring that NHS Western Isles recognises and demonstrates the benefits of learning from any adverse events, complaints, and or claims. The group also identifies any trends and co-ordinates thematic learning from across the separate areas and ensures that appropriate actions have been progressed.

Patient experience, risk and safety systems are critical drivers to improving the reliability of the care we provide to patients.

It is important for us to capture learning from across these systems both individually and collectively, making sure that appropriate learning is captured and shared from systems.

In order to achieve the optimal learning, the Chief Executive reviews all complaints upon receipt and signs off all responses. In addition the Chief Executive reviews all Significant Adverse Events and all clinical negligence claims, and all Patient Opinion postings and responses.

Support for those who wish to give feedback or make a complaint.

The Patient Advice and Support Service (PASS):

A number of complainants have sought advice and support from local Advocacy services. Almost invariably complainants as a result are more focussed, prepared and confident leading to a positive interaction. Awareness of the PASS service is raised locally through signposting to complainants via acknowledgement letters, leaflets and posters across the organisation, through local press, the NHS Western Isles website, revolving electronic information screens within NHS Western Isles Hospital and the 'Slainte' magazine.

The complaints officer for NHS Western Isles is in regular contact with the Pass Adviser to foster a better working relationship.

The Scottish Public Services Ombudsman (SPSO).

In the period **2019-2020 (7)** complaints were referred to the Ombudsman. Of these **(7)** complaints **(6)** are under investigation and **(1)** was returned with no further action taken.

The Ombudsman informed the Board of the outcomes of **(4)** outstanding complaints received during the period **2018-19. (2)** complaints were upheld, both with no recommendations, **(1)** was upheld with no recommendations and **(1)** was upheld with **(2)** recommendations. Both recommendations have been accepted and implemented in full. Details of all NHS Western Isles reports can be found on the SPSO website: <https://www.spsos.org.uk/our-findings>.

Improvements to Services.

Whilst the efficient management, investigation and response to concerns and complaints within the required timescales is a priority, the overriding aim is to capture the learning from concerns and complaints and to implement sustainable improvements to our care and services.

Achieving enhanced levels of quality, reliability, safety and patient experience has been our objective.

Alternative Dispute Resolution (ADR).

During this period no complaints required the consideration and or provision of ADR.

Indicator 2: Complaint Process Experience

NHS Western Isles Health Board are engaging with complainants to understand their experience with the complaints process. We send all stage two complainants our Patient Relations Feedback Form and ask them to return it to NHS Western Isles by post with a stamp addressed envelope provided or by email/telephone if they prefer.

We ask all stage two complainants the following nine questions and ask them to respond with either agree/neither agree or disagree/disagree/don't know:

Finding information on how to make a complaint was easy? There were **(8)** agree, **(5)** neither agree or disagree and **(1)** disagree responses received.

Submitting a complaint was easy? There were (10) agree and (4) neither agree or disagree responses received.

Patient relations staff were helpful, courteous and professional. There were (12) agree, (1) neither agree or disagree and (1) disagree responses received.

Patient relations staff listened and understood my complaint. There were (10) agree, (3) neither agree or disagree and (1) disagree responses received.

Patient relations staff checked what outcome I wanted. There were (3) agree, (8) neither agree or disagree, (2) disagree and (1) don't know responses received.

Patient relations staff explained the complaint process. There were (12) agree and (2) neither agree or disagree, responses received.

My complaint was handled in a timely manner and I was kept informed of any delays. There were (7) agree, (3) neither agree or disagree, (3) disagree and (1) don't now responses received.

All my complaint points were answered. There were (2) agree, (4) neither agree or disagree, (6) disagree, (1) don't know and (1) not completed responses received.

The complaint response was easy to read and understandable. There were (4) agree, (6) neither agree or disagree, (1) disagree, (1) don't know and (1) not completed responses received.

We also ask two further specific questions which require a Yes/No answer.

I raised concerns about how my complaint was handled? There were (7) yes and (6) no with (1) not completed responses received.

Were your concerns addressed? There were (3) yes and (8) no with (3) not completed responses received.

Complainants also have the opportunity to provide additional comment which is looked at for learning and improvement purposes and if appropriate passed to individual Departments and or staff.

"Was actually 1st referred in 2018 not as stated 2019!! So no answer for the exceptionally long delay. The system is a shambles. Combination of no staff and bad management. Like my dad I've no confidence in urology. He had to wait nearly 3 years to finally get a diagnosis. Due to the same delays and constant cancellations. Different excuse every time you phone."

"There was no stamp on envelope addressed to me - had to pay £2.00 to get it out of post office. Envelope in = this. Please refund."

"I don't believe my complaint was investigated properly. I do not believe the HR Departments director had any interest in getting to the bottom of the issue and was happy to accept the easiest explanation. This is of no surprise as a local lawyer friend & local MSP had suggested I would get a whitewash response."

"I would like to add that the Complaints Officer has been very helpful since I first spoke to him. He was very shocked with the bit of disc that was still left in the wound. This bit could have killed me if it had travelled through my blood. Neglect on her behalf."

"The complaint could have been handled better I would like this complaint to carry on."

Face to face discussions are used where it is deemed appropriate but no such discussions have been required during the period under review.

Indicator 3: Staff Awareness and Training.

Staff training and support regarding people who wish to give feedback or make a complaint. Staff receive support from their managers with guidance from the Complaints Officer and Patient Focus Public Involvement Development Officer to enable them to respond effectively to feedback.

Staff are encouraged to complete the NES "Can I help you?" modules on Learn Pro. During the year 1 April 2019 – 31 March 2020 staff completed the following modules:

Module	Completed module 2016-17	Completed module 2017-18	Completed module 2018-19	Completed module 2019-20
1. Valuing feedback	18	5	4	7
2. Encouraging feedback and using it	18	3	4	7
3. NHS complaints procedure and process	21	2	4	7
4. The power of apology	23	3	4	7
5. Managing difficult behaviour	21	3	4	7

Modules take 15 minutes to complete. Staff can complete them as a group in their own time or during dedicated time. Whilst there are less completed modules for 2019/20, we do not expect staff to undertake this module annually.

In addition the Patient Focus Public Involvement Officer delivered PFPI training to Student Nurses.

There was a focus on front line staff responding to patient feedback with a programme of Care Opinion training delivered to Heads of Service, Integrated Joint Board staff, Third Sector representation and to Patient Peer Support Groups. This saw an increase in feedback via this online platform.

The Learning Review Group noted that clinical treatment and improving communication continue to be themes within the complaints report and any investigations.

2019/20 saw a continued focus on supporting staff and carers in relation to dementia. During Dementia Awareness Week, we utilised What Matters To You day as part of Dementia Awareness multi agency event in partnership with Alzheimer Scotland.

In 2019/20 the Associate Medical Director facilitated a development workshop via the BMA called Creating a Culture of Civility and Respect.

The Chief Executive, Mr Gordon Jamieson is the Senior Reporting Officer and Mr Roddy Mackay Complaints Officer is the board champion.

All performance review meetings with senior managers include complaint reviews and specifically learning from complaints in their objectives.

The Culture, including Staff Training and Development.

Leadership has been key in continuing to develop a culture within which comments, feedback, concerns and complaints are welcome and valued.

This has been led at a Senior Level with examples including:

- Face to face discussions with complainants when appropriate;
- Communications and Engagement Plan (how to develop) document developed so that all staff can develop communications and engagement plans for any projects;
- Person Centred Walkrounds by the Nurse Director and Lead for Clinical Governance and Professional Practice;
- Development of Learning and Review Group and Patient Experience Group within Governance Structures;
- Regular Reporting on Patient Opinion within PFPI Committee, and Patient Experience Group;
- Sign off for all Patient Opinion responses by the Chief Executive;
- Development of Real Time surveys for localised improvement;
- The Chief Executive has personal input into every complaint, concern; serious adverse events, clinical negligence claims; and patient opinion posting and response. This provides, in a relatively small organisation, the early detection of developing trends, increasing risks, and areas requiring additional support and or learning.
- The Chief Executive has a regular interactive, coaching/discussion with Nursing Students regarding the prevention of, responding to, and effectively managing complaints; clinical negligence claims, Duty of Candour, Significant Adverse Events, and Fatal Accident Inquiries.
- The organisation welcomes and actively supports and promotes the Patient's Advocacy Service.
- The Chief Executive discusses all complaints, adverse events etc, at each Performance Management review.

Indicator 4: The total Number of complaints received.

Table 2 shows the total number of complaints received by NHS Western Isles Board through the Complaint Handling Procedure:

4a. Number of complaints received by the NHS Western Isles Board	63
4b. Number of complaints received by NHS Western Isles Primary Care Service Contractors	13
4c. Total number of complaints received in the NHS Western Isles Board area	76

Table 3 shows the total number of complaints received by NHS Western Isles contractors through the Complaint Handling Procedure:

NHS Western Isles Board - sub-groups of complaints received.

Independent Contractors - Primary Care services.	
4h. General Practitioner.	9
4i. Dental.	2
4j. Ophthalmic.	1
4k. Pharmacy.	1
4l. Total of Primary Care Services complaints,	13

There were **(66)** complaints that were processed in total under the new Complaints Handling Procedure for the year **2019/2020** by NHS Western Isles Health Board.

There were **(2)** complaint(s) recorded by Castlevue Dental Practice, **(9)** by GP Practices, **(1)** by Ophthalmic services and **(1)** by Pharmacy services.

There were **(2)** complaints that were logged and then withdrawn and **(1)** complaint transferred to another unit.

This figure after removal of these three complaints is **(63) for 2019/2020** which compares with **(85)** complaints between **2018/2019**.

Table 4 shows the locations complained about **2019/2020**, with the most complaints received about Acute/Clinical services, which is similar to the previous year. The comparisons with **2018/2019** are also given.

Table 4

Complaint received by location	2019/2020	2018/2019
Western Isles Hospital	43	44
Uist and Barra Hospital	5	11
Board Wide	7	17
Community Health and Social Care Partnership	4	4
Dental Service	1	1
Mental Health and Learning Disabilities Service	2	7
Residence/Offices (not to be used for Hospitals/GP/Clinic)	1	1
Totals:	63	85

The main issues raised in complaints. The top three reasons for complaints received for **2019-2020** were:

- **Clinical treatment.**
- **Staff- Communication oral.**
- **Staff- Communication written.**

This differs from **2018-2019** where the top three reasons for complaints received were:

- **Clinical treatment.**
- **Staff- Communication written.**
- **Environment Domestic- Patient Medical Escort Provision.**

Table 5 shows all complaints by Issue category **2019-2020**.

Complaints by issue Category	2019/20	2018/19
Admissions / transfers / discharge procedure	1	0
Aids / appliances / equipment	2	2
Attitude and behaviour	12	16
Bed shortages	0	1
Clinical treatment	41	38
Communication (oral)	17	12
Communication (written)	14	20
Competence	1	6
Date for appointment	3	16
Date of admission / attendance	0	1
Failure to follow agreed procedures	1	1
Mortuary / post mortem arrangements	1	0
Other	1	1
Outpatient and other clinics	1	4
Patient privacy / dignity	2	3
Patient property / expenses	8	16
Personal records	2	4
Policy & commercial decisions of NHS board	1	2
Premises	0	1
Transport	4	1
Total	112	145

Indicator 5: Complaint closed at each stage.

Table 6.

Total number of complaints closed by the NHS Western Isles Board	Number	As a % of all NHS Western Isles complaints closed
5a. Stage One	15	24%
5b. Stage two- non escalated	47	75%
5c. Stage two escalated	1	1%
5d. Total Complaints closed by NHS Board	63	100%

Contractors report **(13)** complaints in total with **(8)** stage one complaints, **(5)** stage two complaints- non escalated and **(0)** stage two complaints escalated.

Indicator 6: Complaints upheld, partially upheld and not upheld.

Stage one complaints

Table 7.

Stage 1 complaints	Number	As a % of all complaints closed by NHS Western Isles Board at stage one
6a. Number of complaints upheld at stage one	7	44%
6b. Number of complaints not upheld at stage one	9	56%
6c. Number of complaints partially upheld at stage one	0	0%
6d. Total stage one complaints outcomes.	16	100%

Contractors report **(5)** complaints upheld and **(3)** not upheld at stage one.

Stage two complaints- non-escalated.

Table 8.

Non-escalated complaints	Number	As a % of all complaints closed by NHS Western Isles Board at stage two
6e. Number of non-escalated complaints upheld at Stage 2.	12	26%
6f. Number of non-escalated complaints not upheld at stage two.	21	46%
6g. Number of non-escalated complaints partially upheld at stage two.	13	28%
6h. Total stage two non-escalated complaints outcomes.	46	100%

Contractors report (5) complaints with (3) not upheld and (2) partially upheld at stage two non-escalated.

Stage two escalated complaints

Table 9.

Escalated Complaints	Number	As a % of all escalated complaints closed by NHS Western Isles Board at stage two
6i. Number of escalated complaints upheld at stage two	0	0%
6j. Number of escalated complaints not upheld at stage two	1	100%
6k. Number of escalated complaints partially upheld at stage two	0	0%
6l. Total stage two escalated complaints outcomes	1	100%

Contractors report no escalated complaints.

Indicator seven: Average times.

This indicator represents the average time in working days to close complaints at stage one and stage two of the Complaints Handling Procedure.

Table 10.

All complaints	Total average time in working days to close complaints at.
Stage one	4.06 days 2019/2020. (3.26 days 2018/2019).
Stage two	26 Days 2019/2020 (24 days 2018/2019).
Stage two after escalation	34 days 2019/2020. (N/A 2018/2019).

Contractors, not including Castlevue Dental Practice report **(6)** working days as average time to respond to stage one complaints and **(29)** working days as average time to respond to stage two complaints. Castlevue Dental Practice report **(0)** stage one complaints and **(25)** working days to respond to stage two complaints.

Complaints Handling Performance.

The number of complaints responded to within 5 working days has increased from **3.26 days 2018/2019)** to **4.06 days 2019/2020**. This increase is down to one complaint which was authorised to be delayed by 5 working days. The number of complaints responded to within 20 working days has increased to **26 Days 2019/2020 from 24 days 2018/2019**. The primary reasons for this being availability of staff, increasingly complex complaints, staff workloads and Covid-19. There were **(4)** complaints in the period January to March 2020 which were delayed as a direct result of Covid-19. It is expected this will continue into 2020/2021.

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.

Table 11

	Number	As a % of complaints closed by NHS Western Isles at each stage
8a. Number of complaints closed at stage one within 5 working days.	14	88%
8b. Number of non-escalated complaints	25	54%

closed at stage two within 20 working days.		
8c. Number of escalated complaints closed at stage two within 20 working days.	0	N/A.
8d. Total number of complaints closed within timescales	39	62%

Contractors report **(4)** complaints closed at stage one within five working days and **(1)** complaint closed within twenty working days at stage two. Castlevue Dental Practice report **(0)** stage one complaints and **(1)** stage two complaint closed within 20 working days.

Indicator Nine: 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.

Table 12.

	Number	As a % of complaints closed at each stage
9a. The number of complaints closed at stage one where extension was authorised.	1	6.25%.
9b. The number of complaints closed at stage two where extension was authorised (including both escalated and non escalated complaints).	10	21%.
9c. Total number of extensions authorised.	11	17%

Contractors report **(0)** complaints were closed at stage 1 where extension was authorised and **(1)** complaint closed at stage 2 where extension was authorised. Castlevue Dental Practice report **(0)** complaints were closed at stage 1 where extension was authorised and **(1)** complaint closed at stage 2 where extension was authorised.

NHS Western Isles always makes every effort to ensure timescales for the Complaint Handling Procedure are adhered to by Investigating Officers. Since early 2020 due to Covid-19 and staff's preparation to deal with its effects, a number of complaints have been delayed which would not have been the case without Covid-19. The system used to collate complaints is web based and provides better functionality for monitoring all complaints timescales and deadlines.

Encouraging and Gathering Feedback.

Available methods of encouraging feedback.

NHS Western Isles welcomes and encourages feedback from patients, carers, families and staff and we have a range of mechanisms in place to support this.

NHS Western Isles utilise a range of methods and approaches to encourage and gather all types of feedback including concerns, compliments and complaints.

The following list summarises the mechanisms available, further details are included in this report. These include:

Corporate Governance Structure.

- Patient Panel (representation from Patient Peer Support Groups for those with Long Term Conditions and Communities of Interest, including Carers, Disabled Access, Learning Disability and Mental Health Group established covering Lewis and Harris and Barra, community advised they did not feel that there was a need for this structure in Uist.
- Feedback from equalities groups to the Diversity Equality Steering Group
- Feedback from people with long term conditions to the Managed Clinical Networks
- Patient representation on service development groups (project specific and time limited)

Reporting.

- Complaints and Concerns Process
- Scottish National In-patient Experience Survey
- Patient experience surveys and questionnaires
- Care Opinion website

Patient Focus and Public Involvement Activity.

- Consultation and Engagement events including service user representation on redesign of services such as Mental Health Redesign
- Patient Stories – Hospital Access Disabled Patients participants invited onto Patient Panel
- Video/Storyboards - Patient Experience Guides added to redesign of NHS WI website
- What Matters to Me
- What Matters To Me Days
- Care Opinion Direct Feedback events
- Training for all Heads of Service by Care Opinion and ability to become direct responders (NHS western Isles named by Care Opinion within the top 25 UK wide for ability to be direct responders)
- Establishment of Feedback Fridays within hospital sites with intention to roll out to community venues 2020
- Increase in Care Opinion feedback from 4 patient stories in 2018/19 to 23 in 2019/20.

Communications.

- E-mails via **communications.nhswi@nhs.net**
- Feedback and compliments form on the NHS Western Isles website "**<http://www.wihb.scot.nhs.uk>**"
- Social Media e.g. Facebook and Twitter

- Telephone line to allow feedback directly to a member of staff
- Support people to giving feedback and complaints through the Patient Advice and Support Service (PASS)
- We are Listening Leaflets/You said We Did Boards outside each ward
- Welcome to the Ward Placemats and Information Booklets at each bedside
- Corporate information posters at the front of each hospital site
- Social Media invitations re what Matters To You days and Feedback Fridays

Publicity and helping people feel that their feedback is welcome.

We aim to create an active environment that welcomes feedback from everyone. We achieve this by empowering our clinical staff to engage positively and to address concerns as soon as we can. We encourage our staff to promote the value of feedback in their wards and departments, regardless of whether this is positive or negative.

NHS Western Isles publicises “How to complain or give feedback” using its website, accessible leaflets and encouraging staff to welcome this feedback. NHS also publicises Care Opinion through advertising on Slainte Magazine, on hospital information boards and at the entrance to each hospital site and ward entrance. Additional methods used to promote feedback include:

- We are Listening Leaflets used at each ward and feedback to patients and public through You Said We Did boards outside each ward
- Patient Placemats at each bedside highlighting how patients/carers can raise a concern and also methods of providing feedback (these designs have now been taken up by a number of other Health Boards)
- Admission to Discharge Information Pack provided to each patient on admission
- Carers Information Pack advising identified carers information on Carers Act and involvement in discharge processes.
- Corporate information posters at the front of each hospital site displaying patient information that includes information on concerns, complaints and feedback.

Obtaining feedback from equalities/particular groups.

Our staff will speak personally with anyone and at a time and location that suits their circumstances. People with hearing or visual impairments can use accessibility options available on our website. People whose first language is not English can access an interpreter or request written information in their own language through Language Line. Access to Interpretation on Wheels to assist patients in communicating with Clinical Staff with the ability to be utilised for Near Me consultations.

Patients can access support from the Patient Advice and Support Service if they do not feel confident about making a complaint or highlighting their concerns.

Our feedback mechanisms are advertised as available in print and electronic formats. These are accessible to people who may want to use them and can be requested in alternative formats of their choice.

Targeting equalities groups.

NHS Western Isles has a strong equality focus; this has been demonstrated during 2018/19 with the following:

- **Learning Disability** – consultation with Learning Disability groups on content of Patient Travel Information with a view to ensuring future materials were easy read

- **Mental Health** - An ongoing commitment to ensuring that there was representation from Communities of Interest via Penumbra and Catch 23 re the ongoing redesign of mental health services including input into the Strategic Planning Group and Model of Care Workstream
- **Disabled Access** - A film made by service users and representatives of the Disability Access Panel focussing on issues faced by disabled people re access and facilities within hospital premises, has led to a commitment from Senior Management that planned improvements or changes to the Hospital environment will in future be carried out in consultation with Disabled Access Groups
- **Refugee Resettlement**-to support new arrivals from Syria arriving via the Humanitarian Admission Programme a Welcome Pack and Health Passport was developed in 2016 and is still utilised to support families in the resettlement process and in dealing with agencies. These resources are available in both English and Arabic for ease of translation and to assist in learning English as a second language and are available from point of arrival. This is followed up with health information inputs via the Learning Shop as and when requested by the Support Team. In addition there has been feedback gained to ensure that families know they can contact us re any issues or concerns they have in relation to accessing services.
- **Patient Travel** -consulting with the Patient Panel, Carers Groups and Patient Travel Working Group on the content of a suite of documents to ease access to information.
- **Providing 1:1** -support to equalities groups– upon request providing additional support to gather patient stories for online feedback.

Recording of feedback, comments and concerns.

There was a need to develop a means of standardising reporting across all methods of feedback to this end all feedback is fed into the Learning Review Group and forms part of a report that identifies themes across complaints, feedback, datix and adverse incidents, this process continues to be refined, the DATIX model for complaints and feedback which will inform future reporting.

Feedback: Innovation and good practice.

A number of changes to practice have been implemented as a direct result of feedback, providing a more person centred service.

- Patient Satisfaction Surveys have been developed on behalf of the following services:
 - Memory Clinic
 - Orthopaedic Hand Surgery
 - PCCP Generic Survey of Near Me Service
 - Funded Patient Escort
 - Child Healthy Weight
- Admission to Discharge Pack
- Carers Information Pack
- Establishment of Feedback Fridays
- Tuesday Ceilidh for patients delayed in hospital and those with cognitive impairment – Smart Screen hosting reminiscence materials

- Partnership with Cíanalas project and Alzheimer Scotland providing musicians and artists supporting patients
- Partnership with Volunteers from the Stornoway Rotary Club to redesign areas of the Hospital Gardens

The delivery of health care to integrated 'health and care'; across geographical and organisational boundaries is a challenge. Service delivery in rural areas, and particularly issues around accessibility present challenges for health and social care services. Telehealth and digital solutions is a crucial strategy for providing patients with access to the healthcare they need.

Person Centred eHealth has developed a reputation of delivering innovation through necessity to ensure a sustainable person centred service for our island population, this has focused on the following key elements:

Near Me Clinics.

Clinics are very flexible and can be conducted within any location that is suitable to the patient, home, work, mobile phone, car, GP clinic. This has allowed faster access to treatment and diagnosis. The main clinics that are leading the way using Attend Anywhere are Respiratory, Rheumatology and Hand Surgery, however these clinics continue to be expanded with new services being added throughout when identified as being suitable for this platform.

Feedback on Near Me Clinics has overall been positive, one patient commented, that their employer only allows three days leave per year for medical appointments. Appointments in Raigmore regularly would use up all of their allotted leave, using Near Me they are able to carry on working and take a call with their consultant from their car at the allocated time thus saving the issue of balancing work and health commitments.

There has been a degree of negative feedback in relation to waiting for consultants to enter the waiting room and not knowing what is happening, this may be an issue due to changing the culture of appointments or may be a requirement for additional patient information and requires to be explored further.

FLO.

Florence continues to be utilised across a number of services including, MS, Diabetes, Smoking cessation, Physical exercise to name a few. This has proved popular with patients who have participated in telling their patient story. These Patient Experience Guides will be placed on our new website which is currently under development to make them readily accessible to the public. These stories cover a number of technological innovations, and will continue to be gathered. <https://vimeo.com/nhswesternisles>

mPower.

Western Isles launched a social prescribing initiative mPower <https://www.facebook.com/mPowerWI/> based on a Community Navigator/Link Worker model to tackle social isolation/loneliness and its health harm. This will include an innovative technology component to help address the challenge of remoteness in tackling the effects of social isolation. The overall aim is to deliver improved health outcomes and reduced service contacts amongst the target group including fewer hospital admissions, mental health service contacts and GP attendances by keeping people socially active. The service

expanded to cover all island communities during 2019/20, with Community Navigators being recruited within each locality.

Walk rounds.

A film made by patients with a range of disabilities carried out a series of Walk Rounds on hospital premises looking at access and environment this was captured and recorded from a first person perspective using the use of body worn cameras, this feedback was presented to the Patient Focus Public Involvement Committee and to the Hospital Operational Management Group this has led to confirmation of capital improvements being planned to Accessible Toilets and a commitment to include members of the group in relation to the signage for the hospital reception and corridors and any future changes to patient environment

The Chair of the Health Board regularly visits wards and departments to discuss first hand with patients their experience of care provision.

Care Opinion.

Care Opinion is an independent not-for-profit social enterprise contracted to administer and monitor patient feedback through the www.careopinion.org.uk website. This online system gathers feedback from patients and relatives. Care Opinion report numbers have increased significantly during 2019/20 from 4 stories in the last reporting period to 23 2019/20, this is alongside an increase in the feedback received via the variety of other feedback methods we utilise as outlined above. Care Opinion has had 78 NHS Western Isles patient stories posted online since its launch, with 38.5K public reads, of which 6.9K were over the last 12 months.

The Patient Focus Public Involvement Officer and Chief Executive monitored and reviewed all comments and questions, and providing a response. During 2019/20 this moved to a direct response following training of Heads of Service to provide a more frontline perspective. All responses are signed off by the Chief Executive.

During the year from 1 April 2019 to 31 March 2020, of the 23 opinions posted on Care Opinion 16 was positive, 5 were mildly critical and 2 were moderately critical. Of the 23 stories 12 had more than one Clinical Treatment location with patients being treated within other Health Board areas.

Increasing Care Opinion postings continues to be a challenge for NHS Western Isles, with regular local awareness raising to encourage the use of Care Opinion.

- Care Opinion posters have been circulated throughout all healthcare premises.
- Care Opinion promotional materials are available for patients to pick up and take away from outpatient areas
- Care Opinion is advertised in the local free newspaper 'Events' monthly.
- Care Opinion is advertised on the NHS Western Isles Facebook and Twitter sites.
- Care Opinion has been advertised on local radio (using the voiceover of a local nurse).
- Care Opinion is shown on all local patient information leaflets. Laptrays at bedside and corporate information posters
- Care Opinion awareness raising events with Patient Peer Support Groups

Any Care Opinion reports that are received are shared with staff and are taken to the Learning Review Group. Both positive and negative Care Opinion stories are scrutinised at the Senior Charge Nurse meeting to identify areas for improvement. There is ongoing discussion regarding how Care Opinion can be further promoted within NHS Western Isles. It is already widely promoted on all of our publications, posters and patient leaflets. The potential for further promotion remains under consideration and will be included within discussions of the Communications Group.

Examples of Feedback from Care Opinion.

Positive Feedback.

"Since discovering the lump and throughout treatment, I have been supported by Hazel, a Macmillan Breast Care Nurse at the Western Isles Hospital.

I cannot praise Hazel enough for the support and care she has given me during this anxious time. She is approachable, knowledgeable, caring and compassionate. Nothing seems to be too much trouble for Hazel and her explanations of pathology, treatment and plans do a great deal to reduce anxiety. At one point I was struggling to sleep while anxiously waiting for results, but a chat with Hazel cured my insomnia, as I was able to put my concerns into perspective.

Hazel is a shining example of all that is great about the NHS and I am so lucky to have had her by my side."

"A massive shout out to everyone from the minute I entered through A+E, drs, nurses to the nurses, drs , domestics , pharmacist in surgical ward who without being biased are simply the best to the radiographers in X-ray...I for one am very proud to work for the NHS and although not the best 24 hours of my life I'll turn it into a positive and use it to reflect and be more compassionate and be able to empathise more with my Pts in similar situations"

Negative Feedback.

".....I am glad I have the opportunity to voice my experience here. I would like to share so that no one else experiences this and staff can learn from it. I was transferred by air ambulance and had been told that an ambulance would meet me in Stornoway airport to safely transfer me to home approximately 2 hours away on single track twisting roads. When I arrived at the airport the ambulance service had another patient and although I had been told I had to travel lying down due to my vertical wound I was asked if I would be willing to travel sitting up. Otherwise I would have to wait in the air ambulance until they returned to get me which would mean a delay of at least four to four and a half hours before I would get home. This journey was painful and one I would not want to repeat there was an obvious lack of communication as there should not have been another person in the ambulance. Under the circumstance the ambulance should have been waiting at the airport for me and I should have been able to lie down so I could travel back safely. We had to stop on the journey to allow me to take pain medication. This was quite shocking. The air ambulance

crew were brilliant and tried to make the chair as comfortable as possible before the journey started.

My recovery was long and slow which was not assisted by the delay in getting the promised pump which did not arrive for over a week. I was asked by staff what is the rush. Also the dressings provided were inadequate they had to order special dressings for me, the dressings are a standard size and not large enough so would have to stick multiple dressings together..... “

Patients continue to use alternative online social media platforms to provide feedback. Feedback can be obtained through NHS Western Isles Facebook <https://www.facebook.com/NHSWesternIsles/> and Twitter pages which are monitored. In addition patients have been posting comments and feedback on an unofficial local facebook page Western Isles Hospital - <https://www.facebook.com/pages/Western-Isles-Hospital>. This is not an official NHS communications channel but staff keep a watchful eye on content.

Patient Feedback – (website, email, We Are Listening leaflets, patient letters).

We have introduced a ‘We are listening – how did we do?’ leaflet to support feedback for the Patient Information Boards providing feedback at individual ward level.

The majority of feedback received through the variety of mechanisms available to NHS Western Isles patients remains positive. Patients continue to send in their thanks and appreciation via cards and small tokens of thanks to the staff.

NHS Western Isles website– www.wihb.scot.nhs.uk has feedback forms on various pages and any completed forms are automatically emailed to the appropriate department or Communications Manager for response. The majority of completed forms are questions about accessing medical records, rather than feedback about services/staff. Where feedback is given, this is shared with staff and managers. There were a small number of forms completed during 2019/20, the majority of these are positive and many are from visitors to the island. Any negative feedback and comments from patients which require departmental responses are acted upon promptly and responses to these are overseen by our Chief Executive prior to being issued.

“Nothing has happened which is the point. I was referred at the beginning of March and after 5 months I have heard absolutely nothing. I called for an update and was told I will not be seen this year!!

Absolutely unbelievable. My condition has not improved and I am expected to wait for a year to be seen and just live with the pain.

No one should have to live with unnecessary pain; I have not found this department fit for purpose in dealing with my issue.

My fear is that this delay is eventually going to have a knock on effect resulting in absence from work and more medical appointments.” – in relation to a mainland service provision

Engagement meetings and outputs from Patient Public Meetings.

Over the past six years NHS Western Isles has supported the PFPI Committee as it has participated in a continuous cycle of reflective practice, reviewing progress against the aims

outlined in its action plan, which was developed and linked to the Scottish Health Councils Participation Standard.

During 2019/20 following a review of the PFPI Committee and Patient Experience Group. It was agreed that a Patients Panel would be established and drawn from existing Patient Peer Support Groups and Managed Clinical Networks, with a strengthened focus on Disability and Human rights. A patient Panel was established for Lewis and Harris and Barra with Uist deciding that their LPG structure was at this time sufficient to meet their patient needs.

This was followed by a full mapping of service user engagement mechanisms, and at the request of the IJB work was established to develop a Community Engagement Toolkit to support staff in engagement exercise with a standard suite of advice and guidance, this work was shared with the OHCPP and was in progress but temporarily suspended due to Covid 19 and staff changes to the IJB.

Co production has been at the heart of a number of developments, specifically work on mental health service redesign, Patient Travel Information, Men's Cancer information on Continence Care.

St Brendans - Through ongoing consultation, the community made their views clear that there was a need for a Health and Social Care Hub this proposal has been developed further and progressed throughout 2019/20 with the support of the Locality Planning Group.

Community Planning Engagements.

As part of NHS Western Isles Governance Structures as a member of the Community Planning Partnership, Health Promotion members actively supported the following:

- The development and publication of the Western Isles Anti Poverty Strategy
- Engagement Event on the Place Standard Tool and how it can be used in Locality Planning
- Public Protection Conference – Improving Lives Improving Life Chances
- Uig Development Plan

Annual Review.

An Annual Review meeting took place on the Isle of Barra on the 28 August, The meeting covered the year 2017/18, and follows on from the first stage of the Annual Review for that year, held in Stornoway in January 2019 which was well attended by representatives of Patient Peer Support Groups for people with Long Term Conditions.

At that time, a commitment was made to hold the Annual Review public session in Barra at a later date attended by Minister for Public Health, Sport and Wellbeing, Joe FitzPatrick. Members of the public were able to ask questions in person or via feedback forms.

Scottish In-Patient Experience Survey.

The Inpatient Experience Survey asks a sample of adults who have had a recent overnight hospital stay about their experiences. The survey covers the inpatient journey from admission to and experience in hospital, to care and support after leaving hospital. There was no survey in 2019; this was to avoid an overlap with the Health and Care Experience Survey which was due to be published April 2020. The Inpatient Experience Survey was due to commence mid 2020 for reporting in 2021.

The results of the Scottish Cancer Patient Experience Survey 2018 were published April 2019; these results are used to inform ongoing provision of cancer care services.

Ongoing themes reported through all forms of feedback and surveys focuses on the elements of good communication, discharge arrangements and knowing who is in charge of the ward. Patient and Carer Information materials have been produced to assist with these concerns and it is anticipated that this will assist in future feedback.

Involving Lay Representatives in Governance Structures.

We aim to create an environment that welcomes involvement and participation in our governance structures. Whilst we have not managed to increase the number of lay representative participation, we have sustained the established systems.

This is achieved in a variety of ways including:

- Five Locality Planning Groups are established and meet regularly with service representatives. This community based engagement is active and flourishing.
- Managed Clinical Networks, include strong lay representation and influences change and involvement in our planning structures
- Support in developing Patient Participation Groups and Public Partnership Forums
- Lay Representation in our Patient Experience Group (to become Patient Panel in 2018).
- Lay Representation in the Boards Patient Focus Public Involvement Committee
- There is additional Lay representation on groups such as Nutritional Care, Cancer Forum and Infection Prevention and Control

In 2019/2020 the NHS Western Isles Board received:

- Complaints Reports which are presented quarterly with a focus and emphasis on lessons learned and sustainable service improvement for Board non-executive Directors.
- Adverse Event reporting, handling; actions and learning.
- Scottish In-Patient Experience Survey results and follow-up action plan.
- All completed SPSO complaints investigations with actions to ensure implementation of recommendation made by the SPSO.
- Scottish GP Health & Care Experience Survey.

Gordon G Jamieson
Chief Executive
NHS Western Isles
October 2020.

