

Complaints and Feedback Annual Report 2022/2023.

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 for 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.

There have been significant ongoing pressures on public bodies and NHS Western Isles realises the importance of responding to complaints at a time when communication with services users is more important than ever. When we have been delayed in our responses with service users we have tried to keep service users updated in terms of why these delays have occurred and when we expect our responses to be completed.

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.

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?

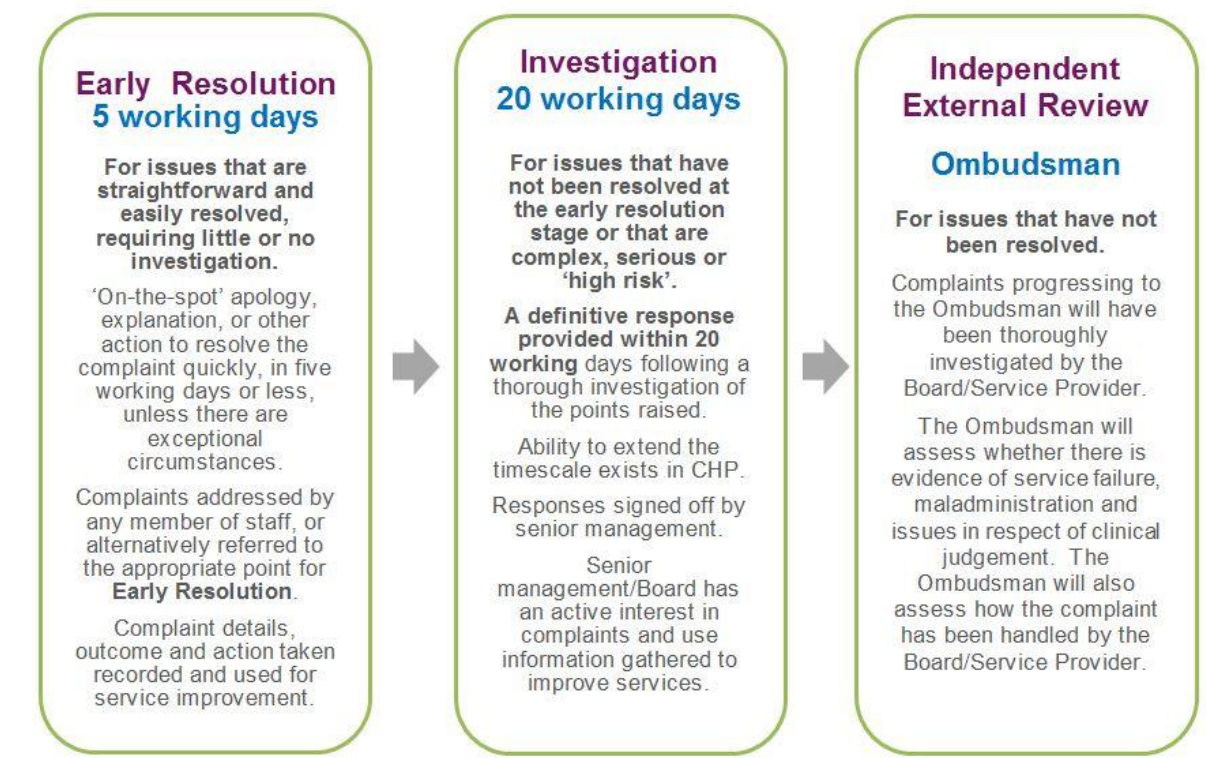
Comments may be comments, compliments, feedback or observations offered orally or in writing for example on ward or hospital suggestion cards, which reflect how someone felt about the service.

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.

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 learn, adapt, and 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 2022 to 31st March 2023** NHS Western Isles had **one** 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.

A service improvement tracker has been developed and introduced to report to relevant Board Governance meetings.

Through the complaints process, the following are examples of service improvements identified:

- Where complaints are received regarding staff attitude, the Chief Executive/ Director of Finance and Procurement on behalf of the Chief Executive will monitor for trends developing in an area or for an individual, ensuring adequate and effective support.
- Staff member given advice and guidance on how best to advise complainers on how they can access the Complaints Handling Procedure.
- Direct contact made with patient by the Director of Dental Services for assessment and treatment options.
- Staff member given advice on the process of patient's requesting access to their medical records.
- Meeting between staff and family members, learning review summary updated and shared with the quality improvement and patient safety meetings held with with Senior Charge Nurses.

- Patient given injection earlier than prescribed date. Matter investigated and completed. No harm to patient. Update to process completed to prevent reoccurrence.
- A case review was commissioned so that learning can be identified and shared. The findings will inform conversations to review pathways and standard operating procedures for managing patients with challenging behaviours, who also may have acute medical or surgical conditions.
- Dementia and delirium training is available for all health and social care staff and a review has been carried out by management to check how many staff have taken up this opportunity and how this training can be made mandatory for all frontline staff.
- The health and safety team have commenced a programme of violence and aggression training, which is mandatory for all frontline staff.
- Patient pathways shared via posters in GP Surgeries, Pharmacies and Emergency Department,
- Out Of Hours Medical Team have updated and reviewed their processes for following up any Out Of Hours blood results of investigations.
- Staff member supported in their development through the NHS Scotland Workforce Capability Policy.
- Manager had discussions with the team that clear written correspondence must be relayed to the individuals GP at the earliest opportunity advising that we are unable to make contact and advising ongoing monitoring of patient within primary care.
- Medical Director regularly meets with the patient and / or their families to resolve patient care issues.
- Dental Services Manager has made contact with NHS Western Isles Emergency Departments and updated them with the out of hours information should urgent advice be required.
- A meeting was organised with NHS 24 where it was asked that NHS 24 call handlers be reminded to give patients a realistic response time, to prevent unrealistic expectations.
- Repeated appointment cancellations highlighted to Hospital Manager and staff member.
- Patient's preference regarding our contact with them highlighted in our Patient Administrative System.
- Improving communication plans with families and having an identified contact person within the family with whom staff communicate. Communication documentation has been reiterated to staff and is being used well.
- Changes made for patients undergoing major orthopaedic surgery in terms of discharge to aid smoother travelling options home.
- OT functional assessment to aid the capacity assessment considered and joint review to take place.
- Patients to be advised that their initial appointment for a GA referral is for assessment only and no treatment will be provided on the day. This will help manage expectations and avoid disappointment.

- Progress the availability of a sedation service within the Public Dental Service to increase treatment options to patients and referring dentists.
- Speech and Language Therapy Department have reminded all staff to ensure adequate information is provided in referrals to ensure timeously and appropriate triage.
- Operating hysteroscopy is now available for use to minimise risk of uterine perforation from future blind intrauterine surgical undertakings.
- The Patient Services Manager has reminded all Medical Secretaries to ensure if there are actions in letters for another specialty, then they are to highlight the action required, in addition to the letter, to prevent a delay occurring.
- Radiographers have been reminded that if they note a large pleural infusion and a patient appears unwell – then the Radiographer should ask for the patient to be reviewed by the Emergency Department prior to the patient leaving the department.
- Remote appropriate IT technology options are being considered.
- In the future we recommend a telephone consultation is sought in the first instance when discussing a case with NHS24. If the local Doctor then decides a face to face appointment is required they will request for the patient to travel to Hospital for further assessment.
- The answer machine message has been updated to allow for better sign posting.

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 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 taken and shared from systems.

In order to achieve the optimal learning, the Chief Executive/ Director of Finance and Procurement on behalf of 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.

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 **2022/2023 thirteen** complaints were referred to the Ombudsman. Of these **five** complaints were not taken forward and closed, **two** were closed after contact made with the complainants as requested and **one** closed after one item of feedback was given to the Board. **four** complaints remain ongoing. **one** complaint was shared with the Board as it related to a GP practice within the Board area with the complaint upheld with two recommendations.

The Ombudsman informed the Board of the outcomes of **two** outstanding complaints received during the period **2020-2021**. The first where **two** complaints were upheld, with **four** recommendations and one item of feedback. All four recommendations and one item of feedback has been accepted and implemented in full. The second, where the complaint was not upheld but one item of feedback was provided was accepted and implemented in full. Details of all NHS Western Isles reports can be found on the SPSO website: <https://www.spsso.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.

The Board ensures accountability for staff identified to complete service improvements and this has achieved enhanced levels of quality, reliability, safety and better patient experience, which has always been our overall 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 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 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 **(2)** agree, **(1)** neither agree or disagree and **(1)** disagree responses received.

Submitting a complaint was easy? There were **(3)** agree and **(1)** neither agree or disagree responses received.

Patient relations staff were helpful, courteous and professional. There were **(2)** agree, **(1)** neither agree or disagree and **(1)** disagree responses received.

Patient relations staff listened and understood my complaint. There were (3) agree, and (1) disagree responses received.

Patient relations staff checked what outcome I wanted. There were (2) agree, (1) neither agree or disagree, and (1) disagree responses received.

Patient relations staff explained the complaint process. There were (2) agree, (1) neither agree or disagree, and (1) disagree responses received.

My complaint was handled in a timely manner and I was kept informed of any delays. There were (2) agree, (1) neither agree or disagree and (1) disagree responses received.

All my complaint points were answered. There were (3) agree and (1) disagree responses received.

The complaint response was easy to read and understandable. There were (4) agree 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 (1) yes and (3) no responses received.

Were your concerns addressed? There were (1) yes and (1) no with (2) not completed responses received.

Indicator 3: Staff Awareness and Training.

Staff training and support regarding people who wish to give feedback or make a complaint.

Staff are able to 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: Complaints and Feedback Course.

Modules take fifteen minutes to complete. Staff can complete them as a group in their own time or during dedicated time. It was anticipated that the focus on this activity would drop with staff during Covid-19. No staff completed this module during 2022/23, although we do not expect staff to undertake this module annually, we will encourage uptake from staff via the Team Brief newsletter.

We had moved our focus on front line staff responding to patient feedback with a programme of Care Opinion training, eleven people registered for this training in 2022/23 with five attending. During Covid-19 responses to Care Opinion were temporarily transferred to the PFPI officer, with the intention that this would revert back to Heads of Service.

Raising staff knowledge of the complaints procedure through various other means such as the Complaints Officer attending Senior Charge Nurse meetings and promoting on line webinar events.

The Central Legal Office provide investigation training to managers.

The Learning Review Group noted that improving communication continues to be a theme within the complaints report and any investigations.

The Director of Finance and Procurement Ms Debbie Bozkurt on behalf of the Chief Executive, Mr Gordon Jamieson is the Senior Reporting Officer and Mr Roddy Mackay Complaints Officer is the board champion.

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:

- Use of Microsoft Teams technology 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;
- Development of Learning and Review Group and Patient Experience Group within Governance Structures using Microsoft Teams technology;
- 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 Director of Finance and Procurement on behalf of the Chief Executive has personal input into every complaint, concern. The Chief Executive has personal input into all serious adverse events, clinical negligence claims; and patient opinion posting and responses. This provides, in a relatively small organisation, the early detection of developing trends, increasing risks, and areas requiring additional support and or learning;
- 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 for the year **2022/2023**:

4a. Number of complaints received by the NHS Western Isles Board	82
4b. Number of complaints received by NHS Western Isles Primary Care Service Contractors	18
4c. Total number of complaints received in the NHS Western Isles Board area	100

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

NHS Board - sub-groups of complaints received

NHS Board managed Primary Care services;	
4d. General Practitioner	1
4e. Dental	
4f. Ophthalmic	
4g. Pharmacy	
Total Board managed Primary Care services.	1
Independent Contractors - Primary Care services;	
4h. General Practitioner	15
4i. Dental	2
4j. Ophthalmic	
4k. Pharmacy	
Total Independent Contractors	17
4l. Combined total of Primary Care Service complaints	18
4m. Total of prisoner complaints received.	N/A

There were **eighty two** complaints that were processed in total under the new Complaints Handling Procedure for the year **2022/2023** by NHS Western Isles Health Board. This compares with **eighty** for the year **2021/2022**.

There were **two** complaint(s) recorded by Castleview Dental Practice, **fifteen** by GP Practices across the Western Isles and **one** complaint recorded by NHS Western Isles Managed GP Practice.

There were **five** complaints that were logged for the year **2022/2023** by NHS Western Isles and then either withdrawn, consent not received or transferred to another unit.

This figure after removal of these five complaints is **seventy seven for 2022/2023** which compares with **seventy seven** complaints between **2021/2022**.

Table 4 shows the locations complained about **2022/2023**, with the most complaints received about Acute/Clinical services, which is similar to the previous year. The comparisons with **2021/2022** are also given.

Table 4

Complaint received by location	2022/2023	2021/2022
Western Isles Hospital	44	46
Uist and Barra Hospital	6	5
St Brendan's Hospital	3	2
Board Wide	10	8
Community Health and Social Care Partnership		5
Dental Service	8	5
Mental Health and Learning Disabilities Service	11	9
Residence/Offices (not to be used for Hospitals/GP/Clinic)		
Totals:	82	80

The main issues raised in complaints. The top three reasons for complaints received for **2022-2023** and for previous years **2021-2022** were:

- **Clinical treatment.**
- **Staff- Communication oral.**
- **Staff- Attitude and Behaviour- (Staff -Communication written 2021-2022)**

Table 5 shows all complaints by Issue category **2022-2023** and **2021-2022**.

Complaints by issue Category	2022/2023	2021/2022
Admissions / transfers / discharge procedure	0	0
Aids / appliances / equipment	0	3
Attitude and behaviour	25	17
Bed shortages	0	0
Catering	0	1
Clinical Treatment	68	94
Communication (oral)	29	25
Communication (written)	13	22
Competence	1	2
Date for appointment	4	7
Date of admission / attendance	1	1
Failure to follow agreed procedures	0	1
Other	4	5
Patient privacy / dignity	3	2
Patient property / expenses	12	4
Patient status	2	0
Personal records	1	2
Policy & commercial decisions of NHS board	1	3
Premises	0	2
Transport	0	1
Shortage/availability	1	0
Total	165	192

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	20%
5b. Stage two- non escalated	61	79%
5c. Stage two escalated	1	1%
5d. Total Complaints closed by NHS Board	77	100%

Contractors report **seventeen** complaints in total with **eleven** stage one complaints, **six** stage two non- escalated complaints. **one** stage 1 complaint recorded by NHS Western Isles Managed GP Practice. Total **eighteen**.

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	8	53%
6b. Number of complaints not upheld at stage one	6	40%
6c. Number of complaints partially upheld at stage one	1	7%
6d. Total stage one complaints outcomes.	15	100%

Contractors report **nine** complaints with **six** upheld and **three** not upheld. **two** stage 1 complaints not upheld recorded by Castlevew Dental Practice and **one** stage 1 complaint not upheld recorded by NHS Western Isles Managed GP Practice. Total **twelve**.

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.	14	23%
6f. Number of non-escalated complaints not upheld at stage two.	31	51%
6g. Number of non-escalated complaints partially upheld at stage two.	16	26%
6h. Total stage two non-escalated complaints outcomes.	61	100%

Contractors report **six** complaints with **three** not upheld and **three** 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** stage two 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	3.86 days 2022/2023 3.15 days 2021/2022.
Stage two	24 days 2022/2023. 29 days 2021/2022.
Stage two after escalation	44 days 2022/2023. 18 days 2021/2022.

GP Contractors, report **four** working days as average time to respond to stage one complaints in **2022/2023** in comparison to **four and a half** working days in 2021/2022 and **sixteen** working days as average time to respond to stage two complaints in **2022/2023** in comparison to **nineteen** working days in 2021/2022. Castlevue Dental Practice report **two** stage 1 complaints both responded to within **five** days each for **2022/2023**. NHS Western Isles managed GP Practice responded to **one** stage 1 complaint within **four** days for **2022/2023**.

Complaints Handling Performance.

The number of stage one complaints responded to within five working days has increased to **(3.86 days)** 2022/2023 from **(3.15 days)** 2021/2022. The number of non escalated stage 2 complaints responded to within twenty working days has decreased to **twenty five** days in 2022/2023 from **twenty nine** days 2021/2022. For escalated stage two complaints, it has increased to **forty four** days 2022/2023 from **eighteen** days 2021/2022. The primary reasons for investigations taking longer to complete were availability of staff, increasingly complex complaints, staff workloads and Covid-19. There were **three** complaints that were over sixty days, **three** complaints that were over seventy days, **one** complaint over ninety days and **one** complaint took **one hundred and twenty nine** days and these were delayed due to their complex nature, delay in obtaining consent, delay in medical staff responses and delays from Investigating Managers. It is expected that this trend will continue into **2023/2024**.

Indicator eight: Complaints closed in full within the timescales.

This indicator measures complaints closed within five working days at stage 1 and twenty working days at stage 2.

Table 11

All Complaints.	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.	13	87%
8b. Number of non-escalated complaints closed at stage two within 20 working days.	26	43%
8c. Number of escalated complaints closed at stage two within 20 working days.	0	0%
8d. Total number of complaints closed within timescales	39	51%

Contractors report **nine** complaints closed at stage 1 within five working days and **five** complaints closed within twenty working days at stage 2. Castlevue Dental Practice report **two** stage 1 complaints closed within five days each. NHS Western Isles managed GP Practice responded to **one** stage 1 complaint within **four** days for **2022/2023**.

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.

Complaints.	Number	As a % of complaints closed at each stage
9a. The number of complaints closed at stage one where extension was authorised.	2	13%
9b. The number of complaints closed at stage two where extension was authorised (including both escalated and non escalated complaints).	33	53%
9c. Total number of extensions authorised.	35	45%

GP Contractors report **no** complaints were closed at stage 1 where extension was required and **one** complaint closed at stage 2 where extension was authorised. This complaint was completed on day **twenty one**, one day late. Castlevue Dental Practice report **no** complaints were closed at stage 1 where extension was required and **no** complaints closed at stage 2 where extension was required. NHS Western Isles managed GP Practice report **no** complaints were closed at stage 1 where extension was required and **no** complaints closed at stage 2 where extension was required.

NHS Western Isles always makes every effort to ensure timescales for the Complaint Handling Procedure are adhered to by Investigating Officers. Due to more complex complaints, more demands on staff time and staff availability, a number of complaints have been delayed. 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 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.

Measures to control the COVID-19 pandemic, including lockdown restrictions, continued to provide a challenge for traditional ways of engaging with people. PFPI cuts across the whole system and includes all staff, regardless of position, staff group or profession and is everybody's business to improve the experience of patient's relatives and carers.

Changed circumstances has meant that staff have been adept at utilising a variety of engagement methods however, well-used engagement methods such as surveys, telephone

interviews and written information are as useful as ever and are required to be tailored to the circumstances.

Although there are fewer face-to-face meetings, many people have reported that they feel that utilising technology has 'levelled the field' in allowing access from across remote and rural areas and for those who have health limiting conditions. At the same time, people and communities are finding their voices and speaking and 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 Groups developed in 2020 to cover all geographic areas of the Western Isles).
- Feedback from people with long term conditions into Managed Clinical and Care Networks.
- Patient representation on service development groups (project specific and time limited).
- All forms of feedback are reported into NHS Western Isles Learning Review Group.
- Via the Integrated Joint Board there is carer and service user representation on the Western Isles Integration Joint Board, Strategic Planning Group and Locality Planning Groups.

Reporting

- Complaints and Concerns Process.
- Datix stage 1.
- Patient experience surveys and questionnaires.
- Patient Quality Improvement Surveys.
- Care Opinion website.
- Social Media Feedback.
- Feedback on WIHB website.

Patient Focus and Public Involvement Activity

- Consultation and Engagement events including service user representation on redesign of services.
- Patient Experience Surveys.
- Volunteer Involvement in redesign of hospital gardens, making clinical scrubs, supporting Covid-19 vaccination clinics and Absent Friends Project.
- Patient/Carer Stories.
- Matters to Me.
- Care Opinion Direct Feedback with Patient Panel.
- Increase in digital media communications to mitigate effects of coronavirus.
- Patients Questions submitted to Annual Review.
- Each ward has the facility to get feedback via Care Opinion on patient iPads that are available on each ward.

Communications

- E-mails via wi.coms@nhs.scot
- Feedback form on our website www.wihb.scot.nhs.uk
- Feedback page to PFPI wi.pfpi@nhs.scot
- Feedback and compliments form on the NHS Western Isles website Feedback - NHS Western Isles | Serving the Outer Hebrides of Scotland.
- Get involved pages of NHS Western Isles website advising of processes for engagement across all platforms.
- Social Media e.g. Facebook, Twitter and Instagram.
- 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.
- Social Media invitations RE What Matters To You.

Helping people feel that their feedback is welcome

We aim to create an environment that welcomes feedback from everyone. We achieve this by empowering our clinical staff to address concerns as soon as we can. We encourage our staff to promote the value of feedback in their wards and departments.

NHS Western Isles publicises “How to complain or give feedback” using its website, accessible leaflets and encouraging staff to welcome this feedback. NHS WI also publicises Care Opinion on hospital information boards, posters and patient information leaflets.

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.
- Admission to Discharge Information Pack available to patients.
- Carers pages on NHS WI website.
- Involving Carers in Discharge Planning.

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. 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.

NHS Western Isles has an Interpreter on Wheels linked to language line that can be taken into any area that it is required. In addition, during Covid-19 Healthcare Improvement Scotland provided Ipads to assist with patients gaining remote visiting access. NHS Western Isles used this additional resource and installed access to language line for each ward, Care Opinion feedback facility and the ability to have site specific surveys for quality improvement.

This was welcomed by Healthcare Improvement Scotland and seen as a good use of the resource.

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.

Feedback: Innovation and good practice

The ability to conduct local one-off surveys continues to be actively supported. A number of changes to practice have been implemented as a direct result of feedback, providing a more person-centred service. The priority is to ensure that we 'close the loop' on each and every survey by means of an action plan to ensure and optimise improvement outcomes. By doing this, we have helped maintain a more direct focussed feedback for departments.

A number of patient satisfaction surveys were undertaken during 2022/23 on behalf of the following:

- Single point of contact Cancer services.
- PICC line patient satisfaction survey.
- Diabetic eye screening patient satisfaction questionnaire.
- Podiatry Service.
- Ambulatory Care Patient satisfaction survey.
- Health Visitor survey for patients.
- Perinatal mental health patient survey.
- Neurological.
- First contact physiotherapy.

Near Me

The delivery of health care to integrated 'health and care' across geographical and organisational boundaries has always been challenging. Service delivery in rural areas, and particularly issues around accessibility present challenges for health and social care services. NHS Western Isles have been developing telehealth and digital solutions as a crucial strategy for providing patients with access to the healthcare they need over a number of years.

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:

NHS Western Isles was an early adopter of Near Me Clinics and this placed us in a good position to deliver Near Me Clinics in response to Covid-19.

A number of clinicians requested Patient Feedback in response to this mode of service delivery and this was well received with patients welcoming alternative ways of accessing services during this time and providing feedback. This provided an evidence base that this was a welcome addition to patient choice post Covid-19.

Care Opinion

Care Opinion is an independent not-for-profit social enterprise contracted by Scottish Government to administer and monitor patient feedback through the www.careopinion.org.uk website. This online system gathers feedback from patients and relatives. NHS Western Isles is experiencing a welcome increase utilising care opinion feedback.

The Patient Focus Public Involvement Officer and the Chief Executive monitor and review all comments and questions, responding when appropriate and sharing with relevant staff for a direct response. All responses are signed off by the Chief Executive.

During the year from 1st April 2022 to 31st March 2023, a total of **nine** 'opinions' were published about NHS Western Isles.

Comments include:

'I sincerely wish to thank the departments and staff involved – pre - op and pre - admission clinics, surgical ward staff, the theatre team, physiotherapists and Occupational Therapy. It was naturally an anxious time but the excellent advice and reassurance helped me along. The clinics, procedure, the aftercare and my very good recovery was seamless, incredibly painless and easy. Thank you again so so much.'

'I recently was an inpatient for major surgery. The care I received from both the theatre and surgical ward staff was caring, compassionate and of the highest standard. The staff did everything they could to care for me post theatre and ensure I was made comfortable.'

'Thanks also to the catering staff for high quality food and the domestic staff who ensured the cleanliness in the ward was of a high standard. The pharmacy also worked hard to ensure my prescription was ready for discharge. I can't fault any aspect of the care I received. Thank you so much.'

'Last week, I experienced exemplary MSK podiatry care after self-referring to the local Podiatry service for advice on persistent foot pain. The Podiatrist really listened to the impact of the pain on my usually active lifestyle, and took time to thoroughly assess potential causes. The upshot: on the same day as my appointment, the Podiatrist and Radiographer had diagnosed the cause of the pain, and I was provided with a Podiatry rehab programme to help me reduce the impact of the pain. This allowed me to take ownership of managing my foot issues and has avoided the need for multiple diagnostic appointments. Thank you for such a high quality, coordinated service.'

'Due to my immobility and pain, the staff there brought out a trolley to our car and carefully got me inside. I was swiftly given pain relief. My care was superb in A&E and it was decided I would need admission to Surgical 2. I was kept in from Monday afternoon to Friday afternoon when I was discharged.'

All the staff involved in my care were excellent. The doctor and consultant found out I had a fractured femur and I was given appropriate pain relief. Everyone was very cheerful and helpful from the cleaning staff to the pharmacy, OT, and physio staff and of course all the nurses, even when things were sometimes a bit trying! I was reassured that they were all wearing masks, and very impressed by how "joined up" all the services were, to make things run smoothly. Everyone made what was a difficult and painful episode for me as comfortable as possible and helped me to help myself.'

Lack of Clinical Cover.

'Over the last few years the services in Audiology have been very frustrating. The biggest problem is that we only have 1 audiologist with no back up for when they are unavailable. There's been a few occasions where I have been left without a hearing aid/hearing aids for weeks due to there not being adequate cover.'

Travel Post Surgery.

'However, it soon became apparent that this was not the case, I would be discharged on the Thursday or Friday. Thankfully, the weather was bad and I didn't get discharged until the Saturday. I was unable at this point to even sit on a chair for any length of time and had to get assistance lifting my leg onto the bed.'

My husband was very unhappy about this arrangement but he was told not to worry I would be fine. My husband collected me from the hospital at 8:00 am on the Saturday morning and the nurses, bless them, tried their best to get me comfortable in the van supporting my leg with pillows and cushions. I did not manage to get out of the hospital car park before I was in tears with the amount of discomfort. We had to stop regularly to try and ease my pain and taking painkillers did not really help. Unfortunately, the lift was not working on ferry either and I could not get out of the van due to sea conditions as water was coming over the car deck.

This was a horrendous journey, nine and a half hours of pain and discomfort to get home. I really don't know why anyone would think this is acceptable after major surgery. I think more thought needs to go into coinciding operations with flights for Barra and South Uist patients.'

NHSWI has delivered a regular local awareness raising campaign to encourage the use of Care Opinion and has registration 'plus' subscription.

- Care Opinion posters have been circulated throughout all healthcare premises.
- Care Opinion is shown on all local patient information leaflets and local posters

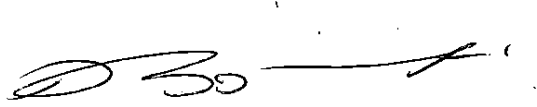
Public Consultation Exercises

There have been a range of public consultation exercises undertaken throughout 2022-23, at which the views and feedback was sought from stakeholders, including:

- Neurological Services.
- Anticipatory Care Planning MacMillan Services.
- St Brendan's Hospital and Care Home.

Annual Review.

The Annual Review meeting for the year 1st April 2022 to 31st March 2023 is due to take place 29th November 2023 from 10am to 12 noon at An Lanntair, Stornoway.

A handwritten signature in black ink, appearing to read 'Debbie Bozkurt', followed by a horizontal line and a small flourish.

Debbie Bozkurt
Director of Finance and Procurement
For and on behalf of
Gordon G Jamieson
Chief Executive
NHS Western Isles

18th October 2023.