

Complaints & Feedback
Annual Report
2020/2021

Introduction

NHS Lothian is committed to welcoming all forms of feedback, including complaints, and using them to improve services, to address complaints in a person-centred way and to respect the rights of everyone involved.

The last 12 months has been incredibly challenging and as we end the year 2020/2021 we are facing the unprecedented situation of the COVID-19 pandemic. Staff are reprioritising care and services in the expectation that there is an additional demand made on the NHS. The Cabinet Secretary for Health has put the NHS on an emergency footing. For these reasons this report will be a shortened version and ensures to meet the requirements as set out in the guidance issued by the Scottish Government and the requirements set out in the Patient Rights (Scotland) Act 2017.

NHS Lothian demonstrate an ongoing commitment to listening and learning from the experience of patients/carers and service users. We have continued to seek feedback using a range of methods. There has been a significant shift in the previous year in the use of Care Opinion, going from strength to strength and proving to be a valuable tool for receiving feedback which can then be used to influence simple changes in practice and procedure. Recognising that there is “no one size fits all” approach NHS Lothian is committed to using a variety of approaches to seek feedback.

The NHS Complaints Handling Procedure (CHP), implemented in April 2017, saw the introduction of a new 3 stage process to support a more consistently person centred approach to complaint handling. This supports our staff to resolve complaints as close as possible to the point of service delivery and to respond thoroughly, impartially and fairly by providing evidence- based decisions based on the facts of the case.

We have continued to face challenges in responding to complaints in a timely manner due to a number of factors; however we have undertaken a comprehensive programme of work to review and improve process to reduce delays and this will be a continued priority for us for the year ahead.

The report is set out over 3 sections

1. Encouraging and Gathering Feedback
2. Handling Complaints Procedure and 9 KPIs
3. Feedback Received by Independent Contractors

In presenting the 2020/2021 Annual Report I would like to extend my grateful thanks to every person who has taken the time to provide us with feedback and to every staff member who has responded to it in what has been an exceptionally challenging year for us all.

Professor Alex McMahon
Executive Director, Nursing, Midwifery and Allied Healthcare Professionals
Executive Lead, REAS and Prison Healthcare

1 Encouraging and Gathering Feedback

- 1.1 NHS Lothian is committed to delivering safe, effective and person-centred care. The use of feedback is central to ensuring delivery of these aims and we offer a variety of approaches which allow people to choose a feedback mechanism that best suits their needs.

The Complaints Handling Procedure asks that we make it easy and accessible for people to give us feedback or make a complaint and we do this in the following ways:

- Conversations between healthcare staff and patients, relatives and carers which provide valuable opportunities for obtaining feedback
- in writing via letters or emails,
- by telephone
- via our Patient Experience Team,
- via the Chief Executive or other Executive Director's offices,
- Care Opinion and the NHS Lothian website,
- The Patient Advice and Support Service (PASS) or other advocacy agencies,
- surveys, consultations and feedback forms.

- 1.2 The Patient Experience Team provides a supportive role to people who contact them with a complaint or feedback. This can include providing advice on the complaint's procedure, how to provide feedback or how to obtain independent advice and support on how to complain to NHS Lothian or to obtain support from advocacy services in their communications with us. As part of that process, the team ensure that the person giving the feedback is clear about the next steps and any associated timescales. As a result of COVID-19 the team as well as other teams are all home-working and following Scottish Government advice.

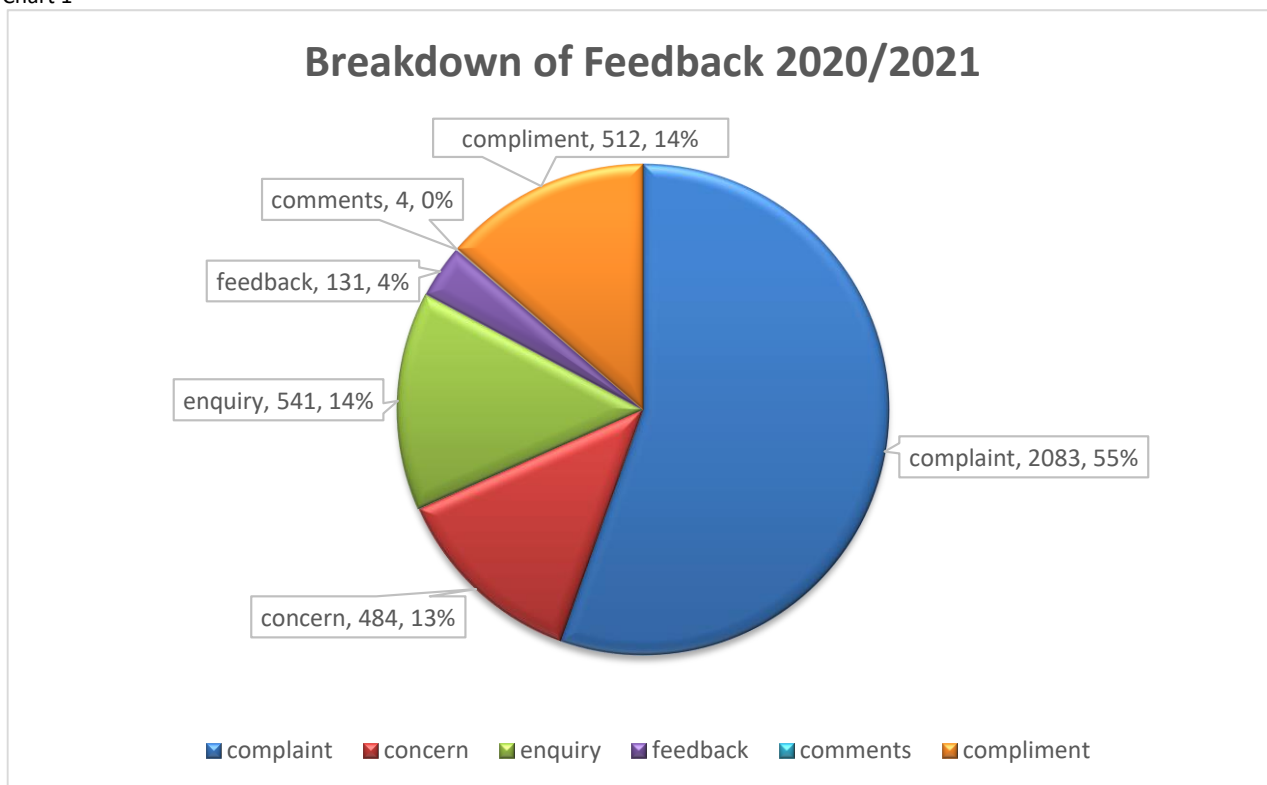
The Patient Experience Team has a coordinating and advising role in respect of complaints management. All correspondence is held centrally in our risk management system Datix and therefore closely aligned with Significant Adverse Event / Duty of Candour. The Patient Experience Team provides NHS Lothian with a central point for the coordination of all Scottish Public Service Ombudsman (SPSO) correspondence received into the organisation and also act as a single point of contact for the SPSO.

- 1.3 Patient Advice and Support Services (PASS) provide a further route and source of support for anyone wishing to provide feedback or make a complaint. While PASS works independently of us, information about their services is widely available throughout our wards, clinic waiting areas, notice boards, website and intranet. We recognise that their service has been impacted by COVID-19 pandemic and home working. Their services are also promoted in our feedback leaflets. Our feedback literature and patient communications make it clear that we welcome and encourage feedback. As well as promoting the opportunity to provide feedback in dedicated leaflets and communications, information is also included in appointment letters and patient information leaflets. We also promote our commitment to learning and improving to reassure people that their feedback can and will make a difference.

- 1.4 NHS Lothian receives a variety of different types of feedback. Chart 1 below demonstrates the different types of feedback that has been received during the period 2020/2021. It can be seen that 3755 pieces of correspondence has been received and this is a reduction from the previous year (n = 5052). Further details on complaint (n= 2083/ 55%) will be detailed in the following section. It should be noted that although compliments reflect 14% (n=512) of the overall feedback, this represents the compliments that are sent directly into via the Chief Executive and other Executive

Directors. The majority of compliments are received directly by the clinical teams. Where correspondence is received directly from MSPs / MPs this is recorded as an enquiry and Scottish Government have asked where possible that these are responded within 5-working days.

Chart 1



It can be seen below in Chart 2 that October 2020 saw the greatest number of feedback received in a month (n=398) with April 2020 seeing the smallest (n= 181). On average NHS Lothian received 313 pieces of feedback each month.

Chart 2

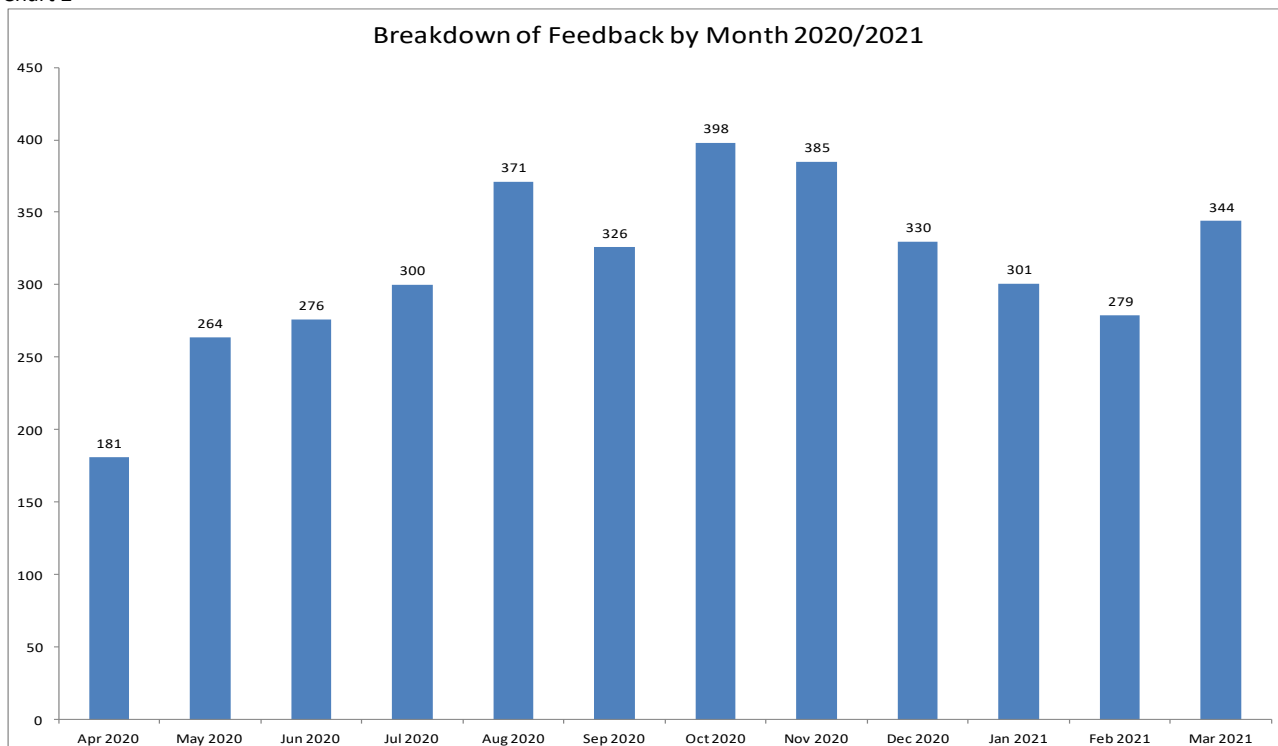


Chart 3 describes the feedback by type in financial years 2017 – 2021. There is a trend that the total number of overall feedback received has decreased each year, with most feedback received in 2017/2018 (n= 5815). A comparison between 2017/2018 and 2020/2021 indicates a 35% decrease in overall feedback received. The number of enquiries received has gradually increased with each year. The highest number of compliments were received in 2019/2020 (n= 891) and the least in 2020/2021 (n= 512).

Chart 3

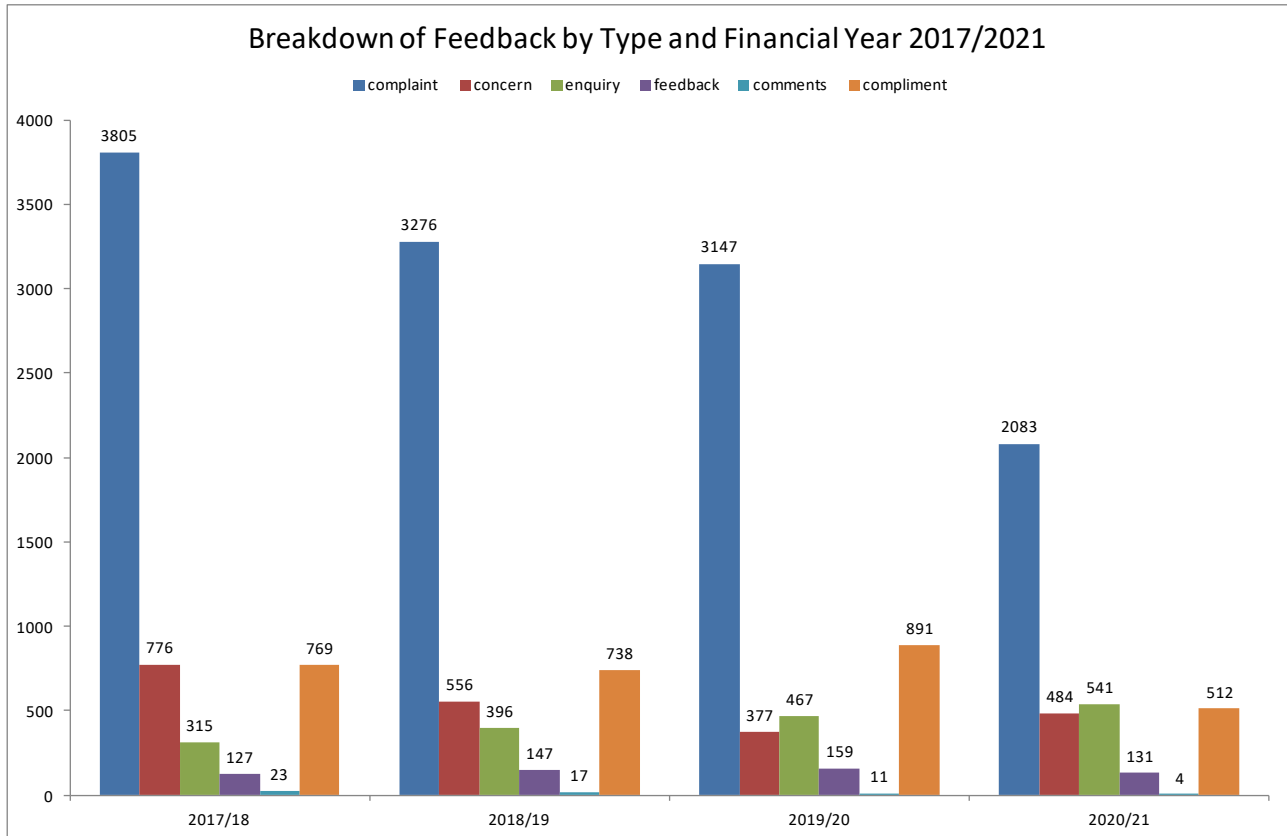
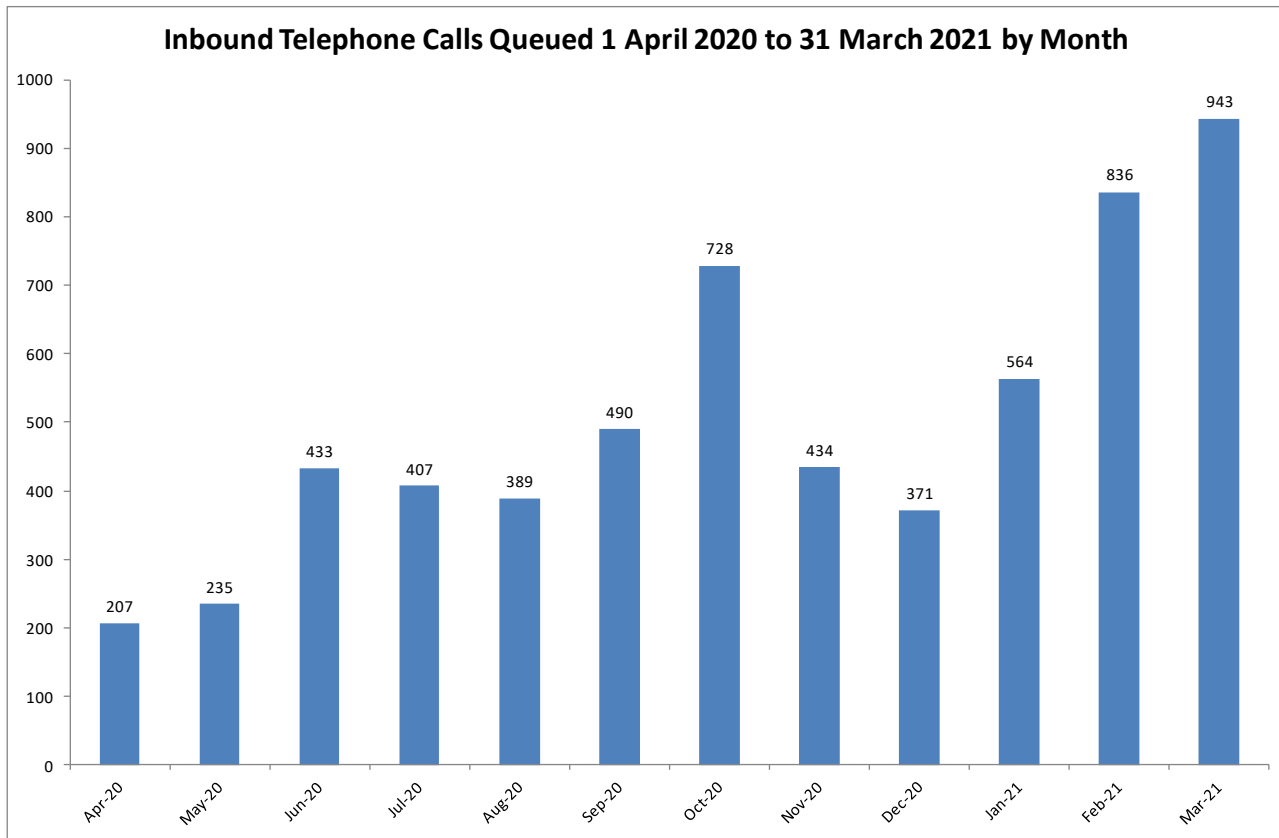


Chart 4 below indicates that the least inbound telephone calls were received April 2020 (n = 207), and most received in March 2021 (n= 943). There was a gradual increase each month, and numbers peaked in October 2020 (n= 728). This number dropped by ~ 50% in the following two months, before continuing to increase from January 2021.

Chart 4



1.5 Care Opinion is an independent organisation which offers an independent, open and transparent way for patients and the public to share their stories and experiences of health services across Scotland. Members of the public can visit the Care Opinion website (www.careopinion.org.uk/) where they can share a story about their experience of the healthcare they, a relative or friend received. These stories are then shared with NHS Lothian and in turn we respond to the feedback and utilise it to support learning and improvements across our services.

Over the last 12 months NHS Lothian continues to see an increase on the previous year in the number of staff being identified to receive alerts to Care Opinion posts specifically relating to their services. To ensure staff are empowered to respond directly to feedback and fully supported by the organisation in doing so, Care Opinion continues to be rolled out in a structured way with appropriate support in place.

Chart 5 below shows the number of stories that have been posted about NHS Lothian on Care Opinion for the period 2020/2021 (n=183) and this is an overall small decrease from the previous year (n=211) and these stories have been viewed 36,976 times. August and March have the highest number of stories posted / month.



Chart 5

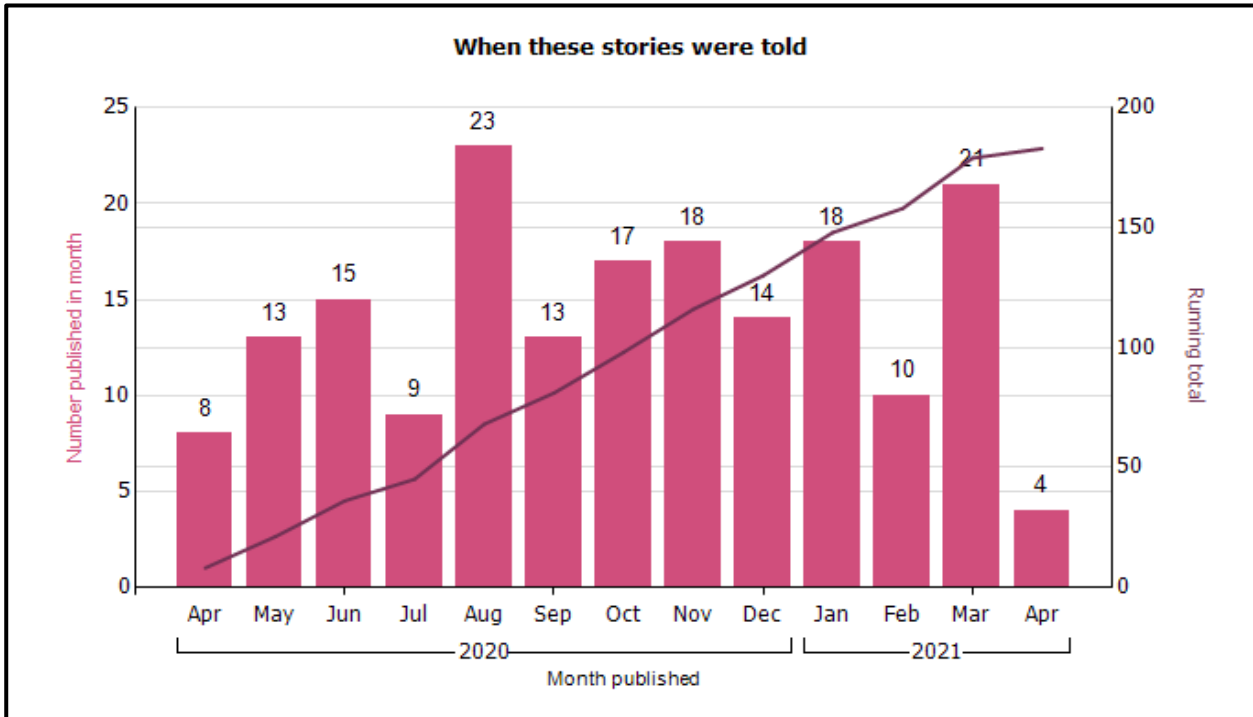
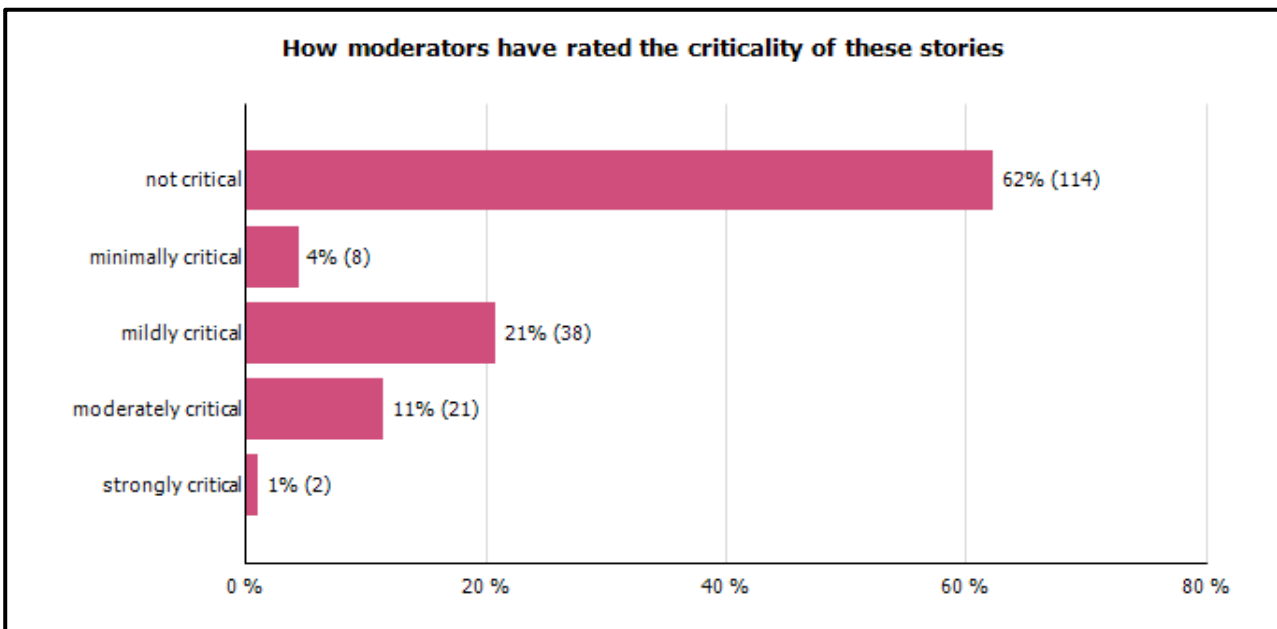


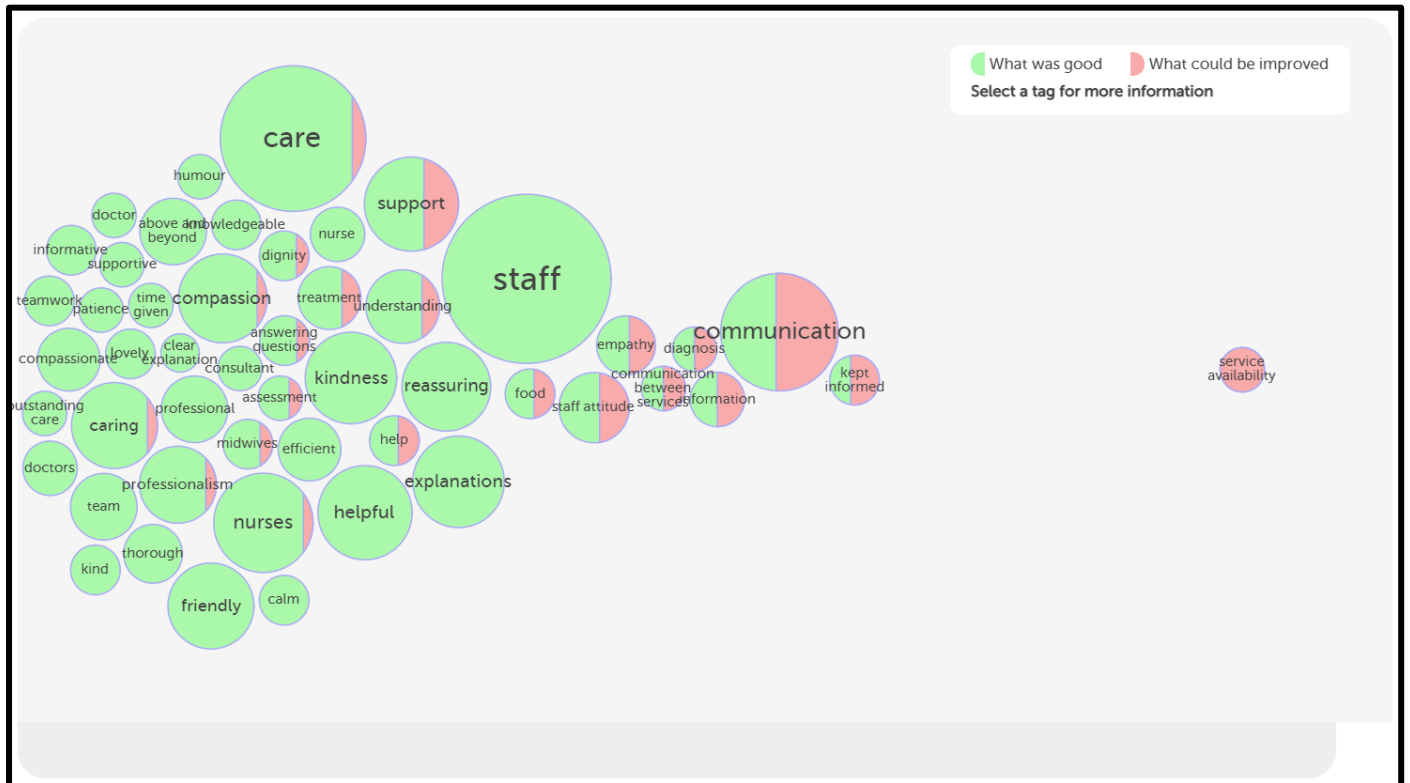
Chart 6 below shows the criticality rating of the posts submitted during the 12 months from 1 April 2020 to 31 March 2021. It should be noted that criticality scores are assigned by moderators (not the public) to stories and are assigned per story not per service.

Chart 6



Care Opinion offers the opportunity to present the feedback provided in different formats, the diagram below offers a different view of the feedback received during 2020-2021 in visual tags with green tags indicating 'what was good' and the red tags indicating 'what could be improved'. It is encouraging to see that the feedback was overwhelmingly positive.

Chart 7



Finally, included below are some extracts of stories posted on Care Opinion during 2020/2021;

“GP sent me straight to ARU, Western General Hospital...

The care, attention and checks I got were outstanding. I was in, cannula in and bloods done immediately. I was spoken to, listened to and just really well taken care of. The unit was busy, no denying that. It was constant and I was never at any point ignored nor left wondering. I am grateful to reception, the cleaner who did not stop the entire time I was there and the nurses. What a team, am so grateful we have a service like this available to us. Thank you”

“As we arrived in the hospital the staff were fantastic, made me feel at ease and went out there to make sure I was ok as my wee boy was going under an anaesthetic. Can’t thank them enough for all their help especially when my son was in recovery. Thank you so much again.”

“I would like to say a massive thank you to the nurses in NHS Lothian's Pregnancy Support Centre during my recent miscarriage. The nurses were amazing. So supportive and caring whilst myself and my husband were going through this emotional time. They spent a lot of time talking us through the process and answering our questions, whilst also providing us with shoulder to cry on. They really are a credit to NHS Lothian, and I can't thank them enough.”

Section 2: Encouraging and Handling Complaints

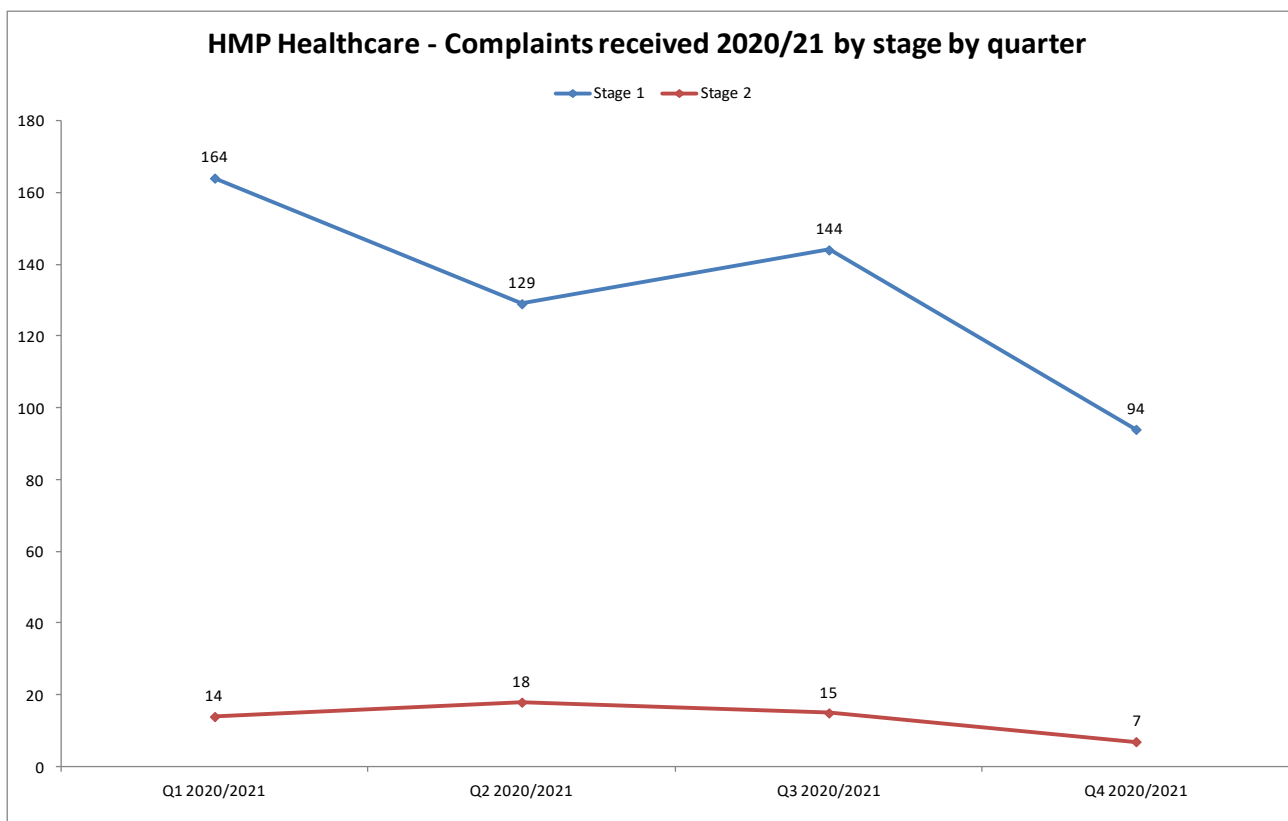
2.1.1 The Complaints Handling Procedure (CHP) requires all NHS Boards to report on a set of key performance indicators (KPIs). The following document details the performance and activity that NHS Lothian has taken against these 9 KPIs.

NHS Lothian’s definition of a complaint is:

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

- A Stage 1 complaint – Early resolution - issues that are straight forward and easily resolved that require little or no investigation – 5 working days.
- A stage 2 complaint – Investigation – issues that have not been resolved at the early resolution stage, or that are complex, serious or high risk – 20 working days.

2.1.2 NHS Lothian is responsible for prisoner healthcare in both HMP Addiewell and HMP Edinburgh. These are large prisons with HMP Edinburgh having both male and female prisoners. As already highlighted NHS Lothian has received 3146 complaints during this period, of which there were 1477 complaints received from prisoners during this time. Complaints and Feedback Forms are available to prisoners in the halls and the healthcare staff.



2.1.3 Like all services, the last year has challenging for prisoner health care due to the COVID-19 pandemic. In the early stages there were a number of prisoners who were (appropriately) released early and the overall number of prisoners were reduced in both prisons. There has also been a number of outbreaks in the prisons and this has affected staff and prisoners.

Indicator 1: Learning from complaints

2.2.1 For the purpose of this report the themes from stage 1 complaints have been separated from stage 2 complaints. Table 1 below identifies the themes from stage 1 complaints and stage 2 themes are shown in Table 2.

2.2.2 ‘Treatment’ continues to be the main cause that people are making complaints with the second highest cause being staff treatment. NHS Lothian is actively working to improve performance against the waiting times targets and acknowledge the length of time some patients have to wait.

There are some services that are causing more challenge eg Urology and Orthopaedics and this have been even more challenging as a result of COVID and social distancing measures.

- A complaint was made to the mental health service regarding and the attitude and behaviours of domestic staff and the cleanliness of a ward as well as the ward staff. Staff have been reminded to ensure that patients are informed about the availability of floor nurses. Nursing Assistants have been given training and advice on the importance of giving timely assistance.
- A number of complaints have been received where staff have been asked to reflect on their behaviours as a result of patient feedback. These discussions take place in a variety of settings including appraisal, team meetings, one to one meetings with managers.
- A complaint was made to the Orthopaedic Team at the RHCYP regarding waiting times. An apology was given for extended waiting times due to pandemic which had not been communicated to the patient and their family and staff reminded to be mindful of their communication during difficult circumstances.
- A complaint was made by a family member who was unable to visit her elderly father in hospital as a result of the revised visiting guidance. Staff were reminded at the daily safety brief of the importance of effective communication with patients and families.
- The Patient Experience Team have introduced a new explanatory letter process. These letters that are sent to the complainant to keep in touch, informing them of the complaint progress, the reasons for any delays and an expectation as to when they will next here from NHS Lothian.

Table 1

Stage 1 Complaints by Issue Type	Staff	Waiting times for	Delays in/at	Environment / domestic	Procedural issues	Treatment	Transport	Other	Total
20/21 Q1	18	23	9	5	1	137	1	1	195
20/21 Q2	29	20	0	4	1	113	0	2	169
20/21 Q3	28	24	5	4	1	133	1	3	199
20/21 Q4	16	6	0	3	1	92	0	0	118
Total	91	73	14	16	4	475	2	6	681

2.2.3 For each complaint that is received there is the opportunity to record up to three “issues”. An example would be that the complaint describes issues of staff attitude, clinical treatment and difficulties with car-parking. For this reason, there are more issues recorded than the numbers of complaints.

2.2.4 For those complaints that have been identified as stage 2, treatment and staff treatment are the highest causes for complaint. As already highlighted the clinical teams are working hard to improve the waiting times for services. Table 3 highlights the themes from those escalated stage 2 complaints.

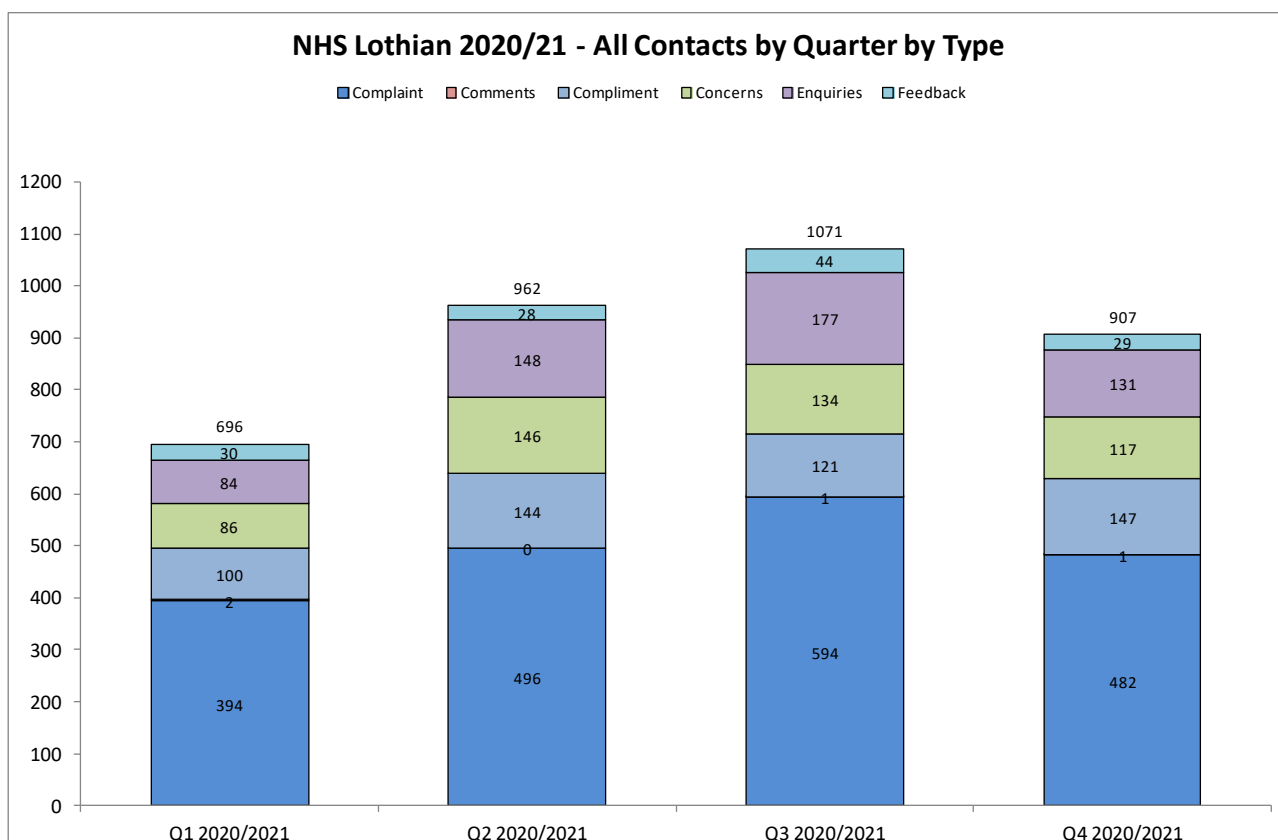
Table 2

Stage 2 Complaints by Issue Type Investigation	Staff	Waiting times for	Delays in/at	Environment / domestic	Procedural issues	Treatment	Transport	Other	Total
20/21 Q1	148	22	1	18	8	159	0	2	358
20/21 Q2	193	56	10	18	4	246	1	0	528
20/21 Q3	225	43	7	41	11	288	3	3	621
20/21 Q4	303	48	3	42	7	251	0	2	656
Total	869	169	21	119	30	944	4	7	2163

Table 3

Stage 2 Complaints by Issue Type Escalated	Staff	Waiting times for	Delays in/at	Environment / domestic	Procedural issues	Treatment	Other	Total
20/21 Q1	0	0	0	0	1	2	0	3
20/21 Q2	10	1	1	2	1	5	1	21
20/21 Q3	7	2	0	3	0	11	0	23
20/21 Q4	5	0	0	0	1	3	0	9
Total	22	3	1	5	3	21	1	56

Chart 8



2.2.5 During the period 2020/2021, NHS Lothian received 512 compliments, which have been received directly via the Chief Executive’s office, an Executive Director or the Patient Experience Team and this equates to 14% of all feedback recorded in DATIX. The Patient Experience Team continues to encourage clinical teams to record compliments locally on DATIX. As an organisation, we are very aware that the clinical staff receive thank you cards and compliments directly to the wards and teams and the numbers below only reflect a tiny proportion of this positive feedback.

2.2.6 All Scottish Public Services Ombudsman Reports (Decision and Investigation Reports) are shared across the organisation. Summaries are provided from these reports on a monthly basis to ensure wider learning can take place. Unfortunately for those NHS Boards who receive Investigation Reports these are also shared across NHS Lothian. Learning from feedback continues to be an agenda item on the Nurse Director’s Group.

Other examples of improvements/ changes include:

- A complaint was made regarding the misdiagnosis of acute angle closure glaucoma and as a result of this feedback the team will use this opportunity to create a simulation scenario for future learning and ensure that we educate the wider team, and not just those involved in the case, regarding the pitfalls in making common diagnosis, and not considering less common alternative diagnoses which can cause a disabling condition.
- A complaint was made regarding attendance at the Day Surgery Unit for surgical removal of an unviable pregnancy. Patient had to wait for a lengthy period in pain without a member of staff checking on her. As a result of this feedback an allocated member of staff will now check the waiting area hourly to ensure all patients are comfortable and to answer any queries. During this time if a patient is in pain, medication can be sought, and consideration given to the patient’s location if not currently appropriate.

- A complaint was made by a patient regarding their experience with a radiographer when she attended for a mammogram. As a result of this feedback, the service advised the complaint would be raised with the Radiographer and that she would be asked to reflect on her attitude and behaviour. They also advised an action plan would be devised to help the Radiographer exhibit the NHS Lothian values with every client. This would form the basis of an improvement plan for the Radiographer, which will be reviewed after two months and then again after six months.
- A complaint was raised regarding continence products. As a result, an improvement plan was created to improve the time taken to respond to patient voice messages, time taken for patient to receive a letter confirming the service has received the referral and also improve the length of time taken to post out an appointment to the patient.
- A complaint was made regarding the advice provided to the patient by maternity triage, and the quality of documentation of adverse events. As a result of this feedback the senior staff have carried out a review of the triage and escalation processes, as well as working to improve the reporting of adverse events.
- A complaint was made regarding a patient's concern that many phone calls to the fertility clinic were not answered and voice messages not returned. As a result of this feedback, reception cover has increased to ensure phone calls are answered in a timely manner. A new process has been implemented to check the voicemail of individual staff members who are unavailable or on annual leave to ensure that we respond to patient needs.

Indicator 2: Complainant Process Experience

2.3.1 Since the introduction of the CHP in April 2017 complainants have been given the opportunity to provide feedback on the process itself. The questionnaire is anonymous and is not linked to the complaint file in any way. A standalone database has been developed to analyse the responses. Complainants are sent a covering letter, a copy of the questionnaire and stamped addressed envelope to return the questionnaires to Waverley Gate. A questionnaire has been developed based on the following key statements:

1. Finding information on how to submit a complaint was easy
2. Making my complaint was easy
3. It was easy to find out information about the NHS complaints procedure
4. The staff dealing with my complaint were professional, polite and courteous
5. The staff dealing with my complaint listened and understood my concerns
6. I was given an apology by the staff involved in dealing with my complaint
7. My complaint was handled in a timely manner and I was informed of any delays
8. All of my complaint points were answered and my response was easy to read and understand

Complainants have been given a multiple choice answer:

Agree	Neither agree or disagree	Disagree	Don't know	Not applicable
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In addition to the 8 questions the questionnaire also asks:

- If you disagree with any of these questions we would like to hear more details. Or if you have any other comments, please do share these with us here:

2.3.2 During this year the response has been very poor which is in line with the experiences of other health board colleagues. Further consideration is needed as to alternative routes of feedback to demonstrate feedback on this indicator.

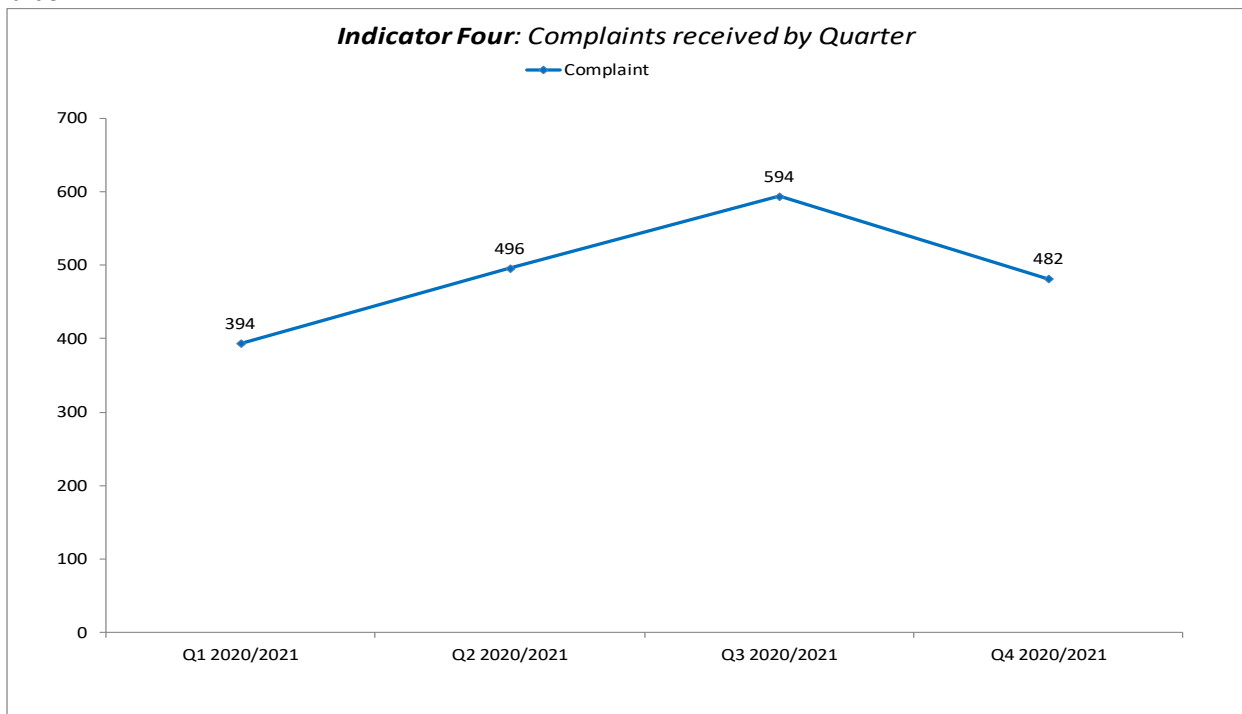
Indicator Three: Staff Awareness and Training

- 2.4.1 As we have moved into the new structure of Patient Experience Team, the Team Leader roles will provide an additional resource to support education and learning support across the organisation. This will be in addition the roles of the Team Manager and the Head of Patient Experience.
- 2.4.2 Bespoke training continues to be provided on an ad hoc basis and the Patient Experience Team. This has been even more challenging this year as a result of COVID-19. Initially all training was cancelled, this included the SPSO sessions that were planned. There has been a small number of staff sessions which have been done via MS TEAMS.

Indicator Four: The total number of complaints received

- 2.5.1 Chart 9 below identifies the number of complaints received each quarter, which shows most were received in quarter 3.

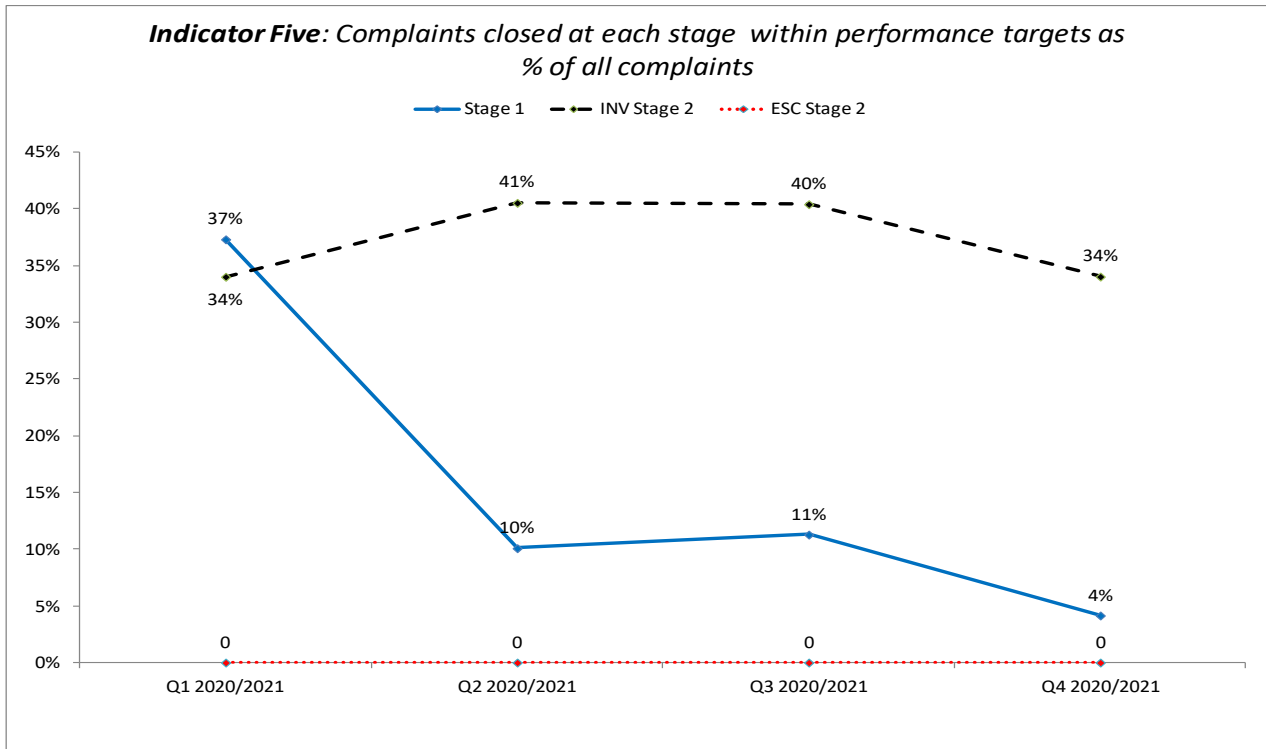
Chart 9



Indicator Five: Complaints closed at each stage

- 2.6.1 Chart 10 below, identifies the number of complaints closed at each stage, as a percentage against the target timescales of all complaints. The blue line shows those stage 1 complaints were closed as a percentage of all complaints. The black dotted line shows those stage 2 complaints that were closed as a percentage of all complaints. Significant progress needs to be made in the year ahead to improve performance on this indicator. This poor performance reflects how challenged the staff have been being able to respond to these in a timely manner and their competing priorities.

Chart 10



Indicator Six: Complaints upheld, partially upheld and not upheld – Stage 1

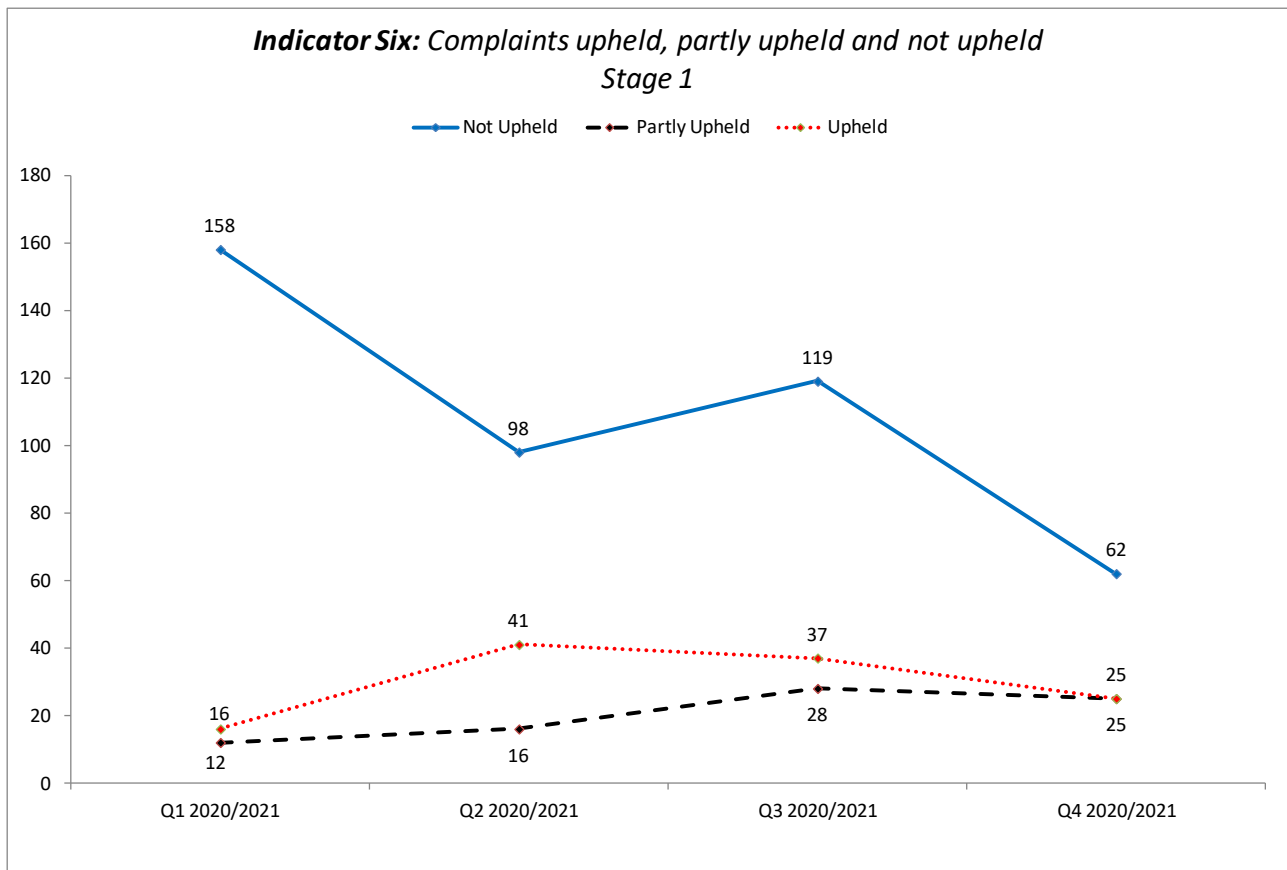
Table 4 shows stage 1 complaints by outcome and by month. Overall, 68% were not upheld, 12% partly upheld and 18% upheld. Most complaints were received in May 2020 and December 2020. In April 2020, no complaints were upheld, with 94% not upheld and 6% partly upheld. In September 2020, 40% of complaints were upheld which is more than any other month. Every month, except for September 2020 and March 2021, more than 50% of complaints were not upheld.

Table 4

Stage 1 Complaints by Quarter by Outcome	Upheld		Partly Upheld		Not Upheld		Total
20/21 Q1	16	9%	12	6%	158	85%	186
20/21 Q2	41	26%	16	10%	98	63%	155
20/21 Q3	37	20%	28	15%	119	65%	184
20/21 Q4	25	22%	25	22%	62	55%	112
Total	119	19%	81	13%	437	69%	637

2.7.1 As already mentioned the definition of a Stage 1 complaint – Early resolution – are for issues that are straight forward and easily resolved that require little or no investigation – 5 working days. Chart 11 below, identifies that outcome of stage 1 complaints. In Q3 225/743 (30.28%) of stage 1 complaints were not upheld. The complaints that were upheld were at their highest in Q1 312/907 (34.40%).

Chart 11



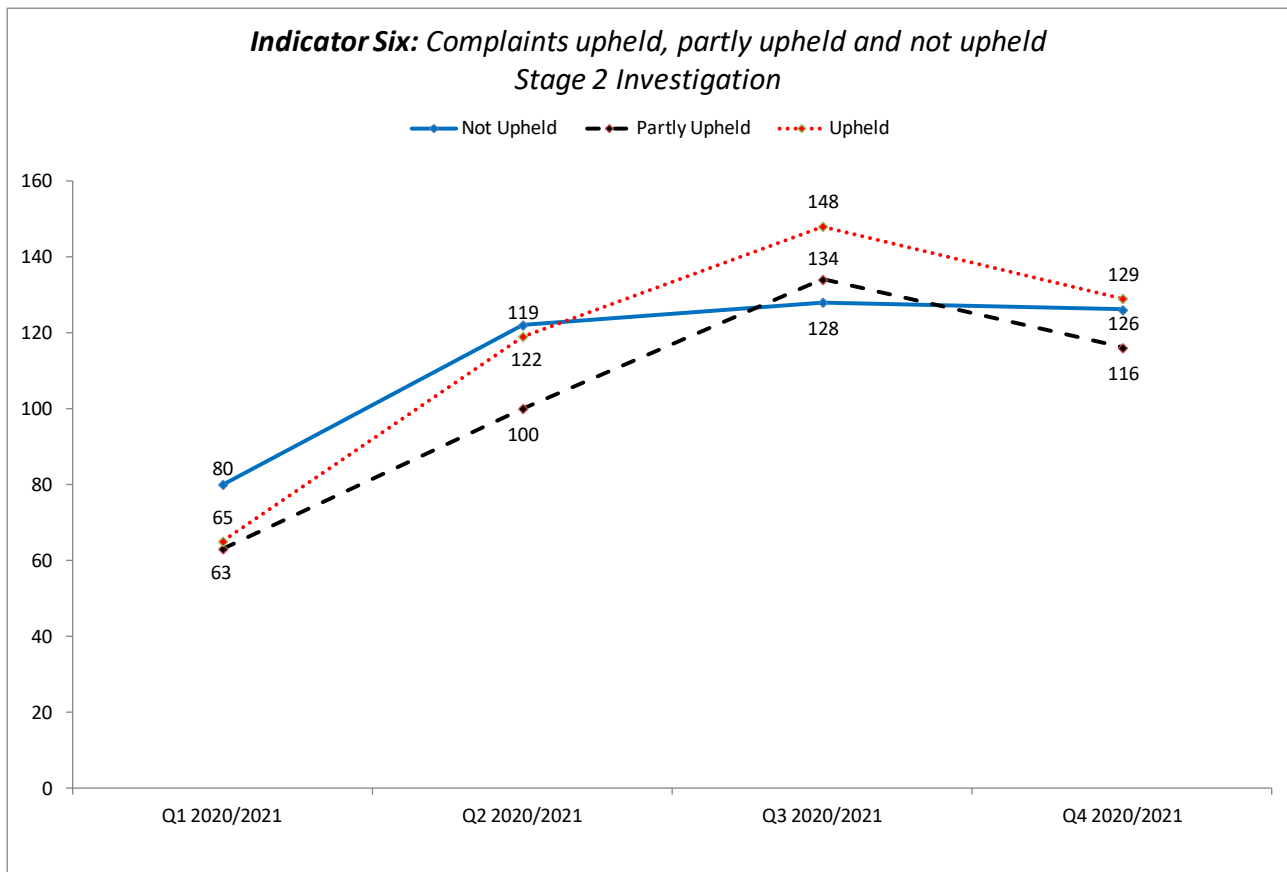
*Calculations (%) are based on complaint outcome by quarter/total complaints by stage by quarter

Indicator Six: Complaints upheld, partially upheld and not upheld – Stage 2

2.8.1 The definition of a stage 2 complaint – Investigation – are for issues that have not been resolved at the early resolution stage, or are complex, serious or high risk and should be responded to within 20 working days. In a number of cases it can be very obvious that the complaint will take longer than 20 working days, in these circumstances, the complainant must be informed in advance that this is the case and should be kept up to date during the investigation process. It should be noted that annual leave or part time working are not considered exceptional circumstances.

Chart 12 below, identifies the outcome of stage 2 complaints. In Q3 148 of stage 2 complaints were upheld which is more than double in Q1. Often complaints can have elements that are both upheld and not upheld, in these circumstances, the outcome is described as “partially upheld”.

Chart 12



THERE ARE NO STAGE 2 ESCALATION RECORDS.

Table 5 summarises stage 2 complaints by outcome. Overall, 35% were not upheld, 31% partly upheld and 34% upheld. A total of 111 complaints did not complete the complaint process due to reasons including consent not received, unreasonable complaint or withdrawn.

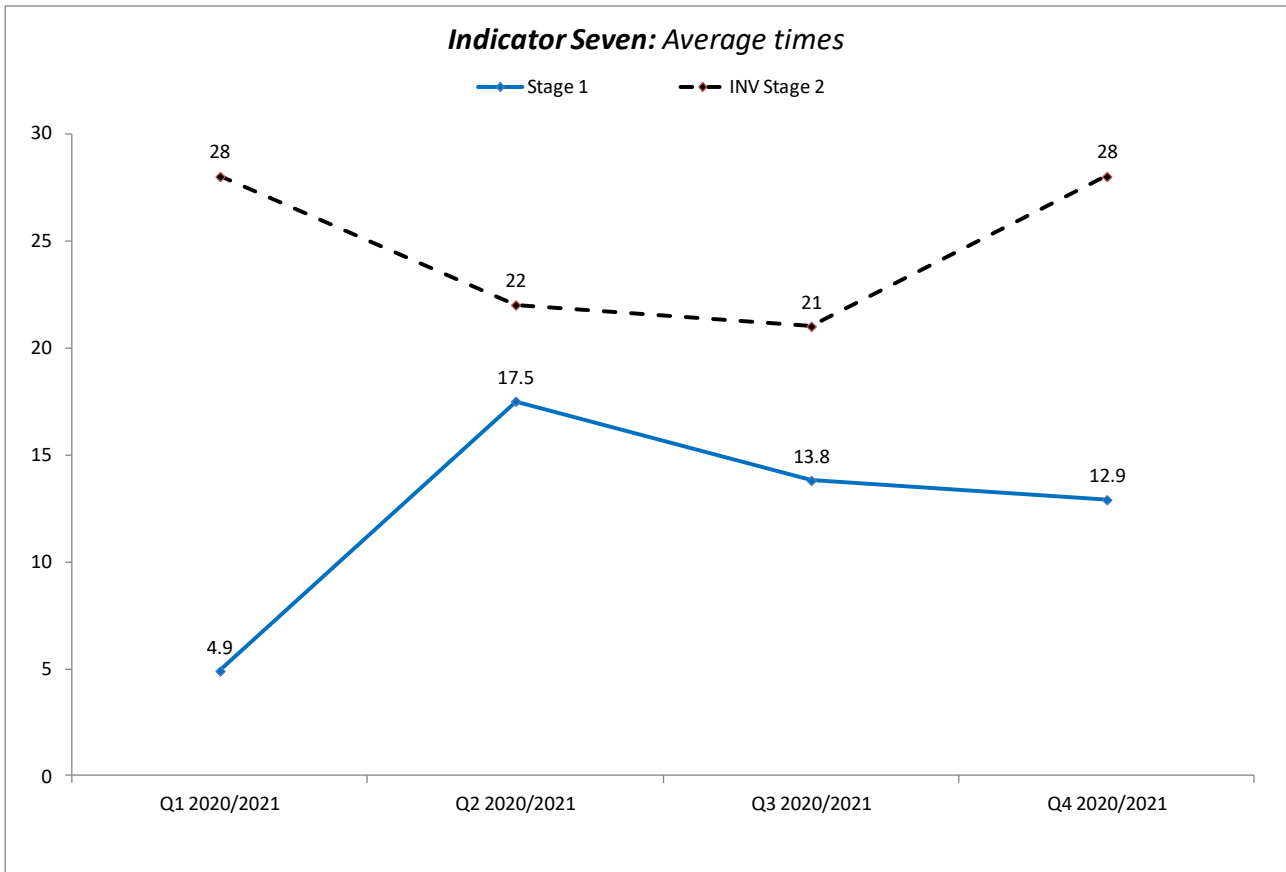
Table 5

Stage 2 Complaints by Quarter by Outcome	Upheld		Partly Upheld		Not Upheld		Total
	Count	Percentage	Count	Percentage	Count	Percentage	
20/21 Q1	65	31%	62	30%	80	39%	207
20/21 Q2	119	35%	100	29%	122	36%	341
20/21 Q3	148	36%	133	33%	128	31%	409
20/21 Q4	129	35%	116	31%	125	34%	370
Total	461	35%	411	31%	455	34%	1327

Indicator Seven: Average times

Chart 13 below identifies the average number of working days to respond to stage 1, stage 2 and stage 2 escalated complaints. The average wait time for stage 1 complaints increased with each quarter, rising from 4.5 days (Q1) to 12.8 days (Q4). The average length of time for stage 2 complaints to be investigated and responded to remained similar across all quarters, with the longest average wait time seen in Q2, at 31 days.

Chart 13



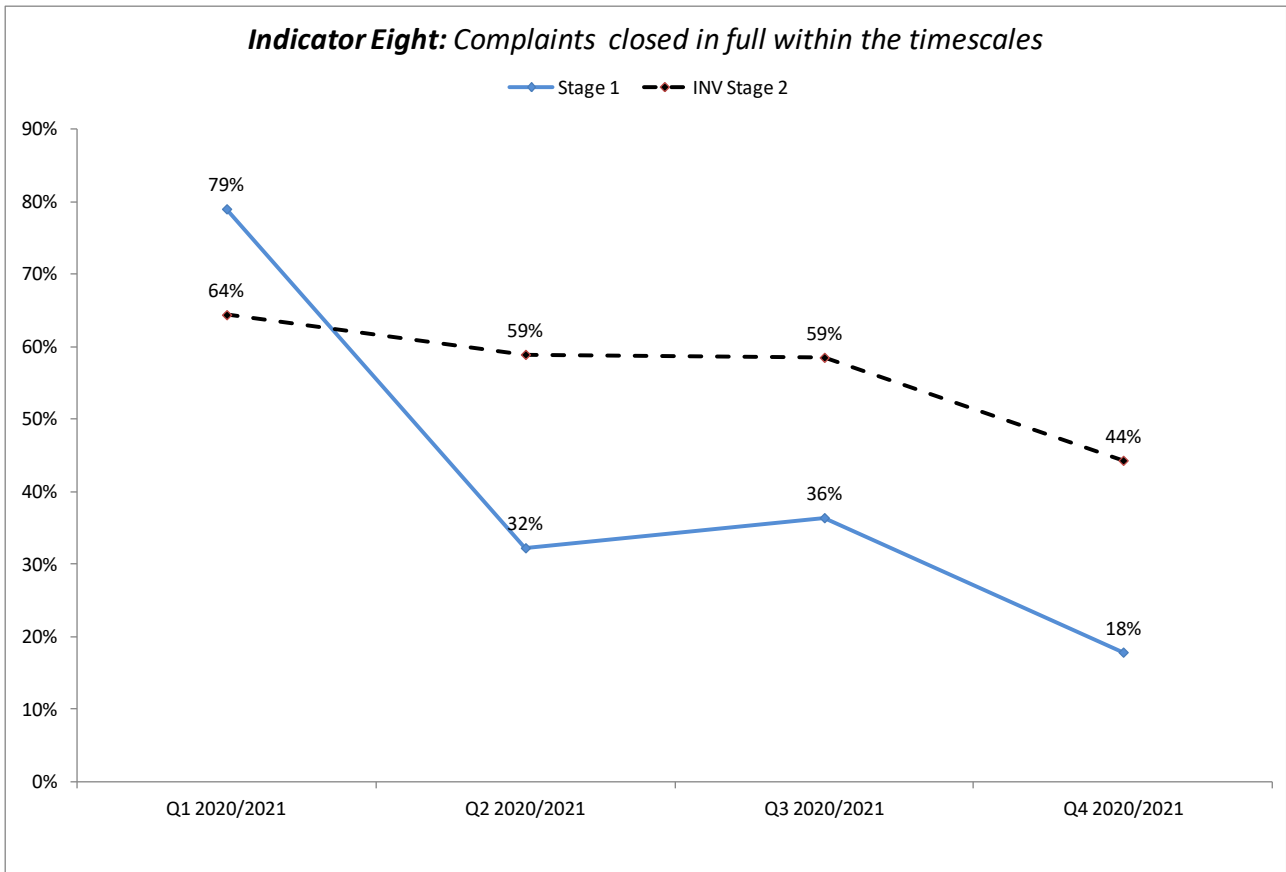
Indicator Eight: Complaints closed in full within the timescales

Chart 14 below identifies the percentage of complaints that have been closed in full for stage 1 complaints (5 working days), stage 2 complaints (20-working days). There were no stage 2 escalated (20-working days)

Regarding stage 1 complaints, overall, there has been a decline in closing complaints within 5 working days. In Q1, 79% of stage 1 complaints were responded to within 5 working days compared with 18% in Q4.

Regarding stage 2 complaints, a slight decline can be seen across the time period. In Q1, 64% of stage 2 complaints were able to be resolved within 20 working days, which was the same as the previous year. In Q4, the performance was 44% compliant with the timescale.

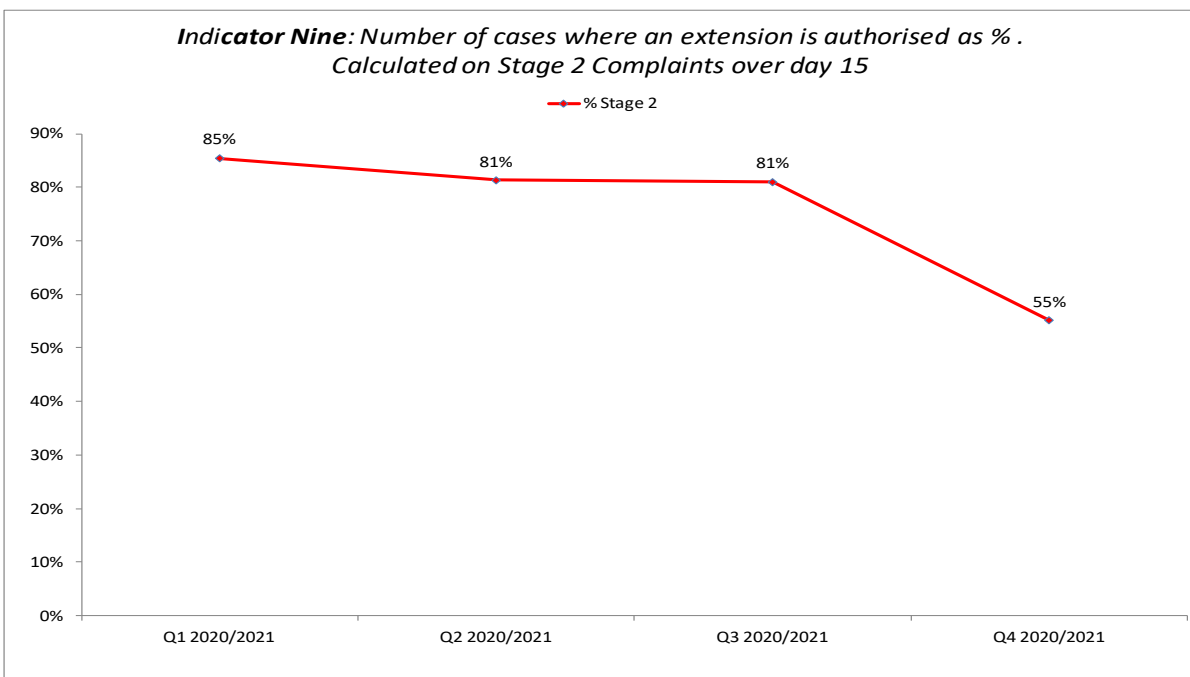
Chart 14



Indicator 9: Number of cases where an extension has been authorised

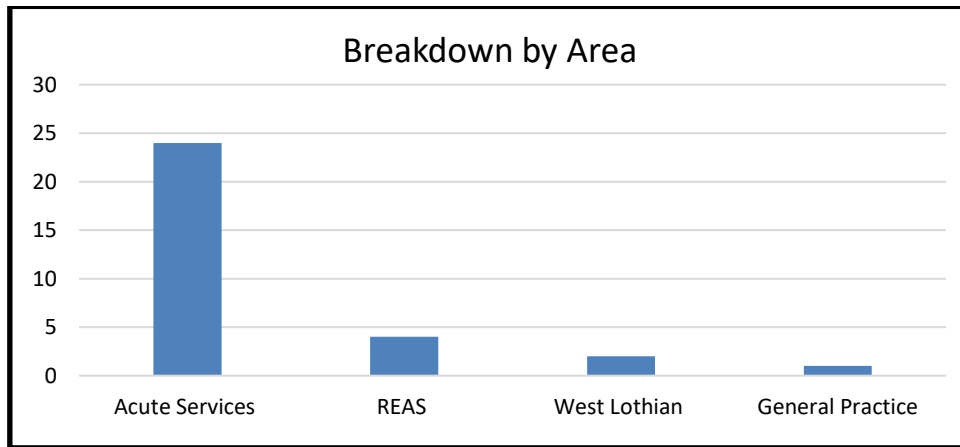
Following discussions at the National Complaints Personnel Association, it has become apparent that this indicator is calculated differently by health boards. As a result of these discussions agreement is still required to agree a consistent way of reporting and to ensure accuracy of data across the different health boards. This remains a challenging indicator and work continues to improve our performance. Current data can be found in chart 15 below.

Chart 15



SPSO Cases

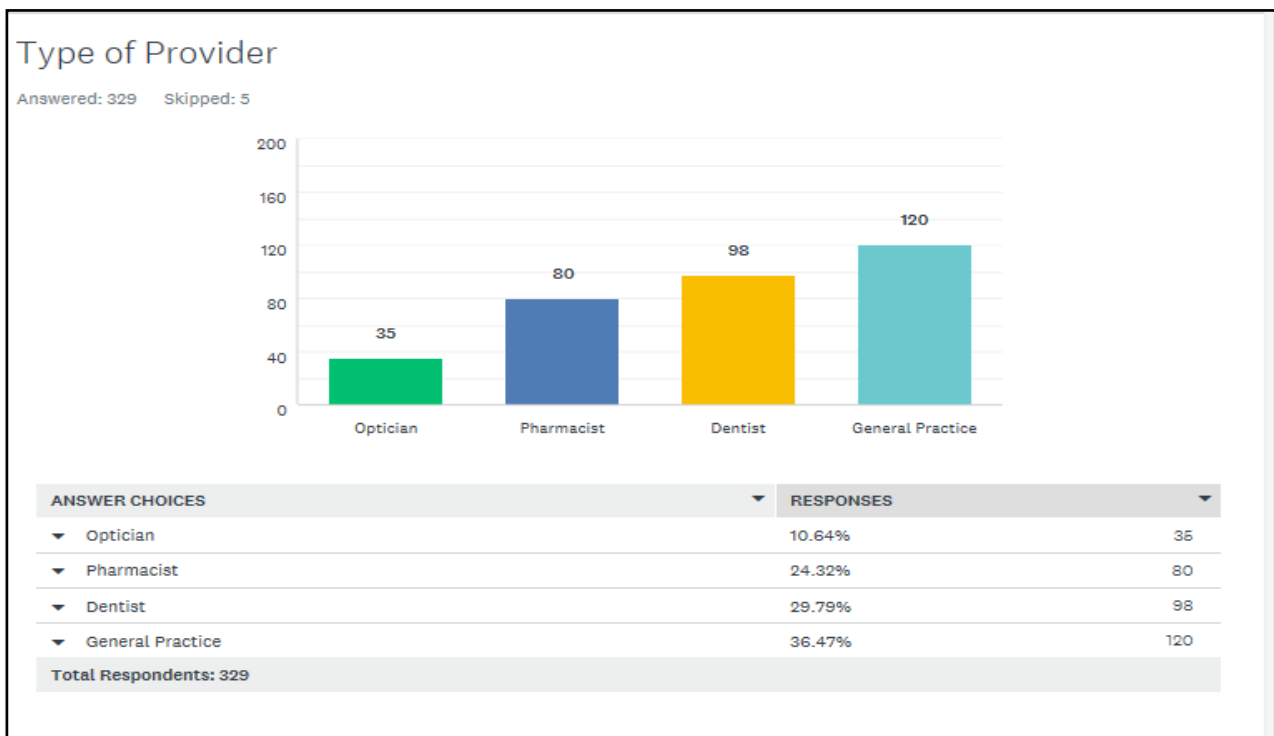
In the period 2020/2021, the SPSO has published 35 Decisions Letters relating to NHS Lothian. The table below indicates where these reports sit:



Whilst the GP reports are listed above, the responsibility for these sit with the Practice themselves. The SPSO shares these reports with the NHS Board.

In addition to these letters, the SPSO have published 3 Investigation Reports relating to other health boards. These reports are shared across the organisation so that teams can learn from the experiences of others.

Section 3: Feedback Received by Independent Contractors



Types of Complaints

Answered: 302 Skipped: 32

ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES	
1 Number of Stage 1 Complaints received	Responses	3	854	299
2 Number of Stage 1 Complaints closed	Responses	3	838	279
3 Number of Stage 1 Complaints closed within 5 days	Responses	3	793	271
4 Number of Stage 2 Complaints received	Responses	2	539	281
5 Number of Stage 2 Complaints closed	Responses	2	507	268
6 Number of Stage 2 Complaints closed within 20 days	Responses	2	473	268
7 Number of Complaints Upheld at Stage 1	Responses	2	421	259
8 Number of Complaints Partially Upheld at Stage 1	Responses	0	89	258
9 Number of Complaints Not Upheld at Stage 1	Responses	1	244	259
10 Number of Complaints at Stage 1 with and extension	Responses	0	14	256
11 Number of Complaints Upheld at Stage 2	Responses	1	307	262
12 Number of Complaints Partially Upheld at Stage 2	Responses	0	65	255
13 Number of Complaints Not Upheld at Stage 2	Responses	1	135	259
14 Number of Stage 1 Complaints Escalated to Stage 2	Responses	0	47	259
15 Average time (in working days) for full response to complaints at Stage 1	Responses	2	417	267
16 Average time (in working days) for full response to complaints at Stage 2	Responses	5	1,226	260
Total Respondents: 302				

Conclusion

Reflecting on the year, has been one like no other as we have been faced with the COVID-19 pandemic. This has been the most challenging for all. There is no doubt that this has impacted significantly on performance and on the patients and families that have given us feedback. There is significant work ahead for us as we seek to improve the way we handle complaints and feedback and this will be a priority of work as move beyond the COVID-19 restrictions.

I would like to say thank you to all the patients and the people who have given us feedback and we hope that this report highlights just some of the range of activities and improvements we have taken to improve our services.

Finally, I would also like to say thank you to our staff who work have worked incredibly hard in what has been the most challenging of times to deliver care that is safe, effective and person centred and this remains a priority for us for the year ahead.