

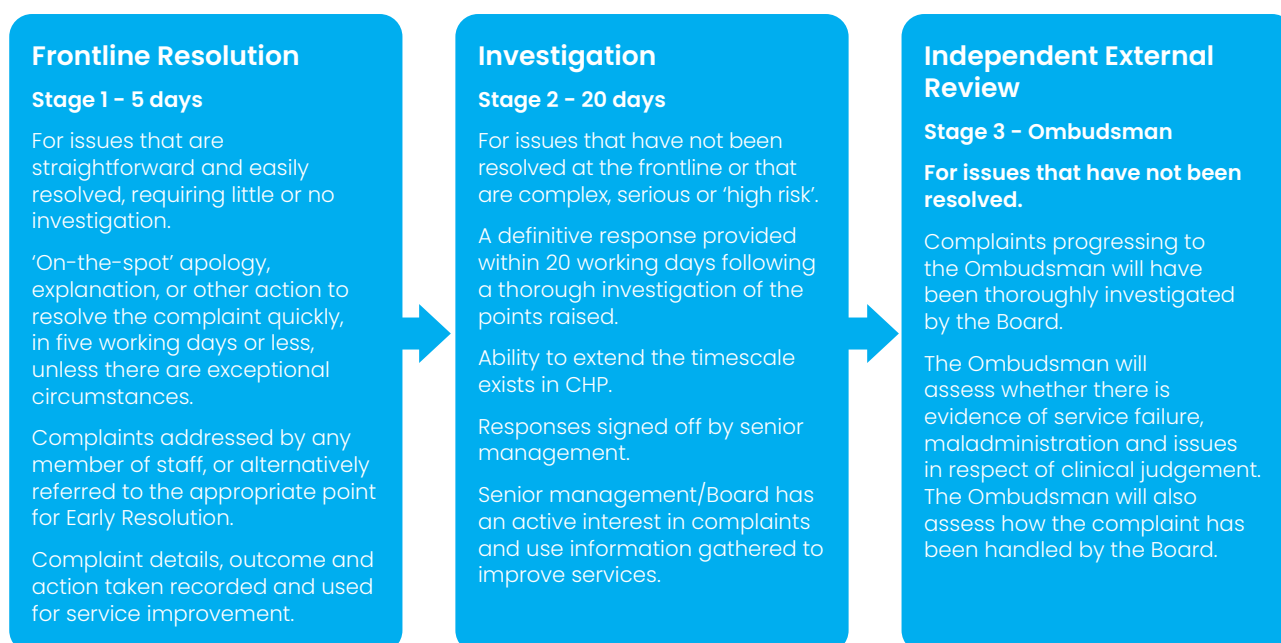
Complaints & Feedback Annual Report 2021/2022



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 have continued to be incredibly challenging and as we end the year 2021/2022 we are still facing the ongoing challenges of the COVID-19 pandemic. We have changed and reprioritised care and services in the expectation there will continue to be additional demands made on the NHS and remain on an emergency footing.

NHS Lothian demonstrates an ongoing commitment to listening and learning from the experience of patients/carers and service users and recognising that there is “no one size fits all” approach has continued to seek feedback using a range of methods. A significant shift in the previous year has involved the use of Care Opinion, which has gone from strength to strength and is proving an invaluable tool for receiving feedback which can then be used to influence simple changes in practice and/or procedures.



The NHS Complaints Handling Procedure (CHP), implemented in April 2017, saw the introduction of a new three 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 worked hard to improve our response times to complaints and in the year ahead will prioritise the current organisation-wide programme to review and improve our processes, with the aim of reducing delays whilst undertaking robust and timely investigations.

The report is set out over three sections

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

In presenting the 2021/2022 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 continues to be an exceptionally challenging year for us all.

Alison Macdonald

Executive Director, Nursing, Midwifery
and Allied Healthcare Professionals

3241 complaints

65% of all feedback

221

Care Opinion posts

598

compliments received

1015

prisoner healthcare
complaints

18

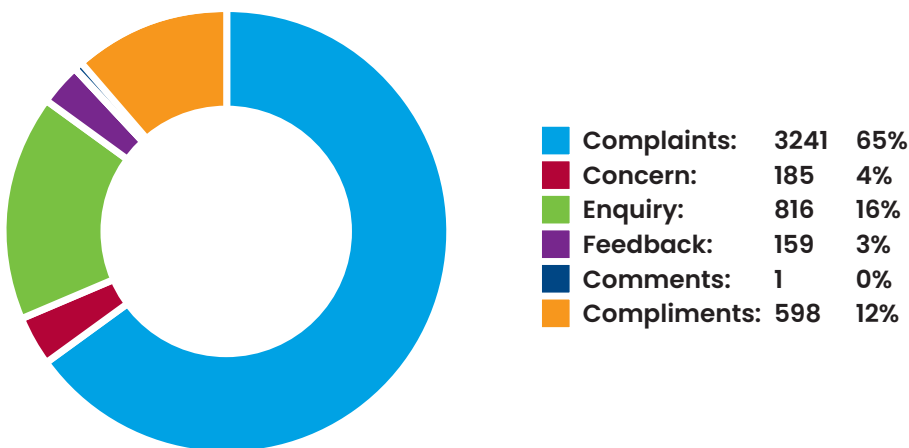
SPSO Decision
Letters published

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 to provide feedback or make a complaint and we also direct people to the Patient Advice and Support Service (PASS) or other advocacy agencies,

- 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 complaints procedure, how to provide feedback, obtain independent advice and support on complaining or get support from advocacy services. As part of that process, the team ensure that the person giving the feedback is clear about the next steps and any associated timescales. In addition, 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 Events / 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 and activity.
- 1.3 NHS Lothian receives a variety of different types of feedback. Chart 1 shows the different types of feedback received during 2020/2021, which totalled 3755 pieces of correspondence. This has increased in 2021/2022 to 5000. Further details on complaints will be detailed in the following section. It should be noted that although compliments reflect 12% of the overall feedback, this only represents those that are sent directly into the Chief Executive or other Executive Directors. The vast majority of compliments are received directly by the clinical teams.

Chart 1: Breakdown of feedback



It can be seen below in Chart 2 that November 2021 saw the biggest volume of feedback received (n= 473) with April 2021 seeing the smallest (n= 338).

Chart 2: Breakdown of Feedback by Month 2021/2022

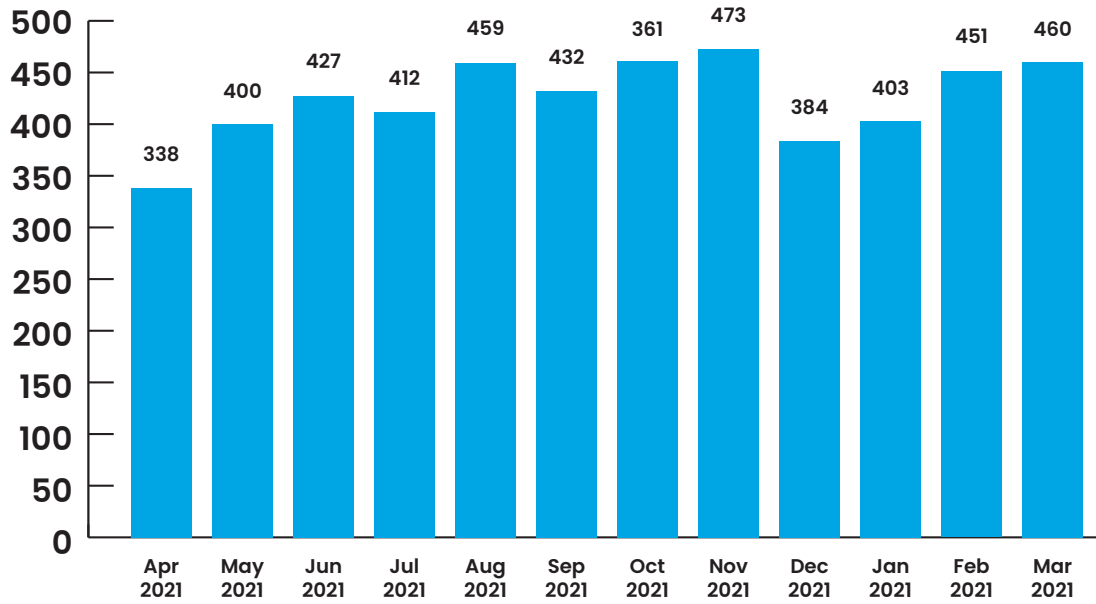
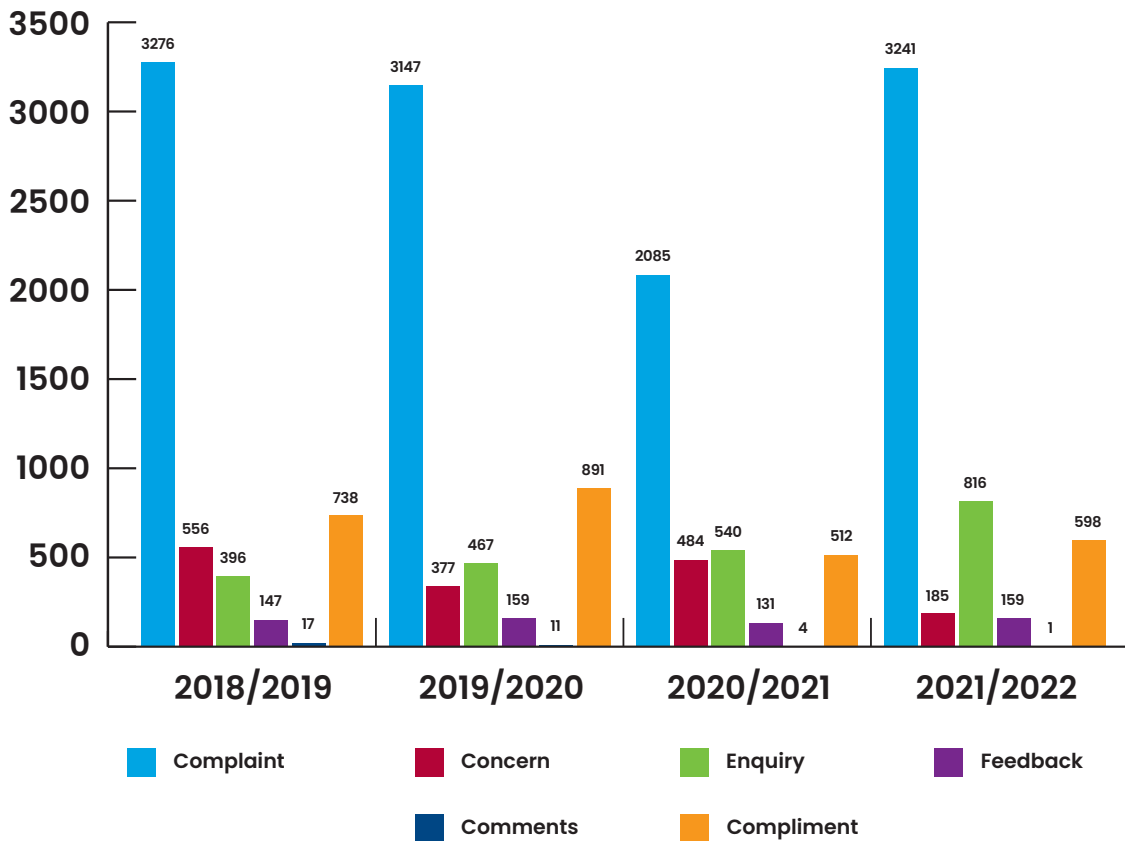


Chart 3 describes the feedback by type in financial years 2018 – 2021. The amount of correspondence is now in line with feedback received in 2018/2019 (n= 5130).

Chart 3: Breakdown of Feedback by type and financial year 2021/2022



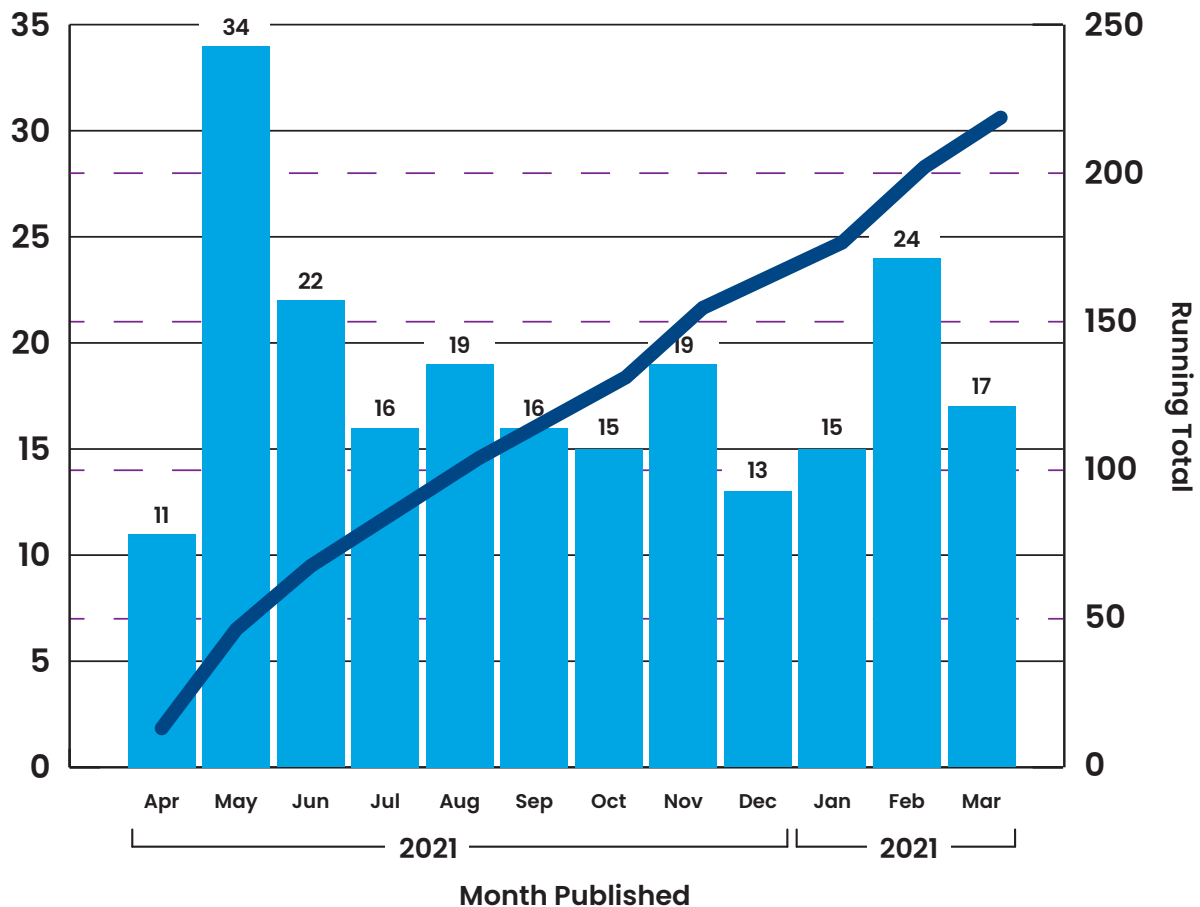
Care Opinion Feedback

1.4 Care Opinion (www.careopinion.org.uk/) is an independent organisation and website which offers an open and transparent way for patients and the public to share their stories and experiences of health services across Scotland. These stories are then shared with NHS Lothian and in turn we respond to the feedback and use it to support learning and improvements across our services.

In the last 12 months the number of NHS Lothian staff receiving Care Opinion alerts relating to their services has continued to increase. To ensure staff are empowered and supported to respond directly to feedback, Care Opinion continues to be rolled out in a structured way.

Chart 4 shows the number of stories that have been posted about NHS Lothian on Care Opinion for the period 2021/2022 (n=221). This is an overall increase from the previous year (n=183) and these stories have been viewed 58,495 times. May 2021, June 2021 and February 2022 have the highest number of stories posted / month

Chart 4: When these stories were told



Below are some extracts of stories posted on Care Opinion during 2021/2022;

"I attended a drop-in clinic to receive the second dose of my Covid vaccine at St James Quarter in Edinburgh. The clinic was very well-presented, the staff were extremely accommodating, and the whole service was very efficient; it took twenty minutes from walking in the door to leaving having had my vaccination. Thank you very much to all the staff (especially the nurse who was able to answer my questions about potential side-effects very thoroughly) who made this clinic possible and efficient. I am really blown away by NHS Scotland for making this possible!"

"Outstanding care from the staff at the Endoscopy Unit. I was very anxious about the procedure. All of the staff: reception staff, nurses, doctors were extremely kind and caring and really helped to calm my nerves. I've had many dealings with hospitals and medical staff over the years and I can say that the care I received here was outstanding. Staff went above and beyond and did their jobs to an extremely high standard. Well done to all staff on the unit."

"The service we received from Hospital @ Home was truly wonderful. Once they had been brought in they came so quickly, offered so much reassurance to the family, and delivered care with excellence. Everything that needed to be done for my ill husband was organised with efficiency, sympathy, encouragement and care. He was able to die at home knowing that the right decisions had been made for him and with him. This was very important to the family."

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 nine 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.

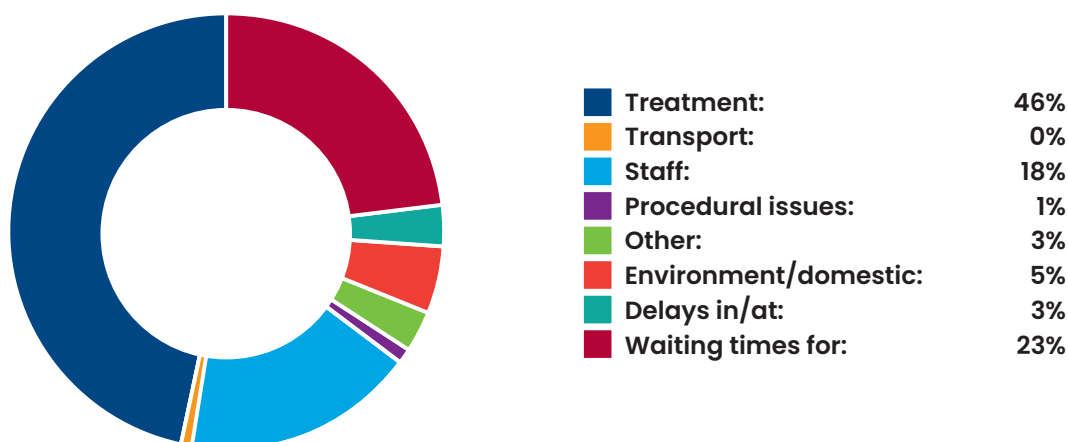
Prisoner Healthcare Complaints

2.1.2 NHS Lothian is responsible for prisoner healthcare at 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 3421 complaints during this period, of which there were 1015 from prisoners - a significant reduction from the previous year (n=1477). Stage 1 complaints account for the vast majority of cases (n=965) which is a positive position as most complainants have their complaints resolved locally via this process. Where this has not been possible, those remaining cases have been managed via the stage 2 process. Complaints and Feedback Forms are available to prisoners in the halls and the healthcare staff.

Indicator One: 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. Chart 7 identifies the themes from stage 1 complaints and stage 2 themes are shown.

Chart 7: Stage 1 Complaints 2021/2022 by issue type

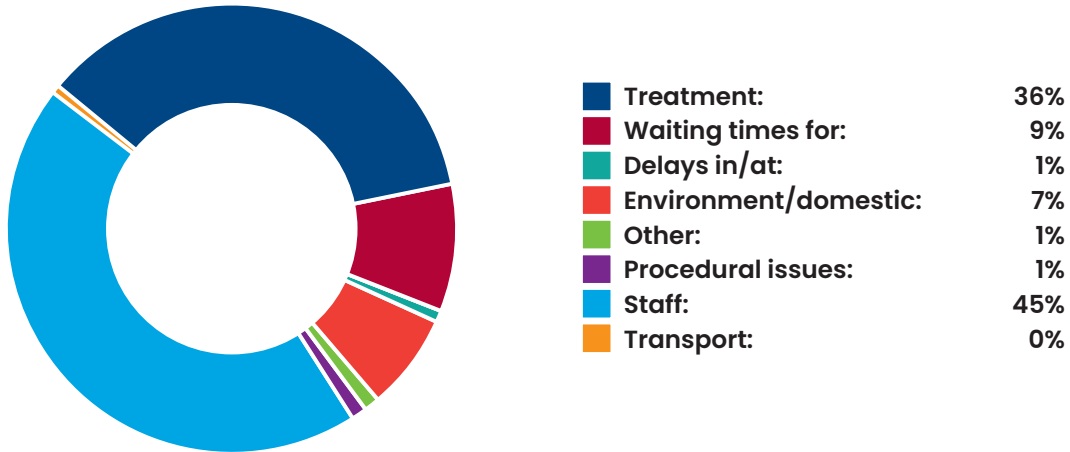


2.2.2 For Stage 1 complaints “Treatment” continues to be the main reason people are making complaints, with the second highest cause being “Waiting Times”. NHS Lothian is actively working to improve performance against waiting times targets and acknowledge the length of time some patients must wait. There are some services that are causing more challenge - in particular the surgical specialities - and this has been even more challenging as a result of COVID and social distancing measures.

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, delays with 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, “Staff” issues, followed by “Treatment” are the two highest causes for complaint (81%), as they were in the previous year. As already highlighted the clinical teams are working hard to improve the waiting times for services. Chart 8 highlights the themes from those stage 2 complaints.

Chart 8: Stage 2 Complaints 2021/2022 by issue type



Some examples of learning / changes

- A complaint was made by a family member about the discharge of their elderly mother from the Emergency Department at St John’s Hospital. The investigation showed that the discharge process had not been followed and the complaint was upheld. The process for discharging a vulnerable person was re-distributed to all staff in the department to ensure safe discharges and the resulting action plan of learning was also shared with the complainant.
- An inpatient at the Royal Edinburgh Hospital expressed her dissatisfaction with the attitude of the ward staff. Her complaint was upheld and an action plan was developed to address the practice and training deficits of the nursing team. A psychologist worked with the team to improve how staff formulated the needs of their patients, and they received the appropriate training and support to improve their practice and communication.
- A complaint about poor nursing care and treatment at the Royal Infirmary of Edinburgh led to the Charge Nurse and all ward staff developing an action plan to address the failings in care and poor documentation. The upheld complaint was used as the ward’s focus of the month in relation to staff getting back to basics in their patient care, including mouth care, pressure care, personal hygiene and assisting with eating and drinking. The importance of clear documentation was emphasised to medical and nursing staff in their record-keeping, to improve communication with patients and families.

- An error was made in medication reconciliation for a patient admitted to the Western General Hospital that caused them harm. The complaint helped identify staff's failings and quality improvement work was undertaken with medical and nursing staff in their management of medicine, to reduce the risk of such errors recurring.
- Staff at the Royal Hospital for Children & Young People failed to check a cot allocated to a child that was found to be faulty. There was also a failing to check that the sides of the cot used were locked and the child fell. The incident was shared with Lothian's patient safety team. As a result of the complaint, the staff's practice in preparing and checking cots and trolleys was reviewed, and changes implemented to prevent such incidents recurring. This was duly raised at the staff's daily safety huddle.

2.2.5 As previously highlighted in chart 1 NHS Lothian received 598 compliments, which have been received directly via the Chief Executive's office, an Executive Director or the Patient Experience Team. This equates to 12% 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.

Indicator Two: Complainant Process Experience

2.3.1 Since the introduction of the Complaints Handling Process in April 2017 complainants have been given the opportunity to provide feedback on their experience of the complaints process itself. The aim of this is to identify any adjustments that may need to be made to the NHS Lothian complaints service. Response has been poor with previous postal surveys and it was agreed that a telephone survey should be tested with a view to improving response rates. A sample size of 10% of all closed Stage 2 Complaints within the six-month period was randomly selected.

2.3.2 As well as a free text box, the questionnaire asked if:

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

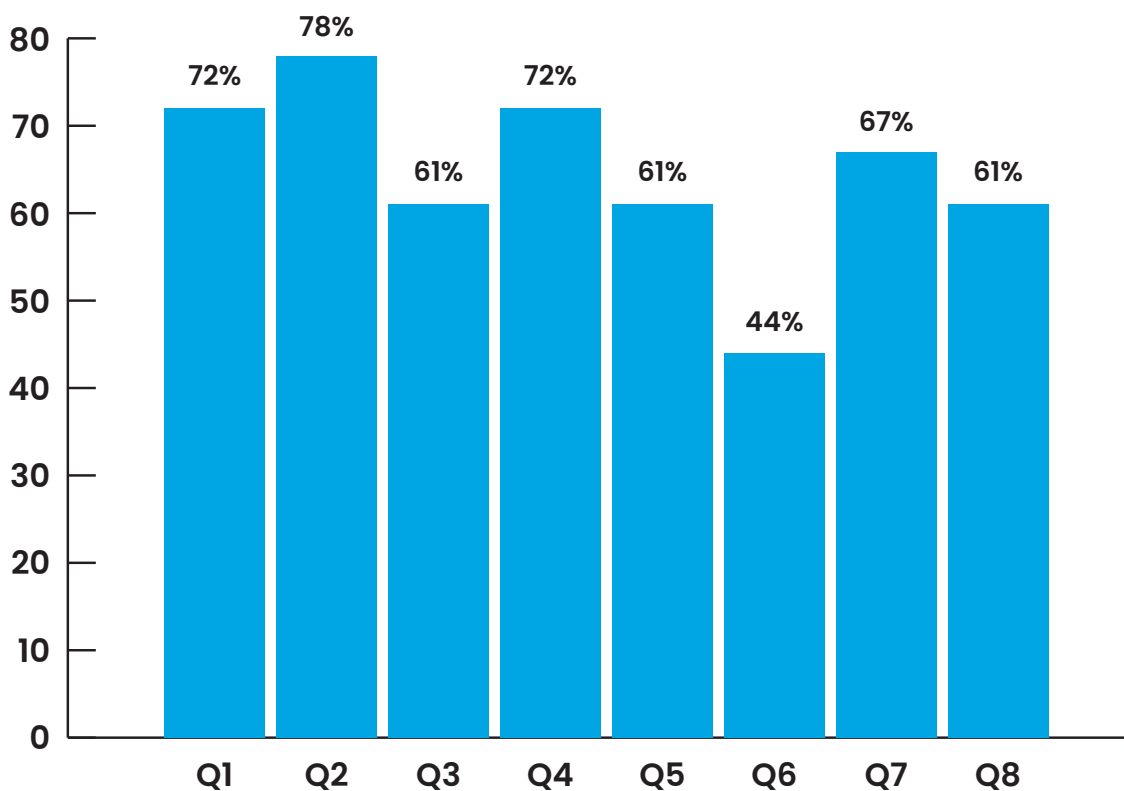
Complainants have been given a multiple choice answer:

Agree	Neither agree or disagree	Disagree	Don't know	Not applicable
-------	---------------------------	----------	------------	----------------

2.3.3 74 cases were included within the sample size. 43 complainants were sent letters inviting them to participate, questionnaire and reply-paid envelope enclosed. 7 completed questionnaires (16%) returned. 31 complainants were contacted by telephone and asked to participate in a short interview: 11 complainants participated (35%). This equates to a 24% response rate.

2.3.4 The results are detailed in the bar chart for each of the eight survey questions. It is reassuring to see that 78% of complainants found that making their complaint was easy. 44% of the respondents did not indicate that they received an apology by the staff who were involved in dealing with their complaint. This indicator continues to be discussed by the National Complaints Managers Group.

Chart 9: Complaint Process Experience



Indicator Three: Staff Awareness and Training

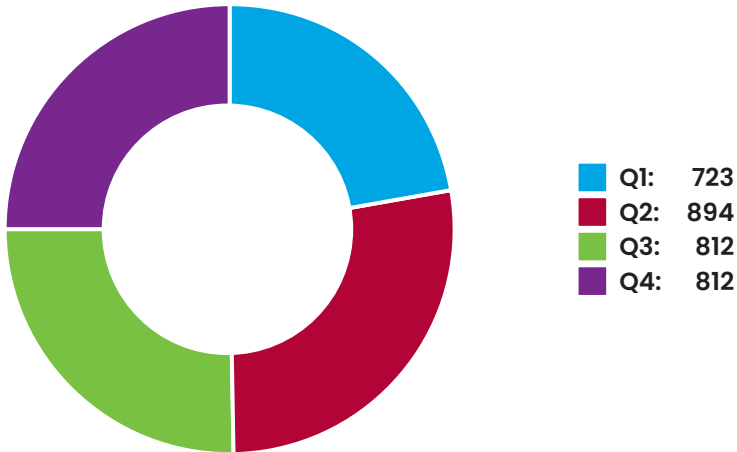
2.4.1 Bespoke training continues to be provided on an ad hoc basis by the Patient Experience Team. This has continued to be challenging as a result of the ongoing COVID-19 restrictions and the requirements to use MS TEAMS. The training modules developed by NES are available through LearnPro and staff have been encouraged to participate in these:

1. NES: The Value of Feedback
2. Encouraging Feedback and using it
3. NHS Complaints and Feedback Handling Process
4. The Value of Apology
5. Difficult Behaviour

Indicator Four: The total number of complaints received

2.5.1 Chart 9 below identifies the number of complaints received each quarter, which they are all generally very similar, it shows most were received in quarter 2 (n=894).

Chart 9: Complaints received per quarter



Indicator Five: Complaints closed at each stage

2.6.1 Table 1 below, identifies the number of complaints closed at each stage, as a percentage against the target timescales of all complaints.

Table 1

Stage 1	48%
Stage 2	52%
Stage 2 escalated	4%

Significant progress needs to be made in the year ahead to improve performance on this indicator. These figures reflect how staff continued to be challenged responding in a timely manner, and their competing priorities at what has been, and continues to be, a very challenging time for the organisation.

Indicator Six: Complaints upheld, partially upheld and not upheld

Table 2 shows complaints by outcome. 52% of Stage 1 complaints were not upheld, 28% of Stage 2 complaints were not upheld. The data below does not add up to 100% as there have been a small number of complaints that have not progressed through to conclusion and have been withdrawn. Often complaints can have elements that are both upheld and not upheld, in these circumstances, the outcome is described as “partially upheld”.

Table 2

Complaint Type	Upheld	Partially	Not Upheld
Stage 1	30%	16%	52%
Stage 2 Investigation	27%	37%	28%
Stage 2 Escalation	31%	29%	35%

2.8.1 For some Stage 2 complaints it can be very obvious from the beginning that the complaint will take longer than 20 working days to undertake the investigation and provide a response. 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. Further details on this are included under indicator nine.

Indicator Seven: Average times

Table 3 below identifies the average number of working days to respond to Stage 1, Stage 2 and Stage 2 escalated complaints. The average time for Stage 1 complaints is 8 days. The average length of time for Stage 2 complaints to be investigated and responded to is 23 days and for those escalated Stage 2 complaints it is 15 days.

Table 3

Complaint Type	(N)
Stage 1	8
Stage 2 Investigation	23
Stage 2 Escalation	15

Indicator Eight: Complaints closed in full within the timescales

2.9.1 Table 4 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) and those Stage 2 escalated (20 working days)

There were 52% of Stage 1 complaints responded to within 5 working days and 54% of Stage 2 complaints responded to within 20 working days. There were 76% of escalated Stage 2 complaints responded to within 20 working days

Table 4

Complaint Type	(N)	(%)
Stage 1		52%
Stage 2 Investigation		54%
Stage 2 Escalation		76%

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

2.10.1 Following discussions at the National Complaints Personnel Association, it has become apparent that this indicator is calculated differently by health boards. During the year we have changed our approach to keeping in touch with complainants and have introduced an “Explanatory Letter” which is sent to the complainant between days 15 – 20. The purpose of this letter is to provide a reason for the delay and an indication as to when the complainant will receive their signed response. Progress has been made and the performance for this indicator sits at 81%.

SPSO Published Decision Reports 2021/2022

2.11.1 Table 4 is a screen shot from the Scottish Public Services Ombudsman website of those 18 SPSO Decision Reports that have been published on their website. There was one Investigation Report published by the SPSO. Of those 18 cases, 10 of those relate to Acute Services, five relate to GP Practices, two relate to Royal Edinburgh and Associated Services and one relates to West Lothian Health and Social Care. Where the SPSO makes any recommendations, these actions are followed up and responded to within the required timescales. These reports are also shared widely across the organisation. Whilst the GP reports are listed below, the responsibility for these sit with the practice themselves.

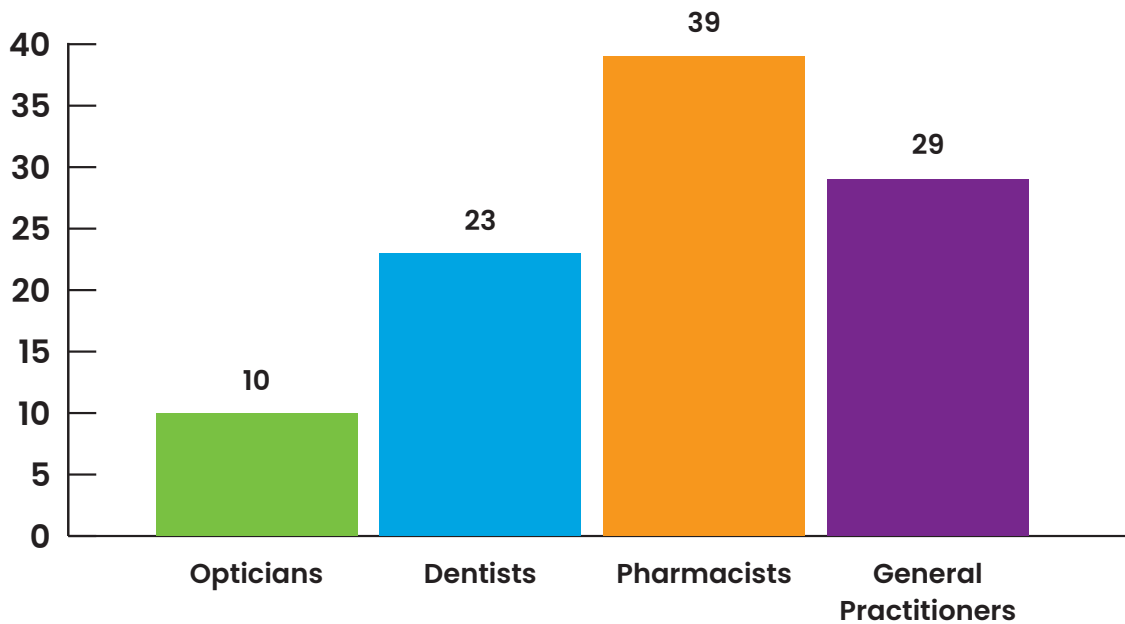
Table 4

Organisation	Business Area	Subject	Outcome	Report Date
A Medical Practice in the Lothian NHS Board area	Pentlands Medical Practice	Clinical treatment / diagnosis	Not upheld, no recommendations	Mar-22
Lothian NHS Board – Royal Edinburgh and Associated Services Division	Royal Edinburgh and Associated Services	Clinical treatment / diagnosis	Some upheld, recommendations	Dec-21
A Medical Practice in the Lothian NHS Board area	Southern Medical Group	Clinical treatment / diagnosis	Upheld, recommendations	Dec-21
Lothian NHS Board – Acute Division	RIE Hospital Site Mangement/ Cardiology	clinical treatment / diagnosis	Not upheld, no recommendations	Nov-21
Lothian NHS Board – Acute Division	WGH Hospital Site ManagementTeam/Medicine of the Elderly	Clinical treatment / diagnosis	Not upheld, no recommendations	Oct-21
Lothian NHS Board – Acute Division	RIE Hospital Site Management/ Neurosciences DCN	Clinical treatment / diagnosis	Upheld, recommendations	Sep-21
Lothian NHS Board – Acute Division	WGH Hospital Site ManagementTeam/Colorectal	Clinical treatment / diagnosis	Some upheld, recommendations	Sep-21
A Medical Practice in the Lothian NHS Board area	Long House Surgery	Lists (incl difficulty registering and removal from lists)	Not upheld, no recommendations	Sep-21
A Medical Practice in the Lothian NHS Board area	East Linton Surgery	Clinical treatment / diagnosis	Upheld, recommendations	Aug-21
Lothian NHS Board – Acute Division	Womens and Childrens/ Childrens Services	Clinical treatment / diagnosis	Upheld, recommendations	Aug-21
Lothian NHS Board – Acute Division	RIE Hospital Site Management/ Stroke Medicine	Admission / discharge / transfer procedures	Not upheld, no recommendations	Aug-21
Lothian NHS Board – Acute Division	WGH Hospital Site ManagementTeam/Urology	Clinical treatment / diagnosis	Upheld, recommendations	Jul-21
Lothian NHS Board – Acute Division	RIE Hospital Site Management/ General Medicine	Clinical treatment / diagnosis	Some upheld, recommendations	Jun-21
Lothian NHS Board – Acute Division	Corporate Single System/Oral Health service	Clinical treatment / diagnosis	Not upheld, no recommendations	Jun-21
Lothian NHS Board – Acute Division	Therapy and Rehabilitation Directorate/ Paediatric Physiotherpay	Clinical treatment / diagnosis	Upheld, recommendations	Jun-21
A Medical Practice in the Lothian NHS Board area	Barclays Medical Practice	Clinical treatment / diagnosis	Not upheld, no recommendations	Jun-21
Lothian NHS Board – Acute Division	Royal Edinburgh and Associated Services Division	Communication / staff attitude / dignity / confidentiality	Upheld, recommendations	May-21
Lothian NHS Board – Acute Division	WGH Hospital Site ManagementTeam/Acute Medicine	Clinical treatment / diagnosis	Upheld, recommendations	May-21

3: Feedback Received by Independent Contractors

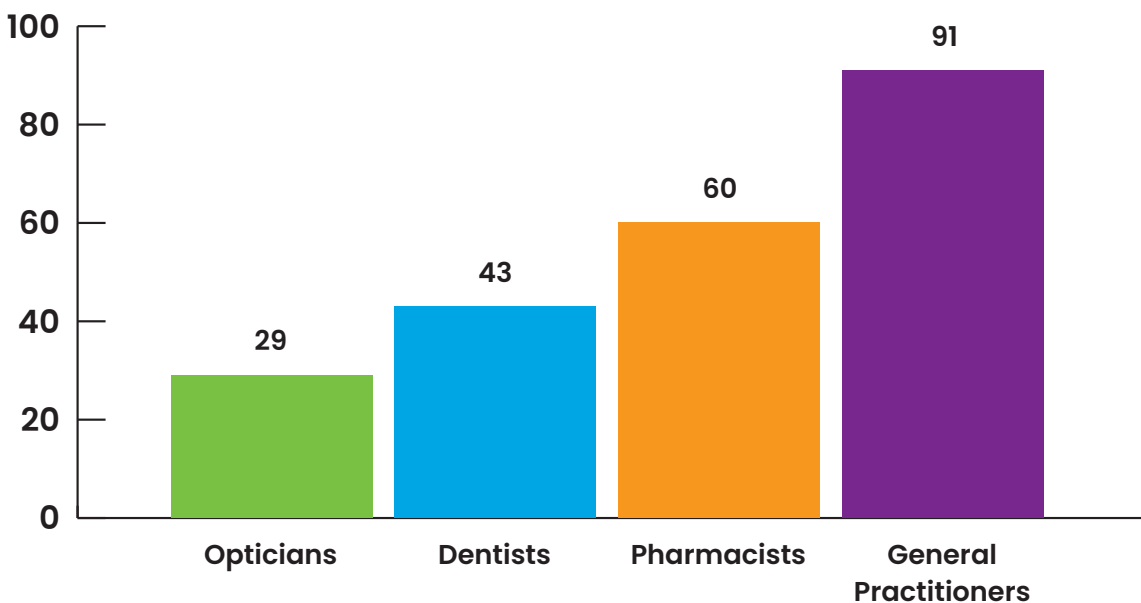
Chart 5 indicates the response rate of the four contractor groups. For the first time, the Pharmacists have topped the chart with 39% of overall returns. During the year, we have worked hard with the Pharmacy Team to raise the profile and the requirements of their complaints returns.

Chart 5: % response rate of overall returns



Looking at each contractor group individually, the bar chart below indicates that the General Practitioners continue to be the highest responding contractor group, followed by the Pharmacists, followed by the Dentists and then the Opticians. In the year ahead we will continue to work with the Independent Contractors via the Primary Care Contracts Team and the Area Clinical Forum to see how we can continue to improve our response rate. We will also look to the National Complaints Association Group.

Chart 6: Individual contractor response rate



Conclusion

Reflecting on this last year, it has continued to be a challenging one for us as we face the ongoing COVID-19 pandemic and the new ways of working that this has required. There is no doubt this has continued to impact significantly on performance and on the patients and families that have given us feedback.

As we end the year, we are aware there is significant work ahead for us as we seek to improve the way we handle complaints and feedback, and we are embarking on a system wide programme of improvement for all staff who are involved in complaints and feedback. This work was commissioned by the Chief Executive and has been overseen by a Short Life Working Group, chaired by the Deputy Director of Nursing which reports into the Patient Outcomes Programme Board and the Healthcare Governance Committee. To date, this work has prioritised the development of clear and agreed processes for the range of different categories of feedback, the development of a “Complaints Commissioner” and “Lead Investigator” role. This work will continue in the year ahead.

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 we have taken to improve our services. I hope that they will continue to share their stories and experiences with us.

Finally, thank you to all our staff who have worked incredibly hard in what continues to be the most challenging of times to deliver care that is safe, effective and person-centred, and this of course remains a priority for us for the year ahead.

