



NHS Tayside's Annual Feedback Report 2017/18

A report on the learning, action and improvements made or proposed in response to feedback, comments, concerns and complaints about NHS Tayside healthcare services

**Give
Feedback**



Executive Summary

Within NHS Tayside, person-centred care is a key strategic priority with a broad definition that includes service users, family, carers and staff. The ambition of NHS Tayside's Clinical and Care Governance Strategy is that "every day every one of us delivers, sees and experiences standards of healthcare that we would want for our own loved ones. This can only happen by putting the person receiving care, and their carer, at the centre of everything we do, working as a team and making sure we have the information and data we need to deliver excellent care and treatment".

Creating the right conditions for staff to provide safe, effective person-centred care is vital. To achieve this we need to pay attention to staff wellbeing. We need to create cultures that facilitate them to flourish by reflecting and improving their practice and relationships with colleagues, patients and families. Therefore NHS Tayside has developed in partnership with staff, patients, carers and the public a Vision, Aim, Values and Behaviours to express what we believe to be the best environment to deliver person-centred, safe and effective care.

Underpinning the Clinical and Care Governance Strategy is NHS Tayside's Care Governance Measurement & Monitoring Framework. This framework details eight specific ambitions and key actions to improve quality. One ambition focuses on improving patient experience 'Patients, carers and members of the public will increasingly feel like they are being treated as vital and equal partners in the design and assessment of their local NHS. They should also be confident that their feedback is being listened to and see how this is impacting on their own care and the care of others.'

In 2017/18 the focus of the NHS Tayside feedback workstream has been to develop guidance for areas to effectively gather and use feedback. The work around the Right Time Patient Feedback has enabled us to learn how to obtain and use feedback and the findings from this work are used to inform feedback planning and create organisational capability in obtaining, recording and using feedback to improve experience.

The new NHS Complaints Handling Procedure (CHP), implemented in April 2018, saw the introduction of a new 2-stage process to support a more consistently person-centred approach to complaint handling.

This report seeks to share the progress we have made in these areas as well as our continued focus on learning and improving services as a result of the feedback we receive.

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Introduction

The Patient Rights (Scotland) Act 2011 introduced the right to give feedback, comments, concerns and complaints about NHS healthcare and services. In NHS Tayside feedback encompasses comments, concerns, complaints and compliments. NHS Tayside has local processes and procedures in place for encouraging feedback to improve care and promote learning and improvement. NHS Tayside also utilises services such as the Patient Advice and Support Service (PASS), Care Opinion, advocacy and alternative dispute resolution services.

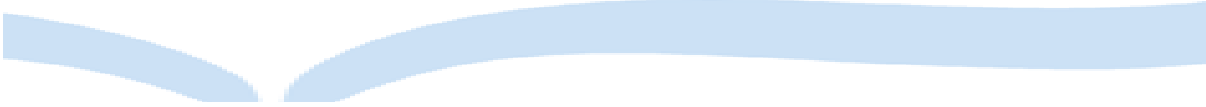
This report¹ describes the opportunities and mechanisms in place across NHS Tayside to encourage and gather feedback. It also provides a summary of the issues raised, the learning and the actions and improvements made, or proposed, in response to the feedback received between 1 April 2017 and 31 March 2018. The report covers our own services, including those within the three Health and Social Care Partnerships, and those provided by Tayside health service providers (for example, General Practitioners (GPs), dentists, opticians, community pharmacists and ophthalmic medical practitioners).

The report has been shared with the NHS Tayside Public Partners Network, members of the public with an interest in health and health related issues, to seek their views on the content and engagement in future work. Information on the new NHS Complaints Handling Procedure (CHP) and how NHS Tayside is developing effective feedback mechanisms has also been shared with the Tayside Patient and Public Forum for Medicines and their views sought to inform the way forward.

Ways NHS Tayside Seek Feedback

NHS Tayside value and welcome any comments or suggestions for improving the services provided and wants to hear about anything patients, carers and families liked or disliked about the service or care given. We want to know if there might be a better way to provide services or care and are keen to hear people's ideas. There are many ways in which patients and their families can get involved to help shape and improve local health services. Patients, carers and families can provide comments and feedback to the person involved in their care or they can participate online.

¹This report can be made available in other languages and formats on request

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For example, people can visit:

<http://www.nhstayside.scot.nhs.uk/GoingToHospital/GiveUsFeedback/index.htm> to give feedback about NHS Tayside Services. This webpage also provides a link to information on how to make a complaint and to the health rights information relating to feedback and complaints on the NHS Inform website. The 'your health, your rights factsheet: feedback and complaints' on <https://www.nhsinform.scot/publications/feedback-and-complaints-factsheet> gives information on the support available to help people make their views known.

People can also contact us by phone on 0800 027 5507 or in writing to: NHS Tayside, Complaints and Feedback Team, Ninewells Hospital, Dundee, DD1 9SY. NHS Tayside also has a Facebook page www.facebook.com/NHSTayside and a Twitter page: www.twitter.com/NHSTayside. People can also provide feedback on NHS Tayside services via Care Opinion www.careopinion.org.uk.

Section 1 - Encouraging and Gathering Feedback

This section describes the methods NHS Tayside uses to encourage and gather feedback from patients, carers, relatives and the general public, about their experience of the services we offer. Within this section the report will demonstrate how NHS Tayside has met public sector equality duty and engaged with patients and carers who may find it difficult to communicate feedback, how NHS Tayside publicises the methods of providing feedback that are available and what support is available to those who wish to provide feedback.

1.1 How NHS Tayside Encourages Feedback

NHS Tayside continues to offer a diverse range of methods to patients, carers and families for the provision of feedback. These have been developed to support people to provide feedback both at the time care is being given as well as afterwards. Key to all of these approaches is ensuring we enable equality of access to feedback mechanisms ensuring that these meet the varied needs of our whole population. An example of the work undertaken during 2017/18 is the way NHS Tayside manages complaints and feedback from the deaf community. Complainants are now invited in to meet with NHS Tayside, supported by our sign language interpreter, to enable them to share their feedback directly and receive a personal response to the issues raised. Where appropriate a written response, reviewed by our sign language interpreter to ensure that it is written in simple and plain English, is provided. Should the complainant have an advocate, a copy of the response letter is also shared with them. A mobile phone is also available to enable ongoing communication with the Complaints and Feedback Team throughout the complaints process.

Methods of Acquiring Feedback

Various methods for obtaining feedback have been shared in previous annual feedback reports produced by NHS Tayside. During 2017/18 this has included:-

- Daily conversations – Healthcare staff interactions with patients, relatives and carers which provide opportunities for obtaining feedback
- Questionnaires in the format of ‘How Are We Doing?’
- Improvement Tree – where patients write comments on post-it notes regarding their experience for display on the tree

- Approved or validated patient experience surveys for doctors, specialist nurses and allied health professionals (AHPs) which support their appraisal and revalidation are in place eg Consultation and Relational Empathy (CARE) measure; Picker Patient Experience Questionnaire (PPE15)
- Patient engagement forums
- Comments cards / Suggestion boxes
- Conversations with people with dementia conducted by volunteers
- Specific forums to gain feedback from patients and carers who cannot communicate in the spoken language of English, who are hard of hearing and/or have other sensory impairment(s) which may cause barriers to communication

The year 2017/18 has been one of innovation and development in actively seeking feedback from our service users and stakeholders. We have seen the use of different approaches, some fairly widespread and others a local team approach, to look at specific service delivery and development areas.

There is no aspect of the feedback gained that has not informed changes and on-going developments, taking NHS Tayside into 2018/19 and beyond. Below are some examples of how services have gathered feedback and used that feedback in collaboration with staff, service users, other stakeholders and families and friends. These examples are the tip of the iceberg and every day teams are gathering and acting on feedback to make a difference to the services and improve.

Example One: Angus Anticoagulation (Warfarin) Service

In 2018, the Angus Anticoagulation (Warfarin) Service sought patient feedback through a patient satisfaction questionnaire. The questionnaires were handed out to the vast majority of patients who attended the Angus Health and Social Care Partnership anticoagulation patient testing service over a period of one week (approximately 300 patients). This resulted in a total of 263 questionnaires being returned from across all service areas.

The questionnaire was developed to find out if patients understood why they were taking Warfarin, the effects of the medication, how satisfied they were with the anticoagulation service and any suggestions regarding how the service could be improved. Warfarin is a high risk medication and it is critical to ensure that the process we have within the system for ongoing patient education is monitored for effectiveness.

The results of the questionnaire displayed high levels of patient satisfaction, providing positive feedback regarding the service provided and evidencing high levels of patient understanding regarding Warfarin and its management. The results from the survey were shared with all practitioners and discussed at the Angus Anticoagulation Practitioners Meeting to agree any further local improvements. For example, whilst 94% of patients stated that the anticoagulation service had explained Warfarin and its management in a way they understood, there was variation between sites with regards to patient responses. This level of detail was shared with the practitioners, with discussion about methods of supporting patient education. Health literacy will be discussed at a Practitioners' Educational Event, supported by colleagues in Public Health.

The Service plans to replicate the questionnaire across Tayside Anticoagulation Services next year and will also discuss the results at the Multi Agency Lead Clinicians Committee of NHS Tayside.

ExampleTwo: Rohallion Forensic Services

Rohallion Clinic is currently the only secure care service in Scotland reviewed annually by the Royal College of Psychiatry Quality Forensic Network. One of the main aims of this review process is to support and engage individuals in a process of quality improvement as part of an annual review cycle. Part of this review process is to gain feedback from staff, patients and carers about the quality of the service being provided. This is followed up by a peer review visit whereby colleagues (including a service user representative) from a similar service assess Rohallion against specialist standards for forensic mental health and seek further feedback from staff, patients and carers during face to face meetings. As a result of participating in this process, the service has made significant progress in patient involvement.

A Rohallion Users Group (RUG) has been established which meets bi-monthly. This meeting is facilitated independently by a representative from Perth Independent Advocacy and has no staff involvement. Each ward is supported to nominate a patient representative to attend these meetings. Concerns/ideas from this group are then discussed at the Patient Involvement Working Group (PIWG) which is multi disciplinary and includes two patient representatives. Initiatives taken forward from these meetings include:-

- Getting free satellite televisions installed within the ward day areas; currently looking at how this can be extended into the patients' bedrooms
- Installing Wi-Fi in order for patients to have internet access within the clinic

- Looking at improving the Care Programme Approach (CPA) experience for patients
- Introduction of mobile telephones for patients within the Low Secure Unit
- Introduction of patients having keys to their own bedrooms
- Continually reviewing practices to ensure that least restrictive practices are being adopted.

As well as the peer review, each ward has patient forum meetings and suggestion boxes where ideas for improving care/practice can be raised. 'How are we doing?' questionnaires are used with the 'You said we did' response.

Example Three: Health Visiting Services

Health Visiting Services across NHS Tayside utilise a range of methods to obtain feedback from patients. These include:-

- Patient Questionnaires
- Student Health Visitors obtain six service user testimonies aimed at improving student progress when working directly with patients
- Feedback sought from parents through a Unicef Audit undertaken by Maternal & Infant Nutrition Champions by phone

The team have also engaged with patients to identify what communication routes would be preferred by them, for example:-

Working with children and young people and making contact with school nursing services, the suggestion was made that communication would be preferred by social media and text. This was identified as a preferred method to people receiving leaflets.

Example Four: Perth Royal Infirmary (PRI) Theatre Services

The three theatre services suites in PRI have collected feedback in various ways, dependant on the uniqueness of each suite. The Main Theatre services suite has a feedback display board which includes thank you cards and feedback from patients, which are discussed for learning and areas for improvement at the weekly staff meeting. The board is updated by the reception staff every time new feedback is received. Recently, the layout of this theatre reception area has been changed, after feedback that this area felt quite exposed. The new layout has been discussed with patients, who now view this area more positively.

The gynaecology theatre suite also has a feedback board. This is displayed publicly at the entrance to the theatre suite. This is updated by all members of the team and used to inform of improvements.

A “feedback tree” is located in the day surgery reception. Patients and their relatives are able to leave comments on the available forms and attach them to the tree. Recent comments have focused on the high level of service delivered, and praising the staff who work there.

The Theatre Management Team is currently looking at how to gather patient experience data and is working with the Improvement Team to look at an innovative way of capturing this.

Example Five: Developing Recovery Project Integrated Substance Misuse Services

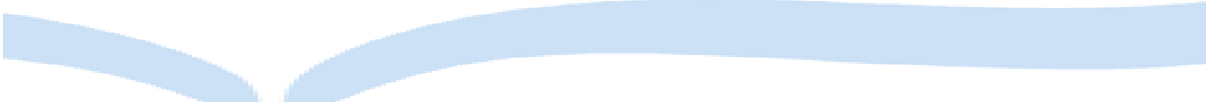
Developing Recovery is a project which views recovery through the lens of those living it. Forty film cameras were given to 40 people in various stages of recovery from substance dependency. The project also engaged with families, relatives and carers recovering from the effects of a loved one’s substance misuse too. The project sourced 40 “point and shoot” black and white film images and 40 stories depicting people’s personal views of their recovery. Dundee Photographic Society provided professional and technical support to the participants. An exhibition of their work was displayed in the Steeple Church in Dundee.



“Recovery is not forgetting the past.
It is not dreaming of the future.
It is simply being comfortable with today.”

“When my mother wasn't drinking, my brother and I were spoiled with biscuits and juice. They became infrequent and only served to mark a week or so of calm, before the storm came back. If only she knew that we would have been happy just having our mum back. Time heals?”



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Example Six: Making Recovery Real (MRR) Partnership

The Making Recovery Real (MRR) partnership continues to work together listening to people with lived experience (PWLE) of mental health challenges, to ensure that those using the service are partners in shaping it. The partnerships now have a dedicated worker based at Dundee Voluntary Action whose main role is to support the development of recovery locally. Twelve story sharing facilitators have been trained and 35 stories have been gathered to date in various formats. An event was held in December 2017 to identify emerging themes and these will be shared with the Mental Health Strategic Planning Group in 2018.

MRR has released the second film, MRR in Dundee 'One City, Many Recoveries'. The film shares the unique experience of participants and their journey to recovery. The aim is to promote recovery and support the recovery of others. In addition, a further six week Peer2Peer training course commenced in January 2018 and again is aimed at anyone who has their own lived experience of mental health difficulties who wish to use their experience to help and support others.

A co-design event was held at the end of November 2017 to explore where and how more peer recovery opportunities in mental health could be created within communities, voluntary and statutory organisations. A number of services/supports attended, such as community mental health teams, mental health officers' team, Addaction Dundee, and have committed to developing volunteer peer recovery opportunities in their own services/supports.

The mental health service users' network (SUN) held the second of two events this year to extend the network into localities. There are now three volunteers working with the network and the aim is to ensure the voice of mental health service users is firmly on the agenda.

Compliments

Clinical areas continue to receive compliments in a variety of ways such as cards, chocolates and letters. Some services display the thank you cards and letters they receive.



Compliments received by the Complaints and Feedback Team are recorded centrally and are shared with the relevant service area(s). During 2017/18, 324 compliments were recorded by the Complaints and Feedback Team compared to 333 in 2016/17. Figure 1 below compares the number of compliments received per month between April 2016 and March 2018.

Figure 1 – The number of compliments received each month

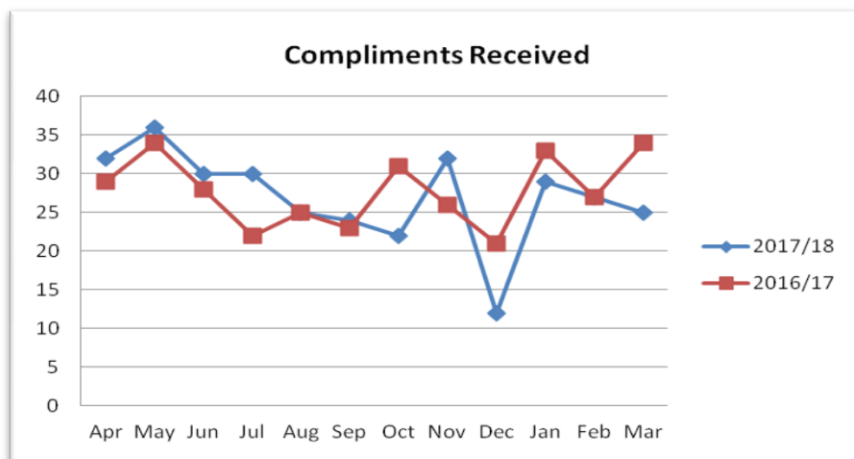


Table 1 shows the numbers of complaints received by service area. It must be recognised, however, that these statistics do not reflect the full picture and that many more compliments are received and shared with staff at local level. Compliments received via the Complaints and Feedback Team covered a variety of topics but the majority related to Attitude and Behaviour and Clinical Treatment.

Table 1 – Number of compliments received between 1 April 2017 and 31 March 2018

Area	Compliments Received
Medicine Directorate	146
Surgical Directorate	60
Access Directorate	17
Specialist Services & Specialist Surgery	62
Dundee Health and Social Care Partnership (HSCP)	6
Angus Health and Social Care Partnership (HSCP)	14
Perth and Kinross Health and Social Care Partnership (HSCP)	15
Operations Directorate	2
Chief Executive's Department	2

Members of the public can also nominate staff to receive an NHS Tayside STAR Award. These annual staff recognition awards, which commenced in 2017, provide an opportunity to recognise staff or services delivering outstanding patient care or who have gone the extra mile in their job.

1.2 Right-Time Patient Feedback

NHS Tayside has been working in partnership with Health Care Improvement Scotland over the last 18 months to develop a model for feedback that is capable of being spread across the organisation. This model involves the use of volunteers to collect survey feedback post discharge from hospital, with provision of survey responses to clinical teams within 24 hours via our clinical dashboard. Teams are supported with an improvement model to ensure they listen and act on feedback. The model has proved successful and, while we have seen improvements in practice, due to limitations on the duration of our evaluation we have been unable to demonstrate statistically significant improvements. Qualitative feedback from both staff and patients has, however, demonstrated significant improvements in patients' experiences of care. At the time of reporting, 20 out of a possible 36 wards who can use the current survey (Patient Picker Experience 15 survey) are receiving feedback, collected by volunteers every month.

A further 11 wards will require specialty specific surveys that are yet to be identified. In our remaining wards, there is no opportunity to use surveys due to the level of cognitive impairment in those patient groups. To address this we have also used a participatory research process to develop and test a toolkit to help people with mild or moderate cognitive impairment share their hospital care experiences. We now have a toolkit and have been delivering awareness sessions with various staff groups to help this to be integrated into practice.

NHS Tayside has established a Person-Centred Board and this will provide governance for the development of patient feedback developments. We have draft standards for the collection and use of feedback and an engagement plan is being developed to refine these into standards that are aligned with the National Health and Social Care Standards and capabilities across health and social care systems.

1.3 National Sources of Feedback

During 2017/18 there has been one national survey, the Scottish Health & Care Experience Survey (formerly Patient Survey) which had results published in April 2018 -

www.gov.scot/GPsurvey

The survey was sent to a random sample of those who were registered with a GP in Scotland in October 2017 for completion between November 2017 and January 2018. A total of 611,638 questionnaires were sent out and 132,972 were returned, giving a response rate of 22%. In NHS Tayside a total of 38,076 questionnaires were sent out and 9,431 were returned, giving a response rate of 25%.

As the results were only published in April 2018, information on learning and improvement will be considered in next year's Annual Feedback Report.

1.4 Care Opinion



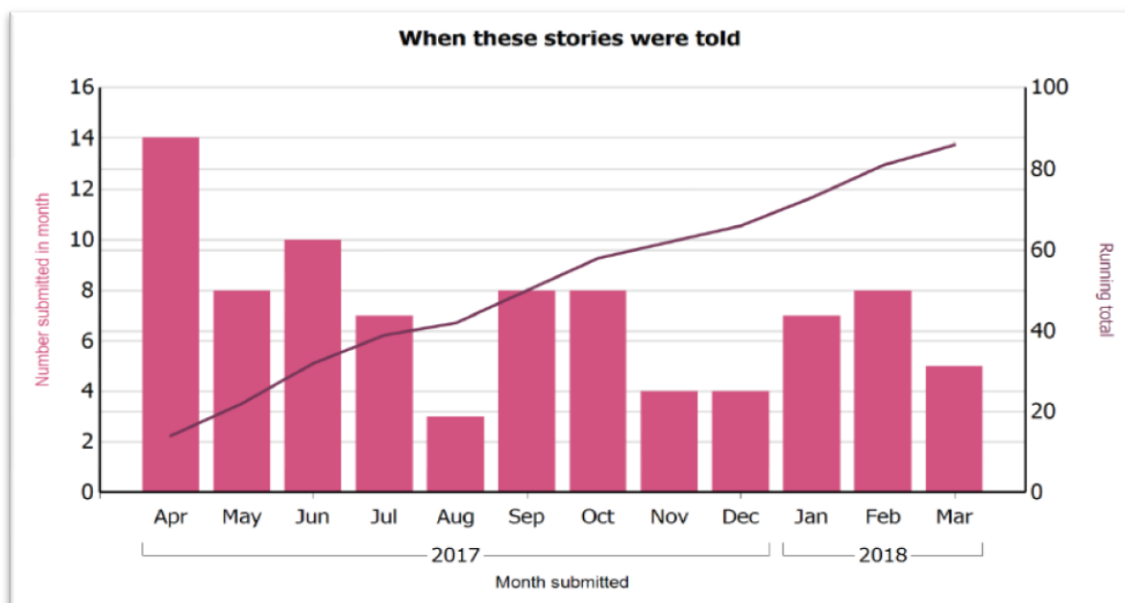
Care Opinion (formerly known as Patient Opinion) is an independent organisation which offers a platform for the public to provide feedback to health services. Members of the public can visit the Care Opinion website (<https://www.careopinion.org.uk/>) where they can share a story about their experience of the health care they, a relative or friend received. These stories are then shared with NHS Tayside who will respond to the feedback and utilise it to support learning and improvements across our services.

NHS Tayside works closely with Care Opinion to develop its use and accessibility to all and continues to raise awareness as a means of receiving feedback on our services. Over the past year this has included discussion at Clinical Governance and team meetings, with 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, access for services to respond to feedback directly on Care Opinion continues to be rolled out in a structured way with appropriate support in place.

Stories from Care Opinion are also shared with the public and staff via the NHS Tayside Facebook page.

Despite continuing to publish this service across NHS Tayside, there has been a slight decrease in the use of this mechanism for sharing feedback. During 2017/18, 86 stories were posted on Care Opinion regarding NHS Tayside services, compared to 97 in 2016/17.

Figure 2 – The number of stories published each month April 2017 – March 2018



Source: Care Opinion, Stories in Summary Tayside 2017-18

A recent Care Opinion message reinforced the dedication of frontline staff within NHS Tayside and NHS Tayside took the opportunity to share the feedback through the Getting it Right Clinical Governance and Risk Management newsletter in December 2017.

"I shall not forget the kindness and generosity shown to me"

"I recently had major surgery to remove cancer from my tongue and jaw at Ninewells Hospital, Dundee.

Some days before, the consultants explained in detail what they expected to do, the risks involved and many other facets of the surgery and aftercare. They were all very pleasant and focused. I was neither afraid nor worried.

I was anesthetized at perhaps 9am and have little memory of the next 4 days. I was only aware of great pain and terror much alleviated by diazepam and as much morphine as I wanted.

The surgery had apparently gone well and I had been taken to ICU when a lung collapsed for no obvious reason. One of the consultant surgeons arrived quickly and prompt action was taken, but I cannot say now what that was but involved x-rays and some kind of pump. A nurse was by me 24 hours a day. The nurses gave great support to my wife who spent many hours at my side, keeping things light and occasionally humorous. Some days (4 I think) later, I was well enough to be wheeled off to Ward 26.

All the staff who dealt with me in Ward 26 were great. Beyond any praise I can give. Always positive, pleasant, willing, polite and supportive. They made an unpleasant situation very tolerable and I think I laughed more than I cried.

It would be invidious and now impossible to single out any individual for exceptional praise.

There was one moment when I reached an emotional rock bottom when a busy doctor spent maybe an hour with me just talking and listening. It was enough to make a big difference.

Small things helped. The first bath I took with assistance was an enormous pleasure. Iced water injected down a feeding tube was another. Internet access was a great reliever of boredom and allowed me to keep in touch with friends and family as the days wore on.

One of the surgeon consultants attending to a small detail took a great weight from my wife's mind.

I am now home after making rapid progress but there is still a long way to go and much still to be done; many clinics to attend and new ways of dealing with new circumstances created by this major life event.

I shall not quickly forget the kindness and generosity of heart shown me at Ninewells.

My life has been saved but as an unexpected bonus, the value of that life has been shown to me.

Thank you.”

To view further stories posted by patients and the response provided by NHS Tayside, please visit <https://www.careopinion.org.uk>

1.5 Local Online Feedback Mechanisms

The public can provide online feedback to NHS Tayside via the website by visiting <http://www.nhstayside.scot.nhs.uk/GoingToHospital/GiveUsFeedback/index.htm>. Feedback can also be provided by email directly to feedback.tayside@nhs.net. The volume of feedback received via this route continues to increase. During 2017/18, 251 compliments and 564 complaints were received via this means, compared to 249 compliments and 402 complaints in 2016/17. Feedback received is shared with services for their information and learning, with complaints processed in line with the NHS Complaints Handling Procedure.



Facebook and Twitter

NHS Tayside launched our Facebook and Twitter sites in July 2010 as an additional way for communicating with staff, patients, carers and members of the public.

NHS Tayside’s Facebook page www.facebook.com/NHSTayside currently has 12,682 followers, 3441 more followers than in 2016/17. Our post reach is also wider and has hit more than 2.2 million on specific posts.

The bulk of our followers come from the 25-34 and 35-44 year old age brackets. 82% of our followers are female, with 26% of those aged between 25-34 years old. An example of this is shown overleaf:-



NHS Tayside's Twitter page www.twitter.com/NHSTayside currently has 10,120 followers, compared to 8,551 followers in 2016/17, with many of them regularly re-tweeting our posts or commenting on them. On average, our monthly impressions on Twitter are around 157,000.

The feedback received on social media is sent to the appropriate individuals, teams or departments in NHS Tayside so they can view the comments and share as appropriate.

Feedback received via Facebook and Twitter is sent to the relevant service to share with appropriate staff. An example of this is:-



There has been a significant increase in the amount of feedback and messages received via social media in recent months, which reflects the wider use of social media among the population. The majority of feedback highlights positive patient experience.

An example of this is a compliment received on Facebook:

“My daughter was a patient in Ninewells ward 30 then ward 29 overnight following a tonsillectomy, the care we received from Lynn and her student nurse Abby (in 30), all the anaesthetic and theatre staff then from Dawn and Ashley overnight in ward 29 was nothing short of fantastic, they made an anxious time far less stressful”

1.6 NHS Tayside Public Partners Network

NHS Tayside Public Partners are members of the public who have an interest in health and health related issues who give freely and willingly of their time to work in partnership with NHS Tayside. They do not require specialist skills, knowledge or experience of health care.

Public Partners act as a sounding board for NHS Tayside by giving their views in the development of strategies and policies and in the redesign of services. They have the opportunity to challenge proposals, contribute to decision making on service developments and participate in consultations.

Following every engagement activity, Public Partners are asked to complete an evaluation form. Evaluating activities helps identify any areas which require to be addressed and assists in ongoing improvements.

During the period of the report, Public Partners have contributed to a range of issues. Discussion groups led by NHS Officers to gather views and opinions have been held on the following topics:-

- **Interpretation and Translation: Service Options Appraisal and sharing information publicly**

Public Partners were invited to provide insight into how information about the Interpreting Service might be usefully shared. The aim of the focus group was to also increase Public Partners’ awareness of the Options Appraisal process which is becoming more frequent in NHS Tayside. Public Partners’ feedback will be used when the advice and guidance around provision of Interpretation & Translation services is updated to take cognisance of new contract arrangements.

- **Review and Agree Wording of Patient Letters from New TrakCare Electronic System**

NHS Tayside was replacing its Patient Administration System, TOPAS, with the nationally mandated system TrakCare. All patient letters had been rebuilt using the current format and wording from TOPAS and these required to be reviewed before using the new system. Public Partners were asked to review the letters from a patient perspective, checking that the content was clear, appropriate and with a suitable tone. The group fully engaged in the discussions and were invaluable in defining the wording of patient letters. Most of the suggestions were incorporated into the letters that are sent from the TrakCare system.

- **Participation Standard 2016-2017 Feedback, Comments, Concerns and Complaints Annual Report**

NHS Tayside took the opportunity in 2017/18 to hold a focus group with Public Partners to give an overview of our 2016/17 annual feedback report and how the participation standards had been met. Members were then asked for their views on the levels of attainment of NHS Tayside's Participation Standard Self Assessment based on the report and endorsed the assessment ahead of its submission to the Scottish Health Council.

- **Patient Mealtime Audits within Angus Community Hospitals**

Catering services aimed to improve the standard of the Patient meal service by developing Public Partnership working. This objective was to support the monitoring, evaluation and consultation plan within the Food Fluid and Nutrition Policy. Angus Catering services invited Public Partners as part of a Catering audit group to meet on a quarterly basis at different locations throughout Angus to monitor, identify and share good practice and areas for improvement resulting from the audit. The audit process involved visiting the production kitchens for a walk round to meet with staff to hear about the facility, processes and layout. This was followed by a tasting and feedback session at which the Public Partners were asked to complete a meal auditing tool questionnaire. Following the audits, the group was shown patient menus and discussed topics including nutritional information, inpatient experiences and portion sizes. There was also information available about policies and procedures. The menus are being reviewed as a result of comments made by the Public Partners.

- **Website Review – Placement of the Food Fluid and Nutritional Care Policy on NHS Tayside Internet Site**

Public Partners were invited to look at NHS Tayside’s internet site where the Food, Fluid and Nutritional Care Policy was located and to discuss if the format was acceptable and accessible to the public. From comments submitted by the Public Partners, amendments were made to the website.

- **Review of Dietary Leaflets**

In order to enhance patients with Inflammatory Bowel Disease nutritional knowledge on diet, patient resources in the form of leaflets were developed. A focus group with Public Partners was held to review the leaflets to ensure they were patient and public friendly. The Public Partners gave their views on spelling and grammar which they considered, if explained in simple terms, made the leaflets easier to understand. This feedback was used to update the resources.

- **National In-patient Experience Survey Results 2016**

Survey questionnaires were sent out in January 2016 to 2,184 people who stayed overnight in an NHS Tayside hospital between 1 April and 30 September 2015. The survey asked questions about people’s experiences of admission, the hospital ward and environment, care and treatment, operations and procedures, staff, leaving hospital, care after leaving hospital and medicines. An area which was identified to progress organisational learning and improvement because the results warranted deeper enquiry was Noise at Night (by other patients). A focus group with Public Partners was held to discuss their suggestions for consideration and improvement which would support staff to manage/reduce noise from other patients within a ward area. Positive suggestions for improvement were made and in particular the suggestion of incorporating a section on ‘noise at night’ within relevant information leaflets to manage expectations. A section regarding “Noise” has been added to the ‘Coming Into and Leaving Hospital Explained’ leaflet.

- **Patient Information Leaflets for Nuclear Medicine Procedures**

Nuclear Medicine procedure patient information leaflets had recently been reviewed and Public Partners attended a focus group to look over the leaflets to ensure they were patient and public friendly. Public Partners commented on spelling, terminology, grammar and made useful recommendations. The majority of feedback was taken onboard to update the leaflets.

- **Improving People’s Experience of Unplanned Hospital Admissions**

People who live with one or more advanced illnesses or who face a new life-threatening illness or general deterioration of their health may experience an unplanned hospital admission at some point in their illness journey. This project is aimed to improve the discussions that happen between hospital staff, patients and families when someone has an emergency admission to hospital.

In addition to holding a focus group with Public Partners, the Lead Officers of the Project Team engaged with staff, patients, carers and families around communication and decision making relating to unplanned admissions.

Public Partners were also given an opportunity to feed back on draft resources to help hospital staff have better conversations with patients and families about planning care and making decisions. The Public Partners’ feedback contributed directly to a programme of related quality improvement activities currently being developed in hospital wards at Ninewells Hospital and the Royal Infirmary of Edinburgh. Their feedback also helped shape the draft resources which are now being tested with staff, patients and families in those localities.

- **Shaping Surgical Services Consultation Materials**

This session had been arranged as a follow-up to previous training undertaken by a small group of Public Partners around informing, engaging and consulting. The aim of the session was to ask for feedback on the draft Shaping Surgical Services consultation documents and to also seek views on the planned programme of consultation activities. The contribution was invaluable in seeking Public Partners’ views on the draft consultation materials and many of the recommendations made were taken on board and incorporated into the documents.

- **Integrated Clinical Strategy**

In partnership with staff, Public Partners and Dundee, Perth & Kinross and Angus Health & Social Care Partnerships, NHS Tayside is developing an ‘Integrated Clinical Strategy’ that reflects the changing needs of Tayside, advances in care and in light of financial and workforce challenges that are impacting upon current models of care. NHS Tayside Integrated Clinical Strategy will support the intended changes in service delivery across acute care, health and social care delivery over the next 5-10 years with an affordable financial framework and workforce plan.

A focus group was held in order to share the aims and objectives of developing the strategy and to seek Public Partners' input and suggestions on its content and also advise on how to capture patient, carer, public and other stakeholder input to this. The feedback received will be used to help inform the development of the strategy and offer advice on methods involving the wider stakeholder group including patients, carers and the public.

- **Review of NHS Tayside Public Partners' Application Pack**

The Public Involvement Team was embarking on a recruitment campaign and was keen to make the role of the Public Partners more challenging. An application pack was developed to reflect this proposal. The purpose of the project was to gain the Public Partners' perspective as to the content of the pack and to put forward suggestions for the enhancement of the Public Partners' role. The contribution was invaluable in seeking Public Partners' views on the content and layout of the Application Pack. Their feedback has been incorporated into the final document which has made it more public friendly, easier to follow and describes the role in a more enhanced manner.

- **Older People Clinical Strategy Workshop**

Clinicians, Service Providers, other Stakeholders from Health & Social Care across Tayside and Public Partners participated in this workshop to review whether the current Older People Clinical Services Strategy (2015-2020) meets the requirements of an evolving health & social care context for older people. All were appraised of the achievements of the Older Peoples Clinical Board and were asked to contribute to how services can be developed to improve older person's outcomes and experiences in NHS Tayside. Their contribution was included in the overall findings from the event.

Section 2 – Encouraging and Handling Complaints

This section aims to demonstrate how NHS Tayside responds to complaints, the improvements that have been made in responding in a timely manner to complainants and the links being made between the management of serious and adverse incidents and complaints.

A National NHS Scotland Complaints Handling Procedure (CHP) was implemented on 1 April 2017. The new procedure gives all staff the opportunity to listen, learn and use feedback to support improvement and enhance people’s care experience in Tayside. It improves the way the NHS handles complaints.

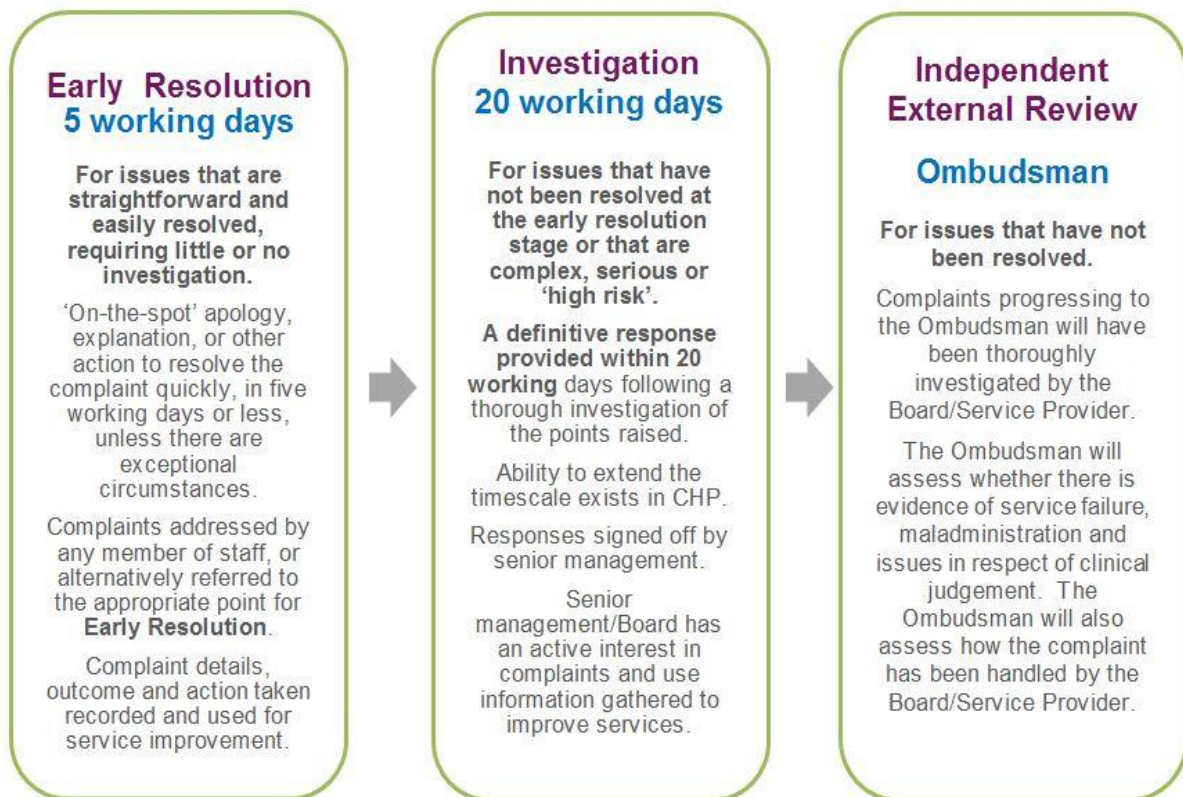
The revised procedure introduced a distinct 2-stage process. The first stage is a five working day stage for early, local resolution, with the second stage for complaint investigation within 20 working days. This new procedure is intended to support a more consistently person-centred approach to complaint handling.

The broader ambition for the NHS in Scotland to be an open, learning organisation that listens and acts when unintended harm is caused is reflected in the CHP, which also complements the Duty of Candour provisions set out in the Health (Tobacco, Nicotine etc and Care) (Scotland) Act 2016. This encourages apologies to be made and makes it clear that apologising is not an admission of liability.

Within NHS Tayside, we want people who use our services to be heard and to have concerns and complaints addressed at the earliest opportunity. We can now do this via the new 2-stage process.

Implementation of the new 2-stage process has assisted in the early resolution of complaints, with 1167 of the 2155 complaints received in 2017/18 resolved at stage 1 (54%). Feedback received from staff indicates support for this change, with one staff member reporting “I’ve found that patients really appreciate a phone call and early resolution, so it’s much more patient friendly”.

The NHS Model Complaints Handling Procedure



2.1 Complaint Numbers and Response Times

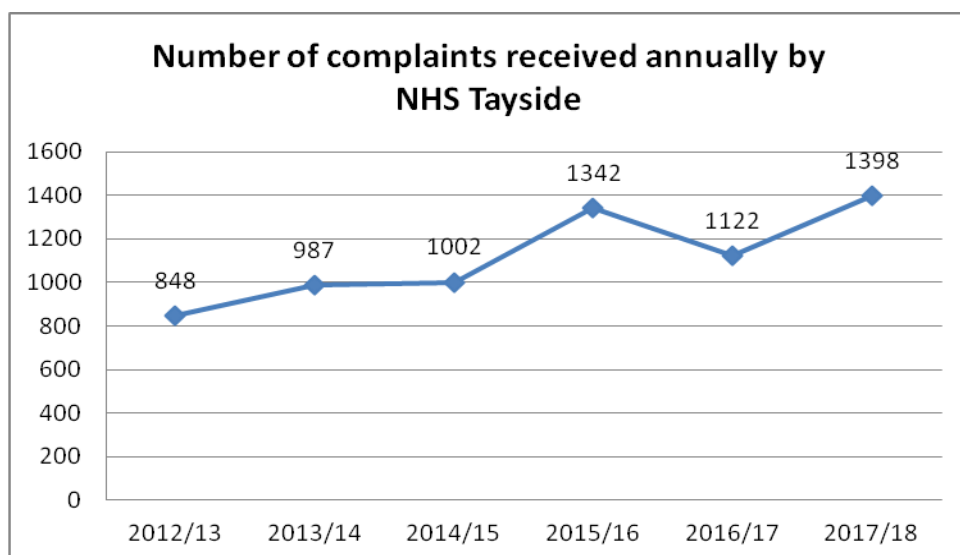
Complaints are a form of feedback that offers NHS Tayside valuable information about the experience of patients, carers and their families. NHS Tayside aims to learn from this feedback and utilise it to inform improvements in the care and services provided. Examples of learning that have taken place as a result of complaints can be found in Section 4 of this report.

NHS Tayside has seen an increase in the number of complaints received this year from 1497 in 2016/17 to 2155 in 2017/18. It has been noted that the main area for the increase is in prison healthcare complaints. In 2016/17 NHS Tayside received 375 complaints from prison healthcare, however this has risen to 757 in 2017/18 an increase of 382 complaints which equates to an increase of 32 per month. This means that the increase in complaints across Acute Care and Health and Social Care Partnerships was 276 for the year, the equivalent of an additional 23 complaints per month.

Due to the new NHS Complaints Handling Procedure, all complaints received since 1 April 2017 are either classified as a stage 1 or stage 2 complaint. Of the 2155 complaints received in 2017/18, 1167 were stage 1 and 988 were stage 2 (non-escalated and escalated from a stage 1 complaint).

Figure 3 below shows the number of complaints received by NHS Tayside annually since 2012/13. These figures exclude complaints from prison healthcare. It should be noted that the data reflects the numbers and not nature and complexity of complaints. Of the 1398 complaints received in 2017/18, 570 were stage 1 and 828 were stage 2 (non-escalated and escalated from a stage 1 complaint).

Figure 3 – Number of complaints received by NHS Tayside annually from 2012/13 to 2017/18 (excluding prison healthcare)

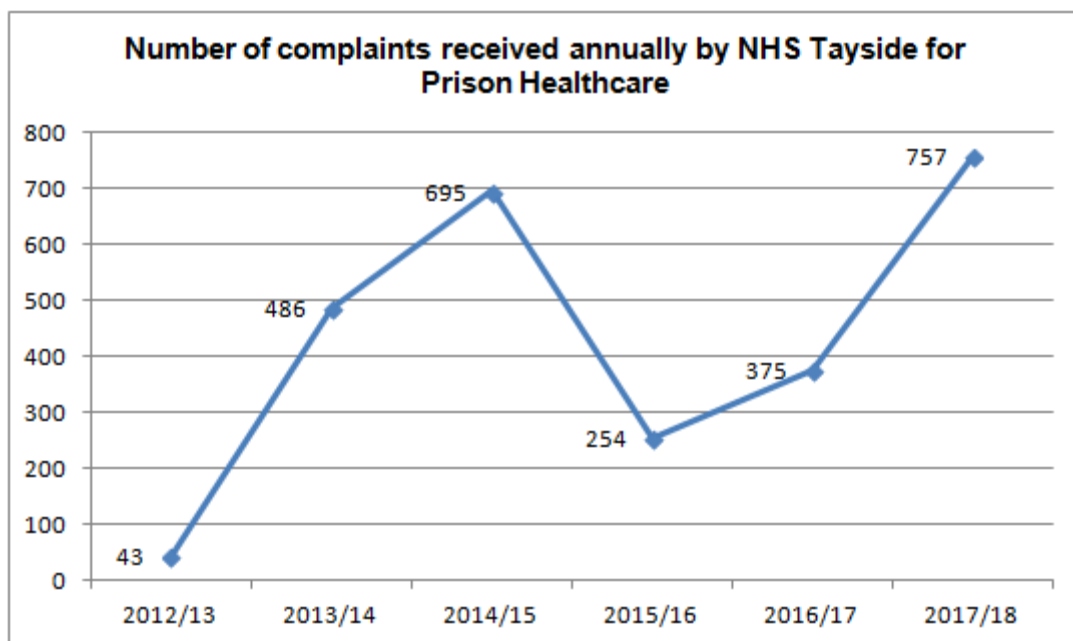


The number of complaints relating to prison healthcare continues to challenge the service to respond within the agreed timescales.

In our 2015/16 Annual Feedback Report, NHS Tayside reported on work which had been undertaken to identify improvements to ways of working. This included the need for staff to meet with patients at an early stage to discuss concerns and address the issues raised. In addition, it highlighted that service requests were being recorded as complaints and that these should be handled separately. At that time, a reduction in the number of recorded complaints was reported.

Implementation of the new NHS Complaints Handling Procedure in April 2017 has seen a change in the recording of complaints within prison healthcare, with issues which may have previously been addressed as concerns now being handled and recorded as stage 1 complaints. Of the 757 prison healthcare complaints received in 2017/18, 597 were stage 1 and 160 were stage 2 (non-escalated and escalated from a stage 1 complaint). Staff within prison healthcare are being supported by the NHS Tayside Complaints and Feedback Team to manage the increased volume of complaints, with a member of the Team working within the Prison one day per week. However, it is recognised that further work is required to improve the handling of complaints in line with the new NHS Complaint Handling Procedure, including resource and training requirements.

Figure 4 – Number of complaints received annually by NHS Tayside for prison healthcare from 2012/13 to 2017/18



NHS Tayside received 2155 complaints of which, at the time of writing this report (14 May 2018), 2060 are closed (95.6%). The table below shows the breakdown for the number of complaints received and closed at each stage of the complaints process.

Table 2: Number of complaints closed at each stage

	Number of complaints received	Number of complaints closed	Percentage of complaints closed
Stage 1	1167	1167	100%
Stage 2 non escalated	624	552	88.5%
Stage 2 escalated	364	341	93.7%

NHS Tayside is required to record the outcome for each closed complaint. The outcome of a complaint is either that it is upheld, partially upheld, not upheld, withdrawn, irresolvable, transferred to another unit or consent not received. The table below shows the number of closed complaints at each stage that had a formal outcome recorded of either upheld, partially upheld or not upheld.

Table 3: Complaints upheld, partially upheld and not upheld

	Complaints upheld	Complaints partially upheld	Complaints not upheld
Stage 1 1167 complaints closed	241 (20.7%)	353 (30.2%)	513 (44%)
Stage 2 non escalated 552 complaints closed	108 (19.6%)	221 (40%)	179 (32.4%)
Stage 2 escalated 341 complaints closed	77 (22.6%)	112 (32.8%)	112 (32.8%)

Response Times

NHS Tayside is aware of the need to continue to try to improve response times to complaints. In 2016/17 94% of all complaints received were acknowledged within three days and this has improved to 96.3% in 2017/18.

Due to the introduction of the new NHS Complaints Handling Procedure in 2017/18 it is not possible to provide a direct comparison of our response rates with previous years, therefore the figures presented focus on our response times for complaints received in 2017/18 only. All the response times quoted are based on the complaints that have been closed at the time of reporting (14 May 2018). As noted in Table 2 above, all stage 1 complaints were closed

and there were 95 stage 2 complaints (escalated and non-escalated from a stage 1 complaint) which remained open. These open complaints have not been included in the response rates or average response times provided within this section.

The percentage of stage 1 complaints responded to within 5 working days was 85.2% and the percentage of stage 2 complaints (non-escalated and escalated from a stage 1 complaint) responded to within 20 working days was 41.8%.

Work is continuing to raise awareness and provide training for staff to enable further improvements to be made to support a more timely response to the complaints that we receive. NHS Tayside has seen an increase in the number of complaints recorded over 2017/18, with the implementation of the new NHS Complaints Handling Procedure providing guidance on issues which should and should not fall within this remit. NHS Tayside's definition of a complaint is:

'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'.

Figure 5 below shows the percentage of stage 1 complaints responded to within 5 working days by NHS Tayside over the past 12 months. This shows variation between 79.8% and 91.8% of complaints per month being responded to within the agreed timescale. Figure 5 is also provided to show the average response times for stage 1 complaints. This demonstrates that the average response time throughout 2017/18 varied from 2.4 days to 4 days.

Figure 5 - Percentage of closed Stage 1 complaints responded to within 5 working days

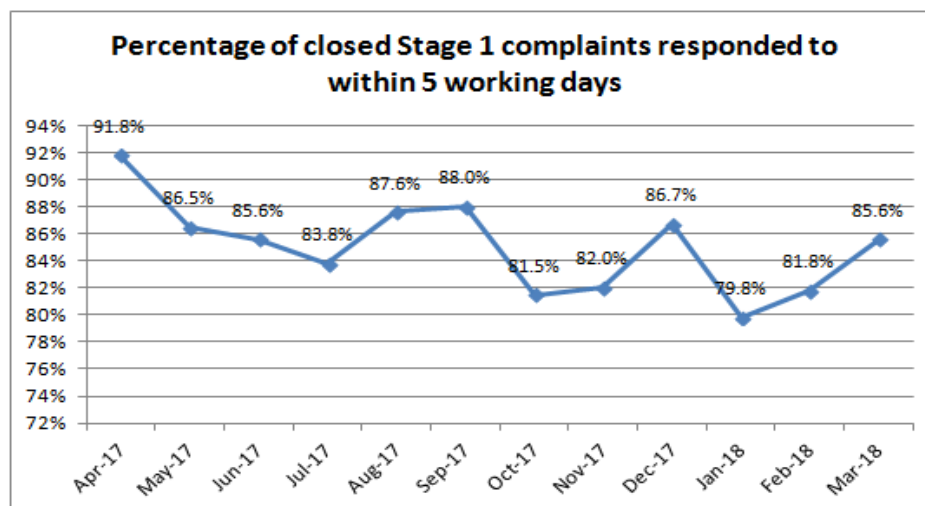


Figure 6 – Average response times for closed Stage 1 complaints in working days

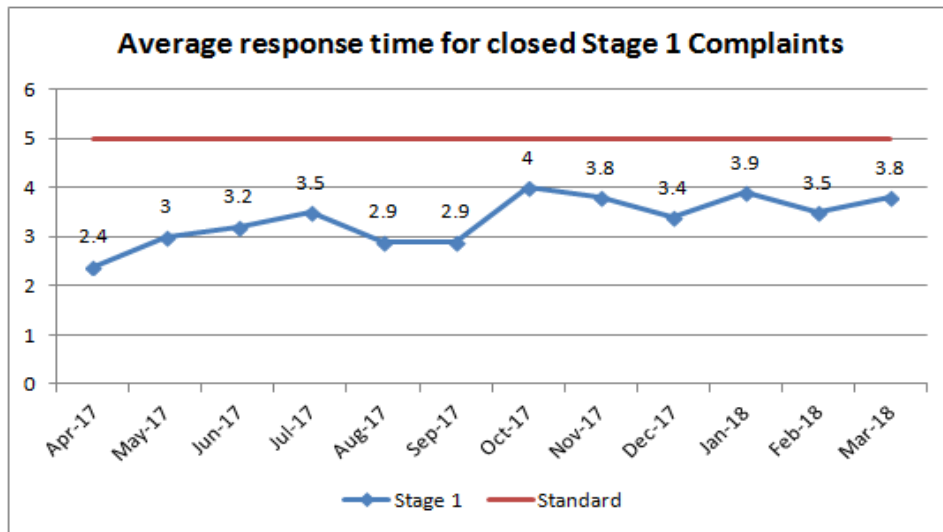


Figure 7 below shows the percentage of stage 2 complaints (non-escalated and escalated from a stage 1) responded to within 20 working days by NHS Tayside over the past 12 months. This shows variation between 22.7% and 73.1% of complaints per month being responded to within the agreed timescale. Figure 8 is also provided to show the average response times for stage 2 complaints (non-escalated and escalated from a stage 1). This demonstrates that the average response time throughout 2017/18 varied from 17.1 days to 40.4 days.

Figure 7 – Percentage of closed Stage 2 (escalated and non-escalated) complaints responded to within 20 working days

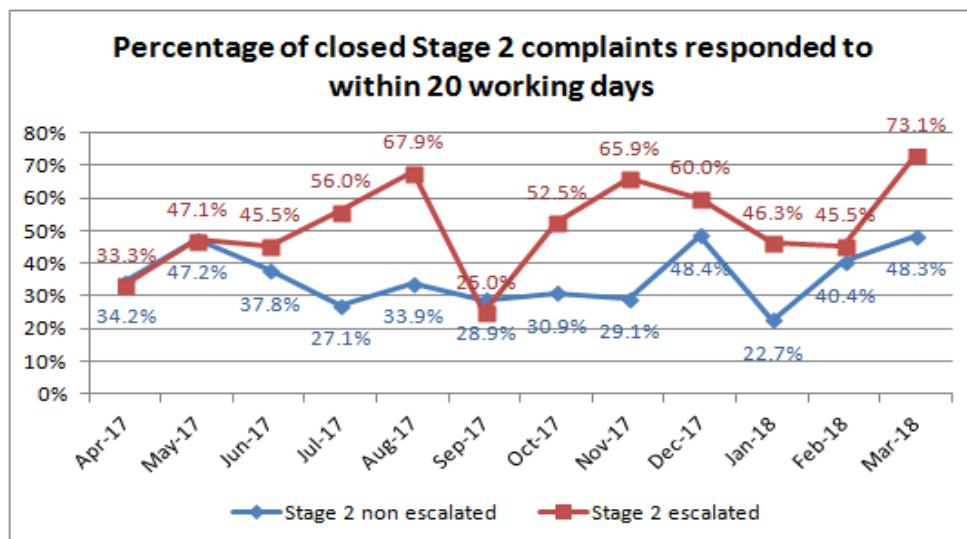
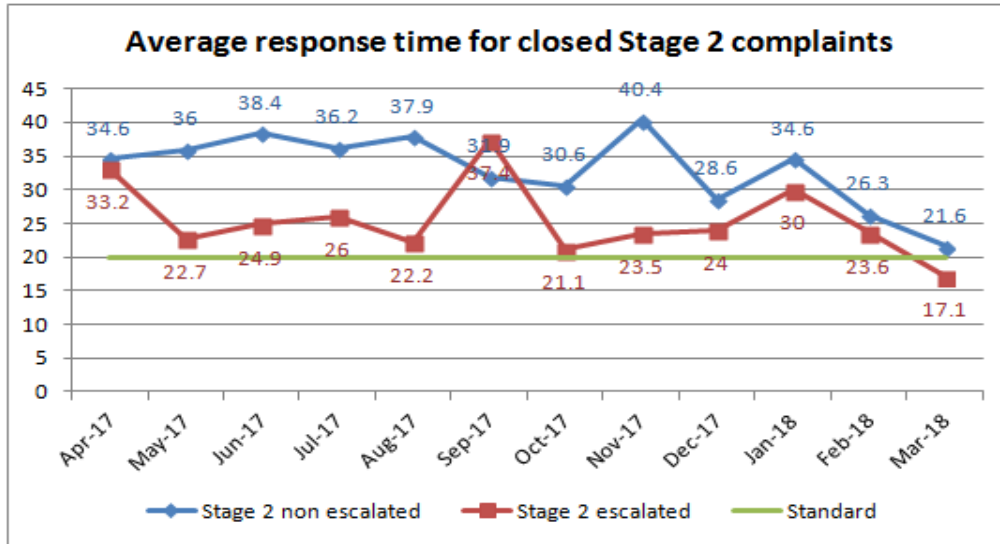
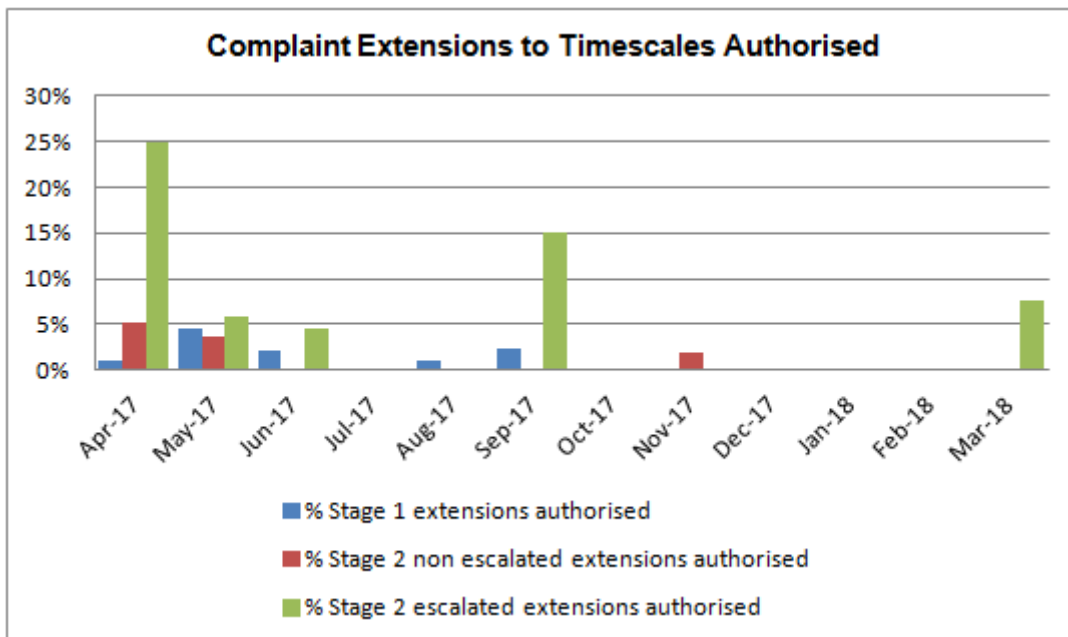


Figure 8 – Average response times for closed Stage 2 (escalated and non-escalated) complaints in working days



The model CHP requires an extension to the timescales to be authorised in certain circumstances. Figure 9 provides detail of when extensions to timescales were authorised. It is recognised that further work is required to ensure that agreement to an extension is sought and recorded.

Figure 9 – Percentage of complaint extensions authorised per month by stage of complaint



In addition to complaints, the Feedback Team within NHS Tayside also acts as a point of contact for people who wish to highlight concerns or make enquiries. These are forms of feedback that are not classified as complaints. Table 4 below shows data in relation to the volume of concerns and enquiries received in 2017/18 compared to the numbers received in 2016/17.

Table 4: Volumes and types of feedback received in 2017/18 compared to 2016/17

Type of Feedback	2016/17	2017/18
Concerns	268	141
Enquiries	246	147

It is recognised that the reduction in concerns and enquires, and the subsequent increase in numbers of complaints, may be due to the implementation of the new CHP and the guidance provided regarding the definition of a complaint.

Scottish Public Services Ombudsman (SPSO)

The Scottish Public Services Ombudsman (SPSO) is the final stage for unresolved complaints about a number of public services, including the National Health Services. The SPSO will examine complaints referred to them that have already been through the formal complaints procedure of the organisation concerned. In 2017/18, 29 complaint cases from NHS Tayside were referred to SPSO, compared to 19 cases in 2016/17. The SPSO have recently made a number of recommendations to NHS Tayside specifically in relation to the handling of complaints.

- review the complaints handling procedures for staff and patients for consistency
- feed back to staff the importance of ensuring that complaint responses address the concerns raised
- remind staff of the importance of replying to complaints in a timely manner and communicating effectively regarding delays
- ensure that information about the complaints procedure is accessible and made easily available to patients

NHS Tayside commenced a refresh of complaint handling during 2016/17, focussing on early resolution of complaints. The new NHS Complaints Handling Procedure was implemented on 1 April 2017. This work has included training sessions for staff across the

organisation on the power of apology and investigation skills. In addition, ad hoc awareness sessions with services are ongoing to spread learning and ensure all staff are aware of the standards expected when handling complaints.

Staff should access the LearnPro modules on Customer Care, NES (NHS Education for Scotland) Complaints and Feedback module, including the Power of Apology and NES Investigation of Complaints module. Ad hoc training sessions on early resolution skills (Complaints Awareness Raising and Value of Apology) have also been provided by members of the Complaints and Feedback Team. In addition, the Complaints and Feedback Team have provided training to pre-nursing students on complaint handling and the power of apology.

Staff, including members of the Complaints and Feedback Team, have recently attended national workshops on the new NHS Complaint Handling Procedure and the Duty of Candour. Local workshops are also being held to raise awareness of the Duty of Candour legislation and requirements for staff.

2.2 Themes Identified From Complaints

The top five themes raised consistently in complaints are shown below in Figure 10. Further review of these themes demonstrates the following consistent sub-themes from complaints; Unacceptable time to wait for an appointment/admission; Disagreement with treatment plan/care; Lack of clear explanation; Problems with medication and Staff attitude.

NHS Tayside shares learning from complaints, encouraging staff to reflect on practice and behaviours as well as consider service improvements that could be made in their areas.

Figure 10 - Themes from Complaints received in 2017/18



2.3 Complaints Handling Approach

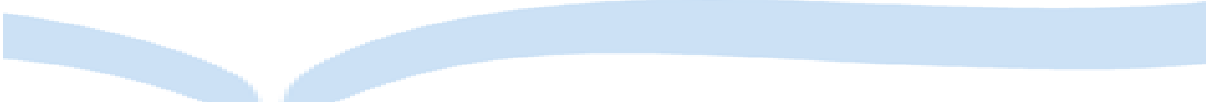
We are continuing to work with staff to manage complaints more effectively, encouraging personal contact with complainants as soon as complaints are received and facilitating face-to-face meetings to ensure we fully understand the issues that require to be investigated to resolve concerns and produce better quality responses. In 2017/18, 106 complainants had a face to face meeting with our staff to discuss and address their concerns; this is a slight increase on the number of meetings that were held during 2016/17 (101).

We recognise that a large proportion of our complaints relate to waiting times. In response to this, NHS Tayside intend to commence the publication of waiting times for all routine elective referrals for outpatients and inpatient/day case procedures on our website. This information will also be shared with General Practitioners to enable them to advise their patients of the current waiting time and therefore manage expectations. In addition, we will be reviewing our treatment time guarantee (TTG) letters to advise patients of how they can access this information.

The new NHS Complaint Handling Procedure (CHP) set out the requirement for NHS Boards to seek feedback from complainants on their experience of the complaints service provided. The Complaints and Feedback Team considered different methods to capture this feedback in compliance with the Data Protection Act, with the requirement for complainants to “opt-in” rather than “opt-out”. It was decided that a survey would be developed with the questions based on the suggested themes in the new CHP, with the survey made available via a paper questionnaire with a Freepost envelope and an electronic survey provided via Survey Monkey. To date, this approach has failed to generate a response rate to inform learning for the service. Further consideration is being given to different approaches which may be used to seek feedback and encourage greater engagement with this process, with an opportunity to learn from other organisations. Actions and outcomes from this work will be shared in next year’s report.

2.4 Linking the Management of Complaints with Serious and Adverse Events

The DATIX system is an electronic system for the recording of complaints, risks, adverse events, legal claims and requests for information. In the management of complaints, adverse event reviews may be used as part of the investigation process to inform our response, actions to be taken and learning.

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NHS Tayside considers complaints to be adverse events and as such must be managed in the same way. The Adverse Event Management Policy is applied to relevant complaints, ensuring that Local Adverse Event Review (LAER) and Organisational Adverse Event Review (OAER) methodologies are applied to enable local and organisational learning.

Communications with the patient/family/carer are vitally important to ensure they are kept informed of the process and receive direct and accurate responses.

During 2017/18, patients, families and carers were provided with the opportunity to contribute to the Local Adverse Event Review process. This process must be “transparent and include all those involved in the adverse event: patients, service users, families and carers and staff”. To support this, local adverse event review reports should be shared with everyone involved in the event and a one-page learning summary completed and published in order to share key learning points more widely.

This means that patients, families and carers may request (through a Data Protection Subject Access Request) and be entitled to a copy of the Local Adverse Event Review report. These reports should be in a format that can be shared with patients, families and carers and also any external agency who requests the report, such as the Mental Welfare Commission or Procurator Fiscal.

Organisational Adverse Event Reviews - previously Significant Clinical Event Analysis (SCEA) - focus on events which have significant organisational learning. There is no pre-determined list of events for which an Organisational Adverse Event Review will be conducted however if, after completion of the Local Adverse Event Review process, the review team consider there to be organisational learning then an Organisational Adverse Event Review should be requested.

Organisational learning from the Local Adverse Event Reviews and Organisational Adverse Event Reviews is a crucial component of reducing harm and improving safety. This learning is shared across the wider organisation through communications such as the “Getting It Right” Newsletter. In addition, the use of one page summaries highlighting both good practice and areas of learning are distributed to all Clinical Governance forums. Adverse event data is also considered as part of the NHS Tayside Performance Review process.

A review of the NHS Tayside Adverse Events Management Policy was undertaken during 2017/18 and will be undertaken again during 2018/19. The outcome of this review, a summary of the changes and its link to our Complaints Handling Procedure will be shared within next year's annual report.

2.5 Independent Contractor Complaints – General Practitioners, Dentists, Opticians and Pharmacists

The new NHS Scotland Complaints Handling Procedure was introduced under the Patient Rights (Complaints Procedure & Consequential Provisions)(Scotland) Amendment Regulations 2016 and sets out the requirement for NHS Boards to gather and report on information from health service providers within their area from April 2017.

As a requirement under the Patient Rights Act (Scotland) independent contractors are themselves responsible for managing and responding to feedback, including complaints, about their services. Well developed procedures have been in place within General Practice, Dentists, Opticians and Community Pharmacies and these procedures have been modified to reflect the new requirements. The new requirements are bedding into practices through training and education sessions at local levels. People raising complaints are encouraged to seek resolution with the contractor and have access to the Scottish Public Services Ombudsman (SPSO) where they feel this has not been achieved.

All independent contracting groups have their own local protocols underpinned by their professional bodies' complaints handling standards. Dental and ophthalmic practices clearly display their complaints procedure within the practice. General Practices have their own complaints procedure which is clearly visible within their practice leaflet or advertised within their premises and they also have a range of mechanisms that support the sharing of learning from complaints and feedback:-

- Several practices in Tayside have well developed patient participation groups
- Learning opportunities during Protected Learning Time
- Scottish Public Services Ombudsman (SPSO) reports are shared and attendance at organisation wide Significant Clinical Event Analysis (SCEA) reviews is encouraged.

A summary of the complaints received in each quarter for the four independent contracting streams is shared with the NHS Tayside Primary Care (Independent Contractors) R3 Clinical Governance Group.

Practices have indicated that patient feedback has:

- Reminded staff of the need to listen closely to patient concerns and to ensure that they fully understand what the patient's concern is
- Enabled reviews of protocols and policies, for example in handling results and for a pharmacy handing out procedures
- Resulted in additional training for administrative staff in the appointment booking system and in customer service training
- Provided staff with positive feedback, for example upon their telephone manner.

Some specific examples that have been shared with the Board of how patient feedback has been used to improve patient services during the last year are shown below.

Scenario 1

The need for better communication between community staff and practice staff was highlighted. This led to community staff attending practice development days to allow the team to work through processes to ensure better passing of information regarding deteriorating patients.

Scenario 2

Patients had raised complaints about the length of time they had to wait in the new "cloud based" telephone queue. The practice reviewed the system and consulted with the patient advisory group. As a result the practice reverted to a traditional telephone system, which required the patient to redial if the line was engaged, as this was felt to be a fairer approach.

Scenario 3

Following a complaint, the practice introduced an additional message on prescription re-order slips and on surgery notices to highlight to the patient the timeframe for ordering repeat medication. Staff can now signpost patients to the message on the re-order slip and/or surgery notices to avoid misunderstanding.

Table 5 shows the numbers of complaints received by each group of Independent Contractors. It should be noted that the information provided below includes the 3 General Practices which are managed by NHS Tayside Board.

Table 5 - Complaints received by Independent Contractors between 1 April 2017 and 31 March 2018

Type of Independent Contractor	GP	Dental	Pharmacy	Opticians	Totals
Number of Complaints received	523	104	242	227	1093

Section 3 – The Culture, including Staff Training and Development

This section describes how NHS Tayside is continuing to develop a culture that values all forms of feedback and supports its staff to use this information to learn from and improve the patient experience.

The need to build capacity in frontline staff, through strong clinical leadership, role modelling and professional supervision is recognised in order to optimise patient and carers' experiences and to react appropriately when individuals raise dissatisfaction or make suggestions. It is recognised that, until this becomes embedded in the culture and behaviour of all staff it will be difficult to fully implement all the changes required to ensure our approach to feedback and complaints is truly person centred. As a result, this section describes some of the national and local work and training NHS Tayside is taking forward and has available to support a culture that encourages feedback and responds openly to concerns.

3.1 Developing NHS Tayside's Culture Through our Vision and Values



The purpose of iMatter is to help individuals, teams and Health Boards understand and improve staff experience. Ownership of the reports, conversations and development of improvement action plans sits within the team.

The iMatter Staff Experience Continuous Improvement Model has now been rolled out to all staff in NHS Tayside and our integrated teams in Dundee and Angus. Over the past three years, targeted support to directorates has enabled the positive uptake and implementation of iMatter across all of our services.

NHS Tayside can now celebrate its first iMatter report, which shows that 65% of the workforce (8,862 employees) participated in iMatter in 2017. Evidence shows that the better the experience of staff at work, the better the experience of patients and their families. By focussing on staff experience at work, iMatter will help to have a positive impact on patient experience too.

Culture Programme

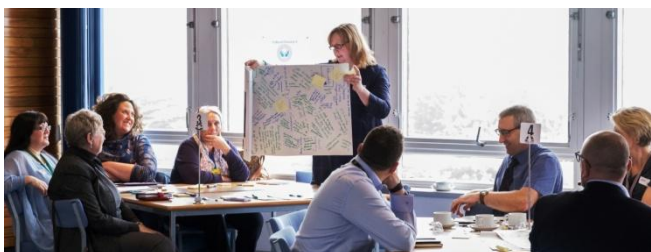
In June 2016 the Staff Governance Committee (SGC), on behalf of NHS Tayside Board, commissioned work to understand NHS Tayside’s current leadership capabilities and culture. The opportunity to use the evidence based tools developed for Collective Leadership was agreed, using the contemporary Kings Fund/NHS Improvement culture diagnostic tools.

In May 2017 the Board heard the key learning and insights gained from running the Phase 1 Diagnostics toolkit, illustrating different sources of data collection about NHS Tayside’s current leadership state. In appreciating these, their correlation with the recent Realising Realistic Medicine interview findings and the current contextual challenges being faced by NHS Tayside, the Board endorsed the application of Phase 2 – the Design Phase.

Throughout the ‘Design Phase’ the work has been reframed as “Compassionate & Inclusive Leadership”. This reframe reflects the influential views of many people across NHS Tayside in bringing this whole system large scale cultural and leadership development work to this stage. Progress is rooted in a strong evidence base, both from the literature as well as through the contemporary efforts to understand what would make a real difference, contextually, here in NHS Tayside.



Between May and December 2017 the process of engaging, co-producing and generating a set of strategic priorities was secured to underpin the collective focus and momentum in creating the necessary leadership capabilities as the collective norm in Tayside. Through



extensive engagement, NHS Tayside has benefited from the views and influences of opinion leaders during the process from across our whole health & care system in Tayside. This included the facilitation of two workshops

attended by 34 different people across the two workshops. NHS Tayside has also benefited from peer review and expert advice from both Michael West at the Kings Fund and the NHS Improvement Team in England to support the developments and progress that has been made.

Through this process, an initial 12 strategic priorities were identified that through their enacting will create the necessary conditions going forwards. These were highlighted and discussed by the Board in November 2017. Board members present recognised the valuable direction and learning that had been achieved so far and the continuous nature of this process to create the commitment, engagement and ownership of this work as it connects with and underpins the delivery of a successful Integrated Clinical Strategy. Further work is ongoing to refine these 12 priorities into 3-4 defined areas for action which will continue to support the culture and behaviours of NHS Tayside, providing an environment that encourages feedback and is open to concerns.

3.2 Training and Education

In conjunction with current staff/team training plans, there are key strategic areas of training that continue to be identified and taken forward, to facilitate the “feedback” agenda.

As noted in Section 2 of this report, NHS Tayside has undertaken a refresh of complaints handling, focussing on early resolution of complaints in line with the new NHS Complaints Handling Procedure which was implemented in April 2017. Our aim is to ensure people who use our services are heard and have concerns and complaints made right at the earliest opportunity. We want feedback to support service improvement and enhance people’s care experience and we recognise that, to make this possible, we need staff with vision, confidence and the right skills. As a result we held master classes focused on the following areas:

- Early contact and putting things right
- The Power of Apology – Communicating at our best
- Investigation skills and writing person centred responses

Further training sessions on early resolution skills (Complaints Awareness Raising and Value of Apology) have also been provided by members of the Complaints and Feedback Team. The Team also contributes to a lecture programme for pre-nursing students, providing training on complaint handling and the power of apology.

Staff, including members of the Complaints and Feedback Team, have recently attended national workshops on the new NHS Complaint Handling Procedure and the Duty of Candour. Local workshops are also being held to raise awareness of the Duty of Candour legislation and requirements for staff.

NHS Tayside continues to provide a variety of training and development programmes to support staff in responding appropriately to feedback, concerns and providing early resolution. Some particular examples worthy of highlighting include:



LearnPro modules

The following LearnPro modules are available to staff to support a culture that encourages feedback and responds openly to concerns. The updated LearnPro modules on Complaints and Feedback, including the Power of Apology, and Investigation of Complaints reflecting the new NHS Complaint Handling Procedure were released by NES (NHS Education for Scotland) in August 2017.

- NHS Tayside Customer Care = accessed by 1492 staff
- NES Complaints and Feedback 2017 = accessed by 96 staff
- NES Investigation Skills = accessed by 45 staff
- Duty of Candour = accessed by 532 staff

Sage and Thyme ® Communication Skills Programme

SAGE & THYME provides staff with a framework to engage patients who are distressed that is person-centred and empowers the person to take control of their distress. The evidence base behind the approach is that staff often recognise the cues that a person is distressed however often do not respond due to concerns that they will get involved in a protracted discussion that they do not have time for or the conversation may raise issues that they will not know how to respond to. The SAGE & THYME structure provides staff with confidence to engage patients who are distressed, to recognise that the person often knows what will help, drawing on their support networks, that staff do not have to have all of the answers and patients benefit from a compassionate and empathic approach that, at its heart, is about listening to the patient.

NHS Tayside has been delivering on the SAGE & THYME programme since 2013. The workshops are open to local authority partner organisations, GP practice staff, care home staff, third sector staff as well as NHS staff. As the communication skills are at a foundation level, this is open to staff from all areas of NHS Tayside to attend. In 2017, 165 staff attended the workshops, 69 of them with NHS Tayside, and the training programmes that were introduced into NHS Tayside in 2013 continue to be delivered. Evaluation of the workshops on the whole has been very positive. The main themes that emerged were:-

- The use of scenarios to explore the use of the model and relate to real life situations
- Being more confident to recognise and respond to distress rather than avoiding the issue
- Using the SAGE & THYME structure within a conversation to respond to distress
- Empowering the individual to take control of the situation and find their own solutions as opposed to providing solutions
- Less likely to focus on a single issue and gather all of the concerns contributing to distress

Following the continued success of SAGE & THYME, NHS Tayside has committed to a further 10 courses to support staff and teams from across all localities in undertaking this programme during 2018.

Communicating with Families: Managing Difficult Conversations Well Course

The Child and Family Communication Programme was renamed to reflect changes in the course content. The course was developed in response to the national policy direction outlined in Getting it Right for Every Child (GIRFEC), the palliative care pathway and work from the Children with Exceptional Needs (CEN) Managed Clinical Network (MCN). NHS Tayside conducted a review of services for children and families with complex additional support needs. Central to the review were the views of parents of children with complex additional support needs. One of the key priorities that emerged from the feedback from parents was the need for good communication and interaction styles that were family centred, collaborative and sensitive to the child and family needs, especially around sharing difficult news, or receiving a new diagnosis. Parents also highlighted that they needed ongoing support to come to terms with and understand the difficult news.

The course provides a framework for staff to consider how to share difficult news and to support people who have had difficult news, in a person-centred, compassionate and sensitive way. Originally the course was aimed at NHS Tayside staff working with children and families with complex needs. Subsequently, staff across Tayside from all areas have accessed the course. These included education, local authorities and the third sector as well as NHS Tayside staff working within the wider children and families' services.

In 2017, 26 staff attended over two courses. Feedback on what was most beneficial identified that having a wide range of professions within the group helped to learn from each other's experiences; the use of different ways to explore the course content to appeal to different learning styles; having a parent tell their story of how the sharing of difficult news had impacted on both her and her family and being able to put into practice what the participants had learned.

A further development in supporting children and families services has been the introduction of the Important to Me Storyworld course. The aim is to improve collaboration between health care professionals, children, young people and families and is built around the five key ambitions of the Scottish Government's strategy, Ready to Act. The five key ambitions are participation and engagement, early intervention and prevention, partnership and integration, access and leadership for quality improvement. These underpin a transformational change in the way services are designed and delivered and are intended to improve the experience and outcome of care.

A group of 10 trainers undertook a training the trainer event around the use of the storyworld; an interactive resource developed through a social enterprise that promotes discussion around the key themes of motivation, listening, support, expertise and outcomes that facilitates participants to consider challenges around the key themes and ways to address these.

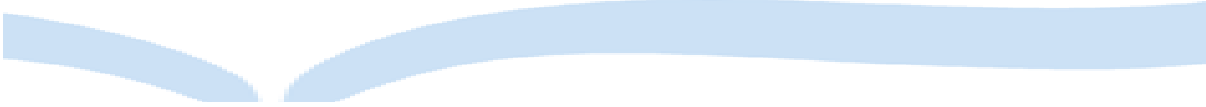
The initial pilot feedback included:

- Partnership can only work if the power is taken out of a “relationship”
- How listening to a person is so important – allowing them the space to talk and be heard
- Feeling more confident in challenging a parent who is not letting their own child give their own view.

The next stage is to implement a roll out of 10 workshops for 2018.

Health Behaviour Change Level 1 & 2 Courses

Health Behaviour Change (HBC) approaches are based upon Motivational Interviewing (MI) approaches and can be described as “a collection of strategies for structuring a conversation with a client/patient that guides and enables the person to talk and consider behaviour change and where the client/patient’s concerns are central.”

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It is a person-centred approach that is directive in nature through the use of specific strategies and interventions that facilitate the client's movement toward exploration, problem recognition (resolving ambivalence) or the decision to change.

HBC courses have been run in Tayside since 2006, with nearly 1,800 staff having attended from across Tayside, from NHS, local authority, third sector, GP practices and many other organisations. In 2013 a level 2 course was trialled, building on the introduction to HBC approaches that the HBC level 1 course delivers to looking more in-depth at an MI approach. Both courses are an initial two days of learning about HBC/MI and subsequently a follow up half day where staff bring back examples of how they have used the knowledge, skills and strategies in their practice.

In 2017, 104 staff attended the 10 HBC level 1 courses, of which 59 staff were NHS Tayside staff. Twenty-eight staff attended the HBC Level 2 course, of which there were four courses run, with 19 staff from NHS Tayside.

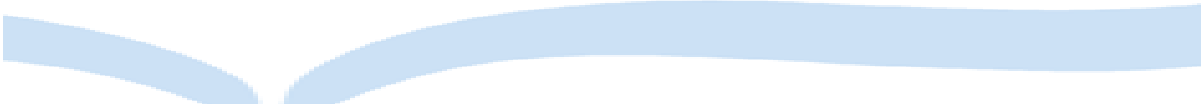
Some comments which evidence the impact of both HBC levels 1 and 2 courses are included below:

“This course covers so many aspects of my work and served as a reminder of how I can do it with a more person centred approach. It has made me question my approaches and reinforced my belief in person centred approach. Most importantly, it allowed me to recognise that while I have to respond to a crisis with resources that are available; this can be followed up with a more person centred approach.”

“For me, motivational interviewing promotes our basic values of treating people with dignity and respect and valuing people. The training has made me reflect on my own practice and question my own approach in ensuring that I work with a person in a manner that allows them to be central and control what is happening around them.”

“I found the whole course really useful. I realised that I was using most of the skills already in my practice, to varying degrees and I learned some new skills and techniques too, the most useful part is to now have a framework and context to use these within to reach positive outcomes. This was really uplifting and positive.”

“I learned a lot from hearing other people's experiences and hearing things from another point of view.”

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“I benefited from using all key skills, sitting back & listening more to what patient has to say, what their wants/needs are. Not what I think they would benefit from.”

“I found the group discussions the most useful, as it helped to learn from what others had tried or implemented in their practice and provided an opportunity for the facilitator to highlight areas of positive practice and areas for improvement.”

Mediation

The Scottish Mediation Services facilitated a workshop for the Complaints and Feedback Team during 2017/18. In addition to providing some of the theory regarding mediation, the workshop covered listening and questioning skills, problem solving and the power of apology. The workshop was well received and provided the Team with some helpful tools and techniques which can be used when faced with conflict to help resolve disputes.

Section 4 – Improvements to Services

Through the report we have explained how we collect feedback and complaints, how we are encouraging feedback and the support we are providing to our staff to enable them to use and learn from this information. We have already provided some examples of learning and improvements as a result of feedback and complaints received from patients, carers and families, however this section aims to provide more examples of the actions we have taken throughout 2017/18 in response to both feedback and complaints.

4.1 Learning and Improvements Resulting from Complaints and Feedback

Prison Healthcare – Perth & Kinross Health and Social Care Partnership

The Health Centre at Perth Prison routinely use feedback forms to capture feedback from patients. In 2017/18 the feedback was used to make the following key changes:

- i. Improved communication with patients:-
 - Appointments are now made in the Vision system with comments added to free-text box detailing reasons for appointments being rescheduled (for local recording purposes);
 - Letters are now sent to patients with appointment details following receipt of self-referrals to the Health Centre;
 - Letters sent to patients when appointments rescheduled detailing the new appointment and the reasons for rescheduling; and
 - Phone calls made to each of the Halls to inform patients when appointments need to be rescheduled.
- ii. Improved patient confidentiality
 - Appointment letters are now sent to patients in sealed envelopes and no longer attached to the back of self-referrals returned following booking of appointments

Getting Health Visiting Right in the Pre-Birth Period – Improving Maternal and Child Health Outcomes

Health Visitors based at a Health Centre in Perth have been using the Model for Improvement (MFI) to ensure that pregnant women receive a home visit from their Health Visitor (HV) between 32 to 34 weeks gestation. Tests of change have focused on improving communication between Health Visitors, Community Midwives and pregnant

women. A semi-structured questionnaire was developed to gather the views of pregnant women attending midwife-led clinics to identify the following:

- Client awareness of the role of the HV;
- Client awareness of the HV ante-natal home visit around 32 to 34 weeks gestation;
- Client intent to take up the offer of the HV ante-natal home visit; and
- Receipt of introduction to HV service letters where applicable.

Feedback from women is being used to inform the introductory letter issued to women at around 20 weeks gestation, including further clarity on the purpose and benefits of the visit, and identify potential barriers to taking up the offer of the visit.

Pressure Ulcer Care and Prevention in the Orthopaedic Unit, Ninewells

Following a complaint about care provided to an elderly, frail individual, recommendations for improvement were made as follows:

- The Waterlow risk assessment tool is correctly completed by nursing staff caring for patients
- Pressure injuries and moisture lesions are accurately diagnosed and graded
- Wound assessment should be carried out for pressure ulcer care and wound assessment charts completed
- Pressure relieving interventions should be prescribed at appropriate intervals and in line with an accurate risk assessment
- Patients and relatives are provided with education on how to prevent pressure injuries to allow them to make informed choices
- Patients with extensive superficial pressure ulcers or Grade Three or Four pressure ulcers or those that are deteriorating are referred to a specialist service
- Accurate records are maintained in relation to nursing care in line with the Nursing and Midwifery Council Code on record keeping.

In order to address the recommendations and ensure compliance with the NHS Tayside Pressure Ulcer Prevention and Care for Adults in Hospital Policy, an action plan was developed in response to the failings. The action plan included the delivery of a pressure ulcer prevention and care awareness session for all staff. A further pressure ulcer prevention and care ward based link nurse was also identified and trained to champion the care and disseminate further training to the staff in the ward. This increased the number of link nurses within the ward to four, to ensure that a sustainable approach to the education

and development of staff was supported. Compliance with the pressure ulcer assessment and documentation is audited, with five samples audited each month. In addition, all staff are expected to undertake an e-learning module annually and compliance of this is monitored.

Dundee Health and Social Care Partnership

- The HIV nursing service established and leads a service user forum which provides an opportunity to gather patient feedback. The patient cohort requested more updates on service changes and support and so, in response, a patient newsletter is now being developed.
- Tayside Sexual and Reproductive Health Service (TSRHS) received patient feedback that they were unable to get through to reception on occasion when calling the service. Netcall has now been installed as a telephone management and redirection system.
- TSRHS also received feedback through a patient survey regarding the waiting room in Ninewells, asking for the space to be made less clinical. The service have therefore reduced the amount of information on display and made changes to make the space feel more “homely”.
- Young people attending The Corner fed back through survey monkey that they would like to be able to access more services. A full sexually transmitted infection testing and sub-dermal implant fitting service has now been established.

NHS Volunteer Hearing Aid Support Service

The NHS Volunteer Hearing Aid Support Service in Forfar, Arbroath and Montrose is a volunteer service that was developed and implemented in response to feedback from patients. Frail patients attending the Audiology Department, fed back their difficulties travelling to Ninewells, Stracathro or Kings Cross to get hearing aid tubing renewed or batteries inserted.

Therefore the volunteer service was developed to provide local support for patients so reducing the requirement for significant travel. Other hearing aid and battery replacement services are now provided across Tayside at local venues such as chemists and libraries.

Research to inform the Dundee Substance Misuse Strategic and Commissioning Plan

Citizens survey substance misuse:

As part of the development of a Strategic and Commissioning Plan for substance misuse in Dundee, an online survey took place aimed at all Dundee citizens.

- 183 people responded to the survey, 102 (55.7%) female and 53 (28.9%) male. The majority of the respondents aged between 26–65 years old.
- Most of the respondents (106, 72%) agreed that within their communities it is common for people to consume alcohol at harmful levels. A slightly smaller majority (94, 64%) agreed that crime and social problems are worse in their communities because of alcohol consumption.
- 117 respondents (84%) thought that people find it difficult to ask for help if they experience problems due to their alcohol consumption, but the majority (121, 87%) said they knew how and where to access help.
- 101 respondents (73%) thought that drug misuse was common in their communities and 97 people (70%) thought that crime and social problems are worse because of drug misuse. The majority (113, 84%) reported they knew where to seek help for drug misuse.
- Respondents living in Lochee, East End, Maryfield and Coldside were more likely to think that alcohol and drug use in their community contribute to crime and social problems, than those living in Broughty Ferry.
- The majority of the respondents (119, 88%) thought that there was little understanding and support to individuals in the community recovering from drug misuse.

Service user survey:

- In addition to the online consultation, a survey was conducted with individuals accessing specialist substance misuse services
- 25 individuals completed the questionnaire, 16 (67%) female and 8 (33%) male
- The majority of the respondents in this survey (23, 96%) thought that people find it difficult to seek help if they experience problems with alcohol
- 21 respondents (87%) reported they knew where to access help for alcohol problems and 22 respondents (92%) knew where to access services for drug misuse
- Only 11 people answered the question 'My community understands and is supportive of people in recovery from drug problems'. Six respondents agreed with the statement and five disagreed with the statement.

Overall comments from both surveys:

- Women are more likely to worry about going out at night due to a perception of people misusing substances in their communities
- Older people are more likely to think that crime and social problems within their communities are worse due to substance misuse
- Individuals living within Lochee, East End, Maryfield and Coldsides were more likely to agree with the statement that drugs and alcohol contribute to crime and social problems in their communities. In contrast, respondents from Broughty Ferry had very low levels of agreement to this statement.
- Respondents to the public consultation were more likely to report they know about alcohol units than those responding to the service users' one.

The two surveys have been conducted to inform the Dundee Strategic and Commissioning Plan for substance misuse.

This Plan outlines the key priorities for restructuring, re-focusing and improving the responses to substance misuse in Dundee, including an increase in the focus on prevention interventions and a reduction in drug deaths.

Information from both surveys has been used to inform the Strategic and Commissioning Plan. The information helped shape the key priorities and the actions that will be introduced to achieve these priorities.

More specifically, following the surveys, one of the four key priorities in the plan is that of Resilient Communities – and actions will focus on working with and supporting communities to respond and prevent the impact of substance misuse.

The Strategic and Commissioning Plan was published at the end of March 2018 and will be used to shape future response to substance misuse in Dundee.

Working Health Services - Tayside

The Working Health Services (WHS) Tayside provides a specialist work health service that is easy to access and can help people remain in work. This is a free and confidential service and supports people in making positive differences to all aspects of life.

Whilst overall feedback is positive about the service, some clients felt that they had been discharged too soon (WHS could only offer treatment for up to 12 weeks). In addition, on occasion the service were unable to contact clients for initial telephone case management

assessment, clients then fed back that it felt as though it took too long from referral to engagement with the service.

In response to this feedback, WHS providers across Scotland identified that 12 weeks was too short an engagement period and at times clients were discharged before their health was improved. This point was therefore taken to the Scottish Board for WHS and it was decided that this should be increased to 20 weeks.

In response to the struggles in contacting clients for case management therefore delaying treatment, the service have moved to a diary system for case management calls and clients are given a specific telephone appointment day and time. This has improved our efficiency and the patient journey.

Consultation Event for Alcohol and Drug Partnership and Dundee Integration – Joint Board

The Alcohol and Drug Partnership (ADP) and the Dundee Integration Joint Board (IJB) held a stakeholder engagement event focusing on the new Strategic and Commissioning Plan for substance misuse in Dundee. The event included presentations on:-

- current trends and prevalence of drugs and alcohol misuse in Dundee
- how services in Dundee are responding in innovative ways to meet new and emerging needs around substance misuse
- inspiring personal recovery stories
- proposals for new governance arrangements service provision for substance misuse in Dundee
- Information on current financial challenges and how we plan to address those.

The draft Strategic and Commissioning Plan for substance misuse sets out the strategic priorities and guides to the delivery of a transformational improvement programme across the City. Key features within the Plan include these proposals taken from comments on the day from stakeholders, for example:-

- Strengthening the governance arrangements for alcohol and drug responses;
- Improvements to service delivery - including greater integration of services delivered from community settings;
- Improving co-production processes and two-way communications with individuals, families and communities;
- Increasing the focus on prevention and early intervention.

The consultation event included three round table discussions providing participants the opportunity to comment on the proposals, influence the proposed plans for restructuring service delivery and highlight specific workforce development needs. Following on from this consultation event, the ADP will embark on a wider consultation process, providing individuals and communities in Dundee the opportunity to view, comment on and influence the proposed plans. An update paper will be presented to the IJB in June 2018.

Young Person's Unit

The Young Person's Unit previously used a 'How are we doing?' feedback form to obtain feedback from young people and their families. In 2017/18, the responses received demonstrated a number of areas of positive feedback as well as opportunities for improvement. The areas of feedback and associated actions taken in response to the feedback include:-

- Provision of relevant information at the right time – the service has a webpage working group that is actively looking for ways of improving this source of information, which includes a booklet. There are tentative plans to develop a virtual tour of the Unit that could be available on the webpage.
- Patients reported not having enough to do – the Unit has a highly structured day during school term time which undoubtedly results in less structure for those young people no longer on a school roll. The service continues to work with young people and their families to promote appropriate sleep, hygiene and engagement in available activities.

The Young Person's Unit have now made a change to their approach to gathering feedback and are working with volunteers to gather feedback post discharge.

Health Visitors

Over the past year, Health Visitors have made a number of improvements in response to both complaints and feedback received, these include:

- A change to the way in which appointments were communicated to a patient and their family following feedback from a patient within the travelling community that they had poor literacy skills and could not read any letters/appointments sent to them. This supported improvement in the child's health enabling better outcomes for them and attendance at all health appointments.

- Following a complaint regarding the sharing of information received from another health service, the service have made changes to letters received from multi-agencies with clear information at the bottom in respect of permissions for sharing being granted.

Tayside's Epilepsy and Learning Disability Clinic

Feedback from patients and carers identified a gap in the epilepsy service as they felt that the service was not meeting the needs of the population who have a Learning Disability. Following an initial test of change of a joint learning disability and epilepsy clinic in Wedderburn House, Dundee, the service was rolled out to Whitehills, Angus and Murray Royal, Perth. Clinics now rotate between the three localities on a monthly basis.

This new approach has delivered the following actions and benefits:-

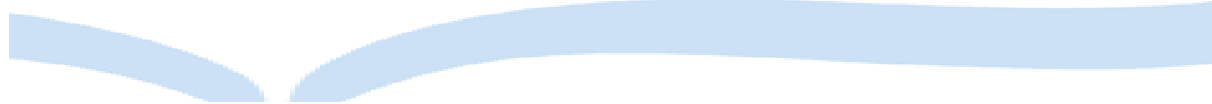
- Established dedicated learning disability epilepsy nurse
- Moved geographical location of clinic to better meet patient needs. Many patients with a learning disability find hospitals uncomfortable due to the size and traffic.
- Changed appointment time from 30 to 45 minutes as patients with a learning disability require additional time to relate information
- All clinic appointments supported by a Learning Disability nurse
- Patient attends clinic accompanied by an individual that knows them well (NICE, 2004)
- Patient brings prescribed medication and seizure documentation
- Additional focus on patient's general wellbeing including social issues
- Discussion with parent/carer regarding their perspective/concerns, on issues with behaviour or reaction to medication

The service continues to monitor the effectiveness of the change through an audit every two months, continued collection of patient feedback and gathering of specific feedback on the accessibility of patient information. The service also plans to provide education and training on seizure documentation, seizure recognition, safe administration of rescue medication and ensure all patients have an individual buccal midazolam care plan (SIGN, 2015).

Access Directorate

During 2017/18 the Access Directorate, which incorporates a variety of services including Diagnostics, Health Records, Integrated Dental Services, Infection Control, Stracathro Surgical Services and Pharmacy, have made a variety of improvements in response to complaints, including:-

- Training and discussion with appointment booking and reception staff in relation to telephone manner;
- Staff training in relation to the production of dentures to requested colour and implementation of an audit to provide assurance in respect of the process;
- Development of a robust communication strategy between medics, nursing and pharmacy following implementation of estimated date of discharge within the Acute Medical Unit



Section 5 – Accountability and Governance

NHS Tayside values the opportunity to learn from the experiences of people who use services and carers and recognises the importance of paying attention to feedback and complaints at all levels as part of our clinical and care governance system. As described within last year’s report, NHS Tayside has a clear governance and accountability framework in place for the management, monitoring and assurance associated with feedback and complaints. This framework is described within NHS Tayside’s Clinical and Care Governance Strategy, Making Quality Real, 2017-2019 and documents the responsibilities from the person receiving care to the Board. Feedback and complaints are reported through the Person Centred domain of the Clinical and Care Governance Strategy.

SCOPE OF CLINICAL GOVERNANCE



Person-centred care is everyone's business and every member of staff in every Team must always put people receiving care, carers and their families at the heart of everything they do. The first NHS Tayside Value is Putting Patients First and states clearly that "Everything we do is for you, our patients." We expect staff to act on local feedback to improve care experience every day and to consider the other facets of being person centred every day.

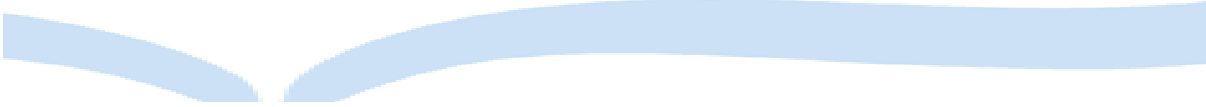
Staff members are encouraged to recognise the importance of getting feedback from people and supporting them to become more involved in their health and healthcare.

All clinical and care groups across NHS Tayside and Health and Social Care

Partnerships monitor adverse events, complaints, improvement and learning through their clinical and care governance structures. Local feedback is obtained to identify any consistent themes which may highlight areas for improvement and opportunities to share good practice and learning. This information is also discussed at performance review meetings which support the devolved accountability teams have for ensuring the quality of care through the establishment of a structured meeting to discuss performance across agreed key domains. This includes systems and processes for responding to and learning from feedback and complaints. Examples of learning and improvements are also sought and shared through these groups. Line managers have a particular role to play in developing a positive culture regarding the encouragement of feedback in all areas which allow specific improvement programmes aimed at improving patient care.

At Executive Level (Governance) – At Board level person-centred care is a key strategic priority which is supported by teams throughout the organisation. Teams who work with a person-centred focus demonstrate better outcomes of care experience, staff experience and co-production.

The Nurse Director is the Executive Lead for Person-Centred Care and provides professional leadership. Over 2017 and 2018 a 'Person Centred Board' has been established which is bringing together elements of being person centred, including feedback, to offer opportunities for learning, sharing and development. Themes and actions as a result of feedback are reported on, monitored and reviewed at the Clinical Quality Forum (CQF). The CQF also receive Clinical Governance and Risk Management updates as well as a paper on all Scottish Public Services Ombudsman (SPSO) reports published in relation to NHS Tayside services.

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The CQF reports to NHS Tayside's Care Governance Committee, formerly the Clinical and Care Governance Committee, which is a standing committee of Tayside NHS Board.

At Board Level (Governance) – Within NHS Tayside, person centred care is a key strategic priority with a broad definition that includes family, carers and staff. The ambition of NHS Tayside's Clinical and Care Governance Strategy is that “every day every one of us delivers, sees and experiences standards of care that we would want for our own loved ones. This can only happen by putting the patient at the centre of everything we do, working as a team and making sure we have the information and data we need to deliver excellent treatment”.

Creating the right conditions for staff to provide safe, effective person-centred care is vital, therefore NHS Tayside has developed in partnership with staff, patients, carers and the public the Vision, Aim, Values and Behaviours to express what they believe to be the best environment to deliver person-centred, safe and effective clinical care. In order to achieve this staff, patients, carers and the public should also be confident that their feedback is being listened to and see how this is impacting on their own care and the care of others.

Formal feedback is reported to NHS Tayside Board through bi-monthly performance data which details the number of complaints received, response times to complaints and the themes arising from complaints. The Chair of the Care Governance Committee (formerly the Clinical and Care Governance Committee)/Non-Executive Director also undertakes a quarterly review of complaints, providing an opportunity for learning and improvements to our complaint handling process to be identified.

Within NHS Tayside, there is also a Feedback Workstream that is responsible for providing governance for all patient feedback related work across NHS Tayside. In 2017/2018 this team have:-

1. Identified a suitable method and internal processes for the collection of right time feedback;
2. Introduced right time method for feedback in 20 acute wards;
3. Sought feedback from patients asked about their care experience on their satisfaction with the methods we used to seek their views and their suggestions for any preferred methods;
4. Facilitated and evaluated the use of the Health Improvement Scotland (HIS) Model for using feedback in 2 acute wards;

5. Developed and tested a toolkit for the collection of feedback from people with cognitive impairment;
6. Held staff awareness sessions to share patient feedback and its use locally;
7. Commenced the development of core standards for the use of feedback at service level; and
8. Reviewed progress of the group's previous action plan, developed and sought approval of a draft action plan for 2018/2019. This focuses on spreading our feedback models methods to all areas; working in partnership across Tayside to develop consistent processes for all patients and families to provide feedback and ensuring our methods support the inclusion of all.

Learning from Right Time Feedback

Our evaluation data from the two test wards using the HIS right-time patient feedback model reported improvement activity in response to feedback and a gradual improvement in patient experience scores in areas where teams were focussing their efforts - sufficient information on discharge and knowing the danger signals to be aware of when returning home. It also indicated a need to build internal capacity for facilitation of patient experience meetings where feedback is considered. Our evaluation also informed us that our prototype for data presentation was difficult for staff to interpret and we are working to improve this over the summer.

Working with the University of Dundee, we have secured a 6-week student scholarship to co-design and develop data outputs that support ready access and interpretation of patient feedback - this will commence in June 2018. Patients who took part in our telephone surveys used within the right-time model indicated they were mostly satisfied with the approach by volunteers and the process. 20% indicated that they would be happy to feed back online.

Our evaluation of the toolkit to get feedback from people with cognitive impairment indicated that this can be easily used by both staff and volunteers and provides important insights into the needs and preferences of this patient population that support staff to address unmet/unknown patient needs in near real-time.

Throughout 2018/19 NHS Tayside plans to build on the successes evidenced over recent years, encouraging and welcoming the views of our public in relation to their experience of the services we offer. Through continued engagement with Public Partners we will evaluate our feedback mechanisms and use the outcomes of this work to inform future developments and improvements to our approaches.