



Barley Field, Tankerness – August 2022

# NHS Orkney Patient Feedback

## Annual Report 2022-2023

## Foreword

The 2022/23 Patient Feedback Annual Report details how NHS Orkney has received, responded to, and acted upon feedback, complaints and engagement to help improve and develop our services. In order to ensure patients, carers and families receive the best possible care across our services, we need to continually review, learn and improve, ensuring we embed and maintain a person-centred care approach focussed on:

- respect, empathy and compassion
- power and empowerment
- choice, autonomy, and shared decision making

NHS Orkney is committed to ensuring our patients, their families and their carers are at the centre of everything we do. We are also committed to listening to and learning from our patients, those who support them and our staff. We welcome their feedback to help us continue to learn and improve, thus providing the best possible health care to the population of Orkney.

2022/23 has been a year of consolidation for NHS Orkney as we continued our recovery from the COVID-19 pandemic. We continue to look at different ways of working and delivering care to our patients, in turn making many of our services more accessible, particularly for those in the ferry-linked islands.

Throughout the currently complex healthcare landscape, we know that at times, services are not delivered smoothly and when this happens, we focus on the best way to resolve a complaint. We know that contacting our complainants in the early stages results in a more positive outcome for our patients and so, we always seek to investigate and resolve any complaint as quickly as possible.

We want to continue to respond effectively to our patients, families and service users who share their experiences with us, listening and learning to continue to provide high quality care that has the patient, their families and carers at the heart. Capturing the experience of these groups in a proactive way will be focus for NHS Orkney over the coming year.

*Mark Henry*  
**Medical Director**  
**NHS Orkney**

## Section 1

### Encouraging and Gathering Feedback

1.1 NHS Orkney collects feedback in the form of complaints, comments, concerns and compliments. We welcome, encourage and value all feedback and use this to learn from people's experience and to inform improvements and change. We know from the compliments and positive feedback we get throughout the year that generally our patients and their carers or families are very pleased with the care they receive. But we are also very aware that we could sometimes do better and therefore the feedback we gather is invaluable in letting us know where improvements can be made.

Although the Covid-19 pandemic has less of an impact than last year, it continues to have some impact on how we gather feedback, limiting our use of young volunteers, availability of leaflets and literature and face to face contact with staff responding to complaints. We have again this year been able to look at complaints quickly and respond at Stage 1 where at all possible. We want to ensure our patients are listened to quickly and efficiently and this has worked very well and very much a learning point from the time of the pandemic.

1.2 The following methods are means by which our patients and their families can provide us with feedback on our services:

- Complaints – Early Resolution and Investigation stages. These can be made in writing, by email or over the telephone to the Patient Experience Officer or any other member of staff at the point of care. We will also arrange to meet face to face with anyone who wishes to discuss their complaint with us. More patients prefer to make contact by telephone or email;
- Our website has a section on feedback and involvement which allows for leaving suggestions, compliments, feedback or a separate link to make a complaint or to express an interest in becoming involved.
- Whilst we would normally have Feedback Leaflets available throughout our health care locations on our Welcome Boards, we reviewed this method, again due to Covid-19 infection control guidance. We replaced leaflets with posters with details of how to contact us electronically so that patients could still provide feedback on their experiences whilst in the hospital.
- Patient Satisfaction Surveys are also undertaken locally at a service level and also as part of national survey activity.
- We post on NHS Orkney's Facebook and Twitter pages to encourage patients to tell us of their experiences and we continue to publicise the use of Care Opinion.
- We share "Feel good Friday" social media posts to share when things have gone well.

1.4 All feedback, whether good or bad, is acknowledged and responded to. Patients have taken the time to provide us with information on their experiences and we ensure they know we are very thankful for this. Since the introduction of the new Complaints Handling Procedure (CHP), staff are encouraged to resolve issues at point of contact whenever possible.

1.5 Information on advice and support from the Patient Advice and Support Service (PASS) at the Citizens Advice Bureau is shared with staff throughout our hospital and healthcare services. We encourage staff to signpost to PASS when appropriate. A link is available in the

information we provide to patients during the initial complaint stages and also on our website. We also include a statement in our acknowledgement letters which provides information on how to contact PASS.

## 1.6 **Complaint process experience**

A short evaluation of the complaint process experience in 2022/23 has taken place. Each year short surveys are required to be sent out to a random selection of complainants at year end. As with previous years, there is a lack of engagement by those surveyed and challenges with the small numbers of responses and confidentiality issues due to the small population in Orkney.

Only six respondents chose to complete this year's survey. Those who did were unhappy with the outcome of their complaint and the process undertaken. The overall response therefore was not positive.

The main points to note were:

- 50% of patients felt making a complaint was easy
- 50% of patients felt submitting a complaint was easy
- 50% of patients felt Patient Experience staff were helpful and professional
- 33% of patients felt Patient Experience staff listened and understood
- 83% of patients felt Patient Experience staff explained the complaint process
- 83% of patients disagreed that their complaint had been handled in a timely manner
- 50% of patients disagreed that their complaint points were answered
- 33% of patients felt their overall experience of making a complaint was positive

This was not a particularly positive evaluation of the complaints handling experience which is disappointing. Unfortunately patients who do not have a good outcome to their complaints often feel the experience as a whole was difficult.

Going forward, we will review our acknowledgement letters and early conversations to ensure there is an understanding of what the expectations of our patients are when making a complaint.

As mentioned in previous years, this process has been acknowledged as a challenge in other Boards and there is an understandable lack of engagement from complainants once a complaint is finalised, or a negative one when the response is not their expected outcome. This has been raised for consideration as part of the forthcoming national review of the Model Complaints Handling Procedure (currently on hold by the Scottish Government). Discussion's have also been had at the National Association of Complaints Personnel Scotland where Boards have indicated their concerns at the process and requirement to carry out this survey.

## Section 2

### 2.1 Hospital and Community Services:

Our Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for resolving complaints early and locally by capable, well-trained staff.

Our complaints process provides two opportunities to resolve complaints internally:

- Early resolution - aims to resolve straightforward complaints that require little or no investigation at the earliest opportunity. This should be as close to the point of service delivery as possible.
- Investigation - not all complaints are suitable for early resolution and not all complaints will be satisfactorily resolved at that stage. Complaints handled at the investigation stage of the complaints handling procedure are typically serious or complex and require a detailed examination before we can state our position.

#### 2.1.1 Early Resolution and Investigation Complaints

##### Performance Indicator Four

Number of complaints received by the NHS Orkney Complaints and Feedback Team	151
Number of complaints received by NHS Orkney Primary Care Service Contractors	84
<b>Total number of complaints received</b>	<b>235</b>

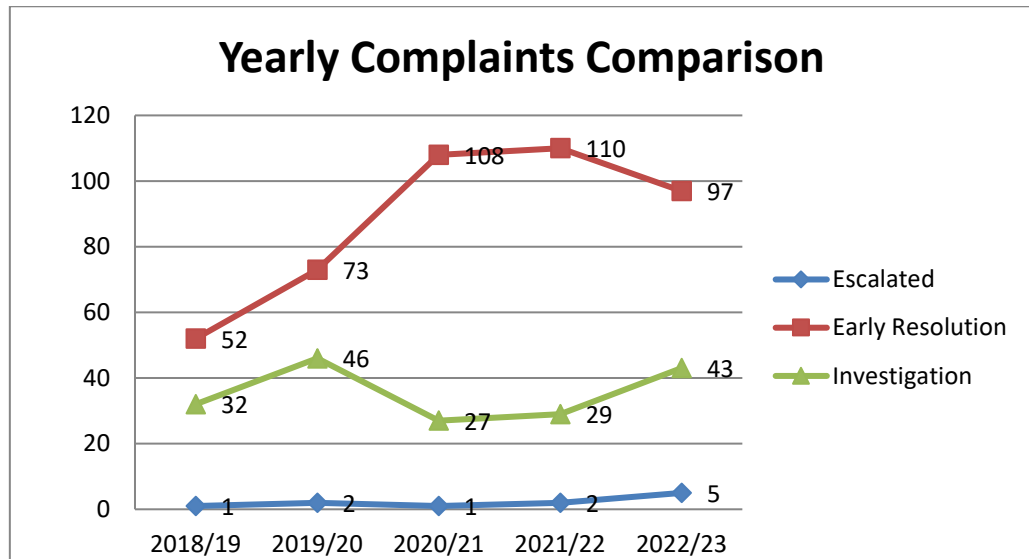
<b>NHS Board Managed Primary Care services;</b>	
General Practitioner	6
Dental	N/A
Ophthalmic	N/A
Pharmacy	N/A
<b>Independent Contractors - Primary Care services;</b>	
General Practitioner	29
Dental	1
Ophthalmic	44
Pharmacy	4
<b>Total of Primary Care Services complaints</b>	<b>78</b>

##### Performance Indicator Five

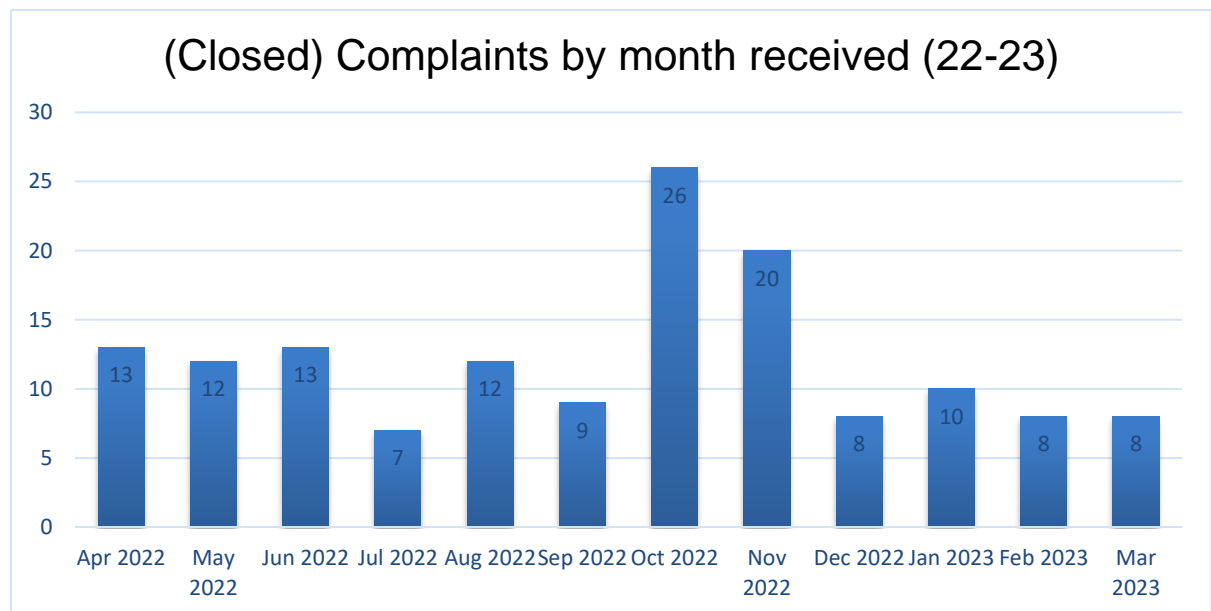
Number of complaints closed at each stage	Number	As a % of all Board complaints closed (not contractors)
<b>5a. Stage One</b>	97	67%
<b>5b. Stage two – non escalated</b>	43	30%
<b>5c. Stage two - escalated</b>	5	3%
<b>5d. Total complaints closed by NHS Orkney</b>	145*	100%

\*5 complaints were withdrawn or consent has not been received and thus, in line with Scottish Government guidance, is not included in the Key Performance Indicator figures which follow. 1 complaint remains open.

The following chart shows comparisons between our complaints over the last five years. Complaints are still increasing yearly, and in particular Early Resolution complaints, where more emphasis is being made at contacting patients quickly and responding in a more timely way. There has been a slight decrease in Early Resolution complaints this year and more of an increase in Stage 2 complaints. This is due to more complex, cross-service and at times, cross organisation complaints being submitted.



Whilst slightly lower, Stage 2 complaints have risen to similar pre-Covid 19 Pandemic numbers. Additionally, Early Resolutions complaint numbers also remain high. October 2022 saw the most number of complaints received with more than double of the early months in the quarter. Monthly numbers dropped slightly at the start of the new year.



Complaints are reviewed as part of the Weekly Incident Review Group meeting allowing correlation of incidents and complaints where appropriate. In line with the Learning from Clinical Incidents Policy, members of the group in some instances give consideration to complaints being a Significant Adverse Event and a full SAE investigation is undertaken and formally reported. In other cases, complaint investigation follows standard practice and the meeting is used to share improvement outcomes with clinical leads and heads of service.

## 2.1.2 Outcome Decision - Complaints upheld, partially upheld and not upheld:

### Performance Indicator Six

#### Early Resolution complaints

	Number	As a % of all complaints closed at stage one
Number of complaints upheld at stage one	49	51%
Number of complaints not upheld at stage one	27	28%
Number of complaints partially upheld at stage one	21	21%
<b>Total stage one complaints outcomes</b>	<b>97</b>	<b>100%</b>

#### Investigation complaints

	Number	As a % of all complaints closed at stage two
<b>Non-escalated complaints</b>		
Number of non-escalated complaints upheld at stage two	14	33%
Number of non-escalated complaints not upheld at stage two	10	23%
Number of non-escalated complaints partially upheld at stage two	19	44%
<b>Total stage two, non-escalated complaints outcomes</b>	<b>43 (1 open)</b>	<b>100%</b>

#### Escalated complaints

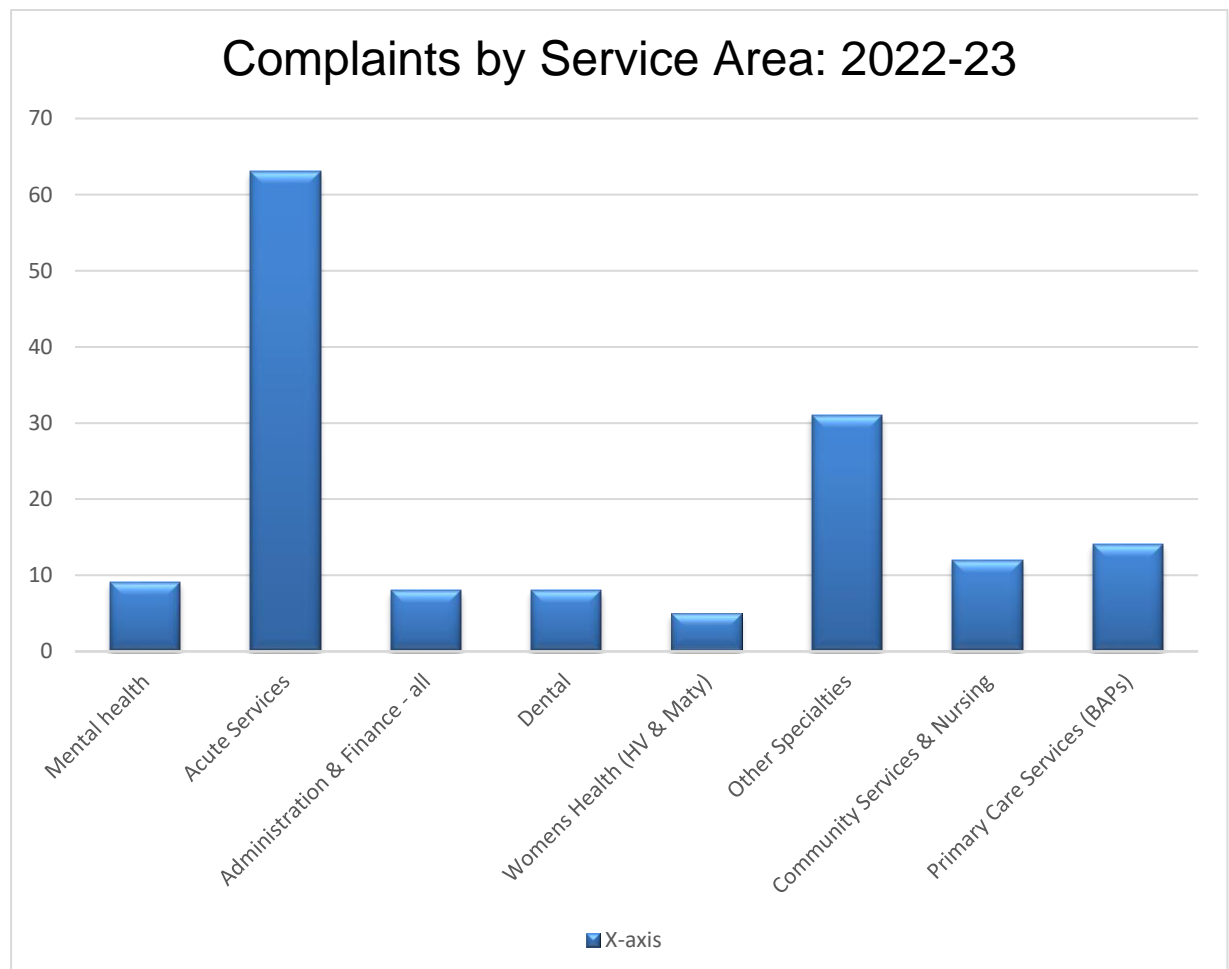
	Number	As a % of all escalated complaints closed at stage two
<b>Escalated complaints</b>		
Number of escalated complaints upheld at stage two	3	60%
Number of escalated complaints not upheld at stage two	2	40%
Number of escalated complaints partially upheld at stage two	0	0%
<b>Total stage two escalated complaints outcomes</b>	<b>5</b>	<b>100%</b>

### 2.1.3 Service Areas:

NHS Orkney's complaints cross many areas within the organisation but are predominately within our Acute Services. Acute Services includes inpatient, outpatient, waiting times, hospital clinical and non-clinical complaints. GP/Primary Care complaints reported represent the number of complaints received within the Board Administered Practices. Community services include areas such as community nursing, specialist nursing services, mental health services, podiatry, etc.

Following the addition of complaints recorded under the heading of Covid-19, to cover the period of the pandemic, in the previous year we recorded 11 complaints where the main subject directly concerned Covid-19 assessment, testing or vaccination. For the year 22-23, only one complaint was recorded under this subject.

The highest sector recording complaints is Acute Service which covers the most clinical services. As mentioned above, complaints are recorded in all inpatient areas, day unit, unscheduled care, outpatients and therefore numbers are understandably higher than other services.





## 2.1.4 Response Times:

Early Resolution complaints must be responded to within 5 working days, Investigation stage complaints have response timescales of 20 working days. Boards are required to report response times as one of the key performance indicators of the CHP.

For information the breakdown quarterly for response times is as follows:

<b>Closed within Timescales</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
Total Number of Complaints closed in full at <b>Stage 1</b>	<b>26</b>	<b>22</b>	<b>32</b>	<b>17</b>
	<b>(23)</b>	<b>(18)</b>	<b>(21)</b>	<b>(12)</b>
% closed <b>within timescale</b> of 5 working days	<b>88%</b>	<b>81%</b>	<b>66%</b>	<b>71%</b>
Total Number of Complaints closed in full at <b>Stage 2</b>	<b>12</b>	<b>5</b>	<b>19</b>	<b>7</b>
	<b>(4)</b>	<b>(1)</b>	<b>(7)</b>	<b>(2)</b>
% closed <b>within timescale</b> of 20 working days	<b>33%</b>	<b>20%</b>	<b>37%</b>	<b>29%</b>
Total Number of <b>Escalated</b> complaints closed	<b>-</b>	<b>1</b>	<b>3</b>	<b>1</b>
	<b>-</b>	<b>100%</b>	<b>(2)</b>	<b>(0)</b>
% closed <b>within timescales</b> of 20 working days	<b>-</b>	<b>100%</b>	<b>66%</b>	<b>0%</b>

Stage 1 complaints remain the focus for NHS Orkney. We consider each complaint on receipt to ensure patients receive a response as quickly as possible. This has the best outcome for the patient in a more person-centred way. Some complaints however are more complex.

We have found again this year that the more complex complaints cross services and this has resulted in more complicated investigations with more staff involved in the process. With the added complexity, timescales have failed at times.

### Performance Indicator Eight

	<b>Number</b>	<b>As a % of complaints closed at each stage</b>
Number of complaints closed at stage one within 5 working days.	74	76%
Number of non-escalated complaints closed at stage two within 20 working days	14	33%
Number of escalated complaints closed at stage two within 20 working days	2	40%
<b>Total number of complaints closed within timescales</b>	<b>90</b>	<b>62%</b>

### Performance Indicator Nine

	<b>Number</b>	<b>As a % of complaints closed at each stage</b>
Number of complaints closed at stage one where extension was authorised	13	13%
Number of complaints closed at stage two where extension was authorised (this includes both escalated and non-escalated complaints)	25	58%
<b>Total number of extensions authorised</b>	<b>38</b>	<b>26%</b>

This year 91 of 146 complaints were closed within timescales in line with national guidelines which compares to 90 of 141 in 2021/2022.

Only one third (33%) of Stage 2 complaints were closed within timescales during the year. The main reason for this was delays within the investigation process. Complaints can be complex, cross services and at times organisations, and result in delays. Additionally, capacity issues at investigation stage, ie, a lack of available clinical managers to carry out investigations coupled with their ability to carry out complaint investigations alongside clinical duties, also cause deadlines to pass.

The average response time for Stage 2 complaints over the last two years are shown below. It has been steadily rising since 2020:

2020-2021 – 20.5 days  
2021-2022 – 23.25 days  
2022-2023 – 30.75 days

76% of Stage 1 complaints were responded to within 5 working days and staff should be commended for resolving complaints quickly and early. 67% of complaints received were investigated at Stage 1 and managers, who were responding to these alongside their day to day duties, were very responsive and quick to manage the majority of concerns at this level.

Stage 1 complaints are still the most effective way to respond to complaints for our patients. A quick reply from the staff involved at the point of contact has the best outcome for all involved.

#### **2.1.5 Trends and Emerging Themes:**

NHS Orkney complaints are wide ranging and relatively small in number across a diverse range of services, making it difficult to identify trends. In 2022/23 themes of communication, care and treatment, staff issues and waiting times/delays identified as the main issues within Investigation and Early Resolution complaints. This is identical to previous years and similar to other Boards themes over the last few years.

#### **2.1.6 Alternative Dispute Resolution:**

There were no complaints during the year which met the need for Alternative Dispute Resolution. NHS Orkney is aware of the services provided by the Scottish Mediation Service and has used it in the past.

#### **2.1.7 Unacceptable Actions Policy**

At times NHS Orkney must review a complainant in line with the unacceptable actions policy. This happens when it is considered that there is nothing further that can reasonably be done to assist complainants or to rectify a real or perceived problem. Where this is the case and further communications would place inappropriate demands on NHS staff and resources, consideration may need to be given to classify the person, behaviours or actions as unacceptable.

Due to the small number, it would not be appropriate to provide figures for this part of the report and therefore simply advise that NHS Orkney had occasion(s) to refer and act in line with the policy during the complaints year.

## 2.2 Family Health Services (not including salaried GPs/Dentists):

<b>NHS Board Managed Primary Care services;</b>	
General Practitioner	<b>6</b>
Dental	<b>n/a</b>
Ophthalmic	<b>n/a</b>
Pharmacy	<b>n/a</b>
<b>Independent Contractors - Primary Care services;</b>	
General Practitioner	<b>29</b>
Dental	<b>1</b>
Ophthalmic	<b>37</b>
Pharmacy	<b>4</b>
<b>Total of Primary Care Services complaints</b>	<b>77</b>

GP Practices routinely contact the Patient Experience Officer for help and support in dealing with complaints.

Most, but not all, Primary Care service providers are independent contractors who are contracted by the NHS Board to provide NHS health services. However, Boards are required by law to ensure that each of their service providers have adequate arrangements in place for handling and responding to patient feedback and comments, concerns and complaints.

NHS Orkney handle complaints made about the Salaried GP's and Board Administered Practices. Our figures show 6 complaints were made during the year relating to this service which accounts for 8% of the total family Health Services complaints.

## 2.3 Other NHS Organisations:

NHS Grampian provided NHS Orkney with information on feedback received from Orkney patients. A total of 24 complaints had been received. Complaints relate to a number of different areas including clinical care, however a theme appears to be waiting times and communication.

NHS Orkney also receive and pass on complaints to Scottish Ambulance Service and NHS24.

## 2.4 MSP / MP - Constituents' Concerns Raised:

There are occasions when patients contact their MSP/MP in the first instance to make a complaint, raise a concern or enquiry. During the period 1<sup>st</sup> April 2022 – 31<sup>st</sup> March 2023, the Chief Executive received many written expressions of concern or complaint which sought address through a MSP. Patients are more frequently raising issues through their MSP. The following table offers a few examples of the issues raised and the outcome.

<b>Issue</b>	<b>Outcome</b>
Patient waiting times for Orthopaedics	We were able to provide information on referral date and arranged for physiotherapy appointment.

Travel Reimbursement Queries	We received a number of queries via the local MSP from patients querying reimbursement for accommodation and travel. Some patients we are able to ensure correct payment is made. Other patients are advised that reimbursement is made following the guidance in the Highlands and Islands Travel Scheme.
Delays for patients waiting for Orthodontic treatment	At times the Community Dental service can support patients who are waiting for orthodontic treatment. With the absence of an Orthodontic Consultant both in Orkney and NHS Grampian, patients are currently experiencing longer than expected delays in treatment.

## 2.5 Patient Advice and Support Service (PASS):



PASS offer advice and support for all NHS users and can help patients if they have any comments or complaints about any aspect of the health service. The Patient Experience Officer provides information on the service to complainants so that they may use the service if they feel unable to raise concerns themselves.

Unfortunately the number of clients and contacts supported by PASS during 2022/23 is not available at the time of writing this report. We can report that we received 12 complaints from the service on behalf of patients.

## 2.6 Scottish Public Services Ombudsman (SPSO):

During the year 2022/23, The Scottish Public Services Ombudsman received three complaints from Orkney patients who were unhappy with the response received from NHS Orkney. SPSO advised all three that initial assessment indicated a full investigation would not be undertaken. In each case, SPSO advised they felt NHS Orkney had provided a satisfactory response to the original complaint.

## 2.7 Compliments

As with previous years, NHS Orkney receives a significant number of compliments. These are predominantly sent to our wards and departments in the forms of letters, cards, flowers, chocolates and biscuits.

NHS Orkney do receive a number of compliments directly which we record and send on to the relevant staff members or area.

Here is a selection of what our patients have told us:



"I was overwhelmed by the approachability and friendliness of everyone I encountered at the hospital."

"I would like to thank all doctors, nurses and all staff for my care in the Balfour last week. As a person who is not good with hospitals I cannot praise them highly enough"

"Can I please say how impressed I was with the treatment I received at the Balfour recently. My medical history is quite complex but this didn't pose any problems and I left hospital feeling much better than when I arrived. Getting home was not straightforward but all went well and I was left feeling well looked after throughout. Thank you to everyone involved."

I would like to thank ~~the staff~~  
from venetia house for being so understanding  
and professional with the job they have done  
for me.  
They have both put me on the right track  
with my sudden move to orkney isle.

"I had a tooth removed this morning in the Balfour and I just wanted to say that the Dental Nurse was absolutely fantastic She was very kind, extremely reassuring, and I was so glad she was there. NHSO is so lucky to have members of staff like her – she made such a positive impact on my patient experience."

*Would you please pass this on to those involved in the clinic yesterday? It really was a very positive experience for a rather worried person – I don't like hospitals, I don't like injections. Due to health difficulties I haven't been indoors with un-known people since March 2020 unless medically necessary – yet I came away feeling good about the whole thing.*

*A big THANK YOU to all involved!*

## Section 3

### The culture, including staff training and development

At NHS Orkney we pride ourselves in delivering high quality care and we will ensure all our patients are treated with dignity and respect whilst ensuring we deliver excellence and professionalism in all that we do.

#### *Our patients can expect*

- to be treated with dignity and respect
- for us to show compassion by taking the time to listen, to talk and do the things that matter to them
- to receive high quality patient care and when they don't, we will listen and act on feedback so we can learn, improve and do better next time
- for us to be consistent and reliable and do what we say we will
- us to work with patients and their family (carers) and our colleagues so that we put their needs first
- for us to communicate (as individuals, teams and as an organisation) effectively, keeping them informed and involved and providing explanation if something has not happened

#### *We also make a commitment to our staff and what they can expect:*

- to be kept well informed
- to be appropriately trained and developed
- to be involved in decisions that affect them
- to be treated fairly and consistently with dignity and respect; in an environment where diversity is valued
- to be provided with a continuously improving and safe environment that promotes health and wellbeing

- 3.1 It is considered the continuing good relationship between PASS and NHS Orkney is vital to ensuring patients are given as much advice and support as possible in a cohesive, co-ordinated fashion whilst remaining aware that PASS is an independent service.
- 3.2 Much of our internal and external training and opportunities were halted due to the Covid-19 pandemic. These have now resumed to normal service. Our online training is now hosted fully by Turas and the Patient Experience Officer is working with the Talent and Culture team to ensure Patient Experience has a dedicated space.
- 3.3 The Patient Experience Officer is available to carry out informal training for any team who wishes help with complaint handling, investigating or learning from complaints.

A feedback and complaints session was included as part of the newly qualified nurse induction. A short informal discussion was given by the Patient Experience Officer on the value of patient experience and feedback and handouts provided regarding the CHP. The session was well received.

A short presentation was also given to the Weekly Incident Review Group regarding the rise in complaints for Q3. The intention was to raise awareness of the increase in numbers and some delays in responding and to look for themes around areas and services complained about.

Unfortunately due to the move from LearnPro to Turas, information on uptake of the Complaints and Feedback and Investigation Skills is unavailable. Work is underway with the Talent and Culture team to ensure staff are signposted to these training modules.

## Section 4

### Improvements to Services

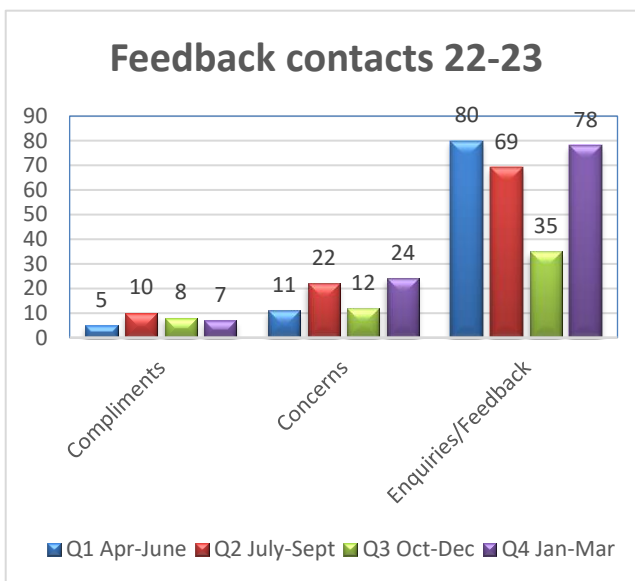
- 4.1 When any aspect of a complaint is upheld, the service identifies what improvements can be made. We continue to use our Complaints Reporting Template which provides an opportunity for staff to clearly identify actions, improvements and recommendations.
- 4.2 The following are some examples of improvements made over the last year:

Issue Raised	Findings	Outcome
Patient's family concerned by miscommunication during patient discharge from hospital	Investigation identified lack of detail contained on discharge letter	Recommendation that discharge letters should contain more information to better inform community and primary care services
Delay in receiving outcome of X-ray	Investigation identified issues around transfer and reporting of X-rays	Transfer process being reviewed and immediate introduction of highlighting unsigned X-rays at daily handover meetings
Poor communication following miscarriage	Investigation identified some areas for improvement	Consider as MDT if one-month post-miscarriage appointment would be appropriate.
Patient complained care was not managed appropriately	Investigation found a number of areas for improvement	Improved record keeping and legibility; explore need for EPR for area; Training and supervision review required.
Communication issues between ward staff and CMHT staff whilst caring for an inpatient	Investigation found some failings in communication	Improved record keeping required; regular training for staff to care for patients in severe distress; better team working between staff groups required.
Patient's family complained discharge was poor	Investigation found discharge had been appropriate however, some areas for improvement	Staff reminded to signpost patients and families to support services outwith hospital services
Discharge Prescription concerns	Process required amendment	Prescription collection details now added to communication between services

- 4.3 Informal feedback and concerns are logged and recorded by the Patient Experience Officer and improvements and actions are reported quarterly to the Quality Forum. Further developing the Board's processes for ensuring learning obtained through clinical incidents and complaints is acted upon and shared widely is a priority for the coming year.

A significant drop in feedback in Q3 coincided with a rise in complaint numbers.

We also received some very positive feedback from Care Opinion:



Some examples of groups of feedback and actions are detailed below:

We have received a significant number of enquiries relating to the Chronic Pain Service since the retiral of the Consultant during the year.	Advice, support and information given. Working group now established to look at how this service can be provided going forward.
We receive a high number of enquires from patients asking about forthcoming appointments.	Information sought and provided where possible
Requests for information on anticipated waiting times for procedures within ENT and Orthopaedics.	Working with Medical Records and clinical staff, the Patient Experience Team has tried to provide helpful information relating to delays and waiting times.
A number of requests for information on services available to patients moving to Orkney.	Advice and information given.
Various Travel Information requests relating to reimbursement of expenses and information on booking travel	Advice and information given.

- 4.4 As mentioned earlier in this report all complaints are discussed at the Weekly Incident Review Group which ensures the Clinical Directors are sighted on incidents, complaints and emerging issues.
- 4.5 Any improvements, actions or changes that are identified through the complaints process, either formally or informally, are shared with the complainant in our response. An apology is given regardless of the outcome.



## Section 5

### Accountability and Governance

- 5.1 Feedback and Complaints are discussed weekly as part of the Weekly Incident Review Group and a quarterly report is submitted to the Quality Forum.

Executive Directors, who attend the meeting, are encouraged to challenge the content of the report and regularly ask for assurances that changes or improvements have taken place to avoid recurrence of a similar complaint in future.

Minutes and Chairs reports from the Quality Forum are reported to the Joint Clinical and Care Governance Committee who reports onwards to the NHS Board.

- 5.2 NHS Orkney Board members receive updates through the Joint Clinical and Care Governance Chairs report and receive the Annual Report.
- 5.3 As mentioned above all feedback and complaints are reviewed as part of the Weekly Incident Review Group meeting. This group meets weekly and consists of the Medical Director, Director of Nursing, AHP's and Director of Acute Services, Head of Information and Clinical Governance, Clinical Governance Support and Patient Experience Officer as well as representation from Acute Services and Orkney Health & Care. Complaints are triangulated with DATIX incidents and Significant Adverse Events to assist in the identification of themes and systemic issues for informing improvement.
- 5.4 Complaint investigations are undertaken by Lead Officers, supported by their direct manager on the Senior Management Team. Once complete, investigations are reviewed and signed off by the Medical Director or Director of Nursing, AHP's and Acute Services before being submitted to the Chief Executive for approval. Although this can add additional delays to our timescales, we have found this to be a significant improvement with a higher level of reassurance being obtained that investigations are undertaken thoroughly and issues are sighted at the highest level of the organisation.

## Section 6

### Person-Centred Health and Care

Person-Centred Health and Care is at the heart of all our services within NHS Orkney. It is recognised that, to achieve this, we need to work at many different levels and with the wider community in which we live. The following are some examples of different work that has been carried out with involvement of, or by, NHS Orkney staff.

#### 6.1 Inpatient Experience – IP1 & IP2

We received a good response from patients leaving the hospital after their stay and we were delighted that patients overwhelming let us know all our staff were polite, welcoming, helpful and that they had felt they were treated with respect during their stay.

We shared this poster with staff to share the success!



#### 6.2 Falls Awareness Week

In October 2022, NHS Orkney held sessions on Falls Awareness in the main atrium of The Balfour. Patients were encouraged to come along to have their walking aid health checked, get advice on strengthening exercises and balance exercises. One session helped patients with information on keeping their home safe and telecare.

### 6.3 #FeelGoodFriday

We introduced a #FeelGoodFriday social media campaign to promote positive feedback and staff successes.

We shared good news stories about staff who took to the stage in a local production of Sunshine on Leith and shared experiences from patients who wanted to let us know how services at NHS Orkney had helped them.



### 6.4 Wellness Fair

NHS Orkney took part in the Wellness Fair held at the Pickaquoy Centre on 29<sup>th</sup> January. A number of colleagues attended the event who were able to talk and advise about various health and wellbeing related topics as well as a mix of charity groups. In attendance were services such as Public Health, Maternity, Childsmile and Health Visiting.

### 6.5 Local Digital Resource for Neurological Conditions

Following public feedback from a survey undertaken in 2021 a local 'one-stop' digital resource for Neurological Conditions was added to NHS Orkney's website with the aim of making it easier for people to confidently access information about common neurological conditions.

The information had been collated from already established sources of information and signposts users to sites that provide reliable guidance as well as local and national sources of advice and support.

The resource is aimed at people diagnosed with a neurological condition, their family and friends and the professionals and services who support them, facilitating access to timely accurate and specialised information. <https://www.ohb.scot.nhs.uk/service/neurology>

### 6.6 Facebook Livestream Sessions

Our Chief Executive continued to hold Facebook Livestream session to keep patients updated on all aspects of our services.



## 6.7 NHS Orkney Polytunnels

NHS Orkney provided space for patients and families from the local community to garden in our newly built polytunnels.



### NHS Orkney Polytunnels

#### Opening Times

The polytunnels are open 7 days per week

07:00-21:00 - All year round

#### Polytunnel Information

Polytunnel (**yellow**): The whole polytunnel is available to book out. This polytunnel has wheelchair accessible raised beds. (Plots available for NHS Staff and patients, the general public, and community groups).

Polytunnel (**red**): NHS staff plots.

Polytunnel (**green**): Orkney community plots (Plots available for the general public and community groups).

To request a polytunnel plot or to find out more, please contact:  
Phone: 01856 888990 (08:30-16:30) or 01856 888000 out of hours.  
Email for enquiries: [ork.nhsorkneypolytunnels@nhs.scot](mailto:ork.nhsorkneypolytunnels@nhs.scot)  
Group bookings for yellow polytunnel, please email: [ork.learning@nhs.scot](mailto:ork.learning@nhs.scot)

#### The polytunnels



There will be some gardening equipment available, but we encourage users to bring their own.

While the polytunnels are open for gardening, the space is open for everyone to use. You may wish to pop down for your lunch or to just relax in a safe and inclusive space.

We welcome donations big and small. Please contact us and we will be happy to discuss.