



**NHS Orkney<Committee name> Agenda Item <number>**

<b>Date of Meeting</b>	<enter date>
<b>Paper Number</b>	<Ref no linked to agenda>
<b>Title</b>	Patient Feedback Annual Report 2014 - 2015
<b>Purpose of Report</b>	<p>To present the Annual Report in respect of patient feedback received by the Board during the year ended 31 March 2015.</p> <p>This report has been reviewed and produced in line with the guidance contained in the Scottish Health Council's <a href="#">Review of NHS Boards' Annual Reporting on Feedback, Comments, Concerns and Complaints 2012/13</a>.</p> <p>This Report will also be assessed and reviewed by the Scottish Health Council and will form NHS Orkney's Participation Standard Self Assessment for 2014-15.</p>
<b>Recommendations</b>	To note the Patient Feedback Annual Report
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# **Patient Feedback Annual Report 2014 - 2015**

## **Introduction**

Empowering people to be at the centre of their care and listening to them, their carers and families is a shared priority for everyone involved with healthcare in Scotland. There has been an increasing focus on the need for feedback, comments, concerns and complaints to be encouraged and valued as a vital source of information. This further tells us what is working well, or not working well, in services and enabling identification of necessary improvements.

Patient Feedback is a significant source of information to the Board and can be collected in many different ways including: complaints; compliments; comments; suggestions; patient satisfaction surveys; face to face and in groups. Patient Feedback provides the raw material for an evidence based programme of continuous improvement to patient experience. Based on the feedback and its findings, services can be re-designed and improved. Changes can be monitored and fed back to stimulate further research and service development.

## **Section 1**

### **Encouraging and Gathering Feedback**

- 1.1 NHS Orkney collects feedback in the form of complaints, comments, concerns and compliments. We welcome and encourage all feedback and where appropriate, use this to focus on improvements and change. We know from the number of 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 also are very aware that we could sometimes do better and therefore the feedback we gather is invaluable to letting us know where improvements can be made.
- 1.2 The following methods are means by which our patients and their families can provide us with feedback on our services:
  - Complaints – both formal and informal. These can be made in writing, by email or over the telephone to the Patient Experience Officer. We will also meet face to face with anyone who wishes to discuss their complaint with us;
  - Our website has a feedback form linked to the complaints page which can be used for making a complaint. The page also provides information on how to leave feedback;
  - We have Feedback Leaflets available throughout the hospital which can be posted in the blue Comments Boxes which are located in various departments and services;
  - Our website also has a link to Patient Opinion, an independent, not for profit organisation which allows patients or their families to leave

anonymous feedback about their experiences. Alternatively a link is available, also on the website, which will provide information on the Patient Advice and Support Service at the Citizens Advice Bureau. This again, is an independent organisation who can help complainants with any advice and support they may need to leave feedback about an NHS service;

- We post on NHS Orkney's Facebook and Twitter pages at intervals to encourage patients to tell us of their experiences;
- We invite patients to share their experiences through Patient Stories at our NHS Board meetings and we now routinely ask patients who make complaints if they would like to share their story with us;
- Patient Satisfaction Surveys are becoming more frequent within our wards and departments.
- Following the purchase of two Apple iPads we have been collecting real-time feedback in our wards using young volunteers (supported by Voluntary Action Orkney) to interview and talk to our patients.

- 1.3 All feedback, whether good or bad, is acknowledged and responded to by the Patient Experience Officer. Patients have taken the time to provide us with information on their experiences and we ensure they know we are very thankful for this.
- 1.4 We encourage our patients to talk to us by ensuring our staff are aware of the various methods of leaving feedback. We have provided posters, leaflets, "Can I Help You" guidance and information on Patient Opinion and PASS to our GP Practices, Dental Practices, Corporate Management Team, Senior Managers and Senior Charge Nurses.
- 1.5 Information on advice and support from PASS is available throughout the hospital. We have also included PASS information with our Inpatient Appointment letters.
- 1.6 In the year 2014-2015, we received a number of stories on the Patient Opinion website. Five anonymous feedback posts were submitted to the website. They ranged from compliments to staff and services to concerns about GP access and staff attitude.

Unfortunately, Patient Opinion is not widely used in Orkney. We regularly post a link or share any stories on social media and this sometimes does result in more activity on the website.

We had hoped the introduction of the iPads and real-time feedback would have led to an increase in activity on Patient Opinion by leaving an information card with those patients we spoke to. Unfortunately this has not yet been the case.

## Section 2

### Encouraging and Handling Complaints

#### 2.1 Hospital and Community Services:

NHS Orkney is committed to responding to complaints in an open and honest way. We welcomed the introduction of the Patient Rights (Scotland) Act in 2011 which gives everyone the right to make a complaint or leave feedback and have the necessary support to do so.

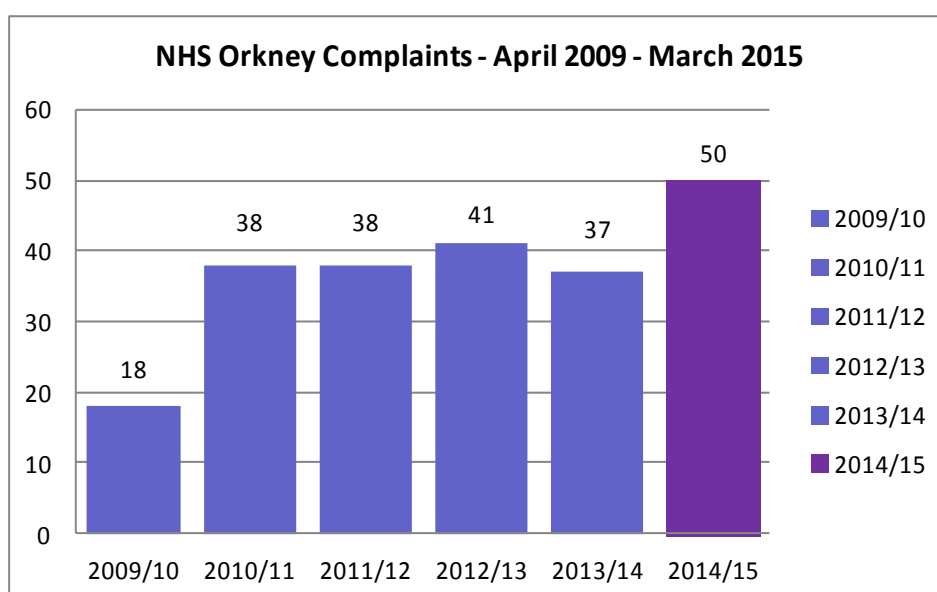
*Table 1* below shows the number of formal complaints and the number of recorded informal patient contacts received by the Patient Experience Officer during the period 1 April 2014 to 31 March 2015.

For comparison, *Table 2* shows the number of formal complaints recorded in the last five financial years by NHS Orkney up to 31<sup>st</sup> March 2014. As you can see, our complaints have increased by 13 since 2013-14 and we have had our highest recorded number of complaints since official recording began.

***Table 1 - Formal Complaints and Patient Contacts received April 2014 – March 2015***

Formal Complaints Received	50
Complaints Withdrawn/Time Barred	5
Recorded Concerns / Comments / Enquiries / Informal Complaints	97

***Table 2- Formal Complaints Statistics for NHS Orkney: April 2009 - March 2015***



## 2.2 Outcome Decision:

Of the 45 complaints investigated, 15 were not upheld, 13 were partially upheld, and 17 were fully upheld.

## 2.3 Emerging Trends:

A number of trends emerged throughout the complaints:

- Clinical Care
- Communication
- Nursing Care
- Waiting Times

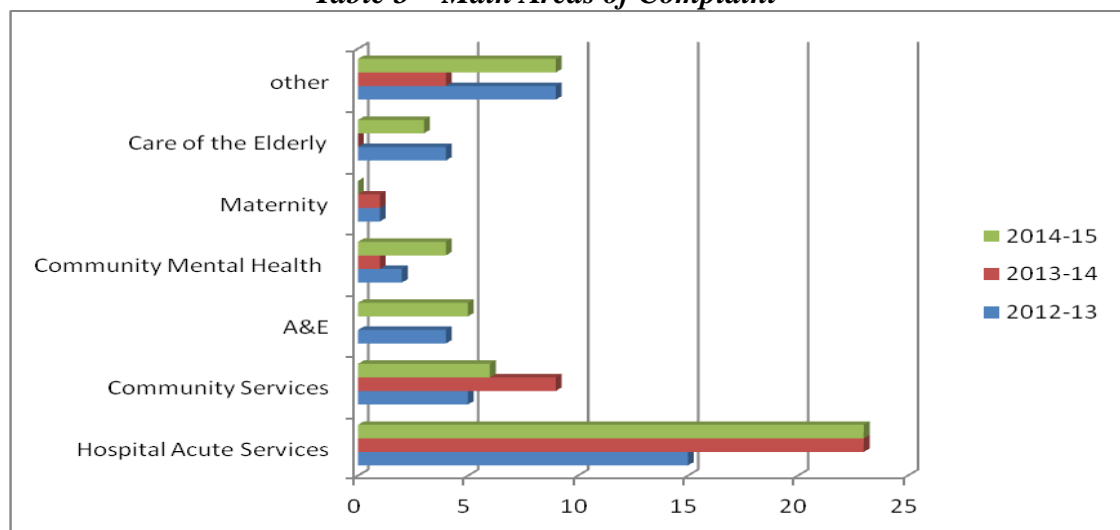
The four main themes above are similar to those reported last year.

## 2.4 Service Areas:

We received 23 complaints (51%) relating to Acute Hospital Services. Six complaints were received about our Community Health Services, five complaints were received relating to A&E, four complaints relate to Community Mental Health Services and the remaining complaints related to a number of areas including Administration, Care of the Elderly and Salaried GP's.

Again, this is very similar to last year and the chart below shows the similarities.

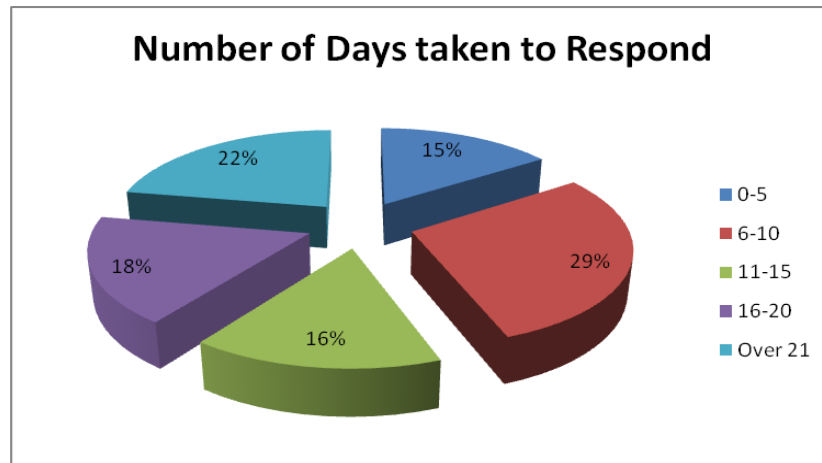
*Table 3 – Main Areas of Complaint*



## 2.5 Response Times:

Complaints must be acknowledged in writing within three days and investigated within 20 working days or as soon as reasonably practicable. In 2013/2014, we had a much improved response rate of 86.5% from the 70.7% of the previous year. This year, we have dropped again to 77.8% of complaints being answered within the timescales. This is a little disappointing but due to a number of factors including a few complex complaints which required more investigative time this delayed the sign off process. Annual leave of both investigating staff, staff involved in the complaint and the Patient Experience Officer can also have an effect on how quickly our complaints are investigated and responded to.

*Table 4 – Number of days take to respond to a complaint*



Ten of the 45 complaints were not responded to on time and one complaint was responded to on 20 days. As a comparison, five out of the 37 complaints in 2013-14 failed to meet the target. The main reasons for delays in responding were:

- Staff involved in investigation on leave;
- Staff involved in responding on leave;
- Complex cases resulting in complex investigations.

On a positive note, only one complaint was not acknowledged within the required three working days target. This was due to the Patient Experience Officer being on sick leave.

## 2.6 **Alternative Dispute Resolution:**

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

## 2.7 **Primary Care Services:**

Since the introduction of the Patient Rights Act and the “Can I Help You” Guidance in 2012, there has been more emphasis on GP Practices monitoring and recording complaints. Each practice must now submit a quarterly complaints report which includes information on response times and themes.

There were two complaints received directly by the Board about General Practices in Orkney. These were forwarded to the appropriate practice for investigation.

A total of 25 GMS complaints have been received and investigated. This is an increase of five from last year.

The main issues about which patients complained to their GP’s were:

- Unhappy with the Care given
- Length of time taken to refer patient
- Length of time taken for diagnosis
- Medication issues

- ❖ Optician services recorded one complaint in the year 2014-2015.
- ❖ Community Pharmacies reported three complaints during the year 2014-2015.

With such small numbers, we cannot report individually on practices as the complaints may become patient identifiable.

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

## 2.8 Other NHS Organisations:

In this last financial year, NHS Orkney received a total of seven complaints relating to NHS Grampian and one regarding Scottish Ambulance Services.

NHS Grampian very kindly provided NHS Orkney with information on feedback received from Orkney patients. A total of 31 complaints, comments or concerns had been received, mostly relating to waiting times and clinical treatment. A small number related to staff attitude or behaviour.

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

There are occasions when patients contact their MSP in the first instance to make a complaint, raise a concern or enquiry. During the period 1<sup>st</sup> April 2014 – 31<sup>st</sup> March 2015, the Chief Executive received seven written expressions of concern or complaint which had been addressed through an MSP.

The Chief Executive also meets with Orkney's MSP on a regular basis and some complaints from constituents are received informally by this means.

## 2.10 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. During the year 2014-2015, PASS provided advice and support to 23 clients who made a complaint, raised a concern or an enquiry about the NHS. This is an increase from the 17 clients supported in the previous year.

PASS also support NHS Orkney patients who wish to provide feedback to NHS Grampian. A number of similar complaints were made to NHS Grampian by PASS in the last year relating to the visiting Psychiatric Service.

## 2.11 Scottish Public Services Ombudsman (SPSO):

During the year 2014/2015, the Ombudsman investigated only one complaint from a patient who was unhappy with the response they had received from NHS Orkney through the complaints procedure. This mirrors the number of complaints in 2013/14 when there was also only one complaint reviewed by the Ombudsman.

*Table 5 – Complaints investigated by SPSO*

	Number of Issues Raised	Outcome
Complaint 1	2	1. Not Upheld 2. Upheld

The complaint investigated by the Ombudsman related to:

1. inadequate treatment and care of a hernia since 2012 and
2. Response to and handling of the complaint.

Although the clinical care aspect of the complaint was not upheld, the Ombudsman felt that the Board had not impartially investigated the complaint. The Ombudsman:

- “Expected the information provided by the person complained about to be interrogated by a third party and not merely accepted”.
- “Notwithstanding that the Adviser did not disagree with the information contained in the response, I do not feel your complaint was thoroughly investigated”

The Ombudsman recommended that:

- The Board should make a formal apology for their failure to investigate and respond to the complaint;
- The Board should further consider the terms of their complaints policy and review their internal investigation processes.

The Ombudsman complaint resulted in a review of our investigative processes. We produced new flow charts which ensured that clinical complaints requiring an impartial or alternative clinical view were investigated by our Lead Clinician, Lead Nurse or Lead GP. We feel that this has, in practice, proved to be a very positive change for our patients.

## 2.12 **Complaints Handling Satisfaction Survey:**

In January 2015, the Patient Experience Officer sent out a questionnaire to people who had made a formal complaint during the last quarter of 2014 (October to December), in an effort to find out how they felt about the process of making complaints.

Eleven questionnaires were sent out by post and by email. Five completed questionnaires were returned making a 45% return rate.

A number of issues were highlighted from the survey:

- Patients feel when they make an initial complaint at point of service delivery, that staff can be unhelpful;
- People making a complaint are worried that it may affect their, or their family member’s care;
- Complainants can find the process of making a complaint stressful, although they do find it easy to do;
- It is important for people to be able to make a formal complaint as opposed to an informal complaint;
- Most of the respondents were satisfied with the eventual response and outcome of the complaint;
- It is clear patients would rather meet with staff who they have raised concerns with or who are involved in the care at the time and point of delivery.

We have moved to being more proactive in relation to meeting with complainants. However it is clear that patients would very much like to resolve their issues at point of service. With the introduction of the new complaints handling model in



2015/16, a new focus on early resolution at point of delivery of care will be introduced. NHS Orkney awaits the new model and is hopeful it will have a positive impact for our patients.

### 2.13 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.

*“I cannot praise the kindness, generosity and dedication of the nursing staff highly enough, and to witness it was one of the most humbling and inspiring experiences of my life.”*

*“Everyone I encountered, from the auxiliaries, catering staff up to the Doctors made me feel like a human being.”*

*“Merry Christmas and a Happy New Year to all the kitchen staff in the Balfour Hospital. Thank you for the super lunches.”*

After a number of years of improved reporting of compliments, unfortunately during the year 2013-14 and 2014-15 we failed to routinely record these. Although some departments remembered to report, many did not and therefore a true record of the number of compliments cannot be provided.

Reminders are sent out quarterly however, the challenge of collecting and recording the positive feedback weighed up against the day to day running of busy wards and department is one that NHS Orkney has recognised.

## Section 3

### The culture, including staff training and development

- 3.1 It has always been a challenge to reassure our staff that a complaint is not a bad thing. Often people react defensively and are upset by any negative feedback that they or their department has received.
- 3.2 The introduction of the Patient Rights Act and the literature that we have distributed to our staff and patients has helped to make us more aware of how important feedback is.
- 3.3 We used our local Staff Conference to provide information and highlight the use of Patient Opinion, how to signpost patients who wish to make a complaint and the local Patient Advice and Support Service.
- 3.4 We have now rolled out more specific investigative online training modules for our investigating officers and those staff directly involved.
- All senior managers have been provided with the link to the training and asked to ensure they undertake the training and also share with any other relevant members of staff.
- 3.5 NHS Scotland has monitored the uptake of the basic feedback module and compared with other organisations. You will see from the table below, that our numbers on the Feedback and Complaints module are very favourable.

*Feedback and Complaints E-Learning Modules – Uptake via Learnpro as at 31<sup>st</sup> October 2014*

	<b>Module 1</b> Valuing Feedback	<b>Module 2</b> Encouraging Feedback and Using It	<b>Module 3</b> NHS Complaints and Feedback Process	<b>Module 4</b> The Value of Apology	<b>Module 5</b> Managing Difficult Behaviour
<b>Health Board*</b>					
Healthcare Improvement Scotland	1	1	1	1	1
National Waiting Times Centre	13	12	12	12	12
NHS 24	1	0	0	0	0
NHS Ayrshire and Arran	82	73	67	63	63
NHS Borders	174	141	130	125	126
NHS Dumfries and Galloway	23	18	17	17	17
NHS Education for Scotland	4	4	3	3	3
NHS Fife	103	87	89	87	84
NHS Forth Valley	62	49	47	47	47
NHS Grampian**	15	12	11	11	11
NHS Greater Glasgow and Clyde	4069	3742	3618	3534	3498
NHS Highland	63	57	53	53	50
NHS Lanarkshire	891	816	793	776	766

NHS Lothian	310	273	266	253	252
NHS National Services Scotland	6	6	6	6	6
<b>NHS Orkney</b>	<b>141</b>	<b>121</b>	<b>116</b>	<b>111</b>	<b>109</b>
NHS Shetland	68	64	57	56	53
NHS Tayside	1873	1669	1584	1552	1528
Scottish Ambulance Service	3	2	1	1	2
State Hospital	94	87	79	78	80
Western Isles Health Board	27	23	21	20	20
<b>Grand Total</b>	<b>8024</b>	<b>7257</b>	<b>6971</b>	<b>6806</b>	<b>6728</b>

### 3.6 As a snapshot of training uptake numbers:

In the last quarter of 2014-15, our figures for undertaking the training modules were:

- **NES: Complaints and Feedback – 38 (6.4%)**
  - Admin & Clerical – 3 (2.9%)
  - AHP – 4 (7.7%)
  - Medical/Dental – 1 (2.0%)
  - Technical (Laboratory, Dental Support & Pharmacy) – 5 (11.9%)
  - Nursing & Midwifery – 18 (8.0%)
  - Ancillary – 7 (9.3%)
  
- **NES: Complaints Investigation Skills – 49(8.3%)**
  - Admin & Clerical – 4 (2.9%)
  - AHP – 2 (3.8%)
  - Medical/Dental – 1 (2.0%)
  - Technical (Laboratory, Dental Support & Pharmacy) – 8 (19.0%)
  - Nursing & Midwifery – 16 (7.1%)
  - Ancillary – 18 (24.0%)

## Section 4

### Improvements to Services

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

Communication issues relating to Community Nursing Service on island.	New system now in place to ensure oil terminal nursing staff know when cover is required.
Appointment timing for Island residents when attending Outpatient Appointments	Admin and Nursing staff reminded that Island residents may have onward transport to get to and reminded that where possible, this is noted when they check in for their appointment.
Communication and medication issues during patient discharge	Complaint highlighted a number of communication issues and will be used by the ward team to improve discharge process.
Patient complained when, after admission to the hospital, their operation was cancelled.	Multi-disciplinary meetings to be held on Friday mornings to ensure patients who have complex conditions are fully discussed.
Patient complained regarding his "unavailability" for a referral appointment making his wait for treatment longer. Reference made to a letter he received and that the contents of the letter were not accurate.	Clinical Admin Manager has agreed to review template for letter.
Lack of Dignity and Respect Lack of Communication between staff members Not meeting patients needs	SCN committed to working with staff on training and development needs and to highlight the experience of this patient and her family with staff.
Attendance with daughter at A&E following a call made to NHS24 resulted in an unnecessary wait due to a staff member not noticing important fax correspondence from NHS24.	Discussed the complaint with the staff member, highlighting the importance of the processes of dealing with emergency patients attending switchboard and manager will also provide further training.

- 4.3 Informal feedback and complaints are logged and recorded by the Patient Experience Officer and improvements and actions are reported weekly to the DATIX Review Group and quarterly to the Person Centred Care Group and Corporate Management Team. Trends are noted and discussion undertaken when appropriate on how these can be managed.

Our informal contacts often result in immediate action, if appropriate. Often patients call for advice or support in relation to concerns they have and NHS Orkney's Patient Experience Officer will often investigate any concerns in an attempt to provide a response to the patient as quickly as possible. Various examples of where this has taken place are:

Patient had attended ARI for surgery and was concerned at the costs to NHS Orkney as surgery was cancelled at the very last moment (patient was prepped and ready for theatre) because the "parts" required had not arrived.	Patient did not wish to make a formal complaint. She simply wished to make sure NHS Orkney knew that this had happened from a cost point of view. Patient thanked and information shared with Director of Finance who is to discuss with NHSG colleagues.
Patient unhappy with attitude of relief nurse at GP surgery.	Primary Care Manager contacted patient and discussed concerns. PCM also contacted relief nurse and explanation given. Conversation had been difficult and had resulted in a misunderstanding.
Patient unhappy with response received from NHSG and required contact details for NHSG Feedback team.	Information and advice given.
Patient wished to know why she had not yet received an appointment for the Ophthalmology clinic.	Spoke to Clinical Admin Manager and Medical Records and telephoned lady back to explain delays had been due to waiting time delays.
Patient requested information on Gluten Free Food prescriptions for Isles Residents.	Contacted Pharmacy who provided information to respond to patient. Contacted patient who was happy with information received.
Parent emailed to thank staff for the excellent service provided whilst her daughter was in hospital	Responded to email and forwarded to staff involved in the care of the child.

- 4.4 Where appropriate, complaints of a significant concern are escalated to the Director of Nursing, Midwifery and AHPs or the Medical Director. This is logged through the weekly DATIX Review Group who ensure reported incidents on DATIX and Significant Events are linked together with relevant complaints.
- 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. The patient has felt strongly enough to make a complaint which equates to the fact that they did not have a good experience. We make every effort to ensure that patients are fully aware of how the investigation has taken place, what we have identified and how we will make improvements.

## Section 5

### Accountability and Governance

- 5.1 The Person Centred Care Group meets quarterly and members are provided with an update at their meeting of all Patient Experience information. This includes detailed information on complaints and feedback.

Non-Executive Directors who attend the meeting on a regular basis, are encouraged to engage and challenge the content of the report and regularly ask for assurances that we have made changes or improvements.

Minutes and reports from the Person Centred Care Group are reported through the Quality Improvement Committee and then to the Board.

- 5.2 Quarterly reports are also submitted to the Corporate Management Team and the Safe and Effective Care Group.
- 5.3 NHS Orkney Board members receive a Patient Experience update in the form of a six monthly report and an Annual Report.
- 5.4 Information on improvements, changes and responses are provided to all of the above committees.
- 5.6 All feedback and complaints are reviewed weekly as part of the DATIX Review Group meeting. This group includes the Director of Nursing, Midwifery and Allied Health Professions, the Medical Director, representatives from Clinical Governance and the Patient Experience Officer. As mentioned above, complaints are linked to DATIX incidents and Significant Events. Any concerns regarding the complaint are escalated as necessary to the Medical Director or Director of Nursing.

## Section 6

### Person-Centred Health and Care

6.1 We are pleased to report that a number of initiatives have been undertaken within NHS Orkney.

#### 6.2 Day Surgery Patient Questionnaire

The Day Surgery Unit handed out 50 questionnaires this year as part of its annual survey. Out of these 50 we received 28 back in the post. This is a fairly good return rate of 56%.

The feedback was overwhelmingly positive. A few examples of questions and response rates were:

#### In the Day Surgery unit.....

Were you given written and /or verbal instructions?	Yes <b>96%</b>	No <b>0%</b>	N/A <b>4%</b>
Did you feel that you were treated with dignity and respect?	Yes <b>100%</b>	No <b>0%</b>	
Did you feel that your privacy was maintained?	Yes <b>96%</b>	No <b>4%</b>	
Did you feel the facilities of the Day Surgery unit were satisfactory?	Yes <b>100%</b>	No <b>0%</b>	

Very positive comments were received from the patients attending the unit:

- “It was an excellent experience”
- “There is always room to improve but I think we are very lucky with our nurses and surgeons, etc. They are all very good”
- “I am a really nervous patient and I thought all of you were just amazing”
- “I felt safe and secure in the care given by the staff. A calm and smoothly run unit.
- Totally professional. Very clean and tidy. Couldn’t ask for more. No negatives”

#### 6.3 Neurology Patient Questionnaire

The Neurology Patient Survey was undertaken again this year. Thirty two forms were returned from the 44 which were handed out. This is an extremely good return rate of 72%. This is much higher than normal return rates for patient questionnaires.

For information here are some of the comments received:

- *(Physiotherapy)* “was very understanding of my husband’s opinions and took time to explain the benefits of the foot splint would be to him – in simple terms”
- *(Neurologist)* “all very good but the video link not working right, made it hard to hear everything so it took longer than it should”
- *(neurologist)* “just do what I’ve been told, and only time will tell”
- *(Parkinson’s Nurse)* “all went excellently- thank you”

It should be noted that these are just two examples of patient surveys undertaken by staff. Our staff regularly embark on projects to collect and review patient feedback.

## 6.4 New Feedback Posters

We have introduced new posters in all areas providing patients, and staff, with information on how they can provide feedback. These posters signpost to Patient Opinion, Patient Advice and Support Service, the Patient Experience Officer and other local contacts.

**Your Health, Your Rights** NHS Orkney

Everyone who uses the NHS in Scotland has **rights** and **responsibilities**.

All patients have the **right** to:

- Access the services
- Communication and Participation
- Confidentiality regarding their personal information
- Being treated with **dignity** and **respect** at all times
- Safe and effective care
- The opportunity to leave **feedback** and make **complaints**

For more information, to give us your feedback or to make a complaint, comment or suggestion, contact :

**Julie Tait** - Patient Experience Officer  
on **01856 888 221** or email [julietait@nhs.net](mailto:julietait@nhs.net),

**Patient Advice Support Service** Orkney Citizens Advice Bureau  
Anchor Buildings  
6 Bridge Street  
Orkney  
KW15 1HR  
Tel: 01856 875 266  
info@cas.org.uk, or visit  
[www.cas.org.uk/patientadvice](http://www.cas.org.uk/patientadvice)

Alternatively you can contact these other organisations

**Patient Opinion** Every voice matters  
Your story can make a difference  
Share your story at :  
[www.patientopinion.org.uk](http://www.patientopinion.org.uk)  
or call 0800 122 31 35

**NHS Orkney**

**Do you know how and where you can get help to leave feedback on our services?**

**Help Is Available**

- Julie Tait**  
Patient Experience Officer:  
Email [julietait@nhs.net](mailto:julietait@nhs.net)  
or phone **01856 888 221**
- Patient Opinion**  
Your story can make a difference.  
Share your story at:  
[www.patientopinion.org.uk](http://www.patientopinion.org.uk)  
or call **0800 122 31 35**
- Leave a **feedback leaflet** in our **comments boxes** – these are situated in various locations around the hospital.
- Social Media**  
We have **Facebook** and **Twitter**
- Orkney Citizens Advice Bureau**  
**Patient Advice Support Service**  
Anchor Buildings  
6 Bridge Street  
KW15 1HR  
Tel: **01856 875 266**  
Email: [info@cas.org.uk](mailto:info@cas.org.uk)
- Speak to someone** involved in the Service: any **staff member** will be able to help you with a concern or query you have. Just ask!
- Fill in the **feedback form** on our website: [www.ohb.scot.nhs.uk](http://www.ohb.scot.nhs.uk)

## 6.5 Hospitality Kits

During 2014/15 we received funding from the Endowment Fund to purchase hospitality kits. These are small kits for patients who have arrived on the ward without any personal belongings and provide a small sachet of shampoo, shower gel, shaving foam, a toothbrush and toothpaste, a refreshing wipe and a deodorant wipe.

Following a short pilot in the Receiving Unit, these have been extremely well received and we have had to purchase a further supply. Feedback from patients is extremely good with those who have been given a kit commenting on how “excellent and much appreciated” they are.

## 6.6 Sleep Kits

The Sleep Kits are finally in place and being used by our patients. The Endowment Fund agreed to provide initial funding for a small supply of sleep kits (100) to trial in the hospital. We firstly tried these in the Assessment and Rehab ward but unfortunately due to the clinical conditions of many of the patients on the ward, these were not being used. We therefore decided to move the kits to the Acute Ward. Within three weeks, all 60 kits had been given to patients who could make use of them and we were being asked for more!



A few questions to one of the members of staff responsible for distributing the kits showed that she felt these were “an excellent idea and, in my experience, a great success.”

We enclosed a short survey with half the kits but unfortunately, apart from one form, these do not seem to have been completed. The feedback that we did receive was that the patient had slept much better after using the kit than what they had before and that the mask had helped them rest their eyes as they had a condition which was eye related.

By taking into consideration the number of packs we have since ordered, 600+, we must assume that staff are recommending use of the kits and that they are being well received by our patients.

## 6.7 Person Centred Care Group Newsletter

Following the quarterly meeting of the Person Centred Care Group and based on a suggestion by members, we now distribute a newsletter highlighting the main themes of the meeting and highlighting with staff any issues which have arisen at the meeting.

### PERSON CENTRED HEALTH & CARE—NEWSLETTER

NHS ORKNEY Issue 2—Oct 2014

#### Person-Centred Care Group — Keeping You Informed

Following a review of the NHS Orkney Board Meetings, a new Operational Group has been formed based on what was the Board's Involving People Committee.

The Group is chaired by Elaine Pease, Director of Nursing, Midwifery and AHPs and is attended by representatives from the Hospital, Orkney Health and Care, Primary Care, Third Sector, etc.

The Groups role, amongst other things is to ensure

- The needs of patients and families are core to decision making and all improvement activity;
- The organisation participates effectively in the Person-Centred Health and Care Collaborative to promote best practice and encourage learning and improvement to ensure the patient voice is at the heart of all we do;
- Supports improvement in the ways in which the Board is listening to, and learning from, the voices of patients, improving systems around feedback and complaints;

At its first meeting on 1st October, it was agreed that following each meeting the Group would share the key themes and discussions with staff in the form of this newsletter.

The Key Themes from the Person-Centred Care Group in October were:

**Involving People:**

- Training—staff are reminded that there are online Complaints Training modules available and you are encouraged to undertake these;
- Photo Boards—we are working on finalising the boards and hope to have these in place in the next month or so; Managers are reminded that should they receive an Ombudsman Report, that this should be reviewed and, if appropriate, discussed with staff;
- Patient Surveys—the Patient Experience Officer is looking at ways of receiving regular feedback on the ward;
- Young Volunteers—staff should be aware that young volunteers will be visiting the hospital over the next few months to undertake “real-time” feedback. They will be working on their own but staff are asked to assist them where required. More information is provided below.

**Patient Advice and Support Service**

- We hope to receive feedback on what key areas clients contact PASS about so that we can see whether improvements can be made;

**Equality & Diversity:**

- New work has begun on the PIN policy for Embedding Quality, Diversity and Human Rights in NHS Scotland;
- It is recognised that data collection in this field is poor but reassured that new systems will soon be in place which will remedy this;

**Volunteers:**


- The Investment in Volunteers Standard Self Assessment has been submitted;

**AGC:**

- Terms of reference for the Group were updated, reviewed and agreed.

**Key Message:**

**Don't Forget to Introduce yourself to your patients and wear your badge.**



### And now for the News...!

You will remember a few months ago, we asked staff to create stickers to wear with the “Hello” logo and space for writing your name. Firstly, thank you all for your feedback. Its important when we try something new to get feedback from both staff and patients to see what we did well and what we could have done better.


What we understand from the feedback you provided was that nearly all of you felt the stickers were

- Inappropriate; you already wore name badges; the quality of the stickers was poor; you felt it was a waste of money (they did not have any effect on whether you were introducing yourself or not).
- Patients were not so wholly critical with around 50% feeling happy about the use of the stickers and commenting positively.

Having reviewed this project we realise that our communication with staff could have been much better. The concept of the stickers was based on a campaign started by Dr Kate Dringler, a doctor who is normally with cancer. She writes an online blog and started a campaign some time ago #HelloName. Many Health Boards are now using this idea as a way of making staff more aware of introducing themselves to their patients. We realise that giving you this background and explaining what we were trying to achieve would have resulted in a much more positive outcome for all who took part.

Our patient feedback in National Inpatient Surveys is that they do not know who staff are and it is really important to ensure that we can improve on this. Dr Kate Dringler says:

*“starting the relationship with a patient begins with an introduction.”*



**i-pads and Young Volunteers**

Earlier this year, we received funding to purchase i-pads with a view to using them to collect Patient Feedback. In a bid to encourage Volunteering within NHS Orkney, we are working together with VAO and have embarked upon a project involving the i-pads and some young volunteers.

Eight young volunteers, once all the paperwork is finalised, will visit weekly to gather real-time feedback from patients on the wards. We hope to be able to report regularly on the information received. This should allow us to see what is good, what is not so good and what our patients would like to see improved.

SCNs are aware of this project and we will be visiting wards in the next few weeks to provide the young volunteers with a short induction.

**Photoboards are now being put together and will be ready for displaying in the wards in the next few weeks— if you have not already done so, please make sure you have had your photograph taken!**



If you would like to discuss anything you have read here, please don't hesitate to contact:

Julie Fair on 8221 or juliefair@nhs.uk

## 6.8 Patient Stories

We have introduced Patient Stories at our NHS Orkney Board meetings. A number of patients and service users have attended to share their story and talk about their experiences of our services and facilities. These have been very well received by all those present at the Board and we are very thankful for the time given by those who have shared their story.

## 6.9 Photo/Name Boards

We now have staff photo boards in place in our wards.

## 6.10 Person Centered Health and Care Collaborative Learning Events

The Person Centred Health and Care Collaborative is currently under review however during the last year a number of events took place which allowed members of staff to engage in person centred care work.

Four members of staff attended the National Learning Event in Glasgow in May 2014. This was an extremely interesting event and each member who attended the various breakout sessions enjoyed a renewed focus on person centred care ideas.

Here are some of the ideas the group took back from the event along with any progress made:

- Flexible visiting in all areas
  - *This is now being investigated*
- Playlists for life – for patients suffering from dementia and Alzheimer related illness
  - *Unfortunately, after some investigation, we could not move forward with this idea due to capacity issues*
- “What’s important to me” forms to be introduced as a test
  - *These are being used in Assessment and Rehabilitation Ward*
- Staff experience – look at introducing a feedback cubbyhole on a ward
  - *Senior Charge Nurse on Assessment and Rehab has introduced some staff experience initiatives – this is reported separately in this report*
- Self medication leaflet - review
- Test results being given to patients, how would we do this?
  - *Investigated and may be possible in the new hospital*
- Posters for Assessment and Rehabilitation – advertising Must do with Me

## 7. Summary and Conclusions

- Formal Complaints have increased from last year, and are the highest recorded since recording began;
- General Feedback including suggestions, concerns and comments has remained almost identical in number from last year;
- Emerging trends from 2014/15 are similar to last year. Clinical Care and Waiting Times have remained on the yearly trends list for a number of years now;
- Unfortunately, following an improvement last year, our response times have declined to 77.8% this year and one complaint was not acknowledged within 3 working days;
- Only one complaint was independently reviewed this year by the SPSO;
- Primary Care complaints increased from 20 to 25 this year;
- Complaints and Feedback received from our patients and their families, where appropriate, results in improvements and changes such as training for staff, changes to appointment letters and review of communication systems;
- Figures show our staff uptake on the complaints training modules is very good in comparison to other boards;
- Conducting a Complaints Handling Survey provides valuable information on how patients would like their complaints dealt with. Feedback shows patients would prefer to be able to raise and resolve concerns at point of delivery of care;
- Unfortunately compliments are not as routinely recorded as we would like and this should be considered by the Corporate Management Team;
- The work done by wards and department in regard to person centred care should be recognised;
- The work of the young volunteers in the hospital should be applauded. This has been an extremely positive project for all those involved.