

Not Protectively Marked

<p>NHS Orkney Board – 16 July 2020</p> <p>Report Number: OHB2021-40</p> <p>This report is for approval</p> <p>Patient Feedback Annual Report – 2019/20</p>	
<p>SMT Lead Author</p>	<p>Christina Bichan, Chief Quality Officer Julie Tait, Patient Experience Officer</p>
<p>Action Required</p>	<p>The Board is asked to:</p> <ul style="list-style-type: none"> • <u>Approve</u> for submission to the Scottish Government by the 30 September 2020
<p>Key Points</p>	<ul style="list-style-type: none"> • The number of complaints received has decreased in the second year since the introduction of the new Complaints Handling Procedure. • During the year we have received and handled 73 Early Resolution Complaints and 46 Investigation Complaints. • Two complaints received at Early Resolution stage went on to be escalated to Investigation Stage. • 89% of Early Resolution complaints have been responded to within the 5day timescales. • 39% of Investigation complaints were responded to within 20 days. • Waiting times and the quality and experience of clinical care have been the main themes this year. • The majority of complaints were recorded within Acute Services. • There has been an increase in patients contacting their MSP to make a complaint on their behalf. • Staff uptake of Complaints and Feedback training modules continues to be positive.
<p>Timing</p>	<p>To be considered at the July 2020 meeting.</p>

Link to Corporate Objectives	<p>The Corporate Objectives this paper relates to:</p> <ul style="list-style-type: none"> • Improve the delivery of safe, effective patient centred care and our services;
Contribution to the 2020 vision for Health and Social Care	<p>This report reflects on whether the care provided by NHS Orkney is of the highest standards of quality and safety, with the person at the centre of all decisions.</p>
Benefit to Patients	<p>Patients generally provide feedback because something has gone wrong, they want to share their experience or they wish to complement our services. Feedback offers NHS Orkney the opportunity to listen, learn and take action to ensure we are providing safe, effective and person-centred care which is informed by the experience of those who use our services.</p>
Equality and Diversity	<p>EQIA - N/A</p> <p>NHS Orkney operates a Complaints Handling Procedure which is accessible and participative for any patient, family member or service user.</p>



Patient Feedback Annual Report

2019-2020

Foreword

The 2019-20 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 and holism
- power and empowerment
- choice and autonomy
- empathy and compassion

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 to help us continue to learn and improve thus providing the best possible health care to the population of Orkney.

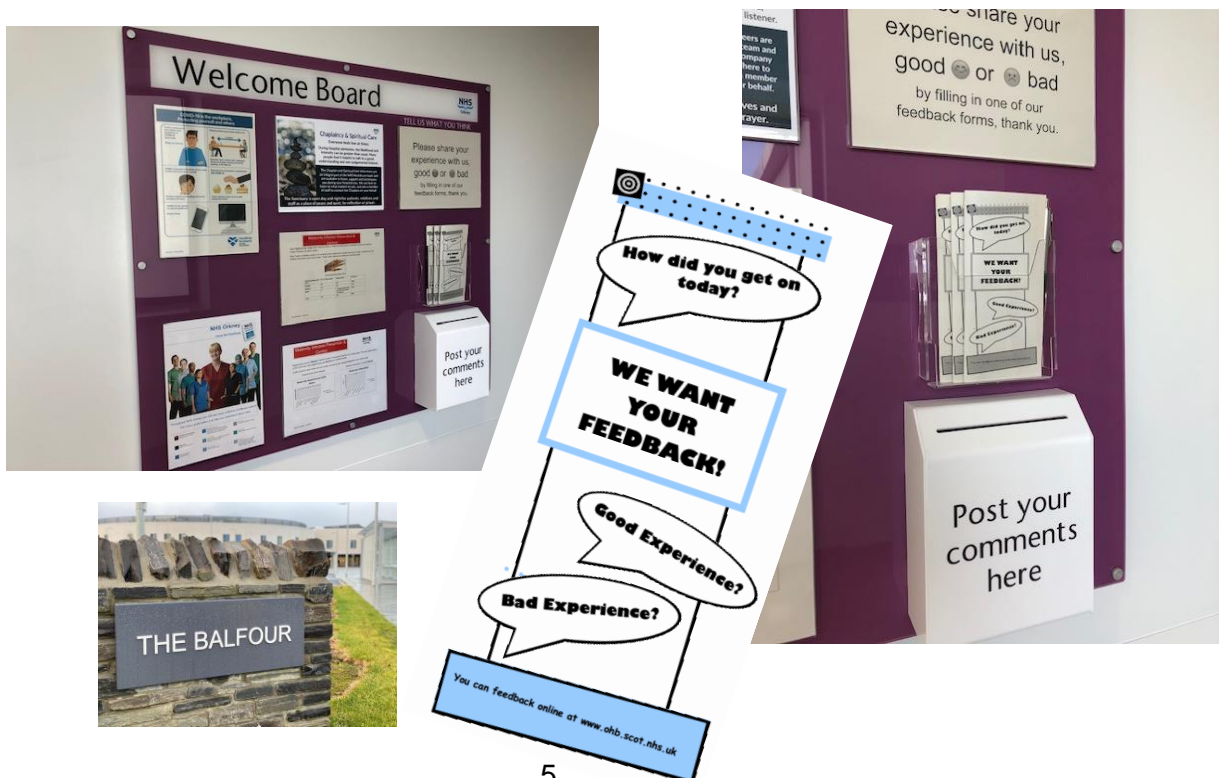
2019/20 has been an exciting and challenging year with the move to our new hospital and healthcare facility, The Balfour in June 2019 and the Covid-19 pandemic in early 2020. The move to the new facility offered an exciting opportunity for engagement and we have sought to gather and learn from public feedback in these early months. Throughout the move and in meeting the challenges posed by Covid-19 staff have worked tirelessly to ensure services remain person centred whilst at the same time responding to significant changes throughout the year. Although there has been an overall increase in the number of complaints received this year, performance in addressing these complaints in a timely manner has improved and the majority have been addressed at stage 1 which is a positive indicator that our staff and services have remained focussed on providing high quality care that has the patient, their families and carers at the heart during this time of significant change.

Christina Bichan
Chief Quality Officer
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.
- 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;
 - 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.
 - Feedback Leaflets are available throughout our health care locations which can be posted in Comments Boxes located in various departments and services or posted using our freepost address.
 - Since moving into our new hospital and healthcare facility, the Balfour, we introduced welcome boards at the entrances to all our wards and areas. These include a comments box and space for information sharing. We are very encouraged by the number of patients who have used this facility since the Balfour opened its doors in June 2019.



- Patient Satisfaction Surveys are also undertaken locally at a service level and also as part of national survey activity.
- We also post regularly 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.
- Electronic tablets can be used by any member of staff to gather feedback using the Survey Monkey tool. We have also used Survey Monkey to ask our patients about their experience at our Central Reception and to gather feedback on future plans to invite patients to hospital appointments via text or email.
- Our Young Volunteers have continued to gather feedback as part of our ongoing Real-time Inpatient Feedback project.

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 available throughout our hospital and healthcare services. A link is available in the information we provide to patients during the initial complaint stages and also on our website.

1.6 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, Senior Management Team, Service Managers and Senior Charge Nurses.

1.8 **Complaint process experience**

Regrettably, evaluation of the Complaint process experience in 2019/20 has not been completed in time to inform this annual report. Each year short surveys are sent out to a random selection of complainants at year end however due to the Covid-19 pandemic this has not yet been undertaken.

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, particularly when the response is not their expected outcome.

Section 2

Encouraging and Handling Complaints

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.

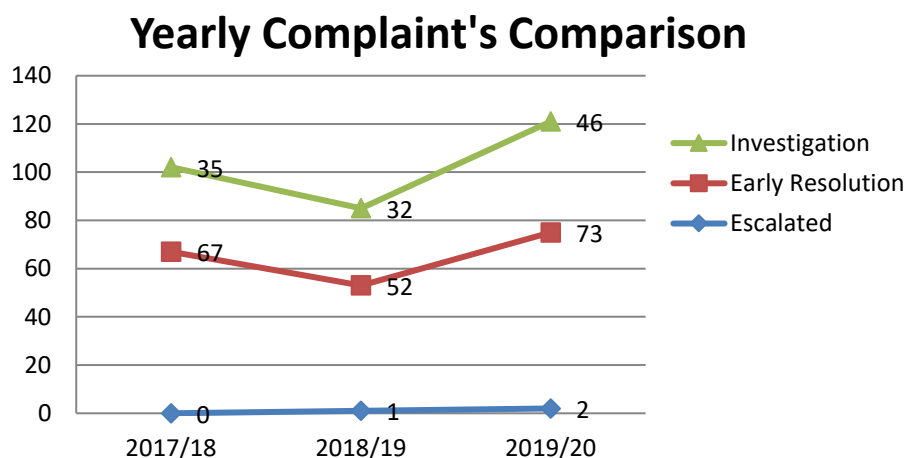
2.1.1 Early Resolution and Investigation Complaints

Total Number of Complaints	Total
Number of Complaints Received	122

Number of Complaints Closed at Each Stage	Total	As a %
Number of Early Resolution Complaints Closed	73	100%
Number of Investigation Complaints Closed	46	100%
Number of Escalated Investigation Complaints	2	100%

*1 complaint was 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.

The following chart shows comparisons between our complaints over the last three years. There has been a 42.35% increase in complaints in 2019/20.



In the year previously, 2018-19, we investigated 52 Early Resolution complaints, one Escalated stage complaint and 32 Investigation Stage complaints, 85 in total. In 2019/20, this total is 121.

We improved our investigation process during 2017-18 in an attempt to offer reassurance to complainants that their complaint has been investigated and reviewed robustly. 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:

Early Resolution complaints

	Number	As a % of all complaints closed at stage one
Number of complaints upheld at stage one	29	40%
Number of complaints not upheld at stage one	24	33%
Number of complaints partially upheld at stage one	20	27%
Total stage one complaints outcomes	73	100%

Investigation complaints

	Number	As a % of all complaints closed at stage two
Non-escalated complaints		
Number of non-escalated complaints upheld at stage two	19	41%
Number of non-escalated complaints not upheld at stage two	12	26%
Number of non-escalated complaints partially upheld at stage two	15	33%
Total stage two, non-escalated complaints outcomes	46	100%

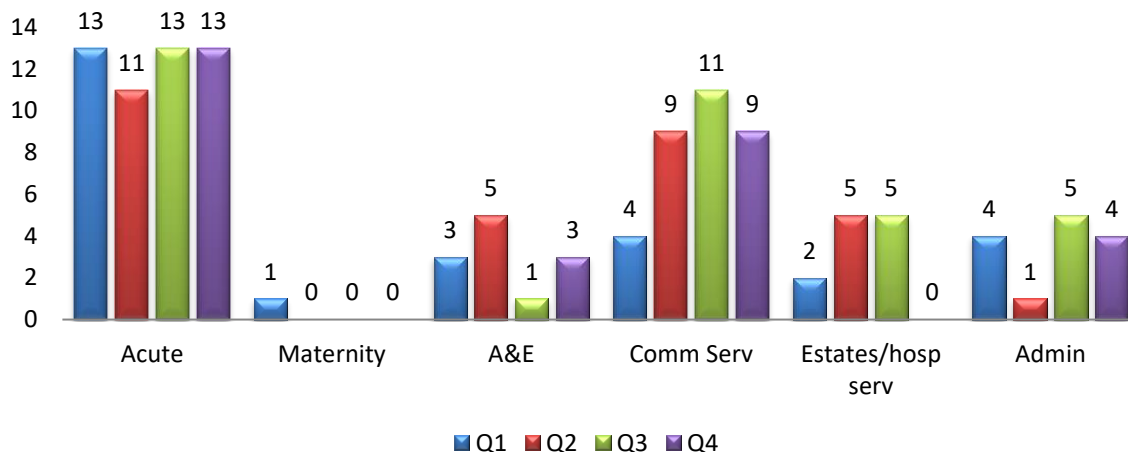
Escalated complaints

	Number	As a % of all escalated complaints closed at stage two
Escalated complaints		
Number of escalated complaints upheld at stage two	1	50%
Number of escalated complaints not upheld at stage two	0	-
Number of escalated complaints partially upheld at stage two	1	50%
Total stage two escalated complaints outcomes	2	100%

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.

Complaints by Service Area



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 on the following information as one of the key performance indicators of the CHP.

	Number	As a % of complaints closed at each stage
Number of complaints closed at stage one within 5 working days.	65	89%
Number of non-escalated complaints closed at stage two within 20 working days	1	50%
Number of escalated complaints closed at stage two within 20 working days	18	39%
Total number of complaints closed within timescales	84	69%

The 39% response rate to Stage 2 complaints is disappointing but is a slight improvement on the 36% of last year. In line with the direction of the Clinical and Care Governance Committee, investigation quality has been the primary concern. Additionally a number of the complaints were subject to delays due to staff focus being redirected to planning and support for services in managing the Covid-19 Pandemic. The 89% response rate to Stage 1 complaints is an increase in 12% from last year and evidence that staff handling these complaints respond quickly and efficiently. Stage 1 complaints are the most

effective way to respond to complaints for our patients. A quick reply from the staff involved 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. However, waiting times and care experience make up a number of the Early Resolution complaints whilst communication, clinical care quality and experience are identified as the main themes within Investigation complaints.

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.

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

NHS Board Managed Primary Care services;	
General Practitioner	7
Dental	1
Ophthalmic	n/a
Pharmacy	0
Independent Contractors - Primary Care services;	
General Practitioner	13
Dental	4 <small>*Q4 figs only – no return received for Q1/Q2/Q3</small>
Ophthalmic	1
Pharmacy	1
Total of Primary Care Services complaints	27

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 8 complaints were made during the year relating to this service which accounts for 30% of 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 23 complaints or concerns had been received, compared to 33 from 2018-19. Complaints relate mostly to clinical care whilst waiting times was the main theme in the previous year.

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 1st April 201 – 31st March 2020, 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.

Issue	Outcome
Payment for emergency medical treatment for EU nationals.	Advice provided regarding individual cases, personal insurance, payment of NI contribution and EHIC card requirements.
Waiting time for orthopaedic inpatient appointment.	Investigation showed patient had unacceptable delay. Every effort made to attempt to rectify situation to allow for satisfactory outcome for patient. Appointment arranged at earliest opportunity.
Lack of Psychiatry support	Advised that discussion had been taking place and Locum cover had been secured for providing a number of months cover.

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.

During the year 2019/20, PASS provided advice and support to 43 clients who made a complaint, raised a concern or an enquiry about the NHS. This is slight increase from last year when the number of clients utilising this service to seek support on making a complaint or raising a concern were 35.

2.6 Scottish Public Services Ombudsman (SPSO):

During the year 2019/20, the Ombudsman independently investigated two complaints from patients who were unhappy with the response they had received from NHS Orkney through the complaints procedure. Three complaints were investigated by the SPSO in the previous year.

SPSO have advised they felt further investigation of one complaint was not proportionate and did not uphold the concerns raised. The second case currently remains open at the investigation stage.

Complaint	Outcome	SPSO Recommendation and Action Taken
Clinical care, staff attitude, miscommunication issues and lack of follow up in relation to hospital admission	Not proportionate for further investigation.	N/A
Unreasonable delay in treating injuries and not identifying an injury.	Under Investigation	

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:

Thank you for providing the care my Mum needed not only last month but also in her other scheduled and unscheduled visits. It was a great comfort to me that you could find a room for her, make her as comfortable as possible, and that I could stay with her to the end.

Good evening!
I just want to thank all the nurses and doctor very much for their help and care! I twisted my ankle while I was on holiday in Orkney....
...I am very grateful and relieved that the accident went so smoothly and I was able to continue my journey. A huge thank you to everyone!

You are all simply amazing at your jobs & felt in such good hands. ← *

Please pass on my sincerest thanks to all of the staff on the ward and in AGE who treated me and helped to keep me reassured, fed and watered during my stay.

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

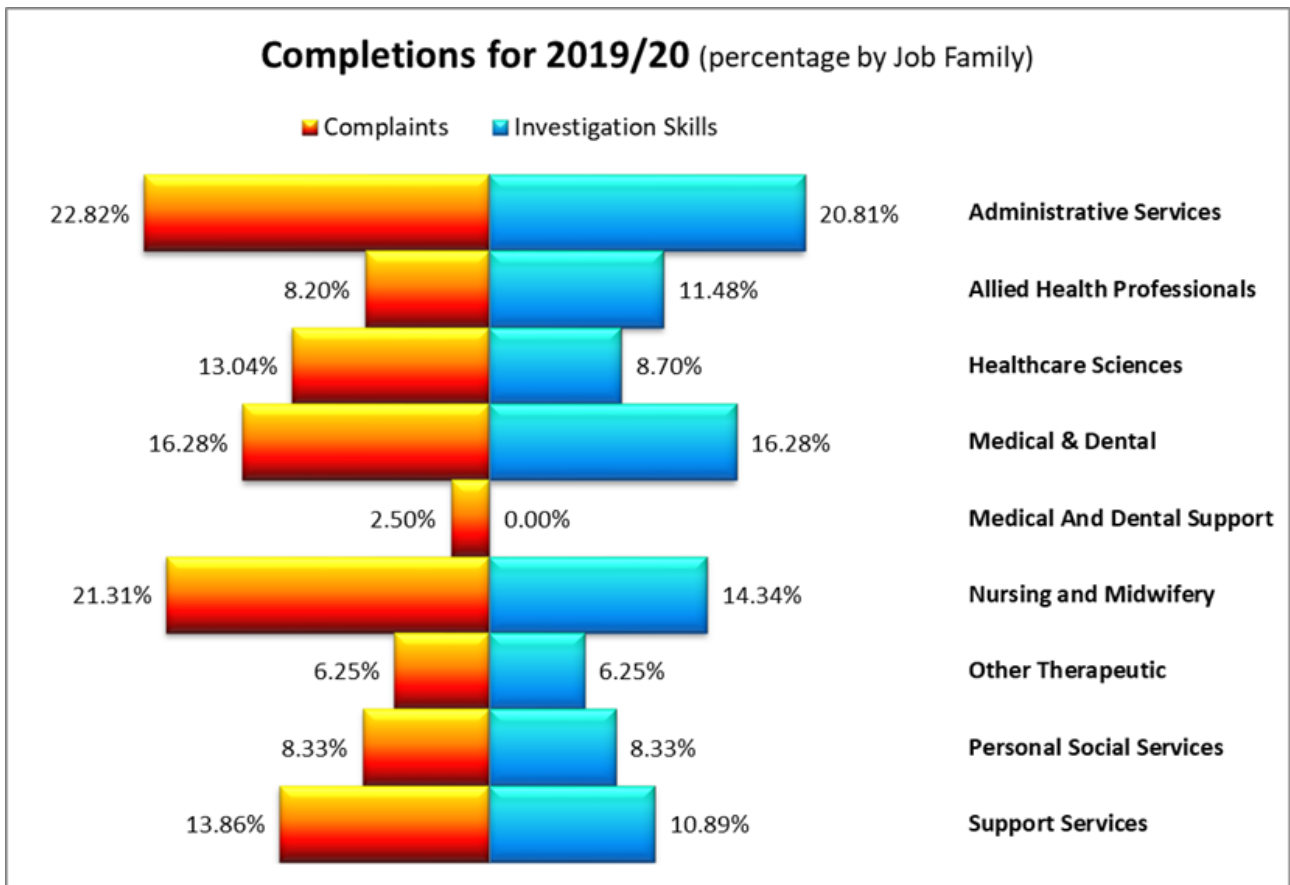
- to be treated with dignity and respect
- for us to show compassion by taking the time to listen, to talk and do the things that matter to them
- to receive high quality patient care and when they don't, we will listen and act on feedback so we can learn, improve and do better next time
- for us to 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 In practice we are using i-matter to further improve engagement with staff across our services and are building capacity and capability in the use of improvement methodology to ensure we are able to act on the feedback we receive and make measurable improvements in the quality of care provided.
- 3.2 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.
- 3.3 NHS Orkney's Staff Conference in November 2019 focussed on *Dignity at Work* and included sessions from Andrew Moore, Head of Excellence in Care at Health Improvement Scotland on "Learning from Patient Experiences". Other sessions included "Courageous and Compassionate Conversations" and "Realistic Medicine". Staff were encouraged to attend these events as part of their ongoing professional development.
- 3.4 NHS Orkney offered staff the opportunity to undertake a local *Customer Service Training* course at the local college. This was aimed at frontline administration staff who are often the staff who come into contact with our patients before any clinician.
- 3.5 In November 2019, health and social care staff attended "Strength-Based (Good) Conversations" Workshops facilitated under the Community Led Support initiative.
- 3.6 NHS Orkney staff continue to access the e-learning Complaints and Feedback and Investigation Skills modules. We believe this shows a commitment by staff to ensure they are able to acknowledge, address and respond to complaints and concerns raised by our patients.

Completion Rates for current staff are as follows –



Section 4

Improvements to Services

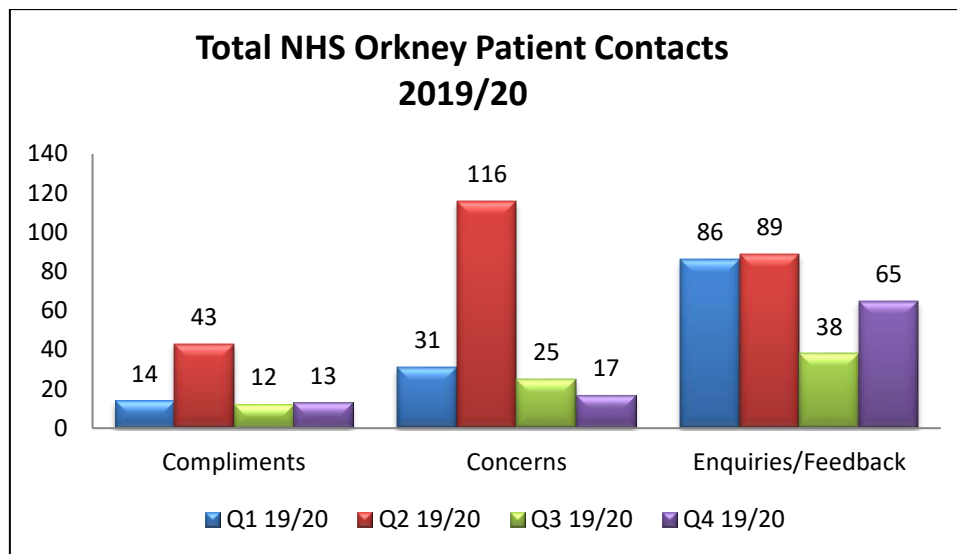
4.1 When any aspect of a complaint is upheld, the service identifies what improvements can be made. We continue to use our Complaints Reporting Template which provides an opportunity for staff to clearly identify actions, improvements and recommendations.

4.2 The following are some examples of improvements made over the last year:

Issue Raised	Findings	Outcome
Patient's family member was not able to be with patient during time in A&E.	Communication issue between reception and nursing staff resulted in a misunderstanding.	Training issues identified and progressed.
Dermatology waiting time for an appointment.	Patient had not been given an appointment within the agreed review timescale.	Appointment arranged as soon as possible. Dermatology services are now provided by an alternative Health Board to ensure more access for Orkney patients.
Patient attended for surgical procedure which could not take place as equipment was not available.	Equipment was not checked prior to procedure and on day of admission was found to be out of date.	New process now in place for ordering this par
Family not informed of discharge of family member to local care home.	All other arrangements for discharge were carried out however, call to family was overlooked.	Staff reminded at morning huddle and complaint reviewed as part of ongoing discharge process improvements.
Patient checked in for outpatient appointment and waited in waiting room for 40 minutes before being told clinician was off sick.	Clinician had called in sick previous evening and unfortunately staff had been unable to contact patient. Appointments not cancelled on electronic system.	Review of process for short-notice cancelling of appointments to ensure main reception staff are aware that clinic is not going ahead.

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 and Safety Group. 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.

The spike in feedback during Q2 was due to the move to the new hospital when patients, staff and visitors were encouraged to share their experiences and feedback with us.



Some examples of where this has taken place are:

We received a substantial amount of feedback from patients regarding following the transfer of hospital services to The Balfour healthcare facility.	All feedback was considered, where appropriate responded to and again, when appropriate, action taken.
A number of enquiries from visitors to the islands requesting information on available medical services relevant to particular conditions. This was similar to enquiries made by people intending to move to Orkney.	Advice and signposting to services
Requests for access to various services including mental health support, travel information, audiology and orthopaedics.	Advice and signposting to services
A number of requests for access to medical records, patient information and clinical documentation have been received since the introduction of GDPR.	We have staff in place to deal with this type of request and all patients are referred to this service.
Following the outbreak of coronavirus, we were inundated with offers of help and support from the people of Orkney. This ranged from offers of volunteers to cake, facemasks and hand gel.	All correspondence was signposted or responded to.

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 which is submitted to the Clinical and Care Governance Committee. Complaints reports are also shared with Quality & Safety Group.

Non-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 and Safety Group are reported to the Clinical and Care Governance Committee who reports onwards to the NHS Board.

- 5.2 NHS Orkney Board members receive updates through the Patient Feedback Quarterly Reports/Complaints Performance Report and an 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 and AHP's, Clinical Quality Improvement Advisor, Chief Quality Officer, 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 and AHP's 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 Blether's

In December 2019, we supported the introduction of "Blether"s – a place for the Orkney community to come along for a friendly and confidential blether with professional advisors from a range of organisations. Blether's were introduced as part of the Community Led Support initiative to work with communities inclusively to co-produce solutions for what matters to them.

'BLETHER' is the name that the Orkney community chose to call the meeting hubs. The drop in sessions were held in a number of venues in Kirkwall, in St Margaret's Hope and Sanday but were unfortunately halted due to the coronavirus pandemic.

Building connections | Local communities | Everyone welcome | Talking together | Helping each other | Easy to access | Regular and reliable

Come along and join us for a
Blether

A place to have a face to face blether about:

- ❖ Social care
- ❖ Support for those who care for others
- ❖ Living independently
- ❖ Emotional well-being
- ❖ Physical well-being

Selbro Resource Centre
Scott's Road, Hatston
Kirkwall

Date: 29th January 2020
Time: 1400 – 1600

"What matters most to me?" "I would like to know more about....."

Do you need to have a
Blether ?

Providing advice, support and information for folk in our Community

Come along to a drop in session where you can...

- Meet with a range of professionals
- Get advice on social care issues, benefits or family support
- Support or help with independent living or information for carers
- Speak to someone about your physical or emotional well-being

The "Blether" hubs are a place where you can have a friendly and confidential chat with professional advisors from a range of organisations, such as Health, Social Work, THAW, Social Security Scotland, Third sector partners

Blethers are advertised on Radio Orkney and on social media

6.2 Young Volunteers

We have been lucky enough to attract groups of Young Volunteers from Kirkwall Grammar School (KGS) and Stromness Academy (SA) to carry out our Inpatient Experience Survey during September and March of this year.

Two young adults from SA came along to an induction session at Voluntary Action Orkney where Laura Leonard, Youth Development Officer and Julie Tait, Patient Experience Officer undertook a session on issues such as confidentiality, technical aspects of how to gather the feedback and communication. The young volunteers then visited the hospital over a six week period during March, into April 2019 and then again, in our new hospital, in February and March 2020.

Over each 6 week period, we gathered real time feedback information from patients across the hospital in our Acute Ward, Assessment & Rehabilitation Ward, Macmillan Unit and Maternity Unit.

The feedback has been extremely positive with, for example only one patient scoring lower than a score of 8/9 in the overall experience question. In short summary of the February/ March 2020 survey:

- Patients felt listened to
- Patients felt involved in decisions about their care
- Patients felt they have been given information in a clear way
- Patients agreed that the facilities were clean and that refreshments were tasty and healthy

6.3 New Hospital Feedback Improvements

Our staff listened to patients and visitors to our new hospital, The Balfour, following the transfer of services and we shared our actions on the public information screens throughout the various areas and departments.


Here are some of the improvements we have made:

You told us:
“There should be benches at the drop off & taxi points”



We listened... and have placed benches around The Balfour entrance to let you rest, wait or just enjoy the weather.

You told us:
“The atrium is lacking colour and joy!”




We listened.... and added colour and life with art and furniture.

You told us:
“I can’t see a clock anywhere?”



We listened... There are now clocks in many areas around The Balfour.

You told us:
“Bigger and better signs in main areas would help.”



We listened... We have changed the signs in the hub area so they are larger and clearer.

6.4 Firestarter Festival 2020

Staff and patients from NHS Orkney and a variety of other organisations were invited by the Orkney Scottish Health Council Local Office to take part in the design and creating of a

navigation aid aimed at assisting patients with complex needs in finding their way around the local health and care landscape.

NHS Orkney acknowledged that patients have a difficult time sometimes in navigating their journey and that we could learn from patients and their families. The Firestarter Festival was a good place to “start the fire” on how we could begin to think this would work, who it would work for and what it would look like.

The creative session was facilitated by the Scottish Health Council and the Pier Arts Centre. Patients and staff shared their stories and worked together, creatively, to bring together ideas of how we could make this better for the people we look after.



Section 7

Summary and Conclusions

- The number of complaints received has increased 42.5% increase in complaints from 85 in the previous year to 122 in 2019/20.
- During the year we have investigated 73 Early Resolution Complaints and 46 Investigation Complaints.
- We received two complaints at Early Resolution stage which were later escalated to Investigation Stage.
- 89% of Early Resolution complaints have been responded to within the 5 day timescales. A positive increase from 77% in 2018/19.
- 39% of Investigation complaints were responded to within 20 days. A small increase from 36% in 2018/19. Some delays can be attributed to the challenges of the Covid-19 pandemic.
- Trends are difficult to identify due to the wide range of topics identified. However, the timeliness, quality and experience of clinical care have again been identified.
- The majority of complaints were recorded within Hospital Acute Services.
- Our staff continue to undertake the online Complaints and Feedback training modules regularly.
- NHS Orkney have listened and acted on feedback given during the move of services to the new hospital