



# **Annual Report on Feedback, Comments, Concerns and Complaints 2014 - 2015**

## **Introduction**

Feedback, comments, concerns and complaints form a critical part of NHS Dumfries & Galloway's mechanisms for listening, learning and improving the care delivered to patients, families and communities. This report provides an overview of the feedback, comments, concerns and complaints received by NHS Dumfries & Galloway between April 2014 and March 2015. The report is comprised of five sections and is in compliance with guidance issued by the Scottish Health Council (SHC) and the requirements set out in the Patient Rights (Scotland) Act 2011.

## **Section 1**

### **Encouraging and Gathering Feedback**

#### **1.1 Feedback**

Feedback is central to the NHS Dumfries & Galloway's commitment to deliver safe, effective and person-centred care and is obtained using a variety of approaches. These different approaches allow patients, carers and visitors to choose the feedback mechanism that best suits their needs. With this in mind, NHS Dumfries & Galloway seeks feedback in many different ways. These include by feedback in writing, by email, by telephone, text, the web, social media, face-to-face as well as proactively seeking feedback via surveys and focus groups. Information for the public is available on the NHS Dumfries & Galloway website. Posters and patient information leaflets about feedback and complaints are readily available in all NHS Dumfries & Galloway hospitals and clinics. All ward and clinic areas have comment cards for patients and relatives to provide feedback about their experience.

All of these feedback mechanisms provide individuals with an opportunity to express concern, receive an apology where appropriate and is used to inform actions aimed at maximising learning and minimising the potential for reoccurrence. It also allows the Board to collect a range of quantitative and qualitative data to evaluate our services. Also, the Patient Advice and Support Service (PASS) provide a further route and source of support for anyone wishing to provide feedback or make a complaint. While PASS work independently of NHS Dumfries & Galloway information about their services is widely available throughout our inpatient wards/clinic waiting areas, notice boards and intranet/ internet. NHS Dumfries & Galloway has a small Patient Services team who act as a central point of contact for the patients, the public and staff. Any feedback received is either verbally or formally acknowledged giving details about the process and the time frames.

#### **1.2 Patient Opinion**

NHS Dumfries & Galloway recognises that more people can access digital channels, which offers us an opportunity to broaden patient and public feedback from across the region. The Board subscribes to Patient Opinion, an electronic independent feedback system, which is open, transparent and simple for people to use. The service is actively promoted both electronically and through posters and leaflets. Patient Opinion allows people to share their experience of local health and care services. Stories can be submitted to Patient Opinion online, by post or by

telephone. Links to Patient Opinion are available on the NHS Dumfries & Galloway website.

Thirty-two stories about care experiences at NHS Dumfries & Galloway feature on the Patient Opinion website in the past year and can be viewed by visiting: [www.patientopinion.org.uk](http://www.patientopinion.org.uk). Table 1 provides a summary how critical the stories were and the number of times these were seen by the public and staff. Story criticality is rated by Patient Opinion and is a measure of how critical the most significant part of a story is, according to a criterion-based system. Patient Opinion posts receive a prompt, open and honest response, which demonstrate NHS Dumfries and Galloway commitment to listen and respond promptly to feedback.

**Table 1 Patient Opinion**

Patient Opinion	Number of Stories	Number of Views	
		Public	Staff
Story Criticality Score			
Criticality Score 3 (moderately critical)	5	1095	109
Criticality Score 2 (mildly critical)	5	1707	122
Criticality Score 1 (minimally critical)	3	441	35
Criticality Score 0 (not critical)	19	3623	323
<b>Totals</b>	<b>32</b>	<b>6866</b>	<b>599</b>

### 1.3 Patient Surveys

NHS Dumfries & Galloway learns a great deal about patient experience from patient surveys. In 2014-2015 NHS Dumfries & Galloway participated in the Scottish Inpatient Patient Experience Survey. The survey gathers feedback from patients who have been admitted to a hospital overnight and uses their experiences of health and care to identify areas for improvement. The Scottish Government manages the survey in partnership with ISD Scotland (part of NHS National Services Scotland). The survey asks questions about people's experiences of admission, the hospital ward and environment, care and treatment, operations and procedures, staff, leaving hospital, care after leaving hospital and medicines. The response rate for NHS Dumfries and Galloway was 52 % (1,202 people).

The top three positive responses for NHS Dumfries and Galloway were as follows:

- In Accident and Emergency 98% of patients reported that they had enough privacy when being examine or treated.
- 96% of patients reported that hand-wash gels were available for patients and visitors to use.
- 96% of patients said that they understood how and when to take their medicines.

The top three negative responses for NHS Dumfries and Galloway were that only:

- 65% of patients reported that they saw/received information on how to provide feedback or complain about the care they received.
- 46% of patients knew which nurse was in charge of the ward.
- 42% of patients knew which nurse was in charge of their care.

The results identified the aspects of patient experience that patients consider important to them and where they consider improvements could and should be made. The findings from the 2014 survey can be viewed by clicking on the link below: [www.scotland.gov.uk/Topics/Statistics/Browse/Health/InpatientSurvey](http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/InpatientSurvey)

## **1.4 Patient Feedback**

NHS Dumfries and Galloway received 223 items of feedback from patients who did not wish to raise formal complaints.

The issues raised are consistent with our formal complaints in relation to care and treatment, attitude and behaviour and communication. Other issues raised included waiting times for appointments and policy decisions made by the Board.

As expected the majority (66%) were received by Acute and Diagnostic services as this directorate covers the largest area of hospital specialties. Acute and Diagnostic Services have a dedicated Patient Experience Officer who investigates and responds to complaints and patient feedback for the directorate and also have access to the electronic complaints system (DATIX) which allows them to capture feedback received in real time. The Patient Services Team aim to roll DATIX out across the Board in order that all Directorates can capture feedback regarding their services in the same way.

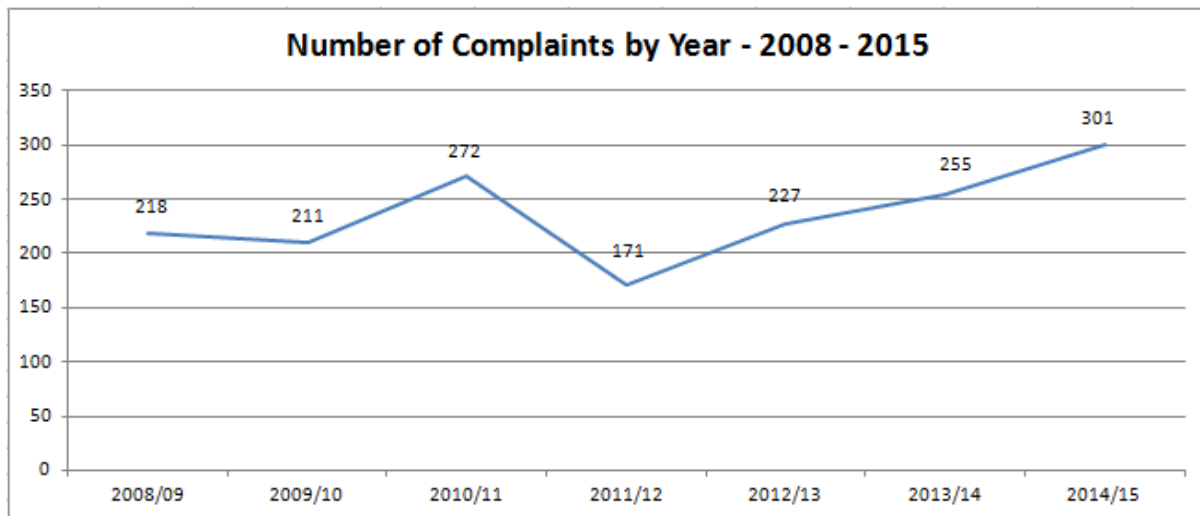
In addition to the feedback above, Patient Services received 83 compliments in relation to excellent care and services across the Board. It is also acknowledged that individual wards and departments also receive many other compliments directly throughout the year, however NHS Dumfries and Galloway have not developed a formal method of capturing this feedback at this time.

## **Section 2 Encouraging and Handling Complaints**

### **2.1 Summary Complaints Data**

NHS Dumfries & Galloway seeks to learn from complaints and use them to improve services. Figure 1 below provides an overview of the number of complaints received by the Board per year since 2008 to present and Table 2 shows a quarterly summary of complaints data for 2014/15. In the past year, NHS Dumfries & Galloway received a total of 301 complaints, an increase of 18% on 2013/14. The number of complaints received across all four quarters has remained consistently higher than in previous years.

**Figure 1 Number of complaints per year – 2008 – 2015**

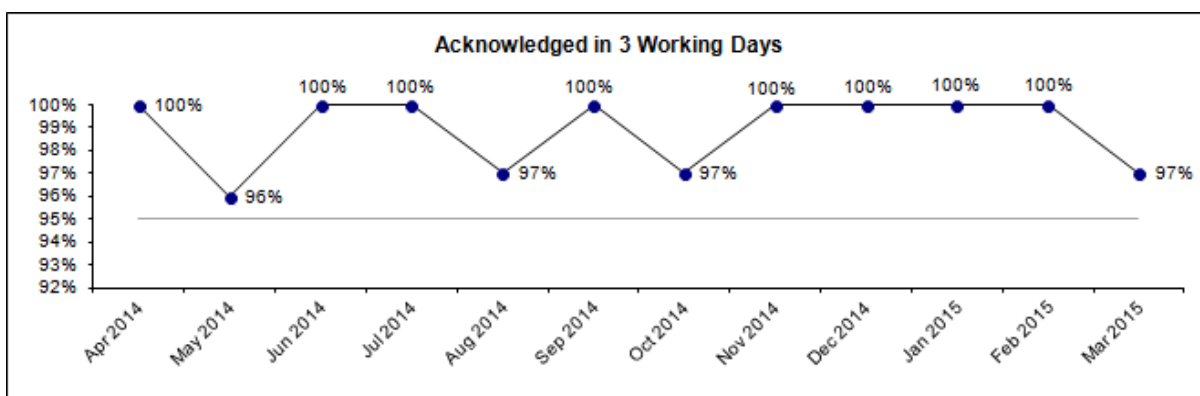


**Table 2 Summary Complaints Data by Quarter & Annual Total (2014/15)**

	Q1 (Apr-Jun 2013)	Q2 (Jul-Sept 2013)	Q3 (Oct-Dec)	Q4 (Jan-Mar 2014)	Annual Total
Complaints received	73	80	69	79	301
Complaints acknowledged within 3 working days	72 (98%)	79 (98%)	68 (98%)	78 (98%)	297 (99%)
Complaints completed within 20 working days	36 (49%)	54 (68%)	43 (62%)	43 (54%)	176 (58%)

Figure 2 shows the percentage of complaints acknowledged within 3 working days. The percentage of complaints acknowledged within 3 working days nationally for 2013/14 was 94%. NHS Dumfries & Galloway has achieved an over overall compliance figure of 99%.

**Figure 2 Percentage of complaints acknowledged within 3 working days**

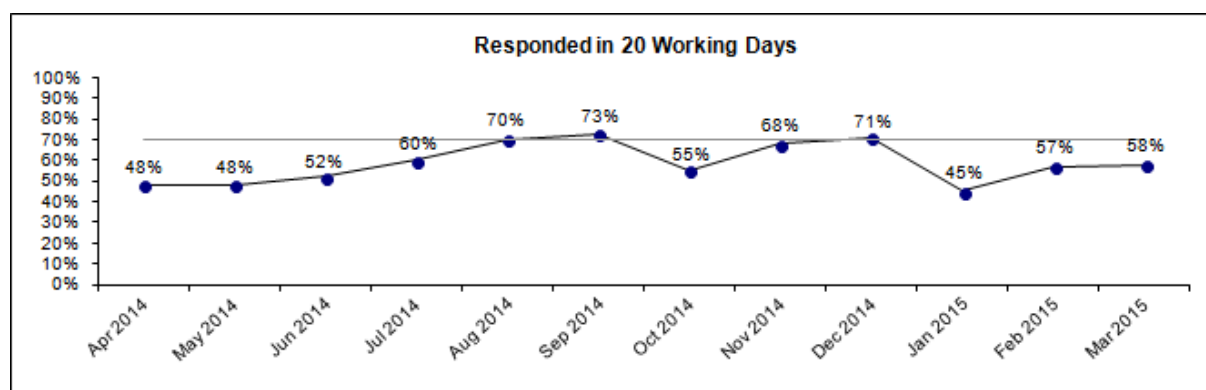


In the past year, responding to complaints within 20 working days has proved challenging. A total of 58% of complaints received a response within the 20 working days falling short of the target set by the Board of 70%. The percentage achieved nationally for 2013/14 was 66%. The increase in the complexity of complaints and the continuing rise in the number of complaints received have impacted on the Board's ability to meet the 20-day target. The average number of days taken to respond to a complaint was 24 days.

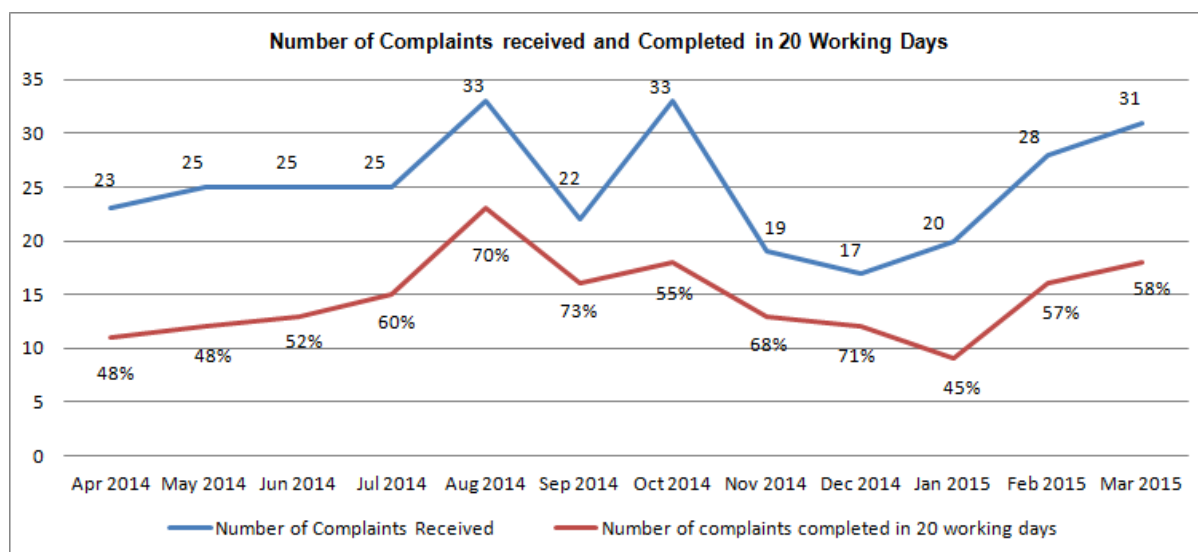
In response, the Board undertook an extensive review of the complaint management and handling process. The review highlighted areas of duplication in process and multiple processes within individual Directorates. There is a need for a single process across the Board which enables complaints to be dealt with as quickly and efficiently as possible and to ensure that complainants receive the same service across the Board regarding of which service they complain about. A new streamlined process is currently being trialed in Acute and Diagnostic Services and Women and Children's services. This trial will run from 1 June 2015 for two months. It is hoped that the process will not only improve the Board's compliance figures against the target of responding in 20 working days but it is hoped that it will also make the complaints process more person-centred. The complaint investigator will make initial contact with individuals making a complaint within three working days to identify what matters most to the person making the complaint and develop a complaint-handling plan that best meets the needs and expectations of the individual. An offer to meet with staff also provides an opportunity to establish a relationship and create clarity about the complaint handling process. A flow chart summarizing the key steps is in Appendix 1.

Figure 3 and 4 provide a more detailed breakdown of the number of complaints received and responded to within 20 working days of each month. The provision of timely responses is taken very seriously. However, the quality of response and complainant satisfaction is prioritised over the speed of resolution. In situations where complaint responses fell outside the 20-day target these were typically because the complaint was complicated and often involved meeting with the patient (at their convenience).

**Figure 3 Percentage of complaints responded to in 20 working days**



**Figure 4 Number of complaints received and percentage completed in 20 working days**



## 2.2 Outcome of Complaints

NHS Dumfries & Galloway is required to publish data on the outcome to complaints – how many have been upheld, partly upheld or not upheld. In 2014/15 56% of complaints were fully or partially upheld and 39% were not upheld. Table 3 shows the outcomes assigned to complaints in 2014/15.

**Table 3 Outcome of Complaints 2014/15**

Outcome of Complaints	No.	%
Upheld	127	42%
Not Upheld	118	39%
Partially Upheld	43	14%
Complaint withdrawn	6	2%
Still Open	6	2%
Transferred to another Department	1	0%
<b>Totals:</b>	<b>301</b>	

Table 4 identifies the top 5 issues, which generated the most complaints. A complaint may be recorded under one issue or several different issues, depending upon the nature and complexity of the complaint. As is evident in the table the majority of complaints received by NHS Dumfries & Galloway were about clinical treatment, staff attitude and behaviour, communication and waiting times.

**Table 4 Top 5 Complaints by Issue Category**

Complaint Issue	Total	%
Clinical Treatment	173	47%
Staff communication (oral)	54	15%
Staff attitude and behaviour	49	13%
Waiting time for date for appointment	18	5%
Staff communication (written)	15	4%

Table 5 provides a more detailed breakdown of these complaint issues by location. As expected clinical treatment is the top complaint issue across all directorates and no specific trends or patterns have been identified.

**Table 5 Top Complaints Issues by Directorate**

Complaint Issues	Acute & Diagnostics	Mental Health	Operational Services	PCCD	Women and Children's Services	Prison	Corporate	Total
Clinical Treatment	75	7	0	24	19	47	1	173
Staff communication (oral)	29	2	0	8	11	1	3	54
Staff attitude and behaviour	23	2	1	7	12	0	4	49
Waiting time for date for appointment	10	2	0	4	0	0	2	18
Staff communication (written)	4	2	0	0	2	2	5	15
Other	22	2	2	11	12	4	6	58

\* Corporate Services includes Finance, Medical, NMAHP, Public Health, Strategic Planning and Workforce Directorate

## 2.3 Patient Advice and Support Service

NHS Dumfries and Galloway received 21 Formal complaints through the Patient Advice and Support Service. Four complaints were received through the Dumfries and Galloway Advocacy Service.

## 2.4 Scottish Public Services Ombudsman

Individuals who are dissatisfied with NHS Dumfries & Galloway's complaint handling or response can refer their complaint, for further investigation to the Scottish Public Services Ombudsman (SPSO).

In 2014/15 the Board received 22 decision letters from the SPSO.

9 of these 22 complaints were raised with the SPSO in 2013/14 reporting period.

13 of these 22 complaints were both raised and decisions made in the 2014/15 reporting period.



Of these 22 complaints 40 issues were raised.

Care and Treatment	17
Communication	8
Complaint Handling	9
Problems with Diagnosis	2
Attitude and Behaviour	2
Medication issues	2

SPSO decision on the 40 issues raised:

Upheld	22
Not Upheld	12
Withdrawn	1
SPSO Not Investigating	5

The SPSO decisions match the original decisions made by the Board in all cases.

Of the 22 complaints the SPSO made 39 Recommendations to the Board.

A further 9 complaints have been raised with the SPSO in 2014/15 however shall have their decisions reported in the 2015/16 reporting period.

For each recommendation made by the SPSO the Board develops an action plan, detailing the recommendations made and the actions taken to implement the recommendations. Each completed action plan is laid before the Board's Healthcare Governance Committee to provide assurance that the recommendations have been implemented and appropriate lessons have been learned and action taken to improve services.

## **2.5 Family Health Services (FHS), Independent Contractors Feedback, Comments and Complaints**

Since April 2012 FHS contactors (GPs, Dentists, Pharmacies and Opticians) have been required by law to provide NHS Dumfries & Galloway with data on complaints they have received about their services.

**Table 6 Family Health Service/Independent Contractor Complaints**

	<b>General Practitioner</b>	<b>Dentist</b>	<b>Pharmacist</b>	<b>Optician</b>
Total Number of contractors	34	30	34	28
No of Contractors replying	21	16	28	13
<b>Complaints received</b>	56	8	21	6
<b>Complaints completed within 20 working days</b>	39	4	18	4
<b>Complaints where alternate dispute resolution was used</b>	1	0	0	2
<b>Complaints upheld</b>	13	0	0	1
<b>Complaints Not upheld</b>	17	0	0	3
<b>Complaints Partially Upheld</b>	5	2	0	0
<b>Outcome Unknown</b>	17	2	21	0

Issues of complaints raised are consistent with Hospital Services complaints with the top issues being Care and Treatment, Staff Attitude and Behaviour, Communication and Delays in appointment/Clinics.

### **Comparison of 2013/14 FHS data to 2014/15 FHS data**

#### **Contractors**

The overall number of contractors replying has reduced from 92 in 2013/14 to 78 in 2014/15; a 15% decrease. For GPs and Dentists the reduction is 28% and 43% respectively. This has had an impact on the overall contractor rate which was 79% in 2013/14 and has fallen to 62% in 2014/15. This reduction was not expected as Patient Services spent a considerable amount of time trying to simplify the reporting process by designing a simplified form which mirrored the information requested by Information Services Scotland (ISD). Three reminders were also sent to all contractors reminding them of their obligation to provide the information. Further work will be required in 2015/16 to improve compliance.

#### **Complaint Numbers**

The overall number of complaints has halved (50% decrease) going from 167 in 2013/14 to 84. For GPs and Dentists the reduction is 51% and 89% respectively. A contributing factor to this decrease could be due to the reduced number of contractors replying; however there may be other reasons over and above this one possible explanation which will be difficult to explore as there are too many variable factors to understand whether there is any significance to this.

## Response Times

The number of complaints responded to within 20 days has decreased from 158 in 2013/14 to 65 in 2014/15; a 59% fall. The overall response time percentage within 20 days has reduced from 94.6% in 2013/14 to 77.4% in 2014/15.

Whilst the complaints still open (unknown response times) have decreased by 30% (20 in 2013/14 to 14 in 2014/15), the unknown response rate has increased from 12% in 2013/14 to 17% in 2014/15.

### 2.6 Alternate Dispute Resolution

In 2014/15 Alternate Dispute Resolution such as the Medication Service were not used to resolve any NHS Dumfries and Galloway complaints. However, anyone wishing to make a complaint is signposted to the Patient Advice and Support Service (PASS) for any assistance they might need. The PASS Patient Advisers often accompany those they are supporting to meet with staff. Family Health Service Contractors have however reported that they have used Alternate Dispute Resolution in the handling of 3 complaints in 2014/15.

### 2.7 Prison Service Complaints

NHS Dumfries & Galloway is responsible for the provision of healthcare to prisoners at HMP Dumfries. In 2014/15, NHS Dumfries & Galloway received a total of 53 formal complaints from prisoners.

**Table 7 Summary of Prison Service Complaints Data by Quarter and Annual Total**

	Q1 (Apr-Jun 2013)	Q2 (Jul-Sept 2013)	Q3 (Oct-Dec)	Q4 (Jan-Mar 2014)	Annual Total
<b>Complaints received</b>	14	10	14	15	<b>53</b>
<b>Complaints acknowledged within 3 working days</b>	100%	100%	100%	100%	100%
<b>Complaints completed within 20 working days</b>	14 (100%)	10 (100%)	13(92%)	13 (86%)	<b>50 (94%)</b>

**Table 8 Summary of Prison Service Complaint Outcomes**

Number of Complaints	Q1 (Apr-Jun 2013)	Q2 (Jul-Sept 2013)	Q3 (Oct-Dec)	Q4 (Jan-Mar 2014)	Annual Total
Upheld	2	1	1	2	<b>6 (11%)</b>
Partially upheld	2	0	0	1	<b>3 (6%)</b>
Not upheld	10	8	12	11	<b>41 (77%)</b>
Withdrawn	0	1	1	1	<b>3 (6%)</b>

In 2014/15 77% of prison healthcare complaints were not upheld and 17% were partially or fully upheld. Table 9 below provides a breakdown of prison healthcare complaints by issue. Most of the complaints received about clinical treatment relate to drug administration and the numbers of complaints are very high for the relative size of the population. NHS Dumfries & Galloway has been worked closely with HMP Dumfries to ensure that appropriate information on how to complain is available and that healthcare staff are aware of the NHS Dumfries & Galloway complaints process.

**Table 9 Top 4 Prison Healthcare Complaints by Issue Category**

	<b>Clinical Treatment</b>	<b>Waiting time for appointment</b>	<b>Staff Attitude and Behaviour</b>	<b>Staff communication (oral)</b>
Number of Complaints	47	1	4	2

### **Section 3 Building a Culture of Learning from Feedback, Comments, Concerns and Complaints**

NHS Dumfries & Galloway participated in many development and training activities aimed at improving and learning from complaints.

#### **3.1 Complaint Experience Study**

In partnership with the University of the West of Scotland NHS Dumfries & Galloway has jointly funded a PhD study designed to explore the experiences of patients, families and staff involved in managing and resolving complaints. The study seeks to use the principles of restorative practice so that patients, families and staff can work together in ways that value the expertise of all involved. This means coming together to understand what has happened and its effects and the working together to co-construct the way forward. Three aspects of the study have been completed and are summarised below:

##### **3.1.1 Individual Interviews**

Interviews have taken place with patients and families who have made a complaint, front-line staff involved in complaints; members of the complaints team, senior managers and executive and non-executive board members. Key themes from these interviews amongst other things were used to generate a variety of patient stories. These stories were shared with a wider group at a Stakeholder event.

##### **3.1.2 Stakeholder Event**

The stakeholder event continued the process of working together to enhance the experience for all involved in making and responding to complaints. It also increased awareness about the research and provided an opportunity for learning and relationship building. Participants were assigned to groups asked to explore a patient story. The groups choose words that captured their emotional response to the story.

The groups identified the key aspects of the story that they thought were most helpful and asked to explain why. The groups constructing propositions that NHS Dumfries & Galloway should consider when responding to and reviewing complaints followed this. These short statements are to be used to co-designing and co-creating the enhancements to the complaints handling process. Participants who wished to participate in the research going forward were invited to join the Stakeholder Working Group.

### **3.1.3 Stakeholder Working Group**

Participants who wished to have continued involvement in the research were invited to join a Stakeholder Working Group. The group had its first meeting in April and is scheduled to meet every month for the next six months. The Group is comprised of twelve people and involves patients, family members, staff and a member of the NHS Board. The group will explore how to make complaints handling less fragmented, will identify examples of good practice in complaints resolution, examine the link between complaints and improved services, consider the roles of senior management and frontline staff and determine how individuals making a complaint would be best supported through the complaints process.

### **3.2 Here to Help Pilot Project**

The Acute and Diagnostics Directorate took forward a pilot project designed to gather real-time feedback from patients and visitors. The project involved hospital managers at the Dumfries and Galloway Royal Infirmary making themselves available to patients and visitors at the front entrance to the hospital. The managers participating in the pilot were able to listen, respond and resolve patient and visitor concerns face-to-face and in real time. The Acute and Diagnostics Directorate are developing a plan to embed the 'Here to Help' pilot as a standard mechanism for gathering and responding to feedback.

### **3.3 Values Based Reflective Practice (VBRP)**

The aim of Values Based Reflective Practice (VBRP) is to help health and care staff to provide excellent, high-quality care to patients. VBRP is designed to help participants connect with their core values and motivations, reflect on their attitudes and behaviours, enhance their person-centred practice, deepen the relationship with colleagues and develop resilience and wellbeing at work. Five practitioners and strategic leaders working in a variety of roles within NHS Dumfries and Galloway are accredited as VBRP facilitators.

It is hoped that courses will be run locally to enable further accreditation. VBRP taster sessions continue to be integrated into NHS Dumfries and Galloway events and as part of other learning experiences. For example, as part of a region-wide cross-sector leadership training programme run by Workforce Development, VBRP tools are being integrated into individuals' and teams' daily practice in a variety of ways. For example, as part of a short ward team debrief at the end of a shift. Short VBRP sessions are an incorporated part of Health and Social Care Integration road shows. Future sessions have been arranged in the Stewartry and will involve ten

people from health and social care and third sector as part of a leadership-training programme.

### **3.4 Digital Patient Stories**

NHS Dumfries & Galloway has developed a framework for collecting and using digital patient stories for service improvement. Patient stories involve interviewing and filming individuals to gather their insights into their experience of care delivery and service provision. These stories help us to understand the patient's perspective as they navigate the health care system. They provide valuable insights into what happens between episodes of care, such as time waiting at home for an appointment or time spent recovering in a ward. During these times, patients can develop strong perceptions of the health care system, the interactions (or lack of interactions) between the patient and health care staff.

As such, patient stories act as an important component in understanding how patients perceive the care received and how to improve it. They can also be used to assist and support staff through education and reflection. Additional capacity building and training in digital storytelling has been commissioned and completed. Seven members of staff attended a two-day Windows Movie Maker Course, and the aim is to collect routinely and review these stories at each meeting of the Health Care Governance Committee.

### **3.5 The NHS Education Scotland e-learning module**

The NHS Education Scotland e-learning module on feedback, comments, concerns and complaints has been made available to staff. The module is interactive and raises awareness of the value of apology and encouraging feedback. The module also equips staff with knowledge of the NHS complaints procedure and the importance of resolving concerns and complaints locally.

## **Section 4 - Improvements to services (as a result of complaints and feedback)**

NHS Dumfries & Galloway has made many changes and improvements in response to feedback and complaints. The following are examples of some improvements made during 2014 - 2015:

- In the Acute and Diagnostics Directorate, many of the complaints received relate to staff attitude and behaviour. In response, the Lead nurse has developed a Customer Services Module. The module aims to enable staff to provide a consistent level of customer service regardless of who they interact with, be it patient, visitors or colleague. The module identifies the standards expected for all interactions (e.g. telephones, face to face contact, etc.) and highlights all of our responsibility to deliver high standards of customer service.
- A patient complained that her 'This is Me Passport' was not being consulted or used appropriately. Senior Charge Nurses received an update on the importance of the passport and the necessity for keeping them up to date and accessible to all. To ensure passports were being appropriately used spot

checks were carried out, and all but two wards were found to be compliant. The wards found to be non-compliant were reminded of the importance of the documents and that they should be kept with the patient at all times.

- A parent complained that the information about their child's routine health screening at the Orthoptic Department was vague and lacked clarity. In response, the Orthoptics team used the learning from this complaint and re-designed their patient information leaflet. The comments received from these parents were used to create a more 'parent-friendly' version of the leaflet.
- A patient complained that there was insufficient advice or information regarding ectopic pregnancy at discharge and due to this she needed to seek help from her General Practitioner. Following a meeting with the complainant it was agreed that a leaflet with regards to ectopic pregnancy and advice on discharge and aftercare would be useful. The Clinical Lead agreed to work with the Practice Development Midwife to explore the drafting of such a leaflet for this particular group of patients. Work is currently being undertaken to update clinical guidelines around early pregnancy loss and will include ectopic pregnancy and the provision of a patient leaflet.
- The Learning Disability Public Group in conjunction with the Speech and language department and the third sector have consulted on and developed new easy read leaflets for dental, sexual health and the Emergency Department. Women in Maternity Services highlighted in a patient satisfaction survey that they missed having tea and toast after the birth of their baby. A toaster that can only operate when someone is in the room was sourced thus avoiding unnecessary fire service calls. This was a much valued and appreciated re-introduction.
- Women suggested that having their partners leave at night as something they liked least about their care. A midwife practitioner-led a series of tests of change and now women are offered the opportunity to have one person stay with them overnight.
- A patient complained about poor communication and staff attitudes and behaviours prior to discharge from Maternity Services. In response, a new SBAR form has been introduced for discharges that require on-going treatment and care. This is given to the patient to take to their practice nurses or Health Visitor. Staff development days were introduced and examined attitudes and behaviours.
- Safety Huddles were introduced after every shift in response to a complaint about attitudes and behaviours. The purpose of which is to ensure clear and seamless handover and importantly to reinforce the need to share any issues/concerns that have arisen during the shift.

Demonstrating the learning resulting from complaints remains a challenge. Complaint numbers and themes are reported to the Healthcare Governance Committee. However, the learning is not always evident or consistent in all complaints. In the Acute and Diagnostics Directorate, there is a weekly triage

meeting to ensure complaints are progressed, clear actions identified, and appropriate learning shared and implemented.

## **Section 5 – Accountability and Governance**

### **5.1 NHS Board**

The Executive Nurse Director presents a Patient Experience Report at every NHS Board meeting. The report provides summary statistics and commentary on complaints handling throughout NHS Dumfries & Galloway. The report contains statistical summaries of complaints, complaint themes, information on the timeliness of responses, Scottish Public Service Ombudsman referrals and details of service improvements and development. This allows Board Members to review the arrangements and handling of complaints within NHS Dumfries & Galloway and ask questions on any points of detail, trends or new and recent development.

### **5.2 Healthcare Governance Committee**

A more detailed Patient Experience Report is presented at every Healthcare Governance Committee. This report contains anonymised summaries of individual concerns, complaints and compliments, together with the associated action plans and learning. All upheld SPSO complaints, recommendation and actions are presented at the Healthcare Governance Committee for further scrutiny. The Healthcare Governance Committee also receives a patient story, which can be either positive or negative. This ensures that committee members hear directly about the experiences of patients and how these are used to drive improvements. This again allows Non Executive Members of the Board to scrutinise complaints and their actions. Members have, on a number of occasions, raised concerns and sought assurance and further action regarding complaint response times.

### **5.3 Person Centred Health and Care Committee**

The Person Centred Health and Care Committee is chaired by a Non-Executive Member of the Board and includes patient and public representatives. The committee feeds into the NHS Dumfries & Galloway Healthcare Governance Committee, which in turn reports to the NHS Board. The committee receives information, updates, reports and commission specific actions to enhance person centeredness and the quality of care delivery from the sources outlined below:

- Care environment observations
- Patient Experience Indicators
- Staff Experience Indicators
- Leading Better Care
- Volunteering and Patient Focus and Public Involvement
- Older People In Acute Hospitals work
- Learning from feedback, comments, concerns and complaints
- Spiritual Care
- Any actions arising from the Francis enquiry specific to this area
- Integrated Health and Social Care



The committee is supported by individuals who have the above named activities within in their broad remit and is not supported by a dedicated person-centred/patient experience team or programme manager. However, the committee is responsible for identifying new and current initiatives, supporting measurement and reporting improvement. The committee also works proactively to anticipate or act on person centred health and care governance issues. This includes ensuring that causal links are made and that organisational learning opportunities are recognised, shared and used to direct improvement activities.

## **6. Conclusion**

NHS Dumfries & Galloway will continue to actively encourage patients and service users to provide feedback through the mechanisms described in this report. This report highlights that more needs to be done to ensure complainants receive a timely response. The Board has already embarked on a review of its complaints management and handling processes, with a view to improving the existing its approach to responding to and learning feedback, comments, concerns and complaints. The outcome of which aims to provide individuals with a seamless, responsive service that demonstrates NHS Dumfries and Galloway's commitment to improve the quality of care and the patient experience by listening, learning and responding to feedback.

**NHS DUMFRIES AND GALLOWAY  
COMPLAINTS PROCEDURE**

