



**Handling and Learning**  
**From Feedback Annual Report**  
**2017 - 2018**

**NHS Grampian**  
**Caring – Listening – Improving**

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## Section 1 - Encouraging and Gathering Feedback

### 1.1 - Methods used to encourage feedback:

NHS Grampian values all feedback and is committed to ensuring that the information and learning gathered from all our feedback systems informs the aspiration of continuous improvement and the further development of a person centred approach to service planning. NHS Grampian encourages and receives feedback through a variety of sources:

- Feedback Cards – with a prepaid, addressed envelope (available in all clinical areas).
- Letters (received in clinical areas, addressed to the Feedback Service or the Chief Executive).
- E-mails (received through the Feedback Service's email address - available on NHS Grampian's website, information leaflets and feedback cards, through the Chief Executive's email address, through the general NHS Grampian contact address on the website or directly to senior officers)
- Phone calls (received directly by the Feedback Service or redirected from anywhere in the organisation).
- Letters and email correspondence from MSPs and MPs on behalf of members of the public.
- Letters from the Patient Advice and Support Service on behalf of members of the public.
- Letters from the Advocacy Services in the Grampian area on behalf of members of the public.
- NHS Grampian's email address.
- NHS Grampian's Website.
- Facebook.
- Twitter.
- Care Opinion Website.



### Care Opinion (Previously called Patient Opinion):

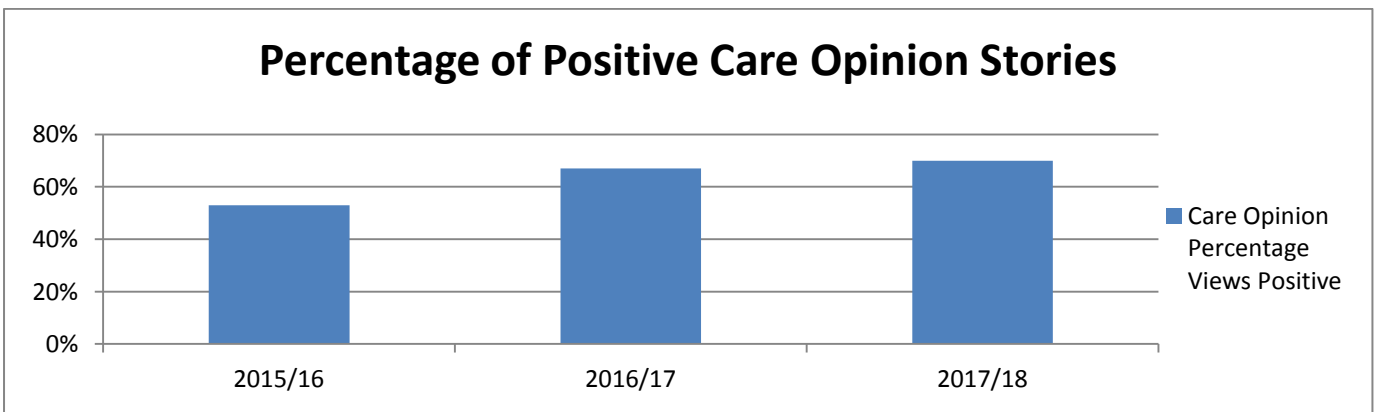
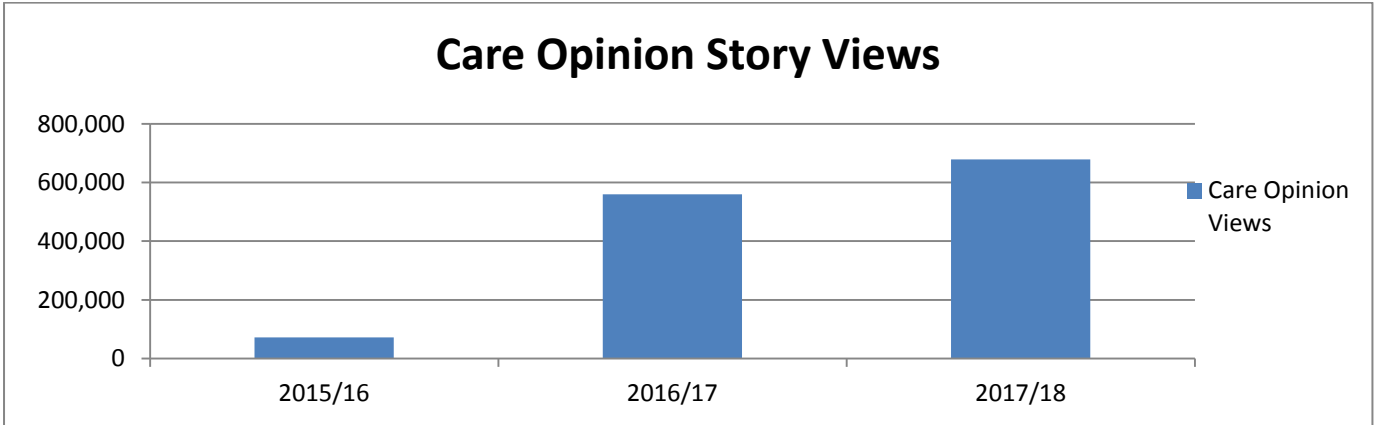
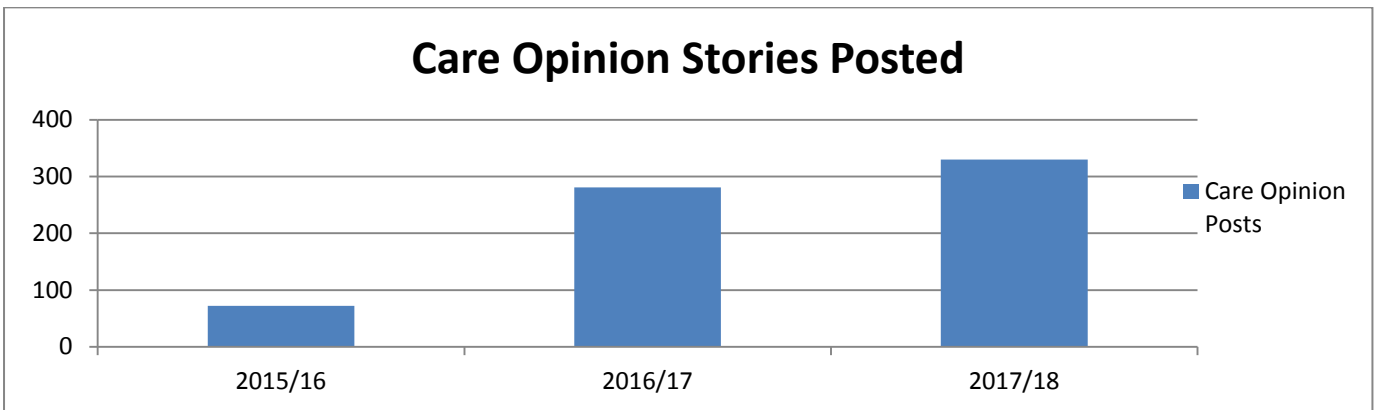
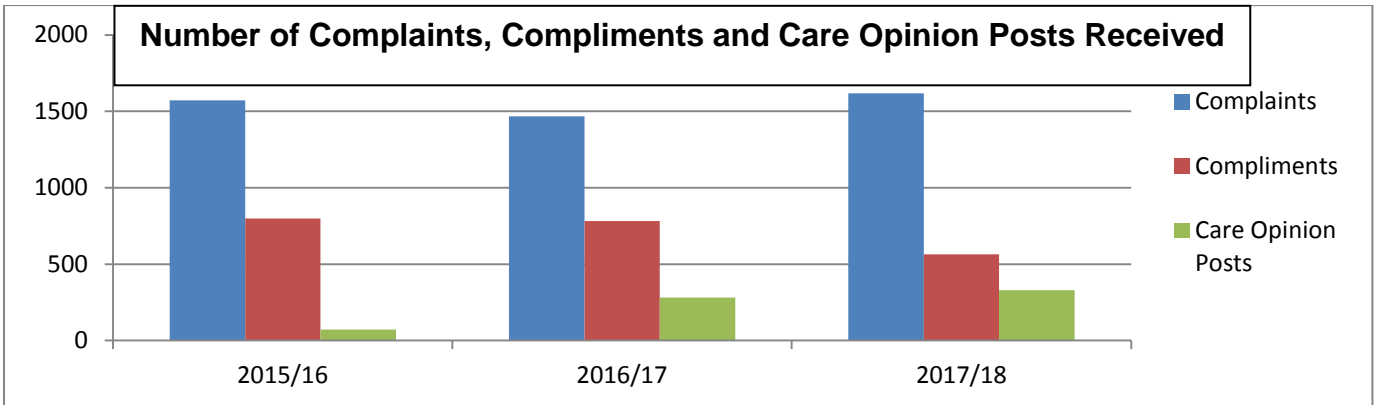
A valuable mechanism through which patients and members of the public can give feedback on their experiences is by posting comments on the Care Opinion Website. Patient Opinion was launched in 2013, and changed its name to Care Opinion in 2017. It is a great addition to NHS Grampian's other feedback mechanisms.

Work is continuing to encourage services to promote Care Opinion as a way of listening to patients relatives, friends, carers, advocates, volunteers and even staff who would like share their stories to help make a difference.

Corporate Communications also help raise awareness of Care Opinion through social media, and have recently won an award for their work promoting this – please click on the link to see the poster: <http://www.nhsgrampian.org/nhsgrampian/files/SocialMediaQualityEventPoster.pdf>

Care Opinion reports are presented quarterly at the Engagement and Participation Committee. Between 1 April 2017 and 31 March 2018, 330 stories were posted on Care Opinion about NHS Grampian. These stories have already been viewed 679,300 times; this is a considerable increase from the 281 stories posted in 2016/17, which were viewed 321,215 times.

Please see graphs below for more information about Care Opinion posts about NHS Grampian:



## Real Time Experience:

Person-centred care is an integral part of the Quality Ambition for NHS Scotland and is described within the Quality Strategy as: 'care which delivers mutually beneficial partnerships between patients, families and those delivering health care services.' This care needs to reflect individual needs and values and demonstrate compassion, continuity, clear communication and shared decision making.

We involve the public and ask for views and feedback in a number of ways before, during and after care:

- Involved in decisions.
- Family and carer involvement.
- Involved in ward rounds.
- Real time feedback.
- Discharge portfolio and ticket home.
- Patient diaries.
- Viewpoint – electronic questionnaire units.
- Getting to know me/Must dos with me.
- Patient Admission/Assessment Document.
- Care planning.
- Care Assurance Tool.
- Verbal feedback
- Care Opinion
- Telephone follow up
- Patient postcards
- Survey/audit work
- National surveys
- Public involvement – Participation Standard.
- Patient Action Co-ordination Team (PACT).



A huge range of activity is underway to embed person-centeredness in the care delivered in NHS Grampian. The above mentioned activity is not exhaustive and there are many other person-centred activities being undertaken independently by various staff groups.

### 1.2 - Making people feel their feedback is welcomed:

Local processes and procedures have been developed to ensure they are efficient and fully comply with the principles and policy intentions of the Patient Rights (Scotland) Act 2011, which means we ensure that they:

- Encourage, welcome and view feedback, comments, suggestions, concerns and complaints as opportunities for ensuring we provide person centred care.
- Promote learning and improvements from all forms of feedback.
- Are effective, fair and consistently applied.
- Are easily accessible to all and that information is available in other formats where this is required.

Everyone who provides feedback should be thanked verbally or through an acknowledgement letter or email. NHS Grampian appreciates all learning opportunities that service users provide us with, and would like everyone who gives feedback to know that we value the time it has taken for them to tell us about their experience.

### 1.3 - Engaging with equalities groups:

The Patient Advice and Support Service (PASS) provides free, confidential information, advice and support for anyone wishing to give feedback about the treatment and care provided by the NHS in Scotland. NHS Grampian and representatives of the PASS work collaboratively to ensure that patients and equalities groups are aware of this service and are appropriately supported to give feedback. PASS activity, performance reports and case studies are shared and discussed to demonstrate how patients' needs are being met in Grampian.



Local support is also available to people who wish to give feedback through local Advocacy Services. PASS and Advocacy services are publicised on NHS Grampian's website and information and contact details are given to members of the public over the phone by the Feedback Team. PASS leaflets are available in health points and our complaint acknowledgment letters also give information about the support PASS can offer.

### Involvement and consultation with our local equality and diversity communities:

Meeting the health care needs of our equality and diversity communities is an integral part of our comprehensive healthcare service. In addition, we also carry out specific targeted healthcare work and campaigns to benefit these communities.

When developing equality objectives, we meet our legal duty to involve people with a relevant protected characteristic and their representative organisations. We also consider other evidence relating to people with a protected characteristic.

To help us take this work forward, NHS Grampian has three Groups and one Committee with wide community representation. The Racial Equality Working Group drives forward the racial equality agenda. The Disability Discrimination Act Review Group address disability and age related issues. The Diversity Working Group addresses issues relating to sex (male or female), sexual orientation, gender reassignment, pregnancy and maternity and marriage and civil partnership. The Spiritual Care Committee addresses religious and faith issues. We also carry out regular involvement and consultation events.

### Foreign language communication:

When healthcare is provided, it is important to ensure that effective two way communication arrangements are in place. Our local ethnic communities now make up 13.5% of the population of Grampian. Our annual involvement events and other research carried out jointly with the Grampian Regional Equality Council have shown that over 90% of recent migrant workers and their families are non-English speaking when they first arrive in Grampian. This barrier to communication is overcome in a number of ways:

### “Language Line” telephone interpretation:



This gives staff access to expert interpreters, on the telephone in 60-90 seconds for over 170 different languages. It is live in over 1,000 locations across NHS Grampian and was used on 7,084 occasions in 2017. Every clinic, Hospital and GP Practice in Grampian is equipped and over 4,500 staff have been trained in its use.



**“Face to face” interpreters:**

NHS Grampian has funded the training of 154 “face to face” qualified interpreters who were used on 2,684 occasions in 2016/17.

**Materials in translation:**

All requests for materials in translation are met. In addition, a wide range of local healthcare information is available pre-translated. On average, we translate 5 pieces of personal healthcare information per week, mostly from Eastern European languages into English, to help staff understand the previous treatments and health issues of patients.

**Communication disability:**

The 2011 Census showed that one in five of the population of Grampian have a communication disability. The measures NHS Grampian has put in place help people with a communication disability include:

- For people who are deaf, all four qualified British Sign Language (BSL) interpreters in Grampian are under contract to NHS Grampian. All requests for BSL interpretation are met.
- NHS Grampian is currently expanding the availability of BSL by the introduction of Video BSL to supplement our “face to face” BSL service.
- For people who use a hearing aid, over the last four years, NHS Grampian has purchased and issued over 250 Portable Induction Loops. We also provide more specialist equipment for in-patients.
- For people with a Learning Disability or Aphasia (the partial or total loss of the ability to communicate verbally or using written words) accessible/pictorial is provided. All requests for accessible/pictorial material are met.
- For people with a sight problem, all NHS Grampian published material complies with the Royal National Institute for the Blind “Good Practice Guidelines on making information accessible for people with a sight problem. All requests for information in large print, audio and Braille formats are met.



All NHS Grampian published material includes the offer at the front to make the information available in any other language or format, upon request and also give details of who to contact to obtain this.

**1.4 - Publicising our feedback methods and ensuring people know what to expect:**



Feedback methods are publicised on posters, feedback cards and on NHS Grampian’s public facing website. Other communication tools are used to promote opportunities to provide feedback.

These include Facebook, Twitter, articles in NHS News, a public facing news paper published twice a year. People can find out what to expect when they give feedback by the information given on the website, the information provided in acknowledgement letters and also through the advice offered over the phone.

## 1.5 - Streamlining the way feedback is recorded across the board:

The Feedback Service, Acute Sector, Mental Health Sector and other sectors throughout Grampian are continuously looking at ways to improve our feedback working practices, processes and procedures. This has occurred most recently with the introduction of the new Complaints Handling Procedure (CHP) April 2017.

The Feedback Team hold monthly meetings to discuss and improve the way we handle our complaints and how we can share learning that has been highlighted following the investigation of the complaint. Our Datix Complaints Module (electronic complaints recording system) has also been changed to assist the new processes and make it easier to extract the information and ensure the feedback and the issues raised are passed to the most appropriate member of staff. Meetings are also held with managers to ensure that the recording process is appropriate

A 'Complaints Lead' protocol, which was written in 2016, is updated each year to include any changes and circulated to all managers who lead on investigations. A Scottish Public Services Ombudsman protocol, is also updated yearly, and helps to ensure we all work in an efficient and timely manner.

## 1.6 - Using feedback to identify improvement opportunities:

NHS Grampian encourages feedback and passes all forms of feedback to the relevant staff, to encourage sharing of patient experiences and providing valuable learning opportunities. To ensure learning occurs from feedback, service managers must demonstrate what the feedback tells them about their services; identify their learning opportunities for service improvement, and record actions taken as a result. Learning outcomes are documented on Datix and are included in Clinical Governance reports to demonstrate the learning and actions taken across NHS Grampian as a result of feedback.



Meetings are encouraged with staff and patients, relatives and carers, so that staff can learn firsthand how the care delivered has affected the people involved and what improvements can be introduced as a result.

The number of meetings with staff has increased over the last year, and staff are meeting complainants earlier in the complaints process, sometimes at first point of contact, as well as once the investigation has been completed. We are now recording on Datix how often meetings are offered and held to allow us to report on this going forward.

## Section 2 - Encouraging and Handling Complaints

### 2.1 - Involving complainants to the level they wish:



When complaints are received over the phone, the Feedback Team ask if they would be happy for someone to contact them and if they would find a meeting helpful. The key issues are clarified during the call and the complainant is asked what they would like to happen as a result of their complaint.



Clinical treatment, sensitive and complex complaints are managed by a Complaints Officer, who will make contact with the complainant to clarify issues, explain the process and to ask if they would like a meeting. To help set expectations the timeline is explained and the complainant advised that complex or cross service complaints can take longer than 20 working days to complete due to a thorough investigation with all the appropriate staff involved.

Complaint Leads are increasingly making direct contact with complainants to provide a more person-centred approach to complaint handling, which helps to establish what the key issues are for the complainant. As outlined above, meetings are being offered at this stage to allow further discussion of the concerns raised, if desired by the complainant, and this would be followed by sending a written response to confirm the complaint outcome and any agreed actions to be undertaken by the service.

NHS Grampian has not received any requests for Alternative Dispute Resolution (ADR) to be provided during 2017/18, but the Complaints Officers attend complaint meetings to support complainants and staff as required. A Family Liaison role has recently been introduced, and is being developed as a single point of contact, independent to the Service Manager and Feedback Team to support families, if required.

## **2.2 - Encourage early resolution and ownership of complaints:**

The Feedback Service continues to triage feedback as it is received to allow identification of non-clinical complaints that are suitable for early resolution. Email communication takes place with the relevant Complaint Lead on the day these complaints are received, to encourage quick investigation and resolution of the complaint by telephone.



## **2.3 - Measuring complainant satisfaction with the process:**



Following the introduction of the new CPH in April 2017, NHS Grampian designed a questionnaire to gain feedback from complainants about their experience of raising a complaint. The questions asked allow us to produce a report on the new Key Performance Indicators (KPIs) that are described in the CHP.

We have a paper questionnaire to send out with responses, but also have an electronic questionnaire that is sent to complainants who have provided their feedback by email. Benefits of the electronic survey are that no postage is needed and it is easier to extract the data and reports.

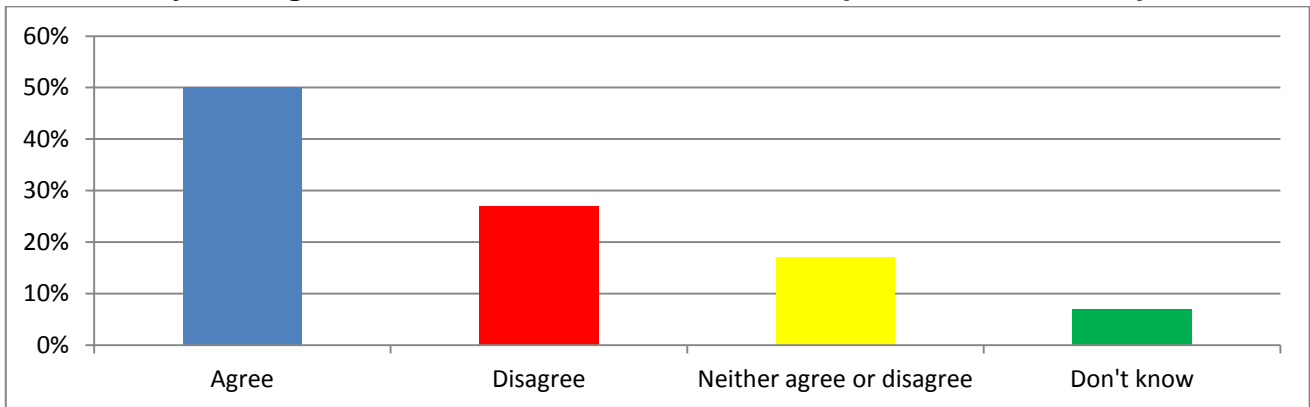
### **NHS Grampian Complainant Experience Report**

The Feedback Team sent an electronic survey link to 127 complainants asking them to give feedback about how satisfied they were with the handling of their complaint. We received 30 completed survey entries meaning a participation rate of 24%. The results of the survey were quite mixed but some areas showing large agreement from respondents on how they felt.

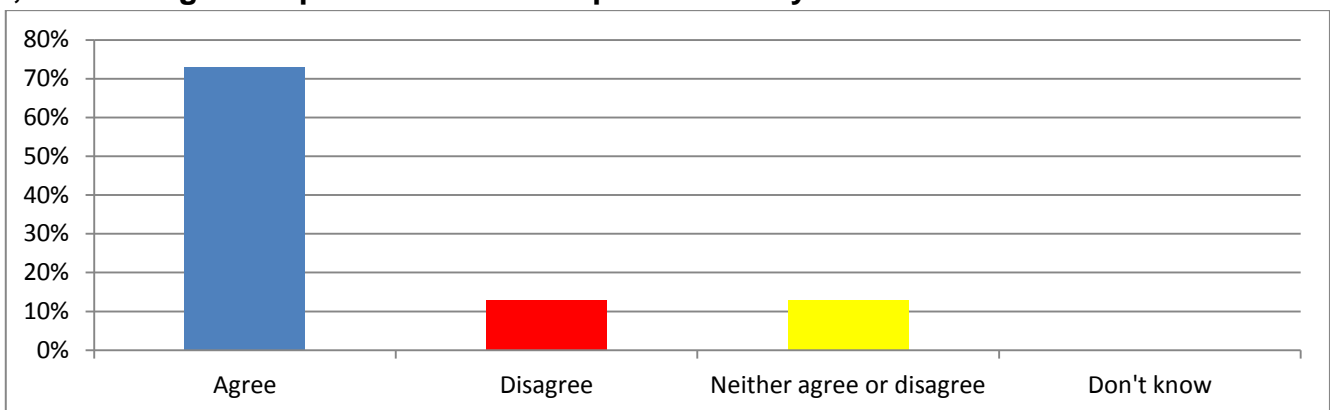
The results of the feedback received for question are shown below. This will be a good benchmark for going forward and we hope to have more views over the coming year and see improvements in satisfaction as we continue to improve our approach.

For each question people were asked to select either between four options (agree, disagree, neither agree or disagree or don't know), or three options (yes, no, no answer).

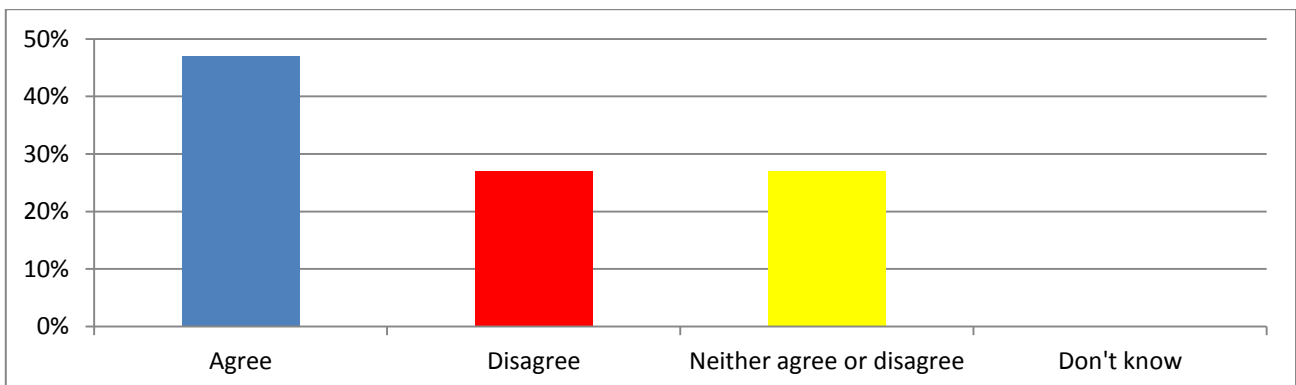
**Q1, It was easy finding information on how to make a complaint to NHS Grampian:**



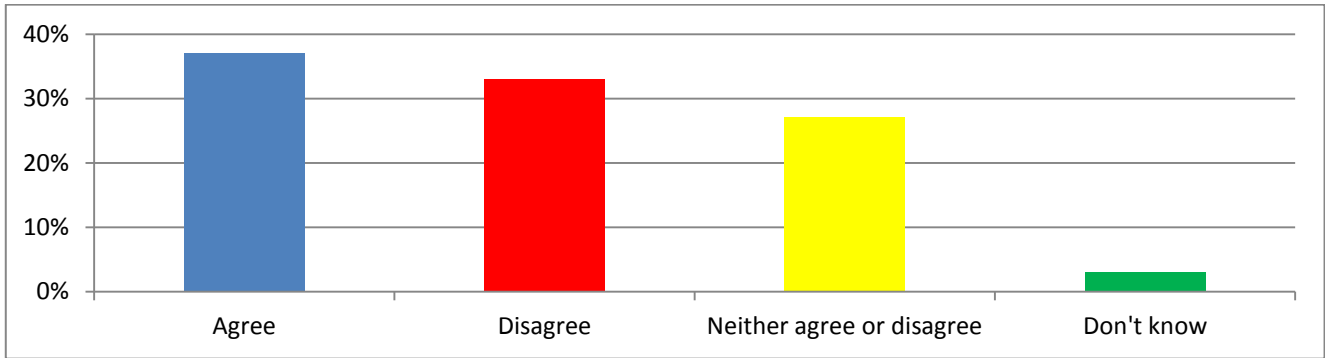
**Q2, Submitting a complaint to NHS Grampian was easy:**



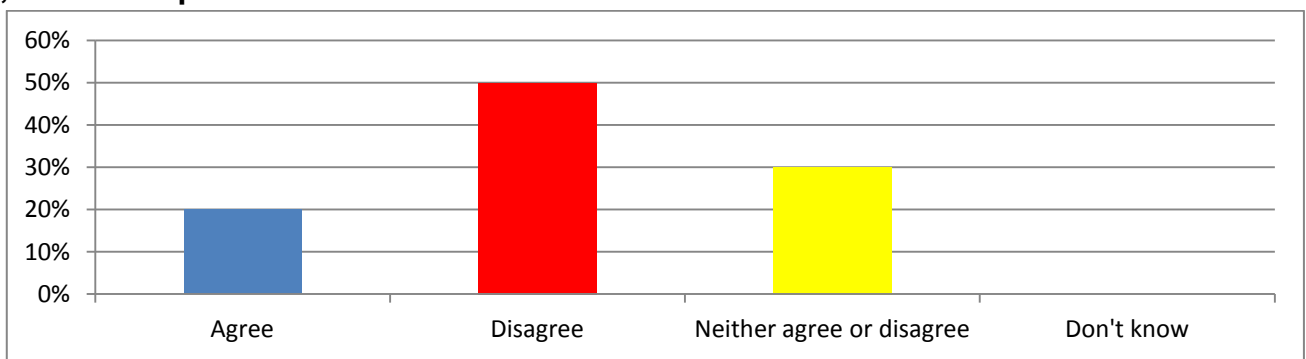
**Q3, NHS Grampian staff dealing with my complaints were helpful, courteous and professional:**



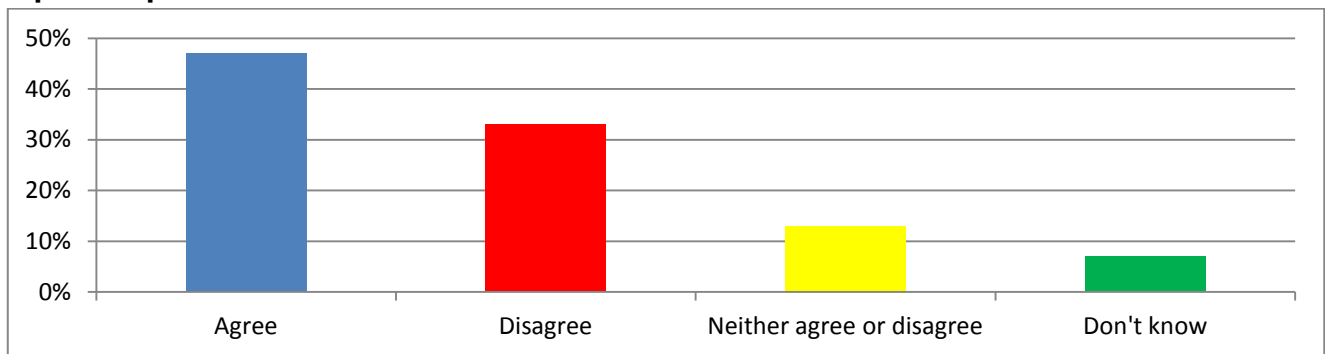
**Q4, NHS Grampian staff listened and understood my complaint, showed empathy and apologised:**



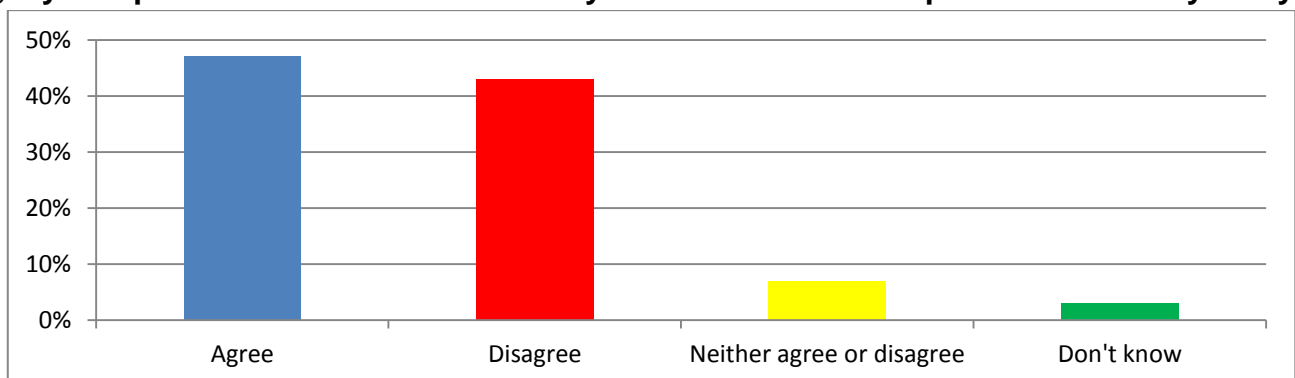
**Q5, NHS Grampian staff checked what outcome I wanted:**



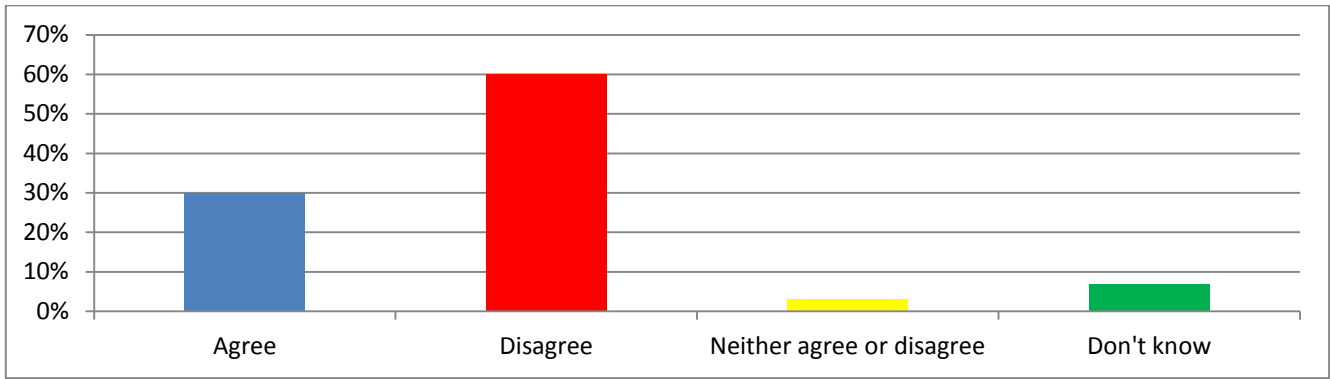
**Q6, I was given the information including timescales for responses etc, which explained the complaints process:**



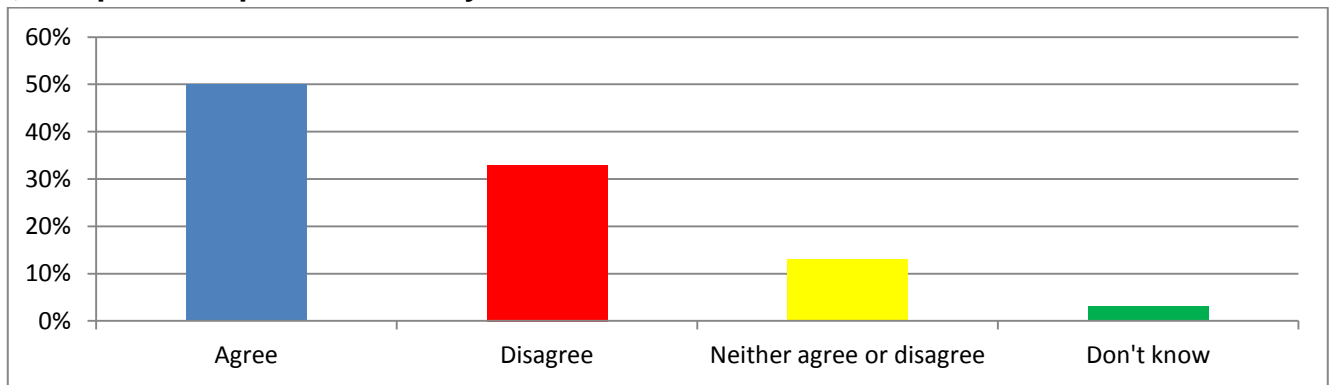
**Q7, My complaints was handled in a timely manner and I was kept informed of any delays:**



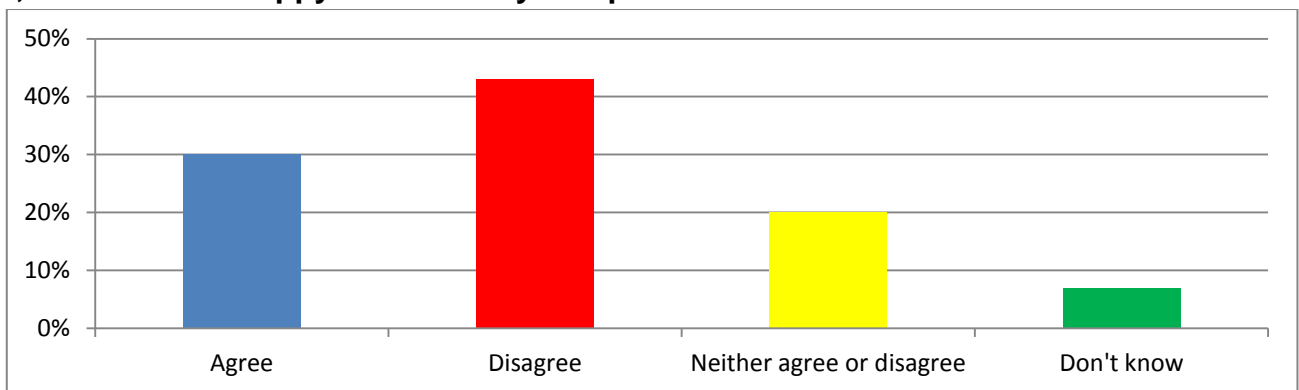
**Q8, All my complaint issues were answered:**



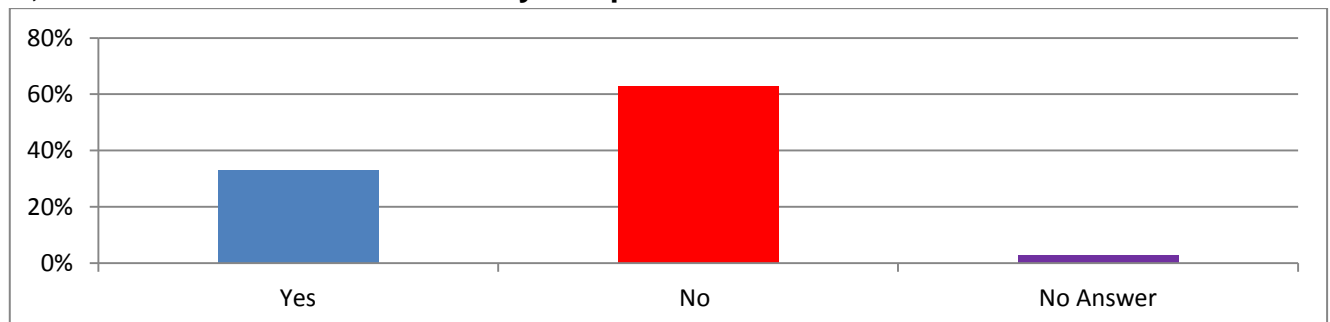
**Q9, complaint response was easy to read and understand:**



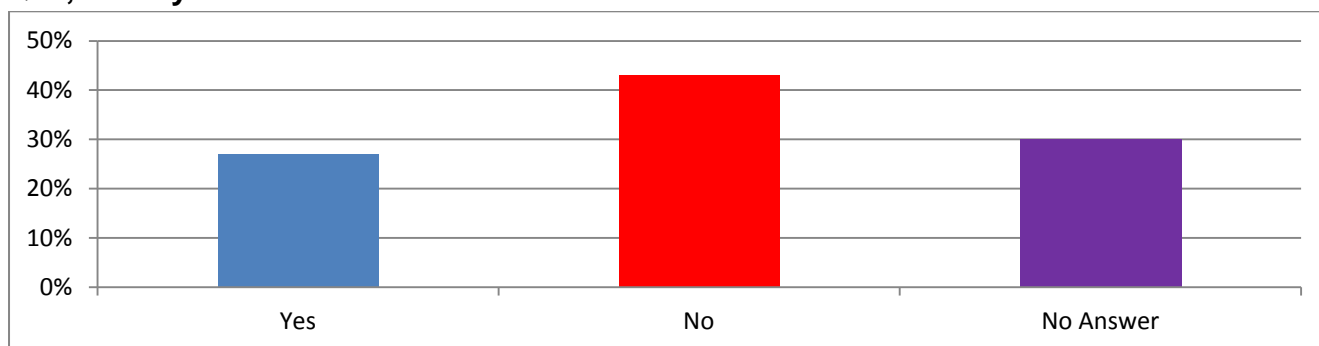
**Q10, Overall I was happy with how my complaint was handled:**



**Q11, I raised concerns about how my complaint was handled:**



**Q12, Were your concerns addressed:**



**2.4 - Learning from complaints relating to each area of the board:**

Sector Leads are responsible for ensuring that their Complaint Leads record the learning identified and action taken in the appropriate fields in the Datix Complaints Module. The learning and actions fields are audited by the Feedback Service to ensure actions have been recorded, implemented, sustained and shared across the Organisation, as appropriate. Where there is limited information or a field is blank the Leads are contacted and asked to provide the relevant information.

Below is a summary of action taken as a result of complaints received 2017/18:

Action taken as a result of complaints received 1 Apr 2017 - 31 Mar 2018	Total
Access - Improvements made to service access	186
Action plan(s) created and instigated	121
Communication - Improvements in communication staff-staff or staff-patient	435
Conduct issues addressed	35
Education/training of staff	99
No action required	368
Policy reviewed	18
Risk issues identified and passed on	39
System - Changes to systems	40
Share lessons with staff/patient/public	120
Waiting - Review of waiting times	104
<b>Total</b>	<b>1565</b>

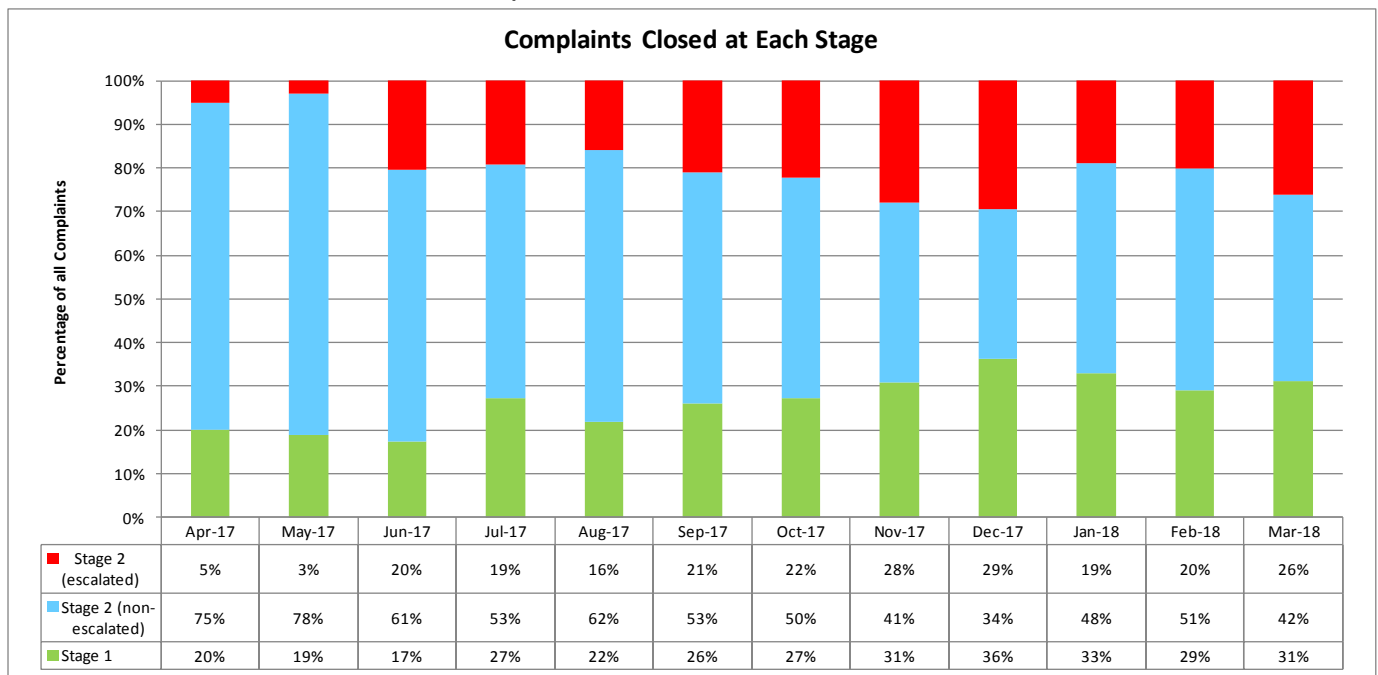
**NHS Grampian Complaints Response Times and Outcomes:**

As of the 1 April 2017, the new CHP required that complaints are responded to within 5 working days to achieve Early Resolution, called 'Stage 1', and for 'Stage 2' complaints, are acknowledged within 3 working days and responded to in 20 working days.

Complaint Leads found adopting the new proactive way of resolving complaints quite challenging, in particular developing the confidence and skills to phone complainants and try and achieve resolution over the phone.

We are encouraged to learn that the amount achieved by Early Resolution has increased over the past few months. It has taken slightly longer than anticipated for the new process to be embedded into the working day of our staff.

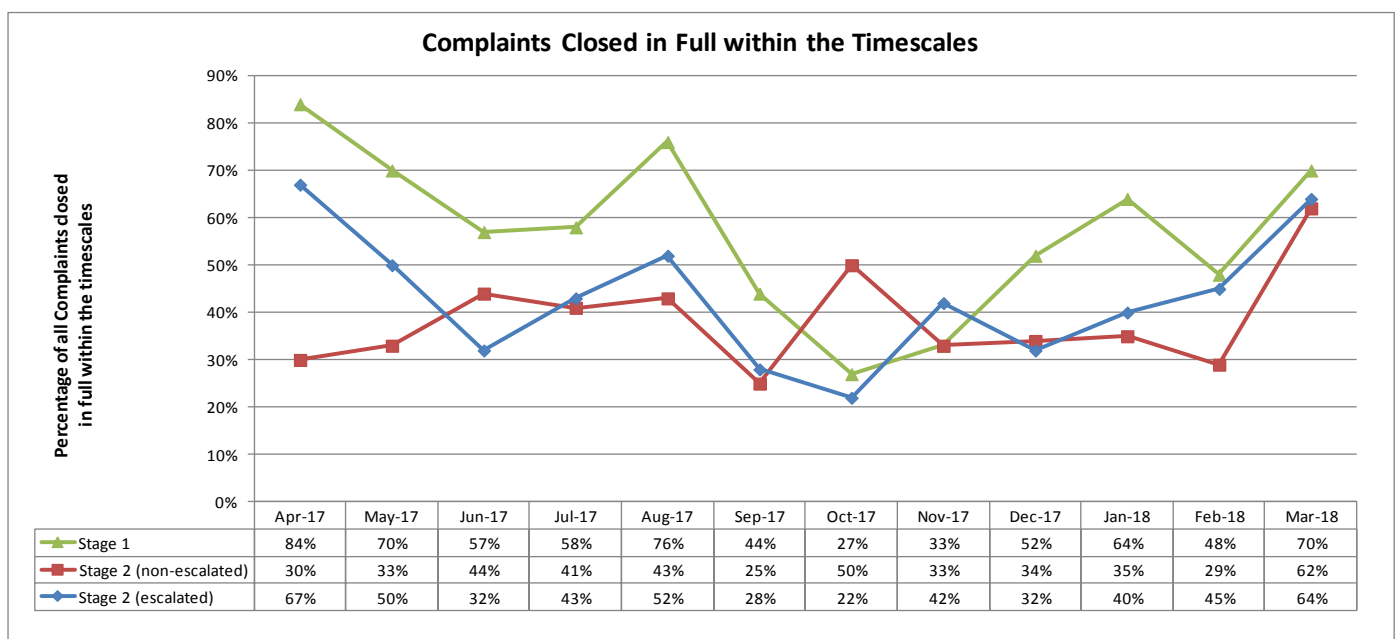
The chart below illustrates the percentage of complaints closed at each stage, between April 2017 and March 2018. Most closed at stage 2 but between 17 and 41% were closed at stage 1. In addition between 3 and 29% of complaints were escalated.



The chart below illustrates response times by stage between April 2017 and March 2018. 84% of Stage 1 complaints were closed within five working days in April but this dropped to 27% by November before increasing to 70% in March.

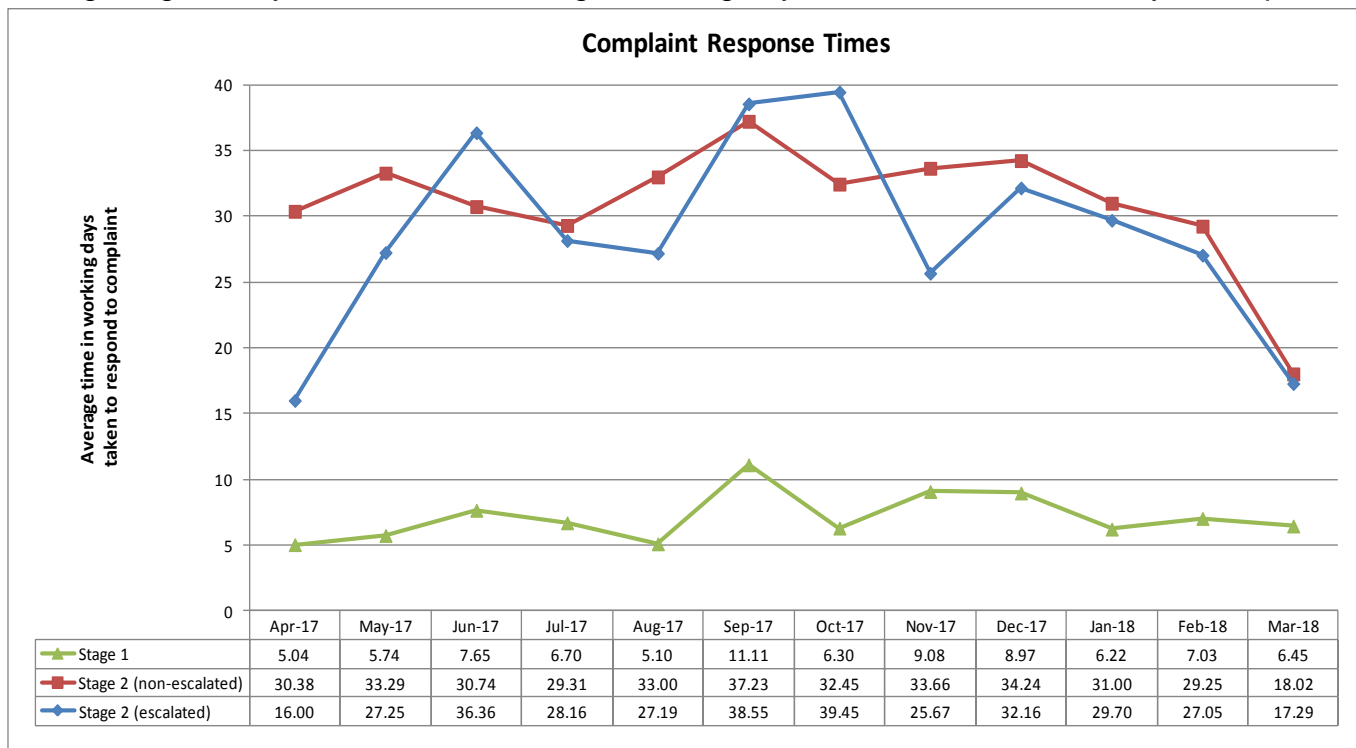
Response rates were much lower for non-escalated Stage 2 complaints with well under a half of all complaints closed off within 20 working days in each month except March which reported significant improvement to 62%.

Response times were more variable for escalated complaints with two thirds closed off within 20 working days in April but only 22% in October.

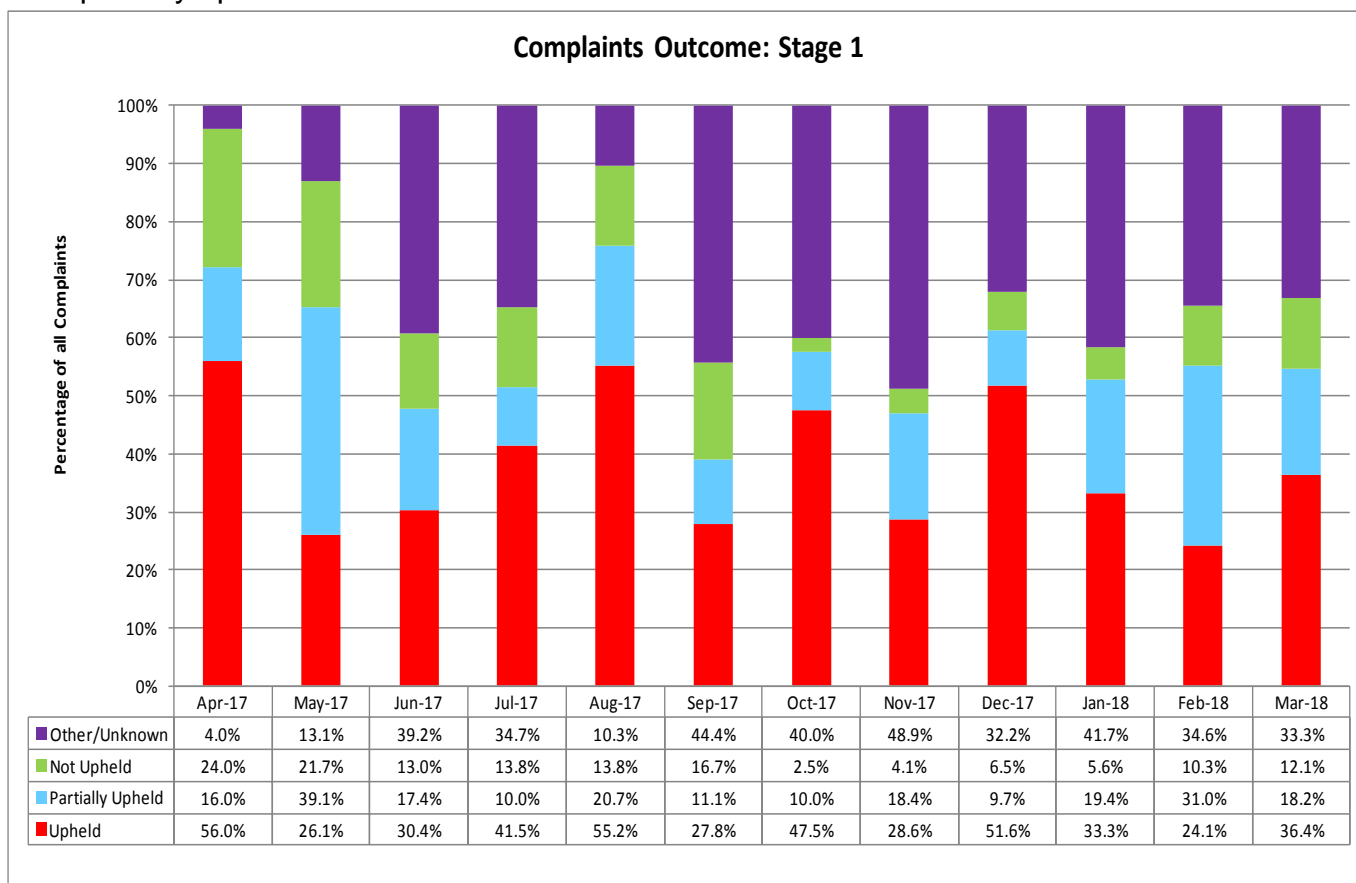




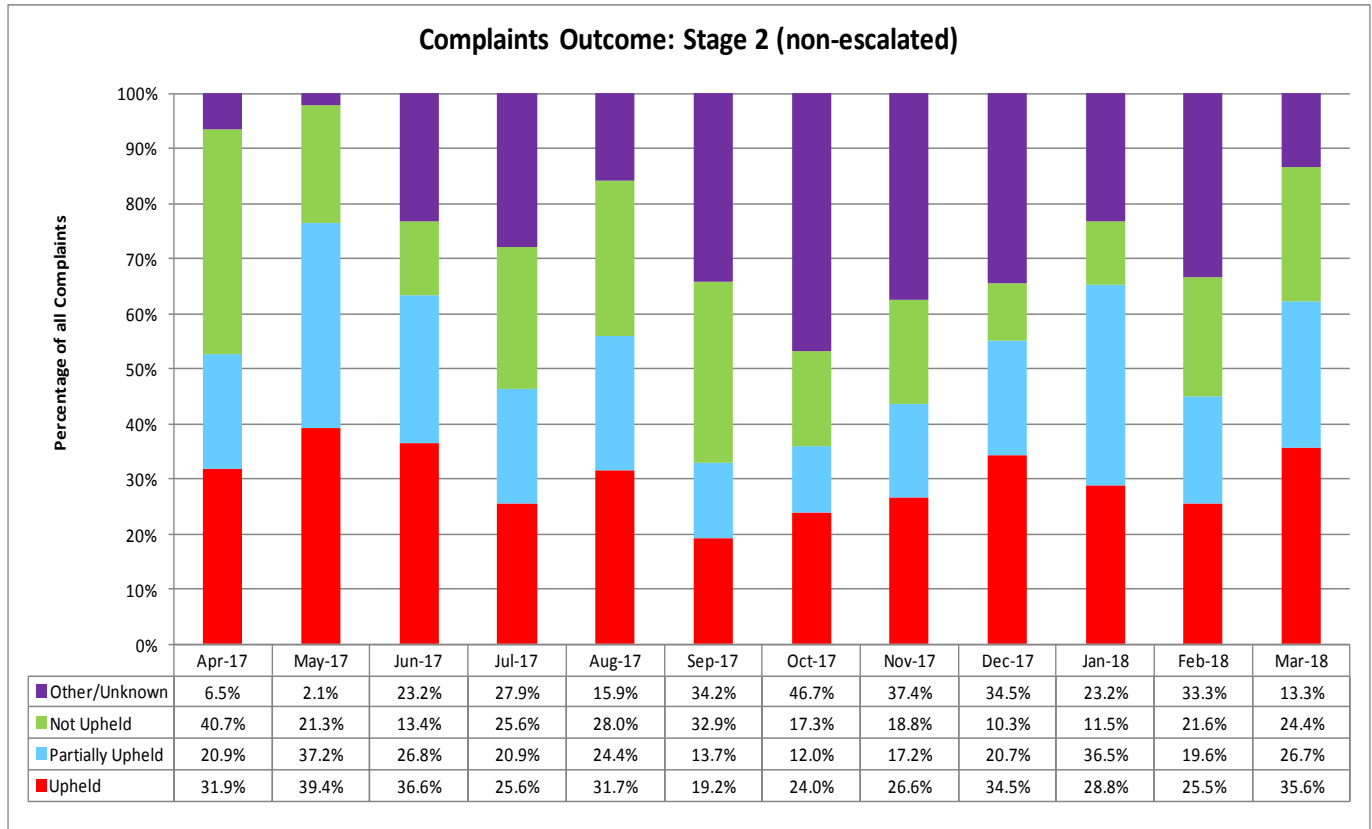
Average response times, in working days, are illustrated in the chart below. For stage 1 the average is generally between five and eight working days but reached over 11 days in September.



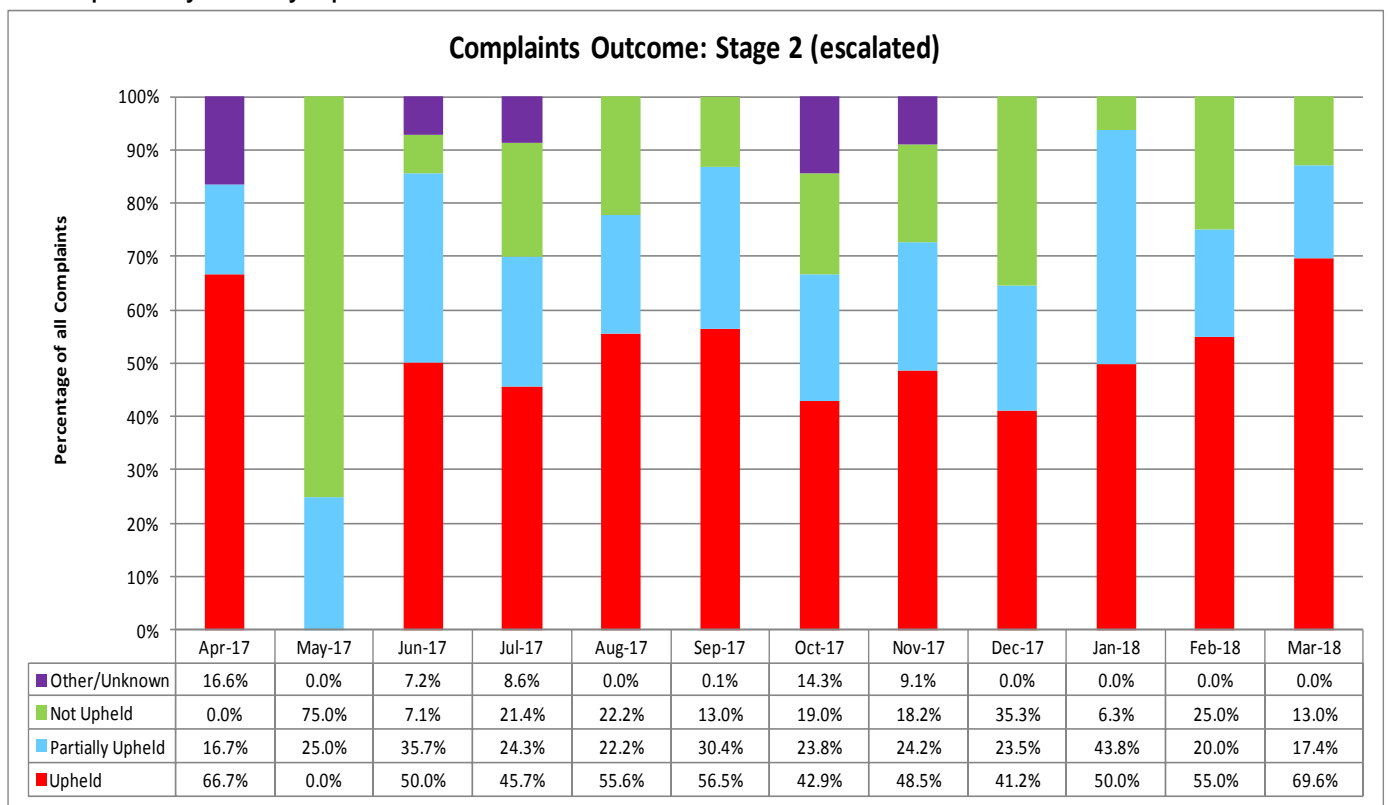
The chart below illustrates outcomes for complaints closed at Stage 1. Over half of complaints were upheld in April, August and December but only 24% in February, when a higher proportion were partially upheld.



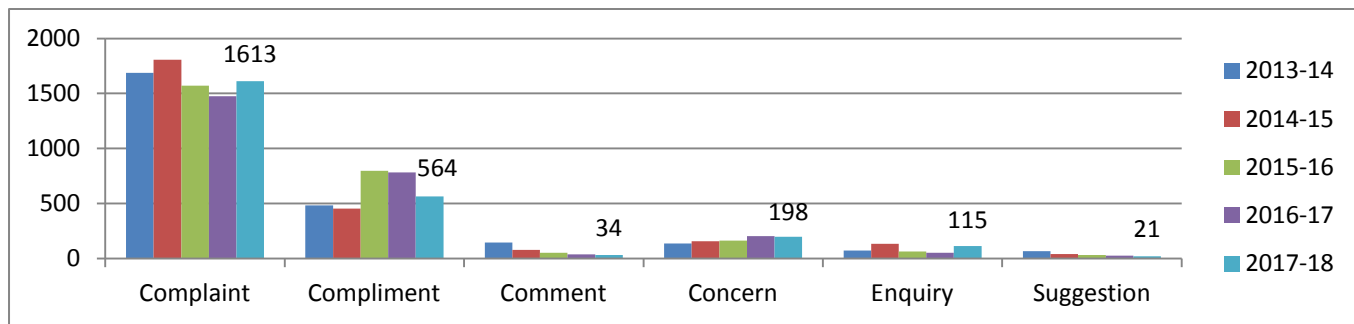
The chart below shows that a lower proportion of non-escalated Stage 2 complaints are upheld, under 40% each month.



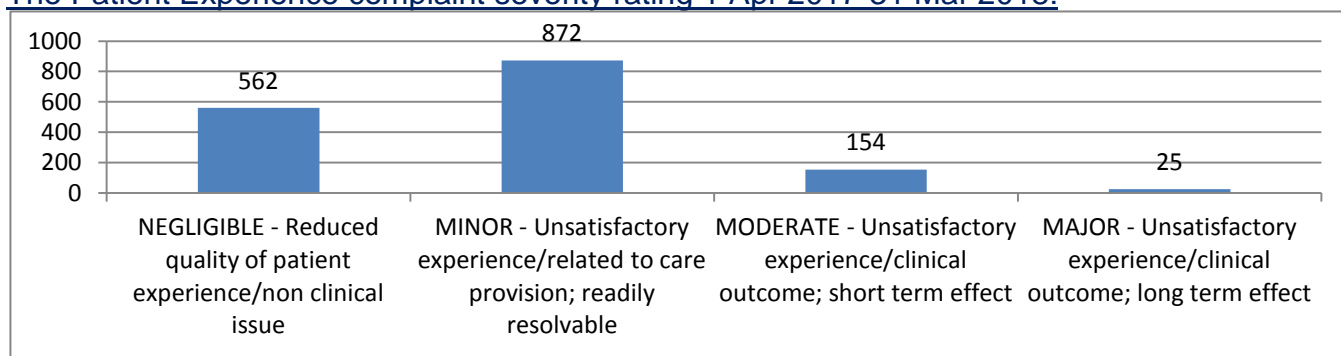
The chart below shows that outcomes are more variable for escalated Stage 2 complaints. 67% were upheld in April and 69% in March compared to none at all in May. The majority are, however, either partially or fully upheld.



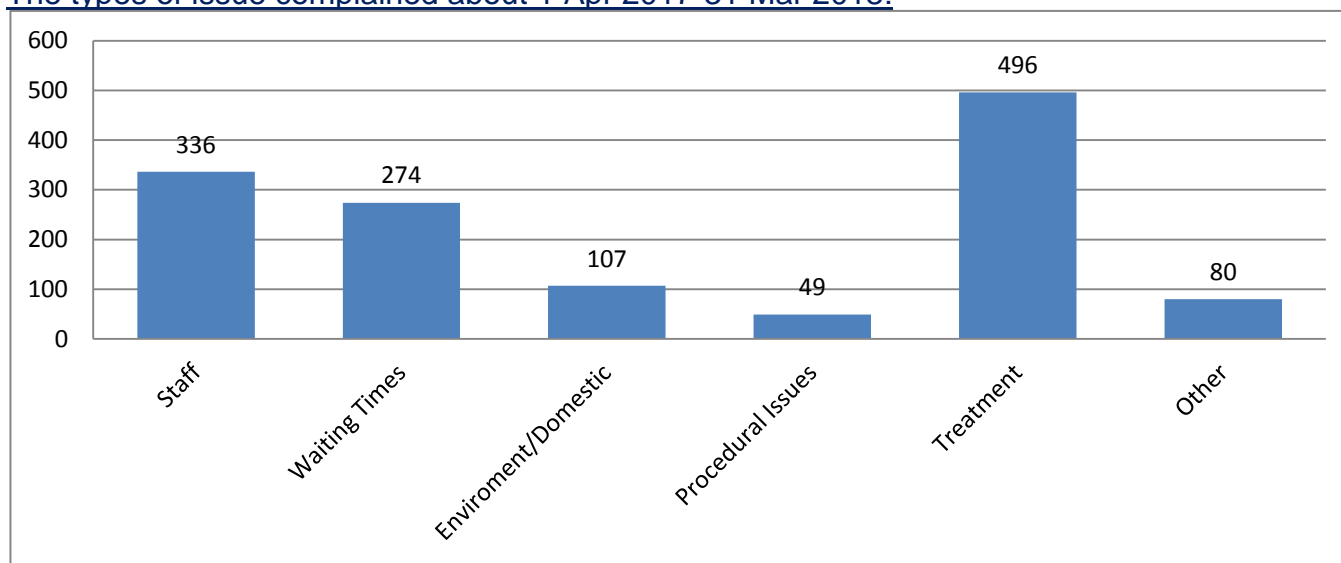
The total number of all feedback received by NHS Grampian over the last 5 financial years:



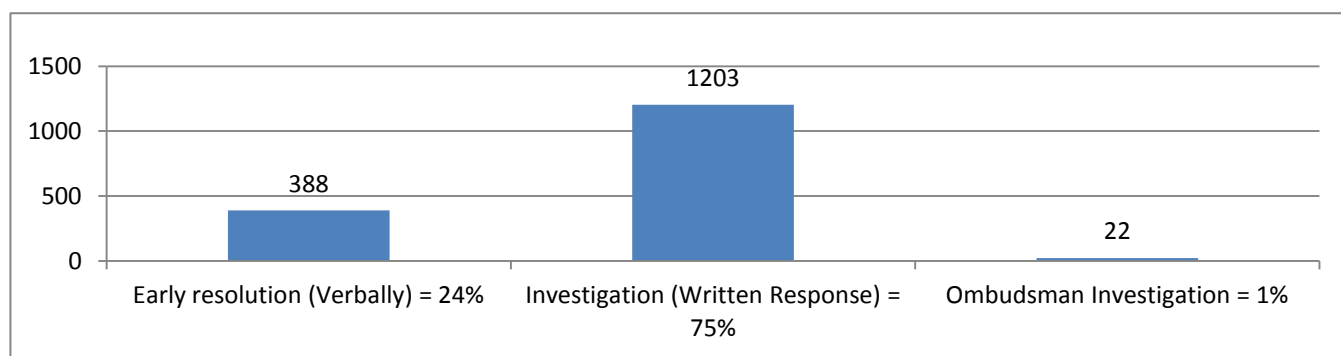
The Patient Experience complaint severity rating 1 Apr 2017-31 Mar 2018:



The types of issue complained about 1 Apr 2017-31 Mar 2018:



How complaints were resolved 1 Apr 2017 - 31 Mar 2018:



## 2.5 - The links between the management of selected complaints to the management of serious and adverse events:

The Feedback Manager attends a weekly Grampian wide Clinical Risk Meeting (CRM). This meeting is usually chaired by the Nursing Director or the Medical Director. Attendees include organisation leads for performance and governance, quality informatics, quality governance and risk, health and safety, infection control, organisational development, mental health and acute services.

The CRM allows for an overview and connections to be made for complaints and adverse events and for the Feedback Manager to raise concerns or seek support from the Directors if required.



When feedback or a complaint identifies a major or extreme event, or events, it is usual practice for the service involved to initiate a Significant Event Analysis (SEA). An SEA is an in-depth investigation into any event thought to be significant in the care of patients. Once the investigation is complete, a meeting is usually offered to the complainant and their family to discuss the findings, identifying any learning opportunities and actions to be taken, as required.

Appropriate investigation and follow-up of adverse events, near misses and complaints increases our knowledge of why these events happen and improves our ability to prevent them recurring. The opportunity to share transferable lessons from the outcomes of investigations is vital in the prevention of reoccurrence of similar events.

## 2.6 - Working with local independent contractors to monitor how feedback is used to drive improvements:



In line with the new CHP, we have amended the electronic questionnaire that we send to allow the collection of Independent Contractors (GPs, Dentists, Pharmacists and Opticians) so that the information gathered complies with the new KPIs provided.

The Feedback Service sends a group email, which has the contact details of all the independent contractors throughout NHS Grampian. The questionnaire is available for one month to allow Contractors to enter their complaints data.

As mentioned below in our Training Section, the Complaints Officers have completed complaints training and awareness sessions to various staff groups in Primary Care, including GPs, Practice Managers, Dental Consultants and Dental staff, and other various staff members throughout the Primary Care sector.

## Section 3 - The culture, including staff training and development

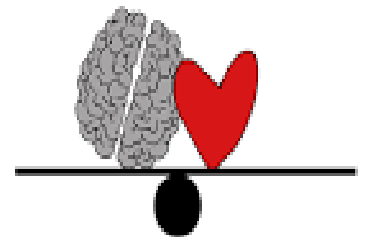
### 3.1 - Challenges encountered in embedding a culture that actively encourages feedback:

To overcome challenges and to embed a culture that encourages all types of feedback, NHS Grampian appreciates the importance of:

- Local ownership and accountability, in terms of governance, in dealing with and learning from complaints.
- Adhering to national guidelines.
- A central team managing the feedback system, to ensure an overview of activity and for this team to be properly resourced.
- Managers and staff within services being clear of their roles and responsibilities in dealing with complaints - both formal and informal.
- The Feedback Team and the DATIX Team working collaboratively to ensure the effective use of the information management system, and to provide advice and support to the services.
- Continuing to develop how we learn from complaints and monitor success.
- Further enhancing the monitoring and reporting systems.

### 3.2 - Supporting staff and the public enabling openness and confidence:

The Complaints Officers offer bespoke training and support staff involved in complaints. Assistance is given with arranging and attending meetings and to ensure that all staff understand the complaints process.



### 3.3 - Staff training plans:

The Complaints Officers also attend various staff meetings to ensure all staff are fully aware of the complaints process. Support and advice is given with regards to adopting a person centred approach when dealing with patients, relatives and carers.

Training has been carried out in the following locations:-

- GP Surgeries in Aberdeenshire and Aberdeen City
- Mental Health Services
- Drop in Centres
- Suttie Centre
- Feedback Team Office

Training sessions have also been carried out with Registrars, Support Managers, Divisional General Managers and Gynaecology Consultants. The Complaints Officers also attended a training session at Aberdeen University to discuss the complaints procedure to Dental Consultants, Dentists and Dental Nurses.



These training sessions ensure that all staff are aware of the complaints process and the work of the Scottish Public Services Ombudsman.

The Complaints Officers also work closely with Divisional General Managers to ensure a standardised approach to investigating and responding to complaints. Complaints Officers, investigators and front line staff are encouraged to contact patients by telephone to discuss their concerns and achieve early resolution. The Complaint Officers also offer support and training to assist front line staff to become proficient in speaking to complainants by telephone.

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

### **4.2 - Steps taken to ensure the focus on learning and improvement are recognised as the main outcome from feedback:**

- Feedback and complaints are discussed at weekly multi-disciplinary clinical governance/quality meetings and appropriate actions are taken to improve on identified areas of concern.
- Clinical treatment complaints are discussed through peer review and shared learning events.
- Learning points are identified from patient feedback by service managers and these are shared with their teams.
- Action points from patient feedback are implemented to ensure that the same things don't happen again.
- Analysis of complaints and feedback is a part of service reviews to ensure any themes or significant events that require more significant service improvement or resource to improve are identified.



NHS Grampian will continue to embed a more robust system to maximise the learning from complaints by providing the appropriate training and practical support to services.

### **4.3 - Learning being brought together with learning from other sources, e.g. adverse events, to provide an integrated approach to improvement planning:**

Both complaints and adverse events are discussed during the weekly Clinical Risk Meeting to allow linking of incidents, investigations and their outcomes. There is a focus on the learning that has occurred and the actions taken as a result, and these can be shared through learning notices distributed across the organisation, as required.

## **Section 5 - Accountability and Governance**

### **5.1 - The reporting processes for complaints and feedback:**

As previously mentioned the Feedback Service prepares a report every week and shares it with the attendees mentioned above in Paragraph 4.3.





The Feedback Service report includes:

- New complaint descriptions and patient experience severity scoring.
- Complaints which are still open/in progress after 20 working days.
- Recently closed serious, sensitive or complex complaints to ensure full learning and action has been taken and discuss shared learning opportunities.
- Ombudsman complaints which have recently been reported on to allow discussion of recommendations made and ensure learning and action is taken and shared.

Complaint Handling Performance, including response target achievement, how many complaints are open and overdue.

Early Resolution report, highlighting which services have achieved the 5 working day early resolution since the introduction of the New Complaints Handling Procedure on 1 April 2017.

A 'Learning from Complaints and Scottish Public Services Ombudsman Cases (SPSO) Report' is prepared four times a year by the Feedback Manager. This report is usually presented to the Clinical Governance Committee and at every Engagement and Participation Committee. The report includes information on feedback, complaints and SPSO cases closed over the previous three months. Some feedback information includes; feedback types (compliments, comments, suggestions, concerns and complaints), numbers received, locations and themes of feedback and complaints. The severity and outcomes of complaints and SPSO findings, and the learning identified and action taken as a result of feedback and complaints.

The 'Handling and Learning from Feedback' annual reports are available on NHS Grampian's website and are also shared with and presented to the Engagement and Participation Committee.

## **5.2 - Supporting NHS Board non-executive Directors to seek assurance that improvements can be systematically and reliably demonstrated:**

NHS Grampian Board is assured that:

- Feedback and complaints are administered in line with national guidance, including managing the flow of information, issuing the responses in a timely manner and responding to SPSO investigations.
- The necessary advice and training is provided across the organisation, to enable long term sustainability.
- The Feedback Service enables liaison between service teams and the central services (DATIX and Feedback Officers) to facilitate greater levels of collaboration, which ensures that NHS Grampian has the information necessary to use the learning identified and make service improvements as a result of the feedback received.



NHS Grampian is fully compliant with complaint handling arrangements, in line with the Patient Rights (Scotland) Act 2011, and in particular ensures that action is taken, as necessary, following the outcome of any feedback.

The feedback system is constantly being developed to ensure mechanisms are in place to support fast, effective and efficient responses across NHS Grampian.

Specialist advice and support continues to be given to patients and staff on the management of this process, and there is a commitment to deliver local training and awareness-raising to ensure high quality, effective feedback and complaints handling is the norm across the organisation.

NHS Grampian has a strong organisational commitment to stakeholder engagement, through our core values of "Caring, Listening, Improving" and the strategic themes of "involving our patients, public staff and partners" and "developing and empowering our staff".

To ensure NHS Grampian lives by its core values, the organisation will continue to listen carefully to patients, families, carers, the public and staff, on an ongoing basis and at every stage of their health care interaction. NHS Grampian will continue to make it easier for people to share their experiences, ideas and opinions and to remain genuinely engaged in decision making at all levels, and will continue to demonstrate a consistent and system-wide culture of learning from and taking action as a result of feedback received.

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