

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 30 March 2020
Title:	Patient Experience: Feedback and Complaints - Quarter 3 October – December 2019
Responsible Director:	Professor Hazel Borland, Nurse Director
Report Author:	Jennifer Wilson, Assistant Director Quality Improvement

1. Purpose

This is presented to the Committee for:

- Discussion

This paper relates to: NHS Complaint Handling Process and the annual requirements as laid out by Scottish Government

This aligns to the following NHSScotland quality ambitions:

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The Board is asked to receive and discuss this report on organisational activity with regard to patient, carer and family feedback and complaints in Quarter 3 (October 2019 to December 2019), and to note our continued compliance with the complaint handling process.

2.2 Background

This report provides information in keeping with the NHS Complaint Handling Process and the annual requirements as laid out by Scottish Government. It provides information on our performance for Quarter 3 2019-2020 (October to December 2019) when responding to patients, carer and family complaints and includes the following elements:

- Feedback and Care Opinion (CO) data
- Number of complaints each month
- Compliance and performance for all stages of the complaint process
- Scottish Public Services Ombudsman (SPSO) referrals and decisions
- Themes and Outcomes

2.3 Assessment

- Feedback is being collected on a regular basis to provide a more balanced view of feedback and complaint activity
- Early indications are the current improvement work in complaint handling is demonstrating positive outcomes
- More detail in relation to complaint themes is now being collected to help prioritise improvement and learning
- Continued spread of Care Opinion responders across all services is ongoing

2.3.1 Quality/patient care

This new approach to complaint handling ensures that learning and improvement is progressed for all upheld complaints and shared across all relevant services.

Learning from complaints, completing the learning cycle Feedback has the best evidence for bringing about sustainable change and forms the basis for any quality improvement programme. Patient complaints offer the opportunity to change practice and improve patient experience and outcomes.

2.3.2 Workforce

There are no workforce implications.

2.3.3 Financial

There are no financial implications.

2.3.4 Risk assessment/management

Failure to have in place and to maintain an appropriate feedback, comments, concerns and complaints process could have a significant impact upon NHS Ayrshire and Arran's ability to demonstrate that it firmly understands the risks associated with complaints and the requirement for organisational learning.

2.3.5 Equality and diversity, including health inequalities

An impact assessment is not required.

2.3.6 Other impacts

This will support the requirements of the Patient Rights (Feedback, Comments, Concerns and Complaints) (Scotland) Directions 2012.

- Best value
 - Performance management
 - The delivery of an effective process for patient experience including feedback, comments, concerns and complaints will support the Board's commitment to safe, effective and person centred care.
- Compliance with Corporate Objectives
 - Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect.

- Local outcomes improvement plans, community planning etc
 - Effective feedback, comments, concerns and complaints handling supports the delivery of the Healthcare Quality Strategy.

2.3.7 Communication, involvement, engagement and consultation

Consultation events and workshops have been held for staff involved in redesign of the process for complaints handling.

2.3.8 Route to the meeting

A version of this paper was presented to the Healthcare Governance Committee on 09 March 2020

2.4 Recommendation

Members are asked to discuss this report on organisational activity in relation to patient, carer and family feedback and complaints in Quarter 3 (October 2019 to December 2019), and to note our compliance with the complaint handling process.

3. List of appendices

- Appendix 1 - Patient Experience: Feedback and Complaints - Quarter 3 October to December 2019

Appendix 1 - Patient Experience: Feedback and Complaints- Quarter 3 October to December 2019

1. Complaint Handling Performance

This report provides detail on all complaint activity across the organisation and what actions are being progressed to ensure effective, person centred complaint handling that results in consistent and sustainable improvement.

This report will demonstrate our performance in key areas of complaint handling, as well as highlighting outcomes and providing more detail on complaint themes. Over time, this approach will illustrate trends in key areas and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.

1.1 Complaint Numbers

Chart 1a demonstrates concerns received per quarter over the last three years. Most significant is the drop from 243 concerns in Q1 of 2017/2018 to the current Q3 of 80. This is due to the change in categories from Concern to Stage 1 complaint in the updated NHS Complaint Handling Process in 2017. With the exception of this marked reduction, concern numbers have remained relatively stable.

Chart 1a – Concerns per Quarter 2017-2019

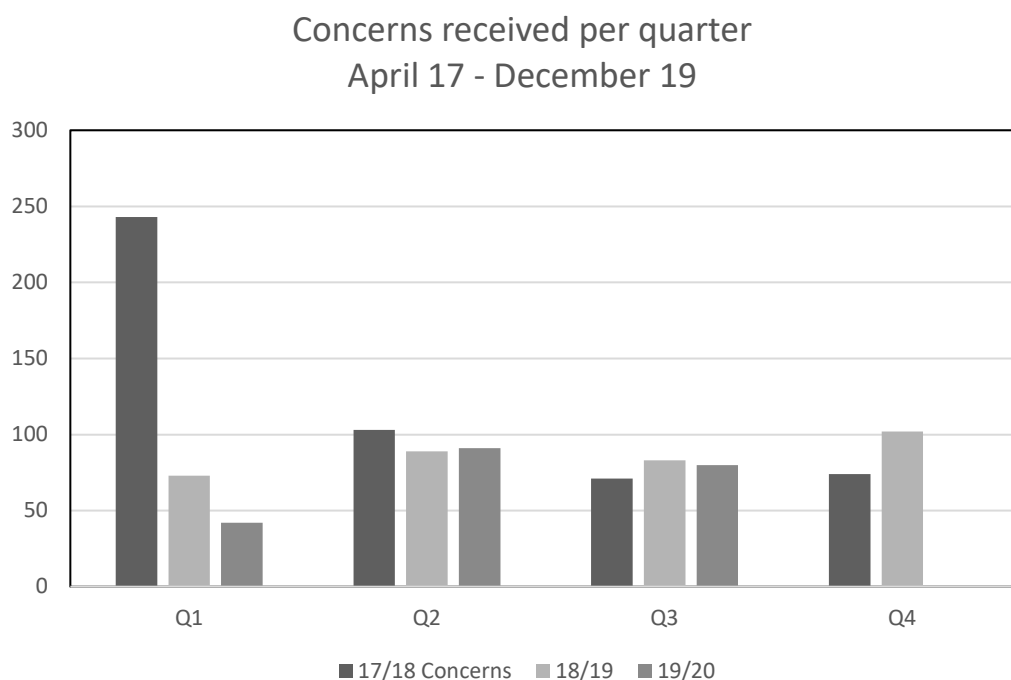


Chart 1b below demonstrates complaints received in the same period. In Q3 this year, the number of complaints have decreased by 43 complaints from the previous quarter.

Chart 1b – Complaints per Quarter 2017-2019

Complaints received per quarter
April 17 - December 19

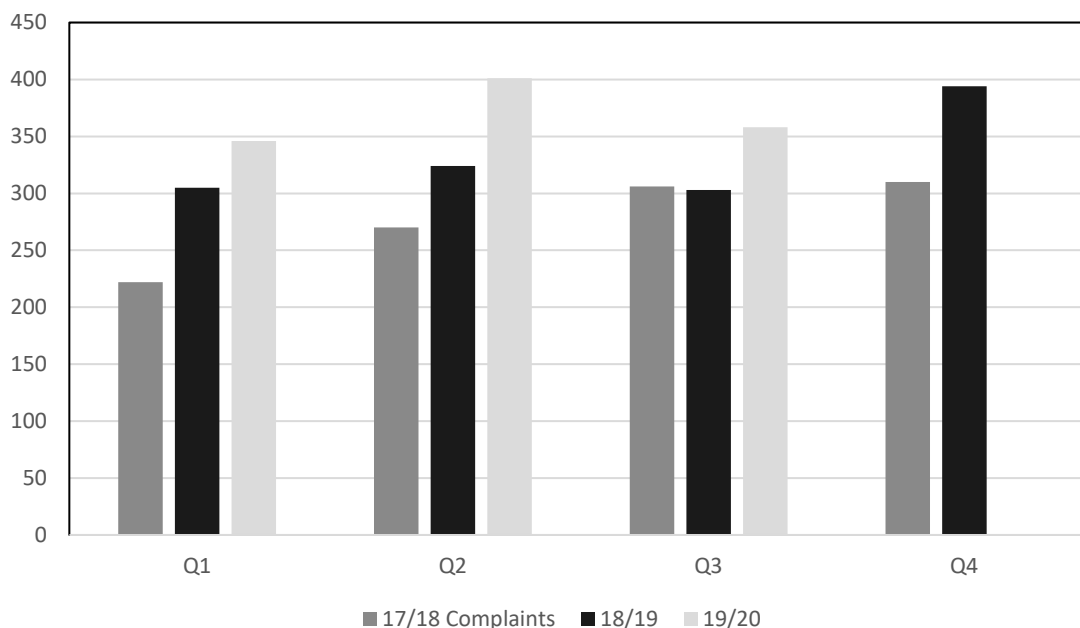
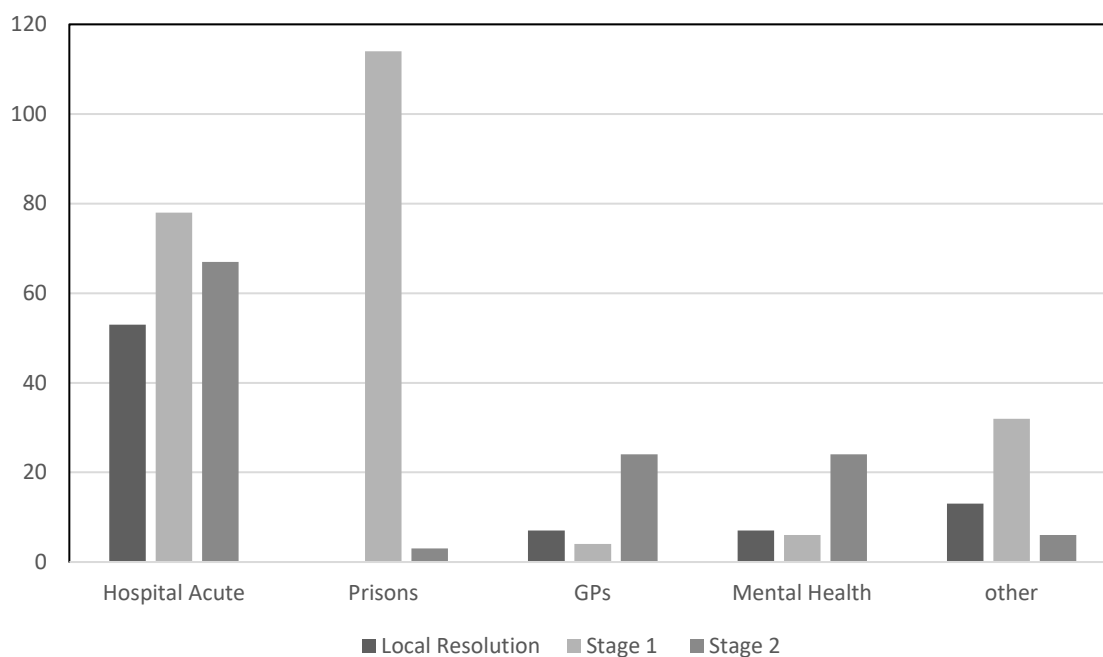


Chart 2 below shows the number and stage of complaints per area. In keeping with previous years, the majority of complaints are received in Acute Services, in particular, they receive more Stage 2 complaints than all other areas combined.

A significant number of Stage 1 complaints are made within prison healthcare and these complaints are handled internally. Over 75% of prisoner complaints relate to medication.

Chart 2 – Complaint by Area

Chart 2 - Complaints by area Q3 2019 - 2020



1.2 Compliance with Targets

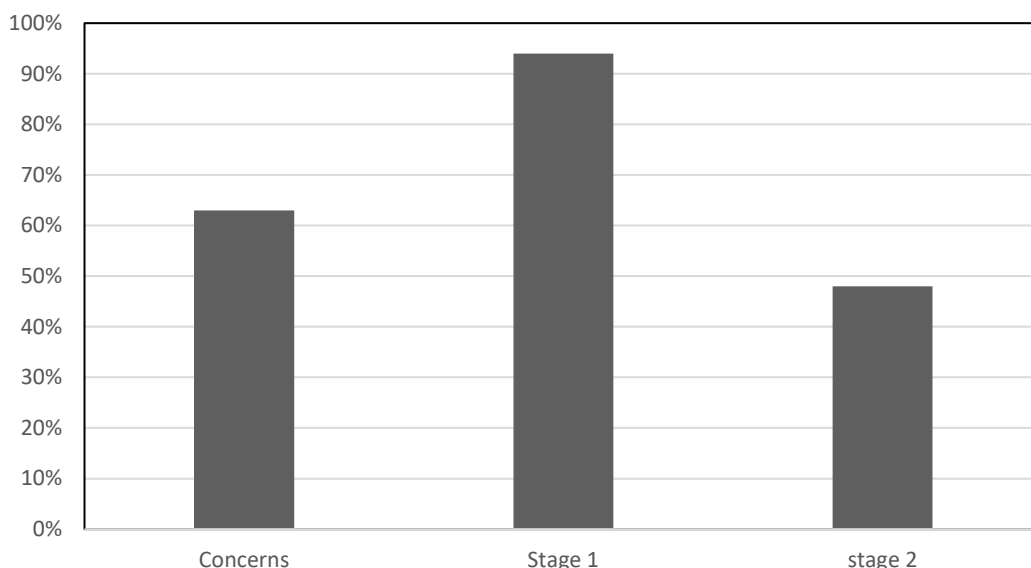
Chart 3 below looks at our performance against the target working days for each stage:

- Five days for concerns
- Five to ten days for Stage 1
- 20 days for Stage 2

It is evident that we are meeting the targets of five to ten days for Stage 1 complaints over 90% of the time in Q3, similar to Q2. Our performance against the 20 working day target for Stage 2 complaints has decreased from 56% in Q2 to 48% in Q3. This shows a reduction in meeting the 20 day target, however this will be monitored to ensure this decline does not continue.

Chart 3 - Percentage closed on target per stage

Percentage of Concerns and Complaints
Closed within Timescales Q3 2019 - 2020



This information has been broken down further in the charts below, including outcomes for complaints per stage and comparison to previous year's activity.

1.3 Performance & Outcomes

In **Chart 4a** Stage 1 complaint performance is compared to the same quarter in the previous year and it is evident that further improvement in meeting the targets has been achieved.

In this quarter, 234 Stage 1 complaints were received, and 219 were closed on time, meaning the target was met in 94% of complaints up from 91% in Q3 in the previous year.

The increase in the number of Stage 1 complaints is as a result of the improvement work being carried out in University Hospital Crosshouse. More complaints are being converted to stage 1 complaints as the Complaints Manager makes contact with each complainant as the complaint is received.

Chart 4a – Stage 1 Complaint Performance for Q3 2018-2019 & 2019-2020

Chart 4a - Stage 1 complaints performance for Q3 2018 - 2019 & 2019 - 2020

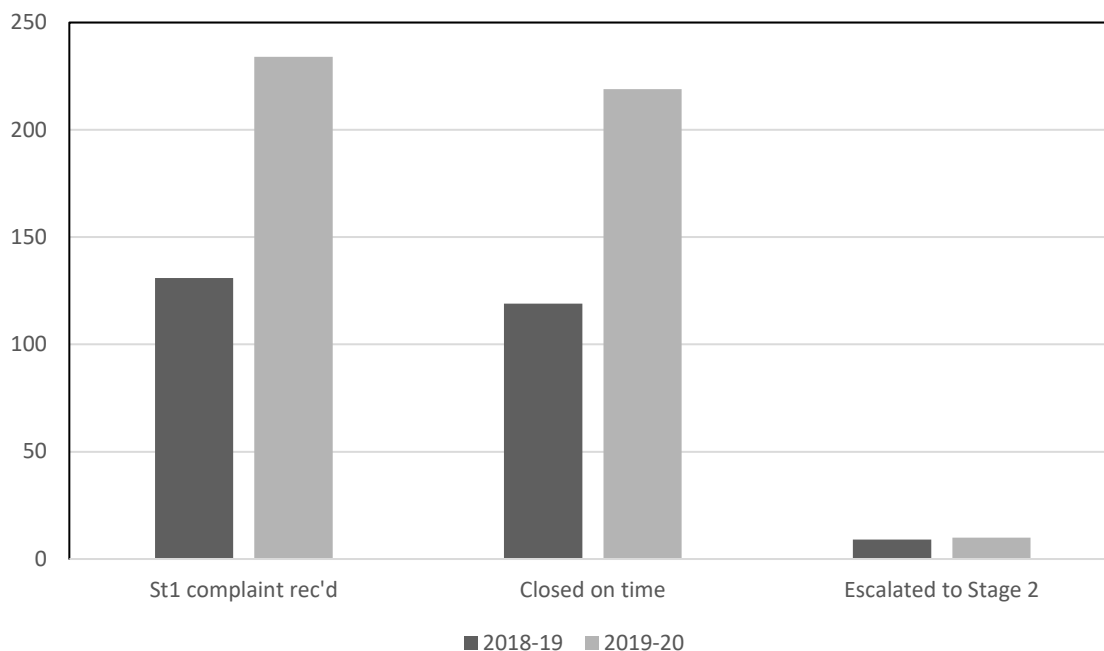


Chart 4b below presents the outcomes of all Stage 1 complaints closed in this quarter. 64% of all Stage 1 complaints received in Q3 were not upheld, which is a slight increase from the previous quarter. A further 17% were considered to be partially upheld (12% in previous quarter). Whilst 19% were fully upheld, the same as Q2.

Chart 4b – Stage 1 Outcomes

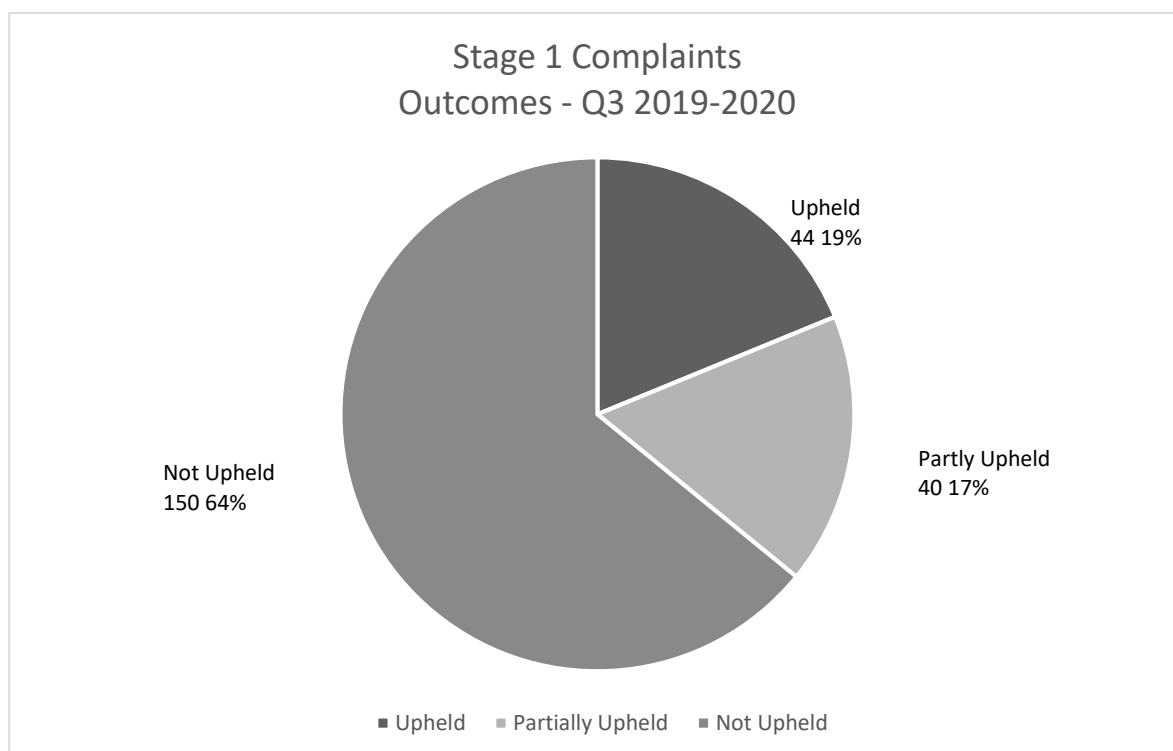
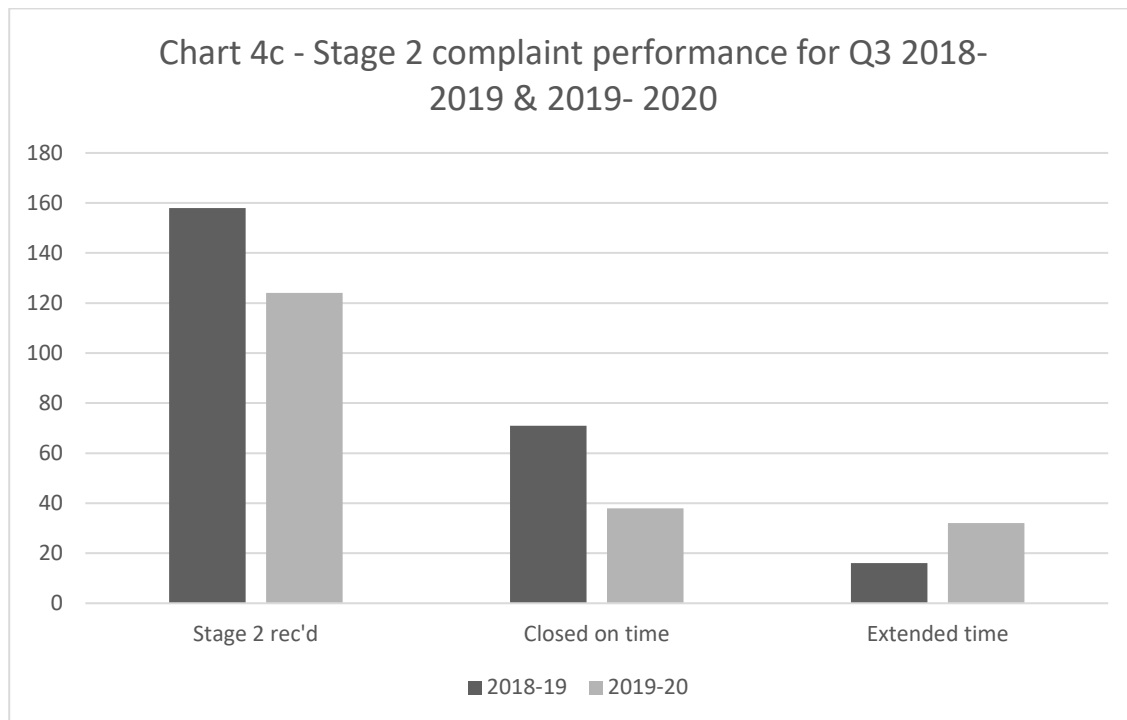


Chart 4c below provides the same measures for Stage 2 complaints.

Chart 4c - Stage 2 Complaint Performance for Q3 2018-2019 & 2019-2020

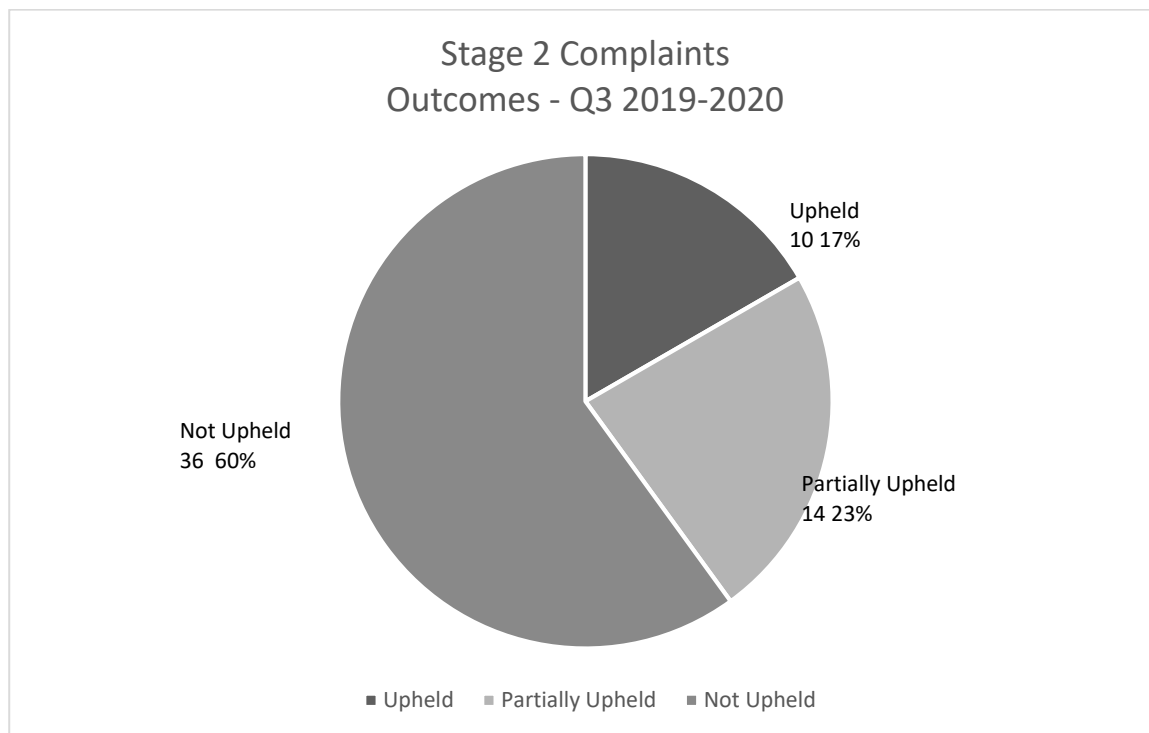


In this quarter, 48% of Stage 2 complaints were closed on target, a decrease from the previous year and the previous quarter. The number of Stage 2 complaints has decreased with the new process being in place in UHC.

An aspect of our complaint handling process that has not been routinely implemented in the past is our ability to grant an extension to a Stage 2 complaint when its complex or it is proving difficult to secure a meeting in the 20 working days set.

When an extension is granted, the complaint will not be considered out of time for a further 20 working days. In the last month, we have updated our recording system to allow us to capture this data and ensure that extensions are recorded appropriately. This should improve our overall performance in future quarters. There has been an increase in the number of complaints that extensions have been agreed with the complainants this year.

Chart 4d below shows the outcomes for all Stage 2 complaints closed this quarter



In this quarter, 60% were classified as not upheld, a decrease from the previous quarter (73%) with 23% partially upheld, and only 17% fully upheld.

1.4 Improvement Work UHC

Chart 4e shows how the complaints have been converted from Stage 2 complaints to Stage 1 complaints. Complaints are being responded to quicker and to the complainants' satisfaction.

Chart 4e

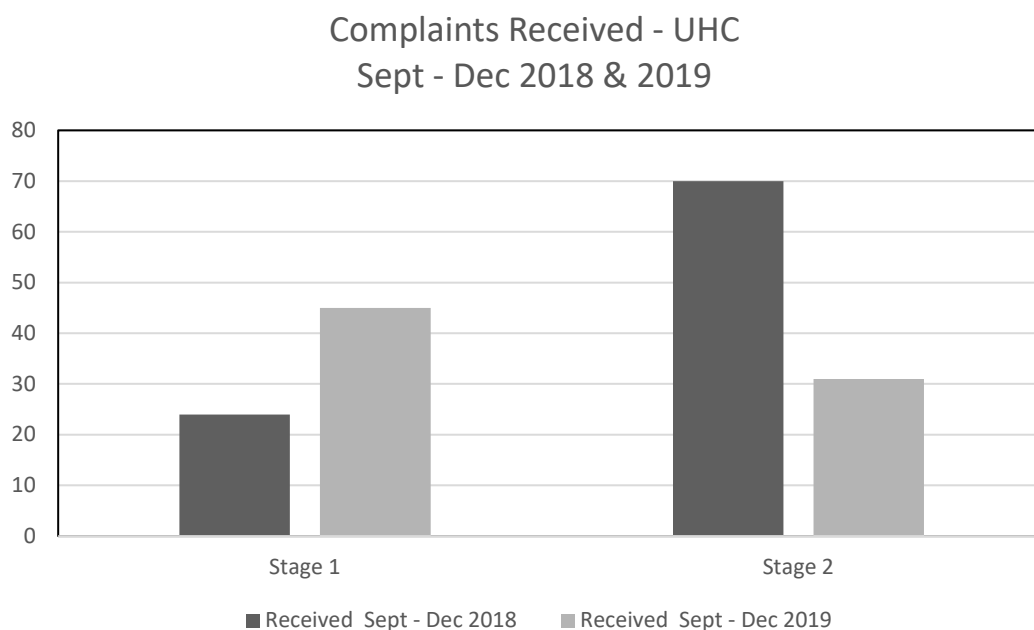
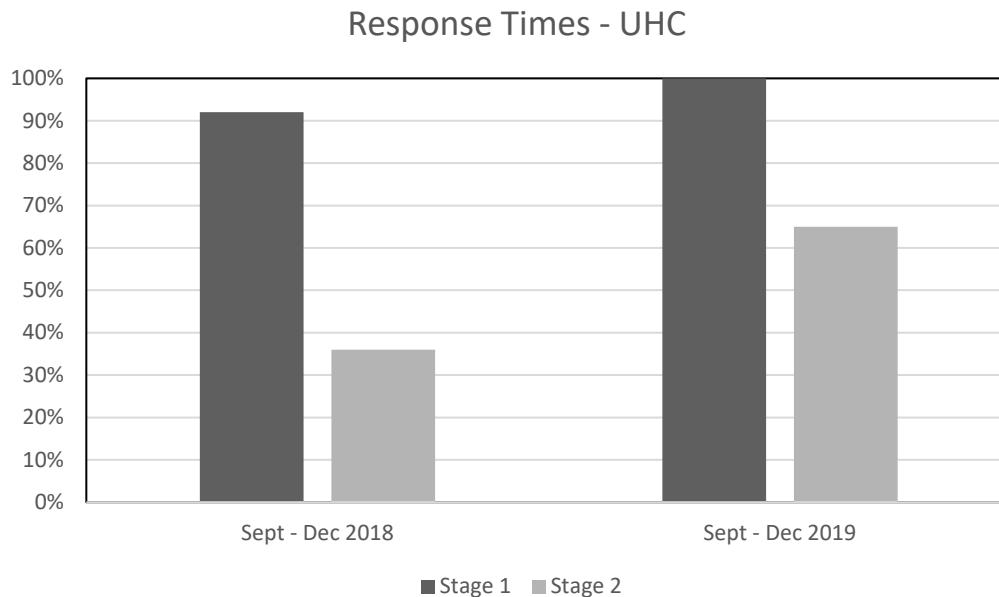


Chart 4f below shows response times and how the response times have improved since the implementation of the new system.

Chart 4f

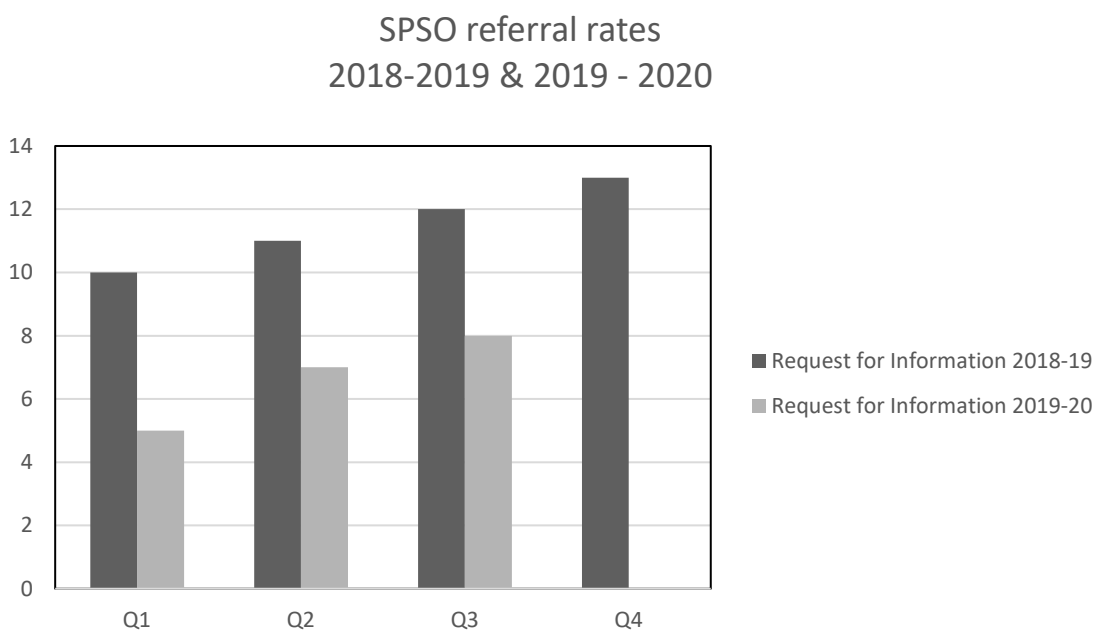


Feedback from complainants has been very positive and feedback from managers handling complaints has been especially positive. This new approach is proving to be very effective and person centred.

1.5 SPSO Referrals and Investigations

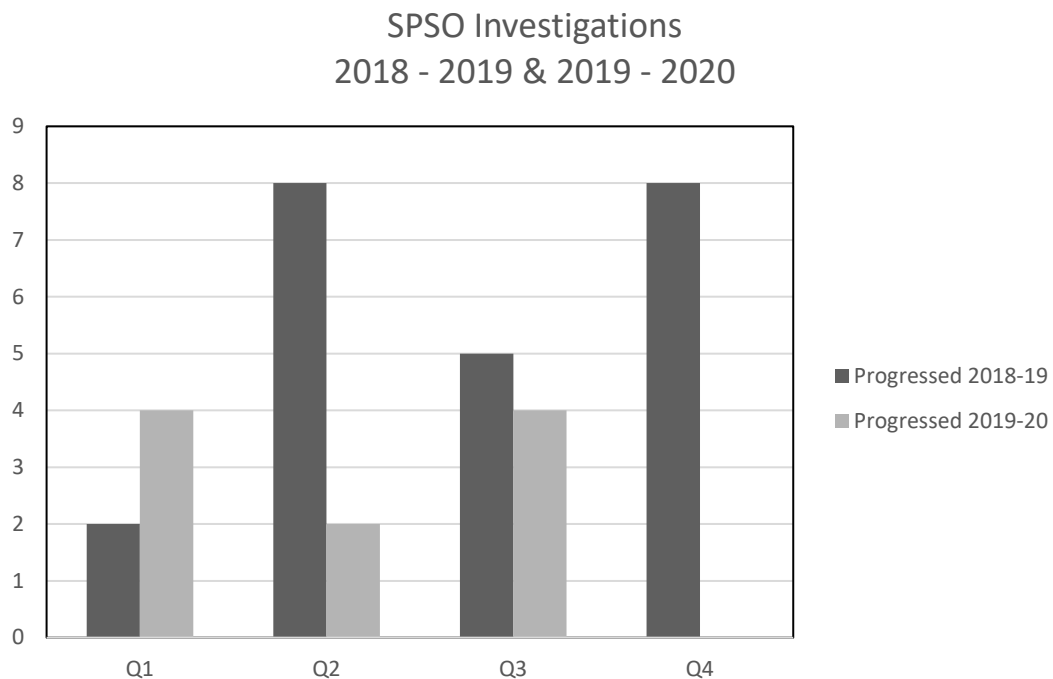
1.5.1 Current SPSO activity

Chart 5a – SPSO Referrals 2018-2019 & 2019-2020



As the table shows, SPSO referrals have decreased from Q3 last year, with the number of referrals in Q3 up slightly from the previous quarter. Again, we are confident that the improvement work on our complaint handling will impact on the number of complainants approaching the Ombudsman and expect to see this decrease every quarter. In **Chart 5b** below, we can see the number of referrals that proceeded to investigation

Chart 5b – SPSO Investigations 2018 – 2019 & 2019-2020



In Q3, Four SPSO cases have progressed to investigation and one case is still awaiting the decision.

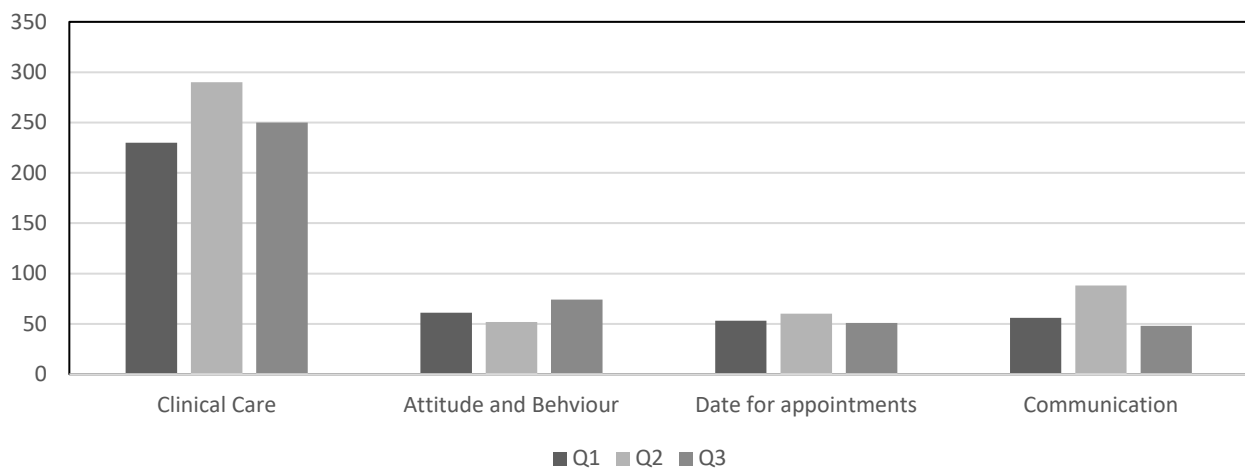
2. Complaint Themes and Approaches to Improvement

As introduced in Quarter 1, we are now able to capture more accurate themes and sub categories which are fundamental to progressing improvement.

Top four themes remain the same each quarter and are **Clinical Care, Attitude and Behaviour, Appointments and Communication**

Chart 6 – Categories and Sub categories.

Chart 7 Themes of complaints received Q1 - Q3



The above information is collected from all current recorded complaints.

The themes and sub themes will be used to prioritise improvement across the relevant services. The information provided here will be instrumental in evidencing consistent improvement across the organisation.

3. Feedback

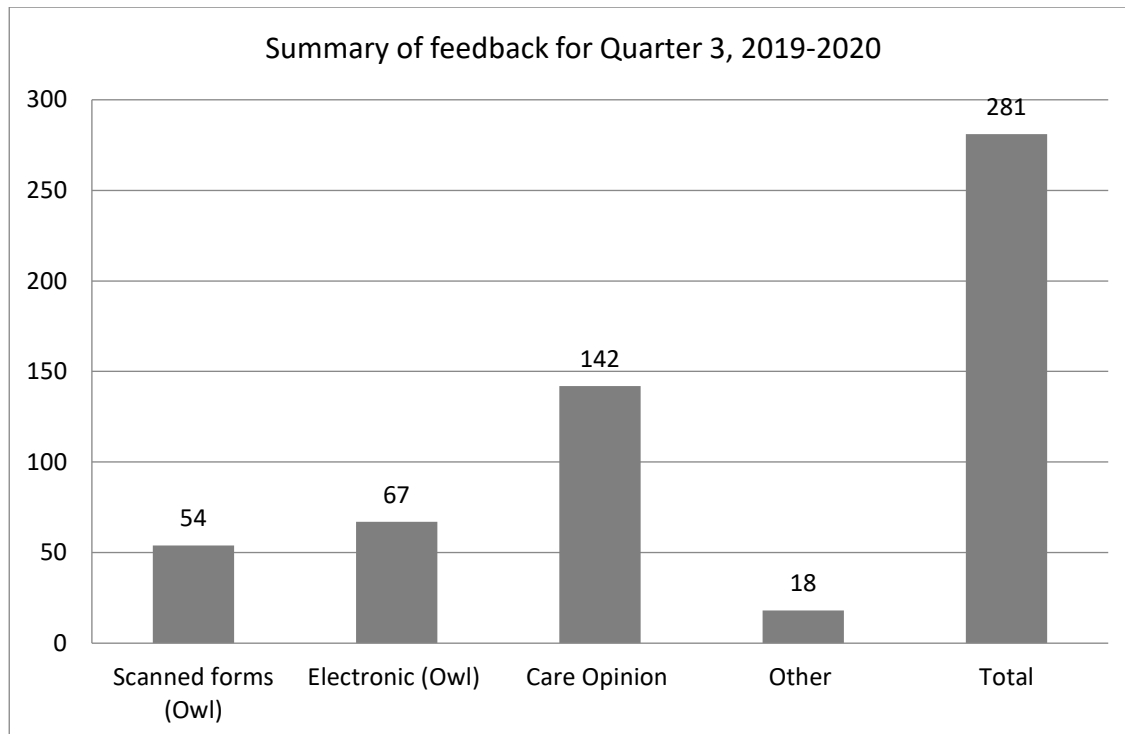
3.1 Local Feedback

We are now receiving regular feedback via a number of routes established with our “owl” branded approach.

Chart 7 below shows feedback received from all routes, including Care Opinion. A total of 281 feedback comments were received in Quarter 3 from a number of sources. However, Care Opinion with 142 stories remains the ‘more used’ platform for feedback, with NHS Ayrshire and Arran’s ‘Owl’ feedback process slightly less at 121.

A Care Opinion Awareness Week was held in December 2019 with staff attending stalls in University Hospital Crosshouse, University Hospital Ayr, East Ayrshire Community Hospital and Girvan Community Hospital. With the unique hashtag, ‘Turn up the volume on feedback’ many staff attended who shared ‘selfies’ and pledges on Social Media. Further role out and promotion of Care Opinion will continue over the coming months. Care Opinion not only provides an anonymous, safe space for the public to provide feedback, it is significantly more efficient in terms of cost and handling.

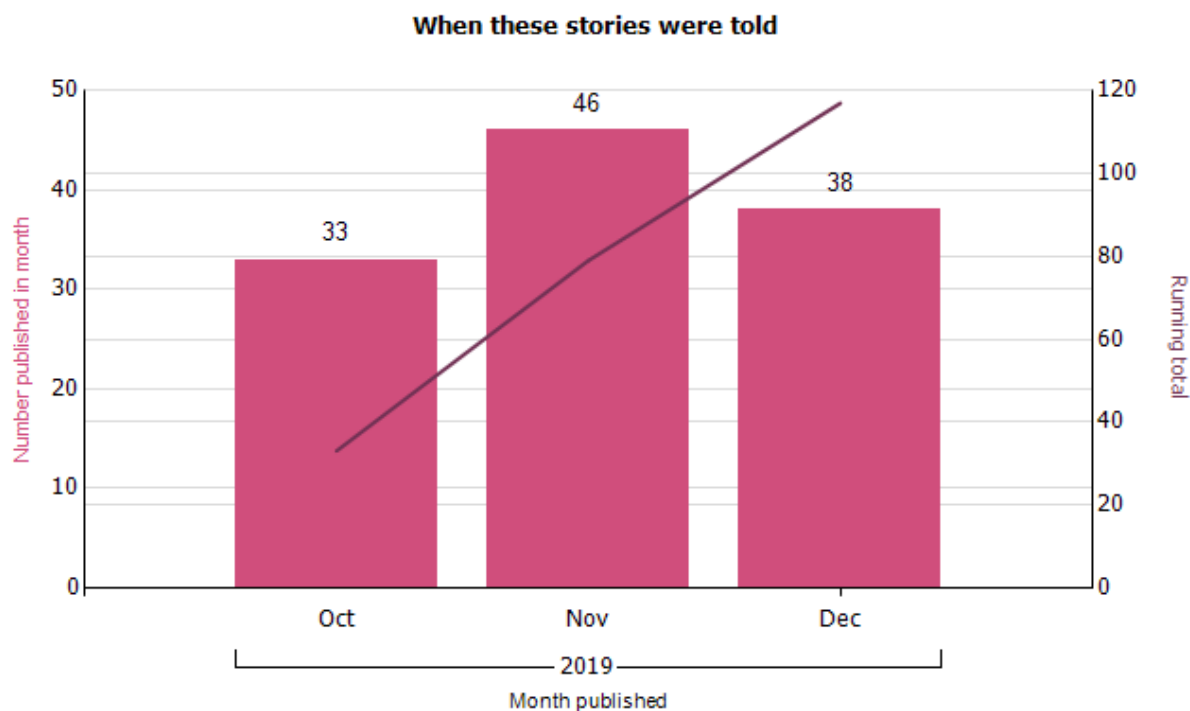
Chart 7



3.2 National Feedback

Chart 8 below shows numbers posted each month in Q3.

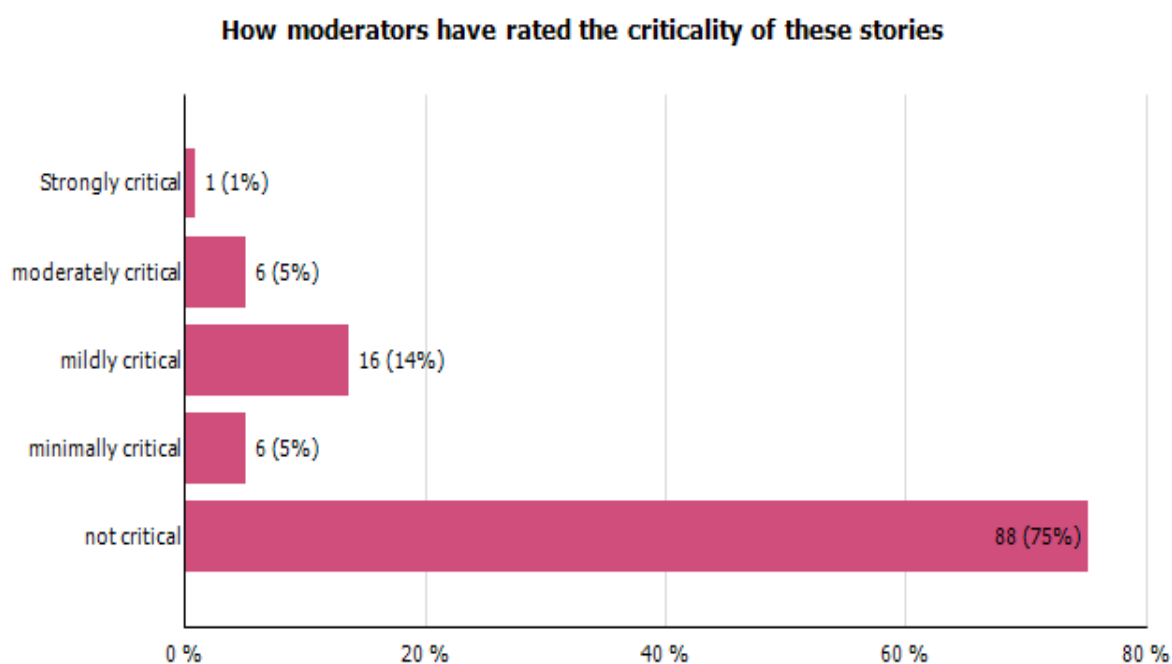
Chart 8 CO posts received in Q3, 2019-2020



117 stories were posted on CO this quarter, down very slightly from 148 in the previous Quarter.

Chart 9 below demonstrates a slight decrease in positive/minimally critical posts from 79% last quarter, to 75% in Q3. It is encouraging that 94% of Care Opinion stories are positive or minimally and mildly critical.

Chart 9 – Criticality of CO posts in Quarter 3



As the criticality rating is given to the Care Opinion story, on occasion, the criticality may be that of a service outwith NHS Ayrshire and Arran.

3.3 CO Responders

The Feedback Manager continues to support managers to respond directly to their posts. In general, this has been well received. All senior managers in the Surgical Services directorate in UHC and all senior Managers in UHA have been trained and are 'set up' to respond on Care Opinion.

At present, over 98 members of staff of all levels are able to respond to their CO posts and training and support continues. An update on staff numbers engaging with CO will be presented at a future Healthcare Governance meeting.

4. Conclusion

There is still further improvements required in our complaints handling processes and in particular our response rates to stage 2 complaints. With the improvement work currently being tested continuing to provide encouraging results, this will now be progressed in University Hospital Ayr.