

# **Complaints and Feedback Annual Report 2013/14**

## **Background/Introduction**

There is a requirement for NHS Boards to produce an annual report on the use of feedback, comments, concerns and complaints, which stems from The Patient Rights (Feedback, Comments, Concerns and Complaints) (Scotland) Directions 2012 and the 'Can I help you?' guidance (national guidance around the handling of complaints and feedback).

Across NHS Fife, a range of local policies and procedures support the national context and provide clear direction and guidance for staff.

In 2012 the National Person Health and Care Programme was launched with a clear aim to make demonstrable improvements in patient experience by 2015. The programme also connects the experience of staff and partners, promoting a collaborative way of working to bring about sustainable improvements.

During 2013/14 we have taken the opportunity to position our complaints and feedback work under the portfolio of "person centred" care, recognising people at the heart of all we do.

This is NHS Fife's second annual report covering the time period 1 April 2013 – 31 March 2014.

## **Repeating our commitment in year 2**

NHS Fife remains committed to growing and developing a person centred culture where we "*do with*" patients, carers, staff and partners, rather than "*do to*". To achieve that goal there is a need to be clear about the values of the organisation, one of which is listening to experiences of the service, whether that is from patients, carers, staff or partners. In Fife we recognise that to get it right we need to involve the right people, in the right place, at the right time and our ongoing commitment is to promote an approach which supports this in our day to day work.

For the purpose of the report, Information will be provided under the following sections:

Section 1 - Encouraging and Gathering Feedback

Section 2 – Encouraging and Handling Complaints

Section 3 - The culture, including staff training and development

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

Section 5 - Accountability and Governance

Section 6 – Plans for the year ahead

## **Section 1 - Encouraging and Gathering Feedback**

In Fife our policy clearly states that as an Organisation our intent is to welcome and encourage feedback. We are committed to working with staff to promote this message and to encourage local ownership of this. We do have a dedicated Patient Relations team who have a role in driving the person centred portfolio and in supporting all aspects of feedback and complaints. The team act as a point of contact for the public and for staff across NHS Fife.

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. PASS work independently of NHS Fife; however the work of PASS is promoted on our hospital sites as well as in the community and on our website and in correspondence. A recent development during 2013/14 has been the introduction of a Carer and Patient Information point in our Acute Hospital setting. PASS team members now host regular sessions and display promotional materials and are on site to support individuals to provide feedback or make a complaint. During 2014/15 we will evaluate the success of this work.

There is a single system for recording all complaints, concerns, comments and compliments and this is currently centrally co ordinated. It is recognised that in the future there will be a need for teams to locally input data relating to feedback and consideration is being given to how this is best achieved.

We want to hear from people who are using services in Fife and for that reason we seek feedback in a number of different ways, recognising that one size does not fit all. We welcome feedback in writing, by email, by telephone, text, web, social media, face to face as well as pro actively seeking feedback via questionnaires/surveys and focus groups. Information for the public is available on NHS Fife's website and there are also posters and banners encouraging people to give feedback. Our complaints and feedback policy in Fife also makes it clear to staff that we as an organisation welcome feedback.

In Fife we are encouraging people to provide comments and feedback at the point of contact with the service, recognising the value of involving the right people in the process. The "*You Said We Did*" Boards have been embraced by staff in a number of wards/departments and give a visual indicator that feedback is not only welcomed but is considered and responded to. Here is just one example from our Admissions Unit which demonstrates the approach being taken.

## Patient and Relative Stories

Admissions Unit 1 is currently gathering patient and relative stories as part of the caring behaviours assurance system.

Patient stories involves collecting stories from patients' personal experiences to understand how they perceived the health care they have received from us. Patients are encouraged to talk about what they felt/saw/heard, the emotions that were evoked and how this may have affected their decisions and actions during their healthcare journey.

If you have any questions/queries regarding this project please contact SCN Gillian Kirkpatrick, SCN Siobhan McIlroy or NA Alister Stewart.

### Information Sheet and Consent Form

#### Patient and Relative Stories (using emotional touch points)

Please take time to read the information carefully and ask any questions.

#### What are 'Patient Stories'?

Person centredness, compassion and collaboration are key elements of the Healthcare Quality Strategy for NHS Scotland (2016). The insights provided by collecting patient stories are an important component in understanding how we can improve the quality of the services we provide to the people of Scotland.

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#### How can 'Patient Stories' be used?

Patient stories involve looking at different ways to organise healthcare provision around the needs and preferences of patients, rather than around the preferences of the service. Stories can be used:

- To examine aspects of a patient journey
- To understand the subtle patient experiences and assist staff through education and reflection
- To gain insight into the impact of a quality improvement activity or service redesign, and whether improvements have been sustained over time.

This will result will be to ultimately enhance the patient experience by improving the delivery, quality and flow of care across key areas of healthcare provision in NHS For.

#### What are Patient and Relative Stories about?

You have been invited to take part in patient or relative stories because NHS For staff are keen to hear from patients, relatives and others about what aspects of care they value and what aspects of care we could improve.

#### What would I have to do?

Think about key times in your hospital experience that you would like to share with us. This might be coming into hospital, going for tests, medications, or visiting times. We would like to know how you felt about your experience and will ask questions about this, so information can be obtained about your experience of care.

Admissions Unit 1 is currently gathering patient and relative stories as part of the caring behaviours assurance system.

Our findings from week 3 of the project can be summarised as follows:

#### What you said:

*They've all been really good: the nurses and the girls who've come in and given me the tea.*

*The room's very nice but very cold. The door's been open all the time and the heat has been going out the door. If you are wanting to keep the heat in the room the nurses should shut the door.*

*I haven't had anything to do, I've read my magazine but there's no entertainment there's no telly. The nurse come in to tell me there's a television in the other room but it was too late... The program I wanted to see was finished by that time. If I was told earlier, at the time I wanted to see it, I would have gone to watch it.*

*The treatment was really good. Everything happened really quickly. I was given everything I needed. They [the doctors/nurses] were all very thorough.*

#### What we did:

- This positive comment regarding how helpful the nursing staff have been has been shared with the AU1 nursing team.

- All rooms in AU1 are fitted with a thermostat. We will ensure that staff check the thermostat following any concerns over the temperature in any of our rooms. Staff have also been reminded that doors to siderooms can't should be closed in certain circumstances and that the patient should be kept informed of the reasons why the door can't be closed.

- Two daily newspapers are purchased for AU1, at our cost, and kept by our housekeeper; these can be provided to any patient on request.
- We will ensure information is in our ward leaflet with regards to the small television room in AU1.

- We will share these positive comments with the ward team.

#### What you said:

*It's been fine in the ward, it's obviously noisy because it's somewhere that everyone's coming in to.*

*They [my family] have been fine with the visiting times. Obviously my mum's been here a lot more. They [the ward staff] have allowed her to be here [outside visiting hours], she was worried.*

*It's been nice, there's always been members of staff in and out anyway, checking on how I am and doing my blood pressure and things anyway. I've met a lot of new people, it's been good. Everybody has been so nice.*

*When I got here I was put in this room.*

*I have been impressed by the way I have been treated. I didn't expect it as this isn't a ward where you are necessary going to have the same staff so I'm impressed with the service I have had.*

#### What we did:

- We have purchased earplugs to aid a restful sleep within this busy environment. Staff have been reminded to offer these to patients who are having difficulty in sleeping.

- This positive comment has been shared with the AU1 Multidisciplinary Team.

- This positive comment regarding how helpful and friendly the staff have been has been shared with the AU1 Multidisciplinary Team.

- We have commenced work to develop a unit orientation leaflet to ensure patients and carers are aware of what to expect of the patient journey while in Admissions Unit One. Staff have been reminded to explain the admission process in more detail while the leaflet is still being developed.

- This positive comment regarding the continuity of care that we provide, despite being a very large and busy unit, has been shared with the AU1 Multidisciplinary Team.

Positive feedback is not always recognised and yet at ward/department/unit level, positive feedback by far outweighs the negative. For that reason in Fife we have opted to count the compliments we receive, as we believe it is important to share positive feedback received and recognise its worth. Our counting of compliments is currently restricted to those being reported via our Patient Relations team; however in 2014/15 we hope to encourage all areas to focus on counting their compliments and sharing this information. During 2013/14 we reported on having received **756** compliments.

In our Acute Hospital in Fife comment cards are available, which provide a further opportunity for people to comment on services. Cards are collected and collated by the Patient Relations Team who liaise with the appropriate departments to ensure that all comments are directly responded to. There has been little in the way of promotion around this feedback method and hence the small return of **28** comments in the year 2013/14. What we also know is that a number of services collect their own comments but do not formally record the information. This is an area to be developed during 2014/15. This method of feedback enables teams to deal with issues at the point of contact and to develop their responding abilities. It reinforces the importance of the services taking responsibility for any comments received. There are numerous examples of changes made as a result of comments which in general highlight issues relating to estates and facilities. Improved signage, additional privacy screening and the introduction of monitoring systems for cleanliness of toilets are just three examples of comments that have resulted in change.

Often people tell us that they want to raise a concern rather than make a complaint and as such we encourage people to tell us about any concerns. We use posters to encourage patients/carers to tell us rather than tell others where they have a concern. We direct individuals to the point of contact in the first instance to provide an opportunity for local resolve and we offer support through the process. Our approach in Fife is to seek first to listen to any concern and to encourage early face to face contact to address concerns. During 2013/14 we received a total of **792** concerns.

During 2013/14 the results of the Scottish Maternity Care Survey for NHS Fife were received. This survey replaced the In Patient Survey (formerly known as Better Together) for the year 2013, with the In Patient Survey being repeated in 2014

The survey was sent in May 2013 to 351 women who gave birth in NHS Fife in February or March 2013. The survey asked questions relating to antenatal care, care during labour and birth, postnatal care in hospital, feeding of baby and care at home after the birth.

In total 151 women returned feedback on their experiences of care, a response rate of 43%. Of those women willing to provide information about themselves: 18% were under 25 years old; 59% were aged 25-34; 23% were aged 35 or over. Moreover 42% were first time mothers.

The following shows the overall high level results of overall satisfaction with elements of the service: (full report available at <http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/maternitysurvey>)

Antenatal Care 91%  
Labour and Birth 95%  
Care after birth 89%  
Care at home 92%

The survey results have been shared with the Maternity Service and have been viewed as useful high level information. An action plan has since been developed by the Service which identifies areas for improvement.

At a more local level the Maternity Staff have been working with women to seek feedback and the following poster details the approach that has been taken to do so.

# Listening to Women

Pamela Galloway, Anne Mackinnon, Donna Robertson, Hazel Sinclair

## Aim of Project

Implement a system that will seek out and use women's feedback to continually make service improvement within Antenatal Clinics and Maternity Assessment in NHS Fife by March 2014

## Primary Drivers

- Develop system(s) to gather feedback from women at the point of care "real time"
- Develop system(s) for providing feedback and measuring improvements as a result of feedback
- Engage with women and families in developing the systems
- Engage staff in developing the systems

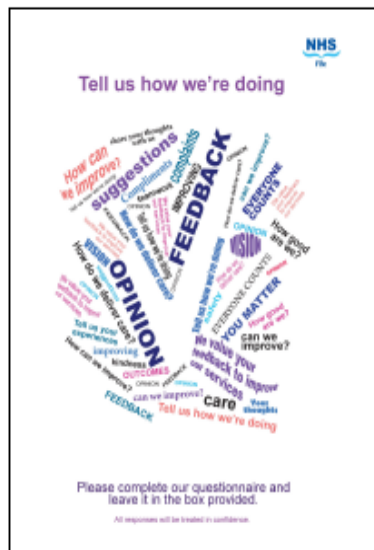
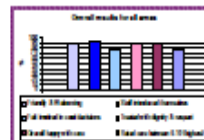
## Secondary Drivers

- Set up processes so that staff can have a way of capturing feedback "real time"
- Use women's stories to gather feedback
- Ask women what questions we should be asking – what is important to you?
- Ask staff to identify what they feel are important questions to ensure good feedback
- Feedback and act on findings

## Project Actions/Processes

- Developed a questionnaire
- Asked women "what is important to you"
- Conducted the survey using electronic devices in four areas
- Launched "Tell us how we are doing" posters
- Obtained qualitative feedback using comment card and drop boxes
- Enlisted women to keep diaries to record their experiences
- Engaged staff – focus group meeting
- Provided timely feedback

## Feedback Results



## Results/Evaluation

- Obtained feedback from 294 women
- Learned from the test areas and will use this going forward
- Recognised that there needs to offer a variety of options in order to actively engage women in seeking feedback
- Need also to support staff to recognise that self evaluation is important
- Women who kept the diaries valued that their opinions were being sought
- Using the electronic device was well accepted and provided a quick way of obtaining quantitative feedback
- Measuring improvement as a result of feedback has been difficult to demonstrate during this time frame
- Staff welcomed the positive feedback from women
- This model could be adopted for capturing feedback from women throughout all stages of the pregnancy journey

During 2013/14 a further survey of GP practices and other local NHS Services was undertaken. The survey is the successor to the 2011/12 Patient Experience Survey of GP practices and other local NHS services. The survey asked about people's experiences of their GP practice and out-of-hours services, and their outcomes from NHS treatments. This year the survey was widened to include other areas of care and help provided by local authorities and other organisations to support the national outcomes for health and wellbeing proposed under The Public Bodies (Joint Working) (Scotland) Bill. It also included questions aimed specifically at carers about their experiences of caring and support. The results of the Scottish Health and Care Experience 2013/14 will be reported on when available.

### **Exciting Developments during 2013/14**

During 2013/14 Fife have been working closely with Patient Opinion (independent social media site developed to give people a way of sharing their healthcare experiences) to explore the possibilities of engaging people in providing feedback via social media. Having established how the system works we have now developed an implementation plan which will see Patient Opinion actively promoted during 2014/15. The plan includes a formal launch, publicity materials, internal and external communications and the use of twitter to promote an alternative way for people to give us feedback. Using Patient Opinion has highlighted the importance of giving people a voice.

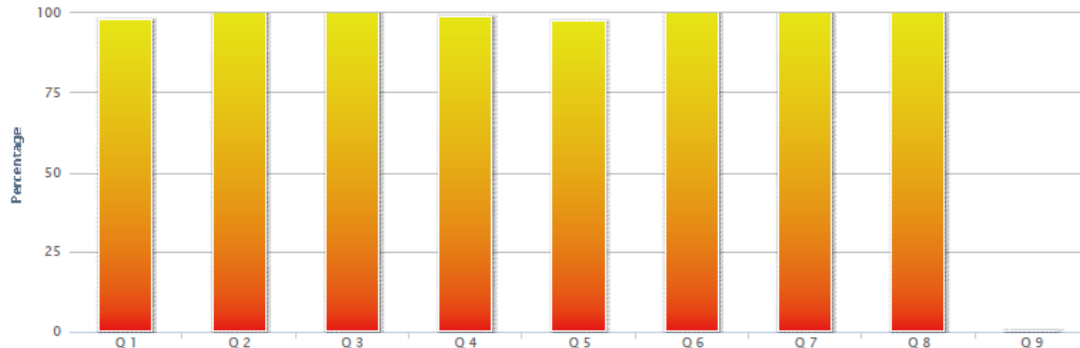
#### **Feedback Example**

A gentleman told us about a painful procedure he had experienced and shared his fear of a future procedure. Through dialogue on Patient Opinion we made it clear that we wanted to listen and suggested a meeting with the Senior Charge Nurse. As a result of that meeting the gentleman felt reassured about the future procedure as the Senior Charge Nurse was able to document the experience in his notes and detail a plan for the future procedure. During 2014/15 our reporting in Fife will also include Patient Opinion feedback.

During 2013/14 Fife have been working closely with the national team from the person centred collaborative and have developed the "Your Care Experience" tool. The tool is a questionnaire which asks service users about their healthcare experience. The plan is to capture this information on a quarterly basis and report the findings, thus enabling the local teams to develop specific actions where required and thereafter monitor improvement. During 2013/14 we worked with colleagues in our ehealth team to develop an app which will enable us to connect patient experience to other quality and safety data. The following graph shows the results that are made available to the local teams who then identify an improvement plan prior to re testing. Over time the data will be produced as a run chart to demonstrate improvement.

## Fife FFA004

Result from Group Fife for Questionnaire Ophthalmology Care Experience 004  
Percentage of respondents picking 1st or 2nd choice  
2014-02-10 - 2014-03-10



1. During my stay on the ward my care and treatment was provided as and when I expected
2. The staff providing my care understood what mattered to me
3. All staff involved in my care were fully aware of my needs during my stay in hospital
4. I felt I was able to be involved in decisions about my care
5. The staff involved the people who mattered to me
6. I had the information I needed to make decisions about my care and treatment
7. I felt that the staff took account of my opinions
8. Please rate your overall experience during your stay
9. Do you have any other comments or suggestions for improvement?

During 2013/14 when positioning the complaints and feedback work it was considered important to sight the Board on the importance of patient and staff experience. The Board demonstrated their commitment to the person centred portfolio by agreeing in October 2013 to hear directly from patients and staff at future Board meetings. Since December 2014 the Board have heard from four patients/ carers directly and from four staff members about their healthcare experiences, good and bad. Two of the cases featured originated in complaints, demonstrating the importance of developing relationships in the face of adversity. If people who have received a poor service are able to see real commitment to listening and learning and receive an appropriate form of feedback then they can work as partners to bring about improvement.

### Story Example

Ella shared her experience of her father falling in hospital and sustaining a serious injury. She talked about the process of raising a complaint and working with staff through a process to bring about change and improved outcomes for future patients.

Maureen shared her experience as the Directorate Nurse Manager who was involved in dealing with the complaint and talked about how it felt in this situation. She detailed the way in which she established a relationship with Ella to enable them to work together to achieve a meaningful response.

The early learning from this process has largely been about the importance of the relationships between patients/carers and staff members and the power of bringing



them together, recognising that at the heart of each is a desire for safe, effective and person centred care.

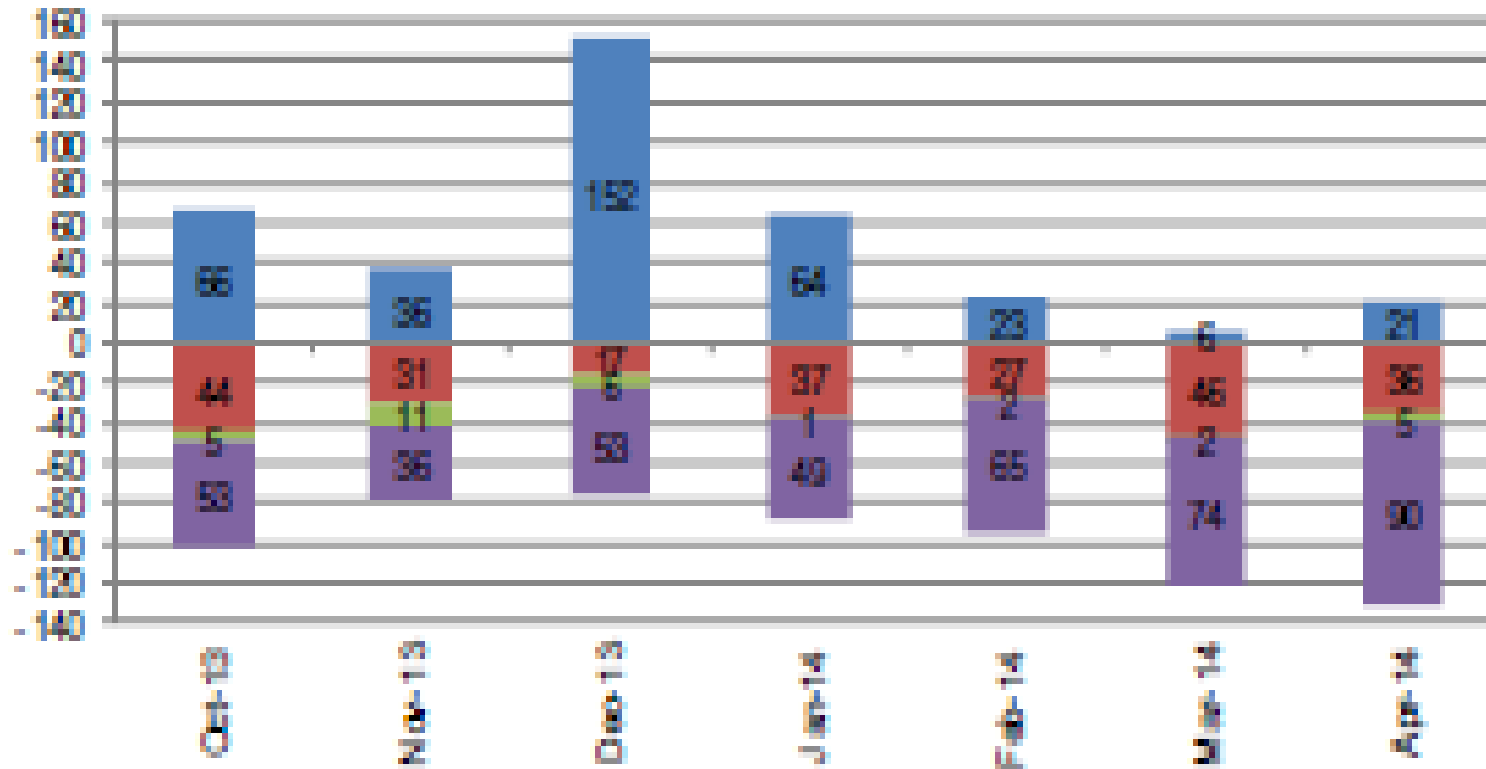
Ella and Maureen went on to present at the national Significant Adverse Events conference in 2014 where they clearly detailed the importance of engagement during a complaints process. The plan is to evaluate the stories approach during 2014 to determine the impact.

During 2013/14 Fife adopted an approach to engage with specific groups through an Equalities Participation Network. This provides direct access to groups to enable discussion about health issues that matter to them. The following are just a few examples of meetings held to date; the local mosque, chinese community, polish community and the deaf community. There is a plan to utilise this approach with further sessions planned into 2014.

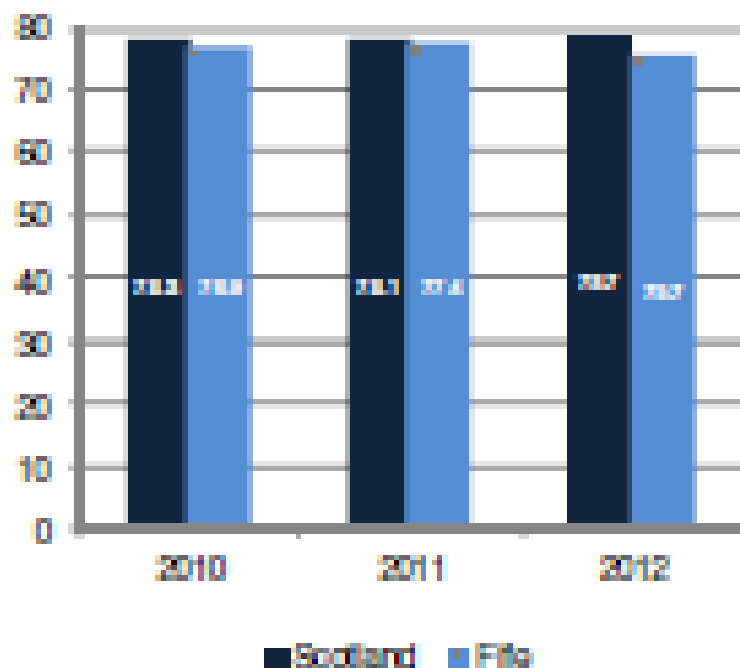
During 2013/14 we formally started to report on what we are calling the four C's in Fife; compliments, comments, concerns and complaints and are moving towards a single approach to reporting across the Board area. A regular "Healthcheck" agenda item now features at the Board which includes safe, effective and person centred data. This information is prioritised at the start of the Board meeting with a dedicated 30 minute slot which sets the tone for the remainder of the Board meeting. The following screenshots demonstrate the consistent reporting which seeks to bring together the range of feedback mechanisms, rather than a simple focus on complaints.

### Complaints, Concerns, Comments, Compliments

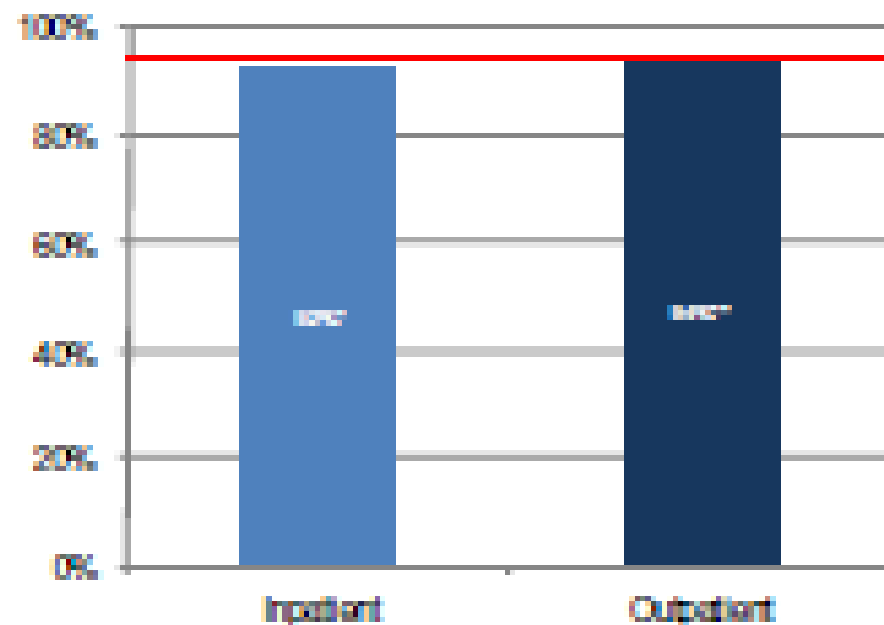
Compliments    Complaints    Comments    Concerns



**Better Together  
Healthcare Experience Indicator**



**Overall experience of patients during their stay/visit to hospital  
(percentage of respondents who answered in a positive way)**



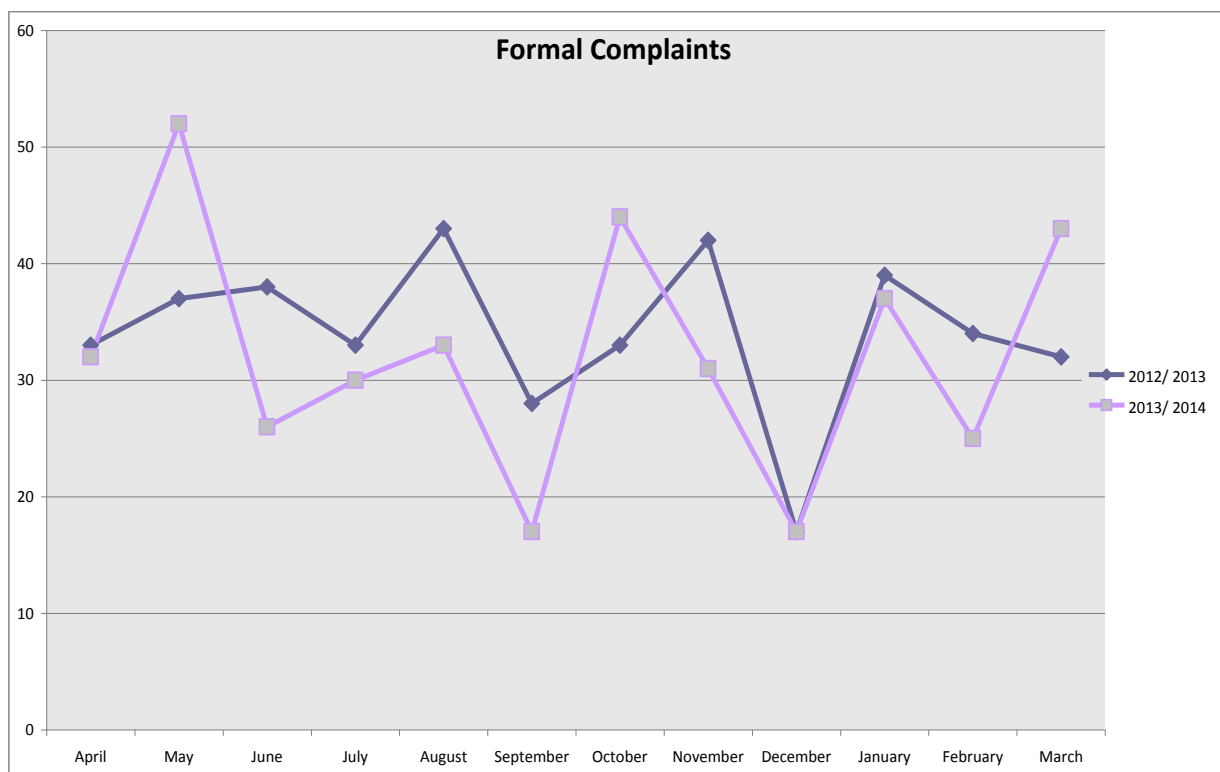
data from your care experience survey  
 \*inpatient data are from 2 years - collected in November 2010, February 2011 & May 2012 (n=105)  
 \*\*outpatient data are from 1 outpatient visit - collected May 2012 (n=10)

## Section 2 - Encouraging and Handling Complaints

We value complaints alongside all of the other forms of feedback and actively welcome and encourage service users and the public to let us know when we don't get things right in order that we can make improvements and maintain the quality and safety of our services.

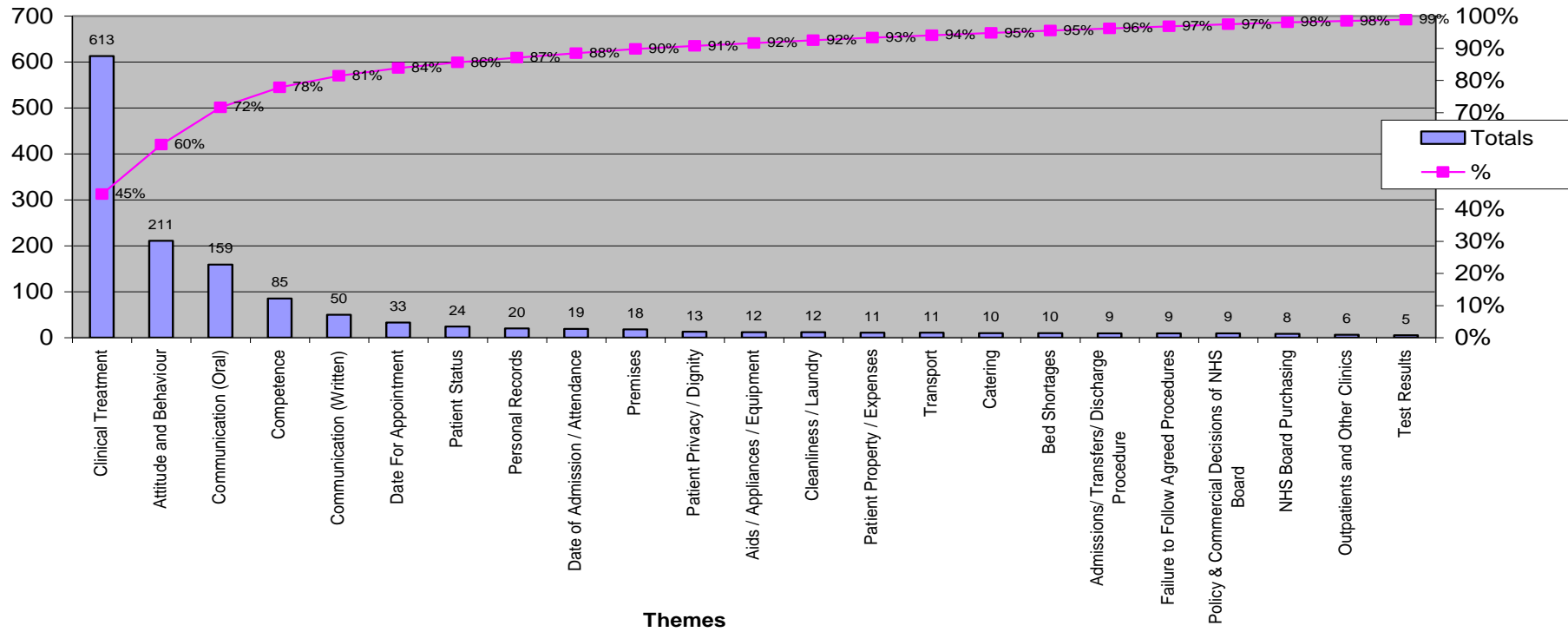
Number of complaints	Number where alternative dispute resolution used	Number responded to within 20 days
<b>387</b>	<b>0 (advice sought re alternative dispute resolution; however local mechanisms supported resolution)</b>	<b>51.7%</b>

This graph demonstrates the number of complains received on a monthly basis in 2013/14 and compared to 2012/13



The key themes emerging from complaints remain unchanged with clinical treatment, staff attitude and behaviour and communication the most common themes identified.

### NHS Fife Complaints by Category



NHS Board

<u>Type of Independent Contractor</u>	<u>GP</u>	<u>Dentist</u>	<u>Pharmacist</u>	<u>Optician</u>	<u>Admin'</u>	<u>Main Complaints Issues</u> (please continue on separate page if necessary)	<u>Number</u>
No. of Complaints received <sup>1</sup>	271	13	86	0	0	Access (GP)	26
Total number of Contractors	240	180	85	123	0	Attitude of Clinician (GP)	20
No. of of Contractors replying	240	480	85	123	0	Receptionists (GP)	9
No. of Complaints Acknowledged within 3 days <sup>2</sup>	271	13	86	0	0	Admissions/Referrals (GP)	11
No. of Complaints Responded to within 20 working days <sup>3</sup>	268	13	72	0	0	Accuracy of Dispensing (Pharmacist)	49
No. of Complaints Responded outwith 20 days <sup>3</sup>	3	0	14	0	0	Out of Stock Medicines (Pharmacist)	9
Median wait to respond (days) <sup>4</sup>	-	-	-	-	-		
No. of Complaints Still Open <sup>5</sup>	0	0	0	0	0		
Complaints Upheld	271	13	86	0	0	<u>Resulting Actions (please summarise)</u>	
Complaints Partially Upheld	0	0	0	0	0	1. Review of accessrequirement requirement of QOF in 14/15	
Complaints Not Upheld	0	0	0	0	0	2. To be discussed at next Appraisal	
Complaints Withdrawn	0	0	0	0	0	3. Ongoing staff training	
Number where Alternative Dispute Resolution Used	4	4	4	0	0	4. Reviewed as partd of Appraisal	
Other Outcome <sup>5</sup>	0	0	0	0	0	5. Ongoing staff training	
						6. National problem outwith local control	

In Fife we promote a person centred approach to complaint handling and fundamentally believe that engagement is key from the outset. For that reason we invest time to speak to people. On receipt of a complaint, the Patient Relations member of staff makes contact with the individual making the complaint to discuss and define the complaint and to offer a meeting with staff if appropriate. This approach enables us to determine what matters most to the individual and to tailor the way in which the complaint is handled. Direct contact also provides an opportunity to establish a relationship and to be clear about the complaints process.

NHS Fife's policy clearly states the role of early resolution in complaint handling and the importance of ownership in complaint handling. This is promoted as an approach in a range of training sessions provided by the Patient Relations Team who also provide support to staff where required.

The Board aims to respond to complaints within 20 working days. When a complaint is complex, we are open and honest about the challenges of meeting the 20 day response time standard and discuss the Board's desire to provide a quality response. There is a commitment to ensure people are kept informed of the progress of their complaint in writing and by telephone where appropriate. Complaint response times feature in a monthly performance management report.

A satisfaction questionnaire is sent with all NHS Fife's final responses; however there is currently no formal measurement of the feedback received. On initial contact with the person making the complaint, the Patient Relations Officer now asks "What matters to you?" in terms of what is expected as an outcome of the complaints process. Future plans are to review the questionnaire and to formally measure the "What matter's to you? question to compare the initial expectation with the outcome of the complaint.

Demonstrating the learning resulting from complaints remains a challenge. Complaint numbers and themes are featured on our Directorate and Clinical Governance Committee reports; however the learning is not always evident or consistent in all complaints. The development of Directorate reports during 2013/14 has brought complaints and feedback on to the dashboard to be considered alongside other relevant data. This provides a further mechanism to ensure that complaints are discussed and owned locally.

There is a mechanism for sharing the learning from cases which have progressed to the Ombudsman and in Fife we distribute the Ombudsman's monthly findings to a wide distribution. There are also examples of cases from complaints featuring on local morbidity and mortality meetings and used more widely in staff training sessions.

In Acute Services a recent development has seen the introduction of an overview process from the Associate Medical Director for all clinical complaints to ensure that clear actions are identified from these complaints.

NHS Fife has a Reducing Harm Action Plan which incorporates actions from a number of sources, including complaints and Ombudsman cases, Significant Adverse Events, mortality and morbidity reviews. There is a Quality and Safety Governance Group which has responsibility for reviewing the Reducing Harm Action Plan to ensure that all identified actions are complete. Section 3 of this report also highlights the relationship between complaints and Significant Adverse Events

In Fife there is an identified Primary Care Lead who acts in a liaison role with all independent contractors. During 2013/14 Patient Relations took the opportunity to meet with Fife's Practice Managers to talk about Complaints and feedback. There is a plan to discuss how a similar approach can be used across other independent practitioners.

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

During 2013/14 the Board has taken time to consider, with its stakeholders, its vision, mission, values and aspirations, and in doing so has clearly outlined a commitment to the person centred portfolio, this will be known as the Board's clinical strategy. The strategy details specific objectives which have all been set within a quality improvement framework. This message from the Board brings clarity around the standards expected across NHS Fife.

The report has already made reference to the fact that local Fife policies support the development of a culture to actively encourage feedback and complaints and this supports the ethos as described above.

In Fife the Patient Relations Team play an important role in promoting a positive culture by working with staff to raising awareness, to encourage open and honest responses, to role model appropriate attitudes and behaviours and to challenge practice against set standards. The team are also actively involved in delivering a range of training across professions which includes the elearning modules developed by the Ombudsman's Office and NES during 2012/2013.

Leadership, commitment and general interest from the Board has helped in terms of giving staff a clear message around standards and expectations. There is strong leadership support and buy in from senior clinical as well as managerial staff in Fife which has been helpful. The Board's Chief Executive, Chairman, Director of Nursing and appropriate Non Executives all undertook the complaints masterclass during 2013. This training will feature as part of the induction for newly appointed non executives in the 2014/15 period.

It is recognised that staff will at times struggle to be open to feedback; however the Board's commitment is to supporting staff to be open and honest and to help them gain the necessary skills to enable them to be confident when dealing with feedback and complaints. Equally there is recognition for the Board of the need to support patients and carers when giving feedback or making a complaint. Again having a



dedicated team who adopt a direct approach and early conversation has proved helpful in building positive relationships. This approach requires an investment of time but yields the benefits.

Another helpful lever has been connecting the work around feedback and complaints to the Significant Adverse Event Review process. Developing Fife's policy around this has provided a timely opportunity to promote the importance of open and honest communication and early involvement of patients and carers in the process. Patient Relations Staff are actively involved in the SAER process as identified family contacts and in doing so are able to support staff in the process of engagement which is often seen as challenging.

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

Some examples of actions taken by the Board to improve services as a result of complaints include:

The 'Management of women with a suspected Deep Venous Thrombosis (DVT) or Pulmonary Embolus (PE) in pregnancy' protocol has been updated to include the use of anti embolic stockings. All women undergoing a caesarean section are now to receive these after delivery.

The SSKIN Bundle, PURA (Pressure Ulcer Risk Assessment), specifically for Maternity Services, has been introduced in high risk areas in the Women and Children's Directorate and used for all women at risk of developing pressure ulcers.

An audit of Observations of Care and Protected Mealtimes' was undertaken by Dietetic Staff and Nutritional Support Nurse. Dieticians have met with individual wards and individual action plans have been put in place for all areas. Ongoing audits will take place as required but at least on a yearly basis.

NHS Fife is currently reviewing the current inpatient falls screening tools and falls bundles. The Scottish Patient Safety Programme (Falls), was launched late last year. In December last year guidance around the implementation of evidence based bundles of care was published. This guidance has informed the inpatient work in NHS Fife. Initial scoping, development of documentation, testing of this along with the introduction of interventions that will support those patients at risk of falling, have all begun. The NHS Fife Falls Group continues to take forward work in relation to Falls. This work is currently being aligned to work around 'Frailty' and to the development of new documentation.

A written handover sheet has been developed to be used on transfer from the Emergency Department to other ward areas to ensure that all vital information is documented and passed on appropriately.

As a result of a complaint and following a recent change in post operative management of ankle fractures, patients will now be provided with information regarding their post-operative care in writing as well as verbally.

A number of improvements have been made as a direct result of feedback, comments and concerns some of which are referenced in Section 1. Other improvements include the introduction of smoking monitors at the hospital entrances, an increase in the number of disabled car parking spaces and the availability of healthy food options in the hospital setting.

Learning from complaints is built in to the processes and training about complaint handling. In Fife a template is utilised to prompt staff to think about actions and learning arising from complaints. Fife's Reducing Harm Action Plan is the mechanism to ensure that actions are completed and that learning is shared. During 2014/15 this work will be developed to cover the Community Health Partnerships as well. The Quality and Safety Governance Group brings together a range of composite data and allows key issues/themes to be identified. A regular newsletter is produced which focuses on key learning to share across the Board. The shift towards a more integrated approach has been useful in terms of strengthening the case for prioritising improvement work. This work is also linked to the Board stories as mentioned in section 1. The data is used to drive the stories at the Board which ensures that Board members hear directly from patients and staff about the issues of real significance. During 2013/14 the Board heard stories relating to falls, failure to rescue, dementia and learning disability.

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

The report has already provided some examples of the types of reporting available across the Board and reflected a commitment to the development of consistent reporting.

During 2013/14, across Fife there was local level reporting of complaints and feedback at Clinical Governance Committees across the Acute Division and across the three Community Health Partnership Areas. In the main this focussed on complaints information.

During 2013 reporting has been developed to move away from looking at complaints in isolation, to a system which incorporates a range of data; the earlier screenshots provide examples of this. The value of looking at composite data is proving to be a powerful means of identifying the key risks to the Board and enabling focussed discussions around priorities around improvement work.

In addition to local reporting a Fife wide report of complaints and feedback has been presented to both the Clinical Governance and the Patient Focus Public Involvement Standing Committees of the Board. All of these reports are also available to members of the public. Each Committee has a clear role in assuring the Board that complaints and feedback are being addressed appropriately. During 2013/14 there have been discussions about the role and remit of the Committees and this work will continue into 2014/15 with the newly appointed Non Executives.

## **Section 6 – Plans for the year ahead**

By way of recognising the significant importance of this work NHS Fife's Chairman has agreed to Chair NHS Fife's Patient Focus and Public Involvement Standing Committee where all the related work reports. This gives a strong leadership message about the importance of this work stream and demonstrates a real commitment by the Board to drive this agenda forward.

For the year 2014/15 the following areas have been identified as key areas of focussed work:

- Further promotion of Patient Opinion
- Roll out of the Your Care Experience tool across the Board area
- Further work to encourage feedback and to tell people how we will use their feedback
- Initiating early discussion with those who have something to say about our services
- Evaluating effectiveness of complaint handling process for individuals
- Seeking feedback by meeting with more groups from the Equality Participation Network
- Formalising a risk assessment process for complaints
- Formally evaluating the work around Stories at the Board
- Developing mechanisms for reporting locally across NHS Fife
- Developing reporting about staff experience
- Promoting and linking the learning from complaints and other forms of feedback

A final thought from Robert Francis, QC

*"It is the individual experiences that lie behind statistics and benchmarks and action plans that really matter, and that is what must never be forgotten when policies are being made and implemented".*

