

Patient Experience

Annual Report 2020/21



Your Views Matter To Us"

Introduction

NHS Borders Patient Experience Annual Report 2020/21 is a summary of feedback received by NHS Borders from 1 April 2020 to 31 March 2021. This includes a description of the lessons learnt and improvements made. The report also contains information on feedback received by other independent health service providers, such as GPs, pharmacists and opticians who provide services to patients in the Scottish Borders. The period covered by this report includes the period NHS Borders was focussing on responding to the Covid-19 pandemic. At the start of the pandemic staff from the Patient Experience Team were redeployed to assist with the response to the pandemic. During that time NHS Borders was unable to respond to complaints

Encouraging and Gathering Feedback & Complaints

NHS Borders welcomes and encourages feedback from patients, carers and family members. Information about how to provide feedback is made available to patients, carers and family members via the NHS Borders website www.nhsborders.scot.nhs.uk/feedback-and-complaints/ and our leaflet 'NHS Borders Public Facing Model Complaints Handling Procedure' for patients, relatives and carers encourages and informs individuals how to provide feedback and make a complaint. Signposting to the Care Opinion website, two minutes of your time questionnaires and our Public Facing Model Complaints Handling Procedure leaflet are available throughout all of NHS Borders patient areas.

NHS Borders gathers patient feedback in a number of different ways; including:

- Feedback provided to any NHS Borders' member of staff by letter, email or telephone
- Feedback provided to the Patient Experience Team as follows:
 - Patient Experience Team NHS Borders
 Borders General Hospital Melrose TD6 9BS

Tel: 01896 826719

Email: patient.experience@borders.scot.nhs.uk

- Patient feedback provided by other organisations
- Online feedback through Care Opinion www.careopinion.org.uk
- Feedback in the local press
- Public Involvement Groups
- National patient experience surveys
- Local patient experience surveys e.g. '2 minutes of your time' survey
- Preparation of digital, video and face to face stories.
- From our Patient Feedback Volunteers in clinical areas.

Based on feedback received during 2020/21 we know that the majority of our patients are satisfied with the care and treatment provided by NHS Borders. However, sometimes the care and treatment we provide falls short of the high standards we expect. When this happens it is very important we hear about it so we can learn and improve the way we do things in the future.

NHS Borders has a dedicated centrally based Patient Experience Team that supports patients to provide their feedback and make complaints. This provides a single point of contact, offers ease of access and a level of consistency for the patient or member of the public.

NHS Borders works in partnership with and provides funding to a number of agencies and services. The range of groups and services this includes are the Borders Carers Centre, Borders Independent Advocacy Service, Ability Borders and the Borders Care Voice.

To support patients to provide feedback the Patient Advice and Support Service (PASS) is delivered by the Scottish Borders Citizens Advice Bureau. The service is independent and provides free, confidential information, advice and support to anyone who uses the NHS in Scotland. PASS promotes an awareness and understanding of the rights and responsibilities of patients. It also advises and supports people who wish to give feedback, or make a complaint about treatment and care provided by the NHS in Scotland.

Peebles Citizens Advice Bureau, Chambers Institution, High Street, Peebles, EH45 8AG National PASS Helpline telephone number: 0800 917 2127

NHS Borders works with a variety of services, groups and partner organisations which are supported by members of the public. We have public members and volunteers who sit on our Public Involvement Partnership Group; as representatives on various groups or committees; as part of our new 'Hear from You' public engagement forum; or on our Public Participation Network.

As well as learning from lived experience, feedback, comments and complaints, NHS Borders involve the public in the design and planning of services. Due to current circumstances, the way that we deliver and access healthcare has changed; we have 'fast forwarded' to a place that would probably have taken years to get to if Covid-19 had not been present. In recognition of these changes a recent campaign was launched simply to encourage people to come forward if they have something to say about health care. We ran the campaign through all of the channels available to us, including our existing networks of community groups across the Borders and our Community Planning Partners. This was to encourage people to get in touch simply to tell us what they are interested in, who else (if anyone) they would be representing and what level of involvement they would like to have.

Importantly from a Public Involvement perspective is that we engage with people to find out what they want to be asked and how they want to be asked. That way we can co-produce our approach to public involvement to ensure that it is inclusive, effective, fit for purpose and can be adapted to meet the changing needs of our communities as we emerge from the pandemic. Our aim is to end up with a reference group of people who are representative of a wide range of ages, backgrounds, localities, interests in various health conditions etc. This work will also be aligned with conversations that are currently taking place across health and social care on participation and engagement and the growing intention to engage with and develop co-production networks with people as we renew our services, for example;

- Engaging with groups about how to ensure our services address health inequalities
- Development of a locality-based approach to developing older peoples services

We encourage participation and take proactive steps to ensure there are no barriers to participation e.g. by meeting any necessary accessibility or disability requirements. If you wish to find out more about getting involved please contact us:

Public Involvement Team
NHS Borders
Education Centre
Borders General Hospital
Melrose TD6 9BD
0797 183 3185
01896 8255450800 7314052
public.involvement@borders.scot.nhs.uk

NHS Borders continues to support the provision of independent advocacy. Locally this is provided by the Borders Independent Advocacy Service (BIAS). The service which supports people to be heard, access services and raise concerns is free and confidential. To find out more about the advocacy service please contact:

Borders Independent Advocacy Service Low Buckholmside Galashiels TD1 1RT 01896 752200 info@bordersadvocacy.org.uk

Proactive Patient Feedback

'Two Minutes of Your Time'

This information was collated from postcards place in feedback boxes throughout the Borders General Hospital (BGH). This system has been put on hold since the start of the Covid-19 pandemic. Consideration will be given in the coming months as to how we can best obtain this valuable feedback in future.

Patient Feedback Volunteers

During 2020/2021 due to the Covid-19 pandemic our volunteer programme was suspended. This suspension included our Patient Feedback Volunteers and therefore we were not able to gather patient feedback in this way. Plans are currently underway to restart our volunteer programme, and it is hoped that we will be able to reintroduce our patient feedback volunteers during 2021/2022.

Recording Complaints

The Patient Experience Team record all complaints on the electronic system, Datix. A log in the form of a spreadsheet is also maintained to track all open complaints received by NHS Borders. This spreadsheet is updated on a daily basis. Complaints that are partly or fully upheld are also recorded in the relevant services' improvement plan which are then monitored and updated by each service.

Safety Measurement & Monitoring Weekly Dashboard

The Clinical Governance & Quality Team complete and distribute the Safety Measurement & Monitoring Weekly Dashboard. This provides a range of information in the form of charts displaying data over time at ward level and includes feedback and complaints, falls, adverse events, infection rates etc. The dashboards can be used to monitor performance and as a quality measure leading to identification of areas for improvement.

Complaint Handling

NHS Borders takes a positive and proactive approach to the way feedback and complaints are managed:

- A person centered approach to all feedback is key, e.g. walking in the shoes of the patient
- It is essential that a meaningful and timely response is delivered
- Staff are encouraged to reflect on the patient's experience, and learning should occur at individual and organisational level
- The Scottish Public Services Ombudsman's (SPSO) Guidance on Apology is followed when considering the best way to handle and respond to a complaint

When receiving a written complaint (by letter or email), the Patient Experience Team aim to speak to the person raising concerns within 24 hours of receiving the complaint to agree the issues the complainant wishes addressed, to establish what outcome they want to achieve from their complaint and explain the complaint process. This is then followed up with an acknowledgement letter within 3 working days confirming receipt of their complaint, detailing their issues and advising of our intended response date. A leaflet which explains what the complainant should expect and how their feedback will be handled is included with the acknowledgement letter.

When complaints are received, the Patient Experience Team work closely with clinical and managerial staff from across NHS Borders to assess and agree the most appropriate and person centred way to respond. This can include direct face to face discussions with complainants, virtual meetings, telephone and/or written communication. Mediation is also available if resolution through local routes is not successful.

When responding to complaints, NHS Borders aims to:

Provide professional and compassionate responses which respond to the issues raised

- Understand feedback from the perspective of the patient/carer/relative
- Share learning and improvement actions

The Patient Experience Team provide direct advice and support to staff in handling feedback and complaints, including discussing and agreeing the best way forward.

Within the NHS Borders area, alternative dispute resolution was not used during the 2019/20 reporting period.

Each of the NHS Borders' Clinical Boards (Acute Services, Mental Health, Primary and Community Services and Learning Disability) has a Clinical Governance Group. These groups have a responsibility to review complaint themes and track improvement actions through to completion.

Members of the Clinical Board management teams are responsible for liaising directly with staff involved in complaints to reflect on practice and identify any learning which can be used to make improvements. This includes meeting with complainants to hear directly about their experiences.

People who make a complaint are supported to be involved in the process. The level of involvement is assessed on a case by case basis taking account the nature of the complaint and the level of involvement the complainant is comfortable with. When a complainant indicates that they wish to meet with staff this is arranged by the Patient Experience Team. This may include meeting with clinical or management staff, NHS Borders' Chief Executive, Director of Nursing, Midwifery & Acute Services or Medical Director.

Learning from Complaints

NHS Borders encourages a culture of openness. Patient feedback is routinely used along with other sources of information to inform service improvements.

For all complaints responded to, an assessment is made as to whether the complaint is upheld, partly upheld or not upheld. Where a complaint is either upheld or partly upheld the relevant services agree an improvement plan that is monitored by the General Manager for each service. Complaints are also a standard agenda item on the meetings of each of the service clinical governance groups. The Chief Executive, Medical Director or Director of Nursing, Midwifery & Acute Services read and sign every Stage 2 complaint response. They are explicitly committed to improving the experience of patients, carers and relatives and improving the quality of our services.

Although it is not always possible to attribute all improvements to patient, carer or relative feedback, the following are examples of where improvements have been made in response to feedback, complaints and Care Opinion stories:

 Visiting policy has been reviewed to reflect the use of virtual visiting and has been shared with staff. Due to data protection issues work is continuing to ensure ipads are secure. Information banners are now available at all hospital

- sites, which advise on the visiting restrictions in place at the time (at the time of writing this report NHS Borders is only allowing essential visiting).
- All District Nursing Teams reminded to check with the GP practice regarding a
 patient's ability to give consent prior to undertaking vaccinations of people who
 are housebound.
- Ongoing discussion between community nursing, cardiac specialist nurses and palliative care specialist nurses to identify how district nurses can work closely with cardiac nurses in identifying cardiac patients at end of life and create joined up support plans.
- Ensure Booking Staff make direct contact with all patients and do not to rely on voicemail messages when changing appointment details.
- Discussion at a Multi-Disciplinary Team meeting to ensure all staff are aware that parents and young people should be copied into discharge letters either by mail or email. In addition administration staff will raise with the clinicians if the family have not been included in the email to check whether the patient/family have stated that they do not wish to receive a letter. Information about why a copy has not been sent will be recorded in the patient's notes.

Complaint Process Experience – Complainants

We gather feedback from patients, carers and family members who have engaged with NHS Borders Patient Experience Team to find out if they have been satisfied with our complaints process. NHS Borders are keen to learn if users of this service have been happy with the quality of the response, did we address all of their concerns and was there anything they felt we could have done to improve the way that we handled their complaint.

Since 1 April 2017, we have sent out questionnaires with all of our Stage 2 complaint response letters in order to gather feedback on our process. The questionnaires ask for feedback about different aspects of the process and the feedback from the 17 questionnaires returned during 2020/21 is given below:

- 47% of complainants agree that finding information on how to make a complaint was easy
- 64% of complainants agree that submitting a complaint was easy
- 82% of complainants agree that complaints staff were helpful and polite
- 82% of complainants agree that complaints staff listened and understood their complaint
- 64% of complainants agree that complaints staff asked what outcome they wanted
- 82% of complainants agree that complaints staff explained the complaints process
- 59% of complainants agree that their complaint was handled in a timely manner and they were kept informed of any delays
- 47% of complainants agree that all their complaint points were answered
- 71% of complainants agree that the complaint response was easy to read and understandable

The Patient Experience Team continues to work to all aspects of our complaint handling with the aim of improving the experience our complainants have.

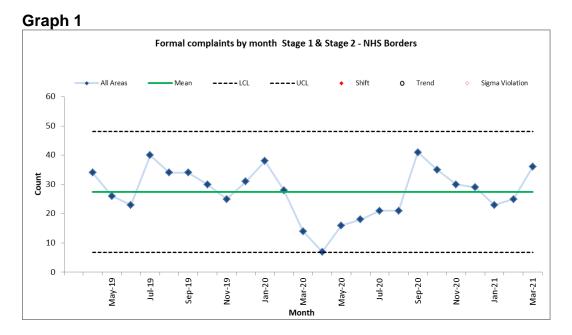
Complaint Handling - Guidance for Staff

The Patient Experience Team produced a guidance leaflet for staff which provides information on what they need to know about the complaints process and where they can access support. This guidance is available on NHS Borders intranet for staff to refer to.

The total number of complaints received

A total of 302 complaints were received between 1 April 2020 and 31 March 2021. When a comparison is made with 2019/20, this shows a decrease of 54 in the number of complaints received during the year. At the start of the Covid-19 pandemic there was a decrease in the number of complaints being received by NHS Borders. However, the numbers being received have now returned to normal levels

Graph 1 shows the number of complaints received by month between April 2019 and March 2021.



Out of the 302 complaints received, 188 related to the Borders General Hospital, 65 related to Primary & Community Services, 38 related to Mental Health and 11 related to Support Services.

Complaints closed at each stage

The term closed refers to a complaint that has had a response sent to the complainant and at the time no further action was required, regardless at which stage it is processed and whether any further escalation took place. The term escalation refers to a complaint that was received at Stage 1 and was unable to be resolved therefore escalated to Stage 2 of the complaints process. This indicator

considers the number of complaints closed at each stage as a percentage of the total number of all complaints.

During 2020/21, we closed 27% of complaints at Stage 1 and 73% of complaints at stage 2. Charts outlining this performance are included in Appendix 2.

Complaints upheld, partially upheld and not upheld

There is a requirement for a formal outcome to be recorded for each complaint received. Outcomes can be upheld, partially upheld or not upheld.

Charts outlining this information are included in Appendix 3.

Average times

The model complaints handling procedure requires complaints to be closed within 5 working days at Stage 1 and 20 working days at Stage 2. This indicator represents the average time in working days to close complaints at Stage 1 and complaints at Stage 2 of the model complaints handling procedure.

During 2020/21, our average time to respond to complaints at Stage 1 was 3.4 working days. Our average time to respond to complaints at Stage 2 was 28.02 working days and our average time to respond to complaints at Stage 2 after escalation was 16.4 working days. Charts outlining this performance are included in Appendix 4.

Complaints closed in full within the timescales

This indicator considers the number of complaints closed at each stage as a percentage of the total number of complaints closed at the same stage.

During 2020/21, we closed 85% of all Stage 1 complaints within 5 working days. We closed 55% of all Stage 2 non escalated complaints within 20 working days and 50% of all Stage 2 escalated complaints within 20 working days. Charts outlining this performance are included in Appendix 5. At the start of the period covered by this report the complaint process was put on hold due to the Covid-19 pandemic. Patients and families who were involved in complaints investigations were advised in the middle of March 2020 that whilst our review of their case remained of significant importance to NHS Borders investigations, meetings and final responses would be delayed as the organisation deployed resources to respond to the pandemic. Since returning to normal business on 1 June 2020, the Patient Experience Team worked to improve performance against the 20 working day timescale and to provide responses to the complaints that had been delayed due to staff being deployed to provide support frontline services. Responding to complaints requires the involvement of our clinical staff who have been exceptionally busy since the start of the pandemic. The on-going clinical pressures mean that the time clinicians have to available to them to respond to the issues raised in complaints is reduced and can mean that they are unable to respond within timescales.

Number of cases where an extension is authorised

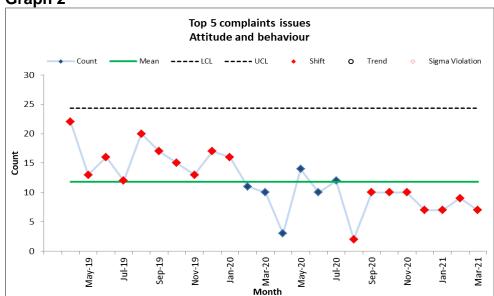
The model complaints handling procedure allows for an extension to the timescales to be authorised in certain circumstances. This indicator considers the percentage of complaints that had an extension authorised.

During 2020/21, no Stage 1 complaint had an extension authorised, 20% or 45 Stage 2 non escalated complaints had an extension authorised in addition at the end of March 2020 all complainants with complaints that had not been closed prior to the redeployment of patient experience team staff due to the Covid-19 pandemic were sent a letter explaining that there would be a delay to NHS Borders being in a position to respond their complaint. There was 1 Stage 2 escalated complaint where an extension was authorised. Charts outlining this performance are included in Appendix 6.

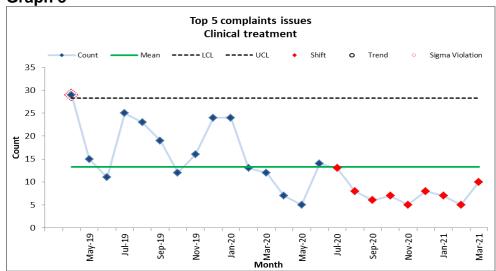
Complaints Themes

Graphs 2 to 6 outline the top five themes emerging from complaints received between 1 April 2020 and 31 March 2021. The top five themes for complaints have remained the same as the previous year (2019/20).

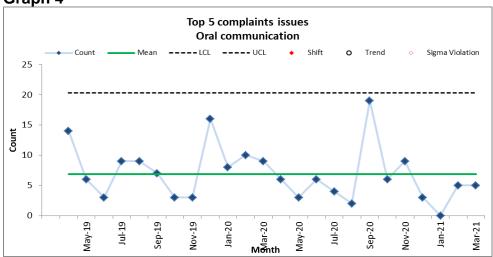




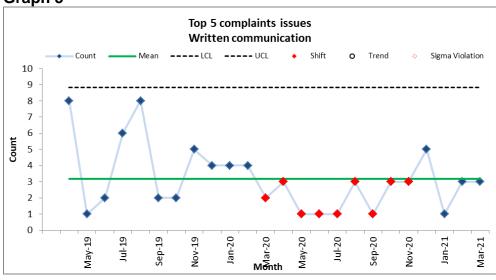
Graph 3



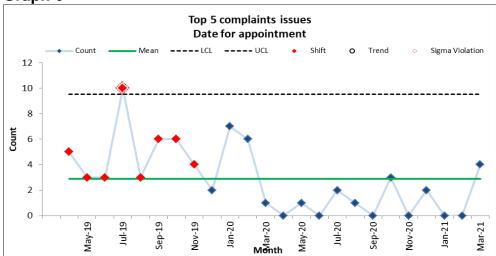
Graph 4



Graph 5



Graph 6



When a comparison is made, as shown in the table below, between the figures for 2019/2020 and those for 2020/21, there has been a reduction in all of the areas included in the Top 5.

Top 5 Issues	Total 2019/20	Total 2020/21
Attitude and Behaviour	182	101
Clinical Treatment	223	95
Communication – Oral	97	68
Date of Appointment	56	13
Communication – Written	48	28

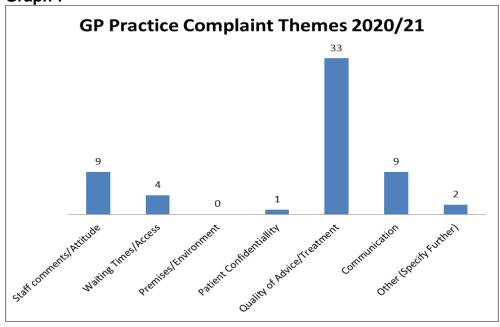
Primary Care Service Providers Complaints

The table below outlines the number of complaints received for complaints by Primary Care Service Providers operating in the Scottish Borders between 1 April 2020 and 31 March 2021.

	GP	Dentist	Pharmacist	Optician
No. of Complaints received	67	6	17	0

Graph 7 outlines the top themes emerging from the complaints received by General Practitioners operating in the Scottish Borders between April 2020 and March 2021

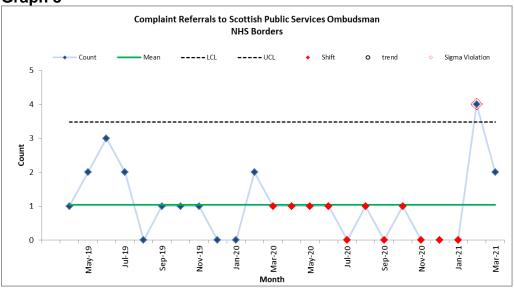
Graph 7



Scottish Public Services Ombudsman (SPSO)

Graph 8 outlines the referrals accepted by the SPSO between 1 April 2020 and 31 March 2021. In 2020/21 there were 11 referrals made to the SPSO this is a decrease of 3 from the 14 made during 2019/20:





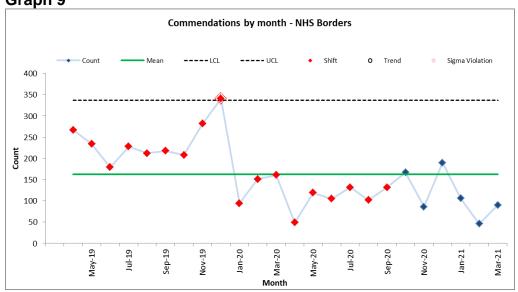
The following decisions and recommendations were received by the SPSO between 1 April 2020 and 31 March 2021 for cases investigated by them in relation to complaints made to NHS Borders:

SPSO Case Reference 201808371	Progress
Upheld, recommendations	Closed
SPSO Case Reference 201805164	Progress
Some upheld, recommendations	Closed
SPSO Case Reference 201809975	Progress
Some upheld, recommendations	Closed
SPSO Case Reference 201809603	Progress
Not upheld, no recommendations	Closed
SPSO Case Reference 201810366	Progress
Some upheld, recommendations	Closed
SPSO Case Reference 201809991	Progress
Not upheld, no recommendations	Closed
SPSO Case Reference 201907297	Progress
Not upheld, no recommendations	Closed
SPSO Case Reference 201905575	Progress
Upheld, recommendations	Closed
SPSO Case Reference 201801303	Progress
Some upheld, recommendations Closed	
SPSO Case Reference 201910096	Progress
Upheld, no recommendations Closed	
SPSO Case Reference 201802643	Progress
Some upheld, recommendations	Closed
SPSO Case Reference 201905371 Progres	
Not upheld, no recommendations Closed	

Commendations

During 2020/21 NHS Borders received a total of 1324 commendations which is a decrease from the 2575 received during 2019/20. Graph 9 shows commendations received from April 2019 to March 2021:



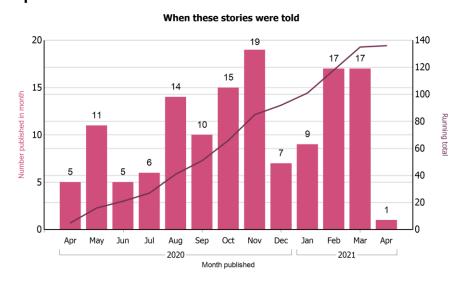


Care Opinion

Between 1 April 2020 and 31 March 2021, 136 stories were shared on Care Opinion about NHS Borders. At the time of preparing this report, these stories had been viewed on Care Opinion 24,859 times in total. 79% of the stories shared were positive stories. The following charts have been produced by the Care Opinion website.

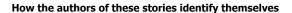
Graph 10 shows the number of stories shared about NHS Borders during 2020/21.

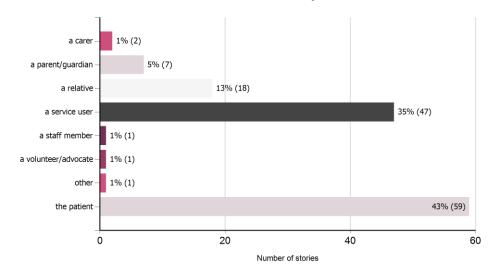
Graph 10



Graph 11 shows who has written the stories about NHS Borders with 43% having been written by the patient themselves.

Graph 11





The word clouds below show what people told Care Opinion in their stories was good and what could be improved on.

What was good?



What could be improved?



Accountability and Governance

The Clinical Executive Operational Group, Clinical Boards and Clinical Governance Groups oversee feedback and complaints and monitor performance using data from performance scorecards and patient feedback reports provided on a monthly basis. Data is presented over time to help identify any variation and to enable assessment of improvement efforts. There are public involvement representatives in several of these groups.

At Board level the Board Clinical Governance Committee and Public Governance Committee seek assurance and scrutinise the organisational approach to feedback and complaints. Every Public Board receives a Clinical Governance and Quality report containing a section on patient feedback.

The reports to the Board committees include details of complaint numbers, themes and trends, information on response times, feedback posted on Care Opinion, and outcomes from SPSO cases in order that the committees may consider these.

The Patient Experience Team is part of the Clinical Governance & Quality Team which includes Patient Safety Team who oversee adverse events. This enables frequent exchange of information and partnership working between the two functions. As a result we are able to achieve a seamless, timely and person centred response to complaints and adverse events which are being addressed through both processes. The teams have a close working relationship which has enabled a joined up approach to the way in which support can be offered to patients, carers and families when providing feedback, making a complaint or engaging in a review. The sharing of information has enhanced and increased the opportunities for organisational learning from complaints and adverse events. This also provides valuable information which results in improvements being made based on the themes and issues identified.

Future Developments

As previously stated, NHS Borders takes feedback and complaints very seriously; this has resulted in us making a number of improvements as reflected in this report. However, there is always room for further improvement to be made and the following have been identified for 2020/21:

- Through a focussed improvement programme continue to refine and improve all parts of the feedback and complaint handling process, including the complainant's experience, and timeliness of response.
- Continually explore and offer different routes to encourage patients, carers and relatives to provide their feedback and use this to improve our complaint handling.
- Work with the staff involved in looking into feedback and complaints to improve the outcome of investigations and ensure that all issues raised in complaint are responded to.

We would welcome your feedback on this annual report. If you would like to provide feedback or need this report in large print, audio, Braille, alternative format or in a different language please contact;

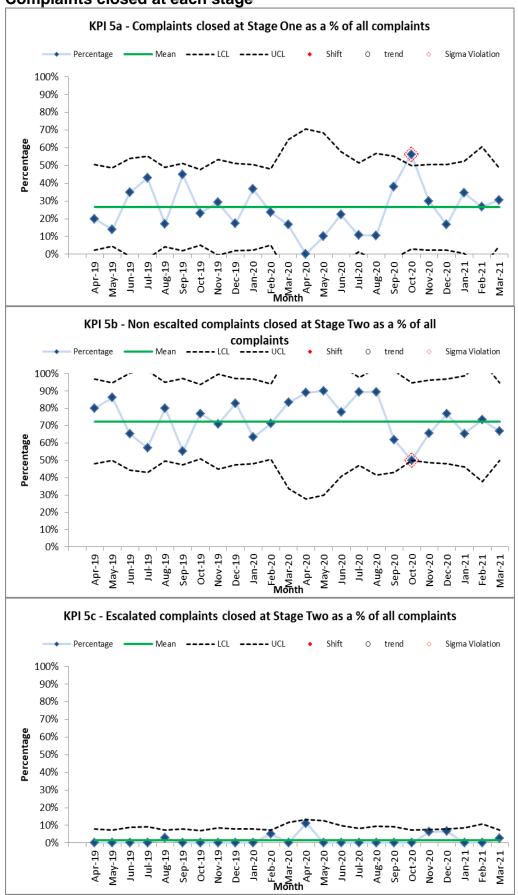
Patient Experience Team
Clinical Governance & Quality
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www.nhsborders.scot.nhs.uk/feedback-and-complaints/

Appendix 1

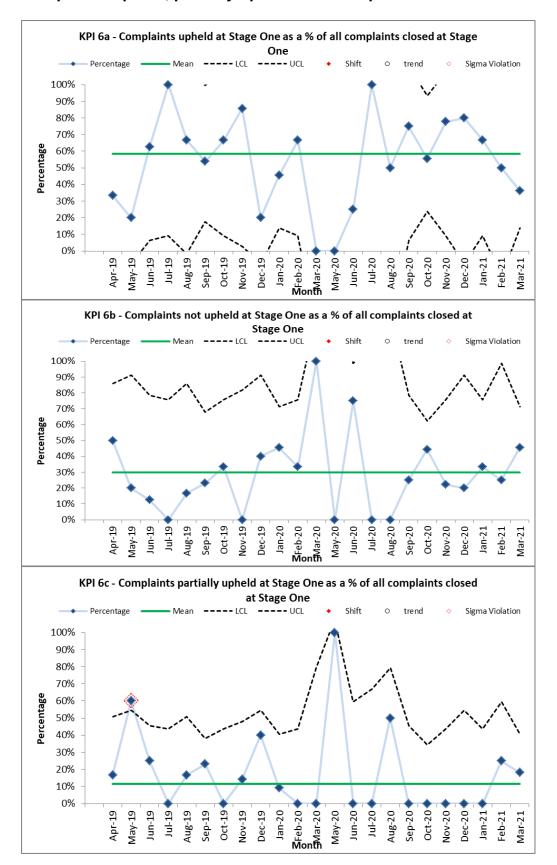
Chart explanation

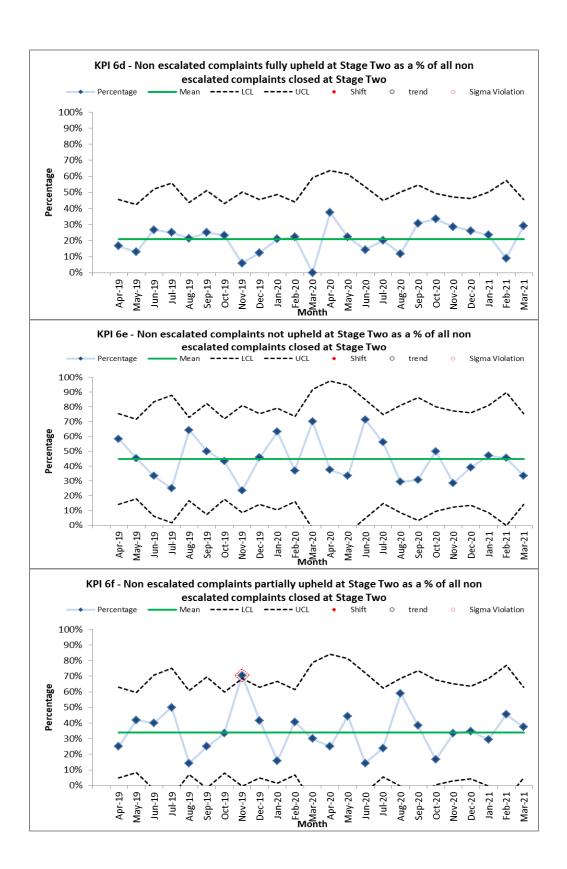
Code/ symbol on chart	Definition	Explanation
С —	Centre line	Line indicating the average performance over that time period
LCL	Lower control limit	Line indicating lowest limit deemed an acceptable performance level
UCL	Upper control limit	Line indicating highest limit deemed an acceptable performance level
•	Shift	8 or more consecutive data points above or below the centre line or mean line
0	Trend	6 consecutive data points increasing (upward trend) or decreasing (downward trend). This could indicate positive or negative performance.
\Diamond	Sigma violation	Data point above or below the upper or lower control limit
Mean	Mean line	Line indicating the average performance over that time period

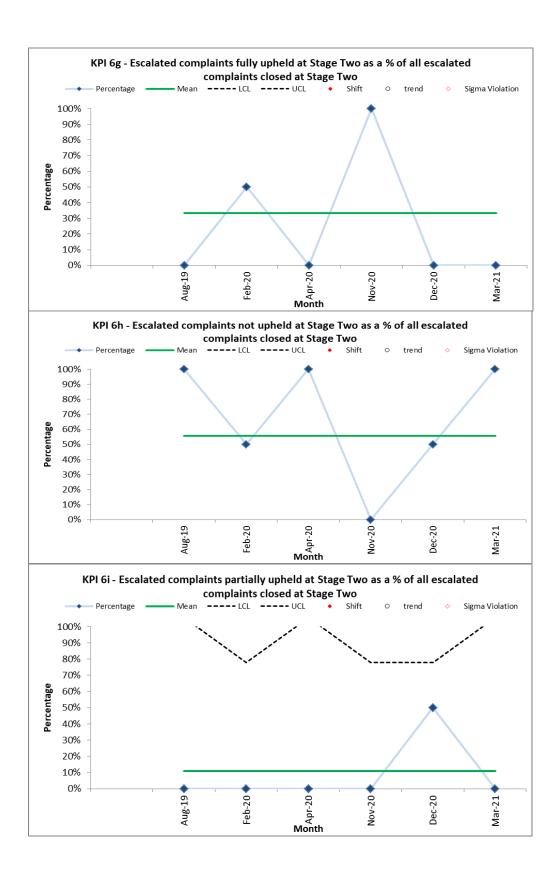
Complaints closed at each stage



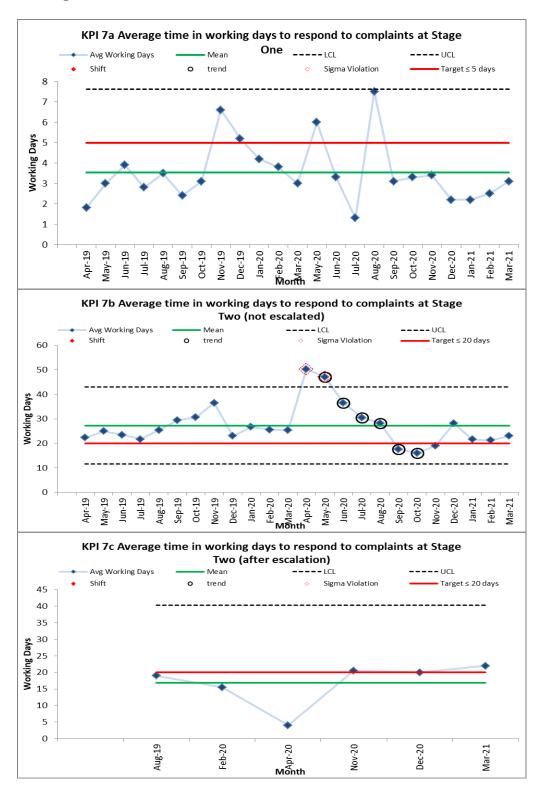
Complaints upheld, partially upheld and not upheld



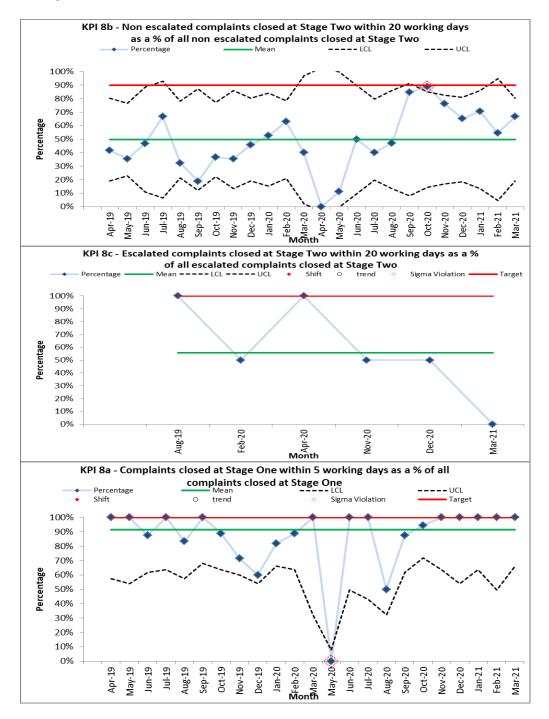




Average times



Complaints closed in full within the timescales



Number of cases where an extension is authorised

