

**B/16/72**

**NSS Formal Board Meeting – Friday, 24 June 2016**

**Annual Report April 2015 – March 2016**

**NHS National Services Scotland**

**Feedback, Comments, Concerns and Complaints Annual Report**

### **Purpose**

The aim of this report is to summarise the feedback, comments, concerns and complaints NHS National Services Scotland (NSS) has received in the period from the **1<sup>st</sup> April 2015 to the 31<sup>st</sup> March 2016**.

### **Recommendation**

The Board is asked to note the report.

### **Timing**

All NHS Boards are required to publish the Feedback, Comments, Concerns and Complaints Annual Report by the 30<sup>th</sup> June 2016.

### **Background**

1. There has been an increasing focus on the need for feedback, comments, concerns and complaints to be encouraged and valued as a vital source of information about what is working well, or not working well, in services and enabling identification of necessary improvements.
2. 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.
3. NHS National Services Scotland (NSS) welcomes feedback, comments, concerns and complaints from its service users. The insight they provide is a valuable tool for improving services and customer experience. This report provides an overview of the mechanisms available for capturing that feedback, a summary of the issues raised and the resulting actions and improvements
4. **Number of Complaints received:**

In the year to 31<sup>st</sup> March 2016, NSS received a total of **578** complaints compared with **529** in 2014/15. The detail of the breakdown and themes are in the full report.

NSS is working with the Scottish Public Service Ombudsman (SPSO), NHS Boards and the Third sector to design a model complaints handling procedure (MCHP) for the NHS in Scotland. This will be implemented before April 2017.

**5. Culture and training and development for staff:**

NSS is developing the NES online “how can I help you” module to integrate this training into the NSS Learning and development plan.  
SNBTS has run in partnership with Organisational Development a series of customer care standards training which has been rolled out in 2015-16.

**6. Improvements to services as a result of feedback:**

NSS has used the learning from complaints to initiate service improvements. These improvements are detailed in the annual report.

Examples include identifying adverse trends to agree and develop recovery, correction and improvement plans within National procurement. The plans are developed in partnership with NHS Boards.

In Practitioner and Counter Fraud Services the Dental Service has used complaints and feedback to improve the prior approval process for dental treatment to reduce the delays experienced by patients receiving treatment.

**Engagement**

All NSS SBU s and Directorates have been involved in the formulation of the Annual Report.

**Name of the Author Louise MacLennan**  
**Designation Head of Public Participation**  
**Tel: 0131 275 7457**  
**Email: [l.maclennan@nhs.net](mailto:l.maclennan@nhs.net)**

# **NHS National Services Scotland**

## **Feedback, Concerns, Comments and Complaints**

### **Annual Report**

**June 2016**

<b>Contents:</b>	
<b>At A Glance</b>	<b>Page. 3</b>
<b>Section One: Introduction</b>	<b>Page. 5</b>
<b>Section Two: Encouraging and gathering feedback</b>	<b>Page. 7</b>
<b>Section Three: Encouraging and handling complaints</b>	<b>Page. 10</b>
<b>Section Four: The Culture - Staff Training and Development</b>	<b>Page. 17</b>
<b>Section Five: Improvements to Services</b>	<b>Page. 18</b>
<b>Section Six: Accountability and Governance</b>	<b>Page. 19</b>

## 2015 / 2016 at a Glance

	<p>NSS has received very positive feedback from Donors: <i>“just want to say how impressed I always am with both the politeness of the staff and efficiency of being dealt with on the mobile bus”</i>. We have also received feedback on areas where we can improve: <i>“I haven’t been reimbursed for my electricity”</i>.</p>
	<p>We host an Annual Involving People Event and from these events, the relevant services have created action plans for improvement.</p>
	<p>In 2015-16, the National Patient Opinion Report for Scotland did not feature any stories on NSS although we continue to respond to the limited number of stories posted on the website.</p>
	<p>NSS has had <b>no</b> Complaints referred to the Scottish Public Services Ombudsman (“SPSO”) in 2015-16 and for the last two years.</p>
<p><b>Small Change</b> <b><u>Big</u></b> <b>Difference</b></p>	<p>Learning from feedback and complaints may result in small incremental improvements to process however, from further feedback, it is recognised that these changes make a big difference.</p>
	<p>NSS has worked with the Scottish Health Council to improve our approaches to engagement and involvement and to improve the representation of the public in our work.</p>



NSS Twitter and Facebook provide information about our services and initiatives. The Scottish National Blood Transfusion Service interact with Donors on Facebook to provide responses in real time and to provide information on donor sessions.

### Model Complaint



### Handling Process

NSS is working with the SPSO, NHS Boards and the third sector to design the Model Complaints Handling Procedure for NHS Scotland.



### Complaints received

We received 578 complaints in 2015-16. This is compared to 529 in 2014-15, an increase of 9%.



96% of complaints received in 2015-16 were resolved within 20 working days.

## 1. Introduction

- 1.1** This report provides the summary of the activity surrounding feedback, comments, concerns and complaints received by NHS National Services Scotland (NSS) in the period from 1 April 2015 to 31 March 2016. NSS is required to use this report to demonstrate improvements in the handling of complaints and feedback and to demonstrate learning. This report will be reviewed by Health Improvement Scotland (in place of a Participation Standard assessment for this year) and comments on it will be provided. These comments will be reported on in due course, together with any improvements required.
- 1.2** Empowering people to be at the centre of their care and listening to them, their carers and families is a shared priority for everyone involved in the NHS in Scotland. Feedback, comments, concerns and complaints provide a valued and vital source of information about service delivery and assists in identifying service improvement. This requirement has been embedded in legislation and recognised by the Scottish Health Council who, along with the SPSO, has required the NHS in Scotland to adopt a model complaints handling procedure to standardise complaints handling across the NHS and to be in line with the rest of the public sector. NSS has been working collaboratively with the SPSO, NHS Boards and the third sector to design the model complaints handling procedure and supporting key performance indicators.
- 1.3** NSS was requested to chair the sub-group on recording and reporting requirements. NSS have been key in drafting the key performance indicators for NHS Scotland and in providing recommendations on improving the reporting process including recommending that all Boards join a National Contract providing a standardised system for the recording of complaints. This system, it has been suggested, could also support adverse events and duty of candour reporting in due course, thus providing efficiencies for individual Boards and standardising the data received and analysed in this area. Such an approach would allow for effective benchmarking and the sharing of good practice.
- 1.4** In recognition of this work, it was requested by Scottish Government that the following be inserted into this year's **Local Development Plan:-**

*NSS recognises the importance to the people of Scotland on tackling inequality in health and we will support Scottish Government and other partners to tackle inequalities through our research agenda; provision of better intelligence and public health support. NSS also aims to ensure that our own services are designed and delivered in ways that reduce health inequalities.*

*In line with these aims, NSS has and will continue to support the Scottish Public Services Ombudsman in delivering a model Complaint Handling Procedure and will lead on delivering meaningful recording and reporting performance indicators and assisting in the provision of technical solutions*

*which suit multiple Boards with the aim of providing savings and ensuring consistency across NHSScotland.*

- 1.5** The Model Complaints Handling procedure (MCHP) will be implemented by NSS with an anticipated launch date of April 2017. Updates on this process will be produced in the quarterly reports.



## **2. Encouraging and Gathering Feedback**

- 2.1** NSS has continued to work with the support of the Scottish Health Council to review and update the methods that we use to seek and gather feedback. It is recognised that as a national non-patient facing organisation, the approaches taken may differ from those in a territorial NHS Board.
- 2.2** NSS hosted its Involving People Event in early 2016. The event was held in Stirling with sixty five delegates in attendance representing patients and public sector and third sector stakeholders. The aim of the event was to increase understanding of, and invite feedback on, our services. This feedback will help shape the Public Involvement Strategy, part of the wider NSS Customer Engagement Strategy.
- 2.3** This year the event featured the work of the following NSS Services:
- Public Health and Intelligence
  - Health Protection Scotland
  - The Managed Clinical Networks
  - Counter Fraud Services

Each NSS Service above presented an outline of their work in a workshop session to provide an environment which encouraged delegates to participate. The services provided details on the impact of their work on patient care and sought the views from the delegates on how to improve their visibility and service offering. The following detail is a summary of the feedback provided by the delegates at the event from the workshop sessions.

### **2.4 Public Health and Intelligence (“PHI”) Workshop Feedback**

PHI and in particular, Information Services Division (“ISD”), were seeking feedback on the public’s awareness of the data held and analysed by ISD. In particular, ISD were seeking views from the public on whether they knew what the impact of their data was on the provision of healthcare in Scotland.

Delegates confirmed that accessing the ISD website was challenging, and, at times, impenetrable. Delegates were keen to know what data was held, what it was used for and who could access it. In relation to access, the rules and payment schedules between subject access requests and research requests were unclear. It was recommended that the ISD website for the public should be more accessible and reports provided in an easier, shorter and clearer format.

It was commented that, to recognise the “human” in the data, it may be beneficial for ISD to be further involved at local and community levels to explain the data and its impact on healthcare provision and tackling inequalities. Delegates recommended that ISD create a story following a patient using their data and disseminate this in diverse ways, particularly using social media.

## **2.5 Health Protection Scotland (“HPS”) Workshop Feedback**

HPS sought feedback on three parts of their service offering: TRAVAX, the Hand Hygiene Campaign and the e-BUG programme.

The TRAVAX team (part of HPS) were seeking feedback on the public’s awareness of TRAVAX. TRAVAX is an interactive website providing current travel health information for health care professionals. TRAVAX began in 1985 in response to the demand for information from primary care providers. Initially a Scottish resource, it is now widely used throughout the UK and overseas. Registration is required for access.

Delegates were not aware of the website or that the information from TRAVAX was free. Currently GPs are paid to offer the travel advice to patients in their surgeries, with variation in the cost of vaccinations offered which require to be paid by the patient. Delegates had not seen the “Travel Abroad” poster which had been distributed to GP surgeries. It was suggested that the posters could be distributed to travel agents to display in their shops on the high street. This was relevant to the delegates who do not visit their GP on a regular basis.

There was a minimal awareness of health protection Scotland overall and delegates were unaware of the range of services they provided in Scotland. It was suggested that Public Health Teams should utilise more community settings at local level and not just GP surgeries and clinic areas.

In relation to NHS Scotland’s Hand Hygiene Campaign, delegates identified as being familiar about the campaign and the importance of this work. It was suggested that more materials should be made widely available to continually remind people of the importance of hand hygiene.

Related to the above, the HPS team also provided the delegates with information on the e-Bug programme which is led by Public Health England’s (PHE) Primary Care Unit and involves a consortium of 28 international partner countries. The main aim of the project is to educate children and young people about microbiology, hygiene and the spread, treatment and prevention of disease. E-Bug also aims to reinforce an awareness of the benefits of prudent antibiotic use and how inappropriate use can have an adverse effect on antibiotic resistance in the community. Hand and respiratory hygiene and the spread of infections in the community are also covered.

## **2.6 National Managed Clinical Networks (“MCNs”) Workshop Feedback**

National Services Division (NSD) commission MCNs on behalf of NHS Scotland. MCNs are virtual entities designed to improve the standards of patient care through the integration of services and collaboration of partners involved in patient care, unconstrained by existing professional and Health Board boundaries. The MCNs were seeking feedback on how they can improve the engagement and involvement of patients and the wider public in their work.

The delegates expressed admiration for the work of the managed clinical networks. It was suggested that MCNs could use the resource and expertise of “Our Voice”<sup>1</sup> and develop a peer network. Delegates queried how the MCNs would be managed in an increasingly diverse society. It was suggested that effective equality impact review utilising the knowledge of the third sector would be useful in overcoming any perceived issues. It should be noted that much of the feedback for the MCNs workshop was collated using an electronic voting system.

## 2.7 Counter Fraud Services (“CFS”) Workshop Feedback

CFS presented an outline of the service and highlighted where fraud could occur in the NHs. It was noted that delegates had been aware of the service due to recent television coverage of cases.

Delegates suggested that it was not widely enough known what fraud in the NHS is or could be and the message needs to reach patients, staff and volunteers. Delegates had not appreciated the link between the work of Counter Fraud services in the NHS and Crimestoppers. Delegates suggested that Counter Fraud services needs a wider remit than health and should provide services across the public sector. It was noted that staff awareness required improving as current figures are at 40-50% and the target set to improve this was 80% by March 2018.

Delegates suggested that Counter Fraud Services could engage with the writers of health programmes like *Casualty* or *Holby City* to include a fraud story line.

## 2.8 The feedback provided at the Involving People Event has been reviewed by the Strategic Business Units involved and it will be used to improve and shape their services. Further updates on this will be provided in quarterly reports.

---

<sup>1</sup> **Our Voice** is based on a vision where people who use health and care services, carers and the public will be enabled to engage purposefully with health and social care providers to continuously improve and transform services. People will be provided with feedback on the impact of their engagement, or a demonstration of how their views have been considered.

### 3 Encouraging and Handling Complaints

3.1 NSS encourages complaints by demonstrating learning from complaints received in a transparent and accessible manner. This section summarises the complaints received by the following parts of NSS:-

- Scottish National Blood Transfusion Service;
- Procurement, Commissioning and Facilities;
- Practitioner and Counter Fraud Services;
- Public Health and Intelligence;
- Human Resources; and
- Central Legal Office.

Information Technology, Strategy and Governance and Finance and Business Services which reported a nil return for complaints over the 2015-2016 reporting period are not featured in this report.

Further engagement has been initiated to understand the methods for obtaining and processing feedback in areas of NSS where no or very few complaints are received. Different areas of NSS will feature in the quarterly reports and improvement plans, where required, will be agreed.

3.2 There have been **no** NSS Complaints referred to the Scottish Public Services Ombudsman (SPSO) **in the last two years.**

3.3 In 2015-16 NSS resolved 96% of complaints received and the average response time was 9.44 days. The figure below highlights how many people are using social media, which provides a further method of communication for feedback and complaints.

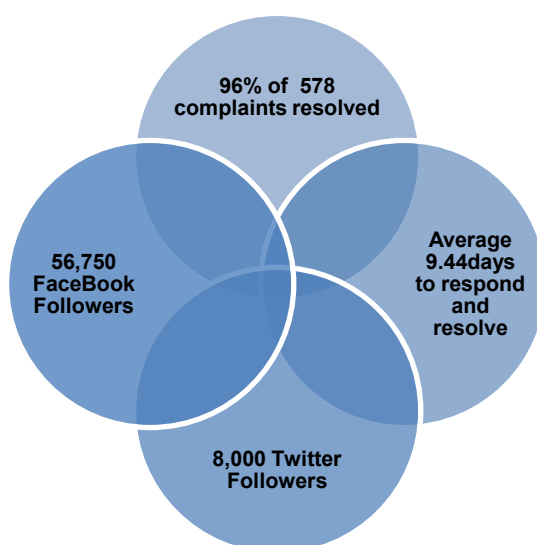
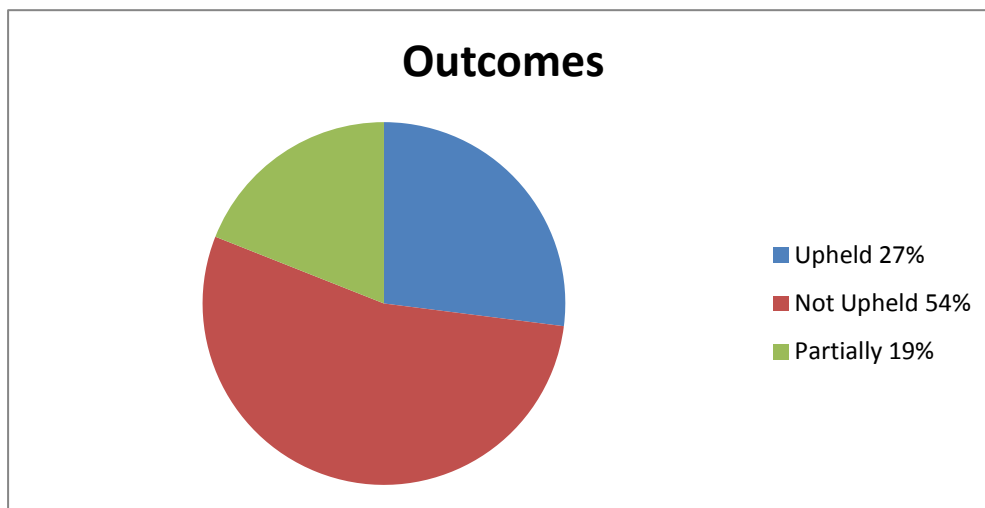


Figure 1 Encouraging and Handling Complaints

**3.4** NSS collects information on the outcomes of the complaints received. The pie chart illustrates this from the available data for 2015-16 for PCFS. Please note that this information is requested quarterly but until recently has not been provided. The quarterly report will provide further updates and a more complete figure will be provided in next year's report.

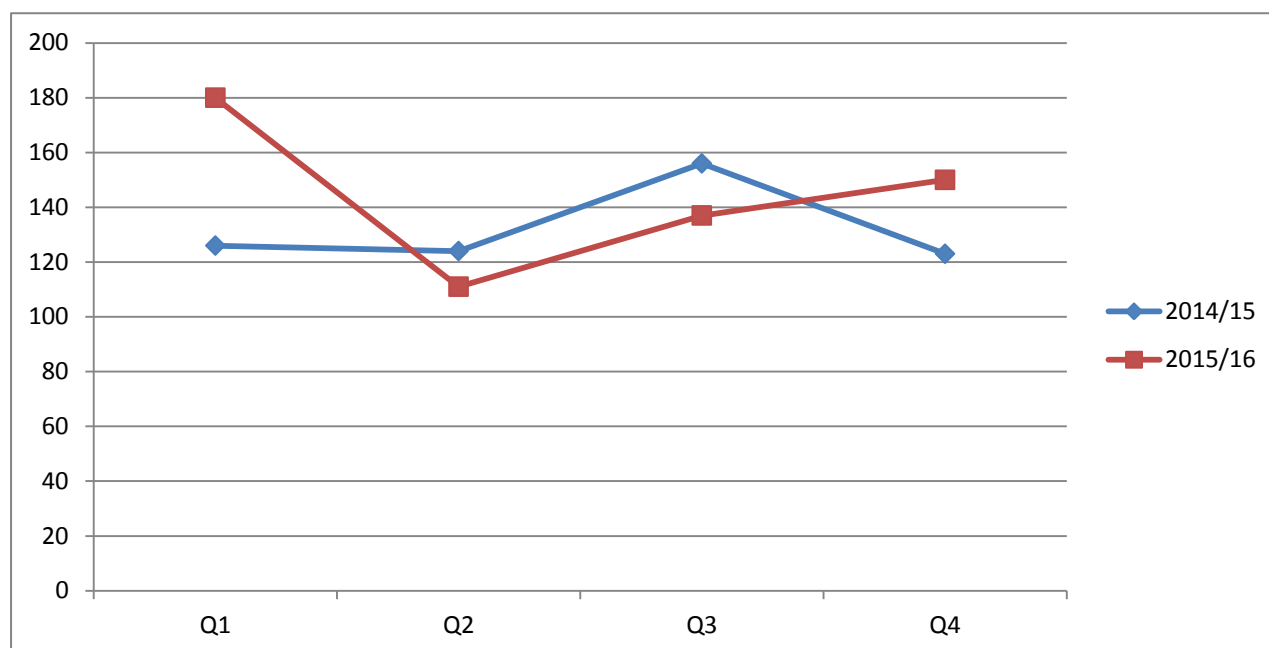


**3.5** The number of complaints received in 2015-16 has increased from the 2014-15 period. In 2015-16 NSS received a total of 578 complaints which is an increase from the previous year (529) of 9.3%. This increase is consistent with previous year's incremental increases. This does not include the complaints received by NSS that are in relation to other NHS Boards detailed below.

**Table 1. Quarterly and cumulative totals for 2015-16 with a comparator of 2014-15**

	2015/16		2014/15	
	Quarterly Total	Cumulative Total	Quarterly Total	Cumulative Total
<b>Q1</b>	180	180	126	126
<b>Q2</b>	111	291	124	250
<b>Q3</b>	137	428	156	406
<b>Q4</b>	150	578	123	529

**Line Chart 1. Quarterly and cumulative totals for 2014-15 and 2015-**



**3.6** NSS has committed to the requirements set out in the Patient Rights (Scotland) Act 2011 and NSS policy is to acknowledge complaints within 3 working days and resolve complaints within the 20 working day timescale.

In 2015-16 the average response time to resolve complaints was 9.44 days, an increase on the 2014-15 figure of 8.59 days. This increase is due, in part, to the complexity of the complaints received, taking longer to resolve as well as the rise in number of complaints received. The responses and resolutions for cases in 2015-16 that met the 20 working day target was 96% compared to 98% in 2014-15.

There were 12 cases that were not resolved within the 20 working day target in 2015-16. This was due to a combination of factors including the complexity of cases, the inability to get hold of the complainant and staff resources at the time. This compared to 9 cases in 2014-15.

**Table 2. Handling Complaints – NSS Response times**

2015/2016	Q1	Q2	Q3	Q4	2015/16	2014/15
	April-June	July-Sept	Oct-Dec	Jan-Mar	Comparison	Comparison
<b>Average Response Time against Target Response Time of 20 days</b>	7.76	10.48	9.67	9.85	9.44	8.59
<b>% responses within target</b>	<b>98%</b>	<b>95%</b>	<b>98%</b>	<b>94%</b>	<b>96%</b>	<b>98%</b>
<b>No. of responses outwith target</b>	2	3	2	5	12	9

**3.7** NSS receives a significant number of complaints and feedback from complainants that are in relation to other NHS Boards and primary care providers. This has been proactively managed in relation to the new website, as detailed in the last quarterly report, and continues to be highlighted to other Boards via the NHS Complaints Managers and in the National Network.

**Table 3: Non NSS Complaints received in 2015-16 via the NSS Web form which are directed to the NSS Feedback mailbox**

Q1	Q2	Q3	Q4	Total
37	75	107	41	260

Feedback has suggested that complainants find it challenging to navigate around NHS Boards' websites. Therefore, complainants often NSS due to the perception that NSS is an umbrella body for the NHS.

**3.8** This section will now look in more depth at the areas of reported complaints. The first group of tables show the complaints received in SNBTS which relate to donors and patients. SNBTS are in contact with over 300,000 donors per year. In context, therefore, the number of complaints compared to the number of donations is very low.

**Table 4. Donor Complaints in relation to staff behaviour in the Scottish National Blood Transfusion Service 2015-16**

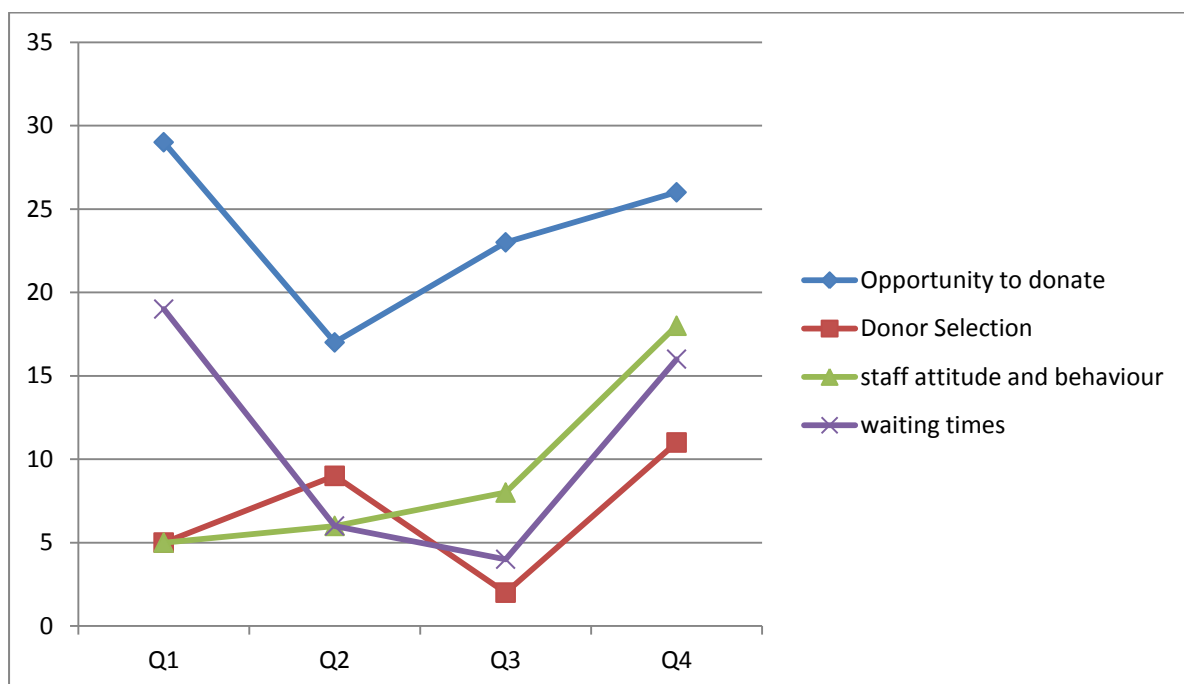
Type of Complaint	Q1	Same qtr 14/15	Q2	Same qtr 14/15	Q3	Same qtr 14/15	Q4	Same qtr 14/15
Staff Attitude and Behaviours	4	8	6	9	8	14	18	9
Voluntary Organiser Attitude and Behaviour	0	0	0	0	0	0	0	0
<b>TOTAL</b>	<b>4</b>	<b>8</b>	<b>6</b>	<b>9</b>	<b>8</b>	<b>14</b>	<b>18</b>	<b>9</b>

**3.9** Table 4 above shows the number of complaints NSS has received from blood donors in relation to staff attitude and behaviours at **36** for 2015-16. This is a decrease of 4 from **40** for 2014-2015. This is an important area for NSS as it one of our few patient facing services. It is important for NSS's reputation that donors always feel welcomed and valued. Facebook and Twitter followers who post comments expressing dissatisfaction with the service are encouraged to complete an on line complaints form.

**3.10** The table below highlights the categories of complaints received in SNBTS. In the 2014-15 and 2015-16 reporting periods SNBTS did not receive complaints in relation to several codes (code 8 Health and Safety, code 10 new regulatory changes, code 12 special needs, code 13 vexatious complainants, code 14 voluntary organiser and code 16 legal claims) and these have been removed from the table below.

Code	Type of Complaint	Q1	Same qtr 14/15	Q2	Same qtr 14/15	Q3	Same qtr 14/15	Q4	Same qtr 14/15
1	Opportunity to donate	29	4	17	5	23	10	26	13
2	Donor Selection	5	4	9	5	2	8	11	2
3	Opening Hours	5	1	3	0	1	2	2	3
4	Staff Attitude & Behaviour	5	8	6	9	8	14	18	9
5	Waiting Times	19	5	6	3	4	16	16	7
6	Donor Communications	7	9	4	8	8	13	4	7
7	Documents and Records	2	1	2	1	3	2	2	4
9	Bruising	7	6	4	3	2	3	2	4
11	Special Redesign/ change/disruption	1	1	0	3	0	1	1	1
13	Vexatious	0	0	0	0	0	0	0	0
15	Facilities (inc Parking)	1	1	0	0	0	1	2	1
	<b>TOTAL</b>	<b>81</b>	<b>40</b>	<b>51</b>	<b>37</b>	<b>51</b>	<b>70</b>	<b>84</b>	<b>51</b>

**Line Chart 2: Summary of the Key areas in Feedback and Complaints for SNBTS 2015-16**



**3.11** The increase in complaints relating to Opportunity to Donate in 2015-16 can be directly linked to the introduction of donor slots and donor appointments. The introduction of this service has been welcomed by many donors who like to book in advance. However, donors who arrive early for their appointments think they should be taken ahead of the appointment time. This has been challenging for the team who are using the slots to give to “walk in donors”



and keep the appointment donors to their allotted times. It can be perceived that the people who walk in to donate are being given preferential treatment. To assist staff in dealing with these situations, a full review of the donor communications is in progress (via letters and the website). In addition, the training materials for slots and appointments are being reviewed.

- 3.12** Within PCF, the majority of complaints relate to National Procurement, simply due to the nature of logistics part of the business.

**Table 6. National Procurement complaints from NHS Boards related to services provided by the National Distribution Centre (NDC) and fall into the following categories:**

Type of Complaint	Q1	Same qtr 14/15	Q2	Same qtr 14/15	Q3	Same qtr 14/15	Q4	Same qtr 14/15
Wrong/Confusing/Missing Information	0	0	1	0		0	0	0
Late/Wrong/No Delivery	0	0	4	0	3	0	1	0
Product Unsuitably packed (H&S Issues etc)	29 (8)	29 (5)	20 (8)	47 (8)	38 (15)	28 (5)	25 (4)	15 (3)
Supply Issue	10	10	9	9	9	7	1	8
Product Quality	0	0	126	4	121	20	3	0
Dirty Product	11	14	6	8	10	15	9	11
Out of Date Product	8	0	4	4	11	0	17	14
Tote/Cage Issues	11	14	4	0	8	20	6	7
Service	0	0	8	0	11	0	2	0
Subs	0	0	0	0	0	0	0	0
Pick Error	0	0	0	0	0	0	1	0
Other	20	13	11	6	9	8	0	9
Total	<b>89</b>	<b>80</b>	<b>193</b>	<b>78</b>	<b>220</b>	<b>98</b>	<b>65</b>	<b>64</b>

**Table 7. Procurement, Commissioning and Facilities – third party complaints**

Type of Complaint	Q1	Same qtr 14-15	Q2	Same qtr 14-15	Q3	Same qtr 14-15	Q4	Same qtr 14-15
Product Quality	186	180	126	138	121	119	120	116
Service	18	8	8	14	11	16	13	14
Transport Issues	0	0	1	0	4	0	0	
Late/Wrong/No Delivery	7	11	4	0	3	8	0	5
Supply Issues	11	15	5	10	9	8	6	5
Wrong/Confusing/Missing Information	4	7	1	5	0	0	1	7
Price	0	0	0	0	0	0	0	0
I.T/Systems	0	0	0	0	0	0	0	0
Product Unsuitably Packed (H&S Issues)	0	0	0	0	0	0	0	0
Other	8	6	11	13	6	19	1	9
Total	<b>234</b>	<b>227</b>	<b>156</b>	<b>180</b>	<b>154</b>	<b>170</b>	<b>141</b>	<b>156</b>

National Procurement (“NP”) monitors their complaints closely and where an adverse trend is identified, they will work with the supplier, and where appropriate the NHS Board, to develop and agree a recovery, correction action and improvement plan. As part of any containment and corrective and /or preventative action process, NP will issue a product alert or recall notice to NHS boards.

### **3.13 Practitioner and Counter Fraud Services (PCFS)**

PCFS received 26 complaints in 2015-16. These related to service delivery and complaints received from patients. The themes identified are summarised as follows:

- Website Information not being clear enough. The website information has been reviewed and improved for accessibility;
- Process delays for reimbursement of fees. The reimbursement of fees relates to a particular form and process and improvements have been made and implemented by PCFS;
- Dental patient registration. PCFS worked with the dentists in question to assist in the administration of new patients; and
- Refusal and or delay of dental treatment. PCFS agreed that some of the delays were unacceptable in certain cases and have put measures in place to prevent a recurrence.

### **3.14 Central Legal Office (CLO)**

CLO receives very low numbers of complaints and they have processes for dealing with those that relate to specific legal matters. Sometimes complaints are received in relation to matters over which CLO have no control, for example, the length of time or the outcome of the legal process. CLO received one complaint in 2015-16 which was in relation to staff attitudes and behaviours. This was investigated fully and no evidence was found to support the complainant’s allegation. The complaint was not upheld and the case was closed.

### **3.15 Human Resources and Occupational Health Services**

The Occupational Health Service provides services both internally and externally. They report very low numbers of complaints. Occupational Health received one complaint from in 2015-16 from a patient who had not agreed with the doctor’s report. This complaint was investigated and not upheld. The Head of Occupational Health Services reported this through the Clinical Governance Committee report.

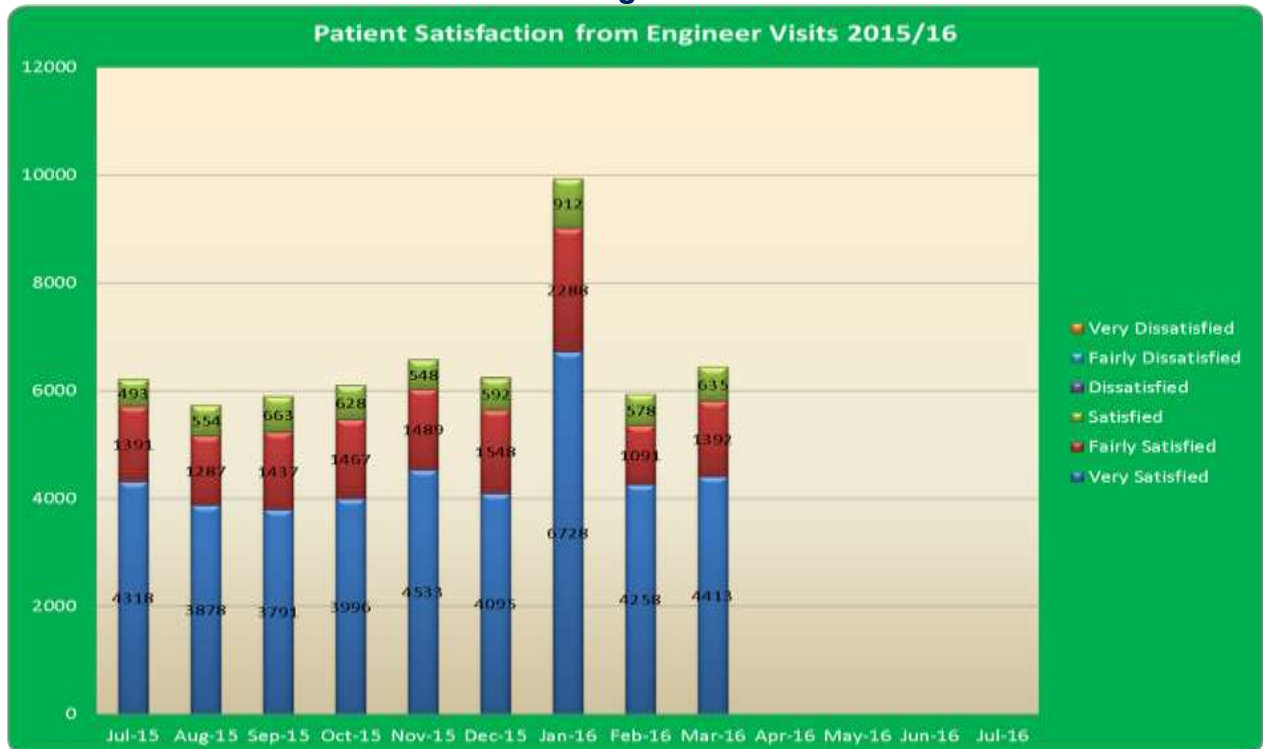
#### **4. The culture including staff training and development:**

- 4.1.** NSS is committed to effective stakeholder engagement and complaints management. Within this area, staff training and awareness is key. A complaints handling process cannot encourage effective feedback if the organisation does not demonstrate empathy and that it is listening. NSS has undertaken specific training in the following areas:-
- 4.2.** While SNBTS receive a relatively low number of complaints relating to service provision, the feedback is used to inform service improvement and development. During 2013/2014, complaints relating to staff attitude and behaviour had increased and this was a matter of concern for the management team. Customer Care training workshops were delivered to blood donor services teams in Aberdeen, Dundee, Inverness, Edinburgh and Dumfries. The objective was to develop Customer Care Standards that were real and relevant to staff and easy to remember. These Customer Care Standards compliment NSS's Values which were created by in partnership.
- 4.3.** As described earlier on in this report, the Strategy and Governance Directorate handles complaints and manages the complaints process across NSS. This Directorate is often the first contact for complainants. Staff have undergone awareness training on the person centred approach to handling feedback and complaints. This training includes how to manage difficult and challenging phone calls. This approach ensures that all feedback and complaints are handled consistently and professionally, and are escalated to the appropriate member of staff to handle and investigate.
- 4.4.** PCF have increased staff awareness of good complaints handling and categorisation over the course of the year. This work was highlighted to the Associate Director of Corporate Affairs and Compliance who shared it with the SPSO during the MCHP design process.
- 4.5.** Across the organisation, the "How Can I Help You" online learning modules provided by the National Education Board for Scotland (NES) are now available to all NSS staff via the Learnpro platform.
- 4.6.** The Head of Public Participation participated in the working group led by NES which had a remit to design and develop a suite of learning and development resources for NHS Staff to support the implementation of the MCHP. The outcome of this work will assist all Boards in training of staff in the new process.

## 5. Improvements to NSS services

- 5.1. The following areas have introduced improvements to services due to feedback and complaints received:-
- 5.2. In Customer Engagement and Development, having received feedback regarding the NSS Publications page, changes have been made to ensure that the documents that the member of the public was searching for have been placed in a section that will make them easier to find.
- 5.3. In Practitioner and Counter Fraud Services, the Dental service has used complaints and feedback to improve the prior approval process for dental treatment to reduce the delays experienced by patients receiving treatment.
- 5.4. In the 2014-15 Feedback and Complaints Annual Report NSS was provided with the results of the patient survey with the British Lung Foundation. These results showed that improvements could be made to the holiday service and to the electricity reimbursement service. Changes made to our contract as a result of this feedback now mean that patients have a single point of contact through our oxygen contractor and that the process for reimbursing patients has been streamlined, resulting in quicker payments to patients. We will formally be measuring the success of this later in the year but, anecdotally, this appears to be well received. Overall, the ongoing data relating to patient satisfaction levels with the Home Oxygen Service can be found in the slide below.

**Data Slide: Patient Satisfaction from engineer visits 2015-16**



## 6. Accountability and Governance

- 6.1. NSS has an Executive Lead Director for complaints, the Director of Strategy and Governance, who is supported by the Associate Director for Corporate Affairs and Compliance and the Head of Public Participation and Engagement. The team aim to ensure visibility of feedback and complaints at the highest level in the Board in order that performance and risk can be assessed and mitigated.
- 6.2. NSS has a clear reporting timeline for complaints. Quarterly complaints reports are presented to the relevant sub committees of the NSS Board as detailed in the diagram below. Each Committee carries out a scrutiny role in relation to the report. The sub-committees will address their areas of interest and receive details about the themes and trends. For example the NSS Staff Governance Committee will discuss the feedback and complaints in relation to staff. The Board are provided with the full report so have complete overview of all complaints and feedback received.
- 6.3. In developing key performance indicators for NHS Scotland in relation to the forthcoming Model Complaints Handling Procedure, it was recommended that quarterly reporting was retained. Three specific indicators relating to learning, complaint process experience and staff training were developed in order that learning could be demonstrated and improvements shown. These indicators are qualitative in nature, and may be difficult to benchmark. However they are fundamental to understanding how an organisation performs in this area. The other indicators developed were quantitative in nature and relate to number of complaints received, how many are upheld, and how many are dealt with in the stated timescales. It is hoped by having consistent indicators that Boards can benchmark performance and increase learning from each other.

### Hierarchy of Governance arrangements in NSS for Feedback and Complaints Reporting:



**Author:** Louise MacLennan  
Strategy and Governance Directorate  
NHS National Services Scotland  
T: 0131 275 7457  
Email: [l.maclennan@nhs.net](mailto:l.maclennan@nhs.net)