

# Annual Feedback Report

2023/2024



**What people have told us  
and how we have improved.**

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# Section 1: Introduction and overview

## Introduction

At NHS Golden Jubilee, we strive to ensure that every patient receives high quality, safe, effective and person centred care.

We value the role patient feedback plays in achieving this and recognise the importance of sharing feedback directly with clinical teams.

In this way, we celebrate successes and ensure when we do not get it right, that we respond quickly and learn from it.

This report describes the formal feedback we have received over the last year (2023-2024).

## Obtaining feedback from equalities and particular groups

We have several mechanisms in place to support particular groups in providing us with their feedback. These are detailed below:

- People with hearing or visual impairments can use accessibility options on our website.
- People whose first language is not English can access an interpreter or request written information in their own language or format of their choice.
- Patients can access support from our advocacy provider if they do not feel confident about making a complaint or highlighting their concerns.

Further information showing how we work in partnership with a variety of equalities groups can be found in our recently published Equality Outcomes Midpoint Report by visiting this [link](#).

Alternatively, you can visit the Equalities page on our website at:

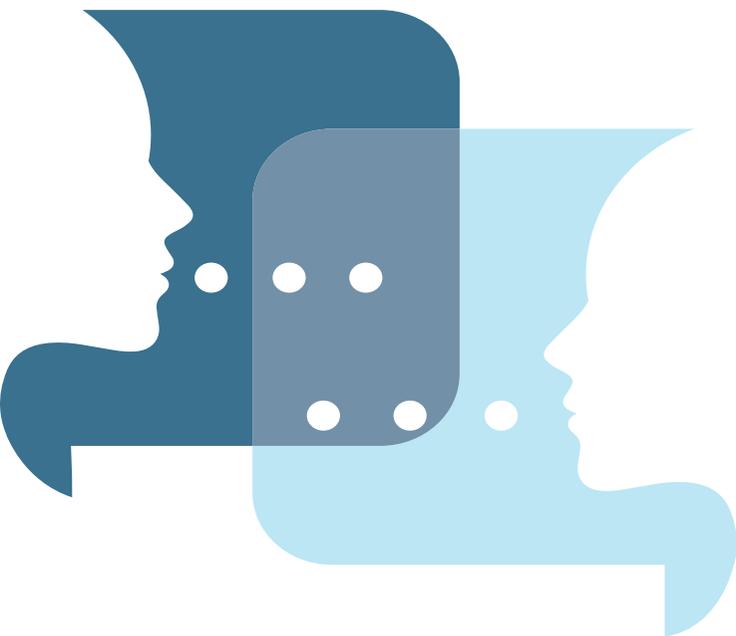
<https://www.nhsgoldenjubilee.co.uk/publications/reports/equalities>.

We do our best to make sure that everyone feels able to approach any member of staff with feedback and in turn that staff are confident in listening to and responding to this feedback.

We always encourage discussing any issues locally in the first instance, however recognise that in some cases patients may not wish to do so. In these situations, our volunteer supported feedback mechanisms are highly valuable in offering patients an opportunity to speak with someone outside the clinical team.

We also have feedback post boxes throughout the Hospital where patients can post feedback forms.

This can be done anonymously if they wish. There is support available from the Clinical Governance department in facilitating feedback discussions with patients and relatives.



## Helping people feel that their feedback is welcome

All of our feedback mechanisms are advertised across the Board in print and electronic formats. These are all easily accessible to people who may want to use them and can be requested in alternative formats of their choice.

Our website provides information on how people can provide feedback and we also regularly encourage this via our social media channels.



## Recording of feedback, comments and concerns

It is essential that all feedback is shared with those who deliver care, particularly anyone who is named personally. This will ensure they receive any personal thanks or recognition and allows them an opportunity to respond to any feedback.

Support and guidance is provided to clinical staff from our Senior Managers, Executives and Corporate Affairs and Clinical Governance teams to enable them to respond to feedback.

This streamlined approach means we have appropriate leadership and administrative support across our Board within a robust governance structure.

We have a central system on which all formal complaints, comments and compliments are captured and shared with local leads, allowing them to view or amend the records and share information with wider staff.

Feedback gathered from other methods including our Volunteer programmes (e.g. Meet and Greet and Mealtime Monitoring) and Caring Behaviours Assurance System (CBAS) is captured to support collation and feedback to the areas.

Feedback is included in regular reports to our services from the Clinical Governance Department to help inform our improvement focus.

## Volunteers and caring behaviours

There has been a post-pandemic review of CBAS and a wider conversation around Quality and how we record care experience. This has been taken forward by Elaine Kettings, Associate Nurse Director. The Care Experience Volunteers in the meantime continue to work with sections of the organisation in engaging with patients and their opinions.

We now have 11 placed pastoral care volunteers and 4 Patient Peer Support Volunteers

## Overview of formal feedback

During the year we received and logged a total of 645 formal feedback submissions. This is a 24% increase from 521 the previous year.

The chart on the next page details the methods by which feedback was received during 2023/2024. As shown, emails were the most common method used during this period.

Compliments continue to be the highest category of overall feedback received with 355 formally recorded in the year. This equates to 55% of all feedback received.

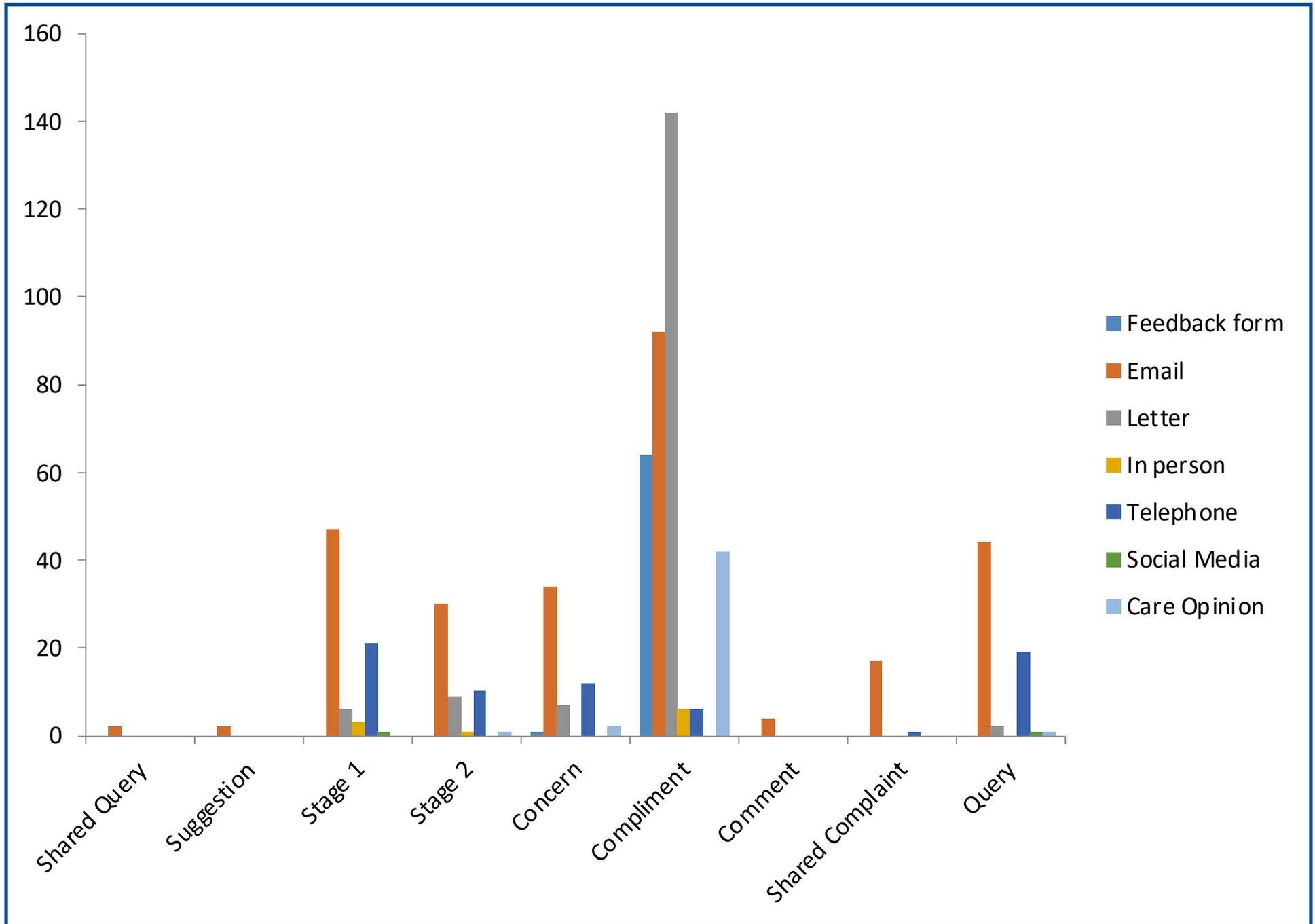


Chart 1: Methods of feedback

## Section 2: Feedback received in 2023/2024

### Compliments

As noted in the overview, there were 355 compliments logged. This is an 24% increase on previous year figures for 2022/2023.

The wards and staff members continuously receive thank you cards, letters and messages, along with general complimentary feedback on a daily basis, which is not formally logged.

Orthopaedics and Cardiac Services received the highest number of compliments; this has been consistent for orthopaedics. Some examples of compliments received:

- Patient is absolutely delighted with their Right knee and says it has been “life changing”.
- CT scan was a very nice experience. Staff were helpful, friendly and lovely. Radiographer so caring and attentive.
- Patient wishes to thank Endoscopy for their for their kindness, respect and utter professionalism.
- Patient wishes to thank all staff - Consultants to Domestic staff for all their care during Thoracic Surgery.
- Deceased patient’s daughter wishes to thank staff for the care and compassion her mother received prior to her death as this was amazing and the Scottish Pulmonary Vascular Unit (SPVU) team will live in her heart forever.

### Care Opinion

Care Opinion allows the public to provide feedback via an anonymous online approach. When a story is added staff are alerted to allow them to review and respond accordingly.

During the period of 2023/2024 there were 50 Care Opinions stories, which is a 47% increase since 2022/2023, where 34 were received.

The majority, similar to previous years were positive with 46 compliments. There were 2 concerns and one query. One was progressed via the stage 2 CHP.

### Concerns

In 2023/2024, 56 concerns were received, this is a 16% decrease on the previous year 2022/23.

The chart below summarises the top 5 concern categories in 2023/2024. Waiting list and clinical treatment were the top 2 categories. Waiting times was also in the top 2 categories for concern in the previous year, 2022/2023. Additionally, further concerns included communication received (7 concerns), cancellation of surgery / procedure and transport received making up 4 of the concerns.

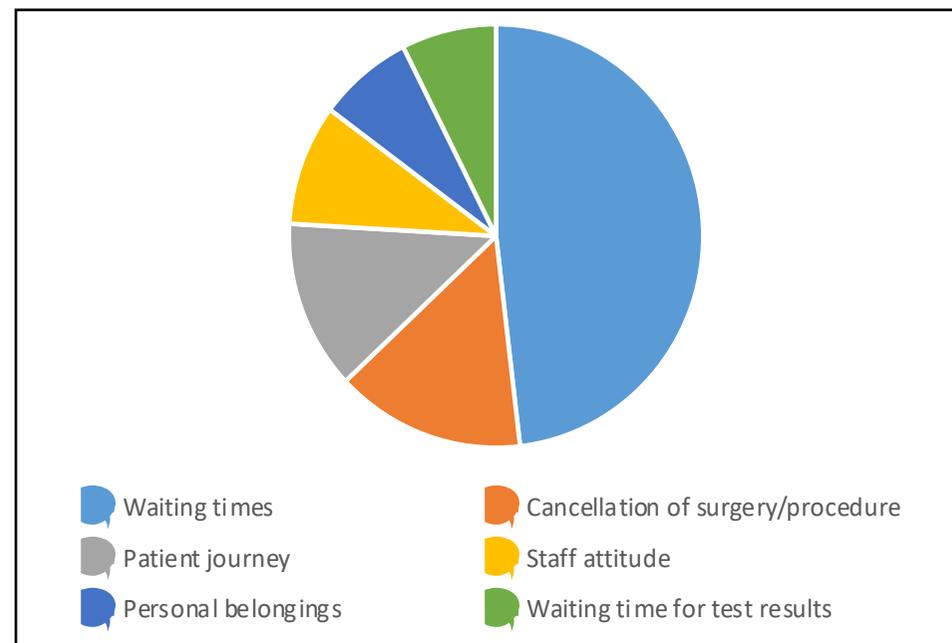


Chart 2: Concerns with themes 2023/24

## Digital communications – feedback and engagement

The Marketing and Communications Team monitor and respond to all comments, questions and reviews received via our corporate social media channels as well as emails sent to the Comms and Comms Enquiries mailboxes.

The Team manage 21 digital platforms including websites and social media accounts such as X (formerly Twitter), Facebook, LinkedIn, Instagram, and YouTube.



Feedback and engagement				
Combined KPIs	Target 2023/2024	Full Year 2022/2023	Full Year 2023/2024	Change
Positive engagement score: a unique reputation score by collating all interactions, reviews and feedback from social media, emails and media coverage.	≥ 95%	99.87%	<b>99.93%</b>	<b>▲ 0.06pp</b>
Social posts	n/a	2,763	<b>3,664</b>	<b>▲ 32.6%</b>
Social follower growth	≥ 2.4%	31,625	<b>37,891</b>	<b>▲ 19.8pp</b>
Social reach	increase	6,429,022	<b>7,193,169</b>	<b>▲ 11.9%</b>
Social engagement rate	≥ 2%	6.77%	<b>6.18%</b>	<b>▼ 0.6pp</b>
Films	n/a	131	<b>161</b>	<b>▲ 22.9%</b>
Film views	increase	305,482	<b>444,117</b>	<b>▲ 45.4%</b>
Web visitors	increase	338,764	<b>503,362</b>	<b>▲ 48.6%</b>

The Marketing and Communications Team are working with our patients on our patient information and how we will provide information in a format of their choice that is clear, concise, accessible and easy to understand.

We have significantly increased our output of film production over the past 12 months. We have produced 22.9% more videos to support the organisation than in 2022/2023, with an accompanying 45.4% increase in views (up from 305,482 to 444,117.).

There has been a continued rise in views of our patient information and experience videos, which continue to be extremely popular and beneficial across our channels. This has played a significant role in our Youtube channel hitting the incredible landmark of 1 million views, a figure more than double that of some significantly larger NHS Scotland Boards.

For further information see the Marketing and Communications Annual Report 2023/24.

## Section 3: Formal complaints

### Overview

During 2023/2024 there were 128 complaints received (Stage 1 (77) and Stage 2 (51)). There has been an overall increase of 9% compared to the previous year, which is expected due to services resuming to a more pre pandemic level.

### Formal complaints

The chart below provides an overview of the formal complaints received by month over the last 3 years:

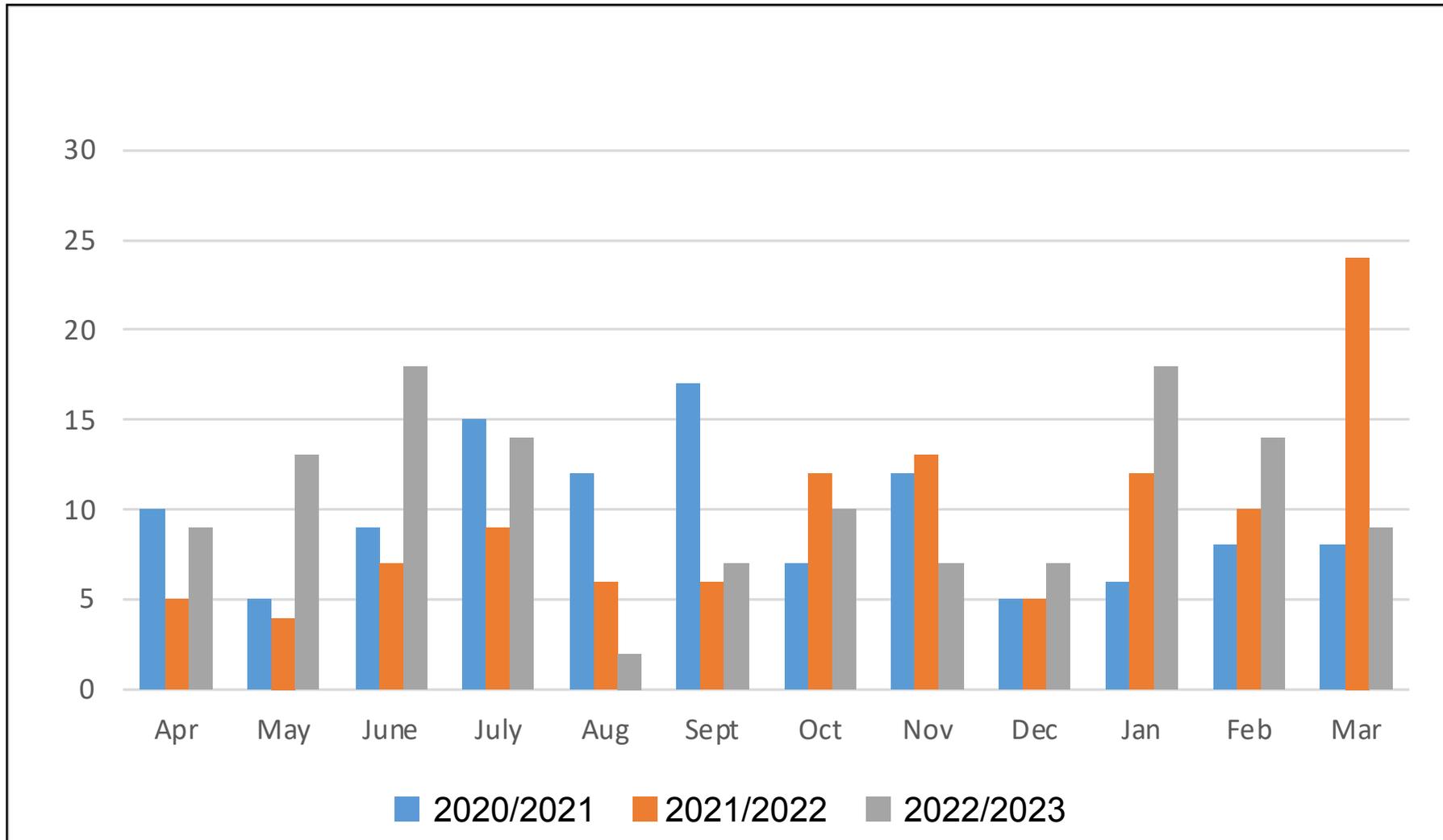


Chart 3: Complaints received per month / year 2021-2024

Table 1 provides a breakdown of the formal complaints received in 2023/2024 by quarter noting the numbers of complaints, outcomes, percentage that were closed within timescales and the average responses times:

<b>Formal complaints outcomes by quarter</b>							
	<b>Total received</b>	<b>Stage</b>	<b>Fully upheld</b>	<b>Partially upheld</b>	<b>Not upheld</b>	<b>Closed within 5 days / 20 days</b>	<b>Average response times</b>
<b>Q1</b>	<b>24</b>	<b>Stage 1 = 24 *</b>	<b>10</b>	<b>10</b>	<b>3</b>	<b>17 (74%)</b>	<b>5 days</b>
		<b>Stage 2 = 16 **</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>7 (58%)</b>	<b>30 days</b>
<b>Q2</b>	<b>21</b>	<b>Stage 1 = 11 ***</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>4 (50%)</b>	<b>6 days</b>
		<b>Stage 2 = 12</b>	<b>0</b>	<b>8</b>	<b>4</b>	<b>1 (8%)</b>	<b>65 days</b>
<b>Q3</b>	<b>29</b>	<b>Stage 1 = 16 ****</b>	<b>8</b>	<b>1</b>	<b>6</b>	<b>11 (69%)</b>	<b>6 days</b>
		<b>Stage 2 = 8</b>	<b>1</b>	<b>7</b>	<b>0</b>	<b>2 (25%)</b>	<b>43 days</b>
<b>Q4</b>	<b>46</b>	<b>Stage 1 = 26 *****</b>	<b>12</b>	<b>4</b>	<b>8</b>	<b>22 (92%)</b>	<b>4 days</b>
		<b>Stage 2 = 15 *****</b>	<b>0</b>	<b>7</b>	<b>3</b>	<b>2 (13%)</b>	<b>32 Days</b>

**Table 1:** Formal complaints outcomes by quarter

<b>Key</b>	
Q1*	1 complaint was withdrawn
Q1**	2 were withdrawn, 1 no consent obtained and 1 progressed to SAER (n=12)
Q2***	1 was withdrawn and 2 had no consent obtained (n=8)
Q3****	1 had no consent obtained (n=15)
Q4*****	1 complaint was time-barred, 1 complaint had no consent obtained and 1 complaint was still open at the time of reporting.
Q4*****	1 complaint was time-barred, 1 complaint was withdrawn and 4 were still open at the time of reporting

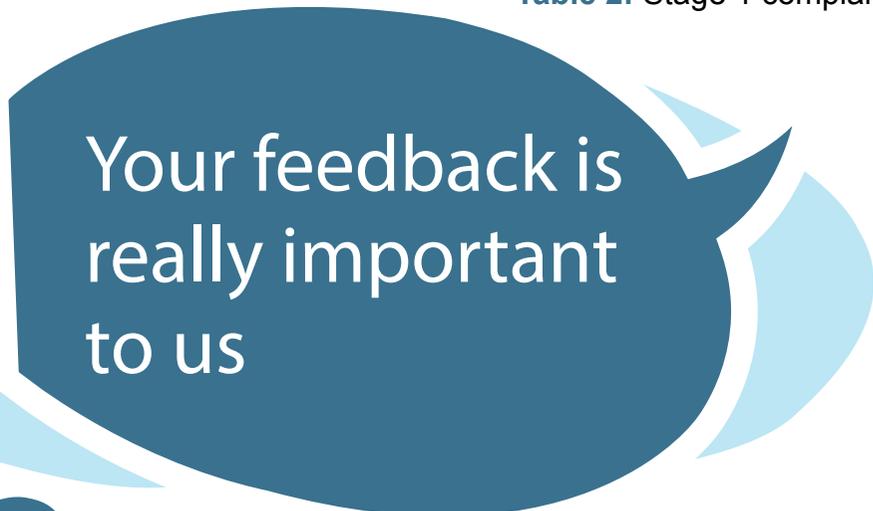
## Stage 1 complaints

53 (68%) Stage 1 complaints were responded to within 5 working days timescales. 2 Stage 1 complaints were withdrawn, there were 4 complaints where consent was not obtained and 1 which was timebarred.

There were 17 complaints where an extension was granted for various reasons; all of these were responded to within the agreed 10 working days:

2023/2024 complaints response	Overall
Number of formal complaints	77
Number closed within 5 days	53 (69%)
Number closed outwith 5 days / number where extension was granted	17 (22%)
Number of withdrawn / time-barred / no consent received	7 (9%)

**Table 2:** Stage 1 complaint response



Your feedback is really important to us

Examples of reasons for extensions include:

- Consultant off on leave so service manager unable to speak with Consultant until back to see whether change of consultant possible.
- Staff investigating on annual leave and then complex investigation requiring multiple teams input only realised once investigation had come back from others.
- NHS Golden Jubilee (NHS GJ) had to wait to speak with Greater Glasgow and Clyde (GGC) to get authorisation to add patient to list.
- Service Manager unable to speak with complainant despite multiple attempts as no answer on phone.

There were seven Stage 1 complaints that were escalated to Stage 2. The reasons for these included the complexity of the investigation required, complainant unhappy with the outcome of stage 1 complaint, and some were better investigated through the stage 2 process so were escalated and responded to appropriately.

Within the Stage 1 complaints, waiting list (n=22) and cancellation of surgery / procedure (n=21) were the highest themes. Staff attitude (n=8) was also in the top 3. Waiting list (n=13) and cancellation of surgery/procedure (n=13) and staff attitude (8) all were in the top 3 in 2022/2023.

## Stage 2 complaints

We always aim to provide complainants with their response within timescales, this has evidently been a significant challenge this year, similar to 2022/2023 only 22% of Stage 2 responded to within timeframes as shown below:

2023/2024 complaints response	Overall
Number of formal complaints	<b>50</b>
Number closed within 20 days	11 (22%)
Number closed outwith 20 days	34 (67%)
Number of withdrawn / time-barred/ no consent received	5 (10%)
Number progressed to Significant Adverse Event Review (SAER)	1 (1%)

**Table 3:** Stage 2 complaint response

During 2023/2024 there have been many contributing factors that caused delays to Stage 2 responses. The complaints that were received were more challenging and complex.

Throughout 2023/2024, the Clinical Governance team have been working alongside the Divisional Management teams, Clinical Leads and Executives Leadership Team with a focus on response timescales. This aims to ensure that the quality of the response remains high, whilst endeavouring to provide complainants with a more timely response to their concerns.

This information is reported monthly at confirming challenge and the Executive Leadership Team meetings to identify areas for improvement. Following on from a period of challenging complaints response performance, a Clinical Governance Improvement Project focusing on the Complaints response system commenced in January 2024. The project is ongoing and is estimated to last up to 9 months.

Our longest response time was 147 days within Quarter 2. This complaint was complex and related to a joint SAER which was undertaken by NHS GGC and NHS GJ. There were also questions raised by the Divisional Management Team and Medical Director which required further investigation, adding further delays to the process.

There were 3 fully upheld complaints, 25 partially upheld and 13 not upheld. 2 complaints were withdrawn where the patient passed away and no contact could be made with their family. The other complaint was withdrawn as the patient wife decided they no longer wished to complain.

During 2023/2024 there was one complaint that was escalated to a Significant Adverse Event Review (SAER). This was upheld.

1 Stage 2 complaint was re-opened for a family meeting to take place.

It must be noted that the referrals to the Scottish Public Services Ombudsman remain low (Eight when n=51, investigated complaints, SAER investigations and time barred). This suggests that although the complaint responses were over timescales, the complainants appeared satisfied.

## Formal complaint themes

During 2023/2024 the top three highest themes received were Clinical Treatment (n=67), Cancellations of surgery / procedure (n=42) and waiting list (n=42).

Over the past five years, Clinical Treatment has been consistently the highest theme. Due to ongoing the impact of the pandemic, it was expected cancellations of surgery/procedure and waiting lists themes would be within the highest categories within 2023/2024.

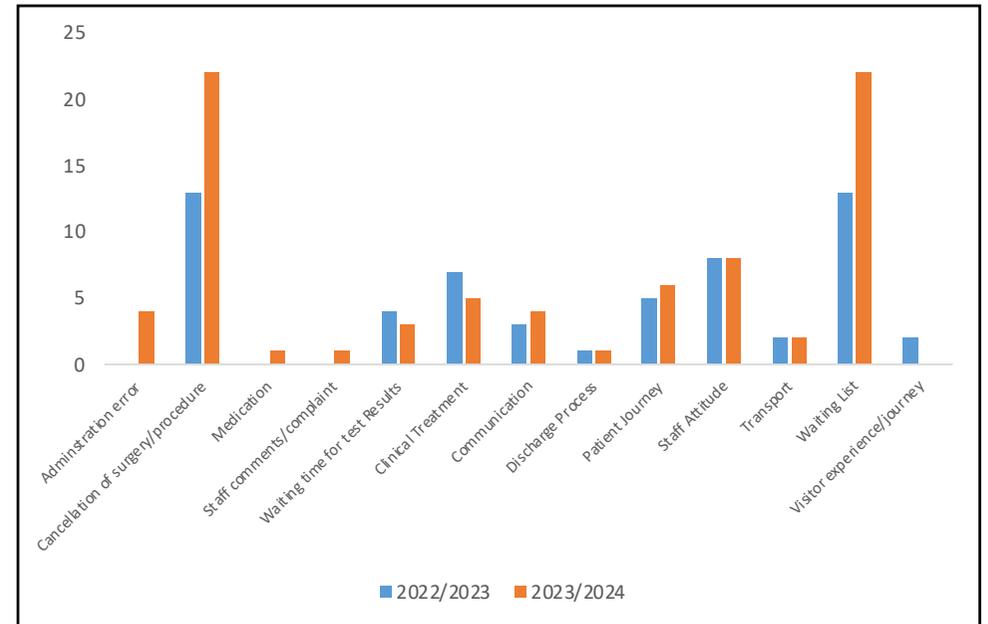
Orthopaedic services had the highest amount of complaints with 14 relating to waiting list and 8 relating to clinical treatment.

Cardiac Services and Interventional Cardiology are also within the top 3 services named. Cardiac Services highest was cancellation of surgery/procedure (8) and Interventional Cardiology was Clinical Treatment (6). These 3 are the largest services within NHS Golden Jubilee and were also the top 3 services in 2020/2021, 2021/2022 and 2022/2023.

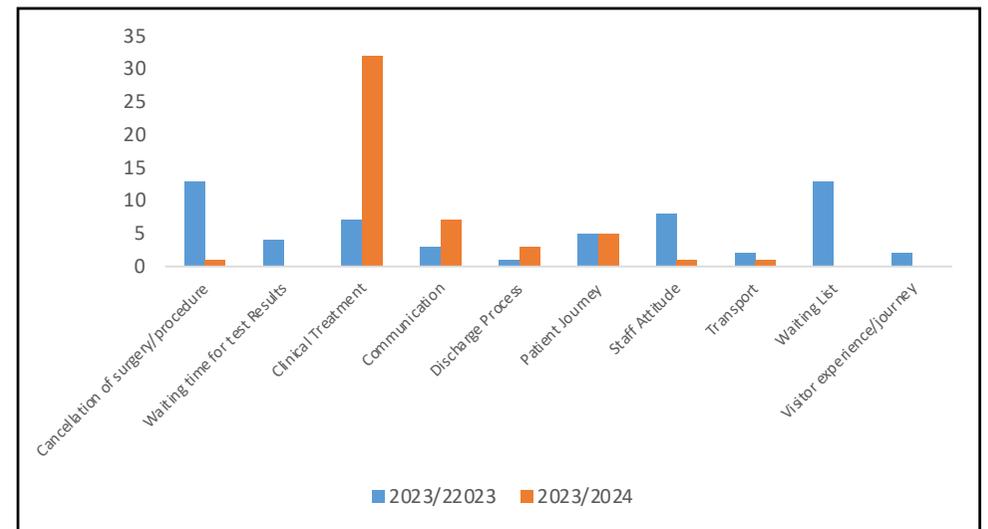
The charts below shows the toptthemes comparison for 2022/2023 and 2023/2024.

During 2023/2024 cancellation of surgery/procedure had the highest upheld complaints (n=9), with staff attitude (n=5) and patient journey (n=5). Clinical Treatment (n=15) was the highest category in partially upheld complaints.

The charts on the right show a breakdown of all themes via stage 1 and stage 2.



**Chart 4:**  
Themes of all complaints stage 1



**Chart 5:**  
Themes of all complaints stage 2

## Scottish Public Services Ombudsman (SPSO)

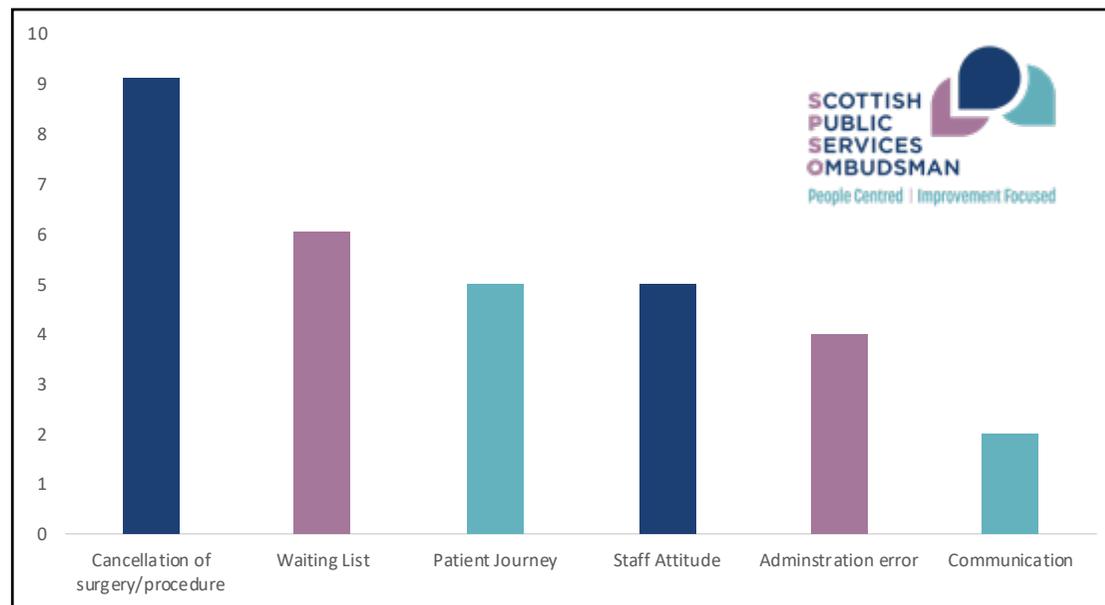
During 2023/2024 NHS GJ had 8 cases referred to the Scottish Public Services Ombudsman which is 15% of all cases. 1 of the cases was not upheld by the SPSO and the other 7 cases were not progressed any further.

### Learning from complaints

NHS GJ appreciates all feedback to the Hospital as this helps us improve our services for our patients and visitors. Where complaints are upheld, a full apology is given and learning is identified and shared widely within the teams. Where it is required, this is also shared via the Clinical Governance Service meetings.

The following is a summary of some of the improvements to the service from feedback received during 2023/2024:

- Clear signage to be added to the doors of patients' rooms, defining that Cardiac Monitoring should never be interrupted.
- Reason for cancellation process to be strengthened to ensure reason for surgery not going ahead is consistently documented.
- Staff attitude to be addressed at upcoming team brief to ensure attitudes comply with NHS GJ values.
- Team to review their communication with families to consider ways in which communication can be improved to ensure families are fully informed of a patient's condition and any changes.
- Staff were reminded to be more mindful of noise and conversations, efforts should be made to create a quiet and comfortable environment particularly during nightshift.



### Complaint process experience

During the 2021/2022, 2022/2023 and 2023/2024 the decision was taken to scale back the complaints process experience questionnaires, mainly due to the previous response rates as noted in the annual feedback report (2021 / 2022).

We continue to make contact via telephone where possible with all complainants to discuss concerns and fully understand the key issues.



## Section 4: Staff awareness and training

During 2022/2023, 400 staff completed the online NHS GJ induction e-Learning module. There was also a 'challenging conversations' course available to all staff, with 23 people attending the all staff session and 41 attending the managers session.

All staff have the availability to request a face to face training session for our datix incidents and feedback modules. During 2022/2023 there were 35 face to face training sessions held.

Senior Charge Nurse training sessions are now back to being face to face, where Clinical Governance attend to discuss incidents, feedback (managing and investigating appropriately) and clinical effectiveness.

We take all complaints seriously

We would be very grateful if you could give us some more details to help us get your feedback to the right people.

Where did you attend? (ie. clinic/ward/service)

When did you attend?

What did you attend for?

Are you:  
Patient  Carer  Friend/relative

We do review and where possible action all feedback received. We would really like the opportunity to follow up with you personally to find out more details or thank you and let you know what we have done in response. It would be great if you could give us your personal details to allow us to do this but if you'd prefer to submit this form anonymously, that's ok too.

Name:

Contact number:

Address:

Patient Feedback  
Freepost RSCX-LTEC-RESJ  
Golden Jubilee Foundation  
Beardmore Street  
Clydebank  
G81 4HX

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### Volunteer supported feedback

There were no specific requests during 2022/2023 for volunteer support to conduct any Quality Walk Rounds or input to service design consultations.

It is anticipated that the volunteers will play a part in conducting Interior Design Surveys prior to the opening of phase 2 later in the year.

# Feedback form – tell us what you think

Scan the QR code to fill out an electronic form or complete this paper form and return it to the address below



**1. Publication name:**

eDigest  Jubilee Life  Staff bulletin  Team Brief  Other  \_\_\_\_\_

**2. Issue number/date:** \_\_\_\_\_

**3. Date:** \_\_\_\_\_

**4. Did you find this publication interesting?**

Very  Quite  A little  Not very  Not at all

**5. Did you find this publication easy to read and follow?**

Very  Fairly  A little  Not very  Not at all

**6. How much of this publication did you read?**

All of it  A general browse  Only the sections that interested me  Not at all

**7. If you didn't like it, can you tell us why not:**

**8. How do you think we could improve this publication?**

**9. Do you have any other comments?**

**10. Please rate your overall satisfaction with this publication:**

★     ★★     ★★★     ★★★★     ★★★★★



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