

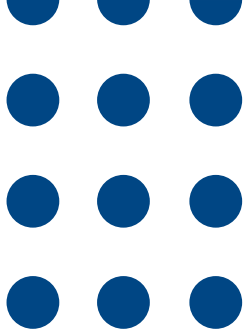


# Feedback, Compliments and Complaints Annual Report

**April 2020 to  
March 2021**



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# 1. At A Glance 2020 / 21



**98%** of the less complex complaints were resolved within the **5** working day target.

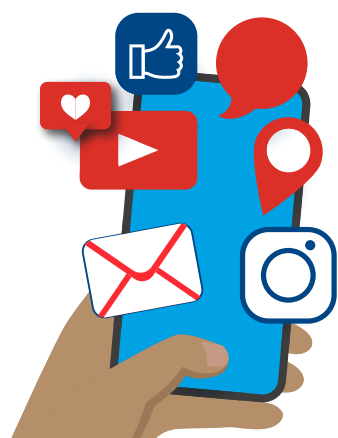
**91%** of the complex complaints were resolved within the **20** working day target.



In 2020 / 21 we received **314** complaints, a **26% decrease** on 2019 / 20.



Customer satisfaction scores are on average **77%**. Central Legal Office continues to be industry leaders in customer satisfaction with a score of **98%**.



NSS received positive feedback and compliments about our services throughout 2020 / 21 with 190 positive feedback and compliments.



In 2020 / 21 the Scottish Public Services Ombudsman (SPSO) received 3,130 complaints — out of those **3** related to NSS.



The NSS Twitter account has **13,300** followers and the SNBTS Facebook page has **73,500** followers. Both of these accounts provide information about our services and initiatives.

## 2. Introduction

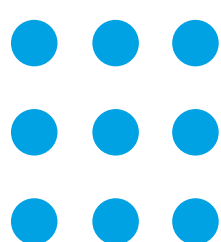
This report provides the summary of the activity surrounding feedback, comments, concerns and complaints received by NHS National Services Scotland (NSS) in the period from 1 April 2020 to 31 March 2021.

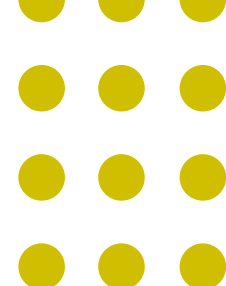
Throughout the year we have used feedback, comments and complaints to improve our services and continue to manage and handle complaints and feedback well within our KPIs.

Feedback and complaints are received directly by the Strategic Business Units (SBUs), directly into the Strategy, Planning and Service Transformation Directorate via the feedback mailbox, the address is clearly displayed on the NSS website. Those submitted via the web are routed to the generic NSS Feedback mailbox. All feedback and complaints are handled in line with the model handling complaints procedure (MCHP).

This report will be reviewed by Healthcare Improvement Scotland (HIS) and comments on it will be provided. These comments will be reported on in due course, together with any improvements required.

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 assist in identifying service improvement. This requirement has been embedded in legislation and recognised by HIS 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 — examples of this can be found within the report.





## 3. Our services

NSS is a national NHS Board operating right at the heart of NHS Scotland and our role extends across the wider public sector. Through our services we provide invaluable support and advice. Our services include:



### COVID-19 response

Manufacturing, sourcing, supply and distribution of key materials for COVID-19 testing, management of blood screening, blood donation, and development of convalescent plasma, supporting the at-pace establishment of the NHS Louisa Jordan Hospital and the implementation of the National Contact Centre (NCC).



### Specialist healthcare

Providing specialist clinical services, population screening, national network management services.



### National Procurement

Strategic sourcing, commercial services, procurement services, warehouse operations, supply chain, distribution, fleet management and ward product management.



### Programme management

Portfolio management, programme and project delivery, programme assurance and programme management office.



### Facilities

Capital projects, estate asset management, equipping services, engineering, environment and decontamination, facilities management.



### Legal

Litigation, employment, commercial property and commercial contracts.



### Digital and Security

Centre of excellence for digital, security, data and technology, delivering trusted and secure digital solutions.



### Blood, tissues and cells

Blood tissues and cells, clinical services, research, development and innovation, training, testing, quality assurance and regulatory compliance.



### Practitioner services

Pharmacy, medical dental and ophthalmic.



### Counter fraud

Fraud prevention, fraud detection, fraud investigation.



# 4. Encouraging and Gathering Feedback

We engage regularly with the Community Engagement work stream (formerly known as Scottish Health Council) of Healthcare Improvement Scotland to continuously review and update the methods that we use to seek and gather feedback. It is recognised that as a national mostly non-patient facing organisation, the approaches taken may differ from those in a territorial NHS Board and indeed other National Boards in Scotland.

NSS undertakes an annual customer engagement index exercise, which tracks customer satisfaction, customer advocacy and customer effort. This enables us to benchmark our performance against the industry standard. The survey is summarised as part of our planning approach and all parts of the organisation are required to deliver and implement a customer action plan based on the results of their surveys.

The Customer Experience Team has analysed the qualitative feedback received through the annual customer satisfaction survey. Themes from the survey relating to external customer feedback are split into two areas: positive feedback and areas for improvement:

- 1) We received positive feedback on team behaviours, how supportive we are, the way we respond and our efficient customer focus.
- 2) Areas that customers have asked us to improve include being more consistent, better clarity regarding roles, offering tailored support, providing more up to date information, communication, simplification and online services.

The following charts detail our customer satisfaction, customer advocacy and customer effort score for 2020 / 21 and how our services have performed against the NSS target.

**NSS has exceeded the industry standards for the public sector in all three areas as determined by The Institute of Customer Service in their annual UK Customer Satisfaction Index (UKCSI).**

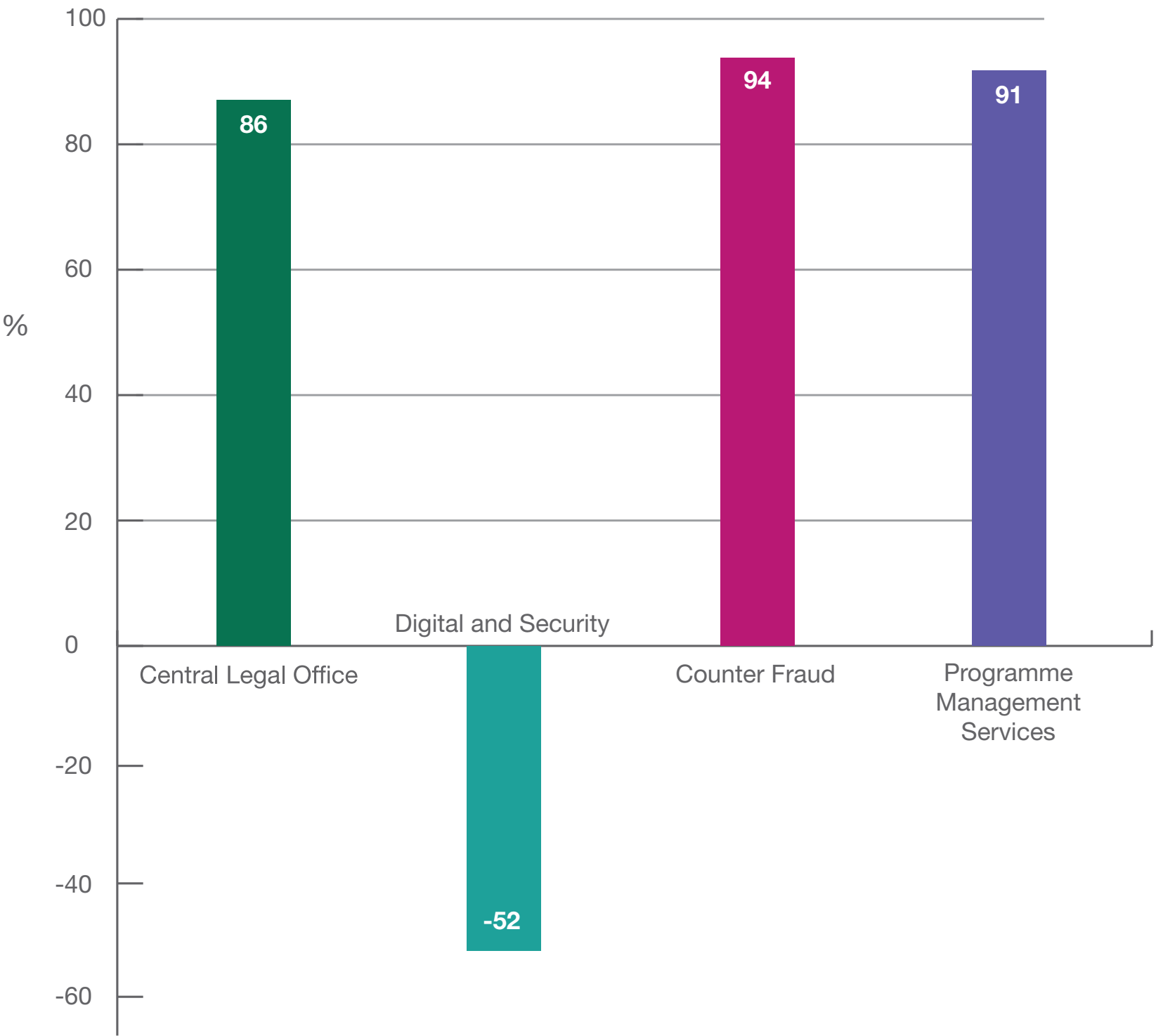
**The targets for the Customer Index are Customer Satisfaction 70% Advocacy 0% and the Customer Effort Score 62%.**

The Advocacy benchmark is at the ‘state of the nation’ UK level. This includes sectors like automotive, banks, insurance, leisure, public services, retail, telecommunications, tourism, transport and utilities.

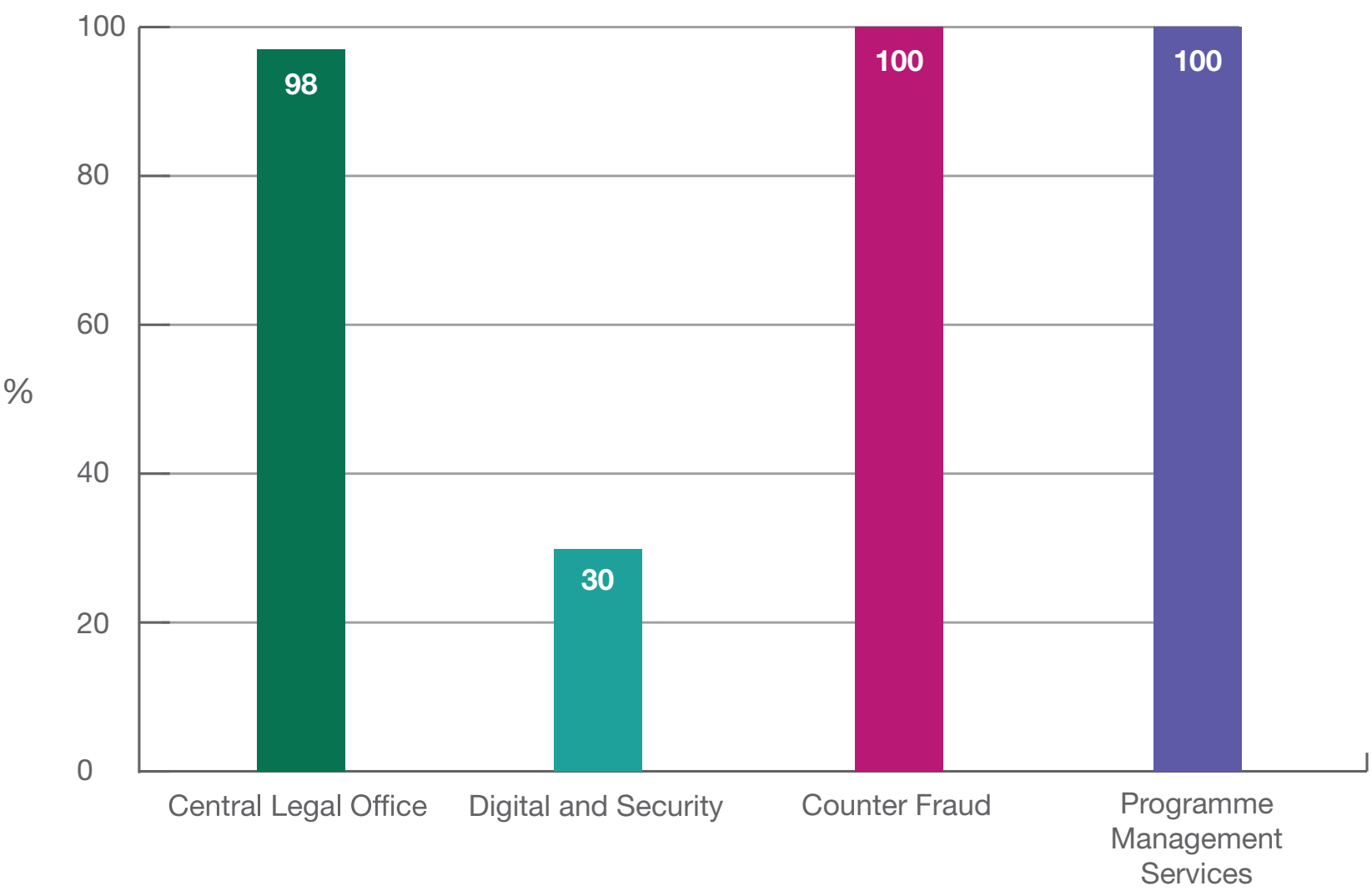
The Customer Satisfaction benchmark is at Public Services (national) level.



# Advocacy



# Customer Effort



**Customer Engagement Index Metrics are calculated using the following methodology:**  
**Customer satisfaction** - The calculation is the number of respondents answering 7 - 10 on the scale to the question 'Overall how satisfied are you with NSS?'. **Advocacy** - The calculation is the number of respondents answering 9 - 10 to the question 'How Likely are you to recommend NSS to a colleague/associate' minus the number respondents answering 1- 5. **Customer Effort Score** - The number of respondents answering 7 - 10 to the question 'How easy is it to do business with NSS?'.



Our strategic business units continue to monitor all feedback and are recording compliments received. The Central Legal Office (CLO) regularly achieves customer satisfaction scores in the high 90's and in 2020 / 21 achieved 98%. They have developed an engagement approach over a period of time that allows them to capture and act on feedback in a way that is positively received by clients.

Each September CLO issues a client survey to capture feedback and comments, with each return read and reviewed by the CLO Director. If any of the comments contain constructive feedback or concerns that need to be addressed, the Director discusses it with the relevant Head of the Department. A decision is then made about how best to follow up and resolve any concerns – which may involve contacting the person who made the comment. CLO believes it is important to encourage honest feedback and not to make the person who gave it feel uncomfortable. Additionally, the Director also visits clients on a regular basis to discuss any additional feedback and/or points they want to raise.

### The themes for positive SNBTS feedback focus on

the good attitude, professionalism and compassionate care and attention given to donors by the donor services teams at the donor sessions.



### The themes for PCF focus on

the hard work of teams in the National Distribution Centre and Health Facilities Scotland.



The suggestions provided by blood Donors range from increasing the opportunity to donate and improving associated processes, such as staff communication and the online booking portal.

## 5. Encouraging and Handling Complaints

We design our responses to complaints to ensure complainants feel that their views are valued and handled appropriately and that we will take on board what they have to say.

This report outlines the complaints received in the following NSS Strategic Business Units and Directorates:

- Scottish National Blood Transfusion Service (SNBTS)
- Procurement, Commissioning and Facilities(PCF)
- Practitioner and Counter Fraud Services(PCFS)
- Central Legal Office (CLO)
- Corporate Services

NSS SBUs have fully implemented the NHS MCHP and will continue to handle complaints in accordance with this guidance. SBUs are fully supported to understand the methods for obtaining and processing feedback in these areas of NSS where no or very few complaints are received, as part of the model complaints handling procedure. Different areas of NSS feature in the quarterly reports and improvement plans, where required.

Three NSS complaints have been referred to the Scottish Public Services Ombudsman (SPSO) in 2020 / 21, none of which were upheld.

**In 2020 / 21 NSS received 314 complaints, a 26% decrease on the previous year (426). We resolved 98% of complaints received and the average response time was 9.8 days.**



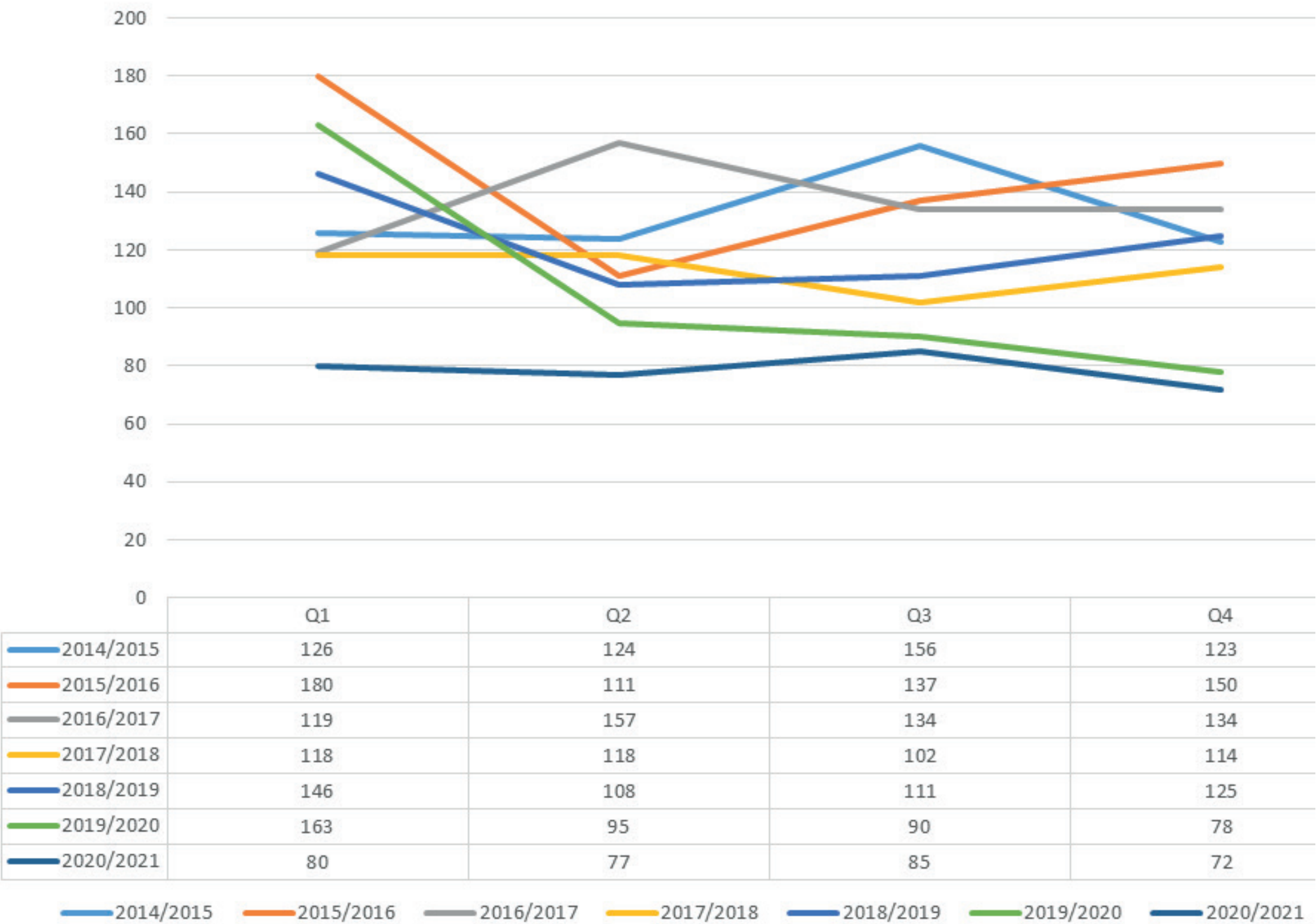
An online platform for handling complaints in ServiceNow was developed in 2019 / 20 and training provided to complaint leads in the NSS SBUs. This portal allows leads to input their data as they receive it. This gives real-time recording for complaints, feedback or concerns and as such there has been a significant improvement in the time taken to respond to these complaints, which may explain the decrease in complaints. Further development of the platform was needed towards the end of 2019 to meet the needs and requirements of Procurement, Commissioning and Facilities (PCF) and in particular the National Distribution Centre (NDC), however unfortunately due to the pandemic this was unable to go live as planned. This remains the position.

**Table 1 Quarterly and cumulative totals for 2020 / 21 with a comparator with 2019 / 20**

2020 / 21			2019 / 20	
	Quarterly Total	Cumulative Total	Quarterly Total	Cumulative Total
Q1	80	80	163	163
Q2	77	157	95	258
Q3	85	242	90	348
Q4	72	314	78	426

**Figure 1 Quarterly and cumulative totals for 2014 / 15, 2015 / 16, 2016 / 17, 2017 / 18, 2018 / 19 and 2019/ 2020**

## Quarterly Totals for Complaints Received 2014 - 21



NSS continues to commit to the requirements set out in the new NHS MCHP. NSS policy is to acknowledge complaints within three working days; resolve less complex complaints within five working days and resolve more complex complaints within the 20 working day timescale.

In 2020 / 21 NSS met all of the KPI requirements set out in the NHS MCHP. On average our response time for less complex complaints was

**2.78 working days against a target of five days. For more complex complaints, our average response time was 10.89 working days against a target of 20 days.**

Table 2 Handling Complaints – NSS Response times

2020 / 21	Q1 April-June	Q2 July-Sept	Q3 Oct-Dec	Q4 Jan-Mar	2018 / 19 Comparison	2017 / 18 Comparison
Average Response Time against Target Response Time of 5 working days (less complex)	3.25	2.85	2.50	2.50	9.2	3.25
Average Response Time against Target Response Time of 20 working days (more complex)	11.04	10.50	12.50	9.50	10.8	11.04
% responses within target (20 working days)	96%	94%	88%	88%	97%	97%
No. of responses out with target	3	5	10	9	0	0
Quarterly Complaint Totals 2020 / 21	80	77	85	72		

The number of complaints that were out with the target refer to stage 2 more complex complaints. This can be explained by the complaints handling times being recorded in days and hours and the majority of these were out with target by hours rather than a number of days.

Feedback and Complaints by Service

NSS continues to receive 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 previous annual reports).

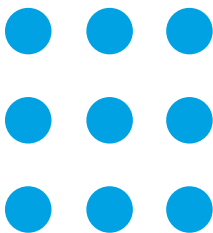
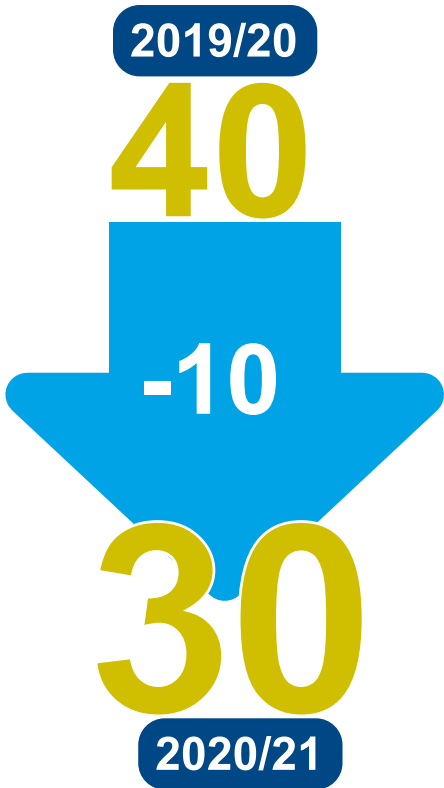
This section looks in more depth at the areas of reported complaints.

Staff Related Complaints

Staff related complaints remain consistently at low levels.

The number of complaints NSS has received from blood donors in relation to staff attitude and behaviours is 30 for 2020 / 21. This is a decrease of 10 from 40 for 2019 / 20.

This is an important area for NSS as it one of our few public facing services with contact with 300,000 donors each year.



## Scottish National Blood Transfusion Service

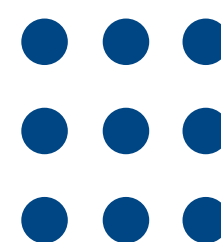
As one of our few public facing services, it is important for NSS' and SNBTS's reputation that donors always feel welcomed and valued. SNBTS is in contact with over 300,000 donors each year and the numbers of complaints they receive remains low. **The number of complaints received is down this year**, 30 complaints were received, all relating to staff attitude and behaviours. This is a decrease of 10 from 40 in 2019 / 20.

The table below highlights the categories of complaints received in SNBTS.

**Table 3 SNBTS 2019 / 20 and 202 / 21 number of complaints received**

Code / Type of Complaint		Q1 2020/ 2021	Q1 2019/ 2020	Q2 2020/ 2021	Q2 2019/ 2020	Q3 2020/ 2021	Q3 2019/ 2020	Q4 2020/ 2021	Q4 2019/ 2020
1	Opportunity to donate	11	24	8	4	9	8	5	8
2	Donor Selection	6	6	0	6	4	7	1	0
3	Opening Hours	-	0	0	6	4	7	1	0
4	Staff Attitude & Behaviour	7	12	5	8	12	10	6	10
5	Waiting Times	-	1	1	7	0	0	0	0
6	Donor Communications	5	2	11	0	2	1	4	1
7	Documents and Records	2	5	2	6	2	2	2	1
8	Health & Safety	2	2	0	0	1	11	1	4
9	Bruising	2	3	4	4	1	4	1	4
10	New Regulatory Change	1	0	0	0	0	0	0	2
11	Special Redesign/ change/ Disruption	0	0	0	0	0	0	0	0
12	Special Needs (DDA)	0	0	0	0	0	0	0	0
13	Vexatious	0	0	0	0	1	0	0	0
14	Voluntary Organiser Attitude & Behaviour	0	0	0	0	0	0	0	0
15	Facilities (incl. Parking)	0	3	0	0	5	2	4	0
16	Legal claim	0	0	0	0	0	0	0	0
17	Appointment Availability	4	0	3	10	3	9	6	14
18	Donor Web Portal	5	0	1	0	3	0	2	1
Total		45	58	35	51	50	51	33	45
Yearly Totals 2019 / 20		205							
2020 / 21		163							

There has been a specific reduction in complaints relating to opportunity to donate and staff attitude and behaviour. The roll out and continuous reinforcement of values and behaviours training and appointments training is ensuring that we provide the highest level of customer service, demonstrating a friendly environment and stressing the importance of acting in a professional manner at all times. There was in Q2 a slight increase in complaints around donor communications; this was mainly due to the impact of COVID-19 on donor sessions. All changes on session were in line with Scottish Government recommendations and change has been rapid for staff and donors throughout this period. This theme has continued from Q1.

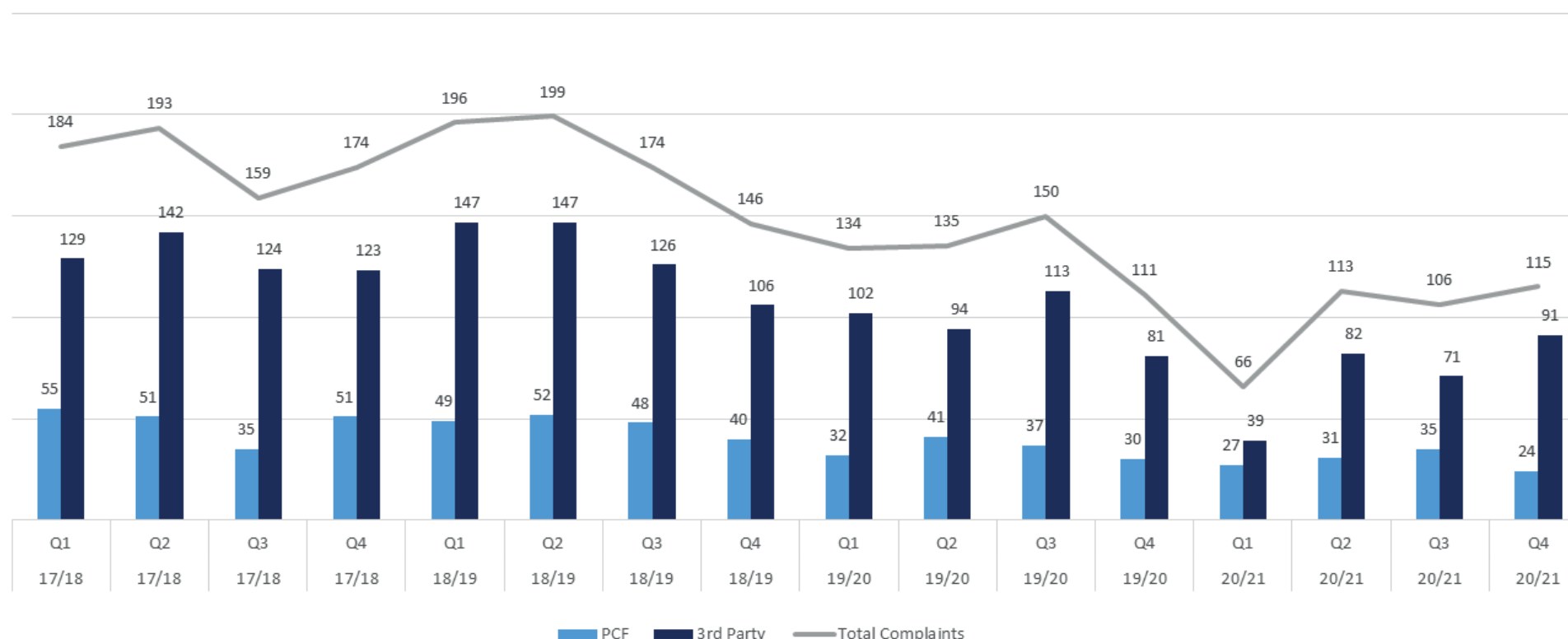


During the pandemic in Q1, we rapidly implemented the use of the Donor Web Portal (DWP) we expected to receive feedback as a result of implementing a new process. We are pleased to see it has remained stable through Q2 and not risen. The introduction of DWP within all community sessions has enabled the donors to book an appointment online by using a donor online account, or by phoning to book an appointment 6 weeks in advance of the session.

## Procurement, Commissioning and Facilities

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

#### Table 4 National Procurement complaints managed by PCF – NDC Complaints



There was a decrease in the number of complaints reported within Q 1 numbers compared to the last quarterly report, and this is a significant decrease based on the same quarter of previous years. These figures have been impacted by the COVID-19 situation, as a lot of the business as usual activity within the Health Boards has been put on hold, with a focus on the procurement and distribution of PPE.

From April – June 2020 – this was a period when the Health Boards were significantly impacted by the clinical demands of COVID-19. As a result, the Health Boards' priorities were focused in other areas and PCF anticipate that this was one of the reasons they experienced less complaints with the priority for Health Boards focussed on the supply and demand for PPE.

We received a lot of positive feedback during this period for Strategic Sourcing and Logistics and all other PCF staff supporting the COVID-19 efforts – providing PPE to GPs, Opticians, Dentists, Pharmacists, Social Care – in significant amounts.

Complaint numbers have continued to fall year on year apart from Q3 in 2019 / 2020 we believe the reason for this is due to closer working relationships and improved communication with the HBs, working closely with the HB local procurement teams.

In Q3, there was a slight increase in the number of complaints reported compared to the previous quarter. These figures are impacted by the COVID-19 situation, as the recipients of our service expanded. Products were not only being distributed to NHSScotland Health Boards but also to Local Authorities, Primary and Social Care. The volume of PPE being issued continued to increase which resulted in additional recruitment within Operations to sustain demand.

There was a slight increase in 2020 / 21 stating Health and Safety as a reason for complaint. These product complaints were a result of Clinical Staff experiencing skin irritation which they are linking to a change in glove brand, however, on investigation this determined that the gloves met specification and as not all staff are affected (An average of 11 million gloves issued per week across Scotland) it has been determined that some staff may have more sensitive skin and due to the prolonged use of gloves and the unprecedented situation this is affecting them more significantly. Health Boards are referring staff to Occupational Health and alternative gloves are being offered to these users as a solution. It was established that the product was not at fault, more the circumstances of prolonged used combined with using hand sanitiser, causing skin irritation . This was the experience in some Health Boards.

**Table 5 National Procurement 3rd Party Complaints**

Type of Complaint	Q1 19 / 20	Q1 20 / 21	Q2 19 / 20	Q2 20 / 21	Q3 19 / 20	Q3 20 / 21	Q4 19 / 20	Q4 20 / 21
<b>Product Quality</b>	37	20	38	52	42	38	30	38
<b>Service</b>	-	0	-	2	-	0	1	0
<b>Transport Issues</b>	3	0	1	0	1	0	1	0
<b>Late/Wrong/No Delivery</b>	11	3	6	2	15	3	8	2
<b>Supply Issues</b>	2	5	1	0	2	2	2	0
<b>Wrong/Confusing/ Missing Information</b>	1	1	-	1	5	1	8	1
<b>Price</b>	1	0	1	0	-	0	1	0
<b>I.T/Systems</b>	-	0	-	0	-	0	-	0
<b>Product Unsuitably Packed (H&amp;S Issues)</b>	5	8	3	14	15	7	11	16
<b>Other</b>	4	10	18	12	18	22	19	5
<b>Total</b>	64	47	68	83	108	73	81	62
<b>Total annual figure 2020 / 21</b>	265							
<b>Total Annual Figures 2019 / 20</b>	321							

NSS National Procurement monitors complaints closely and where an adverse trend is identified, works with the supplier, and where appropriate the NHS Board, to develop and agree a recovery, corrective action and improvement plan. As part of any containment, corrective or preventative action process, NSS issues a product alert or recall notice to NHS boards.

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

PCFS received 16 complaints in 2020 / 21. These related to service delivery and complaints received from patients and practitioners. The themes identified are summarised as follows:

- Delay in getting prior approval decision on dental treatment and length of time taken to get the approval.
- Patients making complaints in relation to patient registration and questions on the form.
- Patients making complaints about being removed from GP practices and/or the GP practice they have been assigned to. Difficulty finding a GP.
- Patient and practitioner complaints that they had been accused of fraud.
- Dentists complaining that their payment had not been paid in a timely manner.

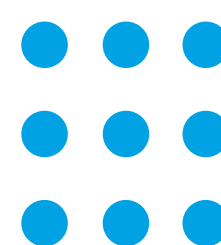
This is a slight increase when comparing to previous years which can be explained by the impact of the pandemic with staff being deployed to roles to support NSS with our response to the pandemic. Patients have found it increasingly challenging to access GP practices and this explains the increase in complaints to PCFS.

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

CLO receives very low numbers of complaints, with one received in 2020 / 21. This was dealt with through existing processes that relate to specific legal matters through the Scottish Legal Complaints Commission.

### **National Contact Centre**

National Contact Centre was implemented in June 2020 with a feedback mechanism established in Q3 with 137 complaints received.





## NSS Finance – Case study

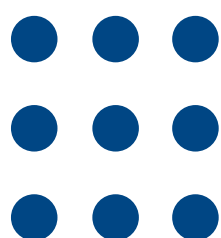
In 2019-20 NSS Finance didn't receive any complaints, which is positive news. However with continuous improvement in mind, the Finance team reviewed the existing complaints process to ensure that it was easily accessible, easily understood, and fit for purpose. In 2020-21 the process was relaunched, including:

- Providing training on complaints handling to Heads of Service
- Implementing a ServiceNow portal for feedback and complaints where people can raise their issues in just a few clicks
- Launching an automated customer feedback survey when ServiceNow tickets are closed so they can quickly and easily rate the quality of service they've received

In the few months since the launch, we've received 27 items of feedback, of which seven were complaints. This is a sizeable increase from our previous figures, however is testament to the improvements made in our feedback and complaints process.

Thanks to this increased engagement we now better understand customer frustrations and can make improvements to our wider service. It has also been wonderful to hear positive feedback and thanks from our customers when things have gone well.

As a direct result of feedback received, we've simplified the language on our ServiceNow portal and created a "brilliant basics" guide to providing consistently great customer service to support our staff when interacting with customers. It has only been a few months but we expect to learn more throughout the rest of the year as more people provide their feedback.



# 6. The Culture including Staff Training and Development

## Scottish National Blood Transfusion Service

SNBTS held staff engagement sessions around changes being put in place to ensure careful management of communication to donors. This was critical to ensuring we maintain adequate supply of specific blood groups.

Collection staff in SNBTS also benefitted from Convalescent Plasma training, aiding donor understanding and acceptance of the process to follow.

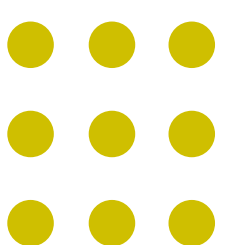
## The NSS Values programme

In 2018, we relaunched the NSS Values and invited everyone to bring fresh commitment and energy to creating a 21st century NSS culture of collaboration, innovation and compassion. This common set of values, endorsed by Staff Governance, helps us all create a better NSS community, whilst honouring the traditions and good work of our Strategic Business Units (SBUs) and Directorates.

### The NSS Values are outlined below:

- Committed to each other
- Customer focus
- Integrity
- Openness
- Respect and care
- Excel and improve

NSS is committed to a “once for NSS philosophy” and our staff continue to work within the NSS Values programme.





## 7. Accountability and Governance

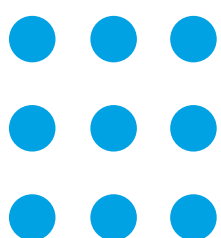
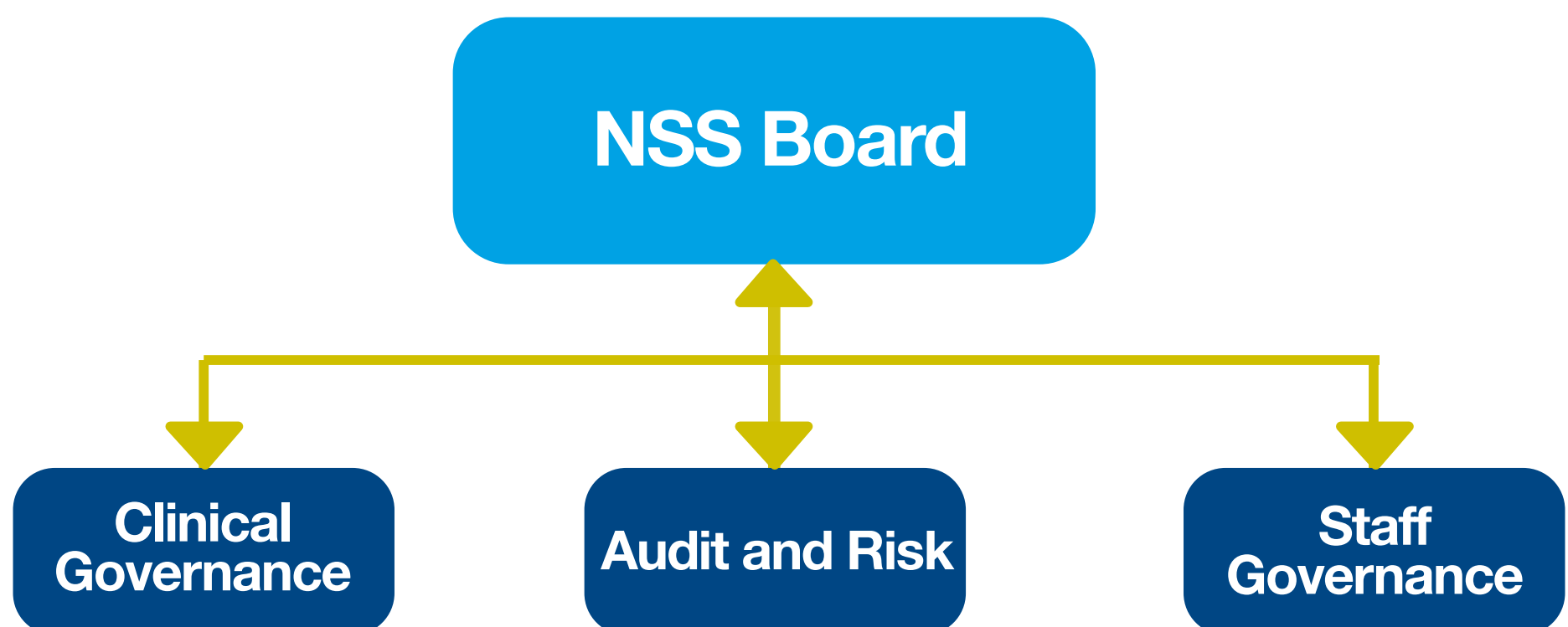
The executive lead for feedback and complaints is the Director of Strategy, Planning and Service Transformation, who is supported by the Head of Equality and Engagement. We ensure visibility of feedback and complaints at the highest level in the Board to ensure that performance and risk can be assessed and mitigated.

Since the previous annual report, the governance for complaints has changed in relation to reporting. Clinical complaints are integrated into the NSS clinical governance quarterly reporting. Staff-related complaints are integrated into the people report presented to the Staff Governance Committee. The Executive Management Team receives the performance figures against the MCHP KPIs. The Audit and Risk Committee receives the annual report.

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 the number of complaints received, how many are upheld, and how many are dealt with in the stated timescales.

**Figure 2 Hierarchy of Governance arrangements in NSS for Feedback and Complaints Reporting:**



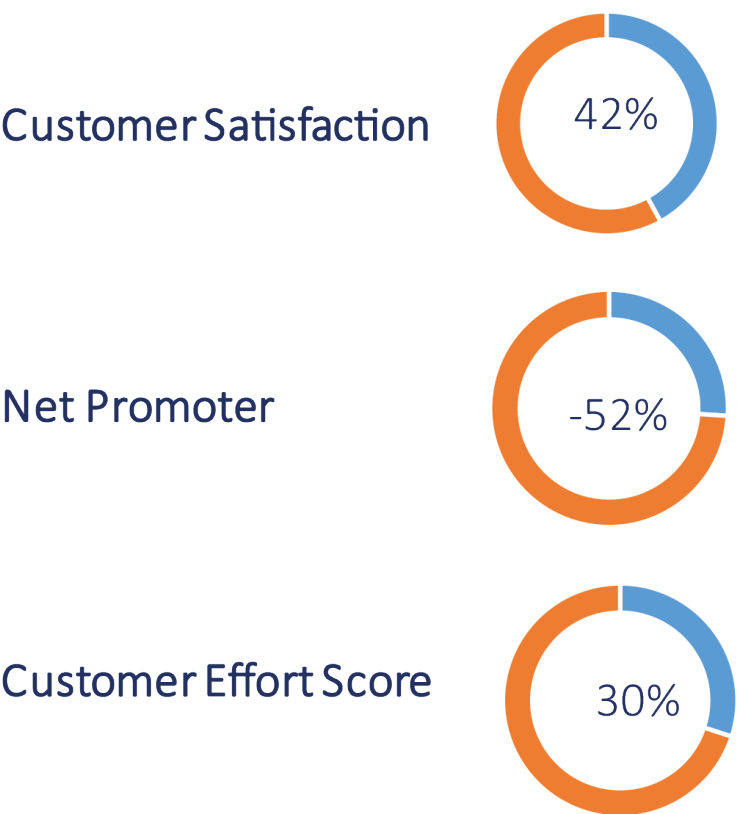
# Appendix: Summary of Customer Feedback and Suggestions

## CLO – Customer Feedback and Suggestions

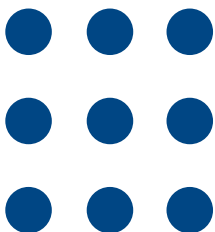


Positive Feedback	<ul style="list-style-type: none"><li>• Team (professional, pleasant, accessible, approachable, helpful &amp; supportive)</li><li>• Responsive &amp; timely</li><li>• Quality of service</li><li>• Positive experience of service</li></ul>
Areas for Improvement	<ul style="list-style-type: none"><li>• Consistency of advice</li><li>• Responsiveness not always timely</li></ul>
Customer Requirement	<ul style="list-style-type: none"><li>• Improved consistency</li><li>• Actions turned around as agreed. Better awareness of staff availability status</li></ul>

## DaS – Customer Feedback and Suggestions



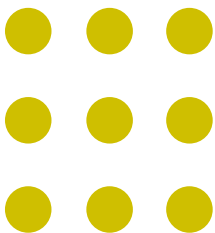
Positive Feedback	<ul style="list-style-type: none"><li>• Overall very satisfied as it's clear a lot of work has gone on to provide IT support to staff during the pandemic</li><li>• I feel that DaS/IT do a terrific job</li></ul>
Areas for Improvement	<ul style="list-style-type: none"><li>• Response times are still too slow</li><li>• lack of customer focus in DaS</li><li>• The process of logging a call is cumbersome</li></ul>
Customer Requirement	<ul style="list-style-type: none"><li>• Regular progress updates</li><li>• Raised awareness of Service Now</li><li>• Front end improvement in Service Now</li></ul>



# Counter Fraud Services – Customer Feedback and Suggestions



Positive Feedback	<ul style="list-style-type: none"><li>• I like the format of the FLO/CFS meetings through Teams and would be keen for this to continue</li><li>• The rolling fraud alerts this year have been especially useful.</li><li>• The service provided is excellent</li></ul>
Areas for Improvement	<ul style="list-style-type: none"><li>• Possible electronic links between our staff communication medium and CFS comms.</li></ul>
Customer Requirement	<ul style="list-style-type: none"><li>• Support with induction of our new Counter Fraud Champion would help to reinforce the importance of this role at Board level.</li></ul>





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