



Newark Beach, Deerness – April 2023

NHS Orkney Patient Feedback

Annual Report 2023-2024

Foreword

The 2023/24 Patient Feedback Annual Report for NHS Orkney demonstrates our ongoing commitment to delivering high-quality, person-centred care. This report outlines how we have received, responded to, and utilised feedback, complaints, and engagement from patients, carers, and families to drive continuous improvement in our services.

Over the past year, we have focused on embedding the values of respect, compassion, and shared decision-making into every aspect of patient care. By listening to our community and staff, we have been able to make significant improvements in accessibility and responsiveness. A notable achievement this year was the successful intravitreal injection audit, which received 100% positive feedback from patients, demonstrating our commitment to patient satisfaction and quality care.

Our approach has prioritised early resolution of complaints to ensure swift and effective responses, while also conducting investigations when necessary. This patient-centred philosophy aligns with our new Corporate Strategy, which sets out clear strategic objectives aimed at fostering continuous improvement and learning within our organisation.

While recognising the challenges in the wider context of NHS Scotland, we remain resolute in our mission at NHS Orkney to resolve issues promptly and improve the patient experience. In this report, you will find detailed analyses of our feedback mechanisms, the types and outcomes of complaints received, and the tangible improvements made as a result.

Looking ahead, our focus will remain on fostering a culture of continuous improvement, ensuring that every patient voice is heard and valued. This commitment is integral to achieving the strategic objectives outlined in our Corporate Strategy, which include enhancing patient safety, improving performance, and driving innovation.

Anna Lamont
Medical Director
NHS Orkney

Section 1

Encouraging and Gathering Feedback

1.1 NHS Orkney collects feedback in the form of complaints, comments, concerns and compliments. We welcome, encourage and value all feedback and use this to learn from people's experience and to inform improvements and change. We know from the compliments and positive feedback we get throughout the year that generally our patients and their carers or families are very pleased with the care they receive. But we are also very aware that we could sometimes do better and therefore the feedback we gather is invaluable in letting us know where improvements can be made.

We have again this year focussed our efforts to look at complaints quickly and respond at Stage 1 where at all possible. We want to ensure our patients are listened to quickly and efficiently and this has worked very well and very much a learning point from the time of the Covid 19 pandemic.

1.2 The following methods are means by which our patients and their families can provide us with feedback on our services:

- Complaints – Early Resolution and Investigation stages. These can be made in writing, by email or over the telephone to the Patient Experience Officer or any other member of staff at the point of care. We will also arrange to meet face to face with anyone who wishes to discuss their complaint with us. More patients prefer to make contact by telephone or email.
- Our website has a section on feedback and involvement which allows for leaving suggestions, compliments, feedback or a separate link to make a complaint or to express an interest in becoming involved.
- Whilst we would normally have Feedback Leaflets available throughout our health care locations on our Welcome Boards, we reviewed this method, again due to Covid-19 infection control guidance. We replaced leaflets with posters with details of how to contact us electronically so that patients could still provide feedback on their experiences whilst in the hospital.
- Patient Satisfaction Surveys are also undertaken locally at a service level and also as part of national survey activity.
- We post on NHS Orkney's Facebook and Twitter pages to encourage patients to tell us of their experiences.

1.3 All feedback, whether good or bad, is acknowledged and responded to. Patients have taken the time to provide us with information on their experiences and we ensure they know we are very thankful for this. We encourage staff to resolve issues at point of contact whenever possible and our figures show more Stage 1's than Stage 2 complaints.

1.4 Information on advice and support from the Patient Advice and Support Service (PASS) at the Citizens Advice Bureau is shared with staff throughout our hospital and healthcare services. We encourage staff to signpost to PASS when appropriate. A link is available in the information we provide to patients during the initial complaint stages and also on our website. We also include a statement in our acknowledgement letters which provides information on how to contact PASS.

Section 2

2.1 Hospital and Community Services:

Our Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for resolving complaints early and locally by capable, well-trained staff. Our complaints process provides two opportunities to resolve complaints internally:

- Early resolution - aims to resolve straightforward complaints that require little or no investigation at the earliest opportunity. This should be as close to the point of service delivery as possible.
- Investigation - not all complaints are suitable for early resolution and not all complaints will be satisfactorily resolved at that stage. Complaints handled at the investigation stage of the complaints handling procedure are typically serious or complex and require a detailed examination before we can state our position.

2.1.1 Early Resolution and Investigation Complaints

Performance Indicator Four

Number of complaints received by the NHS Orkney Complaints and Feedback Team	113
Number of complaints received by NHS Orkney Primary Care Service Contractors	60
Total number of complaints received	173

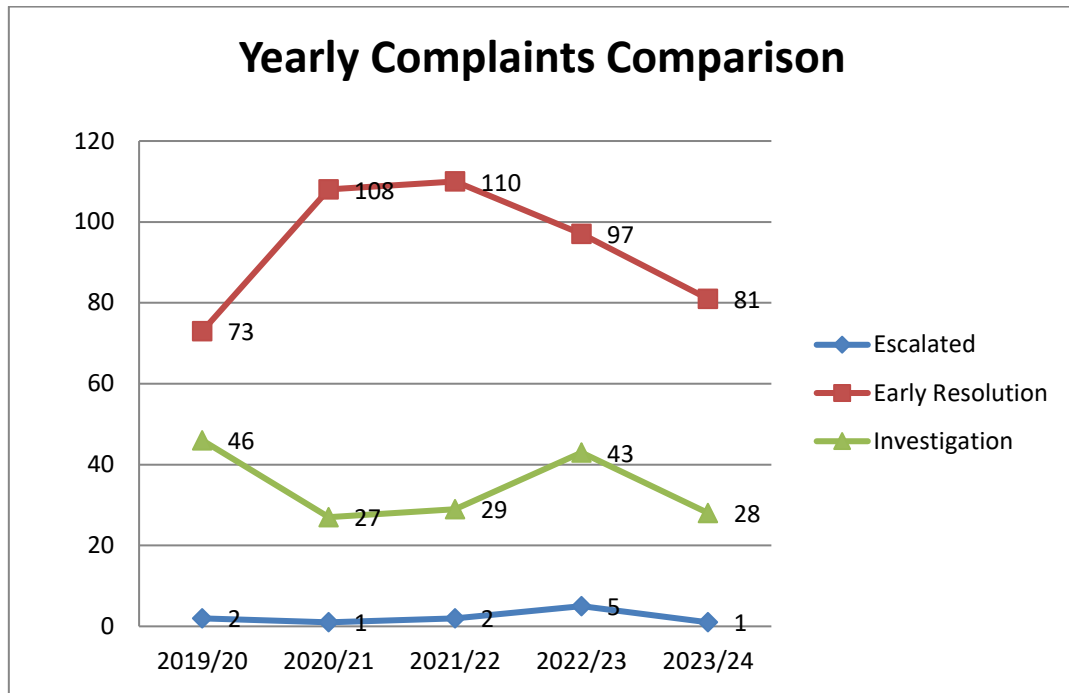
NHS Board Managed Primary Care services;	
General Practitioner	3
Dental	N/A
Ophthalmic	N/A
Pharmacy	N/A
Independent Contractors - Primary Care services;	
General Practitioner	34
Dental	12
Ophthalmic	13
Pharmacy	1
Total of Primary Care Services complaints	63

Performance Indicator Five

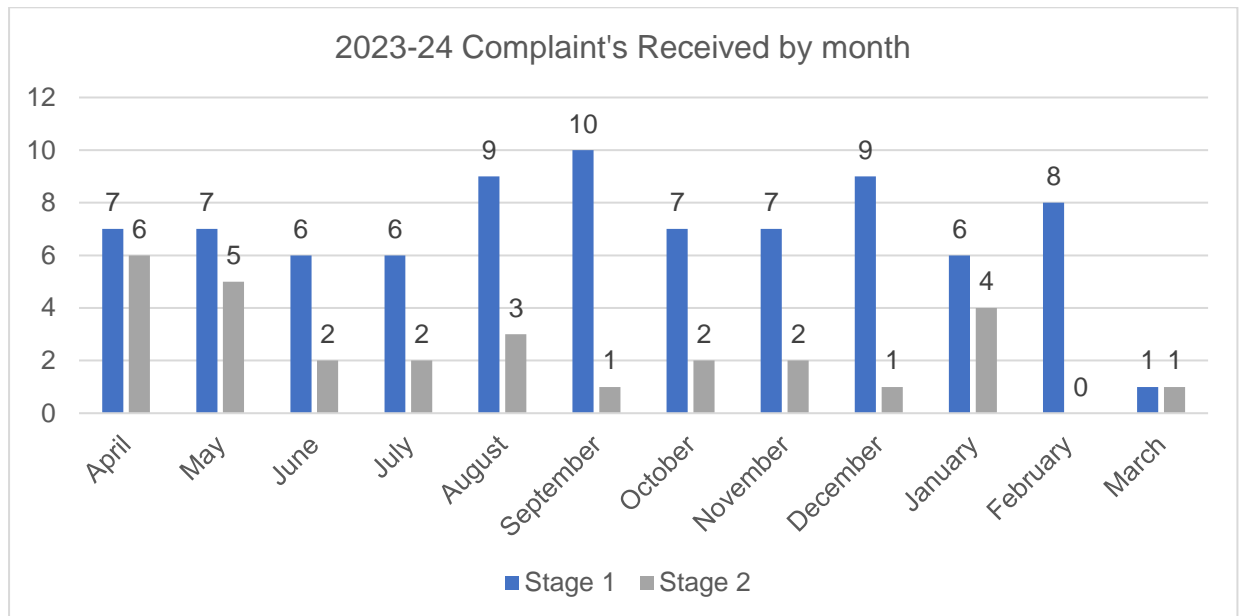
Number of complaints closed at each stage	Number	As a % of all Board complaints closed (not contractors)
5a. Stage One	81	74%
5b. Stage two – non escalated	28	25%
5c. Stage two - escalated	1	1%
5d. Total complaints closed by NHS Orkney	110*	100%

*3 complaints were withdrawn or consent has not been received and thus, in line with Scottish Government guidance, is not included in the Key Performance Indicator figures which follow.

The following chart shows comparisons between our complaints over the last five years.



2023-24 Stage 1 complaints are more in line with the numbers received pre-pandemic. We can see a drop of 26% in Stage 1 complaints over the last two years and a drop of 35% in Stage 2 complaints over the last year.



Complaints are reviewed as part of the Weekly Incident Review Group meeting allowing correlation of incidents and complaints where appropriate. In line with the Learning from Clinical Incidents Policy, members of the group in some instances give consideration to complaints being a Significant Adverse Event and a full SAE investigation is undertaken and formally reported. In other cases, complaint investigation follows standard practice and the meeting is used to share improvement outcomes with clinical leads and heads of service.

2.1.2 Outcome Decision - Complaints upheld, partially upheld and not upheld:

Performance Indicator Six

Early Resolution complaints

	Number	As a % of all complaints closed at stage one
Number of complaints upheld at stage one	32	40%
Number of complaints not upheld at stage one	23	28%
Number of complaints partially upheld at stage one	26	32%
Total stage one complaints outcomes	81	100%

Investigation complaints

	Number	As a % of all complaints closed at stage two
Non-escalated complaints		
Number of non-escalated complaints upheld at stage two	11	39%
Number of non-escalated complaints not upheld at stage two	6	22%
Number of non-escalated complaints partially upheld at stage two	11	39%
Total stage two, non-escalated complaints outcomes	28	100%

Escalated complaints

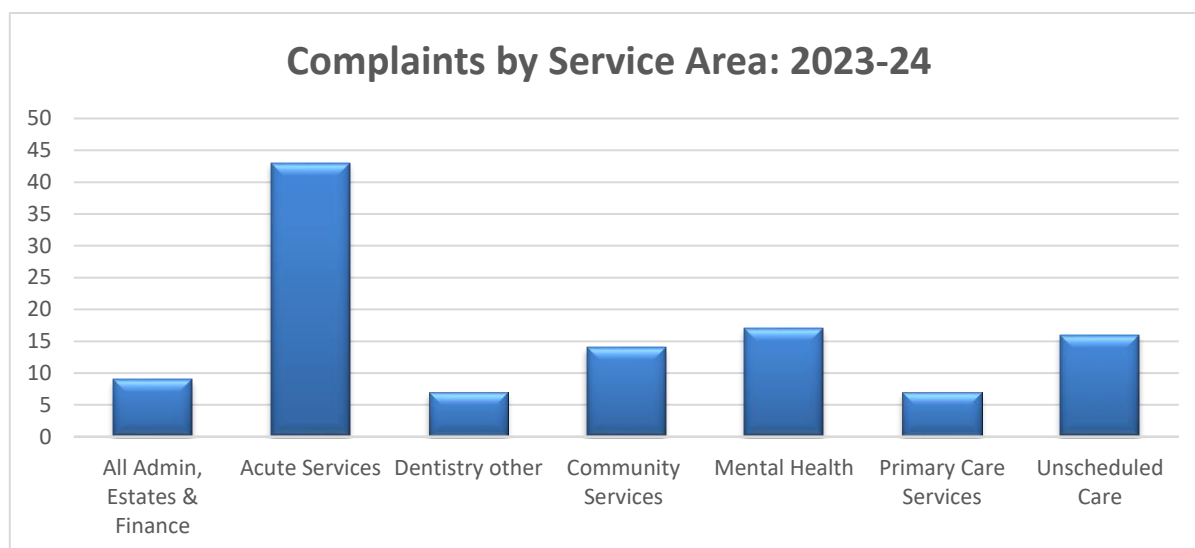
	Number	As a % of all escalated complaints closed at stage two
Escalated complaints		
Number of escalated complaints upheld at stage two	0	0%
Number of escalated complaints not upheld at stage two	1	100%
Number of escalated complaints partially upheld at stage two	0	0%
Total stage two escalated complaints outcomes	1	100%

2.1.3 Service Areas:

NHS Orkney's complaints cross many areas within the organisation but are predominately within our Acute Services. Acute Services includes inpatient, outpatient, waiting times, hospital clinical and non-clinical complaints. GP/Primary Care complaints reported represent the number of complaints received within the Board Administered Practices. Community

services include areas such as community nursing, specialist nursing services, mental health services, podiatry, etc.

The highest sector recording complaints is Acute Service which covers the most clinical services. As mentioned above, complaints are recorded in all inpatient areas, day unit, unscheduled care, outpatients and all specialties and therefore numbers are understandably higher than other services.



2.1.4 Response Times:

Early Resolution complaints must be responded to within 5 working days, Investigation stage complaints have response timescales of 20 working days. Boards are required to report response times as one of the key performance indicators of the CHP.

Stage 1 complaints remain the focus for NHS Orkney. We consider each complaint on receipt to ensure patients receive a response as quickly as possible. This has the best outcome for the patient in a more person-centred way. Some complaints, however, are more complex.

We have found again this year that the more complex complaints cross services and organisations and this has resulted in more complicated investigations with more staff involved in the process. With the added complexity, timescales have failed at times.

For information the breakdown quarterly for response times is as follows:

Closed within Timescales	Q1	Q2	Q3	Q4
Total Number of Complaints closed in full at Stage 1	19	25	23	14
% closed within timescale of 5 working days	(9) 47%	(15) 60%	(20) 87%	(11) 79%
Total Number of Complaints closed in full at Stage 2	12	7	5	4
% closed within timescale of 20 working days	(4) 33%	(5) 71%	(4) 80%	(2) 50%
Total Number of Escalated complaints closed	0	0	0	1
% closed within timescales of 20 working days	n/a	n/a	n/a	(1) 100%

Performance Indicator Eight

	Number	As a % of complaints closed at each stage
Number of complaints closed at stage one within 5 working days.	55	68%
Number of non-escalated complaints closed at stage two within 20 working days	15	54%
Number of escalated complaints closed at stage two within 20 working days	1	100%
Total number of complaints closed within timescales	71	65%

Performance Indicator Nine

	Number	As a % of complaints closed at each stage
Number of complaints closed at stage one where extension was authorised	10	12%
Number of complaints closed at stage two where extension was authorised (this includes both escalated and non-escalated complaints)	10	36%
Total number of extensions authorised	20	18%

This year 71 of 110 complaints were closed within timescales in line with national guidelines which compares to 91 of 146 in 2022/2023.

With a slight improvement on last year (33%), 54% of Stage 2 complaints were closed within timescales during the year. The main reason for this was delays within the investigation process. Complaints can be complex, cross services and at times organisations and result in delays. Additionally, capacity issues at investigation stage, ie, a lack of available clinical managers to carry out investigations coupled with their ability to carry out complaint investigations alongside clinical duties, also cause deadlines to pass.

This year 68% of Stage 1 complaints were responded to within 5 working days and staff should be commended for resolving complaints quickly and early. Managers, who were responding to these alongside their day-to-day duties, were very responsive and quick to manage the majority of concerns at this level. This is slightly poorer than 2022/2023 when we responded to 76% of Stage 1 complaints within the target time. However, patients much prefer this approach and whilst timescales are not met, complaints are resolved and closed with a positive outcome for the complainant.

2.1.5 Trends and Emerging Themes:

NHS Orkney complaints are wide ranging and relatively small in number across a diverse range of services, making it difficult to identify trends. In 2023/24 themes of care and treatment, communication, waiting times/delays and staff issues are identified as the main issues within Investigation and Early Resolution complaints. This is identical to previous years and similar to other Boards themes over the last few years.

	Communication	Waiting Times/Delay	Patient Privacy / Dignity / Respect	Physical Environment	Procedural Issues	Staff	Treatment
Percentage of issues raised	19%	15%	3%	2%	4%	11%	46%
Number of issues raised in each subject	21	17	3	2	5	13	52

2.1.6 Alternative Dispute Resolution:

There were no complaints during the year which met the need for Alternative Dispute Resolution. NHS Orkney is aware of the services provided by the Scottish Mediation Service and has used it in the past.

2.1.7 Unacceptable Actions Policy

At times NHS Orkney must review a complainant in line with the unacceptable actions policy. This happens when it is considered that there is nothing further that can reasonably be done to assist complainants or to rectify a real or perceived problem. Where this is the case and further communications would place inappropriate demands on NHS staff and resources, consideration may need to be given to classify the person, behaviours or actions as unacceptable.

Due to the small number, it would not be appropriate to provide figures for this part of the report and therefore simply advise that NHS Orkney had occasion(s) to refer and act in line with the policy during the complaints year.

2.1.8 Complaint process experience

NHS Orkney have been unable to undertake this year's survey of complainant's process experience.

2.2 Family Health Services (not including salaried GPs/Dentists):

NHS Board Managed Primary Care services;	
General Practitioner	3
Dental	n/a
Ophthalmic	n/a
Pharmacy	n/a
Independent Contractors - Primary Care services;	
General Practitioner	34
Dental	12
Ophthalmic	13
Pharmacy	1
Total of Primary Care Services complaints	63

Primary Care Services complaints have also reduced this year from 77 in 2022/2023.

GP Practices routinely contact the Patient Experience Officer for help and support in dealing with complaints.

Primary Care service providers are independent contractors who are contracted by the NHS Board to provide NHS health services. However, Boards are required by law to ensure that each of their service providers have adequate arrangements in place for handling and responding to patient feedback and comments, concerns and complaints.

NHS Orkney handle complaints made about the Salaried GP's and Board Administered Practices. Our figures show 3 complaints were made during the year relating to this service which accounts for 5% of the total family Health Services complaints.

2.3 Other NHS Organisations:

NHS Orkney also receive and pass on complaints to NHS Grampian, Scottish Ambulance Service and NHS24. We recorded 12 complaints which were passed on to other organisations via our Feedback team.

2.4 MSP / MP - Constituents' Concerns Raised:

There are occasions when patients contact their MSP/MP in the first instance to make a complaint, raise a concern or enquiry. During the period 1st April 2023 – 31st March 2024, the Chief Executive received many written expressions of concern or complaint which sought address through a MSP. Patients are more frequently raising issues through their MSP. The following table offers a few examples of the issues raised and the outcome.

Issue	Outcome
Waiting Times and Delays – pain service	In most cases, we were able to provide explanations, updates and, where it was appropriate to do so, ensure the patient was reviewed and on the appropriate waiting list.
Travel Reimbursement Queries	We received a number of queries via the local MSP from patients querying reimbursement for accommodation and travel. Some patients we are able to ensure correct payment is made. Other patients are advised that reimbursement is made following the guidance in the Highlands and Islands Travel Scheme.
Delays for patients waiting for Orthodontic treatment	At times the Community Dental service can support patients who are waiting for orthodontic treatment. With the absence of an Orthodontic Consultant both in Orkney and NHS Grampian, patients are currently experiencing longer than expected delays in treatment.

2.5 Patient Advice and Support Service (PASS):



PASS offer advice and support for all NHS users and can help patients if they have any comments or complaints about any aspect of the health service. The Patient Experience Officer provides information on the service to complainants so that they may use the service if they feel unable to raise concerns themselves.

Unfortunately, the number of clients and contacts supported by PASS during 2023/24 is not available at the time of writing this report. We can report that we received 9 complaints from the service on behalf of patients.

2.6 Scottish Public Services Ombudsman (SPSO):

During the year 2023/24, The Scottish Public Services Ombudsman received six complaints from Orkney patients who were unhappy with the response received from NHS Orkney.

	Complaint	Outcome
Case 1	NHS Orkney failed to: a) Communicate effectively. b) Ensure appropriate contingency plans were in place. c) Take any actions following the incident to respond to the complaint.	SPSO assessed this complaint and took the decision not to progress to investigation stage.
Case 2	NHS Orkney failed to: a) Provide reasonable care and treatment to the patient and b) The Significant Adverse Event Review carried out by NHS Orkney was inadequate.	Upheld Upheld
Case 3	NHS Orkney failed to: a) Provide pain relief treatment since June 2022.	SPSO assessed this complaint and took the decision not to progress to investigation stage.
Case 4	NHS Orkney failed to: a) Provide reasonable treatment in relation to a child's needs at school. b) Maintain reasonable clinical records. c) Reasonably handle the complainant's complaint.	Under investigation – no outcome at date of report.
Case 5	NHS Orkney failed to: a) Provide reasonable inpatient care and treatment.	Under initial assessment.
Case 6	NHS Orkney failed to: a) Provide reasonable care and treatment.	SPSO assessed this complaint and took the decision not to progress to investigation stage as the complaint is out of time.

SPSO provided a number of recommendations in relation to Case 2 and these have been progressed and are complete.

2.7 Compliments

As with previous years, NHS Orkney receives a significant number of compliments. These are predominantly sent to our wards and departments in the forms of letters, cards, flowers, chocolates and biscuits.

NHS Orkney do receive a number of compliments directly which we record and send on to the relevant staff members or area.

Here's a selection of what our patients have told us:

Just wanted to share our positive experience today at the Balfour seeing the ** doctor. Going to appointments with our son can often turn into a very stressful situation for us as parents and our son. However all staff were fab and the fact that there was a member of staff to play with him so he was happy and we could concentrate on speaking with the doctor made for such a great experience for all of us. In fact our son has continued to speak about the lady who was playing with him all afternoon.

Please thank Dr B* for her consultation this afternoon via video call.

It was very helpful, and encouraging, and I am very grateful that it worked so well on our erratic wifi. I feel a lot more confident and reassured about the course of this condition and its treatment.

Please pass on my thanks to the Day Care unit. I went in today for a procedure, and all the staff were very caring and made my visit a pleasure.

A massive thank-you to everyone involved in Jennifer's recent trip to The Balfour day surgery unit. You are all very skilled and very kind. Thanks also to Skerryvore and Westray GP practices, surgical outpatients and the medical secretaries. And finally, on behalf of Susanna . . . radiography!

*** telephoned this morning to thank everyone involved in her recent outpatient appointment.

They had been really concerned about how everything would be managed and were very happy with the outcome, and wanted to ensure everyone was thanked for their part in the care provided.

I wanted to express my thanks for the care I have received so far. The speed in which I have received appointments and referrals has been much appreciated and I have been reassured by the professional yet friendly care I have benefited from from all of the staff I have met. Working in health care must be challenging and I am thankful that all of these people are doing it in such a positive, caring and helpful way. Thank you.

May I thank most sincerely all the people who looked after me so well during my recent stay in Inpatients 1. I was treated with the highest standards of professionalism, and also with kindness, indeed with compassion, and with good humour. Medical staff seemed aware of my overall health status. All greatly appreciated. Please pass on my thanks and good wishes to all concerned.

Section 3

The culture, including staff training and development

At NHS Orkney we pride ourselves in delivering high quality care and we will ensure all our patients are treated with dignity and respect whilst ensuring we deliver excellence and professionalism in all that we do.

Our patients can expect:

- to be treated with dignity and respect
- for us to show compassion by taking the time to listen, to talk and do the things that matter to them
- to receive high quality patient care and when they don't, we will listen and act on feedback so we can learn, improve and do better next time
- for us to be consistent and reliable and do what we say we will
- us to work with patients and their family (carers) and our colleagues so that we put their needs first
- for us to communicate (as individuals, teams and as an organisation) effectively, keeping them informed and involved and providing explanation if something has not happened

3.1 It is considered the continuing good relationship between PASS and NHS Orkney is vital to ensuring patients are given as much advice and support as possible in a cohesive, co-ordinated fashion whilst remaining aware that PASS is an independent service.

3.2 Our online training is now hosted fully by Turas and the Patient Experience Officer has worked with the Talent and Culture team to ensure Patient Experience has a dedicated space. This can now be found in the Clinical Governance section.

3.3 The Patient Experience Officer is available to carry out informal training for any team who wishes help with complaint handling, investigating or learning from complaints.

3.4 The following table indicates the number of staff who have completed the online training modules during this financial year. It should be noted that these modules are not mandatory required training and therefore numbers are low:

Module	Staff Completion Numbers
Module 1 - Value of feedback	9
Module 2 - Encouraging effective feedback	8
Module 3 - Complaints and feedback process	6
Module 4 - The Value of Apology	6
Module 5 - Managing difficult behaviour	6
Complaints investigation skills	6

At a recent National Complaints Personnel Association Scotland meeting, a paper was presented by colleagues from NHS Lanarkshire and NHS Forth Valley who had been asked by National Education Scotland (NES) to undertake a long overdue review of the current Turas Feedback & Complaints training modules. A significant number of recommendations were made recognising these modules are now dated in relation to complaints handling and investigation skills and it is hoped this will be taken forward by NES.

Section 4

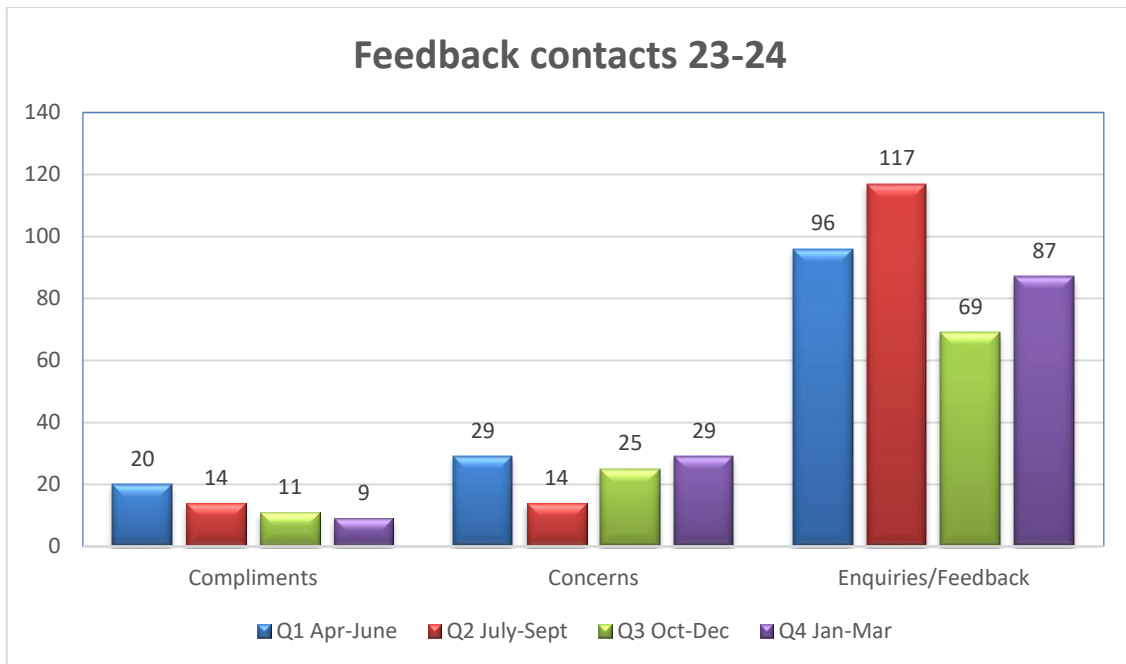
Improvements to Services

4.1 When any aspect of a complaint is upheld, the service identifies what improvements can be made. We continue to use our Complaints Reporting Template which provides an opportunity for staff to clearly identify actions, improvements and recommendations.

4.2 The following are some examples of improvements made over the last year:

Issue Raised	Findings	Outcome
Concerns raised by inpatient visitor that call bell was not reachable.	Findings showed patient's bell was not always at a distance they could comfortably use if required.	SCN highlighted issue with staff and monitored call bell availability and response time.
Communication regarding transfer of patient to NHS Grampian was poor.	Recognised that some information on transfer was not provide and resulted in patient not fully aware of what was happening.	SCN reviewed transfer documentation to ensure level of communication is improved.
Patient raised concerns about providing private and confidential information in ED Reception.	The complaint was upheld.	New signage is in place to advise patients on steps to take if they do not wish to share personal details in ED reception.
Patient's family member complained that appointment process for her elderly parents had not been followed.	Review of process has taken place and complaint was upheld	New process implemented to contact next of kin in advance of appointments and regular audit of contact details now in place
Patient's appointment was cancelled at short notice.	Investigation showed staff member required short notice emergency leave.	Apology given and new appointment arranged with patient's involvement at a time suitable to them.
A number of complaints received regarding access to Orthodontic waiting times.	Requirement to share update with all patients on waiting list.	Letters sent to all patients on waiting list to outline background to current situation and advise of efforts so far to re-establish service.

4.3 Informal feedback and concerns are logged and recorded by the Patient Experience Officer and improvements and actions are reported quarterly to the Quality Forum.



- 4.4 As mentioned earlier in this report all complaints are discussed at the Weekly Incident Review Group which ensures the Clinical Directors are sighted on incidents, complaints and emerging issues.
- 4.5 Any improvements, actions or changes that are identified through the complaints process, either formally or informally, are shared with the complainant in our response. An apology is given regardless of the outcome.

Section 5

Accountability and Governance

- 5.1 Feedback and Complaints are discussed weekly as part of the Weekly Incident Review Group and a quarterly report is submitted to the Quality Forum.
- Minutes and Chairs reports from the Quality Forum are reported to the Joint Clinical and Care Governance Committee who reports onwards to the NHS Board.
- 5.2 NHS Orkney Board members receive updates through the Joint Clinical and Care Governance Chairs report and receive the Annual Report.
- 5.3 As mentioned above all feedback and complaints are reviewed as part of the Weekly Incident Review Group meeting. This group meets weekly and consists of the Medical Director, Director of Nursing, AHP's and Director of Acute Services, Head of Information and Clinical Governance, Clinical Governance Support and Patient Experience Officer as well as representation from Acute Services and Orkney Health & Care. Complaints are triangulated with DATIX incidents and Significant Adverse Events to assist in the identification of themes and systemic issues for informing improvement.
- 5.4 Complaint investigations are undertaken by Lead Officers, supported by their direct manager on the Senior Management Team. Once complete, investigations are reviewed and signed off by the Medical Director or Director of Nursing, AHP's and Chief Officer for Acute Services before being submitted to the Chief Executive for final approval.

Section 6

Person-Centred Health and Care

Person-Centred Health and Care is at the heart of all our services within NHS Orkney. It is recognised that, to achieve this, we need to work at many different levels and with the wider community in which we live. The following are some examples of different work that has been carried out with involvement of, or by, NHS Orkney staff.

6.1 Outpatient Pre-Assessment Experience

Eleven patients were asked during a pre-assessment clinic to provide feedback on their experiences. The audit received 100% positive responses with comments from the patients such as " I was seen early because of ferry issues, thank you!" and "Both nurses were very kind and helpful."

6.2 Patient Stories

NHS Orkney Board members were presented with two patient stories during the 2023/24 period. The first, shared in the format of a video story, showed how our patients benefit greatly from an introduction to a chair-based exercise class via the Ageing Well team.

The second story introduced a patient with motor neurone disease who has involvement with many services within NHS Orkney. The patient shared their experiences, both good and feedback on what could be improved.

6.3 Mouth Cancer Awareness Month

November was Mouth Cancer Awareness Month and two straight-talking "Mouthie Mums" from Orkney were speaking out on a mission to raise awareness of oral cancer.



NHS Orkney along with help from Lorraine and Elaine encouraged everyone to keep a close eye on their own oral health and to be "mouthaware".

Staff from NHS Orkney Oral Health Team along with Lorraine were at a local supermarket raising awareness about the importance of being "mouthaware" and handed out information and self-examination checklists to customers.

Lorraine and Elaine are proudly shared their own cancer stories in the hope they could save lives, but also reduce the need for such invasive treatments in a particularly sensitive area of the body.

6.4 Falls Awareness Week

In November 2023, NHS Orkney's Ageing Well Team held sessions on Falls Awareness in the main atrium of The Balfour. The aim of the week was to educate and support the public, patients, and staff to keep moving and stay safe at home. Patients were also encouraged to come along to have their walking aid health checked, get advice on strengthening exercises and balance exercises. One session helped patients with information on keeping their home safe and telecare.

6.5 Intravitreal Injection Audit – Outpatients

Our Outpatient team carried out a patient satisfaction audit of patients who attended the department for intravitreal injections. The response was 100% positive.

Intravitreal patient audit 23/1/24-30/1/24			
Patients seen	44		
Audits completed	44	YES	NOT SURE
			NO
The nurses were friendly and approachable	100%	0%	0%
Nurses are careful to check everything prior to my treatment	100%	0%	0%
I was seen within 30 minutes of my appointment time	100%	0%	0%
The nurse made sure I was comfortable and pain free during my injection	100%	0%	0%
The procedure was explained to me clearly	100%	0%	0%
I was treated with warmth and understanding	100%	0%	0%
I felt safe when the nurse gave the injection	100%	0%	0%

COMMENTS

Thank you for the great care and attention.

Very happy with treatment- thank you.

I don't think you could have been more caring.

Atmosphere always calm and warm.

What an amazing service and fabulous team.

Excellent service.

6.6 Corporate Strategy Engagement Sessions

NHS ORKNEY CORPORATE STRATEGY

Four smiley faces (sad, neutral, happy) and the NHS Orkney logo.

COMMUNITY SESSION

Come along and have your say on how we do things at NHS Orkney.

Where: Milestone Kirk, Dounby
When: Saturday 24 February, 11.30am - 1.30pm

NHS Orkney's Chair and Chief Executive held three engagement sessions to hear from the community and our patients on what mattered to them. These sessions helped inform and shape the Corporate Strategy work.

Sessions were held in Dounby and in Kirkwall and one virtual event was held. The feedback from our patients at these was invaluable. Our Chair and Chief Executive recognised the issues raised by the community and pledged to make sure the main themes identified would be priorities in the future planning for NHS Orkney.

6.7 Wellness Event

NHS Orkney again held a Wellness Event in September 2023. A range of information, stalls, classes and organisations attended on the day for both staff and patients to enjoy. We also asked one of our local primary schools to help brighten up the day and were lucky enough to have some very colourful and brilliantly artistic bunting!



6.8 Gold Award for the Defence Employee Recognition Scheme



NHS Orkney has once again been awarded the Gold Award for continued commitment to the Armed Forces.

Roy McLellan Regional Employer Engagement Director from Highland Reserve Forces' and Cadets' Association presented NHS Orkney with the Gold Award for the Defence Employee Recognition Scheme in recognition of the commitment to the Armed Forces. The last time Orkney was awarded this was in 2018, with NHS Orkney the first Health Board to be awarded this accolade.