“I have to admit I do love being able to give the staff the comments and being able to respond to patients is really nice, I like the speed in which you can respond, also the ability to be genuine. I haven’t had a bad one yet but I think the personal touch and the ability to control how and when you respond must make such a difference when someone is not happy...”

Senior Charge Nurse, NHS Fife

“I receive alerts to all stories shared. It means that I can keep up to date with themes across the organisation. There is learning for our team with nearly every story...”

Specialty Doctor, NHS Ayrshire & Arran
Our vision

What do we want to see?

We want people to be able to share their experiences of health and care in ways which are safe, simple, and lead to learning and change.

Our mission

What do we do?

Our mission is to provide an online platform so that:

- people can share honest feedback easily and without fear
- stories are directed to wherever they can help make a difference, and
- everyone can see how and where services are listening and changing in response

Our values

How will we pursue our mission?

Innovation

We will innovate in the public interest. We will keep listening, learning and improving, so that we find simpler, safer and more effective ways for people to share their experiences of care.

Transparency

When things can be seen and shared, they can be improved. We encourage transparency in health/care services, and we will be open, honest and clear in all our activities.

Inclusivity

Everyone’s story matters. We will treat everyone as equals, and will nurture trust and respect in all our relationships. We will work to make our service accessible and helpful to the widest range of people we can.

Positivity

We believe that people are most open to learning and change when they feel valued and heard. We will make our activities, conversations and connections encouraging, constructive and supportive.

Humanity

We believe effective health and care services have at their heart the humanity of those who rely on them, and those who provide them. We will keep people (story authors, customers and our own team) and their stories at the heart of everything we do.
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1. Introduction..........................................................................................................................4
2. Summary of key data ............................................................................................................7
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11. Our team ..........................................................................................................................24
1. Introduction

Becoming Care Opinion...

Even though this review covers the 12-month period to 31 March 2017 it feels right to address our change of name.

Since 2005, we pioneered a new approach for people to share their stories of care, and for staff to learn how their patients feel through Patient Opinion. Our non-profit service has helped resolve issues, restore relationships, encourage staff and improve services in many parts of the UK.

As health and social care services across the UK continue to evolve and integrate, we concluded that we should merge our two services – Patient Opinion and Care Opinion – into a single integrated and simplified service. One online feedback platform handling stories from everyone, whether they are about health or social care services. Our new name reflects this unified approach: Care Opinion.

We moved to become fully Care Opinion on 1 May 2017.

From this date, everyone who visits Patient Opinion is automatically redirected to the new Care Opinion site. Although the site has a new name and address, it looks just like it did before, and everything continues to work in the way you would expect, possibly even better!

We continue to work with all subscribing organisations to manage the transition to the new name.

Our FAQ page contains more information about becoming Care Opinion.

Vision, mission, values

We’ve always known what these are but 2016/17 was the year when, at last, we put our vision, mission and values into words. They’re on page 2 of this document and we are very proud to share them with you.

Summarising the year...

We’re now in our fourth year of providing an annual summary of activity across health boards in Scotland. It’s fascinating to see how things have progressed and the trajectory for many of the things we quantify is up!

As always, one of the things we find health boards are interested in when we conduct regular reviews is “how are others doing/managing?”. In that respect, we hope that much of the information contained in the summary pages in sections 4 and 5 meets requirements.

This year we have taken a little more time to identify the good things which have been happening. In section 3, you’ll read about NHS Grampian, NHS Fife and NHS Lanarkshire and be inspired.

In section 6 we provide some website analytics: don’t be put off, it’s interesting and easy to read, and information about our social media activity too.

For a small team, we get about and section 7 gives a flavour for some of the things we’ve been involved in.
By this time next year, we hope to be able to provide a more systematic summary of activity in relation to social care, as well as health services. In the meantime, in section 8 you can read about how we are engaging with Health and Social Care partnerships.

Sections 9, 10 and 11 are all about us! What you say about us, how we’re trying to continuously improve and who we are…just in case you don’t know!

What’s made us happiest...

Well apart from just being able to work in Care Opinion 😊, lots of things, but here are some of them:-

• When story numbers increase: it means more people are aware of Care Opinion and using it!

![Graph showing story numbers increase](image)

This graph shows the stories shared about the NHS by people in Scotland

• When we can tell people, they have a 100% chance of getting a response to their story: otherwise, why bother?

• When we see people using Care Opinion to share their amazing stories of “above and beyond” care;

• When connections are made between people, and learning and change happens.

Care Opinion (or Patient Opinion as was) was designed so that stories could be directed to wherever they can make a difference. As we’ve progressed, we know that stories are making a difference in lots of ways: to students, regulators, interest groups, all of which is amazing. However, we always wanted to connect authors: the people sharing their stories, with the staff delivering care.
We believe that staff being more consistently aware of the stories being shared about the service they provide is fundamental to increasing the potential for learning and change. So, we’re thrilled when we see the number staff not only receiving alerts and reading stories increasing but also being able to respond to stories and showing what’s been improved or changed.

Happily, as you’ll see from our survey (section 9), many staff welcome the chance to read stories and believe that stories have an impact on their day to day work.

We believe that the more responsibility staff have for responding to stories, the greater the rate of improvement and change. Makes sense, doesn’t it?

- Cake...cake makes us happy too!
2. Summary of key data*

Feel free to share this graphic!

In fact, feel free to share anything in this document. Just let people know where you got your info please.

* All data referenced in this document covers the period 1 April 2016 – 31 March 2017
3. Great things going on...

NHS Grampian - The Comms Team

NHS Grampian have been using Care Opinion more proactively in 16/17. Responding on Care Opinion used to be the responsibility of the feedback team but now more front-line staff (being added to all the time) are reading and responding to stories.

Simultaneously NHS Grampian Communications Team have stepped up their activity around Care Opinion on their main social media channels – Facebook and Twitter.

What has this synergy achieved?

More visits to the website via NHS Grampian’s Care Opinion page (up 247%), more stories than ever before (up 289%) and we were fascinated to see that stories about NHS Grampian are read at least twice as much as stories from any other Board in Scotland.

Kevin McKinnon, who manages NHS Grampian’s social media accounts along with Lydia says, “We quickly realised that the stories we posted on our Facebook page were being very well received, with each post consistently reaching at least two thousand users, with a good number of them liking the posts, responding with positive comments and sharing the post with their Facebook friends, which helps to spread the messages even further via the social media site and has helped to grow the number of likes and follows our Facebook page has – over 10,000 and increasing daily.”

We think it’s well worth highlighting NHS Grampian’s social media strategy as, along with more front line staff reading, and an impressive 93% response rate (a constantly increasing average), we more people are getting the opportunity to have their voice heard!

For more information: Contact Kevin McKinnon, Communications Officer, NHS Grampian
NHS Fife – The Clinical Team

There’s been an amazing surge in stories shared about Endoscopy services across NHS Fife, driven by, we’re delighted to say, the clinical team.

Gill Ogden is Clinical Service Manager and with the support of Lead Consultant, Neil Cruikshank, have inspired and encouraged the whole staff team to get involved in identifying what they’d be interested in hearing feedback about and in telling patients about Care Opinion.

They tried other methods of raising awareness and promoting use but have decided that our simple direct ask flyer, which they tailor to suit their needs, is the most effective tool for them!

So, what difference has it made?

Across health services in Scotland, an average of 6% of responses to concerns lead to change. In this single service, in NHS Fife, 21% of responses to concerns have led to change! Astounding!

We’ve also started using this slide in our efforts to illustrate how quickly and easily, small incremental improvements in response to feedback can be initiated by clinical teams rather than being filtered through a central team. It took One hour between the story being published and a response being published and a change committed to.

We believe empowering the clinical team to take responsibility for driving feedback and demonstrating improvement is the most efficient and effective way to use Care Opinion.

In July 2017, Gill will be presenting her teams’ experience of using Care Opinion at the King’s Fund Digital Health and Care Congress and will launch a new video made by NHS Fife Comms team

For more information: Contact Gill Ogden, Clinical Services Manager, NHS Fife
NHS Lanarkshire – The System

Since they made their commitment January 2014, NHS Lanarkshire are systematically and methodically rolling out use of Care Opinion across all services.

This graph which shows stories shared, month by month during 16/17, demonstrate a steady upward trajectory.

Constancy and consistency are often words we use to describe the approach required to driving effective use of Care Opinion: NHS Lanarkshire provide a great illustration of that approach.

They are constant and consistent in:-

- their commitment to using Care Opinion as one of their top ways to listen; an increase of 35% in stories shared in 16/17
- ensuring relevant staff and teams are empowered to take responsibility for feedback, responding and demonstrating improvement; NHS Lanarkshire have the highest number of clinical staff responding to stories which increased by 21% in 16/17
- achieving a higher than average 10% of responses to concern resulting in change.

For more information: Contact Rick Edwards, Programme Manager for Person-Centred Care, NHS Lanarkshire
4. Activity summary by health board

Stories shared by board

<table>
<thead>
<tr>
<th>Board</th>
<th>Stories shared by board 1.4.15-31.3.16</th>
<th>Stories shared by board 1.4.16-31.3.17</th>
<th>Percentage Difference in stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>A&amp;N Borders</td>
<td>27</td>
<td>12</td>
<td>-51%</td>
</tr>
<tr>
<td>D&amp;G</td>
<td>14</td>
<td>32</td>
<td>128%</td>
</tr>
<tr>
<td>Fife</td>
<td>103</td>
<td>29</td>
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<td>FV</td>
<td>29</td>
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<tr>
<td>GHN</td>
<td>303</td>
<td>280</td>
<td>-7%</td>
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<tr>
<td>Grampian</td>
<td>280</td>
<td>469</td>
<td>66%</td>
</tr>
<tr>
<td>Highland</td>
<td>167</td>
<td>65</td>
<td>-61%</td>
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<td>Lanarkshire</td>
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<tr>
<td>Lothian</td>
<td>38</td>
<td>38</td>
<td>0%</td>
</tr>
<tr>
<td>NHS 24</td>
<td>4</td>
<td>35</td>
<td>-88%</td>
</tr>
<tr>
<td>Orkney</td>
<td>104</td>
<td>10</td>
<td>-90%</td>
</tr>
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<td>SAS</td>
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<td>97</td>
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</tr>
<tr>
<td>Western Isles</td>
<td>9</td>
<td>9</td>
<td>0%</td>
</tr>
</tbody>
</table>

Increase /Decrease in Stories Shared
% share of stories vs share of total population

Stories as % of all Scottish stories
Staff Reading

Staff reading 1.4.15 - 31.4.16
Staff Reading 1.4.16 - 31.4.17

Response rates

% stories responded to
response times

Stories rated by author

Helpful responses Unhelpful responses

79% 12% 88% 50% 97% 100% 86% 92% 100% 79% 46% 61% 68% 69% 36% 89% 82% 89% 79% 100% 5 days or less to first response

July 2017 14
Changes made / planned

Criticality of stories

July 2017
### 5. Summary of activity by health board and Scotland wide

<table>
<thead>
<tr>
<th>Board</th>
<th>Stories (n)</th>
<th>% of all stories shared</th>
<th>Response rate (%) responded to</th>
<th>Responses (n)</th>
<th>% responses over 5 days</th>
<th>% of critical stories which have led to change</th>
<th>Changes (n)</th>
<th>% non critical stories</th>
<th>Reads (n)</th>
<th>% of total reads</th>
<th>Story read ratio</th>
<th>Staff Reading</th>
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</thead>
<tbody>
<tr>
<td>A&amp;A</td>
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<td>14</td>
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<td>6</td>
<td>10</td>
<td>56</td>
<td>102210</td>
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<td>276</td>
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<td>8</td>
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<td>71</td>
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<td>32%</td>
<td>1</td>
<td>1</td>
<td>67</td>
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<td>14%</td>
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<td>49</td>
<td>43058</td>
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<td>54%</td>
<td>3</td>
<td>1</td>
<td>54</td>
<td>28126</td>
<td>3</td>
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<td>13</td>
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<td>4</td>
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<td>0</td>
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<td>40</td>
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<td>Western Isles</td>
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<td>12</td>
<td>100%</td>
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<td>67</td>
<td>1597</td>
<td>0</td>
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<td>2786</td>
<td>50%</td>
<td>6</td>
<td>68</td>
<td>62</td>
<td>887142</td>
<td>100</td>
<td>349</td>
<td>784</td>
</tr>
</tbody>
</table>
6. Site activity

2016 - 2017
careopinion.org.uk

4.7m visits
37% increase on previous year

Visitors

- Returning Visitors: 61%
- New Visitors: 40%

New visitors in Scotland

- +65% in new visitors on previous year in Scotland

We think this is because more staff in more
Boards are reading and responding to stories.

How do people get onto Care Opinion?

- 70% Up by 26%
  Up by 26%
- 23% Up by 87%
  Up by 87%
- 7% Up by 24%
  Up by 24%

Bounce Rate

Bounce rate means although people find the site,
they leave immediately. The lower the number
the better.

- Industry standard 20% = excellent
- 3% Bounce Rate in Scotland

Connecting people for change, learning & improvement

Low bounce rate
More people visiting
Survey showing staff read stories about their own board

Ta-dah!
Where does this website traffic come from?

Yes – Irvine! Well done to North Ayrshire Health and Social Care Partnership and your lovely Care Opinion widgets for putting Irvine on the map!

Social Media

Our presence on social media is looking good too – all the stats you see here relate to the Care Opinion Facebook page and the Care Opinion Scotland Twitter account.
7. Communication and awareness raising

Letting people know that Care Opinion is a place where they can share their feedback to make a difference is one of the big challenges.

Encouraging services to see Care Opinion as a helpful participation and engagement tool and supporting them to raise awareness in various ways has always been our goal. We think it’s the most effective route in terms of time and money!

However, we do lots of other things too. Here’s a little flavour of our diary over the last year:

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
</tr>
</thead>
</table>
| April | • SPSO Customer Sounding Board  
       • Expert reference group meetings with our project partners, Talking Mats |
| May   | • Stand at Life Changes Trust Conference  
       • Presentation at Local Authority Complaint Handlers conference |
| June  | • Presentation to mental health nursing students  
       • Exhibiting at the NHS Scotland event |
| July  | • Issue an invite to all MSPs not already registered with Care Opinion |
| August| • Two day visit to present to various groups and staff in NHS Grampian |
| September | • Dementia and Community conference  
         • Attended launch of “a website to promote recovery after intensive care” |
| October| • Exploratory meetings with The State Hospital and Family Nurse Partnership  
        • Hosting first clinicians event |
| November | • Presenting at Scottish Independent Advocacy Alliance AGM  
       • Exhibiting at CCP’s annual conference  
       • Stand at Scottish Patient Safety Conference |
| December | • WestMARC Christmas lecture!  
         • Explaining Care Opinion to friends & family over Christmas dinner...again! |
| January | • Develop action plan of work with ACVO, third sector interface in Aberdeen  
        • Appearance on Aberdeen Community Radio |
| February | • Attended round table on health data  
       • Stand at NHS Lanarkshire’s Person Centred event  
       • Participated in an “Our Voice” event |
| March  | • Presentation to Highland Third Sector Interface  
       • Participated in/presented at two national person centred events  
       • Film making with NHS Fife |
8. Progress in social care

Since the completion of the pilot in June 2016, we have been working to engage with all Health and Social Care Partnerships (HSCPs) in Scotland offering a method for fully integrated health and social care feedback from people accessing and using services.

We have written to Chief Officers, Chairs, Vice Chairs of all HSCPs and some engagement leads.

As of March 2017, two partnerships (North Ayrshire, Dumfries and Galloway) have committed to subscription level access.

In March 2017, a submission was made to the Health and Sport Committee who called for Written Views - Integration Authorities Consultation with Stakeholders. An excerpt from this report is shown below and summarises progress with HSCPs.

<table>
<thead>
<tr>
<th>HSCP Engagement</th>
<th>No response</th>
<th>Early Discussion</th>
<th>Progressing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dumfries &amp; Galloway</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>North Ayrshire</td>
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<tr>
<td>North Lanarkshire</td>
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<tr>
<td>Shetland Islands</td>
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<tr>
<td>South Ayrshire</td>
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<tr>
<td>South Lanarkshire</td>
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<tr>
<td>Aberdeenshire</td>
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<tr>
<td>Argyll &amp; Bute</td>
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<tr>
<td>Clackmannanshire &amp; Stirling</td>
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<tr>
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Progressing: Positive and active interest is adopting use across HSCP
Early discussion: Initial interest and further consideration required
No response: As yet no response from these HSCP to invitations from Patient Opinion to discuss (3 communications since 1 August 2016)
9. What are our customers (subscribers) telling us?

We like feedback too: about how staff are using Care Opinion, what impact online feedback has on their jobs and what they think of the service we provide. We offer regular review sessions to all subscribers and actively seek feedback during these but they call us or email us at any time too.

In February this year, we issued a survey! Here’s a summary of what it told us.

The numbers

751 Users Invited  
All registered on paid subscription

119 Responses  
15.8% response rate

108 Analysed  
All responded to each quantitative question

Summary

- 80% of respondents say that they want to respond to feedback about their service
- 96% of respondents said they agreed that people should be able to see if feedback has led to a change
- 40% of respondents disagreed with the statement “responding to online feedback does not diminish complaints”, ie they DO think it has an impact!
- 59% of respondents agree that positive feedback via online feedback has had a positive impact on staff morale
- 53% of respondents say that using online feedback has had a positive impact on the way they work (45% no impact/don’t know)
- 54% of respondents agreed that using online feedback had a positive impact on organisational culture (44% no impact/don’t know)

What we learned...

Overall, subscribers were extremely positive about the service we provide, but there were a few areas that we’ve registered as areas for improvement. These include:-

- Raising awareness of Care Opinion amongst staff at subscribing organisations;
- Developing increased awareness and use of reporting and visualisation tools amongst staff on a subscription;
- Supporting subscribers to set relevant alerts.

You can read the full report, and about what we are doing to improve based on the online.
10. Continuous improvement in our organisation

We think it’s safe to say that Care Opinion has a culture of continuous improvement. Our Chief Executive has a saying “we can do anything, but we can’t do everything” which helps to keep our small, innovative, enthusiastic and hard working team) motivated!

Website Developments
Our values (page 2) of innovation, transparency and inclusivity drive all our developments. So though “anything is possible”, where the website is concerned: we focus on innovating to ensure transparency and inclusivity keeping stories at the heart of everything we do.

16/17 has seen a number of new features added to the website including:-

- Improvements to our smart alerting system, eg identifying “late” responses
- Weekly email digests
- Better viewing on mobile technology
- New visualisations and story swarm both best viewed online as they are interactive and allow you to drill down to that all important story.

About: Interactive tag bubbles about stories about NHS Scotland submitted between 01/04/2016 and 31/03/2017

Click the image to view the interactive tag bubble online
Quercus – the Care Opinion Quality Management System

Our moderation policy guides how we treat every story and response we receive. Continuously being reconsidered and refined, it aims to help us achieve consistency as we carry out this rewarding but often-challenging task.

We strive to for positive, professional and friendly interactions with everyone we encounter: authors, providers, suppliers, customers, organisations, people! 16/17 has been a year where we have continued developing a more systematic process to capture what we do, why we do it and how we do it.

The whole team has been involved in pulling together our quality management system and we’re pretty impressed with ourselves!

We also find ourselves on the receiving end of an increasing number of enquiries from other countries. We believe that the development of our quality management system will support organisations across the world to implement our independent online feedback model.

Walking the talk

In section 9 we shared some information about what our customers told us during a recent survey, the biggest subscriber survey we’ve ever done in Scotland.

We intend to use what we learned to improve what we do, if we can! We also intend to let our subscribers know when we’ve improved or changed...sounds familiar.

We are also planning some activities which will encourage more authors to tell us what they think of our service too. They already do online at careopinion.org.uk! You can read feedback about Care Opinion. However, we want to make the invitations clearer and more inviting.

Again, we’ll share this feedback, what we’ve learned and what we can do to improve.

This is us trying to walk the talk!

Inclusion

In 16-17 we commenced our work with Talking Mats on a project funded by Life Changes Trust: People Affected by Dementia Programme. The project seeks to integrate a Talking Mats inspired system of sharing experiences, online, in pictures and words. This work is hugely important to us at Care Opinion and it directly supports our values. To our knowledge, it will be globally unique in extending the use of an online feedback platform for people with dementia. That will allow us to hear from people who traditionally have not had a say. We hope this work will also support the wider movement of people challenging stigma and changing attitudes towards those with dementia.

Overall, we anticipate that bringing the Talking Mats system into Care Opinion will make it easier for many, many more people to “organise their thoughts and express their views”, helping health and care staff to learn from even more of the people they care for.
11. Our team

Care Opinion is run by a small, passionate and highly experienced team. We can only have impact because of the extraordinary support, energy and guidance of very many more.

In Scotland

Gina Alexander- Director, Care Opinion Scotland
@ginaaalexander
Gina was the first CO person on the ground in Scotland and now heads up our work across health and social care. Gina has previously worked as an involvement lead in mental health services at local level and in just about every sector - private, public, education, voluntary! Out of work, Gina’s happiest when eating, spending time with family and friends, knitting, singing and has a love/hate relationship with the gym!
Interesting fact- Gina jumped out the first plane she flew in!

Mike Hamilton- Integration Development Officer
@mikeedhamilton
Mike is taking forward our work in relation to health and social care integration in Scotland. This involves working with Health and Social Care Partnerships and social care providers across the country, advocating for Care Opinion to be an integral part of their participation and engagement systems designed to improve services.
Interesting fact- Mike’s qualifications include a degree in politics and a diploma in horticulture and enjoys bringing them both together!

Ben Simmons-Engagement and Support Officer
@bensimm86
Ben works with NHS staff to understand the benefit of subscribing to Care Opinion, and supporting them in its use. Ben also provides support in moderation of stories and subscriber support.
Interesting fact- Ben once hitchhiked to Paris from Edinburgh in the depths of winter dressed as a Werewolf to raise money for charity.

Clair Coutts - Administration & Projects Officer

As well as assisting with the implementation of the Care Opinion Quality Management system, Clair helps to keep the Scotland Care Opinion team organized with all things administrative.
Interesting fact- Clair is a qualified biker and scuba diver!

In Sheffield

James Munro -Chief Executive
@jamesfm55
James has been chief executive of Care Opinion since 2014. His background is clinical medicine, public health and health services research, and he has spent most of his time over the past 10 years overseeing the development of Care Opinion’s online feedback platform. As CEO James focuses on sharing Care Opinion’s mission with people in health and social care, and with health professionals in training, emphasizing the importance of generosity, curiosity and reciprocity in our work.
Interesting fact- James once tried to explain how Care Opinion worked to the Queen!
Miriam Rivas-Aguilar – Chief Operating Officer  
@miriamrivasa
Miriam was the very first employee, in 2005 and has been chief operating officer of Care Opinion since 2012. She has over 20 years’ experience in business development, operations, managing teams, project management, and service delivery working in both the private and public sector. As COO, Miriam oversees the various functions across the organisation, manages the team and loves to chat with service staff about Care Opinion! Some of Miriam’s interests are mentoring, Emotional Intelligence and ensuring that Care Opinion offers a happy work environment for the team. Interesting fact: Miriam was born in Chile, and has just returned from a sabbatical travelling through South and Central America!

Tim Hunt- Integration Development Manager  
@TimHunt59
Originally a social worker, Tim has an extensive background working in and managing services across health and social care. This includes working as a PALS manager, medical social worker, voluntary sector manager and manager of support services for a local authority. In all his posts, he has been passionate about public involvement and feedback; and has certainly found a place to follow that passion at Care Opinion. He leads on all the mental health and social care work at Care Opinion, believing that the website platform offers the public a unique opportunity to feedback all their experiences of care, in one place.
Interesting Fact- Tim listens to a piece of Bach and reads one poem every day.

Tina Timms - Office Administrator
Tina provides much-needed support and organization (as well as a tasty range of Indian snacks). Among other things, she provides daily assistance to the team, and people who call to share their story with us over the phone.
Interesting fact – As a child, survived a fall out of a first-floor window after being caught by a passer-by.

Sarah Ashurst- Subscriber Services Manager  
@sarahashurst08
Sarah brings energy and enthusiasm to her role at Care Opinion. She leads the support team who are the first point of contact for many of the NHS organizations we work with, helping them embed Care Opinion within their services. Sarah is also one of several senior moderators in the team and is responsible for keeping our moderation policy up to date, fair, and in keeping with current legal guidelines. This ensures Care Opinion can continue to publish amazing and often challenging patient stories, pushing the patient voice into the heart of services.
Interesting fact- Between Rock climbing and knitting, Sarah is teaching herself how to make her own clothes.

Cally Bowman- Support and Social Media Officer  
@callytweets
After studying Ethics, IR and Peace Studies at Lancaster University Cally joined the C.O team. It’s her role to support our subscribers and help them to engage with their feedback. Cally also works to support subscribers to use various social media platforms to gain feedback and share their great work, as well as managing Care Opinion’s social media presence. She loves to travel, is passionate about animal rights and loves nothing more than a good cup of coffee and an avocado.
Interesting fact- Cally created a Facebook event to promote breast cancer awareness that had over 34,000 attendees worldwide!
Kate Williams - Engagement and Support Officer  
@Katewilliams_17  
Kate is the newest member of our team. She is a Politics and International Relations graduate from the University of Hull, but hails from the Welsh Valleys. As part of her role she moderates stories that are uploaded to the site, generates engagement from both subscribers and patients alike, and provides support where needed. She is a retired sports woman, who adores Welsh rugby, pizza, writing and cooking.  
Interesting fact- Kate once met Princes Diana and gave her flowers

Robert Head - Senior Developer  
Rob maintains the Care Opinion websites in the UK, Ireland and Australia. He designs and codes features as well as fixes bugs. He also supplies Labrador photos to improve office morale.  
Interesting fact- Rob was a practicing Buddhist for 2 years which included not swearing!

Ross Padwick – Head of Finance and Company Secretary  
Ross joined in November 2010. He previously worked as an accountant in practice undertaking auditing and reporting on financial performance to both large companies and SME's. He then worked as a Financial Controller and Company Secretary for a group of start-ups before joining Patient Opinion.  
In his day to day role at Care Opinion, Ross deals with all finance related matters, procurement and tenders.  
Interesting fact- He loves cats!