Greater Glasgow NHS Board

Board Meeting

Tuesday, 16 March 2004 **Board Paper No. 04/18**

HEAD OF BOARD ADMINISTRATION AND
TRUST CHIEF EXECUTIVES

QUARTERLY REPORTS ON COMPLAINTS : OCTOBER - DECEMBER 2003

Recommendation

The Board is asked to:-

(a) note the quarterly report on NHS complaints in Greater Glasgow for the period 1 October to 31 December 2003 (Appendix A);

(b) note the extract from the Information Service Division's (ISD) Annual Report entitled "NHSScotland Complaints Statistics - Year Ending 31 March 2003" (Appendix B);

(c) approve the extension to the Terms of Office of 9 Lay Chairs, and 7 Conciliators (Appendix C).

APPENDIX A

1. Greater Glasgow NHS Board

There was one Local Resolution complaint received this quarter. This was a complex case involving the NHS and Social Work and is ongoing. The complainant has been attending meetings with the NHS Board and the Social Work in trying to resolve this complaint The complaint was acknowledged within four working days of receipt but has not met the target of a full response within 20 working days due to the complex nature of the investigations.

There were no requests for an Independent Review this quarter.

2. Trust Performance

The information contained in the Complaints Report forms part of the Performance Assessment Framework (PAF) and in future will be reported to the Performance Review Group.

(a) October - December 2003

Shown below are the performances of each Trust against the national target of 70% of written Local Resolution Complaints to be completed within 20 working days of receipt:-

	No. of Complaints	No. Completed Within 20 Working Days	As Shown as %
North Trust	222	140	63%
South Trust	139	96	69%
Yorkhill Trust	31	16	52%
PCT Trust (excluding FHS)	13	9	69%

(b) Further Breakdown of Trust Performance

For ease of reference Trust performance against the national target has been summarised to show the last four quarters as indicated overleaf:-

	01/10/03 31/12/03	01/07/03 30/09/03	01/04/03 - 30/06/03	01/01/03 31/03/03
North Trust	63%	71%	64%	84%
South Trust	69%	74%	75%	75%
Yorkhill Trust	52%	39%	49%	53%
PCT Trust (excluding FHS)	69%	25%	55%	56%

3. Themes and Trends

Trust Chief Executives may wish to expand, at the meeting, on any themes or trends noticed with regard to complaints handling at their Trust. For the purposes of an NHS Greater Glasgow analysis, the following three areas attracted the most number of complaints:-

- Clinical Treatment
- Waiting Times
- Communication (written/oral).

Action taken and lessons learned for patient care as a result of complaints completed this quarter are as follows:-

North Trust	➢ Ward staff being reminded to explain to patients why a certain drug may not be given at a set time and why. ➢ Issue about patients' own drugs was raised, as the medication had been left lying on the top of the locker. It was felt that this was not safe practice and the Ward Manager has now obtained a locked cupboard and ensured that staff are familiar with the procedure for storing patients' own medication and will sign to confirm that they have done so.
South Trust	➢ Following concerns raised by a relative who had consented to a Post Mortem and no further information had been received, the Trust agreed to review the arrangements for ensuring the appropriate information is made available through the GP or requesting Consultant. ➢ Patient concerned about the lack of communication from the Trust in respect of a Plastic Surgery referral gave the Trust the opportunity to review referral arrangements and reiterate to the GPs that they communicate appropriately to their patients about the procedure for such referrals. ➢ Partial booking system is being piloted in ENT, Ophthalmology, Dermatology, Orthopaedics which should minimise disruption to patients when clinics are re-scheduled.
Yorkhill Trust	➢ Efforts continue to be made to reduce waiting times.
PCT Trust (excluding FHS)	➢ As a result of a complaint within an elderly ward, an action plan has been drawn up to address communication issues in the ward. ➢ Nursing staff in a particular LHCC have been reminded of the option of making direct referrals to Podiatry if they feel this is necessary. ➢ An assessment of knowledge of SIGN guidance was commenced in an LHCC. ➢ Staff in a particular ward have been reminded of the importance of communicating with families on patients' treatment and well-being. ➢ Staff in a ward have been reminded of their responsibilities in respect the cleanliness and general fabric of the ward.

Following a request from Greater Glasgow Health Council, the outcome of complaints completed at Local Resolution, in terms of number upheld, number upheld in part and number not upheld have been analysed as indicated overleaf:-

	October – December 2003			
	Complaints Completed	Upheld	Upheld in Part	Not Upheld
North Trust	222	64 (29%)	64 (29%)	94 (42%)
South Trust	139	40 (29%)	30 (21%)	69 (50%)
Yorkhill Trust	31	5 (16%)	16 (52%)	10 (32%)
PCT Trust (excluding FHS)	13	4 (31%)	5 (38%)	4 (31%)

4. Conciliation

Within this quarter, no requests were received for a conciliator.

5. Scottish Executive Complaints Consultation

The NHS Board awaits notification of the timescale of the introduction of the new NHS Complaints Procedure. Notwithstanding this, the Head of Board Administration has met with the NHS Trust Complaints Officers to prepare for single system working and the introduction of the NHS Complaints Procedure. A review has been undertaken of all complaints leaflets/literature and a range of issues have been identified for further discussion at the March meeting in order to agree a commonality of approach across NHS Greater Glasgow. Appendix C sets out the need to continue with Lay Chairs and Panel Members for a further year and once the Local Health Council arrangements change on 1 April 2005, the NHS Board will be required to put in place advocacy support to assist complainants through the Complaints Procedure.

6. Report Distribution

The quarterly Complaints Report continues to be circulated to Conveners, Lay Chairmen and Members, Trust Complaints Officers, as well as Conciliators for their information.

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North Glasgow University Hospitals NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	222
(b)	Number of complaints completed at Local Resolution within 20 working days	140
(c)	(b) shown as a percentage of (a) ***[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]***	63%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	64
	Number upheld in part	64
	Number not upheld	94

Independent Review

(a)	Number of requests for Independent Review received	1
(b)	Outcome of requests for Independent Review received:	
	Number referred back to Local Resolution	0
	Number refused	2
	Number proceeding	1
	Decision Awaited	0
(c)	Number of requests for Independent Review completed	0
(d)	Outcome of Independent Review Panel Hearings completed:	
	Number upheld	0
	Number upheld in part	0
	Number not upheld	0

Ombudsman

Notification from the Ombudsman this quarter that he is investigating any Trust complaint. If so:

(a)	Number:	0
(b)	Of these:	
	Number from Independent Review refusal	0
	Number gone through Independent Review	0

Habitual and/or Vexatious Complaints

Number of complaints declared habitual and/or vexatious within quarter	0

Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

- Ward staff being reminded to explain to patients why a certain drug may not be given at a set time and why.
- Issue about patients' own drugs was raised, as the medication had been left lying on the top of the locker. It was felt that this was not safe practice and the Ward Manager has now obtained a locked cupboard and ensured that staff are familiar with the procedure for storing patients' own medication and will sign to confirm that they have done so.

Breakdown of the Three Issues Attracting Most Complaints this Quarter and the Reasons for this

1. Clinical Treatment
2. Waiting Times for Appointment *[There continues to be a lengthy wait for Audiology assessment appointments with the current wait at 49 weeks across North Glasgow. Investment in 2003 has enabled the Audiology Service to purchase new 'Unity' systems and a patient management system, which were installed in November/December 2003 last year. These will enable the Audiology Service to provide a quality service for the provision of digital aids when appropriate]*.
3. Attitude and Behaviour.

Trends of Complaints Noticed this Quarter

Several complaints were noted which relate to problems encountered with discharge planning. An audit of this area of patient care has been carried out with results to be discussed at Divisional level and action plan developed.

Specific Service Improvements Made as a Result of Complaints Completed

A complaint relating to a patient not being given the choice of general or local anaesthetic for an outpatient gynaecological procedure, has resulted in this topic now being included in the teaching session for junior medical staff, where it will be emphasised that patients should be given this choice at their initial outpatient consultation.

EMBARGOED UNTIL DATE OF MEETING

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	38
	Medical/Dental	13
	Nursing	19
	PAMS	0
	Ambulance (& paramedics)	6
	Administration	0
	Other	0
•	Complaint handling	0
•	Communication (written/oral)	34
•	Shortage/availability	3
Waiting times for		
•	Date for admission/attendance	22
•	Date for appointment	45
•	Result of tests	4
Delays in/at		
•	Admission/transfer/discharge procedures	3
•	Outpatient and other clinics	12
•	A & E	5
Environment/domestic		
•	Aids & appliances, equipment, premises (including access)	10
•	Catering	5
•	Cleanliness/laundry	9
•	Patient privacy/dignity	10
•	Patient property/expenses	3
•	Patient status/discrimination (e.g. race, gender, age)	0
•	Personal records (including medical, complaints)	5
•	Shortage of beds	0

ISSUES RAISED		NUMBER
Procedural issues		
•	Failure to follow agreed procedure	0
•	Policy and commercial decisions (of trusts)	2
•	NHS Board commissioning	0
•	Mortuary/post mortem arrangements	0
•	*Code of Openness* complaints	0
Treatment		
•	Clinical treatment (all aspects)	90
	Medical/Dental	56
	Nursing	33
	Other Staff	1
•	Consent	0
•	**Transport Arrangements (including ambulances)**	6
•	**Other** (where no definition applies)	11

South Glasgow University Hospitals NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	139
(b)	Number of complaints completed at Local Resolution within 20 working days	96
(c)	(b) shown as a percentage of (a) ***[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]***	69%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	40
	Number upheld in part	30
	Number not upheld	69

Independent Review

(a)	Number of requests for Independent Review received	3
(b)	Outcome of requests for Independent Review received:	
	Number referred back to Local Resolution	0
	Number refused	1
	Number proceeding	0
	Decision Awaited	2
(c)	Number of requests for Independent Review completed	0
(d)	Outcome of Independent Review Panel Hearings completed:	
	Number upheld	0
	Number upheld in part	0
	Number not upheld	0

Ombudsman

Notification from the Ombudsman this quarter that he is investigating any Trust complaint. If so:

(a)	Number:	0
(b)	Of these:	
	Number from Independent Review refusal	0
	Number gone through Independent Review	0

Habitual and/or Vexatious Complaints

Number of complaints declared habitual and/or vexatious within quarter	0

Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

- Following concerns raised by a relative who had consented to a Post Mortem and no further information had been received, the Trust agreed to review the arrangements for ensuring the appropriate information is made available through the GP or requesting Consultant.

- Patient concerned about the lack of communication from the Trust in respect of a Plastic Surgery referral gave the Trust the opportunity to review referral arrangements and reiterate to the GPs that they communicate appropriately to their patients about the procedure for such referrals.

- Partial booking system is being piloted in ENT, Ophthalmology, Dermatology, Orthopaedics which should minimise disruption to patients when clinics are re-scheduled.

Breakdown of the Three Issues Attracting Most Complaints this Quarter and the Reasons for this

1. Attitude and Communication
2. Clinical Treatment
3. Waiting Times.

Trends of Complaints Noticed this Quarter

- For the first quarter a reduction in complaints around waiting times.

- The number of complaints October to December shows a reduction over the very high volume of complaints in the June to September quarter but is still nearly a 40% increase over the same period 12 months previously.

Specific Service Improvements Made as a Result of Complaints Completed

- Following concerns raised by a relative who had consented to a Post Mortem and no further information had been received, the Trust agreed to review the arrangements for ensuring the appropriate information is made available through the GP or requesting Consultant.

- Patient concerned about the lack of communication from the Trust in respect of a Plastic Surgery referral gave the Trust the opportunity to review referral arrangements and reiterate to the GPs that they communicate appropriately to their patients about the procedure for such referrals.

- Partial booking system is being piloted in ENT, Ophthalmology, Dermatology, Orthopaedics which should minimise disruption to patients when clinics are re-scheduled.

EMBARGOED UNTIL DATE OF MEETING

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	
	Medical/Dental	2
	Nursing	12
	PAMS	0
	Ambulance (& paramedics)	0
	Administration	0
	Other	3
•	Complaint handling	0
•	Communication (written/oral)	29
•	Shortage/availability	2
Waiting times for		
•	Date for admission/attendance	12
•	Date for appointment	19
•	Result of tests	1
Delays in/at		
•	Admission/transfer/discharge procedures	0
•	Outpatient and other clinics	2
•	A & E	8
Environment/domestic		
•	Aids & appliances, equipment, premises (including access)	8
•	Catering	6
•	Cleanliness/laundry	6
•	Patient privacy/dignity	3
•	Patient property/expenses	0
•	Patient status/discrimination (e.g. race, gender, age)	0
•	Personal records (including medical, complaints)	2
•	Shortage of beds	1

ISSUES RAISED		NUMBER
Procedural issues		
•	Failure to follow agreed procedure	0
•	Policy and commercial decisions (of trusts)	0
•	NHS Board commissioning	0
•	Mortuary/post mortem arrangements	0
•	*Code of Openness* complaints	0
Treatment		
•	Clinical treatment (all aspects)	48
	Medical/Dental	29
	Nursing	14
	Other Staff	5
•	Consent	0
•	**Transport Arrangements (including ambulances)**	5
•	**Other** (where no definition applies)	3

Yorkhill NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	31
(b)	Number of complaints completed at Local Resolution within 20 working days	16
(c)	(b) shown as a percentage of (a) ***[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]***	52%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	5
	Number upheld in part	16
	Number not upheld	10

Independent Review

(a)	Number of requests for Independent Review received	1
(b)	Outcome of requests for Independent Review received:	
	Number referred back to Local Resolution	0
	Number refused	0
	Number proceeding	0
	Decision Awaited	1
(c)	Number of requests for Independent Review completed	0
(d)	Outcome of Independent Review Panel Hearings completed:	
	Number upheld	0
	Number upheld in part	0
	Number not upheld	0

Ombudsman

Notification from the Ombudsman this quarter that he is investigating any Trust complaint. If so:

(a)	Number:	0
(b)	Of these:	
	Number from Independent Review refusal	0
	Number gone through Independent Review	0

Habitual and/or Vexatious Complaints

Number of complaints declared habitual and/or vexatious within quarter	0

Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

Efforts continue to be made to reduce waiting times.

Breakdown of the Three Issues Attracting Most Complaints this Quarter and the Reasons for this

1. Attitude and Behaviour of Staff
2. Communication (written and oral)
3. Clinical Treatment.

Trends of Complaints Noticed this Quarter

No particular trend identified.

Specific Service Improvements Made as a Result of Complaints Completed

- More information is now given to parents regarding some isolation cubicles.
- Parents of certain categories of patients have been advised that, due to winter pressures, their children may have to "board" in different wards. Training has been given to staff to improve care and communication of these patients.

EMBARGOED UNTIL DATE OF MEETING

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	
	Medical/Dental	5
	Nursing	5
	PAMS	0
	Ambulance (& paramedics)	0
	Administration	2
	Other	0
•	Complaint handling	3
•	Communication (written/oral)	9
•	Shortage/availability	2
Waiting times for		
•	Date for admission/attendance	0
•	Date for appointment	3
•	Result of tests	2
Delays in/at		
•	Admission/transfer/discharge procedures	0
•	Outpatient and other clinics	1
•	A & E	0
Environment/domestic		
•	Aids & appliances, equipment, premises (including access)	6
•	Catering	2
•	Cleanliness/laundry	4
•	Patient privacy/dignity	2
•	Patient property/expenses	0
•	Patient status/discrimination (e.g. race, gender, age)	0
•	Personal records (including medical, complaints)	0
•	Shortage of beds	0

ISSUES RAISED		NUMBER
Procedural issues		
•	Failure to follow agreed procedure	0
•	Policy and commercial decisions (of trusts)	1
•	NHS Board commissioning	0
•	Mortuary/post mortem arrangements	0
•	*Code of Openness* complaints	0
Treatment		
•	Clinical treatment (all aspects)	16
	Medical/Dental	9
	Nursing	6
	Other Staff	1
•	Consent	0
•	**Transport Arrangements (including ambulances)**	0
•	**Other** (where no definition applies)	4

Greater Glasgow Primary Care NHS Trust (Community & Mental Health)

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	13
(b)	Number of complaints completed at Local Resolution within 20 working days	9
(c)	(b) shown as a percentage of (a) ***[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]***	69%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	4
	Number upheld in part	5
	Number not upheld	4

Independent Review

(a)	Number of requests for Independent Review received	2
(b)	Outcome of requests for Independent Review received:	
	Number referred back to Local Resolution	0
	Number refused	2
	Number proceeding	0
	Decision Awaited	0
(c)	Number of requests for Independent Review completed	0
(d)	Outcome of Independent Review Panel Hearings completed:	
	Number upheld	0
	Number upheld in part	0
	Number not upheld	0

Ombudsman

Notification from the Ombudsman this quarter that he is investigating any Trust complaint. If so:

(a)	Number:	0
(b)	Of these:	
	Number from Independent Review refusal	0
	Number gone through Independent Review	0

Habitual and/or Vexatious Complaints

Number of complaints declared habitual and/or vexatious within quarter	0

Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

- As a result of a complaint within an elderly ward, an action plan has been drawn up to address communication issues in the ward.
- Nursing staff in a particular LHCC have been reminded of the option of making direct referrals to Podiatry if they feel this is necessary.
- An assessment of knowledge of SIGN guidance was commenced in an LHCC.
- Staff in a particular ward have been reminded of the importance of communicating with families on patients' treatment and well-being.
- Staff in a ward have been reminded of their responsibilities in respect the cleanliness and general fabric of the ward.

Breakdown of the Three Issues Attracting Most Complaints this Quarter and the Reasons for this

1. Communication)
2. Attitude) This is in keeping with previous quarters.
3. Clinical Treatment)

Trends of Complaints Noticed this Quarter

There was no specific trend in complaints this quarter.

Specific Service Improvements Made as a Result of Complaints Completed

- As a result of a weakness being identified, documentation has been improved to reflect whether a patient has been informed of their rights under the Mental Health Act.

- As a result of a complaint from a patient who found the location of a mobile breast screening unit inconvenient, the rationale for assigning patients to specific units will be considered in future to ensure that patients are being assigned to the most appropriate unit for their postal address.

EMBARGOED UNTIL DATE OF MEETING

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	
	Medical/Dental	1
	Nursing	3
	PAMS	1
	Ambulance (& paramedics)	0
	Administration	0
	Other	0
•	Complaint handling	1
•	Communication (written/oral)	7
•	Shortage/availability	0
Waiting times for		
•	Date for admission/attendance	0
•	Date for appointment	2
•	Result of tests	0
Delays in/at		
•	Admission/transfer/discharge procedures	0
•	Outpatient and other clinics	0
•	A & E	0
Environment/domestic		
•	Aids & appliances, equipment, premises (including access)	2
•	Catering	1
•	Cleanliness/laundry	0
•	Patient privacy/dignity	1
•	Patient property/expenses	0
•	Patient status/discrimination (e.g. race, gender, age)	0
•	Personal records (including medical, complaints)	0
•	Shortage of beds	0

ISSUES RAISED		NUMBER
Procedural issues		
•	Failure to follow agreed procedure	1
•	Policy and commercial decisions (of trusts)	0
•	NHS Board commissioning	0
•	Mortuary/post mortem arrangements	0
•	*Code of Openness* complaints	0
Treatment		
•	Clinical treatment (all aspects)	5
	Medical/Dental	3
	Nursing	2
	Other Staff	0
•	Consent	0
•	**Transport Arrangements (including ambulances)**	0
•	**Other** (where no definition applies)	0

EMBARGOED UNTIL DATE OF MEETING

Greater Glasgow Primary Care NHS Trust (Family Health Service Practitioners)

Family Health Service Practitioners (that is, doctors, dentists, pharmacists and opticians) are not required to report the number of complaints they receive at Local Resolution quarterly - they report their Local Resolution figures annually to Greater Glasgow Primary Care NHS Trust. Similarly, FHS Practitioners are not required to advise the Trust (or NHS Board) on any action taken or lessons learned as a result of Local Resolution complaints.

Independent Review

(a)	Number of requests for Independent Review received	7
(b)	Outcome of requests for Independent Review received:	
	Number referred back to Local Resolution	1
	Number refused	3
	Number proceeding	0
	Decision Awaited	3
(c)	Number of requests for Independent Review completed	0
(d)	Outcome of Independent Review Panel Hearings completed:	
	Number upheld	0
	Number upheld in part	0
	Number not upheld	0

Ombudsman

Notification from the Ombudsman this quarter that he is investigating any Trust complaint. If so:

(a)	Number:	0
(b)	Of these:	
	Number from Independent Review refusal	0
	Number gone through Independent Review	0

Habitual and/or Vexatious Complaints

Number of complaints declared habitual and/or vexatious within quarter	0

APPENDIX B

NHS SCOTLAND COMPLAINTS STATISTICS - YEAR ENDING 31 MARCH 2003

Information about complaints is recorded by NHS Trusts, NHS Boards and other NHS organisations. The information published by Information and Statistics Division (ISD) is derived from returns submitted by these organisations to ISD Scotland and refers to written complaints received by hospital and community health services, NHS Boards and primary care services. The manner in which complaints are dealt with and the lessons learned can help improve the provision of health care for those in need.

The topics covered include:

- the number of complaints;
- the time taken to deal with complaints and their outcome;
- issued raised in complaints;
- requests made for Independent Review.

A summary of the main points contained in the national publication covering the period 1 April 2002 – 31 March 2003 is as follows:

1. Trust Complaints Across Scotland

- A total of 7770 written complaints were received by NHS trusts in 2002/03, which is similar to the number received in 2001/02 (7723).

- 93.2% of trust complaints were acknowledged within the national target timescale of 3 working days of receipt, compared with 90.8% in 2001/02.

- 60.5% of trust complaints were dealt with within 20 working days (the national target), compared with 59.4% in 2001/02 and 61.4% in 2000/01. It should be noted that public holidays are not taken into account when response times are calculated. In 2002/03 the median time taken to deal with complaints was 19 working days, compared with 19 days in 2001/02 and 18 days in 2000/2001.

- The vast majority of trust complaints were dealt with at local resolution level. Very few complainants, dissatisfied with the response received at local resolution, requested that their complaint be considered by an independent review panel. Of complaints received in 2002/03, the number resulting in a request for independent review at the time of reporting was 83, i.e. 1.1% of the total number of complaints. The number of requests may increase from the figure shown as requests for independent review may follow many weeks or months after the original complaint.

- Of the 83 independent review requests, the convener decided in 39 cases to refer the complaint back to local resolution, in 28 cases no further action was required and in 9 cases the decision was made to convene an independent review panel. A further 7 requests were still under consideration at the time of reporting.

- 30.6% of all issues raised in trust complaints were staffing issues, 22.8% related to treatment and 19.8% related to waiting times. Within the broad category of 'staff' issues, the attitude/behaviour of staff (15.9% of all issues raised) and aspects of written and oral communication (12.4%) were the most common issues raised.

- 27.4% of trust complaints were upheld in full and 35.6% were upheld in part. This compares with 31.2% upheld in full and 33.0% partly upheld for complaints in 2001/02.

1.1 Trust Complaints in Glasgow

	Local Resolution			Independent Review	
Trust	**No of Complaints Received**	**% Dealt within 20 Working Days**	**% Ackn. Within 3 Working Days**	**Requests for Panel**	**Panel Convened**
North Glasgow	931	57.5	94.8	9	1
South Glasgow	430	65.1	96.0	4	1
Primary Care	57	54.4	87.7	4	-
Yorkhill	179	49.2	89.9	1	-
Totals	**1597**			**18**	**2**

2. NHS Board Complaints Across Scotland

- In 2002/03 121 written complaints were received by non-island NHS boards (excluding the State Hospital and the Scottish Ambulance Service) compared with 138 in 2001/02 and 56 in 2000/01. Of complaints received in 2002/03, 76.0% were dealt with within 20 working days (the national target) and 1 complaint resulted in a request for independent review.

- Procedural issues and waiting times were the most common subject areas raised in NHS board complaints, accounting for 33.6% and 28.8% respectively of all issues raised.

- 15.7% of NHS board complaints were upheld in full and a further 43.0% were partly upheld. This compares with 8.7% upheld in full and 48.6% upheld in part in 2001/02.

- Island boards deal with both NHS board and hospital and community health services complaints. There were 70 complaints in 2002/03 handled by island boards compared with 53 in 2001/02 and 52 in 2000/01.

- 150 complaints were received by the State Hospital compared with 111 in 2001/02.

- 393 complaints were received by the Scottish Ambulance Service compared with 465 in 2001/02.

2.1 GGNHSB Complaints

	Local Resolution			Independent Review	
	No of Complaints Received	**% Dealt within 20 Working Days**	**% Ackn. Within 3 Working Days**	**Requests for Panel**	**Panel Convened**
2002/03	3	66.7	100	-	-
2001/02	6	33.3	83.3	1	-
2000/01	2	0	100	-	-
1999/20	10	100	90	-	-
1998/99	44	93.2	88.6	-	-
1997/98	20	75.0	85.0	-	-

3. Primary Care Practitioner Complaints Across Scotland

A total of 3173 written complaints were received by primary care services in 2002/03, an increase of 13.1% on the previous years figure of 2806.

Most primary care complaints are dealt with at local resolution level. The number of primary care complaints resulting in a request for independent review was 69 compared with 92 in 2001/02 and 103 in 2000/01. The number of requests may increase from the figure shown as requests for independent review may follow many weeks after the original complaint.

3.1 Glasgow Primary Care Practitioner Complaints

	Complaints Received			
	Total	**Medical**	**Dental**	**Health Board Primary Care Administration**
2002/03	617	525	92	-
2001/02	528	450	78	-
2000/01	521	435	86	-
1999/00	477	411	66	-
1998/99	496	399	96	1
1997/98	484	412	72	-

3.2 Glasgow Primary Care Complaints – Requests for Independent Review

	Decision of Convener				
	Total Requests	**No Further Action**	**Refer Back to Local Resolution**	**Convene Panel**	**Decision Outstanding**
2002/03	11	4	7	-	-
2001/02	15	11	4	-	-
2000/01	7	6	1	-	-
1999/00	12	10	1	-	1
1998/99	19	14	4	1	-
1997/98	13	9	1	-	3

APPENDIX C

EXTENSIONS TO TERMS OF OFFICE

NHS Boards are responsible for putting in place arrangements for recruiting, appointing and maintaining lists of Independent Lay Chairs, Lay Panel Members and Conciliators. Additionally, NHS Boards are required to facilitate the training of such key personnel in the NHS Complaints Procedure.

The allocation of Chairs/Lay Members/Conciliators is organised in a balanced and independent way so that no one person becomes regularly linked with a particular Trust.

Within Greater Glasgow NHS Board we have:

- 18 Independent Lay Chairs
- 4 Lay Panel Members
- 6 Conciliators

Independent Lay Chairs

Nine Independent Lay Chairs have a term of office which expires on 31 March 2004:-

- Paul Bennett
- Edward Broom
- Archie M Fleming
- Hugh Lafferty
- Alex McMillan
- Catherine Woodford
- Ian Wright

The Board is asked to approve an extension to these terms of office for one year, that is, until 31 March 2005, or at a date when the role ceases to be part of the procedure, whichever is earlier. The Secretariat Manager wrote to all nine Lay Chairs to seek their agreement to reappointment and all have confirmed they are happy to continue in their role for a further one year. It is recognised that the consultation document launched a new Procedure for Complaints does not envisage a role for Lay Chairs and Panel Members. A new procedure is likely to be introduced shortly and therefore it is likely that the Lay Chairmen and Panel Members will not require to serve a further two years.

An Independent Lay Chair is a source of help in ensuring that the convening decision is based on an independent, unbiased review of the facts.

During the convening stage, the Lay Chair:

- Provides independent, unbiased advice to the Convener on the basis of the facts reviewed.
- Takes responsibility and control after the terms of reference are written.

During the Panel stage, the Lay Chair is responsible for:

- Working within the terms of reference.
- Agreeing how the Panel operates.
- Ensuring clinical assessors are present at all interviews involving clinical issues.
- Determining access to all files, personnel and interviewees.
- Ensuring confidentiality.

- Writing and circulating the Independent Review Panel Report.

Conciliators

Six Conciliators have a term of office which expires on 31 May 2004:-

- Shafqat Ali
- Alan Fraser
- Christine Hogg
- Fiona McKelvie
- Helen Millar
- Marie Quinn.

The Board is asked to approve an extension to these terms of office for 12 months (the maximum allowed in the Scottish Executive Directions) that is, until 31 May 2005. The Secretariat Manager wrote to all seven Conciliators to seek their agreement to reappointment and all have confirmed they are happy to continue in their role for a further 12 month period.

Conciliation is a voluntary process that seeks to resolve difficulties which may help the resolution of a complaint. It is a process of examining and reviewing a complaint with outside assistance and is often useful in resolving difficulties arising from a breakdown of a relationship, but both parties must agree to the process being used. The aim of conciliation is to enable both parties to address the issues in a non-confrontational manner with the aim of reaching an agreement that both will accept. The function of the Conciliator is to assist the process, not to impose a solution and any resolution of the complaint must come from the parties concerned with the Conciliator seeking to clarify the issues and to help in exploring the options. Essentially, the Conciliator works to ensure that good communication takes place between the parties by encouraging the participants to explore the issues involved in the complaint in an open manner. The content of the process remains confidential with neither the Conciliator nor the participants providing information from the process to any other person.

Conciliation may also be a useful means of resolving complaints where the complainant has requested an Independent Review but the Convener believes further Local Resolution would be appropriate.