

Greater Glasgow NHS Board

Board Meeting

Tuesday, 17 June 2003

Board Paper No. 03/44

HEAD OF BOARD ADMINISTRATION AND TRUST CHIEF EXECUTIVES

QUARTERLY REPORTS ON COMPLAINTS : JANUARY – MARCH 2003

Recommendation

The Board is asked to note the quarterly report on NHS complaints in Greater Glasgow for the period 1 January to 31 March 2003;

1. Greater Glasgow NHS Board

There were no Local Resolution complaints received this quarter.

There were no requests for an Independent Review this quarter.

2. Trust Performance

The information contained in the Complaints Report will ultimately form part of the Performance Assessment Framework (PAF) and will be reported to the Performance Review and Resources Monitoring Group.

(a) January – March 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:-

	<u>No. of Complaints</u>	<u>No. Completed Within 20 Working Days</u>	<u>As Shown as %</u>
North Trust	224	188	84%
South Trust	133	100	75%
Yorkhill Trust	55	29	53%
PCT Trust (excluding FHS)	9	5	56%

(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:-

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	<u>01/01/03</u> <u>31/03/03</u>	<u>01/10/02</u> <u>31/12/02</u>	<u>01/07/02</u> <u>30/09/02</u>	<u>01/04/02 -</u> <u>30/06/02</u>
North Trust	84%	62%	63%	62%
South Trust	75%	54%	63%	66%
Yorkhill Trust	53%	42.5%	62%	44%
PCT Trust (excluding FHS)	56%	31%	43%	75%

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

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

North Trust	A new national patient held record is being developed, the design of which will make the status of blood and screening tests more explicit and identifiable for staff.
South Trust	Communication issues highlighted with appropriate medical and senior nursing staff to continue to focus attention on importance of good communication skills
Yorkhill Trust	Efforts continue to be made to reduce waiting times.
PCT Trust (excluding FHS)	Action has been taken to improve communication between Trust Staff and a nursing home, following an incident where home staff did not feed important information on a patient's condition back to the psychiatrist.

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 below:-

	<u>January – March 2003</u>			
	<u>Complaints Completed</u>	<u>Upheld</u>	<u>Upheld in Part</u>	<u>Not Upheld</u>
North Trust	224	76 (34%)	52 (23%)	96 (43%)
South Trust	133	26 (19%)	38 (29%)	69 (52%)
Yorkhill Trust	55	22 (40%)	21 (38%)	12 (22%)
PCT Trust (excluding FHS)	9	1 (11%)	4 (44.5%)	4 (44.5%)

4. Conciliation

Within this quarter, one request was received for a conciliator. This request was made by the Primary Care Trust and has now been concluded. Unfortunately the Conciliator reported that the parties could not agree on any aspect of the complaint.

5. Scottish Executive Complaints Consultation

At the May 03 Board meeting, Members were circulated with the outcome of a seminar held on 11 May 2003 of key NHS Greater Glasgow complaints personnel on the consultation document "Reforming the NHS Complaints Procedure" issued by the Scottish Executive Health Department. The NHS Board Chairman has now responded to the consultation document on complaints on behalf of NHS Greater Glasgow. This response has been sent to NHS Board Members and Complaints personnel (including Independent Review Panel Chairmen, Independent Review Panel Members, Lay Conciliators and Greater Glasgow Health Council) within NHS Greater Glasgow. We now await the outcome of the consultation on Reforming the NHS Complaints Procedure.

6. NHS Complaints Association Scotland

The Head of Board Administration, Mr J C Hamilton and Secretariat Manager, Ms S Gordon, are both members of the NHS Complaints Association Scotland. This continues to provide an opportunity for Complaints Officers in Scotland to discuss various topical issues in relation to complaints. A copy of the Association's Spring 2003 newsletter, "The Compass", is attached as Appendix A.

7. 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.

North Glasgow University Hospitals NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	224
(b)	Number of complaints completed at Local Resolution within 20 working days	188
(c)	(b) shown as a percentage of (a) <i>[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]</i>	84%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	76
	Number upheld in part	52
	Number not upheld	96

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	5
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	1
	Number refused	0
	Number proceeding	1
	Decision Awaited	3
(c)	Number of requests for Independent Review <u>completed</u>	0
(d)	Outcome of Independent Review Panel Hearings <u>completed</u> :	
	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
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Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

A new national patient held record is being developed, the design of which will make the status of blood and screening tests more explicit and identifiable for staff.

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

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

Action plans demonstrate a commitment by staff in these areas to address these issues, of note, dermatology waiting times are markedly improved.

Training sessions on complaints handling and customer care have been carried out across the Trust, together with a rolling programme of training in communication skills. Emphasis continues to be placed on the importance of in-house management of complaints and local resolution.

Urology at Stobhill has received a higher number of complaints in relation to out-patient appointments because of the retirement of two consultants and the use of locums. Efforts have been made to resolve this situation with the recent appointment of new locum consultant. Where appropriate, some patients have been referred to other Urology clinics

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where the waiting times are shorter. For Urology in general, senior medical staff are currently developing close links with primary care with a view to streamlining referrals which will result in an improvement in waiting times.

Trends of Complaints Noticed this Quarter

There was a marked increase in the number of complaints from MSPs, particularly during March.

An unusually high cause for complaints in relation to aids and appliances was because of the issue of digital hearing aids, following the announcement from the government that these were now available through the NHS. The investment and development of Audiology Services throughout Glasgow will provide additional staffing and equipment in order that patients can be assessed and where appropriate provided with digital hearing aids.

Specific Service Improvements Made as a Result of Complaints Completed

There were a high number of complaints in relation to out-patient appointments for endoscopy. This is being addressed with the new guidelines for the management of dyspepsia which have been widely distributed to General Practitioners.

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER	ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	51	Procedural issues		
	Medical/Dental		• Failure to follow agreed procedure		4
	Nursing		• Policy and commercial decisions (of trusts)		0
	PAMS		• NHS Board commissioning		1
	Ambulance (& paramedics)		• Mortuary/post mortem arrangements		0
	Administration		• <i>Code of Openness</i> complaints		0
	Other				
• Complaint handling	3	Treatment			
• Communication (written/oral)	56	• Clinical treatment (all aspects)		80	
• Shortage/availability	5	Medical/Dental			
		Nursing			
		Other Staff			
Waiting times for					
• Date for admission/attendance	18	• Consent		0	
• Date for appointment	60				
• Result of tests	7				
Delays in/at			• Transport Arrangements (including ambulances)		0
• Admission/transfer/discharge procedures	13				
• Outpatient and other clinics	16				
• A & E	17				
Environment/domestic			• Other (where no definition applies)		9
• Aids & appliances, equipment, premises (including access)	2				
• Catering	9				
• Cleanliness/laundry	16				
• Patient privacy/dignity	14				
• Patient property/expenses	4				
• Patient status/discrimination (e.g. race, gender, age)	1				
• Personal records (including medical, complaints)	2				
• Shortage of beds	3				

South Glasgow University Hospitals NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	133
(b)	Number of complaints completed at Local Resolution within 20 working days	100
(c)	(b) shown as a percentage of (a) <i>[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]</i>	75%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	26
	Number upheld in part	38
	Number not upheld	69

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	4
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	0
	Number refused	1
	Number proceeding	0
	Decision Awaited	3
(c)	Number of requests for Independent Review <u>completed</u>	0
(d)	Outcome of Independent Review Panel Hearings <u>completed</u> :	
	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
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Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

Communication issues highlighted with appropriate medical and senior nursing staff to continue to focus attention on importance of good communication skills.

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

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

Trends of Complaints Noticed this Quarter

There remains consistency in the number of patients complaining about waiting times for surgical procedures and previous initiatives are still being processed. Orthopaedic initiatives continue for dealing with the high demand for surgery.

Specific Service Improvements Made as a Result of Complaints Completed

- As a result of a small number of complaints about facilities for wheelchair users at both sites consideration is being given to adapting some existing bathrooms and access ramps by the Trust.
- Communication issues highlighted with appropriate medical and senior nursing staff to continue to focus attention on importance of good communication skills.

Report from the Ombudsman on Complaint – Mrs H

Complaint

Mrs H complained to the Ombudsman that:-

- there was inadequate assessment of Mr H's fitness for discharge;
- following Mr H's readmission, there were several failures in care and communication;
- the handling of the request for an Independent Review was dilatory and unsatisfactory.

Findings

The Ombudsman has issued a report into the complaints raised by Mrs H. The Ombudsman did not uphold the complaints related to Mr H's clinical care. He upheld, to a limited extent, a complaint about communication. He upheld a complaint about how the request for Independent Review was handled.

COMPLAINT CATEGORIES

ISSUES RAISED

NUMBER

ISSUES RAISED

NUMBER

Staff

Attitude/behaviour

Medical/Dental

4

Nursing

9

PAMS

0

Ambulance (& paramedics)

0

Administration

0

Other

1

• Complaint handling

0

• Communication (written/oral)

16

• Shortage/availability

1

Waiting times for

• Date for admission/attendance

21

• Date for appointment

25

• Result of tests

2

Delays in/at

• Admission/transfer/discharge procedures

6

• Outpatient and other clinics

3

• A & E

0

Environment/domestic

• Aids & appliances, equipment, premises (including access)

7

• Catering

1

• Cleanliness/laundry

2

• Patient privacy/dignity

1

• Patient property/expenses

6

• Patient status/discrimination (e.g. race, gender, age)

0

• Personal records (including medical, complaints)

5

• Shortage of beds

8

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)

36

Medical/Dental

30

Nursing

6

Other Staff

0

• Consent

0

• **Transport Arrangements (including ambulances)**

2

• **Other** (where no definition applies)

1

Yorkhill NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	55
(b)	Number of complaints completed at Local Resolution within 20 working days	29
(c)	(b) shown as a percentage of (a) <i>[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]</i>	53%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	22
	Number upheld in part	21
	Number not upheld	12

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	0
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	0
	Number refused	0
	Number proceeding	0
	Decision Awaited	0
(c)	Number of requests for Independent Review <u>completed</u>	0
(d)	Outcome of Independent Review Panel Hearings <u>completed</u> :	
	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
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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. Communication (written and oral)
2. Attitude and Behaviour of Staff
3. Waiting Times for Out-Patient Appointment Date

Trends of Complaints Noticed this Quarter

No particular trend identified.

Specific Service Improvements Made as a Result of Complaints Completed

Work ongoing to reduce waiting times and improve communication with families.

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER	ISSUES RAISED		NUMBER
Staff	Attitude/behaviour		Procedural issues		
	Medical/Dental	17	• Failure to follow agreed procedure		7
	Nursing	10	• Policy and commercial decisions (of trusts)		0
	PAMS	4	• NHS Board commissioning		0
	Ambulance (& paramedics)	0	• Mortuary/post mortem arrangements		0
	Administration	2	• <i>Code of Openness</i> complaints		0
	Other	2			
•	Complaint handling	3	Treatment		
•	Communication (written/oral)	42	• Clinical treatment (all aspects)		11
•	Shortage/availability	6	Medical/Dental		7
			Nursing		1
			Other Staff		3
Waiting times for			• Consent		1
•	Date for admission/attendance	2			
•	Date for appointment	10	• Transport Arrangements (including ambulances)		0
•	Result of tests	0			
Delays in/at			• Other (where no definition applies)		12
•	Admission/transfer/discharge procedures	2			
•	Outpatient and other clinics	5			
•	A & E	0			
Environment/domestic					
•	Aids & appliances, equipment, premises (including access)	5			
•	Catering	3			
•	Cleanliness/laundry	3			
•	Patient privacy/dignity	6			
•	Patient property/expenses	0			
•	Patient status/discrimination (e.g. race, gender, age)	0			
•	Personal records (including medical, complaints)	1			
•	Shortage of beds	0			

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

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	9
(b)	Number of complaints completed at Local Resolution within 20 working days	5
(c)	(b) shown as a percentage of (a) <i>[The Board's target is to complete 70% of Local Resolution Complaints within 20 working days]</i>	56%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	1
	Number upheld in part	4
	Number not upheld	4

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	1
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	0
	Number refused	0
	Number proceeding	0
	Decision Awaited	1
(c)	Number of requests for Independent Review <u>completed</u>	0
(d)	Outcome of Independent Review Panel Hearings <u>completed</u> :	
	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
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Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

Action has been taken to improve communication between Trust Staff and a nursing home, following an incident where home staff did not feed important information on a patient's condition back to the psychiatrist.

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

1. Clinical Treatment
2. Attitude and Behaviour
3. Various Issues

Trends of Complaints Noticed this Quarter

There was no specific trend in complaints other than perceived attitude issues in relation to a specific service area.

Specific Service Improvements Made as a Result of Complaints Completed

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COMPLAINT CATEGORIES

ISSUES RAISED

NUMBER

ISSUES RAISED

NUMBER

Staff

Attitude/behaviour

Medical/Dental

0

Nursing

1

PAMS

2

Ambulance (& paramedics)

0

Administration

1

Other

0

• Complaint handling

0

• Communication (written/oral)

1

• Shortage/availability

0

Waiting times for

• Date for admission/attendance

0

• Date for appointment

0

• 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)

1

• Catering

0

• Cleanliness/laundry

0

• Patient privacy/dignity

0

• Patient property/expenses

0

• Patient status/discrimination (e.g. race, gender, age)

0

• Personal records (including medical, complaints)

0

• Shortage of beds

0

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)

4

Medical/Dental

2

Nursing

2

Other Staff

0

• Consent

0

• **Transport Arrangements (including ambulances)**

0

• **Other** (where no definition applies)

3

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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 <u>received</u>	6
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	3
	Number refused	2
	Number proceeding	0
	Decision Awaited	1
(c)	Number of requests for Independent Review <u>completed</u>	0
(d)	Outcome of Independent Review Panel Hearings <u>completed</u> :	
	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
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