

Board Meeting
Tuesday, 18 April 2006

Board Paper No. 06/20

HEAD OF BOARD ADMINISTRATION,
CHIEF OPERATING OFFICER, ACUTE
LEAD DIRECTOR, CHCP (GLASGOW)

QUARTERLY REPORT ON COMPLAINTS :
OCTOBER – DECEMBER 2005

Recommendations:

- (a) The NHS Board is asked to note the quarterly report on NHS complaints in Greater Glasgow for the period 1 October to 31 December 2005 and note that it will also be considered by the Health and Clinical Governance Committee at its next meeting.
- (b) This is the second last report on the old organisational structure and Members are asked to consider what format/content they would like to see from reporting period April 2006 onwards in respect of Acute, CHCPs and CHPs.

1. Introduction

This quarterly complaints report provides a commentary and statistics on complaints handling throughout NHS Greater Glasgow for the period October – December 2005.

2. Performance Across NHS Greater Glasgow

The information contained in the Complaints Report forms part of the Performance Assessment Framework (PAF).

(a) Number of Complaints **Received** : October - December 2005

Shown below are the number of complaints received across NHS Greater Glasgow between October to December 2005. Alongside this are the number of complaints received across NHS Greater Glasgow in the previous quarter, that is, between July - September 2005

| | | |
|---------------------|-----|-----|
| GGNHSB | 0 | 0 |
| North Division | 137 | 172 |
| South Division | 126 | 97 |
| Yorkhill Division | 24 | 33 |
| PCD (excluding FHS) | 28 | 22 |

(b) Number of Complaints **Completed** : October - December 2005

Shown below are the number of complaints completed between October to December 2005. *Completed* figures are used for our analysis purposes rather than *received* figures so that outcomes can be reported. ISD, however, continue to record *received* data as they compile their information on an annual basis. The “complaint categories” shown in the four annexes are consistent with ISD.

This table also shows the performance of each of the four Divisions against the national target of 70% of written Local Resolution Complaints to be completed within 20 working days of receipt:-

| | <u>No. of Complaints Completed</u> | <u>No. Completed Within 20 Working Days</u> | <u>Shown as %</u> |
|---------------------|------------------------------------|---|-------------------|
| North Division | 153 | 81 | 53% |
| South Division | 100 | 66 | 66% |
| Yorkhill Division | 31 | 24 | 77% |
| PCD (excluding FHS) | 32 | 18 | 56% |

(c) Further Breakdown of Performance

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

| | <u>01/10/05 31/12/05</u> | <u>01/07/05 30/09/05</u> | <u>01/04/05 - 30/06/05</u> | <u>01/01/05 31/03/05</u> |
|---------------------|------------------------------|------------------------------|--------------------------------|------------------------------|
| North Division | 53% | 52% | 55% | 60% |
| South Division | 66% | 68% | 72% | 75% |
| Yorkhill Division | 77% | 59% | 23.5% | 61% |
| PCD (excluding FHS) | 56% | 50% | 67% | 61.5% |

(d) Outcome of Complaints at Local Resolution

The outcome of complaints at Local Resolution have been analysed as indicated below:-

| | <u>Complaints Completed</u> | <u>Upheld</u> | <u>Upheld In Part</u> | <u>Not Upheld</u> | <u>Conciliation</u> | <u>Irresolvable</u> |
|---------------------|-----------------------------|---------------|-----------------------|-------------------|---------------------|---------------------|
| North Division | 153 | 53 (35%) | 40 (26%) | 60 (39%) | - | - |
| South Division | 100 | 42 (42%) | 18 (18%) | 40 (40%) | - | - |
| Yorkhill Division | 31 | 8 (26%) | 11 (35%) | 12 (39%) | - | - |
| PCD (excluding FHS) | 32 | 7 (22%) | 14 (44%) | 11 (34%) | - | - |

(e) Ombudsman

Where a complainant remains dissatisfied with a Local Resolution response, they may write to the Ombudsman. The table below shows, for the four Divisions, where we have been notified this quarter of the Ombudsman’s involvement in a complaint and where notification of a formal investigation has been received.

Members will recall that the new NHS Complaints Procedure launched in April 2005 saw the removal of the second stage – independent review – and therefore this has an impact on the number of complaints which will be referred to the Scottish Public Services Ombudsman’s office.

| | <u>Notification of Ombudsman's Involvement</u> | <u>Notification of Ombudsman's Formal Investigation</u> |
|---------------------|--|---|
| North Division | 7 | 7 |
| South Division | 4 | 0 |
| Yorkhill Division | 0 | 1 |
| PCD (excluding FHS) | 0 | 2 |

In accordance with the Ombudsman's new reporting procedure, her office has laid three reports before the Scottish Parliament concerning NHS Greater Glasgow cases. As with all Ombudsman's reports they will be submitted in full to the Health and Clinical Governance Committee and the recommendations and actions required will be reviewed by that Committee and followed up where necessary to ensure implementation. In addition, the Ombudsman's office requires the NHS Board to write and confirm the steps taken to implement the actions/recommendations and any other action taken as a result of the Ombudsman's report. In each case it is also necessary to notify the Chief Executive, NHS Scotland, of the actions taken in connection with his attendance at the Scottish Parliament Health Committee who scrutinise each Ombudsman's report and seek assurances on the changes that have been brought to the NHS as a result of the Ombudsman's investigations. The three NHS Greater Glasgow cases are described as follows:-

1. **December 2005** – this case involved the care and treatment of a woman and her newborn daughter at the maternity unit of the Southern General Hospital.

Mr Robert Calderwood, Chief Executive, South Glasgow University Hospitals Division, responded to the Ombudsman setting out how the Division had addressed the points identified in the Ombudsman's report for this case.

2. **February 2006** - This case concerned a complaint about NHS Greater Glasgow (North Division) and centred around a patient's claim that the care provided by nursing staff was insufficient. The Ombudsman upheld most aspects of the complaint.

The Board accepted the recommendations made by the Ombudsman and has already implemented several changes that aim to eradicate the likelihood of such instances of insufficient nursing care arising in the future. Ms Jane Grant, Acting Chief Executive of the North Division, has since written to Mr C again to apologise.

3. **March 2006** – this case was about a dentist in Glasgow which was not upheld by the Ombudsman.

(f) Unreasonably Demanding or Persistent Complaints

There were no complainants declared unreasonably demand of persistent this quarter.

3. Action Taken and Lessons Learned for Patient Care

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

| | |
|----------------|---|
| North Division | <ul style="list-style-type: none"> ➤ In light of an individual complaint which highlighted a breakdown in communication between staff in an outlying clinic regarding the need to arrange a follow up appointment, a checking system has now been put in place ➤ In response to a complaint that relatives declined the offer of the patient's personal belongings shortly after the patient died, then asked for the items to be returned within 24 hours, staff have been advised to ensure items are kept for a reasonable timescale as it is appreciated bereaved families may be unable to make a clear decision at such a distressing time. |
|----------------|---|

| | |
|---------------------------------------|---|
| South Division | ➤ Departure of Consultant Orthopaedic Surgeon has resulted in additional complaints about waiting time issues. Review of list to be undertaken and further review in Outpatient Clinics to determine any patients requiring surgery since being added to the waiting list. |
| Yorkhill Division | ➤ Due to a complaint relating to the potential cross-infection of patients, the time gap between two clinics has been lengthened. Discussions are also ongoing with regard to this issue to discover the practice of other Divisions. |
| Primary Care Division (excluding FHS) | <ul style="list-style-type: none"> ➤ As a result of a complaint in a particular ward, the Practice Development Nurse has increased her presence in the ward to observe practice. ➤ As a result of data on a PDA being lost and resulting in confusion with appointments, data is now backed up data on daily basis. ➤ Junior medical staff have been advised about their responsibilities regarding examination of patients following incidents where they may have sustained an injury. ➤ There has been a review in one ward of procedure in relation to visitors entering the ward. ➤ As a result of a complaint about a slippery surface, estates staff have been asked to provide a report on the floor covering. |

4. Breakdown of the Three Issues Attracting Most Complaints

The following table provides a breakdown of the three issues attracting the most complaints throughout NHS Greater Glasgow:-

| | | |
|---------------------------------------|---|--|
| North Division | <ol style="list-style-type: none"> 1. Clinical Treatment 2. Communication (written and oral) 3. Attitude/Behaviour | |
| South Division | <ol style="list-style-type: none"> 1. Clinical Treatment 2. Communication (written and oral) 3. Waiting Times | |
| Yorkhill Division | <ol style="list-style-type: none"> 1. Communication (written and oral) 2. Clinical Treatment 3. Waiting Times | |
| Primary Care Division (excluding FHS) | <ol style="list-style-type: none"> 1. Clinical Treatment 2. Attitude/Behaviour) Communication) | This is consistent with previous quarters. There is no indication of a specific trend emerging within these very broad categories. |

5. Trends of Complaints

The following table gives an indication of any trends of complaints noticed this quarter:-

| | |
|---------------------------------------|---|
| North Division | ➤ No patterns noted. |
| South Division | ➤ No specific area or trend noticed other than a significant increase in complaints received over the previous quarter. |
| Yorkhill Division | ➤ No particular trend identified. |
| Primary Care Division (excluding FHS) | ➤ No specific trends have been identified in this quarter. |

6. Specific Service Improvements made as a Result of Complaints

Noted below are some examples of service improvements made as a result of complaints completed this quarter:-

| | |
|---------------------------------------|---|
| North Division | <ul style="list-style-type: none"> ➤ As the result of the unavailability of a particular size stent during endoscopy because there had been an unusually high demand for the same size, the re-ordering system for stents has been reviewed to ensure a robust monitoring system is in place and stock levels remain consistent. ➤ A complaint was received from a lady who was dissatisfied that her father required oxygen on discharge and in order that he could receive an oxygen concentrator, this had to be arranged by a respiratory physician. The patient was referred from another health board for specialised medicine to North Glasgow and would require to attend his local hospital to see a respiratory physician, but by this time, he was too ill. The case was highlighted to relevant staff and it was agreed that if a similar circumstance arose again, the situation would be handled differently. |
| South Division | <ul style="list-style-type: none"> ➤ Following complaints about directions and signage around the site, action to be taken to review signage and effect any appropriate change. ➤ Departure of Consultant Orthopaedic Surgeon has resulted in additional complaints about waiting time issues. Review of list to be undertaken and further review in Outpatient Clinics to determine any patients requiring surgery since being added to the waiting list. ➤ Documentation sent to patients attending Day Surgery Unit to be amended to offer directions to the Unit. |
| Yorkhill Division | <ul style="list-style-type: none"> ➤ Following a recent complaint, in which an error occurred in the IDL (Instant Discharge Letter) generated on a maternity ward computer, a working group will review the list of medicines that are available for selection by staff on the IDL. |
| Primary Care Division (excluding FHS) | <ul style="list-style-type: none"> ➤ As a result of a complaint about appointment issues, reception staff are now allowed access to PiMS to add appointments directly to system. ➤ As a result of a patient arriving at hospital inappropriately, staff in the particular area have been reminded of the importance of making appropriate referrals. ➤ In one area, staff arranging telephone appointments have been advised of necessity to inform patients that a medication list should be brought with them. |

7. Complaint Categories

Annexes 1 – 4 give a breakdown of the complaint categories as follows:-

| | |
|---------------------|-----------|
| North Division | (Annex 1) |
| South Division | (Annex 2) |
| Yorkhill Division | (Annex 3) |
| PCD (excluding FHS) | (Annex 4) |

8. Complaints Procedure – Single System Working

The single pan-Glasgow Complaints Policy and procedure is in the process of being rolled out with detailed operational guidance prepared. Following further modifications to take account of ethnic minority issues the new single system complaints poster is being printed. The poster is being prepared

in English and twelve other languages. Work continues on the moves towards a single database across the system, to consolidate the three separate databases currently in use.

The next stage in single system working is to integrate Clyde complaints staff into the acute and partnership processes and discussions on this have commenced.

Initial discussions have been held with Clinical Governance colleague on the more formal arrangements to be put in place to ensure organisational learning from complaints with a link into clinical governance arrangements. The Health and Clinical Governance Committee has expressed a desire to move towards receiving reports in a more narrative style highlighting how learning points have been identified and implemented. The format of the report to the Board will also be reviewed in light of the new organisational arrangements.

9. Conciliation

There were no requests received for conciliation this quarter.

10. Independent Advice and Support Service to Complainants

The Scottish Executive issued a circular on 1 March 2005 – HDL(2006)13 – Patient Focus and Public Involvement – Independent Advice and Support Service to Complainants which required NHS Boards to fund the implementation of this service locally through a strategic partnership with the consortium of their Citizen Advice Bureaux with the service to be established and operational during the course of 2006.

Members may recall that there was a range of discussions held with the Citizen Advice Bureaux this time last year to set up a level of support over the last 12 months. The National Service Framework developed for this service to ensure quality and equity of service across NHS Boards has been hugely helpful. The implementation of this service will be through discussions with the consortium of the local advice bureaux within NHS Greater Glasgow and Clyde to ensure that patients, carers and members of the public are supported when making a complaint and/or provided with the information and support they need to access and make better use of NHS services.

The Scottish Executive Health Department will fund the Central Support Unit based within Citizen Advice Scotland to provide support to local Citizen Advice Bureaux and NHS Boards to implement the independent advice and support service and this service will be established shortly.

Members will be kept advised of progress with establishing and implementing this service and the Scottish Health Council will monitor the arrangements to ensure overall compliance with the principles of the framework.

11. Complaints – Symposiums and Solutions : Using Grievances to Inform Governance – Conference-: 17 March 2006

The Chief Executive, Head of Board Administration and a couple of complaints officers attended the complaints conference held at the Kelvin Conference Centre, Glasgow, on 17 March 2006. The event was hosted by the Scottish Public Services Ombudsman's office and the Scottish Executive Health Department and was supported by NHS Education for Scotland, NHS Quality Improvement Scotland, the Scottish Health Council, the General Medical Council and the NHS Complaints Association – Scotland.

Presentations were led by Professor Alice Brown, Scottish Public Services Ombudsman, and Dr Kevin Woods, Chief Executive, NHS Scotland, followed thereafter by panel discussions and workshop activities.

One of the main themes to come out of the conference was the role of the Clinical Governance Committees in monitoring the number and types of complaints and the need to complete the audit loop of ensuring that lessons were learned from complaints and action was taken to prevent any repeats. This will be picked up in discussions with the Clinical Governance Committee when putting in place the new arrangements to ensure much greater scrutiny of implementing recommendations and learning lessons from patients' experiences with our services.

A short write-up of the conference will be produced and made available to complaints officers within NHS Greater Glasgow and Clyde.

12. Report Distribution

The quarterly Complaints Report continues to be circulated to Complaints Officers, as well as Conciliators for their information.

COMPLAINT CATEGORIES

| <u>Code</u> | <u>NUMBER</u> | <u>Code</u> | <u>NUMBER</u> |
|-------------------------------|---------------|---|---------------|
| ISSUES RAISED | | STAFF GROUP | |
| Staff | | 11 | 50 |
| 01 | 21 | 21 | 1 |
| ➤ | 3 | 31 | 32 |
| ➤ | 8 | 41 | 3 |
| ➤ | 0 | 51 | 1 |
| ➤ | 0 | 61 | 1 |
| ➤ | 0 | 71 | 4 |
| ➤ | 10 | 81 | 1 |
| 02 | 0 | 91 | 0 |
| 04 | 1 | 01 | 84 |
| 05 | 16 | SERVICE AREA | |
| 06 | 14 | Hospital acute services | |
| 07 | 5 | 11 | 73 |
| Waiting times for | | 12 | 13 |
| 11 | 8 | 13 | 61 |
| 12 | 9 | 14 | 24 |
| 13 | 1 | 15 | 0 |
| Delays in/at | | Care of the Elderly | |
| 21 | 6 | 21 | 2 |
| 22 | 4 | 22 | 0 |
| Environmental/domestic | | 23 | 0 |
| 29 | 5 | 24 | 0 |
| 30 | 0 | Psychiatric/learning disabilities | |
| 32 | 4 | 31 | 0 |
| 33 | 4 | 32 | 0 |
| 34 | 3 | 33 | 0 |
| 35 | 2 | 34 | 0 |
| 36 | 2 | 41 | 0 |
| 37 | 4 | 51 | 0 |
| 38 | 1 | 61 | 0 |
| 39 | 0 | 65 | 0 |
| 40 | 1 | Community services – not elsewhere specified | |
| Procedural issues | | 72 | 0 |
| 41 | 1 | 73 | 0 |
| 42 | 1 | 74 | 0 |
| 43 | 0 | Unscheduled Health Care (Out of Hours) | |
| 44 | 0 | 81 | 0 |
| Treatment | | | |
| 51 | 37 | | |
| ➤ | 26 | | |
| ➤ | 9 | | |
| ➤ | 2 | | |
| 52 | 0 | | |
| 61 | 5 | | |
| 71 | 6 | | |

COMPLAINT CATEGORIES

| <u>Code</u> | <u>NUMBER</u> | <u>Code</u> | <u>NUMBER</u> |
|-------------------------------|---------------|---|---------------|
| ISSUES RAISED | | STAFF GROUP | |
| Staff | | 11 | 63 |
| 01 | 17 | 21 | 11 |
| ➤ | 9 | 31 | 13 |
| ➤ | 7 | 41 | 2 |
| ➤ | 1 | 51 | 13 |
| ➤ | 0 | 61 | 0 |
| ➤ | 0 | 71 | 5 |
| ➤ | 0 | 81 | 1 |
| ➤ | 0 | 91 | 0 |
| 02 | 0 | 01 | 0 |
| 04 | 1 | SERVICE AREA | |
| 05 | 3 | Hospital acute services | |
| 06 | 20 | 11 | 45 |
| 07 | 0 | 12 | 2 |
| Waiting times for | | 13 | 47 |
| 11 | 7 | 14 | 2 |
| 12 | 14 | 15 | 0 |
| 13 | 6 | Care of the Elderly | |
| Delays in/at | | 21 | 1 |
| 21 | 6 | 22 | 0 |
| 22 | 6 | 23 | 0 |
| Environmental/domestic | | 24 | 0 |
| 29 | 8 | Psychiatric/learning disabilities | |
| 30 | 0 | 31 | 0 |
| 32 | 0 | 32 | 0 |
| 33 | 2 | 33 | 0 |
| 34 | 3 | 34 | 0 |
| 35 | 0 | 41 | 1 |
| 36 | 0 | 51 | 0 |
| 37 | 2 | 61 | 0 |
| 38 | 0 | 65 | 0 |
| 39 | 0 | 72 | 0 |
| 40 | 1 | 73 | 1 |
| Procedural issues | | 74 | 0 |
| 41 | 1 | Unscheduled Health Care (Out of Hours) | |
| 42 | 0 | 81 | 3 |
| 43 | 0 | Treatment | |
| 44 | 0 | 51 | 31 |
| Treatment | | ➤ | 24 |
| 51 | 31 | ➤ | 3 |
| ➤ | 24 | ➤ | 4 |
| ➤ | 3 | 52 | 0 |
| ➤ | 4 | 61 | 0 |
| 52 | 0 | 71 | 2 |
| 61 | 0 | Other (where no definition applies) | |
| 71 | 2 | | |

COMPLAINT CATEGORIES

| <u>Code</u> | <u>NUMBER</u> | <u>Code</u> | <u>NUMBER</u> |
|-------------------------------|---------------|---|---------------|
| ISSUES RAISED | | STAFF GROUP | |
| Staff | | 11 | 17 |
| 01 | 4 | 21 | 0 |
| ➤ | 1 | 31 | 4 |
| ➤ | 1 | 41 | 2 |
| ➤ | 0 | 51 | 1 |
| ➤ | 0 | 61 | 0 |
| ➤ | 0 | 71 | 7 |
| ➤ | 0 | 81 | 1 |
| ➤ | 2 | 91 | 5 |
| 02 | 1 | 01 | 0 |
| 04 | 1 | SERVICE AREA | |
| 05 | 4 | Hospital acute services | |
| 06 | 3 | 11 | 1 |
| 07 | 2 | 12 | 1 |
| Waiting times for | | 13 | 16 |
| 11 | 1 | 14 | 2 |
| 12 | 5 | 15 | 1 |
| 13 | 1 | Care of the Elderly | |
| Delays in/at | | 21 | N/A |
| 21 | 0 | 22 | N/A |
| 22 | 0 | 23 | N/A |
| Environmental/domestic | | 24 | N/A |
| 29 | 2 | Psychiatric/learning disabilities | |
| 30 | 0 | 31 | 0 |
| 32 | 0 | 32 | 0 |
| 33 | 0 | 33 | 0 |
| 34 | 1 | 34 | 0 |
| 35 | 0 | 41 | 3 |
| 36 | 0 | 51 | 0 |
| 37 | 0 | 61 | 0 |
| 38 | 0 | 65 | 0 |
| 39 | 0 | 72 | 0 |
| 40 | 0 | 73 | 0 |
| Procedural issues | | 74 | 0 |
| 41 | 0 | Unscheduled Health Care (Out of Hours) | |
| 42 | 2 | 81 | 0 |
| 43 | 0 | Treatment | |
| 44 | 0 | 51 | 0 |
| Treatment | | ➤ | 5 |
| 51 | 0 | ➤ | 0 |
| ➤ | 5 | ➤ | 1 |
| ➤ | 0 | 52 | 0 |
| ➤ | 1 | 61 | 0 |
| 52 | 0 | 71 | 2 |
| 61 | 0 | Other (where no definition applies) | |
| 71 | 2 | | |

PRIMARY CARE DIVISION (excluding FHS)
ANNEX 4

COMPLAINT CATEGORIES

| <u>Code</u> | NUMBER | <u>Code</u> | NUMBER |
|-------------------------------|---|--|---|
| ISSUES RAISED | | STAFF GROUP | |
| Staff | | 11 | Medical (inc surgical) 9 |
| 01 | Attitude/behaviour 10 | 21 | Dental (inc surgical) 1 |
| | ➤ Medical/Dental 1 | 31 | Nursing, Midwifery, Health Visiting 17 |
| | ➤ Nursing 6 | 41 | Professions allied to medicine 5 |
| | ➤ AHPs 2 | 51 | Scientific/technical 0 |
| | ➤ Ambulance (* paramedics) 0 | 61 | Ambulance (inc. paramedics) 0 |
| | ➤ Administration 1 | 71 | Ancillary/works/trades 2 |
| | ➤ Other 0 | 81 | NHS Board administrative staff/members (exc FHS administrative) 0 |
| 02 | Complaint handling 3 | 91 | Division/CHP/PCO administrative staff/ members 9 |
| 04 | Shortage/availability 0 | 01 | Other 0 |
| 05 | Communication (written) 4 | SERVICE AREA | |
| 06 | Communication (oral) 6 | Hospital acute services | |
| 07 | Competence 0 | 11 | Inpatient 0 |
| Waiting times for | | 12 | Day case 0 |
| 11 | Date of admission/attendance 1 | 13 | Outpatient 0 |
| 12 | Date for appointment 0 | 14 | Accident & emergency 0 |
| 13 | Results of tests 0 | 15 | Delivered in the community 0 |
| Delays in/at | | Care of the Elderly | |
| 21 | Admission/transfer/discharge procedures 0 | 21 | Inpatient 0 |
| 22 | Outpatient and other clinics 0 | 22 | Day patient 0 |
| Environmental/domestic | | 23 | Outpatient 0 |
| 29 | Premises (including access) 3 | 24 | Community 0 |
| 30 | Aids & appliances, equipment 0 | Psychiatric/learning disabilities | |
| 32 | Catering 0 | 31 | Inpatient 10 |
| 33 | Cleanliness/laundry 3 | 32 | Day patient 0 |
| 34 | Patient privacy/dignity 1 | 33 | Outpatient 1 |
| 35 | Patient property/expenses 0 | 34 | Community 3 |
| 36 | Patient status/discrimination (eg race, gender, age) 2 | 41 | Maternity 0 |
| 37 | Personal records(including medical, complaints files) 0 | 51 | Ambulance 0 |
| 38 | Shortage of beds 0 | 61 | Community hospitals 0 |
| 39 | Mixed accommodation 0 | 65 | Community services – not elsewhere specified 14 |
| 40 | Hospital Acquired Infection (MRSA) 0 | 72 | Purchasing 0 |
| Procedural issues | | 73 | Administration 0 |
| 41 | Failure to follow agreed procedure 1 | 74 | Unscheduled Health Care (Out of Hours) 2 |
| 42 | Policy and commercial decisions (of NHS Board) 0 | 81 | Other 2 |
| 43 | NHS Board purchasing 0 | | |
| 44 | Mortuary/post mortem arrangements 0 | | |
| Treatment | | | |
| 51 | Clinical treatment (all aspects) 19 | | |
| | ➤ Medical/Dental 7 | | |
| | ➤ Nursing 9 | | |
| | ➤ Other Staff 3 | | |
| 52 | Consent to treatment 0 | | |
| 61 | Transport arrangements (including ambulances) 0 | | |
| 71 | Other (where no definition applies) 15 | | |