

NURSE DIRECTOR

QUARTERLY REPORT ON COMPLAINTS: 1 JULY – 30 SEPTEMBER 2014

Recommendations:

The NHS Board is asked to note:-

- the quarterly report on NHS complaints in Greater Glasgow and Clyde for the period 1 July – 30 September 2014.
- extracts from the ISD Annual Report 2013/14 (Appendix 5)
- extracts from the SPSO Annual Letter 2013/14 (Appendix 6)

Introduction

This report provides a commentary and statistics on complaints handling throughout NHS Greater Glasgow and Clyde for the period 1 July to 30 September 2014. It looks at complaints received at Local Resolution and by the Scottish Public Services Ombudsman and identifies areas of service improvements and ongoing developments. In addition, it covers extracts from the SPSO and ISD Annual Reports 2013/14.

As members will be aware, the Patient Rights (Scotland) Act 2011 was introduced from 1 April 2012 with the aim of improving patients' experiences of using health services and to support people to become more involved in their health and health care.

An important part of the Act was to ensure that patients' feedback, comments, concerns and complaints were more actively monitored and used to improve services. This has led to additional reporting requirements which include more detailed reporting about complaints including those made about primary care contractors.

This report includes the presentation of detailed information on where complaints have been raised (including Acute Directorates and hospital locations, Partnership geographical areas as well as their associated services areas and independent contractor information) and what improvements have been made to services as a result of such complaints.

Future complaints reports will continue to be refined. We will also reflect how feedback, comments and concerns are captured to help improve service delivery.

1. Local Resolution: 1 July to 30 September 2014

Table 1 shows the number of complaints *received* across NHS Greater Glasgow and Clyde between 1 July to 30 September 2014 and for comparison 1 April to 30 June 2013. Thereafter, the statistics in Table 1 relate to those complaints *completed* in the quarter so that outcomes can be reported.

Appendix 5 of the report advises that a recording error occurred in Acute Services relating to the number of received and completed complaints. In correcting the method of validation, therefore, it has been necessary to also amend the previous quarter's figures to reflect the accurate recording method. Whilst this allows for a direct comparison of the two quarters figures, it does mean that the figures reported to the NHS Board in October 2014 for Quarter 1 were incorrect. Apologies are given for this error which has now been rectified by having one single officer complete the NHS Board returns and those submitted to ISD.

Table 1

	1 July – 30 September 2014		1 April – 30 June 2014	
	Partnerships/ Board (exc FHS)	Acute	Partnerships/ Board (exc FHS)	Acute
(a) Number of complaints received	562	436	564	480
(b) Number of complaints received and completed within 20 working days [<i>national target</i>]	527 (94%)	304 (70%)	502 (89%)	344 (72%)
(c) Number of complaints completed	541	413	596	480
(d) Outcome of complaints completed:-				
➤ Upheld	98	101	130	139
➤ Upheld in part	78	136	53	144
➤ Not Upheld	352	146	404	166
➤ Conciliation	0	1	0	0
➤ Irresolvable	0	0	0	2
➤ Unreasonable Complaint	0	0	0	1
➤ Transferred to another unit	1	4	1	2
(e) Number of complaints withdrawn	12 ¹	25 ²	8 ¹	26 ²
(f) Number of complaints declared vexatious	0	0	0	0

	Total	No Consent Received	Complainants no longer wished to proceed	Other
1	12	1	11	0
2	25	16	9	0

1 April – 30 June 2014				
	Total	No Consent Received	Complainants no longer wished to proceed	Other
1	8	2	5	1
2	26	16	10	0

For this quarter this gives an overall NHSGG&C complaints handling performance for complaints received and completed of 82% which is above the target of 70%.

2. Format of Report

The Chief Executive confirmed his intention to provide additional levels of detail on complaints handling. The intention will be to provide further details in order to present information that shows complaints per specialty/ward area together with any requirement for exception reporting to explain any anomalies or actions undertaken as a result of highlighting where specific problems may have arisen. Section 3 below shows the Acute Directorates and CH(C)Ps breakdown for completed complaints.

3. Breakdown of Completed Complaints

Detailed below in Table 2 is a Directorate/CH(C)P breakdown of completed complaints within NHSGGC for the period 1 July to 30 September 2014 and for comparison 1 April to 30 June 2014.

Table 2 –Breakdown of Completed Complaints by Directorate/CH(C)P

	1 July – 30 September 2014		1 April – 30 June 2014	
	<u>Number of Completed Complaints</u>	<u>% (rounded)</u>	<u>Number of Completed Complaints</u>	<u>% (rounded)</u>
Acute Directorate				
Surgery & Anaesthetics	124	30	141	29
Emergency Care & Medical	98	24	142	29
Women & Childrens	53	13	57	12
Regional	51	12	39	8
Facilities	21	5	32	7
Rehabilitation & Assessment	25	6	29	6
HI&T	18	4	23	5
Diagnostics	10	3	8	2
Other	13	3	9	2
Sub-Total	413	100	480	100
CH(C)P				
NHS Board	1	0	0	0
East Dunbartonshire	1	0	1	0
East Renfrewshire	2	0	2	0
Glasgow City - Corporate *	474	88	525	88
North East	19	4	16	3
North West	11	2	17	3
South	16	3	11	2
Inverclyde	4	1	7	1
Renfrewshire	8	1	9	2
West Dunbartonshire	0	0	5	1
Hosted Service (Podiatry)	5	1	3	0
Sub-Total	541	100	596	100
Grand Total	954		1076	

* Covers Forensic Services and Prison Healthcare.

Detailed below in Table 3 is an Acute Hospital location breakdown of completed complaints within NHS GGC for the period 1 July to 30 September 2014 and for comparison 1 April to 30 June 2014.

Table 3 – Breakdown of Completed Complaints by Acute Hospital Location

Acute Hospital Location	<u>1 July – 30 Sept 2014</u>	<u>1 April – 30 June 2014</u>
	<u>Number of Completed Complaints</u>	<u>Number of Completed Complaints</u>
Beatson West of Scotland Cancer Centre	13	5
Homeopathic Hospital	1	1
Gartnavel General Hospital	29	32
Health Centres / Clinics	3	1
Glasgow Royal Infirmary	70	72
Inverclyde Royal Hospital	24	22
Larkfield Unit	2	3
Lightburn Hospital	1	0
Mansionhouse Unit	4	3
Mearns Kirk Hospital	2	1
Nelson Mandela Place (Breast Screening Service)	1	1
Out of Hours Service	5	6
Princess Royal Maternity Hospital	9	8
Royal Alexandra Hospital	52	68
Southern General Hospital	80	87
Stobhill ACH	17	15
Victoria Infirmary	30	48
Victoria ACH	11	16
Vale of Leven Hospital	6	11
Western Infirmary	33	52
Yorkhill Hospital	9	19
Other	11	9
Total	<u>413</u>	<u>480</u>

Detailed below in Table 4 is a CH(C)P service area breakdown of completed complaints within NHSGGC for the period 1 July to 30 September 2014 and for comparison 1 April to 30 June 2014.

Table 4 – Breakdown of Completed Complaints by CH(C)P Service Areas

	<u>1 July - 30 Sept 14</u>	<u>1 April - 30 June 14</u>
	<u>Number of Completed Complaints</u>	<u>Number of Completed Complaints</u>
Glasgow City CHP – Corporate	474	525
Health & Community Care:-		
• HMP Barlinnie	342	372
• HMP Low Moss	93	118
• HMP Greenock	37	33
• Police Custody Healthcare	1	0
Mental Health Services (See Note)	1	1
Other (Health Improvement)	0	1
Glasgow City CHP - North East Sector	19	16
Health & Community Care	2	2
Homelessness Services	0	0
Specialist Children's Services	6	2
Skye House Adolescent Unit	1	0
Mental Health Services	7	11
Stobhill Hospital	3	0
Parkhead Hospital	0	1
Glasgow City CHP - North West Sector	11	17
Children & Family Services	0	1
Health & Community Care	4	6
Mental Health Services	2	4
Gartnavel Royal Hospital	2	2
Eriskay House	0	0
Sexual Health/Sandyford	3	4
Glasgow City CHP - South Sector	16	11
Health & Community Care	8	6
Mental Health Services	3	2
Leverndale Hospital	5	3
East Dunbartonshire CHP	1	1
Health & Community Care	0	1
Mental Health	0	0
Children and Family Services	1	0
West Dunbartonshire CH(C)P	0	5
Health & Community Care	0	5
Children and Family Services	0	0

	<u>1 July - 30 Sept 14</u>	<u>1 April - 30 June 14</u>
	<u>Number of Completed Complaints</u>	<u>Number of Completed Complaints</u>
Inverclyde CH(C)P	4	7
Mental Health	1	2
Children & Family Services	1	1
Larkfield Unit	1	0
Ravenscraig Hospital	1	1
Community Care	0	1
Other	0	2
East Renfrewshire CH(C)P	2	2
Mental Health	2	2
Health & Community Care	0	0
Rehabilitation & Assessment	0	0
Specialist Children's Services	0	0
Children and Family Services	0	0
Renfrewshire CHP	8	9
Health & Community Care	4	5
Mental Health	2	2
Dykebar Hospital	2	2
Hosted Service - Renfrewshire CHP – Podiatry	5	3
NHS Board	1	0
Totals:	<u>541</u>	<u>596</u>

Note – Predominately Forensic and Learning Disabilities

Bold entries denote mental health hospital services managed by CH(C)Ps

4. Complaints Received by Doctors, Dentists, Community Pharmacists and Opticians

The Patient Rights (Scotland) Act 2011 required, for the first time, additional monitoring and reporting including more detailed reporting about complaints made about primary care contractors (GPs, dentists, community pharmacists and opticians).

Given this, all independent primary care contractors are now required to provide their complaints information to the NHS Board.

Practices are sent an email informing them that the information will be collected via Survey Monkey. Those who do not respond are sent up to a further two reminder emails. Once the survey is closed, the information is collated and separated into spreadsheets, one for each of the CH(C)Ps. Each spreadsheet is sent to the relevant CH(C)P Director, Head of Primary Care & Community Services and the Clinical Director for review.

It was agreed, at the Clinical Governance Forum, that the returns should be discussed at local level; GP locality groups and GP Forums, who would agree how to take issues forward, linking with education and training.

Detailed below in Table 5 is a breakdown of complaints received by Doctors, Dentists, Community Pharmacists and Opticians within NHSGGC for the period 1 July to 30 September 2014 and for comparison 1 April to 30 June 2014.

Table 5 - Complaints received by Doctors, Dentists, Community Pharmacists and Opticians

	1 July – 30 September 2014				1 April – 30 June 2014			
	<u>No of Complaints Received</u>	<u>Responded to Within 20 Working Days and (%)</u>	<u>ADR* Used</u>	<u>Still Open</u>	<u>No of Complaints Received</u>	<u>Responded to Within 20 Working Days and (%)</u>	<u>ADR* Used</u>	<u>Still Open</u>
GPs	223	220 (99%)	0	3	285	277 (97%)	0	27
Dentists	54	51 (94%)	0	3	26	26 (100%)	0	4
Opticians	51	51 (100%)	0	0	57	57 (100%)	0	1
Community Pharmacists	120	118 (98%)	0	1	125	123 (98%)	0	0

* Alternate Dispute Resolution

We need to work closer with the independent contractors and teams to get a more consistent response to the completion of the information sent to us. Different interpretations are still taking place.

Detailed below in Table 6 is an indication of the surveys returned by of each contractor groups for the period 1 July to 30 September 2014 and for comparison 1 April to 30 June 2014.

Table 6 - Surveys received by Doctors, Dentists, Community Pharmacists and Opticians

	1 July – 30 September 2014			1 April – 30 June 2014		
	<u>No of Surveys Received</u>	<u>Return Rate (%)</u>	<u>No of Practices</u>	<u>No of Surveys Received</u>	<u>Return Rate (%)</u>	<u>No of Practices</u>
GPs	229	95	242	236	97	242
Dentists	236	91	260	116	45	259
Opticians	153	82	186	162	87	186
Community Pharmacists	290	100	290	291	100	291

Local contractor teams are taking steps to improve the response rate from contractors in order to achieve a 100% return rate especially from general dental practitioners. This is a contractual responsibility for all contractors and therefore those not responding will be contacted to ensure future compliance.

Strenuous efforts have been made by the Pharmacy Team and the Primary Care Support Team to ensure Community Pharmacists, GPs and Opticians return their quarterly information in relation to their Practices' complaints handling. The Pharmacy Team has again achieved a 100% return and this has been achieved by individual personal contact with contractors to ensure all returns were submitted. In relation to Opticians, the two main reasons given for a non response was that those Practices had been unaware of the need to submit a nil return or they had not realised the survey was quarterly. Letters have now been

sent to all Practices reinforcing the message that surveys are quarterly and nil returns are required and, as this is a contractual requirement. Consideration will be given to possible sanctions if some Practices continue not to respond to the request for this quarterly information.

In relation to Dental Practices, there has been a welcome improvement in the response rate following a range of actions by the Oral Health Directorate.

The response rate from GPs is now helpfully being sustained at a high level.

Below is an indication of the themes of the complaints and lessons learned / action taken / service improvements to avoid a recurrence:-

GP Complaints

The CH(C)Ps discuss the complaints reported and lessons learned by Practices at their Clinical Governance Groups, GP Forum, Locality Groups and Practice Manager's Forum. The data received from Practices is analysed for trends and the Clinical Governance Groups use the information to determine a continued programme of protected learning and education for Practices.

There were 5 key trends/themes in relation to complaints/issues raised against General Practitioners:-

1. Appointment issues – 37. Steps taken to make improvements have included:-
 - Staff reminded to keep patients updated when delays happened within GP Practices.
 - GP Practice reviewed their processes in order to deal with an increased demand from patients following public holidays.
 - GP Practice introduced on-line appointments.
 - GP increased flexibility by allowing patients to book at either GP Practice.
 - Trial undertaken of software to send reminders to patients about appointments.
2. Prescribing Issues – 27. Steps taken to make improvements have included:-
 - Repeat prescription system reviewed and additional staff training provided.
 - GP Practice reviewed and revised process for handling special requests.
 - GP Practice adopted policy to ensure that all acute script requests were generated or actioned by close of business each day.
 - GP Practice introduced on line prescriptions and patient feedback has been excellent.
3. Clinical Treatment Issues - 25. Steps taken to make improvement have included:-
 - GP Practice reviewed exactly what could be discussed at consultation in front of a patient's other family members; apology sent to patient.
 - Staff reminded to double check details when preparing sample labels.
 - GP Practice to monitor how requests for emergency appointments are handled.
 - GP Practice reviewed process for home visits however concluded no changes were required.
 - Patient unhappy with accuracy of information contained in the medical record; review undertaken and advice sought and record remained unaltered.
4. Communication Issues – 17. Steps taken to make improvements have included:-
 - GP Practice to undertake more regular checks of email communications. Practice created a Newsletter to better inform patients of ongoing developments.
 - Details of telephone calls with patients to be entered into clinical record by staff. Training offered to staff on telephone call handling.
 - Revision of ambulance booking procedure undertaken.
5. Staffing Issues
 - A number of Practices have offered communication skills training to reception and other staff.
 - Telephone technique training offered to GP Practice staff.
 - Staff offered training to patient on the systems operated by the GP Practice.
 - Training offered to clinical staff on how to better provide patients with the outcome of hospital tests/results.

- Staff reminded for the need for sensitive handling on occasions when dealing with unwell/vulnerable patients who may exhibit different behaviours when visiting the Practice.

These matters will be shared with the CHCP Clinical Directors for a wider consideration/sharing within their own areas and discussing with the relevant GP Practices during Practice visits. In addition, the other areas in which complaints were received about GP Practice included administration, confidentiality issues, handling challenging patients, registration systems within the GP Practice and referral arrangements to hospital specialist services.

Optometry Complaints

As usual with complaints against opticians the issue most raised was the problem with glasses/lenses accounting for 54 of the 63 issues raised.

The actions taken have led to the need to check the accuracy of orders by staff; laboratories asked to communicate any delays in providing glasses or carrying out repairs, staff reminded to deal swiftly with any patient complaints/dissatisfaction with the service. The other areas included staff issues, cost of lenses, communication issues and an appointment issue related to the introduction of a new registration system to monitor customer waiting times and length of appointments.

Dental Complaints

The results of the GDP complaints survey are reported to the GDP-subcommittee of the NHSGGC Area Dental Committee.

The common themes/trends are reviewed by the GDS Clinical Governance Committee and follow-up action taken if necessary. Common themes include treatment costs, unhappy with treatment outcome and communication.

Lessons learned – New systems put in place, e.g. written estimates provided for patients to sign for certain types of treatment to ensure treatment cost is clear prior to commencing treatment. Staff training arranged.

N.B. NHS treatment costs are determined nationally and individual GDPs cannot vary from these patient charges.

Pharmacist Complaints

The majority of complaints (64) recorded by community pharmacies for the period 1 July 2014 – 30 September 2014 related to medication incidents. Set against a background of more than 1 million prescriptions dispensed each month, this represents a very small percentage and significant underreporting which may be addressed as this recently introduced requirement becomes more established.

NHS Greater Glasgow & Clyde places patient safety at the forefront of its objectives and encourages its community pharmacies to do likewise. Community pharmacists are required to take all necessary actions to ensure that patient safety in the delivery of pharmaceutical care is given the highest priority. The Pharmacy and Prescribing Support Unit operates a medication incident reporting system to promote quality and reduce risk ultimately safeguarding patient safety. The system is anonymised to create a culture of open reporting, learning and ongoing service improvement.

5. Ombudsman (SPSO): 1 July to 30 September 2014

Where a complainant remains dissatisfied with a Local Resolution response, they may write to the Ombudsman. Table 7 below reports statistics on the points that the NHS Board may become aware of the Ombudsman's involvement in a case.

Table 7

	<u>Partnerships/ Board (NHSGGC)</u>	<u>FHS</u>	<u>Acute</u>
(a) Notification received that an investigation is being conducted	1	0	0
(b) Notification received that an investigation is not being conducted	1	1	0
(c) Investigations Report received	0	0	1
(d) Decision Letters received (Often the first indication in respect of FHS Complaints)	5	5	19

In accordance with the Ombudsman's monthly reporting procedure, one report was laid before the Scottish Parliament concerning NHS Greater Glasgow and Clyde.

The details of the NHSGGC Decision Letters for this are attached as Appendix 1.

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

The following information provides a breakdown of the issues attracting most complaints this quarter:-

Partnerships

The three issues attracting most complaints this quarter were clinical treatment, date for appointment and attitude/behaviour.

Appendix 2 provides a comprehensive breakdown of the complaint categories for Partnerships.

Acute

The three issues attracting most complaints this quarter were clinical treatment, staff attitude/behaviour and communication (oral).

Appendix 3 provides a comprehensive breakdown of the complaint categories for Acute.

7. Service Improvements

One of the key themes of the Patient Rights (Scotland) Act 2011 was using complaints as a mechanism to learn lessons and improve future services for patients. As part of this particular focus and improved reporting, attached at **Appendix 4** are those services improvements highlighted by the Partnerships and Acute Services Division in relation to complaints completed from July to September 2014.

8. Patient Advice and Support Service (PASS): 1 July to 30 September 2014

The Patient Advice and Support Service (PASS) was established through the Patient Rights (Scotland) Act 2011 and is part of the Scottish Citizens Advice Bureau (CAB) Service. The service is independent and provides free, confidential information, advice and support to anyone who uses the NHS in Scotland. It aims to support patients, their carers and families in their dealings with the NHS and in other matters affecting their health. The service promotes an awareness and understanding of the rights and responsibilities of patients. It also advises and supports people who wish to give feedback, make comments, raise concerns or make a complaint about treatment and care provided by the NHS in Scotland. The PASS will:-

- help clients understand their rights and responsibilities as patients;
- provide information, advice and support for those wishing to give feedback or comments, raise concerns or make complaints about health care delivered by NHS Scotland;
- ensure clients feel listened to, supported, and respected when raising concerns about difficult experiences; and
- work with the NHS to use feedback to improve NHS service provision.

This covers concerns and complaints raised via the PASS.

PASS statistics are gathered centrally by Citizens Advice Scotland (CAS) to provide evidence of what has been delivered in each Health Board area in Scotland. They contain detailed statistical information on the work of bureaux and demonstrate the depth and range of advice work undertaken by advisers.

Locally, the consortium of Citizen Advice Bureaux (CAB) for the Greater Glasgow & Clyde area comprises:-

Bridgeton CAB, Castlemilk CAB, Drumchapel CAB, Dumbarton CAB, East Dunbartonshire CAB, Easterhouse CAB, East Renfrewshire CAB, Glasgow Central CAB, Greater Pollok CAB, Maryhill CAB, Parkhead CAB, Renfrewshire CAB, and Rutherglen & Cambuslang CAB.

The public can access the PASS in a number of ways:-

- Direct contact with their local CAB either by telephone, appointment or drop in.
- Within the Patient Information Centres (PICs) in the new Stobhill and Victoria Hospitals.

The key PASS findings for NHSGGC for the period were as follows:-

- There were 121 new clients
- There were 597 new enquiries
- 14% of enquiries were dealt with by Generalist Advisers and 86% dealt with by Patient Advisers
- 96% of enquiries were dealt with at Level 3 or above (indicating more complex a case requiring more support and input)

Many of the clients who present at a CAB have more than one enquiry. The clients who present to a PASS caseworker are no different. During the course of the interview it may be brought to the attention of the PASS caseworker, that owing to ongoing health issues, the client may be eligible to claim Disability Living Allowance/Attendance Allowance and/or other related benefits. There may also be employment or debt issues that the CAB can assist with. All of the non-health related issues would be addressed by another member of CAB staff but counted as an “enquiry” for that client for the purposes of statistical reporting.

The most frequently recorded feedback, comments, concerns and complaints are listed below:-

Service Area	54% were about Hospital Acute Services
Hospitals/Localities	44% were about Emergency Care & Medical Services
Community Health Partnerships/Community Health and Care Partnerships	26% were about East Dunbartonshire CHP and 26% were West Glasgow CHCP
Staff Group	45% were about Hospital Consultants/Doctors
NHS Advice Code	45% were about Clinical Treatment

PASS leaflets are sent to all complainants with the NHS Board's acknowledgement letters, and posters have been placed in patient and clinic areas. PASS caseworkers have developed good contacts and connections with hospital and CH(C)P staff and receive a lot of referrals from having made these contacts.

A Local Advisory Group (LAG) was formed in early 2013, with representation from the Scottish Health Council, GGC CAB Consortium and NHSGGC (Head of Board Administration and Secretariat Manager) in order to monitor and ensure continued publicity of the PASS. The Group meets quarterly and, following a recruitment process undertaken by the Scottish Health Council (SHC) and Consortium lead of PASS, two lay representatives have joined the LAG. The newly constituted LAG met for the first time on 2 December 2014.

9. Improving the Patient Experience at Forefront of NHSGGC Priorities as New Patient Feedback System Launched At Annual Review

Working with our patients to improve services and "the patient experience" is at the forefront of NHS Greater Glasgow and Clyde's (NHSGGC) priorities.

One of the best ways to do this is to capture comments from our patients, relatives, service users, staff and volunteers. To increase detailed feedback that will be used to influence change, NHSGGC launched an online Patient Feedback system at the Annual Review on 18 November 2013 to enhance existing methods of capturing patient views.

Hosted on the Board's website www.nhsggc.org.uk/patientfeedback patient comments will be fed directly to frontline service providers to flag up issues where we can improve services and where services have worked really well and could be emulated elsewhere.

Between 1 July and 30 September 2014, 144 individuals provided feedback via this new online system of which 89 were comments / suggestions about our services and 55 were praise for the care received.

The figures can be further broken down to which area they specifically relate to as follows:-

Community	7
In-Patient	71
Out-Patient	54
Other	12

10. Current Issues

Following the launch by National Education Scotland (NES) of the five training modules, NHSGGC arranged to place the training modules on LearnPro so that staff could easily access the training packages online and staff undertaking the training would be captured and recorded. In response to a recent Parliamentary Question, SGHD provided information on the uptake within each NHS Board area and for the 21 NHS Boards who use LearnPro the figures are as follows:-

Feedback and Complaints E-Learning Modules – Uptake via Learnpro as at 31 October 2014

	Module 1 Valuing Feedback	Module 2 Encouraging Feedback and Using It	Module 3 NHS Complaints and Feedback Process	Module 4 The Value of Apology	Module 5 Managing Difficult Behaviour
Health Board					
NHS Greater Glasgow and Clyde	4069	3742	3618	3534	3498
NHS Scotland Total	8024	7257	6971	6806	6728

These are welcome results and encouraging that so many staff (mostly front-line staff) have accessed this type of complaints and feedback training.

We have recently asked NES to make their recently launched complaints training package on “How to Investigate Complaints” available via LearnPro so we can again capture and monitor the uptake of this new training module.

11. Conclusion

The NHS Board is asked to note the quarterly complaints report for the period 1 July to 30 September 2014.

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SCOTTISH PUBLIC SERVICES OMBUDSMAN REPORTS –
1 JULY – 30 SEPTEMBER 2014

There was one **Investigation Reports** published by the Ombudsman in this quarter in relation to NHSGGC.

There were 29 **Decision Letters** issued; 5 related to Partnerships, 5 to Family Health Services (5 GPs) and 19 to the Acute Services Division. These letters were not published in the Scottish Public Services Ombudsman's monthly commentary; however within the Partnerships/Acute Services Division they were dealt with as though they could contain recommendations. The definition surrounding a Decision Letter is as follows:-

A Decision Letter sets out the background to the complaint, the evidence that the reviewer has gathered and their analysis and conclusions. It is a letter from the reviewer to the complainant, although they also let the Board know about the complaint and the conclusion they have reached. The Ombudsman will issue a Decision Letter if:-

- *the organisation accepted there were failings, apologises and takes action to prevent the problem from happening again;*
- *from the evidence, it appears that the organisation did not do anything wrong (where there is no evidence of maladministration or service failure);*
- *the Ombudsman has decided that the substance of the complaint and their decision on it do not raise public interest considerations.*

Of the 29 Decision Letters, there were 22 issues upheld and 12 issues not upheld. The detail of each case can be made available to members if required.

The 43 recommendations made from the Decision Letters are submitted to the Quality and Performance Committee for monitoring purposes.

As NHS Board Members have expressed concern about the NHS Board receiving investigative reports (which can be Decision Letters and formal Investigative Reports) from the Ombudsman's Office, where some non-clinical issues have been identified as "upheld", the CEO now writes to all relevant Directors regarding any these "upheld" issues. The implication is that the NHS Board has investigated all the issue(s) at Local Resolution (which can include more than one reply, meetings and other alternative dispute resolution options such as Mediation) and somehow missed the issue(s) which the Ombudsman then found we erred on and resultantly upheld part of a complaint. This is a new part of our review of processes and intention to be more compassionate and less defensive in our approach to complaints and seek an explanation as to why we did not pick up on that issue at an earlier stage of the process and what Directors will do to reduce this happening in the future.

PARTNERSHIPS
APPENDIX 2

<u>Code</u>		<u>NUMBER</u>	<u>Code</u>		<u>NUMBER</u>
ISSUES RAISED			STAFF GROUP		
	Staff			Staff Group	
01	Attitude/behaviour	41	01	Consultants/Doctors	30
02	Complaint handling	6	02	Nurses	278
03	Shortage/availability	3	03	Allied Health Professionals	15
04	Communication (written)	4	04	Scientific/Technical	0
05	Communication (oral)	16	05	Ambulance	0
07	Competence	8	06	Ancillary Staff/Estates	0
	Waiting times for		07	NHS Board/hospital admin staff/members (exc FHS administrative)	7
11	Date of admission/attendance	1	08	GP (Salaried)	225
12	Date for appointment	114	09	Pharmacists	2
13	Test Results	1	10	Dental (Salaried)	41
	Delays in/at		11	Opticians	5
21	Admissions/transfers/discharge procedure	0	12	Other	6
22	Out-patient and other clinics	3		Service Area	
	Environmental/domestic			Accident and Emergency	0
29	Premises	2		Hospital Acute Services	0
30	Aids/appliances/equipment	1		Care of the Elderly	1
32	Catering	1		Rehabilitation	4
33	Cleanliness/laundry	0		Psychiatric/Learning Disability Services	47
34	Patient privacy/dignity	1		Maternity Services	0
35	Patient property/expenses	0		Ambulance Services	0
36	Patient status	0		Community Hospital Services	1
37	Personal records	3		Community Health Services - not elsewhere specified	40
38	Bed Shortages	0		Continuing Care	0
39	Mixed accommodation	0		Purchasing	0
40	Hospital Acquired Infection	0		Administration	4
	Procedural issues			Unscheduled Health Care	0
41	Failure to follow agreed procedure	1		Family Health Services	0
42	Policy and commercial decisions of NHS Board	5		Prison	510
43	NHS Board purchasing	0		Other	2
44	Mortuary/post mortem arrangements	0			
	Treatment				
51	Clinical treatment	398			
52	Consent to treatment	0			
61	Transport	0			
71	Other	0			

**ACUTE
APPENDIX 3**

<u>Code</u>		<u>Code</u>	
ISSUES RAISED	NUMBER	STAFF GROUP	NUMBER
Staff		Staff Group	
01	Attitude/behaviour	01	Consultants/Doctors
			315
02	Complaint handling	02	Nurses
			150
03	Shortage/availability	03	Allied Health Professionals
			15
04	Communication (written)	04	Scientific/Technical
			0
05	Communication (oral)	05	Ambulance
			1
07	Competence	06	Ancillary Staff/Estates
			26
		07	NHS Board/hospital admin staff/members (exc FHS administrative)
			46
		08	GP (Salaried)
			0
		09	Pharmacists
			2
		10	Dental (Salaried)
			12
		11	Opticians (Salaried)
			0
		12	Other
			15
Waiting times for		Service Area	
11	Date of admission/attendance		Accident and Emergency
			32
12	Date for appointment		Hospital Acute Services
			509
13	Test Results		Care of the Elderly
			21
			Rehabilitation
			5
			Psychiatric/Learning Disability Services
			0
			Maternity Services
			13
			Ambulance Services
			0
			Community Hospital Services
			0
			Community Health Services - not elsewhere specified
			0
			Continuing Care
			0
			Purchasing
			0
			Administration
			1
			Unscheduled Health Care
			0
			Family Health Services
			0
			Prison
			0
			Other
			1
21	Admissions/transfers/discharge procedure		
			14
22	Out-patient and other clinics		
			11
Environmental/domestic			
29	Premises		
			18
30	Aids/appliances/equipment		
			0
32	Catering		
			3
33	Cleanliness/laundry		
			1
34	Patient privacy/dignity		
			3
35	Patient property/expenses		
			0
36	Patient status		
			0
37	Personal records		
			3
38	Bed Shortages		
			0
39	Mixed accommodation		
			0
40	Hospital Acquired Infection		
			1
Procedural issues			
41	Failure to follow agreed procedure		
			2
42	Policy and commercial decisions of NHS Board		
			6
43	NHS Board purchasing		
			1
44	Mortuary/post mortem arrangements		
			2
Treatment			
51	Clinical treatment		
			233
52	Consent to treatment		
			1
61	Transport		
			3
71	Other		
			5

SERVICE IMPROVEMENTS AS THE RESULT OF COMPLETED COMPLAINTS
1 JULY TO 30 SEPTEMBER 2014

Partnerships

East Dunbartonshire CHP

The Health visiting team have been reminded to respect the wishes of the client at all times when delivering care with students in attendance.

The Health visiting team are reminded of the need to respect and support people's rights to accept or decline care while ensuring the needs of the child(ren) are being met.

Glasgow City CHP

The process for ordering repeat medication within prison healthcare has been reviewed and a new system has been implemented to overcome problems patients were experiencing in not receiving repeat prescriptions.

The dental services provision within prison healthcare has been reviewed and dental sessions have been increased to reduce the waiting list. Consideration is also being given to the appointment of an Oral Health Practitioner.

Within Speech and Language in Children's Services, improvements implemented to ensure patient contact details held on record are correct to allow for any unforeseen cancellation of appointments to be notified.

Within the South Sector procedures were reviewed to ensure that contact addresses and phone numbers were available for patients to ensure they could be contacted in the event of a need to cancel an appointment.

Renfrewshire CHP

As a result of a District Nursing complaint, detailed action plans addressing both staff training and service improvements have been established and are actively being progressed. These are:

1. A review of the referral/communication process between GP and District Nursing services in Linwood.
2. Communication with local Acute services to ensure referral processes are robust and ensure contact details for district nursing teams are widely available to facilitate patient discharge from hospital to community settings.

A mental health complaint has resulted in the following improvements:

1. All patients to have a treatment plan in place if hospital admission is being pre-arranged.
2. Branded medication to be ordered by pharmacy in advance of a planned admission to allow treatment to commence on arrival.

- Following a complaint about the waiting time for cryotherapy ablation treatment, additional sessions were put in place to minimise the length of time patients wait for treatment, and in view of the rise in demand since the service was developed in 2008 an application is to be considered to have the service designated as a national service.
- A patient was unhappy with a procedure carried out on her finger. Following surgery, the operation note advised that the patient was to be reviewed in a nurse led clinic and needed a physiotherapy referral. The patient attended the nurse led clinic at which time it would be normal practice for the nursing staff to check the post-operative note and ensure that any referral had been carried out. However, this was missed on this occasion. The service has now changed its processes to ensure that all physiotherapy referrals are scanned to patients e-records prior to being sent to the relevant department thereby ensuring there is an immediate audit trail and that no referrals are missed in future.
- A patient had an extended wait for surgery as at the time of booking, he had advised that he had a preferred site rather than being able to accept an admission to a site from across the whole Board. Due to this preference, his waiting time was extended. Unfortunately, matters progressed and the patient was admitted for emergency surgery. In light of the concerns raised, the surgical service has put in place a change in practice so that patients who choose a specific site within the Health Board will be asked at 6 weekly intervals whether their circumstances have changed thus enabling the service to offer an admission at an alternative site.
- Following a complaint about the provision of IVF cycles a patient was offered an apology in relation to the criteria applied, and advised that the cost of the cycle arranged privately would be refunded and provided on the NHS.
- As a result of investigating a concern about a delay in reporting an MRI scan, the patient was assured that additional staff had been recruited and existing staff were undertaking additional sessions to improve turnaround times.

ISD ANNUAL REPORT 2013/14

Information Services Division (ISD) published its Annual Report on NHS Complaints for 2013/14 on 25 November 2014.

NHS Boards and other NHS organisations submit summary information about complaints they receive to ISD Scotland. The data covers all formal written complaints received by Hospital and Community Services, Family Health Services and Special Health Boards. The data is validated by ISD and checked with the NHS Boards after submission.

In 2013/14, in NHS Scotland, there were **11,857** complaints received about hospital and community services, **7,365** complaints received about family health services and **1,142** about Special Boards and National and Support Organisations – a total of **20,364** complaints received.

Key Points to Note:-

Hospital and Community Services

- There was a 29% rise in Hospital and Community complaints **received** with 11,857 in 2013/14 compared to 9,161 in 2012/13. This rise can be attributed to the increase in prison complaints received – if prison complaints were excluded from the figures, there was a 1% reduction in Hospital and Community complaints received in 2013/14 compared to 2012/13.
- The percentage of complaints **acknowledged** within the national target timescale of three working days from receipt was 94%, (up from 90% in 2012/13).
- The percentage of complaints dealt with within the national target of **20 working days** was 66% in 2013/14, an increase of 5% when compared to 2012/13 when it was 61%.
- In terms of **outcomes**, fewer complaints were upheld or partially upheld compared to the previous year. In 2013/14, 25% were upheld compared to 28% in 2012/13; 31% were partially upheld compared to 35% in 2012/13. There was, however, an increase in those not upheld with 42% of complaints not upheld this year compared to 36% not upheld in 2012/13.
- Of the 11,857 complaints made about Hospital & Community Health Services in 2013/14, 6,850 (58%) related to hospital **acute** service area. Of the 9,161 complaints made about Hospital & Community Health Services in 2012/13, 6,964 (76%) related this group.
- The **median time** taken to deal with complaints was 18 working days in 2013/14, consistent with 19 working days in 2012/13.
- The most prevalent issues raised in the 2013/14 complaints were ‘Treatment’ (43%), ‘Staff’ (29%), ‘Waiting Times’ (14%) and ‘Environment/domestic’ (7%). These 4 issues were also the most prevalent in the 2012/13 complaints with ‘Treatment’ (38%), ‘Staff’ (32%), ‘Waiting Times’ (10%) and ‘Environment/domestic’ (10%).

Family Health Services

Five broad service/contractor types are included within the Family Health Services complaints procedure - medical, dental, pharmaceutical, ophthalmic and administration.

- The number of complaints about Family Health Services in 2013/14 was 7,365. This represents a 20% rise on 2012/13 when the number received was 6,130.

NHSGGC

Breaking the above information down into a more local level, the following is noted from ISD's Annual Report:-

- In 2013/14, in NHSGGC, there were **3,073** complaints **received** about hospital and community services and **2,030** complaints **received** about family health services – a total of **5,103** complaints received. By way of comparison, in 2012/13 we received 2,183 about hospital and community health services and 1,012 about family health services – a total of 3,195.

In confirming the validated figures for complaints in 2013/14, it became apparent that a recording error had occurred within Acute Services when submitting the number of complaints received for quarterly reporting to the NHS Board and the Annual Report. Different recording methods were being utilised when recording complaints activity for the NHS Board Complaints Report and when submitting the data to ISD. The actual numbers of complaints received were different each quarter by an average of 50, however, the performance against the 70% target was largely unaffected. The error has been rectified and, going forward, one single officer will now be responsible for the submission of this information to the NHS Board and ISD to ensure absolute consistency of submitted data.

- In both years 2012/13 and 2013/14, NHSGGC **acknowledged** 95.9% of complaints within 3 working days.
- In relation to hospital and community health service complaints, NHSGGC received 3,073 in 2013/14 and responded to 70.4% of these within **20 working days**. By way of a comparison, we received 2,183 in 2012/13 and responded to 70.6% of these within 20 working days.
- In terms of **outcomes**, in relation to hospital and community health service complaints, NHSGGC Upheld 21.6%, Partially Upheld 30.2% and Not Upheld 47.2% in 2013/14. This is fairly consistent with 2012/13 where we Upheld 24.6%, Partially Upheld 33.4% and Not Upheld 41.5%.
- The **median time** taken to deal with complaints was 18 working days in 2013/14.
- In relation to Family Health Service complaints, NHSGGC received 2,030 (1,123 medical, 311 dental, 436 pharmaceutical and 160 ophthalmic). In 2012/13, we received 1,012 (677 medical, 83 dental, 168 pharmaceutical and 84 ophthalmic). This is more than double and is the largest rise in the number of FHS complaints received in NHS Scotland. As indicated in the NHS Board's Annual Report on Complaints and Feedback 2013/14, we acknowledged that the rise was largely attributable to the fact that in 2012/13 the figures were obtained from a single survey at the end of the year. It was the first time this collection method had been used. In 2013/14, this information was collected quarterly and subjected to greater scrutiny and pursuing of late responses.

The full ISD Report 2013/14 can be accessed at:-

<http://www.isdscotland.org/Health-Topics/Quality-Indicators/NHS-Complaints-Statistics/>

ANNUAL LETTER 2013/14 : COMPLAINTS TO THE SCOTTISH PUBLIC SERVICES OMBUDSMAN (SPSO) ABOUT NHS GREATER GLASGOW AND CLYDE

On 30 October 2014, Mr Jim Martin, Scottish Public Services Ombudsman (SPSO), wrote to the NHS Board's Chief Executive with a Sectoral Health Complaints Report and statistics relating to complaints about NHS Greater Glasgow and Clyde for the 2013/14 year. This provided information about the number of complaints received by the SPSO and determined about NHSGGC. It also highlighted the number of premature complaints (those that came to his office too early before completing the NHS Board's complaints process) and those complaints that were "fit for SPSO" (ie valid for investigation by the SPSO) and their outcome. In his letter, the SPSO highlighted the following points:-

Key points from 2013-14 Annual Report

- 11.5% rise in health complaints across NHS Scotland
- 55% of complaints upheld
- A welcome continuing decrease in complaints going to the SPSO too early

Supporting improvement - There still remained much to be done to improve complaints handling, and Mr Martin was pleased that the Scottish Health Council had recommended that the SPSO work with them to develop a more succinctly modelled, standardised and person-centred complaints process for NHS Scotland, in addition, to a number of other recommendations made in relation to wider aspects of complaints handling. He looks forward to continuing discussions with NHS stakeholders on progressing this work. Over the last year, the SPSO had further strengthened its engagement with NHS Boards, regulators, improvement and other scrutiny bodies. They had also derived great value from their customer and NHS sounding boards.

Looking forward - Mr Martin's report also draws attention to issues where he hopes to see movement in the coming year. He highlights the following:-

- Continuing concern about the time it is taking for coherent complaints procedures to be put in place for services delivered under the integrated health and social care models, with conflicting statutory processes remaining in place for these services
- The barriers that some prisoners are still facing in accessing the NHS complaints procedure

In summary, in 2013/14, the SPSO:-

- **received** 1,379 complaints about the health sector (11.5% more than last year) representing 31% of their caseload;
- upheld 55% of complaints, this was up from 52% last year. The SPSO highlights that they uphold complaints wherever they find fault even if this has already been recognised by the Board – they do this to recognise the complainant's experience;
- fully investigated 386 complaints with 382 publically reported to parliament including 38 detailed investigation reports; and
- made 684 recommendations for redress and improvement.

Information about complaints handled by the SPSO for NHSGGC in 2013/14 and 2012/13 is included at the end of this Appendix. The first two tables show complaints received by main subject area by the Ombudsman over the past two years. The third and fourth tables show the outcomes of the complaints the Ombudsman handled about NHSGGC over the past two years. It also highlights the rate of premature and fully/partly upheld complaints and overall rates for NHSGGC over the past two years. The fifth and sixth tables show prison complaints received by main subject area and outcomes of the complaints for 2013/14.

In summary, in relation to NHSGGC's SPSO complaints:-

- 301 complaints were **received** by the SPSO in 2013/14. This compared with 209 in 2012/13.
- 71.8% of those complaints concerned clinical treatment/diagnosis.

- 26% of complaints received by the SPSO concerning NHSGGC cases were deemed premature. This compared with 26.7% in 2012/13.
- Of those complaints fit for the SPSO, 48.8% were fully upheld or partly upheld. In 2012/13, 55.6% were fully upheld or partly upheld.

Comprehensive statistical information about all the sectors under the SPSO remit is available at:-

www.spsa.org.uk/statistics

Health Complaints Received by Subject 2013-14

Subject	Greater Glasgow & Clyde NHS Board Area						Total	Rank	Complaints as % of total	Sector Total	Rank	Complaints as % of total
	Greater Glasgow and Clyde NHS Board	Dentists & Dental Practices	GP & GP Practices	Other FHS Practitioner or Practice	Pharmacists & Pharmacy Services							
Clinical treatment / Diagnosis	191	6	18	0	1	216	1	71.8%	913	1	66.2%	
Communication, staff attitude, dignity, confidentiality	15	0	4	0	0	19	2	6.3%	128	2	9.3%	
Appointments/Admissions (delay, cancellation, waiting lists)	14	0	1	0	0	15	3	5.0%	75	3	5.4%	
Complaints handling	10	0	2	0	0	12	4	4.0%	43	5	3.1%	
Policy/administration	7	0	3	0	0	10	5	3.3%	57	4	4.1%	
Nurses / Nursing Care	5	0	0	0	0	5	6	1.7%	15	7=	1.1%	
Admission, discharge & transfer procedures	3	0	0	0	0	3	7=	1.0%	26	6	1.9%	
Record Keeping	2	0	1	0	0	3	7=	1.0%	10	11	0.7%	
Other	2	0	0	0	0	2	9=	0.7%	13	9	0.9%	
Lists	0	0	2	0	0	2	9=	0.7%	12	10	0.9%	
Continuing care	1	0	0	0	0	1	11=	0.3%	15	7=	1.1%	
Appliances, equipment & premises	1	0	0	0	0	1	11=	0.3%	6	13	0.4%	
Complaints by NHS staff	1	0	0	0	0	1	11=	0.3%	3	14	0.2%	
Hotel services - food, laundry etc	1	0	0	0	0	1	11=	0.3%	1	16=	0.1%	
Pre- Contractual or Commercial Matters	1	0	0	0	0	1	11=	0.3%	1	16=	0.1%	
Failure to send ambulance/delay in sending ambulance	0	0	0	0	0	0	-	0.0%	9	12	0.7%	
Hygiene, cleanliness & infection control	0	0	0	0	0	0	-	0.0%	2	15	0.1%	
Out Of Jurisdiction	0	0	0	0	0	0	-	0.0%	2	-	0.1%	
Subject Unknown	8	0	0	1	0	9	-	3.0%	48	-	3.5%	
Total	262	6	31	1	1	301	-	100.0%	1379	-	100.0%	

Complaints as % of total 21.8% 100.0%

Health Complaints Received by Subject 2012-13

Subject	Greater Glasgow & Clyde NHS Board Area						Sector Total	Rank	Complaints as % of total
	Greater Glasgow and Clyde NHS Board	Dentists & Dental Practices	GP & GP Practices	Total	Rank	Complaints as % of total			
Clinical treatment / Diagnosis	82	8	14	104	1	50%	588	1	48%
Communication, staff attitude, dignity, confidentiality	10	0	6	16	2	8%	105	2	8%
Policy/administration	9	0	0	9	3	4%	76	3	6%
Complaints handling	5	2	1	8	4	4%	52	4	4%
Appointments/Admissions (delay, cancellation, waiting lists)	6	0	0	6	5	3%	42	5	3%
Continuing care	4	0	0	4	6	2%	9	9	1%
Appliances, equipment & premises	3	0	0	3	7	1%	10	8	1%
Admission, discharge & transfer procedures	2	0	0	2	8=	1%	21	6	2%
Nurses / Nursing Care	2	0	0	2	8=	1%	8	10=	1%
Other	1	0	1	2	8=	1%	7	12	1%
Lists	0	0	1	1	11=	0%	6	13	0%
Complaints by NHS staff	1	0	0	1	11=	0%	2	14=	0%
Hygiene, cleanliness & infection control	1	0	0	1	11=	0%	2	14=	0%
Record Keeping	0	0	0	0	-	0%	11	7	1%
Failure to send ambulance/delay in sending ambulance	0	0	0	0	-	0%	8	10=	1%
Hotel services - food, laundry etc	0	0	0	0	-	0%	1	16	0%
Out Of Jurisdiction	4	0	0	4	-	2%	20	-	2%
Subject Unknown	45	0	1	46	-	22%	269	-	22%
Total	175	10	24	209	-	100%	1,237	-	100%

Complaints as % of Sector Total 16.9%

Health Complaints Determined by Outcome 2013-14

Stage	Outcome Group	Greater Glasgow & Clyde NHS Board Area						Sector Total
		Greater Glasgow and Clyde NHS Board	Dentists & Dental Practices	GP & GP Practices	Other FHS Practitioner or Practice	Pharmacists & Pharmacy Services	Total	
Advice	Out of jurisdiction (discretionary)	5	0	0	0	0	5	25
	Out of jurisdiction (non-discretionary)	5	0	0	0	0	5	19
	Not duly made or withdrawn	57	0	2	1	0	60	331
	Outcome not achievable	12	1	4	0	1	18	66
	Premature	62	0	0	0	0	62	297
	Resolved	0	0	0	0	0	0	2
	Total	141	1	6	1	1	150	740
Early Resolution 1	Out of jurisdiction (discretionary)	7	0	1	0	0	8	26
	Out of jurisdiction (non-discretionary)	4	0	2	0	0	6	15
	Not duly made or withdrawn	10	0	2	0	0	12	49
	Outcome not achievable	8	0	1	0	0	9	37
	Premature	10	0	1	0	0	11	53
	Resolved	3	1	1	0	0	5	18
	Total	42	1	8	0	0	51	198
Early Resolution 2	Fully upheld	2	0	2	0	0	4	17
	Some upheld	1	0	0	0	0	1	4
	Not upheld	9	0	2	0	0	11	42
	Not duly made or withdrawn	3	0	0	0	0	3	7
	Total	15	0	4	0	0	19	70
Investigation 1	Fully upheld	10	1	4	0	0	15	73
	Some upheld	11	0	2	0	0	13	82
	Not upheld	17	3	6	0	0	26	115
	Not duly made or withdrawn	0	0	0	0	0	0	7
	Resolved	0	1	0	0	0	1	1
	Total	38	5	12	0	0	55	278
Investigation 2	Fully upheld	2	0	2	0	0	4	27
	Some upheld	2	0	0	0	0	2	11
	Not upheld	0	0	0	0	0	0	0
	Total	4	0	2	0	0	6	38
Total Complaints	240	7	32	1	1	281	1324	

Total Premature Complaints	72	0	1	0	0	73	350
Premature Rate	30.0%	0.0%	3.1%	0.0%	0.0%	26.0%	26.4%

Fit for SPSO Total (ER2, Inv1 & Inv2)	57	5	18	0	0	80	386
Total Cases Upheld / Partly Upheld	28	1	10	0	0	39	214
Uphold Rate (total upheld / total fit for SPSO)	49.1%	20.0%	55.6%	-	-	48.8%	55.4%

Health Complaints Determined by Outcome

2012-13

Stage	Outcome Group	Greater Glasgow & Clyde NHS Board Area					Sector Total
		Greater Glasgow and Clyde NHS Board	Dentists & Dental Practices	GP & GP Practices	Total		
Advice	Body out of jurisdiction	0	0	0	0	0	0
	Matter out of jurisdiction (discretionary)	4	0	0	4	18	
	Matter out of jurisdiction (non-discretionary)	4	0	0	4	12	
	No decision reached	43	0	2	45	298	
	Outcome not achievable	1	0	0	1	4	
	Premature	36	2	2	40	293	
	Total	88	2	4	94	625	
Early Resolution 1	Matter out of jurisdiction (discretionary)	3	0	1	4	34	
	Matter out of jurisdiction (non-discretionary)	5	0	1	6	20	
	No decision reached	3	0	1	4	36	
	Outcome not achievable	8	1	1	10	34	
	Premature	15	1	2	18	63	
	Total	34	2	6	42	187	
Early Resolution 2	Fully upheld	2	0	1	3	15	
	Partly upheld	0	0	1	1	10	
	Not upheld	5	0	2	7	57	
	No decision reached	0	0	0	0	1	
	Outcome not achievable	0	0	0	0	1	
	Total	7	0	4	11	84	
Investigation 1	Fully upheld	7	3	3	13	60	
	Partly upheld	14	2	2	18	81	
	Not upheld	23	2	2	27	118	
	No decision reached	2	0	0	2	8	
	Total	46	7	7	60	267	
Investigation 2	Fully upheld	5	0	2	7	25	
	Partly upheld	3	0	0	3	9	
	Not upheld	0	0	0	0	0	
	No decision reached	0	0	0	0	0	
Total Complaints	183	11	23	217	1,197		

NOTE : 'No decision reached' includes complaints not duly made, withdrawn and resolved

Total Premature Complaints	51	3	4	58	356
Premature Rate	27.9%	27.3%	17.4%	26.7%	29.7%

Fit for SPSO Total (ER2, Inv1 & Inv2)	61	7	13	81	385
Total Cases Upheld / Partly Upheld	31	5	9	45	200
Uphold Rate (total upheld / total fit for SPSO)	50.8%	71.4%	69.2%	55.6%	51.9%

Prison Health Care Received by Authority 2013-14

Subject	Greater Glasgow and Clyde NHS Board	Sector Total
Appointments/Admissions (delay, cancellation, waiting lists)	2	8
Clinical treatment / Diagnosis	53	104
Communication, staff attitude, dignity, confidentiality	2	6
Complaints handling	5	8
Nurses / Nursing Care	1	1
Policy/administration	1	2
Total Complaints	64	129

Prison Health Complaints Closed by Outcome and Authority 2013-14

Stage	Outcome Group	Greater Glasgow and Clyde NHS Board	Sector Total
Advice	Out of jurisdiction (discretionary)	0	1
	Out of jurisdiction (non-discretionary)	0	1
	Not duly made or withdrawn	17	34
	Outcome not achievable	2	4
	Premature	21	36
	Total	40	76
Early Resolution 1	Out of jurisdiction (discretionary)	0	1
	Not duly made or withdrawn	4	5
	Outcome not achievable	0	1
	Premature	2	6
	Resolved	0	1
	Total	6	14
Early Resolution 2	Fully upheld	1	2
	Not upheld	6	8
	Not duly made or withdrawn	1	1
	Total	8	11
Investigation 1	Fully upheld	0	9
	Some upheld	0	3
	Not upheld	3	4
	Not duly made or withdrawn	0	2
	Total	3	18
Investigation 2	Fully upheld	1	3
	Total	1	3
Total Complaints		58	122

Prison Health Complaints Received by Subject and Authority 2012-13

Subject	Greater Glasgow and Clyde NHS Board	Sector Total
Appointments/admissions (delay, cancellation, waiting lists)	1	2
Clinical treatment / Diagnosis	12	36
Communication, staff attitude, dignity, confidentiality	0	2
Complaints handling	1	15
Policy/administration	2	7
Total Complaints	16	62

Prison Health Complaints Determined by Outcome and Authority 2012-13

Stage	Outcome	Greater Glasgow and Clyde NHS Board	Sector Total
Advice	No decision reached	6	15
	Premature	6	21
	Total	12	36
Early Resolution 1	Matter out of jurisdiction (non-discretionary)	0	1
	Premature	2	6
	Total	2	7
Early Resolution 2	Complaint not upheld	0	3
	No decision reached	0	1
	Total	0	4
Investigation 1	Complaint not upheld	0	2
	No decision reached	0	1
	Total	0	3
Total Complaints		14	50