

Greater Glasgow NHS Board

Board Meeting

Tuesday, 16 September 2003

Board Paper No. 03/58

HEAD OF BOARD ADMINISTRATION AND TRUST CHIEF EXECUTIVES

QUARTERLY REPORTS ON COMPLAINTS : APRIL - JUNE 2003

Recommendation

The Board is asked to note the quarterly report on NHS complaints in Greater Glasgow for the period 1 April to 30 June 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 forms part of the Performance Assessment Framework (PAF) and is likely to be reported in future to the Performance Review Group.

(a) April - June 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	199	127	64%
South Trust	113	85	75%
Yorkhill Trust	51	25	49%
PCT Trust (excluding FHS)	11	6	55%

(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:-

EMBARGOED UNTIL DATE OF MEETING

	<u>01/04/03 - 30/06/03</u>	<u>01/01/03 31/03/03</u>	<u>01/10/02 31/12/02</u>	<u>01/07/02 30/09/02</u>
North Trust	64%	84%	62%	63%
South Trust	75%	75%	54%	63%
Yorkhill Trust	49%	53%	42.5%	62%
PCT Trust (excluding FHS)	55%	56%	31%	43%

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
- Communication
- Attitude and Behaviour

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

North Trust	<ul style="list-style-type: none"> ➤ One particular complaint in this quarter highlighted areas within endoscopy procedures where suggestions made by a patient merited discussion and consideration within the review group. ➤ A complex complaint for both the Medical and Surgical Divisions highlighted the necessity for patients with allergies to anticoagulants to have alert notices on the front of their case records. This has been discussed at Directorate level and staff have been reminded of the requirement.
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 and to provide better information to parents.
PCT Trust (excluding FHS)	<ul style="list-style-type: none"> ➤ The practice of sharing care between Macmillan Nurses and Respiratory Nurses was reviewed and it will be made clearer if one or both are to offer support ➤ Work is ongoing to ensure referring professionals are aware of the type of services provided by the Macmillan Nurses. ➤ Staff training in a specific area on discharge planning and referral process to the Intensive Community Treatment Team. ➤ Awareness training for staff on dealing with requests to access records of care in a specific area.

EMBARGOED UNTIL DATE OF MEETING

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>April - June 2003</u>			
	<u>Complaints Completed</u>	<u>Upheld</u>	<u>Upheld in Part</u>	<u>Not Upheld</u>
North Trust	199	68 (34%)	50 (25%)	81 (41%)
South Trust	113	49 (43%)	24 (21%)	40 (36%)
Yorkhill Trust	51	9 (18%)	30 (59%)	12 (23%)
PCT Trust (excluding FHS)	11	4 (36%)	2 (18%)	5 (46%)

4. Conciliation

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

5. Scottish Executive Complaints Consultation

The Scottish Executive Health Department consultation on "Reforming the NHS Complaints Procedure" ended on 2 June 2003. 175 responses were received and a report on the responses is being prepared by Scottish Health feedback.

If the new Complaints Procedure is to be introduced on 1 April 2004, there will need to be a decision fairly shortly by the Health Department on the new procedure, how it will be implemented and arrangements for training determined over the next two/three months.

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.

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)	199
(b)	Number of complaints completed at Local Resolution within 20 working days	127
(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>	64%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	68
	Number upheld in part	50
	Number not upheld	81

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	0
	Number proceeding	0
	Decision Awaited	4
(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	1
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Action Taken and Lessons Learned for Patient Care as a Result of Complaints Completed this Quarter

One particular complaint in this quarter highlighted areas within endoscopy procedures where suggestions made by a patient merited discussion and consideration within the review group.

A complex complaint for both the Medical and Surgical Divisions highlighted the necessity for patients with allergies to anticoagulants to have alert notices on the front of their case records. This has been discussed at Directorate level and staff have been reminded of the requirement.

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

1. Clinical Treatment
2. Attitude and Behaviour of Staff
3. Communication

There has also been a sharp rise in complaints relating to waiting time for outpatient appointments in some areas.

Complaints relating to clinical treatment remain at a similar level this quarter. There are no specific trends noted.

EMBARGOED UNTIL DATE OF MEETING

Complaints in relation to the attitude and behaviour of staff have decreased this quarter and work continues throughout the Trust to provide training for all levels of staff in customer care and handling complaints.

While complaints which relate to communication have decreased this quarter, Clinical Nurse Managers continue to encourage ward staff to make themselves available to speak to relatives at visiting times and offer the opportunity to relatives to speak with senior medical staff.

Waiting times for clinic appointments and operation dates for Trauma and Related Services, especially Orthopaedics, remain the highest source of complaint.

Trends of Complaints Noticed this Quarter

We continue to receive complaints regarding the provision of digital hearing aids and the waiting time for assessment across the Trust. Some of these complaints are made by MSPs on behalf of their constituents. The Scottish Executive has recently invested widely in Audiology Services and the Trust has benefited from additional equipment being purchased. This has enabled more accurate assessment, greater flexibility of audiology rooms, information technology and therefore improved quality of care for patients.

Patients' expectations are that digital aids provide a better outcome than analogue aids, however, the provision of a digital aid will not necessarily assure improved hearing capacity and assessment is required for access to any upgraded aid whether digital or analogue. At present we are not in a position to provide the full range of digital aids and it is hoped the funding to support this will be part of the national investment programme.

Specific Service Improvements Made as a Result of Complaints Completed

Work is ongoing across the Trust to produce and improve on the standard of written information provided to patients. The Written Materials Policy Group continue to assess and advise on written information provided to patients to ensure that the information given is fit for the purpose and of the highest standard.

Delays in receiving results of radiological procedures and waiting times for scans continue to be a main reason for complaint within the Clinical Services Division. Investment in a new Radiology reporting system should help with the delay in receiving radiological test results.

COMPLAINT CATEGORIES

ISSUES RAISED		NUMBER	ISSUES RAISED		NUMBER
Staff	Attitude/behaviour	39	Procedural issues		
	Medical/Dental		• Failure to follow agreed procedure		2
	Nursing		• Policy and commercial decisions (of trusts)		1
	PAMS		• NHS Board commissioning		0
	Ambulance (& paramedics)		• Mortuary/post mortem arrangements		0
	Administration		• <i>Code of Openness</i> complaints		0
	Other				
• Complaint handling	1	Treatment			
• Communication (written/oral)	50	• Clinical treatment (all aspects)		89	
• Shortage/availability	3	Medical/Dental			
		Nursing			
		Other Staff			
Waiting times for			• Consent		0
• Date for admission/attendance	9				
• Date for appointment	45	Transport Arrangements (including ambulances)		5	
• Result of tests	9				
Delays in/at			• Other (where no definition applies)		19
• Admission/transfer/discharge procedures	9				
• Outpatient and other clinics	15				
• A & E	0				
Environment/domestic					
• Aids & appliances, equipment, premises (including access)	13				
• Catering	4				
• Cleanliness/laundry	12				
• Patient privacy/dignity	14				
• Patient property/expenses	3				
• Patient status/discrimination (e.g. race, gender, age)	0				
• Personal records (including medical, complaints)	2				
• Shortage of beds	1				

South Glasgow University Hospitals NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	113
(b)	Number of complaints completed at Local Resolution within 20 working days	85
(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	49
	Number upheld in part	24
	Number not upheld	40

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	2
(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	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:	1
(b)	Of these:	
	Number from Independent Review refusal	1
	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. Attitude and Communication
2. Waiting Times
3. Clinical Treatment

Trends of Complaints Noticed this Quarter

No specific new trends.

Specific Service Improvements Made as a Result of Complaints Completed

Patients advised to contact the Trust on the day of surgery to minimise the inconvenience caused when beds are not available following surgical procedures. Letter amended Trust-wide.

EMBARGOED UNTIL DATE OF MEETING

Communication continues to be a factor in resolving concerns. Meetings arranged with families early on during a complaints process to assist with closure.

Nursing, Medical and Administration staff review complaints which have been lengthy and outwith the timescales in order to assess ways of improving the process or doing things differently with the benefit of hindsight.

COMPLAINT CATEGORIES

ISSUES RAISED

NUMBER

ISSUES RAISED

NUMBER

Staff

Attitude/behaviour

Procedural issues

Medical/Dental	8
Nursing	7
PAMS	0
Ambulance (& paramedics)	0
Administration	0
Other	1

• Failure to follow agreed procedure	0
• Policy and commercial decisions (of trusts)	0
• NHS Board commissioning	0
• Mortuary/post mortem arrangements	0
• <i>Code of Openness</i> complaints	0

• Complaint handling	0
• Communication (written/oral)	26
• Shortage/availability	3

Treatment

• Clinical treatment (all aspects)	33
Medical/Dental	20
Nursing	11
Other Staff	2

Waiting times for

• Date for admission/attendance	17
• Date for appointment	17
• Result of tests	3

• Consent	0
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Delays in/at

• Admission/transfer/discharge procedures	2
• Outpatient and other clinics	1
• A & E	0

• Transport Arrangements (including ambulances)	0
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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

• Other (where no definition applies)	3
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Yorkhill NHS Trust

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	51
(b)	Number of complaints completed at Local Resolution within 20 working days	25
(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>	49%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	9
	Number upheld in part	30
	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 and to provide better information to parents.

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. Aids and Appliances, Equipment, Premises

Trends of Complaints Noticed this Quarter

It has been noted that there have been complaints concerning the information given over the telephone to parents making waiting time enquiries. The information itself is felt to be sound, but will be reworded to facilitate understanding.

Specific Service Improvements Made as a Result of Complaints Completed

In light of a complaint received, a patient information leaflet was being rewritten.

COMPLAINT CATEGORIES

ISSUES RAISED

NUMBER

ISSUES RAISED

NUMBER

Staff

Attitude/behaviour

Medical/Dental

8

Nursing

8

PAMS

2

Ambulance (& paramedics)

0

Administration

3

Other

1

• Complaint handling

0

• Communication (written/oral)

29

• Shortage/availability

5

Waiting times for

• Date for admission/attendance

2

• Date for appointment

7

• Result of tests

3

Delays in/at

• Admission/transfer/discharge procedures

2

• Outpatient and other clinics

2

• A & E

0

Environment/domestic

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

15

• Catering

4

• Cleanliness/laundry

3

• Patient privacy/dignity

0

• Patient property/expenses

0

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

0

• Personal records (including medical, complaints)

3

• Shortage of beds

0

Procedural issues

• Failure to follow agreed procedure

3

• Policy and commercial decisions (of trusts)

1

• NHS Board commissioning

0

• Mortuary/post mortem arrangements

0

• *Code of Openness* complaints

0

Treatment

• Clinical treatment (all aspects)

0

Medical/Dental

8

Nursing

1

Other Staff

0

• Consent

0

• **Transport Arrangements (including ambulances)**

1

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

6

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

Local Resolution

(a)	Number of complaints completed at Local Resolution (all complainants)	11
(b)	Number of complaints completed at Local Resolution within 20 working days	6
(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>	55%
(d)	Outcome of complaints completed at Local Resolution:	
	Number upheld	4
	Number upheld in part	2
	Number not upheld	5

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

The practice of sharing care between Macmillan Nurses and Respiratory Nurses was reviewed and it will be made clearer if one or both are to offer support.

Work is ongoing to ensure referring professionals are aware of the type of services provided by the Macmillan Nurses.

Staff training in a specific area on discharge planning and referral process to the Intensive Community Treatment Team.

Awareness training for staff on dealing with requests to access records of care in a specific area.

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

1. Attitude and Behaviour
2. Clinical Treatment
3. Communication

Trends of Complaints Noticed this Quarter

There was no specific trend in complaints this quarter.

Specific Service Improvements Made as a Result of Complaints Completed

The reception desk at Podiatry department in a Health Centre is now staffed to ensure a smoother flow of patients.

There is now a more robust system in place for planning and providing CPN services in a particular sector.

COMPLAINT CATEGORIES

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

EMBARGOED UNTIL DATE OF MEETING

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

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

Independent Review

(a)	Number of requests for Independent Review <u>received</u>	11
(b)	Outcome of requests for Independent Review <u>received</u> :	
	Number referred back to Local Resolution	0
	Number refused	4
	Number proceeding	0
	Decision Awaited	7
(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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