



REPORT TO: MORAY INTEGRATION JOINT BOARD CLINICAL AND CARE GOVERNANCE COMMITTEE ON 31 AUGUST 2023

SUBJECT: DRAFT HSCM ANNUAL COMPLAINTS REPORT 2022/23

BY: CHIEF NURSE, MORAY

1. REASON FOR REPORT

1.1. To provide the Committee with the Draft Health and Social Care Moray (HSCM) Annual Complaints Report for 2022/23.

2. RECOMMENDATION

2.1. It is recommended that the Clinical and Care Governance Committee:

- i) consider and note the contents of the annual report; and**
- ii) request the annual report is submitted to MIJB in September for approval prior to publication**

3. BACKGROUND

3.1. A report to Committee in August 2022 provided information on the agreed Complaints Key Performance Indicators (KPIs) for the Model Complaints Handling Procedures for Local Authorities (LA), which were published in March 2022 on the Scottish Public Services Ombudsman (SPSO) website (this includes Health and Social Work Partnerships, in relation to social work functions delegated from LAs). The Committee also received information detailing the 9 NHS performance indicators.

3.2. In March 2022 the SPSO confirmed the annual report publication deadline is the end of October each year, with the KPIs applicable for data collected from 1 April 2022.

3.3. The NHS Grampian Annual Complaints report provides information on all complaints, concerns, comments and feedback recorded on Datix, this includes any recorded under HSCM. The Annual Complaints Report produced by the Council includes all council related complaints recorded on Iagan, this includes any Council related services under HSCM.

- 3.4. The SPSO have advised to ensure there is no double reporting of figures but it should be made clear where partnerships' complaints performance information is published.
- 3.5. Given the importance HSCM places on receiving comments and feedback to use to continuously improve services, the experience and satisfaction of service users, along with their families and carers, the Committee agreed, at their meeting on 25 August 2022 (para 6 refers) to continue to publish annual complaints performance information to demonstrate HSCM's commitment to valuing complaints.
- 3.6. The annual report pulls together and builds on the quarterly complaints reports produced for Clinical and Care Governance Committee. It includes details about the number complaints received and information about the stage at which complaints were resolved, the time taken to do so, and the actions that have been or will be taken to improve services as a result of complaints.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1. The information from complaints from 1 April 2022 to 31 March 2023 has been collated and presented following the LA KPIs and NHS Performance Indicators. The draft HSCM Annual Complaints Report for 2022/23 is attached at **Appendix 1**.
- 4.2. This will be the third published HSCM Annual Complaints Report – all previous versions can be found on the HSCM Website - <https://hscmoray.co.uk/complaints.html>
- 4.3. The annual report includes links to the Council's and NHSG's Annual Complaints Performance Reports and provides supplementary information specific to Health and Social Care Moray.
- 4.4. There have been no complaints received relating to the dissatisfaction with the MIJB's policies, decisions or administrative or decision-making processes followed by the MIJB. The MIJB's definition of a complaint is: "*An expression of dissatisfaction by one or more members of the public about the MIJB's action or lack of action, or about the standard of service the MIJB has provided in fulfilling its statutory responsibilities.*"
- 4.5. A total of 108 complaints were received during 2022/23 which is a slight increase on the previous year where a total of 92 complaints were received. This may be attributed to an increase in activity, for example GMED activity continues to increase with 2022 being the busiest year on record. This increase in clinical demand could reflect pressures and subsequent complaints.
- 4.6. As seen in Graph 2 of **Appendix 1** there was a drop in the number of complaints received during 2020/21, which is likely due to the Covid-19 pandemic; in 2020 there were many services that were suspended and many others where service delivery was altered in some way to accommodate the requirements for social distancing.
- 4.7. Early resolution is where complaints are straightforward, require little or no investigation and are resolved at the point of contact at the earliest opportunity

– usually within 5 working days. Achieving early resolution, where appropriate, helps reduce the number of Stage 2 complaints and is really helpful for patients and families, preventing anxiety and upset if they can be given a quick response rather than waiting for a complaint investigation outcome. Almost a third of all complaints received during 2022/23 were marked for early resolution / front line response.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Partners in Care 2022 – 2032”

As set out within Annex C of the Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014 Clinical and Care Governance Framework.

Effective handling of complaints is used to ensure the efficient and sustainable delivery of services to meet priorities.

(b) Policy and Legal

Clinical and Care Governance requirements are set out within the Moray Health and Social Care Integration Scheme. Appropriate arrangements must be in place to ensure and evidence good governance in meeting duties under the Public Bodies (Joint Working) (Scotland) Act 2014.

(c) Financial implications

None directly associated with this report.

(d) Risk Implications and Mitigation

There are systems and processes in place across service areas to support clinical governance, providing assurance to the HSCM Senior Leadership Team and to the Clinical and Care Governance Committee. There are platforms within Health and Social Care to discuss and share good practice, learning and challenges.

Moray Integration Joint Board (MIJB), Moray Council and NHS Grampian could find themselves exposed to significant risks if good governance is not in place. The purpose of this report is to oversee the processes to ensure that appropriate action is taken in response to adverse events, scrutiny reports/action plans, safety action notices, feedback, complaints and litigation, and those examples of good practice and lessons learned are disseminated widely.

(e) Staffing Implications

This activity is core to all practitioners in the front line both in terms of their professional competence and assurances in care delivery.

(f) Property

None directly arising from this report.

(g) Equalities/Socio Economic Impact

Not required as there are no changes to policy.

(h) Climate Change and Biodiversity Impacts

None directly arising from this report.

(i) Directions

None directly arising from this report.

(j) Consultations

Consultations have been undertaken with the following staff who are in agreement with the content of this report where it relates to their area of responsibility:

- Corporate Manager
- Tracey Sutherland, Democratic Services Manager, Moray Council
- Clinical and Care Governance Group

6. CONCLUSION

6.1. The governance and monitoring of complaints forms part of core business for teams and services and provision of a good quality, effective and safe service is a key priority for all staff. Monitoring and learning from all feedback is an ongoing process.

Author of Report: Isla Whyte, Interim Support Manager

Background Papers: with author

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