

Complaints Data (by closed complaints)Quarter 4 (01/01/24 – 31/03/2024)**Learning from complaints**

Teams and services actively review all forms of feedback to see where improvements can be made and share any learning.

The tables 1, 2, 3, 4, 5, 6 and graph 1 below set out the outcomes of closed complaints, what service received the complaint and any actions taken /learning.

Table 1

Complaints Information Extracted from Datix – **22** complaints were **closed** during Quarter 4, 2023/24.

Actions Taken/Outcome of complaints **closed** during Quarter 4, 2023/24:

| | Fully upheld: Complaint is accepted | Partially upheld: Complaint is partly accepted | Not upheld: Complaint is not accepted | Consent not received: Consent form not received from patient | Closed as duplicate | Total |
|--|---|--|---|---|---------------------------|-------|
| Action plan(s) created and instigated | 0 | 1 | 0 | 0 | 0 | 1 |
| Communication - Improvements in communication staff-staff or staff-patient | 4 | 8 | 0 | 0 | 0 | 12 |
| Education/training of staff | 2 | 1 | 0 | 0 | 0 | 3 |
| No action required | 1 | 2 | 4 | 0 | 0 | 7 |
| Risk issues identified and passed on | 0 | 0 | 1 | 0 | 0 | 1 |
| System - Changes to systems | 0 | 1 | 0 | 0 | 0 | 1 |
| Share lessons with staff/patient/public | 1 | 2 | 0 | 0 | 0 | 3 |
| Waiting - Review of waiting times | 1 | 0 | 0 | 0 | 0 | 1 |
| Consent not received / closed as duplicate | 0 | 0 | 0 | 1 | 1 | 2 |
| Total | 9 | 15 | 5 | 1 | 1 | *31 |

**this figure does not represent number of complaints closed as complaints may have more than one action*

Table 2Complaints Information Extracted from Lagan: **16** complaints were **closed** during Quarter 4, 2023/24

| Directorate | Department | Service | Upheld | Partially Upheld | Not Upheld | Resolution | Grand Total |
|------------------------------|--|---|--------|------------------|------------|------------|-------------|
| Health and Social Care Moray | Children and Families and Criminal Justice | Access Team | 1 | 0 | 1 | 0 | 2 |
| | | Children and Families Area Teams | 1 | 2 | 2 | 0 | 5 |
| | | Fostering and Adoption and Supported Lodgings | 0 | 2 | 0 | 0 | 2 |
| | Health and Social Care Moray | Access Team | 0 | 2 | 0 | 0 | 2 |
| | | Care at Home | 0 | 3 | 2 | 0 | 5 |

Table 3Complaints Information Extracted from Datix: **22** complaints were **closed** during Quarter 4, 2023/24

| | Fully upheld: Complaint is accepted | Partially upheld: Complaint is partly accepted | Not upheld: Complaint is not accepted | Consent not received: Consent form not received from patient | Closed as duplicate | Total |
|-------------------------------------|-------------------------------------|--|---------------------------------------|--|---------------------|-----------|
| Allied Health Professionals | 2 | 0 | 0 | 0 | 0 | 2 |
| Continence Service | 0 | 1 | 0 | 0 | 0 | 1 |
| General Practice | 0 | 0 | 1 | 0 | 1 | 2 |
| GMED | 1 | 7 | 1 | 0 | 0 | 9 |
| Mental Health - Adult Mental Health | 1 | 2 | 2 | 1 | 0 | 6 |
| Primary Care | 1 | 0 | 1 | 0 | 0 | 2 |
| No value | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 5 | 10 | 5 | 1 | 1 | 22 |

Graph 1

Complaints and Feedback by Service

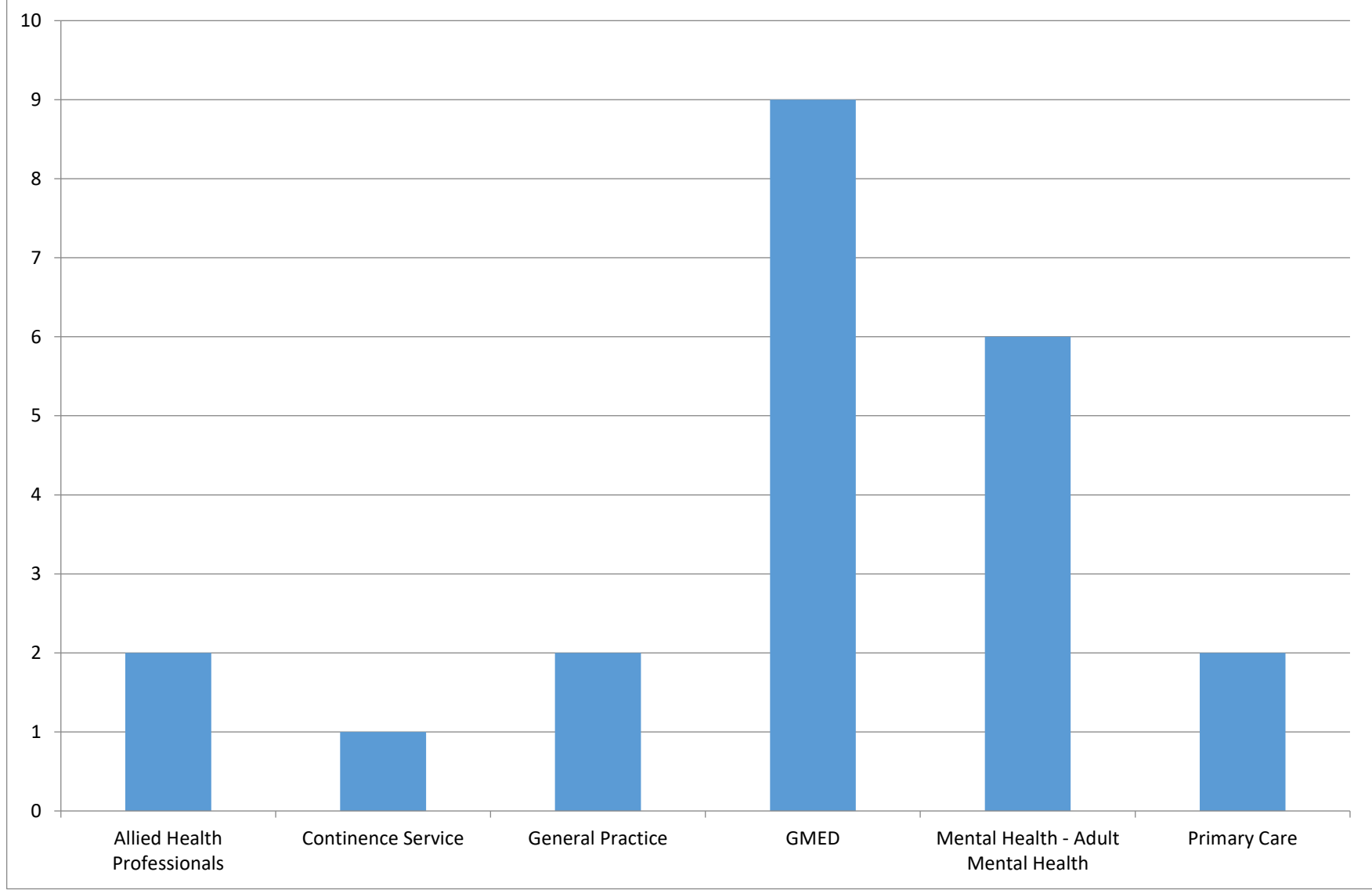


Table 4Complaints Information Extracted from Datix – Action Taken by Service (complaints **closed** during Quarter 4, 2023/24)

| | Allied Health Professionals | Continence Service | General Practice | GMED | Mental Health - Adult Mental Health | Primary Care | Total |
|--|-----------------------------|--------------------|------------------|-----------|-------------------------------------|--------------|------------|
| Action plan(s) created and instigated | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| Communication - Improvements in communication staff-staff or staff-patient | 2 | 1 | 0 | 6 | 2 | 1 | 12 |
| Education/training of staff | 0 | 0 | 0 | 1 | 1 | 1 | 3 |
| No action required | 0 | 0 | 1 | 3 | 3 | 0 | 7 |
| Risk issues identified and passed on | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| System - Changes to systems | 0 | 0 | 0 | 1 | 0 | 0 | 1 |
| Share lessons with staff/patient/public | 0 | 0 | 0 | 2 | 1 | 0 | 3 |
| Waiting - Review of waiting times | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Total | 2 | 2 | 1 | 13 | 8 | 3 | 29* |

**this figure does not represent number of complaints closed as complaints may have more than one action. The figure does not include the complaint that was closed as it was a duplicate or the complaint closed due to no consent received.*

Active review of complaints through reporting and investigation is a useful tool to identify learning and improve services.

Below are some of the actions and learning from recent complaints.

Table 5

Actions and Lessons Learned (Datix)

| | |
|----------------------------|---|
| Education/ training | Reflective practice / supervised practice. |
| | Reminder to clinicians regarding clear communication with patients around dosage of medication. |
| | Reminder of policies and procedures. |
| Communication | Teams to continue to attempt follow up despite communication difficulties. |
| | Liaise with SAS to improve communication regarding delays. |

Communication is a common theme arising from complaints and plays a pivotal role in patient experience: ensuring clear and empathetic communication practices with patients is at the forefront of improvements as is refining internal communication between care partners and departments to ensure seamless coordinator of care and continuity for patients.

Table 6

Learning Outcomes (Lagan)

| | |
|----------------------|---|
| Redress | Service working with team to develop an improvement action around better communication. |
| Revision | Complaint handling training for staff. |
| | Area Managers to remind staff about importance of supplying correct information. |
| | Communication lessons to be learned. |
| Reinforcement | Communication strategy required between team / family. |

Information provided is kept brief to ensure no patient identifiable information is shared.

Indicator 1 – The total number of complaints received

The sum of the number of complaints received at Stage 1 (this includes escalated complaints as they were first received at Stage 1), and the number of complaints received directly at Stage 2.

Table 7 – Total number of complaints **received** in Quarter 4, 2023/24

| System recorded | Early Resolution / Frontline | Investigation | Not Marked | Total |
|-----------------------|------------------------------|------------------------|-------------------|-----------|
| NHS – Datix | 6 marked early resolution | 9 marked investigation | 0 | 15 |
| Moray Council - Lagan | 6 marked frontline | 4 marked investigative | 12 not yet marked | 22 |
| Total | 12 | 13 | 12 | 37 |

Table 8 – Allocation of complaints **received** in Quarter 4, 2023/24

| NHS Service - Datix | |
|---------------------|-----------|
| GMED | 4 |
| Community Nursing | 2 |
| Adult Mental Health | 5 |
| AHP | 2 |
| Primary Care | 2 |
| Total | 15 |

Table 9 – Allocation of complaints **received** in Quarter 4, 2023/24

| MC Service - Lagan | | |
|--|---|-----------|
| Children and Families and Criminal Justice | Fostering and Adoption and Supported Lodgings | 2 |
| | Children and Families Area Teams | 8 |
| | Access Team | 4 |
| Health and Social Care Moray | Care at Home | 5 |
| | Access Team | 3 |
| Total | | 22 |

Indicator 2 - The number and percentage of complaints at each stage which were closed in full within the set timescales of five and 20 working days

The number of complaints closed in full at stage 1, stage 2 and after escalation within MCHP timescales as % of all stage 1, stage 2 and escalated complaints responded to in full.

There were **22 Complaints closed** on the NHS system Datix during Quarter 4, 2023/24 – breakdown as follows:

Early Resolution/Stage 1 – 3

Investigation/Stage 2 – 19 (3 escalated)

SPSO – 0

There were **16 Complaints closed** on the MC system Lagan during Quarter 4, 2023/24 – breakdown as follows:

Frontline – 8

Investigation – 5

Escalated Investigative – 3

Table 10 – number and percentage of complaints at each stage closed within timescales **(based on complaints closed during Quarter 4, 2023/24)**

| | Frontline/Early Resolution within timescale | Investigation within timescale |
|-----------------------|---|--------------------------------|
| NHS - Datix | 2 out of 3 (66%) | 4 out of 19 (21%) |
| Moray Council - Lagan | 1 out of 8 (14%) | 1 out of 5 (20%) |

Whilst HSCM aim to respond to complaints within timescales this is not always achievable.

Complaints received into Datix are often multi-faceted and include more than one service across NHS Grampian and other sectors, which can impact on response times due to the level of investigation and coordination required.

Indicator 3 - The average time in working days for a full response to complaints at each stage

Table 11 – average time in working days to respond at stage 1, stage 2 and after escalation (based on complaints closed during Quarter 4, 2023/24)

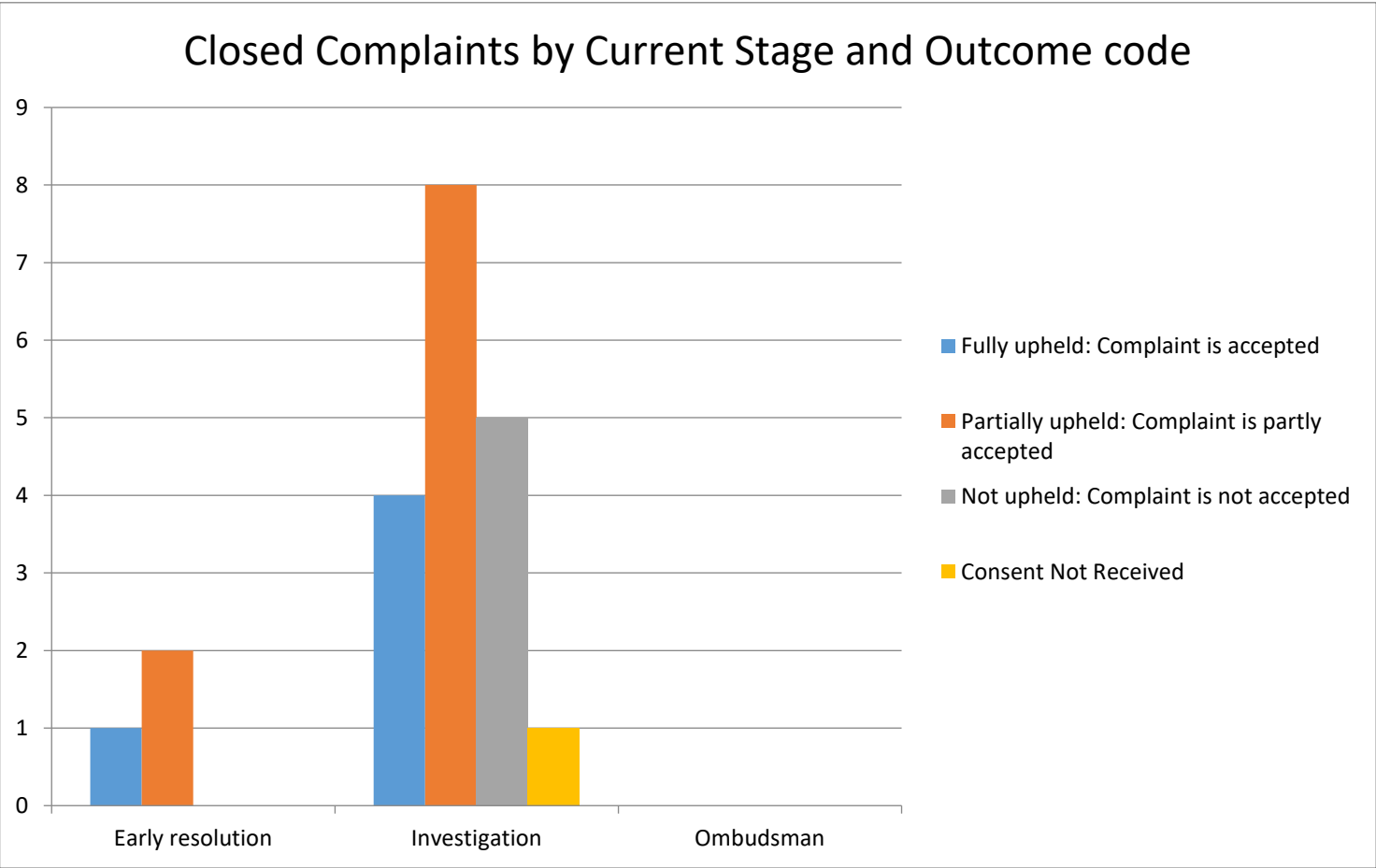
| | Frontline | Investigative (including escalated investigation) |
|-----------------------|-----------|---|
| NHS - Datix | 4 days | 47 days |
| Moray Council - Lagan | 18 days | 36 days |

Indicator 4 - The outcome of complaints at each stage

The number of complaints upheld, partially upheld, not upheld and resolved at stage 1, stage 2 and after escalation as % of all complaints closed at stage 1, stage 2 and after escalation.

Graph 2 below shows the number of complaints fully upheld, partially upheld and not upheld as recorded in Datix during Quarter 4, 2023/24.

22 complaints were closed during Quarter 4: 1 was closed due to no consent and 1 closed as it was a duplicate – from the remaining 20 closed complaints 25% were upheld, 50% were partially upheld and 25% were not upheld.



Complaints Information Extracted from Lagan:

16 complaints were **closed** during Quarter 4, 2023/24: **13% were fully upheld, 56% partially upheld, 31% were not upheld and 0% were resolved.**

Graph 3 below shows the number of complaints upheld, partially upheld and not upheld as recorded in Lagan from the **16 closed** complaints during Quarter 4, 2023/24.

