

Complaints Data (by closed complaints)Quarter 1 (01/04/22 – 30/06/2022)

Indicator 1 - Learning from complaints

Teams and services actively review the outcomes of complaints to see where improvements can be made and learn from the feedback, with a view to reducing the number of complaints in future. The tables 1, 2, 3 and graph 1 below set out the stages the complaints were closed and what the complaint was about and what action taken.

Table 1

Complaints Information Extracted from Datix – Action Taken/Outcome of complaints **closed** during Quarter 1, 2022/23

	Fully upheld: Complaint is accepted	Partially upheld: Complaint is partly accepted	Not upheld: Complaint is not accepted	Total
Access - Improvements made to service access	1	1	0	2
Action plan(s) created and instigated	2	1	0	3
Communication - Improvements in communication staff-staff or staff-patient	4	3	0	7
Education/training of staff	2	0	0	2
No action required	0	0	2	2
System - Changes to systems	1	1	0	2
Share lessons with staff/patient/public	1	1	0	2
Waiting - Review of waiting times	0	1	0	1
Total	11	8	2	*21

**Figure more than total number of closed complaints as there could be multiple actions taken for each complaint*

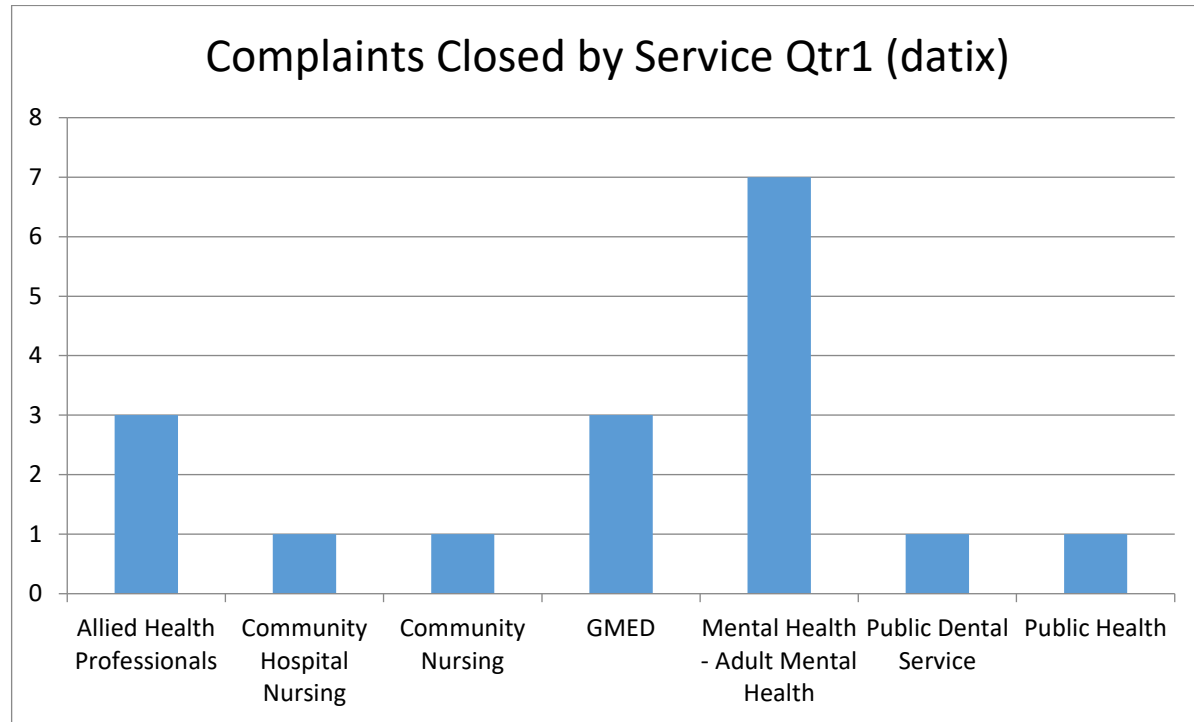
Table 2

Complaints Information Extracted from Lagan:

4 complaints were **closed** during Quarter 1, 2022/23.

Directorate	Department	Service	Upheld	Partially Upheld	Not Upheld	Resolution	Grand Total
Health and Social Care Moray	Health and Social Care Moray	Access Team	0	0	1	0	1
		Care at Home	0	2	0	0	2
		Day Care	0	0	1	0	1

Graph 1



Due to the low numbers it is not possible to detail what the complaint was about as this could lead to patient identifiable information being reported. This information can be discussed in a closed session with committee members.

Table 3

Complaints Information Extracted from Datix – Action Taken by Service (complaints **closed** during Quarter 1, 2022/23)

	Allied Health Professionals	Community Nursing	GMED	Mental Health - Adult Mental Health	Public Dental Service	Total
Access - Improvements made to service access	0	0	0	1	1	2
Action plan(s) created and instigated	1	1	1	0	0	3
Communication - Improvements in communication staff-staff or staff-patient	1	1	2	3	0	7
Education/training of staff	0	1	1	0	0	2
No action required	0	0	0	2	0	2
System - Changes to systems	0	0	1	1	0	2
Share lessons with staff/patient/public	0	0	0	2	0	2
Waiting - Review of waiting times	0	0	1	0	0	1
Total	2	3	6	9	1	*21

**this figure does not represent number of complaints closed*

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.

Actions and Lessons Learned (datix)

Communication	Development session focusing on effective communication between staff, patients, family members and other services
Record Keeping – paper held records and electronic	Learning for staff around dealing with sensitive documentation shared
	Additional training regarding contemporaneous paper held record keeping
	Community Modules issues have been escalated to senior management within the appropriate NHSG IT department.
Infection, Prevention and Control	Staff instructed to undertake further IPC training including donning and doffing
System/Process change	A post-operative discharge advice sheet for vasectomy is being developed.
Education / training / share lessons learned	Additional training and supports have been put in place for an administration team, and are implementing an additional layer of checks for all correspondence that is sent from the Minor Surgery department.
	GMED learning event held to assess sequence of events and how they may be managed differently.
	Training provided to give staff the skills to respond to people presenting or calling in a crisis.

Decision Note / Learning Outcome (lagan)

- Nationwide care crisis impacting on ability to provide care timeously – continue to look at all options
- Acknowledge delay in installing equipment – process delay rectified

Indicator 2 – 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 4 – Total number of complaints **received** in Quarter 1, 2022/23

System recorded	Early Resolution / Frontline	Investigation	Not Marked	Total
NHS - Datix	4 closed at Early Resolution Stage	10 closed 3 currently under investigation	0	17
Moray Council - Lagan	4 marked frontline	2 marked investigative	3 not yet marked	9
Total	8	15	3	26

Table 5 – Allocation of complaints **received** in Quarter 1, 2022/23

NHS Service - Datix	
Public Dental Services	3
Community Hospital Nursing	1
Community Nursing	1
GMED	1
Mental Health – Adult Mental Health	7
Primary Care Contracts	1
AHP	3
Total	17

Table 6 – Allocation of complaints **received** in Quarter 1, 2022/23

MC Service - Lagan	
Moray East	1
Care at Home	5
Access Team	2
Day Care	1
Total	9

Indicator 3 - 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 **17 Complaints closed** on the NHS system Datix during Quarter 1, 2022/23 – breakdown as follows:

Early Resolution – 4 (1 withdrawn by complainant and 1 was a duplicate)

Investigation – 12 (1 consent was not received)

Ombudsman – 1

There were **4 Complaint closed** on the MC system Lagan during Quarter 1, 2022/23 – breakdown as follows:

Frontline – 2

Investigation – 2

Table 7 – number and percentage of complaints at each stage closed within timescales **(based on complaints closed during Quarter 1, 2022/23)**

	Early Resolution with timescale	Investigation within timescale
NHS - Datix	2 out of 2 (100%)	2 out of 11 (18.18%)
Moray Council - Lagan	2 out of 2 (100%)	2 out of 2 (100%)

Whilst HSCM aim to respond to complaints within 20 working days this is not always achievable. Reasons for delay in response include: cross service complaints where coordinating responses from all parties and relevant staff being on annual leave have led to a delay.

Indicator 4 - The average time in working days for a full response to complaints at each stage

Table 8 – average time in working days to respond (based on complaints closed during Quarter 1, 2022/23)

	Frontline	Investigative
NHS - Datix	4 days	46 days
Moray Council - Lagan	2.5 days	11.5 days

HSCM have responded to all frontline/early resolution complaints within timescales for Quarter 1, 2022/23. Investigative complaints received into Lagan have been resolved well within the 20 working day timeframe.

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.

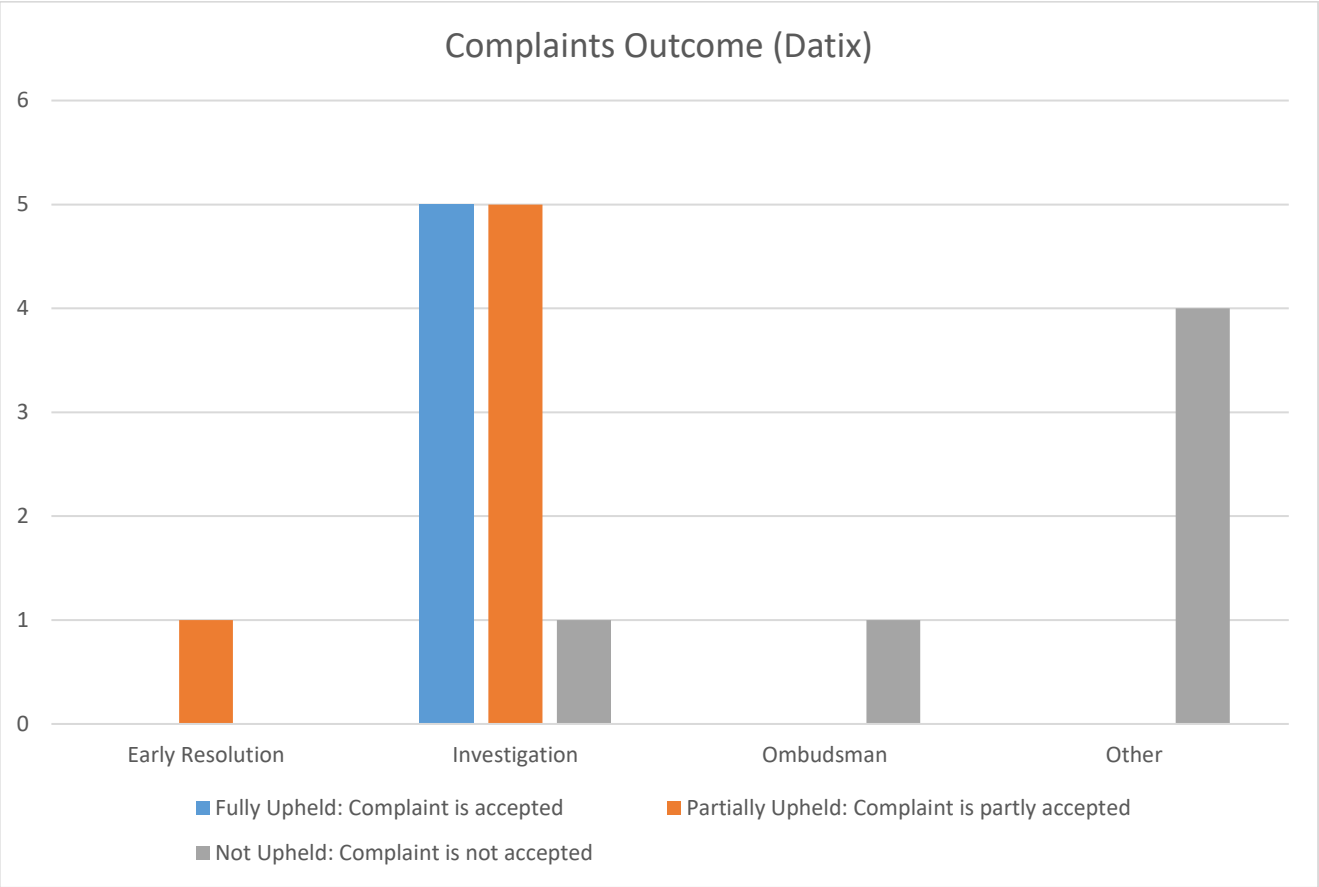
In most cases the HSCM response is uploaded within the timeframe, but due to the complexity and number of services involved the overall completion date does not meet timescales.

Indicator 5 - 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 amount of complaints fully upheld, partially upheld and not upheld as recorded in Datix from the **17 closed** complaints during Quarter 1, 2022/23. (Out of 17 closed complaints on the system 1 was withdrawn by complainant, 1 was a duplicate, 1 consent was not received and 1 was a misunderstanding (that was resolved by telephone) – these are recorded as ‘other’ below.

From the remaining 13 complaints closed during Quarter 1 - approximately 38% of complaints closed during Quarter 1 were upheld, 46% were partially upheld and 15% were not upheld



Complaints Information Extracted from Lagan:

4 complaints were **closed** during Quarter 1, 2022/23: **50% were partially upheld and 50% were not upheld.**

Graph 3 below shows the amount of complaints upheld, partially upheld and not upheld as recorded in Lagan from the **4 closed** complaints during Quarter 1, 2022/23.

