Complaints Data (by closed complaints)

Quarter 4 (01/01/22 - 31/03/2022)

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 4, 2021/22

	Fully upheld: Complaint is accepted	Partially upheld: Complaint is partly accepted	Not upheld: Complaint is not accepted	Total
Access - Improvements made to service access	0	1	0	1
Action plan(s) created and instigated	1	0	0	1
Communication - Improvements in communication staff-staff or staff-patient	3	1	0	4
Conduct issues addressed	1	0	0	1
Education/training of staff	3	0	0	3
No action required	0	0	6	6
System - Changes to systems	0	1	0	1
Share lessons with staff/patient/public	2	0	0	2
Waiting - Review of waiting times	0	1	0	1
Total	10	4	6	*20

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

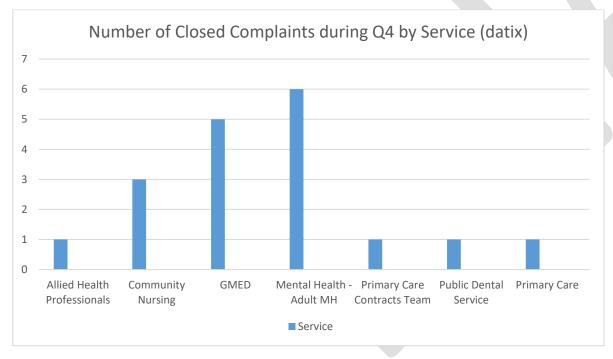
Table 2

Complaints Information Extracted from Lagan:

Four complaints were **closed** during Quarter 4, 2021/22. None were fully upheld.

Directorate	Department	Service	Upheld	Partially Upheld	Not Upheld	Resolution	Grand Total
Education and Social Care	Community Care	Head of Service	0	1	2	0	3
		Mental Health	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 3Complaints Information Extracted from Datix – Action Taken by Service (complaints **closed** during Quarter 4, 2021/22)

	Allied Health Professionals	Community Nursing	GMED	Mental Health - Adult Mental Health	Primary Care Contracts Team	Public Dental Service	Total
Access - Improvements made to service access	0	0	0	0	1	0	1
Communication - Improvements in communication staff-staff or							
staff-patient	1	0	2	1	0	0	4
Conduct issues addressed	0	0	1	0	0	0	1
Education/training of staff	0	1	1	0	0	0	2
No action required	0	0	2	4	0	0	6
System - Changes to systems	0	0	0	1	0	0	1
Share lessons with staff/patient/public	0	0	0	0	0	1	1
Waiting - Review of waiting times	0	0	0	0	1	0	1
Total	1	1	6	6	2	1	*17

^{*}this figure does not represent number of complaints closed

Actions and Lessons Learned

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.

- Communication improvements were highlighted as an action in 7 complaints. Staff are being reminded of the importance of sharing information in a
 timely, appropriate and sensitive manner, and acknowledging and responding to correspondence or information received. All members of staff have been
 reminded of the importance of clear and concise communication between staff, teams and patients. Staff have also been reminded to be mindful of
 language used when communication with patients and their families to ensure no misunderstanding of information or intent is taken.
- Training was identified in 2 cases. This had led to an increased awareness of processes and where and how to access further support.
- A post-operative information sheet is to be developed and implemented through the NHSG governance structures to supplement verbal information. This will include post-operative care, guidance and identifying who to contact for further information/support.

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 4, 2021/22

System recorded	Early Resolution / Frontline	Investigation	Total
NHS - Datix	3 closed at Early Resolution Stage	8 closed	14
		3 currently under investigation	
Moray Council - Lagan	3 marked frontline	0	3
Total	6	11	17

Table 5 – Allocation of complaints <u>received</u> in Quarter 4, 2021/22

NHS Service - Datix	
Public Dental Services	1
Community Nursing	2
GMED	4
Mental Health – Adult Mental Health	5
Primary Care Contracts	1
Primary Care	1
Total	14

Table 6 – Allocation of complaints <u>received</u> in Quarter 4, 2021/22

MC Service - Lagan	
Mental Health	1
Head of Service	2
Total	3

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 **18 Complaints closed** on the NHS system Datix during Quarter 4, 2021/22 – breakdown as follows:

Early Resolution - 3

<u>Investigation</u> – 13 (1 was withdrawn by complainant)

Ombudsman - 2

There were **4 Complaints closed** on the MC system Lagan during Quarter 4, 2021/22 – breakdown as follows:

Frontline - 3

Investigation - 1

Table 7 – number and percentage of complaints at each stage closed within timescales (based on complaints closed during Quarter 4, 2021/22)

	Early Resolution with timescale	Investigation within timescale
NHS - Datix	1 out of 3 (33.3%)	4 out of 12 (33.3%)
Moray Council - Lagan	1 out of 3 (33.3%)	0 out of 1 (0%)

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 4, 2021/22)

	Frontline	Investigative
NHS - Datix	12 days	40 days
Moray Council - Lagan	7 days	33 days

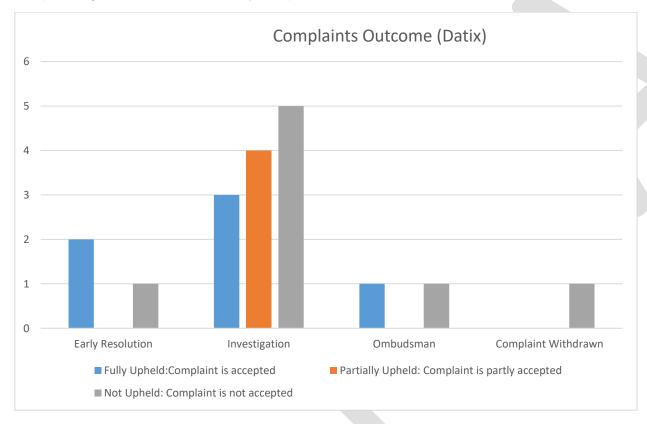
Complaints received into Datix are often multi-faceted and include more than one service across NHS Grampian and other sectors, which can impact on response times due to the level of investigation and coordination required.

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 **18 closed** complaints during Quarter 4, 2021/22. Approximately 35% of complaints closed during Quarter 4 were upheld, 23% were partially upheld and 41% were not upheld (out of 17 closed complaints given 1 was withdrawn by complainant).



Complaints Information Extracted from Lagan:

Four complaints **closed** during Quarter 4, 2021/22: 3 (75%) were not upheld and 1 (25%) was partially upheld.