Publication Report

NHS Complaints Statistics
Scotland 2010/11
Publication date – 25 October 2011

A National Statistics Publication for Scotland
About ISD
Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.
Mission: Better Information, Better Decisions, Better Health
Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics
Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of ‘Official Statistics’. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

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- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
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- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD’s statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the ISD website.
Introduction

Data presented in this publication includes:
- the number of complaints received;
- the time taken to deal with complaints;
- issues raised in complaints;
- staff groups who were the subject of complaints; and,
- the outcome of complaints.

These data are presented for NHS territorial Health Boards (e.g. NHS Fife) and Special Boards (e.g. Scottish Ambulance Service). Family Health Services data within this report is restricted to the volume of complaints received by primary care service providers and is presented on the basis of NHS territorial Health Boards.

Territorial Health Boards submit their complaints data to ISD after the end of each quarter of the financial year. These data are validated by ISD and checked with the boards after submission. The statistics relating to GP and dental services are collated via an aggregated annual return of the total number of complaints made against Family Health Services in the previous financial year. NHS Highland failed to provide an aggregated return for Family Health Services for the third year in succession. It was not considered methodologically sound to continue estimating their number of complaints, therefore no figures for NHS Highland are presented for 2010/11 and this board does not contribute to the overall Scotland Family Health Services total for this year.

It was decided that in 2006/07, all Special Boards, a number of National and Support Organisations and the Scottish Health Council were to submit their complaints data to ISD at the end of each financial year. Below is a list of links to the websites of these organisations if further information is required about them:
- Scottish Ambulance Service
- NHS 24
- Scottish National Blood transfusion Service
- The State Hospital for Scotland
- The National Waiting Times Centre
- NHS Education for Scotland
- NHS Health Scotland
- NHS Quality Improvement Scotland
- NHS National Services Scotland
- Scottish Health Council

At the time of writing, a consultation on proposed secondary legislation to support implementation of the Patient Rights (Scotland) Act 2011 is ongoing. If passed into law, these changes will make Health Boards directly responsible for reporting their complaints statistics on a quarterly and annual basis. Primary Care service providers will also be obliged to set up a complaints process and provide comprehensive quarterly information on complaints received to each territorial Health Board within whose jurisdiction they practice. This is potentially a significant change to the system of complaints reporting. When the outcome of the consultation is known, details of proposed changes to reporting will be made available on the ISD website. Further details the current complaints process and other background information is available in Appendix A.
Key points

Main points for complaints to NHS Boards and their Divisions (excluding the Special Boards), 2010/11:

- After a gradual rise in the number of complaints received about Hospital and Community Services from 1999/00, this figure has been relatively stable in recent years (7,290 in 2007/08, 6,904 in 2008/09, 7,123 in 2009/10 and 7,055 in 2010/11).
- Of the 7,055 complaints made about Hospital & Community Health Services in 2010/11, 5,217 (74%) related to the Hospital acute service group.
- Outpatient care continued to be the most prevalent service area within Hospital & Community Health Services complaints (2,384 (34%) complaints during 2010/11).
- The percentage of complaints acknowledged within the national target timescale of three working days from receipt was 95.8%.
- The percentage of complaints dealt with within the national target of 20 working days was 67.6%. This figure is lower than that achieved in 2009/10 (76.0%), but is consistent with previous years.
- The median time taken to deal with complaints has risen to 19 working days in 2010/11, compared to 17 working days in 2009/10.
- The most prevalent issue raised in 2010/11 complaints was ‘Treatment’ (36%), followed by ‘Staff’ (34%) and ‘Environment/domestic’ (11%). There was no change in the percentage of issues raised concerning waiting times (9% in 2010/11, 9% in 2009/10).
- Complaints about ‘Staff’ issues were most frequently raised in relation to nurses, midwives and health visitors (44%). Overall (across all issues), medical staff were most often the subject of complaints (44%).
- In 2010/11, 28% of complaints were fully upheld, 33% were partially upheld and 37% were not upheld.

Main points for Family Health Services, 2010/11

- The number of complaints about Family Health Services in 2010/11 was 3,233. Dental complaints decreased by 21% in 2010/11 in comparison with 2009/10 but remained comparable to years before 2009/10. Medical complaints continued to rise in 2010/11.
- In 2010/11 84% of Family Health Service complaints related to the medical service area.

Main points for Special Boards, 2010/11

- The total number of complaints relating to the Special Health Boards; National & Support organisations and the Scottish Health Council was 812 in 2010/11.
- A large decrease in the number of complaints to the Scottish Ambulance Service was recorded in 2010/11; 374 complaints were received, compared to 477 in 2009/10 (a 22% decrease).
- Complaints to the Scottish National Blood Transfusion Service remained at a similar level to the previous year (256 in 2010/11, 253 in 2009/10).
- The number of complaints to NHS24 reduced considerably. In 2010/11 there were 71 complaints compared to 112 in 2009/10; a 37% decrease.
- Complaints to the National Waiting Times Centre decreased slightly in 2010/11; 47 complaints were recorded, compared with 55 complaints in 2009/10 (a 15% decrease).
- State Hospital Board for Scotland complaints decreased considerably in 2010/11; 42 complaints were recorded, compared with 66 complaints in 2009/10 (a 36% decrease).
Results and Commentary

Hospital & Community Health Services

Data in the tables is presented at Board level with a further breakdown by Division, if available. Prior to 2004/05 the breakdown by Acute/Family Health Services is shown under each Board.

The statistics presented relate to the number of complaints submitted to ISD. This includes all formal written complaints and in some Boards/organisations, telephone and other formal oral complaints are also recorded in their submission to ISD.

A number of records have been excluded from the statistics. 302 records that were Withdrawn, Transferred to another unit, or Consent not received have been excluded as have 8 records that could not be confirmed as Hospital & Community Health Services.

- After a gradual rise in the number of complaints received about Hospital and Community Services from 1999/00, this figure has been relatively stable in recent years (7,290 in 2007/08, 6,904 in 2008/09, 7,123 in 2009/10 and 7,055 in 2010/11).

Figure 1: Number of Complaints received for Hospital and Community Health Services\(^1,2\), Scotland: 00/01 to 10/11

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1. Hospital & Community Health Services only- excludes Special NHS Boards, National and Support Organisations and the Scottish Health Council.
Response Time

- The percentage of complaints acknowledged within the national target timescale of three working days from receipt was 95.8% (NHS Highland had the lowest percentage of cases meeting this target (87.7%)). In 2009/10, 96.5% of complaints were acknowledged within three days.

- The percentage of complaints dealt with within the national target of 20 working days was 67.6% (NHS Dumfries & Galloway had the lowest percentage of cases meeting this target (47.1%)). This figure is lower than that achieved in 2009/10 (76.0%), but is consistent with previous years. Public holidays have been taken into account when response times were calculated.

Figure 2: Percentage of complaints responded to within 20 working days for Hospital and Community Health Services, Scotland: 06/07 to 10/11

- The median time taken to deal with complaints has risen to 19 working days in 2010/11, compared to 17 working days in 2009/10. The median length of time to deal with complaints was highest in NHS Dumfries & Galloway (22 working days).

1. Hospital & Community Health Services only - excludes Special NHS Boards, National and Support Organisations and the Scottish Health Council.

Hospital & Community Health Services: Number of complaints received and response times, by Health Board: 96/97-10/11
Service Area

- Of the 7,055 complaints made about Hospital & Community Health Services in 2010/11, 5,217 (74%) related to the Hospital acute service group (73% in 2009/10).

- Outpatient care continued to be the most prevalent service area within Hospital & Community Health Services complaints (2,384 (34%) complaints during 2010/11). Of these outpatient complaints, 95% related to the acute service group. There are approximately 4.5m outpatient attendances per year in Scotland.

Figure 3: Number of complaints received by Service Area for Hospital and Community Health Services\textsuperscript{1,2}, Scotland: 06/07 to 10/11

1. Hospital & Community Health Services only- excludes Special NHS Boards, National and Support Organisations and the Scottish Health Council.
2. Maternity, Ambulance, Community Hospitals, Purchasing/Administrative are included under the group ‘Other Services’.

[Graph showing number of complaints by service area for Hospital and Community Health Services from 2006/07 to 2010/11]
Issues Raised

- Seventy per cent of the issues raised in 2010/11 concerned treatment or staff. The most prevalent issue was ‘Treatment’ (36%), followed by ‘Staff’ (34%) and ‘Environment/domestic’ (11%). There was no change in the percentage of issues raised concerning ‘Waiting times’ (9% in 2010/11, 9% in 2009/10).

- Within the ‘Treatment’ issue group, almost all (99%) complaints related to ‘clinical treatment’, while the remainder relating to ‘consent to treatment’ (1%). Within the broader ‘Staff’ issue group, ‘attitude and behaviour’ (53%) and ‘oral communication’ (30%) were the issues most commonly raised.

Figure 4: Summary of all issues raised for Hospital and Community Health Services

1. Community Health Services only- excludes Special NHS Boards, National and Support Organisations and the Scottish Health Council.
2. All issues: some complaints fall into more than one category.

**Hospital & Community Health Services: Number of complaints received by Issue Raised, by Health Board: 96/97-10/11**

**Hospital & Community Health Services: Number of complaints received by Issue Raised, Scotland: 02/03-10/11**
• Complaints about ‘Staff’ issues were most frequently raised in relation to nurses, midwives and health visitors (44%). Overall (across all issues), medical staff were most often the subject of complaints (44%).

**Outcome**

• In 2010/11, 28% of complaints were fully upheld, 33% were partially upheld and 37% were not upheld. There was little change from 2009/10, when these figures were 26%, 35% and 38% respectively.

**Figure 5: Summary of outcome for Hospital and Community Health Services**

1. Community Health Services only- excludes Special NHS Boards, National & support organisations and the Scottish Health Council.
2. Outcome: note that categories for irresolvable and conciliation were introduced from April 2005.
3. The category “Other Outcomes” include: conciliation, irresolvable and outcome not known.
Family Health Services

Three broad service types are included within the Family Health Services complaints procedure - medical services, dental services and complaints regarding Family Health administration. Although information is collected on complaints made about Family Health Services, it was nationally agreed that, as Family Health Services practitioners are independent contractors, it would be less detailed than that collected on hospital and community health service complaints. Complaints relating to pharmaceutical and ophthalmic services are only reported where these lead to requests for independent review (prior to April 2005).

NHS Highland failed to provide an aggregated return for Family Health Services for the third year in succession. Therefore, it was not considered methodologically sound to continue estimating their numbers of complaints. No NHS Highland estimate was calculated for 2010/11 and estimates used in 2008/9 and 2009/10 have been removed from associated data tables. The Scotland figures presented below are therefore different from those published in previous years.

- The number of complaints about Family Health Services in 2010/11 was 3,233. Due to the non-submission of a return from NHS Highland, a year-by-year comparison excluding this Health Board is included in Table 1. This shows that dental complaints decreased by 21% in 2010/11 in comparison with 2009/10 but remained comparable to years before 2009/10. Medical complaints continued to rise in 2010/11.

- In 2010/11 84% of Family Health Service complaints related to the medical service area.

Table 1: Number of Complaints received for Family Health Services by Service Area, Scotland: 08/09 to 10/11

<table>
<thead>
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<th>Total Number of Complaints Received</th>
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<th>2009/10*</th>
<th>2010/11p</th>
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<tr>
<td>Medical</td>
<td>2,467</td>
<td>2,672</td>
<td>2,700</td>
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<tr>
<td>Dental</td>
<td>511</td>
<td>673</td>
<td>533</td>
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<td>Family Health administration</td>
<td>28</td>
<td>1</td>
<td>0</td>
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<td>Family Health Services total</td>
<td>3,006</td>
<td>3,346</td>
<td>3,233</td>
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1. Excludes figures for NHS Highland. Due to non-reporting of Family Health Services data by NHS Highland from 2008/09 onwards, this table excludes years prior to 2008/09 in order to ensure comparability in respect of this cohort.
R. Data revised.
p. Data for 2008/09 is provisional.
Special Boards, National & Support organisations and the Scottish Health Council

- The total number of complaints relating to the Special Health Boards; National & Support organisations and the Scottish Health Council has decreased by 19% from 1,006 in 2009/10 to 812 in 2010/11.

Table 2: Number of Complaints received (Special Boards, National & Support organisations and the Scottish Health Council), Scotland 06/07 to 10/11

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<thead>
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<th>Total Number of Complaints Received</th>
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<th>2008/09</th>
<th>2009/10</th>
<th>2010/11</th>
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<td>307</td>
<td>356</td>
<td>477</td>
<td>374</td>
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<tr>
<td>NHS 24</td>
<td>194</td>
<td>149</td>
<td>109</td>
<td>112</td>
<td>71</td>
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<td>1</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>2</td>
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<td>The State Hospital Board for Scotland</td>
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<td>53</td>
<td>66</td>
<td>42</td>
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<td>The National Waiting Times Centre</td>
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<td>47</td>
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<td>NHS Education for Scotland (NES)</td>
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<td>Scottish Health Council (SHC)</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<td>NHS National Services Scotland (NSS)</td>
<td>37</td>
<td>29</td>
<td>31</td>
<td>31</td>
<td>12</td>
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<td>Scottish National Blood Transfusion Service (SNBTS)</td>
<td>156</td>
<td>197</td>
<td>281</td>
<td>253</td>
<td>256</td>
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<td>Total</td>
<td>869</td>
<td>781</td>
<td>888</td>
<td>1,006</td>
<td>812</td>
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</table>

Scottish Ambulance Service

- A large decrease in the number of complaints to the Scottish Ambulance Service (SAS) was recorded in 2010/11; 374 complaints were received, compared to 477 in 2009/10 (a 22% decrease). Currently in Scotland there are over 2m ambulance transportations per year.
- In 2010/11, 94.9% of complaints received by SAS were acknowledged within three working days and 70.3% responded to within 20 working days (these figures were 92.5% and 45.1% respectively in 2009/10).
- In 2010/11, the most prevalent issues complained about in relation to SAS were ‘Transport’ (62%) and ‘Staff’ (26%).

[ Hospital & Community Health Services: Number of complaints received and response times, by Health Board: 96/97-10/11](#)
[ Hospital & Community Health Services: Number of complaints received by Issue Raised, by Health Board: 96/97-10/11](#)
[ Hospital & Community Health Services: Number of complaints received by Outcome, by Health Board: 96/97-10/11](#)
The Scottish National Blood Transfusion Service (SNBTS) - Donor complaints

- Complaints to the Scottish National Blood Transfusion Service (SNBTS) remained at a similar level to the previous year (256 in 2010/11, 253 in 2009/10). Around 300,000 donors attend blood donation sessions in a single year, equating to a complaint incidence of only 0.08% of attendances.
- Data on the time taken to acknowledge complaints to SNBTS were not available. The percentage dealt with within 20 working days increased to 93.4% (87.4% in 2009/10).
- While complaints about ‘opportunity to donate’ and ‘donor communications’ decreased considerably, large increases in complaints about ‘donor selection, health and safety’ (increasing to 52 in 2010/11 from 33 in 2009/10) and ‘bruising and other discomfort’ (increasing to 27 in 2010/11 from 12 in 2009/10) were observed.

SNBTS: Number of complaints received by Type: 96/97-10/11

NHS 24

- The number of complaints to NHS 24 reduced considerably. In 2010/11 there were 71 complaints compared to 112 in 2010/11; a 37% decrease.
- 100% of complaints received by NHS 24 were acknowledged within three working days and responded to within 20 working days (both figures were also 100% in 2009/10).
- The most prevalent complaints issues for NHS 24 were ‘inappropriate outcome/referral/advice’ (31%) and ‘Expectations of service’ (30%).

NHS24: Number of complaints received by Issue: 03/04-10/11

The National Waiting Times Centre

- The number of complaints to the National Waiting Times Centre decreased slightly in 2010/11; 47 complaints were recorded, compared with 55 complaints in 2009/10 (a 15% decrease).
- In 2010/11, 100% of complaints received by the National Waiting Times Centre were acknowledged within three working days and 80.9% responded to within 20 working days (these figures were 98.2% and 85.5% respectively in 2009/10).
- In 2010/11, the most prevalent issues complained about in relation to the National Waiting Times Centre were ‘Staff’ (44%) and ‘Treatment’ (35%).

Hospital & Community Health Services: Number of complaints received and response times, by Health Board: 96/97-10/11

Hospital & Community Health Services: Number of complaints received by Issue Raised, by Health Board: 96/97-10/11

Hospital & Community Health Services: Number of complaints received by Outcome, by Health Board: 96/97-10/11
The State Hospital Board for Scotland

- The number of complaints to the State Hospital Board for Scotland decreased considerably in 2010/11; 42 complaints were recorded, compared with 66 complaints in 2009/10 (a 36% decrease).
- In 2010/11, 100% of complaints received by the State Hospital Board for Scotland were acknowledged within three working days and 90.5% responded to within 20 working days (these figures were 100% and 92.4% respectively in 2009/10).
- In 2010/11, the most prevalent issues complained about in relation to the State Hospital Board for Scotland were ‘Environment/domestic’ (52%) and ‘Staff’ (25%).

- Hospital & Community Health Services: Number of complaints received and response times, by Health Board: 96/97-10/11
- Hospital & Community Health Services: Number of complaints received by Issue Raised, by Health Board: 96/97-10/11
- Hospital & Community Health Services: Number of complaints received by Outcome, by Health Board: 96/97-10/11
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Contact

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Further Information
Further information can be found on the ISD website

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Appendix

A1 – Background Information

The NHS Complaints system can be a powerful driver for change, both for individual complainants and for the wider NHS. It is the key feedback mechanism for patients and epitomises the culture of person-centredness, reflective learning and quality improvement which is a cornerstone of the Healthcare Quality Strategy for NHS Scotland.

The NHS complaints procedure was introduced in April 1996, with a subsequent revision in April 2005 - with the purpose of providing a simple, flexible, impartial and easily accessible system for the public as well as being fair to NHS practitioners and staff.

Complaints about the NHS are a valuable way of identifying issues and areas in need of change within the service. Acknowledging these issues and taking steps to rectify associated problems is vital in creating an open and honest NHS. In order to make a complaints management process truly effective, front-line staff, managers and executive officers need to have defined responsibilities in relation to promoting feedback from patients and to take ownership of complaints when they arise. It is crucial that complaints intelligence drives the search for improvement in the organisation and does not act as a mechanism for apportioning blame.

Current Complaints Procedure

There is a wide variation in the type of contacts that patients have with the NHS (e.g. treatment as an inpatient, outpatient, attendance at A&E, blood donation and transportation by ambulance) and patients (or their representatives) can make a complaint if they feel dissatisfied with any aspect of these interactions.

Each Health Board within NHS Scotland employs staff whose role is to receive complaints from members of the public and to register the decisions made and actions undertaken in relation to them. Revisions to the complaints process in 2005 were intended to remove some of the barriers which may have stopped some people complaining about the NHS in previous years. Key changes were:

- The independent review stage was removed from the procedure in 2005 to enable a faster process and to allow the introduction of independent scrutiny at an earlier point. Data on requests for independent review up to 2004/05 can be found here: Number and status of requests for Independent Review, Scotland: 96/97-04/05
- If a complaint was being made regarding a General Practitioner (GP), then the complainant was advised to contact the NHS Board Complaints Officer, or go to the Independent Advice and Support Service (supported by Citizens Advice Bureaux across Scotland) instead of initially contacting their GP.
- Any individual who could not get a complaint resolved on a local level was advised to access the Scottish Public Service Ombudsman’s Office.

Prior to review, an evaluation of the NHS Complaints Procedure was carried out. This was a thorough UK-wide project led by the Department of Health in England with a Scottish Advisory Group of complaints personnel and patients' representatives set up to oversee the Scottish evaluation. The evaluation report has been published and can be found at the Scottish Government website: www.scotland.gov.uk/library3/health/nhscomplaints.pdf
The Scottish Perspective pre-consultation document can also be found on the Scottish Executive website at:

Further details on the current Complaints Procedure can be found at:
"Can I help you? Learning from comments, concerns and complaints"

Scottish Public Services Ombudsman
If a complainant remains dissatisfied with the response from the normal complaint process, there is recourse to the Scottish Public Services Ombudsman who provides a 'one-stop-shop' for individuals making complaints about organisations providing public services in Scotland (www.spso.org.uk).

Independent Advice and Support Service (IASS)
Citizens Advice Bureaux across Scotland are now funded by local NHS Boards to deliver the Independent Advice and Support Service (IASS). IASS aims to support patients, their carers and relatives in their dealings with the NHS and in other matters affecting their health (www.cas.org.uk/Projects/iass-healthcare-concerns)

Complaints data and ISD
NHS Boards and other NHS organisations submit summary information about complaints they receive to ISD Scotland. The data covers complaints received by Hospital & Community Services and Family Health Services. The data submitted to ISD includes all formal written complaints.

Until recently, in NHS organisations across Scotland, there was a lack of consistency in the application of codes to record complaints made against an NHS service. Each Complaints Office follows general guidance about complaint recording within the NHS, but may also use their own local set of categories to register the details, or have their own interpretation of how to complete the dataset.

To help address these issues, ISD built an NHS Complaints system containing revised codes and detailed definitions and subsequently rolled out these definitions and codes nationally to ensure consistency in recording practices from Board to Board within NHS Scotland. Implementation of this new dataset for Hospital & Community Services commenced mid-way through 2008. Prior to the 2008/9 report, new codes were mapped to ensure consistency in reporting and, despite some data submission difficulties, data were received and reported against as normal. Further details of this change are available on the ISD webpage: Current Complaints Procedure.
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<td>Each year since 1996</td>
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<tr>
<td>Revisions statement</td>
<td>This publication is updated each year but is not subject to planned revisions. However, an unplanned revision was made prior to this (2010/11) release: Due to non-submission of Family Health Services data from 2008/09 onwards a decision has been made to remove NHS Highland estimates for 2008/09 and 2009/10 from data tables and analysis in order to ensure these figures are methodologically sound. This means that Scotland level Family Health Services totals are different from those published in previous years.</td>
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<tr>
<td>Revisions relevant to this</td>
<td>As above.</td>
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<td>publication</td>
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<tr>
<td>Concepts and definitions</td>
<td>See <a href="#">Definitions Document</a> published on Website</td>
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<td>Relevance and key uses of</td>
<td>National performance and benchmarking.</td>
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<td>the statistics</td>
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<td>Accuracy</td>
<td>Quality assurance of data by NHS Boards and ISD</td>
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<td>Completeness</td>
<td>99.5% as some records remain still open</td>
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<tr>
<td>Comparability</td>
<td>A new dataset was introduced in 2008. The new codes in this dataset could be mapped onto older codes making data comparable.</td>
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<tr>
<td>Accessibility</td>
<td>It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a>.</td>
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<tr>
<td>Coherence and clarity</td>
<td>Measures to enhance coherence and clarity within this report include: explanatory chart/table notes, minimal use of abbreviations/abbreviations explained in text, comprehensive notes on background and methodology.</td>
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<td>Number and percentage of complaints</td>
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<td>Disclosure</td>
<td>The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.</td>
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<td>Official Statistics designation</td>
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<td>UK Statistics Authority Assessment</td>
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<td>Last published</td>
<td>27 September 2010</td>
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<tr>
<td>Next published</td>
<td>To be confirmed</td>
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<td>Date of first publication</td>
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<tr>
<td>Help email</td>
<td><a href="mailto:leebarnsdale@nhs.net">leebarnsdale@nhs.net</a></td>
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<td>Date form completed</td>
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A3 – Early Access details (including Pre-Release Access)

**Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

**Standard Pre-Release Access:**

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

**Extended Pre-Release Access**

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

- Scottish Government Health Department (Analytical Services Division)