

NHS WESTERN ISLES BOARD MEETING

Meeting date:	26 th June 2025

Item: 7.3

Title: Complaints Summary Q4 Report

Responsible Executive/Non-Executive: Debbie Bozkurt, Director of Finance &

Procurement

Report Author: Roddy MacKay, Complaints Officer

1 Purpose

Please select one item in each section

This is presented to Committee Members for:

Assurance	
Awareness	
Decision	
Discussion	Χ

This report relates to a:

Annual Operating / Delivery Plan	
Emerging issue	
Government policy/directive	
Legal requirement	Χ
Local policy	
NHS Board / Integration Joint	
Board Strategy or Direction	

This aligns to the following NHSScotland quality ambition(s):

Safe	
Effective	Χ
Person Centred	

Please select the level of assurance you feel this report provides to the Board / Committee and briefly explain why:

Significant	Х
Moderate	
Limited	
None	
Not yet assessed	
Comment	
Specify:	
The report is presented to assure members that all complaints received are inve	estigated
in a timely manner.	

Please indicate which of the Boards Priorities the paper relates to:

Financial Sustainability / Recovery Plan	
Capital	
Hospital Based Services Model – Rural General Hospital / Community	
Workforce Health & Wellbeing	
Health Inequalities	
Sustainability of Community Health & Social Care Model	
Primary Care Transformation Programme	
Digital Transformation / Digital Health	
Public Protection Priorities	
Women and Children's Services	
Climate Emergency and Sustainability	
Other – please explain	Χ
Comments:	
The Complaints report is presented to assure members that all complaints recei	ved are
investigated in a timely manner.	

The report is directly linked to a Recovery Driver(s) within the Annual Delivery Plan:

RD01	Primary & Community Care - Improved access to primary and community care to enable earlier intervention and more care to be delivered in the community.	
RD02	Urgent & Unscheduled Care – Access to urgent and unscheduled care, including scaling of integrated frailty services to reduce admissions to hospital.	
RD03	Mental Health - Improve the delivery of mental health support and services, reflecting key priorities set out in the Mental Health and Wellbeing Strategy.	
RD04	Planned Care - Recovering and improving the delivery of planned care.	
RD05	Cancer Care - Delivering the National Cancer Action Plan (Spring 2023-2026).	
RD06	Health Inequalities and Population Health - Enhance planning and delivery of the approach to tackling health inequalities and improving population health.	
RD07	Women and Children's Health - Take forward the actions in the Women's Health Plan and support good child and maternal health, so that all children in Scotland can have the best possible start in life.	
RD08	Workforce - Implementation of the Workforce Strategy.	
RD09	Digital Services Innovation Adoption - Optimise use of digital & data technologies in the design and delivery of health and care services for improved patient access and fast track the national adoption of proven innovations which could have a transformative impact on efficient and patient outcomes.	
RD10	Climate - Climate Emergency and Environment.	
RD11	Finance & Sustainability – Approach to achieving financial balance and aligning with S&V financial improvement programme of work.	
RD12	Value Based Health & Care – Approach to embracing and adopting Value Based Health and Care.	
RD13	Integration & population Need – Boards are asked to set out the key actions to respond to population needs and how you will work in partnership to address and respond to these needs.	
RD14	Regional & National – Approach to working regionally and nationally across services through collective and collaborative approaches to planning and delivery, where required.	
	None of the above	Х

This aligns to the following NHS Western Isles Corporate Objective(s):

CO1	To provide person-centred care, focusing on the evidence based health needs of our increasingly diverse population, identifying and taking every opportunity to improve out patients' health, experience and outcomes	
CO2	To protect individuals from avoidable harm to continually assessing and managing risk, learning, and improving the reliability and safety in everything we do.	х
CO3	To champion efficiency and effectiveness in our services that delivers minimum possible waiting times.	
CO4	To pro-actively stimulate and intensify our research and application of effective innovation to improve how we care for patients today and into the future.	
CO5	To promote and support people to live longer healthier lives	
CO6	To specifically target early years, health inequalities, vulnerable and underrepresented and more difficult to engage with groups.	
CO7	To continually improve and modernise our integrated healthcare services and assurance systems.	
CO8	To value, support the wellbeing of, and develop and sustain a compassionate, confident, competent, flexible and responsive workforce.	
CO9	To deliver our commitment to partnership working to deliver national standards, targets and guarantees.	
CO10	To have a sustained focus on prevention, anticipation, support self-management and care at home.	
CO11	To ensure that all resources are deployed to the best effect, achieving desired outcomes, values for money and progressive approach to sustainability.	

2 Report summary

2.1 Situation

The Q2 complaints summary reports is presented for discussion by the committee.

2.2 Background

To inform members of the Finance, Performance and Resources Committee of the complaints handling performance for **Quarter 4** of **2024/2025**. Also referrals to and investigations undertaken by the SPSO during this period.

20 complaints were received in Q4, 4 were dealt with as Stage 1 complaint and 16 investigated as Stage 2 complaints, by NHS Western Isles.

A **Stage 1** complaint is known as early resolution and will be resolved in 5 working days. It is for issues that are straightforward and easily resolved, requiring little or no investigation.

A **Stage 2** complaint is for Investigation and will be resolved in **20** working days, where possible. This is for issues that have not been resolved at the early resolution stage or that are complex, serious or "high risk".

	Q1	Q2	Q3	Q4	Total
Total Number of complaints received	15	28	14	20	77
Total Number of complaints- Stage 1	1	5	1	4	11
Total Number of complaints- Stage 2	14	23	13	16	66

Out of the total investigated, the main issues raised during this period relate to Clinical Treatment (19), Staff Attitude (2) and Behaviour Communication Oral (2). The staff group which received the highest number of complaints during the period was Consultants / Doctors (17) and Nurses (5).

Of the twenty complaints received four were fully upheld, six were partially upheld, and eight were not upheld. One Complaint was withdrawn and for one we did not receive written consent to carry out the investigation.

2.3 Assessment

Provide analysis of the situation and considerations. Assess the current position, identifying any organisational risks, stakeholder considerations and evidence base to help inform decision making.

2.3.1 Quality/ Patient Care

Describe any positive and negative impact on quality of care (and services).

 Complaints received can have a negative impact on the quality of care however, learning from these complaints can have a positive impact on the quality of care.

2.3.2 Workforce

Describe any positive and negative impact on staff including resources, staff health and wellbeing.

 Complaints received can have a negative impact on staff however, learning from these complaints can have a positive impact on staff.

2.3.3 Financial

Describe the financial impact (capital, revenue and efficiencies) and how this will be managed.

• The handling of complaints does not have any direct correlation with finance.

Name – Director of Finance / Finance Manager	Signature
Debbie Bozkurt	030-1
Comment from the Director of F	inance / Finance Manager
N/A	

2.3.4 Risk Assessment/Management

Describe relevant risk assessment/mitigations.

The handling of complaints does not have any direct correlation with risk.

2.3.5 Equality and Diversity, including health inequalities

State how this supports the Public Sector Equality Duty, Fairer Scotland Duty, and the Board's Equalities Outcomes.

 An impact assessment has not been completed because it is not required in this instance.

2.3.6 Climate Emergency and Sustainability Development

State how this report will support or impact on the Scottish Government's policy on Global Climate Emergency and Sustainability Development DL(2021)38, against the 5 themes:

• There are no relevant impacts on the Scottish Government's policy.

1	Sustainable Buildings & Land
2 Sustainable Travel	
3	Sustainable Goods and Services
4	Sustainable Care
5 Sustainable Communities	
Desc	cribe other relevant impacts:
1	

2.3.7 Other impacts

Describe other relevant impacts.

• There are no other relevant impacts.

2.3.8 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate:

State how his has been carried out and note any meetings that have taken place.

This report does not engage with external stakeholder.

2.3.9 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

This report is only presented to the Finance, Performance and Resource Committee.

2.4 Recommendation

State the action being requested. Use one of the following directions for the meeting. No other terminology should be used.

• **Discussion** – Examine and consider the implications of a matter.

3 List of appendices

The following appendices are included with this report:

Item 7.3.1 Complaints Summary Q4

END