

Update on performance of the Dental Complaints Service

Purpose of paper	To report on the performance of the Dental Complaints Service (DCS) for quarter 4 (Q4), 2018
Action	For noting
Corporate Strategy 2016-19	Patients: Objective 4 – To direct patients who have concerns to the most appropriate organisation, so that problems can be resolved quickly, fairly and cost effectively. .
Business Plan 2017	Continue to raise awareness of the service and drive down the number and age of complaints.
Decision Trail	This report was discussed by the Senior Leadership Team on 12 February 2019.
Next stage	Not applicable.
Recommendations	The Council is asked to note the paper.
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Appendices	None

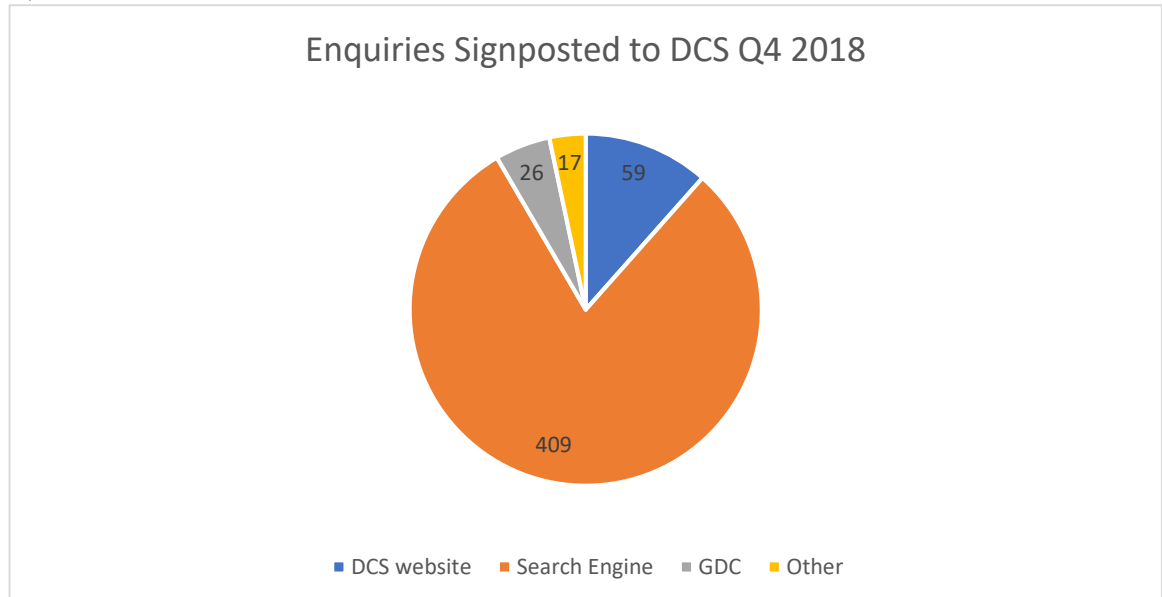
1. Executive summary

- 1.1. This paper summarises the performance of the service in Quarter 4 2018, as well as providing information about the current status of DCS, the challenges faced and how these are being addressed. The team have been embedding and strengthening in performance following the new organisation structure which came into effect in June 2018, whilst maintaining service standards over the period.
- 1.2. Stakeholders have recognised the improvements in performance delivered in 2018, including the demonstration of clear demarcation lines between DCS and FtP functions and the significant reduction in referrals to FtP.
- 1.3. To move the service forward further, the DCS review phase 2 aims to deliver a fit-for-purpose strategically aligned service for patients and professionals, offering patients and professionals value for money by utilising the capacity of DCS staff in the most effective and efficient manner as part of the broader efforts to develop a system wide model for the handling of complaints

2. Analysis of Performance

Incoming enquiries

- 2.1. The DCS record data for all initial enquiries and complaints. During Q4, 511 enquiries were received, 97% of these enquiries were responded to within 2 days.
- 2.2. The following diagram details how the main enquiries were signposted to DCS in Q4



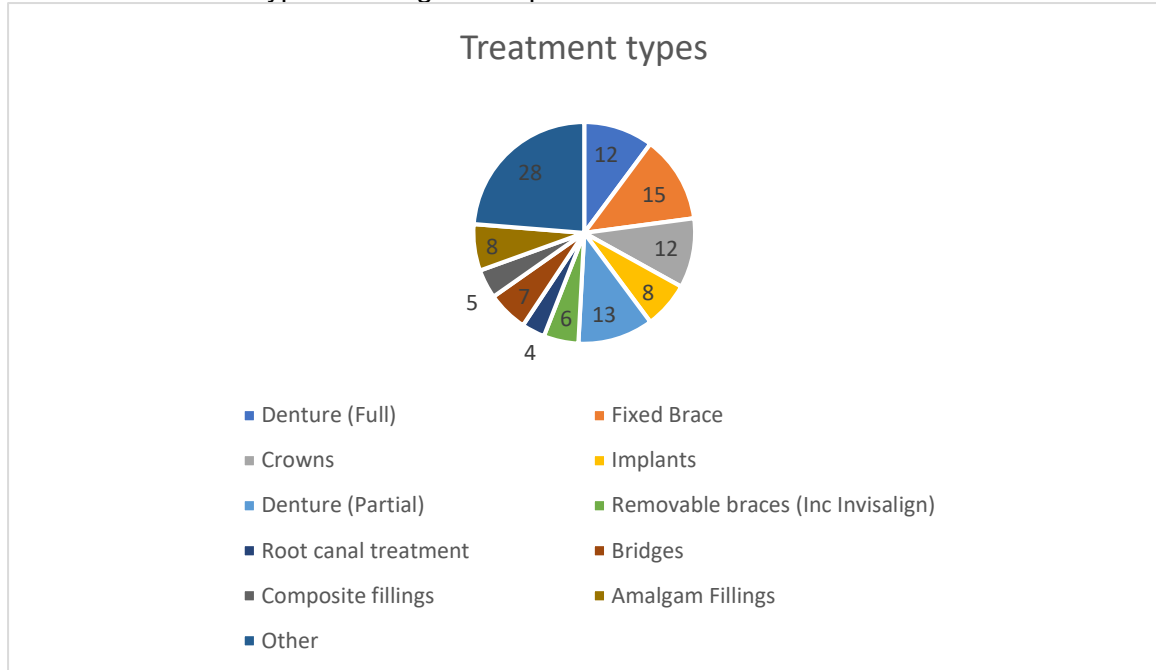
- 2.3. Of the 511 enquires logged in Q4, 118 cases were opened, the remainder being sign posted to their dental professional and if appropriate to the relevant organisation which enables the patient to resolve their concerns appropriately (Care Quality Commission, NHS Health Boards, Oral Health Foundation, Citizen Advice Bureau and other public bodies). Of those cases raised within the DCS remit the complaints related to:

Complaint issues

2.4. The most common issues raised in Q4 by complainants were a perceived failure of treatment (78%) other causes include, inappropriate treatment (2%) or the treatment not being consistent with the treatment plan (3%).

Treatment types

2.5. Main treatment types relating to complaints raised:



2.6 During Q4 there were 15 complaints regarding fixed braces, 6 regarding removable braces which include, invisalign, six month smile, imaligners and other brands. 95% (113) of the complaints raised related to the more costly forms of treatment such as dentures, braces, bridges, crowns and implants.

As requested in December 2018 the breakdown for the specific components of implants has been incorporated into our CRM system and will be reported on at the end of Q1.

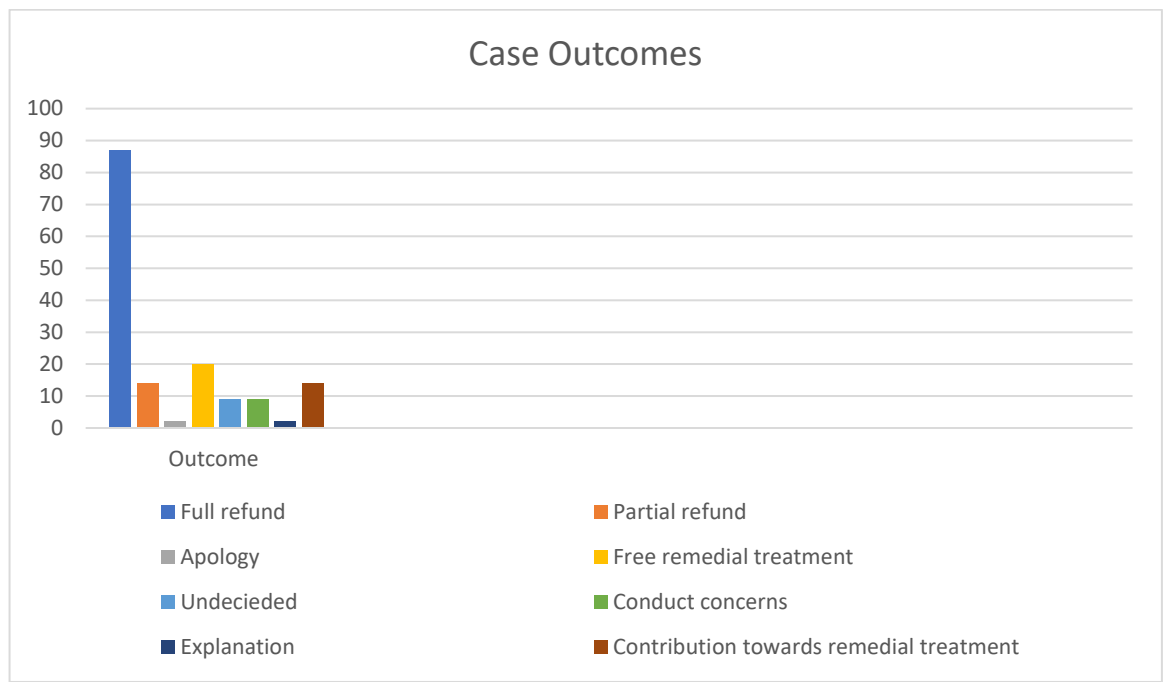
Geography of complaints

2.7 The below table details the geographic region that private complaints arose from during 2018. London was consistently the highest region that generates complaints.

Registered Country Region	2018 Q1	2018 Q2	2018 Q3	2018 Q4
London	20	21	30	26
South East	14	10	10	15
East of England	9	14	10	5
Scotland	6	6	14	4
North West	10	5	10	2
Yorkshire & Humberside	3	5	10	3
South West	5	4	3	8
West Midlands	6	2	5	2
East Midlands	5	2	2	4
Wales	3	4	3	3
Null	7	1	1	1
North East	1	2	2	3
Northern Ireland	1	2	1	1
Channel Islands	1	1	1	

Outcomes

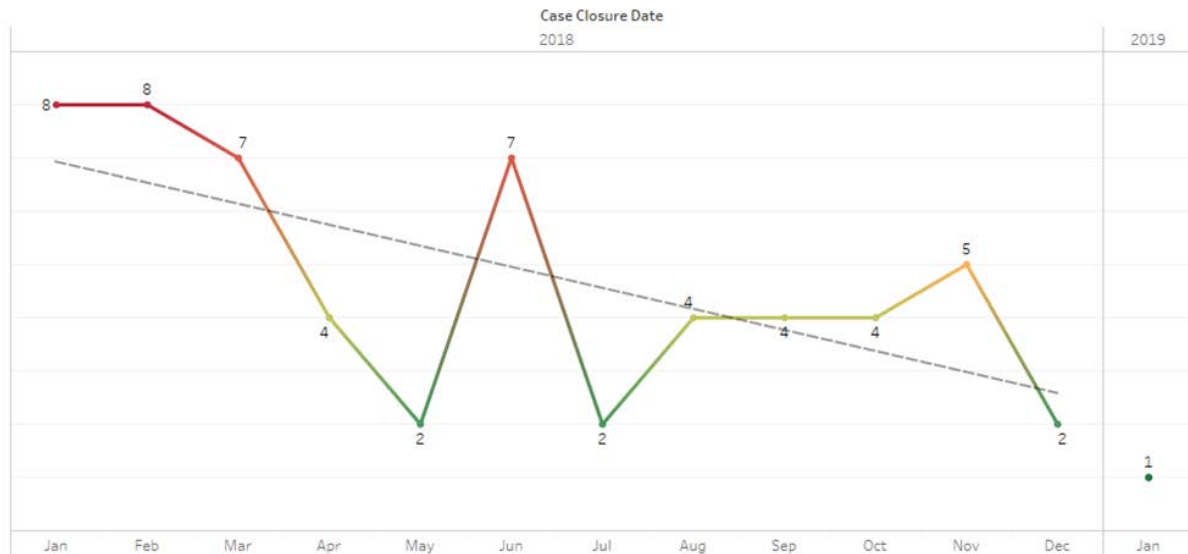
- 2.6. In Q4 2018, the outcomes relating to the 142 concluded cases are detailed in the table below. 92% of all cases were resolved within 3 months during Q4 a 4% improvement on Q3. We continue to resolve the overwhelming majority of cases we open, demonstrating the on-going interest in and value of the current service.
- 2.7. The most common outcome is to obtain a refund to enable the patient to have their treatment completed by another dental professional. 61% of the resolved cases were resolved following a full refund by the dental professional. During Q4 this amounted to £74,736 from the £81,233 initially requested. In line with the DCS remit patients cannot request a refund unless they are having remedial treatment, as this would put them in profit and be classed as compensation.



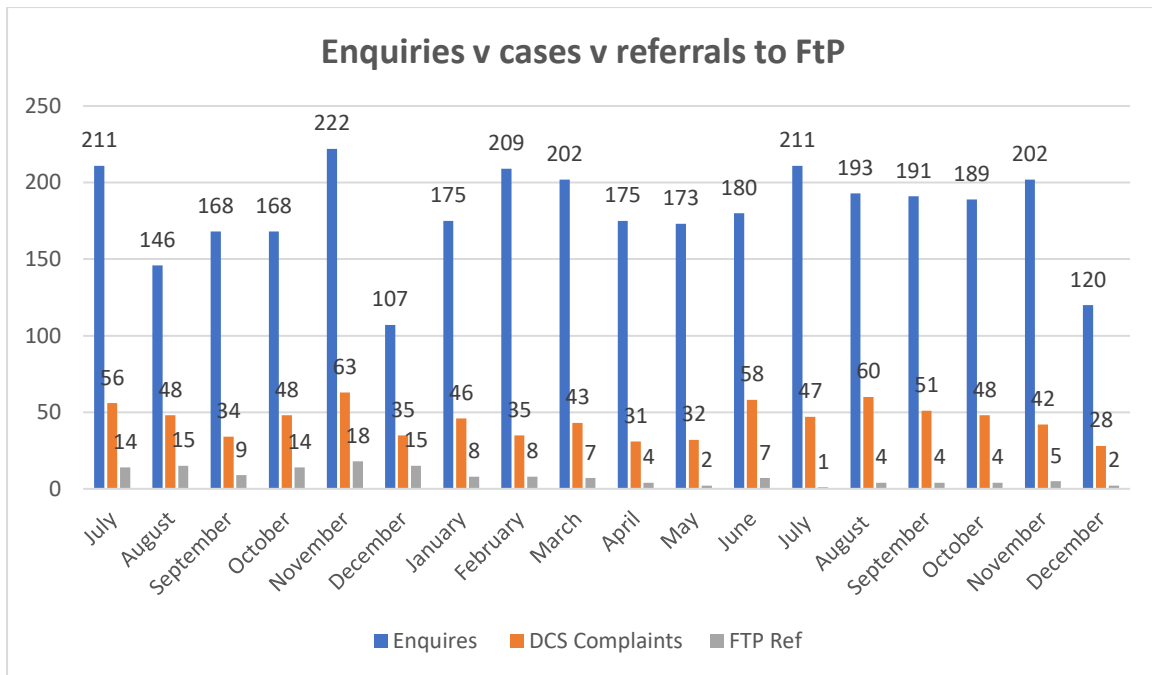
Note: Patients can raise more than 1 complaint/issue and outcome for each aspect of the complaint.

The relationship with FtP

- 2.8. Incoming complaints are assessed against the DCS remit and FTP referral Principles which were introduced on 1 March 2018 as part of the DCS review project. If the complaint does not fall within the DCS remit and DCS are unable to assist, the patient is referred to the appropriate organisation, this includes: NHS England, ICO, CQC, FTP or they are advised to seek independent legal advice.
- 2.9. All enquiries that either fall within the DCS remit or raise FTP concerns in-line with the FTP principles, are logged and processed as cases. During 2018 there were a total of 57 FTP referrals in comparison to 187 during 2017.



- 2.10. The new DCS to FTP referral principles were introduced in March. Following the implementation of the new principles the referrals to FTP have dropped significantly to 2.15% in Q4. The average for 2017 was 30.8%
- 2.11. A comparison between the enquiries, cases logged, and the number of referrals made to FTP have been detailed below in figure 4. To ensure that DCS refer cases appropriately a log is kept of cases where the patient advises that they would like the dentists conduct investigated and they are guided through the GDC triage process. Once logged cases can run concurrently between FTP and DCS. To date there have been 11 cases running concurrently since its inception in March.



DCS enquiries v complaints v referrals to FtP in the last 18 Months

Illegal Practice

- 2.12. No referrals were made from DCS to the Illegal Practice team during Q4.
- 2.13. DCS will continue to use the Scope of Practice document to determine if a referral is required to illegal practice.

Performance

- 2.14. The number of cases concluded by DCS in Q4 are set out below in figure 6. The average resolution time has dropped to 40 days at the end of Q4. This is an improvement of 6 days in comparison to Q3.

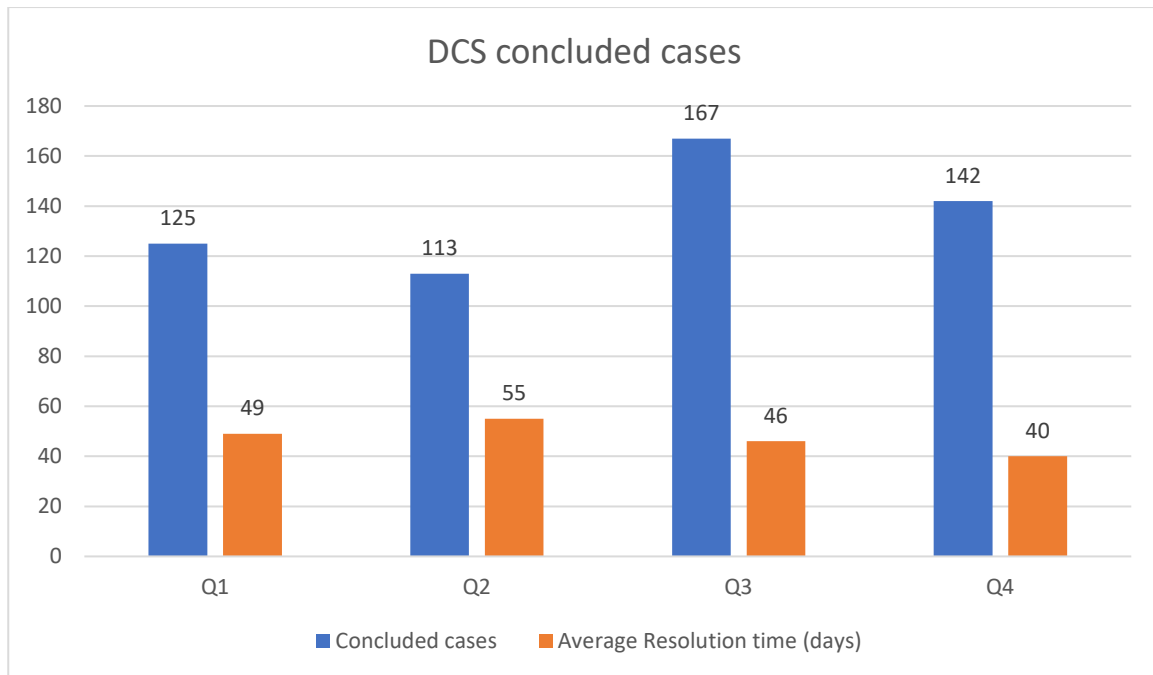


Figure 6. DCS concluded cases for Q3 2018

- 2.15. Concluded cases are complaints that have closed at either of the four operational stages.
- 2.16. When cases are closed, feedback forms are sent to both the patient and Dental Professional to obtain feedback on the service that they have received. In Q3, 2018, the overall level of customer satisfaction shows 100% of respondents found the service they received good or excellent. This has dropped to 93% in Q4 following 1 response whereby the patient was unhappy with the scope of DCS' remit. All feedback is fed back into the DCS Review to enable the DCS to fulfil its objectives where possible.
- 2.17. DCS are currently investigating other ways of obtaining feedback from Dental Professionals as the return rate remains relatively low. This will enable us to gain a clear understanding of the Dental Professional's experience of the service and see where we can improve. This work will commence in February 2019 with the engagement of the British Dental Association and the endorsement of the 3 main indemnifiers.

NHS Complaints signposting

- 2.18. Following signposting to the NHS by DCS feedback is sought as to the outcome of complaints resolution within the NHS. 24 Automated feedback requests were sent by DCS during Q4. With only 1 response (4%) feedback during this period was very low. The respondent advised their complaint was partly resolved by the dental professional.

DCS Review Phase 2

- 2.19. Following the operational improvements made as part of the DCS Review Phase 1 Phase 2 of the DCS review commenced on 1 September following the initial project board meeting on 16 August. This phase of the review aims to deliver a fit-for-purpose strategically aligned service for patients and professionals, offering patients

and professionals value for money by utilising the capacity of DCS staff in the most effective and efficient manner. It will contain three key deliverables:

- 2.19.1. The optimisation of the current DCS model within its existing jurisdiction;
- 2.19.2. A review and feasibility assessment of alternative models (i.e. who could fund and deliver the service), identifying a preferred model; and
- 2.19.3. A service rebrand and launch based on the selected alternative model (if appropriate).

3. Recommendations

- 3.1. Council is asked to **note and discuss** the performance of DCS in Q4 2018