

April 2022

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Our findings

Complaints

This month we:

- published 13 decision reports available [here](#)
- upheld seven complaints in full or part
- made 23 recommendations for learning and improvement.

Decision reports: learning points

This month we are publishing two cases that highlight the importance of carrying out full clinical assessments:

- [202003211](#) – we found that a health board failed to carry out a neurological examination or give consideration to performing an x-ray on the spine of a patient who present to A&E with a possible spinal fracture. The patient suffered a controlled fall following admission to hospital and it was later confirmed that they had a fractured vertebra. However, it was not possible to say with any certainty that this incident had caused the spinal fracture.

We found that the Board failed to complete a Datix record following the fall and were unable to provide evidence that this had been done retrospectively.

We asked the Board to apologise to the patient's family and ensure that neurological assessments are performed as part of baseline medical

examinations on patients who present to A&E with new onset back pain.

- [201906667](#) – we found that a health board failed to fully consider the possibility that a patient had suffered a stroke before discharging them. The patient had attended hospital for a gastroenterology procedure and upon waking, reported experiencing painful tingling sensations in their mouth, hand and foot. They were assessed but later discharged. Following readmission to hospital, a CT scan confirmed that they had suffered a stroke. While staff had carried out an assessment, this was insufficiently detailed and further investigation from a neurologist should have been arranged.

We asked the Board to apologise to the patient and for staff involved to reflect on this case and give consideration as to where improvements could be made in their practice to ensure that symptoms of stroke are adequately investigated as soon as possible and input from stroke specialists is obtained in clinically appropriate cases.

Scottish Welfare Fund reviews

Statistics

During March we:

- responded to 195 enquiries
- made 150 decisions
 - 11 community care grants
 - 67 crisis grants
 - 72 self-isolation support grants
- upheld five (45%) community care grants, 13 (19%) crisis grants and 28 (39%) self-isolation support grants
- referred 11 self-isolation support grants back to the council to reconsider their decision. In most cases this was because we gathered data from Test and Protect that was not available to councils when they considered the applications
- signposted an additional 102 applicants to other sources of assistance throughout the month. This is a decrease from the previous month (172) and is further evidence that the interactive voice response phone options we introduced in mid-February are ensuring more applicants get through to the right place
- responded to ten enquiries from councils seeking advice.

In March we received the highest volume of self-isolation support grant reviews to date. We continue to raise our concerns about resourcing with Scottish Government. We have also highlighted that crisis grant reviews remain higher than average and growing numbers of applicants are reporting to us that they cannot cope with cost of living increases and are facing crisis situations as a result.

Case studies

C, a representative from a charity asked the SPSO to review the council's decision regarding their client (A)'s crisis grant application. C explained A had been joined by their family under a family reunion visa. A had a single Universal Credit (UC) claim in place at the time and this was not adequate to cover the costs of a family of four.

As a result of this, A and their family had no money for food, gas or electricity and did not know when their UC payment would be updated to reflect them being part of a joint claim with children.

The council assessed that C was eligible for a grant and made an award of £115.84 for A and their family for a period of four days. They deemed that the duration of the crisis was this length due to A receiving their benefit as a single person. C submitted a first tier review request stating that this amount was not adequate for a family of four. However, the council did not make a further award.

C asked us for an independent review and we received the file from the council. We deemed that the council had not considered the family reunion guidance in relation to single benefit claims and award periods given A's circumstances. We therefore made a further award as we assessed that A's benefit claim would never be enough to support a family of four and was a solo element only. We made an award for 28 days for a couple and two children and deducted A's single claim amount from the total award as A had already received this. We were able to award a further £389.64.

Further examples can be found in the searchable directory [on our website](#).

Delays in allocating complaints

Like many public bodies, the SPSO is working hard to recover from the impact of COVID-19 on our services. Unfortunately, there is currently a delay of up to eleven months in allocating some complaints to an SPSO Complaints Reviewer for detailed consideration and investigation. It is important to note that not all complaints are affected and we continue to prioritise cases where the complainant (or person affected) is vulnerable, the matter is urgent and ongoing, or where there is a significant public interest.

We are focused on recovery and reducing the backlog of work created during 2020-21, due to the unforeseen change in our working environment, reduced resourcing and technological challenges. We are taking a number of steps including:

- agreeing extra resources and recruiting more staff
- monitoring resources and service delivery, adapting where we can to make more effective use of our services
- taking a more considered approach to our investigations and attempting to resolve cases where possible.

[Please see our website for detailed information on delays and what we are doing to decrease waiting times.](#)

Call for professional advisers

We are currently recruiting professional advisers for the SPSO register. We are seeking experienced clinicians in the following areas:

<p>Acute and General Medicine CAMHS Gastroenterology General Practice Gynaecology Neurology</p> 	<p>Obstetrics Oncology Ophthalmology Psychiatry Vascular Surgery</p> 
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Clinicians who would like to find out more can contact our lead adviser, Dorothy Armstrong, at dorothy.armstrong@sps.gov.scot. We encourage you to call and chat with Dorothy who can explain what it means to be an adviser to the SPSO. She can also tell you about wider benefits such as contributing to NHS learning and improvement, identifying good practice, helping individual patients get access to justice and how it is an excellent opportunity for personal professional development.

Signposting to the SPSO

It has come to our attention that some organisations may be advertising the incorrect mailing information for the SPSO. The current and correct address for the SPSO is:

SPSO
Bridgeside House
99 McDonald Road
Edinburgh EH7 4NS

We also have a Freepost option: **FREEPOST SPSO**. This is all that needs to be written on the envelope (no street name, no postcode) and no stamp is required.

We kindly ask any organisation signposting to SPSO using our old address, to update their communications material to reflect the correct address. This ensures that our service remains accessible and all mail reaches us as quickly as possible.

We are happy to provide complainants with Freepost envelopes on request.

Independent National Whistleblowing Officer

Whistleblowing training programmes

Following helpful feedback, we have recently updated our [online whistleblowing training programmes](#) and have developed a new shorter programme for line managers. This is aimed at middle managers without responsibilities for investigating stage 2 whistleblowing concerns, or involvement in reporting to the board. Confidential contacts and anyone else who receives concerns in their day-to-day role should also find the material relevant.



The new programme sits alongside our revamped training for people needing an overview and our programme for senior managers (which covers stage 2 investigations and learning from reporting as well). Every training presentation in each of the programmes has a link to provide feedback, so please let us know what you think.

If you have any comments please feel free to contact us at INWO@sps.gov.scot.

INWO e-bulletins

Our INWO team sends out regular updates with further information about the service. [Our April e-bulletin can be found here](#).

If you would like to receive future e-bulletins from the INWO straight to your inbox, please [register here to sign up to the mailing list](#).

COVID-19 information

As lockdown restrictions have not been lifted fully, our office remains closed to visitors. Our service provision is not changing, with most of our staff continuing to work from home.

Please read our [website for more service information](#), such as operating hours of our Freephone advice line.

For further information contact:

Communications team

Tel: 0131 240 2990

Email: communications@sps.gov.scot

SPSO Assessment and Guidance team

Tel: 0800 377 7330

Email: www.sps.gov.uk/contact-us

Website: www.sps.gov.uk