



**REPORT TO:** HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 19 JUNE 2024

**REPORT ON:** ANNUAL COMPLAINTS AND FEEDBACK REPORT

**REPORT BY:** CHIEF OFFICER

**REPORT NO:** DIJB31-2024

**1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to provide an analysis of complaints and feedback received by the Dundee Health and Social Care Partnership over the past financial year 2023/2024. This includes complaints handled using the Dundee Health and Social Care Partnership Social Work Complaint Handling Procedure, the NHS Complaint Procedure, and the Dundee City Integration Joint Board Complaint Handling Procedure.

**2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

2.1 Notes the analysis of Dundee Health and Social Care Partnership’s complaints performance 23/24, improvement actions, service compliments and as outlined in this report.

**3.0 FINANCIAL IMPLICATIONS**

3.1 None

**4.0 BACKGROUND INFORMATION**

4.1 From the 1st of April 2017 both NHS and social work complaints are required to follow the Scottish Public Service Ombudsman Model Complaint Handling Procedure. Both NHS Tayside Complaint Procedure and the Dundee Health and Social Care Partnerships Social Work Complaint Handling Procedures have been assessed as complying with the model complaint handling procedure by the SPSO.

4.2 Complaints are categorised by 2 stages: Stage 1: Frontline Resolution and Stage 2: Investigation. If a complainant remains dissatisfied with the outcome of a Stage 1: Frontline Resolution complaint, it can be escalated to a Stage 2. Complex complaints are handled as a Stage 2: Investigation complaint. If a complainant remains dissatisfied with the outcome of Stage 2: Investigation complaint they can contact the Scottish Public Services Ombudsman who will investigate the complaint, including professional decisions made.

- 4.3 In 2023/24 a total of 193 complaints were received about health and social care services in the Dundee Health and Social Care Partnership. The last three years have seen a downward trend of complaints received by Health & Social Care.

**Total number of complaints received by year**

	2019/20	2020/21	2021/22	2022/23	2023/24
Number of complaints received	229	157	217	202	193

**5.0 Complaint Themes**

- 5.1 The highest proportion of complaints for Health continues to be regarding Mental Health Services.
- 5.2 Mental Health Services thoroughly investigate all complaints and meet weekly with the NHS Tayside Patient Experience Team to ensure that the complaints are being managed appropriately.
- 5.3 Due to the complexity of the Mental Health complaints these can be about service process issues or issues that are specific to the individual making the complaint. Where the complaints are about service process issues and improvements are identified then appropriate actions are taken improve the service processes.
- 5.4 For Social Work Complaints the most common complaint themes were Failure to meet our service standards and Failure to provide a service. Complaints received are about a range of services.

**6.0 Number of Complaints closed at Stages**

- 6.1 The number of complaints closed per stage within timescale

	Stage 1	Stage 2	Escalated
Social Work	37%	27%	4%
Health	32%	21%	6%
Total	33%	22%	6%

*Complaints closed do not total 100% as some complaint data was missing or were closed as resolved / withdrawn / no consent / transferred*

- 6.2 Wherever possible Dundee Health and Social Care Partnership aim to handle complaints as a Stage 1 complaint where the complaint is handled closely to where and when it is raised. Stage 2 complaints are used for more complex complaints that require a more thorough investigation.
- 6.3 The number of complaints closed per stage represent the results that we would expect to see about the spread of complexity of complaints received.

**7.0 Complaint Outcomes at Stages**

- 7.1 Complaint outcomes at stage 1 as % of all complaints closed in full at stage 1

	Upheld	Not Upheld	Partially Upheld
Social Work	27%	43%	10%
Health	16%	32%	23%
Total	19%	35%	19%

*Stage 1 complaints do not total 100% as some complaints were closed as resolved / withdrawn / no consent / transferred / missing*

- 7.2 The outcomes show that, for both health and social work complaints, around a third of complaints are upheld or partly upheld.

7.3 Complaint outcomes at stage 2 as % of all complaints closed in full at stage 2

	Upheld	Not Upheld	Partially Upheld
Social Work	10%	65%	15%
Health	6%	41%	27%
Total	7%	47%	24%

*Stage 2 complaints do not total 100% as some complaints were closed as resolved / withdrawn / no consent / transferred / missing*

7.4 Similarly to stage 1 complaints, the total percentage of complaints upheld or partially upheld is around a third of all stage 2 complaints received.

7.5 Complaint outcomes at stage 2 as % of all escalated complaints closed in full at stage 2

	Upheld	Not Upheld	Partially Upheld
Social Work	0%	50%	50%
Health	18%	35%	24%
Total	16%	37%	26%

*Stage 2 escalated complaints do not total 100% as some complaints were closed as resolved / withdrawn / no consent / missing*

For escalated stage 2 complaints the total percentage of complaints upheld or partially upheld is slightly higher at around 50 %.

7.6 Where complainants remain dissatisfied with the outcome of a Stage 2 complaint, they have the option to refer the complaint to the Scottish Public Services Ombudsman.

7.7 During 2023/24 Dundee Health and Social Care Partnership had four complaints referred to the SPSO. Two of these were Social Work complaints, and two were Health Complaints. Neither of the Social Work complaints were taken forward for further investigation by the SPSO. The SPSO is currently gathering information regarding the two Health complaints in order to decide whether they will investigate.

**8.0 Complaints closed within timescale**

8.1 Number of complaints closed within timescales as a % of total complaints by stage

	Stage 1 within 5 working days	Stage 2 within 20 working days	Escalation
Social Work	37%	27%	4%
Health	32%	21%	6%
Total	33%	22%	6%

8.2 Complaints not being closed within timescales is having a significant impact on repeat communication from complainants chasing up responses.

8.3 Across stage 1 and escalated complaints, we are providing less responses within timescales which is causing delays and complaints to be escalated. During our weekly meetings, it has been agreed that should a complaint be closed at stage 1, this needs fed back within a timeous manner to save a complaint being escalated which is not needed.

8.4 Since last year Stage 2 complaints within Social Work have seen an increase in complaints closed within timescales since last year. However, Health complaints closed within timescales for stage 2 complaints have decreased, partially due to the complex nature of these complaints along with investigator feedback not being received timeously.

8.5 Dundee Health and Social Care Partnership complaints co-ordinators for services meet weekly with the NHS Tayside Complaint and Feedback team to discuss ongoing complaints.

## 9.0 Planned Service Improvements

- 9.1 Where a complaint is upheld, we identify planned service improvements to reduce the likelihood of similar issues arising again for patients and service users.
- 9.2 A selection of Planned Service Improvements for Social Work complaints include prompts for names to be checked when administering medication; communication around process for college support; Driver Awareness training eLearning to be completed for Meals Drivers; Awareness of Charging Policy to be shared and discussed at Team Meeting.

## 10.0 Compliments

- 10.1 Dundee Health & Social Care Partnership received 42 social work compliments within 2023/24. Many of these focused on our staff's attitude and their caring and attentive nature. Some examples of compliments are below;
- 10.2 "I just phoned DHSCP and a human voice greeted me. She was really helpful and there was no stress in getting information on what I needed. I really really appreciated not getting an automated service. Well done Dundee, excellent service."
- 10.3 "I was in ward 6 for about 9 weeks and in that time, I was treated to the best of care from all staff. Staff were friendly supportive and always ready to encourage us to help ourselves to try harder. XX was always ready to help or listen to anything we had to say, she was always there with a ready smile and made our stay more enjoyable. I received better care and attention in ward 6 than I received from some hotels I have paid to stay in please pass on my heartfelt thanks to all staff."
- 10.4 "I would just like to thank the meals service department on my lovely delicious meals. Also the council and my support worker for arranging this for me. I really appreciate the nutritional meals which I can no longer make for myself. Thank you again it's going to make such a difference to my overall health"

## 11.0 Development of Care Opinion

- 11.1 The Complaint team have been preparing for the launch of Dundee Health and Social Care Partnership services fully utilising Care Opinion.
- 11.2 Training dates are being rolled out for staff responders and administrators, and all teams across the partnership have been mapped and appropriate responders identified.

## 12.0 POLICY IMPLICATIONS

- 12.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

## 13.0 RISK ASSESSMENT

<b>Risk 1 Description</b>	The risk of not improving our Complaint resolution timescales will increase customer dissatisfaction and non-compliance with our complaint procedure, which may result in improvement recommendations from the SPSO.
<b>Risk Category</b>	Governance
<b>Inherent Risk Level</b>	12 – High risk
<b>Mitigating Actions</b> (including timescales and resources)	<ul style="list-style-type: none"> <li>- Weekly meeting to discuss outstanding complaints</li> <li>- Increased staff awareness of the complaint procedures.</li> <li>- Recruitment of staff member with focus on complaint administration by the DHSCP</li> </ul>
<b>Residual Risk Level</b>	9 – High Risk
<b>Planned Risk Level</b>	6 – Moderate Risk
<b>Approval recommendation</b>	The PAC is recommended to accept the risk levels with the expectation that the mitigating actions make the impacts which are necessary to improve the complaint resolution timescales.

#### 14.0 CONSULTATIONS

14.1 The Chief Finance Officer and the Clerk were consulted in the preparation of this report.

#### 15.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	x
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

#### 16.0 BACKGROUND PAPERS

16.1 None

Dave Berry  
Acting Chief Officer

DATE: 23 May 2024

Cheryl Russell, Customer Care & Governance Officer

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