



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 22 JUNE 2022

REPORT ON: ANNUAL COMPLAINTS PERFORMANCE

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: DIJB40-2022

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to provide an analysis of complaints received by the Dundee Health and Social Care Partnership over the past financial year 2021/2022. 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 2021/22 DHSCP complaint performance as set out in section 4 of this report

2.2 Notes this report is submitted in a different format to previous years to comply with the Scottish Public Services Ombudsman's new standards for complaints reporting.

3.0 FINANCIAL IMPLICATIONS

3.1 None

4.0 BACKGROUND INFORMATION

4.1 From the 1st April 2017 both NHS and social work complaints 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. Complaints are discussed at the quarterly clinical care and professional governance group where action is taken and lessons learned to adapt service delivery as appropriate to mitigate similar complaints being received and improve service delivery for service users.

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 2021/22 a total of 217 complaints (157 in 2020/21) were received about health and social care services in the Dundee Health and Social Care Partnership.

This is an increase from the previous year and is closer to the volume of complaints received in 2019/20.

Total number of complaints received by year

	2018/19	2019/20	2020/21	2021/22
Number of complaints received	154	229	157	217

4.4 Total Number of Complaints received per 1,000 population

The total number of complaints received per 1,000 population

SW	Health	Total
0.35	1.22	1.57

The total number of complaints closed per 1,000 population

SW	Health	Total
0.39	1.39	1.78

4.5 Complaint Themes

The highest proportion of complaints for Health continues to be regarding Mental Health Services with more than a quarter of complaints throughout the year relating to the service (29.1%). Of these complaints, 10 remain open to be resolved and out of the 46 closed complaints almost 40% were either upheld or partially upheld for the service.

For Social Work Complaints the most common complaint theme was delay in responding to enquiries and requests. The second most common complaint theme was failure to meet our service standards.

The complaint themes are being monitored for trends across the services to ensure that any failings are responded to within an appropriate timescale.

Further training is being offered to staff for complaints handling and a Microsoft Teams channel has been created for support to staff with staff being able to access the complaints procedure, template letters and request guidance.

4.6 Number of Complaints closed at Stages

The number of complaints closed per stage as % all complaints closed

	Stage 1	Stage 2	Escalated
Social Work	52%	40%	8%
Health	31%	43%	15%
Total	35%	50%	13%

Some Health complaints had a missing complaint type which has resulted in the figures Above. For example when we add the total of the stage 1 complaints and compare this to the overall closed complaints within the year, due to missing complaint types, we are given a value of 35%

4.7 Complaint Outcomes at Stages

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

	Upheld	Not Upheld	Partially Upheld
Social Work	20%	44%	20%
Health	31%	21%	31%
Total	27%	29%	27%

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

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

	Upheld	Not Upheld	Partially Upheld
Social Work	11%	42%	26%
Health	4%	33%	54%
Total	5%	35%	48%

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

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%	0%
Health	16%	36%	36%
Total	14%	38%	31%

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

4.8 Average time for full response

The average time in working days for a full response to complaints by stage

	Stage 1 Responses	Stage 2 Responses	Escalated Responses
Social Work	15	39	39
Health	6	60	101
Total	9	56	75

This year, health and social care have reduced the average time taken to respond to complainants in full to 9 working days from 12 at stage 1.

The average time taken to respond in full for a stage 2 complaint has increased this year to 56 days from 42 days in 2020/21.

Complaints after escalation have increased their average days to respond in full from 73 in 2020/21 to 75 in 2021/22.

4.9 Complaints closed within timescale

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	60%	79%	100%
Health	69%	22%	44%
Total	66%	34%	52%

Complaints closed within timescales this year are similar to those of 2020/21.

4.10 Extension of complaint timescales

It is the role of the Complaint Co-ordinator, within the Complaints and Feedback Team, to authorise extensions for the Health complaints.

For Social Work it is the Investigating Officers themselves.

However, in both cases, the agreement of the Complainant must be sought and the extension accepted for this to go ahead.

Number of complaints closed at stage 1 where extension was authorised as % of all complaints at stage 1

SW	Health	Total
16%	17%	17%

Number of complaints closed at stage 2 where extension was authorised as % of all complaints at stage 2

SW	Health	Total
47%	1%	11%

Number of complaints closed after escalated where extension was authorised as % of all complaints escalated

SW	Health	Total
50%	24%	28%

In 2021/22 health and social care have had an increase of complaints extended across all stages of complaints compared to 2020/21.

4.11 Service Improvements Following from Upheld Complaints

Where complaints are upheld or partially upheld we plan service improvements to help prevent similar issues arising again. Planned service improvements in the past year have included: improved communications with service users and family members; and improvements to billing systems for couples. Planned service improvements can include the development of systems, such as case recording systems development and where appropriate support for staff members to prevent complaint issues recurring. Where staff members have complaints raised about their practice there are appropriate support structures for them to access as necessary.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

Risk 1 Description	The risk of not improving our Complaint resolution timescales will result in increased customer dissatisfaction and non-compliance with our complaint procedure which may result in improvement recommendations from the SPSO.
Risk Category	Governance
Inherent Risk Level	Likelihood 4 L x Impact 3 = 12 – High risk
Mitigating Actions (including timescales and resources)	<ul style="list-style-type: none"> - Weekly reporting on open complaints to Locality Managers, and Head of Service - Exception reporting of complaints out with timescales to the Chief Officer - Increased staff awareness of the complaint procedures. - Recruitment of staff member with focus on complaint administration by the DHSCP
Residual Risk Level	Likelihood 3 x Impact 3 = 9 High Risk
Planned Risk Level	Likelihood 3 x Impact 3 = 9 High Risk
Approval recommendation	The risk levels are deemed to be acceptable given the expectation that the mitigating actions make the impacts which are necessary to improve the complaint resolution timescales.

7.0 CONSULTATIONS

7.1 The Chief (Finance) Officer and the Clerk were consulted in the preparation of this report.

8.0 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	

9.0 BACKGROUND PAPERS

9.1 None

Dave Berry
Chief Finance Officer

DATE: 07 June 2022

Cheryl Russell, Customer Care & Governance Officer

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