



REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 24 MAY 2023
REPORT ON: QUARTERLY COMPLAINTS PERFORMANCE – 4th QUARTER 2022/23
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC18-2023

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise the complaints performance for the Health and Social Care Partnership (HSCP) in the fourth quarter of 2022/23. The complaints include 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 Performance and Audit Committee (PAC):

- 2.1 Notes the complaints handling performance for health and social work complaints set out within this report.
- 2.2 Notes the work which has been undertaken to address outstanding complaints within the HSCP and to improve complaints handling, monitoring and report.

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

- 4.1 Since the 1st April 2017 both NHS and social work complaints follow the Scottish Public Service Ombudsman (SPSO) 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. Complaints about the delivery of services are regularly presented to the Clinical, Care and Professional Governance Group to inform service improvement.
- 4.3 The information regarding complaints to complete the complaints monitoring report is received by the IJB from Dundee City Council and NHS Tayside. However, for quarter 4, NHS Tayside did not provide the requested information which has resulted in an incomplete report for health complaints. NHS Tayside has committed to provide access to this information for future reporting.

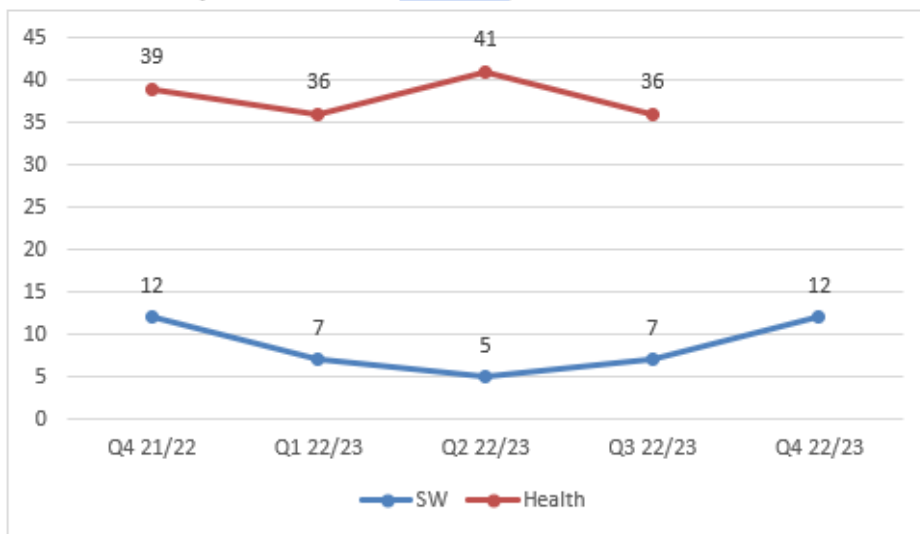
4.4 While the first graph advises the volume of complaints received during the period, this report is based upon complaints closed within the period. SPSO categories are included as appendix 1 at the end of the report. Please note that not all figures will add up to 100% due to missing data or different recordings.

4.5 Complaints Received

In the fourth quarter of 2022/23 a total of 12 complaints were received about social work or social care services.

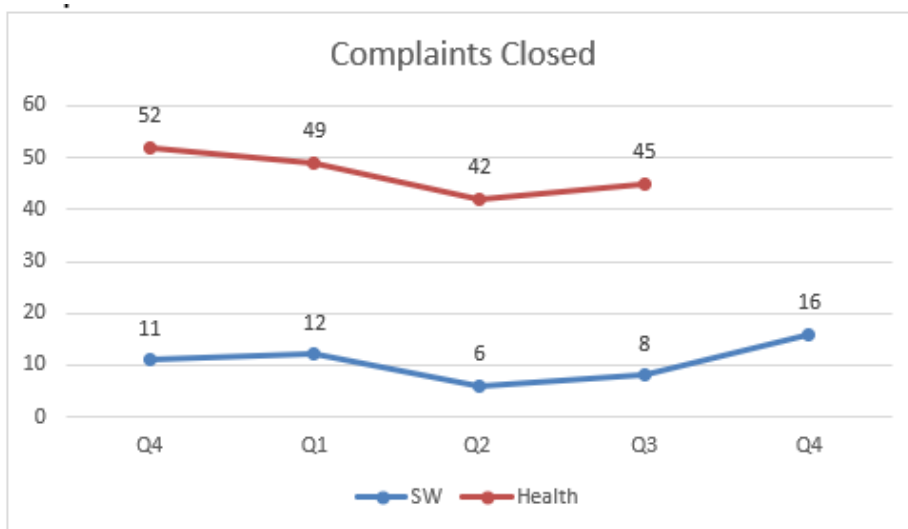
No data was received regarding Health complaints for Q4 within in the Dundee Health and Social Care Partnership. Therefore, when looking at the graphs, please note that the last reported and analysed data is from Q3 and no comparisons can be made throughout this report.

Number of complaints received quarterly



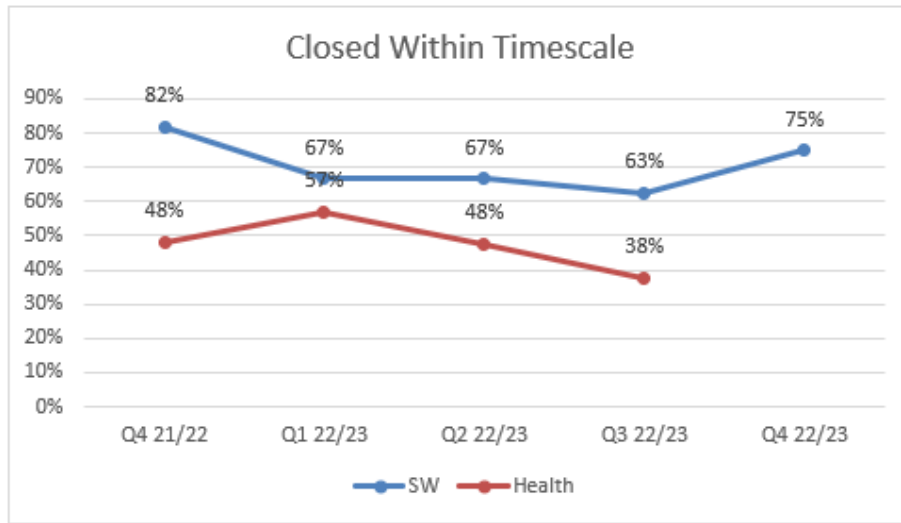
The graph shows that Social Work and Social Care Services have seen another increase in complaints received for the second quarter running.

4.6 Complaints Closed & Resolved Within Timescales



During quarter four, Social Care closed 16 complaints which is the highest within the last year.

4.7 Complaints Closed within Timescale



Out of the closed complaint Social Care closed 75% within timescale, which is an increase this quarter.

4.8 Social Work complaints by reason for concern

Complaint themes continue to be monitored for trends and looking at the table below, we can see that for the 4th quarter running Delays have been the most frustrating element for complainants making complaints.

	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Attitude, behaviour or treatment by a member of staff	2	0	2	2	2
Delay in responding to enquiries and requests	7	9	4	2	5
Dissatisfaction with our policy	0	1	0	1	3
Failure to provide a service	1	0	0	1	2
Failure to follow the proper administrative process	0	0	0	0	1
Failure to meet our service standards	2	2	0	2	3

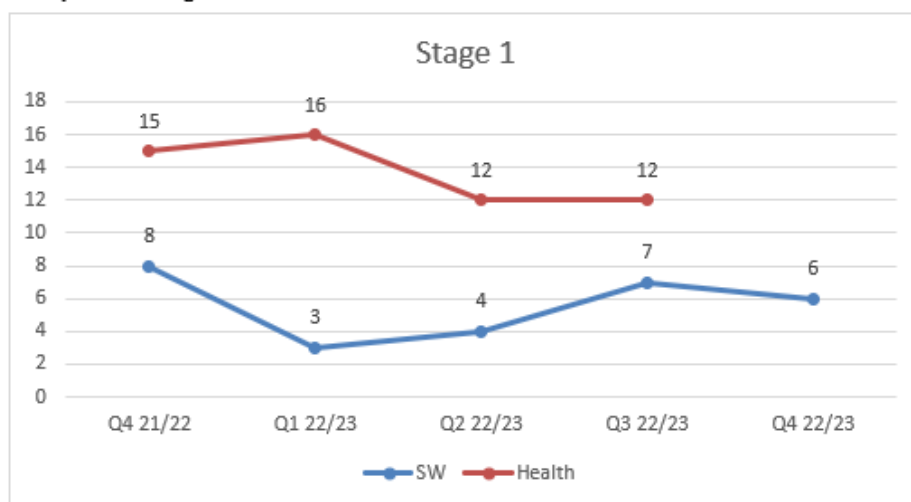
The numbers of social work complaints received this quarter are small.

4.9 Health complaints by reason for concern

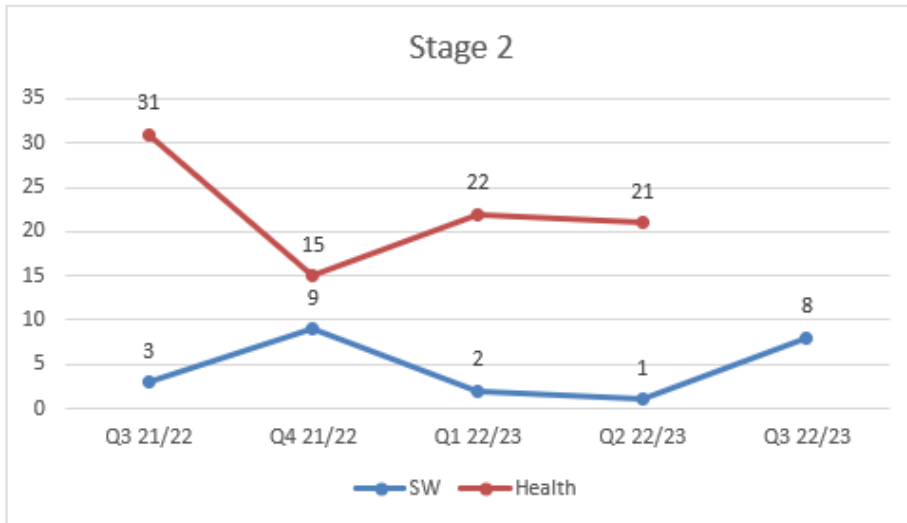
	Q1 2022/23	Q2 2022/23	Q3 2022/23
Disagreement with treatment / care plan	6	1	8
Lack of continuity	1	1	0
Letter wording	1	0	0
Problems with medication	3	1	1
Unacceptable time to wait for an appointment	8	3	4
Lack of support	6	1	2
Shortage of staff	3	0	0
Patient not being verbally told	1	0	1
Email	1	0	0
Not listening	0	1	0
Telephone	1	0	1
Error with prescription	1	0	0
Poor medical treatment	1	1	1
Poor aftercare	0	1	0
Abruptness	1	1	1
Conduct	1	1	0
Staff not trained properly	0	1	0
Waiting too long for results	0	1	1
Waiting for referral	0	1	0
Co-ordination of clinical treatment	0	3	0
Patient has been sent no communication	0	1	0
Inappropriate comments	0	1	0
Insensitive to patient needs	0	2	0
Inefficient	0	1	1
Disabled parking	0	0	1
Poor nursing care	0	0	2
Other	0	0	2
Formal	0	0	1
Face to face	0	0	1
Cancellation of appointment	0	0	1

No complaint data was provided this quarter for Health.

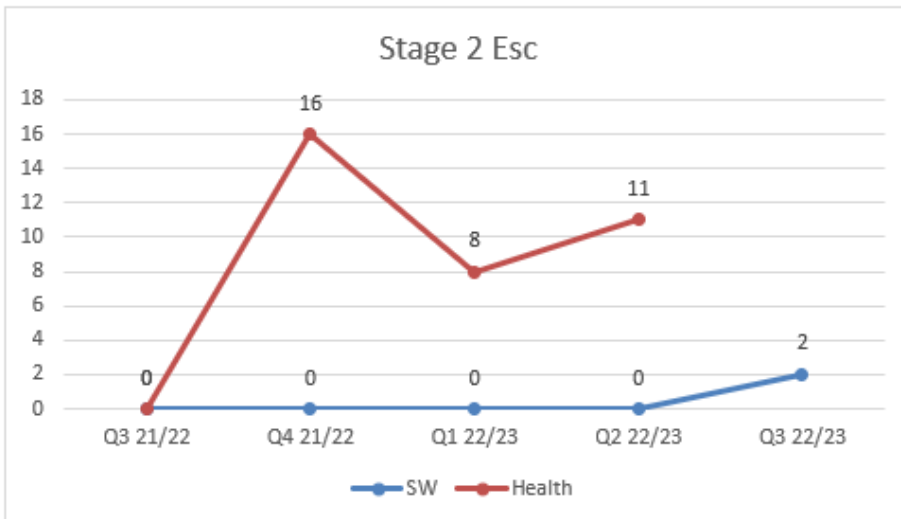
4.10 Complaints Stages



Stage 1 complaints are completed within 5 days or given a maximum extension of a further 10 days. Numbers fluctuate within Social Work between quarters.



Stage 2 complaints are completed within 20 working days and can be extended also. Social Work stage 2 complaints have seen a substantial increase this quarter. Stage 2 complaint data for Health has not been received.

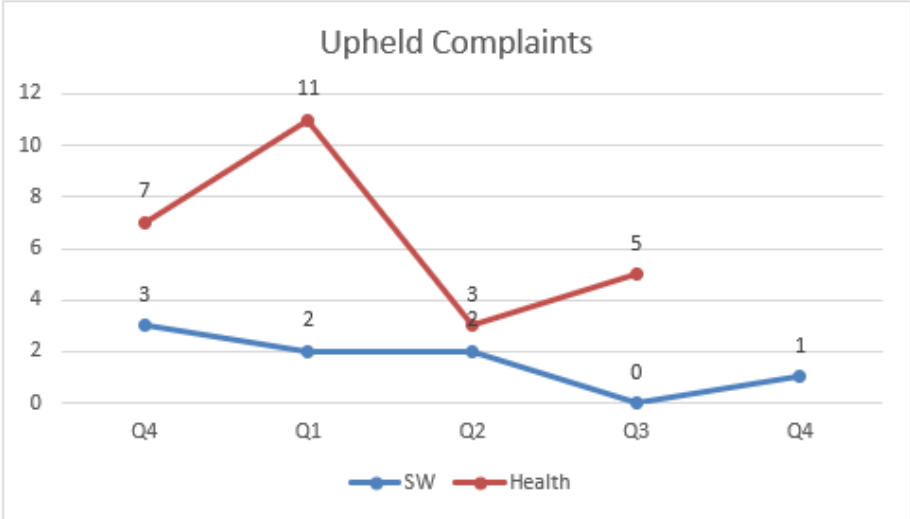


Stage 2 escalated complaints are those which are escalated from stage 1 to stage 2 after being logged and possibly responded to. Social Work stage 2 escalated complaints have increased for the first time this year.

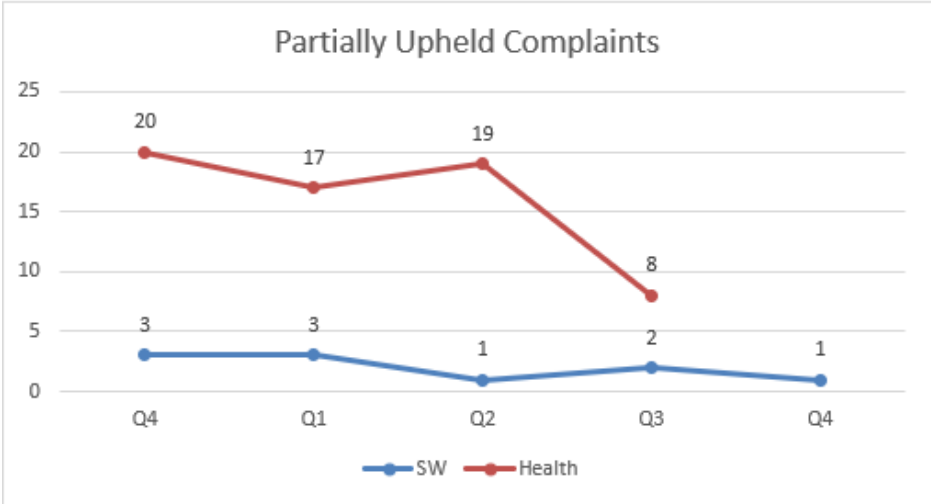
4.11 Complaint Outcomes

Partially upheld and upheld complaints receive planned service improvements logged against them by the allocated complaint investigator and these must be completed within a set timeframe.

These planned service improvements can range from process improvements or re-design to team briefings regarding staff attitude and behaviour.



Social Work upheld complaints have increased slightly this quarter.



Social Work Partially Upheld complaints have decreased slightly this quarter.

4.12 Planned Service Improvements

There were two partially upheld or upheld complaints which have all identified a cause and have service improvements planned to address these. By putting these planned service improvements in place, we look to minimise complaints of the same nature being received.

This is a reduction from last quarter of 15 complaints which had planned service improvements put in place but only includes Social Work due to not receiving Health complaints data.

4.13 Open Complaints

	Total Open	20 days or less	21-39 days	40-99 days	100 days +	180 days +	Average Days
SW	1	1	1	0	0	0	16
Health	-	-	-	-	-	-	-

4.14 Snapshot of Health open complaints across services

Data not provided

4.15 Compliments

Compliments are received by teams across Dundee Health and Social Care Partnership. Here is an extract from compliments received about the Dundee Enhanced Support Acute Team.

Jan 2023: I was taken to the A & E department recently after coming round lying on the floor and having no idea of what had happened or how I got there. After having tests, x-rays and a scan, the diagnosis was a severe chest infection and I was told I would be allowed home, but, as I live alone the Dundee Enhanced Support Acute Team (DECS-A) would come in and take over my care. I was happy with this, although I had never heard of this team before. A nurse and doctor arrived the following morning and they were very kind and explained that they would take over my medical care until they were happy that I was fully fit again. The nurse arranged to collect my prescription and she brought it back for me that afternoon and she came in every day until my antibiotics were finished and she was happy I was fully recovered. I can never thank that team enough for what they did for me. I hadn't even realised I was unwell and they just stepped in and helped me. A service like that, provided by such a professional team of medically qualified people, is worth its weight in gold, and must surely mean that people, who would otherwise have to stay in hospital, may be able to be cared for at home, and that's where most of us would rather be.

Mar 2023: Instead of my elderly mum going into hospital she received excellent care from this team. We also felt supported and reassured. She received daily visits as long as they were required. Can't thank them enough.

5.0 IJB Complaints

No complaints about the Integration Joint Board have been received.

6.0 POLICY IMPLICATIONS

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.

7.0 RISK ASSESSMENT

This report has not been subject to a risk assessment as it is provided for information and does not require a policy decision from the PAC.

8.0 CONSULTATIONS

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

9.0 BACKGROUND PAPERS

None

Dave Berry
Chief Finance Officer

DATE: 24 April 2023

SPSO Categories

	Social Work				Health			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1a: the total number of complaints received per 1,000 population	0.06	0.04	0.06	0.10	0.30	0.34	0.30	NA
1b: the total number of complaints closed per 1,000 population	0.10	0.05	0.07	0.13	0.40	0.34	0.37	NA
2a: the number of complaints closed at stage 1 as % all complaints closed	25%	67%	88%	38%	33%	29%	27%	NA
2b: the number of complaints closed at stage 2 as % all complaints closed	75%	33%	13%	50%	31%	52%	69%	NA
2c: the number of complaints closed after escalation as % all complaints closed	0%	0%	0%	13%	33%	19%	24%	NA
3a: the number of complaints upheld at stage 1 as % of all complaints closed in full at stage 1	33%	25%	0%	17%	44%	25%	33%	NA
3b: the number of complaints not upheld at stage 1 as % of all complaints closed in full at stage 1	33%	50%	43%	83%	13%	8%	25%	NA
3c: the number of complaints partially upheld at stage 1 as % of all complaints closed in full at stage 1	0%	25%	29%	0%	44%	67%	33%	NA
3d: the number of complaints upheld at stage 2 as % of all complaints closed in full at stage 2	11%	50%	0%	0%	20%	0%	3%	NA
3e: the number of complaints not upheld at stage 2 as % of all complaints closed in full at stage 2	56%	0%	100%	75%	47%	59%	45%	NA
3f: the number of complaints partially upheld at stage 2 as % of all complaints closed in full at stage 2	33%	0%	0%	0%	33%	41%	13%	NA
3g: the number of escalated complaints upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%	0%	0%	6%	0%	0%	NA
3h: the number of escalated complaints not upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%	0%	50%	56%	63%	100%	NA
3i: the number of escalated complaints partially upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%	0%	50%	31%	25%	0%	NA
4a: the average time in working days for a full response to complaints at stage 1	31	19	15	35	10	19	13	NA
4b: the average time in working days for a full response to complaints at stage 2	50	28	69	45	31	26	41	NA
4c: the average time in working days for a full respond to complaints after escalation	0	0	0	57	39	35	36	NA
5a: the number of complaints closed at stage 1 within 5 working days as % of total number of stage 1 complaints	0%	50%	57%	50%	6%	83%	83%	NA
5b: the number of complaints closed at stage 2 within 20 working days as % of total number of stage 2 complaints	22%	0%	100%	50%	33%	36%	24%	NA

5c: the number of complaints closed after escalation within 20 working days as % of total number of escalated complaints	0%	0%	0%	0%	25%	25%	45%	NA
6a: number of complaints closed at stage 1 where extension was authorised as % of all complaints at stage 1	33%	50%	29%	33%	6%	8%	0%	NA
6b: number of complaints closed at stage 2 where extension was authorised as % of all complaints at stage 2	78%	100%	100%	38%	0%	9%	5%	NA
6c: number of complaints closed after escalated where extension was authorised as % of all complaints escalated	0%	0%	0%	50%	19%	25%	27%	NA

**Please note all categories add up to 100% due to missing data, the use of resolved outcomes and other categories to close complaints.

***Please note that no data was received from NHS to complete Health Q4 data