



REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 23 NOVEMBER 2022
REPORT ON: QUARTERLY COMPLAINTS PERFORMANCE – 2nd QUARTER 2022/23
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC30-2022

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 first 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 as 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 reporting.

3.0 FINANCIAL IMPLICATIONS

None

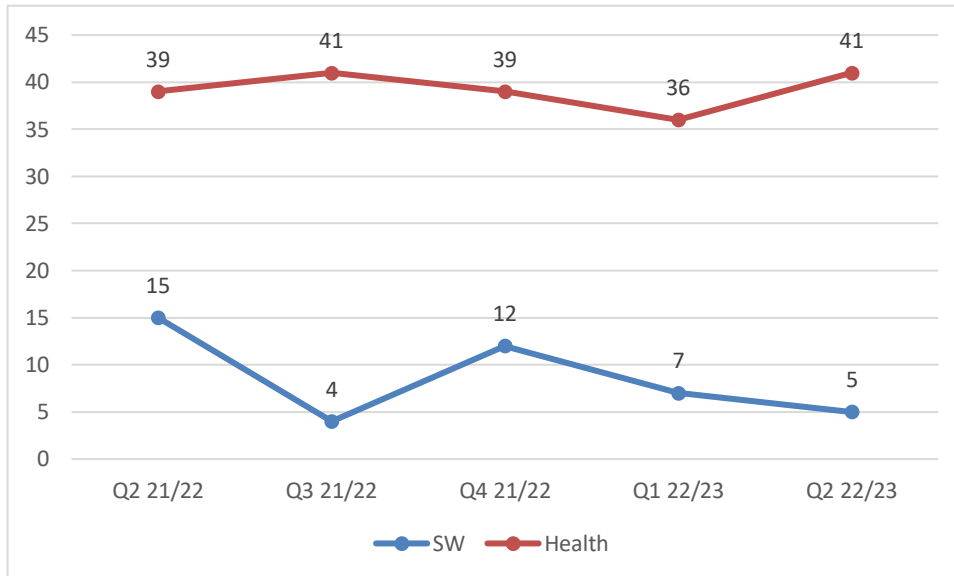
4.0 MAIN TEXT

- 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 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.

4.4 Complaints Received

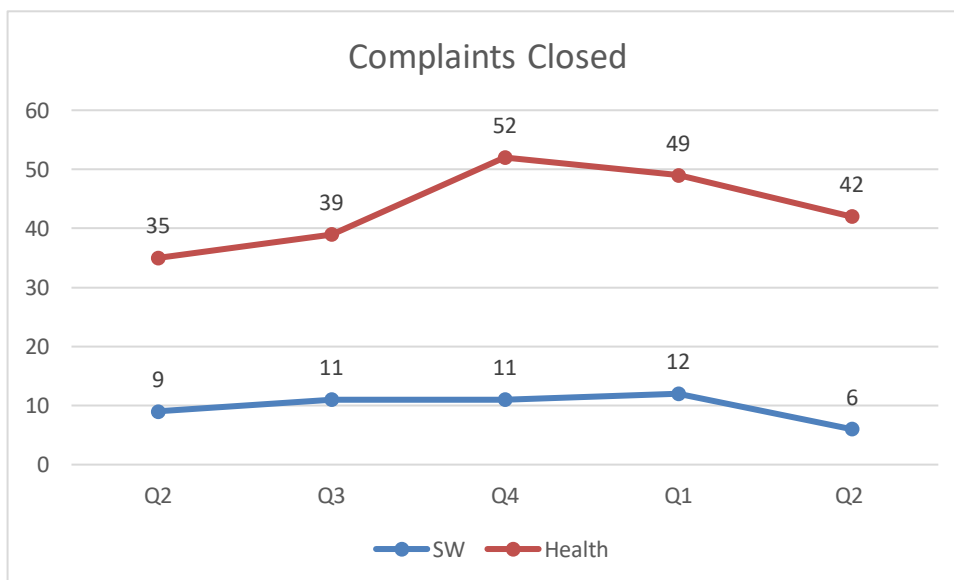
In the second quarter of 2022/23 a total of 5 complaints were received about social work or social care services and a further 41 regarding Health complaints in the Dundee Health and Social Care Partnership.

Number of complaints received quarterly

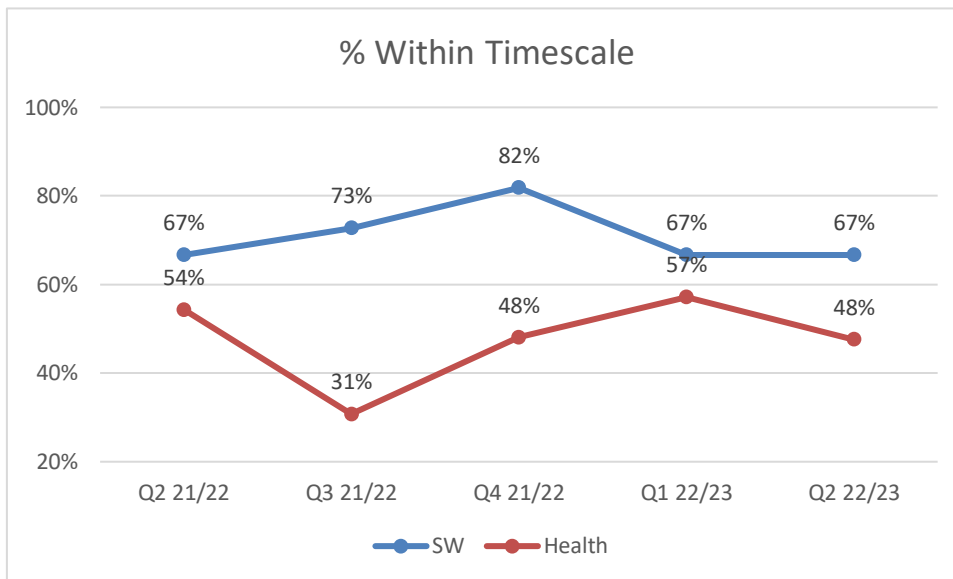


The graph shows that while Social Work and Social Care Services have seen a decline in complaints received for the second quarter in a row, Health complaints have seen a slight increase.

4.5 Complaints Closed & Resolved Within Timescales



During quarter two, six complaints for Social Work and Social Care services were closed and forty two complaints for Health services were closed.



Out of the closed complaints, 67% of Social Work and Social Care and 48% of Health complaints were within the standard timescales.

4.6 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 3rd quarter running Delays have been the most frustrating element for complainants making complaints.

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

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

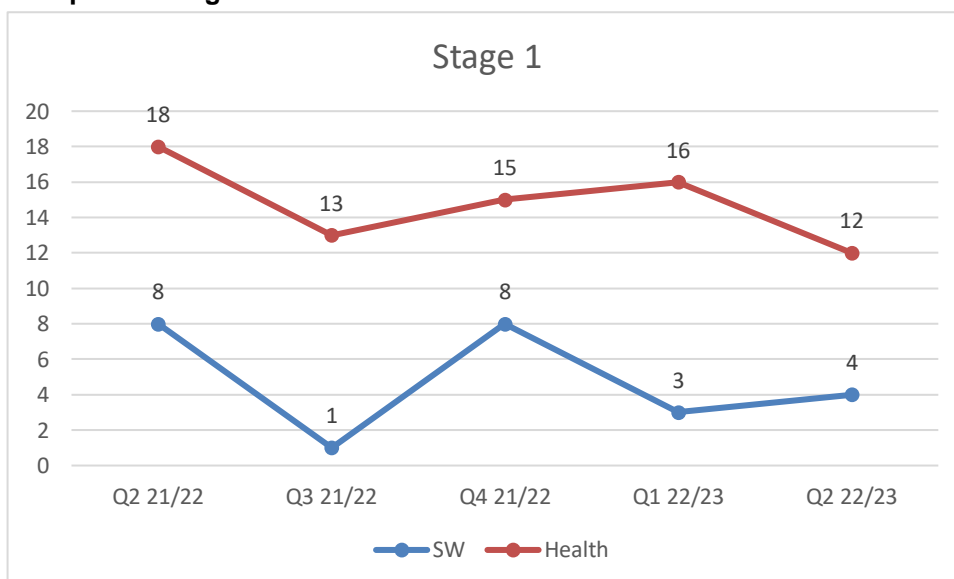
4.7 Health complaints by reason for concern

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

19 complaints did not have a theme recorded.

A running track of reasons for concern will begin to build each quarter so the PAC can easily see which are the problem areas and require further work.

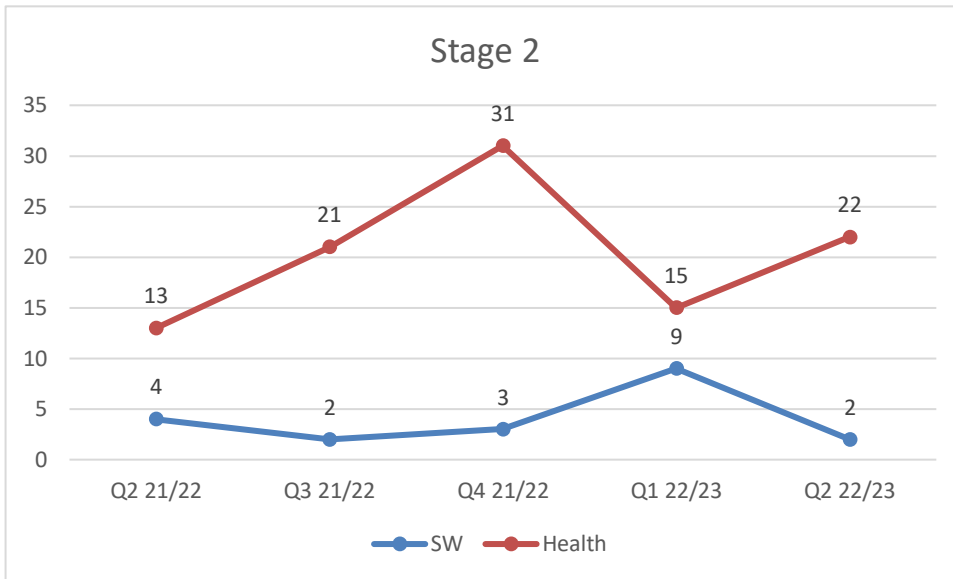
4.8 Complaints Stages



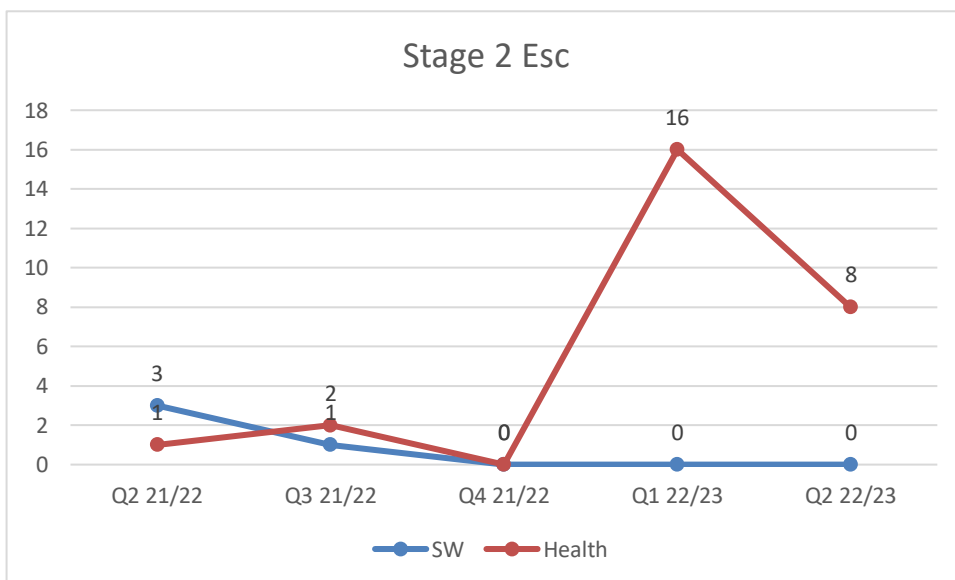
Stage 1 complaints are completed within 5 days or given a maximum extension of a further 10 days.

Numbers fluctuate within Social Work between quarters.

Numbers within Health have dropped this quarter.



Stage 2 complaints are completed within 20 working days and can be extended also. Social Work stage 2 complaints have seen a drop this quarter. Health stage 2 complaints have seen an increase this quarter compared to Q1 of this year.

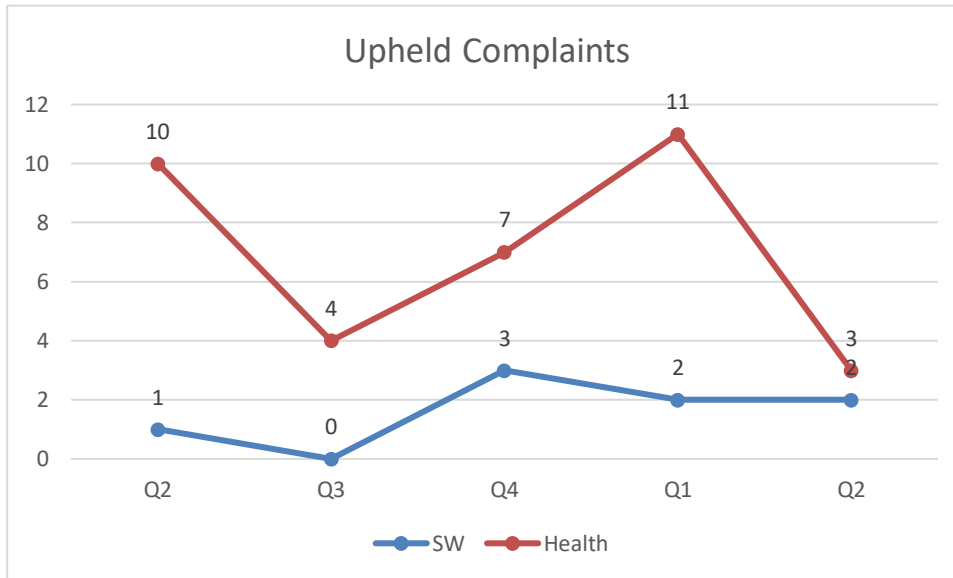


Stage 2 escalated complaints are those which are escalated from stage 1 to stage 2 after being logged and possibly responded to. Health complaints have taken a sharp decrease this quarter by 50%. Social Work stage 2 escalated complaints have remained at 0 for the third quarter running.

4.9 Complaint Outcomes

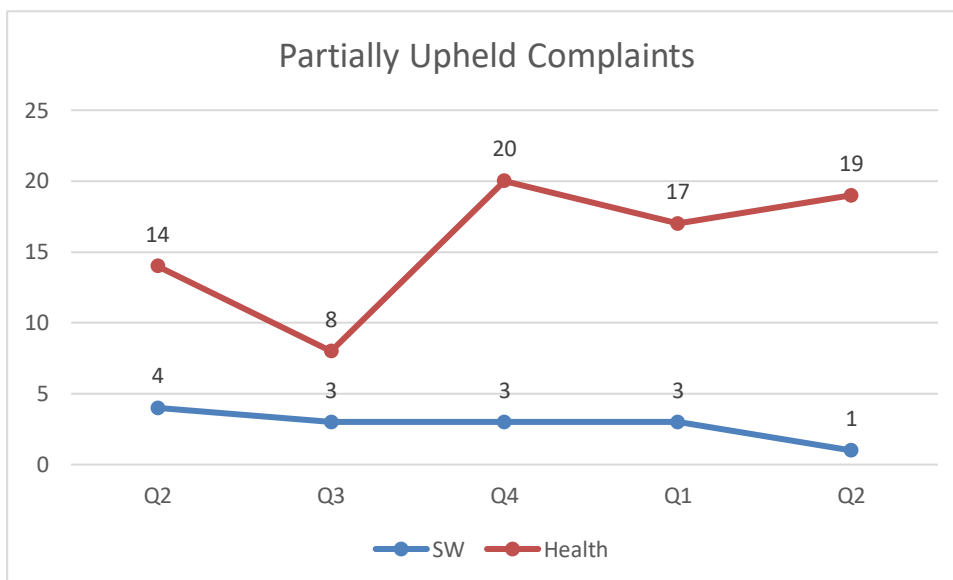
Partially upheld and upheld complaints receive planned service improvements logged against them by the allocated complaint investigator and these must be completed within a set timeframe.

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



Upheld complaints have decreased within Health and are at their lowest seen within the last year.

Social Work upheld complaints have remained the same as last quarter.



Social Work Partially Upheld complaints have declined this quarter while Health have seen an increase this quarter compared to last.

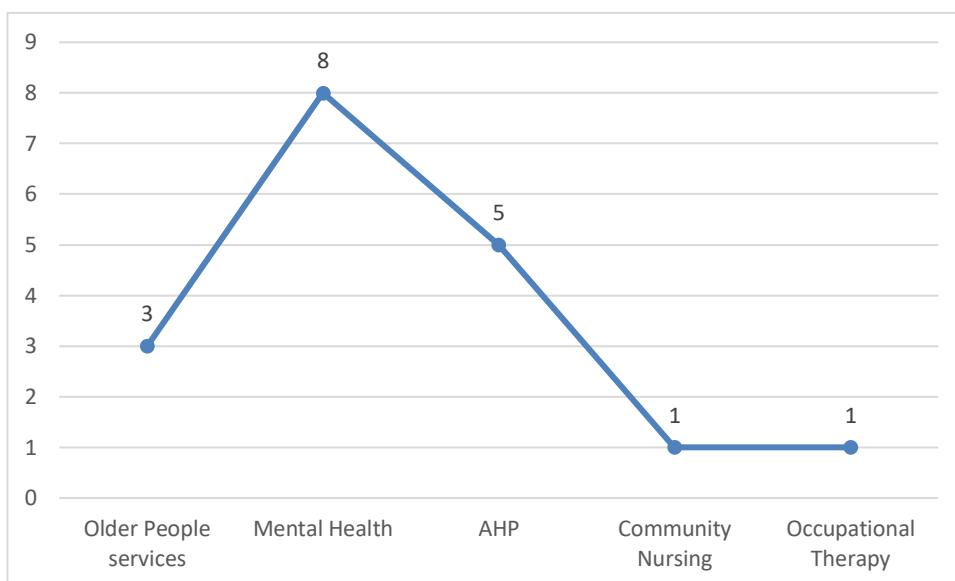
4.10 Planned Service Improvements

There were 25 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.

4.11 Open Complaints

	Total Open	20 days or less	21-39 days	40-99 days	100 days +	180 days +	Average Days
SW	5	1	1	1	1	1	126
Health	18	5	4	9	0	0	40

4.12 Snapshot of Health open complaints across services



The graph above shows the current volume of open complaints within Health as of 21st October 2022.

4.13 Compliments

As well as complaints received, the HSCP receives a range of compliments for the services it delivers. A sample of these are noted below:

Aug 2022: Thank you again for taking the time to meet with us yesterday and also for providing such a great service to our women.

Aug 2022: In May this year my wife was parking the car, as was her regular custom at this point, when she felt what she thought was a muscle wrench across her back. It was extremely painful. We had no choice but to seek help from our medical practice who prescribed painkillers, none of which seemed to help much with the pain. Several different sympathetic doctors in the practice saw my wife over 2 months, eventually arranging an x-ray which showed up multiple thoracic spinal fractures, (and, later, a sternum fracture) obviously explaining the severe pain. But still the range of normal painkillers were failing to cope with the excruciating pain and, eventually, after a home visit by one of the practice doctors, it was decided that my wife needed further investigations. The choice of going into hospital or turning to DECS-A (hospital at home) for the next step was presented to us. Of course, we chose DECS-A and it was a great decision. The whole team, including Consultant Geriatrician, Registrar Physician and highly skilled specialist nurse practitioners gave us phenomenal attention. For the first time we had a coordinated approach and organised investigations (which is no reflection on the care we got from the GP practice) and we began to see progress on both the pain control and general care. The professionalism was very welcome and impressive, especially as it was combined with great warmth and understanding. This is a service that must be supported, not least because it keeps patients at home where they may prefer to be, rather in hospitals. We are massively grateful.

Sept 2022: Just wanted to thank the Enhanced Community Support Team especially X who is a great asset. They have been working with my mum who is very ill suffering with dementia. My mum has had to be admitted to hospital twice and each time once home the team have been very good, they are friendly, thoughtful, approachable and always include all the family.

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: 31 October 2022

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			0.30	0.34		
1b: the total number of complaints closed per 1,000 population	0.10	0.05			0.40	0.34		
2a: the number of complaints closed at stage 1 as % all complaints closed	25%	67%			33%	29%		
2b: the number of complaints closed at stage 2 as % all complaints closed	75%	33%			31%	52%		
2c: the number of complaints closed after escalation as % all complaints closed	0%	0%			33%	19%		
3a: the number of complaints upheld at stage 1 as % of all complaints closed in full at stage 1	33%	25%			44%	25%		
3b: the number of complaints not upheld at stage 1 as % of all complaints closed in full at stage 1	33%	50%			13%	8%		
3c: the number of complaints partially upheld at stage 1 as % of all complaints closed in full at stage 1	0%	25%			44%	67%		
3d: the number of complaints upheld at stage 2 as % of all complaints closed in full at stage 2	11%	50%			20%	0%		
3e: the number of complaints not upheld at stage 2 as % of all complaints closed in full at stage 2	56%	0%			47%	59%		
3f: the number of complaints partially upheld at stage 2 as % of all complaints closed in full at stage 2	33%	0%			33%	41%		
3g: the number of escalated complaints upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%			6%	0%		
3h: the number of escalated complaints not upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%			56%	63%		
3i: the number of escalated complaints partially upheld at stage 2 as % of all escalated complaints closed in full at stage 2	0%	0%			31%	25%		
4a: the average time in working days for a full response to complaints at stage 1	31	19			10	19		
4b: the average time in working days for a full response to complaints at stage 2	50	28			31	26		
4c: the average time in working days for a full respond to complaints after escalation	0	0			39	35		
5a: the number of complaints closed at stage 1 within 5 working days as % of total number of stage 1 complaints	0%	50%			6%	83%		
5b: the number of complaints closed at stage 2 within 20 working days as % of total number of stage 2 complaints	22%	0%			33%	36%		

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

**Please note all categories add up to 100% due to missing data, the use of resolved outcomes