



REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 3 FEBRUARY 2021
REPORT ON: QUARTERLY COMPLAINTS PERFORMANCE – 2nd QUARTER 2020/21
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC7-2021

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to summarise the complaints performance for the Health and Social Care Partnership (HSCP) in the second quarter of 2020/21. 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 content of the report.
- 2.2 Notes the complaints handling performance for health and social work complaints set out within this report.
- 2.3 Notes the work which has been undertaken to address outstanding complaints within the HSCP and to improve complaints handling, monitoring and reporting (sections 4.6 and 4.13).

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

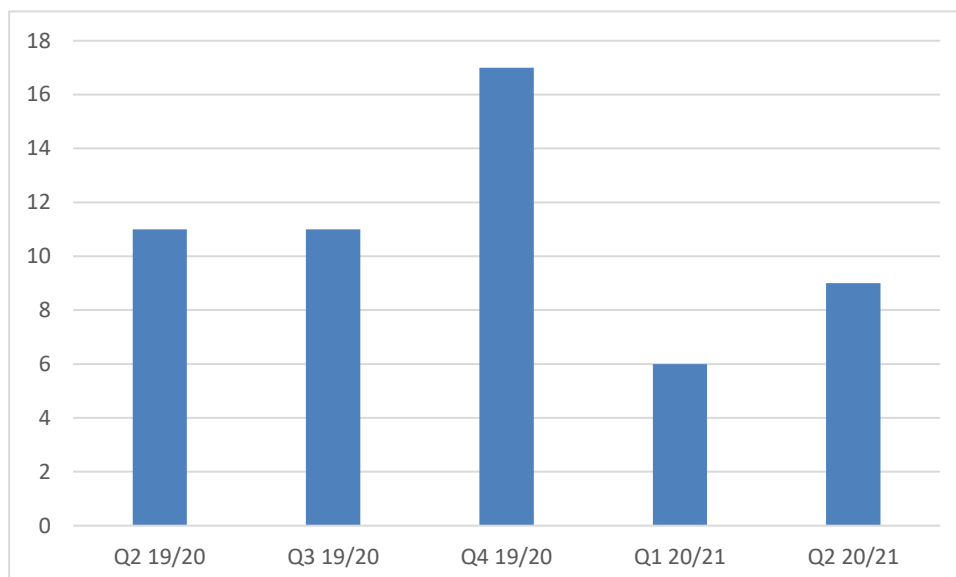
4.1 Since the 1st April 2017 both NHS and social work complaints follow the Scottish Public Service Ombudsman Model Complaint Handling Procedure. Both NHS Tayside Complaint Procedure and the Dundee Health and Social Care Partnerships Social Work Complaint Handling Procedures have been assessed as complying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

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 Social Work Complaints

In the second quarter of 2020/21 a total of nine complaints were received about social work or social care services in the Dundee Health and Social Care Partnership. This is higher than last quarter but still lower than this time last year.

Graph 1 - Number of Social Work complaints received quarterly



The graph shows that there has been a slight increase in the complaints received within Q2 compared to Q1.

4.4 Social Work complaints by reason for concern

Complaints about a delay in responding to enquiries and requests have dropped from 7 to 0 this quarter which is excellent considering we were working within a pandemic at home.

Attitude, behaviour or treatment by a member of staff	0
Delay in responding to enquiries and requests	2
Dissatisfaction with our policy	2
Failure to provide a service	1
Failure to follow the proper administrative process	2
Failure to meet our service standards	2

The numbers of social work complaints, while having a slight increase this quarter, are still relatively small. The complaints received were regarding several services and suggest no themes or patterns of dissatisfaction with services at this time.

4.5 Social Work Complaints Stages and Outcomes

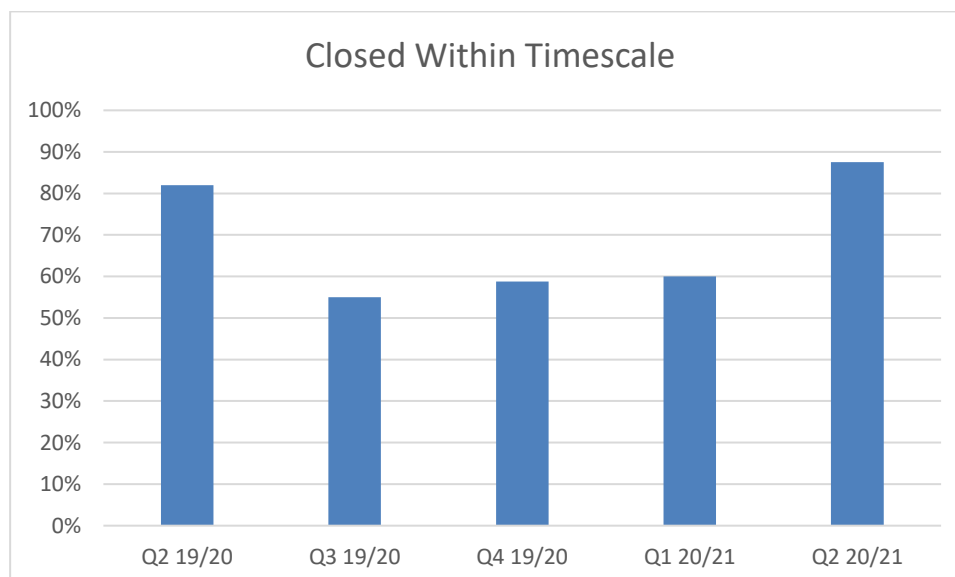
Three complaints received were handled at a frontline resolution stage compared to five last quarter and this quarter we received six complaints at stage 2 investigation from the beginning compared to one last quarter. Of these, one stage 2 complaint is still open and under investigation, none were upheld, three were partially upheld with planned service improvements, a further two were not upheld and three were recorded as duplicate complaints.

Frontline Resolution	3
Investigation (Escalated from Frontline)	0
Investigation	6
Joint with NHS	0

4.6 Social Work Complaints Resolved Within Timescales

Seven of the Social Work complaints received by the Partnership were able to be resolved within the target dates. One missed the deadline minimally and the final one is currently still under investigation.

Graph 2 - % of Social Work Complaints resolved within timescales



The graph shows that there has been a sharp increase in the number of complaints that are resolved within timescales. The Customer Care and Governance Officer is ensuring that delays are kept to a minimum and processes are correctly followed. Meetings with Investigating Officers have unfortunately been delayed due to the pandemic. This quarter as you can see, we have had a real push on ensuring that the complaints are resolved within the timescales and we hope to keep this on throughout the remainder of the year.

4.7 Planned Service Improvements

The three partially upheld complaints have all identified a cause and have service improvements planned to address these.

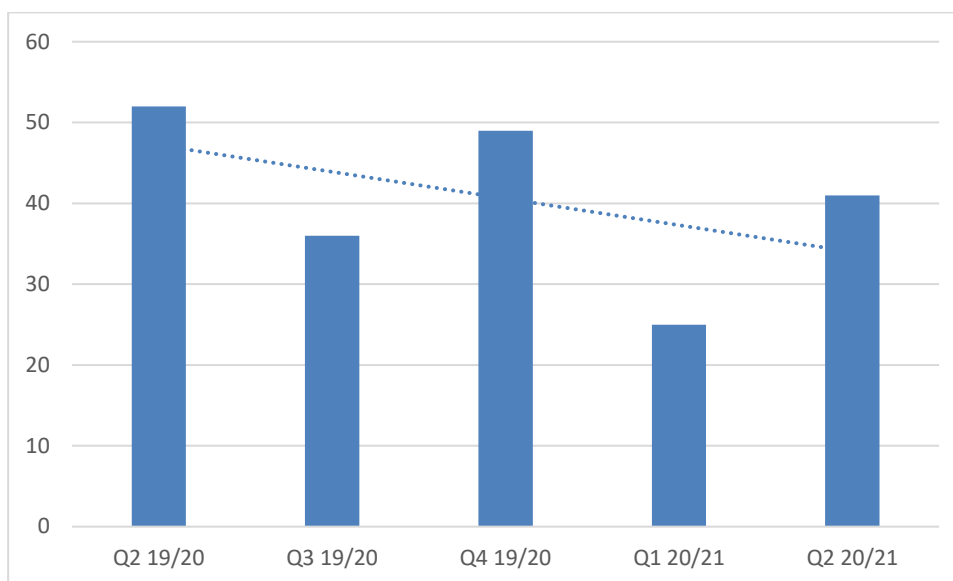
4.8 Scottish Public Service Ombudsman Complaints

No complaints were referred to the SPSO this quarter.

4.9 NHS Complaints

In the second quarter of 2020/21 a total of 41 complaints were received about Dundee Health and Social Care Partnership health services compared to only 25 in quarter one. These are complaints which have been coded against DHSCP, there may be other complaints where DHSCP have contributed to a joint response:

Graph 3 – Number of NHS Complaints received



The graph shows that during quarter two there has been a sharp increase in complaints received, bringing us back up to a more expected level.

4.10 NHS Complaints by Theme

The top three themes were once again for the fourth quarter running Attitude and Behaviour; Clinical Treatment and Communication (Oral).

The top three sub themes were Disagreement with treatment/care plan, Staff Attitude and Lack of support for this quarter.

4.11 NHS Complaints Stages

11 complaints were handled at a frontline resolution stage compared to 20 last quarter. Of these complaints, four were upheld, three were partially upheld and two were not upheld.

This quarter saw six complaints handled as Stage 2 Escalated complaints compared to none last quarter. Of these complaints, one was partially upheld and 2 were not upheld.

24 complaints were handled as a Stage 2 complaints from the start compared to only five in quarter one. This quarter seven were partially upheld and two were not upheld.

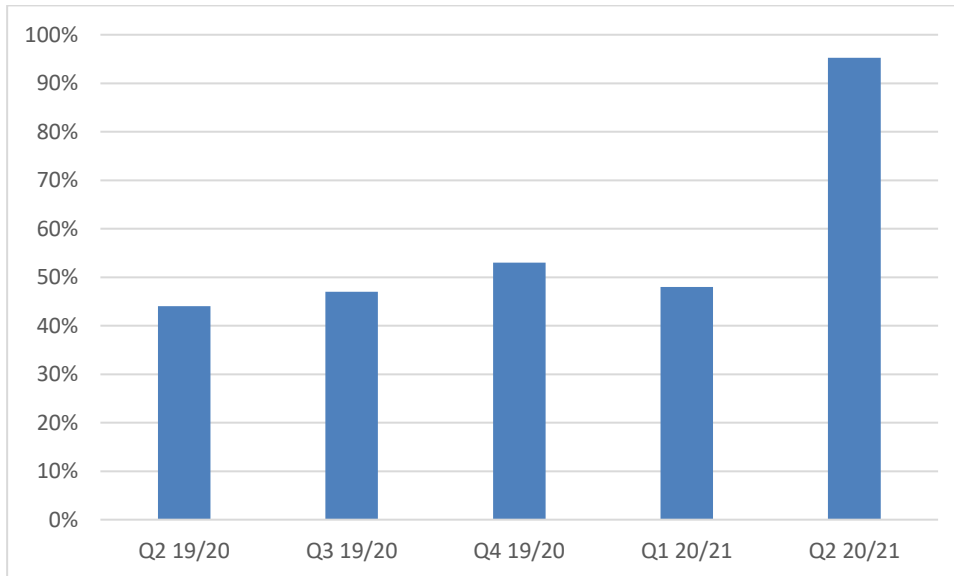
78% of Frontline resolution complaints were either upheld or partially upheld compare to 57% last quarter. 78% of stage 2 non escalated complaints were upheld or partially upheld compared to 71% last quarter. Stage 2 escalated complaints had 33% either upheld or partially upheld.

Frontline Resolution	11
Investigation (Escalated from Frontline)	6
Investigation	24

4.12 Closed NHS Complaints Resolved within Timescales

21 complaints were closed within the first quarter regardless of when they were received, and 95% (20) of these were closed within timescales. This is an increase from the previous quarter.

Graph 4 - % of closed NHS complaints closed within timescales

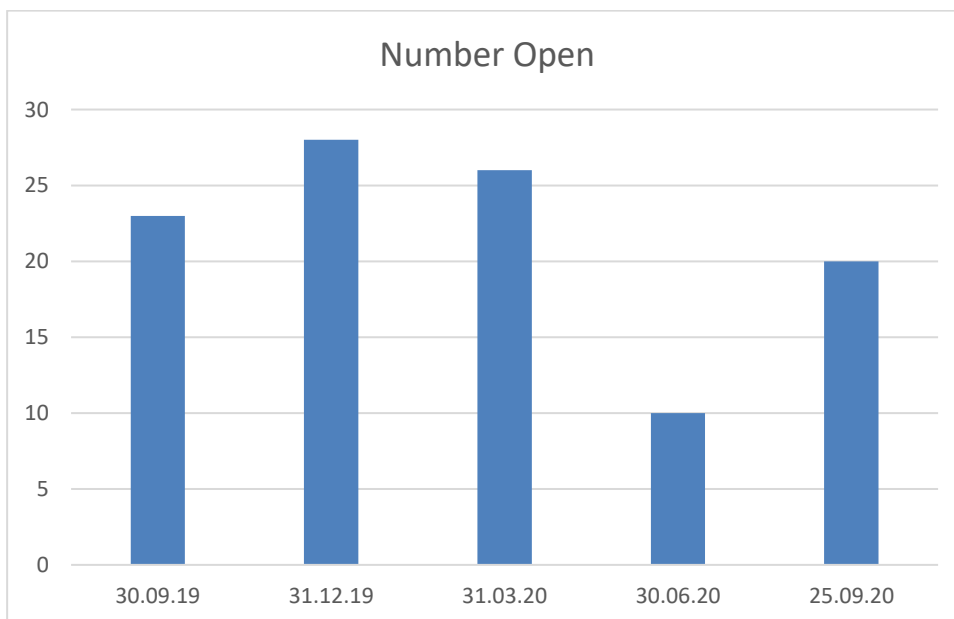


Of the complaints closed this quarter, there has been a substantial increase in those closed with their timeframes.

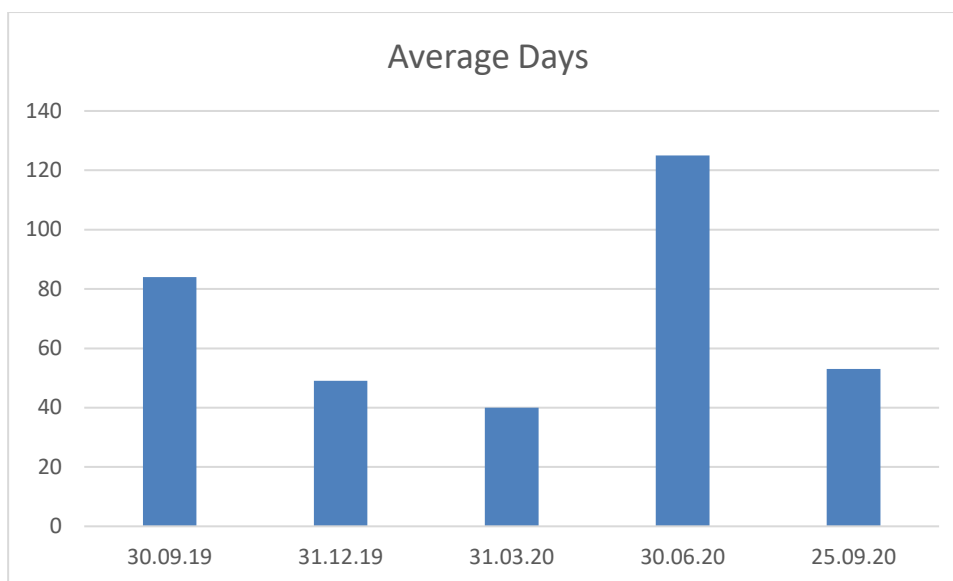
4.13 Outstanding NHS Complaints

The graph below shows that there has been a decrease in the amount of NHS complaints that are overdue in the past year and with new staff working on the complaints, this could continue into next quarter.

Graph 5 - Snapshot of number of open overdue NHS complaints at a given date



Graph 6 - Snapshot of average length in working days of overdue NHS complaints at a given date



The above graph shows that the average length of overdue complaints has decreased back down to a manageable level. This shows the work ongoing to complete the backlog of overdue complaints.

Discussions are still taking place with NHS Tayside to identify how we can improve our complaint response times. However, our plan to trial a more robust and effective complaints system has been put on hold due to the current pandemic.

5.0 INTEGRATION JOINT BOARD COMPLAINTS

5.1 No complaints about the Integration Joint Board have been received.

6.0 POLICY IMPLICATIONS

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

7.0 RISK ASSESSMENT

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

8.0 CONSULTATIONS

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

9.0 BACKGROUND PAPERS

9.1 None.

Dave Berry
Chief Finance Officer

DATE: 11 January 2021