



REPORT TO: PERFORMANCE AND AUDIT COMMITTEE – 30 April 2025

REPORT ON: QUARTERLY FEEDBACK REPORT – 4th QUARTER 2024/25

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC16-2025

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise feedback received for the Health and Social Care Partnership (HSCP) in the fourth quarter of 2024/25. 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 Note the complaints handling performance for health and social work complaints set out within this report.
- 2.2 Note the work which has been undertaken to address outstanding complaints within the HSCP and to improve complaints handling, monitoring, and reporting.
- 2.3 Note the recording of Planned Service Improvements following complaints that are upheld or partially upheld.
- 2.4 Note the work ongoing to implement Care Opinion as a feedback tool for all services in the Health and Social Care Partnership.

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

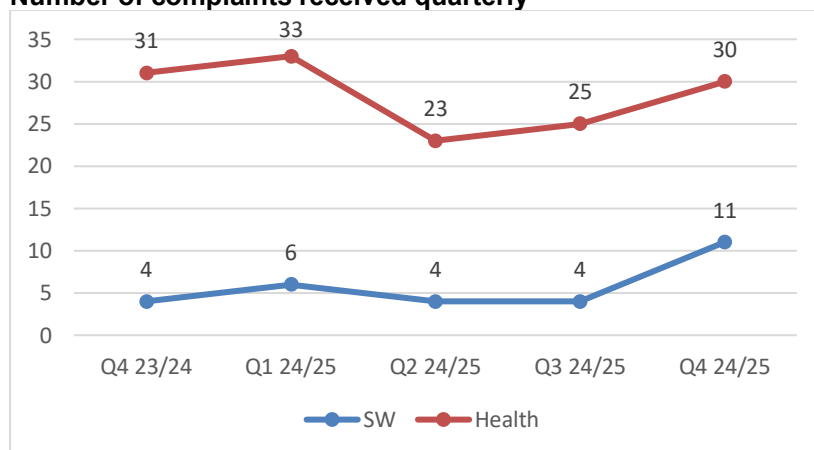
- 4.1 Since the 1st April 2017 both NHS and social work complaints follow the Scottish Public Service Ombudsman Model Complaint Handling Procedure. Both NHS Tayside Complaint Procedure and the Dundee Health and Social Care Partnerships Social Work Complaint Handling Procedures have been assessed as complying 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.
- 4.4 Please note that not all figures will add up to 100% due to data quality issues within the data provided from the corporate complaints systems (for example, missing fields) .
- 4.5 Whilst the SPSO mandatory complaint reporting categories only apply to non-NHS complaints the Health and Social Care Partnership has committed to providing a cohesive complaint report that supports IJB members to compare complaints activity and outcomes across the multiple processes as easily as possible. Therefore, NHS complaints have been included in the same category of reporting. However, there are some difficulties in gaining timeous access to the NHS complaint data to allow categorisation to be undertaken and reported.

5 Complaints Received

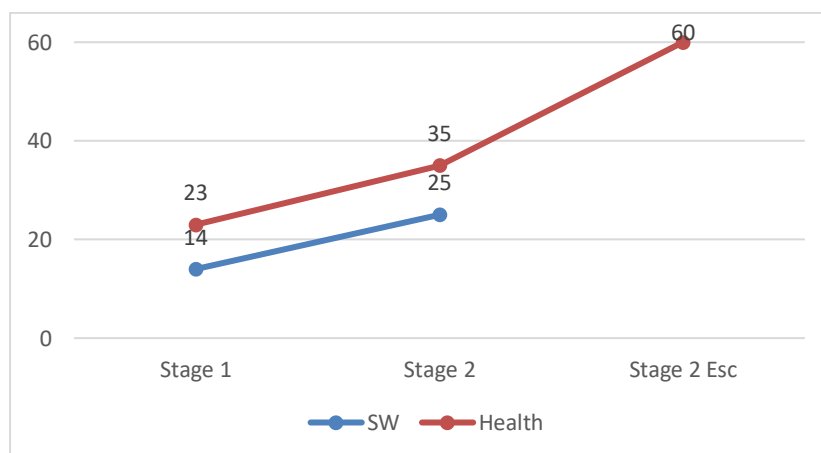
- 5.1 In the last quarter of 2024/25 a total of 11 complaints were received about social work or social care services, which is the highest within quarterly number within the last year.
- 5.2 Health received 30 complaints for Q4 within in the Dundee Health and Social Care Partnership.

Number of complaints received quarterly



The graph shows that both social work and health complaints have seen an increase in complaints received this quarter.

5.3 Average Days to Respond



The graph indicates that complaints are not being responded to within timescales (Stage 1 – 5 days with potential to extend to further 10 days and Stage 2 – 20 days with potential to extend further).

5.4 Complaints Stages – Closed within Timescale

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

Stage 1	Q4 2023/24		Q1 2024/25		Q2 2024/25		Q3 2024/25		Q4 2024/25	
Social Care	1	50%	2	67%	1	33%	0	0%	4	44%
Health	14	78%	16	89%	9	90%	11	79%	8	62%

There has been a significant decrease in Social Care Stage 1 complaints closed within timescales for the last quarter.

5.5 Stage 2 complaints are completed within 20 working days and can be extended also.

Stage 2	Q4 2023/24		Q1 2024/25		Q2 2024/25		Q3 2024/25		Q4 2024/25	
Social Care	5	71%	1	100%	1	33%	0	0%	0	0%
Health	3	23%	7	39%	9	47%	13	45%	7	25%

5.6 This quarter has been difficult for both Health and Social Care to close complaints within timescales.

5.7 Feedback teams are working together and regularly reviewing open complaints to understand where improvements can be made in ensuring timescales can be met. However, due to the nature of our services, there will be complaints which cannot be completed within timescales due to their complexities.

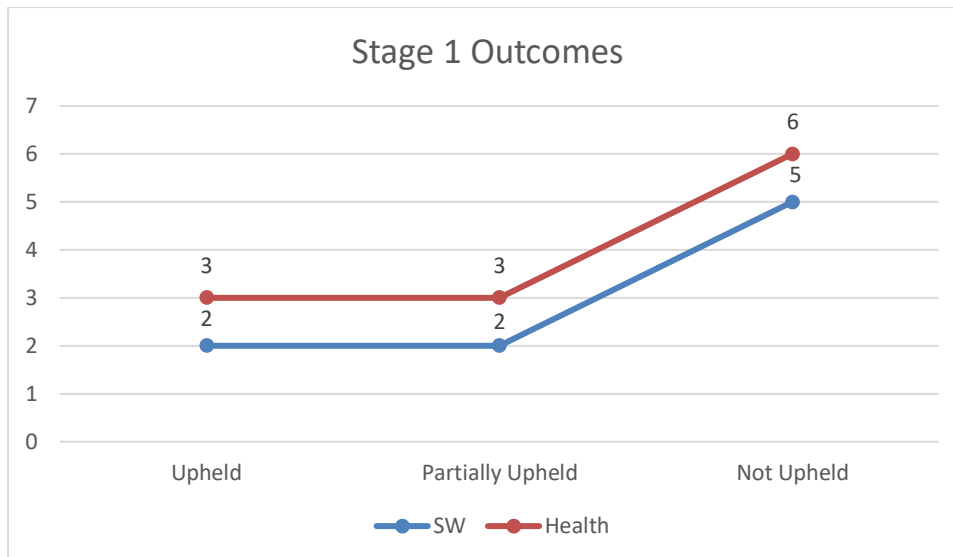
Regular communication with staff working on complaints, especially the overdue responses has been ongoing and are aware that where possible timeous responses should be sent.

There has also been discussion of the DHSCP complaints staff having access to Qlikview for easier access to complaints information and to improve complaints handling.

6 Complaint Outcomes

6.1 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.

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



7 Planned Service Improvements

7.1 There were 28 partially upheld or upheld complaints for social care and health which have all identified a cause and have service improvements planned to address these. By putting these planned service improvements in place, the Partnership aims to minimise complaints of the same nature being received.

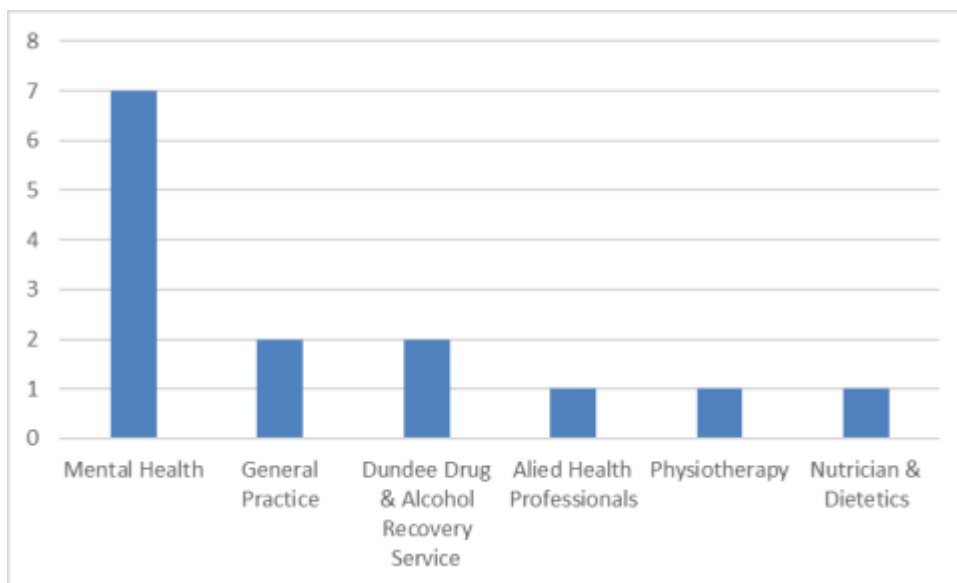
7.2 An example of this is complaints which were received regarding invoicing for college support, charges had never been discussed with the families involved due to lack of communication and process failures. A large volume of invoices were sent together to the affected families, some just before Christmas which caused considerable distress to the complainants.

As a result, processes have been put in place where staff are fully aware of the cost for this support and can provide information to families to make a more informed decision. New processes have also been introduced within Finance to ensure that invoices are sent in a timeous manner.

8 Open Complaints

	Total Open	20 days or less	21-39 days	40-99 days	100 days +	180 days +	Average Days
Social Care	Not available currently due to change to IT system						
Health	14	8	2	3	1	0	27

Open Health Complaints by Service Area



8.1 Health open complaints are now being managed with weekly meetings taking place to discuss developments and issues with a small selection of staff across the service.

8.2 Seven of the open complaints currently sit within the Mental Health Service which by the nature of the service are more complex and can take longer to resolve.

8.3 Social Work complaints have moved to a new Dundee City Council IT system and at present we are unable to extract the open data in a concise manner to be able to provide reporting.

8.4 There is currently one complaint with the SPSO.

9 Compliments

9.1 No new compliments have been received. This will be developed further using Care Opinion.

10 IJB Complaints

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

11 Care Opinion

11.1 Dundee Health and Social Care Partnership has subscribed to the Care Opinion platform and work is underway with a small team to develop and implement the system within all service areas across the partnership.

11.2 The new Dundee City Council IT system for complaint management, used to manage Social Work complaints, went live on 1st April, feedback is being provided to IT regarding the operation of the new system to inform further improvements to the system. Training has been provided to staff and short "How to" guides developed. As yet, reporting functions within the new IT system are not available.

12 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 RISK ASSESSMENT

- 13.1 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.

14 CONSULTATIONS

The Chief Officer, Acting Head of Strategic Services and the Clerk were consulted in the preparation of this report.

15 BACKGROUND PAPERS

None

Christine Jones
Acting Chief Finance Officer

DATE: 24 April 2025

Cheryl Russell
Customer Care and Governance Officer

Clare Lewis-Robertson
Lead Officer