



**REPORT TO:** PERFORMANCE AND AUDIT COMMITTEE – 20 NOVEMBER 2024

**REPORT ON:** QUARTERLY FEEDBACK REPORT – 2<sup>nd</sup> QUARTER 2024/25

**REPORT BY:** CHIEF FINANCE OFFICER

**REPORT NO:** PAC40-2024

## **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 second 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 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 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**

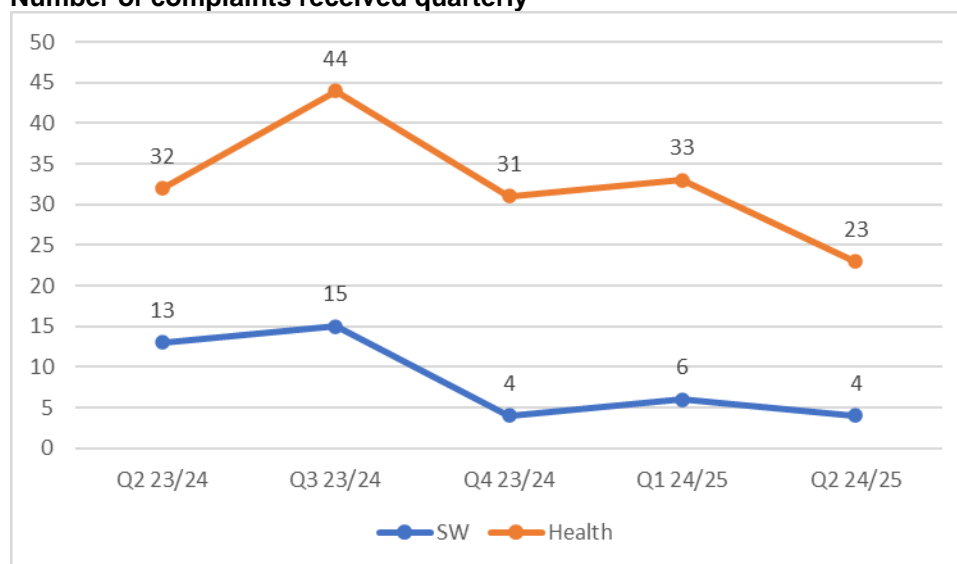
- 4.1 Since the 1<sup>st</sup> April 2017 both NHS and social work complaints follow the Scottish Public Service Ombudsman Model Complaint Handling Procedure. Both NHS Tayside Complaint Procedure and the Dundee Health and Social Care Partnerships Social Work Complaint Handling Procedures have been assessed 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 missing data or different Recordings.
- 4.5 Whilst the SPSO mandatory complaint reporting categories only apply to non-NHS complaints as a Health and Social Care Partnership we have always felt it important to provide a cohesive complaint report so we can compare like for like. Therefore, we have included NHS complaints in the same category of reporting. However, we have experienced difficulties in gaining timeous access to the NHS complaint data.

## 5 Complaints Received

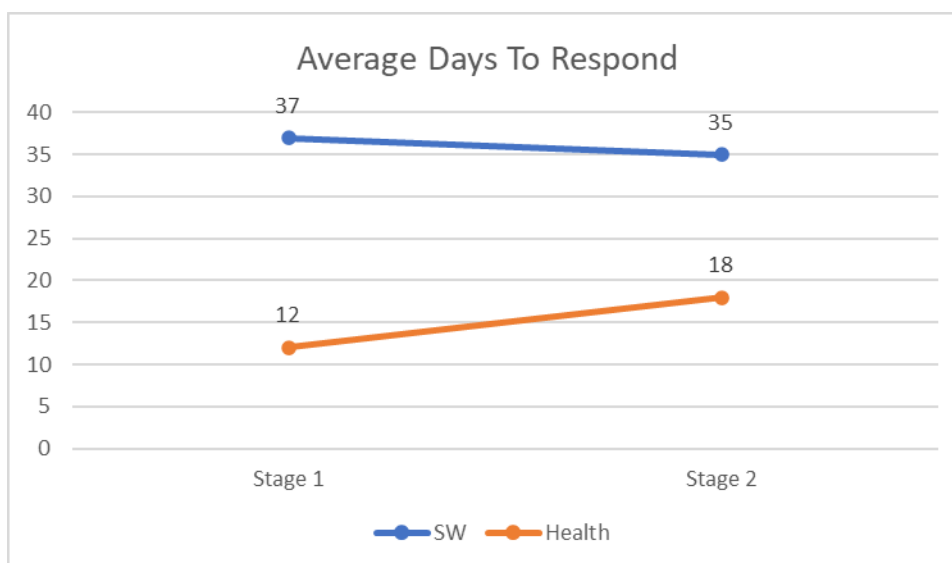
- 5.1 In the second quarter of 2024/25 a total of four complaints were received about social work or social care services.
- 5.2 Health received 23 complaints for Q2 within in the Dundee Health and Social Care Partnership.

**Number of complaints received quarterly**



- 5.3 The graph shows that both types of complaints have seen a decrease in complaints received this quarter.

#### 5.4 Average Days To Respond



5.5 There were no escalated complaints for this quarter across both Health and Social Work.

5.6 The graph indicates that Social Work complaints are not being responded to within timescales.

#### 5.7 Complaints Stages – Closed within Timescale

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

| Stage 1     | Q2 2023/24 |     | Q3 2023/24 |     | Q4 2023/24 |     | Q1 2024/25 |     | Q2 2024/25 |     |
|-------------|------------|-----|------------|-----|------------|-----|------------|-----|------------|-----|
| Social Care | 8          | 67% | 6          | 50% | 1          | 50% | 2          | 67% | 1          | 33% |
| Health      | 9          | 75% | 10         | 59% | 14         | 78% | 16         | 89% | 9          | 90% |

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

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

| Stage 2     | Q2 2023/24 |      | Q3 2023/24 |     | Q4 2023/24 |     | Q1 2024/25 |      | Q2 2024/25 |     |
|-------------|------------|------|------------|-----|------------|-----|------------|------|------------|-----|
| Social Care | 13         | 54%  | 4          | 80% | 5          | 71% | 1          | 100% | 1          | 33% |
| Health      | 6          | 100% | 12         | 60% | 3          | 23% | 7          | 39%  | 9          | 47% |

5.11 Both Health and Social Care Stage 2 complaints have seen a significant decrease in being closed within timescales.

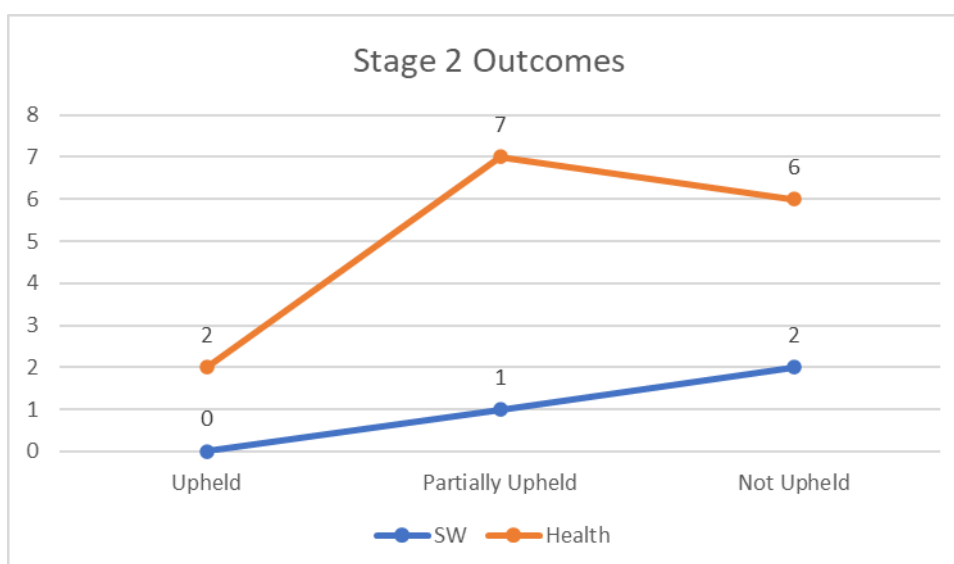
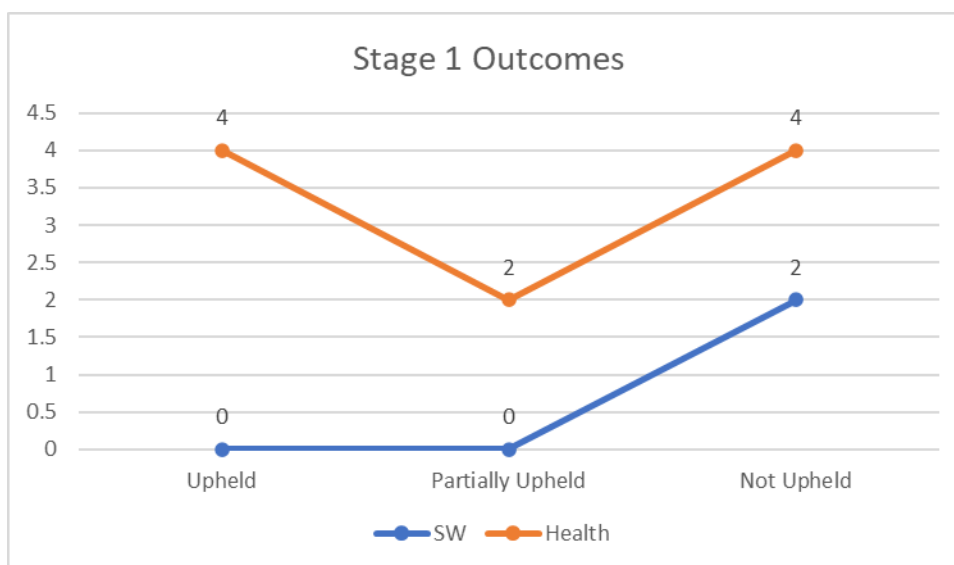
5.12 Feedback teams are working together and regularly reviewing open complaints to understand where improvements can be made in ensuring timescales can be met. However, due to the nature of our services, there will be complaints which cannot be completed within timescales due to their complexities.

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 16 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, we look to minimise complaints of the same nature being received.
- 7.2 This is a reduction from last quarter where a total of 26 complaints were either upheld or partially upheld.

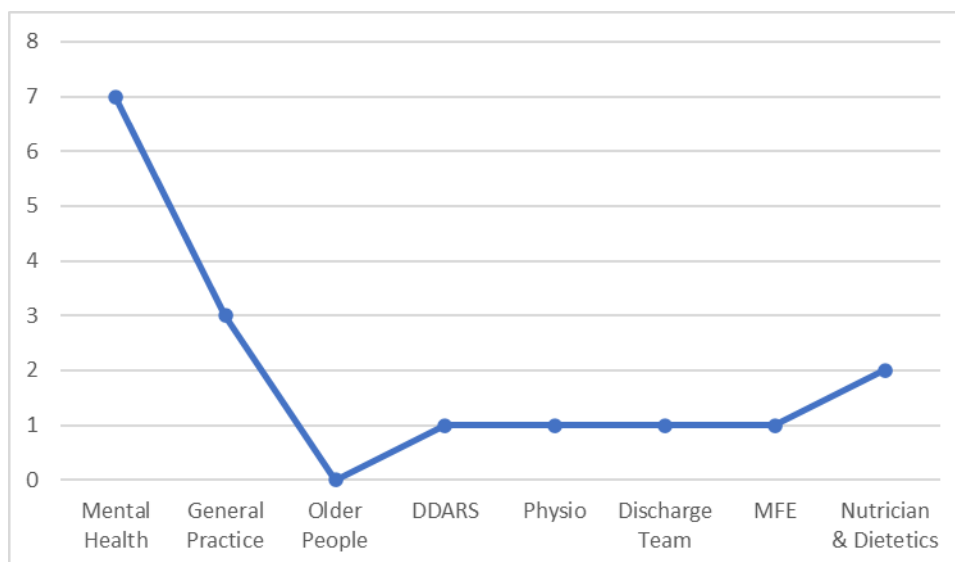
- 7.3 An example of this is a complaint which was received regarding issues with guardianship and medication amongst other things and was very complex to investigate. Initially this came in online as a query and was dealt with as such. During the course of the investigation, the team took on board that they hadn't recognized this as a complaint and that they would learn from this for any future correspondence of this nature.

## 8 Open Complaints

|        | Total Open | 20 days or less | 21-39 days | 40-99 days | 100 days + | 180 days + | Average Days |
|--------|------------|-----------------|------------|------------|------------|------------|--------------|
| SW     | 7          | 4               | 0          | 1          | 0          | 1          | 52           |
| Health | 16         | 9               | 4          | 3          | 0          | 0          | 23           |

- 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 Eight 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 The longest open complaint (65 days) within Health sits with General Practice Services and is a stage 2 complaint.
- 8.4 The longest open complaint (212 days) within social care is a stage 2 and is sitting with the Mental Health Service. This complaint is particularly complex and the complainant has added to the complaint on several occasions. Regular contact has been made with the Investigating Officer and updates to the system made where required. Senior Management are aware.
- 8.5 There are currently three complaints with the SPSO.

### 8.6 Snapshot of Health open complaints across services



## 9 Compliments

- 9.1 No new compliments have been received. This will be developed 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 our service area.
- 11.2 Training for the system is underway and includes introduction sessions for all staff.

## **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 and the Clerk were consulted in the preparation of this report.

## **15.0 BACKGROUND PAPERS**

None

Kathryn Sharp  
Acting Head of Service, Strategic Services

DATE: 24 October 2024

Cheryl Russell  
Customer Care and Governance Officer

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Lead Officer