



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 24 SEPTEMBER 2019

REPORT ON: QUARTERLY COMPLAINTS PERFORMANCE – 1st QUARTER 2019/20

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC39-2019

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise the complaints performance for the Health and Social Care Partnership in the first quarter of 2019/20, and to **highlight the proposed changes** to improve complaints reporting for the Performance and Audit Committee. 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 & 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
- 2.3 Notes the ongoing work taking place to improve complaints handling, monitoring and reporting within the Health and Social Care Partnership.

3.0 FINANCIAL IMPLICATIONS

None.

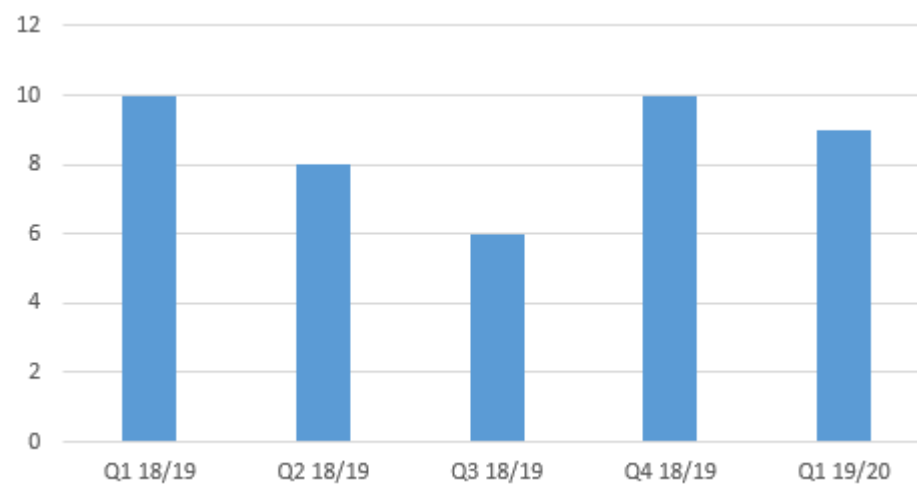
4.0 MAIN TEXT

- 4.1 Since the 1st April 2017 both NHS and social work complaints are required to 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 Social Work Complaints

In the first quarter of 2019/20 a total of 9 complaints were received about social work or social care services in the Dundee Health and Social Care Partnership. This compares to 10 complaints received in the previous quarter.

Graph 1 - Number of Social Work Complaints received quarterly



The graph shows that there is a relatively small number of complaints received each quarter.

4.4 Social Work Complaints by Reason for Concern

Three complaints were received about the attitude, behaviour or treatment by a member of staff. Three complaints were received about a delay in responding to enquiries and requests. These complaints were from a variety of services.

Attitude, behaviour or treatment by a member of staff	3
Delay in responding to enquiries and requests	3
Dissatisfaction with our policy	1
Failure to provide a service	1
Failure to follow the proper administrative process	0
Failure to meet our service standards	1

The numbers of social work complaints are relatively small, however in future complaints will be reported by specific service area if this suggests that there are issues that should be highlighted.

4.5 Social Work Complaints Stages and Outcomes

Four complaints were handled at a frontline resolution stage. Three of these complaints were partially upheld.

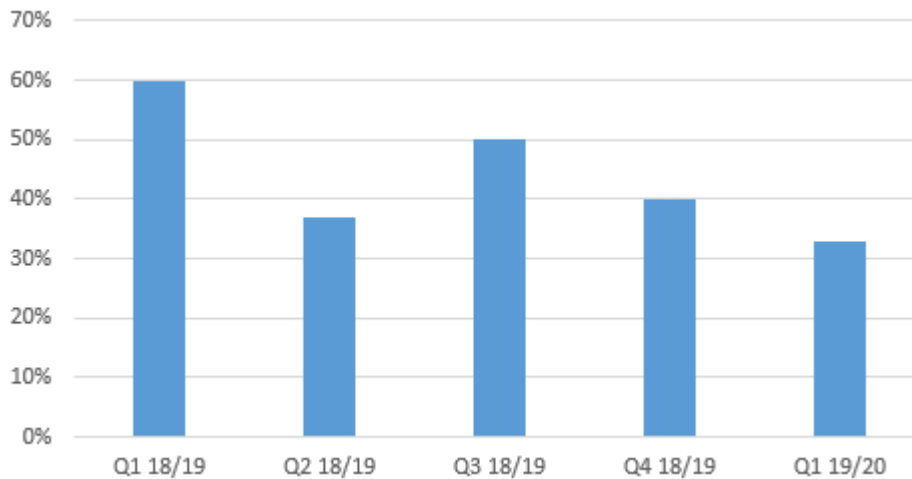
Five complaints were handled as an investigation from the start due to their complexities, none of these complaints were upheld.

Frontline Resolution	4
Investigation (Escalated from Frontline)	0
Investigation	5

4.6 Social Work Complaints Resolved Within Timescales

Four of the Social Work complaints received by the Partnership were able to be resolved within the target dates. The other five missed their target date, the longest delay was 18 days late.

Graph 2 - % of Social Work Complaints resolved within timescales



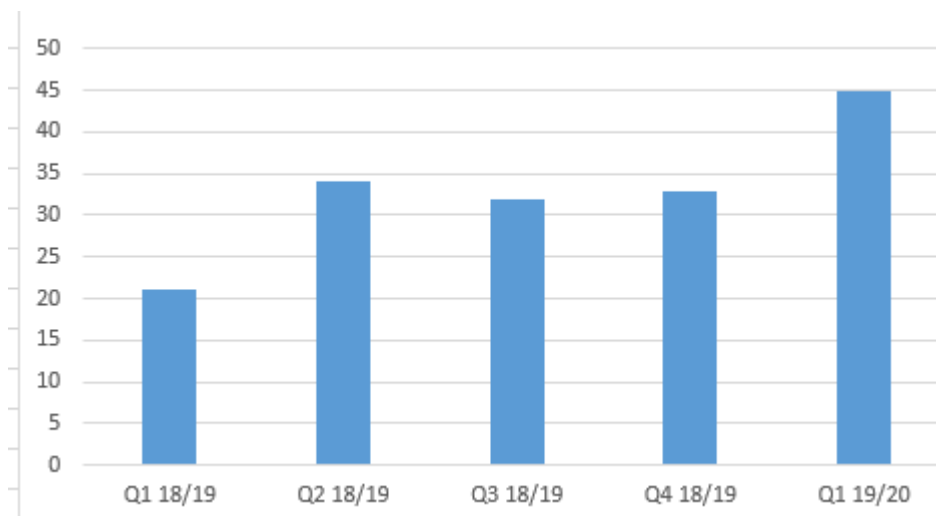
The graph shows that there has been a deterioration in the number of complaints that are resolved within timescales. Investigating Officers are reminded of the importance of ensuring that the complainant is kept updated with the progress of their complaint, and that wherever possible complaints should be resolved within the target date.

4.7 NHS Complaints

In the first quarter of 2019/20 a total of 45 complaints were received about Dundee Health and Social Care Partnership health services. These are complaints which have been coded against DHSCP, although there will be other complaints where DHSCP have contributed to a joint response:

This compares to 33 complaints received in the fourth quarter in 2018-19.

Graph 3 – Number of NHS Complaints received



The graph shows that there has been a gradual increase in the number of complaints received over the past year.

4.8 NHS Complaints by Theme

NHS complaint themes are recorded under categories. In this quarter the top themes were:

- Clinical Treatment;
- Attitude and Behaviour
- Date for Appointment

The top sub themes were:

- staff attitude;
- co-ordination of clinical treatment
- disagreement with treatment/care plan

Future reports will identify where there are complaints from specific service areas.

4.9 NHS Complaints Stages

Eleven complaints were handled at a frontline resolution stage. Seven were handled as Investigation, having been escalated from a frontline resolution, and 27 were handled as an investigation from the start due to their complexities.

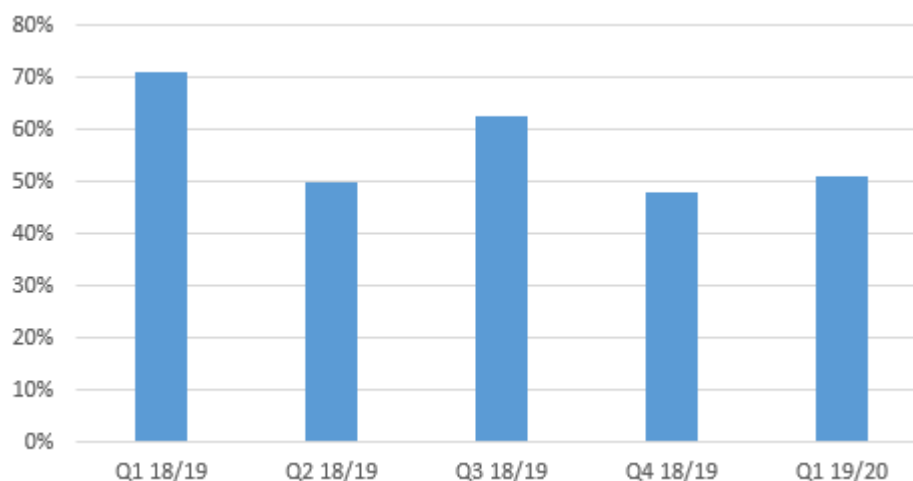
Frontline Resolution	11
Investigation (Escalated from Frontline)	7
Investigation	27

4.10 Closed NHS Complaints Resolved within Timescales

Out of a total of 45 complaints that were closed within the first quarter, 51% (23) were closed within timescales.

For Stage 1, 9 out of 11 complaints were closed within timescales. For Stage 2, 11 out of 27 complaints were closed within timescales. For Stage 2 escalated complaints, 3 out of 7 complaints were closed within timescales.

Graph 4 - % of closed NHS complaints closed within timescales



The graph shows that there has been a deterioration in the number of closed complaints closed within their target date. This has been due to a number of factors including staffing levels in specific service areas which has impacted on service delivery and resulted in more complaints being received. The reduced staffing levels have also meant that there have been a reduction in the number of managers able to handle complaints and an increased time taken to complete complaint investigations.

5.0 **Outstanding NHS Complaints**

5.1 It has been brought to our attention that information on NHS complaints taken from the NHS DATIX system has been based on complaints closed within that reporting quarter. This has meant that complaints that are overdue have not been reported to PAC until they were closed this means that reporting to PAC has been given no information about the status of current or outstanding complaints.

As at 13th September 2019 there are 27 outstanding NHS complaints, 14 of which are over 6 weeks old. The average length of overdue complaint is 111 days. There are different reasons why a complaint may be late in being resolved, including not having received consent from the patient to share information where a complaint is made on their behalf by a third party.

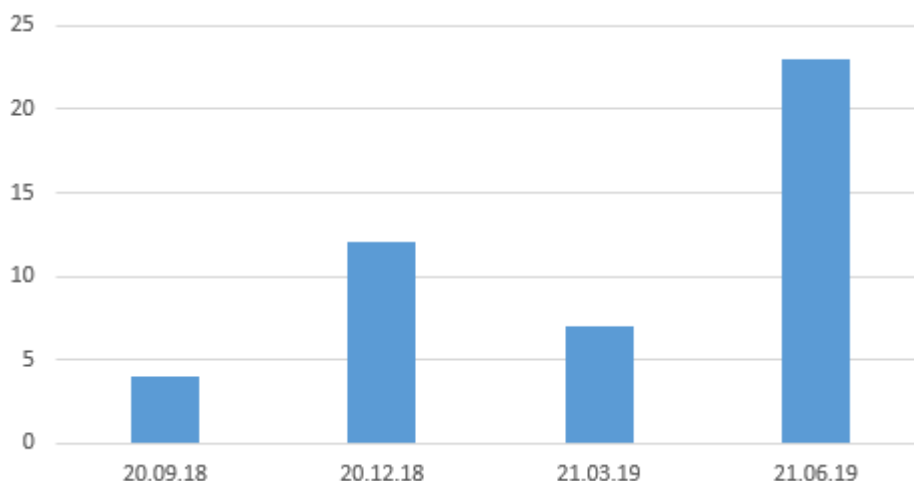
Total number of outstanding complaints	27
Complaints outstanding 0-28 days	9
Complaints outstanding 29-60 days	8
Complaints outstanding 61-120 days	8
Complaints outstanding 121+ days	2

Operationally, live information is used to track and escalate complaints responses.

As the PAC will be aware the Community Mental Health teams for adults has experienced significant operational challenges over a long period with posts vacant and a shortage of community doctors. This is a problem nationally as well as locally. As a result we have been providing a service that is less responsive than we would want it to be. The impact of this has been an increase in complaints and a reduced capacity to respond to them. Through the appointment of manager roles recently there is now capacity to address complaints and this is starting to reduce. The service challenges are ongoing and there is significant work happening to try and improve the situation and detailed action plans in place

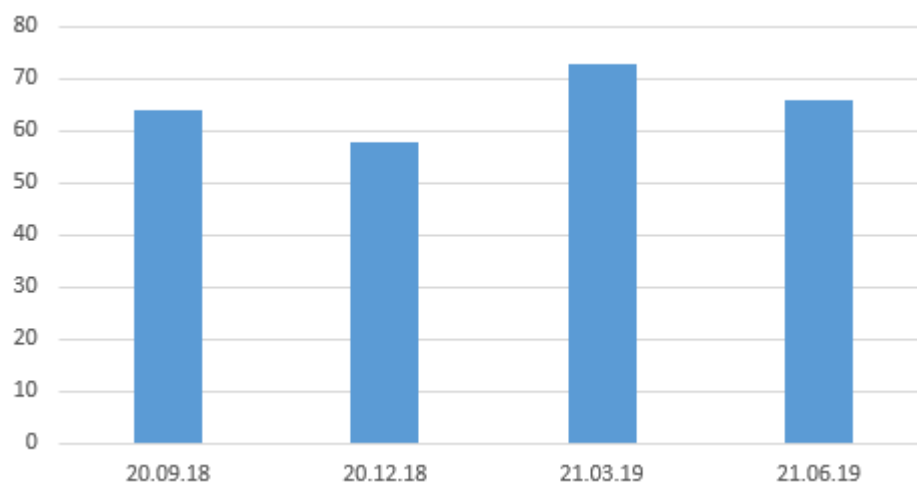
We anticipate that as the number of overdue health complaints are closed we will see a deterioration in the % of closed NHS complaints closed within timescales. However this will be seen in conjunction with a reduction in the number of overdue open complaints.

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



The above graph shows that there has been a significant increase in the amount of NHS complaints that are overdue in the past year.

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 remained relatively static over the past year.

5.2 Future Complaints Monitoring and Reporting

Work is ongoing within the Partnership to integrate our complaints administration systems, we are working with colleagues in NHS Tayside to identify areas where we can improve our complaint handling processes.

A number of meetings have been planned to take forward improvement in our complaints monitoring processes, clarifying reporting processes and ongoing monitoring of open complaints. This will form part of our clinical and care governance framework. Reporting to PAC will be considered as part of this work.

These improvements will include:

- Progress with current complaints
- Monitoring complaint response timescales
- Quality control re complaint responses
- Complaint handling training
- Planned service improvements as a result of complaints
- Wider service lessons from complaints
- SPSO feedback

5.3 IJB Complaints

No complaints about the Integration Joint Board have been received.

6.0 POLICY IMPLICATIONS

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

7.0 RISK ASSESSMENT

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

8.0 CONSULTATIONS

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

9.0 BACKGROUND PAPERS

None.

Dave Berry
Chief Finance Officer

DATE: 16 September 2019