West Dunbartonshire
Health & Social Care Partnership

Annual Complaints Report 2024/2025

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Introduction

West Dunbartonshire Health and Social Care Partnership (HSCP) aims to provide the best services possible for our citizens, however there will be instances where people feel dissatisfied with, or let down by, the service they receive. As an organisation we value any and all feedback we receive. Making a complaint to the HSCP gives us the opportunity to put things right for individuals and to improve our services. By investigating complaints and looking at any trends or patterns in complaints received, we can identify areas for improvement, gaps in service provision, training needs within the organisation or where particular groups may be experiencing similar dissatisfaction with our services. Often complaints can give us a fresh perspective: identifying issues or problems which we, working within the organisation, have not fully considered from a service user's point of view.

How we handle our complaints is essential to restoring positive relationships with people who feel let down by our services. This report will outline how we handled complaints during the period 1st April 2024 to 31st March 2025.

Model Complaints Handling Procedures

All public authorities in Scotland are required to produce, operate and report on a Model Complaints Handling Procedure (MCHP) in line with the Scottish Public Services Ombudsman's MCHP and Performance Framework.

There are two stages to both the Council and NHS MCHPs:

Stage 1 Frontline Resolution

We aim to respond to complaints quickly. This could mean an on-the-spot apology and explanation if something has clearly gone wrong, or immediate action to resolve the problem. We will respond to a stage 1 complaint within five working days or less, unless there are exceptional circumstances. If the person making the complaint is not satisfied with the response they are given at this stage, they can choose to take their complaint to stage 2.

Stage 2 Investigation

Stage 2 deals with two types of complaint: those that have not been resolved at stage 1 and have been escalated to stage 2; and those complaints that clearly require investigation and so are handled from the onset as stage 2.

For a stage 2 we will acknowledge receipt of the complaint within three working days and provide a full response as soon as possible, normally within 20 working days. If our investigation will take longer than 20 working days, we will inform the person making the complaint of our revised time limits and keep them updated on progress.

Complaints about the functions and operation of West Dunbartonshire Health and Social Care Partnership Board are dealt with through the HSCP Board's MCHP which was developed during 2020/21 and was approved by the Board at their meeting on 26th November 2020. The HSCP has a duty to report on any complaints managed under the HSCP Board's MCHP. There were no complaints received about the functions of the HSCP Board during 2024/25.

When a complaint is received by West Dunbartonshire HSCP about our services, and not the functions of the HSCP Board, a decision is taken whether to process the complaint under either West Dunbartonshire Council's MCHP or NHS Greater Glasgow and Clyde's MCHP, depending on which service areas are covered. For example a complaint about service provided by Children's Social Work Services would be managed under the Council's MCHP but a complaint about a Psychiatry service would be managed under the NHS MCHP. West Dunbartonshire Council and NHS Greater Glasgow and Clyde will include these HSCP complaints in their Annual Complaints Reports however in the interests of openness and transparency and to fully reflect on the HSCP's handling of complaints they will also be included in this report.

SPSO Performance Framework

The Scottish Public Services Ombudsman (SPSO) has developed a standardised set of complaints performance indicators which organisations are required to use to understand and report on performance in line with the MCHP. The consistent application and reporting of performance against these indicators will also be used to compare, contrast and benchmark complaints handling with other organisations, and in doing so will drive shared learning and improvements in standards of complaints handling performance.

Indicator 1: Learning From Complaints

Complaints are routinely reported to our Senior Management Team, through the HSCP's Clinical and Care Governance meetings and within the HSCP's Quarterly Performance Reports to our Audit and Performance group. These reports cover volume of complaints, compliance with timescales and outcomes by service area. Further detail at this level is available at Appendix 1. Detail is also provided about the nature of each complaint by theme and any actions taken as a result of the complaint investigation and resolution.

Complaints are also discussed within team meetings and are used as opportunities for reflective learning and peer support. They feed into service and process redesigns across the HSCP and are also considered as part of Care Inspectorate inspections.

During 2024/25 learning from complaints contributed to the following agreed actions:

New process in place for arranging respite within Health and Community Care and staff allocated specifically to respite.

All internal Care at Home staff have been reminded of their responsibilities when supporting people to take their medication. This includes ensuring they observe medication being taken whilst they are present.

Summary of actions taken requested from commissioned Care at Home service.

Exclusions placed on Care at Home scheduling system to ensure continuity of care.

Failure in communication systems within Community Mental Health Services addressed.

Actions taken via reflective practice and supervision sessions within the Riverview Clinical Team.

Worker has undertaken a review of relevant literature to promote understanding of a specific condition.

Additional training for all Riverview staff around customer service and ensuring that all calls are logged on the electronic system correctly.

Reablement Team asked to ensure that visits are planned in conjunction with the service user and to provide a clear explanation of the purpose of the visit and the names and job titles of those who will be visiting.

Senior Social Workers within Adult Services advised to clearly articulate their role in "choices" meetings, where individuals and their family discuss care home options.

Staff put forward for further training to address poor communication/responses.

Indicator 2: Volume of Complaints Received

This indicator counts all stage 1 complaints, whether they were escalated to stage 2 or not, plus all complaints which were treated on receipt as stage 2. West Dunbartonshire HSCP received a total of 359 complaints during 2024/25 however two stage 2 complaints were withdrawn and a further stage 2 could not be responded to due to the failure to provide a mandate in relation to a complaint raised on behalf of a third party. This is a 24% increase on the 290 complaints received in 2023/24.

Stage 1 complaints increased from 214 in 2023/24 to 279 in 2024/25. This may be due to improvements in frontline recording. Stage 2 complaints saw a small increase, from 76 in 2023/24 to 80 in 2024/25. The greatest increase in stage 1 complaints was for Health and Community Care followed by Musculoskeletal (MSK) Physiotherapy. The largest increase in stage 2 complaints was for Mental Health, Learning Disability and Addictions. Stage 1 complaints relating to Children's Health, Care and Justice were almost half those in 2023/24.

Indicator 3: Complaints Closed Within Timescale

Stage 1 complaints: 279 stage 1 complaints received. The accurate recording of stage 1 complaints, their outcomes and timescales across both West Dunbartonshire Council and NHS Greater Glasgow and Clyde systems is still in development and we are exploring ways to streamline recording and reporting mechanisms and to more accurately and efficiently track timescales.

For those stage 1 complaints that were not referred through the Information Team, who manage complaints, but made directly with frontline services, it would be anticipated that most would be dealt with as they arose however we do not yet have the data to evidence this.

Stage 2 complaints: 59% were closed within 20 working days, 47 of the 80 investigated. Complex complaints that cut across services often take longer to co-ordinate a response. We endeavour to keep people informed of any extension to timescales required to make a full response however this has not been carried out in every case during 2024/25.

Complaints escalated from stage 1 to stage 2: There were 2 complaints recorded as escalated from stage 1 to stage 2, however it is likely that many of the concerns within stage 2 complaints will have been raised with the service area involved in some form prior to the stage 2 complaints.

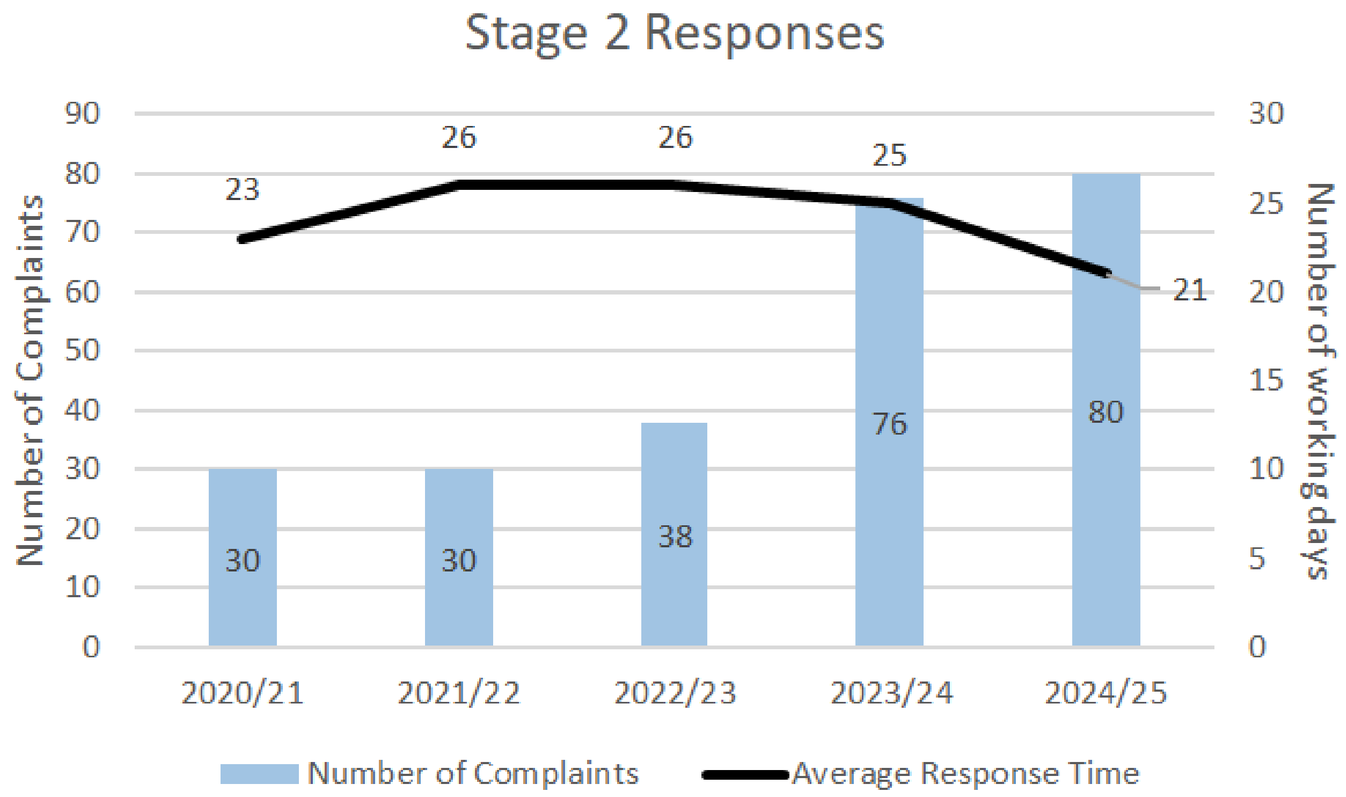
Indicator 4: Average Time to Full Response

Stage 1 complaints: Due to the gaps in recording we are unable to report this for stage 1 complaints.

Stage 2 complaints: The average time to full response was 21 working days, 4 days less than in 2023/24.

Complaints escalated from stage 1 to stage 2: The average time to full response was 12 days. There were no complaints recorded as escalated from stage 1 to stage 2 in 2023/24.

While the volume of complaints has increased, the average response time has decreased and this seems to be a trend. The developments discussed later in this report should help us maintain this trend going forward.



Indicator 5: Outcomes of Complaints

Stage 1 complaints: Due to the gaps in recording we are unable to report this for stage 1 complaints however those complaints which have not been escalated to stage 2 have been resolved in some way. The table below excludes the 3 complaints that did not proceed through the complaints process.

	Stage 2		Escalated to Stage 2	
Outcome	Number	%	Number	%
Upheld	6	8%	0	0%
Partially Upheld	15	20%	1	50%
Not Upheld	53	71%	1	50%
Ongoing	1	1%	0	0%
Total	75		2	

There are a further 3 indicators which are not required to be reported on but are recommended by the SPSO. These relate to raising awareness of complaints handling, lessons learned and identifying any barriers to making a complaint; staff training in frontline resolution, complaints handling and investigations; and customer satisfaction with their experience of making a complaint and their response.

The HSCP is committed to making the complaints experience as easy and accessible as possible and to use our complaints as a valuable resource to improve services for the people of West Dunbartonshire. During 2024/25 we have continued to work towards improving people's experience of making a complaint.

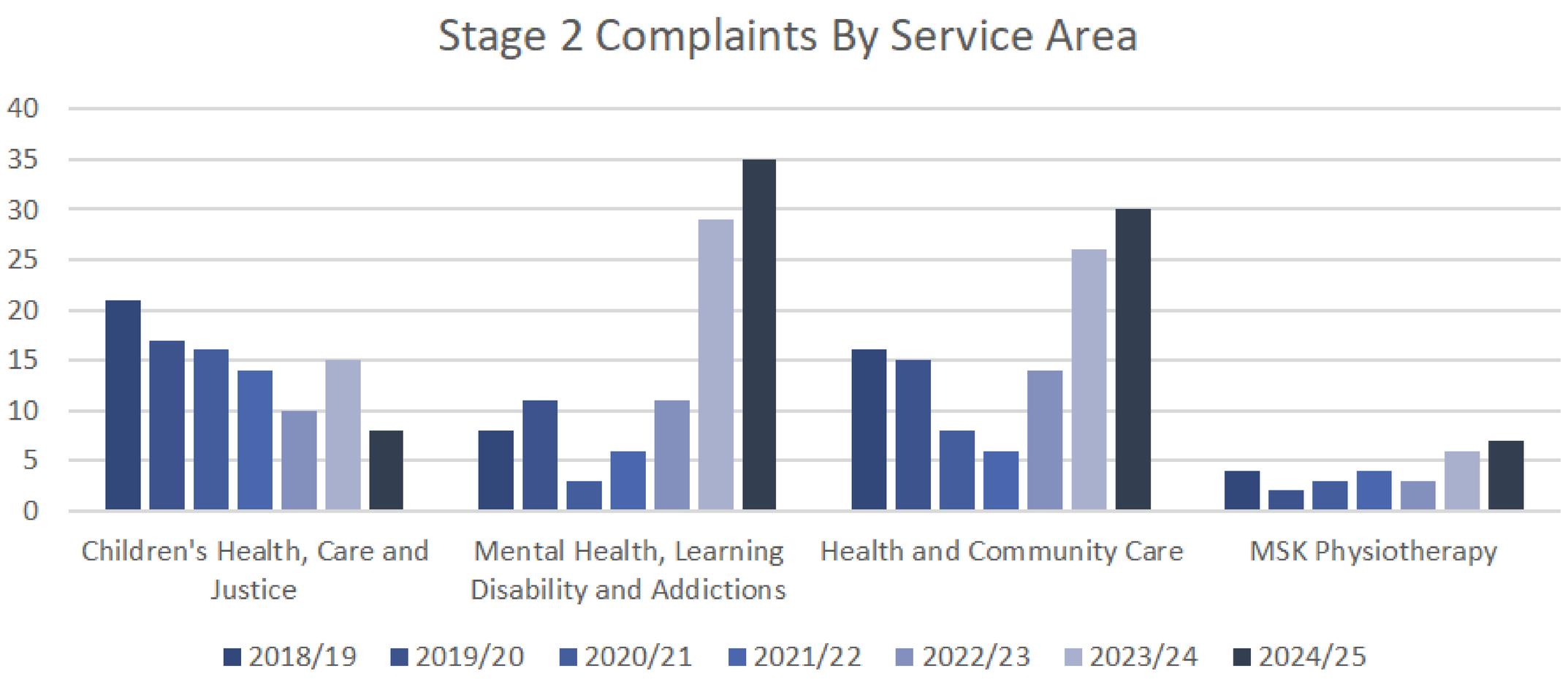
Building on the Complaints Overview sessions delivered in 2023/24 and the range of tools we have made available on our staff intranet, we have been working with West Dunbartonshire Council' s Complaints Team to explore options for use of a new recording system they are developing. Early demonstrations suggest this would be suitable for HSCP complaints, although we would need to tailor picklists for service areas and complaint themes to make them relevant to HSCP services.

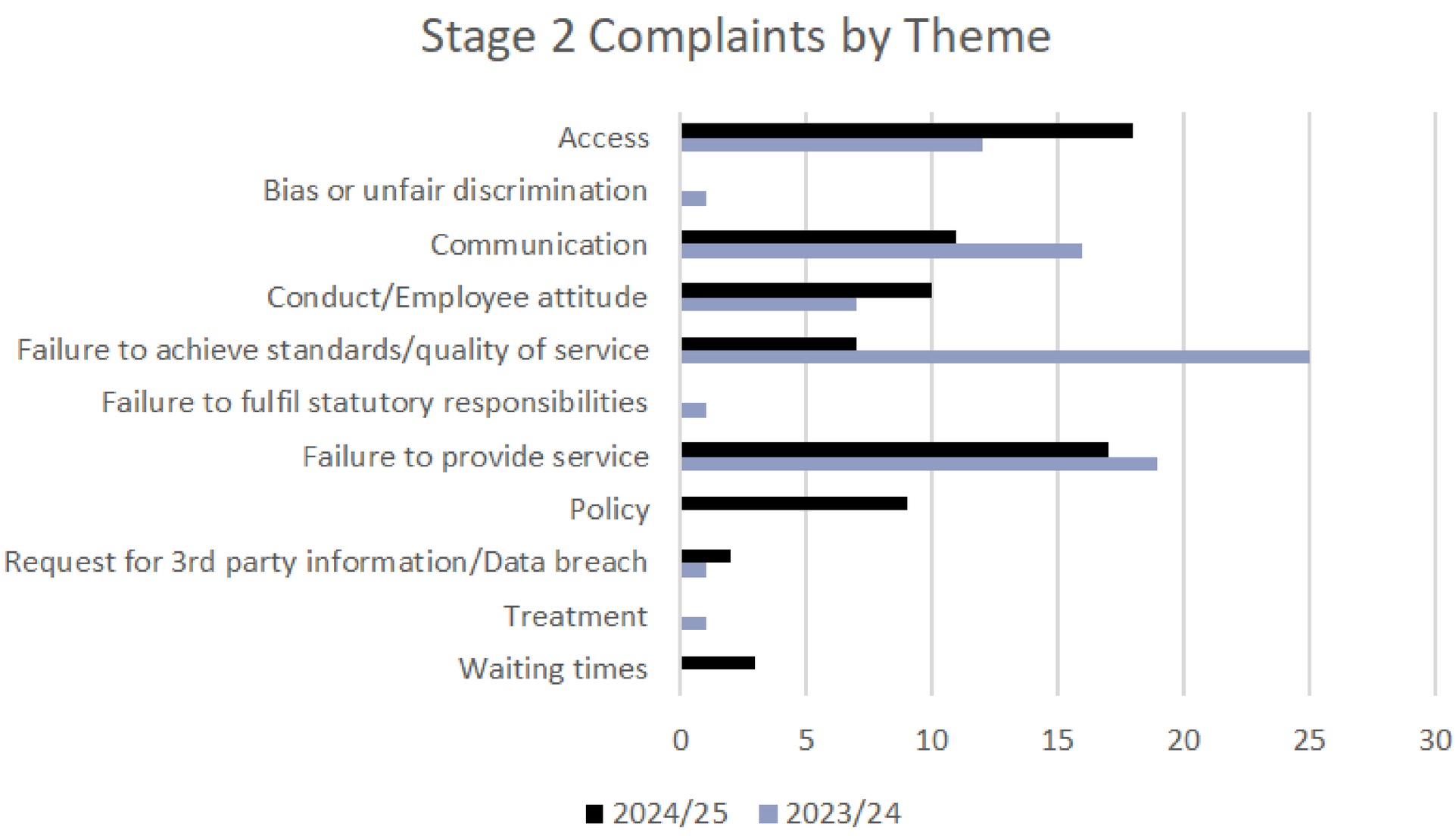
The system is able to track progress against timescales, hold progress notes and outcomes as well as highlighting where a complaint involves a child and the Child Friendly Complaints Handling Principles will apply. It can also flag up complaints approaching their deadline and should hopefully result in more timely responses for our citizens.

Reporting on complaints should also be improved using this system, particularly where complaints are escalated from stage 1 to stage 2 and to highlight themes, keywords and service areas where complaints may be trending to allow for more accessible and up-to-date scrutiny.

We will continue to progress this work with our Council colleagues during 2025/26.

Appendix 1: Stage 2 Complaints





Please note that complaints may cover more than one theme.

Upheld Complaints

Service Area	Themes	Upheld	Partially Upheld
Children's Health, Care and Justice	Failure to achieve standards/ quality of service		1
	Data Breach/Communication		1
Health and Community Care	Communication		2
	Failure to achieve standards/Quality of service/Communication	1	1
	Failure to provide service/Failure to achieve standards/quality of service	2	2
	Failure to achieve standards/quality of service		1
	Employee Attitude		1
	Failure to provide service/Policy	2	1
	Request for 3rd Party Information	1	
Mental Health, Learning Disability and Addictions	Access		2
	Communication		1
	Failure to Provide service/Policy		2
	Failure to provide service/Failure to achieve standards/quality of service		1
		6	16