

Complaints Report

Quarter 4, 2017/2018

(1 January 2018 to 31 March 2018)

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Quarter 4 Executive summary and overview

	Q4	
Total complaints received	423	↑
Complaints acknowledged within set timescale	97.6%	↓
Complaints responded to within agreed timescale – formal investigation	82.3%	↓
Complaints responded to within agreed timescale – informal investigation	74.7%	↑
Proportion of complainants dissatisfied with our response (formal investigation)	8.2%*	

*January data only

Successes	Priorities
<ul style="list-style-type: none"> Complaints about ‘appointment administration issues’, which had previously been flagged as a concern in Q1 and Q2, fell again in Q4. Ward A700 received only one complaint in Q4, after receiving eight in Q3. Complaints about Radiology, Ward A700 and Sleep Unit fell in Q4. Following identification of a data reporting error from the Trust’s Datix system, dissatisfied data from February 2017 onwards has been recalculated since the last quarterly report. Revised data shows a reduction in dissatisfied complaint since June 2017. 	<ul style="list-style-type: none"> Re-focus on achieving target of sending at least 95% of responses to formal complaints within timescale agreed with complainant. Re-commence divisional complaints review panels (Women’s Services panel will meet in June). Implement any actions arising from internal audit of learning from complaints (draft report received in Q4).
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Key actions in the Patient Support and Complaints team’s work plan for 2018/19 include: <ul style="list-style-type: none"> Establishing twice yearly focus groups with previous complainants Reviewing the process for risk rating complaints Finalising and launching complaints toolkit jointly developed with the Patients Association Commencing reporting of complaints relating to equality themes to the Patient Inclusion and Diversity Group 	<ul style="list-style-type: none"> Complaints about the ‘cancelled/delayed appointments and operations’ rose sharply in Q4. Complaints about ‘appointments and admissions’ also rose in Q4, reversing a previous trend of reductions. Bristol Dental Hospital continued to receive relatively high levels of complaints in Q4. Complaints about Ward A300, Physiotherapy, Upper GI surgery and the Bristol Heart Institute Outpatient Department increased in Q4.

1. Complaints performance – Trust overview

1.1 Total complaints received

The Trust received 423 complaints in quarter 4 (Q4) of 2017/18. The total figure of 423 includes complaints received and managed via either formal or informal resolution (whichever has been agreed with the complainant)¹. This figure does not include concerns which may have been raised by patients and dealt with immediately by front line staff.

Figure 1 provides a long-term view of complaints received per month. With the notable exception of a special cause variation in April 2017, this graph shows a broadly consistent monthly complaints rate since the summer of 2016.

Figure 1: Number of complaints received

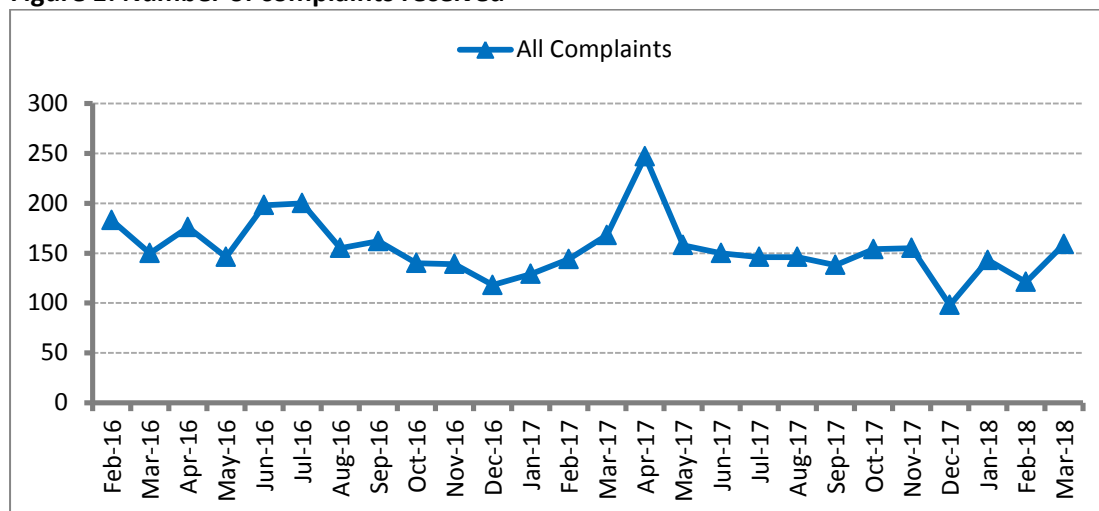
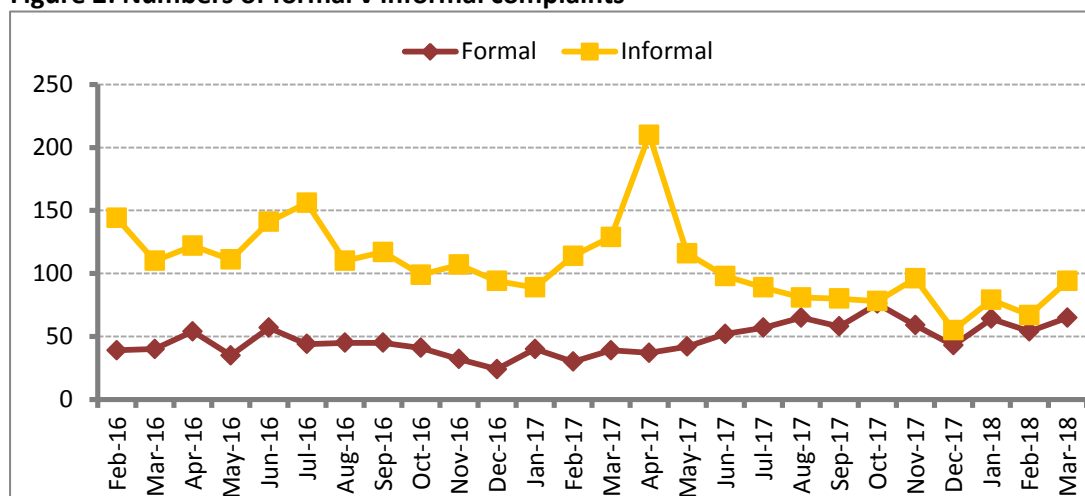


Figure 2 shows complaints dealt with via the formal investigation process compared to those dealt with via the informal investigation process, over the same period. We want to be addressing concerns raised as quickly and as close to the point of care as possible, so it is encouraging to see that the proportion of informal complaints, relative to formal complaints, increased at the end of Q4.

Figure 2: Numbers of formal v informal complaints



¹ Informal complaints are dealt with quickly via direct contact with the appropriate department, whereas formal complaints are dealt with by way of a formal investigation via the Division.

1.2 Complaints responses within agreed timescale

Whenever a complaint is managed through the formal resolution process, the Trust and the complainant agree a timescale within which we will investigate the complaint and write to the complainant with, or arrange a meeting to discuss, our findings. The timescale is agreed with the complainant upon receipt of the complaint and is usually 30 working days.

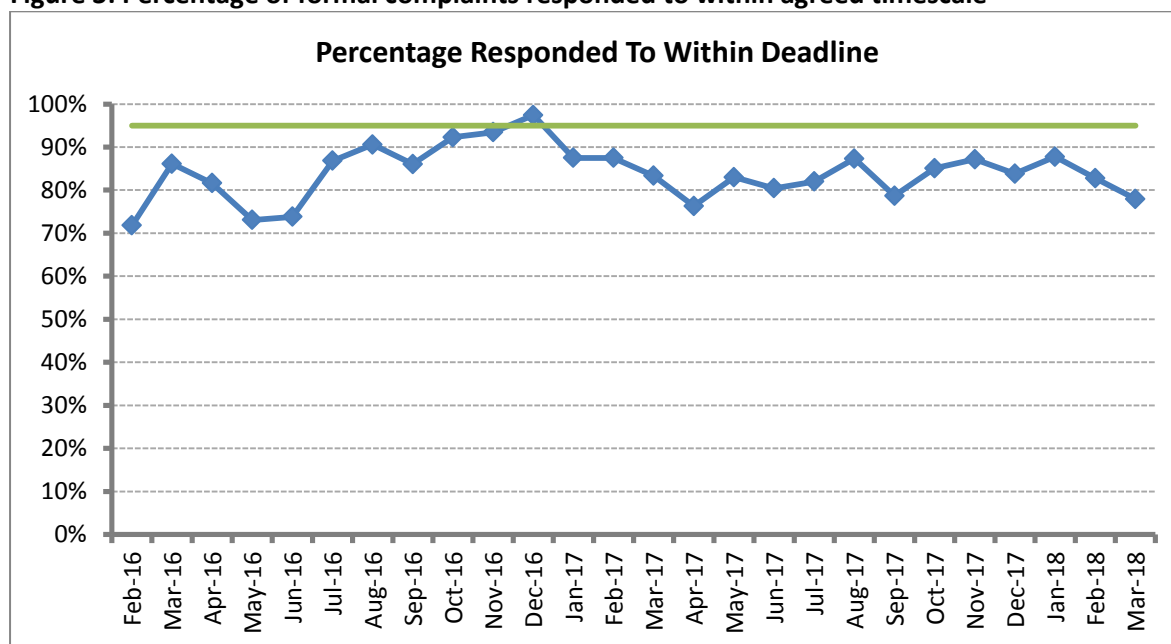
When a complaint is managed through the informal resolution process, the Trust and complainant also agree a timescale and this is usually 10 working days.

1.2.1 Formal Investigations

The Trust's target is to respond to at least 95% of complaints within the agreed timescale. The end point is measured as the date when the Trust's response is posted to the complainant.

In Q4 of 2017/18, 82.3% of responses were posted within the agreed timescale (compared with 85.4% in Q3). This represents 31 breaches out of the 175 formal complaints which received a response during the quarter². Figure 3 shows the Trust's performance in responding to complaints since February 2016.

Figure 3: Percentage of formal complaints responded to within agreed timescale



1.2.2 Informal Investigations

In Q4 2017/18, the Trust received 240 complaints that were investigated via the informal process. During this period, 178 informal complaints were responded to and 74.7% of these (133 of 178) were resolved within the time agreed with the complainant.

² Note that this will be a different figure to the number of complainants who *made* a complaint in that quarter.

1.3 Dissatisfied complainants

Our target is for less than 5% of complainants to be dissatisfied with our [formal] response to their complaint. This data is reported two months in arrears in order to capture the majority of cases where, having considered the findings of our investigations, complainants tell us they are not happy with our response.

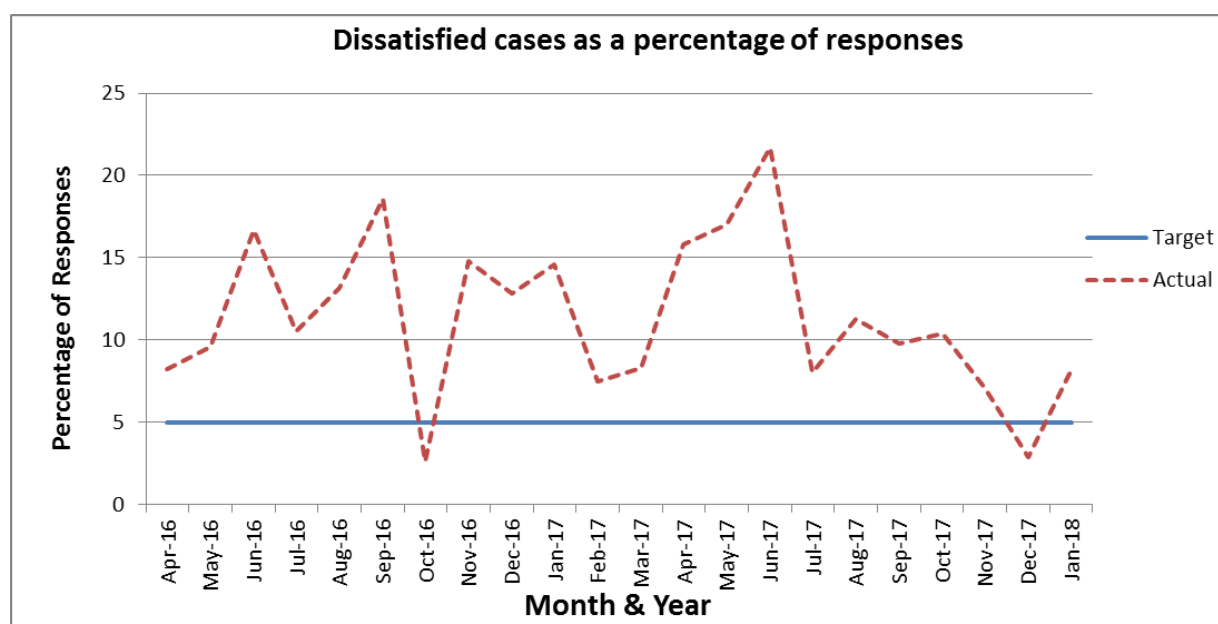
In Q4, by the cut-off point of mid-April 2018 (the point at which dissatisfied data for January was calculated for board reporting), four people who received complaints responses in January had contacted us to say they were dissatisfied. This represents 8.2% of the 49 responses sent out during January.

Figure 4 shows the monthly percentage of complainants who were dissatisfied with aspects of our complaints responses since April 2016.

Important note:

Following identification of a data reporting error from the Trust's Datix system, dissatisfied data from February 2017 onwards has been recalculated. The revised data is reflected in Figure 4, which shows an improving pattern since June 2017.

Figure 4: Dissatisfied cases as a percentage of responses



2. Complaints themes – Trust overview

Every complaint received by the Trust is allocated to one of eight major categories, or themes. Table 1 provides a breakdown of complaints received in Q4 2017/18 compared to Q3. In Q4, complaints about 'attitude and communication' fell but complaints about 'appointments and admissions' rose.

Table 1: Complaints by category/theme

Category/Theme	Number of complaints received in Q4 (2017/18)	Number of complaints received in Q3 (2017/18)
Clinical Care	123 (29.2% of total complaints) ↑	118 (29% of total complaints) ↓
Attitude & Communication	85 (20.1%) ↓	109 (26.8%) ↑
Appointments & Admissions	126 (29.8%) ↑	97 (23.8%) ↓
Information & Support	25 (5.9%) ↓	29 (7.1%) ↑
Facilities & Environment	26 (6.1%) ↑	23 (5.7%) ↑
Discharge/Transfer/Transport	25 (5.9%) ↑	16 (3.9%) ↑
Documentation	9 (2.1%) ↓	10 (2.5%) ↑
Access	4 (0.9%) ↓	5 (1.2%) ↑
Total	423	407

Each complaint is also assigned to a more specific sub-category, of which there are over 100. Table 2 lists the ten most consistently reported sub-categories, which together accounted for 63% of the complaints received in Q4 (266/423).

Table 2: Complaints by sub-category

Sub-category	Number of complaints received in Q4 (2017/18)	Q3 (2017/18)	Q2 (2017/18)	Q1 (2017/18)
Clinical care (Medical/Surgical)	52 (1.9% decrease compared to Q3) ↓	53	58	70
Cancelled/delayed appointments and operations	73 (55.3% increase) ↑	47	68	75
Appointment administration issues	23 (20.7% decrease) ↓	29	45	46
Clinical care (Nursing/Midwifery)	27 (35% increase) ↑	20	28	18
Attitude of medical staff	19 (% decrease) =	19	28	29
Failure to answer telephones/failure to respond	11 (38.9% decrease) ↓	18	25	22
Attitude of admin/clerical staff	10 (44.4% decrease) ↓	18	7	4
Communication with patient/relative	19 (11.8% increase) ↑	17	18	15
Discharge arrangements	21 (40% increase) ↑	15	13	10
Attitude of nursing/midwifery staff	11 (22.2% increase) ↑	9	16	3

Figures 5-7 below show complaints received since February 2016 for the top three complaints sub-categories reported in Table 2.

In summary:

- Complaints about the 'cancelled/delayed appointments and operations' rose sharply in Q4 to 73, compared with 47 in Q3.
- Complaints about 'discharge arrangements' rose again to 21 in Q4 compared with 15 in Q3.

- Complaints about clinical care (nursing/midwifery) increased from 20 in Q3 to 27 in Q4.
- Complaints about ‘appointment administration issues’, which had previously been flagged as a concern in Q1 and Q2, fell again in Q4.

Figure 5: Cancelled or delayed appointments and operations

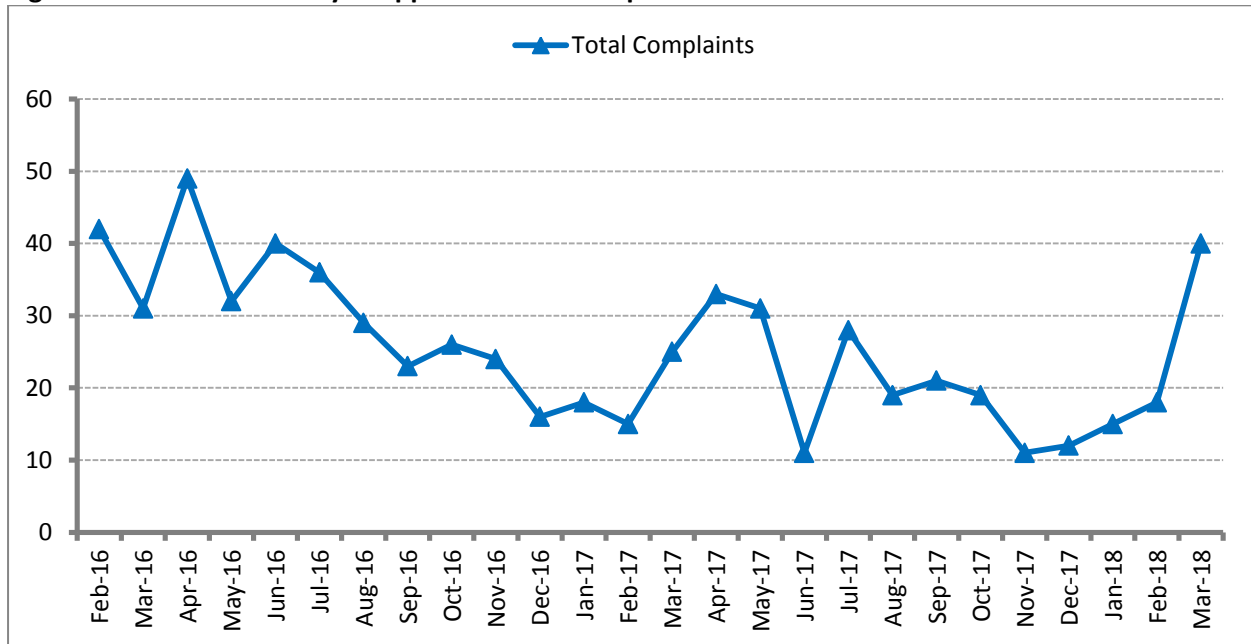


Figure 6: Clinical care – Medical/Surgical

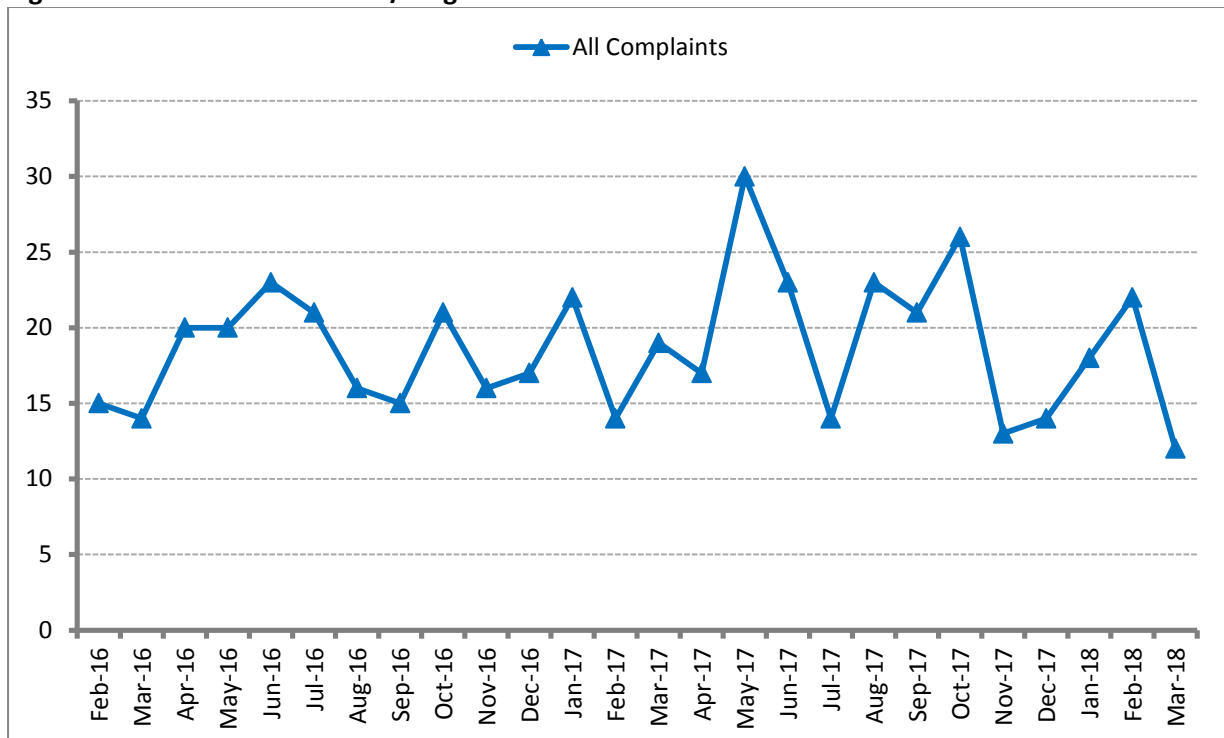


Figure 7: Clinical care – Nursing/Midwifery

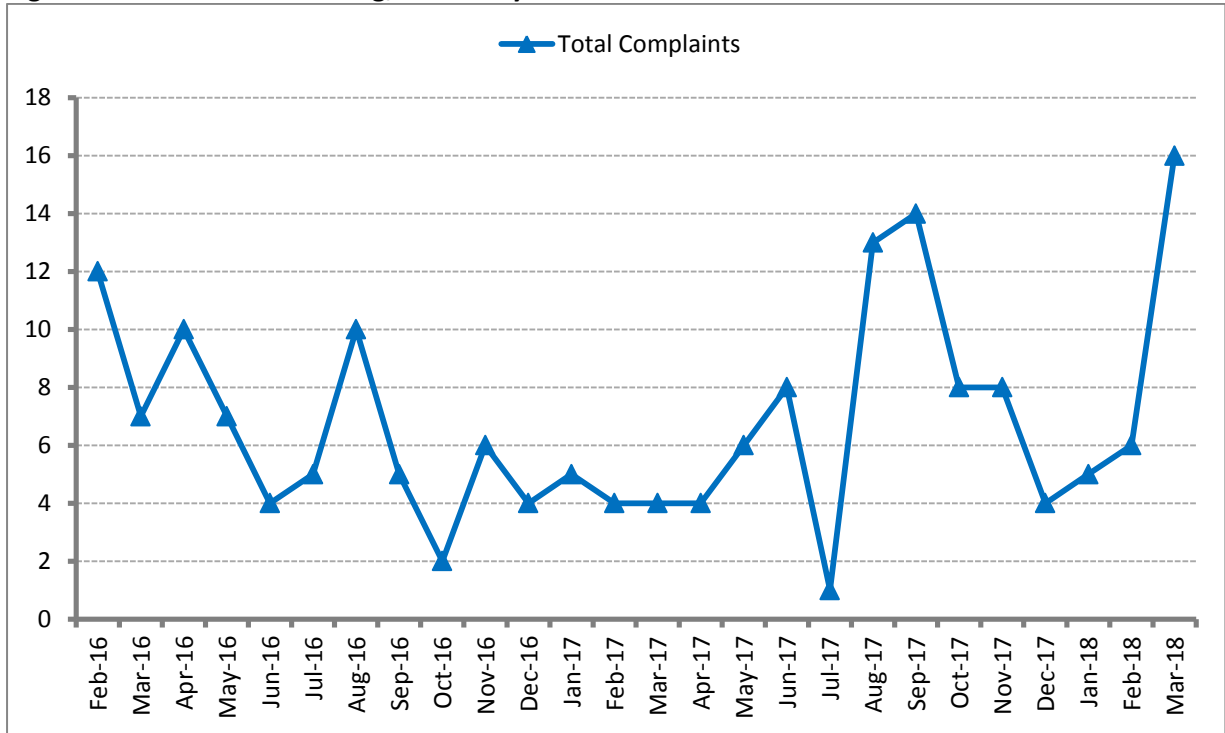
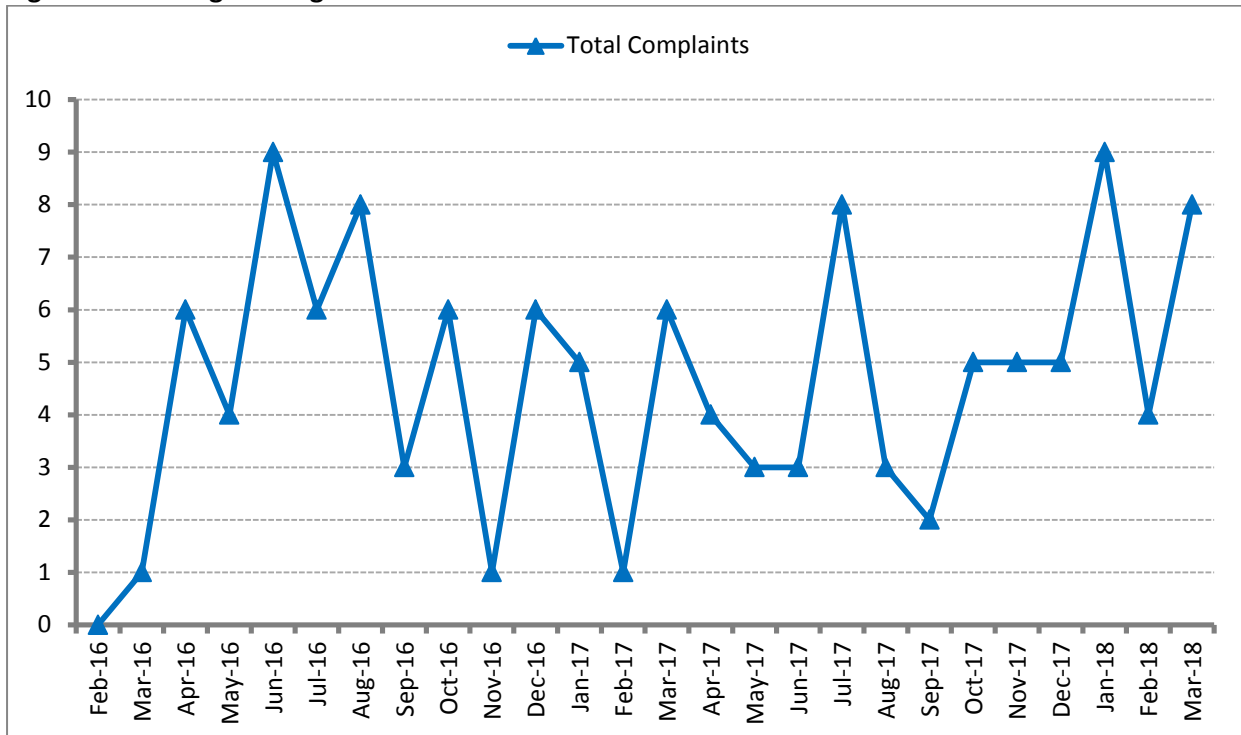


Figure 8: Discharge arrangements



3. Divisional Performance

3.1 Divisional analysis of complaints received

Table 3 provides an analysis of Q4 complaints performance by Division. In addition to providing an overall view, the table includes data for the three most common reasons why people complain: concerns about appointments and admissions; concerns about staff attitude and communication; and concerns about clinical care. Data for the Division of Trust Services is not included in this table but is summarised in section 3.1.6 of the report.

Table 3	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies
Total number of complaints received	158 (151) ↑	101 (94) ↑	55 (57) ↓	69 (56) ↑	20 (23) ↓
Number of complaints about appointments and admissions	71 (53) ↑	16 (11) ↑	16 (16) =	18 (10) ↑	4 (6) ↓
Number of complaints about staff attitude and communication	31 (41) ↓	22 (32) ↓	10 (13) ↓	12 (10) ↑	5 (6) ↓
Number of complaints about clinical care	38 (42) ↓	32 (24) ↑	18 (17) ↑	31 (28) ↑	3 (7) ↓
Area where the most complaints have been received in Q4	Bristol Dental Hospital – 50 (48) Bristol Eye Hospital – 33 (30) Trauma & Orthopaedics – 16 (11) QDU (Endoscopy) – 6 (10) ENT – 12 (9) Upper GI – 10 (5)	Emergency Department (BRI) - 35 (31) Dermatology – 14 (11) Sleep Unit – 2 (6) Unity Sexual Health – 5 (6) Ward A300 – 6 (1) Ward A400 – 6 (4)	BHI (all) – 42 (41) BHI Outpatients - 18 (9) Chemo Day Unit / Outpatients (BHOC) – 7 (8) Ward C604 (CICU) – 4 (3)	Children's ED & Ward 39 (BRHC) – 5 (5) Gynaecology Outpatients (StMH) – 12 (9) Ward 73 – 5 (3) Ward 78 – 6 (4)	Radiology – 7 (16) Physiotherapy – 6 (1)
Notable deteriorations compared to Q3	ENT – 12 (9) Upper GI – 10 (5)	Emergency Department (BRI) - 35 (31) Dermatology – 14 (11) Ward A300 – 6 (1)	BHI Outpatients – 18 (11)	Gynaecology Outpatients (StMH) – 12 (9)	Physiotherapy – 6 (1)
Notable improvements compared to Q3	Ward A700 – 1 (8)	Sleep Unit – 2 (6)	None	None	Radiology – 7 (16)

3.1.1 Division of Surgery

In Q4, the Division of Surgery received slightly more complaints than in the previous quarter. There was an increase in complaints about appointments and admissions (including cancelled or delayed appointments and operations) following a decrease in the previous quarter, with 71 compared to 53 in Q3. The number of complaints about Bristol Dental Hospital (BDH) was essentially unchanged from Q3, increasing by two to 48. Complaints about attitude and communication decreased from 41 in Q3 to 31 in Q4, with a reduction across all staff groups in this category.

Table 4: Complaints by category type

Category Type	Number and % of complaints received – Q4 2017/18	Number and % of complaints received – Q3 2017/18
Appointments & Admissions	71 (44.9% of total complaints) ↑	53 (35.1% of total complaints) ↓
Clinical Care	38 (24.1%) ↓	42 (27.8%) ↑
Attitude & Communication	31 (19.6%) ↓	41 (27.2%) ↑
Information & Support	3 (1.9%) ↓	6 (4%) ↓
Facilities & Environment	4 (2.5%) ↑	3 (2%) ↑
Access	3 (1.9%) =	3 (2%) =
Discharge/Transfer/Transport	6 (3.8%) ↑	2 (1.3%) ↓
Documentation	2 (1.3%) ↑	1 (0.7%) =
Total	158	151

Table 5: Top sub-categories

Category	Number of complaints received – Q4 2017/18	Number of complaints received – Q3 2017/18
Cancelled or delayed appointments and operations	45 ↑	22 ↓
Appointment administration issues	11 ↓	18 ↓
Clinical care (medical/surgical)	16 ↑	15 ↓
Failure to answer telephones/ failure to respond	4 ↓	10 ↓
Attitude of admin/clerical staff	5 ↓	7 ↑
Attitude of medical staff	7 =	7 ↓
Communication with patient/relative	5 ↓	7 ↑
Clinical care (nursing)	8 ↑	3 ↓
Attitude of nursing staff	2 =	2 ↓
Discharge arrangements	5 ↑	2 ↓

Table 6: Divisional response to concerns highlighted by Q4 data

Concern	Explanation	Action
<p>Complaints about Bristol Dental Hospital increased slightly compared with quarter 3; however, BDH continues to receive high levels of complaints.</p> <p>Of the 50 complaints received, 16 were for Adult Restorative Dentistry; nine were received for Child Dental Health; and there were five complaints each for Oral Medicine and the Orthodontics Lab.</p> <p>The majority of complaints received by the Dental Hospital (36) were in respect of 'appointments and admissions', 24 of which were about cancelled/delayed appointments and operations.</p>	<p>BDH has experienced an increase in both formal and informal complaints with regard to cancellations of surgery due to Trust black escalation measures.</p> <p>Complaints are still being received about appointments for restorative dentistry where the service has been restricted, as explained in previous quarterly reports.</p>	<p>The Division continues to monitor all complaints received to identify and take action on any appropriate themes.</p> <p>On a positive note, there has been a reduction in complaints about telephones not being answered. In April 2018, an initiative called #takephonership was launched. This builds on four months of work led by a consultant and general manager to change the culture around answering telephones and to minimise potential pitfalls – such as telephones not working and old letters with incorrect telephone numbers. This initiative has also included drop in sessions for staff to share concerns and ideas.</p>
<p>Within the Division as a whole, complaints regarding 'appointments and admissions' increased from 53 in Q3 to 71 in Q4.</p> <p>Of these 71 complaints, 45 were received in respect of cancelled/delayed appointments and operations.</p> <p>A further 16 complaints were about appointment administration issues, including appointment letters not received and the appointment reminder system.</p>	<p>This reflects the difficulties the Division has experienced whilst the Trust is in black escalation. Elective patients were clinically triaged and proactively managed to accommodate the anticipated increase in emergency admissions. These complaints ranged from appointments being cancelled/ delayed, waiting for appointments and not receiving appointments. These were informal complaints which were resolved within the 10 day timeframe.</p>	<p>The Division has entered a period of implementing extra operating sessions to accommodate the planned reduction in elective activity during the winter months.</p> <p>Informal complaints are tracked on a daily basis, with any themes relating to specific departments being escalated to the general manager.</p>
<p>In Q4, the number of complaints received by the ENT service increased from 9 in Q3 to 12 in Q4. Six of these complaints were about 'appointments and admissions' and five were in respect of 'attitude and communication'.</p>	<p>These complaints relate to appointments rather than admissions. Patients expressed concerns variously about waiting times in clinic, an interpreter not being available and patients</p>	<p>The Division continues to monitor all complaints. Informal complaints are tracked daily by the complaints coordinator to identify any trends that can be actioned promptly to resolve.</p>

	<p>needing to chase appointments.</p> <p>No patterns have been identified and there have been no repeat concerns about individual staff attitude.</p>	
<p>The number of complaints received by the Trauma & Orthopaedics Department increased from 11 in Q3 to 16 in Q4, with seven of these complaints being about 'appointments and admissions'.</p>	<p>There is a very high demand for this service with one of the busiest clinics within the division</p> <p>Complaints about appointments refer to cancelled appointments and waiting times for appointments.</p>	<p>As above.</p>
<p>In Q4, the Division responded to 77 complaints via the informal investigation process. Of these 77 responses, a total of 14 (18%) breached the deadline that had been agreed with the complainant.</p> <p>Of these 14 complaints, six were for Bristol Dental Hospital and five were for Bristol Eye Hospital.</p>	<p>Whilst not being the level of performance we aim for, nonetheless this is a significant improvement on the 32.3% of breaches reported in Q3 (30 from 93 responses).</p>	<p>Informal complaints continue to be tracked by the divisional complaints lead to promote compliance with the 10 day turnaround timescale</p>

Figure 9: Surgery, Head & Neck – formal and informal complaints received

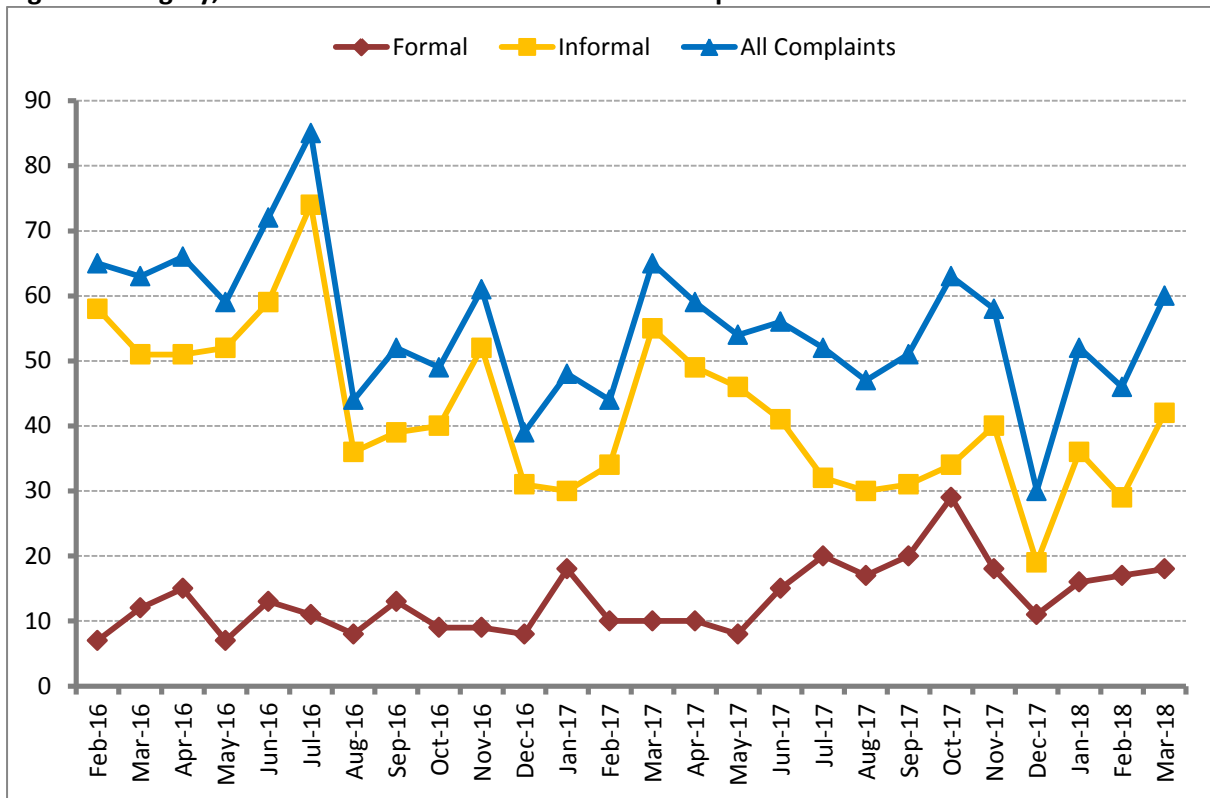


Figure 10: Complaints received by Bristol Dental Hospital

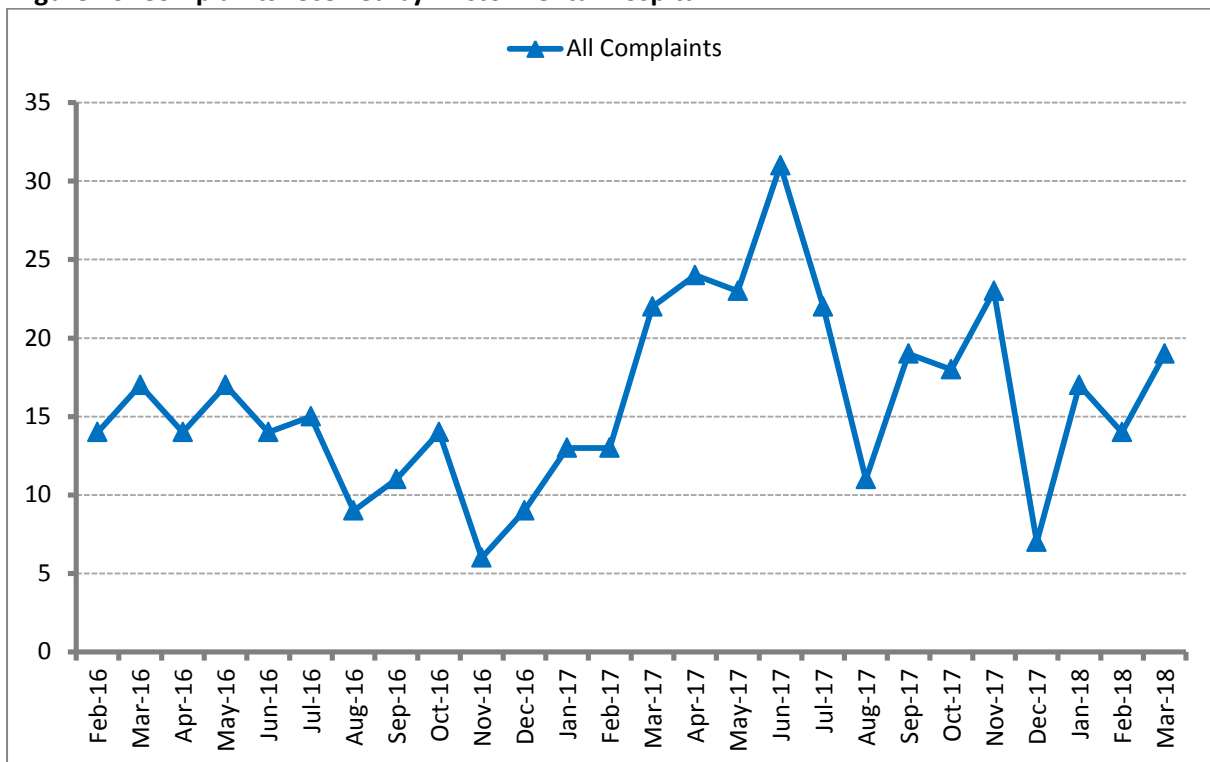
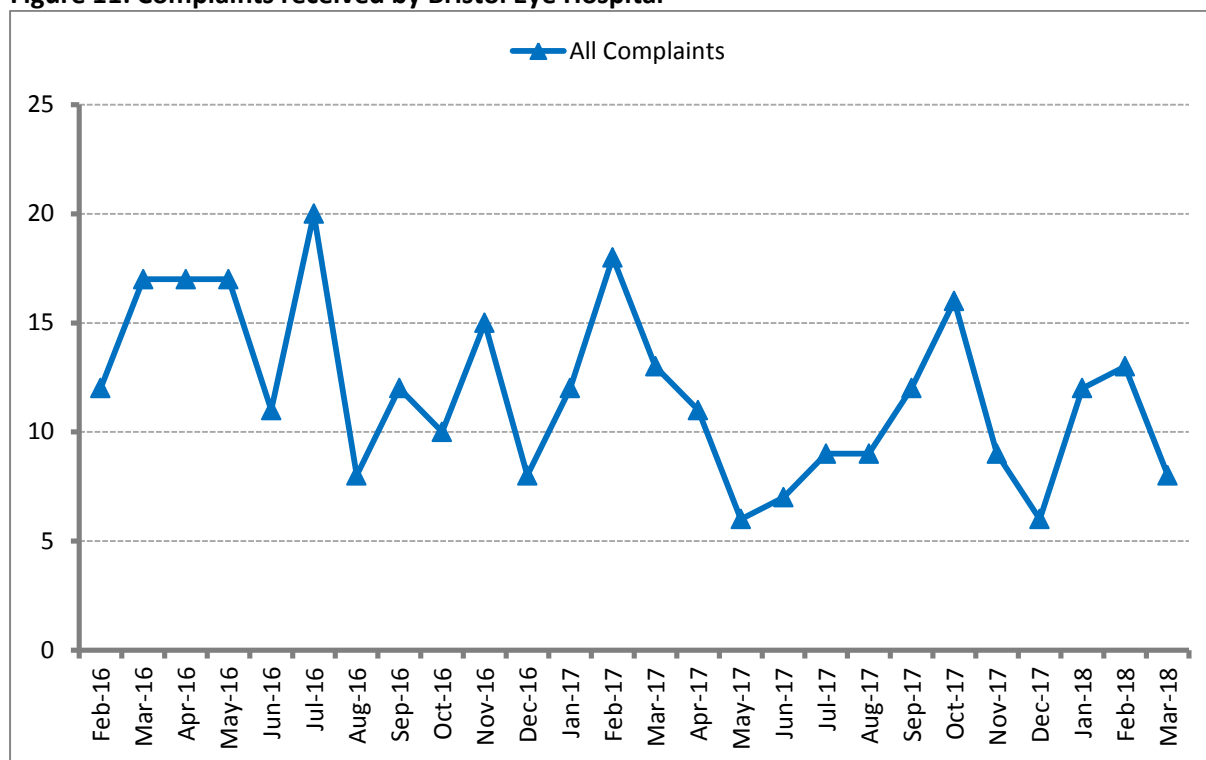


Figure 11: Complaints received by Bristol Eye Hospital



3.1.2 Division of Medicine

In Q4, the Division of Medicine received seven more complaints than in Q3 (101 compared to 94). The largest increase was seen in the category of ‘clinical care’, with 32 complaints compared with 24 in Q3. There were also smaller increases in complaints about ‘discharge/transfer/transport’, ‘appointments and admissions’ and ‘information and support’. Complaints about the BRI Emergency Department, Dermatology and Ward A300 all increased in Q4. However, during a very busy quarter for the Emergency Department, only one complaint was received in respect of waiting times in the department. Of the 101 complaints received by the Division, 56 were resolved via a formal investigation and 45 via the informal route. The Division has seen an increase in the number of complaints resolved via the formal route since Q2 of 2017/18, whereas prior to that, it had resolved the majority of its complaints via the informal route.

Table 7: Complaints by category type

Category Type	Number and % of complaints received – Q4 2017/18	Number and % of complaints received – Q3 2017/18
Attitude & Communication	22 (21.8% of all complaints) ↓	32 (34% of total complaints) ↓
Clinical Care	32 (31.7%) ↑	24 (25.5%) ↓
Discharge/Transfer/Transport	14 (13.9%) ↑	12 (12.8%) ↑
Appointments & Admissions	16 (15.8%) ↑	11 (11.7%) ↓
Information & Support	8 (7.9%) ↑	6 (6.4%) ↓
Facilities & Environment	7 (6.9%) ↑	4 (4.3%) ↑
Documentation	2 (2%) ↓	3 (3.2%) ↑
Access	0 (0%) ↓	2 (2.1% of total complaints) ↑
Total	101	94

Table 8: Top sub-categories

Category	Number of complaints received – Q4 2017/18	Number of complaints received – Q3 2017/18
Discharge arrangements	12 ↑	11 ↑
Clinical care (medical/surgical)	15 ↑	11 ↓
Attitude of medical staff	5 ↓	9 ↓
Cancelled or delayed appointments and operations	5 ↓	6 ↓
Attitude of nursing staff	6 =	6 ↓
Attitude of admin/clerical staff	1 ↓	5 ↑
Clinical care (nursing)	9 ↑	5 ↓
Appointment administration issues	5 ↑	4 ↓
Failure to answer telephones/failure to respond	4 =	4 ↓
Communication with patient/relative	5 ↑	3 ↓

Table 9: Divisional response to concerns highlighted by Q4 data

Concern	Explanation	Action
<p>Emergency Department complaints increased slightly in Q4 to 35, compared with 31 in Q3 and 18 in Q2.</p> <p>Of the 35 complaints received, 10 were in respect of 'attitude & communication' and 13 were about clinical care.</p> <p>Of the 10 complaints about attitude & communication, five related to attitude of nursing staff.</p>	<p>The Emergency Department saw an increase in activity and attendances in Q4, with significantly more occasions when there was both crowding and queuing. Despite staff working to provide the care to the highest possible standards, we acknowledge that communication with patients can sometimes be suboptimal at these times.</p>	<p>We continue to thematically review all complaints, looking for patterns of day, time, source, triggers.</p> <p>Work is being undertaken to improve the well-being of staff and support resilience.</p> <p>Work continues to seek workable solutions to improve patient flow through the Emergency Department.</p>
<p>The Division received six complaints about Ward A300 (AMU) during Q4. Three of these complaints were about clinical care and two related to premature discharge.</p>	<p>This level of complaints is within the normal range for AMU. Complaints are balanced by positive patient feedback.</p>	<p>We will continue to review complaints for potential patterns and common themes. .</p>
<p>During Q4, the Division responded to 36 complaints via the informal investigation route. Of these 36 responses, 11 (30.5%) breached the deadline</p>	<p>The process for tracking and monitoring informal complaints investigations requires further embedding in the division.</p>	<p>We will ensure all teams are aware of the process by way of email reminder. Specific support to be provided in Dermatology, where new senior leaders have</p>

<p>agreed with the complainant.</p> <p>Four of these 11 breaches were in respect of complaints received by Dermatology.</p>		<p>been appointed.</p>
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Figure 12: Medicine – formal and informal complaints received

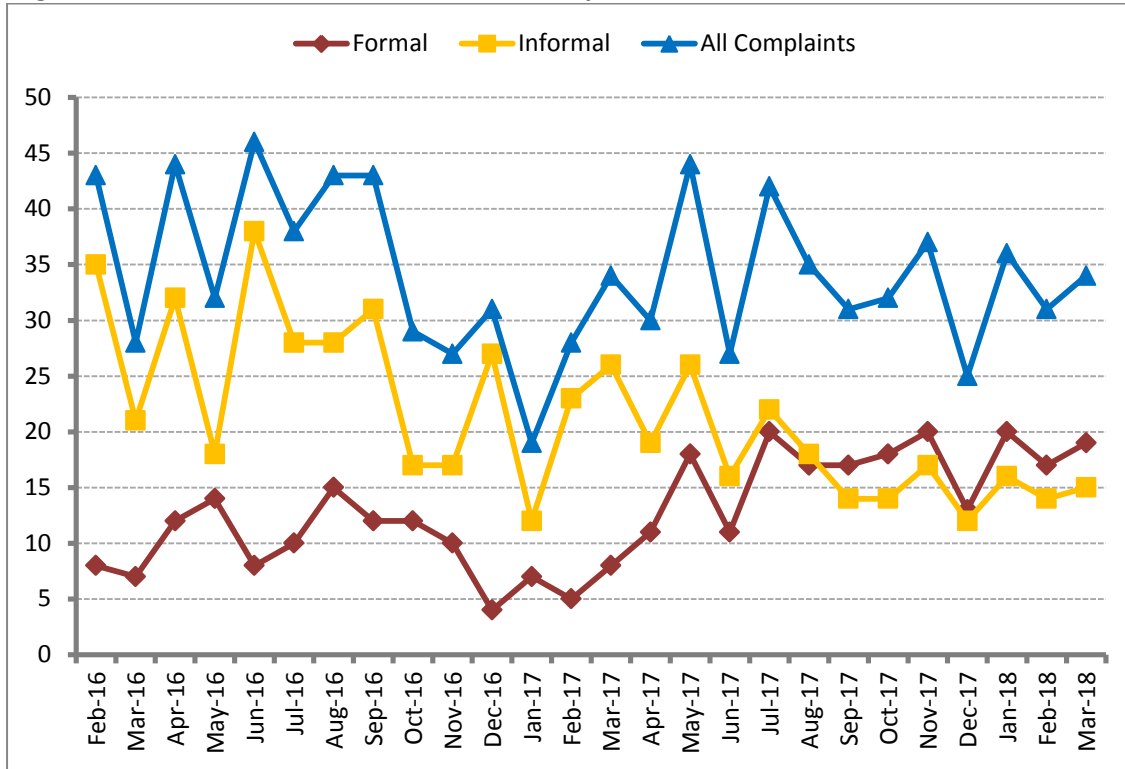
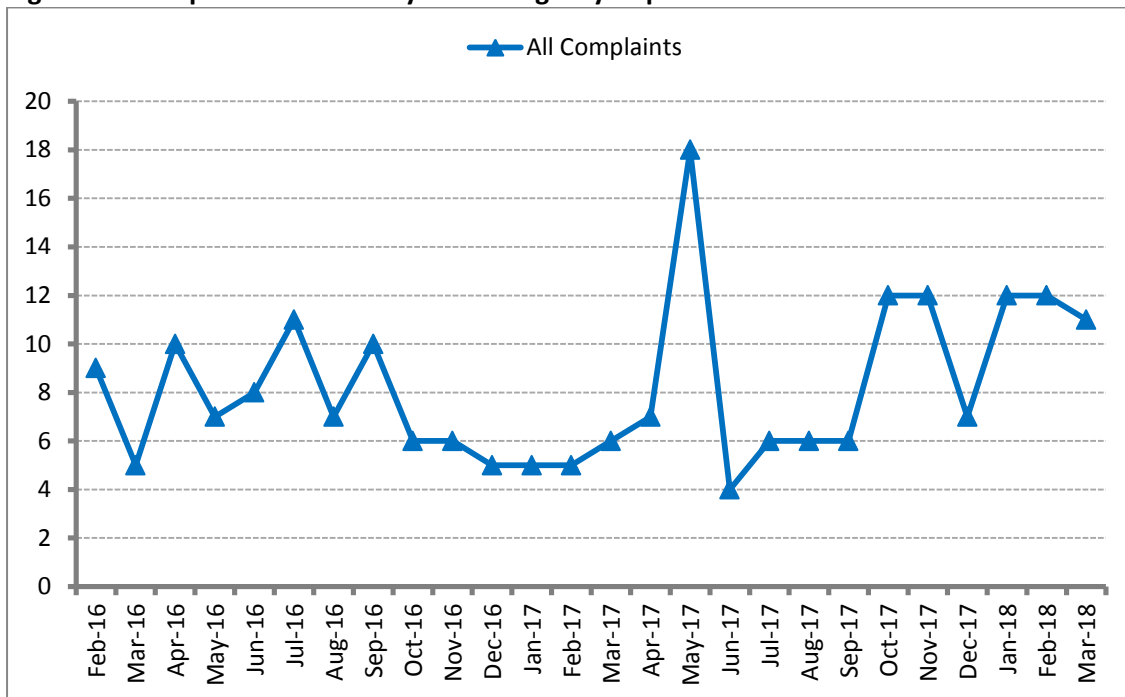


Figure 13: Complaints received by BRI Emergency Department



3.1.3 Division of Specialised Services

In Q4, the Division of Specialised Services received a similar number of complaints to the previous quarter (55 in Q4 compared to 57 in Q3). There were small increases in the number of complaints received in the categories of 'clinical care', 'information and support' and 'discharge/transfer/transport'. The number of complaints received in relation to 'appointments and admissions' remained the same as the previous quarter at 16 complaints. Of the 55 complaints received by the Division in Q4, 23 were investigated via the formal complaints process and 32 were dealt with via the informal process.

Table 10: Complaints by category type

Category Type	Number and % of complaints received – Q4 2017/18	Number and % of complaints received – Q3 2017/18
Clinical Care	18 (32.7% of all complaints) ↑	17 (29.8% of all complaints) ↑
Appointments & Admissions	16 (29.1%) =	16 (28%) ↓
Attitude & Communication	10 (18.2%) ↓	13 (22.8%) =
Information & Support	6 (10.9%) ↑	5 (8.8%) ↑
Documentation	1 (1.8%) ↓	3 (5.3%) ↑
Facilities & Environment	0 (0%) ↓	2 (3.5%) =
Discharge/Transfer/Transport	4 (7.3%) ↑	1 (1.8%) =
Access	0 (0%) =	0 (0% of total complaints) =
Total	55	57

Table 11: Top sub-categories

Category	Number of complaints received – Q4 2017/18	Number of complaints received – Q3 2017/18
Cancelled or delayed appointments and operations	10 ↑	8 ↓
Clinical care (medical/surgical)	9 ↑	7 ↑
Appointment administration issues	2 ↓	5 ↓
Clinical care (nursing)	2 ↓	5 ↑
Communication with patient/relative	2 ↓	3 =
Attitude of admin/clerical staff	0 ↓	2 ↑
Attitude of medical staff	3 ↑	1 ↓
Failure to answer telephone/failure to respond	1 =	1 ↓
Attitude of nursing staff	2 ↑	1 =
Discharge arrangements	4 ↑	1 ↑

Table 12: Divisional response to concerns highlighted by Q4 data

Concern	Explanation	Action
<p>Complaints received by Bristol Heart Institute Outpatient Departments (including Outpatient Echo) increased from 11 in Q3 to 18 in Q4.</p> <p>Of these 18 complaints, nine were in respect of 'appointments and admissions' (six of which were about delayed appointments).</p>	<p>Two patients who were waiting for an echo were sent appointments but we had an old address.</p> <p>There were issues around patients wanting to cancel procedures but not being sure who to contact.</p> <p>Patients complained about time that they had to wait for an operation whilst on the waiting list.</p>	<p>The patients' information was updated and their appointments were organised immediately.</p> <p>This was resolved with the patients at the time</p> <p>All of the patients on the waiting list are reviewed by the clinical team to ensure that they are prioritised appropriately and kept informed of what is happening.</p>
<p>Bristol Haematology & Oncology Centre received 11 complaints in Q4.</p> <p>Of these 11 complaints, seven were received by the Chemotherapy Day Unit/Outpatients Department, three were for Ward 61 and one was for Area 61 Inpatient).</p> <p>Four of the complaints related to 'appointments and admissions', four were about 'attitude and communication' and three were in respect of 'clinical care'.</p>	<p>These complaints came about for a variety of reasons.</p> <p>The complaints about appointments and beds not being available were all dealt with at the time and happened during a time where there were increased capacity issues, especially around chemotherapy delivery. The attitude and communication complaints were discussed with the staff members involved.</p> <p>One clinical care complaint was in respect of a patient who died on the Teenagers and Young Adults Unit. This was a complex complaint.</p>	<p>The administration team had additional support during this time to answer increased calls from patients who were concerned about appointments for chemotherapy, in order that they could be kept informed.</p> <p>Whenever a complex complaint is received and it is clear that the family are clearly grieving, they are always offered a meeting so that issues can be resolved and the family can be supported during a difficult time.</p>

Figure 14: Specialised Services – formal and informal complaints received

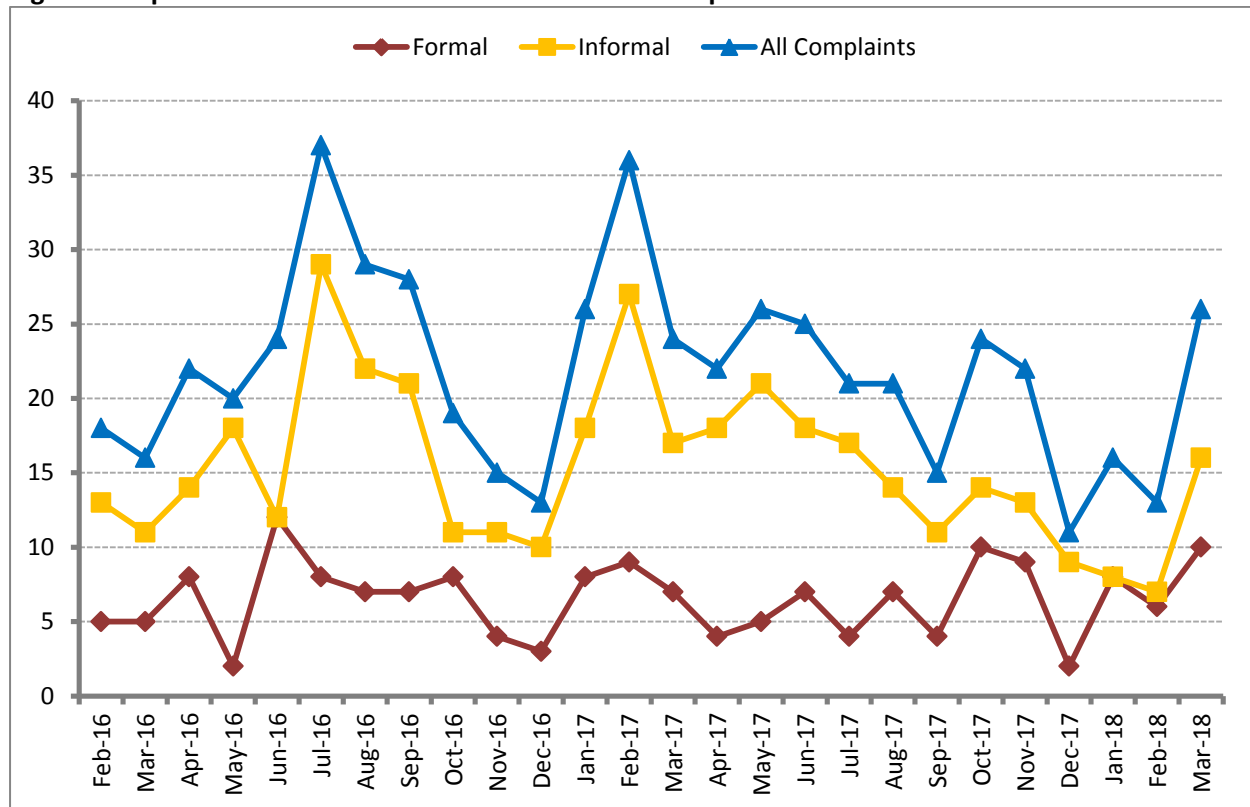


Figure 15: Complaints received by Bristol Heart Institute

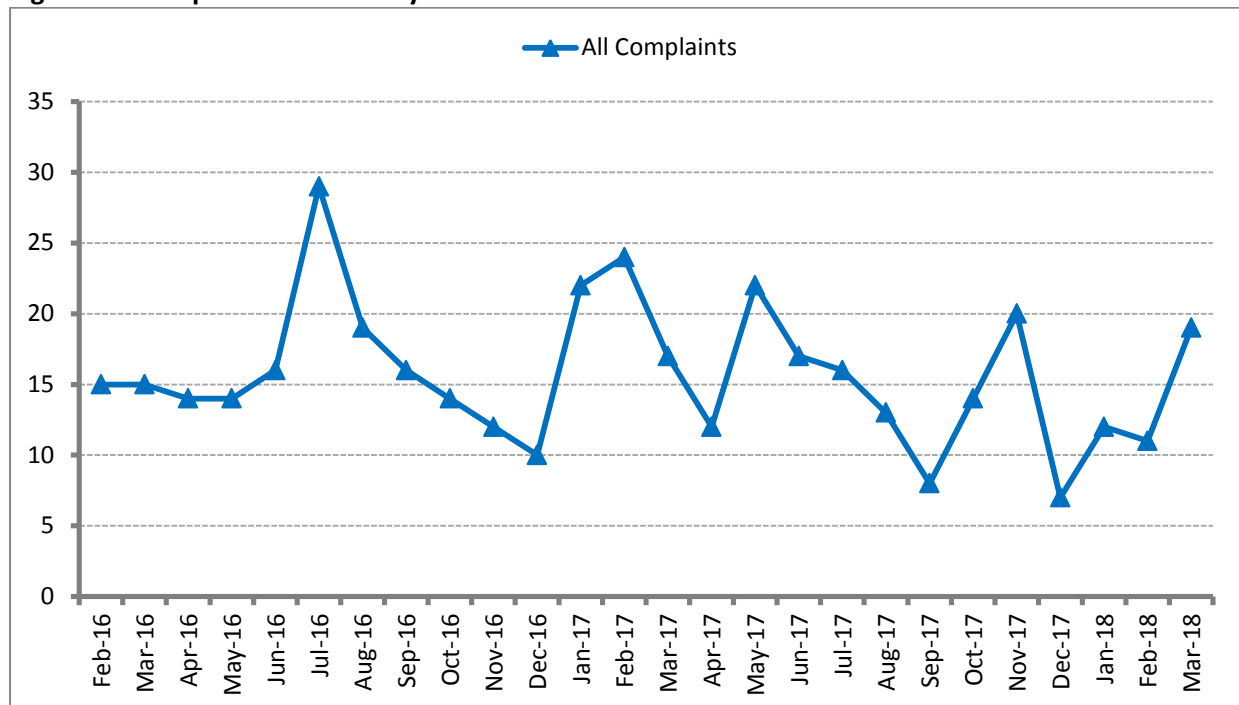


Figure 16: Complaints received by Bristol Heart Institute Outpatients

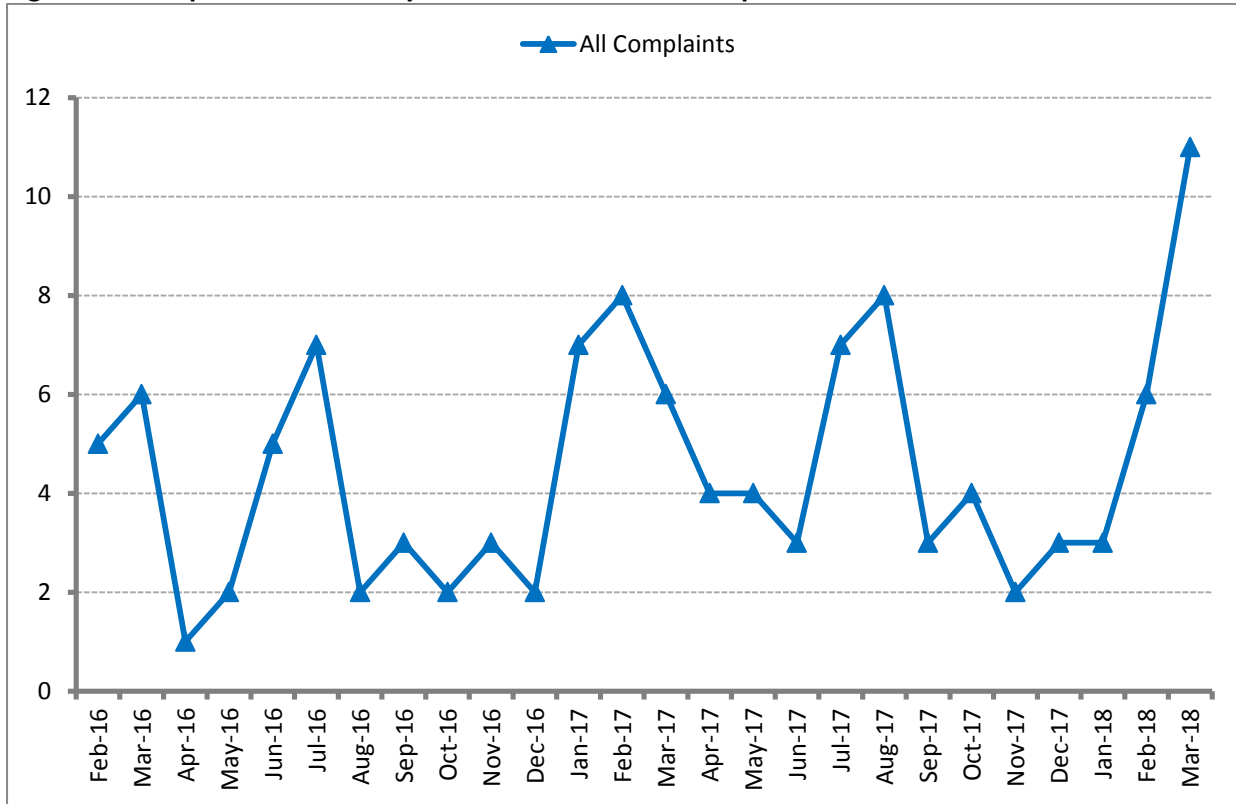
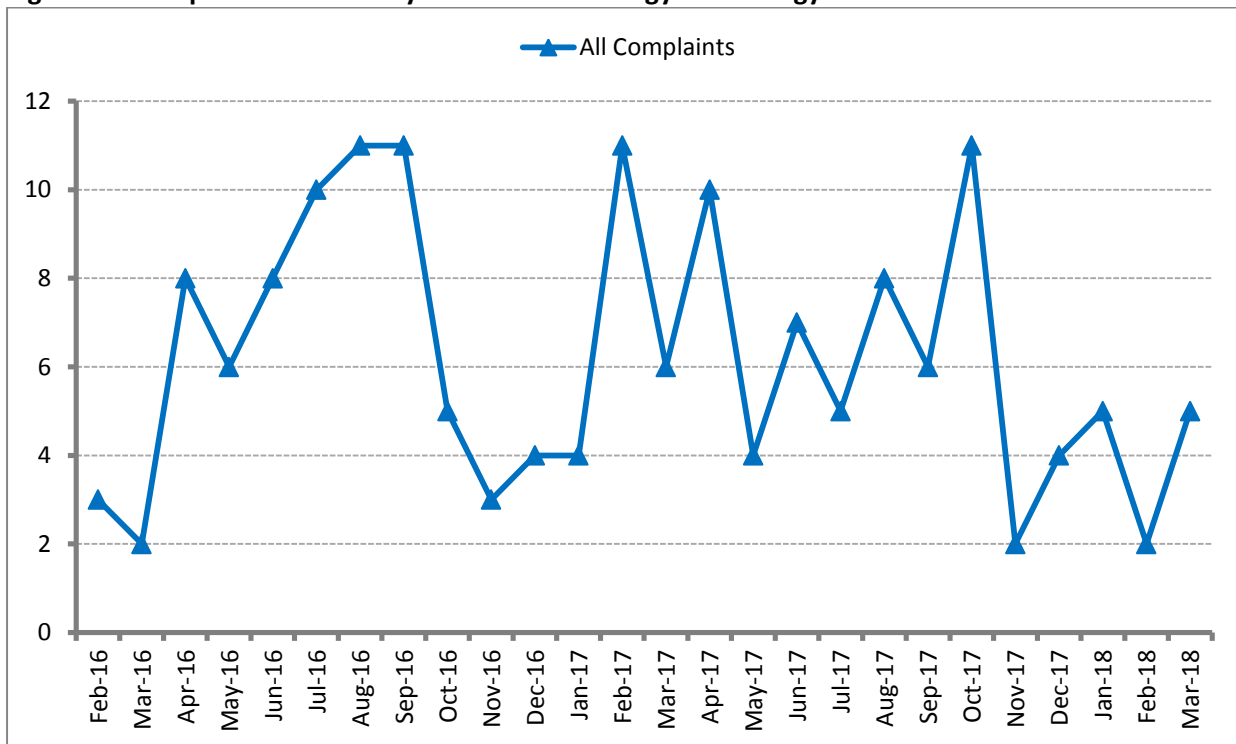


Figure 17: Complaints received by Bristol Haematology & Oncology Centre



3.1.4 Division of Women's and Children's Services

The total number of complaints received by the Division increased by 23% compared with the previous quarter. The number of complaints about clinical care increased, accounting for just under half of all complaints received by the Division. Women's and Children's Services was the only division where the majority of complaints received in Q4 were resolved via the formal investigation process (45 formal compared to 24 informal).

Table 13: Complaints by category type

Category Type	Number and % of complaints received – Q4 2017/18	Number and % of complaints received – Q3 2017/18
Clinical Care	31 (44.9% of total complaints) ↑	28 (50% of total complaints) ↓
Appointments & Admissions	18 (26.1%) ↑	10 (17.9%) ↓
Attitude & Communication	12 (17.4%) ↑	10 (17.9%) ↓
Facilities & Environment	3 (4.3%) =	3 (5.4%) ↑
Information & Support	2 (2.9%) ↓	3 (5.4%) ↓
Discharge/Transfer/Transport	0 (0%) ↓	1 (1.7%) ↑
Documentation	2 (2.9%) ↑	1 (1.7%) =
Access	1 (1.5%) ↑	0 (0%) =
Total	69	56

Table 14: Top sub-categories

Category	Number of complaints received – Q4 2017/18	Number of complaints received – Q3 2017/18
Clinical care (medical/surgical)	11 ↓	13 ↑
Cancelled or delayed appointments and operations	10 ↑	8 ↓
Clinical care (nursing/midwifery)	8 ↑	7 ↓
Communication with patient/relative	5 ↑	3 ↓
Attitude of admin/clerical staff	1 ↓	2 ↑
Attitude of medical staff	3 ↑	2 ↓
Failure to answer telephones /failure to respond	1 =	1 ↓
Appointment administration issues	3 ↑	1 ↓
Discharge arrangements	1 =	1 ↑
Attitude of nursing/midwifery	1 ↑	0 ↓

Table 15: Divisional response to concerns highlighted by Q4 data

Concern	Explanation	Action
<p>Almost half of all complaints received by the Division (31 of 69) in Q4 were in respect of clinical care.</p> <p>Clinical care has been the category with the highest number of complaints for the Division for the last four consecutive quarters.</p> <p>15 of the complaints about clinical care were received by Bristol Royal Hospital for Children (BRHC) and 16 by St Michael's Hospital (STMH).</p>	<p>BRHC Complaints relating to inpatient clinical care have been decreasing from a high in August 2017 to zero in March 2018. However complaints about Outpatients have been increasing.</p> <p>STMH Many of the complaints at St. Michaels are because women have not understood what has happened to them in labour and why, or because their expectations of labour are not met. Women also sometimes find that post-natal care does not meet their expectations, having gone from 1 to 1 care in labour to 1 to 8 care from a midwife. This is a national issue.</p> <p>Some complaints received in Q4 also corresponded with reported clinical incidents.</p>	<p>BRHC The Matron and Sister for outpatients are aware and investigating potential themes.</p> <p>STMH An action plan has been developed in response to the results of the national maternity survey. Ongoing work with the Local Maternity System across BNSSG is focusing on personalised care and post-natal care.</p>
<p>Complaints received by Gynaecology Outpatients increased from 9 in Q3 to 12 in Q4.</p> <p>Six of the 12 complaints were in respect of cancelled/delayed appointments/operations; three were about 'attitude and communication' and three related to 'clinical care'.</p>	<p>STMH We have experienced an increase in complaints about delays in the urogynae pathway. This is due to having a single specialist Consultant who has a long waiting list.</p> <p>A pattern of complaints about the attitude of a staff member is being addressed with the individual concerned.</p>	<p>STMH A new urogynae pathway will be introduced which will include nurse led clinics for conservative management, freeing up space in the Consultant clinic for complex patients needing surgery. A patient leaflet has been drafted for approval which will assist in managing patient expectations.</p> <p>Specific reflective work undertaken with Consultant. As above with regards to leaflet and expectations.</p>
<p>During Q4, 11 formal complaints responses breached the deadline agreed with the complainant (34.4%).</p> <p>Six of these breaches were in relation to responses from STMH and five were from BRHC.</p>	<p>BRHC Three of the breaches were in relation to complex complaints being handed over to a new member of staff. Questions raised by the Chief Nurse also needed to be addressed.</p> <p>STMH There have been delays in</p>	<p>BRHC We are reviewing the complaints process in the BRHC, with the aim of trialing a new approach that should improve the response rates, and decrease the number of dissatisfied replies.</p> <p>STMH This has been brought to the</p>

	receiving responses from medical staff.	attention of the clinical lead who is addressing this and it has been discussed in business meeting in Women's Services.
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Figure 18: Women & Children – formal and informal complaints received

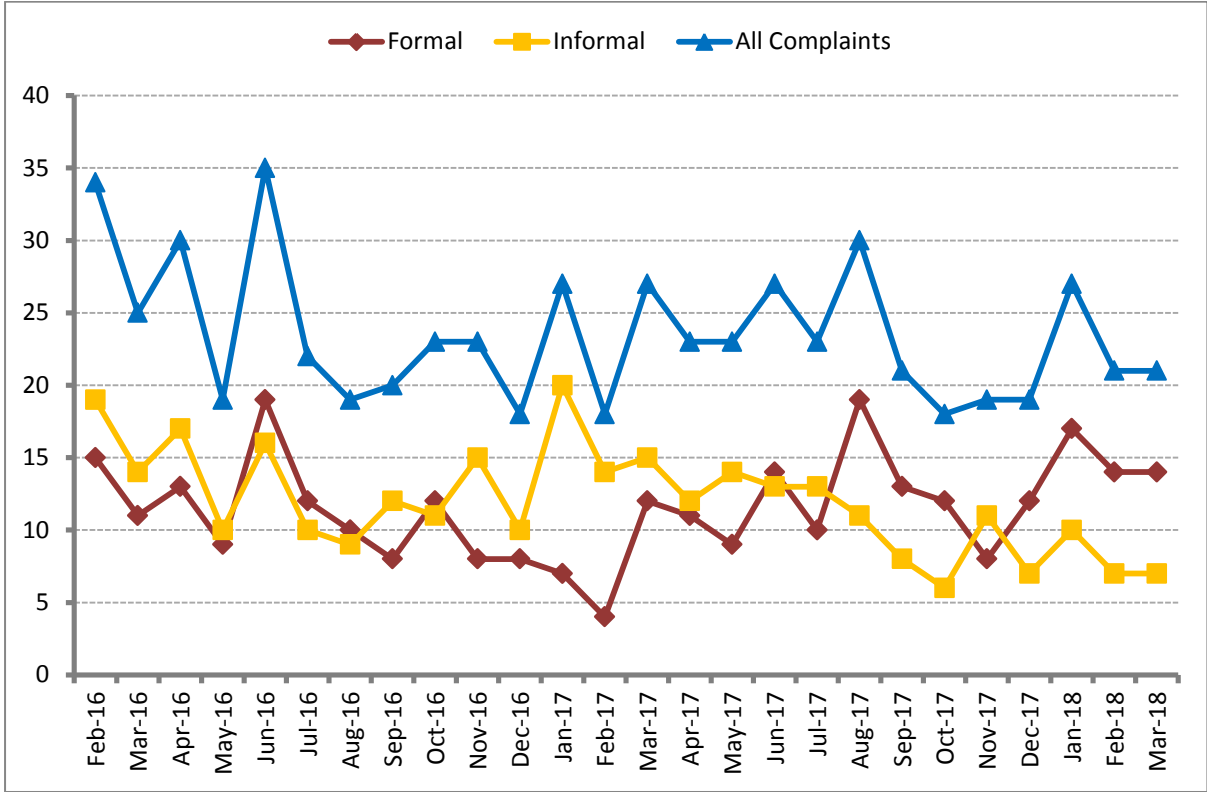


Figure 19: Complaints received by Bristol Royal Hospital for Children

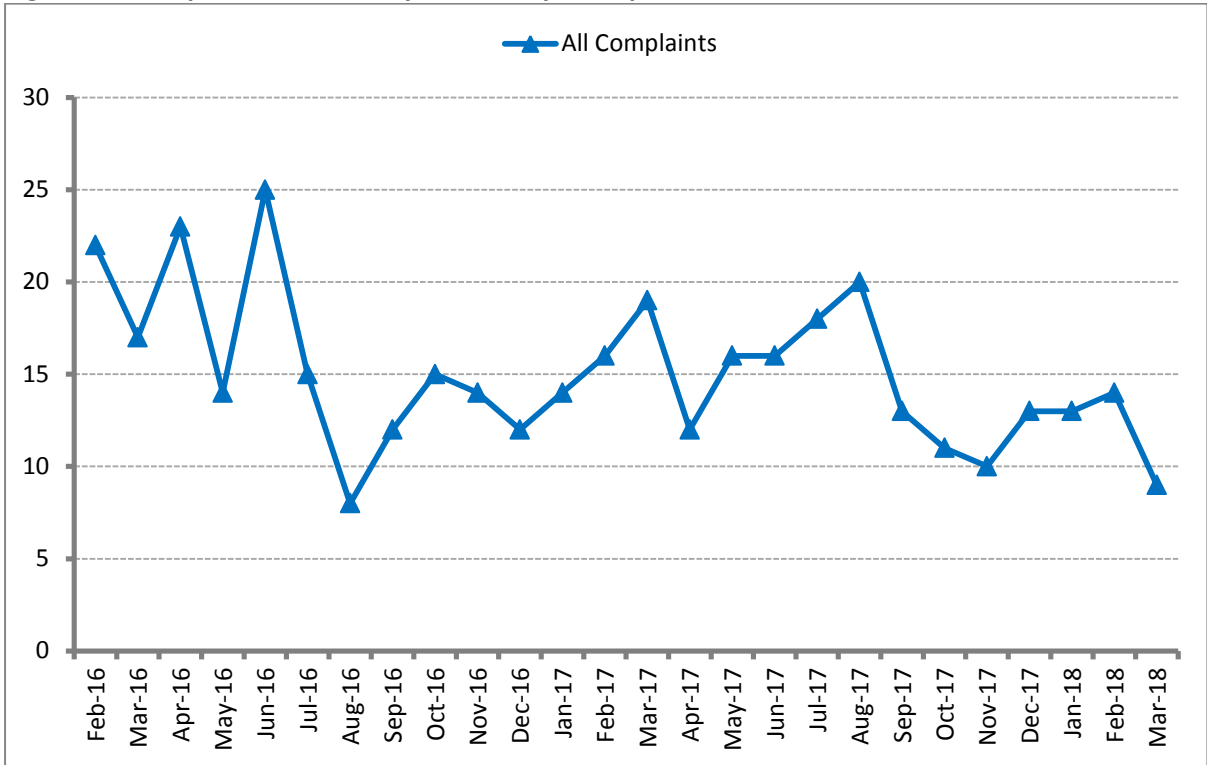
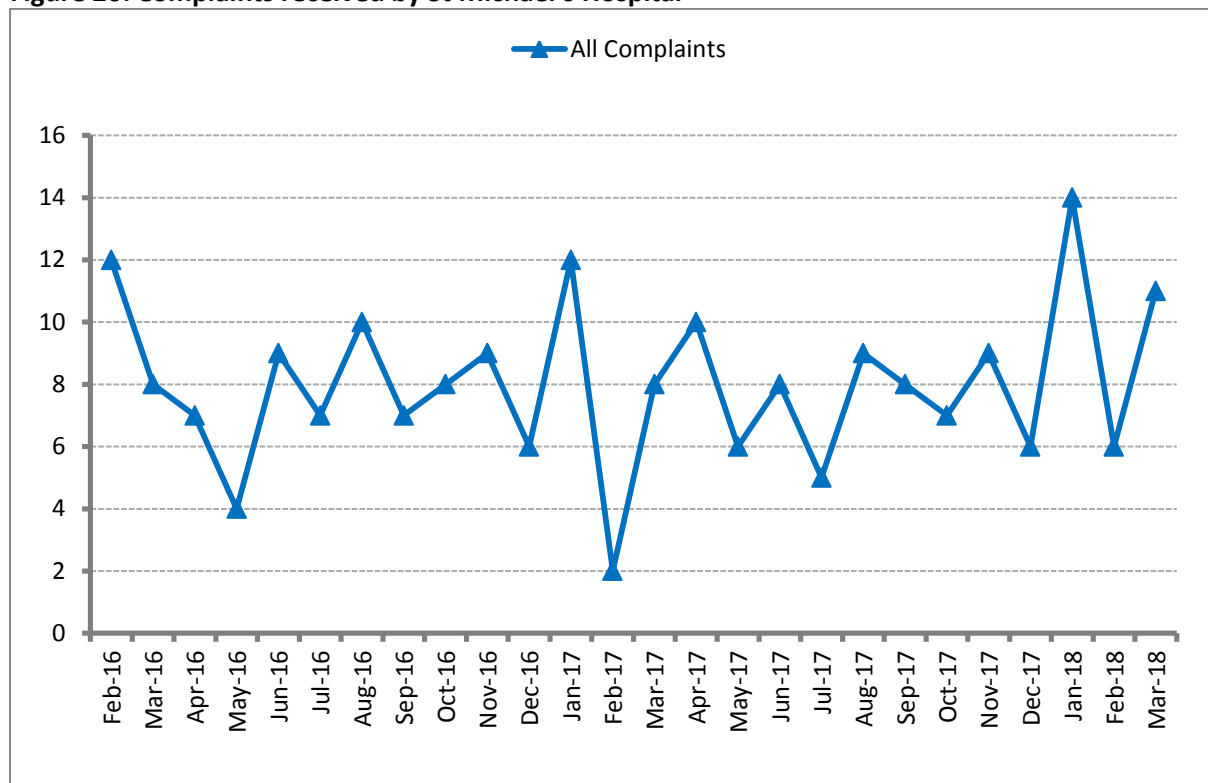


Figure 20: Complaints received by St Michael's Hospital



3.1.5 Division of Diagnostics & Therapies

Complaints received by the Division of Diagnostics and Therapies fell by 30% in Q4 after increasing for three consecutive quarters up to Q3. The majority of complaints received (5) were in respect of 'attitude and communication', closely followed by those about 'appointments & admissions' and clinical care'. The Division dealt with three of the 16 complaints via a formal investigation, with the remaining 13 complaints being resolved informally.

Table 16: Complaints by category type

Category Type	Number and % of complaints received – Q4 2017/18	Number and % of complaints received – Q3 2017/18
Clinical Care	5 (% of total complaints) ↓	7 (30.4% of total complaints) ↑
Appointments & Admissions	4 (25%) ↓	6 (26.1%) =
Attitude & Communication	6 (%) ↓	6 (26.1%) ↓
Facilities & Environment	4 (%) =	4 (17.4%) ↑
Information & Support	1 (6.3%) ↑	0 (0%) =
Discharge/Transfer/Transport	0 (0%) =	0 (0%) =
Documentation	0 (0%) =	0 (0%) ↓
Access	0 (0%) =	0 (0%) =
Total	20	23

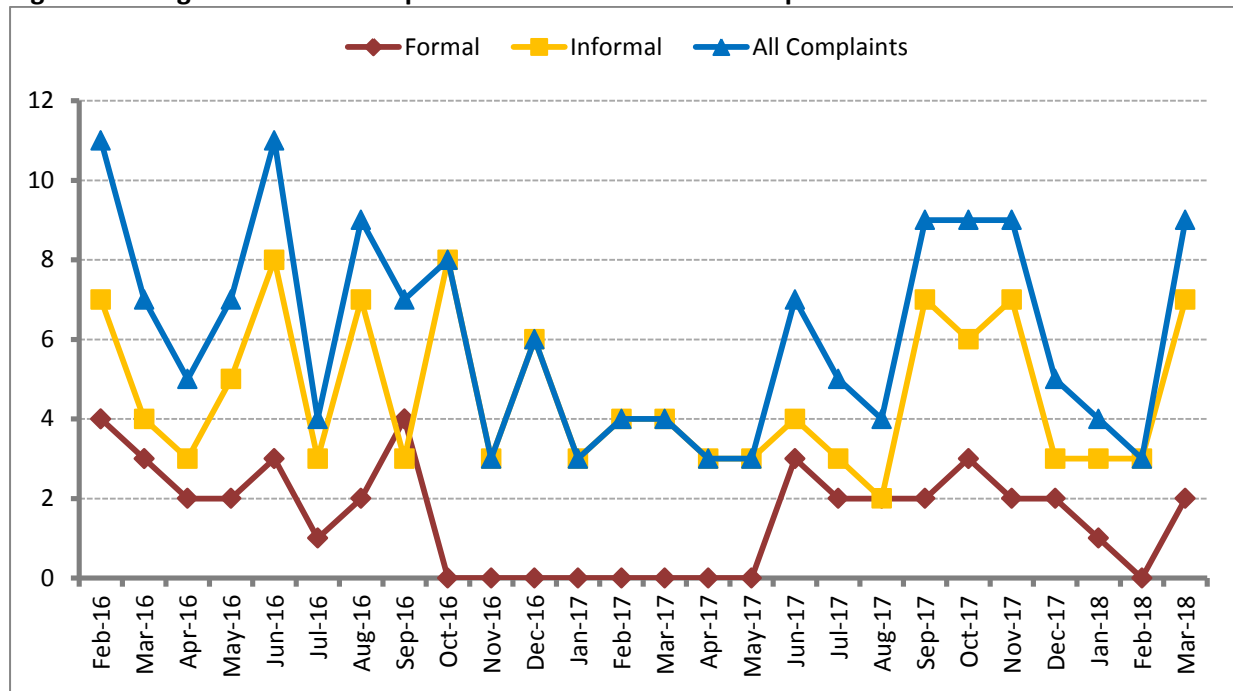
Table 17: Top sub-categories

Category	Number of complaints received – Q4 2017/18	Number of complaints received – Q3 2017/18
Cancelled or delayed appointments and operations	3 =	3 ↑
Clinical care (medical/AHPs)	2 =	2 ↑
Failure to answer telephones /failure to respond	1 ↓	2 ↑
Appointment administration issues	1 =	1 ↓
Attitude of medical staff/AHPs	3 ↑	1 =
Communication with patient/relative	1 =	1 =
Clinical care (nursing)	0 =	0 =
Attitude of nursing/midwifery	0 =	0 ↓
Discharge arrangements	0 =	0 =
Attitude of admin/clerical staff	0 =	0 ↓

Table 18: Divisional response to concerns highlighted by Q4 data

Concern	Explanation	Action
The Division received six complaints about Physiotherapy during Q4. Three of these complaints related to appointments and admissions, and one complaint related to clinical care, facilities and environment and attitude and communication.	<i>Response awaited (this was a late request to the division)</i>	

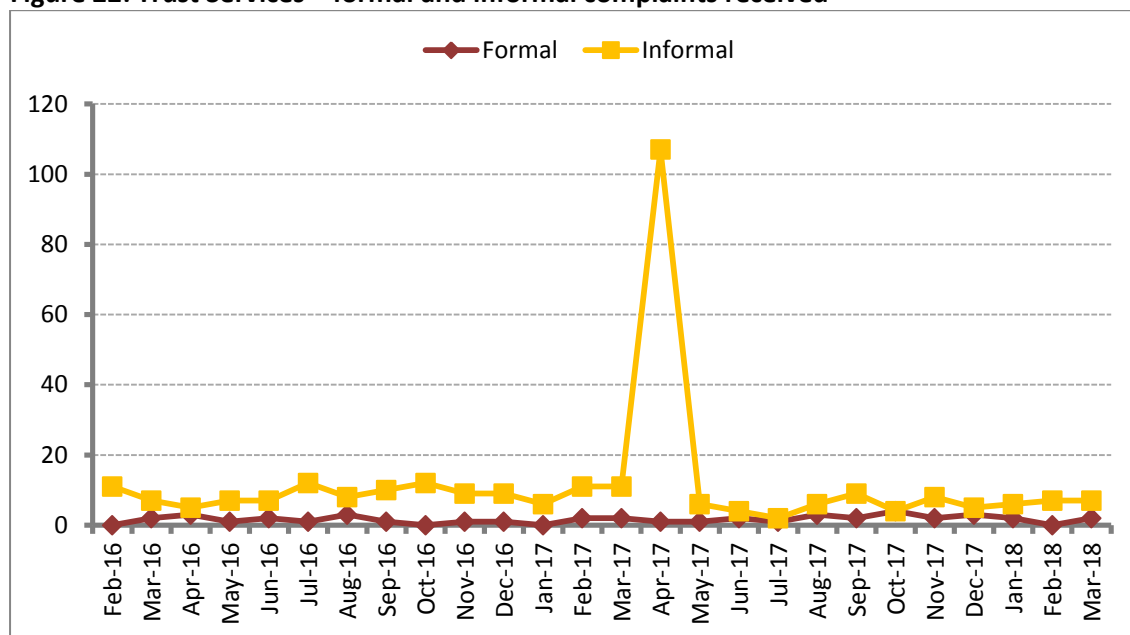
Figure 21: Diagnostics and Therapies – formal and informal complaints received



3.1.6 Division of Trust Services

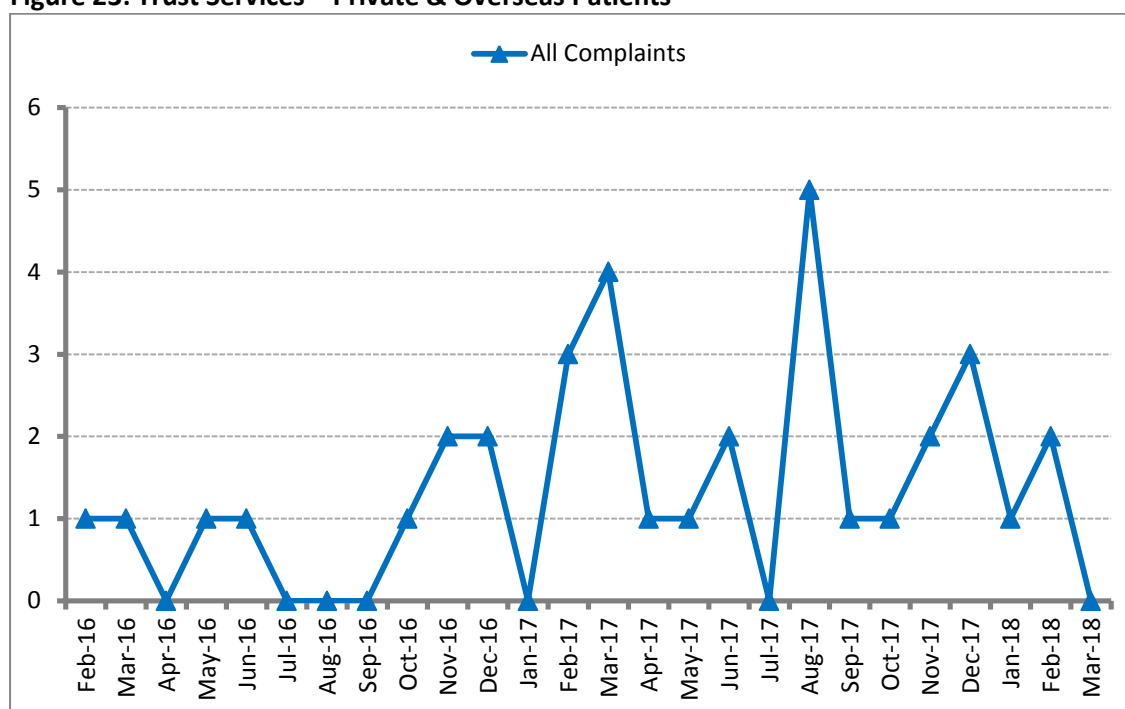
The Division of Trust Services, which includes Facilities & Estates, received 20 complaints in Q4, compared to 26 in Q3³. Of the 20 complaints received in Q4, three each were received by the Private & Overseas Patients Team, the Welcome Centre Reception, Medical Records (BRI) and the Outpatients Appointment Centre. The remaining eight complaints were in respect of car parking and hospital transport.

Figure 22: Trust Services – formal and informal complaints received



³ Four complaints for Boots Pharmacy (BRI) were incorrectly recorded under Trust Services and Figure 21 therefore shows a total of 24 complaints for Q4 instead of 20.

Figure 23: Trust Services – Private & Overseas Patients



3.2 Complaints by hospital site

Of those complaints with an identifiable site, the breakdown by hospital is as follows:

Table 19: Breakdown of complaints by hospital site⁴

Hospital/Site	Number and % of complaints received in Q4 2017/18	Number and % of complaints received in Q3 2017/18
Bristol Royal Infirmary	182 (43% of total complaints) ↑	174 (42.8% of total complaints) ↓
Bristol Dental Hospital	50 (11.8%) ↑	48 (11.8%) ↓
Bristol Heart Institute	42 (9.9%) ↓	44 (10.8%) ↑
Bristol Royal Hospital for Children	37 ↑	36 (8.8%) ↓
St Michael's Hospital	45 ↑	34 (8.4%) ↓
Bristol Eye Hospital	33 ↑	31 (7.5%) ↑
Bristol Haematology & Oncology Centre	12 ↓	17 (4.1%) ↓
South Bristol Community Hospital	12 ↑	10 (2.5%) ↑
Southmead and Weston Hospitals (UH Bristol services)	2 ↓	3 (0.6%) ↑
Trust Headquarters	0 ↓	2 (0.5%) ↑
Trust Car Parks	2 =	2 (0.5%) ↑
Off Trust Premises	0 ↓	1 (0.2%) =
Community Dental Sites (Charlotte Keel)	2 ↑	0 (0%) ↓
Unity Community Sexual Health	4 ↓	6 (1.5%) ↑
TOTAL	423	407

⁴ It should be noted that these figures will not all match complaints by Division as some divisional services take place at other sites. For example, ENT comes under the remit of the Division of Surgery but the clinic is based at St Michael's Hospital.

3.2.1 Breakdown of complaints by inpatient/outpatient/ED status

In order to more clearly identify the number of complaints received by the type of service, Figures 24-28 below show data differentiating between inpatient, outpatient, Emergency Department and other complaints. The category of 'other' includes complaints about non-clinical areas, such as car parking, cashiers, administration departments, etc.

In Q4, 45.2% (*42.3%) of complaints received were about outpatient services, 34.3% (34.4%) related to inpatient care, 9.7% (9.3%) were about emergency patients; and 10.8% (16.3%) were in the category of 'other' (as explained above).

* Q3 percentages are shown in brackets for comparison.

Figure 24: All patient activity

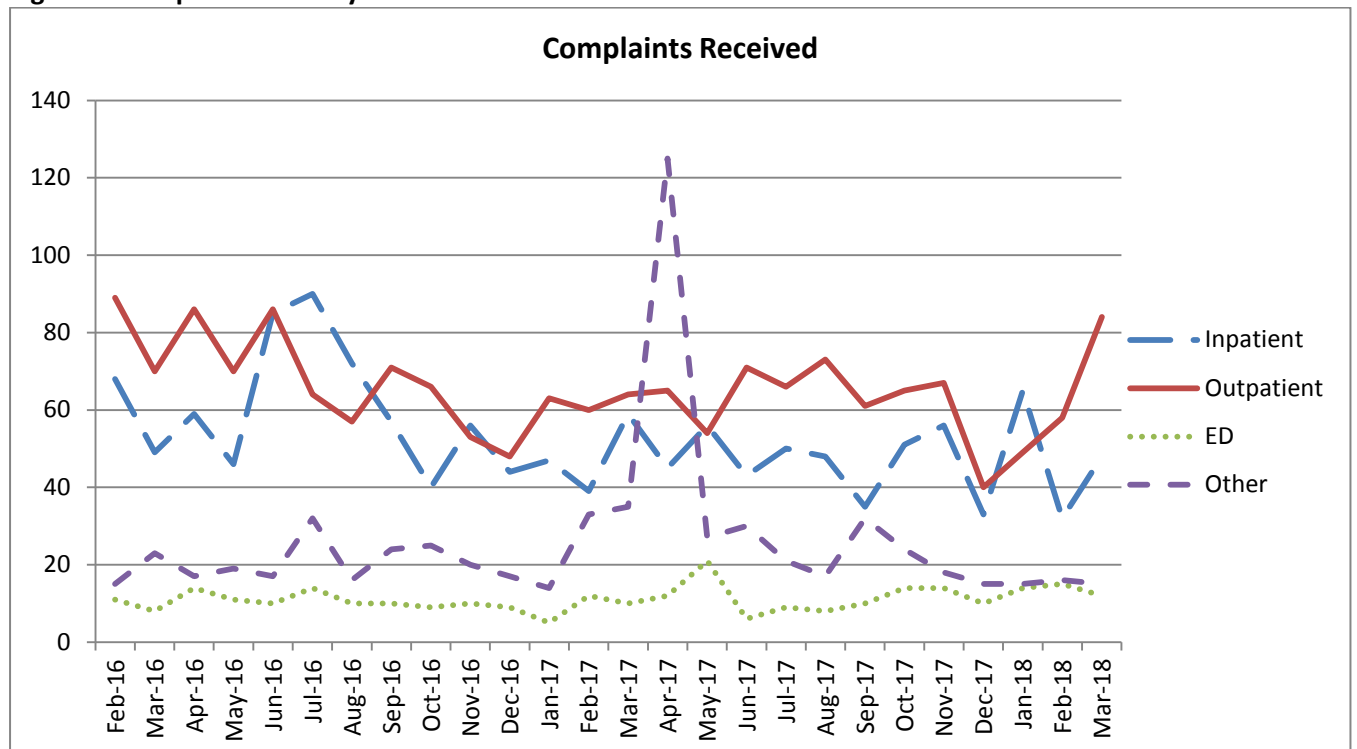


Figure 25: Complaints received from inpatients

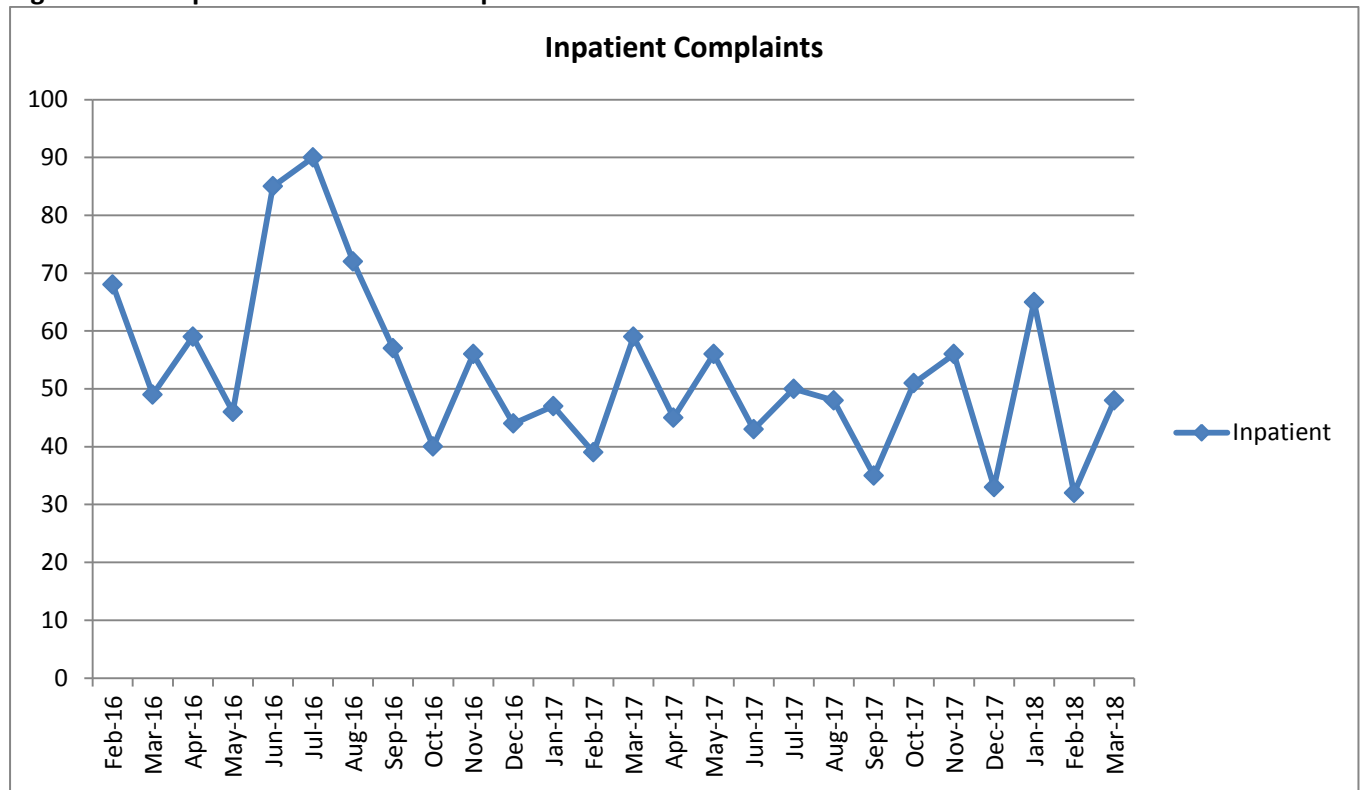


Figure 26: Complaints received from outpatients

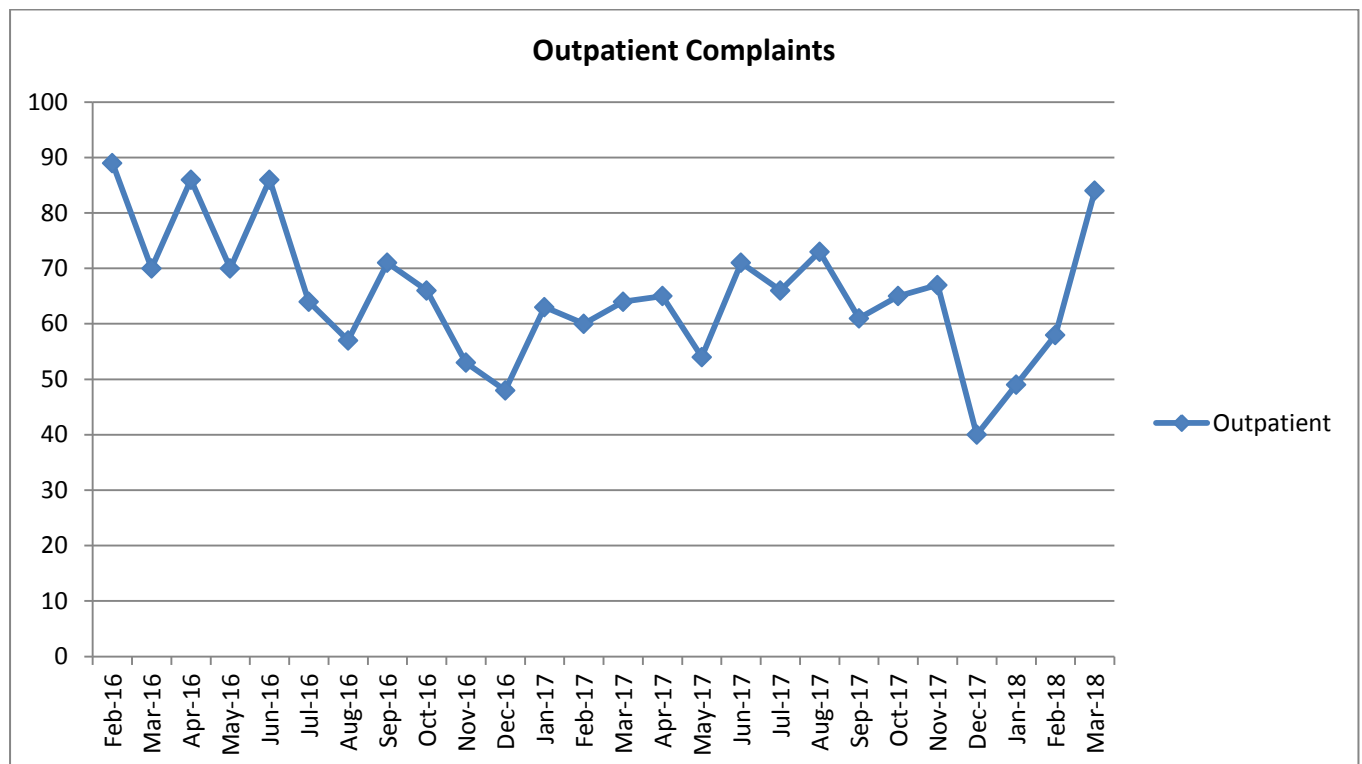


Figure 27: Complaints received from emergency department patients

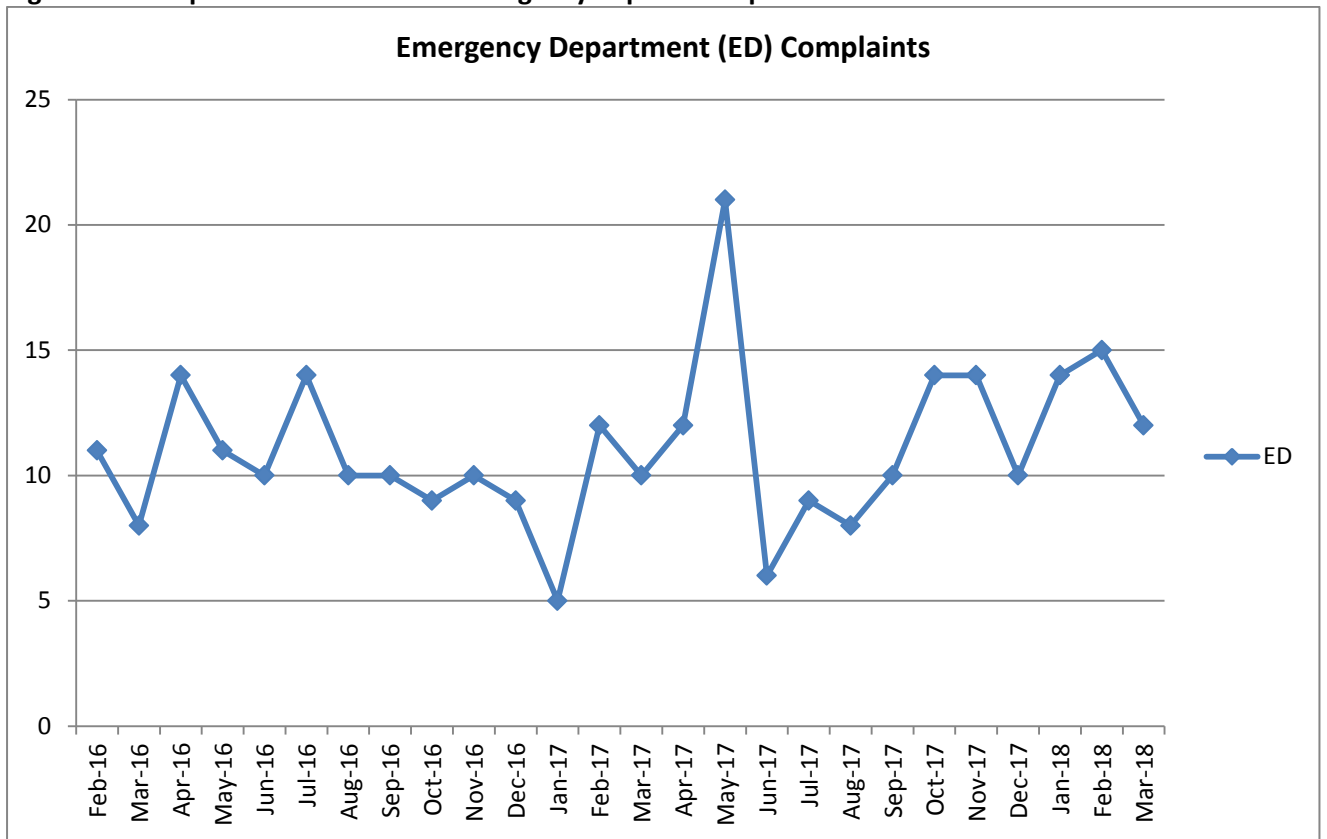


Figure 28: Complaints received from other patients (not inpatient, outpatient or emergency patients)

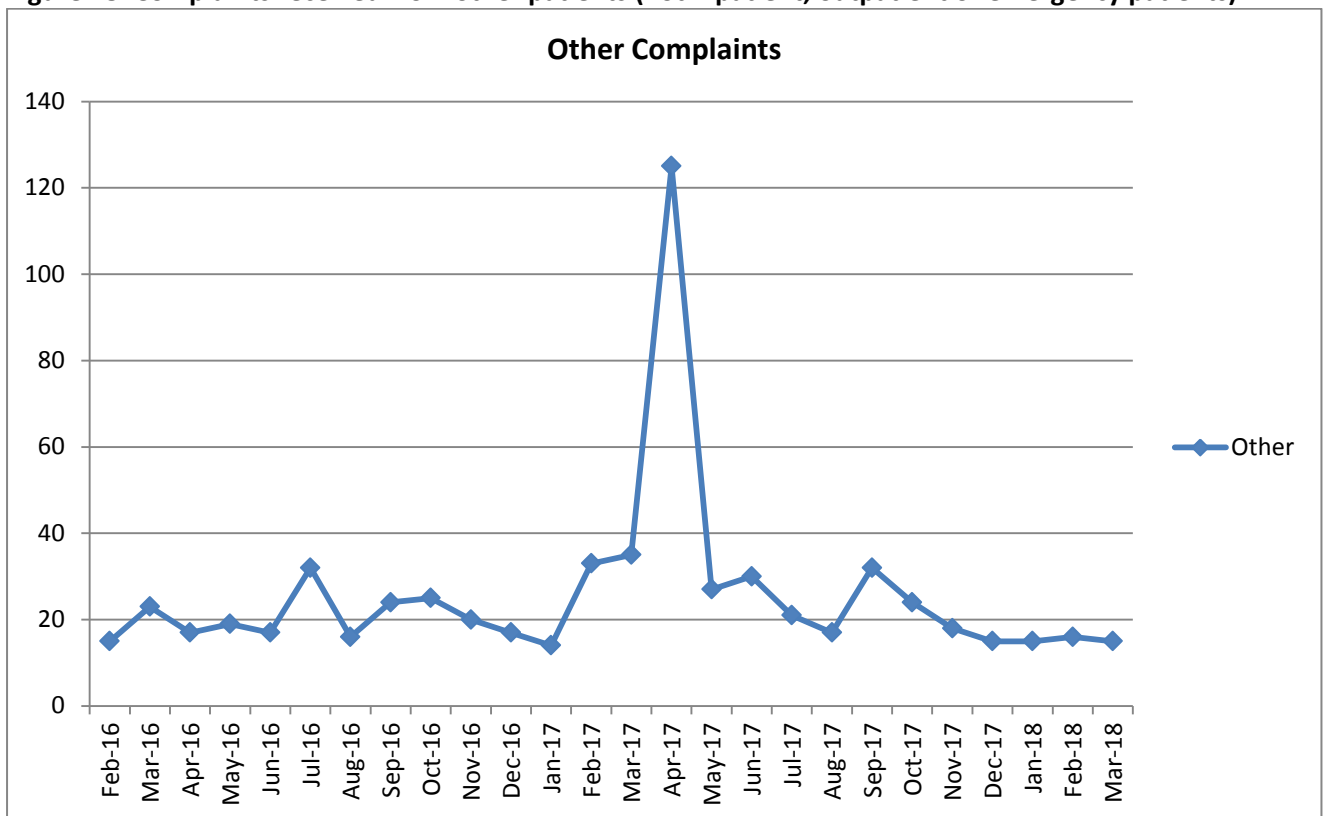


Table 20: Breakdown of Area Type

Complaints	Area Type				
Month	ED	Inpatient	Outpatient	Other	Grand Total
May-16	11	46	70	19	146
Jun-16	10	85	86	17	198
Jul-16	14	90	64	32	200
Aug-16	10	72	57	16	155
Sep-16	10	57	71	24	162
Oct-16	9	40	66	25	140
Nov-16	10	56	53	20	139
Dec-16	9	44	48	17	118
Jan-17	5	47	63	14	129
Feb-17	12	39	60	33	144
Mar-17	10	59	64	35	168
Apr-17	12	45	65	125	247
May-17	21	56	54	27	158
Jun-17	6	43	71	30	150
Jul-17	9	50	66	21	146
Aug-17	8	48	73	17	146
Sep-17	10	35	61	32	138
Oct-17	14	51	65	24	154
Nov-17	14	56	67	18	155
Dec-17	10	33	40	15	98
Jan-18	14	65	49	15	143
Feb-18	15	32	58	16	121
Mar-18	12	48	84	15	159
Grand Total	255	1197	1455	607	3514

3.3 Complaints responded to within agreed timescale

All Divisions reported breaches in Q4, totalling 31, which is a slight increase on the 30 breaches recorded in Q3. The largest percentage of breaches reported was by the Division of Trust Services (42.8% of all responses).

Table 21: Breakdown of breached deadlines

Division	Q4 (2017/18)	Q3 (2017/18)	Q2 (2017/18)	Q1 (2017/18)
Surgery	5 (9.2%)	9 (10.8%)	8 (14.3%)	6 (14.6%)
Women & Children	11 (34.4%)	9 (25.7%)	15 (38.5%)	6 (18.2%)
Trust Services	6 (42.8%)	5 (62.5%)	5 (45.5%)	2 (50%)
Medicine	6 (11.8%)	4 (8%)	5 (11.1%)	6 (22.2%)
Specialised Services	2 (10.5%)	3 (12.5%)	3 (12%)	6 (24%)
Diagnostics & Therapies	1 (20%)	0 (0%)	0 (0%)	0 (0%)
All	31 breaches	30 breaches	36 breaches	26 breaches

(So, as an example, there were 11 breaches of timescale in the Division of Women’s & Children’s Services in Q4, which constituted 34.4% of the complaint responses which were sent out by that division in Q4.)

Breaches of timescale were caused either by late receipt of draft responses from Divisions which did not allow adequate time for Executive review and sign-off; delays in processing by the Patient Support and Complaints Team; delays during the sign-off process itself; and/or responses being returned for amendment following Executive review.

Table 21 shows a breakdown of where the delays occurred in Q4. The Divisions were responsible for 22 of the breaches, five were caused by delays in the Patient Support & Complaints Team and four breaches were attributable to delays during Executive sign-off. The reason for the delays caused by the Patient Support & Complaints Team was a period of sickness when the team did not have any administrative cover and as a result some responses were late being taken to Trust Headquarters for signing.

Table 22: Reason for delay

Breach attributable to	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Trust Services	All
Division	0	3	1	11	0	6	21
Patient Support & Complaints Team	1	3	1	0	0	0	5
Executives/sign-off	4	0	0	0	1	0	5
All	5	6	2	11	1	6	31

3.4 Outcome of formal complaints

In Q4 we responded to 175 formal complaints⁵. Tables 23 and 24 below show a breakdown, by Division, of how many cases were upheld, partly upheld or not upheld in Q4 of 2017/18 and Q3 of 2017/18 respectively.

Table 23: Outcome of formal complaints – Q4 2017/18

	Upheld	Partly Upheld	Not Upheld
Surgery	10 (18.5%)	28 (51.9%)	16 (29.6%)
Medicine	13 (25.5%)	26 (51%)	12 (23.5%)
Specialised Services	8 (42.1%)	8 (42.1%)	3 (15.8%)
Women & Children	11 (34.4%)	17 (53.1%)	4 (12.5%)
Diagnostics & Therapies	1 (20%)	3 (60%)	1 (20%)
Trust Services	5 (35.7%)	3 (21.4%)	6 (42.9%)
Total	48 (27.4%)	85 (48.6%)	42 (24%)

⁵ Note: this is different to the number of formal complaints we *received* in the quarter

Table 24: Outcome of formal complaints – Q3 2017/18

	Upheld	Partly Upheld	Not Upheld
Surgery	15 (19.8%)	40 (52.6%)	21 (27.6%)
Medicine	14 (27.5%)	25 (49%)	12 (23.5%)
Specialised Services	10 (38.5%)	13 (50%)	3 (11.5%)
Women & Children	12 (35.3%)	20 (58.8%)	2 (5.9%)
Diagnostics & Therapies	2 (22.2%)	5 (55.6%)	2 (22.2%)
Trust Services	3 (33.3%)	3 (33.3%)	3 (33.3%)
Total	56 (27.3%)	106 (51.7%)	43 (21%)

4. Information, advice and support

In addition to dealing with complaints, the Patient Support and Complaints Team is also responsible for providing patients, relatives and carers with help and support. The team also acknowledged 30 compliments received during Q4 and shared these with the staff involved and their Divisional teams.

Table 25 below shows a breakdown of the 165 requests for advice, information and support dealt with by the team in Q4.

Table 25: Enquiries by category

Category	Enquiries in Q4 2017/18
Information about patient	43
Hospital information request	41
Clinical information request	14
Signposting	14
Medical records requested	7
Appointments administration issues	7
Patient choice information	5
Appointment enquiries	5
Travel arrangements	4
Clinical care	4
Accommodation enquiry	4
Communication	4
Personal property	3
Expenses claim	2
Emotional support	2
Freedom of information request	2
Aids and appliances	1
Transfer arrangements	1
Wayfinding	1
Support with access	1
Total	165

In addition to the enquiries detailed above, in Q4 the Patient Support and Complaints team recorded 117 enquiries that did not proceed. This is where someone contacts the department to make a complaint or enquiry but does not leave enough information to enable the team to carry out an investigation, or they subsequently decide that they no longer wish to proceed with the complaint.

Including complaints, requests for information or advice, requests for support, compliments and cases that did not proceed, the Patient Support and Complaints Team dealt with a total of 741 separate enquiries in Q4 2017/18, compared with 710 in Q3.

5. Acknowledgement of complaints by the Patient Support and Complaints Team

The NHS Complaints Procedure (2009) states that complaints must be acknowledged within three working days. This is also a requirement of the NHS Constitution. The Trust's own policy states that complaints made in writing (including emails) will be acknowledged within three working days and that complaints made orally (via the telephone or in person) will be acknowledged within two working days.

In Q4, 251 complaints were received in writing (email, letter or complaint form) and 172 were received verbally (31 in person via drop-in service and 112 by telephone). Of the 423 complaints received in Q4, 97.6% (413 out of the 423 received) met the Trust's standard of being acknowledged within two working days (verbal) and three working days (written).

The Patient Support & Complaints Manager has reviewed the 10 cases that were not acknowledged within timescale and all 10 occurred when the team were experiencing high levels of sickness and were without administrative cover for a short period. As a result, some administrative work unfortunately fell slightly behind.

6. PHSO cases

During Q4, the Trust was advised of four new Parliamentary and Health Service Ombudsman (PHSO) interest in specific complaints. During the same period, three existing cases remain ongoing. Two cases were closed during Q4, one of which was partly upheld and one was not upheld

Table 26: Complaints opened by the PHSO during Q4

Case Number	Complainant (patient unless stated)	On behalf of (patient)	Date complaint received by Trust [and date notified by PHSO]	Site	Department	Division
8854	CP	AP	10/07/2017 [01/02/2018]	BRHC	Paediatric Rheumatology	Women & Children
Copies of complaint file and medical records sent to PHSO 27/02/2018. Received written confirmation of the scope of the PHSO's investigation on 28/03/2018 and this was shared with the Division. Currently awaiting PHSO's draft report.						
7407	JW-S	LS	20/04/2017 [31/01/2018]	BHI	Cardiology	Specialised Services
Copies of complaint file and medical records sent to PHSO 13/02/2018. Received PHSO's draft report 24/04/2018 confirming that they have upheld the complaint. Currently awaiting divisional comments on draft report, to be sent as a formal response from the Trust – due with PHSO by 11/05/2018.						
6693	CL	SL	16/03/2017 [01/02/2018]	BRI	Ward A700	Surgery
Copies of complaints file and medical records sent to PHSO 26/02/2018. Further information requested by PHSO 25/04/2018 – currently awaiting a response from the division.						

695	BG	N/A	04/03/2016 [12/03/2018]	BEH and BRI	BEH ED and BRI Radiology	Surgery and Diagnostics & Therapies
Copies of complaint file and medical records sent to PHSO 26/03/2018. Currently awaiting further contact from the PHSO.						

Table 28: Complaints ongoing with the PHSO during Q4

Case Number	Complainant (patient unless stated)	On behalf of (patient)	Date complaint received by Trust [and date notified by PHSO]	Site	Department	Division
679	LH		02/03/2016 [09/05/2017]	BEH	Outpatients	Surgery
Received PHSO's draft report on 04/04/2018 partly upholding the complaint and making recommendations. On 09/04/2018, we responded accepting the findings and the recommendations. Currently awaiting the PHSO's final report.						

Table 29: Complaints formally closed by with the PHSO during Q4

Case Number	Complainant (patient unless stated)	On behalf of (patient)	Date complaint received by Trust [and date notified by PHSO]	Site	Department	Division
1380	SD	DD	26/04/2016 [23/08/2017]	STMH	Ear, Nose & Throat	Surgery
On 25/02/2018, the Trust received the PHSO's final report confirming that they have not upheld the complaint. This was shared with the division.						
3438	SC	SC	26/04/2016 [23/08/2017]	STMH	Fetal Medicine Unit	Women & Children
PHSO decided to partly uphold the complaint and recommended that we write to the patient to apologise for the failings identified in their report and for the impact these failings had on her. On 21/02/2018, the PHSO confirmed that they were satisfied that the Trust had complied with all of their recommendations.						

7. Complaint Survey

Q4 complaints survey data not available at time of submitting report

Since February 2017, the team has been sending out complaint surveys to all complainants six weeks after their complaint was resolved and closed. Prior to this, surveys had been issued retrospectively on an annual basis; this meant that for some complainants, a year had passed since they had made their complaint and many struggled to recall the details.

The survey responses are now monitored on a regular basis and one improvement has already been made to the way that the Patient Support & Complaints team work as a direct result of the responses received. Respondents told us that they were not always made aware of SEAP and other independent advocacy services. The team now ensures that all complainants (not just those making a formal complaint) are provided with details of these advocacy services.

Table 28 below shows data from responses received during Q3, compared with those received in previous quarters.

Table 28: Complaints Survey Data

Survey Measure/Question	Q4 2017/18	Q3 2017/18	Q2 2017/18	Q1 2017/18
Respondents who confirmed that a timescale had been agreed with them by which we would respond to their complaint.		83%	71.1%	73.9%
Respondents who felt that the Trust would do things differently as a result of their complaint.		20%	37.2%	23.4%
Respondents who found out how to make a complaint from one of our leaflets or posters.		5.6%	14.3%	6.7%
Respondents who confirmed we had told them about independent advocacy services.		37%	31.1%	34%
Respondents who confirmed that our complaints process made it easy for them to make a complaint.		64.3%	73.9%	63%
Respondents who felt satisfied or very satisfied with how their complaint was handled.		66.1%	67.4%	58.7%
Respondents who said they did not receive their response within the agreed timescale.		28.6%	20.5%	21.3%
Respondents who felt that they were treated with dignity and respect by the Patient Support & Complaints Team.		91.1%	100%	85.1%
Respondents who felt that their complaint was taken seriously when they first raised their concerns.		83.9%	78.3%	74.5%
Respondents who did not feel that the Patient Support & Complaints Team kept them updated on progress often enough about the progress of their complaint.		20.4%	23.9%	31.9%
Respondents who received the outcome of our investigation into their complaint by way of a face-to-face meeting.		1.8%	6.8%	2.3%
Respondents who said that our response address all of the issues that they had raised.		62.3%	44.4%	50%

8. Protected Characteristics

Data for section 8 not available at time of submitting report

This report includes statistics relating to the protected characteristics of patients who have made a complaint. The areas recorded are age, ethnic group, gender, religion and civil status.

The Patient Support and Complaints Team continues to work hard to ensure that as much of this information as possible is gathered from patients, in order to reduce the numbers reported in each category as “unknown”.

It should be noted that these statistics relate to the **patient** and not the complainant (if someone else has complained on their behalf).

8.1 Age

Age Group	Number of Complaints Received – Q4 2017/18
0-15	
16-24	
25-29	
30-34	
35-39	
40-44	
45-49	
50-54	
55-59	
60-64	
65+	
Total Complaints	

8.2 Ethnic Group

Ethnic Group	Number of Complaints Received – Q4 2017/18
White British	
Indian	
Black Caribbean	
Pakistani	
Mixed white and black Caribbean	
White Irish	
Asian - Indian	
Asian - Pakistani	
Black African	
Other Asian	
Other Black	
Other mixed	
Other white	
Other ethnic category	
Unknown/Not stated	
Total Complaints	

8.3 Religion

Religion	Number of Complaints Received – Q4 2017/18
Christian: Church of England – 122 'Christian' – 21 Catholic (Roman Catholic) – 19 Baptist – 10 Russian Orthodox – 2 Salvation Army – 2	
Muslim	
Hindu	
Jehovah's Witness	
Mormon	
Sikh	
Agnostic	
Not Religious	
Unknown/Not stated	
Total Complaints	

8.4 Civil Status

Civil Status	Number of Complaints Received – Q4 2017/18
Single	
Married/Civil Partnership	
Widowed/Surviving Civil Partner	
Divorced/Dissolved Civil Partnership	
Co-habiting	
Separated	
Unknown	
Total Complaints	

8.5 Gender

Of the XXX complaints received in Q4 2017/18, XXX (XX.X%) of the patients involved were female and XXX (XX.X%) were male.