



**University Hospitals
Bristol and Weston**
NHS Foundation Trust

Complaints Report

Quarter 4, 2019/2020

(1 January 2020 to 31 March 2020)

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Quarter 4 Executive summary and overview

	Q4	
Total complaints received	444	↑
Complaints acknowledged within set timescale	100%	=
Complaints responded to within agreed timescale – formal investigation	85%	↓
Complaints responded to within agreed timescale – informal investigation	91.9%	↑
Proportion of complainants dissatisfied with our response (formal investigation)	8.7%	↑

Successes	Priorities
<ul style="list-style-type: none"> 100% of complaints received during Q4 of 2019/20 were acknowledged in a timely manner Complaints about Bristol Eye Hospital decreased for the fourth consecutive quarter and were 56% lower than during the same period one year ago. 	<ul style="list-style-type: none"> To ensure that all complaints received during the COVID-19 lockdown are triaged and investigated and responded to at the earliest opportunity. The PSCT Manager and Head of Quality (Patient Experience & Clinical Effectiveness) are working on plans to fully “re-start” the complaints service, including the introduction of a rota for staff to return to work whilst maintaining safe social distancing guidelines. Further work is required by all Divisions to meet the target for responding to complaints by the agreed deadline, especially in respect of formal complaints. It is anticipated that performance against this target will have understandably deteriorated during Q1 of 2020/21 due to COVID-19 related pressures on staff within the Divisions.
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Since the COVID-19 ‘lockdown’ commenced, the Patient Support and Complaints (PSCT) Manager has reassessed the way in which informal complaints are processed and trialled a new way of managing these, as many divisional staff have not been available to investigate complaints. This has resulted in a proposal to continue with this new process following a full “re-start” of the service in July. At the end of 2019 / beginning of 2020, a trial was carried out at the suggestion of the Division of Medicine, whereby the complaints team contacted Duty Matrons to ask for their help in dealing with issues raised by current inpatients in “real time” in order to prevent an escalation of their concerns; other divisions are keen for this to be rolled out Trustwide and the PSCT Manager is liaising with the Heads of Nursing and Divisional Complaints Coordinators to take this forward. Opportunity to review the format of this report as part of forthcoming corporate services integration with Weston General Hospital. 	<ul style="list-style-type: none"> Since March, the Trust’s complaints service has been largely closed in response to the COVID-19 ‘lockdown’, with only high risk complaints currently being investigated. There is therefore a risk of a backlog of complaints needing to be investigated once the complaints service has fully re-opened (from 1st July), however the PSCT Manager is carefully triaging all complaints received during the lockdown to ensure that, wherever possible, enquirers get answers to their questions, often via swift informal conversations with Divisional staff (see Opportunities).

1. Complaints performance – Trust overview

The Trust is committed to supporting patients, relatives and carers in resolving their concerns. Our service is visible, accessible and impartial, with every issue taken seriously. Our aim is to provide honest and open responses in a way that can be easily understood by the recipient.

1.1 Total complaints received

The Trust received 444 complaints in quarter 4 (Q4) of 2019/20. This total includes complaints received and managed via either formal or informal resolution (whichever has been agreed with the complainant)¹ but 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. The impact of the Coronavirus outbreak can start to be seen in the reduction in the number of complaints received towards the end of Q4.

Figure 1: Number of complaints received

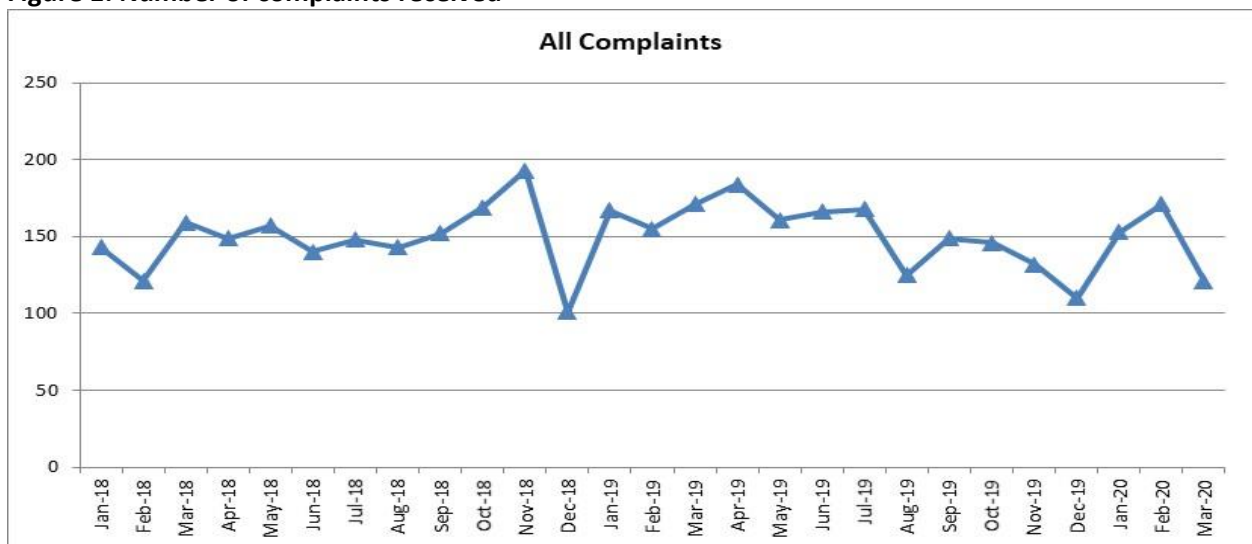
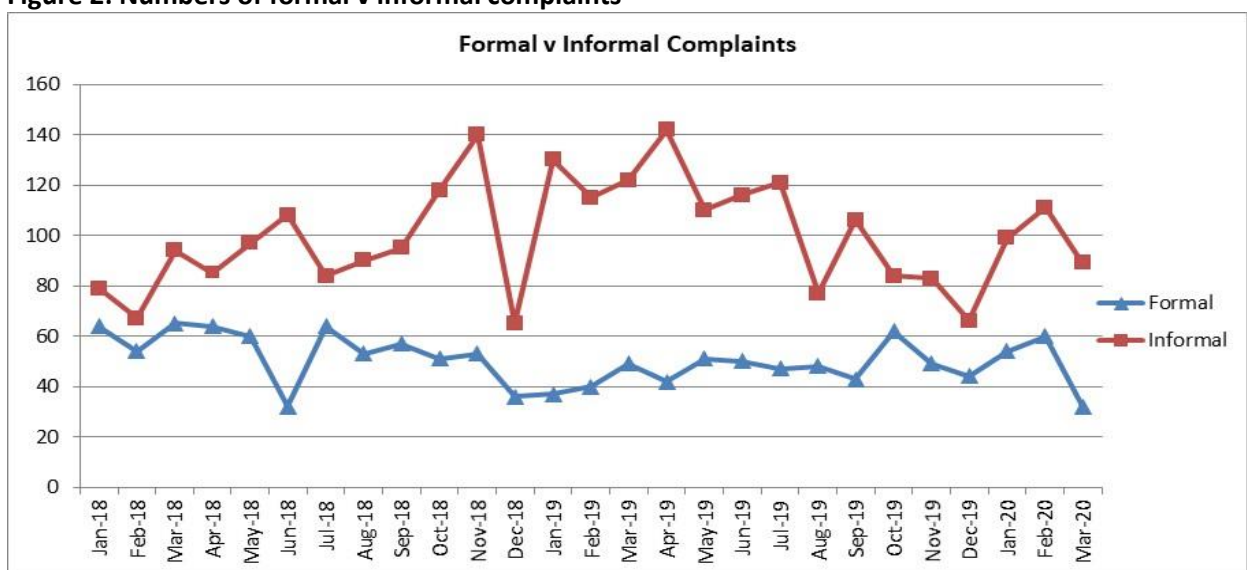


Figure 2: Numbers of formal v informal complaints



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.

Figure 2 (above) shows complaints dealt with via the formal investigation process compared with those dealt with via the informal investigation process, over the same period. We continue to deal with a higher proportion of complaints via the informal process, which means that these issues are being dealt with as quickly as possible and by the specialty managers responsible for the service involved.

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 our findings, or arrange a meeting to discuss them. The timescale is agreed with the complainant upon receipt of the complaint and is usually 30 working days.

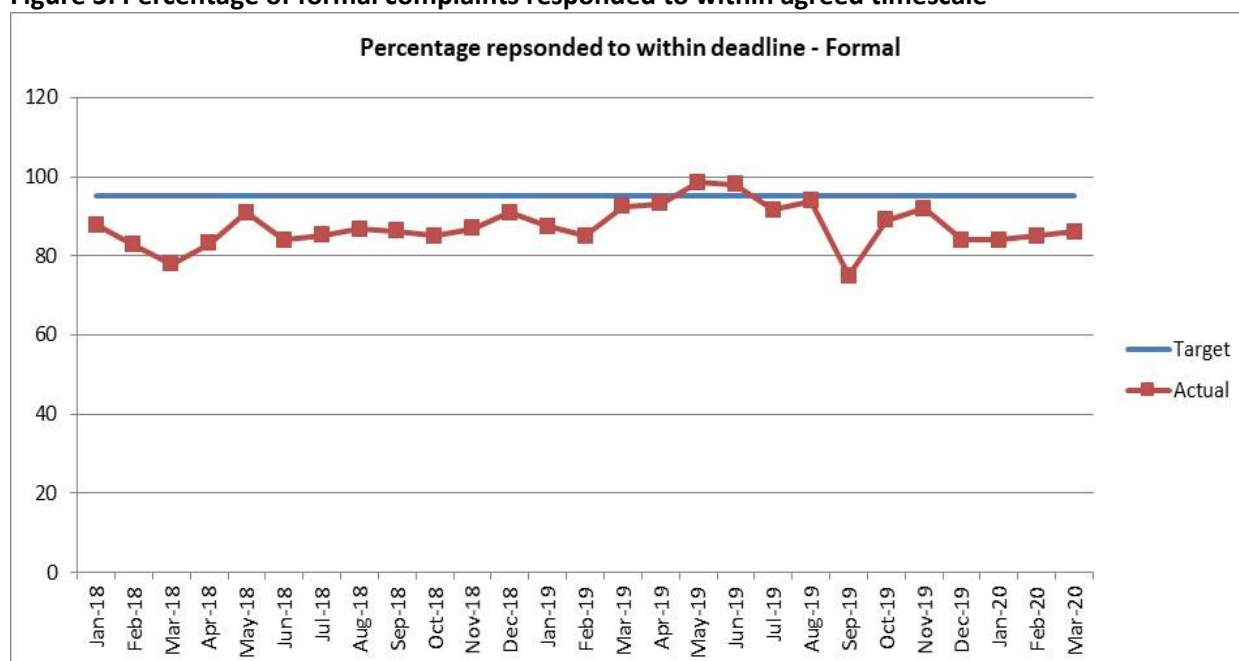
When a complaint is managed through the informal resolution process, the Trust and complainant also agree a timescale and this is usually 10 working days.

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 2019/20, 84.9% of responses were posted within the agreed timescale. This represents 32 breaches out of the 212 formal complaint responses which were sent out during the quarter². This is a deterioration of the 88.3% reported in Q3. Figure 3 shows the Trust's performance in responding to complaints since January 2018. Please see section 3.3 of this report for details of where these breaches occurred and at which part of the process they were delayed.

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



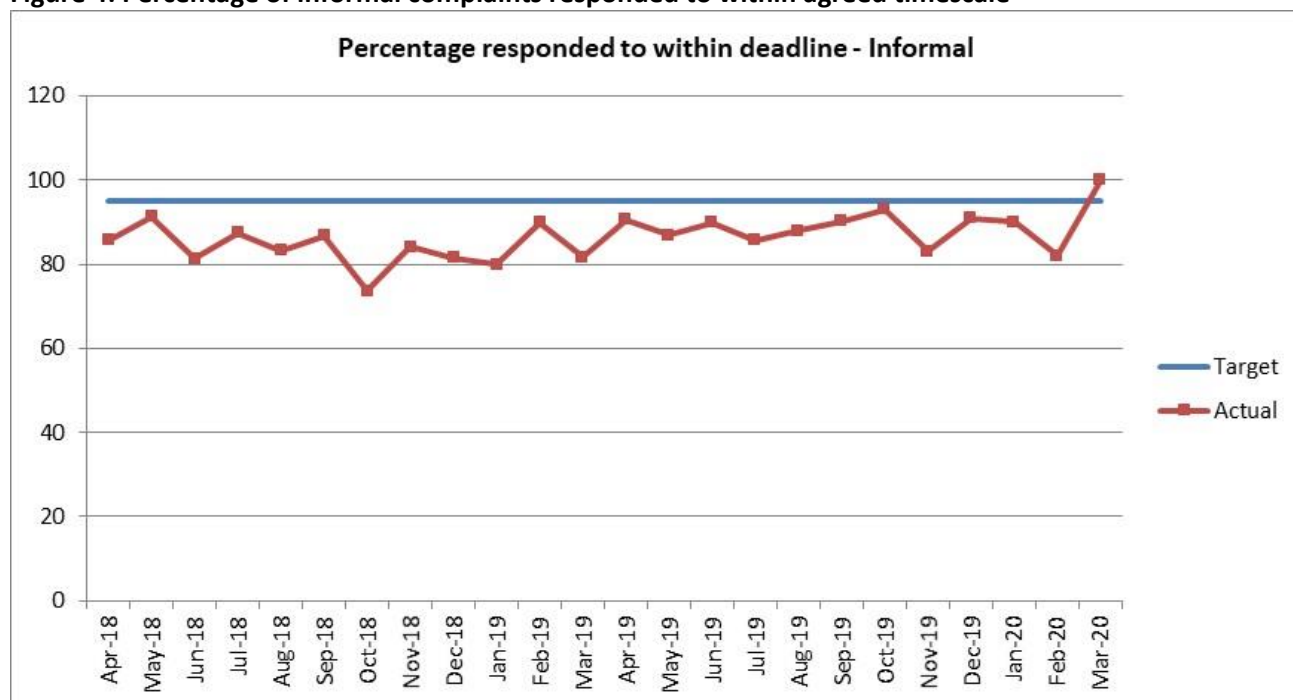
² Note that this will be a different figure to the number of complainants who *made* a complaint in that quarter.

1.2.2 Informal Investigations

In Q4 2019/20, the Trust received 298 complaints that were investigated via the informal process. During this period, the Trust responded to 224 complaints via the informal complaints route and 91.1% (204) of these were responded to by the agreed deadline, a small improvement on the 90.1% reported in Q3.

Figure 4 (below) shows performance since April 2018, for comparison with formal complaints, although it should be noted that the 95% target was only formally set with effect from Q4 2018/19.

Figure 4: Percentage of informal complaints responded to within agreed timescale



1.3 Dissatisfied complainants

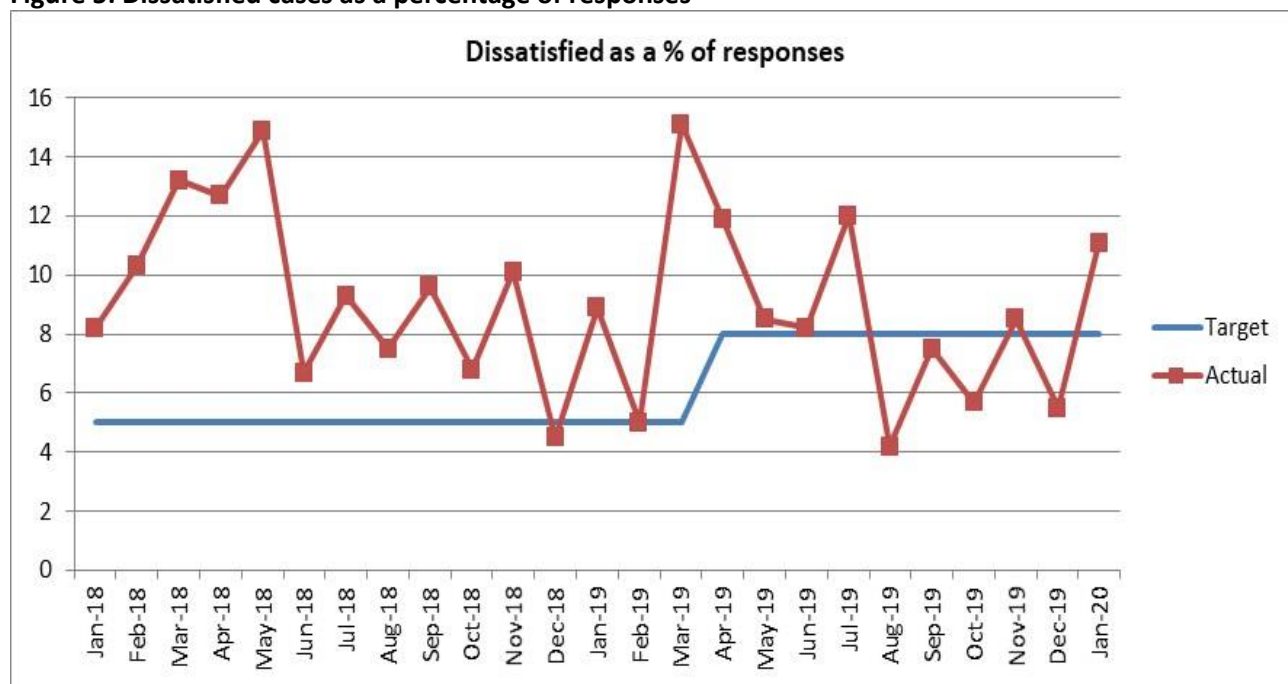
Our target for 2019/20 has been that no more than 8% of complaints responses should lead to a dissatisfied response.

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 2019/20, we are able to report dissatisfied data for November and December 2019 and January 2020. 18 complainants who received a first response from the Trust during those months have since contacted us to say they were dissatisfied. This represents 8.7% of the 207 first responses sent out during that period.

Figure 5 shows the monthly percentage of complainants who were dissatisfied with aspects of our complaints responses since January 2018.

Figure 5: 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 2019/20 compared with Q3.

Complaints in the majority of categories increased in Q4, compared with Q3, with the exception of small decreases in complaints about ‘attitude and communication’, ‘discharge/transfer/transport’ and ‘access’.

Complaints in respect of ‘appointments and admissions’ and ‘clinical care’ accounted for 62.2% of all complaints received (276 of 444).

Table 1: Complaints by category/theme

Category/Theme	Number of complaints received in Q4 (2019/20)	Number of complaints received in Q3 (2019/20)
Appointments & Admissions	140 (31.5% of all complaints) ↑	124 (32.1% of all complaints) ↓
Clinical Care	136 (30.6%) ↑	122 (31.4%) ↓
Attitude & Communication	77 (17.3%) ↓	82 (21.1%) ↑
Facilities & Environment	35 (7.9%) ↑	22 (5.7%) ↓
Information & Support	34 (7.7%) ↑	16 (4.1%) ↓
Documentation	14 (3.2%) ↑	11 (2.8%) ↑
Discharge/Transfer/Transport	8 (1.8%) ↓	9 (2.3%) ↓
Access	0 (0%) ↓	2 (0.5%) ↑
Total	444	388

Each complaint is also assigned to a more specific sub-category, of which there are over 100. Table 2 lists the most consistently reported sub-categories, which together accounted for 70.7% of the complaints received in Q4 (314/444).

Table 2: Complaints by sub-category

Sub-category	Number of complaints received in Q4 (2019/20)	Q3 (2019/20)	Q2 (2019/20)	Q1 (2019/20)
Cancelled/delayed appointments and operations	101 (6.3% increase compared to Q3) ↑	95	92	106
Clinical care (Medical/Surgical)	85 (16.4% increase) ↑	73	84	85
Appointment administration issues	30 (42.9% increase) ↑	21	40	65
Failure to answer telephones/failure to respond	17 (19% decrease) ↓	21	22	21
Communication with patient/relative	17 (15% decrease) ↓	20	10	18
Attitude of medical staff	12 (29.4% decrease) ↓	17	19	21
Car Parking	11 (10% increase) ↑	10	12	16
Referral errors	11 (57.1% increase) ↑	7	11	9
Clinical care (Nursing/Midwifery)	10 (9.1% decrease) ↓	11	11	16
Lost/misplaced/delayed test results	10 (42.9% increase) ↑	7	9	10
Lost personal property	10 (150% increase) ↑	4	7	5

The largest increase in percentage of complaints was in respect of ‘lost personal property’, however the number of complaints (10) is low and there were no common themes identified, other than that half of these complaints (5) were for wards in the Division of Medicine.

Similarly, there were no trends in the complaints received about ‘lost/misplaced/delayed test results’, other than that four of the 10 complaints related to BHI Outpatients.

The most significant decreases were in the numbers of complaints received about ‘attitude of medical staff’ and ‘communication with patient/relative’.

Figures 6-9 (below) show the longer term pattern of complaints received since January 2018 for a number of the complaints sub-categories reported in Table 2. A reduction can be seen in the number of complaints being received in the majority of categories/sub-categories towards the end of Q4, due to the early impact of the Covid-19 pandemic.

Figure 6 shows that, following a sharp increase at the beginning of 2020, complaints about ‘clinical care (medical/surgical)’ reduced at the end of Q4; and Figure 7 shows a similar pattern in complaints about ‘cancelled/delayed appointments and operations in this quarter. Figure 8 shows the somewhat erratic trend in complaints relating to ‘lost/misplaced/delayed test results’, which has appeared in the table of top sub-categories on and off during the last year. Trends in sub-categories of complaints are explored in more detail in the individual divisional details from section 3.1.1 onwards.

Figure 6: Clinical care – Medical/Surgical

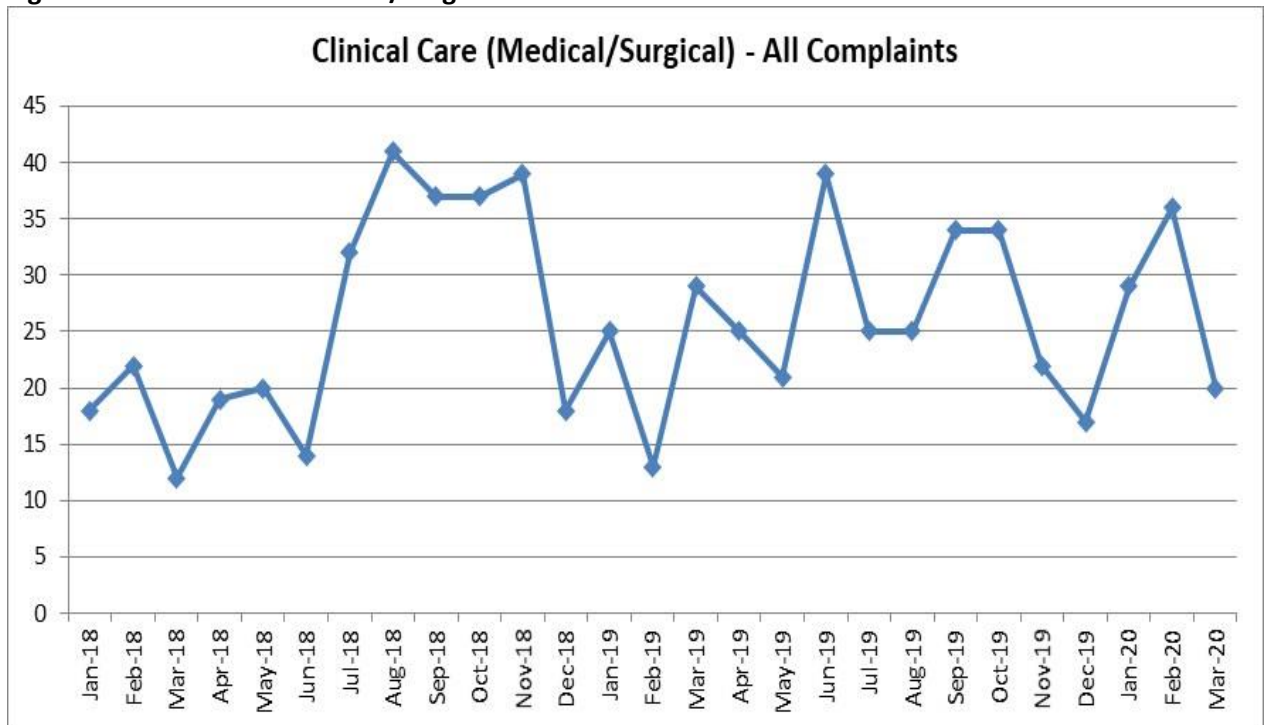


Figure 7: Cancelled or delayed appointments and operations

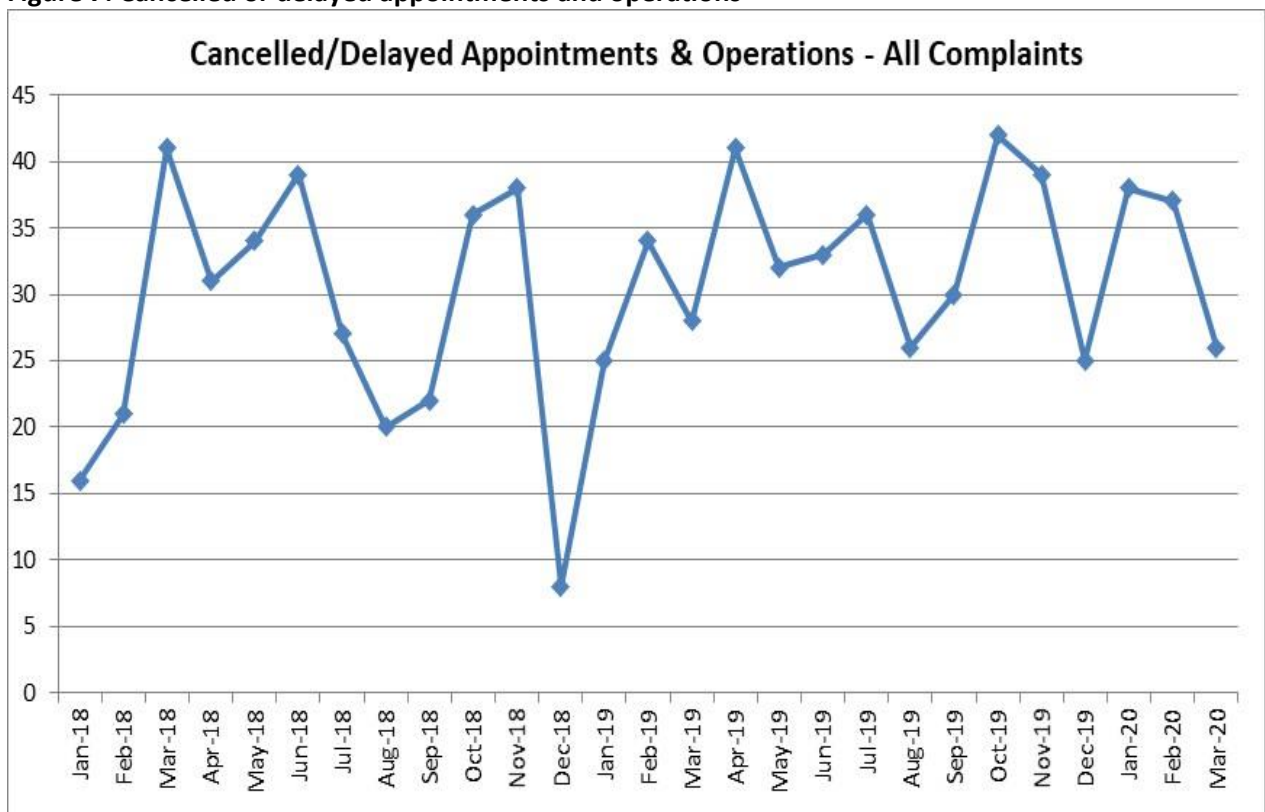


Figure 8: Lost/Misplaced/Delayed Test Results

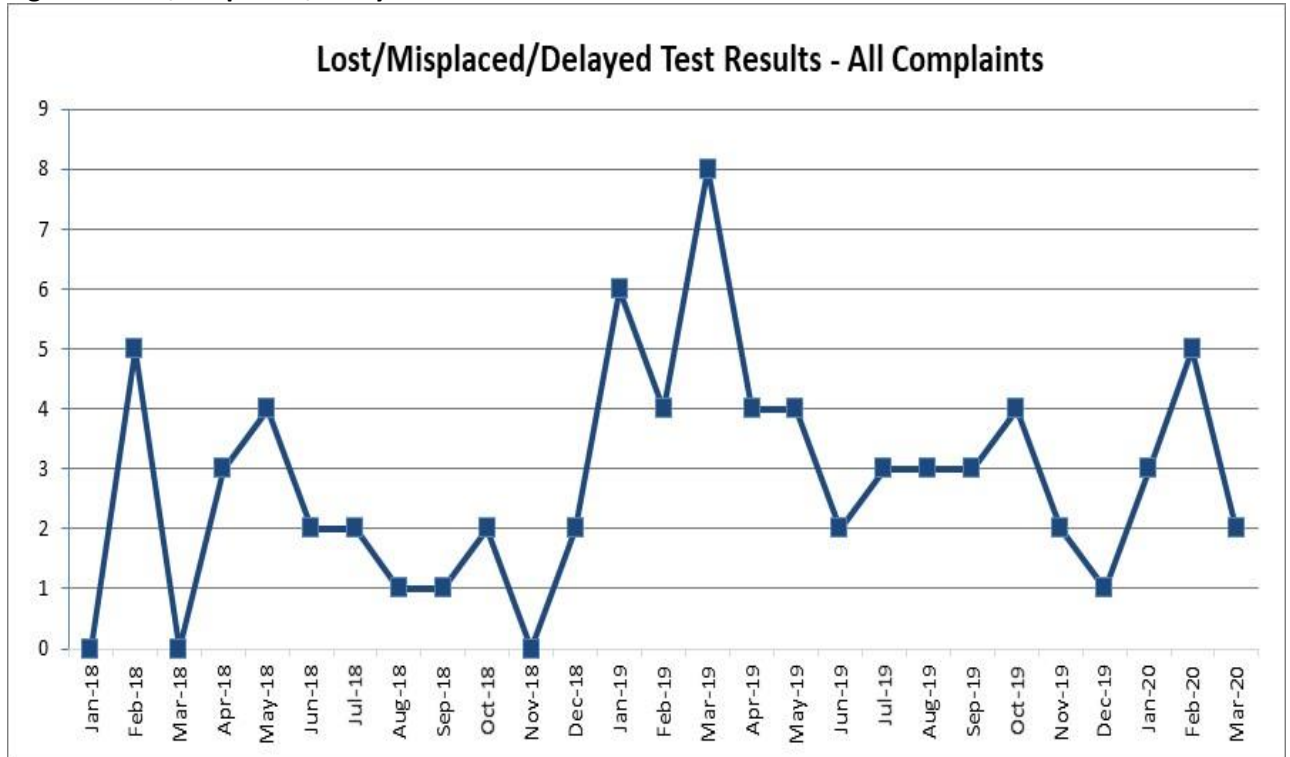
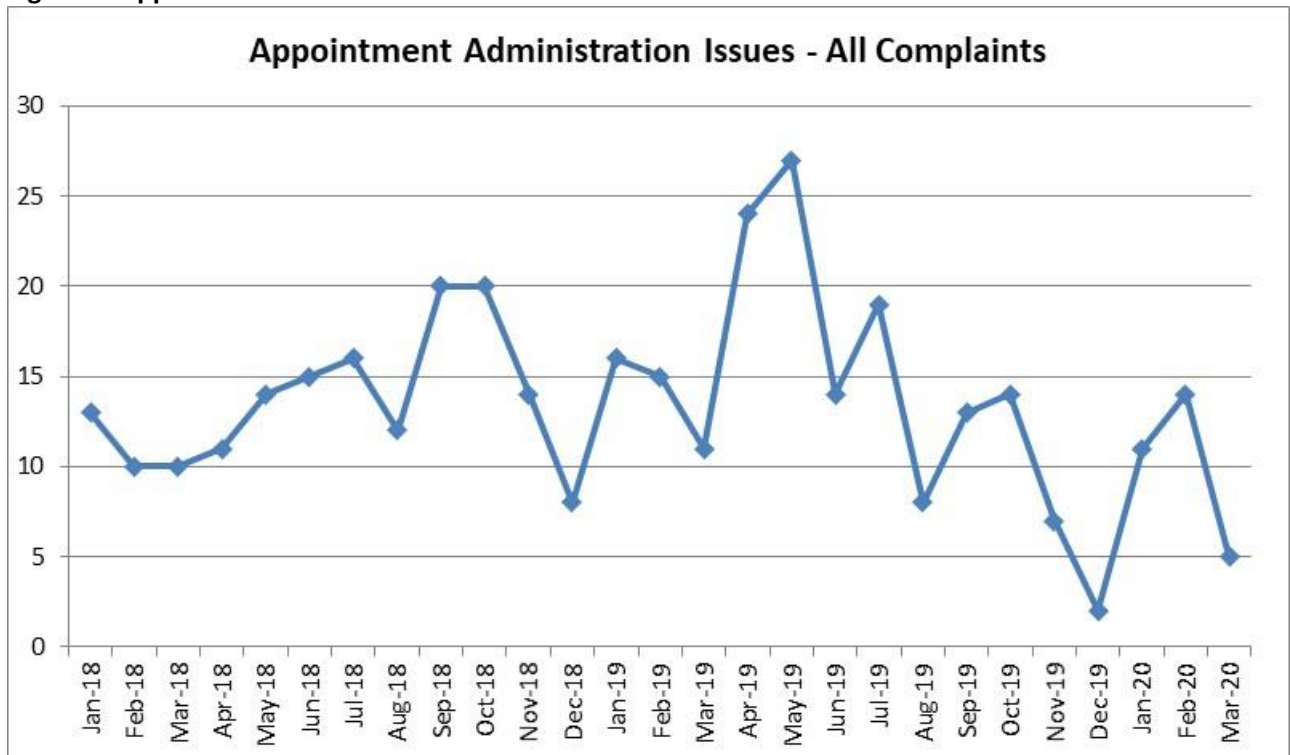


Figure 9: Appointment administration issues



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; and concerns about staff attitude and communication. 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	147 (127) ↑	88 (72) ↑	70 (66) ↑	89 (78) ↑	18 (17) ↑
Number of complaints about appointments and admissions	68 (56) ↑	17 (20) ↓	30 (28) ↑	21 (17) ↑	3 (2) ↓
Number of complaints about staff attitude and communication	23 (24) ↓	26 (21) ↑	11 (13) ↓	10 (17) ↓	3 (5) ↓
Number of complaints about clinical care	45 (37) ↑	24 (25) ↓	21 (21) =	41 (32) ↑	4 (9) ↓
Area where the most complaints have been received in Q4	Bristol Dental Hospital (BDH) – 30 (34) Bristol Eye Hospital (BEH) – 25 (29) Trauma & Orthopaedics – 7 (10) ENT – 22 (15) Upper GI – 14 (4) Lower GI – 10 (6)	Emergency Department (BRI) (inc. A413 EMU) – 23 (19) Dermatology – 16 (14) Rheumatology – 6 (4) Ward A300 (AMU) – 5 (6)	BHI (all) – 49 (49) BHOC (all) – 18 (15) Clinical Genetics – 3 (2) BHI Outpatients – 30 (28) BHOC Outpatients – 13 (9) Ward C603 (CCU) – 5 (0)	BRHC (all) – 53 (47) Carousel Outpatients (E301) – 8 (5) Children’s ED (E308) – 6 (10) Paediatric Neurology/Neurosurgical – 6 (7) StMH (all) – 34 (29) (Plus 1 for SBCH Gynae and 1 for Weston Birthing Centre) Gynaecology Outpatients – 8 (7) Central Delivery Suite (CDS) – 6 (4) Ward 73 (Maternity) – 6 (7)	Radiology – 7 (6) Audiology – 5 (3)
Notable deteriorations compared with Q3	ENT – 22 (16) Upper GI – 14 (4) Lower GI – 10 (6)	Emergency Department (BRI) (inc. A413 EMU) – 23 (19)	BHOC Outpatients – 13 (9) Ward C603 (CCU) – 5 (0)	No notable deteriorations	No notable deteriorations
Notable improvements compared with Q3	Bristol Eye Hospital (BEH) – 25 (29) Bristol Dental Hospital – 30 (34)	No notable improvements	No notable improvements	Children’s ED (E308) – 6 (10) Paediatric	No notable improvements

3.1.1 Division of Surgery

There was an increase in the total number of complaints received by the Division of Surgery in Q4; 147 compared with 127 in Q3. Complaints received by Bristol Eye Hospital (BEH) decreased for the fourth quarter in succession and were also down by 56% on the same period a year before.

The most notable increases in the numbers of complaints received were for the ENT service, Upper GI and Lower GI.

Complaints about ‘appointments and admissions’ and ‘clinical care’ both increased by just over 21% in Q4. Other categories showed a slight decrease, but remained similar to Q3. Complaints recorded under the sub-categories of ‘cancelled/delayed appointments and operations’ and ‘clinic care (medical/surgical)’ accounted for 53.1% of all complaints received by the division.

The Division achieved 93.3% against its target for responding to formal complaints within the agreed timescale in Q4 and 91.1% for informal complaints. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

Table 4: Complaints by category type

Category Type	Number and % of complaints received – Q4 2019/20	Number and % of complaints received – Q3 2019/20
Appointments & Admissions	68 (46.3% of total complaints) ↑	56 (44.1% of total complaints) ↓
Clinical Care	45 (30.6%) ↑	37 (29.1%) ↓
Attitude & Communication	23 (15.6%) ↓	24 (18.9%) ↓
Documentation	5 (3.4%) ↑	4 (3.1%) ↑
Information & Support	3 (2%) =	3 (2.4%) ↓
Facilities & Environment	2 (1.4%) ↑	1 (0.8%) ↓
Discharge/Transfer/ Transport	1 (0.7%) =	1 (0.8%) ↓
Access	0 (0%) ↓	1 (0.8%) ↑
Total	147	127

Table 5: Top sub-categories

Category	Number of complaints received – Q4 2019/20	Number of complaints received – Q3 2019/20
Cancelled or delayed appointments and operations	48 ↑	44 ↓
Clinical care (medical/surgical)	30 ↑	25 ↓
Appointment administration issues	13 ↑	10 ↓
Clinical Care (Dental)	9 ↑	3 =
Referral Errors	6 ↑	1 ↓
Failure to answer telephones/ failure to respond	6 ↓	8 ↑
Attitude of medical staff	5 ↓	7 ↓

Figure 10: Surgery, Head & Neck – formal and informal complaints received

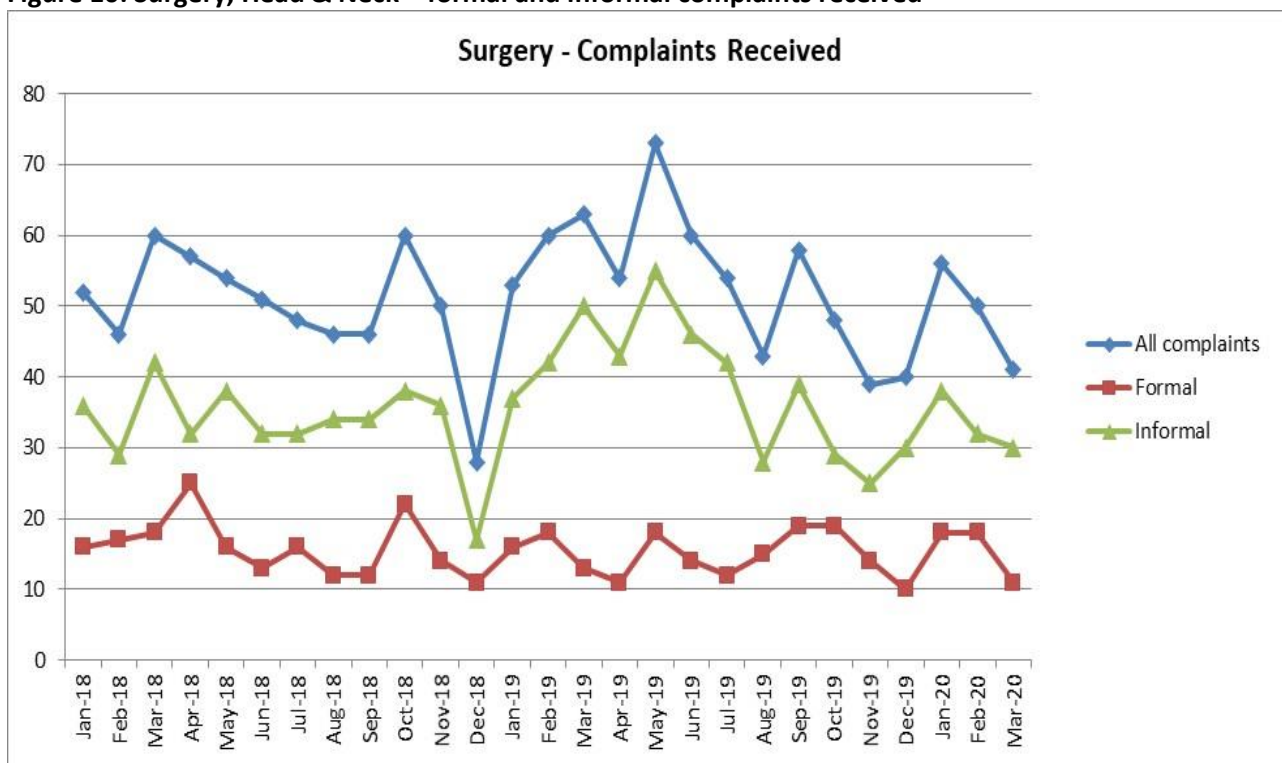


Figure 11: Complaints received by Bristol Dental Hospital

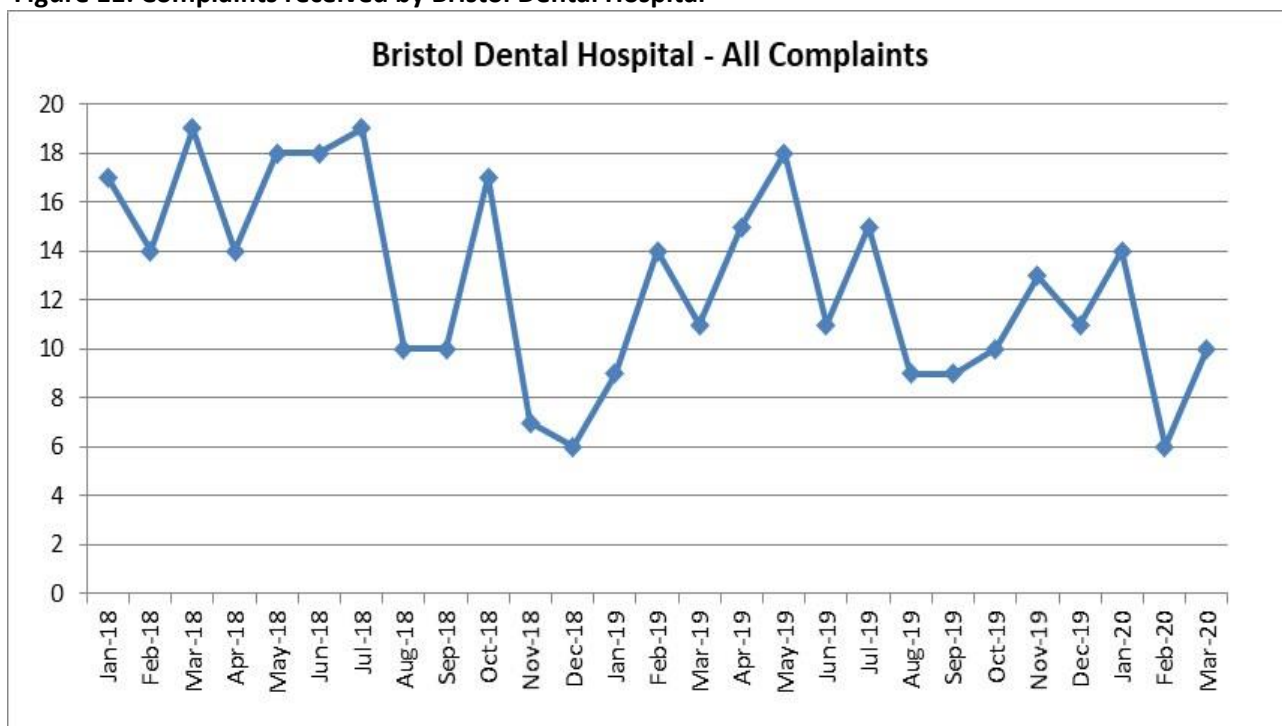


Figure 12: Complaints received by Bristol Eye Hospital

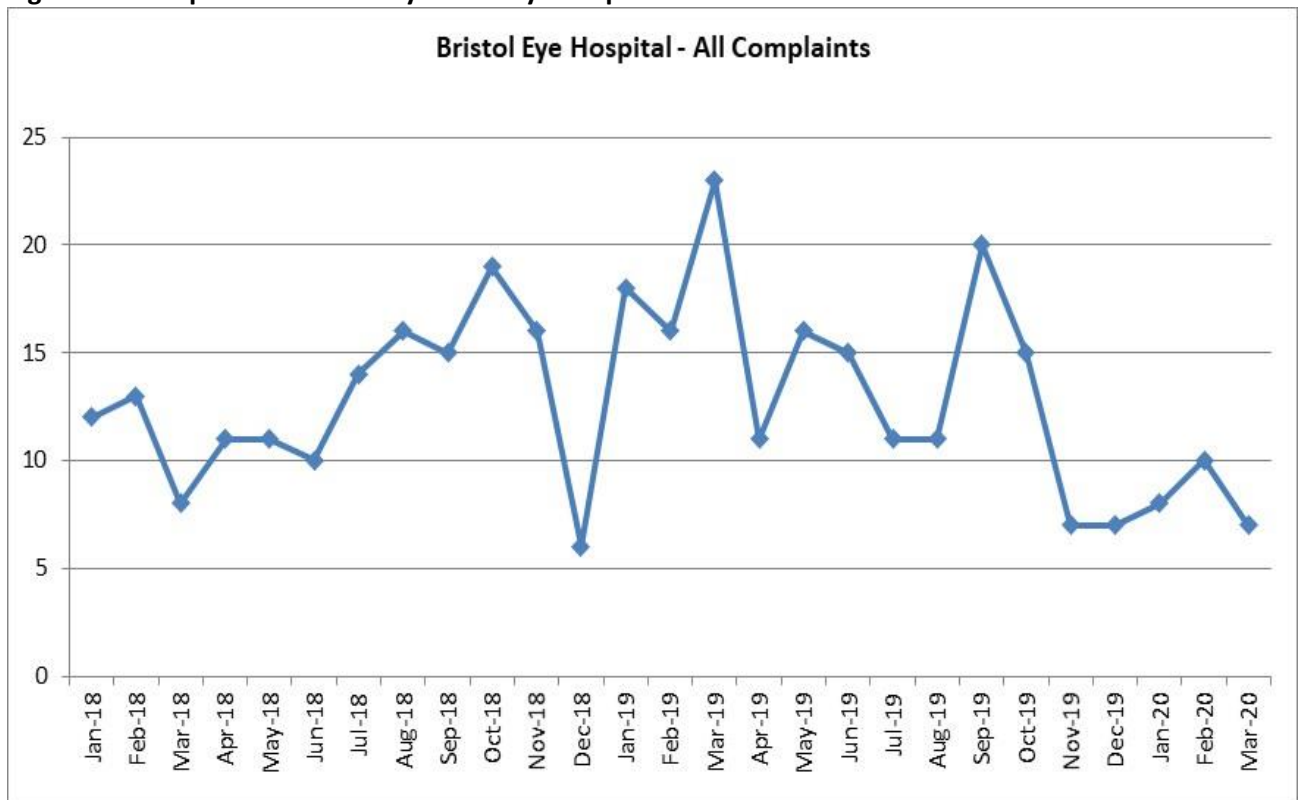
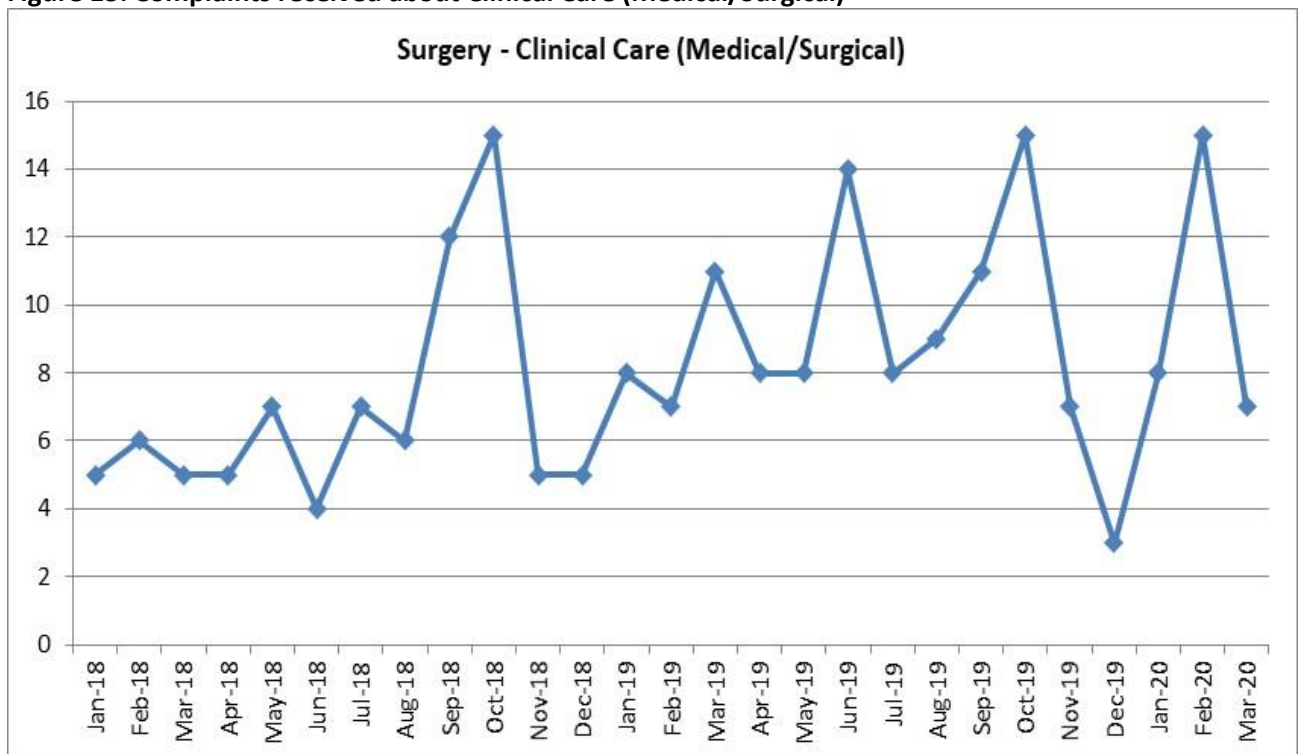


Figure 13: Complaints received about Clinical Care (Medical/Surgical)



3.1.2 Division of Medicine

In Q4, there was an increase in the total number of complaints received by the Division of Medicine compared with Q3. There were small increases in the number of complaints received by the Dermatology and Rheumatology services and a more notable increase of 21% in complaints for the Emergency Department at the BRI.

Complaints recorded under the category of ‘attitude and communication’ increased for the second consecutive quarter, with this category accounting for the highest percentage of any single category of complaints received by the division. However, there was a 45.5% reduction in complaints about ‘communication with patient/relative’, which is a sub-category within this same category.

The Division achieved 72% against its target for responding to formal complaints within the agreed timescale in Q4, a slight increase on the 70.7% reported in Q3. The division achieved 80.6% for informal complaints, a slight decrease on the Q3 figure of 82.5%. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

Table 6: Complaints by category type

Category Type	Number and % of complaints received – Q4 2019/20	Number and % of complaints received – Q3 2019/20
Attitude & Communication	26 (29.6% of total complaints) ↑	21 (29.2% of total complaints) ↑
Clinical Care	24 (27.3%) ↓	25 (34.7%) ↓
Appointments & Admissions	17 (19.3%) ↓	20 (27.7%) ↓
Facilities & Environment	9 (10.2%) ↑	2 (2.8%) ↓
Discharge/Transfer/ Transport	5 (5.7%) ↑	2 (2.8%) ↓
Information & Support	4 (4.5%) ↑	0 (0%) ↓
Documentation	3 (3.4%) ↑	2 (2.8%) ↑
Access	0 (0%) =	0 (0%) =
Total	88	72

Table 7: Top sub-categories

Category	Number of complaints received – Q4 2019/20	Number of complaints received – Q3 2019/20
Clinical care (medical/surgical)	15 ↓	19 ↓
Cancelled or delayed appointments and operations	12 ↓	16 ↑
Appointment administration issues	7 ↑	4 ↑
Failure to answer phone/ failure to respond	6 ↑	3 ↓
Communication with patient/ relative	6 ↓	11 ↑
Personal (lost) property	5 ↑	4 ↓

Figure 14: Medicine – formal and informal complaints received

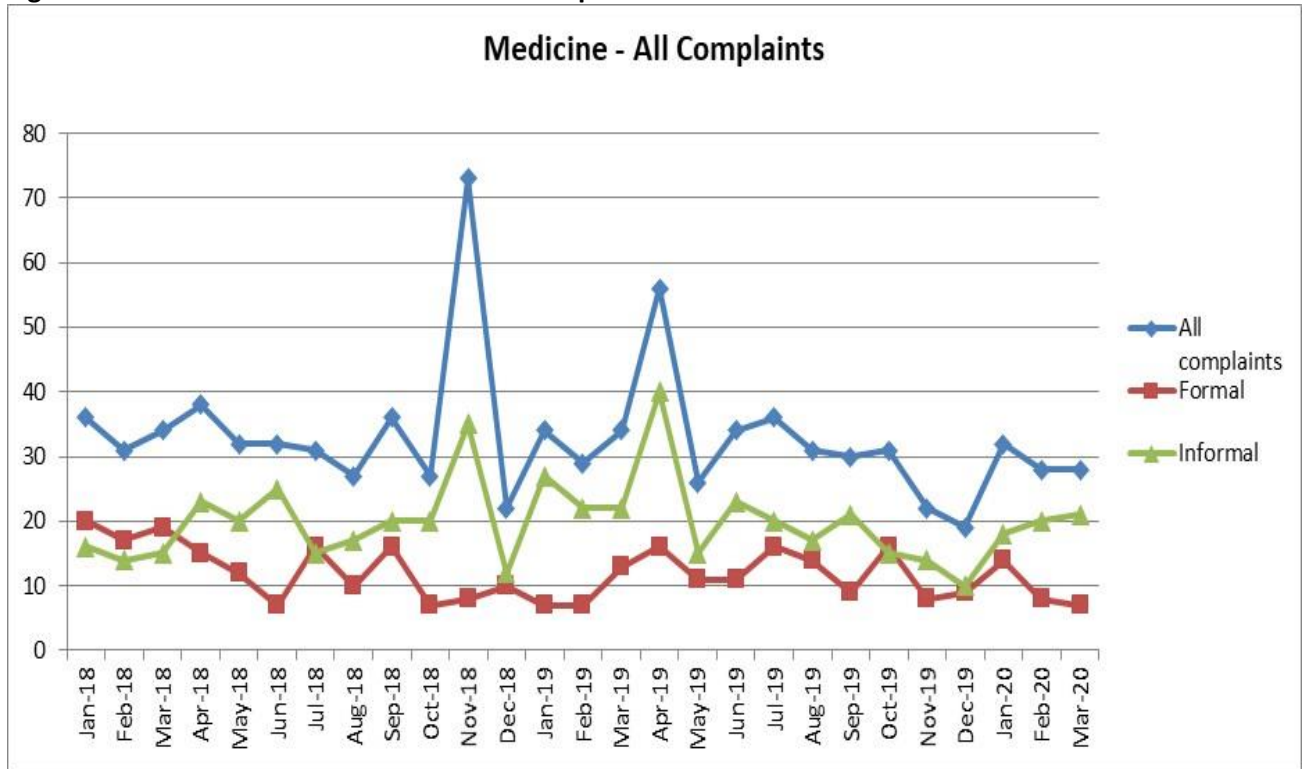


Figure 15: Complaints received by Dermatology

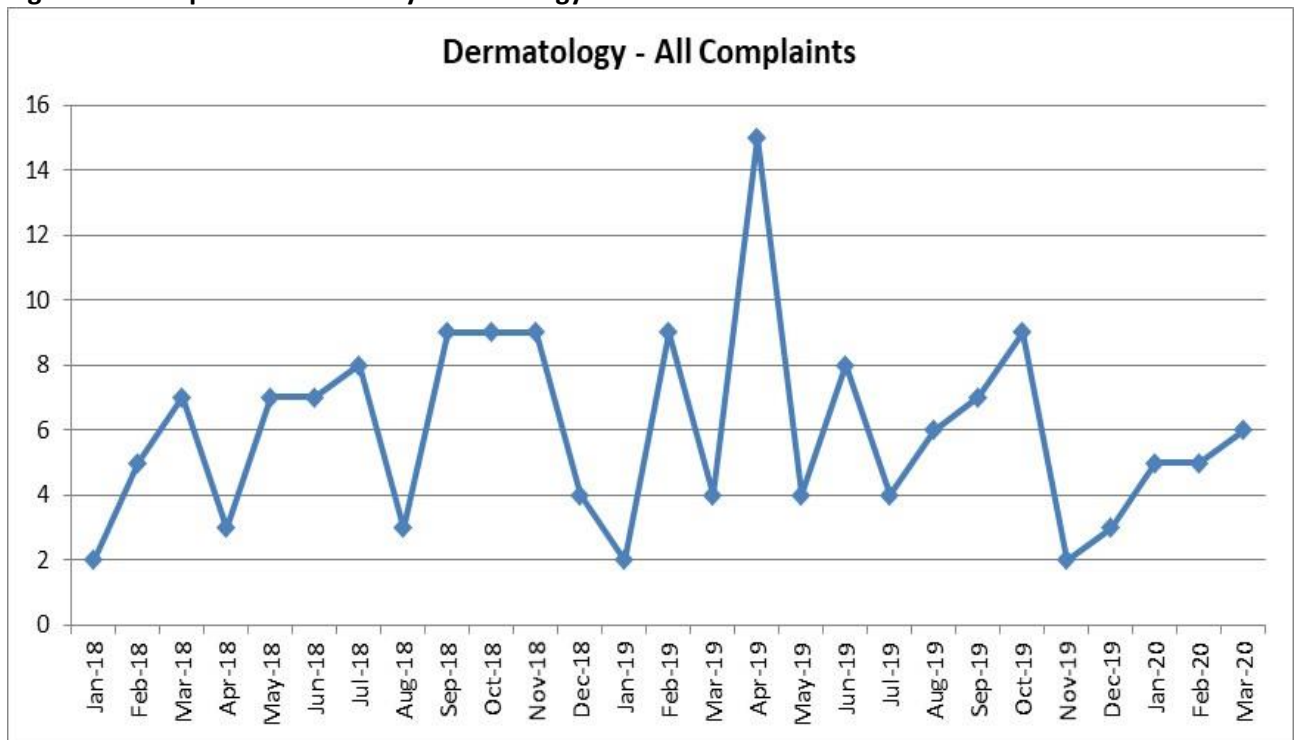


Figure 16: Complaints about attitude and communication

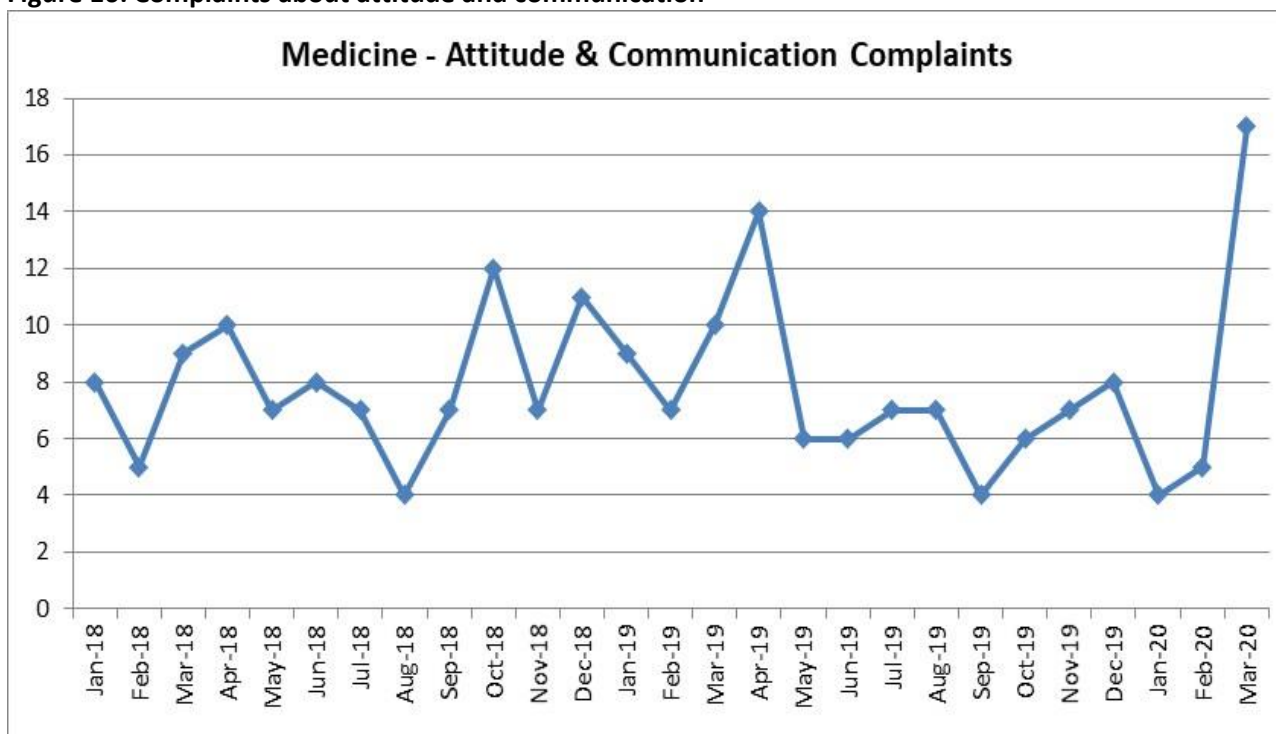
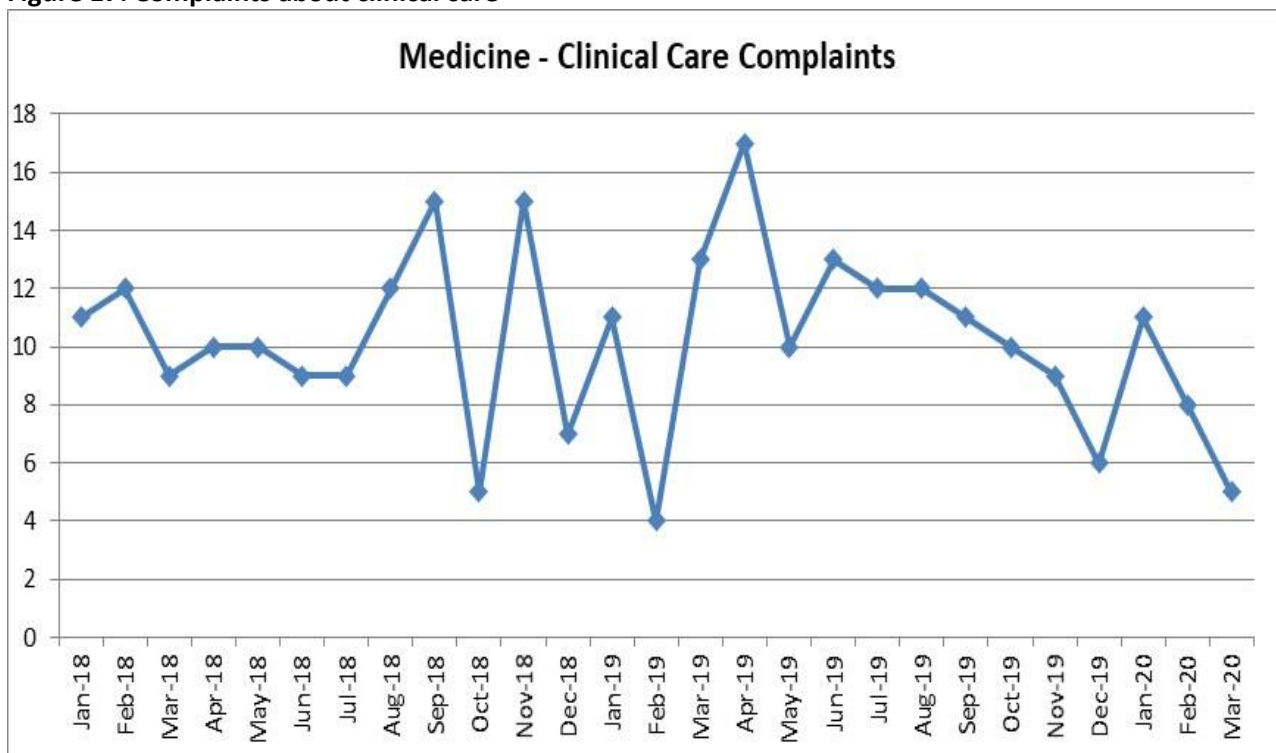


Figure 17: Complaints about clinical care



3.1.3 Division of Specialised Services

The Division of Specialised Services received 70 new complaints in Q4; a small increase compared with the 66 received in Q3. Of these 82 complaints, 49 were for the Bristol Heart Institute (BHI), the same number as received in Q3; and 18 were for the Bristol Haematology & Oncology Centre (BHOC), compared with 15 in Q3. The remaining three complaints were for the Clinical Genetics service based at St Michael's Hospital.

The largest number of complaints received by the Division was again recorded under the category of 'appointments and admissions' (42.8%), which includes complaints about cancelled and delayed appointments and surgery. There was a small increase in the overall number of complaints relating to 'clinical care' and 'information and support'. However, complaints received in respect of the remaining categories, either remained unchanged or showed a slight reduction compared with Q3.

The Division achieved 77.8% against its target for responding to formal complaints within the agreed timescale in Q2 and 100% for informal complaints. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

Table 8: Complaints by category type

Category Type	Number and % of complaints received – Q4 2019/20	Number and % of complaints received – Q3 2019/20
Appointments & Admissions	30 (42.8% of total complaints) ↑	28 (42.4% of total complaints) ↑
Clinical Care	21 (30%) ↑	18 (27.4%) ↓
Attitude & Communication	11 (15.7%) ↓	12 (18.2%) ↓
Information & Support	4 (5.7%) ↑	1 (1.5%) =
Documentation	2 (2.9%) =	2 (3.0%) ↓
Facilities & Environment	2 (2.9%) =	2 (3.0%) ↓
Discharge/Transfer/Transport	0 (0%) ↓	3 (4.5%) ↑
Access	0 (0%) =	0 (0%) =
Total	70	66

Table 9: Top sub-categories

Category	Number of complaints received – Q4 2019/20	Number of complaints received – Q3 2019/20
Cancelled or delayed appointments and operations	25 ↑	24 ↑
Clinical care (medical/surgical)	11 =	11 ↓
Lost / misplaced / delayed test results	4 ↑	2 ↓
Failure to answer phone/ Failure to respond	3 ↓	5 ↓
Attitude of medical staff	3 =	3 =
Communication with patient/relative	3 =	3 ↑

Figure 18: Specialised Services – formal and informal complaints received

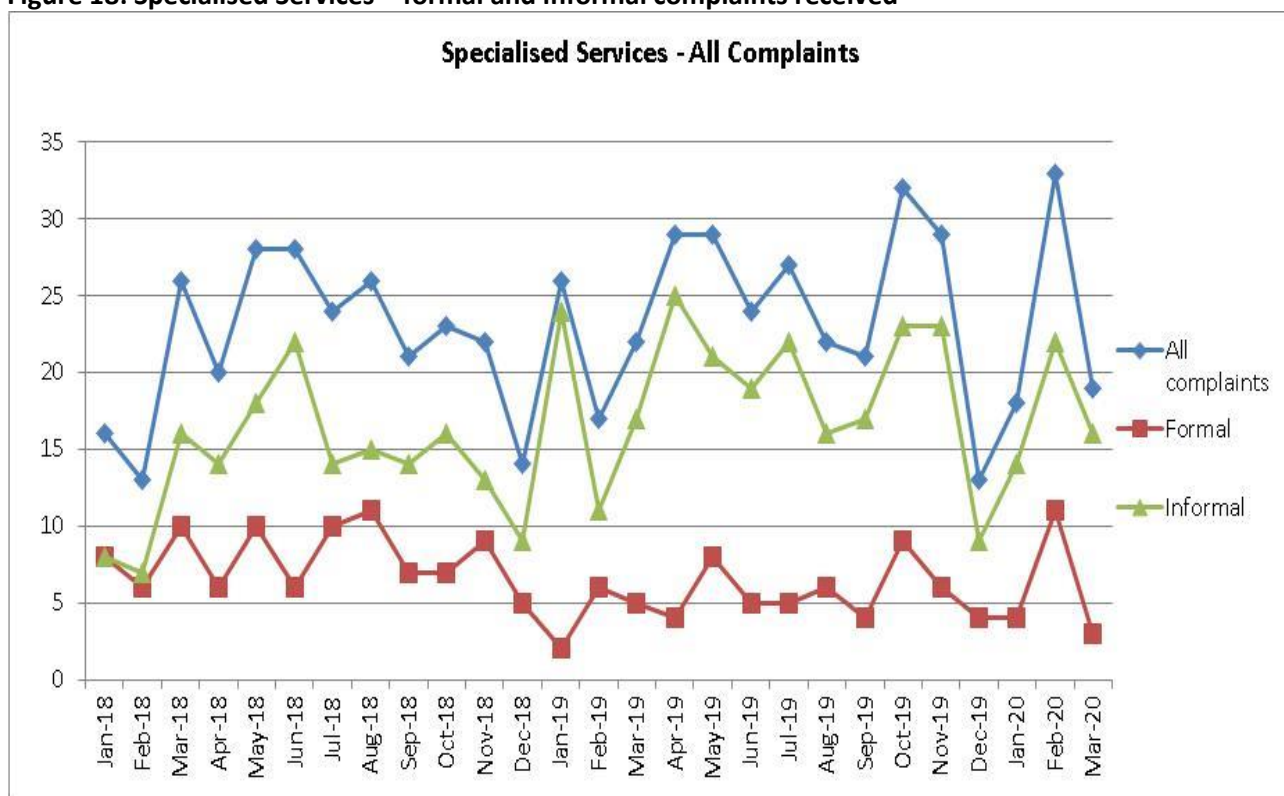


Figure 19: Complaints received by Bristol Heart Institute

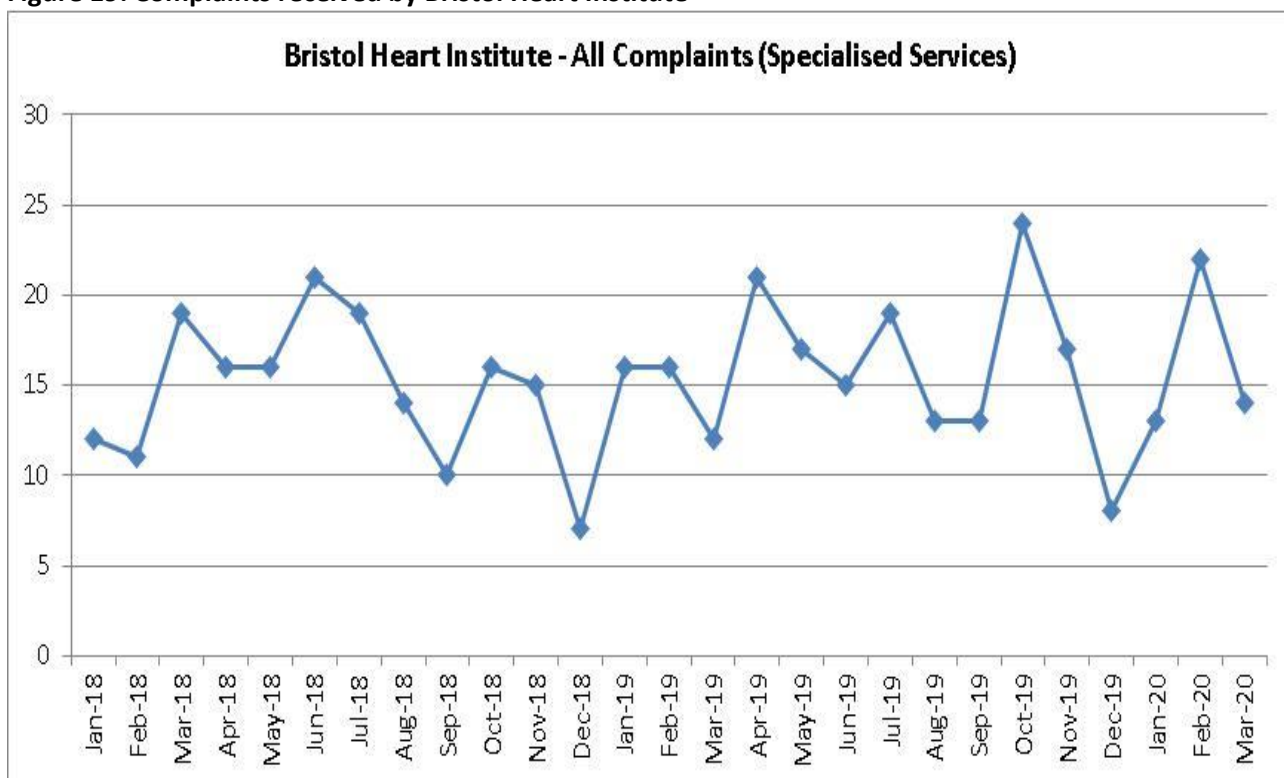


Figure 20: Complaints received by Bristol Haematology & Oncology Centre

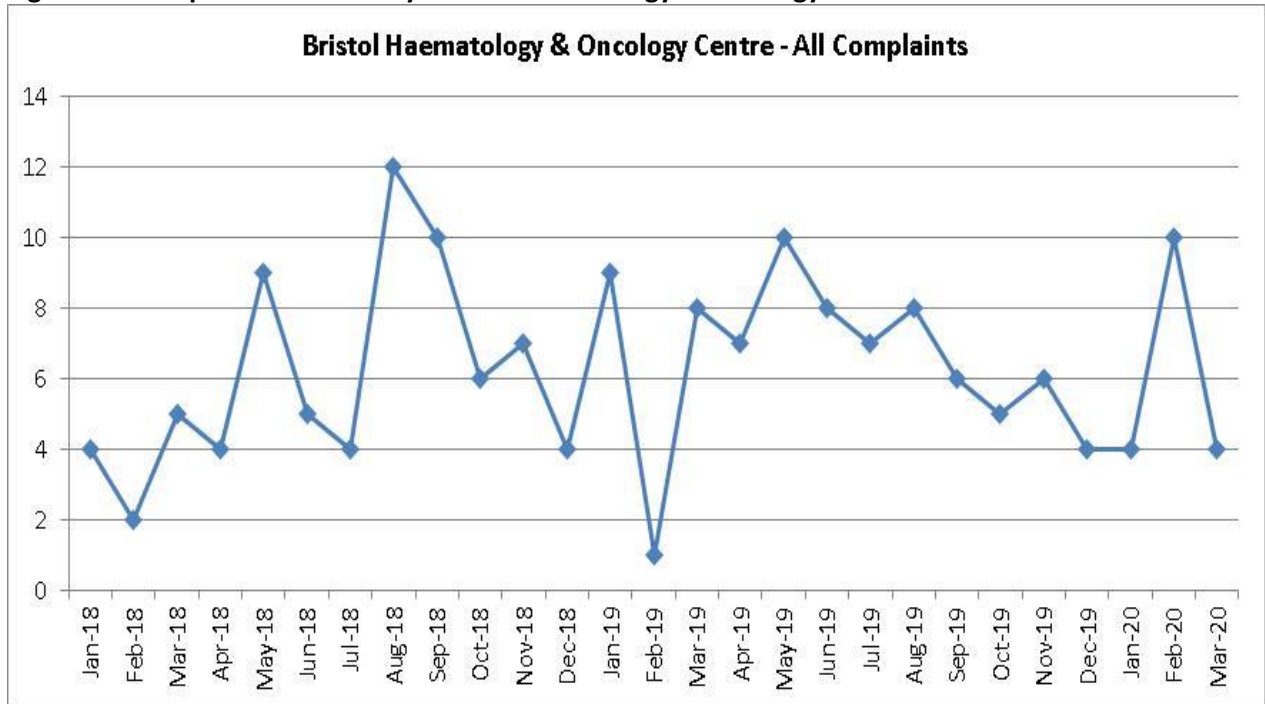
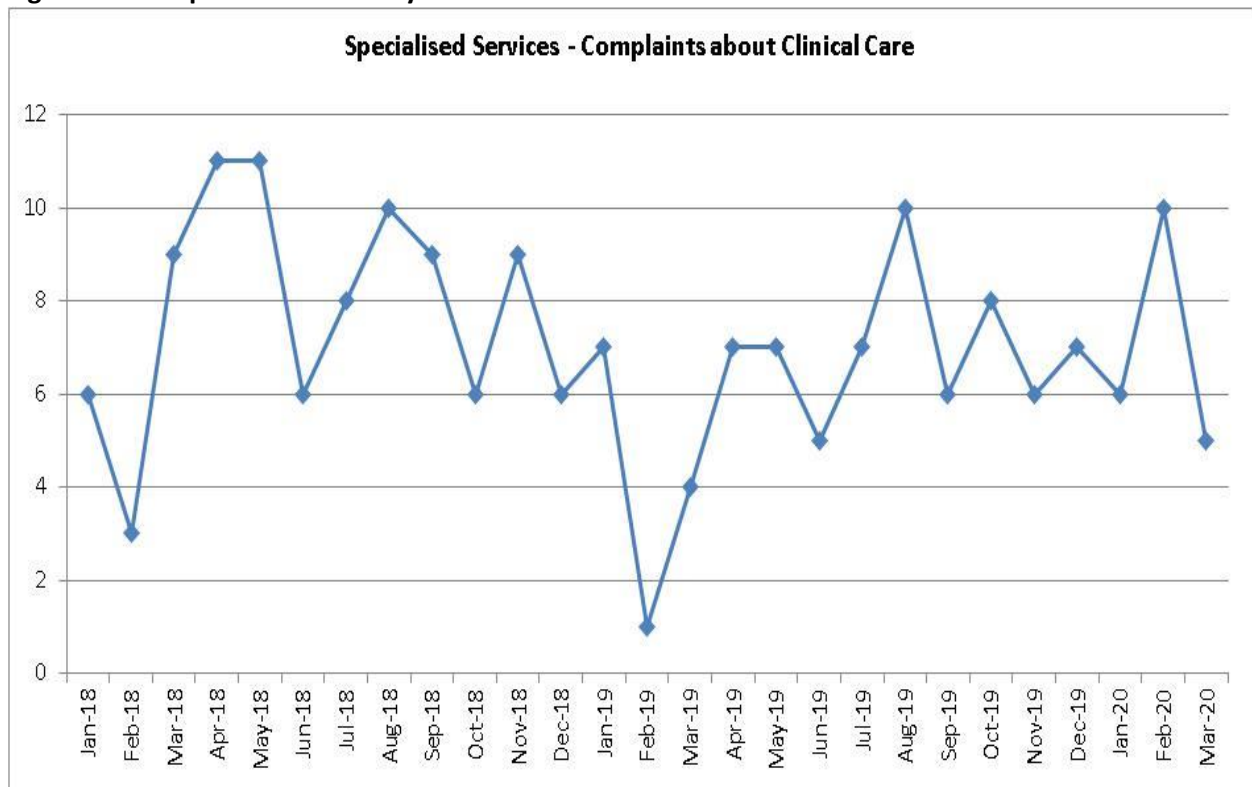


Figure 21: Complaints received by Division about Clinical Care



3.1.4 Division of Women's and Children's Services

The total number of complaints received by the Division in Q4 was 89, a 14.1% increase on Q3.

Complaints for Bristol Royal Hospital for Children (BRHC) accounted for 53 of the 89 complaints, compared with 46 in Q3. There were 34 complaints for St Michael's Hospital (StMH); an increase on the 28 received in Q1. There was also one complaint for the Gynaecology Clinic at South Bristol Community Hospital and one for the Weston Birthing Centre.

There was a 28% increase in complaints received about 'clinical care' and the most notable reduction was in the number of complaints about 'attitude and communication'.

The Division achieved 94.6% against its target for responding to formal complaints within the agreed timescale in Q4 and 93.8% for informal complaints, both improvements on Q3 performance. The Division remains the only one to consistently investigate more complaints via the formal process than informally. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

Table 10: Complaints by category type

Category Type	Number and % of complaints received – Q4 2019/20	Number and % of complaints received – Q3 2019/20
Clinical Care	41 (46.1% of total complaints) ↑	32 (41% of total complaints) ↑
Appointments & Admissions	21 (23.5%) ↑	17 (21.8%) ↓
Attitude & Communication	11 (12.4%) ↓	17 (21.8%) ↑
Information & Support	9 (10.1%) ↑	4 (5%) ↑
Facilities & Environment	3 (3.4%) ↓	4 (5%) =
Documentation	3 (3.4%) ↑	1 (1.3%) =
Discharge/Transfer/ Transport	1 (1.1%) ↓	2 (2.6%) ↑
Access	0 (0%) ↓	1 (1.3%) ↑
Total	89	78

Table 11: Top sub-categories

Category	Number of complaints received – Q4 2019/20	Number of complaints received – Q3 2019/20
Clinical Care (medical/surgical)	26 ↑	23 ↑
Cancelled/delayed appointment or operation	14 ↑	13 ↓
Clinical Care (nursing/midwifery)	8 ↓	12 ↑
Appointment administration issues	5 ↑	3 ↓
Lost/misplaced/delayed test results	3 ↑	1 ↓
Attitude of nursing/midwifery	3 ↓	6 ↑

Figure 22: Women & Children – formal and informal complaints received

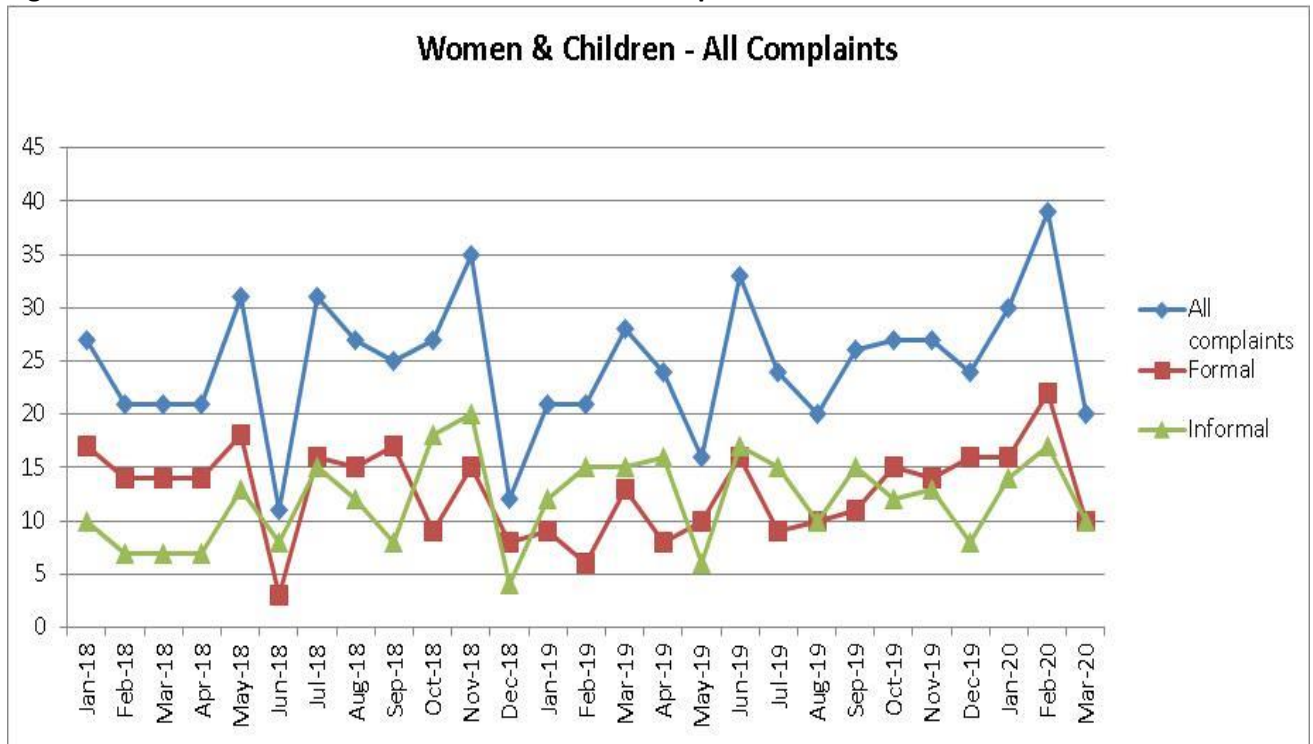


Figure 23: Complaints received by Bristol Royal Hospital for Children

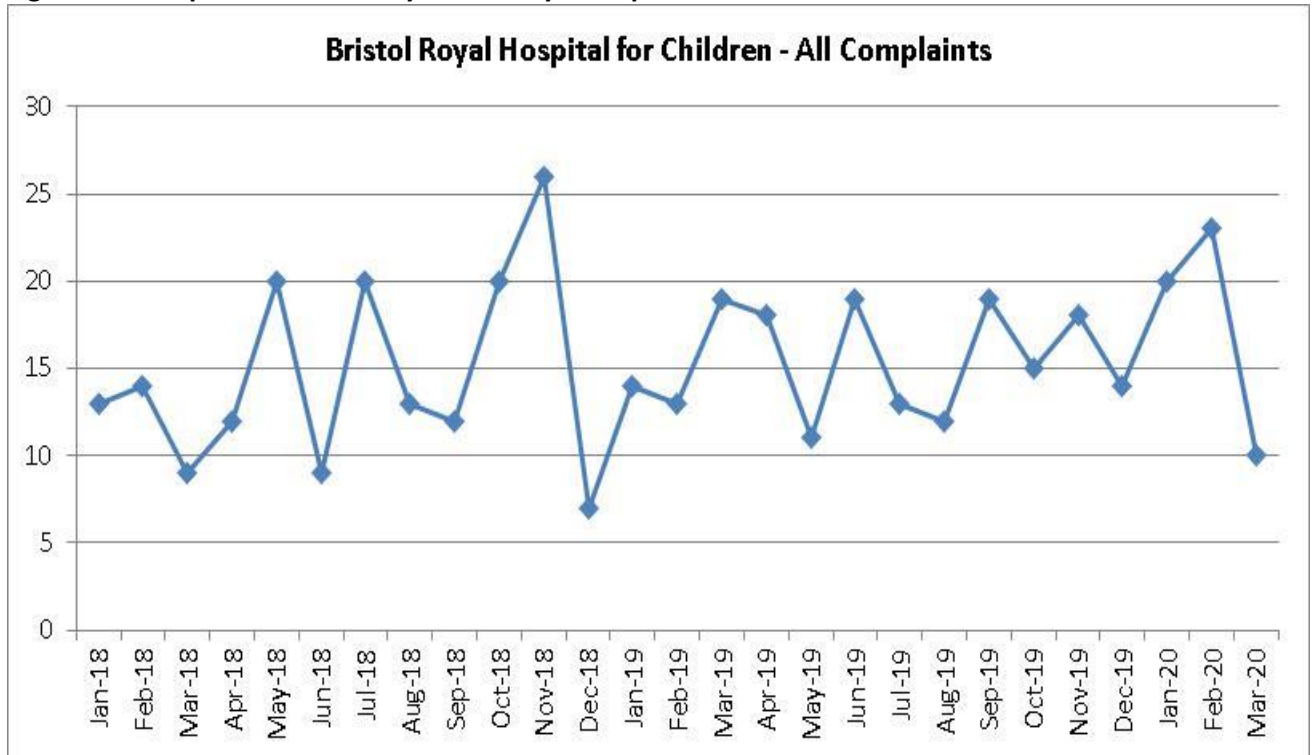
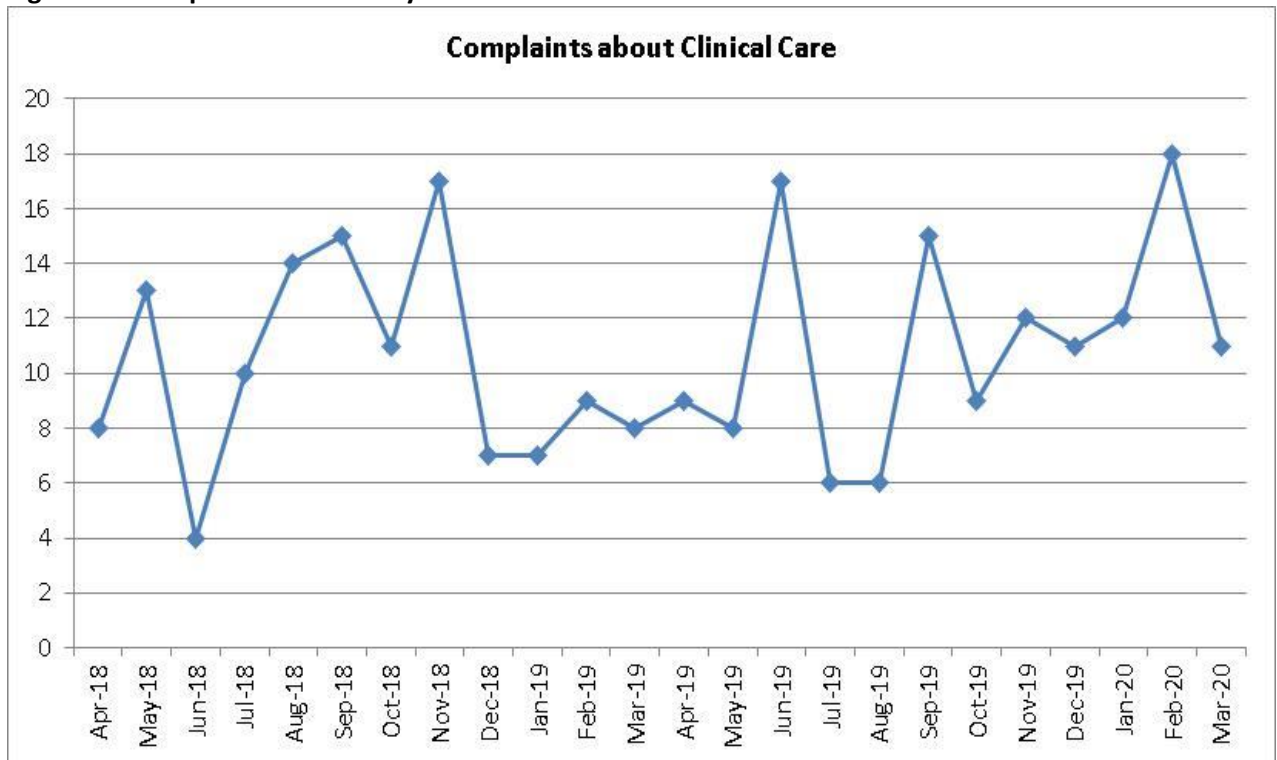


Figure 24: Complaints received by St Michael's Hospital



Figure 25: Complaints received by the Division about 'Clinical Care'



3.1.5 Division of Diagnostics & Therapies

Complaints received by the Division of Diagnostics and Therapies increased slightly from 17 in Q3 to 18 in Q4 of 2019/20. However, numbers of complaints across all categories and sub-categories are very low. The most notable increase was in complaints categorised under 'information and support; with two each about medical records and information about patient. Of the 18 complaints received by the Division in Q4, seven were for Radiology and five were for Audiology.

The Division achieved 80% against its target for responding to formal complaints within the agreed timescale in Q4 and 93.3% for informal complaints. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

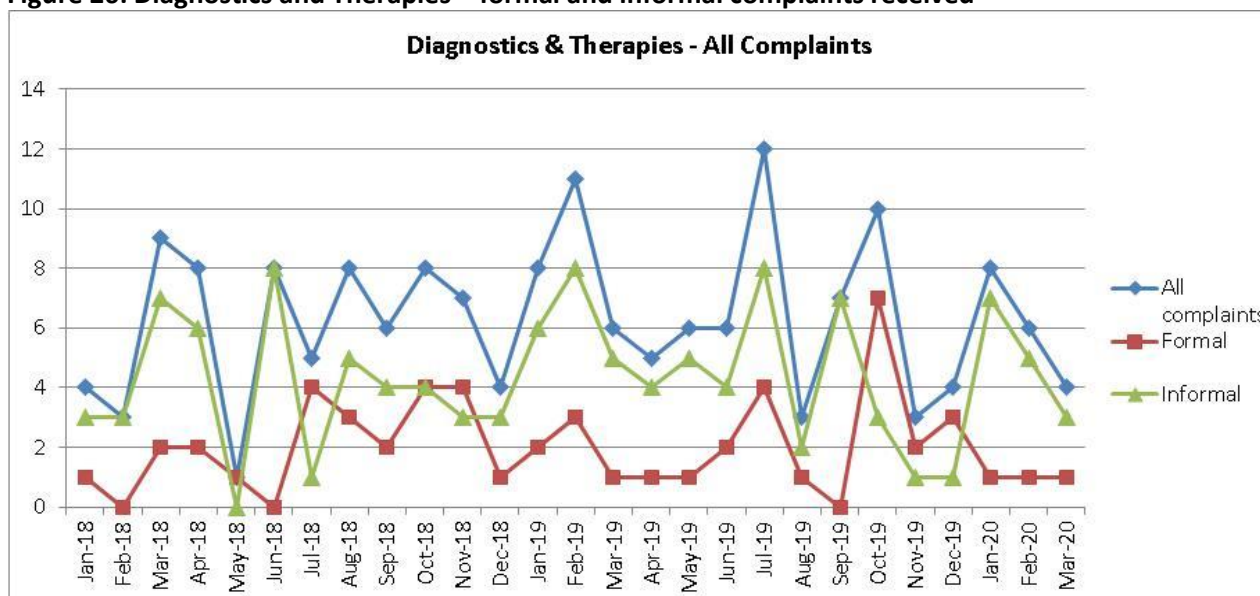
Table 12: Complaints by category type

Category Type	Number and % of complaints received – Q4 2019/20	Number and % of complaints received – Q3 2019/20
Appointments & Admissions	3 ↑	2 ↓
Clinical Care	4 ↓	9 ↑
Attitude & Communication	3 ↓	5 =
Information & Support	5 ↑	1 =
Facilities & Environment	2 ↑	0 ↓
Documentation	1 ↑	0 =
Access	0 =	0 =
Discharge/Transfer/Transport	0 =	0 =
Total	18	17

Table 13: Top sub-categories

Category	Number of complaints received – Q4 2019/20	Number of complaints received – Q3 2019/20
Clinical Care (AHPs)	2 ↑	1 =
Confidentiality	2 ↑	0 =
Medication incorrect/not received	2 ↓	3 =

Figure 26: Diagnostics and Therapies – formal and informal complaints received

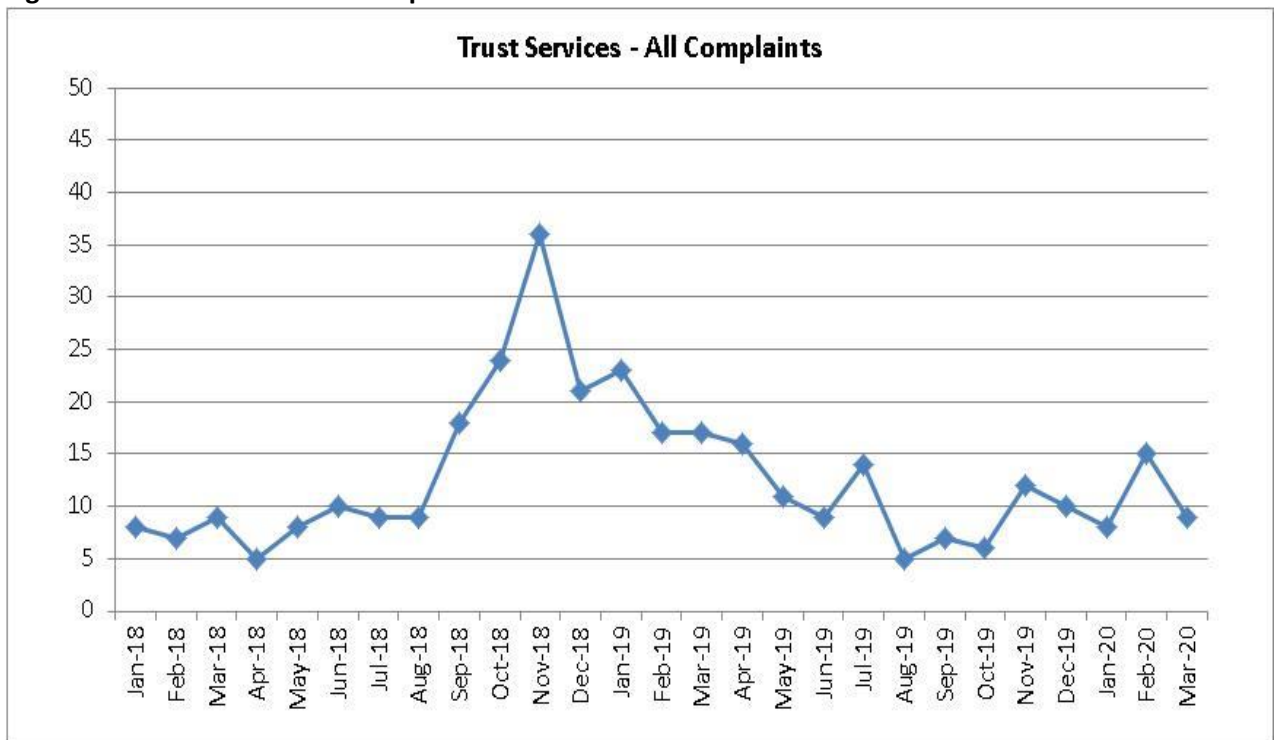


3.1.6 Division of Trust Services

The Division of Trust Services, which includes Facilities & Estates, received 26 complaints in Q2, compared with 36 in Q1 and 57 in Q4. Of the 26 complaints received in Q2, 11 were about car parking across various Trust sites, there were for the Private & Overseas Patients Team and three were about the Welcome Centre Reception. The remainder of the complaints received was spread across various departments/areas, including issues about transport, retail outlets in the BRI and the cashiers' office.

The Division achieved 73.3% against its target for responding to formal complaints within the agreed timescale in Q4 and 95.8% for informal complaints. Please see section 3.3 Table 21 for details of where in the process any delays occurred.

Figure 27: Trust Services –all complaints received



3.2 Complaints by hospital site

Complaints increased across all hospital sites, with the exception of Bristol Dental Hospital and Bristol Eye Hospital. It should be noted however that the complaints for St Michael’s Hospital include the Division of Surgery (ENT) as well as Women’s & Children’s services.

Table 14: Breakdown of complaints by hospital site³

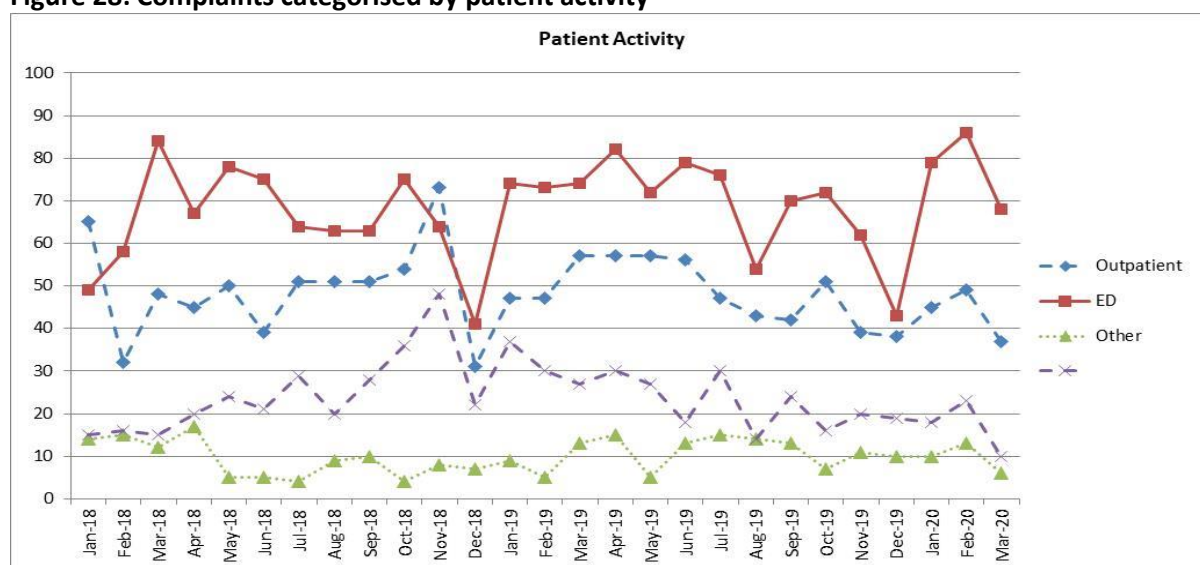
Hospital/Site	Number and % of complaints received in Q4 2019/20	Number and % of complaints received in Q3 2019/20
Bristol Royal Infirmary	168 ↑	140 (36.1%) ↓
St Michael’s Hospital	64 ↑	50 (12.8%) =
Bristol Heart Institute	54 ↑	52 (13.4%) ↑
Bristol Royal Hospital for Children	54 ↑	47 (12.1%) ↑
Bristol Dental Hospital	30 ↓	34 (8.8%) ↑
Bristol Eye Hospital	28 ↓	29 (7.5%) ↓
Bristol Haematology & Oncology Centre	20 ↑	15 (3.9%) ↓
South Bristol Community Hospital	18 ↑	15 (3.9%) ↓
Southmead and Weston Hospitals (UH Bristol services)	4 =	4 (1.0%) =
Central Health Clinic	4 ↑	2 (0.5%) ↓
TOTAL	444	388

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, Figure 28 below shows 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, 52.5% (*45.6%) of complaints received were about outpatient services, 29.5% (33%) related to inpatient care, 6.5% (7.2%) were about emergency patients; and 11.5% (14.2%) were in the category of ‘other’ (as explained above). * Q3 percentages are shown in brackets for comparison.

Figure 28: Complaints categorised by patient activity



³ 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 and some services that come under Diagnostics & Therapies are undertaken at the Children’s Hospital.

3.3 Complaints responded to within agreed timescale for formal resolution process

All divisions reported breaches of formal complaint deadlines in Q4, with a total of 32 breaches of deadlines reported Trustwide.

The Division of Medicine reported 14 breaches of deadline, Specialised Services reported six, Trust Services and Surgery had four each, Women & Children reported three and Diagnostics & Therapies had one. It should however be noted that none of the breaches for Surgery were attributable to the Divisions (see Table 21 below).

This is a significant deterioration on the 23 breaches reported in Q3.

In Q4, the Trust responded to 213 complaints via the formal complaints route and 85% of these were responded to by the agreed deadline, against a target of 95%.

Table 15: Breakdown of breached deadlines – Formal

Division	Q4 2019/20	Q3 2019/20	Q2 2019/20	Q1 2019/20
Medicine	14 (28%)	12 (29.3%)	10 (23.3%)	1 (2.2%)
Specialised Services	6 (22.2%)	5 (19.2%)	7 (29.2%)	5 (23.8%)
Surgery	4 (6.7%)	2 (2.6%)	3 (5.9%)	0 (0%)
Trust Services	4 (26.7%)	2 (40%)	5 (55.6%)	0 (0%)
Women & Children	3 (5.4%)	1 (2.6%)	2 (5.5%)	2 (5.3%)
Diagnostics & Therapies	1 (20%)	1 (11.1%)	1 (12.5%)	0 (0%)
All	32 breaches	23 breaches	28 breaches	8 breaches

(So, as an example, there were 14 breaches of timescale in the Division of Medicine in Q4, which constituted 28% of the complaint responses which were sent out by that division in Q4).

Breaches of timescale in respect of formal complaints 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. Five of the breaches were caused by delays within the Patient Support & Complaints Team, three were attributable to delays during the Executive sign-off process and 24 were attributable to the Divisions. It should be noted that none of the breaches for the Division of Surgery were attributable to the division.

Table 16: Source of delay

Breach attributable to	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Trust Services	All
Division	0	13	5	1	1	4	24
Patient Support & Complaints Team	2	1	0	2	0	0	5
Executives/sign-off	2	0	1	0	0	0	3
All	4	14	6	3	1	4	32

3.3.1 Complaints responded to within agreed timescale for informal resolution process

In Q4 of 2019/20, we commenced reporting of the number of informal complaints that breached the deadline agreed with the complainant. Performance against this measure is now reported to the Trust Board. All breaches of informal complaint timescales are attributable to the Divisions as the Patient Support & Complaints Team and Executives do not contribute to the time taken to resolve these complaints. In Q4, the Trust responded to 223 complaints via the informal complaints route (compared with 213 in Q3) and 91.9% of these were responded to by the agreed deadline; a slight improvement on the 90.1% reported in Q3.

Table 17: Breakdown of breached deadlines - Informal

Division	Q4 2019/20	Q3 2019/20	Q2 2019/20	Q1 2019/20
Surgery	7 (8.9%)	8 (11.4%)	9 (10%)	16 (11%)
Women & Children	2 (6.3%)	1 (3.6%)	3 (11.5%)	4 (12.9%)
Diagnostics & Therapies	1 (6.7%)	1 (16.7%)	0 (0%)	2 (18.2%)
Trust Services	1 (4.2%)	2 (9.5%)	7 (24.1%)	6 (20%)
Specialised Services	0 (0%)	2 (4.2%)	2 (5.1%)	0 (0%)
Medicine	0 (0%)	7 (17.5%)	8 (24.2%)	7 (11.7%)
All	11	21	29	35

3.4 Outcome of formal complaints

In Q4, the Trust responded to 213 formal complaints⁴. Tables 23 and 24 below show a breakdown, by Division, of how many of these cases were upheld, partly upheld or not upheld in Q4 of 2019/20 and Q3 of 2019/20 respectively. A total of 85.4% of complaints were either upheld or partly upheld in Q2, compared with 74.3% in Q1.

Table 18: Outcome of formal complaints – Q4 2019/20

	Upheld	Partly Upheld	Not Upheld
Surgery	9 (15.5%) ↓	42 (69%) ↓	9 (15.5%) =
Medicine	11 (22.7%) =	33 (65.9%) ↑	6 (11.4%) ↑
Specialised Services	7 (26.9%) ↓	17 (61.6%) ↑	3 (11.5%) =
Women & Children	16 (29.5%) ↓	36 (63.9%) ↑	4 (6.6%) =
Diagnostics & Therapies	2 (40%) ↓	3 (60%) =	0 (0%) ↓
Trust Services	4 (28.6%) ↑	4 (28.6%) ↑	7 (42.8%) ↑
Total			

Table 19: Outcome of formal complaints – Q3 2019/20

	Upheld	Partly Upheld	Not Upheld
Surgery	14 (18.5%) ↓	53 (69.2%) ↑	9 (12.3%) =
Medicine	11 (26.8%) ↓	27 (65.9%) ↑	3 (7.3%) ↑
Specialised Services	9 (33.3%) ↓	14 (56.7%) ↑	3 (10%) ↓
Women & Children	12 (30.8%) ↑	23 (59%) ↑	4 (10.2%) ↓
Diagnostics & Therapies	3 (38.5%) ↓	5 (53.8%) ↑	1 (7.7%) ↑
Trust Services	0 (0%) ↓	3 (60%) ↓	2 (40%) ↑
Total	49 (25%) ↓	125 (63.8%) ↑	22 (11.2%) ↓

⁴ Note: this is different to the number of formal complaints we *received* in the quarter

4. Learning from complaints

All feedback is welcome, as it creates an opportunity to better understand, and to improve the care and treatment we provide to our service users. All complaints are investigated, learning is identified and any necessary changes to practice are made. Actions resulting from complaints are monitored and reviewed by our Divisions; the Patient Support and Complaints Team also monitor progress.

Below are some examples of actions which have been completed during Q4 2019/20.

- A complaint was received from a regular patient at Bristol Eye Hospital, who was given too many numbing drops prior to an injection and she temporarily lost her sight when the needle was inserted too far and scratched her cornea. Staff were reminded, via email and the Team Safety Briefing, of the need to administer numbing drops carefully to allow optimum numbing of the surface of the eye and that this is explained to the patient when repositioning the chair (Surgery).
- A complaint was made on behalf of a patient at South Bristol Community Hospital who told her friend she had been subjected to a rectal examination without her consent, which traumatised her and made her feel unsafe. The patient also reported that staff had entered her room without knocking and that curtains were not closed at times, which made her feel undignified. As a result of the complaint, information was added to the monthly ward newsletter that is issued to all clinical staff. The newsletter emphasised the importance of documenting patient consent for all examinations, whether verbal, written or implied. It also included a reminder included about protecting patient privacy and dignity at all times (Medicine).
- A patient with Chronic Regional Pain Syndrome (CRPS) and potentially life threatening anaphylaxis (severe allergic reaction) that requires alternative medications to be used and the necessary protection to be put in place for scans, was not properly protected when attending for an MRI scan, despite this information being noted on her records following a previous scan. This information, as well as the requirement for a careful review of her medications, including any contrast used for scans and the use of EMLA cream to numb her skin prior to any injections, was not shared with radiology staff. As a result of the complaint, a review was carried out of the procedures in place for all appointments for CRPS patients and, as a result, the Radiology Department in Bristol Royal Infirmary now holds a small stock of EMLA cream and other sites can easily obtain supplies when a CRPS patient is referred to them. (Diagnostics & Therapies).

5. 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. A total of 167 enquiries were received in Q4, a significant 22% increase on the 137 received in Q3. The team also recorded and acknowledged 43 compliments received during Q4 and shared these with the staff involved and their Divisional teams. This is compared with 51 compliments reported in Q3.

In addition to the enquiries detailed above, in Q4 the Patient Support and Complaints team recorded 164 enquiries that did not proceed, compared with 146 in Q3. 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 (and the team is subsequently unable to obtain this information), 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 continues to deal with a high volume of activity, with a total of 818 separate enquiries in Q4 2019/20, compared with 722 in Q3.

6. 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, 257 complaints were received in writing (230 by email and 27 letters) and 178 were received verbally (15 in person via drop-in service and 163 by telephone). Nine complaints were also received in Q4 via the Trust's 'real-time feedback' service. Of the 444 complaints received in Q4, 100% (444 out of the 444 received) met the Trust's standard of being acknowledged within two working days (verbal) and three working days (written).

The Patient Support & Complaints Manager closely monitors cases that are not acknowledged within timescale and reports to the Head of Quality (Patient Experience & Clinical Effectiveness) if there are any concerns and/or patterns.

7. PHSO cases

During Q4, the Trust was advised of Parliamentary and Health Service Ombudsman (PHSO) interest in three new complaints. Two of these new cases were for the Division of Surgery and one was for the Division of Medicine.

During the same period, 11 existing cases remain ongoing.

No cases were closed during Q4. However, in March 2020, the PHSO advised the Trust that they were placing all complaints on hold in order that the NHS could concentrate on the additional pressures of COVID-19 on patient care.

8. Complaint Survey

The Patient Support & Complaints team sends complaint surveys to all complainants six weeks after their complaint was resolved and closed. **The response rate to this survey is consistently low, so the results need to be interpreted with caution.**

Table 30 below shows data from the 24 responses received during Q4, compared with those received in previous quarters. Feedback in Q4 improved in a number of areas, with significant increases in respondents who:

- felt satisfied or very satisfied with how their complaint was handled by the Patient Support and Complaints Team;
- felt that their complaint was taken seriously; and
- felt that our response had addressed all of the issues they had raised.

There was a significant reduction in the percentage of respondents who felt that the Trust would do things differently as a result of their complaint. However, it should be noted that over 52% of respondents during this period indicated that they were "unsure" in response to this question.

In Q4, 87% of respondents said they would feel confident in making a complaint to the Trust again if they needed to, with the other 13% answering that they were not sure; not one respondent answered that they would not feel confident to do so.

Table 20: Complaints Survey Data

Survey Measure/Question	Q4 2019/20	Q3 2019/20	Q2 2019/20	Q1 2018/19
Respondents who felt that the Trust would do things differently as a result of their complaint.	4.4% ↓	27.8% ↑	7.1% ↓	14.3% =
Respondents who confirmed that our complaints process made it easy for them to make a complaint.	58.3% ↓	79.0% ↑	57.1% ↓	66.7% ↑
Respondents who felt satisfied or very satisfied with how their complaint was handled by the Patient Support & Complaints Team.	73.9% ↑	61.1% ↑	50% ↓	70.8% ↑
Respondents who felt that their complaint was taken seriously when they first raised their concerns.	83.3% ↑	79.0% ↓	92.9% ↑	84% ↑
Respondents who said that our response addressed all of the issues that they had raised.	68.2% ↑	63.2% ↑	28.6% ↓	50.0% ↓

In Q4, we asked respondents to tell us, based on their experience, what the Trust could do to improve its complaints service and any particularly good aspects of the service. There were no negative comments received in respect of the complaints service in Q4, and some of the positive comments received included:

“It was handled very professionally and in a timely and thorough fashion, so no! [it could not be improved]”

“Straightforward complaint procedure. Dealt with speedily.”

“Response on email felt very personal.”

“The lady I spoke to was very nice and calming. I was very annoyed when I phoned but she made me feel better with the way she handled the complaint.”

“How kind the woman was who phoned me and how kind the departmental manager who phoned me to apologise. Am totally satisfied.”

9. Severity of Complaints

Since April 2019, the Patient Support & Complaints Team has been recording the severity of complaints received by the Trust using a system of categorisation proposed by researchers at the London School of Economics. This severity rating is based on the nature of the complaint as first described to the Trust by or on behalf of the patient; not after the issues have been investigated. This ensures that the rating is reliable and independent of the outcome of the investigation.

We know from NHS data that Trusts with high levels of incident reporting have fewer instances of severe harm to patients, i.e. organisations with cultures that encourage reporting when things go wrong, learn and provide safer care. The LSE research suggests a similar pattern of data associated

with patient complaints, i.e. Trusts who receive high levels of low level severity complaints receive lower levels of high severity complaints, again indicating that a culture of openness to receiving and learning from complaints is associated with safer and higher quality care. Put another way, receiving complaints should not be viewed as a bad thing *per se*; it depends what the complaint is about.

Staff in the Patient Support & Complaints Team have all received training on rating the severity of complaints, taking into account the clinical, management and relationship problems experienced by the complainant and apportioning the overall complaint as either “low”, “medium” or “high” severity. A practical example of each of these categories is shown in Table 30 below.

During the next year, as we build our dataset, we hope that this will enable us to begin to differentiate between higher and lower performing areas within the Trust (in terms of the severity of complaints reported) and to use the information to explore opportunities for quality improvement.

Table 21: Examples of severity rating of complaints

	Low severity	Medium severity	High severity
Clinical problem	Isolated lack of food or water	Patient dressed in dirty clothes	Patient left in own waste in bed
Clinical problem	Slight delay administering medication	Staff forgot to administer medication	Incorrect medication administered
Management problems	Patient bed not ready on arrival	Patient was cold and uncomfortable	Patient relocated due to bed shortage
Management problems	Appointment cancelled and rescheduled	Chasing departments for an appointment	Refusal to give appointment
Relationship problems	Staff ignored question from patient	Staff ignored mild patient pain	Staff ignored severe distress
Relationship problems	Staff spoke in condescending manner	Rude behaviour	Humiliation in relation to incontinence

In Q4, the Trust received 444 complaints, all of which have been severity rated by the Patient Support & Complaints Team. Of these 444 complaints, 262 were rated as being low severity, 160 as medium and 22 as high. Figure 29 below shows a breakdown of these severity ratings by month since April 2019.

Figure 29: Severity rating of complaints

