

# Complaints Report

**Quarter 3, 2017/2018**

(1 October 2017 to 31 December 2017)

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## Quarter 3 Executive summary and overview

	Q3	
Total complaints received	407	↓
Complaints acknowledged within set timescale	99.3%	↓
Complaints responded to within agreed timescale – formal investigation	85.4%	↑
Complaints responded to within agreed timescale – informal investigation	73.8%	↑
Proportion of complainants dissatisfied with our response (formal investigation)	10.4%	↑

Successes	Priorities
<ul style="list-style-type: none"> <li>There were notable reductions in the number of complaints received by the Bristol Heart Institute (BHI) Waiting List Office and the BHI Outpatients Department compared to quarter 2.</li> <li>Fewer complaints were received about ‘appointments and admissions’.</li> <li>Although December is traditionally a quiet month for complaints, nonetheless this was the first month since July 2013 when the number of complaints received by the Trust fell below 100.</li> <li>The Trust’s new complaints review panel met twice in quarter 3 (in October and November 2017 with the Divisions of Medicine and Diagnostics &amp; Therapies respectively), including lay representation. Feedback from both sessions has been very positive; points of learning have been welcomed and embraced by the divisions.</li> </ul>	<ul style="list-style-type: none"> <li>To improve timeliness of complaints responses.</li> <li>To continue to focus on getting the tone and substance of response letters right, and improving the overall experience of people who raise concerns.</li> </ul>
Opportunities	Risks & Threats
<ul style="list-style-type: none"> <li>Good progress has been made in respect of the Trust’s joint project with the Patients Association to develop a toolkit for complaints investigations; there is potential for this to be made available nationally via the PA.</li> <li>The Patient Support and Complaints Team is committed to encouraging more complainants to take up the opportunity of attending a meeting to discuss and resolve their concerns, as an alternative to receiving a written response. Evidence from other Trusts has shown a significant decrease in the number of complainants who express dissatisfaction with the response to their complaint when they have attended a meeting.</li> </ul>	<ul style="list-style-type: none"> <li>There was a rise in the number of complaints received by the Division of Surgery in respect of staff attitude and communication.</li> <li>Although complaints about the Bristol Dental Hospital fell marginally in quarter 3, levels of complaints about the service remain high.</li> <li>The proportion of cases which breached the agreed deadline for a response reduced in quarter 3 but remains too high; there were 30 breaches of formal complaint response deadlines and 54 breaches of informal complaint response deadlines during the quarter.</li> <li>There is an emerging trend away from informal resolution of complaints and towards the formal resolution process. Further work is needed to understand the reasons for this pattern.</li> </ul>

## 1. Complaints performance – Trust overview

### 1.1 Total complaints received

The Trust received 407 complaints in quarter 3 (Q3) of 2017/18. The total figure of 407 includes complaints received and managed via either formal or informal resolution (whichever has been agreed with the complainant)<sup>1</sup>. 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. Although December is traditionally a quiet month for complaints, nonetheless December 2017 was the first month since July 2013 when the number of complaints received by the Trust has fallen below 100.

**Figure 1: Number of complaints received**

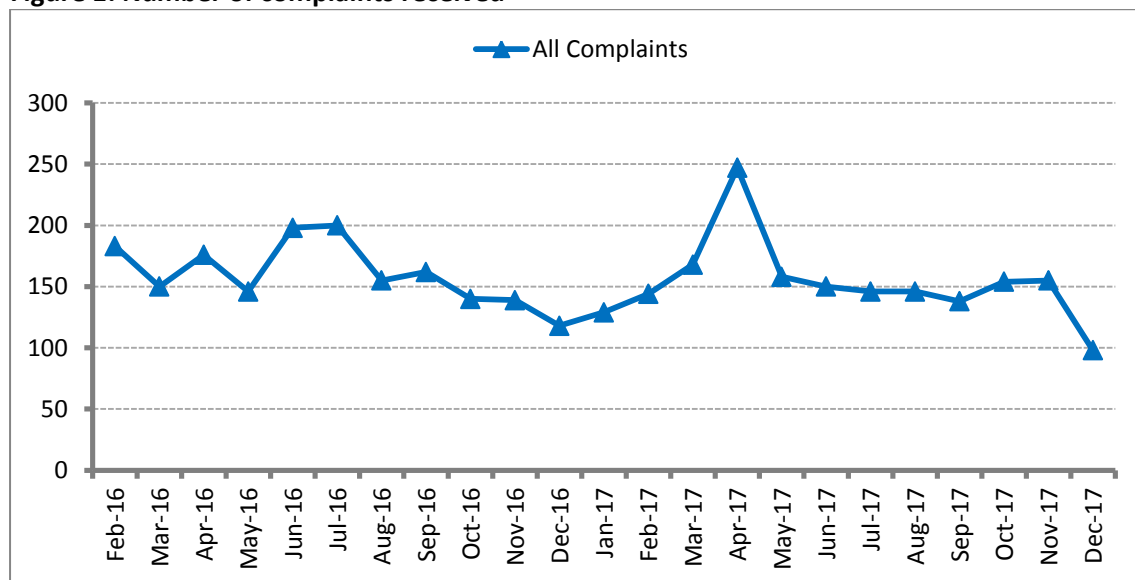
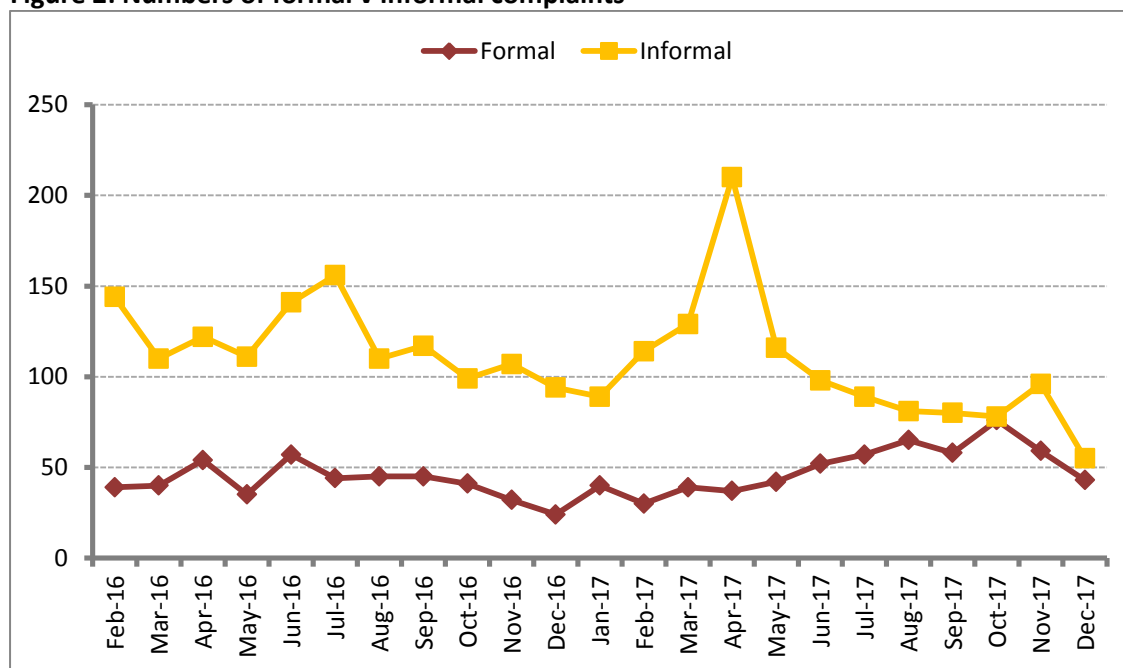


Figure 2 shows complaints dealt with via the formal investigation process compared to those dealt with via the informal investigation process, over the same period. This shows a consistent trend away from informal resolution of complaints, towards the formal resolution process. Further work is needed to understand the reasons for this pattern.

<sup>1</sup> 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: Numbers of formal v informal complaints**



## 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.

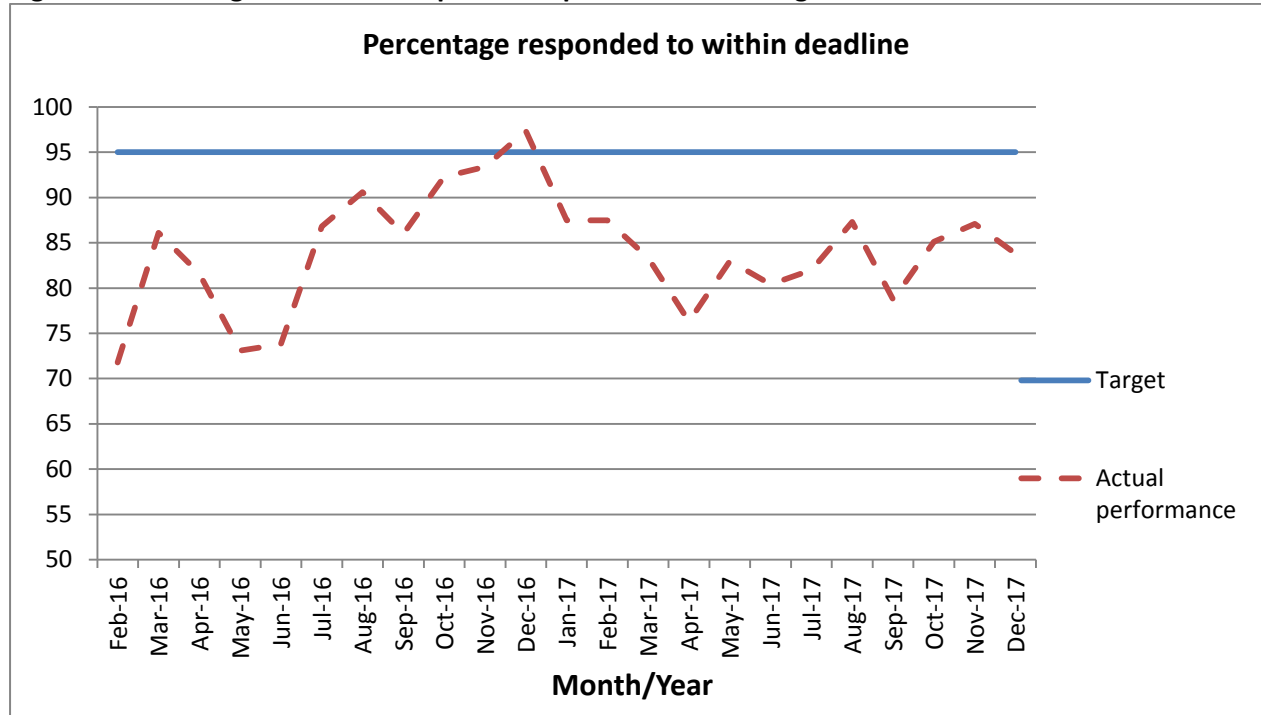
### 1.2.1 Formal Investigations

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 Q3 of 2017/18, 85.4% of responses were posted within the agreed timescale. This represents 30 breaches out of the 205 formal complaints which received a response during the quarter<sup>2</sup>. Figure 3 shows the Trust’s performance in responding to complaints since February 2016.

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

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



### 1.2.2 Informal Investigations

In Q3 2017/18, the Trust received 229 complaints that were investigated via the informal process. During this period, 206 informal complaints were responded to and 73.8% of these (152 of 206) were resolved within the time agreed with the complainant.

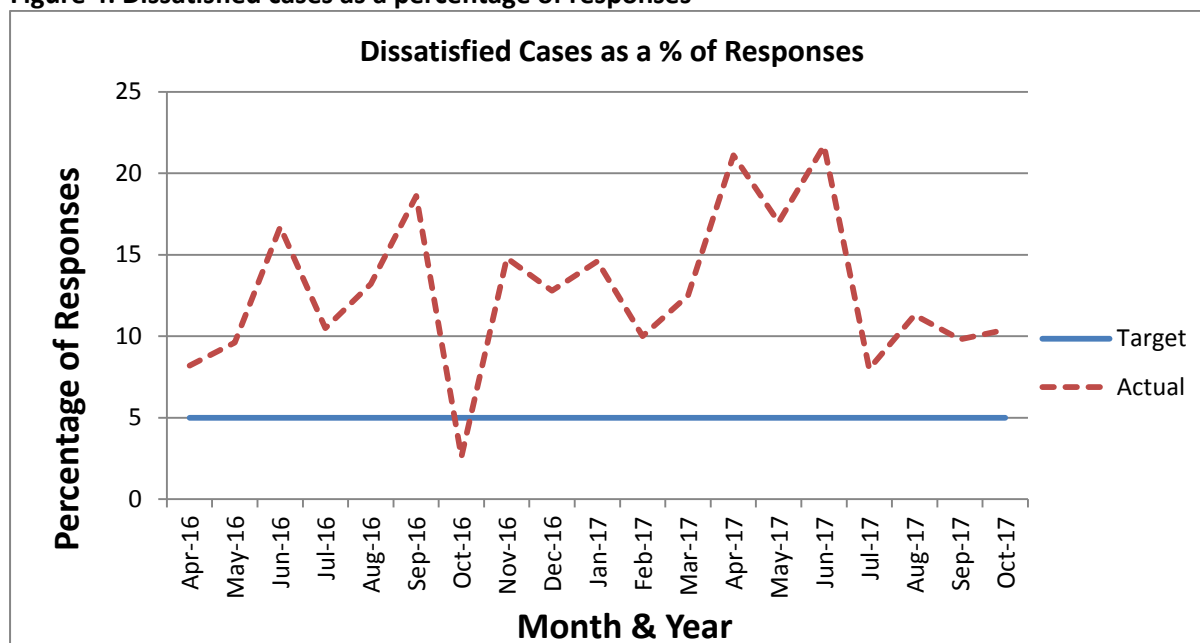
### 1.3 Dissatisfied complainants

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 Q3, by the cut-off point of mid-January 2018 (the date by which the dissatisfied data for October 2017 was finalised), seven people had contacted us to say they were dissatisfied. This represents 10.4% of the 67 responses sent out during that month.

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

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 Q3 2017/18 compared to Q2. In Q3, complaints in most of the major categories/themes increased slightly, however there was a notable decrease in complaints about appointments and admissions (down from 136 complaints to 97).

Table 1: Complaints by category/theme

Category/Theme	Number of complaints received in Q3 (2017/18)	Number of complaints received in Q2 (2017/18)
Clinical Care	118 (29%) ↓	121 (28.1%) ↓
Attitude & Communication	109 (26.8%) ↑	107 (24.9%) ↓
Appointments & Admissions	97 (23.8% of total complaints) ↓	136 (31.6% of total complaints) ↓
Information & Support	29 (7.1%) ↑	25 (5.8%) ↓
Facilities & Environment	23 (5.7%) ↑	17 (4%) ↑
Discharge/Transfer/Transport	16 (3.9%) ↑	15 (3.5%) ↓
Documentation	10 (2.5%) ↑	6 (1.4%) =
Access	5 (1.2%) ↑	3 (0.7%) ↑
<b>Total</b>	<b>407</b>	<b>430</b>

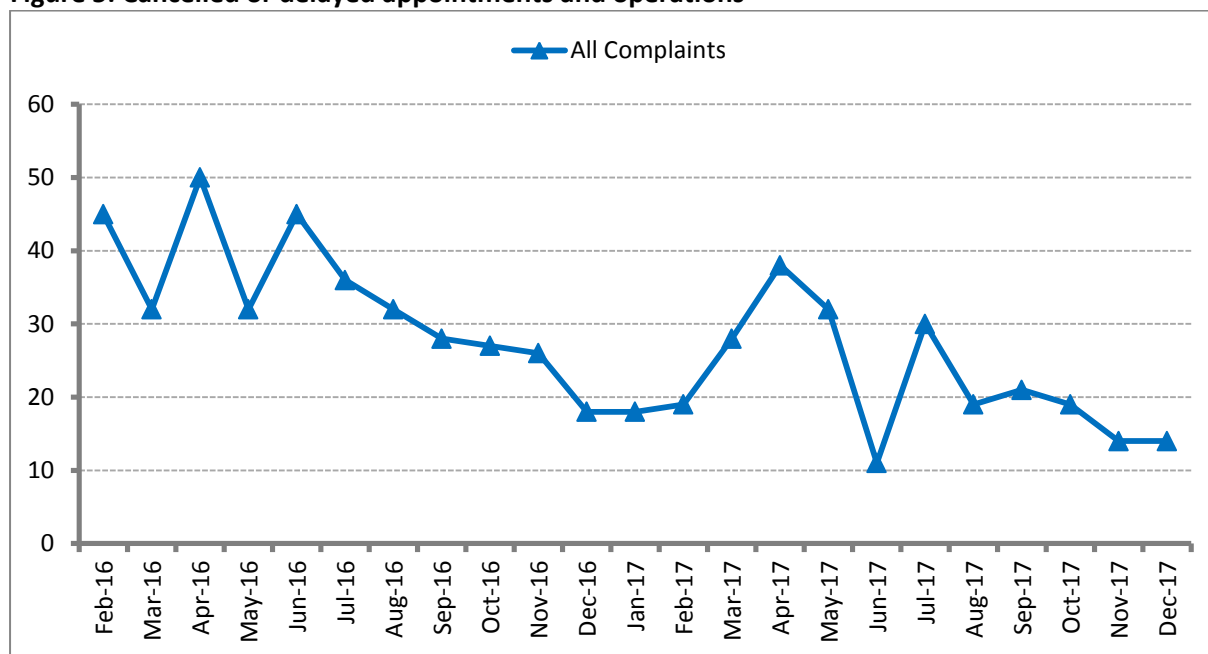
Each complaint is also assigned to a more specific sub-category, for which there are over 100. Table 2 lists the ten most consistently reported sub-categories. In total, these sub-categories account for 62% of the complaints received in Q3 (252/407).

**Table 2: Complaints by sub-category**

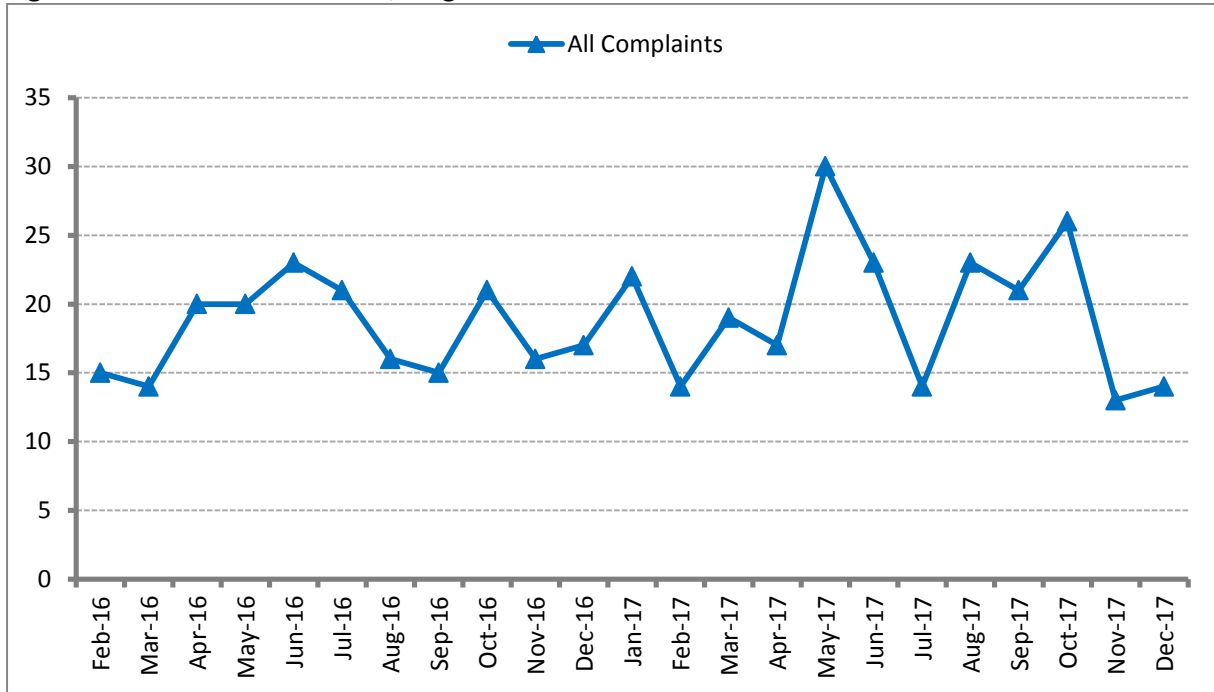
Sub-category	Number of complaints received in Q3 (2017/18)	Q2 (2017/18)	Q1 (2017/18)	Q4 (2016/17)
Clinical care (Medical/Surgical)	53 (8.6% decrease) ↓	58	70	70
Cancelled/delayed appointments and operations	47 (30.9% decrease compared to Q2) ↓	68	75	54
Appointment administration issues	29 (35.5% decrease) ↓	45	46	35
Clinical care (Nursing/Midwifery)	20 (28.6% decrease) ↓	28	18	13
Attitude of medical staff	19 (32.1% decrease) ↓	28	29	27
Failure to answer telephones/failure to respond	18 (28% decrease) ↓	25	22	22
Attitude of admin/clerical staff	18 (157% increase) ↑	7	4	16
Communication with patient/relative	17 (5.5% decrease) ↓	18	15	20
Discharge arrangements	15 (15.4% increase) ↑	13	10	12
Attitude of nursing/midwifery staff	9 (43.8% decrease) ↓	16	3	4

Figures 5-8 below show complaints received since February 2016 for the top three complaints sub-categories reported in Table 2. Figure 8 provides a similar analysis over time for complaints about attitude of admin/clerical staff – complaints in this sub-category rose notably in Q3.

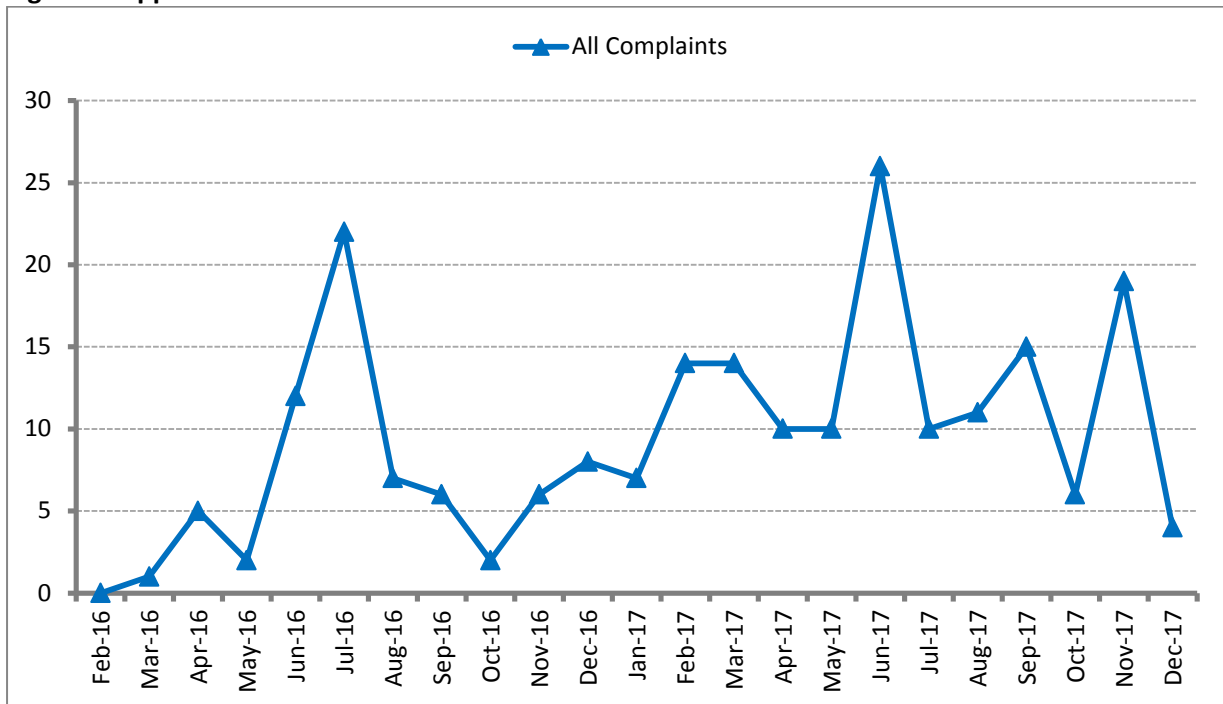
**Figure 5: Cancelled or delayed appointments and operations**



**Figure 6: Clinical care – Medical/Surgical**

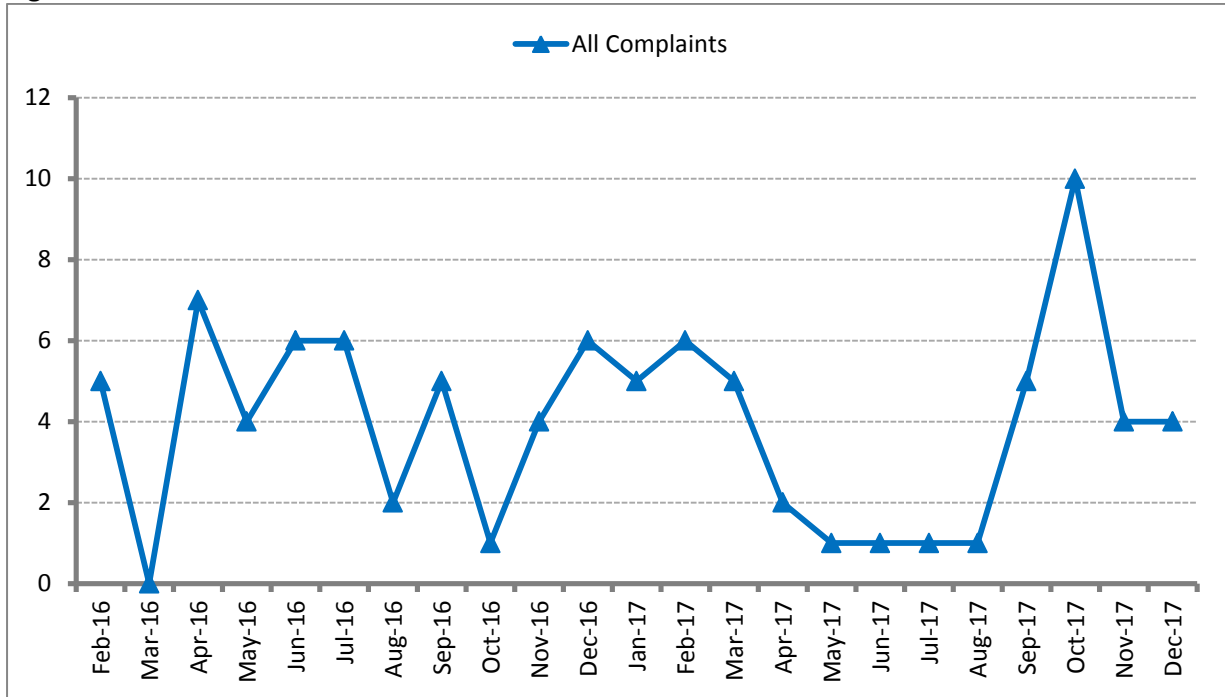


**Figure 7: Appointment administration issues**





**Figure 8: Attitude of administrative and clerical staff**



### 2.1 Comment on analysis of complaints themes by sub-category in Q3

- Complaints about the attitude of administrative and clerical staff rose in Q3, including a sharp increase in October.
- Complaints about 'discharge arrangements' rose slightly in Q3 (from 13 in Q2 to 15 in Q3).
- Complaints in all other key sub-categories fell in Q3. This includes complaints about 'appointment administration issues', which had previously been flagged as a concern in Q1 and Q2.
- The sub-category 'lost medical notes and test results' has been removed from the analysis this quarter as the number of related complaints remain consistently low.

### 3. Divisional Performance

#### 3.1 Divisional analysis of complaints received

Table 3 provides an analysis of Q3 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.

<b>Table 3</b>	<b>Surgery</b>	<b>Medicine</b>	<b>Specialised Services</b>	<b>Women &amp; Children</b>	<b>Diagnostics &amp; Therapies</b>
Total number of complaints received	151 (150) ↑	94 (108) ↓	57 (57) =	56 (74) ↓	23 (18) ↑
Number of complaints about appointments and admissions	53 (66) ↓	11 (19) ↓	16 (23) ↓	10 (22) ↓	6 (6) =
Number of complaints about staff attitude and communication	41 (29) ↑	32 (34) ↓	13 (13) =	10 (16) ↓	6 (7) ↓
Number of complaints about clinical care	42 (35) ↑	24 (36) ↓	17 (15) ↑	28 (31) ↓	7 (4) ↑
Area where the most complaints have been received in Q3	Bristol Dental Hospital – 48 (52) Bristol Eye Hospital – 30 (30) Trauma & Orthopaedics – 11 (11) QDU (Endoscopy) – 10 (5) ENT – 9 (13) Ward A700 – 8 (3)	Emergency Department (BRI) - 31 (18) Dermatology – 11 (15) Sleep Unit – 6 (7) Unity Sexual Health – 6 (1) Ward A300 – 1 (5) Ward A515 – 1 (5)	BHI (all) – 41 (40) BHI Outpatients - 9 (18) BHI Waiting List Office – 3 (11) Chemo Day Unit / Outpatients (BHOC) – 8 (8)	Children's ED & Ward 39 (BRHC) – 5 (6) Gynaecology Outpatients (StMH) – 9 (6) Paediatric Orthopaedics – 3 (6) Ward 78 – 4 (1)	Radiology – 16 (6) Physiotherapy – 1 (5) Boots Pharmacy – 3 (0)
Notable deteriorations compared to Q2	QDU (Endoscopy) – 10 (5) Ward A700 – 8 (3)	Emergency Department (BRI) - 31 (18)	None	Ward 78 – 4 (1)	Radiology – 16 (6) Boots Pharmacy – 3 (0)
Notable improvements compared to Q2	None	Ward A300 – 1 (5) Ward A515 – 1 (5)	BHI Outpatients – 9 (18) BHI Waiting List Office – 3 (11)	Paediatric Orthopaedics – 3 (6)	Physiotherapy – 1 (5)

### 3.1.1 Division of Surgery

In Q3, the Division of Surgery received a similar number of complaints as received in the previous quarter. There was a decrease in complaints about appointments and admissions (including cancelled or delayed appointments and operations) for the second quarter in succession, with 53 compared to 66 in Q2. Complaints about Bristol Dental Hospital (BDH) decreased for the third consecutive quarter, down to 48 in Q3, however BDH remains the most frequently complained about service in the Trust. Complaints about attitude and communication increased from 29 in Q2 to 41 in Q3, with seven complaints received about the attitude of administrative staff.

**Table 4: Complaints by category type**

Category Type	Number and % of complaints received – Q3 2017/18	Number and % of complaints received – Q2 2017/18
Appointments & Admissions	53 (35.1%) ↓	66 (44%) ↓
Clinical Care	42 (27.8%) ↑	35 (23.3%) ↓
Attitude & Communication	41 (27.2%) ↑	29 (19.3%) ↓
Information & Support	6 (4%) ↓	9 (6%) ↓
Facilities & Environment	3 (2%) ↑	2 (1.3%) ↑
Access	3 (2% of total complaints) =	3 (2% of total complaints) ↑
Discharge/Transfer/ Transport	2 (1.3%) ↓	5 (3.3%) ↑
Documentation	1 (0.7%) =	1 = (0.7%)
<b>Total</b>	<b>151</b>	<b>150</b>

**Table 5: Top sub-categories**

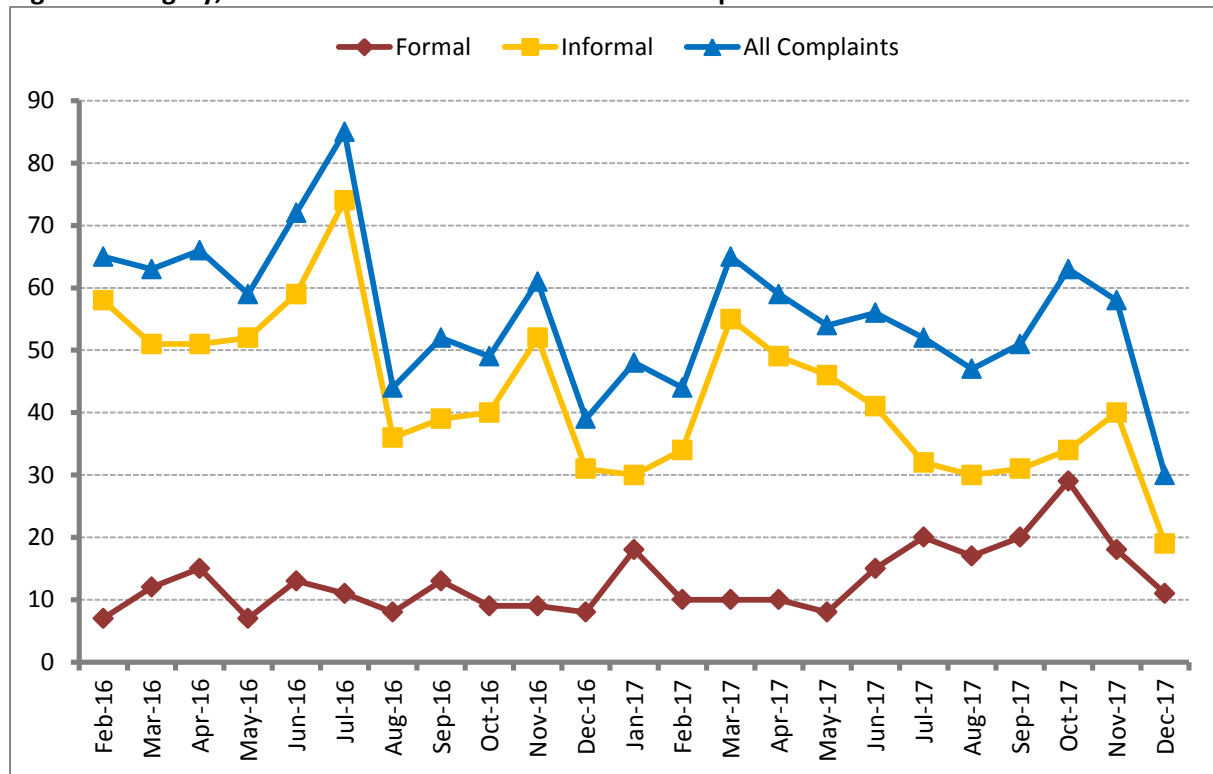
Category	Number of complaints received – Q3 2017/18	Number of complaints received – Q2 2017/18
Cancelled or delayed appointments and operations	22 ↓	39 ↓
Appointment administration issues	18 ↓	22 ↓
Clinical care (medical/surgical)	15 ↓	21 ↓
Failure to answer telephones/ failure to respond	10 ↓	11 ↑
Attitude of admin/clerical staff	7 ↑	0 ↓
Attitude of medical staff	7 ↓	8 ↓
Communication with patient/relative	7 ↑	3 =
Clinical care (nursing)	3 ↓	5 ↑
Attitude of nursing staff	2 ↓	4 ↑
Discharge arrangements	2 ↓	5 ↑

**Table 6: Divisional response to concerns highlighted by Q3 data**

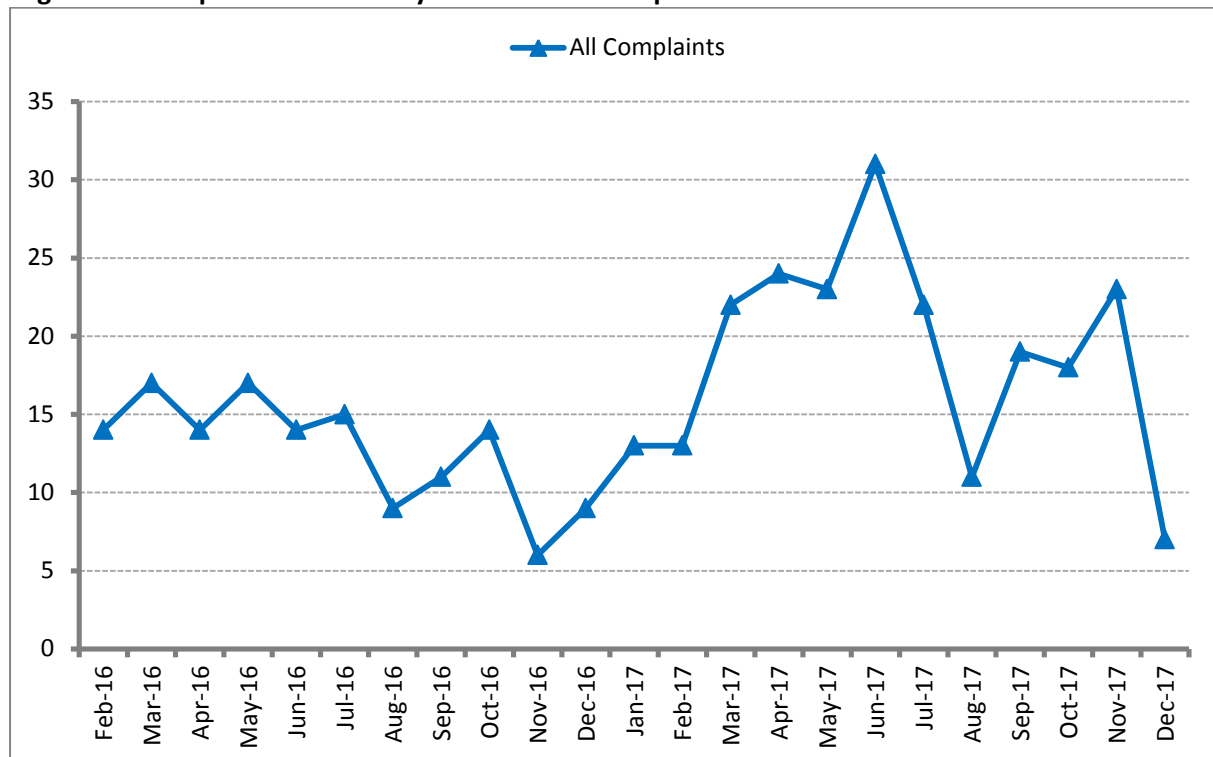
Concern	Explanation	Action
<p>Although complaints about Bristol Dental Hospital decreased slightly in quarter 3, BDH has received high levels of complaints throughout the past year</p>	<p>The BDH had received several complaints about the change of criteria to access restorative dentistry over this period. The restriction has been agreed due to the high demand and lack of qualified specialist dentist. This is a change in referral practice that has been agreed with the clinicians and our commissioners.</p> <p>There were five complaints about answering the phone within the dental hospital.</p> <p>Other themes included the attitude and communication of doctors.</p>	<p>A complaint service meeting is held bi-monthly at the BDH to review complaints and to action or identify any themes. BDH complaints are also shared at the governance meetings.</p> <p>The division will continue to monitor all complaints received and identify any themes arising.</p> <p>A review of complaints received in Q3 about attitude of staff at BDH has not revealed any patterns of repeated behaviours relating to individual members of staff.</p> <p>Regarding future appointments, capacity and demand for the dental hospital has been modelled for 2018/19, as a result of which, more appointments should be available in the future. However, this will require recruitment of additional staff, of which the final number is yet to be confirmed.</p>
<p>Within the Division as a whole, complaints regarding attitude and communication increased from 29 in Q2 to 41 in Q3.</p> <p>Of these 41 complaints, 10 were in respect of failure to answer the telephone and seven each were about attitude of admin and clerical staff; attitude of medical staff; and communication with patient/relative.</p> <p>Five of the 10 complaints about failure to answer telephones related to Bristol Dental Hospital.</p> <p>Six of the seven complaints about attitude of admin and clerical staff were received by Bristol Eye Hospital.</p>	<p>The majority of the communication complaints relate to patients not having understood explanations of clinical care. This includes inpatients and outpatients.</p>	<p>The Division recognises the need to achieve a reduction in numbers of complaints being received.</p> <p>A working group will be established, chaired by the Head of Nursing, focusing specifically on themes from the complaints such as communication – this is due to commence in April 2018.</p> <p>In response to the pattern of complaints relating to whether patients have understood explanations of care, the group’s brief will include reviewing relevant patient information leaflets.</p> <p>The telephone numbers used by patients to contact the dental hospital continue to be identified so that any delays can be followed up. New administrative staff have been</p>

		<p>appointed, so we are expecting to see a continued reduction in complaints about telephones in Q4.</p> <p>Complaints about clinical staff continue to be closely monitored; however, a review of Q3 data has not identified any patterns of complaints relating to specific staff members.</p>
<p>The number of complaints received by QDU (Endoscopy) doubled from five in Q2 to ten in Q3.</p> <p>Four of these complaints were in respect of failure to answer telephones; two were about administration issues and two about personal property.</p> <p>In addition, there were two complaints about QDU (Theatres).</p>	<p>It is recognised that the change in use of the QDU area to an inpatient extreme escalation area has caused increased pressure and workload for staff.</p> <p>Prompt responses to phone calls have suffered as a result.</p>	<p>The process of answering the phones within QDU has been reviewed. At the time of writing (14/3/18), no further complaints have been received in Q4.</p> <p>A property audit has been completed across the organization during 'back to the floor' by Heads of Nursing and matrons. As a result of this audit, the policy that identifies how patients' property will be managed is to be reviewed by the HON in Medicine.</p>
<p>In Q3, the Division responded to 93 complaints via the informal investigation process. Of these 93 responses, a total of 30 (32.3%) breached the deadline that had been agreed with the complainant.</p> <p>12 of the 30 breaches were of complaints received by Bristol Dental Hospital, five were for Bristol Eye Hospital and four were in respect of Trauma &amp; Orthopaedics complaints.</p>	<p>The majority of breaches (19) were in the month of November. Performance improved significantly in December (three breaches).</p>	<p>Informal complaints are now tracked by the Divisional complaints lead to promote compliance to resolve within 10 working days.</p> <p>Work has been undertaken to provide additional education specifically to the division's performance and operations teams regarding responding within the 10 day timescale.</p>

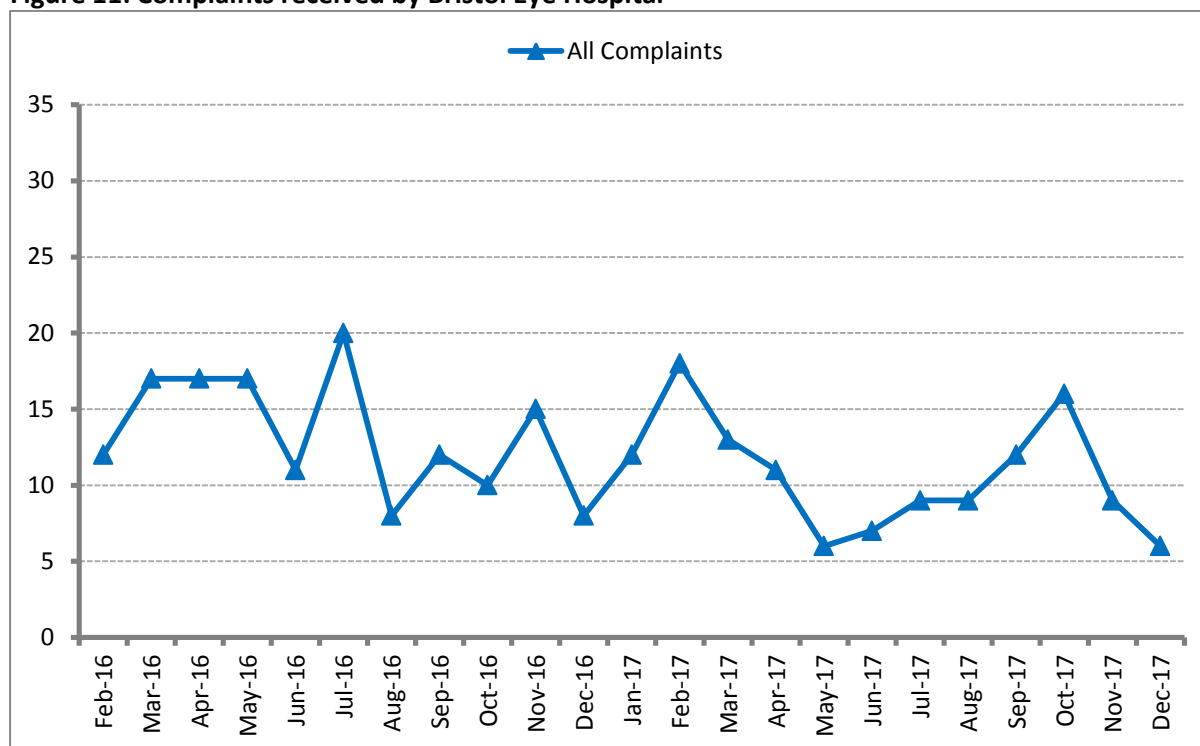
**Figure 9: Surgery, Head & Neck – formal and informal complaints received**



**Figure 10: Complaints received by Bristol Dental Hospital**



**Figure 11: Complaints received by Bristol Eye Hospital**



### 3.1.2 Division of Medicine

In Q3, the Division of Medicine received 14 fewer complaints than in Q2 and there were no significant increases in any of the eight main category types. However, there were increases in complaints regarding the attitude of administrative staff and discharge arrangements. Complaints about the BRI Emergency Department rose significantly in Q3 (from 18 in Q2 to 31 in Q3). Of the 94 complaints received by the Division, 51 were resolved via the informal investigation route and 43 via a formal investigation.

**Table 7: Complaints by category type**

Category Type	Number and % of complaints received – Q3 2017/18	Number and % of complaints received – Q2 2017/18
Attitude & Communication	32 (34%) ↓	34 (31.5%) ↑
Clinical Care	24 (25.5%) ↓	36 (33.3%) ↓
Discharge/Transfer/ Transport	12 (12.8%) ↑	9 (8.3%) ↑
Appointments & Admissions	11 (11.7%) ↓	19 (17.6%) ↑
Information & Support	6 (6.4%) ↓	7 (6.5%) ↑
Facilities & Environment	4 (4.3%) ↑	2 (1.9%) ↓
Documentation	3 (3.2%) ↑	1 (0.9%) ↓
Access	2 (2.1% of total complaints) ↑	0 (0% of total complaints) =
<b>Total</b>	<b>94</b>	<b>108</b>

**Table 8: Top sub-categories**

Category	Number of complaints received – Q3 2017/18	Number of complaints received – Q2 2017/18
Discharge arrangements	11 ↑	8 ↑
Clinical care (medical/surgical)	11 ↓	19 ↓
Attitude of medical staff	9 ↓	12 =
Cancelled or delayed appointments and operations	6 ↓	9 ↑
Attitude of nursing staff	6 ↓	7 ↑
Attitude of admin/clerical staff	5 ↑	1
Clinical care (nursing)	5 ↓	9 ↑
Appointment administration issues	4 ↓	8 ↑
Failure to answer telephones/failure to respond	4 ↓	5 =
Communication with patient/relative	3 ↓	6 ↑

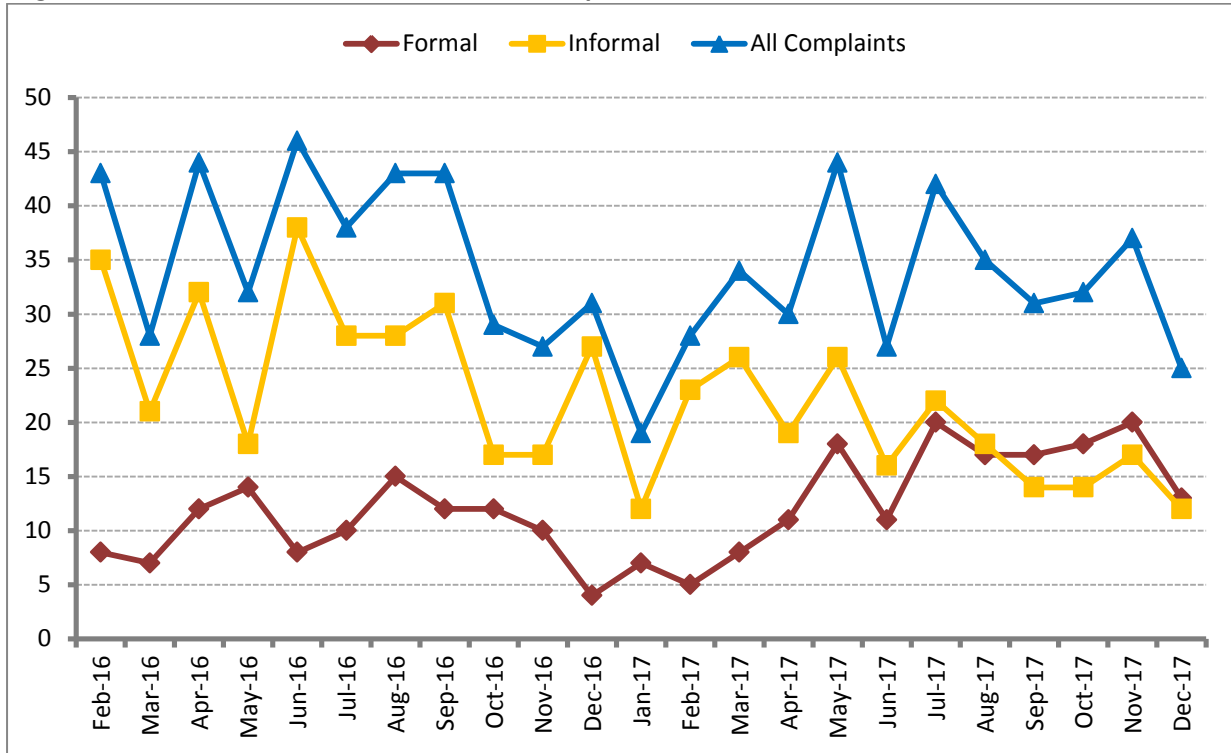
**Table 9: Divisional response to concerns highlighted by Q3 data**

Concern	Explanation	Action
<p>Emergency Department complaints increased from 18 in Q2 to 31 in Q3.</p> <p>Of the 31 complaints received, 11 were in respect of attitude &amp; communication; 11 were about clinical care; and three were related to premature discharge.</p> <p>Of the 11 complaints about attitude &amp; communication, five related to attitude of medical staff and three were about attitude of nursing staff.</p>	<p>During quarter 3 there has been significant crowding in both majors and minors in ED.</p> <p>Patient expectations have also played a part in number of complaints received about ED. ED is often not the most appropriate access point to meet patients' health needs.</p>	<p>Staff are regularly reminded of the importance of treating all patients with dignity and respect. We have introduced streaming to the minors end of ED in order to assess patients more quickly – 'See and treat' in minors is in place between 8am till 2am. A queue coordinator has been assigned to improve patient flow and strengthen patient safety.</p>
<p>During Q3, the Division responded to 31 complaints via the informal investigation route. Of these 31 responses, nine (29%) breached the deadline agreed with the complainant.</p> <p>Four of the breaches were of complaints received by the Dermatology Department and</p>	<p>We have work to undertake to embed a tracking system, to ensure our complaints coordinator is fully sighted on informal concerns as well as formal complaints.</p>	<p>Process to be articulated and monitored.</p>

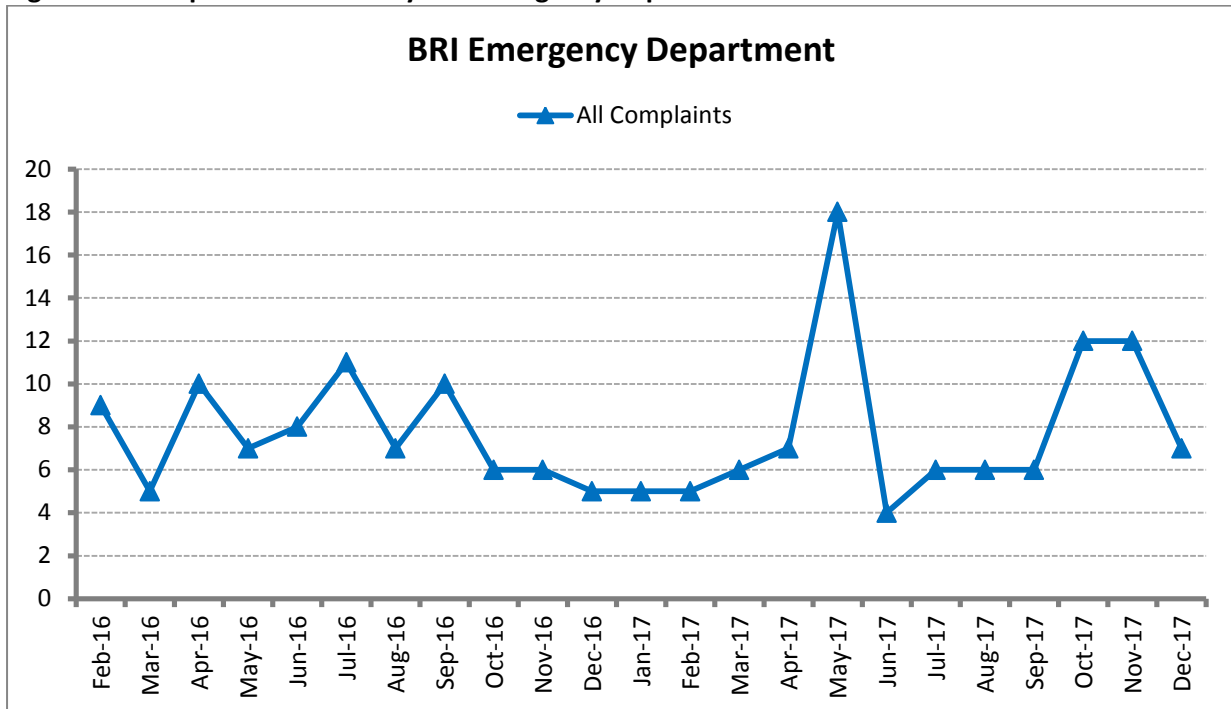


two were in respect of  
Emergency Department  
complaints.

**Figure 12: Medicine – formal and informal complaints received**



**Figure 13: Complaints received by BRI Emergency Department**



### 3.1.3 Division of Specialised Services

In Q3, the Division of Specialised Services received the same number of complaints as in the previous quarter. There was an increase in the number of complaints received in the categories of clinical care, information and support, and documentation, but these were only small increases. There was a notable decrease in the number of complaints received in relation to appointments and admissions, including cancelled or delayed appointments and operations. Complaints about the Bristol Heart Institute continue to significantly outweigh complaints received about the Bristol Haematology and Oncology Centre. Nearly two thirds of complaints received by the division in Q3 were resolved informally.

**Table 10: Complaints by category type**

Category Type	Number and % of complaints received – Q3 2017/18	Number and % of complaints received – Q2 2017/18
Clinical Care	17 (29.8%) ↑	15 (26.3%) ↓
Appointments & Admissions	16 (28%) ↓	23 (40.4%) ↓
Attitude & Communication	13 (22.8%) =	13 (22.8%) ↑
Information & Support	5 (8.8%) ↑	3 (5.3%) ↓
Documentation	3 (5.3%) ↑	0 (0%) =
Facilities & Environment	2 (3.5%) =	2 (3.5%) ↓
Discharge/Transfer/Transport	1 (1.8%) =	1 (1.8%) ↓
Access	0 (0% of total complaints) =	0 (0% of total complaints) =
<b>Total</b>	<b>57</b>	<b>57</b>

**Table 11: Top sub-categories**

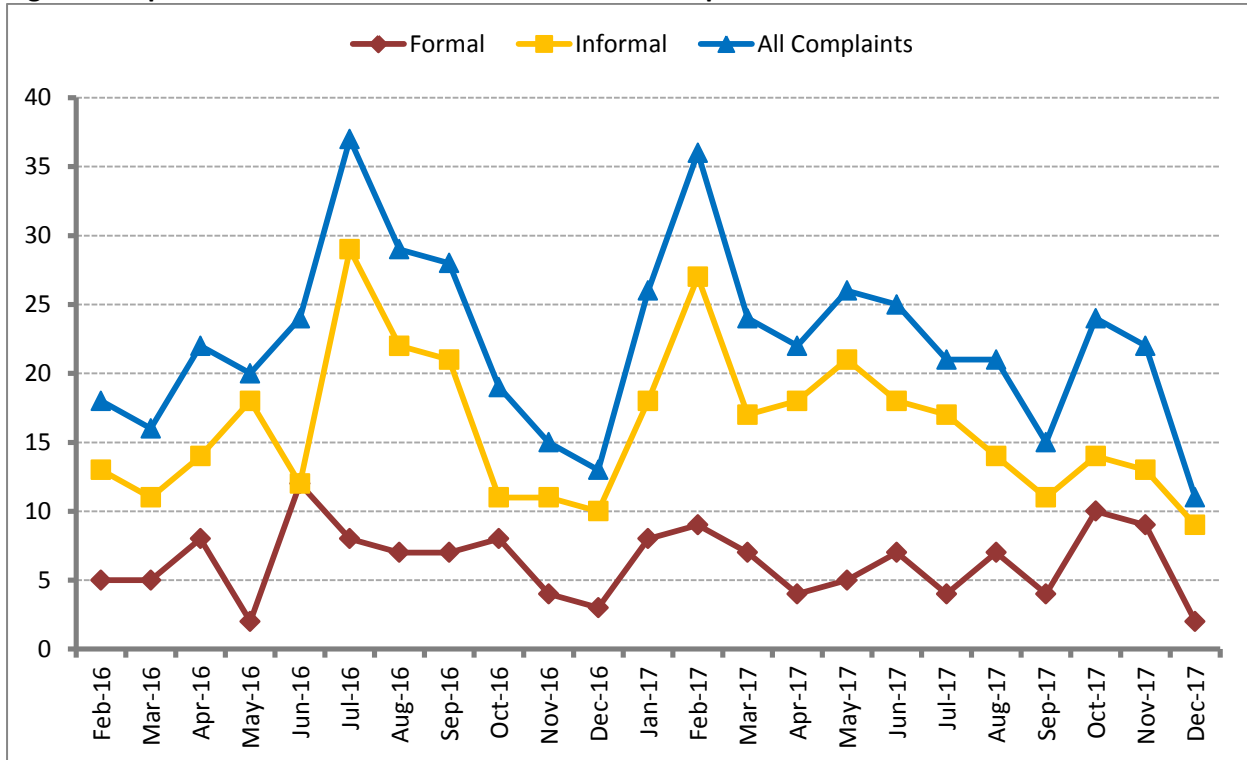
Category	Number of complaints received – Q3 2017/18	Number of complaints received – Q2 2017/18
Cancelled or delayed appointments and operations	8 ↓	13 ↓
Clinical care (medical/surgical)	7 ↑	5 ↓
Appointment administration issues	5 ↓	7 ↓
Clinical care (nursing)	5 ↑	2 ↑
Communication with patient/relative	3 =	3 ↑
Attitude of admin/clerical staff	2 ↑	0
Attitude of medical staff	1 ↓	3 =
Failure to answer telephone/failure to respond	1 ↓	5 =
Attitude of nursing staff	1 =	1 ↑
Discharge arrangements	1 ↑	0 =

**Table 12: Divisional response to concerns highlighted by Q3 data**

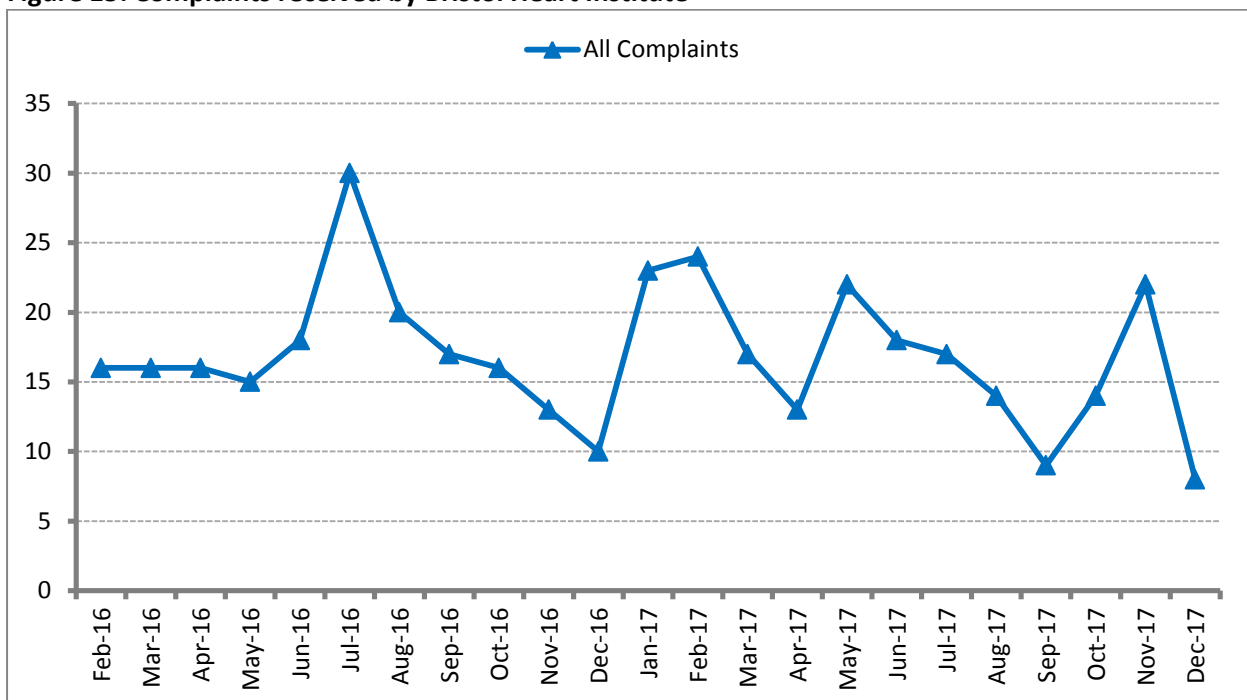
Concern	Explanation	Action
<p>Bristol Heart Institute (BHI) has consistently received a high number of complaints over the last three quarters. This represents the second highest number of complaints of any service Trustwide.</p> <p>In quarter 3, the BHI received a total of 44 complaints, compared with 40 in quarter 2 and 50 in quarter 1.</p> <p>This represents a high number of complaints when compared with the other site in the Division, Bristol Haematology &amp; Oncology Centre, which received 17 complaints in quarter 3, compared with 20 in quarter 2 and 21 in quarter 1.</p>	<p>Of the 44 complaints reported for the BHI, 36 sit with the Division of Specialised Services.<sup>3</sup></p> <p>There were 11,237 attendances to the BHI across the quarter. In this context, 36 complaints in three months represents a small percentage of the patients who were seen and/or treated at the BHI.</p> <p>A large proportion of the 36 complaints reflect concerns expressed by patients regarding delays to appointments.</p> <p>The complaints profile for the BHI and BHOC differ. A high proportion of the complaints received within the BHI reflect the scheduling, delays to and cancellation of surgical procedures, and a large proportion of the complaints received in the BHOC generally reflect queries following complex diagnosis or the death of a family member. In addition to the information provided above, a proportion of the BHI complaints also reflect the trust bed position and the need to reschedule or delay procedures due to limited bed availability.</p>	<p>To address the backlogs in outpatient follow up clinics the division has appointed additional medical staff, increased the number of clinics available, reviewed all patients to ensure that all those on the follow up list require face to face follow up and to identify any high risk patients to ensure that they are prioritised.</p>

<sup>3</sup> The number of complaints noted by the division differs from the 41 reported in Table 3. This is due to five complaints being included in the monthly data for the division which subsequently turned out to be the responsibility of other Divisions.

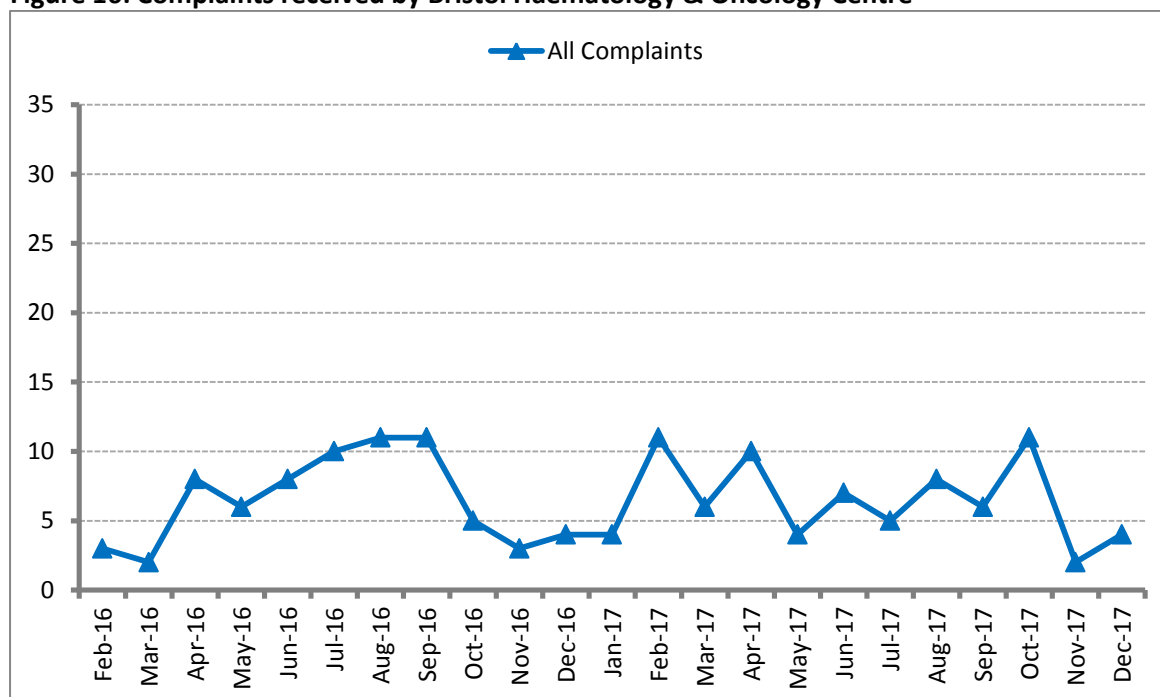
**Figure 14: Specialised Services – formal and informal complaints received**



**Figure 15: Complaints received by Bristol Heart Institute**



**Figure 16: 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 fell by 24% compared with the previous quarter. The actual number of complaints about clinical care fell slightly, although half of all complaints received by the Division were in this category. Women's and Children's Services is the only division where the majority of complaints received in Q3 were resolved via the formal investigation process (32 formal compared to 24 informal).

**Table 13: Complaints by category type**

Category Type	Number and % of complaints received – Q3 2017/18	Number and % of complaints received – Q2 2017/18
Clinical Care	28 (50%) ↓	31 (41.9%) ↑
Appointments & Admissions	10 (17.9%) ↓	22 (29.7%) ↑
Attitude & Communication	10 (17.9%) ↓	16 (21.6%) ↓
Facilities & Environment	3 (5.4%) ↑	0 (0%) ↓
Information & Support	3 (5.4%) ↓	4 (5.4%) ↓
Discharge/Transfer/Transport	1 (1.7%) ↑	0 (0%) ↓
Documentation	1 (1.7%) =	1 (1.4%) =
Access	0 (0% of total complaints) =	0 (0% of total complaints) =
<b>Total</b>	<b>56</b>	<b>74</b>

**Table 14: Top sub-categories**

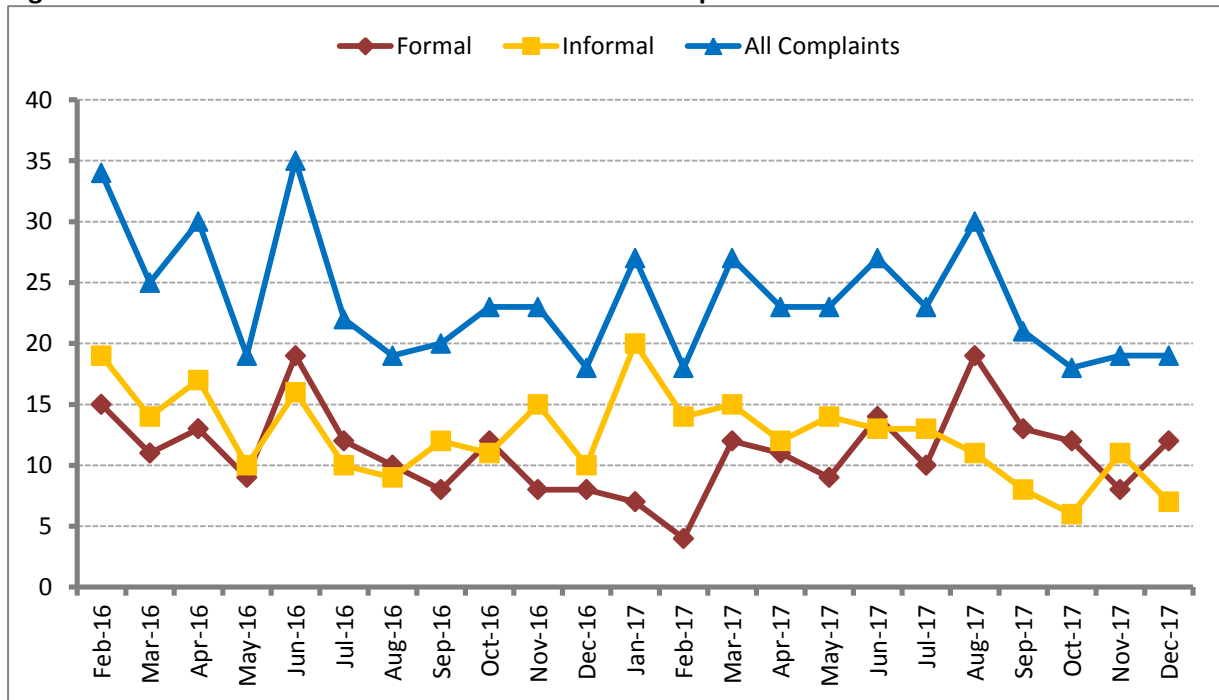
Category	Number of complaints received – Q3 2017/18	Number of complaints received – Q2 2017/18
Clinical care (medical/surgical)	13 ↑	12 ↑
Cancelled or delayed appointments and operations	8 ↓	13 ↑
Clinical care (nursing/midwifery)	7 ↓	12 ↑
Communication with patient/relative	3 ↓	4 ↓
Attitude of admin/clerical staff	2 ↑	1
Attitude of medical staff	2 ↓	4 ↓
Failure to answer telephones /failure to respond	1 ↓	2 =
Appointment administration issues	1 ↓	5 ↑
Discharge arrangements	1 ↑	0 ↓
Attitude of nursing/midwifery	0 ↓	3 ↑

**Table 15: Divisional response to concerns highlighted by Q3 data**

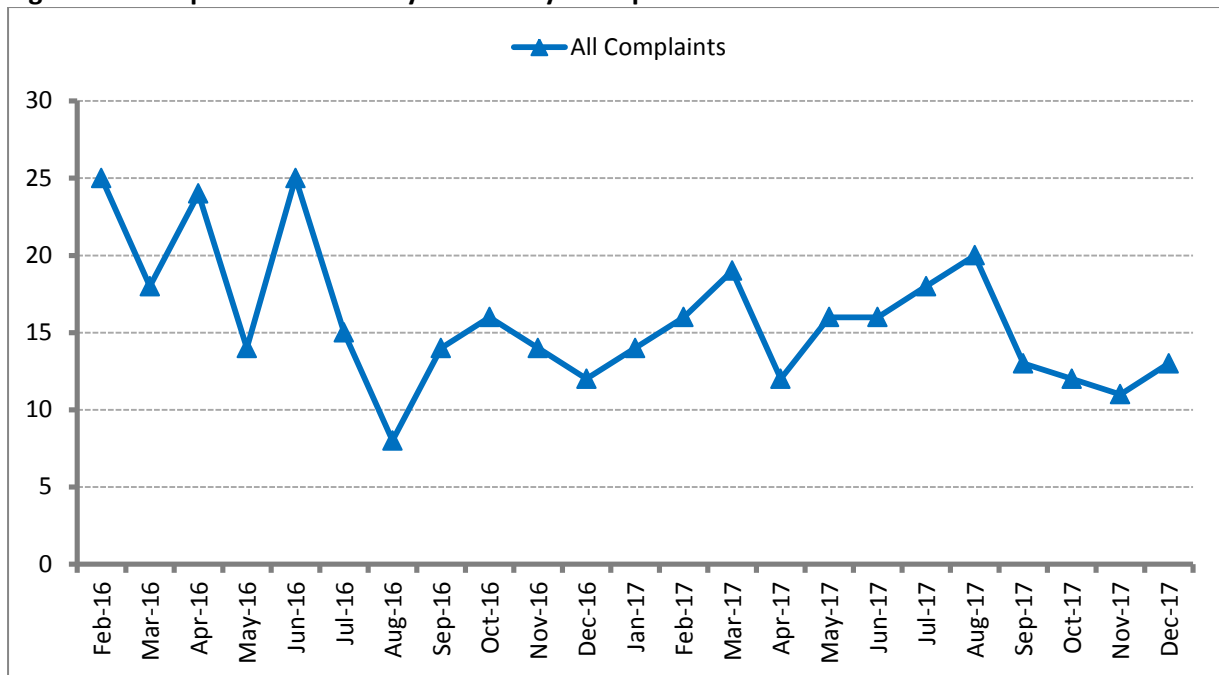
Concern	Explanation	Action
<p>Half of all complaints received by the Division in Q3 were in respect of clinical care.</p> <p>Of these 28 complaints, 17 were received by BRHC and 11 by STMH.</p> <p>Clinical care has been the category with the highest number of complaints for the Division for the last three consecutive quarters.</p>	<p><b>STMH</b> There are no clear themes with the STMH complaints. The patients often have complicated issues and have not always understood the information they have been told or explanations given.</p> <p><b>BRHC</b> On reviewing the complaints relating to clinical care, it is evident that there is a broad spread of areas involved and no obvious theme</p>	<p><b>STMH</b> To liaise with Tony Watkin to provide some more Patient Experience at the Heart workshops for the multi-disciplinary teams.</p> <p>Staff on the whole do communicate well, but it is often difficult to take everything in when you have just had a baby. Also labour notes no longer go home with the patient so community midwives find it harder to debrief.</p> <p><b>BRHC</b> As a result we will be reviewing the communication between staff and families, specifically in relation to the managing of expectations in both parties.</p>
Gynaecology Outpatients received nine complaints in Q3. Three of these	<p><b>STMH</b> Process issues in outpatients have led to some of the complaints.</p>	<p><b>STMH</b> As above.</p>

<p>complaints were in respect of clinical care; and two each were related to appointments &amp; admissions and attitude &amp; communication.</p>	<p>Issue around Privacy and Dignity. Two of the complaints were patients not happy with communications by the Consultants</p>	<p>Review of outpatient department processes being led by General Manager.</p>
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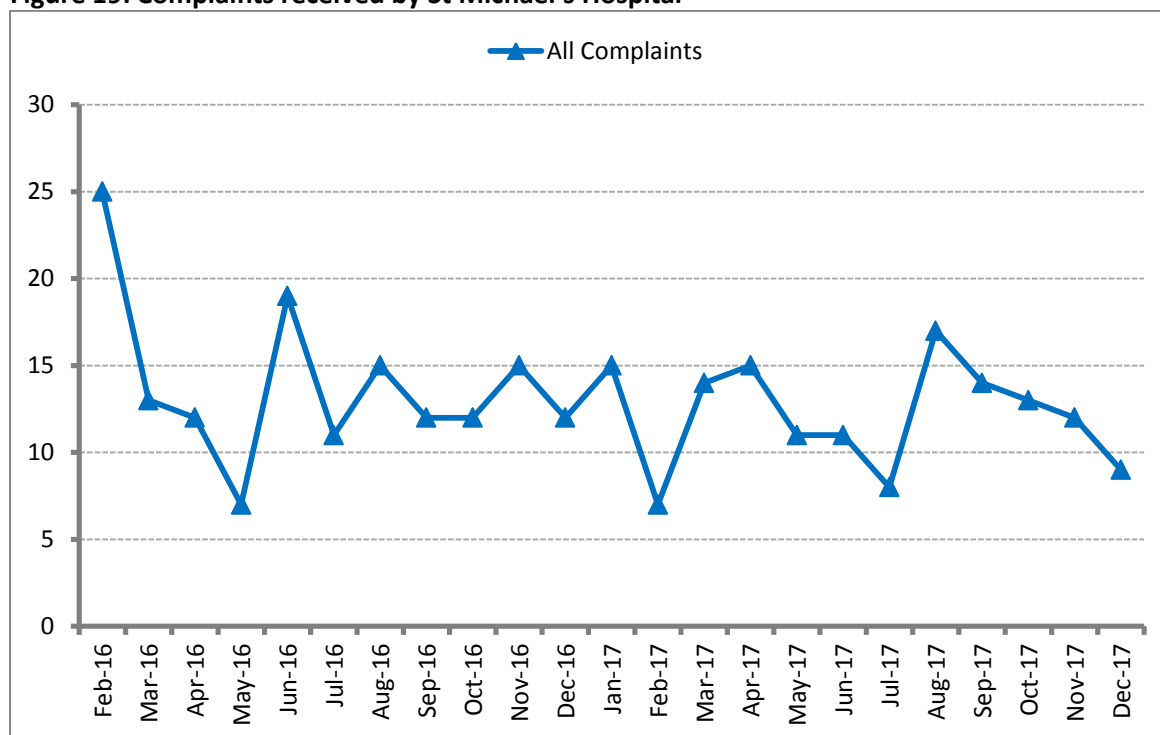
**Figure 17: Women & Children – formal and informal complaints received**



**Figure 18: Complaints received by Bristol Royal Hospital for Children**



**Figure 19: Complaints received by St Michael's Hospital**



### 3.1.5 Division of Diagnostics & Therapies

Complaints received by the Division of Diagnostics and Therapies increased for the third consecutive quarter, from 13 in Q1 to 18 in Q2 and 23 in Q3, with the majority of complaints in respect of clinical care, closely followed by those about appointments & admissions, and attitude & communication. Radiology accounted for two thirds of complaints received by Diagnostics and Therapies in Q3. The Division continued its trend of resolving the majority of complaints via the informal complaints process (16 compared to the seven that were resolved formally).

**Table 16: Complaints by category type**

Category Type	Number and % of complaints received – Q3 2017/18	Number and % of complaints received – Q2 2017/18
Clinical Care	7 (30.4%) ↑	4 (22.2%) ↓
Appointments & Admissions	6 (26.1%) =	6 (33.3%) ↑
Attitude & Communication	6 (26.1%) ↓	7 (38.9%) ↑
Facilities & Environment	4 (17.4%) ↑	0 (0%) ↓
Information & Support	0 (0%) =	0 (0%) ↓
Discharge/Transfer/Transport	0 (0%) =	0 (0%) =
Documentation	0 (0%) ↓	1 (5.6%) ↑
Access	0 (0% of total complaints)	0 (0% of total complaints) =
<b>Total</b>	<b>23</b>	<b>18</b>



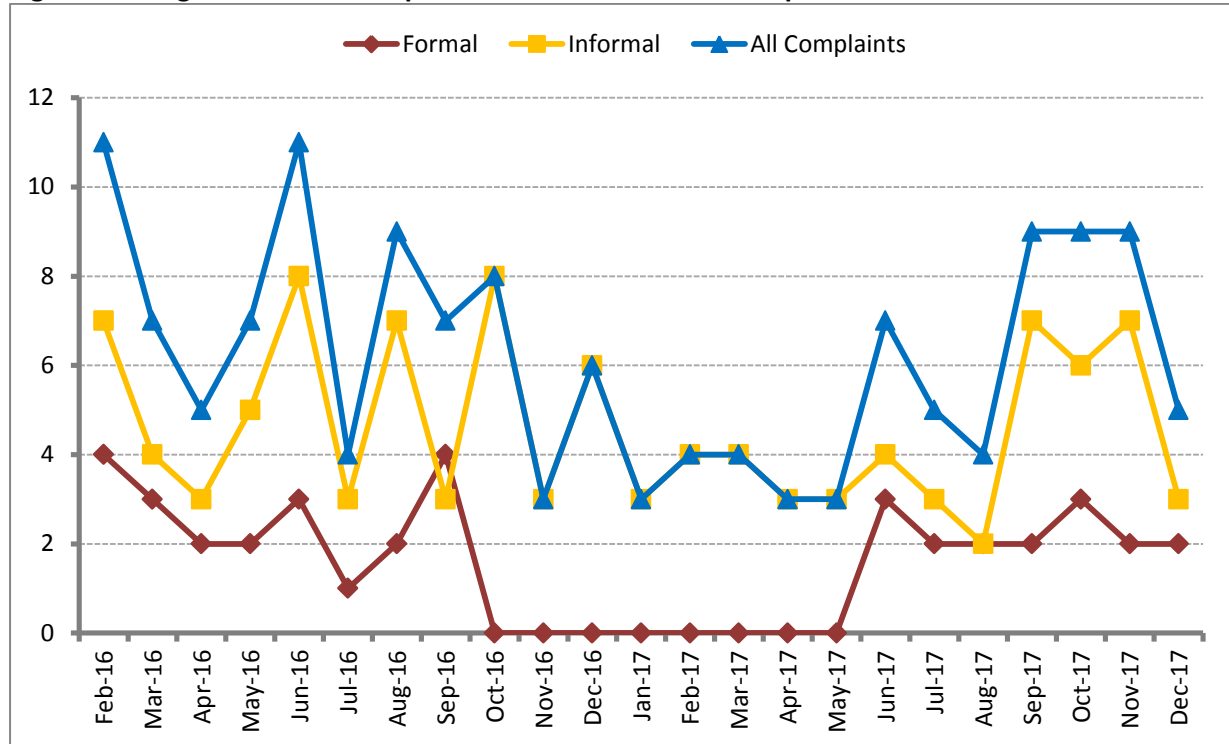
**Table 17: Top sub-categories**

Category	Number of complaints received – Q3 2017/18	Number of complaints received – Q2 2017/18
Cancelled or delayed appointments and operations	3 ↑	2 ↑
Clinical care (medical/AHPs)	2 ↑	1 =
Failure to answer telephones /failure to respond	2 ↑	1 ↑
Appointment administration issues	1 ↓	4 ↑
Attitude of medical staff/AHPs	1 =	1 ↑
Communication with patient/relative	1 =	1 =
Clinical care (nursing)	0 =	0 =
Attitude of nursing/midwifery	0 ↓	1 ↑
Discharge arrangements	0 =	0 =
Attitude of admin/clerical staff	0 ↓	1 =

**Table 18: Divisional response to concerns highlighted by Q3 data**

Concern	Explanation	Action
<p>Complaints about radiology services increased from six in Q2 to 16 in Q3.</p> <p>Of the 16 complaints received, eight were for BRI Radiology (including one for BRI ultrasound); two each were received by BRHC Radiology, CT Scan and STMH Ultrasound; and one each SBCH Radiology and BHOC Radiology received one complaint each.</p>	<p>There are no common themes to the complaints received and this is reflected in the spread of clinical areas from which Radiology-related complaints were received.</p> <p>Some complaints related to lack of communication or not receiving appointment letters either at all or in a timely manner.</p> <p>A few complaints noted the delay in scan results being provided.</p>	<p>Appointment booking staff to call patients regarding short notice appointments around holidays when posting letters is less reliable.</p> <p>There were issues around staff shortages for a period of time in Q3; recruitment is underway.</p>

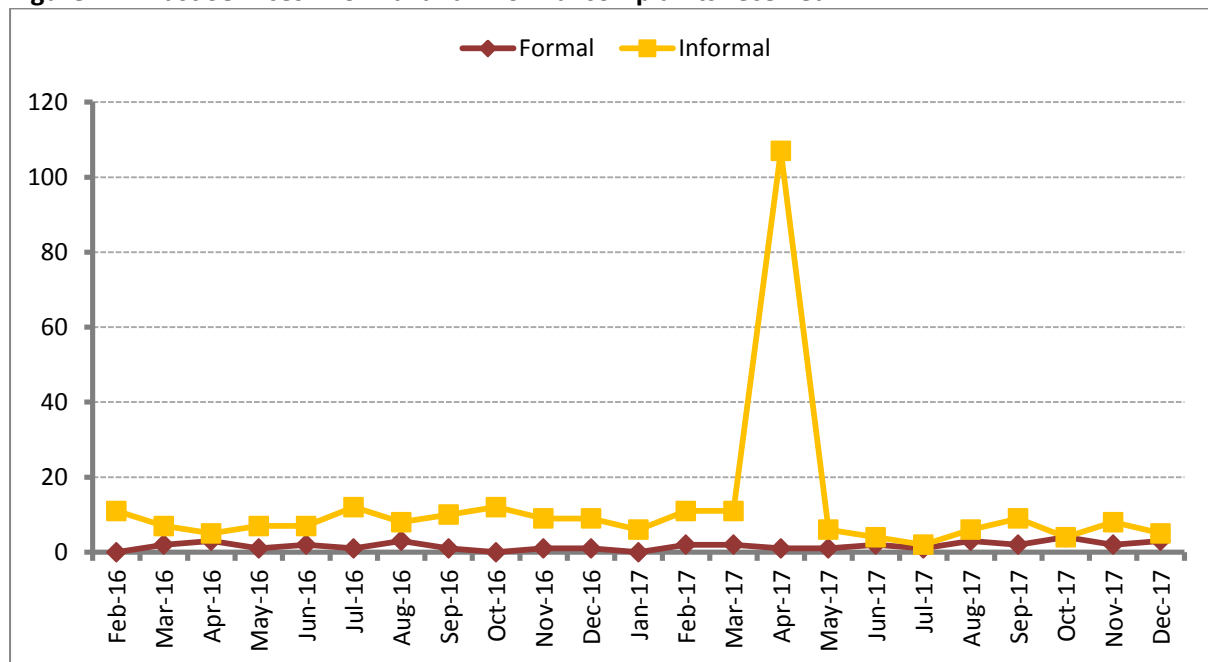
**Figure 20: Diagnostics and Therapies – formal and informal complaints received**



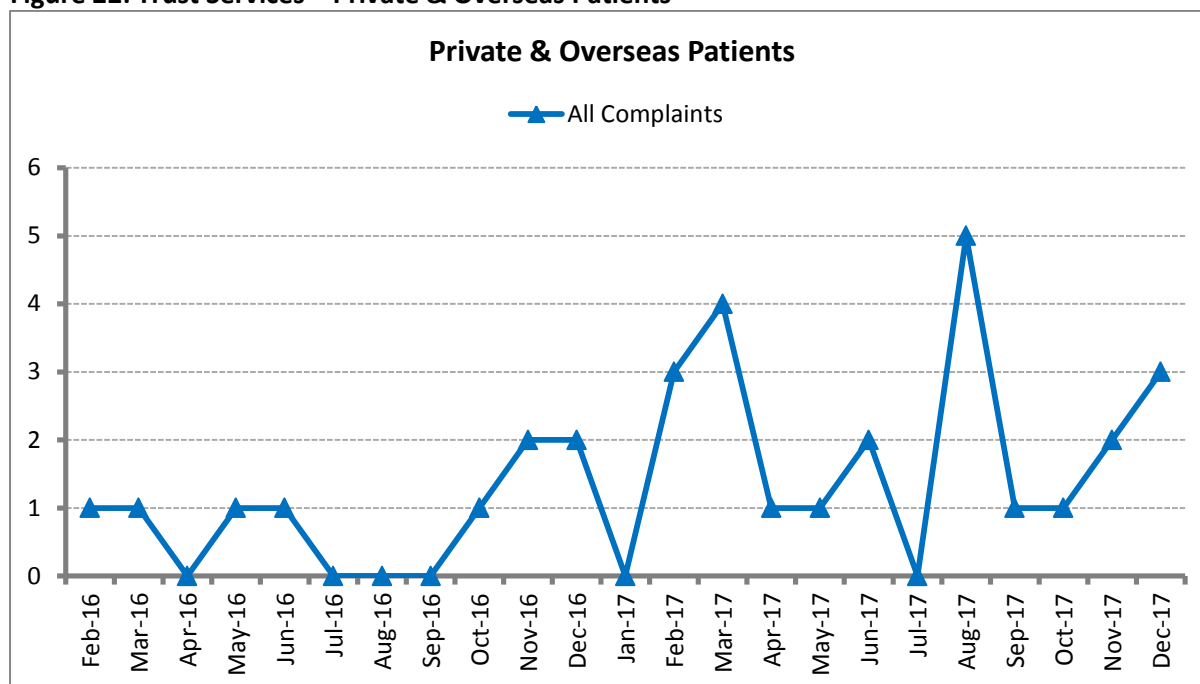
**3.1.6 Division of Trust Services**

The Division of Trust Services, which includes Facilities & Estates, received 26 complaints in Q3, compared to 23 in Q2. Of the 26 complaints received in Q3, six were received by the Private & Overseas Patients Team, four were received by the Medical Records Team and four were in respect of car parking.

**Figure 21: Trust Services – formal and informal complaints received**



**Figure 22: 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 site**

Hospital/Site	Number and % of complaints received in Q3 2017/18	Number and % of complaints received in Q2 2017/18
Bristol Royal Infirmary	174 (42.8% of total complaints) ↓	181 (42% of total complaints) ↓
Bristol Dental Hospital	48 (11.8%) ↓	52 (12.1%) ↓
Bristol Heart Institute <sup>4</sup>	44 (10.8%) ↑	40 (9.3%) ↓
Bristol Royal Hospital for Children	36 (8.8%) ↓	51 (11.9%) ↑
St Michael's Hospital	34 (8.4%) ↓	39 (9.1%) ↑
Bristol Eye Hospital	31 (7.5%) ↑	30 (7%) ↑
Bristol Haematology & Oncology Centre	17 (4.1%) ↓	20 (4.7%) ↓
South Bristol Community Hospital	10 (2.5%) ↑	7 (2%) =
Central Health Clinic	6 (1.5%) ↑	3 (0.7%) =
Southmead Hospital (UH Bristol services)	3 (0.6%) ↑	1 (0.2%) ↓
Trust Headquarters	2 (0.5%) ↑	1 (0.2%) =
Trust Car Parks	2 (0.5%) ↑	1 (0.2%) ↑
Off Trust Premises	1 (0.2%) =	1 (0.2%) ↑
Adult Audiology Service	0 (0%) ↓	1 (0.2%) ↑

<sup>4</sup> This figure includes services based in the BHI which are not part of Specialised Services; hence this differs from the figure quoted in section 3.1.3 of this report.

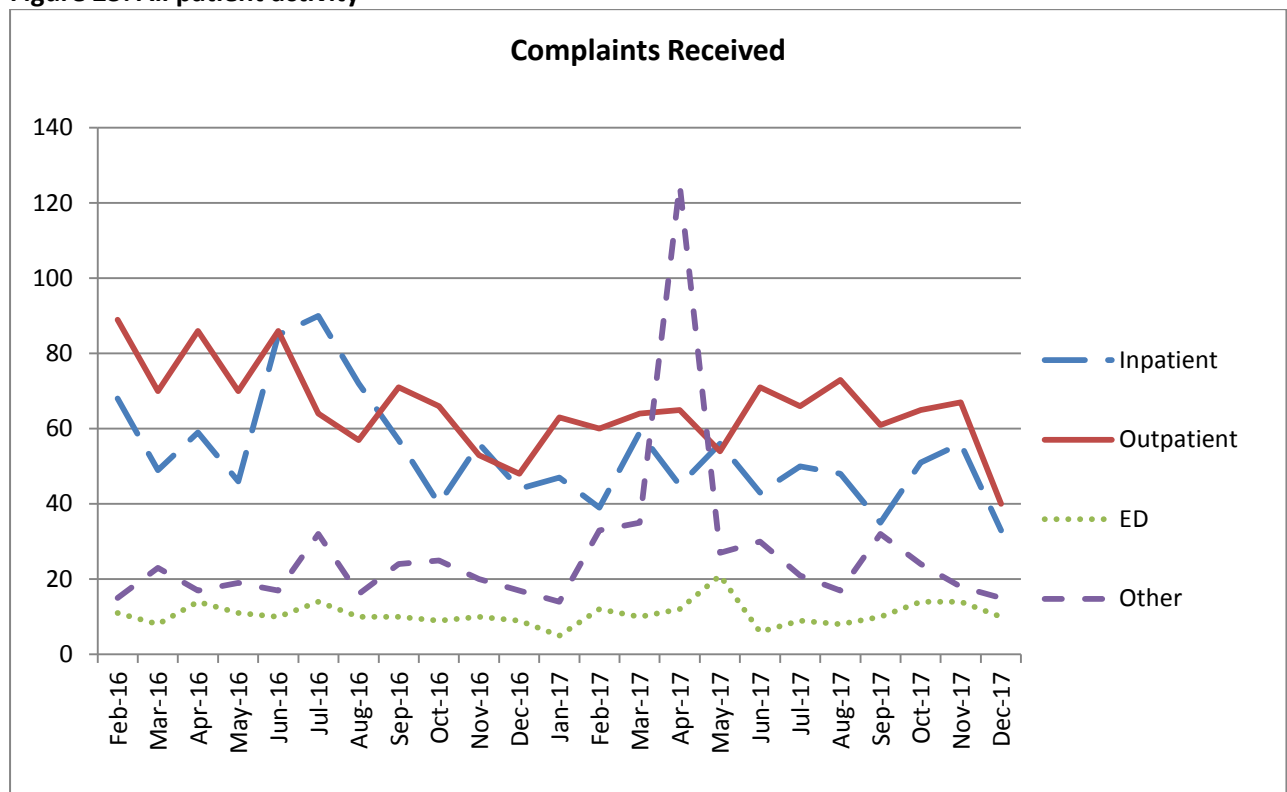
(Community)		
Community Dental Sites (Charlotte Keel)	0 (0%) ↓	1 (0.2%) =
Unity Community Sexual Health	0 (0%) ↓	1 (0.2%)
<b>TOTAL</b>	<b>407</b>	<b>430</b>

### 3.2.1 Breakdown of complaints by inpatient/outpatient/ED status

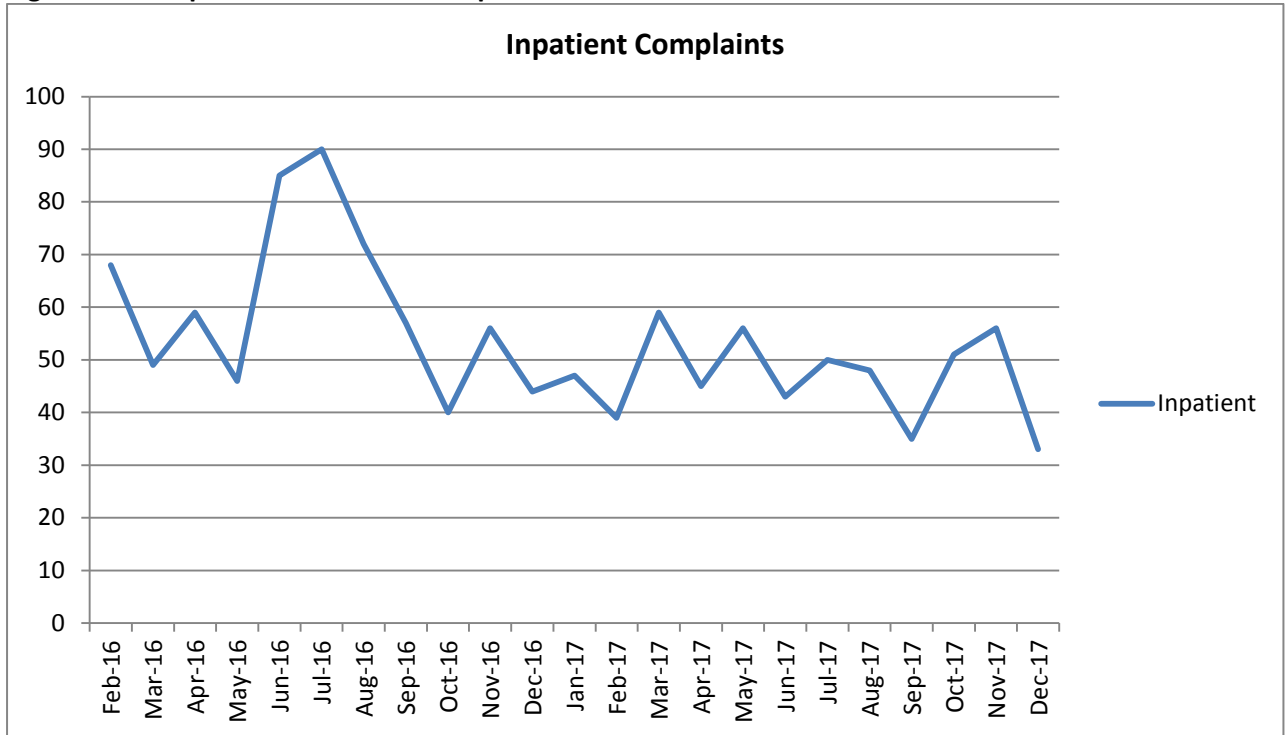
In order to more clearly identify the number of complaints received by the type of service, Figures 23-27 below show data differentiating between inpatient, outpatient, Emergency Department and other complaints. The category of 'other' includes complaints about non-clinical areas, such as car parking, cashiers, administration departments, etc.

In Q3, 42.3% (\*46.5%) of complaints received were about outpatient services, 34.4% (31%) related to inpatient care, 9.3% (6.3%) were about emergency patients; and 14% (16.3%) were in the category of 'other' (as explained above). \* Q2 percentages are shown in brackets for comparison.

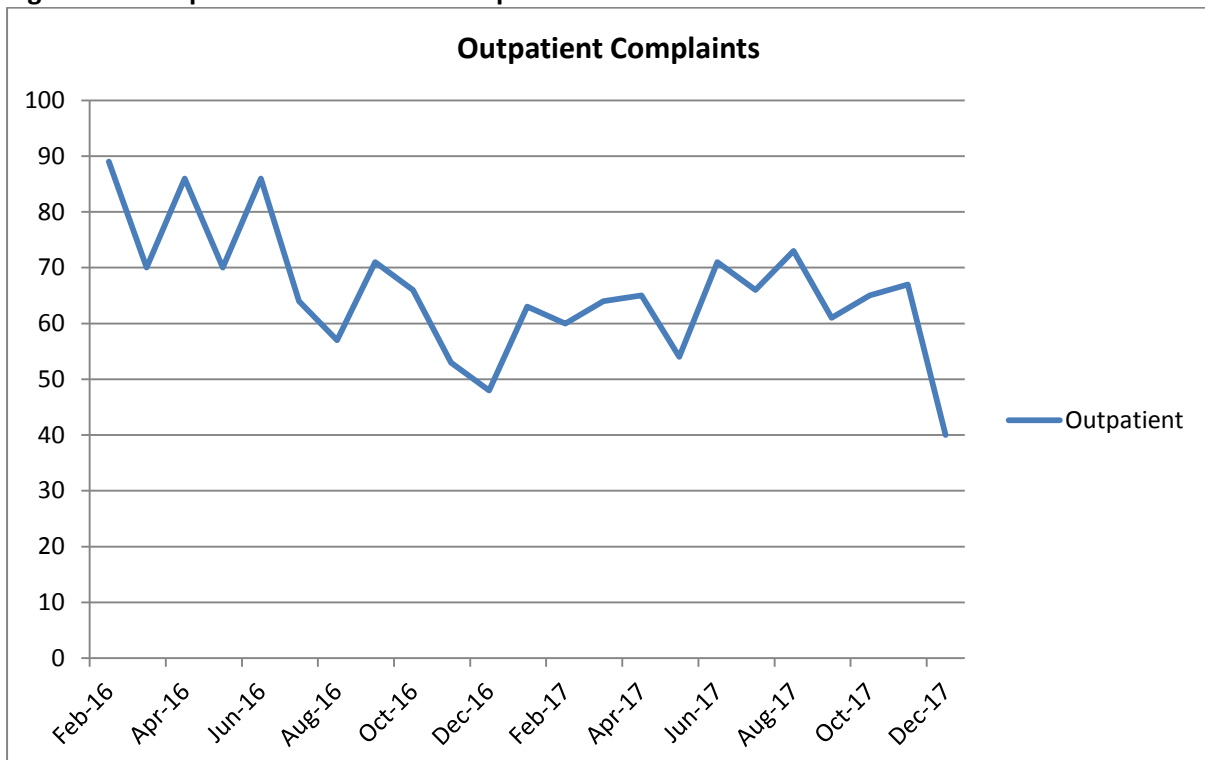
Figure 23: All patient activity



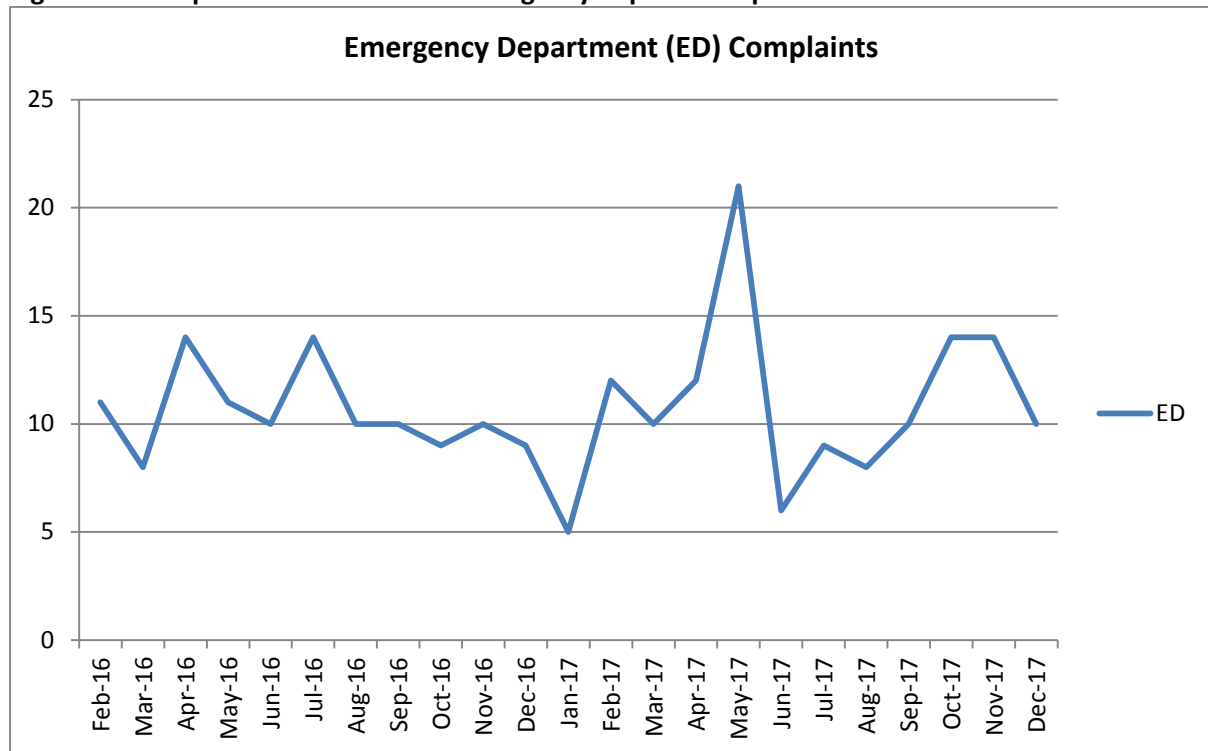
**Figure 24: Complaints received from inpatients**



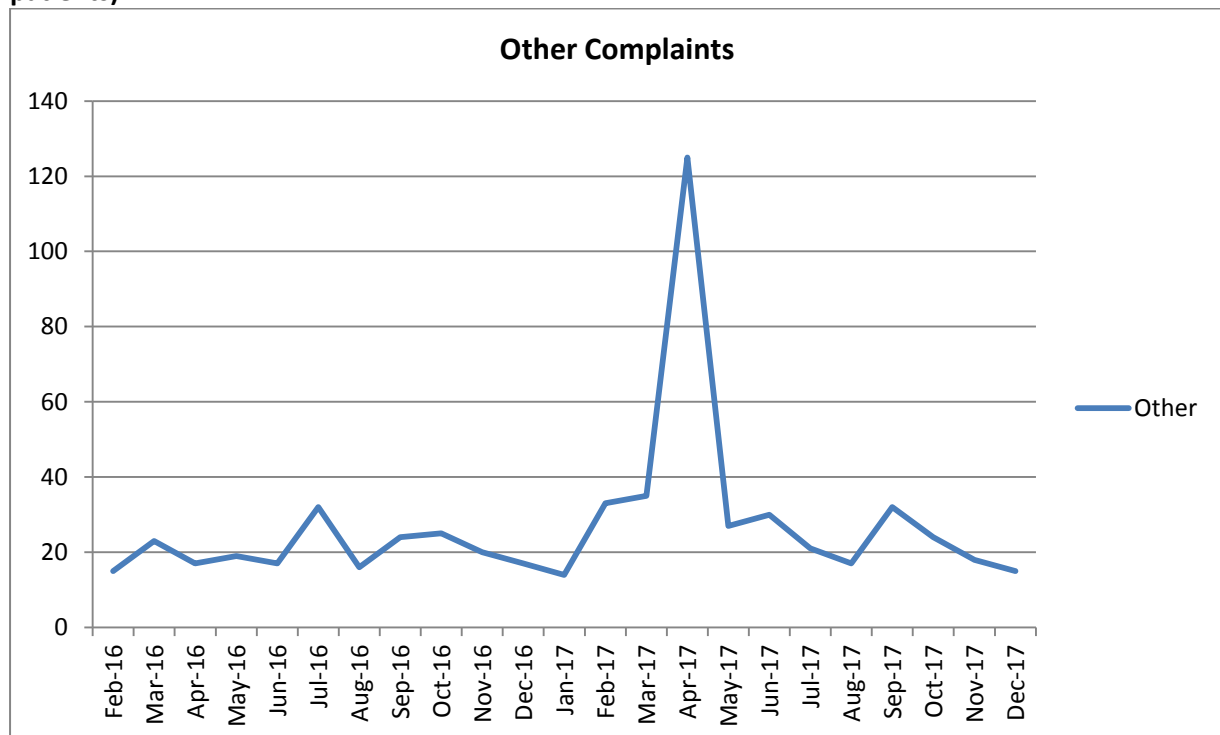
**Figure 25: Complaints received from outpatients**



**Figure 26: Complaints received from emergency department patients**



**Figure 27: 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
Feb-16	11	68	89	15	183
Mar-16	8	49	70	23	150
Apr-16	14	59	86	17	176
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
<b>Grand Total</b>	<b>247</b>	<b>1228</b>	<b>1509</b>	<b>616</b>	<b>3600</b>

### 3.3 Complaints responded to within agreed timescale

All Divisions, with the exception of Diagnostics and Therapies, reported breaches in Q3, totalling 30, which is a slight reduction on the 36 breaches recorded in Q2. The largest decrease in breaches (when compared to Q2) was for the Division of Women & Children.

**Table 21: Breakdown of breached deadlines**

Division	Q3 (2017/18)	Q2 (2017/18)	Q1 (2017/18)	Q4 (2016/17)
Surgery	9 (10.8%)	8 (14.3%)	6 (14.6%)	7 (14.3%)
Women & Children	9 (25.7%)	15 (38.5%)	6 (18.2%)	6 (24%)
Trust Services	5 (62.5%)	5 (45.5%)	2 (50%)	0 (0%)
Medicine	4 (8%)	5 (11.1%)	6 (22.2%)	4 (15.4%)
Specialised Services	3 (12.5%)	3 (12%)	6 (24%)	2 (6.4%)
Diagnostics & Therapies	0 (0%)	0 (0%)	0 (0%)	0 (0%)
<b>All</b>	<b>30 breaches</b>	<b>36 breaches</b>	<b>26 breaches</b>	<b>19 breaches</b>

(So, as an example, there were nine breaches of timescale in the division of Women & Children in Q3, which constituted 25.7% of the complaint responses which were sent out by that division in Q3.) 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 22 shows a breakdown of where the delays occurred in Q3.

**Table 22: Reason for delay**

Breach attributable to	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Trust Services
Division	3	1	2	6	0	4
Patient Support & Complaints Team	3	1	1	1	0	0
Executives/sign-off	3	2	0	2	0	1
<b>All</b>	<b>9</b>	<b>4</b>	<b>3</b>	<b>9</b>	<b>0</b>	<b>5</b>

### 3.4 Outcome of formal complaints

In Q3 we responded to 205 formal complaints<sup>5</sup>. Tables 23 and 24 below show a breakdown, by Division, of how many cases were upheld, partly upheld or not upheld in Q3 of 2017/18 and Q2 of 2017/18 respectively.

**Table 23: 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%)
<b>Total</b>	<b>56 (27.3%)</b>	<b>106 (51.7%)</b>	<b>43 (21%)</b>

**Table 24: Outcome of formal complaints – Q2 2017/18**

	Upheld	Partly Upheld	Not Upheld
Surgery	15 (26.8%)	26 (46.4%)	15 (26.8%)
Medicine	13 (28.9%)	25 (55.6%)	7 (15.5%)
Specialised Services	6 (24%)	17 (68%)	2 (8%)
Women & Children	9 (23.1%)	25 (64.1%)	5 (12.8%)
Diagnostics & Therapies	2 (33.3%)	2 (33.3%)	2 (33.3%)
Trust Services	2 (18.2%)	7 (63.6%)	2 (18.2%)
<b>Total</b>	<b>47 (25.8%)</b>	<b>102 (56%)</b>	<b>33 (18.1%)</b>

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



#### 4. Information, advice and support

In addition to dealing with complaints, the Patient Support and Complaints Team are also responsible for providing patients, relatives and carers with help and support. The team also acknowledged 30 compliments received during Q3 and shared these with the staff involved and their Divisional teams.

Table 25 below shows a breakdown of the 120 requests for advice, information and support dealt with by the team in Q3.

**Table 25: Enquiries by category**

Category	Enquiries in Q3 2017/18	Enquiries in Q2 2017/18
Information about patient	31	24
Hospital information request	22	25
Medical records requested	10	21
Employment and volunteering	9	4
Appointments administration issues	8	8
Clinical information request	8	6
Signposting	6	19
Travel arrangements	4	1
Clinical care	3	8
Admissions/discharge arrangements	3	6
Wayfinding	3	0
Expenses claim	2	2
Failure to answer phone/respond	2	2
Emotional support	2	1
Disability support	2	0
Personal property	1	3
Medication incorrect/not received	1	1
Service denied	1	0
Bereavement support	1	0
Freedom of information request	1	1
Benefits and social care	0	2
Car parking	0	2
Translating & Interpreting	0	1
Cleanliness (internal)	0	1
Aids and appliances	0	1
Delayed response	0	1
Transfer arrangements	0	1
Availability of wheelchairs	0	1
Invoicing	0	3
Accommodation enquiry	0	2
Communication	0	2
<b>Total</b>	<b>120</b>	<b>151</b>

In addition to the enquiries detailed above, in Q3 the Patient Support and Complaints team recorded 153 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 710 separate enquiries in Q3 2017/18.

## 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 Q3, 261 complaints were received in writing (email, letter or complaint form) and 146 were received verbally (34 in person via drop-in service and 112 by telephone). Of the 407 complaints received in Q3, 99.3% (404 out of the 407 received) met the Trust's standard of being acknowledged within two working days (verbal) and three working days (written).

## 6. PHSO cases

During Q3, the Trust was not advised of any new Parliamentary and Health Service Ombudsman (PHSO) interest in specific complaints. During the same period, three existing cases remain ongoing. No cases were closed during Q3.

**Table 26: Complaints ongoing with the PHSO during Q3**

Case Number	Complainant (patient unless stated)	On behalf of (patient)	Date complaint received by Trust [and date notified by PHSO]	Site	Department	Division
3438	SC	SC	05/09/2016 [17/07/2017]	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. Currently awaiting sign off of this letter of apology from the Division.						
1380	SD	DD	26/04/2016 [23/08/2017]	STMH	Ear, Nose & Throat	Surgery
The PHSO initially advised that they were investigating this matter and explaining the scope of their investigation. They subsequently requested documentation (complaint file and medical records), which were sent to them on 13/11/2017. On 30/11/2017, the PHSO requested further information, which was sent to them on 06/12/2017 by recorded delivery. They contacted us again on 02/01/2018 to say they had not received these so we checked with Royal Mail and confirmed that they were signed for at the PHSO on 07/12/2017. Currently awaiting further contact from the PHSO.						
679	LH		02/03/2016 [09/05/2017]	BEH	Outpatients	Surgery
The PHSO requested some further information on 30/01/2018 (prior to this we had not heard anything from them since July 2017). This information has been requested from the Division and will be sent to the PHSO as soon as it is received.						

## 7. Complaint Survey

For the first time, this quarterly report includes findings from the Patient Support & Complaints Team's complaint survey.

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.

Responses to the survey so far show that there is still work to be done in respect of sending responses out within agreed timescales, keeping complainants updated on progress with their complaints and providing evidence of improvements made as a result of complaints.

Table 27 below shows data from responses received during Q3, compared with those received in previous quarters.

**Table 27: Complaints Survey Data**

Survey Measure/Question	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	1.8%	6.8%	2.3%

investigation into their complaint by way of a face-to-face meeting.			
Respondents who said that our response address all of the issues that they had raised.	62.3%	44.4%	50%

## 8. Protected Characteristics

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 – Q3 2017/18
0-15	108
16-24	27
25-29	17
30-34	19
35-39	12
40-44	14
45-49	8
50-54	25
55-59	14
60-64	28
65+	135
<b>Total Complaints</b>	<b>407</b>

### 8.2 Ethnic Group

Ethnic Group	Number of Complaints Received – Q3 2017/18
White British	292
Indian	10
Black Caribbean	8
Pakistani	6
Mixed white and black Caribbean	6
White Irish	4
Asian - Indian	2
Asian - Pakistani	2
Black African	2
Other Asian	2
Other Black	2

Other mixed	2
Other white	6
Other ethnic category	4
Unknown/Not stated	59
<b>Total Complaints</b>	<b>407</b>

### 8.3 Religion

Religion	Number of Complaints Received – Q3 2017/18
Christian:	176
Church of England – 122	
'Christian' – 21	
Catholic (Roman Catholic) – 19	
Baptist – 10	
Russian Orthodox – 2	
Salvation Army – 2	
Muslim	6
Hindu	4
Jehovah's Witness	2
Mormon	2
Sikh	2
Agnostic	2
Not Religious	63
Unknown/Not stated	150
<b>Total Complaints</b>	<b>407</b>

### 8.4 Civil Status

Civil Status	Number of Complaints Received – Q3 2017/18
Single	155
Married/Civil Partnership	109
Widowed/Surviving Civil Partner	19
Divorced/Dissolved Civil Partnership	8
Co-habiting	6
Separated	2
Unknown	108
<b>Total Complaints</b>	<b>407</b>

### 8.5 Gender

Of the 407 complaints received in Q3 2017/18, 194 (47.7%) of the patients involved were female and 213 (52.3%) were male.