



Let's make
complaints
count!

Complaints Quarterly Report

Q4 (January 2023 - March 2023)

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Total complaints received	473	↓
Complaints acknowledged within set timescale	86.5%	↓
Complaints responded to within agreed timescale – formal investigation	66.7%	↓
Complaints responded to within agreed timescale – informal investigation	83.2%	↓
Proportion of complainants dissatisfied with our response (formal investigation)	12.9%	↑

Successes

- All clinical divisions received fewer complaints in Q4 than in Q3, with the exception of Medicine, which remained the same.
- More than half (57.5%) of all complaints received in Q4 were dealt with via the informal investigation process, leading to quicker resolution for complainants. However, the charts shown in Slide 3 show the gradual shift towards complainant preference for formal resolution.
- Complaints about ‘appointments and admissions’, a category largely made up of complaints about cancelled/delayed appointments and surgery, decreased by 22% in Q4, with the Division of Medicine reporting a 46% decrease in this category.
- The total number of new enquiries dealt with by the Patient Support & Complaints Team (PSCT) decreased just under 10%, from 1,176 in Q3 to 1,061 in Q4.

Priorities

- To continue to support all divisions in returning to their pre-pandemic levels of performance in sending out complaint responses by the deadlines agreed with complainants.
- To clear the backlog of enquiries and complaints received by PSCT and waiting to be acknowledged and allocated to a complaints officer.
- To ensure consistent quality of draft complaints responses letters.
- To reduce numbers of complaints in the category of ‘attitude and communication’ which have increased again to the high levels seen in 2021/22.

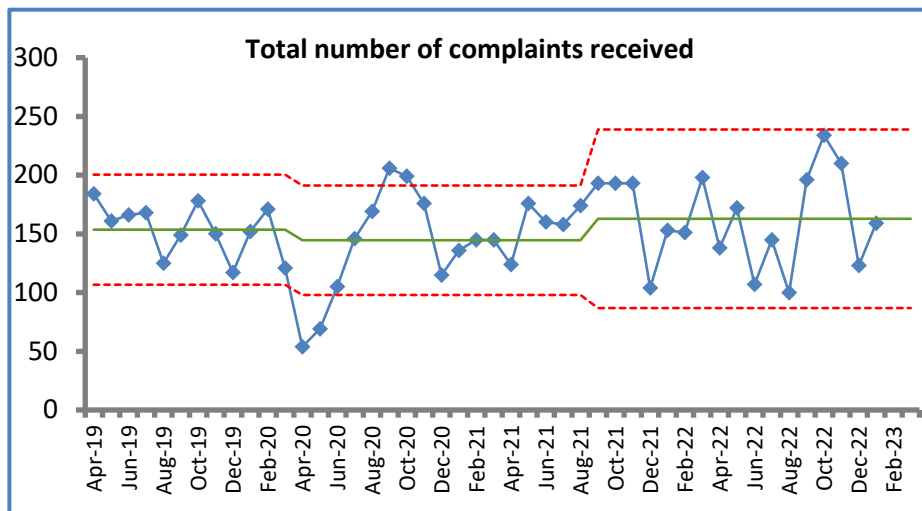
Risks & Threats

- Complainants who told us they were unhappy with our response to their complaint increased from 17 (11.4% of responses) in Q3 to 22 (12.9% of responses) in Q4, and there is a gradual increase in this key performance indicator over time.
- The PSCT continued to operate with significant backlogs in respect of acknowledging new complaints and in cases waiting to be allocated to a caseworker, due to high levels of staff sickness and the volume of new enquiries coming into the service.

Opportunities

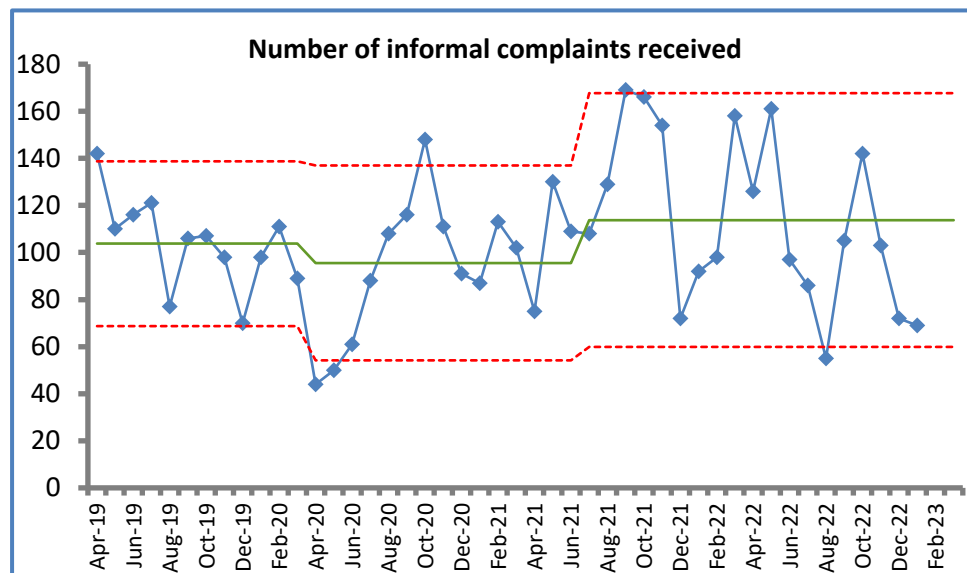
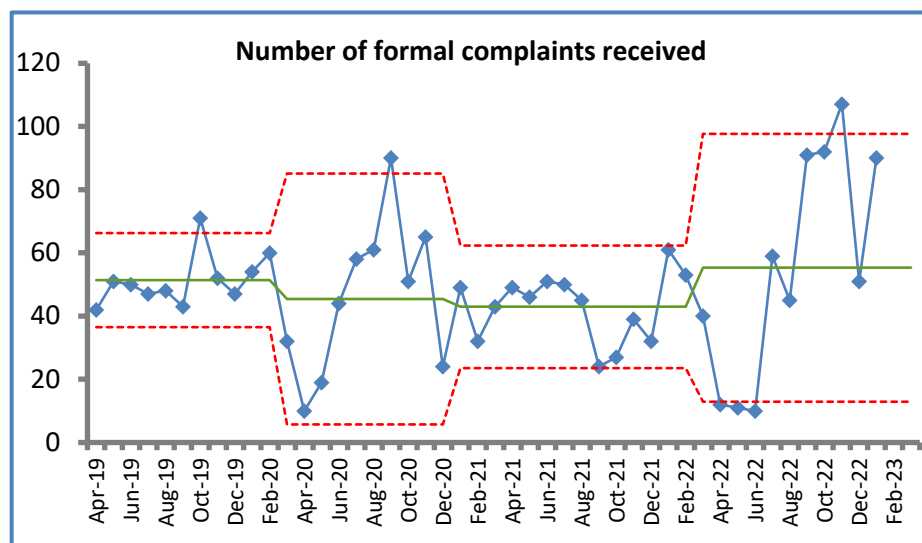
- It remains challenging to improve divisional performance in respect of meeting response deadlines, due to operational pressures in clinical services, and capacity in the PSCT. However, the Head of Complaints continues to support the divisions by maintaining regular dialogue with the Directors of Nursing and the Chief Nurse, to understand the issues facing the corporate and divisional teams. For example, a temporary extension to response deadlines was recently negotiated to address immediate pressures caused by the ongoing industrial action.

Complaints Received

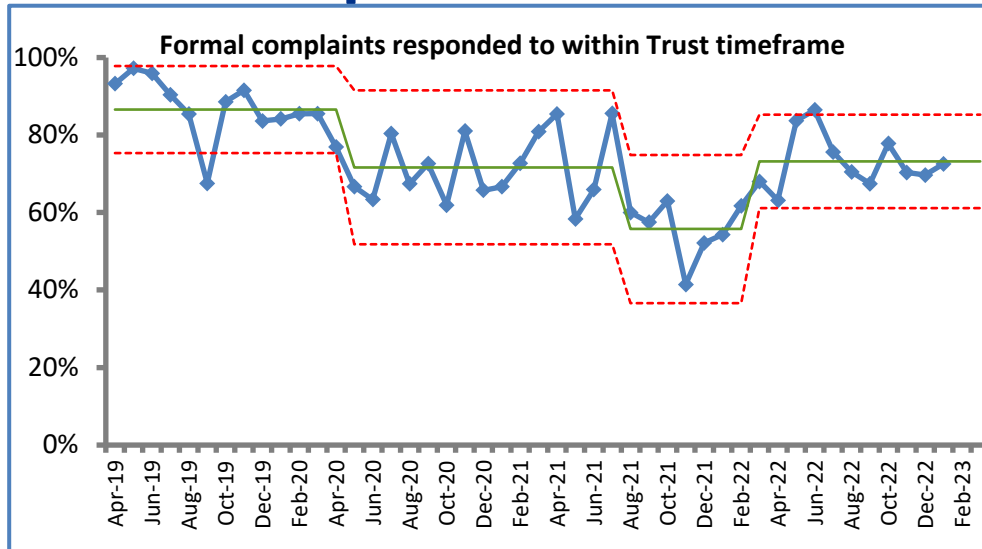


What does this tell us?

The Trust received 473 complaints in Q4, a reduction on the 567 reported in Q3. This total includes complaints received and managed via either formal or informal resolution (whichever has been agreed with the complainant) but does not include concerns which may have been raised by patients and dealt with immediately by front line staff. These charts provide assurance that the variation shown in terms of numbers of complaints received is relatively stable and predictable (common cause variation). The graphs also clearly show the move towards a higher number of complaints being investigated via the formal complaints process, although more than half (57.5% in Q4) are still resolved informally.



Divisional performance

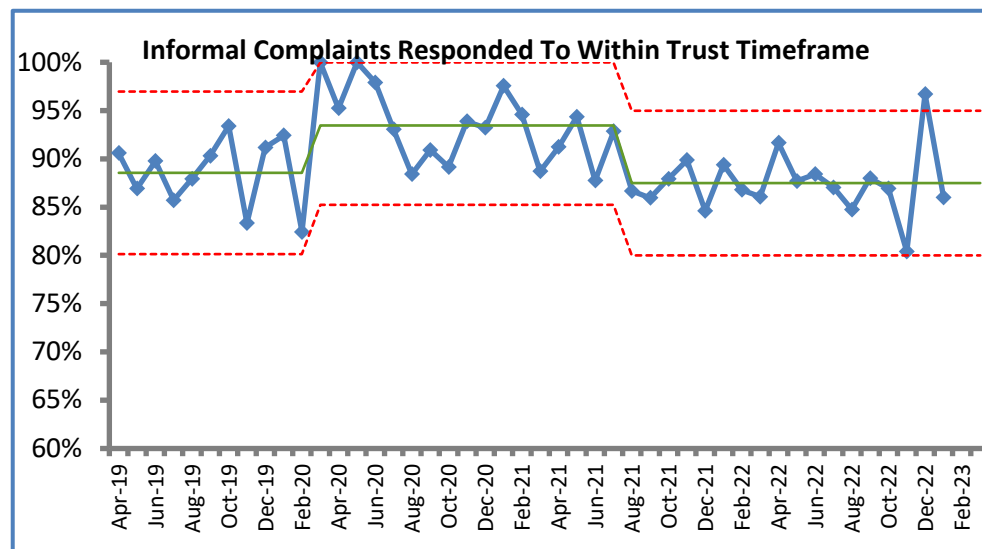


What does this tell us?

The Trust's target is for 95% of complaints to be responded to within the timeframe agreed with the complainant. This is usually 30 working days for formal complaints and 10 working days for informal resolution.

In Q4, 66.7% of formal responses were sent out within the agreed timescale, meaning that 56 responses breached the agreed deadline. This compares with 72.1% in Q3 and is the worst performance since the same period one year ago. During the same period, 83.2% of informal complaints were resolved within the agreed timescale, with 35 breaches of the agreed deadline. This is a deterioration on the 86.7% reported in Q3 and represents the lowest percentage achieved since Q4 of 2017/18.

These divisional performance charts and the Q4 data reflect operational challenges in divisions, exacerbated by ongoing industrial action.



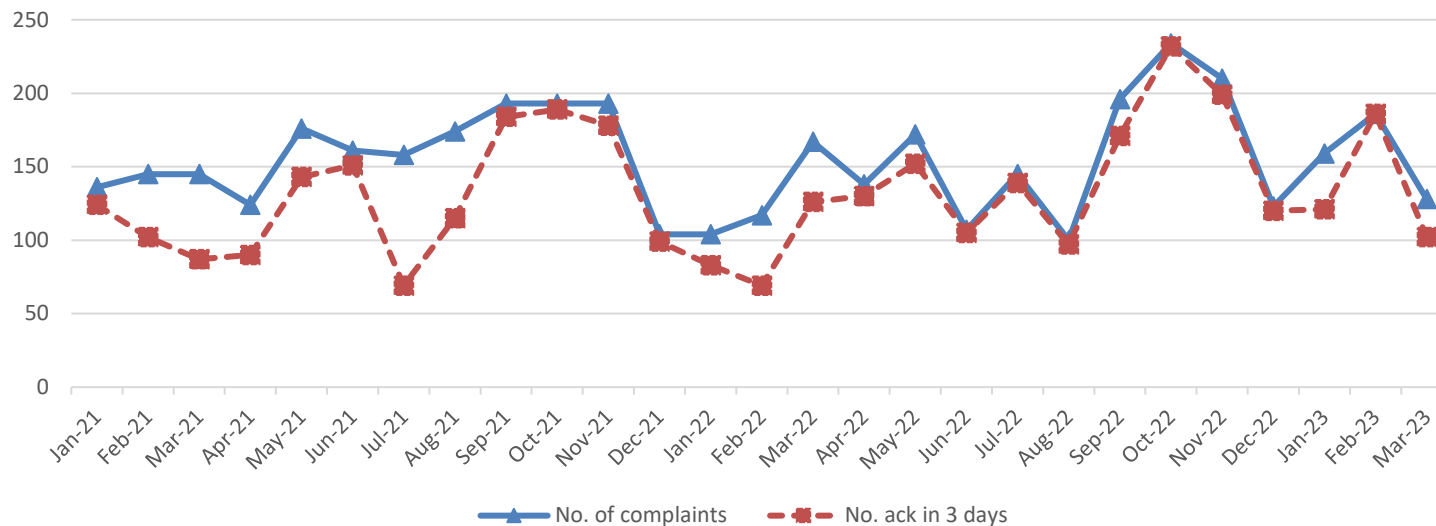
Corporate performance – Patient Support & Complaints Team

Acknowledgement of new complaints

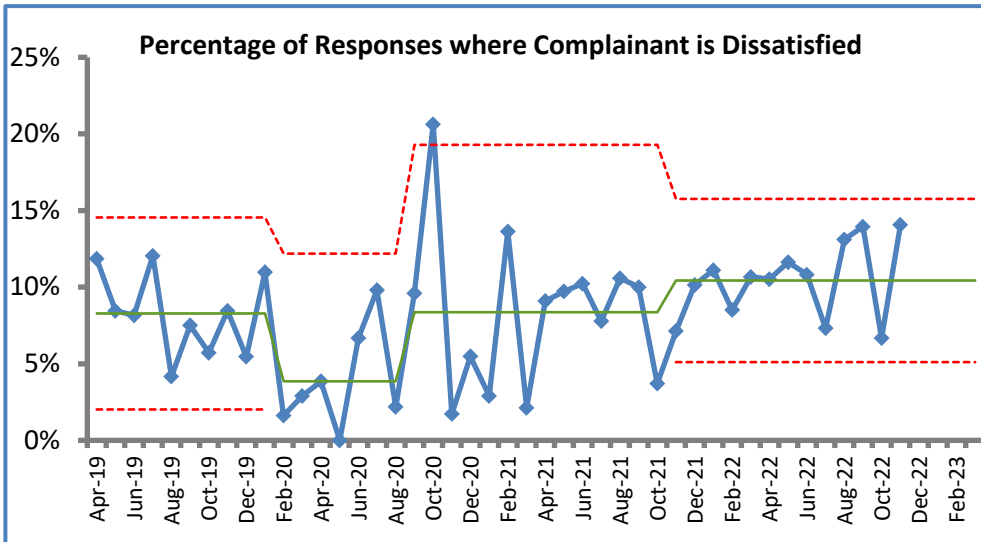
The NHS Complaints Procedure (2009) states that complaints must be acknowledged within three working days. This is also a requirement of the NHS Constitution. The Trust's own policy states that complaints made in writing (including emails) will be acknowledged within three working days and that complaints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

In Q4, the Patient Support & Complaints Team acknowledged 86.5% of all new complaints within the nationally agreed timescale. This is a deterioration on the 97.2% reported in Q3 and reflects the recognised backlog of new complaints waiting to be acknowledged by the team, due to the high volume of new enquiries coming into the service overall and high levels of sickness within the team.

Complaints acknowledged within three days



Dissatisfied complainants

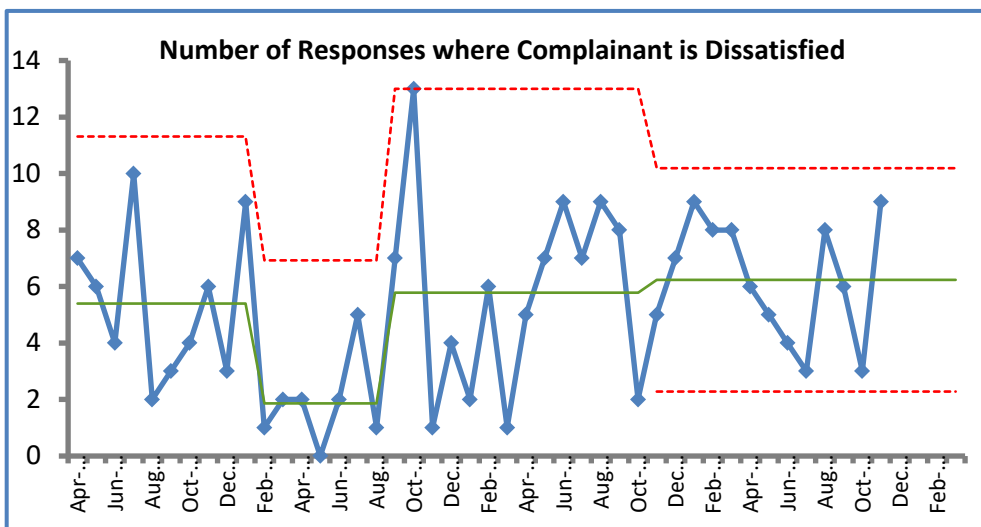


What does this tell us?

The Trust's target is 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, we are therefore reporting dissatisfied data for November and December 2022, and January 2023. Of the complainants who received a first response from the Trust during those months, 22 have since contacted us to say they were dissatisfied, representing 12.9% of the 171 first responses sent out during that period, compared with 11.4% in Q3.

Actions planned or taken:

The Head of Complaints or the Associate Director for Quality continue to review all dissatisfied responses and work closely with divisions to identify any learning in terms of whether anything could have been improved in the original response that would have prevented the complainant from having outstanding concerns. Divisional complaints review panels, which focus on learning from dissatisfied complaints, will recommence from September 2023.



Thematic Analysis

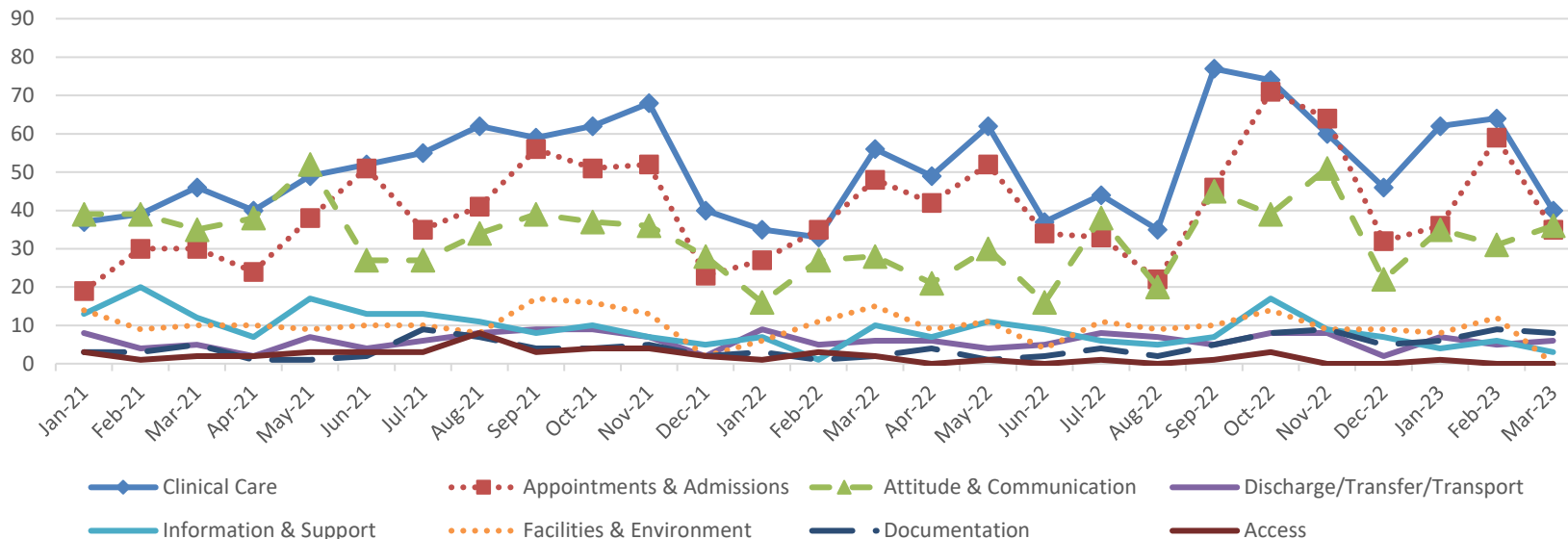
What does this tell us?

The highest numbers of complaints received by the Trust are consistently in three of the eight primary categories, those being 'Clinical Care', 'Appointments and Admissions' and 'Attitude and Communication'. These three categories accounted for 84% (398 of 473) of all complaints received in Q4 of 2022/23.. In Q4, the highest number of complaints received by sub-category within each of these three primary categories were 'clinical care – medical/surgical' (94), 'cancelled or delayed appointment/operation' (82) and 'communication with patient/relative' (24).

Actions:

A more detailed breakdown of categories and sub-categories of complaints is shared with divisions on a monthly as well as quarterly basis, in order to help identify areas of improvement. Improving communication has been agreed as the year 1 'breakthrough objective' for the forthcoming deployment of Patient First.

Complaints by category



Divisional complaints metrics

Q4 2022/23	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Weston
Total number of complaints received in Q4	109 (130) ↓	129 (129) =	60 (81) ↓	92 (115) ↓	29 (31) ↓	31 (53) ↓
Number of complaints about appointments and admissions	46 (48) ↓	19 (41) ↓	13 (23) ↓	37 (39) ↓	11 (13) ↓	3 (2) ↑
Number of complaints about staff attitude and communication	19 (33) ↓	35 (15) ↑	9 (14) ↓	15 (25) ↓	9 (6) ↑	9 (13) ↓
Number of complaints about clinical care	31 (33) ↓	47 (46) ↑	26 (20) ↑	35 (39) ↓	9 (9) =	16 (32) ↓
Area where the most complaints have been received in Q4	Bristol Dental Hospital (BDH) – 21 (32) Bristol Eye Hospital (BEH) – 23 (32) BEH Outpatients – 21 (16) ENT Outpatients – 15 (14) Trauma & Orthopaedics – 8 (2) Clinic A410 - 7	Emergency Department (BRI) (inc. SDEC & AMU) – 32 (28) Dermatology – 6 (27) Sleep Unit – 18 (13) Clinic A410 – 9 (8) Ward A900 – 6 (3)	BHI (all) – 34 (50) BHOC (all) – 21 (24) (Plus three for Clinical Genetics, plus one each for WGH Oncology and WGH Cardiology BHI Outpatients (inc. Outpatient Echo) – 22 (26) BHOC Outpatients & Chemo Day Unit – 10 (13) Ward D603 – Oncology – 5 (2)	BRHC (all) – 62 (74) (Plus one each for Paediatric outpatients at SBCH and at WGH Seashore Centre) Children's ED – 3 (14) Carrousel Outpatients – 9 (9) StMH (all) – 27 (36) (Plus one for Community Midwives) Central Delivery Suite - 7 Gynae Outpatients – 8 (9)	Radiology – 9 (16) Audiology – 12 (5)	Accident & Emergency – 15 (25)
Notable deteriorations compared with Q3	Trauma & Orthopaedics – 8 (2)	Sleep Unit – 18 (13) Ward A900 – 6 (3)	Ward D603 – Oncology – 5 (2)	No notable deteriorations	Audiology – 12 (5)	No notable deteriorations
Notable improvements compared with Q3	Upper GI – 2 (6)	Dermatology – 6 (27)	No notable improvements	Children's ED – 3 (14) Ward 78 – 0 (6)	Radiology – 9 (16)	Accident & Emergency – 15 (25)

“My mother was admitted to hospital with breathing difficulties. I had a call telling me that there had been an accident and she had suffered a subarachnoid haemorrhage and they were unable to stop the bleeding. She also suffered a fractured mandible and severe bruising. When I asked what had happened, the nurse told me it was unclear from the notes.”

Daughter of patient seen in BRI Emergency Department



1. Review of current practices and documentation for assessing a patient’s cognitive state and level of enhanced care supervision required.
2. Training and education package developed for ED staff, to raise awareness of prevention of falls within the department.
3. Patient’s story shared at Morbidity & Mortality review meeting.

“During my stepfather’s admission, he was given quiche with bacon in it, which became stuck in his throat. This was very distressing for him as he could barely swallow water at the time, and it turned out he should have had a soft diet.”

Son of patient on surgical ward, BRI



1. All surgical nursing staff reminded that special dietary requirements, including soft diet, must be recorded as part of a nutritional risk assessment.
2. Dietary status is now updated on the patient board prior to each meal.

“After being prescribed stronger and stronger steroids for my eczema, I read up on the side effects, including steroid addiction and withdrawal, recognising the symptoms I was experiencing. My consultant repeatedly dismissed this and even offered me counselling so I could “accept my eczema”. I seemed to know more about this than my consultant.”

Dermatology patient, BRI



1. Complaint discussed at dermatology consultants’ meeting.
2. Consultants reminded about the regional specialised complex dermatology clinic.
3. Share with patients the joint statement on steroid use from the National Eczema Society and the British Association of Dermatologists.

Spotlight on common complaints

As mentioned in Slide 7 (thematic analysis), one of the categories in which the Trust consistently receives a high number of complaints is 'Attitude and Communication'. This includes complaints about the attitudes and behaviours of various staff groups, as well as those about communication with patients and relatives, and failure to answer telephones and respond to enquiries from patients.

Themes:

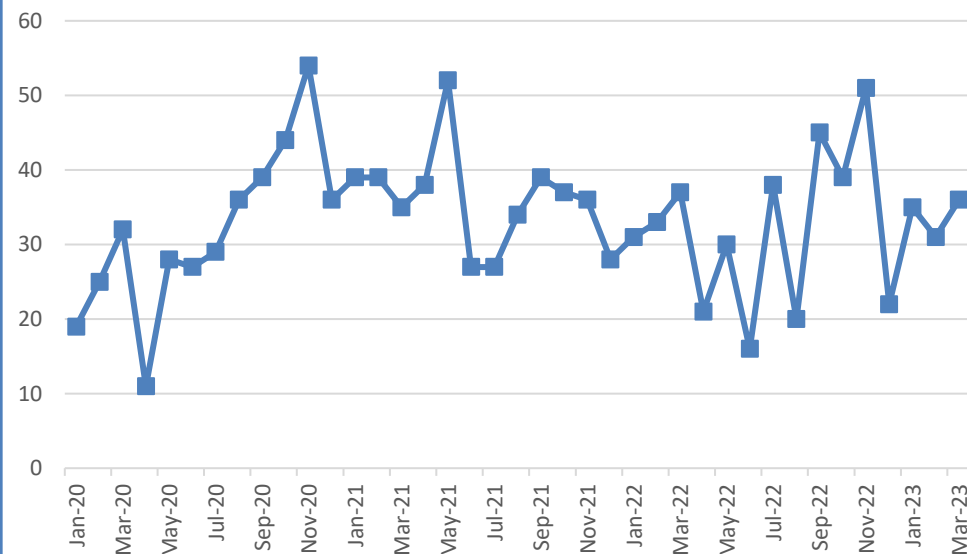
This chart shows the numbers of complaints received Trustwide in this category, starting pre-Covid-19 pandemic / national lockdown, up to Q4 2022/23.

The most common complaints in this category are consistently about the attitude of medical staff and communication with patients and relatives. The former are reported to the Chief Medical Officer's team on a quarterly basis so that any patterns in behaviour can be addressed as part of consultant validation.

Complaints in this category have been the focus of corporate and divisional attention in recent quarters, with a concerted effort made by divisions to address this type of avoidable complaint around the behaviours and attitudes of all staff groups. This remains a challenge and is highlighted in this report as, after a significant reduction in Q4 of 2021/22 and Q1 of 2022/23, complaints in this category have increased again in the last two quarters of 2022/23.

Improving communication is a Patient First 'breakthrough objective' for the Trust.

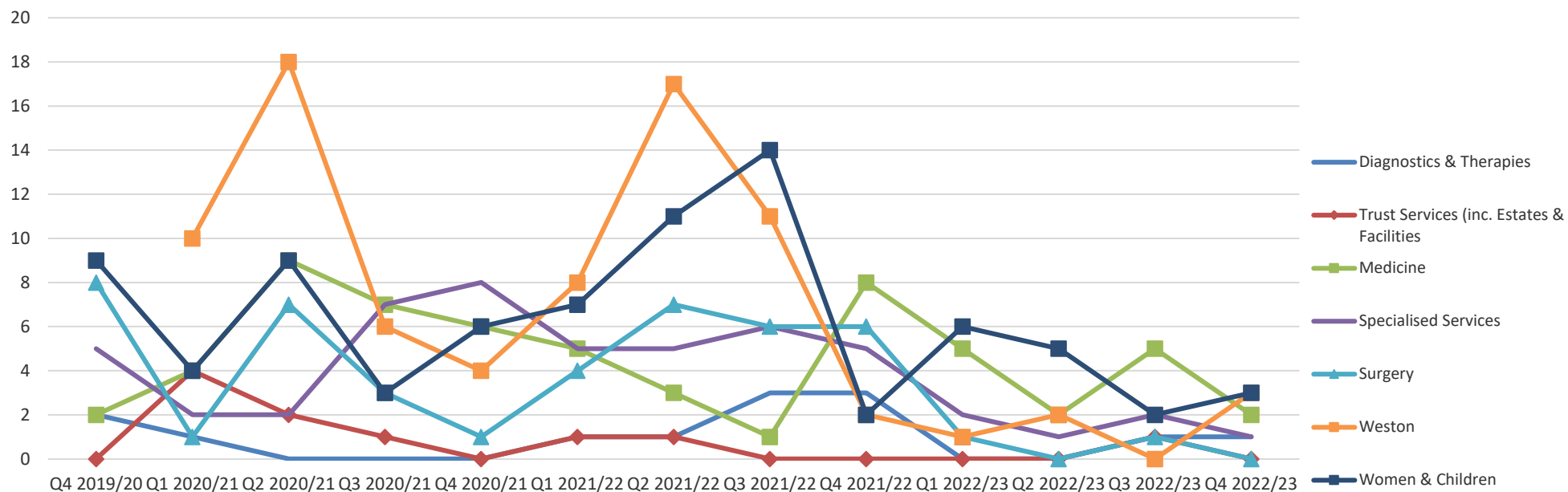
Attitude & Communication - all complaints



Severity of complaints

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. London School of Economics (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*; rather it depends what the complaint is about. The Patient Support & Complaints Team records the severity rating of all complaints, as either high, medium or low severity. The chart below shows the number of complaints rated as being 'high severity', by division. The long-term trend in all divisions is towards lower levels of severity in reported complaints, which is a source of assurance. The most striking long-term reduction in severity of complaints is in Weston.

High severity complaints by division



PSCT activity and PHSO cases

Overall PSCT Activity

Including complaints, requests for information or advice, requests for support, compliments, feedback, and cases that did not proceed, the Patient Support and Complaints Team continues to deal with a high volume of work, with a total of 1,061 separate new enquiries in Q4 of 2022/23., as shown in the chart below.

Parliamentary & Health Service Ombudsman

During Q4, the Trust was advised by the Parliamentary and Health Service Ombudsman (PHSO) of their interest in two new complaints – one for the Division of Medicine and one for Weston Management Team. During the same period, six cases remained under review by the PHSO, and one was closed with no further action taken.

PSCT activity by month

