



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

# **ANNUAL COMPLAINTS REPORT 2022/23**

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## Executive Summary

In accordance with NHS Complaints Regulations (2009), this report sets out a detailed analysis of the number and nature of complaints received by University Hospitals Bristol and Weston NHS Foundation Trust (UHBW) in 2022/23. The report also records other support provided by the Trust's Patient Support and Complaints Team (PSCT) during the year.

In summary:

- 1,898 complaints were received by the Trust in the year 2022/23, averaging 158 per month. Of these, 679 were managed via the formal investigation process and 1,219 through the informal investigation process. This represents a minimal increase on the 1,873 complaints received in 2021/22.
- In addition, the PSCT dealt with 1,415 other enquiries, including 290 compliments, and 1,125 requests for support / information / advice and feedback; this represents a 28.6% increase compared with the 1,100 enquiries dealt with in 2021/22. The PSCT also received and recorded an additional 868 enquiries which did not proceed after being recorded (a similar number to the previous year). This means that the PSCT dealt with a total of 4,181 separate new enquiries during 2022/23; an average of just under 350 per month.
- In addition to the 4,181 enquiries received in Bristol, the PALS service at Weston General Hospital (WGH) received a total of 400 concerns in 2022/23, compared with 513 the previous year; a 22% decrease.
- In total, the PSCT and the WGH PALS service received a combined total of 4,581 separate new enquiries in 2022/23; an overall reduction of 7.4% on the 4,946 reported in 2021/22, but a significant swing away from the Weston team to the Bristol corporate team. It should also be noted that the overall total reported last year included Weston's bereavement enquiries/registrations, which have been removed from this year's data. The swing to Bristol is largely due to clinical integration in October 2022, since which time all enquiries, concerns and complaints received at WGH for the clinical divisions of Surgery, Medicine and Diagnostics & Therapies are now managed via the PSCT.
- In 2022/23, the Trust had 10 complaints referred to the Parliamentary and Health Service Ombudsman (PHSO), compared to six cases referred the previous year. During the 2022/23, another 10 cases were closed by the PHSO and at the end of the year 2022/23, six cases remained under investigation by the PHSO. Of the 10 cases closed during this period, none were upheld, one was partly upheld, one was not upheld and eight were closed without a full investigation with 'no further action' required.
- 615 complaints were responded to via the formal complaints process in 2022/23 and 71.1% of these (437) were responded to within the agreed timescale. This is an improvement on the 62.8% achieved in 2021/22 but remains some way off the Trust target of 95%. A total of 872 complaints were responded to in 2022/23 via the informal complaints process and 86.4% of these (753) were responded to within the agreed timescale; a deterioration on the 88.6% achieved the previous year.
- The Trust continues to deal with a higher proportion of complaints via the informal process, which means that these issues are resolved as quickly as possible and by the specialty managers responsible for the service involved.

- At the end of the reporting year, 11.4% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 70 of the 615 first formal responses sent out during the reporting period and compares with 8.4% reported in 2021/22 and 6.1% in 2020/21.

## **1. Accountability for complaints management**

The Board of Directors has corporate responsibility for the quality of care and the management and monitoring of complaints. The Chief Executive delegates responsibility for the management of complaints to the Chief Nurse.

The Trust's Head of Complaints is responsible for ensuring that:

- All complaints are fully investigated in a manner appropriate to the seriousness and complexity of the complaint, in line with the complainant's wishes;
- All formal complaints receive a comprehensive written response from the Chief Executive or his nominated deputy, or a local resolution meeting with a senior clinician and senior member of the divisional management team;
- Complaints are resolved within the timescale agreed with each complainant at a local level wherever possible and dependent on divisional performance in this area;
- Where a timescale cannot be met, an explanation is provided, and an extension agreed with the complainant; and
- When a complainant requests a review by the Parliamentary and Health Service Ombudsman, all enquiries received from the Ombudsman's office are responded to in a prompt, co-operative, and open manner.

The Head of Complaints line manages the Patient Support & Complaints Team (PSCT) which consists of one full-time Deputy Manager, seven part-time complaints officers/caseworkers and three part-time administrators. The total PSCT staff resource, including the manager, is currently 9.4 WTE. This compares with 8.6 WTE reported in 2021/22.

## **2. Complaints reporting**

Each month, the Head of Complaints reports the following information to the Trust Board:

- Total number of complaints received
- Percentage of complaints responded to within the agreed timescale (formal and informal)
- Percentage of cases where the complainant is dissatisfied with the original response

In addition, the following information is reported to the Experience of Care Group (previously known as the Patient Experience Group), which meets every three months:

- Validated monthly complaints data for the Trust as a whole and also for each Division
- Quarterly Complaints Report, identifying themes and trends
- Annual Complaints Report (which is also received by the Board).

The Quarterly Complaints Report provides an overview of the numbers and types of complaints received, including any trends or themes that may have arisen, including information about how the Trust is responding.

### 3. Total complaints received in 2022/23

The total number of complaints received during the year was 1,898, a small increase on the 1,873 complaints received the previous year. Of these, 679 (35.8%) were managed through the formal investigation process and 1,219 (64.2%) through the informal investigation process; this compares with 395 (21.1%) complaints managed formally in 2021/22 and 1,478 (78.9%) managed informally.

A formal complaint is classed as one where an investigation by the Division is required in order to respond to the complaint. A senior manager is appointed to carry out the investigation and gather statements from the appropriate staff. These statements are then used as the basis for either a written response to, or a meeting with, the complainant. The method of feedback is agreed with the complainant and is their choice. The Trust's target is that this process should take no more than 30 working days in total.

An informal complaint is one where the issues raised can usually be addressed quickly by means of an investigation by the divisional management team and a telephone call to the complainant. The Trust's target is that this process should take no more than 10 working days in total.

Figure 1 provides the annual view of complaints received per month that were dealt with via the formal investigation process compared to those dealt with via the informal investigation process, over the same period, as well as the overall total. The figures below do not include informal concerns which are dealt with directly by staff in our divisions.

**Figure 1 – Numbers of formal v informal complaints**

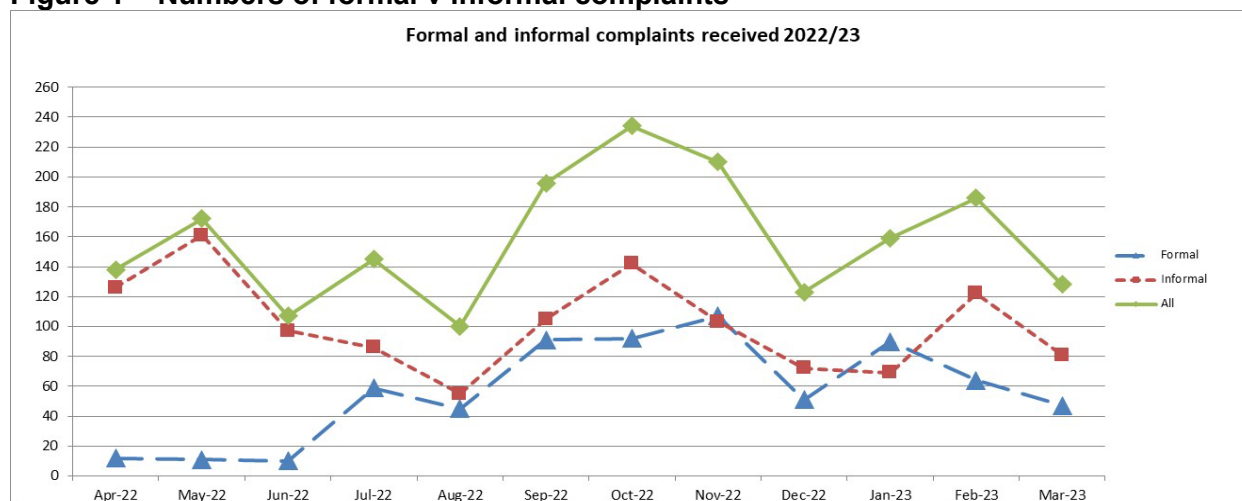


Table 1 below shows the number of complaints received by each of the Trust's divisions compared with the previous year. Directional arrows indicate change compared to the previous financial year. The data shows that whilst the Trust continues to deal with the majority of complaints via the informal process, there has been a notable swing towards formal resolution for the past two reporting years. Whilst this is guided mainly by complainant preference, the Trust has received a steadily increasing number of more complex complaints requiring a detailed formal investigation and response.

The overall percentage of complaints managed informally decreased from 78.9% in 2021/22 to 64.2% in 2022/23. This means that 35.8% of complaints were managed through the formal complaints process, compared with 21.1% in 2021/22.

**Table 1 - Breakdown of complaints by Division**

Division	Informal complaints 2022/23	Informal complaints 2021/22	Formal complaints 2022/23	Formal complaints 2021/22	Divisional total 2022/23	Divisional total 2021/22
Surgery	324 ↓	401 ↑	125 ↑	73 ↓	449 ↓	474 ↑
Medicine	309 ↑	303 ↑	159 ↑	82 ↓	468 ↑	385 ↑
Specialised Services	184 ↓	215 ↑	63 ↑	36 ↓	247 ↓	251 ↑
Women & Children	187 ↓	278 ↑	163 ↑	97 ↓	350 ↓	375 ↑
Diagnostics & Therapies	100 ↑	91 ↑	19 ↑	11 ↓	119 ↑	102 ↑
Weston	57 ↓	127 ↑	130 ↑	86 ↓	187 ↓	213 ↓
Trust Services (inc. Estates & Facilities)	58 ↓	63 ↓	20 ↑	10 ↓	78 ↑	73 ↓
<b>TOTAL</b>	<b>1,219 ↓</b>	<b>1,478 ↑</b>	<b>679 ↑</b>	<b>395 ↓</b>	<b>1,898 ↑</b>	<b>1,873 ↑</b>

#### 4. Complaint themes

The Trust records all complaints under one or more of eight high-level reporting categories or themes, depending upon the nature of the complaint. This is then broken down into sub-categories, of which there are more than 200. This data helps us to identify whether any trends or themes are developing when matched against hospital sites, departments, clinics, and wards, and to work with the divisional teams to take appropriate action to resolve any 'hot spots' or areas of concern.

Table 2 shows complaints received in 2022/23 by primary category, compared with 2021/22 and 2020/21.

**Table 2 - Complaint themes – Trust totals**

Complaint Theme	Total Complaints 2022/23	Total Complaints 2021/22	Total Complaints 2020/21
Clinical Care	650 ↑	612 ↑	501 ↑
Appointments and Admissions	526 ↑	482 ↑	347 ↓
Attitude and Communication	384 ↓	390 ↓	417 ↑
Facilities and Environment	106 ↓	127 ↑	120 ↓
Information and Support	91 ↓	109 ↓	137 ↑
Discharge/Transfer/ Transport	71 ↓	74 ↑	67 ↑
Documentation	63 ↑	41 ↓	43 ↑
Access	7 ↓	38 ↑	33 ↑
<b>TOTAL</b>	<b>1,898 ↑</b>	<b>1,873 ↑</b>	<b>1,665 ↓</b>

As in previous years, the 'top three' categories for complaints remained consistent, with relatively small increases in complaints about 'clinical care' (up 6.2%) and 'appointments and admissions' (up 9.1%). There was a very small decrease in complaints about 'attitude and communication', however reported totals for the last three years have been very similar.

Complaints in the category of 'appointments and admissions' reduced in 2022/23. This category includes complaints about cancelled and delayed appointments and surgery and reflects the national trend around these cancellations and delays as the NHS struggles to catch up with the backlog of patients waiting to be seen in outpatient clinics and on elective surgery waiting lists.

The most notable annual decrease was in the category of 'access'; only seven complaints were received in 2022/23. This category includes complaints about services being denied or unavailable and visiting hours, which was a more prevalent concern during the Covid pandemic.

## **5. Performance in responding to complaints**

In addition to monitoring the volume of complaints received, the Trust also measures its performance in responding to complainants within agreed timescales, and the number of complainants who are dissatisfied with responses.

### **5.1 Percentage of complaints acknowledged and responded to within timescale**

The Trust's expectation is that all complaints will be acknowledged within two working days for telephone enquiries and within three working days for written enquiries.

In 2022/23, 92.4% (1,754 of 1,898) of complaints were acknowledged within these timescales, an improvement on 80.2% reported in 2021/22 and 87.8% in 2020/21. Those complaints not acknowledged within this timescale are reviewed on a monthly basis by the Head of Complaints and are due to capacity in the team versus the volume of new enquiries being received.

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.

The Trust's target is to respond to at least 95% of complaints within the agreed timescale and this applies to both formal and informal complaints.

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, together with guidance from the Parliamentary and Health Service Ombudsman, indicate that the Trust must investigate a complaint 'in a manner appropriate to resolve it speedily and efficiently and keep the complainant informed.' When a response is not possible within the agreed timescale, the Trust must inform the complainant of the reason for the delay and agree a new date by which the response will be sent.

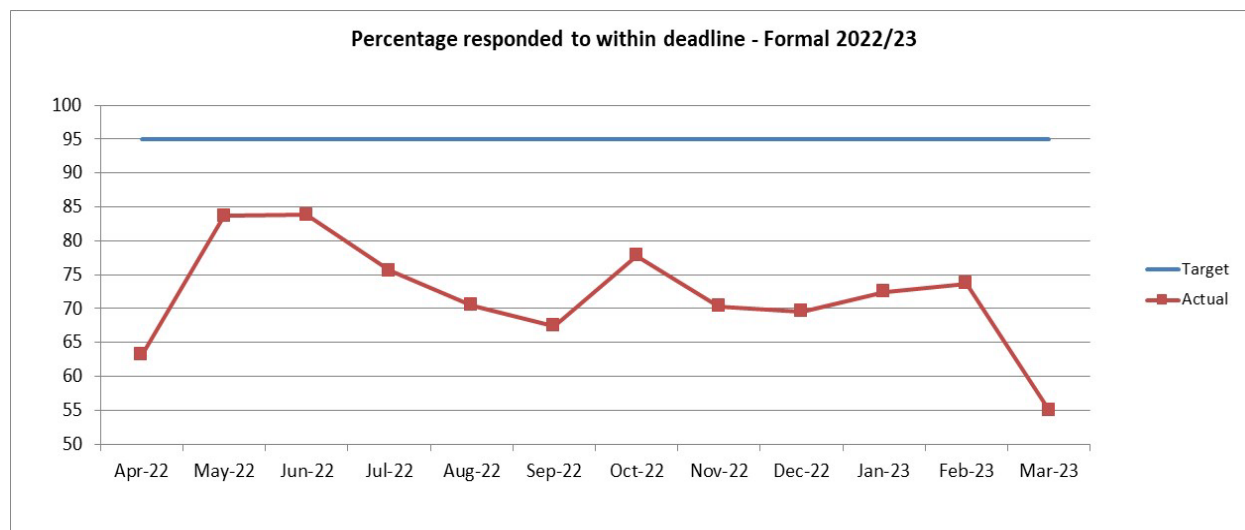
The Trust captures data about the numbers of complaints responded to within the agreed timescale. The Trust's performance target continues to be 95% compliance, for both formal and informal complaints.

Over the course of the year 2022/23, 71.1% of formal responses were responded to within the agreed timescale (437 of 615), compared with 62.8% in 2021/22. Of the 872 complaints

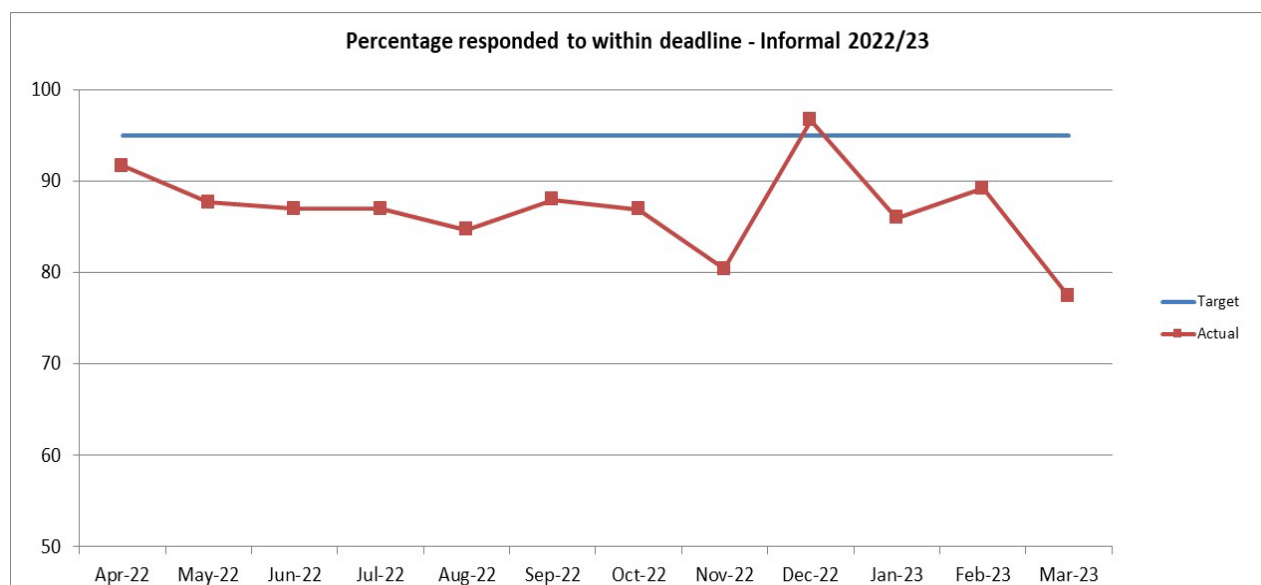
responded to via the informal complaint process in 2022/23, 86.4% (753) were responded to within the agreed timescale, a slight deterioration on the 88.6% reported the previous year.

The main factor in divisional performance in respect of complaint responses against the target of 95%, is the continued pressure on operational services across the Trust, and the impact this has had on the capacity of staff to investigate and respond to complaints.

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



**Figure 4. Percentage of informal complaints responded to within agreed timescale**



## 5.2 Numbers of complainants who are dissatisfied with our response

The Trust also measures performance in respect of the number of complainants who are dissatisfied with the response provided to their complaint due to the original investigation being incomplete or inaccurate (which we differentiate from follow-up enquiries where a complainant raises additional questions).

At the end of the reporting year, 11.4% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 70 of the 615 first formal



responses sent out during the reporting period, compared with 8.4% reported in 2021/22 and 6.1% in 2020/21.

This steady increase in dissatisfaction with the Trust’s responses to complaints is closely monitored, with each dissatisfied (second) response reviewed by the Associate Director for Quality and Compliance as an additional level of checking prior to the response being signed off. In addition, during 2022/23, the Associate Director for Quality and Compliance has carried out more in-depth reviews of dissatisfied complaints via complaint review panels with Directors of Nursing and Divisional Complaints Coordinators, to identify any areas where initial responses could have been improved, for future learning. These divisional reviews are ongoing.

## 6. Parliamentary and Health Service Ombudsman (PHSO)

If a complainant is unhappy with the way in which their complaint has been dealt with by the Trust and feels that local resolution of their complaint has not been satisfactory, they have the option of asking the Parliamentary and Health Service Ombudsman (PHSO) to carry out an independent review of their complaint.

In 2022/23, the Trust had 10 complaints referred to the PHSO, compared to six cases referred the previous year.

During 2022/23, another 10 cases were closed by the PHSO and at the end of the year 2022/23, six cases remained under investigation by the PHSO.

Of the 10 cases closed during this period, none were upheld, one was partly upheld, one was not upheld and eight were closed without a full investigation with ‘no further action’ required.

It should be noted that when a complaint is declared by the PHSO as ‘not upheld’, this indicates that they have carried out a full investigation but found no failings on the part of the Trust and did not uphold the complaint. However, a conclusion of ‘no further action’ denotes that after an initial inspection of the complaint and the Trust’s response, the PHSO did not deem it necessary to proceed to a full investigation and closed the case.

## 7. Information, advice, and support

In addition to managing complaints, the PSCT also receive compliments and requests for advice, information, and support. The team also records a number of enquiries which did not proceed after being recorded, either due to insufficient information or withdrawal of the complaint/enquiry.

The total number of enquiries received during 2022/23 is shown below, together with figures from 2021/22 and 2020/21 for comparative purposes:

**Table 3:**

Type of enquiry	Total received 2022/23	Total received 2021/22	Total received 2020/21
Request for information/advice/support	1,125 ↑	906 ↓	1,149 ↑
Compliments	290 ↑	194 ↓	270 ↑
Did not proceed	868 ↓	869 ↑	502 ↓
<b>Total</b>	<b>2,283 ↑</b>	<b>1,969 ↑</b>	<b>1,921 ↑</b>

## **8. Learning from complaints**

The Trust continues to be proactive in its management of complaints and enquiries, recognising that the way we respond is part of our commitment to excellence in customer service and acknowledging that all complaints are a valuable source of learning. All feedback is welcomed by the Trust; positive feedback highlights what we are getting right and need to do more of, whilst concerns and complaints create opportunities to hear about people's experience of the care and treatment we provide and to make improvements.

Complaints investigations are about understanding and learning, not apportioning blame. Sometimes the outcome of a complaint will involve an apology and reflective learning for our staff; for example, this might be about aspects of behaviour and communication. On other occasions, a complaint may highlight a failure in a process or system, so the outcome may involve making changes to how we do things for many future patients. As part of each complaint investigation, the Trust routinely identifies actions to be taken and then monitors these through to completion.

Where appropriate, we may invite people who have raised concerns to help us identify better ways of working. We also want to learn from people's experience of making a complaint about treatment and care at UHBW. This is why, in 2023/24, we will be reintroducing our survey of complainants, so that we receive systematic feedback about how it feels to raise a concern about our services, how well we have responded, and what we can do better.

## **9. Looking ahead**

Our aim is to provide an exemplary complaints resolution service across all our hospital locations; one which is easily accessible to all our patients and their families.

The past year has been challenging for the PSCT. The team has been working hard to clear backlogs of complaints waiting to be logged and acknowledged, and, at the stage where they are waiting to be allocated to a Complaints Officer, to take the complaint forward for investigation and resolution. We know that delays in processing prior to a complaints investigation taking place simply add to the stress of raising concerns about healthcare; people need timely answers and this is the PSCT's key priority to address in 2023/24.

A further priority for the PSCT is to reduce the number of people who are dissatisfied with the Trust's response to their complaint. Our aim is to achieve this by rolling out training on investigating and responding to complaints to new managers across all divisions and by continuing with existing initiatives for reviewing complaints responses for learning, such as complaints panels.