

Quarterly Patient Experience and Involvement Report

Incorporating Quarter 1 2020/21 Patient and Public Involvement activity and patient survey data.

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1. Overview of patient-reported experience

Successes	Priorities
<p>The Trust's postal survey data for the shows that patients continued to report a positive experience of inpatient services during Quarter 1, despite the challenges of responding to the COVID-19 pandemic.</p> <p>Weston General Hospital received an excellent set of results in the 2019 National Cancer Survey.</p>	<p>We are prioritising an early re-start of the Friends and Family Test at Weston General Hospital. In the medium-term all of "UH Bristol's" survey processes will be extended to the hospital as part of the merger plan.</p>
Risks & Threats	Opportunities
<p>Weston General Hospital carries out relatively limited patient survey activity, particularly since the Friends and Family Test was suspended nationally by NHS England in response to the COVID-19 pandemic. This limits our ability to accurately measure the quality of patient experience at the hospital. A risk has been added to the Risk Register to reflect this situation.</p>	<p>The most significant medium-term impact of the pandemic on the Trust's corporate patient experience programme is likely to be on Patient and Public Involvement (PPI), much of which was carried out face-to-face and in groups. These activities will be limited whilst social distancing measures are in place. However, it does create an opportunity to re-define our "PPI offer". The Trust's Patient & Public Involvement Lead is reviewing options and will present a paper about these opportunities to the Trust's Patient Experience Group in November 2020.</p>

2. About this report

The Quarterly Patient Experience Report normally provides a comprehensive review of patient survey data down to ward-level. It also provides a summary of Patient and Public Involvement activities being carried out at the Trust.

Patient survey activity across the NHS has been disrupted by the COVID-19 pandemic. In particular, NHS England suspended the Friends and Family Test survey nationally, which is a key data source for most trusts. A pausing of Patient and Public Involvement activity has also had to take place due to social distancing requirements. Fortunately, the “UH Bristol” postal survey programme was able to continue running during this period – but it has been adversely affected by a number of factors – in particular lower response rates – which has limited our ability to carry out “deep-dives” in to the data.

3. Weston General Hospital

UH Bristol and Weston Area Health NHS Trust merged on 1 April 2020 to form University Hospitals Bristol and Weston NHS Foundation Trust (“UHBW”). Weston has relatively limited hospital-wide survey processes in place aside from the FFT (which is currently suspended). We are aiming for an early restart of the FFT at Weston in September 2020 in order to address this immediate “feedback gap”. In the more medium-term we will extend all of the “UH Bristol” survey feedback processes to Weston General Hospital.

4. Data review: national benchmarks

The Care Quality Commission’s national patient survey programme provides a comparison of patient-reported experience across NHS trusts in England. UH Bristol (as-was) tended to perform around or above the top 20% of trusts nationally in these surveys (Chart 1 - over). Weston General Hospital tended to broadly perform in line with the national average.

Two sets of national survey results were published in Quarter 1 2020/21: the 2019 National Cancer Patient Experience Survey and the 2019 National Inpatient Survey (results for the national surveys are released up to a year after the patients attended hospital).

In the 2019 national inpatient survey:

- UH Bristol achieved scores that were better than the national average to a statistically significant degree on four survey questions.
- On the overall hospital experience rating question in the survey, UH Bristol performed in the top ten general acute trusts nationally (coming seventh amongst this cohort¹)
- No UH Bristol scores were below the national average
- Weston Area Health Trust’s scores (which in effect represent patient experience at Weston General Hospital) were all in line with the national average

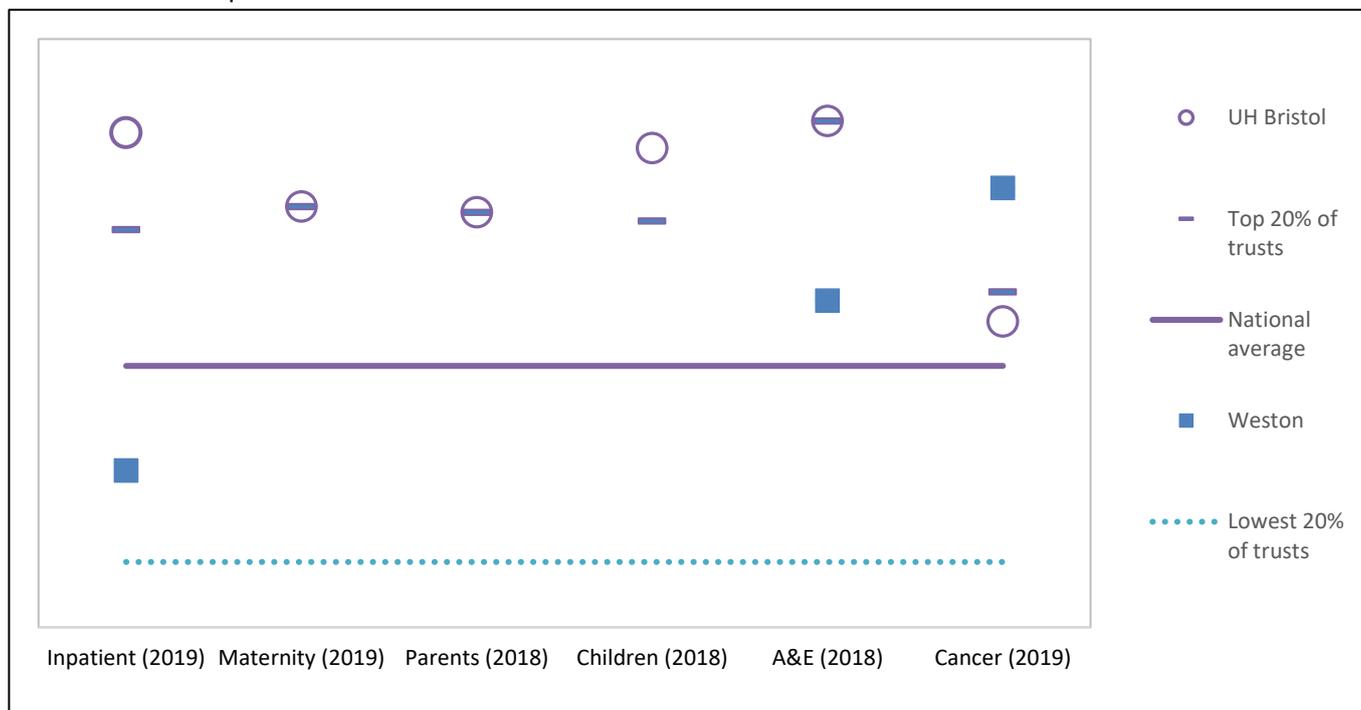
In the 2019 National Cancer Survey, UH Bristol was classed as being better than the national average to a statistically significant degree on five out of the fifty-six survey questions. No UH Bristol scores were classed as being below this benchmark. This was in line with the Trust’s performance in the previous (2018) survey and, as such, the results broadly represent a consolidation of the positive progress that UH Bristol has made in this

¹ If you factor in specialist trusts, which tend to have the best performance in this survey, UH Bristol came nineteenth nationally on this question.

survey in recent years. Weston General Hospital achieved a very positive set of results, with 20 scores classed as being better than the national average to a statistically significant degree.

The results of each national survey, along with improvement actions / learning, are reviewed by the Trust’s Patient Experience Group and the Quality and Outcomes Committee of the Trust Board. In future, the Trust will provide a single / combined sample of Bristol and Weston patients for these surveys.

Chart 1: overall experience relative to national benchmarks²



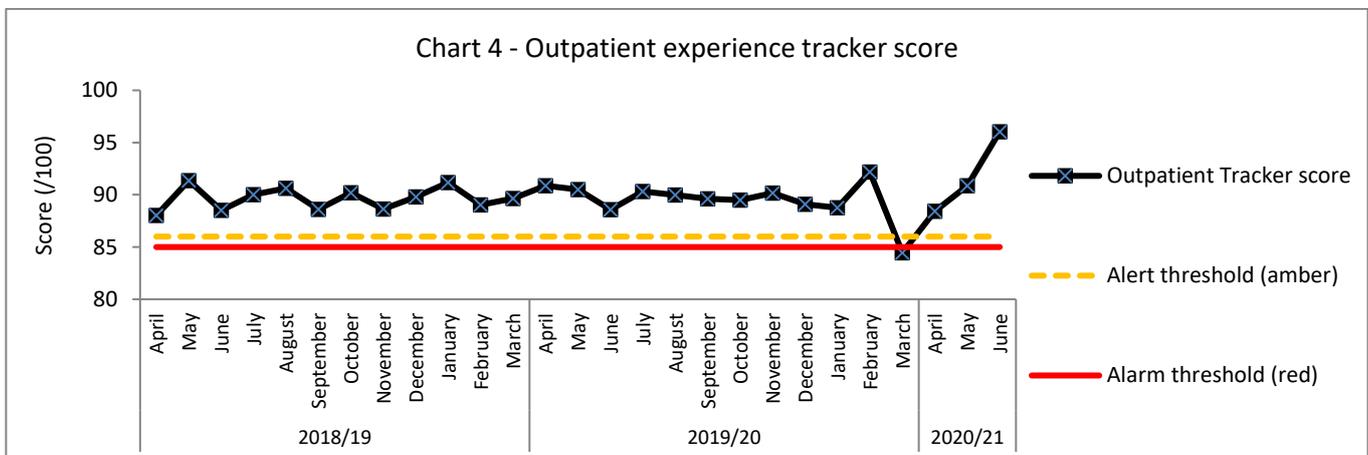
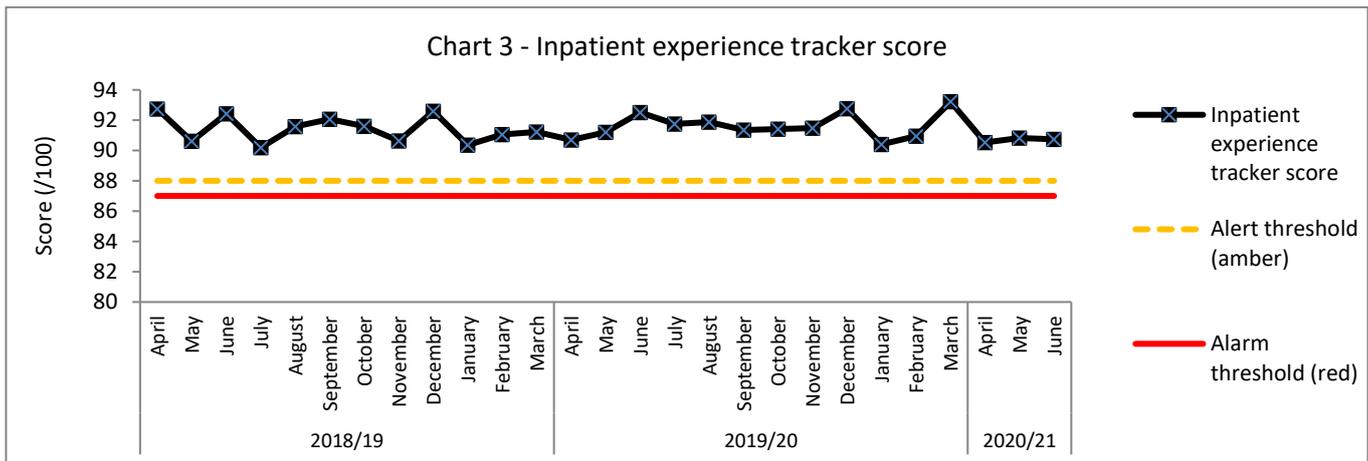
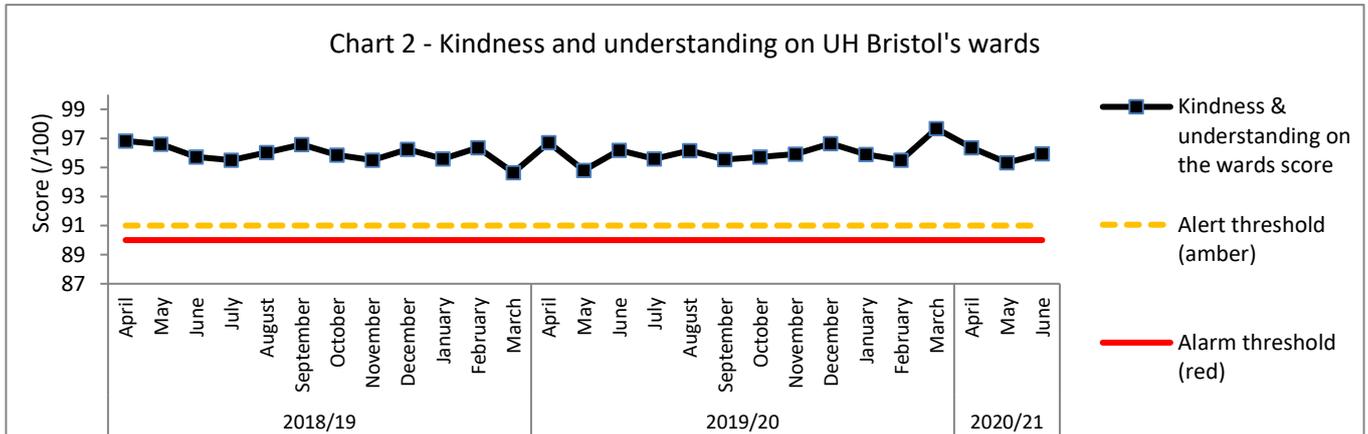
5. Data review: Quarter 1 headline patient-reported experience scores

UH Bristol (as-was) has a monthly postal survey programme that we have been able to continue running during the pandemic. The sample sizes have been smaller than usual, reflecting lower levels of hospital inpatient activity and probably also because people are less likely to leave the house to post back our questionnaire (on-line completion is offered, but relatively few people take this option up). Our ability to provide granular analysis has been further compromised by a number of ward reconfigurations in response to the pandemic. Therefore, at present we are only able to provide a headline view of the data.

² This is based on the national survey question that asks patients to rate their overall experience. We have indexed (=100) each score to the national average to ease comparability. This overall question is not included in the national maternity survey and so we have constructed this score based on a mean score across all of the survey questions. Weston General Hospital does not participate in the national children’s survey or the national maternity survey.

On the basis of guidance from the CQC, Weston General Hospital also did not officially take part in the 2018 national A&E survey. This was because the department closes overnight, meaning the results wouldn’t be directly comparable to other “type 1” emergency departments. However, the hospital did carry out the survey internally using the same methodology as the national guidance. In our chart, the Weston results have been benchmarked to Type 3 A&E departments (essentially walk-in centres), as this is more reflective of the service than a type 1 (24 hour service) such as the BRI.

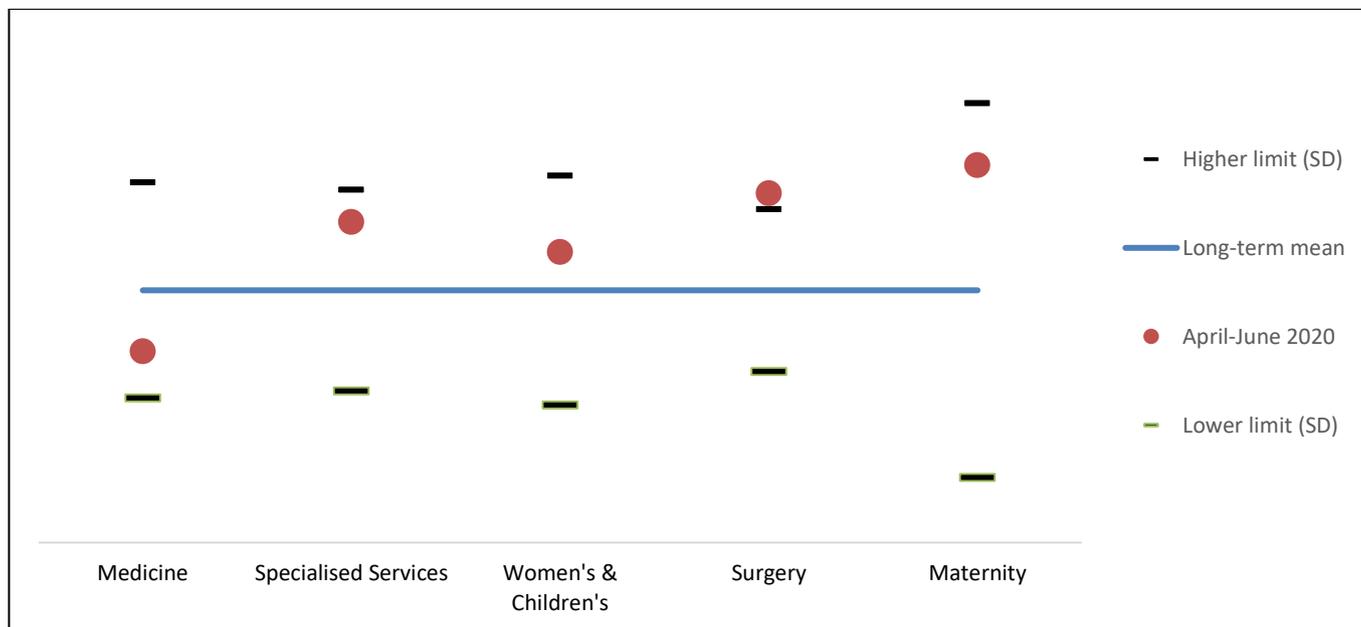
Charts 2-4 provide assurance that inpatient experience has remained very positive during the pandemic. In the Trust's outpatient survey (Chart 4) there was marked decline in outpatient-reported experience in March 2020 (interestingly, the inpatient scores showed the opposite effect). This coincided with the Government's "lockdown" measures and the outpatient score returned to the normal range in April presumably as a result of services and patients adjusting. There are now some tentative signs that outpatient satisfaction is actually increasing above its long-term trend. Caution is needed here given the relatively small sample sizes, but it might suggest that patients are generally positive about the increase in virtual (on-line) appointments.



As noted above, we are currently limited in our ability to provide detailed breakdowns of the survey data. However, we have carried out a new analysis (Chart 5) to take a cautious look at patient care ratings for each Division during Quarter 1 (i.e. during the height of the pandemic). This helps to detect any “early warning signs” in the data. It can be seen that whilst there was some variation in Quarter 1 around the long-term average, this is in line with the variation we have seen over time since 2017. Therefore, at this point there is nothing to suggest that patient care ratings in our survey have deteriorated significantly for any of the Divisions (we do not have equivalent data for the “Division of Weston”).

Of course, this doesn’t mean that patient experience is the same now as it was before the pandemic. It is still evident from the written feedback that we are receiving that people visiting our hospitals are anxious about COVID-19 and its implications, and are highly alert to infection control issues. Nevertheless, it is reassuring that praise for the kindness and professionalism of our staff remains by far the most frequent type of feedback that we receive.

Chart 5: Overall patient experience rating at Divisional level. Compares the long-term average score for “UH Bristol’s” Divisions, with their scores to date during the pandemic





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

Complaints Report

Quarter 1, 2020/2021

(1 April 2020 to 30 June 2020)

Author: Tanya Tofts, Patient Support and Complaints Manager

Quarter 1 Executive summary and overview

	Q1	
Total complaints received	228	↓
Complaints acknowledged within set timescale	98.6%	↓
Complaints responded to within agreed timescale – formal investigation	71.3%	↓
Complaints responded to within agreed timescale – informal investigation	97.9%	↑
Proportion of complainants dissatisfied with our response (formal investigation)	2.8%	↓

Successes	Priorities
<ul style="list-style-type: none"> The target of 95% for responses completed within the agreed deadline was exceeded during each month of Q1 for informal complaints. For the first time the Trust has reported dissatisfied cases at under the 8% threshold for three consecutive months, with an overall percentage for the quarter (reported two months in arrears) of just 2.8%. For the first time, this report includes data and information on complaints received by the Division of Weston. The Patient Support and Complaints service has fully restarted during the quarter, with all complaints that had been put on hold during the Covid-19 outbreak now either under investigation or resolved. 	<ul style="list-style-type: none"> To re-open the Patient Support & Complaints Team 'drop in' service as soon as this can be done whilst maintaining the safety of patients and staff. To implement the proposed new process for dealing with informal complaints in 'real time'. To implement outstanding tasks from the Patient Support & Complaints Team work plan for 2019/20 that, by necessity, had to be carried over to the 2020/21 plan due to the impact of the merger with Weston.
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Opportunity to review the format of this report as part of the integration of the complaints service with the Division of Weston. Opportunity to review the patient complaints survey currently sent to complainants six weeks after their complaint is closed. At the point of this report, Weston and Bristol were sending out different versions of the survey; however, since July 2020, the same one is being sent out to all complainants. 	<ul style="list-style-type: none"> Since the end of Q1, in advance of corporate services integration, the Division of Weston has adopted the same systems and processes for complaints handling as other UHBW divisions, however until consultation has taken place and the respective services have merged, there remains an ongoing risk that UHBW complaints processes are not fully implemented there. Additional training is required for Weston staff who are responsible for investigating complaints and drafting formal responses.

1. Complaints performance – Trust overview

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

During Q1 of 2020/21, the complaints service, along with the majority of services provided by the Trust, was significantly impacted by the Covid-19 pandemic.

At the end of March 2020, a UK-wide lockdown was implemented by the government and the Patient Support and Complaints Team staff were asked to work from home. During April 2020, the team contacted all enquirers/complainants who had an existing case under investigation, to advise them that their case had been placed into one of the following categories, and to explain what would happen next:

- Urgent complaints that required a response within the usual timeframe (or where the investigation had already been completed and the response was due);
- Non-urgent complaints that could be placed on hold until the Divisions were in a position to investigate and respond to them. Complainants were advised that the team would be in touch at the end of June/beginning of July 2020 to progress their enquiry; or
- Non-urgent simple cases where the enquirer could be signposted to an alternative source of support or assistance, such as NHS 111, the Gov.uk website, etc.

By the beginning of July 2020, all complainants whose enquiries had been put on hold had been contacted and their enquiry progressed. Due to the significant decrease in the number of new enquiries coming in to the service during Q1, the team was able to acknowledge and respond to all new enquiries in a timely manner, as well as progressing the existing cases. The only part of the service that has been closed during the pandemic is the face-to-face drop in service, in order to enquire the safety of patients and staff.

1.1 Total complaints received

The Trust received 228 complaints in quarter 1 (Q1) of 2020/21. This total includes complaints received and managed via either formal or informal resolution (whichever has been agreed with the complainant)¹ but does not include concerns which may have been raised by patients and dealt with immediately by front line staff. Figure 1 provides a long-term view of complaints received per month. The impact of the Coronavirus outbreak can start to be seen in the significant reduction in the number of complaints received at the beginning of Q1 and the gradual increase towards the end of the quarter.

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

Figure 1: Number of complaints received

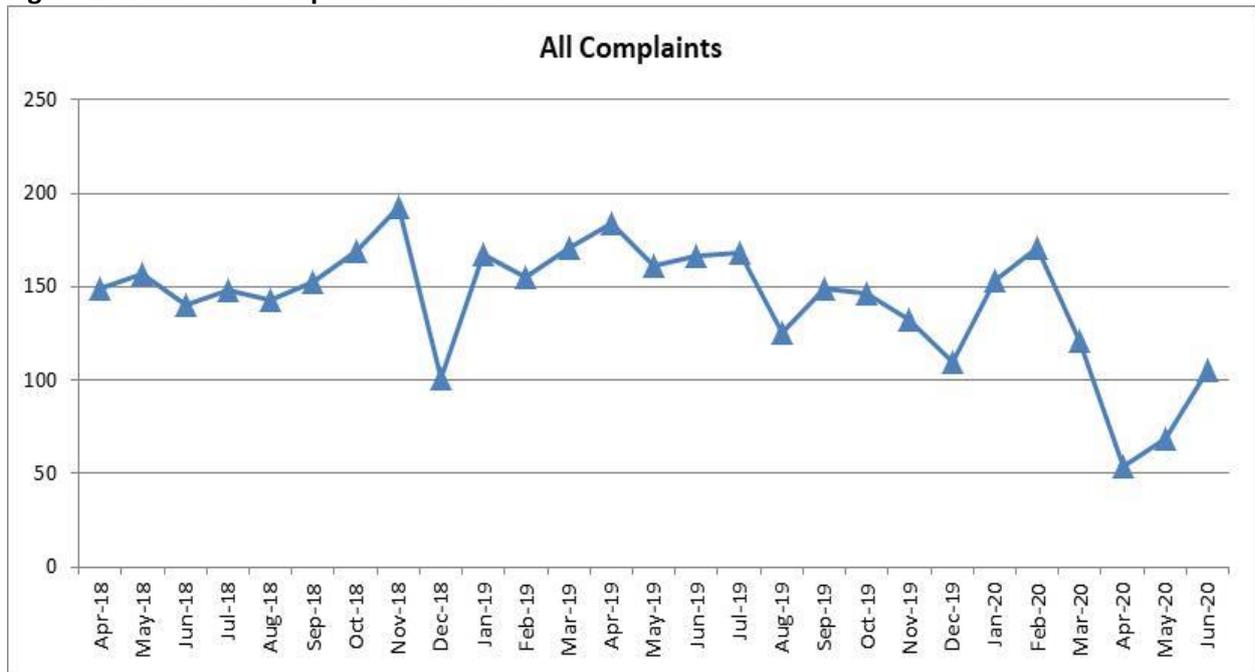


Figure 2: Numbers of formal v informal complaints

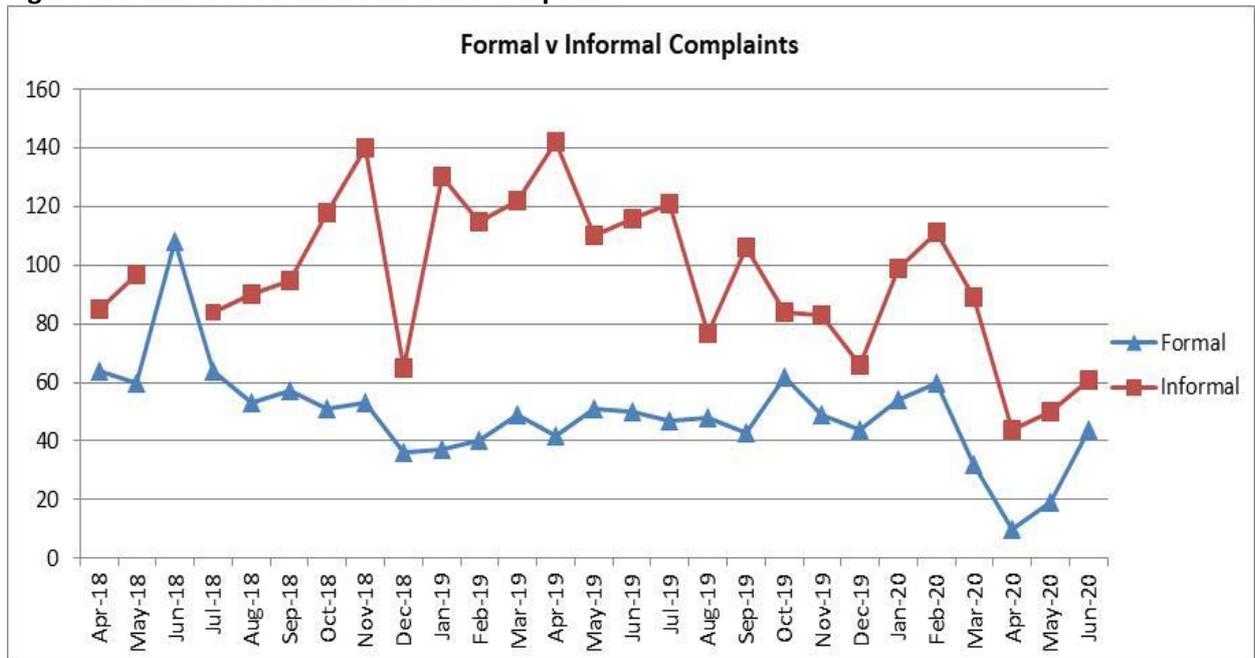


Figure 2 (above) shows complaints dealt with via the formal investigation process compared with those dealt with via the informal investigation process, over the same period. We continue to deal with a higher proportion of complaints via the informal process, which means that these issues are being dealt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

1.2 Complaints responses within agreed timescale

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

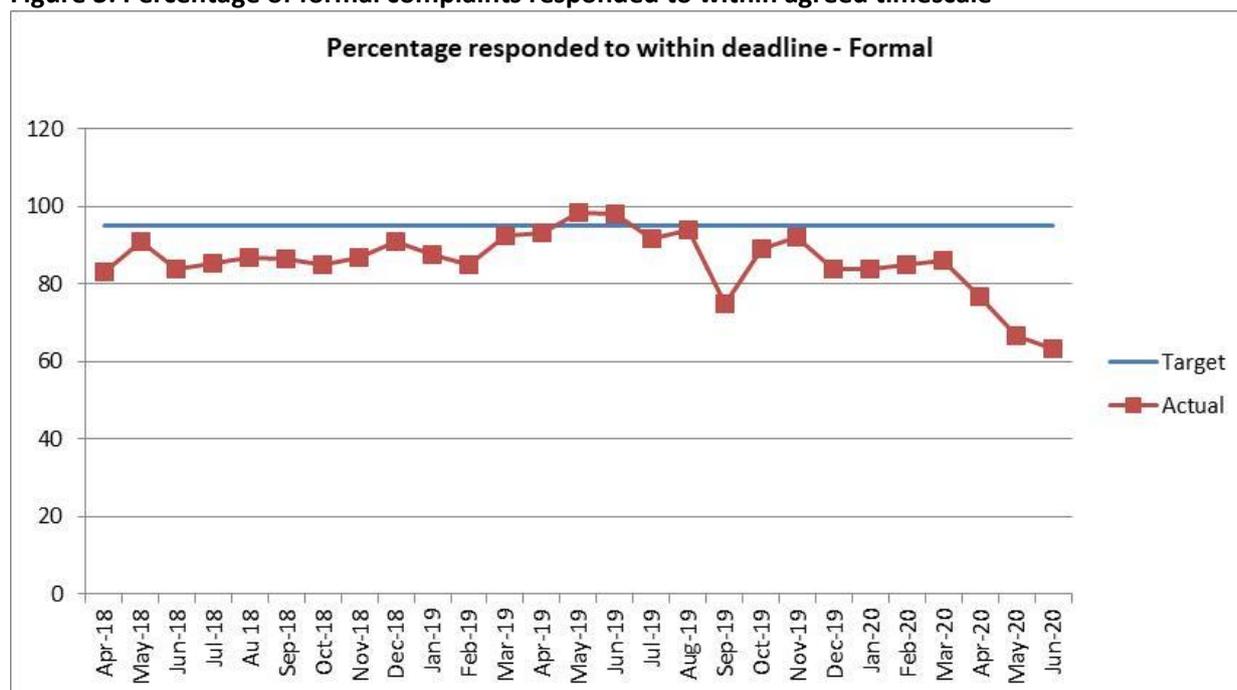
When a complaint is managed through the informal resolution process, the Trust and complainant also agree a timescale and this is usually 10 working days.

1.2.1 Formal Investigations

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

In Q1 2020/21, 71.3% of responses were posted within the agreed timescale. This represents 27 breaches out of the 94 formal complaint responses which were sent out during the quarter². This is a deterioration on the 84.9% reported in Q4 of 2019/20. Figure 3 shows the Trust's performance in responding to complaints since April 2018. Please see section 3.3 of this report for details of where these breaches occurred and at which part of the process they were delayed.

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



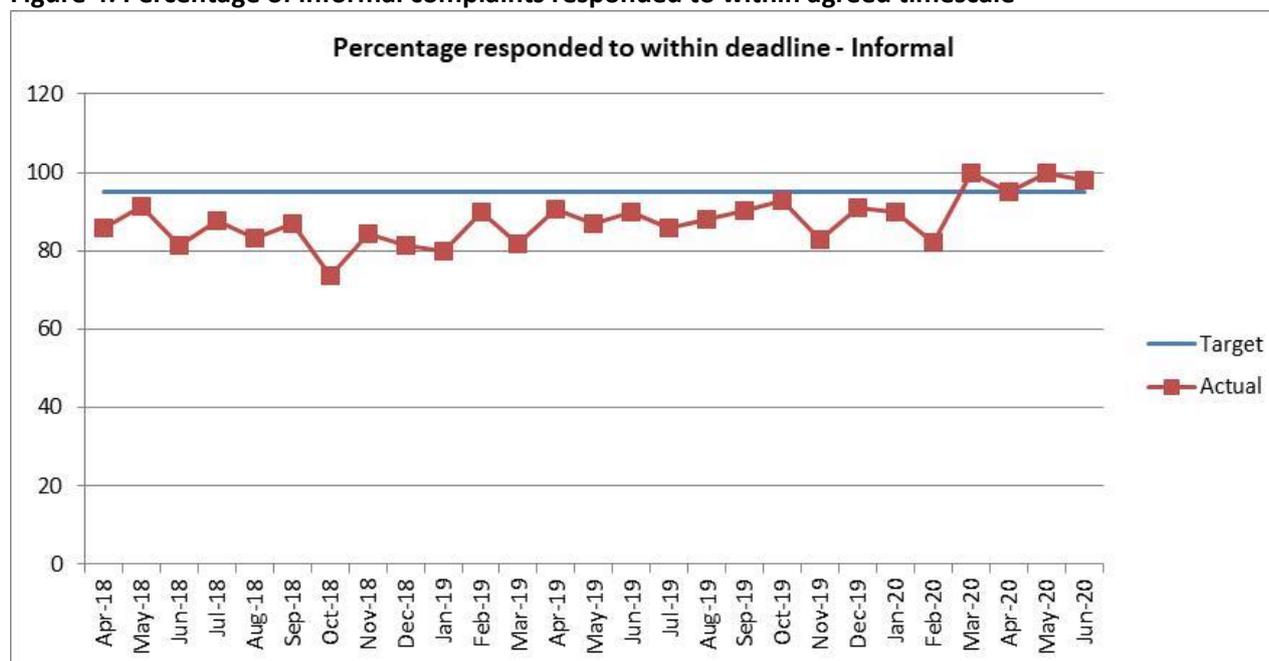
1.2.2 Informal Investigations

In Q1 2020/21, the Trust received 155 complaints that were investigated via the informal process. During this period, the Trust responded to 140 complaints via the informal complaints route and 97.9% (137) of these were responded to by the agreed deadline, an improvement on the 91.1% reported in Q4. It should be noted that the target of 95% was exceeded for each month of Q1.

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

Figure 4 (below) shows performance since April 2018, for comparison with formal complaints.

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



1.3 Dissatisfied complainants

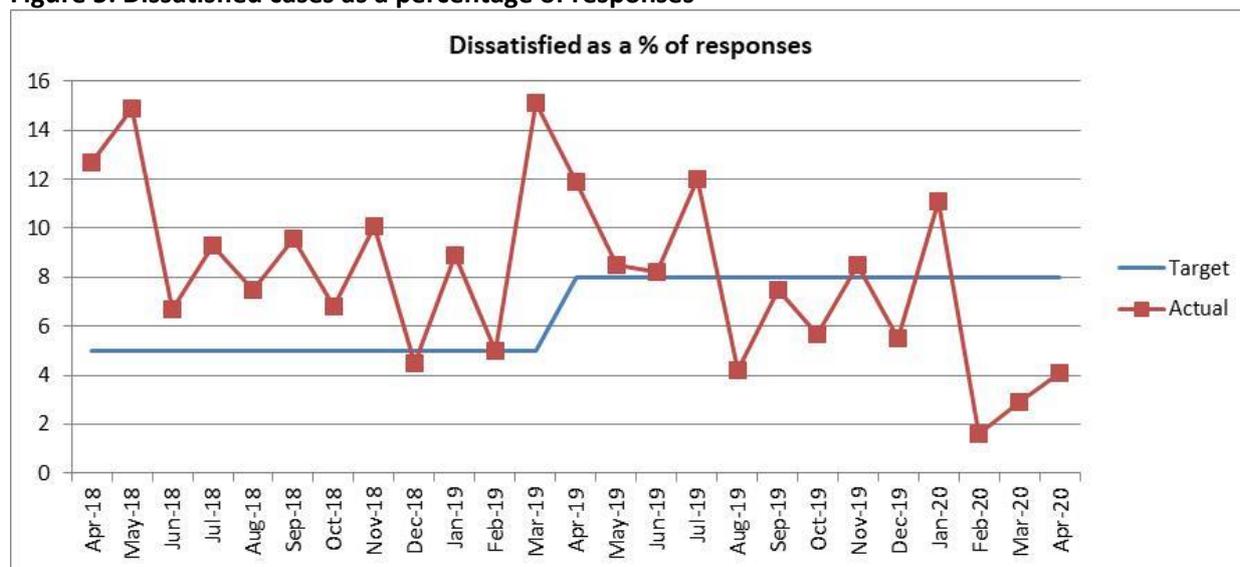
The Trust’s target is that no more than 8% of complaints responses should lead to a dissatisfied response.

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 Q1 2020/21, we are able to report dissatisfied data for February, March and April 2020. Five complainants who received a first response from the Trust during those months have since contacted us to say they were dissatisfied. This represents 2.8% of the 180 first responses sent out during that period. This is the first time since reporting this data that the rate has been below the 8% target for every month reported in a whole quarter.

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

Figure 5: Dissatisfied cases as a percentage of responses



2. Complaints themes – Trust overview

Every complaint received by the Trust is allocated to one of eight major categories, or themes. Table 1 provides a breakdown of complaints received in Q1 2020/21 compared with Q4 of 2019/20.

Complaints in the majority of categories decreased in Q1, compared with Q4, with the exception of small increases in complaints about ‘discharge/transfer/transport’ and ‘access’. This report covers the period during which the Covid-19 outbreak had the greatest impact on all services and this is also reflected in the volume of complaints received.

Interestingly, the top three categories for which complaints are received (by number and percentage of total complaints) has consistently been ‘appointments and admissions’ followed by ‘clinical care’ and then ‘attitude and communication’. For the first time in Q1 2020/21, the order in which these appear based on numbers and percentages has changed as shown in Table 1 below.

Complaints in respect of the top three reported categories accounted for 71.1% of all complaints received (162 of 228).

Table 1: Complaints by category/theme

Category/Theme	Number of complaints received in Q1 (2020/21)	Number of complaints received in Q4 (2019/20)
Attitude & Communication	66 (28.9% of all complaints) ↓	77 (17.3% of all complaints) ↓
Clinical Care	57 (25%) ↓	136 (30.6%) ↑
Appointments & Admissions	39 (17.1%) ↓	140 (31.5%) ↑
Information & Support	25 (11%) ↓	34 (7.7%) ↑
Facilities & Environment	19 (8.3%) ↓	35 (7.9%) ↑
Discharge/Transfer/Transport	10 (4.4%) ↑	8 (1.8%) ↓
Documentation	8 (3.5%) ↓	14 (3.2%) ↑
Access	4 (1.8%) ↑	0 (0%) ↓
Total	228	444

Each complaint is also assigned to a more specific sub-category, of which there are over 100. Table 2 lists the most commonly reported sub-categories, which together accounted for 71.1% of the complaints received in Q1 (162/228).

It should be noted that there are increases in all categories and sub-categories that are generally associated with inpatients and the complaints about outpatient services have reduced significantly during the Covid-19 pandemic and subsequent lockdown.

Table 2: Complaints by sub-category

Sub-category	Number of complaints received in Q1 (2020/21)	Q4 (2019/20)	Q3 (2019/20)	Q2 (2019/20)
Clinical care (Medical/Surgical)	33 (61.2% decrease compared to Q4) ↓	85	73	84
Cancelled/delayed appointments and operations	31 (69.3% decrease) ↓	101	95	92
Communication with patient/relative	18 (5.9% increase) ↑	17	20	10
Clinical care (Nursing/Midwifery)	12 (20% increase) ↑	10	11	11
Attitude of Nursing/Midwifery	12 (33.3% increase) ↑	9	11	5
Lost personal property	12 (20% increase) ↑	10	4	7
Attitude of ancillary staff	10 (∞ increase) ↑	0	3	0
Discharge arrangements	10 (66.7% increase) ↑	6	9	8
Attitude of medical staff	7 (41.7% decrease) ↓	12	17	19
Failure to answer telephones/failure to respond	6 (64.7% decrease) ↓	17	21	22
Attitude of A&C staff	6 (20% increase) ↑	5	10	6
Appointment administration issues	5 (83.3% decrease) ↓	30	21	40

The largest increases in percentages of complaints were in respect of ‘discharge arrangements’ and ‘attitude of ancillary staff’ – complaints received about the latter staff group are usually negligible. The number of complaints received in respect of staff attitudes increased across the board and reflects the impact of the huge additional pressures put on staff looking after inpatients during this unprecedented time.

The most significant decreases were in respect of complaints received about ‘appointment administration issues’ and ‘cancelled/delayed appointments and operations’. Patients will have been aware that their appointments and elective surgery were likely to be cancelled due to Covid-19.

Figures 6-9 (below) show the longer term pattern of complaints received since April 2018 for a number of the complaints categories and sub-categories reported in Tables 1 and 2.

Figure 6 shows that, following a sharp increase at the beginning of 2020, complaints about ‘clinical care (medical/surgical)’ continued to reduce during Q1; and Figure 7 shows that complaints about

'cancelled/delayed appointments and operations' which reduced significantly during April and May, began to climb again towards the end of the quarter. Figures 8 and 9 show a spike in complaints about 'attitude and communication' in May before dropping off again in June.

Trends in categories and sub-categories of complaints are explored in more detail in the individual divisional details from section 3.1.1 onwards.

Figure 6: Clinical care – Medical/Surgical

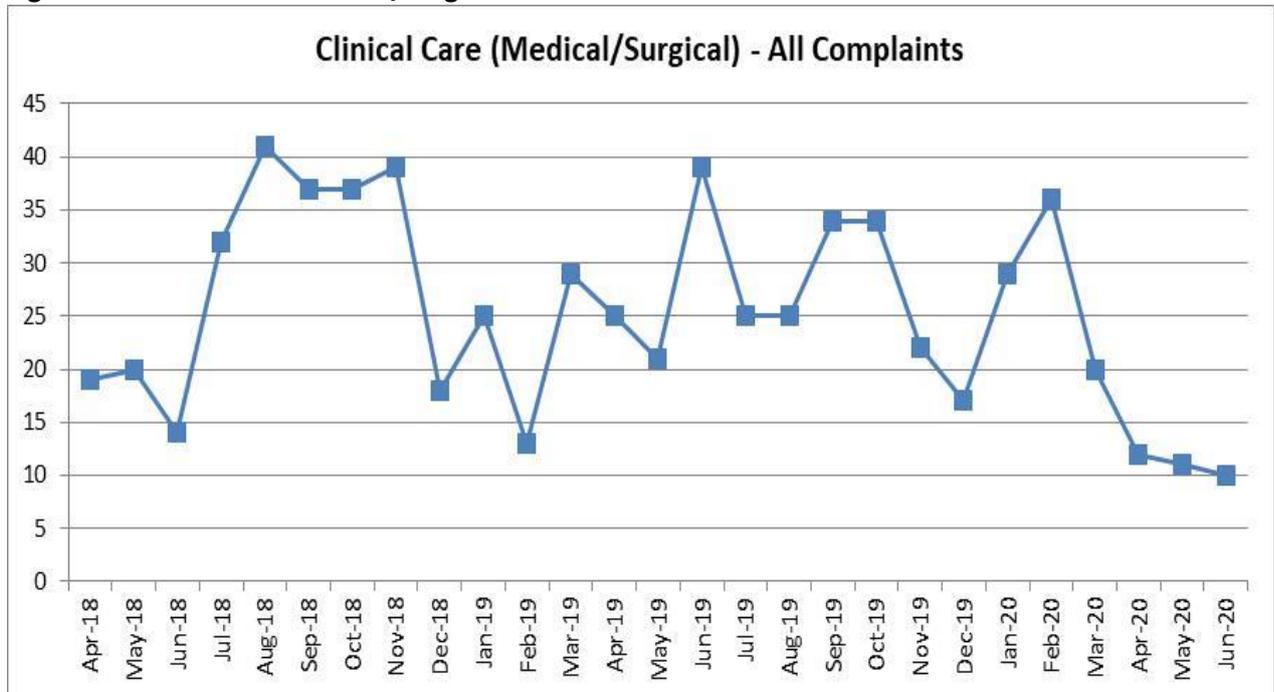


Figure 7: Cancelled or delayed appointments and operations

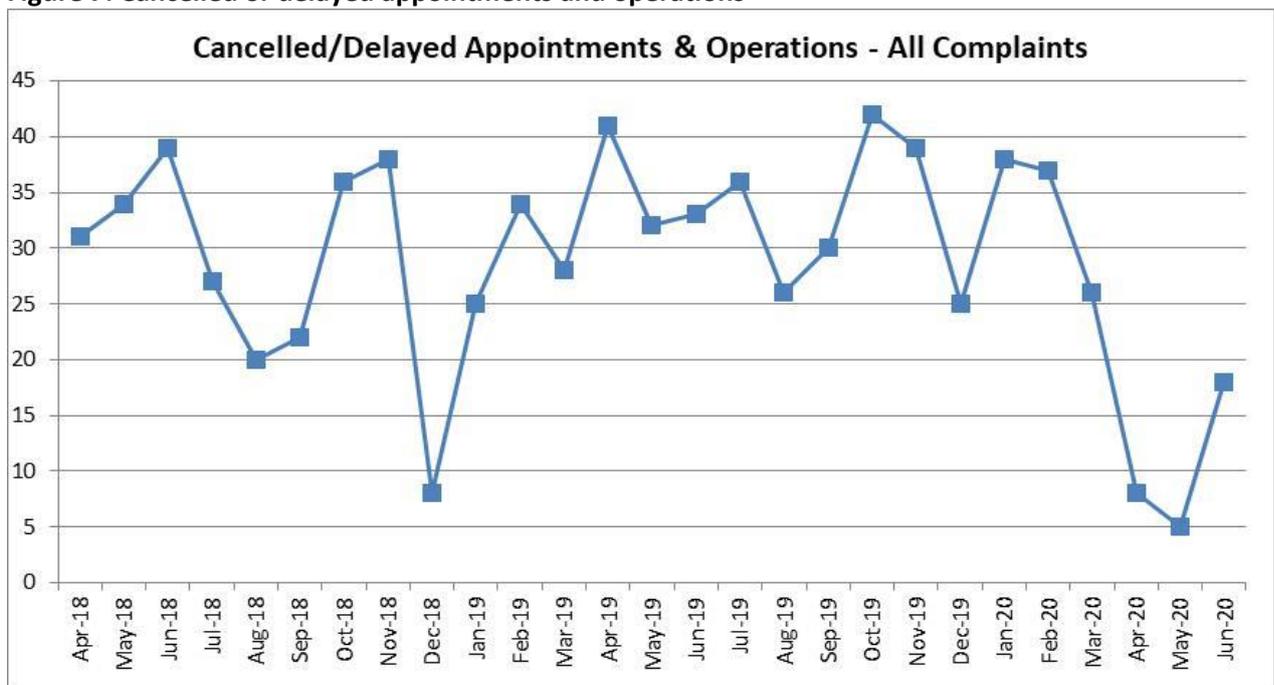


Figure 8: Communication with patient/relative

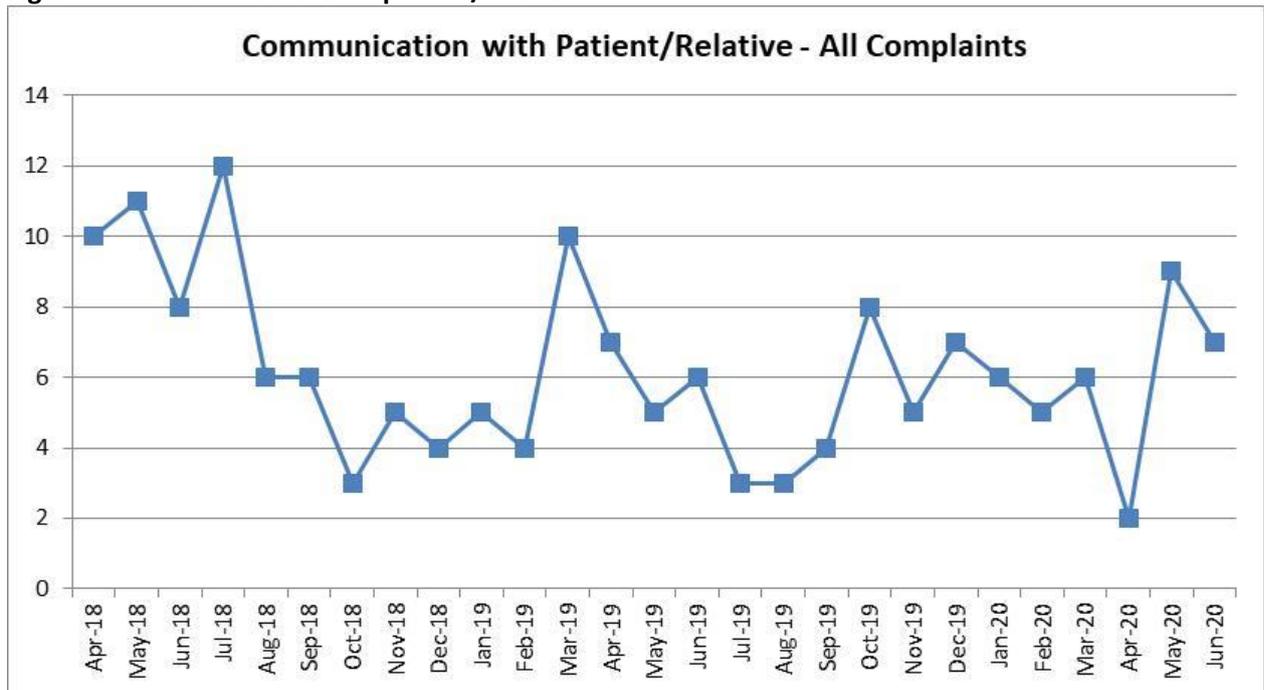
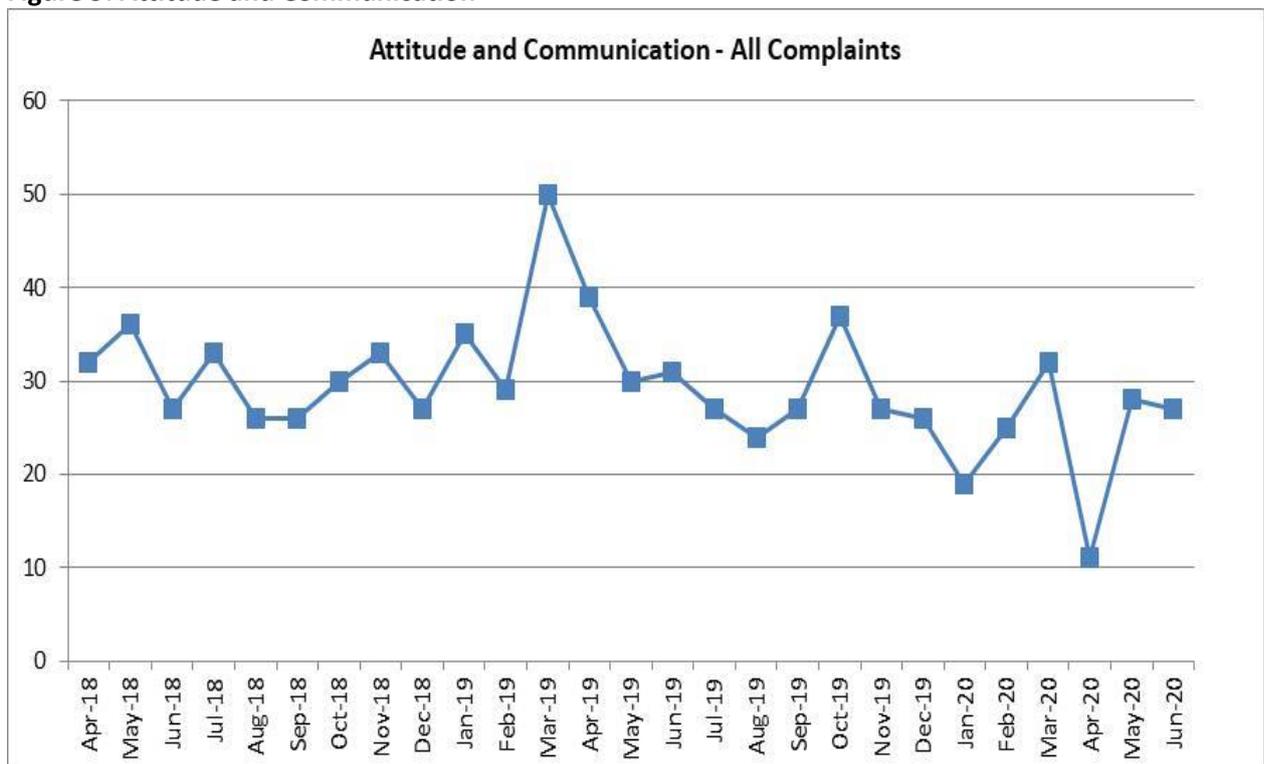


Figure 9: Attitude and Communication



3. Divisional Performance

3.1 Divisional analysis of complaints received

Table 3 provides an analysis of Q1 complaints performance by Division. In Q1, the Division of Weston is included for the first time. In addition to providing an overall view, the table includes data for the three most common reasons why people complain: concerns about appointments and admissions; and concerns about staff attitude and communication. Data for the Division of Trust Services is not included in this table but is summarised in section 3.1.6 of the report.

Table 3	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Weston
Total number of complaints received	57 (147) ↓	59 (88) ↓	28 (70) ↓	33 (89) ↓	7 (18) ↓	18
Number of complaints about appointments and admissions	21 (68) ↓	4 (17) ↓	10 (30) ↓	4 (21) ↓	0 (3) ↓	0
Number of complaints about staff attitude and communication	12 (23) ↓	20 (26) ↓	3 (11) ↓	9 (10) ↓	2 (3) ↓	5
Number of complaints about clinical care	9 (45) ↓	18 (24) ↓	7 (21) ↓	12 (41) ↓	2 (4) ↓	9
Area where the most complaints have been received in Q1	Bristol Eye Hospital (BEH) – 18 (25) ENT – 5 (22) Trauma & Orthopaedics – 5 (7) Lower GI – 4 (10) Upper GI – 4 (14)	Emergency Department (BRI) (inc. A413 EMU) – 11 (23) Dermatology – 7 (16) Ward A524 – 7 (2) Ward A900 – 5 (2)	BHI (all) – 18 (49) BHOC (all) – 10 (18) BHI Outpatients – 7 (30) BHOC Outpatients – 5 (9) Ward C705 – 3 (1)	BRHC (all) – 18 (53) StMH (all) – 14 (34) plus 1 for Community Midwifery Central Delivery Suite – 3 (6) Ward 73 (Maternity) – 3 (6)	Radiology – 6 (7)	Accident & Emergency – 4 Harptree Ward – 2 Outpatients (Quantock) – 2
Notable deteriorations compared with Q4	No notable deteriorations	Ward A524 – 7 (2) Ward A900 – 5 (2)	No notable deteriorations	No notable deteriorations	Complaints for Radiology remained at similar levels to previous quarters, despite the overall decrease in the numbers of complaints.	First time for inclusion of Division of Weston data
Notable improvements compared with Q4	ENT – 5 (22) Lower GI – 4 (10) Upper GI – 4 (14)	Emergency Department (BRI) (inc. A413 EMU) – 11 (23)	BHI Outpatients – 7 (30)	No notable improvements	No notable improvements	First time for inclusion of Division of Weston data

3.1.1 Division of Surgery

As with all Divisions across the Trust, there was a significant reduction in the number of complaints received by the Division of Surgery in Q1; 57 complaints, compared with 147 in Q4 and 127 in Q3. The majority of these complaints were investigated via the informal complaints process (42) compared with 15 which were investigated through the formal process.

The only service which received a similar number of complaints to the previous quarter was Trauma & Orthopaedics, although this remained low at just five complaints, compared with seven in Q4. Bristol Dental Hospital received only five complaints during Q1 as it remained closed for the majority of this period.

The Division achieved 66.7% (22/33) against its target for responding to formal complaints within the agreed timescale in Q1 and 100% (35/35) for informal complaints. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

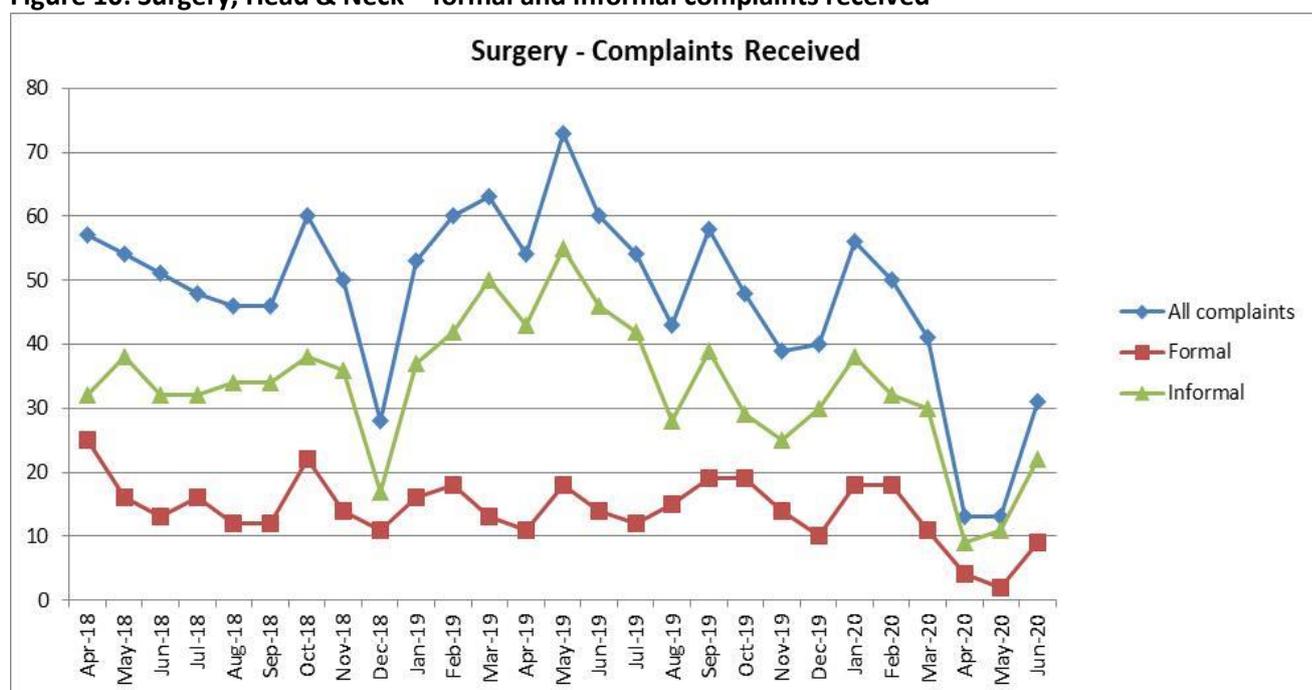
Table 4: Complaints by category type

Category Type	Number and % of complaints received – Q1 2020/21	Number and % of complaints received – Q4 2019/20
Appointments & Admissions	21 (36.8% of total complaints) ↓	68 (46.3% of total complaints) ↑
Attitude & Communication	12 (21.1%) ↓	23 (15.6%) ↓
Clinical Care	9 (15.8%) ↓	45 (30.6%) ↑
Information & Support	7 (12.3%) ↑	3 (2%) =
Facilities & Environment	5 (8.8%) ↑	2 (1.4%) ↑
Documentation	2 (3.5%) ↓	5 (3.4%) ↑
Access	1 (1.7%) ↑	0 (0%) ↓
Discharge/Transfer/ Transport	0 (0%) ↓	1 (0.7%) =
Total	57	147

Table 5: Top sub-categories

Category	Number of complaints received – Q1 2020/21	Number of complaints received – Q4 2019/20
Cancelled or delayed appointments and operations	15 ↓	48 ↑
Clinical care (medical/surgical)	8 ↓	30 ↑
Failure to answer telephones/ failure to respond	4 ↓	6 ↓
Lost personal property	4 ↓	5 ↓
Communication with patient/relative	3 ↓	5 ↑
Waiting time in clinic	3 ↑	1 =

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



3.1.2 Division of Medicine

In line with all other Divisions, Medicine saw a reduction in the total number of complaints received in Q1 (59), compared with 88 in Q4 and 72 in Q3. There was an increase in ward-based complaints compared with categories of complaints more often associated with outpatients, particularly around ‘attitude and communication’.

Of the 59 complaints received by the Division in Q1, 24 were investigated via the formal complaints process and 35 the informal route.

The Division achieved 73.7% (14/19) against its target for responding to formal complaints within the agreed timescale in Q1, a slight improvement on the 72% reported in Q4. There was a significant improvement for informal complaints in Q1, with 100% being responded to within the agreed deadline (34/34), compared with 80.6% the previous. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

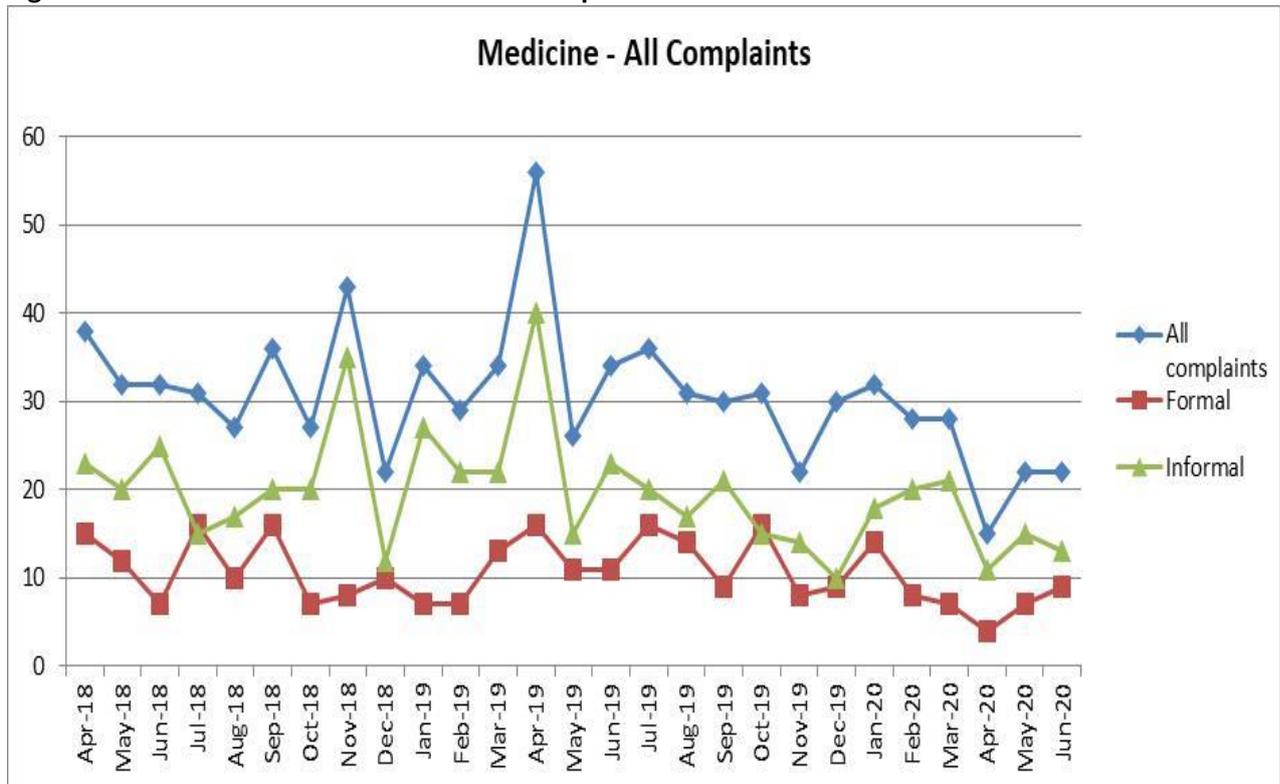
Table 6: Complaints by category type

Category Type	Number and % of complaints received – Q1 2020/21	Number and % of complaints received – Q4 2019/20
Attitude & Communication	20 (33.9% of total complaints) ↓	26 (29.6% of total complaints) ↑
Clinical Care	18 (30.5%) ↓	24 (27.3%) ↓
Discharge/Transfer/ Transport	6 (10.2%) ↑	5 (5.7%) ↑
Facilities & Environment	5 (8.5%) ↓	9 (10.2%) ↑
Appointments & Admissions	4 (6.7%) ↓	17 (19.3%) ↓
Information & Support	3 (5.1%) ↓	4 (4.5%) ↑
Documentation	2 (3.4%) ↓	3 (3.4%) ↑
Access	1 (1.7%) ↑	0 (0%) =
Total	59	88

Table 7: Top sub-categories

Category	Number of complaints received – Q1 2020/21	Number of complaints received – Q4 2019/20
Clinical care (medical/surgical)	10 ↓	15 ↓
Communication with patient/relative	8 ↑	6 ↓
Attitude of nursing/midwifery	8 ↑	4 ↑
Discharge arrangements	6 ↑	5 ↑
Cancelled or delayed appointments and	5 ↓	12 ↓
Personal (lost) property	4 ↓	5 ↑
Attitude of medical staff	4 =	4 =
Clinical care (nursing/midwifery)	4 ↑	1 ↓

Figure 11: Medicine – formal and informal complaints received



3.1.3 Division of Specialised Services

The Division of Specialised Services received 28 new complaints in Q1, compared with 70 in Q4. In line with the other Divisions, this was a significant reduction compared with previous quarters and was largely due to the impact of the Covid-19 pandemic. However, unlike the other Divisions, the majority of the complaints received by Specialised Services remained ‘appointments and admissions’, which includes sub-categories such as cancelled and delayed appointments and operations.

Of the 28 complaints received, five were investigated via the formal complaints process, whilst the majority (23) were dealt with informally.

The Division achieved 66.7% (6/9) against its target for responding to formal complaints within the agreed timescale in Q1, compared with 77.8% in Q4. The Division responded to 100% of informal complaints (21/21) in Q1 within the agreed timescale – a 100% performance for the second quarter in succession. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

Table 8: Complaints by category type

Category Type	Number and % of complaints received – Q1 2020/21	Number and % of complaints received – Q4 2019/20
Appointments & Admissions	10 (35.7% of total complaints) ↓	30 (42.8% of total complaints) ↑
Clinical Care	7 (25%) ↓	21 (30%) ↑
Attitude & Communication	3 (10.7%) ↓	11 (15.7%) ↓
Information & Support	0 (0%) ↓	4 (5.7%) ↑
Documentation	3 (10.7%) ↑	2 (2.9%) =
Facilities & Environment	4 (14.3%) ↑	2 (2.9%) =
Discharge/Transfer/Transport	1 (3.6%) ↑	0 (0%) ↓
Access	0 (0%) =	0 (0%) =
Total	28	70

Table 9: Top sub-categories

Category	Number of complaints received – Q1 2020/21	Number of complaints received – Q4 2019/20
Cancelled or delayed appointments and operations	8 ↓	25 ↑
Clinical care (medical/surgical)	7 ↓	11 =
Appointment administration issues	4 ↓	5 ↑

Figure 12: Specialised Services – formal and informal complaints received

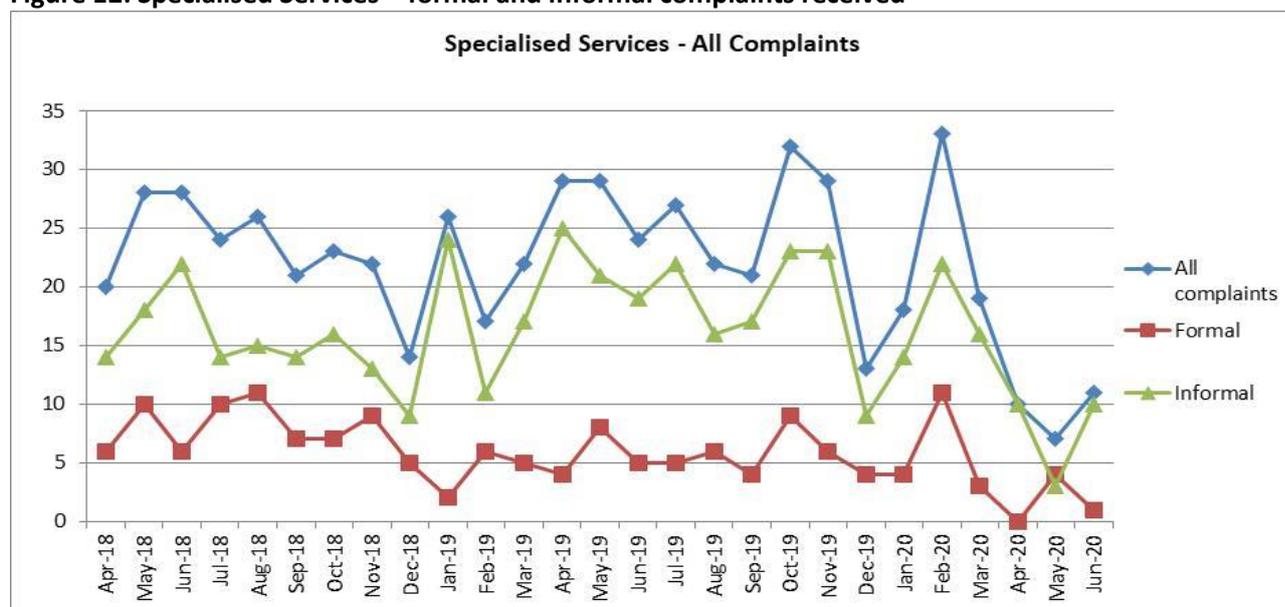


Figure 13: Complaints received by Bristol Heart Institute

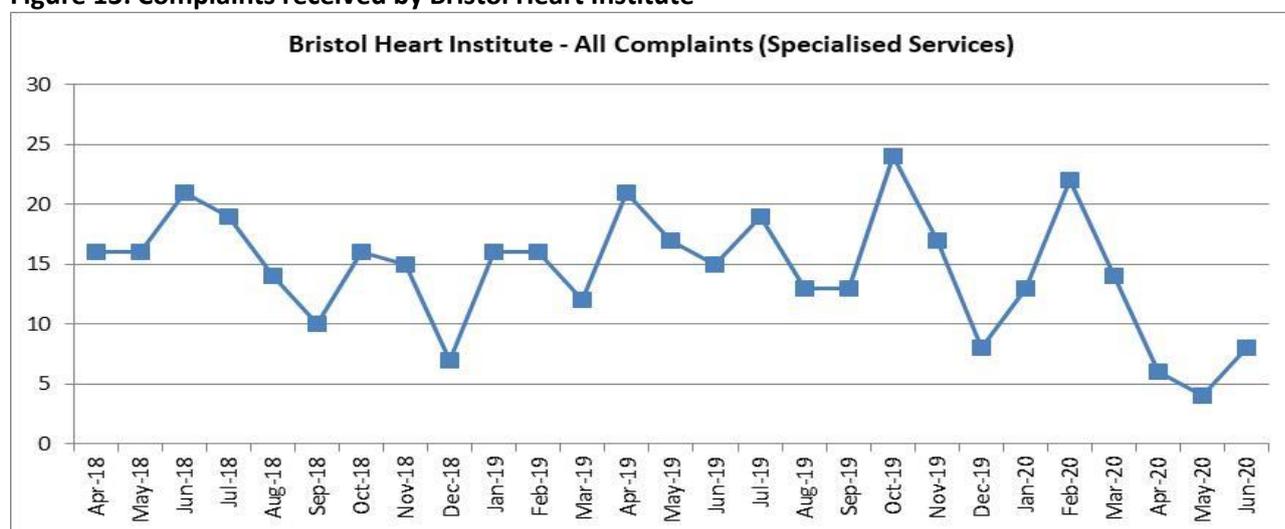
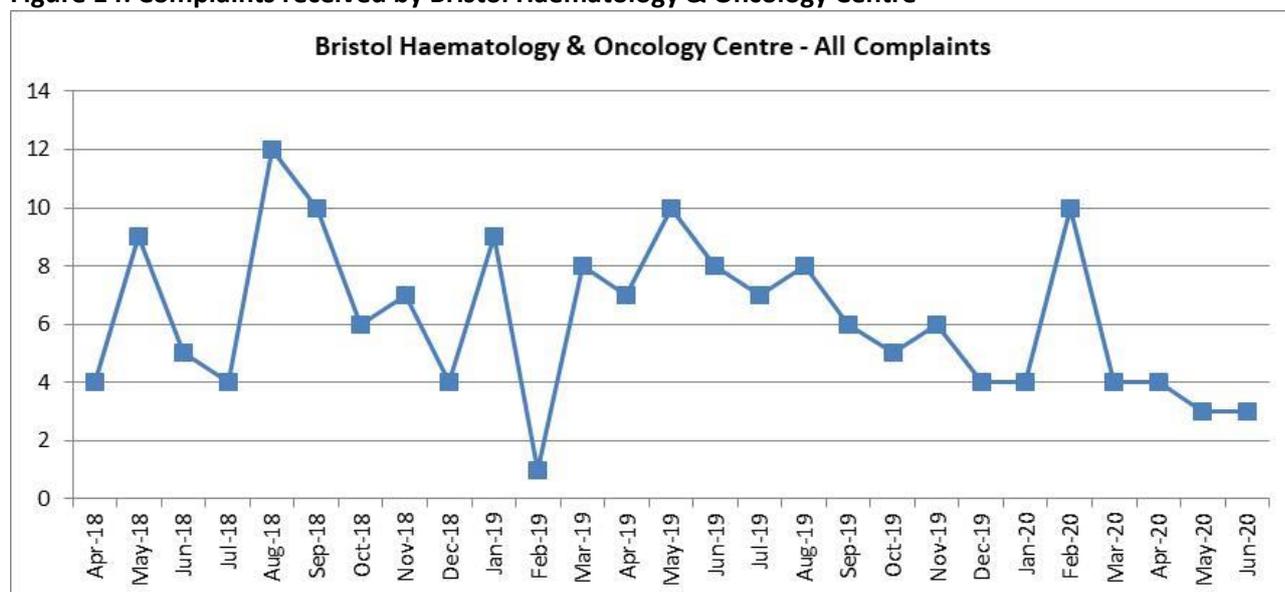


Figure 14: Complaints received by Bristol Haematology & Oncology Centre



3.1.4 Division of Women's and Children's Services

The total number of complaints received by the Division in Q1 was 33, a significant reduction on the previous quarter (89), in common with all other Divisions. Complaints for Bristol Royal Hospital for Children (BRHC) accounted for 18 of the 33 complaints, 14 were received by St Michael's Hospital (StMH) and there was one complaint for the Community Midwifery Service.

Of the 33 new complaints received in Q1, the Division managed 13 through the formal complaints process and 20 were investigated via the informal complaints process.

The Division achieved 79.2% (19/24) against its target for responding to formal complaints within the agreed timescale in Q1, compared with 94.6% in Q4. However, they responded to 100% (16/16) of informal responses within the agreed timescale. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

Table 10: Complaints by category type

Category Type	Number and % of complaints received – Q1 2020/21	Number and % of complaints received – Q4 2019/20
Clinical Care	12 (36.4% of total complaints) ↓	41 (46.1% of total complaints) ↑
Attitude & Communication	9 (27.3%) ↓	11 (12.4%) ↓
Information & Support	5 (15.2%) ↓	9 (10.1%) ↑
Appointments & Admissions	4 (12.1%) ↓	21 (23.5%) ↑
Documentation	1 (3%) ↓	3 (3.4%) ↑
Discharge/Transfer/ Transport	1 (3%) =	1 (1.1%) ↓
Access	1 (3%) ↑	0 (0%) ↓
Facilities & Environment	0 (0%) ↓	3 (3.4%) ↓
Total	33	89

Table 11: Top sub-categories

Category	Number of complaints received – Q1 2020/21	Number of complaints received – Q4 2019/20
Clinical Care (nursing/midwifery)	6 ↓	8 ↓
Clinical Care (medical/surgical)	4 ↓	26 ↑
Communication with patient/ relative	3 ↑	2 ↓
Infectious disease enquiry	3 ↑	0 =

Figure 15: Women & Children – formal and informal complaints received

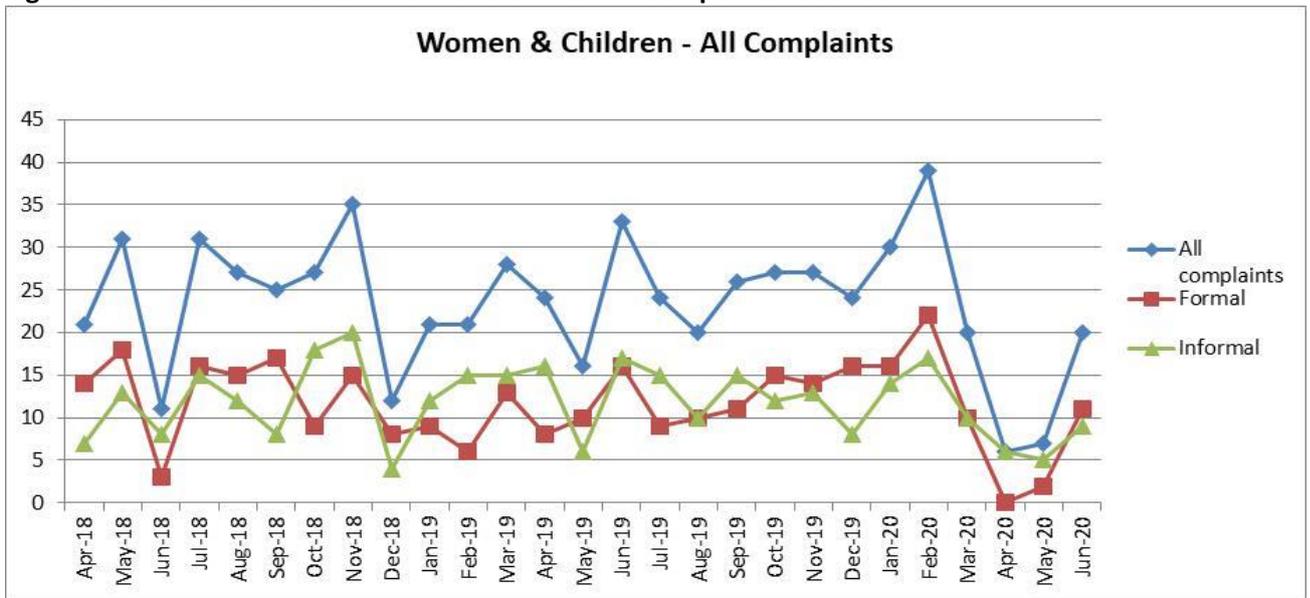


Figure 16: Complaints received by Bristol Royal Hospital for Children

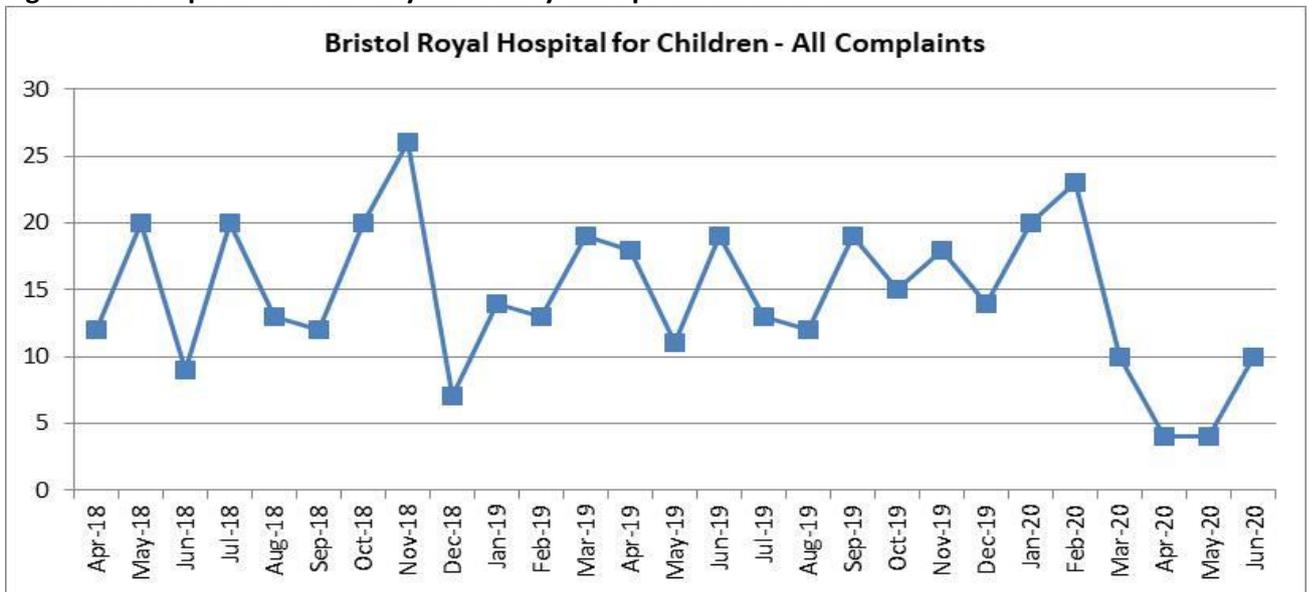


Figure 17: Complaints received by St Michael's Hospital



3.1.5 Division of Diagnostics & Therapies

Complaints received by the Division of Diagnostics and Therapies decreased significantly in Q1, along with all other Divisions – they received seven complaints, compared with 18 in Q4 of 2019/20.

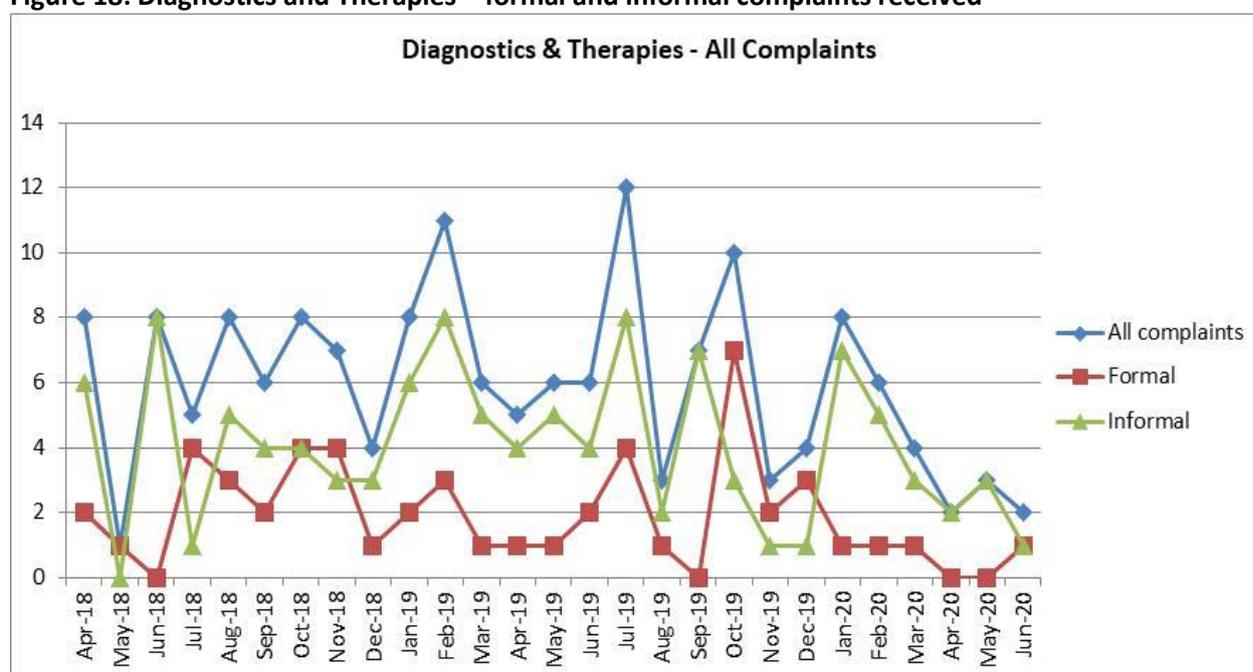
Number of complaints across all categories and sub-categories are very low. Although six of the seven complaints received were for Radiology. One complaint was investigated via the formal complaints process, with the remaining six investigated through the informal process.

During Q1, the Division responded to one formal complaint and this was sent to the complainant within the agreed timescale, meaning that the Division achieved 100% against its target. They also responded to 100% (8/8) of informal complaints within the agreed timescale. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

Table 12: Complaints by category type

Category Type	Number and % of complaints received – Q1 2020/21	Number and % of complaints received – Q4 2019/20
Information & Support	3 ↓	5 ↑
Clinical Care	2 ↓	4 ↓
Attitude & Communication	2 ↓	3 ↓
Appointments & Admissions	0 ↓	3 ↑
Facilities & Environment	0 ↓	2 ↑
Documentation	0 ↓	1 ↑
Access	0 =	0 =
Discharge/Transfer/Transport	0 =	0 =
Total	7	18

Figure 18: Diagnostics and Therapies – formal and informal complaints received



3.1.6 Division of Weston

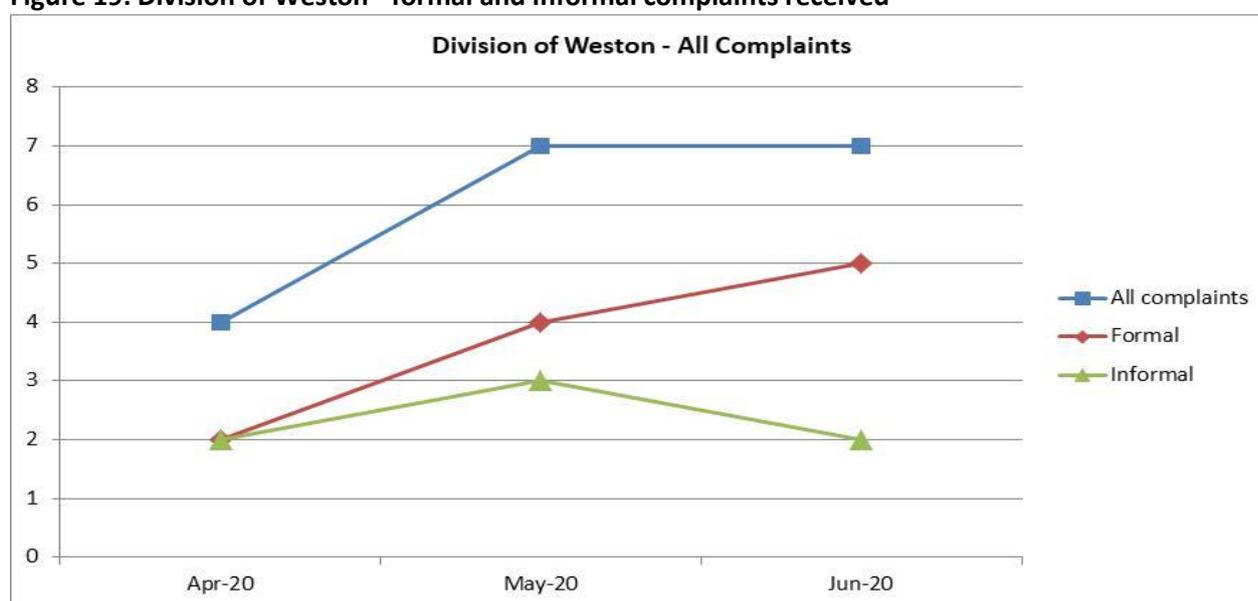
Following the merger of University Hospitals Bristol with Weston Area Health Trust, to form University Hospitals Bristol and Weston NHS Foundation Trust (UHBW) on 1 April 2020, this report includes data for the Division of Weston for the first time.

The Division received 18 new complaints in Q1 of 2020/21, with 11 of these managed through the formal complaints process and the remaining seven via the informal process.

During the same period, the Division responded to five formal complaints, achieving 66.7% (4/6) of responses being sent to complainants within the agreed timescale and 80% of informal complaints being responded to on time (4/5).

More information about complaints for the Division of Weston will be included in future Quarterly Complaints Reports, as data is gathered, including identification of themes and trends.

Figure 19: Division of Weston - formal and informal complaints received



3.1.7 Division of Trust Services

The Division of Trust Services, which includes Facilities & Estates, received 26 complaints in Q1 of 2020/21, compared with 32 in Q4 of 2019/20 and 33 in Q3. Of the 26 complaints received in Q1, nine were in respect of complaints made by members of the public about social media use by a member of staff in Hotel Services. There were three complaints for the Private & Overseas Patients Team and two each about car parking and staff on the Welcome Centre reception desk.

Four of the 26 new complaints received were investigated and responded to via the formal complaints process, with the remaining 22 being managed informally.

The Division achieved 50% (1/2) against its target for responding to formal complaints within the agreed timescale in Q1 and 81.8% (9/11) for informal complaints. Please see section 3.3 Table 14 for details of where in the process any delays occurred.

Figure 20: Trust Services – all complaints received

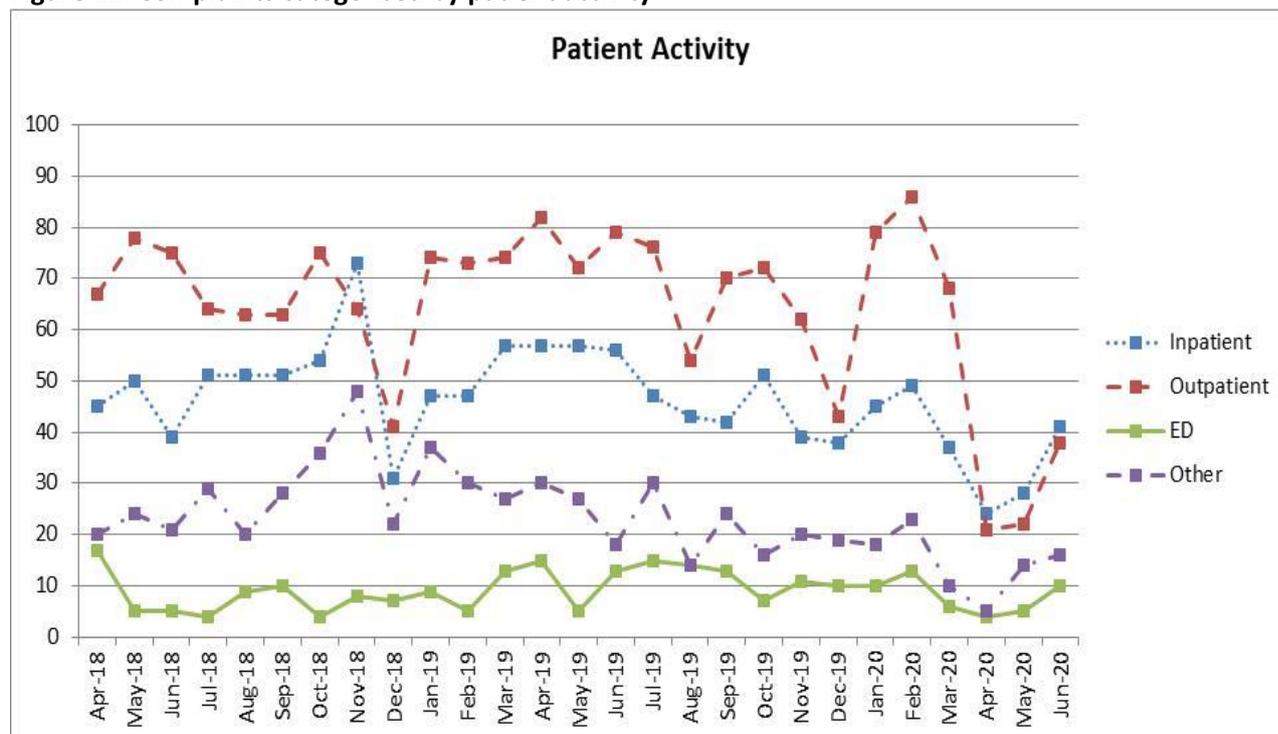


3.2 Breakdown of complaints by inpatient/outpatient/ED status

In order to more clearly identify the number of complaints received by the type of service, Figure 21 below shows data differentiating between inpatient, outpatient, Emergency Department and other complaints. The category of ‘other’ includes complaints about non-clinical areas, such as car parking, cashiers, administration departments, etc.

In Q1, 35.5% (*52.5%) of complaints received were about outpatient services, 40.8% (29.5%) related to inpatient care, 8.3% (6.5%) were about emergency patients; and 15.4% (11.5%) were in the category of ‘other’ (as explained above). * Q4 percentages are shown in brackets for comparison.

Figure 21: Complaints categorised by patient activity



3.3 Complaints responded to within agreed timescale for formal resolution process

All divisions, with the exception of Diagnostics & Therapies, reported breaches of formal complaint deadlines in Q1, with a total of 27 breaches of deadlines reported Trustwide.

The Division of Surgery reported 11 breaches of deadline, Medicine and Women & Children reported five each, Specialised Services reported three, Weston had two and Trust Services had one breach. It should however be noted that only 10 of the 27 breaches were attributable to the Divisions (see Table 14 below).

This is a slight improvement on the 32 breaches reported in Q4.

In Q1, the Trust responded to 94 complaints via the formal complaints route and 71.3% of these were responded to by the agreed deadline, against a target of 95%, compared with 85% in Q4.

Table 13: Breakdown of breached deadlines – Formal

Division	Q1 2020/21	Q4 2019/20	Q3 2019/20	Q2 2019/20
Medicine	5 (26.3%)	14 (28%)	12 (29.3%)	10 (23.3%)
Specialised Services	3 (33.3%)	6 (22.2%)	5 (19.2%)	7 (29.2%)
Surgery	11 (33.3%)	4 (6.7%)	2 (2.6%)	3 (5.9%)
Trust Services	1 (50%)	4 (26.7%)	2 (40%)	5 (55.6%)
Women & Children	5 (20.8%)	3 (5.4%)	1 (2.6%)	2 (5.5%)
Diagnostics & Therapies	0 (0%)	1 (20%)	1 (11.1%)	1 (12.5%)
Weston	2 (33.3%)			
All	27 breaches	32 breaches	23 breaches	28 breaches

(So, as an example, there were 11 breaches of timescale in the Division of Surgery in Q1, which constituted 33.3% of the 33 complaint responses which were sent out by that division in Q1).

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

Table 14 shows a breakdown of where the delays occurred in Q1. During this period, a new electronic signing process was trialled. Unfortunately, this led to 13 of the breaches shown below taking place whilst the responses were with the Executives for signing. As a result, the Trust has reverted to the Executives manually signing response letters taken to Trust Headquarters in signing books. During the same period, 10 breaches were attributable to the Divisions and four were caused by delays in the Patient Support & Complaints Team.

Table 14: Source of delay

Breach attributable to	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Trust Services	Weston	All
Division	4	4	0	1	0	0	1	10
PSCT	1	0	1	1	0	1	0	4
Execs/sign-off	6	1	2	3	0	0	1	13
All	11	5	3	5	0	1	2	27

3.3.1 Complaints responded to within agreed timescale for informal resolution process

All breaches of informal complaint timescales are attributable to the Divisions as the Patient Support & Complaints Team and Executives do not contribute to the time taken to resolve these complaints. In Q1, the Trust responded to 140 complaints via the informal complaints route (compared with 223 in Q4) and 97.9% of these were responded to by the agreed deadline; an improvement on the 91.9% reported in Q4 and beating the target of 95%.

Table 15: Breakdown of breached deadlines - Informal

Division	Q1 2020/21	Q4 2019/20	Q3 2019/20	Q2 2019/20
Surgery	0 (100%)	7 (8.9%)	8 (11.4%)	9 (10%)
Women & Children	0 (100%)	2 (6.3%)	1 (3.6%)	3 (11.5%)
Diagnostics & Therapies	0 (100%)	1 (6.7%)	1 (16.7%)	0 (0%)
Trust Services	2 (9.5%)	1 (4.2%)	2 (9.5%)	7 (24.1%)
Specialised Services	0 (100%)	0 (0%)	2 (4.2%)	2 (5.1%)
Medicine	0 (100%)	0 (0%)	7 (17.5%)	8 (24.2%)
Weston	1 (20%)			
All	3	11	21	29

4. Learning from complaints

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

Below are some examples of actions which have been completed during Q1 2020/21.

- A complaint was received from a patient who sadly experienced a miscarriage during the early stages of her pregnancy. This was not her first pregnancy so she had experience of carrying a baby to full term and when she called the Community Midwife, she said she knew something was wrong and asked to be referred to the Early Pregnancy Clinic (EPC) at St Michael's Hospital. The midwife dissuaded her and advised her to get a scan carried out privately if she was concerned. The patient arranged for a private scan, which showed that she had indeed miscarried. As a result of this complaint, all community midwives were reminded to refer patients to the EPC for triage, even if they did not meet all of the referral criteria and teaching was carried out for ward staff around fetal loss and use of the fetal loss care plan. (Women & Children)
- A patient who has contact lenses supplied by Bristol Eye Hospital (BEH) made a complaint following the confusion over what was included in her annual payment. She had previously been told that the annual payment covered any replacement lenses but when she was due to make a new payment, she was told that replacement lenses were not included and she was left without any lenses whilst this was resolved. As a result of this complaint, the Service Lead Optometrist developed a new patient information leaflet providing clarity for users of the contact lens service. The leaflet explains the contact lens purchase process, including eligibility criteria, trial lenses, payment details, how the department manages patient enquiries and a list of FAQs. (Surgery)

5. Information, advice and support

In addition to dealing with complaints, the Patient Support and Complaints Team is also responsible for providing patients, relatives and carers with help and support. A total of 236 enquiries were

received in Q1, a significant 41% increase on the 167 received in Q4. This figure includes 84 concerns recorded by the Patient Advice & Liaison Service (PALS) in Weston. The team also recorded and acknowledged 31 compliments received during Q1 and shared these with the staff involved and their Divisional teams. This is compared with 43 compliments reported in Q4.

In addition to the enquiries detailed above, in Q1 the Patient Support and Complaints team recorded 67 enquiries that did not proceed, compared with 164 in Q4. This is where someone contacts the department to make a complaint or enquiry but does not leave enough information to enable the team to carry out an investigation (and the team is subsequently unable to obtain this information), or they subsequently decide that they no longer wish to proceed with the complaint.

Including complaints, requests for information or advice, requests for support, compliments and cases that did not proceed, the Patient Support and Complaints Team continues to deal with a high volume of activity, with a total of 562 separate enquiries in Q1 2020/21, compared with 818 in Q4.

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

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

In Q1, 155 complaints were received in writing (141 by email and 14 letters) and 67 were received verbally (2 in person via drop-in service and 65 by telephone). Six complaints were also received in Q1 via the Trust's 'real-time feedback' service. Of the 228 complaints received in Q1, 98.6% (225 out of the 228 received) met the Trust's standard of being acknowledged within two working days (verbal) and three working days (written).

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

7. PHSO cases

During Q1, the PHSO had placed all complaints on hold in order that the NHS could concentrate on the additional pressures of COVID-19 on patient care. Therefore, the Trust was not advised of PHSO interest in any new cases and no cases were closed during this period.

There are currently 16 cases that are open with the PHSO whilst they decide whether or not to carry out a full investigation or for which a decision is awaited following their investigation.

8. Complaint Survey

The Patient Support & Complaints team sends a complaint survey to all complainants six weeks after their complaint is resolved and closed.

Data/feedback has not been included in the report for this quarter, due to the negligible amount of completed surveys returned, which would render the results inconclusive.

9. Severity of Complaints

Since April 2019, the Patient Support & Complaints Team has been recording the severity of complaints received by the Trust using a system of categorisation proposed by researchers at the

London School of Economics. This severity rating is based on the nature of the complaint as first described to the Trust by or on behalf of the patient; not after the issues have been investigated. This ensures that the rating is reliable and independent of the outcome of the investigation.

We know from NHS data that Trusts with high levels of incident reporting have fewer instances of severe harm to patients, i.e. organisations with cultures that encourage reporting when things go wrong, learn and provide safer care. The LSE research suggests a similar pattern of data associated with patient complaints, i.e. Trusts who receive high levels of low level severity complaints receive lower levels of high severity complaints, again indicating that a culture of openness to receiving and learning from complaints is associated with safer and higher quality care. Put another way, receiving complaints should not be viewed as a bad thing *per se*; it depends what the complaint is about. A practical example of each of these categories is shown in Table 16 below.

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

Table 16: Examples of severity rating of complaints

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

In Q1, the Trust received 228 complaints, all of which have been severity rated by the Patient Support & Complaints Team. Of these 228 complaints, 105 were rated as being low severity, 111 as medium and 12 as high. Figure 22 below shows a breakdown of these severity ratings by month since April 2019.

Figure 22: Severity rating of complaints

