

# ANNUAL COMPLAINTS REPORT 2023/24

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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 2023/24. The report also records other support provided by the Trust's PALS & Complaints Team during the year.

At the beginning of October 2023, the Patient Support & Complaints Team rebranded as the PALS & Complaints Team. As a result of this, in January 2024, the following changes were made, which impact on reporting and are therefore important to note at the outset of this report:

- > Enquiries previously recorded as requests for advice/information/support are now recorded as PALS Enquiries.
- A proportion of cases previously recorded as Informal Complaints, but which can be resolved quickly without the need to go to divisions for investigation, are now recorded as PALS Concerns.
- This report has historically reported the number of compliments and requests for medical records received by the team. These are no longer recorded by the PALS & Complaints Team or included in quarterly and annual reports. Compliments are now forwarded to the relevant division to acknowledge, and enquirers requesting medical records are provided with details of how to do this and are given contact details for the SAR team should they require assistance.

### In summary:

- At the time of this report, 2,089 complaints had been received by the Trust in the year 2023/24, averaging 174 per month<sup>1</sup>. Of these, 757 were managed via the formal investigation process, 1,221 through the informal investigation process and 111 were dealt with as PALS Concerns. Overall, this represents an increase of just over 10% compared with the 1,898 complaints received in 2022/23.
- In addition, the PALS & Complaints Team dealt with 1,602 other enquiries, including 94 compliments (up until Jan 2024), and 1,508 requests for support / information / advice and feedback (recorded as PALS Enquiries from Jan 2024); this represents a further 13.2% increase compared with the 1,415 enquiries dealt with in 2022/23, which was itself a 28.6% increase on the year before. The PALS & Complaints Team also received and recorded an additional 902 enquiries which did not proceed after being recorded (a small increase on the previous year). This means that the team dealt with a total of 4,593 separate new enquiries during 2023/24; an average of 383 per month, representing an increase of just under 10% when compared with the previous year.
- In addition to the 4,593 enquiries received in Bristol, the PALS service at Weston General Hospital (WGH) received a total of 382 concerns in 2023/24, a 4.5% decrease compared with the 400 reported in 2022/23, which was itself a 22% decrease on 513 in 2021/22. Weston PALS also dealt with 176 requests for information and advice.
- In total, the corporate PALS & Complaints Team in Bristol and the WGH PALS service received a combined total of 5,151 separate new enquiries in 2023/24; an overall increase of 12.5% on the 4,581 reported in 2022/23.

<sup>&</sup>lt;sup>1</sup> This total figure has subsequently been subject to a small upwards adjustment to 2,123 as reported in the Quality Account 2023/24, which took into account final data validation.

- In 2023/24, the Trust had six complaints referred to the Parliamentary and Health Service Ombudsman (PHSO), compared with the 10 cases referred the previous year. During the 2023/24, another three cases were closed by the PHSO and at the end of the year 2023/24, just two cases remained under investigation by the PHSO. All three of the cases closed during this period were closed with an outcome of 'no further action,' meaning that the PHSO did not consider a full investigation necessary.
- 482 complaints were responded to via the formal complaints process in 2023/24 and 71.6% of these (345) were responded to within the agreed timescale. This is very similar to the 71.1% achieved in 2022/23 and remains some way off the Trust target of 95% (reduced to 90% from Oct 2023). A total of 905 complaints were responded to in 2023/24 via the informal complaints process and 84.9% of these (768) were responded to within the agreed timescale; a slight deterioration on the 86.4% 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. In 2023/24, almost 64% of all complaints received were managed via either the informal process or as a PALS concern.
- At the end of the reporting year, 9.7% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 42 of the 434 first formal responses sent out during the reporting period and compares with 11.4% reported in 2022/23 and 8.4% in 2021/22.

# **Annual Complaints Report 2023/24**

# 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 PALS & 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 PALS & Complaints leads the PALS & Complaints Team, which consists of a PALS & Complaints Manager, seven complaints officers/caseworkers and three administrators. The total staff resource is currently 9.4 WTE, the same as reported in 2022/23.

The PALS service at Weston General Hospital is managed separately as part of the Weston Management Team.

# 2. Complaints reporting

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

- Total number of complaints received
- Percentage of complaints responded to within the agreed timescale (formal, informal and PALS concerns)
- 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, which meets monthly:

- Quarterly Complaints Report, identifying themes and trends (which is also received by the Quality and Outcomes Committee of the Board)
- Annual Complaints Report (which is also received by the Trust's Clinical Quality Group and Trust 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 2023/24

The total number of complaints received during the year was 2,089, a 10% increase on the 1,898 complaints received the previous year. Of these, 757 (36.2%) were managed through the formal investigation process and 1,332 (63.8%) through either the informal investigation process or as a PALS concern; this compares with 679 (35.8%) complaints managed formally in 2022/23 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 35 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.

A PALS Concern is a straightforward enquiry that can be quickly resolved by the PALS & Complaints Officer contacting the ward/department directly without needing to go via the divisional team.

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 and as PALS concerns, over the same period, as well as the overall total.

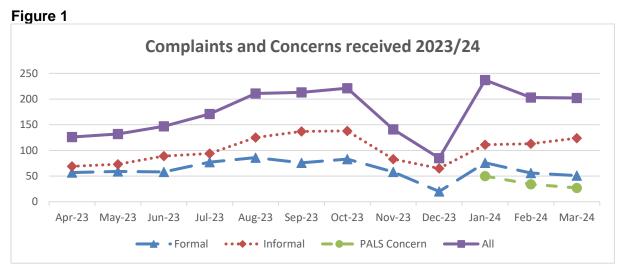


Table 1 below shows the number of complaints received by each of the Trust's divisions compared with the previous year. Directional arrows indicate change compared to the previous financial year. The data shows that the Trust continues to deal with the majority of complaints via the informal process; this is guided mainly by complainant preference. The overall percentage of complaints managed informally or as a PALS concern remained at slightly under 64% in 2023/24, compared with 64.2% in 2022/23. This means that 36.2% of complaints were managed through the formal complaints process, compared with 35.8% in 2022/23, with all divisions seeing increases in the number of formal complaints, with the exception of Women's & Children's.

Table 1 - Breakdown of complaints by Division

Division	Informal complaints / PALS concerns 2023/24	Informal complaints 2022/23	Formal complaints 2023/24	Formal complaints 2022/23	Divisional total 2023/24	Divisional total 2022/23
Surgery	388 ↑	324 🖖	170 🛧	125 🛧	523 ↑	449 🖖
Medicine	326 ↑	309 ↑	174 🛧	159 🛧	463 ₩	468 🛧
Specialised Services	184 =	184 ♥	76 ↑	63 ↑	237 ₩	247 ₩
Women & Children	227 🛧	187 ♥	148 ₩	163 🛧	357 ♠	350 ₩
Diagnostics & Therapies	107 🛧	100 🛧	31 🛧	19 🔨	127 🛧	119 🛧
Weston	28 ₩	57 ₩	132 🛧	130 🛧	157 ₩	187 ₩
Trust Services (inc. Estates & Facilities)	72 ♠	58 ♥	26 ↑	20 🛧	94 🛧	78 🛧
TOTAL	1,332	1,219 🗸	757	679 ↑	2,089 🛧	1,898 🛧

# 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 subcategories, 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 2023/24 by primary category, compared with 2022/23 and 2021/22.

Table 2 - Complaint themes

Complaint Theme	Total Complaints 2023/24	Total Complaints 2022/23	Total Complaints 2021/22
Clinical Care	749 🛧	650 🛧	612 🛧
Appointments and Admissions	601 🛧	526 🔨	482 🔨
Attitude and Communication	445 🔨	384 ₩	390 ₩
Facilities and Environment	117 🛧	106 ₩	127 🛧
Information and Support	64 ₩	91 🗸	109 🖖
Discharge/Transfer/ Transport	59 ₩	<b>71 ↓</b>	74 🔨
Documentation	45 ₩	63 🛧	41 ₩
Access	9 🛧	7 ₩	38 🛧
TOTAL	2,089 🛧	1,898 🛧	1,873 🛧

As in previous years, the 'top three' categories for complaints remained consistent, with similar percentage increases in all three. Complaints about 'clinical care increased by 15.2%,

'appointments and admissions' by 14.3% and 'attitude and communication' by 15.9%. These increases are greater than the overall increase of 10% for all complaints received.

The most notable annual decrease was in the category of 'information and support;' with a decrease of just under 30% compared with 2022/23. This category includes complaints about being unable to find out information about the patient or clinical information, as well as invoicing of non-NHS patients and expenses claims.

# 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 the national standard of three working days.

In 2023/24, 92% (1,922 of 2,089) of complaints were acknowledged within this timescale, similar to the 92.4% reported in 2022/23. Those complaints not acknowledged within this timescale are reviewed on a monthly basis by the Head of PALS 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 35 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 90% 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 90% compliance, for both formal and informal complaints.

Over the course of the year 2023/24, 71.2% of formal responses were responded to within the agreed timescale (345 of 482), compared with 71.1% in 2022/23 and 62.8% in 2021/22.

Of the 905 complaints responded to via the informal complaint process in 2023/24, 84.9% (768) were responded to within the agreed timescale, a slight deterioration on the 86.4% reported the previous year.

The main factor in divisional performance in respect of complaint responses against the target of 95% (90% with effect from January 2024), 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.

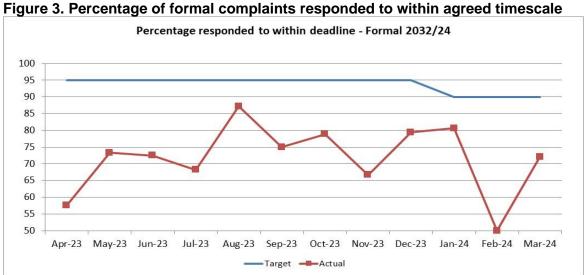


Figure 4. Percentage of informal complaints responded to within agreed timescale Percentage responded to within deadline - Informal 2023/24 100 80 70 60 50 Apr-23 Mv 23 lun-23 Jul-23 Aug-23 Sep-23 Oct-23 Nov-23 Dec-23 Jan-24 Feb-24 Mar-24

# 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, 9.7% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 42 of the 434 first formal responses sent out during the reporting period, compared with 11.4% reported in 2022/23 and 8.4% in 2021/22.

Each dissatisfied (second) response is 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 2023/24, the Trust has carried out 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 will continue in 2024/25.

# 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 2023/24, the Trust had six complaints referred to the PHSO, compared to 10 cases referred the previous year.

During 2023/24, another three cases were closed by the PHSO and at the end of the reporting year, just two cases remained under investigation by the PHSO.

Of the three cases closed during this period, all three had an outcome of 'no further action,' meaning that the PHSO did not consider a full investigation necessary after an initial review of the case.

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 PALS & Complaints Team also receives compliments and requests for advice, information, and support. As explained at the beginning of this report, with effect from January 2024, compliments are now sent directly to divisions and cases previously recorded as requests for information/advice/support are now recorded as PALS Enquiries. 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 2023/24 is shown below, together with figures from 2022/23 and 2021/22 for comparative purposes:

Table 3:

Type of enquiry	Total received 2023/24	Total received 2022/23	Total received 2021/22
Request for information/advice/support / PALS Enquiries	1,508 ^	1,125 🛧	906 ↓
Compliments	94 ♥ (but no longer recorded by the team)	290 ↑	194 ♥
Did not proceed	902 🛧	868 ₩	869 ↑
Total	2,504	2,283	1,969

### 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.

# 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 again been challenging for the PALS & Complaints Team. 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 add to the stress of raising concerns about healthcare; people need timely answers, and this remains the team's key priority to address in 2024/25.

The beginning of June 2024 saw the exciting launch of the Experience of Care Strategy 2024-2029. The strategy delivery plan includes as series of 'milestones' for improving how we handle, respond to and learn from complaints and concerns. The strategy and delivery plan can be found at <a href="https://www.uhbw.nhs.uk/p/latest-news/uhbw-launch-new-experience-of-care-strategy">https://www.uhbw.nhs.uk/p/latest-news/uhbw-launch-new-experience-of-care-strategy</a>