

ANNUAL COMPLAINTS REPORT 2024/25

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Executive Summary

In accordance with Regulation 18 of the 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 2024/25. The report also records other support provided by the Trust's PALS & Complaints Team during the year.

In summary:

- 2,242 complaints were received by the Trust in the year 2024/25, averaging 187 per month. Of these 2,242 complaints, 455 were managed via the formal investigation process, 1,408 through the informal investigation process and 379 were dealt with as PALS Concerns. Overall, this represents an increase of 7.3% compared with the 2,089 complaints received in 2023/24.
- In addition, the PALS & Complaints Team dealt with 405 other enquiries, including 344 PALS Enquiries (previously reported as requests for support / information / advice) and 61 pieces of feedback. This is much lower than the 1,602 reported for 2023/24, due to the fact that the team no longer records compliments or requests for copies of medical records, which are now sent directly to divisions and to the Access to Health Records (AHR) Team as appropriate. The PALS & Complaints Team also received and recorded an additional 1,020 enquiries which did not proceed after being recorded (an increase of just over 13% on the previous year)¹. This means that the team dealt with a total of 3,667 separate new enquiries during 2024/25; an average of 305 per month, representing an overall decrease of 20% when compared with the previous year.
- In addition to the 3,667 enquiries received in Bristol, the PALS service at Weston General Hospital (WGH) received a total of 499 concerns in 2024/25, an increase of just under 31% compared with the 382 reported in 2023/24². Weston PALS also dealt with 342 requests for information and advice.
- In total, the corporate PALS & Complaints Team in Bristol and the WGH PALS service received a combined total of 4,508 separate new enquiries in 2024/25; an overall decrease of 12.5% on the 5,151 reported in 2023/24.
- In 2024/25, the Trust had 10 complaints referred to the Parliamentary and Health Service Ombudsman (PHSO), compared with the six cases referred the previous year. During the period 2024/25, another three cases were closed by the PHSO and at the end of the year 2024/25, six 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.
- 431 complaints were responded to via the formal complaints process in 2024/25 and 56.8% of these (245) were responded to within the agreed timescale. This represents a deterioration on the 71.6% achieved in 2023/24 and 71.1% in 2022/23 and remains below the Trust target of 90%.

¹ Since 1st April 2025, the team no longer records new complaints until they have consent (where appropriate) and full details to allow the case to proceed to investigation. This change will be reflected in the 2025/26 report.

² With effect form 1st April 2025, Weston PALS Concerns will be incorporated into the overall monthly, quarterly and annual reporting of complaints. This change will also be reflected in the 2025/26 report.

- A total of 1,169 complaints were responded to in 2024/25 via the informal complaints process and 87.1% of these (1,018) were responded to within the agreed timescale; an improvement on the 84.9% achieved in 2023/24 and 86.4% the previous year.
- 338 PALS concerns were responded to during 2024/25, with 316 of these (93.5%) being responded to within the target of five working days. This is the first full year of data available for this metric.
- The Trust continues to deal with a higher proportion of complaints via the informal process and PALS concerns, which means that these issues are resolved as quickly as possible and by the specialty managers responsible for the service involved. In 2024/25, 79.7% of all complaints received (1,787 of 2,242) were managed via either the informal process or as a PALS concern.
- At the end of the reporting year, 12.2% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 53 of the 433 first formal responses sent out during the reporting period and compares with 9.7% reported in 2023/24 and 11.4% reported in 2022/23.

Annual Complaints Report 2024/25

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 and Midwife.

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 at the end of 2024/25 consisted of a PALS & Complaints Manager, eight complaints officers/caseworkers, a senior administrator and three administrators. The total staff resource is currently 11.6 WTE, an increase on the 9.4 WTE reported for the last two years.

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 formal complaints responded to within the agreed timescale

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).

3. Total complaints received in 2024/25

The total number of complaints received during the year was 2,242, a 7.3% increase on the 2,089 complaints received the previous year. Of these, 450 (20%) were managed through the formal investigation process and 1,787 (80%) through either the informal investigation process or as a PALS concern; this compares with 757 (36.2%) complaints managed formally in 2023/24 and 1,332 (63.8%) managed informally.

The 455 complaints managed formally in 2024/25 is the lowest number and percentage of overall complaints managed via this route in at least the last 10 years (with the exception of the post-lockdown report of 2021/22).

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. The Trust's target is that these concerns should be resolved within a maximum of five working days.

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.

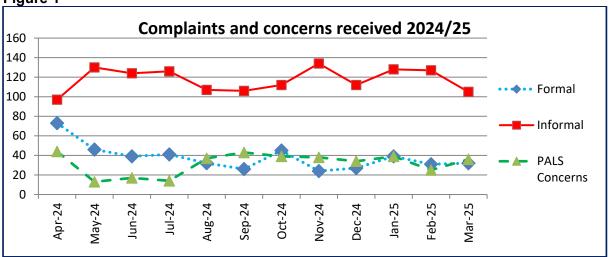


Figure 1

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 increased to 80% in 2024/25, compared with 64% in 2023/24 and 64.2% in 2022/23. This means that only 20% of complaints were managed through the formal complaints process, compared with 36.2% the previous year and 35.8% in 2022/23.

Table 1 - Breakdown of complaints by Division

Division	Informal complaints / PALS concerns 2024/25	Informal complaints/ PALS concerns 2023/24	Formal complaints 2024/25	Formal complaints 2023/24	Divisional total 2024/25	Divisional total 2023/24
Surgery	493 🛧	388 🛧	104 🗸	170 🛧	589 🛧	523 🛧
Medicine	382 🛧	326 🛧	84 🗸	174 🛧	452 🕹	463 🖖
Specialised Services	268 🛧	184 =	51 🗸	76 🛧	314 🛧	237 🗸
Women & Children	327 🛧	227 🛧	109 🗸	148 🔸	440 🛧	357 🛧
Diagnostics & Therapies	145 🛧	107 🛧	17 🗸	31 🛧	157 🛧	127 🛧
Weston	67 🛧	28 🗸	79 🗸	132 🛧	141 🗸	157 🗸
Trust Services (inc. Estates & Facilities)	105 🛧	72 🛧	11 🗸	26 🛧	109 🛧	94 🛧
TOTAL	1,787	1,332	455	757	2,226	2,089

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 2024/25 by primary category, compared with 2023/24 and 2022/23.

Table 2 - Complaint themes

Complaint Theme	Total Complaints 2024/25	Total Complaints 2023/24	Total Complaints 2022/23
Clinical Care	789 🛧	749 🛧	650 🛧
Appointments and Admissions	578 🗸	601 🛧	526 🛧
Attitude and Communication	479 🛧	445 🛧	384 🖌
Information & Support	165个	64 🗸	91 🗸
Facilities and Environment	135 🛧	117 🛧	106 🗸
Discharge/Transfer/ Transport	52↓	59 🗸	71 🗸
Documentation	37 🖌	45 🗸	63 🛧
Access	7 🗸	9 🛧	7 🗸
TOTAL	2,242 🛧	2,089 🛧	1,898 🛧

As in previous years, the 'top three' categories for complaints remained consistent, with further increases in complaints about 'clinical care, which increased by 5.3%, and 'attitude and communication,' which increased by 7.6%. However, whilst remaining in the top three categories, complaints about 'appointments and admissions' decreased by 3.8%. The most significant increase was seen in complaints about 'information and support,' which saw an increase of almost 160%. This category includes complaints about issues around clinical and hospital information requests, expenses claims and translating and interpreting amongst others.

The most notable percentage decrease was in the category of 'documentation,' which reduced by 17.8%. This category includes complaints about missing medical records, appointment letters sent to the wrong address, and incorrect entries in patient notes.

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 2024/25, 91% of complaints (2,026 of 2,226) were acknowledged within this timescale, similar to the 92.1% reported in 2023/24.

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. All PALS concerns are to be addressed as quickly as possible, and within a maximum of five 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 and PALS concerns..

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, and for PALS concerns.

Over the course of the year 2024/25, 56.8% of formal responses were responded to within the agreed timescale (245 of 431), compared with 71.2% in 2023/24 and 71.1% in 2022/23.

Of the 1,169 complaints responded to via the informal complaint process in 2024/25, 87.1% (1,018) were responded to within the agreed timescale, an improvement on the 84.9% reported the previous year. In addition, 338 PALS concerns were responded to during 2024/25 and 93.5% (316) of these were responded to within the target of five working days.

The main factor in divisional performance in respect of complaint responses against the target of 90%, 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.

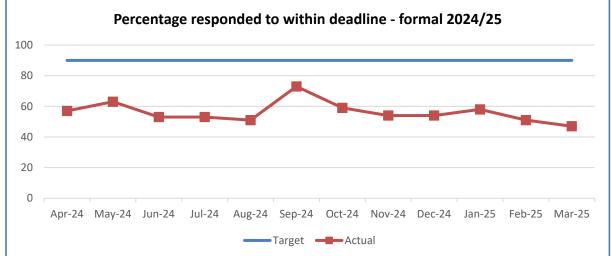
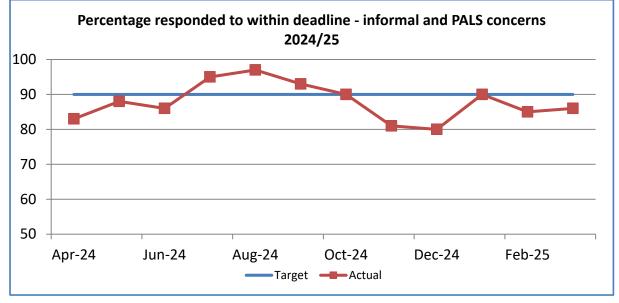


Figure 3. Percentage of formal complaints responded to within agreed timescale

Figure 4. Percentage of complaints responded to informally 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, 12.2% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 53 of the 433 first formal responses sent out during the reporting period, compared with 9.7% reported in 2023/24 and 11.4% in 2022/23.

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.

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 2024/24, the Trust had 10 complaints referred to the PHSO, compared to six cases referred the previous year.

During 2024/25, another three cases were closed by the PHSO and at the end of the reporting year, six 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 requests for advice, information, and support, 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 2024/25 is shown below, along with PALS enquiries and concerns managed by the team at Weston, together with figures from 2023/24 and 2022/23 for comparative purposes:

Type of enquiry	Total received 2024/25	Total received 2023/24	Total received 2022/23
Bristol PALS Enquiries	405 🗸	1,508 🛧	1,125 🛧
Weston PALS Enquiries	342 🛧	176 🗸	215 🛧
Weston PALS Concerns	499 🛧	382 🗸	400 🗸
Did not proceed	1,020 🛧	902 🛧	868 🗸
Total	2,266	2,968	2,608

Table 3:

8. Learning from complaints

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.

Learning from complaints is considered essential by the Trust, as they help to highlight where services, systems or communication may be falling short of our patients' expectations. They help us to identify recurring issues, implement targeted improvements and prevent future problems.

Listening to complaints shows our patients and their families that their voices matter. It also helps to build: trust and transparency, a culture of empathy and responsiveness, and services that better reflect patients' needs and expectations.

In addition, complaints can act as early warning signs of safety concerns, systemic failures and even staff training needs. Addressing these issues proactively reduces the risk of harm and potential litigation.

Encouraging open feedback in this way, even when it is negative, also fosters a culture where staff feel safe to report issues; learning is prioritised over blame; and accountability is shared and constructive.

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 continued to work hard to clear backlogs of complaints 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 the coming year.

The Trust's Experience of Care Strategy 2024-2029 launched in June 2024, includes a 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 https://www.uhbw.nhs.uk/p/latest-news/uhbw-launch-new-experience-of-care-strategy

The PALS & Complaints Team has committed to a team work plan which aims to help deliver these milestones in 2025/26. The work plan includes a commitment to implement the principles of 'Ask Listen Do' to make the complaints process more accessible to people with Learning Disabilities and Autism.