



Let's make
complaints
count!

Complaints Quarterly Report

Q4 2023/24 (January – April 2024)

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Please use the tabs along the top
to navigate through this report

Total complaints received	642	↑
Complaints acknowledged within set timescale	96.4%	=
Complaints responded to within agreed timescale – formal investigation	69.4%	↓
Complaints responded to within agreed timescale – informal investigation	85.9%	↑
Proportion of complainants dissatisfied with our response (formal investigation)	6.5%	↓

Successes

- The percentage of informal complaints resolved by the agreed deadline increased from 81.2% in Q3 to 85.9% in Q4, meaning that more patients were seeing a speedier resolution to their concerns.
- There was a further reduction in the percentage of complainants who told us they were unhappy with our original response to their complaint, from 12.1% in Q2 to 9.2% in Q3 and down again to 6.5% in Q4.
- The Division of Diagnostics and Therapies saw a 45% decrease in the number of complaints received in Q4 compared with Q3.

Opportunities

- The PALS & Complaints Team undertook a process mapping exercise with the Continuous Improvement Team during Q4, seeking efficiencies and process improvements. This work has been ongoing in Q1 of 2024/25.
- Priorities for PALS & Complaints in 2024/25 set out in draft Experience of Care Strategy (approved by Trust Board in Q1, 2024/25)

Priorities

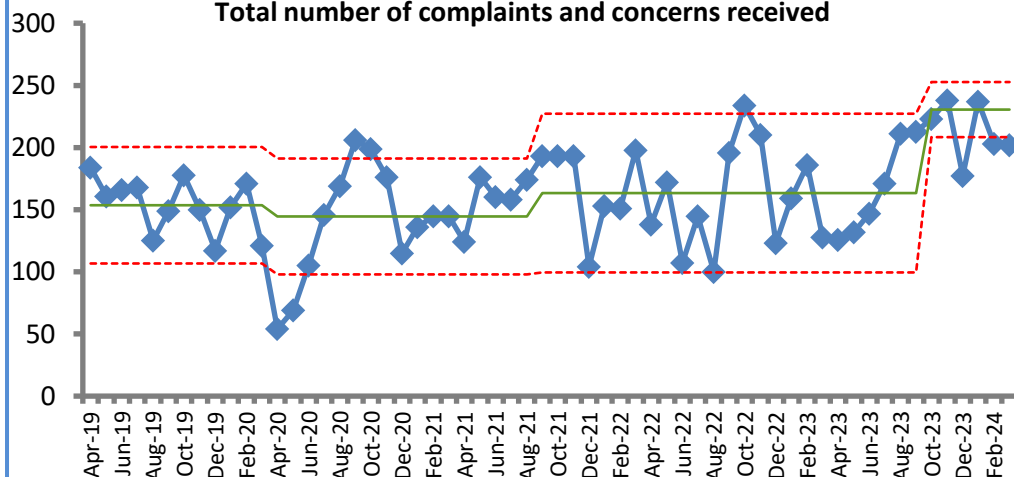
- To clear the backlog of complaints waiting to be allocated to a complaints officer and sent to divisions for investigation.
- To continue to improve performance in sending out complaint responses by the deadlines agreed with complainants.
- Roll out of the new complaint investigation report (in Q1 of 2024/25)

Risks & Threats

- During Q4, the PALS & Complaints Team continued to operate with a significant backlog in respect of cases waiting to be allocated to a caseworker.
- In Q4, there was a 44% increase in the total number of complaints received by the Trust, compared with Q3, including an 81% increase in complaints about Attitude and Communication.
- Complaints for the Division of Specialised Services increased by 61% from 57 in Q3 to 92 in Q4.
- Whilst still low in number, there was an increase in the number of high severity complaints for the Division of Women and Children, from just one in Q3, to five in Q4.

Complaints and PALS enquiries received

Total number of complaints and concerns received



What does this tell us?

In Q4, the Trust received 821 new PALS & Complaints Enquiries. These included:

- 183 formal complaints
- 348 informal complaints,
- 111 PALS concerns *that would previously have been recorded as informal complaints*
- 179 other PALS enquiries which were requests for advice, information and support.

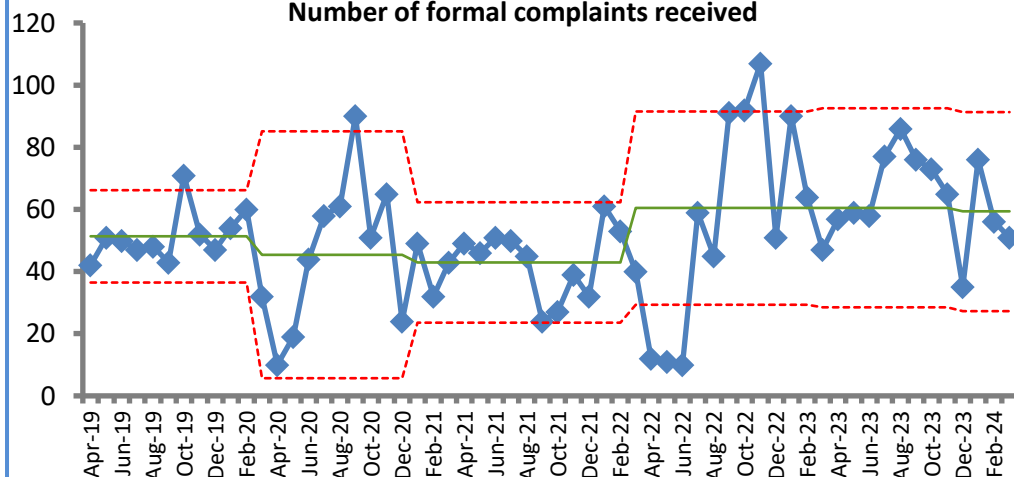
In Q4, the Trust received 642 complaints, representing an 18.5% increase on the 542 reported in Q3.

It should be noted that the 111 PALS concerns that would previously have been recorded as informal complaints represent a shift of the investigatory burden from Divisions to the PALS & Complaints Team. PALS Concerns and Enquiries have a deadline of five working days and are investigated and responded to directly by a PALS & Complaints Officer, i.e. this represents significant additional support to our Divisions.

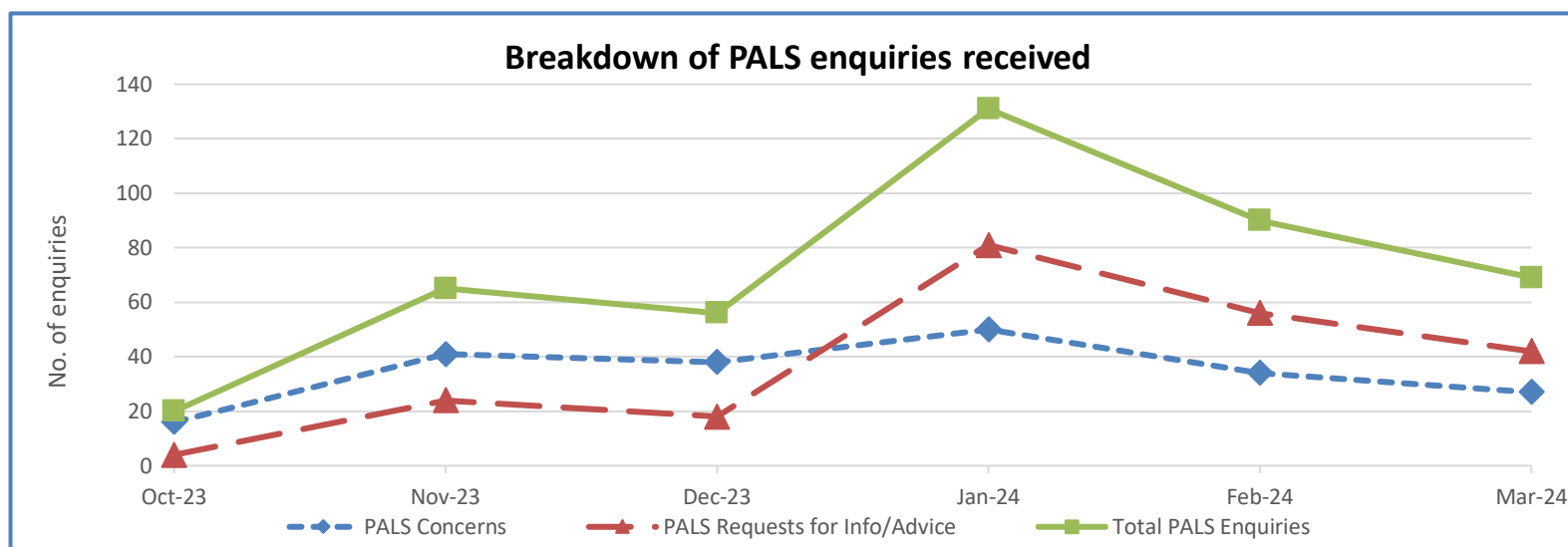
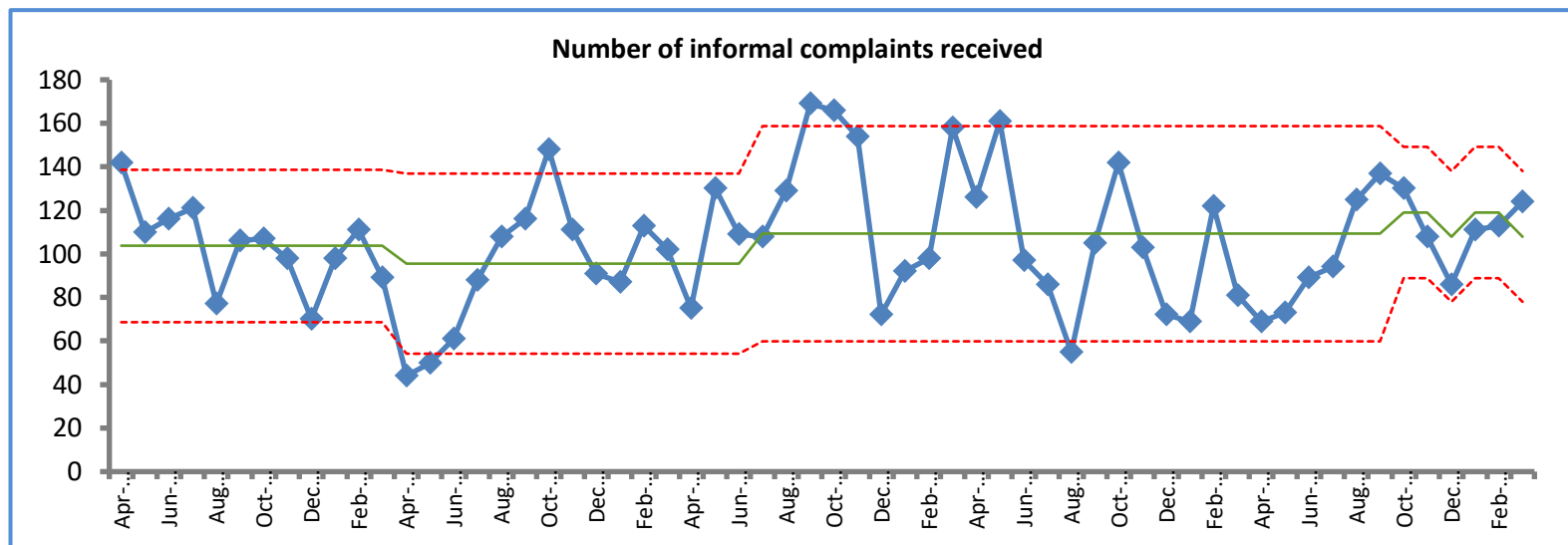
The charts on slides 3 and 4 show:

- Total complaints and concerns
- Formal complaints
- Informal complaints
- PALS concerns

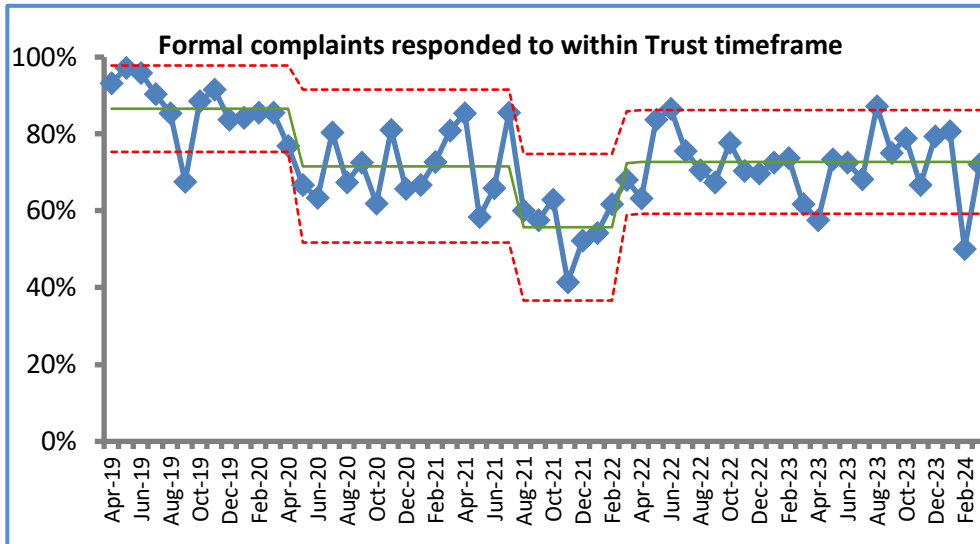
Number of formal complaints received



Complaints and PALS enquiries received (continued)



Timely investigation - Divisional performance



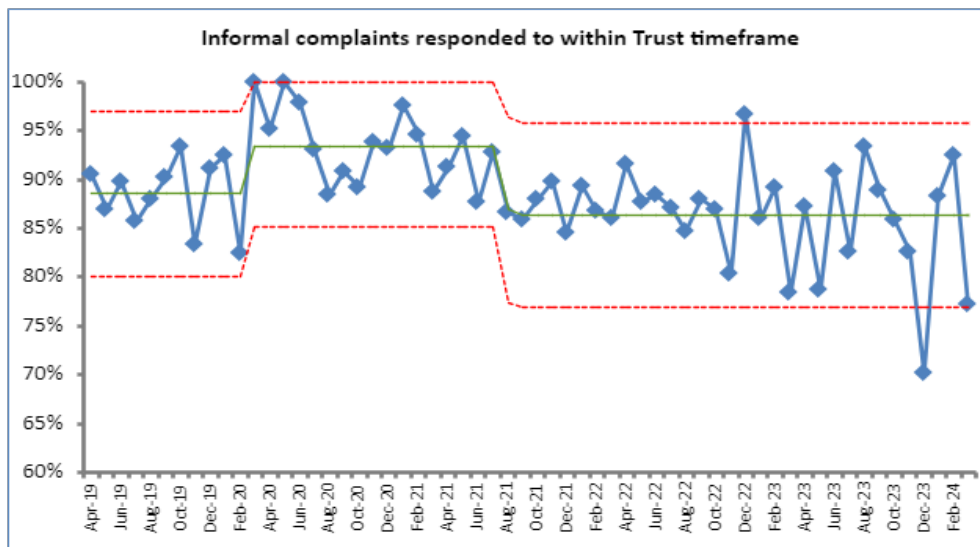
What does this tell us?

The Trust's target is for 95% of complaints to be responded to within the timeframe agreed with the complainant. This is usually 30 working days for formal complaints and 10 working days for informal resolution. However, for particularly complex complaints, or those involving more than one division, a longer timescale can be agreed between the PALS & Complaints Team and the Divisional Complaints Coordinator at the outset.

In Q4, 69.4% of formal responses were sent out within the agreed timescale, meaning that 30 responses breached the agreed deadline. This compares with 74.6% in Q3 and 66.7% during the same period a year ago.

In Q4, 85.9% of informal complaints were resolved within the agreed timescale, with 44 breaches of the agreed deadline. This is a slight improvement on the 81.2% reported in Q3 and compares with 83.2% during the same period one year ago.

The large number of breaches of deadline for complaints resolved informally continues to be disappointing. Of the 44 breaches, 17 were for Surgery, nine were for Medicine, eight were for Specialised Services, seven were for Weston Management Team and there were two for Estates & Facilities and one for Women & Children.



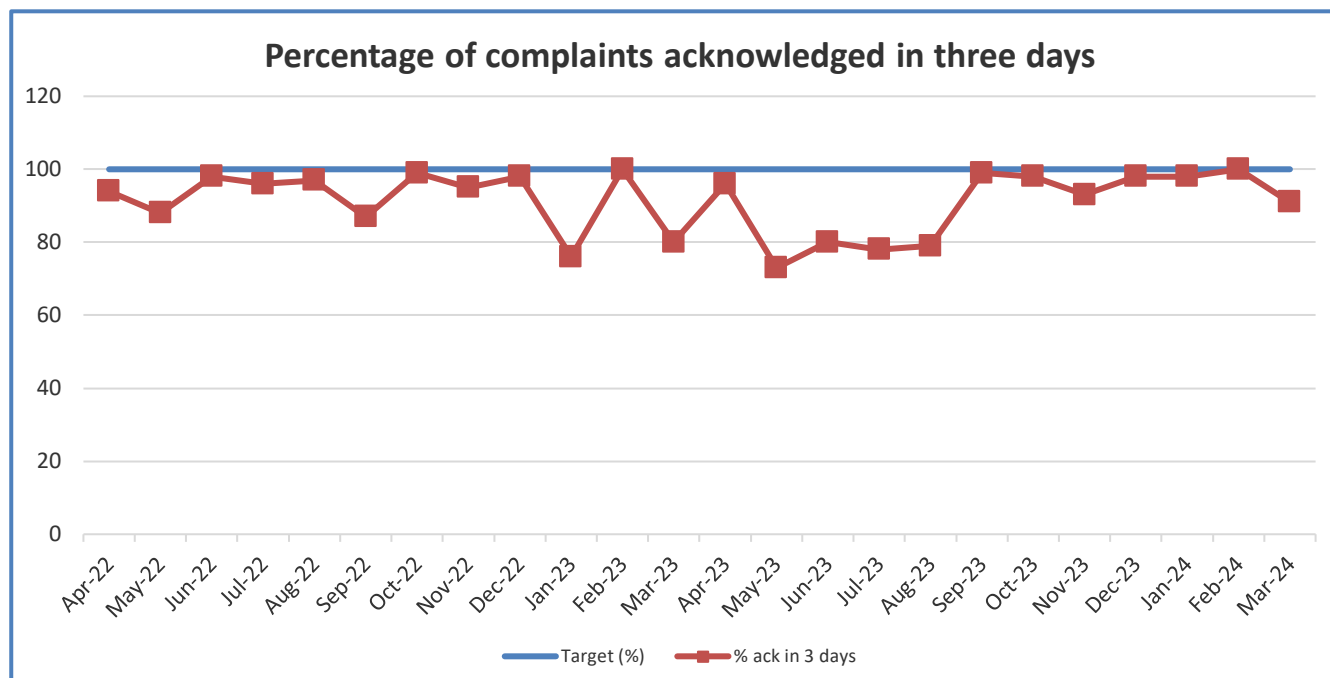
Corporate performance – PALS & Complaints Team

Acknowledgement of new complaints received

The NHS Complaints Procedure (2009) states that complaints must be acknowledged within three working days. This is also a requirement of the NHS Constitution. The Trust's own policy states that complaints made in writing (including emails) will be acknowledged within three working days and that complaints made orally (via the telephone or in person) will be acknowledged within two working days. In Q4, the PALS & Complaints Team acknowledged 96.4% of all new complaints within the nationally agreed timescale, the same percentage as reported in Q3, and a sustained improvement on the 85.9% reported in Q2.

PALS & Complaints backlogs

At the end of Q4, the PALS & Complaints Team had an administrative backlog (at the 'front end' of the complaints process) of 128 enquiries, despite this having been cleared at the beginning of the quarter. At the end of Q4, there was a second backlog of 164 cases waiting to be allocated to a Complaints Officer and sent to the divisions for investigation. A number of process changes were introduced during Q4 to streamline the PALS & Complaints service, improve efficiency and help tackle the Complaints Officer backlog; this process review is continuing in Q1 of 2024/25, supported by the Trust's Continuous Improvement Team.



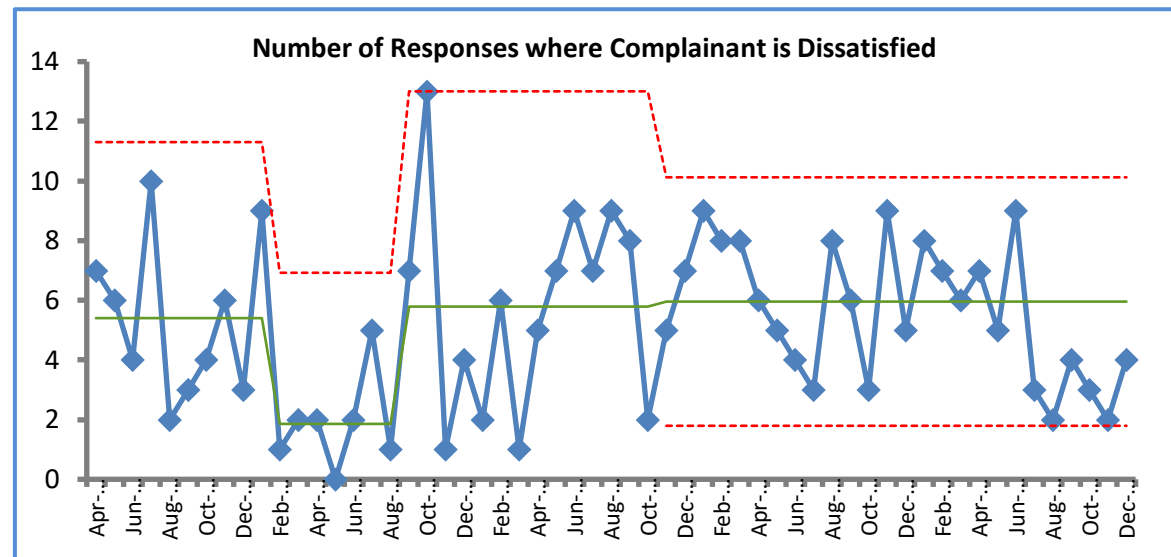
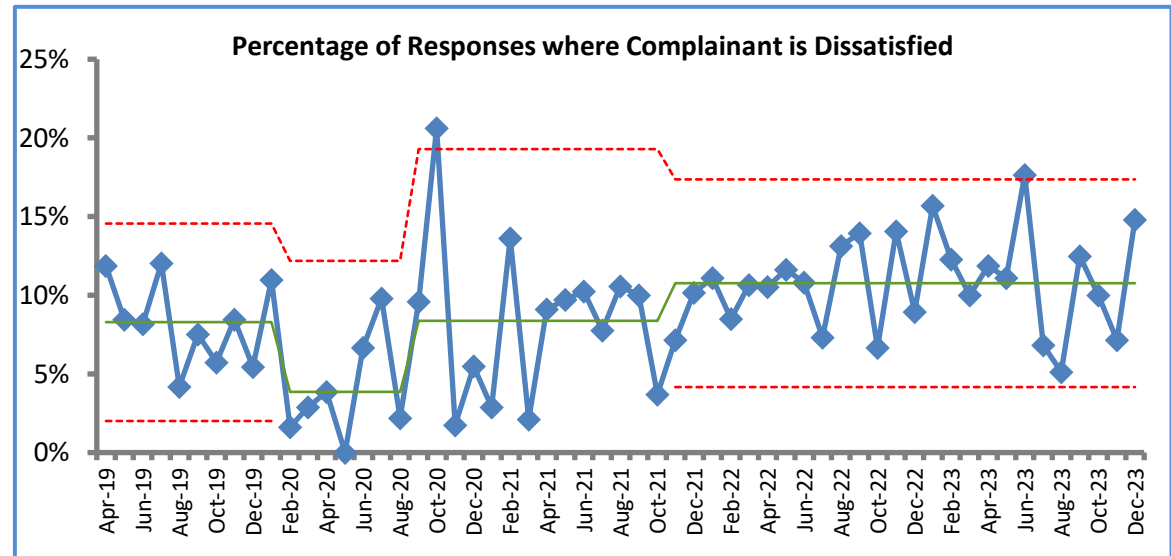
Dissatisfied complainants

What does this tell us?

The Trust's current target is that no more than 8% of complaints responses should lead to a dissatisfied response. This target is based on analysis of dissatisfied responses received by the Trust. Data is reported two months in arrears to capture the majority of cases where, having considered the findings of our investigations, complainants tell us they are not happy with our response. In Q4 we are therefore reporting dissatisfied data for November and December 2023 and January 2024. Of the complainants who received a first response from the Trust during those months, seven contacted us to say they were dissatisfied, representing 6.5% of the 107 first responses sent out during that period, a further improvement on the 9.2% reported in Q3 and 12.1% in Q2.

Actions planned or taken:

The Head of Complaints or the Associate Director for Quality continue to review all draft responses to dissatisfied complainants and work closely with divisions to identify any learning. Panels currently being planned for 2024/25 will include lay representation. In the meantime, the percentage of dissatisfied cases has consistently decreased for the last three quarters.



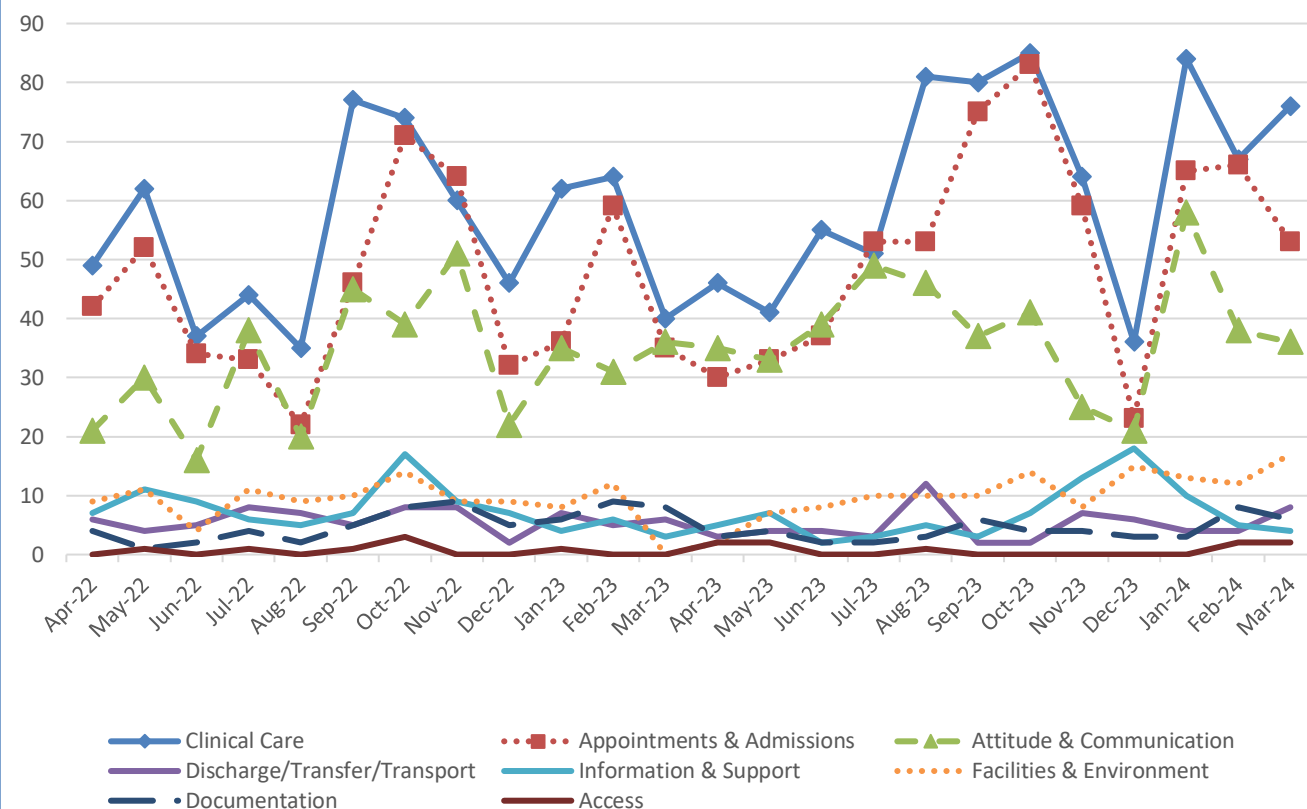
Thematic analysis

What does this tell us?

The highest numbers of complaints and concerns received by the Trust are consistently in three of the eight primary categories, those being 'Clinical Care', 'Appointments and Admissions' and 'Attitude and Communication'. These three categories accounted for 85% (543 of 642) of all complaints and concerns received in Q4 of 2023/24. In Q4, the highest number of complaints and concerns received by sub-category within each of these three primary categories were 'clinical care – medical/surgical' (113 of 227), 'cancelled or delayed appointment/operation' (122 of 184) and 'communication with patient/relative' (47 of 132).

Following a notable 38% reduction in Q3, complaints and concerns received in the category of Attitude and Communication increased by 81% Q4 (from 73 to 132). In addition, complaints in the category of Clinical Care increased by 35% and Appointments and Admissions by 37%.

Complaints by category



SPORT	Complaints metrics	Complaint themes	Divisional data	Learning and looking forward	Other activity
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Divisional complaints metrics

Q4 2023/24	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Weston
Total number of complaints received in Q4	184 (140) ↑	152 (140) ↑	92 (57) ↑	126 (100) ↑	23 (42) ↓	38 (26) ↑
Number of complaints about appointments and admissions	79 (46) ↑	20 (38) ↓	40 (18) ↑	39 (32) ↑	5 (12) ↓	1 (1) =
Number of complaints about staff attitude and communication	30 (15) ↑	48 (19) ↑	10 (12) ↓	24 (14) ↑	6 (10) ↓	8 (5) ↑
Number of complaints about clinical care	51 (43) ↑	55 (52) ↑	33 (16) ↑	56 (43) ↑	8 (13) ↓	22 (15) ↑
Area where the most complaints have been received in Q4	Bristol Dental Hospital (BDH) – 33 (25) Bristol Eye Hospital (BEH) – 23 (16) Trauma & Orthopaedics – 23 (8) ENT Outpatients – 18 (25) BEH Outpatients – 13 (20) Ward A602/A604 – Orthopaedics – 11 (1) Clinic A407 – 7 (0) Lower GI – 7 (2) QDU- Endoscopy – 6 (2)	Emergency Department (BRI) (inc. Same Day Emergency Care - SDEC) – 50 (29) Sleep Unit – 15 (14) Dermatology – 14 (16) Clinic A410 – 10 (6) Unity Sexual Health – 9 (11) Ward A400 – Acute Medical Unit (AMU) – 7 (9)	BHI (all) - 70 (38) BHI Outpatients (inc. Outpatient Echo) – 39 (21) Ward C705 – Cardiology – 6 (3) BHOC (all) – 20 (19) BHOC Outpatients & Chemo Day Unit – 11 (11) Plus one each for Clinical Genetics and ECG Dept (WGH)	BRHC (all) – 73 (57) (Plus one for WGH Seashore Centre) Children’s ED – 14 (11) Carrousel Outpatients - 9 (7) Caterpillar Ward – 5 (5) StMH (all) – 47 (37) (Plus one for Community Midwifery and four for Gynae Outpatients at WGH) Gynae Outpatients (inc. WGH) – 23 (15) Central Delivery Suite – 5 (3)	Radiology – 13 (14) Audiology – 4 (4) Boots Pharmacy BRI – 4 (17) – taken over by Lloyds Pharmacy in April 2024. Next report will therefore show complaints for Lloyds.	Accident & Emergency (inc. AMU) – 16 (10)
Notable deteriorations compared with Q3	Trauma & Orthopaedics – 23 (8) Ward A602/A604 – Orthopaedics – 11 (1) Clinic A407 – 7 (0)	Emergency Department (BRI) (inc. Same Day Emergency Care - SDEC) – 50 (29)	BHI Outpatients (inc. Outpatient Echo) – 39 (21)	Gynae Outpatients (inc. WGH) – 23 (15)	No notable deteriorations	Accident & Emergency (inc. AMU) – 16 (10)
Notable improvements compared with Q3	No notable improvements	Respiratory (Clinic A221) – 4 (8)	No notable improvements	No notable improvements	No notable improvements	No notable improvements

“Due to my condition, I have frequent falls, resulting in multiple visits to the Emergency Department (ED). However, the staff seem to think I am a drug seeker, and this is how they treat me. My GP and I even met with one of the ED consultants, who put a letter on my notes so that staff would be aware that my attendances are genuine. Sadly, this has not always made a difference to the way the staff treat me.”
Regular patient at Bristol Royal Infirmary ED



1. Learning from incidents poster produced for ED, reminding staff not to make presumptions about why a patient is attending the department.
2. Watermarks added to old Patient Support Plans (PSPs) so that staff can easily see which is the current one.
3. Patient's PSP updated to reflect current health and social issues.
4. Patient's feedback about staff bullying shared with the Clinical Lead.

“I was in a great deal of pain so when the staff wanted to manipulate my arm, so I asked if it could wait until the next day. I was then told that I had refused to have this carried out at all. I also developed diabetic ketoacidosis, but it was only because I told them my glucose was high that I received treatment for this. I was also given so many different painkillers that the pain specialist nurse was horrified.”
Inpatient on Hutton and Harptree wards at WGH



1. Introduction of red tabards for staff during medication rounds to reduce interruptions.
2. Ward Sister reviewed staff understanding of self-administration of medicines by checking with patients if they had been supported to administer their own insulin.
3. Details of complaint shared with orthopaedic staff regarding communication with patients.

“We were blocked from a fertility referral due to being just 1lb overweight. We finally became pregnant before seeing anyone, but the baby did not survive. They now won't see us for two years because we conceived, despite our baby dying. The nursing assistant took hours to enter all the info into two separate systems, neither of which were referred to by the StMH team and the Early Pregnancy Clinic (EPC) treated us very poorly.”
Couple attending EPC at St Michael's Hospital



1. The Lead Specialist Midwife developed a short training session for nursing assistants supporting the EPC, to include reflections on how we talk to patients and how they way in which we ask them questions might make them feel
2. EPC Lead Consultant has reviewed the surgical management of miscarriage information provided, including an explanation on likely waiting times for the procedure on the day.

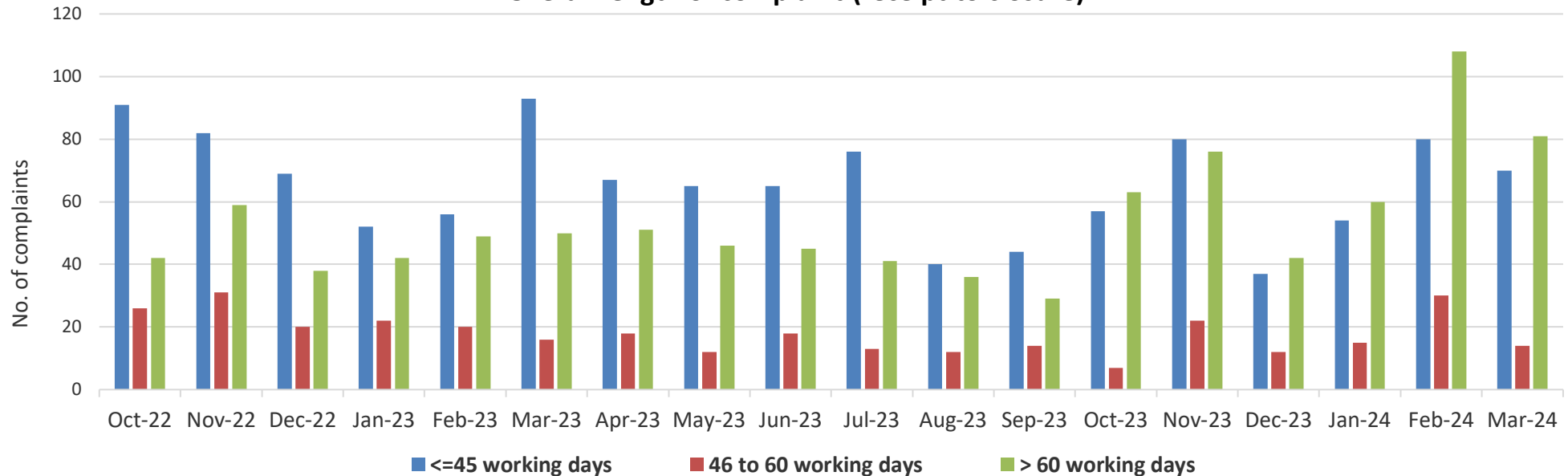
Overall timescales for complaints and concerns

How long does it *really* take to resolve complaints?

On slide 5, we looked at how the Trust performs against its target of responding to complaints and concerns within the timescale agreed with the complainant. However, this only tells part of the story, as the 'clock only starts ticking' for formal and informal complaints when they are sent to the division for investigation. The chart below shows how long it takes the Trust to resolve complaints and concerns from the moment they are received until we respond to the issues raised, either via the formal or informal complaints process or as a PALS concern.

Whilst most complaints and concerns have historically been resolved in less than 45 working days, the challenge has been to reduce the number which take 60 working days or more. There are several factors that contribute to the timeline of a complaint, even before it is sent to the division, including any backlog in PALS & Complaints, along with waiting for patient consent, and the time taken to agree full details of the issues and questions the complainant wishes us to address. As can be seen from the chart below, the impact of the PALS & Complaints Team's backlog is now clearly showing in the increased number of complaints taking over 60 days to resolve.

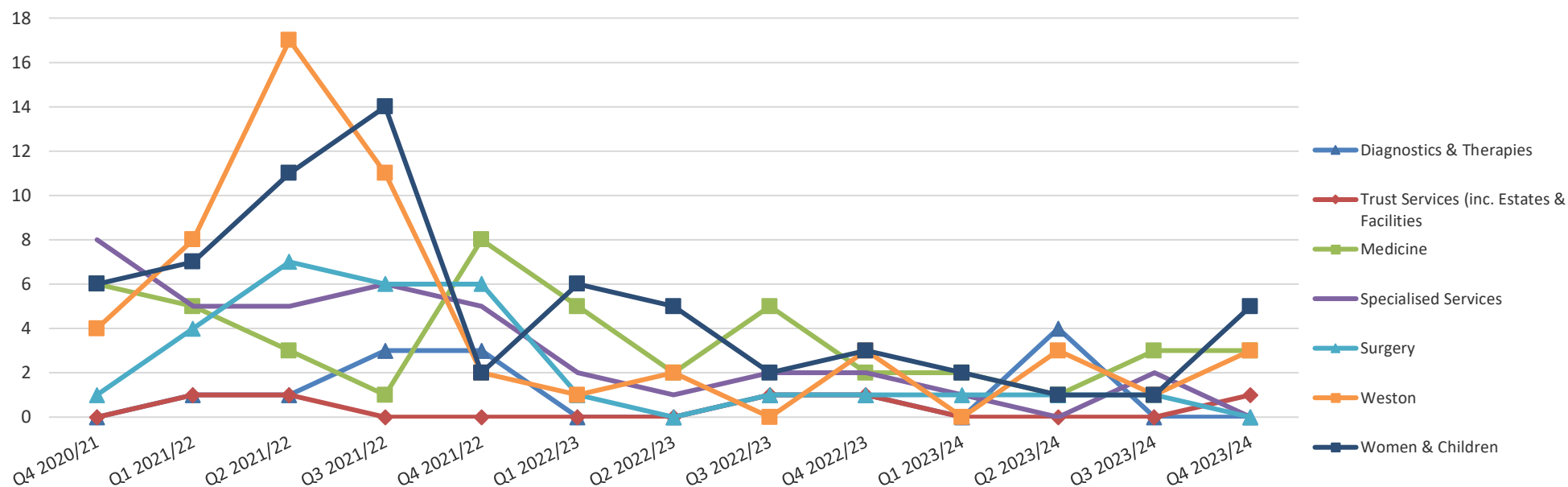
Overall length of complaint (receipt to closure)



Severity of complaints

We know from NHS data that trusts with high levels of incident reporting have fewer instances of severe harm to patients, i.e., organisations with cultures that encourage reporting when things go wrong, learn, and provide safer care. London School of Economics (LSE) research suggests a similar pattern of data associated with patient complaints, i.e., Trusts who receive high levels of low-level severity complaints receive lower levels of high severity complaints, again indicating that a culture of openness to receiving and learning from complaints is associated with safer and higher quality care. Put another way, receiving complaints should not be viewed as a bad thing *per se*; rather it depends what the complaint is about. PALS & Complaints record the severity rating of all complaints, as either high, medium or low severity. The chart below shows the number of complaints rated as being 'high severity', by division. The long-term trend in all divisions is towards lower levels of severity in reported complaints, which is a key source of assurance about quality of care, learning and improvement. A total of 12 complaints received during Q4 were classed as 'high severity', representing just under 2% of all complaints received in that period; with the most notable increase being for the Division of Women & Children (from one in Q3 to five in Q4); although numbers across all divisions remain very low.

High severity complaints by division



PALS & Complaints Team activity and PHSO cases

Overall PALS & Complaints Team activity

Including complaints, concerns, requests for information or advice, requests for support, compliments, feedback, and cases that did not proceed, the PALS & Complaints Team received 1,090 new enquiries in Q4 of 2023/24, as shown in the charts below. A sharp rise in January 2024 led to this 27% increase on the 860 enquiries received in Q3, despite the team no longer recording compliments, requests for medical records and other enquiries that are appropriately signposted to the correct area, as reported in Q3.

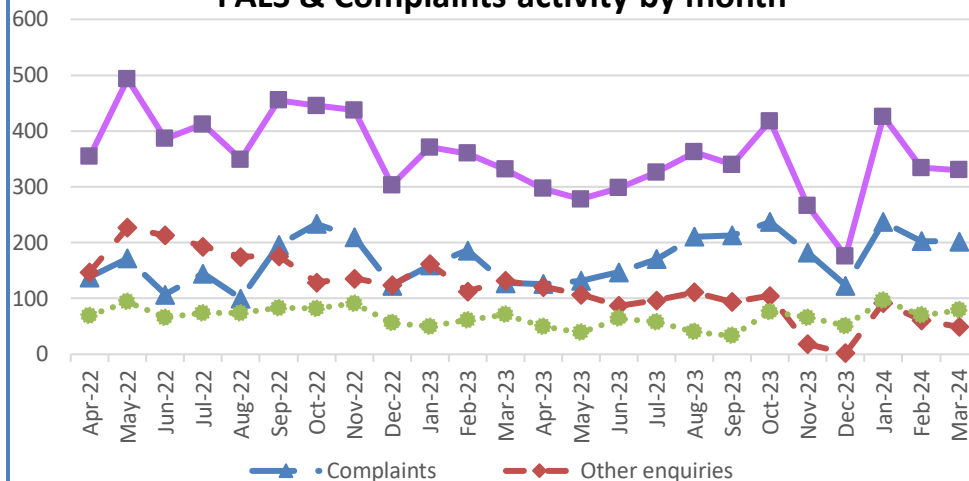
Did Not Proceed (DNP) enquiries

Each month, the PALS & Complaints Team records a number of enquiries and complaints which subsequently do not proceed. These are cases where following initial receipt, the team has been unable to establish contact with the enquirer to obtain enough information to proceed, or where they have not received the appropriate consent and therefore cannot proceed. In Q4 there were 246 cases which did not proceed, with a long-term goal to significantly reduce the number of DNP cases, which should be helped by the addition at the end of Q4 of mandatory fields for vital information on the team's website feedback form.

Parliamentary & Health Service Ombudsman

During Q4, as in Q3, the Trust was not advised by the Parliamentary and Health Service Ombudsman (PHSO) of new interest in any UHBW complaints. During the same period, four cases remained under review by the PHSO, and none were closed. From discussions with other Trusts, the consensus appears to be that there is very little communication and/or notification of new investigations from the PHSO at present, possibly due to the large backlog of cases that they are known to be working through.

PALS & Complaints activity by month



Did Not Proceed

