

# ANNUAL COMPLAINTS REPORT 2019/2020



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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 NHS Foundation Trust (UH Bristol) in 2019/20. The report also records other support provided by the Trust's Patient Support and Complaints Team<sup>1</sup> during the year.

In summary:

- 1,785 complaints were received by the Trust in the year 2019/20, averaging 149 per month. Of these, 552 were managed via the formal investigation process and 1,233 through the informal investigation process. This compares with a total of 1,845 complaints received in 2018/19, a decrease of 3.3%.
- In addition, the Patient Support and Complaints Team dealt with 903 other enquiries, including compliments, requests for support and requests for information and advice; this represents a 6.4% decrease on the 965 enquiries dealt with in 2018/19. The team also received and recorded an additional 618 enquiries which did not proceed after being recorded (the same amount as in 2018/19). In total, the team received 3,306 separate enquiries into the service in 2019/20; a slight decrease on the 3,428 reported the previous year.
- In 2019/20, the Trust had 14 complaints referred to the Parliamentary and Health Service Ombudsman (PHSO), representing a significant 54.8% decrease on the 31 cases referred the previous year. During the same period, coincidentally, 14 cases were closed by the PHSO. Of these 14 cases, none were upheld, one was partly upheld, and the remaining 13 fell into the category designated by the PHSO whereby they carried out an initial review but then decided not to investigate and closed their file, citing 'no further action'. At the end of the year 2019/20, 13 cases were still under investigation by the PHSO.
- 758 complaints were responded to via the formal complaints process in 2019/20 and 88% of these (667) were responded to within the agreed timescale. This is similar to the 87% achieved in 2018/19, which does not meet the Trust target of 95%. A total of 1,004 complaints were responded to in 2019/20 via the informal complaints process and 89.3% of these (897) were responded to within the agreed timescale, an improvement on the 83.5% achieved the previous year.
- At the end of the reporting year, 9.1% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 62 of the 680 first formal responses sent out during the reporting period and compares with 9.5% in 2018/19 and 9.7% in 2017/18.

<sup>&</sup>lt;sup>1</sup> i.e. UH Bristol's integrated 'PALS' and complaints team

# 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 Patient Support and Complaints Manager 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;
- 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 Patient Support and Complaints Manager line manages a team which consists of five part-time complaints officers/caseworkers (Band 5) and two part-time administrators (Band 3). The total team resource, including the manager, is currently 6.48 WTE. However, there is also a long-standing vacancy for a full time band 6 Deputy Manager and once this post is filled, the total team resource will be 7.48 WTE.

# 2. Complaints reporting

Each month, the Patient Support and Complaints Manager reports the following information to the Trust Board:

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

In addition, the following information is reported to the Patient Experience Group, which meets every three months:

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

The Quarterly Complaints Report provides an overview of the numbers and types of complaints received, including any trends or themes that may have arisen, including analysis by Division and information about how the Trust is responding. The Quarterly Complaints Report is also reported to the Trust Board and published on the Trust's web site.

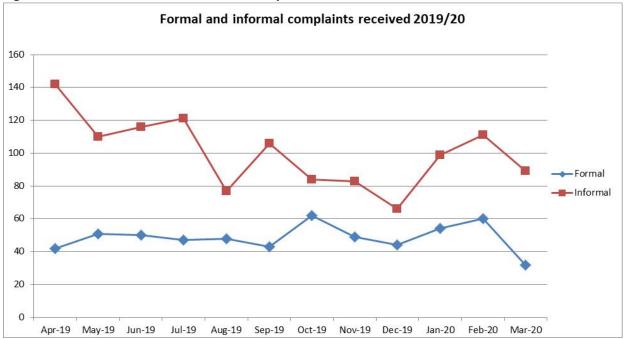
#### 3. Total complaints received in 2019/2020

The total number of complaints received during the year was 1,785, a decrease of 3.3% on the 1,845 complaints received the previous year. Of these, 552 (30.9%) were managed through the formal investigation process and 1,233 (69.1%) through the informal investigation process; this compares with 702 (32.3%) complaints managed formally in 2018/19 and 1,143 (67.7%) managed informally.

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

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

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



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

Table 1 below shows the number of complaints received by each of the Trust's divisions compared with the previous year. Directional arrows indicate change compared to the previous financial year.

Division	Informal	Informal	Formal	Formal	Divisional	Divisional
	complaints	complaints	complaints	complaints	total	total
	2019/20	2018/19	2019/20	2018/19	2019/20	2018/19
Surgery	445 🛧	428 🗸	168 🗸	188 🗸	613 🗸	616 🗸
Medicine	240 🗸	258 🛧	133 🛧	128 🗸	373 🗸	386 🗸
Specialised Services	225 🛧	187 🛧	64 🗸	84 🛧	289 🛧	271 🛧
Women and Children	161 🛧	148 🛧	150 🛧	143 🗸	311 🛧	291 🛧
Diagnostics and	55 🛧	53 🗸	18 🗸`	28 🛧	73 🗸	81 🛧
Therapies						
Trust Services	107 🗸	175 🛧	19 🗸	25 🛧	126 🗸	200 🛧
(including Facilities &						
Estates)						
TOTAL	1233 🗸	1249 🛧	552 🗸	596 🗸	1785 🗸	1845 🛧

Table 1 shows that most Divisions recorded an increase in the number of complaints managed via the informal complaints process. The Divisions of Medicine and Women & Children managed a higher number of complaints via the formal process than in the previous year.

The overall percentage of complaints managed both formally and informally, remained similar to 2018/19 with 30.9% dealt with via the formal process (32.3% last year) and 69.1% via the informal process (67.7% last year).

# 4. Complaint themes

The Trust records all complaints under one or more of eight high-level reporting themes, depending upon the nature and complexity of the complaint. This data helps us to identify whether any trends or themes are developing when matched against hospital sites, departments, clinics and wards.

Table 2 and Figure 2 show complaints received in 2019/20 by theme, compared with 2018/19 and 2017/18.

Complaint Theme	Total Complaints 2019/20	Total Complaints 2018/19	Total Complaints 2017/18
Appointments and Admissions	601 🛧`	571 🛧	519 🗸
Clinical Care	538 🛧	519 🛧	491 🛧
Attitude and Communication	332 🗸	384 🗸	492 🛧
Facilities and Environment	130 🗸	176 🛧	82 🗸
Information and Support	87 🗸	107 🗸	116 🗸
Discharge/Transfer/Transport	45 🛧	36 🗸	73 🗸
Documentation	41 =	41 🛧	31 🛧
Access	11 =	11 🗸	12 🗸
TOTAL	1785 🗸	1845 🛧	1817 🗸

Table 2 - Complaint themes – Trust totals

In 2019/20, there were increases in three of the eight categories – 'appointments and admissions', 'clinical care' and 'discharge/transfer/transport'. The largest increase was in complaints recorded under the category of 'appointments and admissions', with a 5.3% increase compared with last year. This category includes complaints about cancelled and delayed appointments and operations. There

were 46 fewer complaints about 'facilities and environment' with a 26.1% decrease compared with 2018/19. This category includes complaints about issues such as cleanliness, car parking, catering, smoking and premises.

#### 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 responded to within timescale

The Trust's expectation is that all complaints will be acknowledged within two working days for telephone enquiries and within three working days for written enquiries. In 2019/20, 99.7% 1,779 of 1,785) of complaints were acknowledged within these timescales, compared with 98.1% in 2018/19.

Whenever a complaint is managed through the formal resolution process, the Trust and the complainant agree a timescale within which we will investigate the complaint and write to the complainant with our findings, or arrange a meeting to discuss them. The timescale is agreed with the complainant upon receipt of the complaint and is usually 30 working days. When a complaint is managed through the informal resolution process, the Trust and complainant also agree a timescale and this is usually 10 working days.

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

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

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

Over the course of the year 2019/20, 88% of formal responses were responded to within the agreed timescale (667 of 758), compared with 87% in 2018/19 and 83% in 2017/18. Of the 1,004 complaints responded to via the informal complaint process in 2019/20, 89.3% were responded to within the agreed timescale, an improvement on the 83.5% reported the previous year.

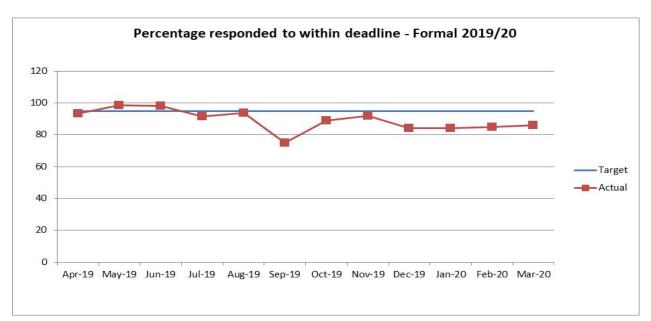
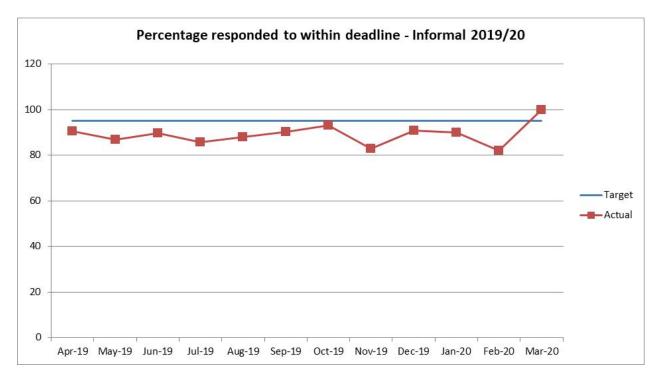


Figure 3. Percentage of formal complaints responded to within agreed timescale

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



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

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

At the end of the reporting year, 9.1% of complainants had expressed dissatisfaction with the formal response they had received. This represents a total of 62 of the 680 first formal responses sent out during the reporting period and compares with 9.5% in 2018/19 and 9.7% in 2017/18.

# 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 PHSO to carry out an independent review of their complaint.

In 2019/20, the Trust had 14 complaints referred to the Parliamentary and Health Service Ombudsman (PHSO), representing a significant 54.8% decrease on the 31 cases referred the previous year. During the same period, a total of 14 cases were closed by the PHSO. Of these 14 cases, none were upheld, one was partly upheld, and the remaining 13 fell into the category designated by the PHSO whereby they carried out an initial review but then decided not to investigate and closed their file, citing 'no further action'. At the end of the year 2019/20, 13 cases were still under investigation by the PHSO.

## 7. Information, advice and support

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

The total number of enquiries received during 2019/20 is shown below, together with figures from 2018/19 and 2017/18 for comparative purposes:

Type of enquiry	Total received 2019/20	Total received 2018/19	Total received 2017/18
Request for information/advice/support	732	780	576
Compliments	171	185	125
Did not proceed	618	618	654
Total	1,521	1,583	1,355

#### Table 3:

# 8. Learning from complaints

The Trust continues to be proactive in its management of complaints and enquiries, recognising that the way we respond to concerns and complaints is part of our commitment to excellence in customer service and acknowledging that all complaints are a valuable source of learning.

Learning from complaints can be measured by the actions taken as a result of the complaints received. Some examples of actions completed in 2019/20 are as follows:

- Following a complaint about a patient being given incorrect information at her pre-operative assessment, the Division of Specialised Services launched a booklet called 'My Heart Surgery Plan' to improve the consistency of information given to patients. At the request of surgeons, the anticipated length of stay has been added to pre-operative assessment cards so that nurses are fully aware of this when speaking to the patient (Specialised Services).
- A complaint was received on behalf of a patient with autism who also suffers with Post Traumatic Stress Disorder and has complex mental health needs. Following an operation, the patient felt that staff were not listening to her and not taking her special needs into account.

This complaint was shared anonymously with the teams who cared for her so that each team understood how negative a patient's experience could be if we do not communicate with them in a way that takes account of their specific needs. The pre-operative team was also reminded of the importance of sharing this information with the team caring for the patient post-operatively (Surgery).

- Following a complaint from a patient who underwent an angioplasty at Bristol Heart Institute (BHI), filming of a new Cardiac Rehabilitation Phase 1 film has been completed, specifically for the BHI. This is in addition to the existing film for patients who needed rehabilitation following a cardiac arrest, which caused confusion for the complainant as it did not apply to him (Specialised Services).
- A complaint about the lack of analgesia available during a gynaecology examination was discussed at the Gynaecology Governance meeting. As a result of this complaint, it was agreed that patients would be offered paracetamol during clinics and Entonox would be made available in the department so it could be prescribed if needed (Women & Children).
- A complaint was received from a patient who had returned to the ward in the early evening following surgery, having been 'nil by mouth' since that morning, to be told that the only food available was a ham sandwich. The patient had a sore throat and mouth and swollen lips from four hours with an ERCP tube in situ and he had a distended abdomen. He is also prone to duodenal ulcers and has a gastroma and pancreatic disease so he was unable to eat a sandwich. As a result of this complaint, a poster was developed by the Matron, outlining the out of hours food provisions arrangements, and this has been shared with all surgical ward sisters (Surgery).
- As a result of a complaint from a patient who had experienced numerous problems with the delivery of care at Bristol Haematology and Oncology Centre (BHOC), staff met with the patient to get a thorough and detailed understanding of the issues she faced. The Clinical Nurse Specialist followed this up with a letter to the patient with a detailed summary of the care and support available to her, including around the areas of patient care, supportive care and medication care (Specialised Services).
- A complaint was received from a patient with Chronic Regional Pain Syndrome (CRPS) and potentially life threatening anaphylaxis (severe allergic reaction) that requires alternative medications to be used for scans. Unfortunately, this information was not highlighted to the radiographer when the patient attended for an MRI scan, despite this information being noted on her records following a previous scan. This information, as well as the requirement for the use of EMLA cream to number her skin prior to any injections, was not shared with radiology staff. As a result of the complaint, a review was carried out of the procedures in place for all appointments for CRPS patients and, as a result, the Radiology Department in Bristol Royal Infirmary now holds a small stock of EMLA cream and other sites can easily obtain supplies when a CRPS patient is referred to them. (Diagnostics & Therapies).

## 9. Looking ahead

Looking ahead to 2020/21, our focus will be on ensuring that the newly formed University Hospitals Bristol and Weston NHS Foundation Trust (created following UH Bristol's merger with Weston General Hospital on 1 April 2020) continues to provide a high quality, open and transparent service to people who raise concerns about our services. We will be working with our colleagues in the newly formed Division of Weston, to ensure the Trust provides an exemplary integrated complaints service across all locations, which is easily accessible to all of our patients and their families.

We will also continue to work with all Divisions to improve performance in responding to complaints within the timescale agreed with complainants, reducing the number of complainants who are dissatisfied with our response to their concerns and sharing learning from complaints with staff Trustwide.

