

Complaints Report

Quarter 2, 2020/2021

(1 July 2020 to 30 September 2020)

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Quarter 2 Executive summary and overview

	Q2	
Total complaints received	521	↑
Complaints acknowledged within set timescale	84.5%	↓
Complaints responded to within agreed timescale – formal investigation	73.4%	↑
Complaints responded to within agreed timescale – informal investigation	90%	↓
Proportion of complainants dissatisfied with our response (formal investigation)	7.7%	↑

Successes	Priorities
<ul style="list-style-type: none"> Following a delay in recruitment to vacancies in the Patient Support & Complaints Team due to ongoing corporate service consultations, the Trust has successfully recruited a new complaints officer to create necessary additional capacity to support the influx of complaints from Weston Division as a result of Trust merger (however, also see risks and threats). Despite a significant increase in complaints being handled by the PSCT as a result of becoming a merged organisation, the Trust has continued to respond to the majority of cases received in a timely manner. Since 1st July, Weston and Bristol sites have been using the same complainant feedback survey. 	<ul style="list-style-type: none"> To closely monitor divisional compliance with targets for responding to complaints by the deadline agreed with the complainant and support the divisions with this during a period of high operational pressures. To re-open the Patient Support & Complaints Team ‘drop in’ service as soon as this can be done in 2021 whilst maintaining the safety of patients and staff. To implement a new staff e-leaning package ‘handling complaints with confidence’ – due to go live in December 2020. To conclude post-merger staff consultations in Weston Division in order to confirm structure and personnel in the Weston-based complaints team.
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Opportunity to review the format of this report in 2021 as part of the ongoing integration of the complaints service with the Division of Weston. At the time of writing this report (December 2020), it is anticipated that the post of Deputy PSCT Manager will be released for recruitment imminently – this will create the operational headroom to enable the PSCT to move beyond ‘fire-fighting’ and focus once again on service improvement and development. 	<ul style="list-style-type: none"> The position of Deputy PSCT Manager has been held vacant throughout 2020 due to merger. In the interim, agency staff are being employed to create necessary additional capacity. Significant work remains to ensure that the divisional complaints team in Weston is appropriately staffed and that Trust systems and processes are fully adopted. At the time of writing (December 2020), complainants are experiencing a delay of up to two weeks in receiving a follow-up call from a complaints officer to discuss their concerns in detail. This operational backlog has resulted from staff vacancies and the influx of complaints from Weston Division. The Trust’s ability to conduct timely complaints investigations continues to be significantly impacted by wider divisional operational capacity in the face of the ongoing pandemic. Complaints about staff attitude and communication increased in Q2. 56% of complaints responses sent out by Weston Division in Q2 breached the agreed deadline.

1. Complaints performance – Trust overview

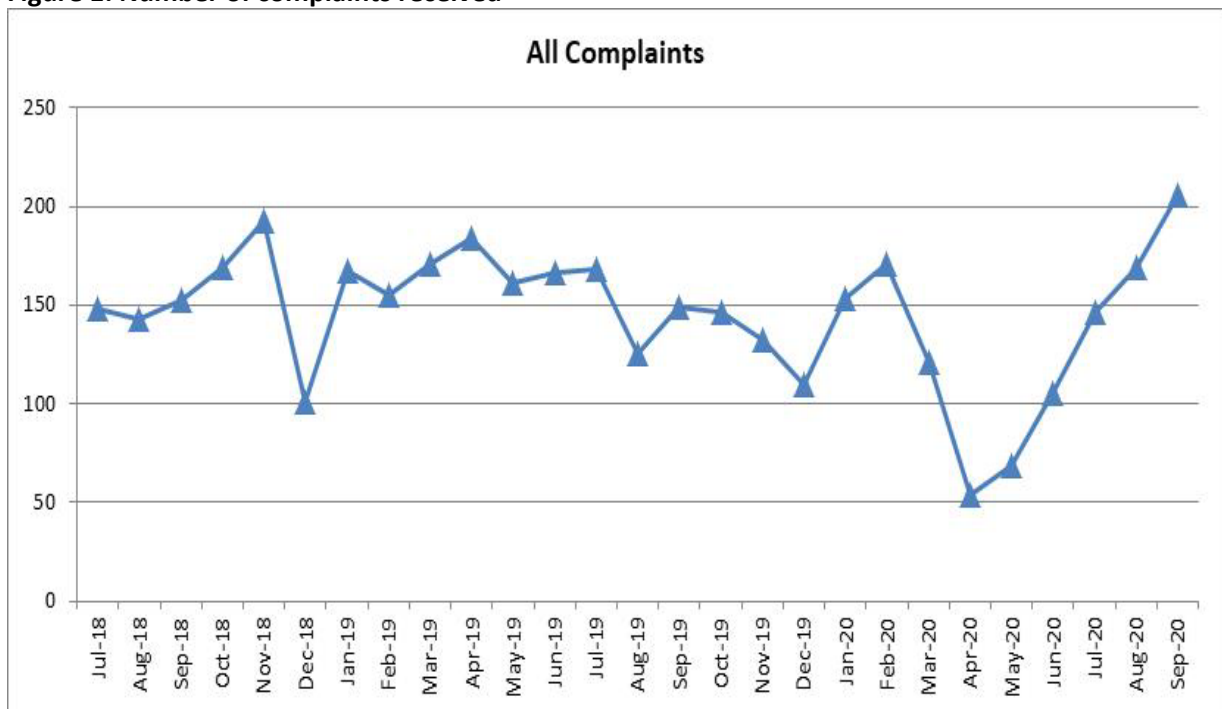
The Trust is committed to supporting patients, relatives and carers in resolving their concerns. Our service is visible, accessible and impartial, with every issue taken seriously. Our aim is to provide honest and open responses in a way that can be easily understood by the recipient.

During Quarter 2 (Q2) of 2020/21, the complaints service received a higher than average number of complaints and enquiries, following a very quiet Q1 (at the height of the Covid-19 pandemic). The number of complaints received in Q2 was 128% higher than in Q1. Q1 is, however, a potentially misleading reference point as this covered a period of national ‘lockdown’ due to the Covid-19 pandemic; more significantly, the number of complaints received in Q2 as a merged Trust was 38.2% higher than in the same period a year ago. At the time of writing (December 2020), this increase in complaints has been sustained throughout Q3.

1.1 Total complaints received

The Trust received 521 complaints in Q2. 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 pandemic was apparent in the reduction in the number of complaints received in Q1, compared with a significant increase during Q2.

Figure 1: Number of complaints received



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 2: Numbers of formal v informal complaints

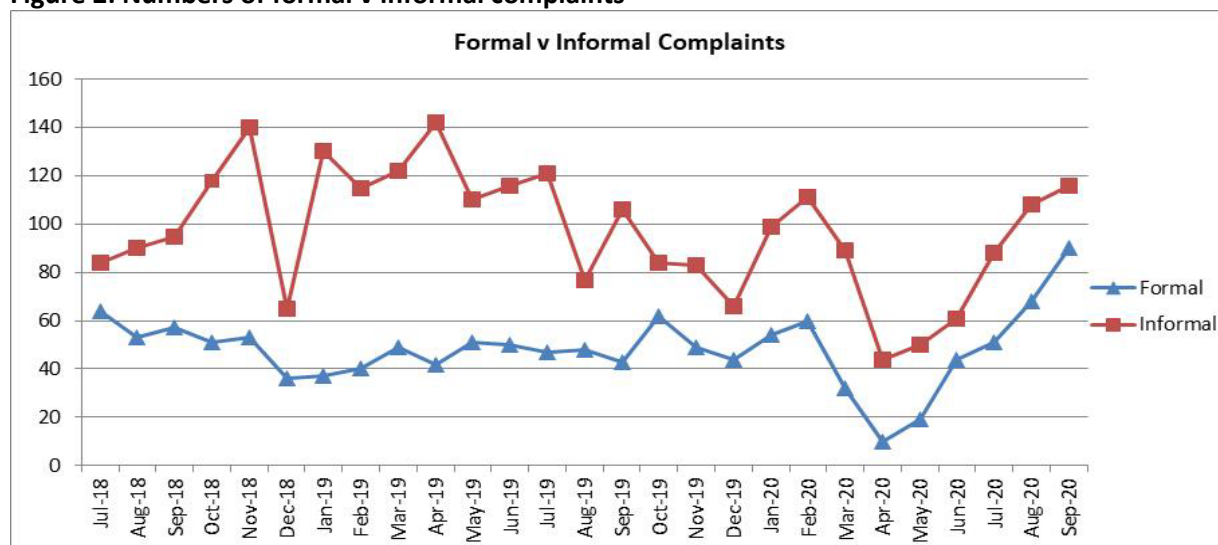


Figure 2 (above) shows complaints dealt with via the formal investigation process (209) compared with those dealt with via the informal investigation process (312), over the same period. We continue to deal with a higher proportion of complaints via the informal process, which means that these issues 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.

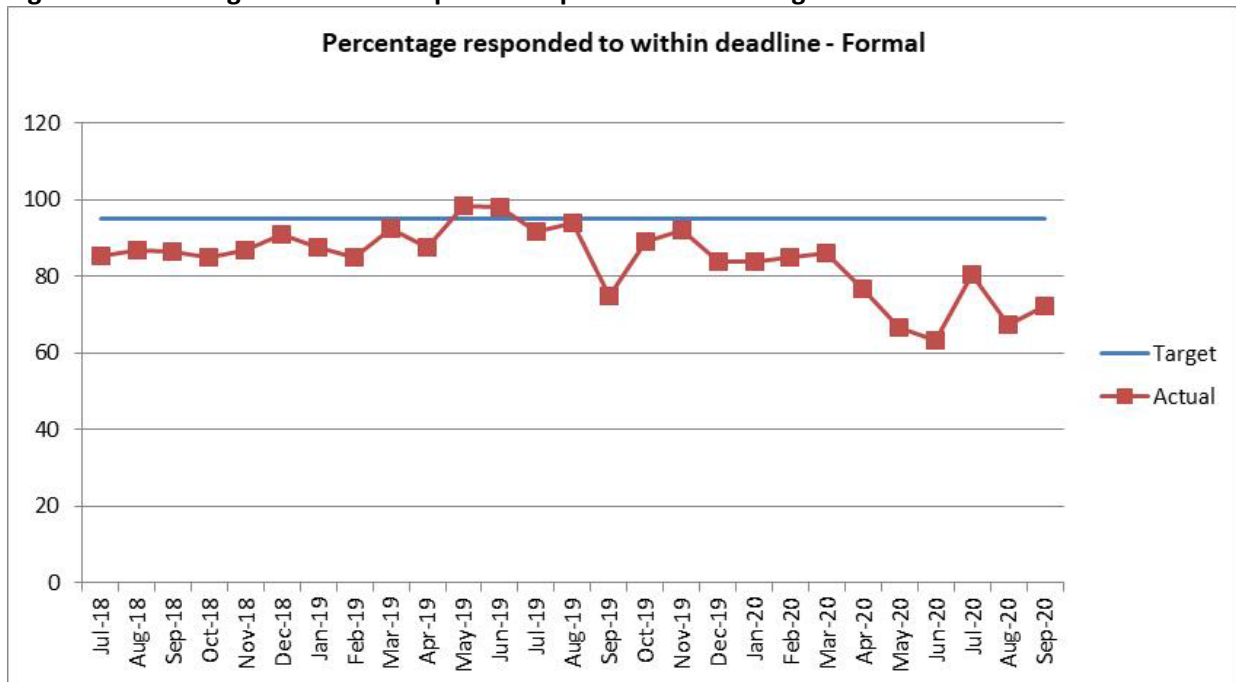
1.2.1 Formal Investigations

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 Q2 2020/21, 73.4% of responses were posted within the agreed timescale. This represents 45 breaches out of the 169 formal complaint responses which were sent out during the quarter². This is a slight improvement on the 71.3% reported in Q1. Figure 3 shows the Trust's performance in responding to complaints since July 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.

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

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

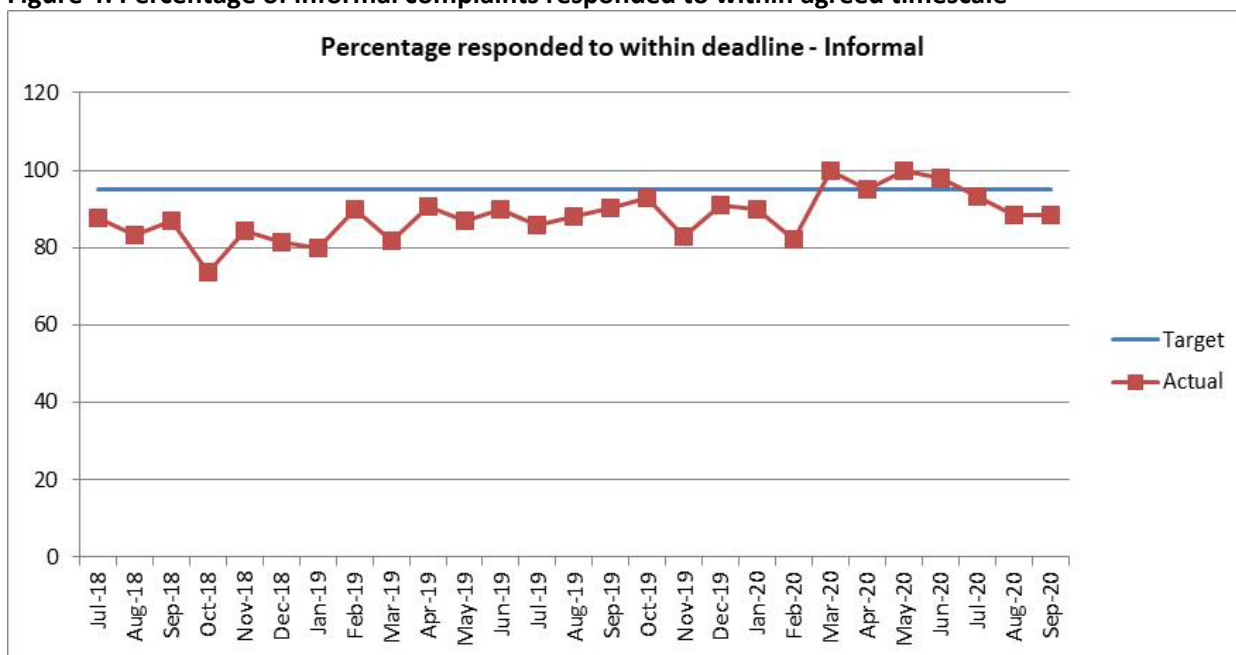


1.2.2 Informal Investigations

In Q2 2020/21, the Trust received 312 complaints that were investigated via the informal process. During this period, the Trust responded to 219 complaints via the informal complaints route and 90% (197) of these were responded to by the agreed deadline, a deterioration on the 97.9% reported in Q1.

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

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



1.3 Dissatisfied complainants

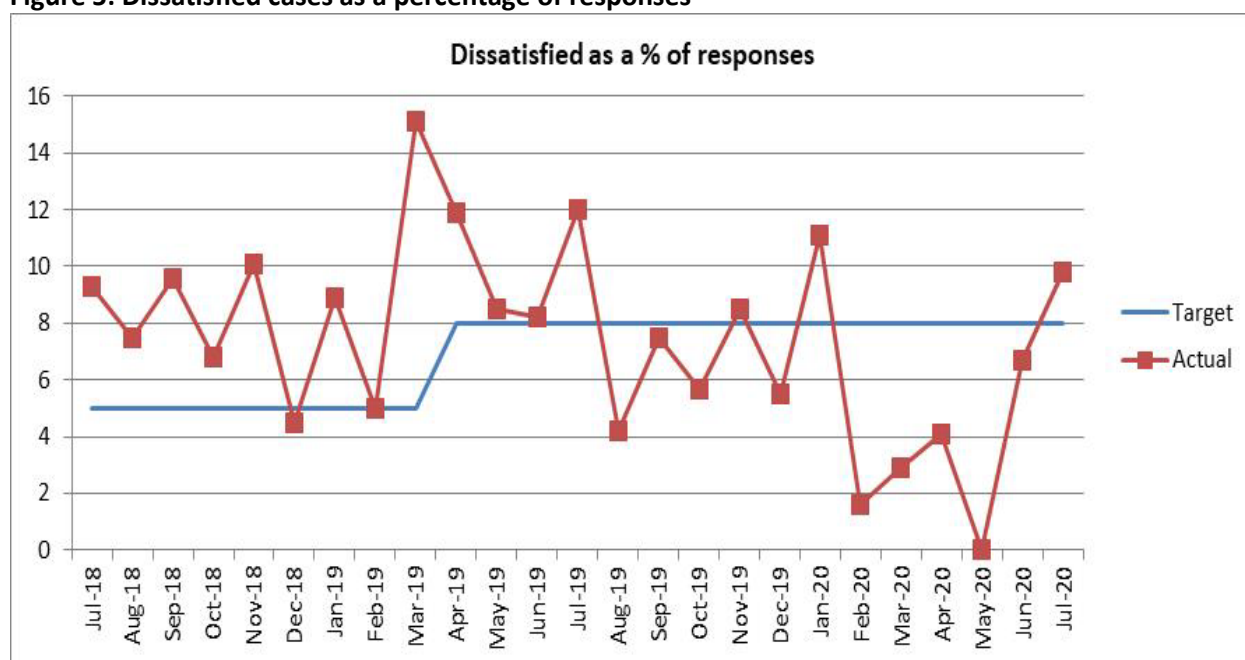
The Trust's target is that no more than 8% of complaints responses should lead to a dissatisfied response.

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 Q2 2020/21, we are able to report dissatisfied data for May, June and July 2020. Seven complainants who received a first response from the Trust during those months have since contacted us to say they were dissatisfied. This represents 7.7% of the 91 first responses sent out during that period. This compares with 2.8% reported in Q1, which was unusually low, possibly due to fewer complainants contacting us to say they were unhappy with their responses during the height of the pandemic.

Figure 5 shows the monthly percentage of complainants who were dissatisfied with aspects of our complaints responses since July 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 Q2 2020/21 compared with Q1.

Complaints increased in all categories in Q2, which was anticipated given that the Covid-19 pandemic and subsequent lockdown was at its peak during Q1, which was reflected in the number of complaints received during that period.

The top three categories of 'clinical care', 'appointments and admissions' and 'attitude and communication' accounted for 78.3% (408 of 521) of all complaints received, as detailed in Table 1 below.

Table 1: Complaints by category/theme

Category/Theme	Number of complaints received in Q2 (2020/21)	Number of complaints received in Q1 (2020/21)
Clinical Care	178 (34.2% of all complaints) ↑	57 (25% of all complaints) ↓
Appointments & Admissions	126 (24.2%) ↑	39 (17.1%) ↓
Attitude & Communication	104 (19.9%) ↑	66 (28.9% of all complaints) ↓
Facilities & Environment	37 (7.1%) ↑	19 (8.3%) ↓
Information & Support	35 (6.7%) ↑	25 (11%) ↓
Discharge/Transfer/Transport	23 (4.4%) ↑	10 (4.4%) ↑
Documentation	10 (2%) ↑	8 (3.5%) ↓
Access	8 (1.5%) ↑	4 (1.8%) ↑
Total	521	228

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 75.2% of the complaints received in Q2 (392/521).

There are large increases in all sub-categories for the same reason as given above for categories.

Table 2: Complaints by sub-category

Sub-category	Number of complaints received in Q2 (2020/21)	Q1 (2020/21)	Q4 (2019/20)	Q3 (2019/20)
Clinical care (Medical/Surgical)	115 (248.5% increase compared to Q1) ↑	33	85	73
Cancelled/delayed appointments and operations	93 (200% increase) ↑	31	101	95
Communication with patient/relative	34 (88.9% increase) ↑	18	17	20
Clinical care (Nursing/Midwifery)	29 (141.7% increase) ↑	12	10	11
Appointment administration issues	19 (280% increase) ↑	5	30	21
Discharge arrangements	19 (90% increase) ↑	10	6	9
Attitude of Nursing/Midwifery	17 (41.7% increase) ↑	12	9	11
Attitude of medical staff	17 (142.9% increase) ↑	7	12	17
Failure to answer phones / failure to respond	14 (133.3% increase) ↑	6	17	21
Infection Control / Infectious disease enquiry	13 (85.7% increase) ↑	7	2	2
Attitude of A&C staff	11 (83.3% increase) ↑	6	5	10
Referral errors	11 (1000% increase) ↑	1	11	7

The percentage changes listed in this table are potentially misleading because Q1 covered the height of the pandemic when numbers of complaints were significantly suppressed. However, the largest increases in percentages of complaints received were in the sub-categories of 'referral errors', 'appointment administration issues' and 'clinical care (medical/surgical)'.

Of particular note, are the number of complaints recorded under the sub-category of 'infection control/infectious disease enquiry', which were complaints related to Covid-19.

It is also noteworthy that the smallest increase was in respect of ‘attitude of nursing/midwifery’.

Figures 6-9 (below) show the longer term pattern of complaints received since July 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 but then rose steeply again in Q2. 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 Q1 and continued on this trajectory throughout Q2. Figures 8 and 9 show notable increases in complaints about ‘attitude and communication’ during Q2.

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

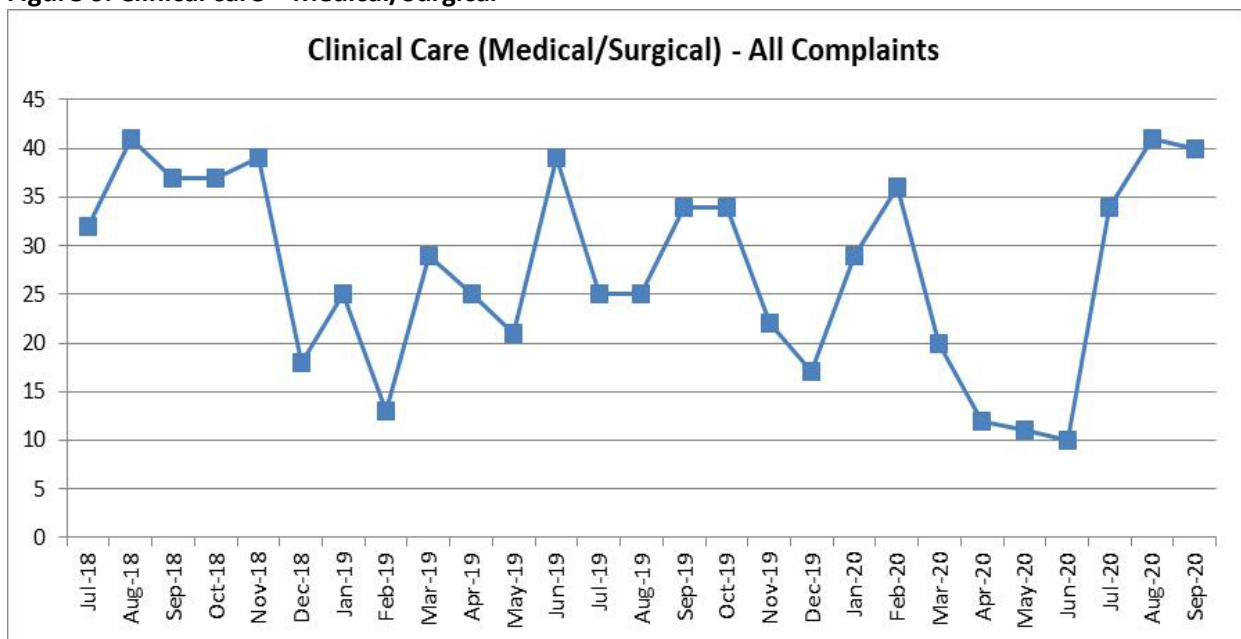


Figure 7: Cancelled or delayed appointments and operations

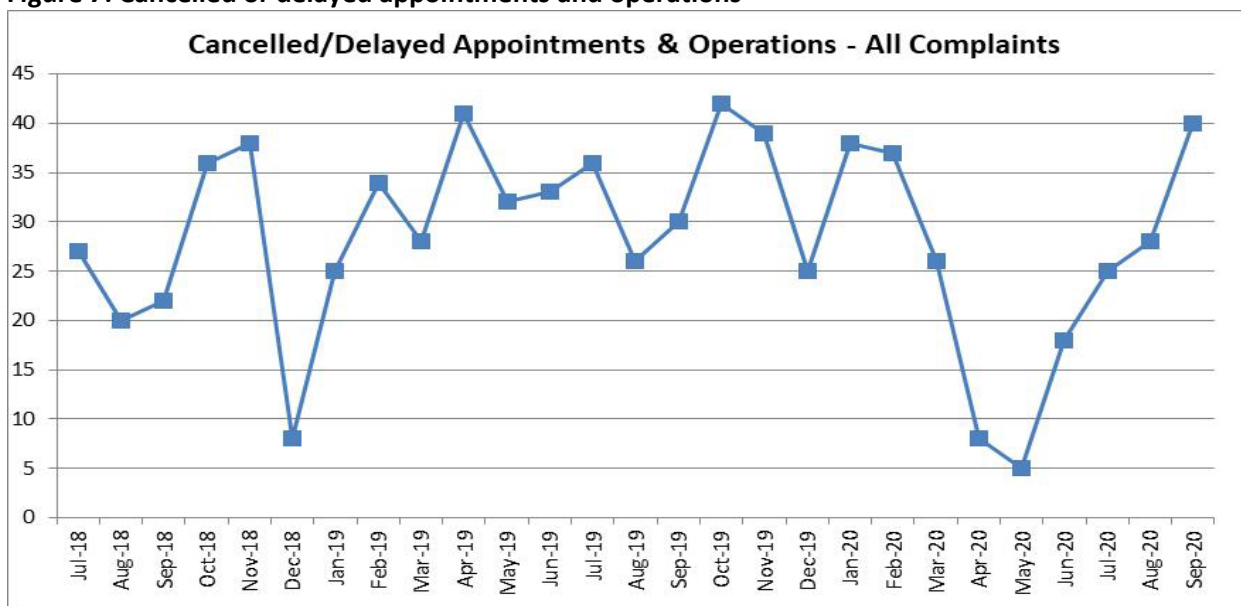


Figure 8: Communication with patient/relative

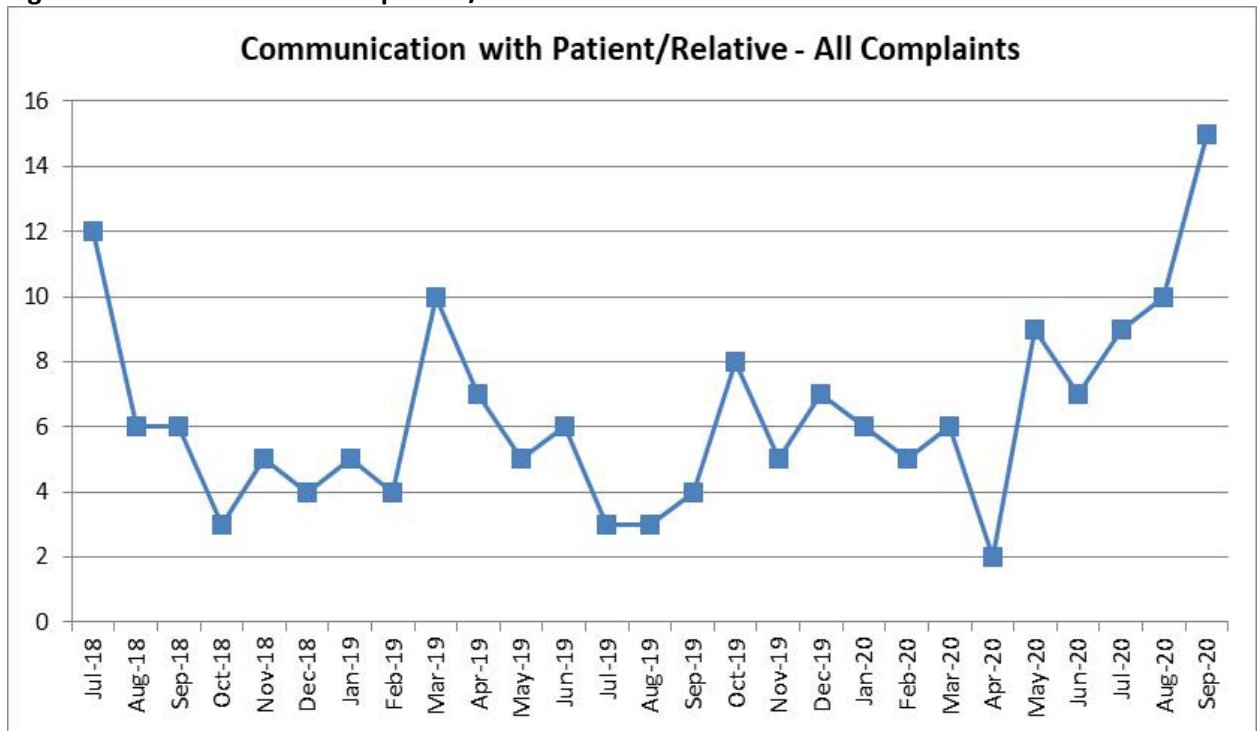
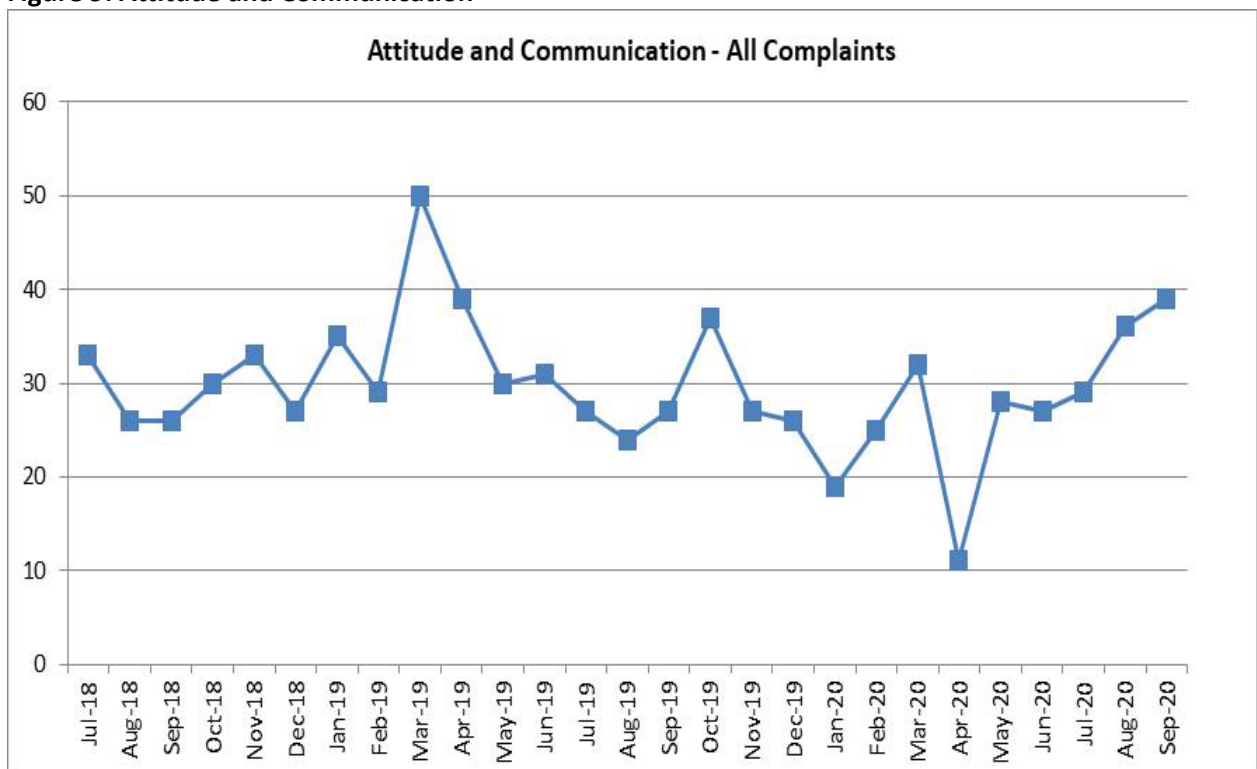


Figure 9: Attitude and Communication



3. Divisional Performance

3.1 Divisional analysis of complaints received

Table 3 provides an analysis of Q2 complaints performance by Division. 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 3.1.7 of the report.

Table 3	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Weston
Total number of complaints received	120 (57) ↑	107 (59) ↑	51 (28) ↑	91 (33) ↑	19 (7) ↑	103 (18) ↑
Number of complaints about appointments and admissions	57 (21) ↑	15 (4) ↑	14 (10) ↑	19 (4) ↑	6 (0) ↑	15 (0) ↑
Number of complaints about staff attitude and communication	20 (12) ↑	21 (20) ↑	15 (3) ↑	18 (9) ↑	6 (2) ↑	18 (5) ↑
Number of complaints about clinical care	32 (9) ↑	44 (18) ↑	11 (7) ↑	43 (12) ↑	2 (2) =	48 (9) ↑
Area where the most complaints have been received in Q2	Bristol Eye Hospital (BEH) – 23 (18) Bristol Dental Hospital (BDH) – 21 (5) ENT – 21 (5) Oral & MaxFax Surgery – 12 (3) Trauma & Orthopaedics – 10 (5) Lower GI – 7 (4)	Emergency Department (BRI) (inc. A413 EMU) – 35 (11) Dermatology – 24 (7) Ward A400 – 8 (4) Unity Sexual Health – 6 (1) Clinic A410 – 5 (3)	BHI (all) – 39 (18) BHOC (all) – 12 (10) BHI Outpatients – 21 (7) BHOC Outpatients – 4 (5) Ward C705 – 4 (3) Ward D603 – 4 (1)	BRHC (all) – 46 (18) (plus 1 paediatric outpatients at Southmead) Carousel Outpatients – 7 (1) Caterpillar Ward – 7 (1) Apollo Ward – 5 (0) StMH (all) – 41 (14) (plus 3 community midwifery) Gynae Outpatients – 11 (0) Central Delivery Suite – 8 (3) Ward 73 (Maternity) – 6 (3)	Radiology – 13 (6)	Accident & Emergency – 21 (4) Berrow Ward – 7 (1) Outpatients (Main) – 7 (0) Waterside Ward – 7 (0) Sandford Ward – 6 (1) Outpatients (Orthopaedics) – 5 (0) Outpatients (Quantock) – 9 (2)
Notable deteriorations compared with Q1	Bristol Dental Hospital (BDH) – 21 (5) Oral & MaxFax Surgery – 12 (3) Trauma & Orthopaedics – 10 (5)	Emergency Department (BRI) (inc. A413 EMU) – 34 (11) Dermatology – 24 (7) Ward A400 – 8 (4) Unity Sexual Health – 6 (1)	BHI Outpatients – 21 (7)	Carousel Outpatients – 7 (1) Caterpillar Ward – 7 (1) Gynae Outpatients – 11 (0) Central Delivery Suite – 8 (3)	Radiology – 13 (6)	Accident & Emergency – 21 (4)
Notable improvements compared with Q1	No notable improvements	No notable improvements	No notable improvements	No notable improvements	No notable improvements	No notable improvements

3.1.1 Division of Surgery

As with all Divisions across the Trust, there was a significant increase in the number of complaints received by the Division of Surgery in Q2; 120 complaints, compared with 57 in Q1, 147 in Q4 and 127 in Q3. The majority of these complaints were investigated via the informal complaints process (84) compared with 36 which were investigated through the formal process.

The largest increase was seen in complaints received with a primary category of ‘appointments and admissions’, with a 47.5% increase compared with Q1. This category includes complaints about cancelled and delayed appointments and operations. There were also significant increases in complaints recorded under ‘clinical care’ and ‘attitude and communication’.

The Division achieved 76.9% (30/39) against its target for responding to formal complaints within the agreed timescale in Q2 and 95.8% (68/71) for informal complaints. Please see section 3.3 Table 16 for details of where in the process any delays occurred – it should be noted that none of the reported breaches were due to delays in the Division.

Table 4: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Appointments & Admissions	57 (47.5% of total complaints) ↑	21 (36.8% of total complaints) ↓
Clinical Care	31 (25.7%) ↑	9 (15.8%) ↓
Attitude & Communication	20 (16.7%) ↑	12 (21.1%) ↓
Facilities & Environment	5 (4.2%) =	5 (8.8%) ↑
Discharge/Transfer/ Transport	3 (2.5%) ↑	0 (0%) ↓
Documentation	2 (1.7%) =	2 (3.5%) ↓
Information & Support	2 (1.7%) ↓	7 (12.3%) ↑
Access	0 (0%) ↓	1 (1.7%) ↑
Total	120	57

Table 5: Top sub-categories

Category	Number of complaints received – Q2 2020/21	Number of complaints received – Q1 2020/21
Cancelled or delayed appointments and operations	40 ↑	15 ↓
Clinical care (medical/surgical)	20 ↑	8 ↓
Appointment administration issues	11 ↑	3 ↓
Referral errors	8 ↑	1 ↓
Clinical Care (Dental)	5 ↑	1 ↓
Attitude of Nursing/Midwifery	4 ↑	2 =
Communication with patient/relative	4 ↑	3 ↓
Attitude of A&C staff	4 ↑	1 ↓

Figure 10: Surgery – formal and informal complaints received

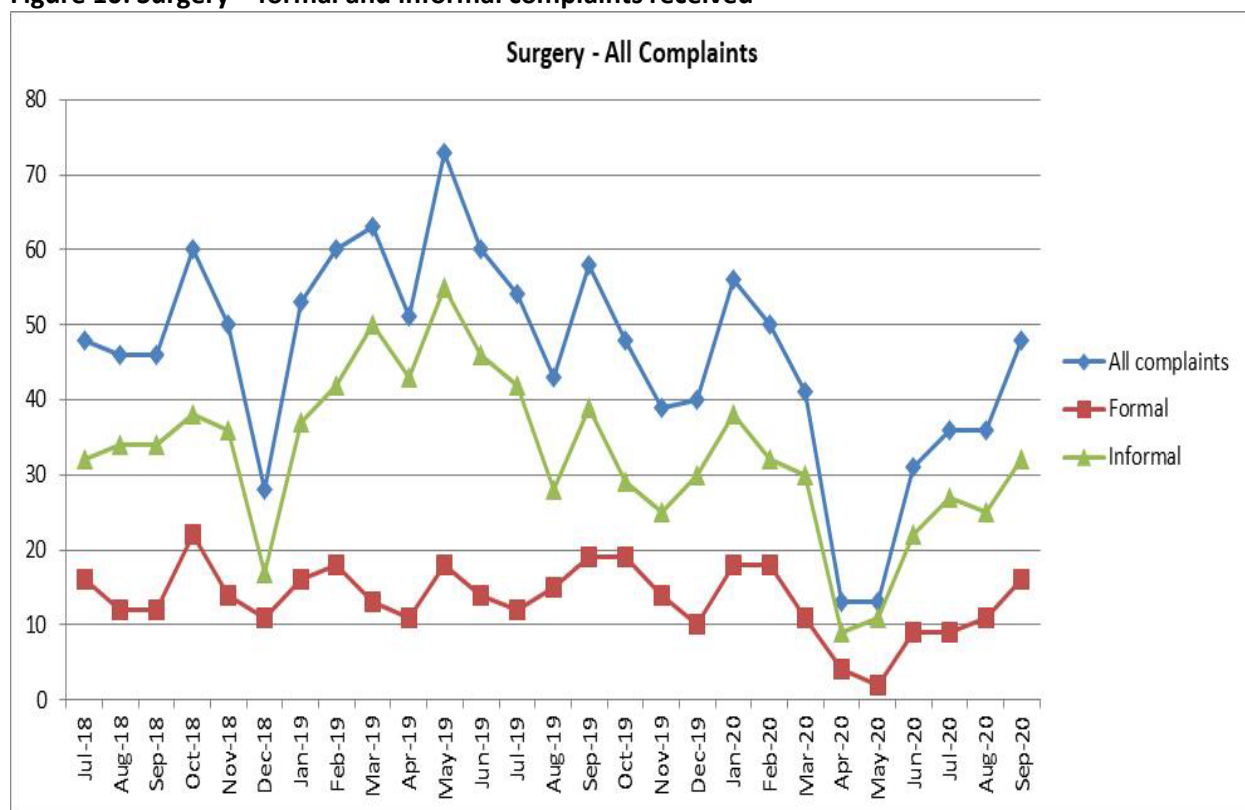
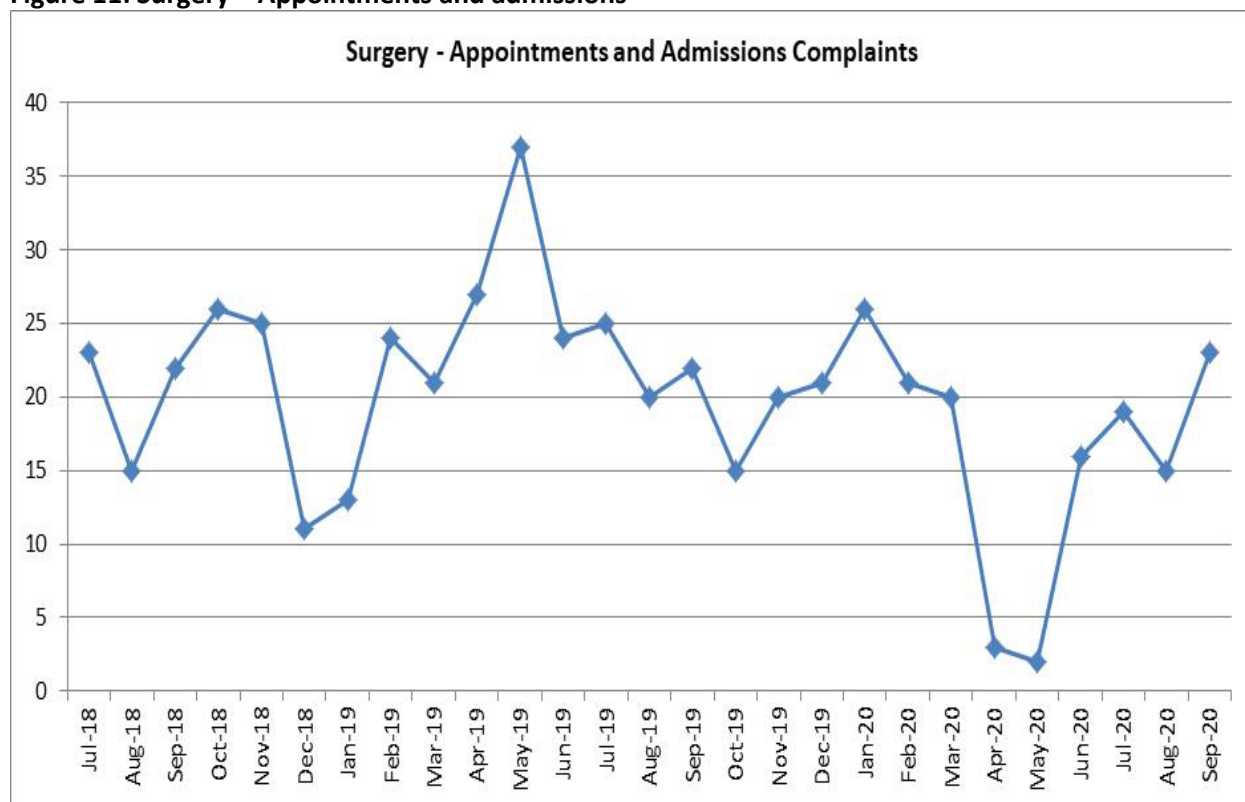


Figure 11: Surgery – Appointments and admissions



3.1.2 Division of Medicine

In line with all other Divisions, Medicine saw a sharp rise in the total number of complaints received in Q2 (107), compared with Q1 (59).

Of the 107 complaints received by the Division in Q2, 34 were investigated via the formal complaints process and 73 the informal route.

The Division achieved 63.2% 73.7% (24/38) against its target for responding to formal complaints within the agreed timescale in Q2, a deterioration on the 73.7% reported in Q1. There was also a reduction in the number of informal complaints being responded to within the agreed deadline in Q2, with 72.9% (35/48) compared with 100% in Q1. Please see section 3.3 Table 16 for details of where in the process any delays occurred.

The largest increase in in complaints was in those recorded in the category of ‘clinical care’ with a 138.9% increase compared with Q1. There was however only a very small increase in complaints about ‘attitude and communication’, with reductions in some of the sub-categories in this category.

Table 6: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Clinical Care	43 (40.2% of total complaints) ↑	18 (30.5% of total complaints) ↓
Attitude & Communication	21 (19.6%) ↑	20 (33.9%) ↓
Appointments & Admissions	15 (14%) ↑	4 (6.7%) ↓
Discharge/Transfer/ Transport	9 (8.4%) ↑	6 (10.2%) ↑
Information & Support	8 (7.5%) ↑	3 (5.1%) ↓
Facilities & Environment	7 (6.5%) ↑	5 (8.5%) ↓
Documentation	2 (1.9%) =	2 (3.4%) ↓
Access	2 (1.9%) ↑	1 (1.7%) ↑
Total	107	59

Table 7: Top sub-categories

Category	Number of complaints received – Q2 2020/21	Number of complaints received – Q1 2020/21
Clinical care (medical/surgical)	32 ↑	10 ↓
Cancelled or delayed appointments and operations	10 ↑	5 ↓
Discharge arrangements	7 ↑	6 ↑
Communication with patient/relative	6 ↓	8 ↑
Attitude of nursing/midwifery	5 ↓	8 ↑
Appointment administration issues	5 ↑	4 ↓
Attitude of medical staff	4 =	4 =
Failure to answer phone / respond	4 ↑	0 ↓

Figure 12: Medicine – formal and informal complaints received

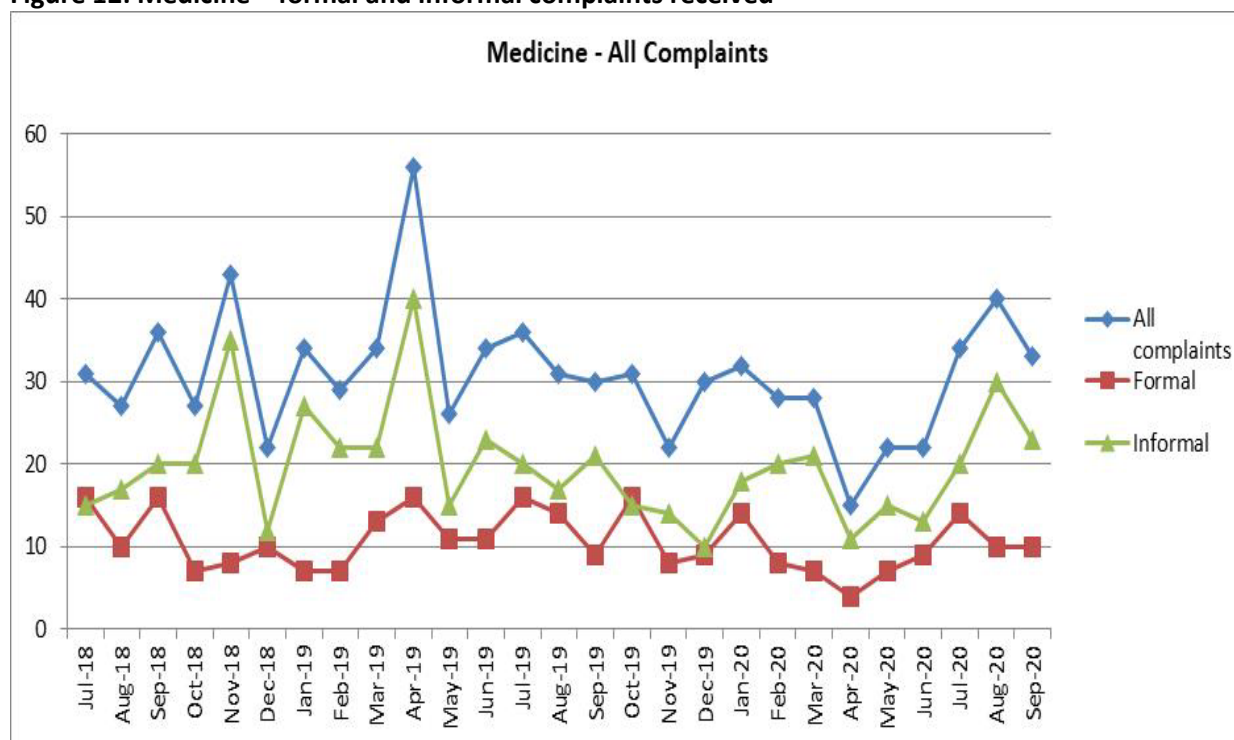
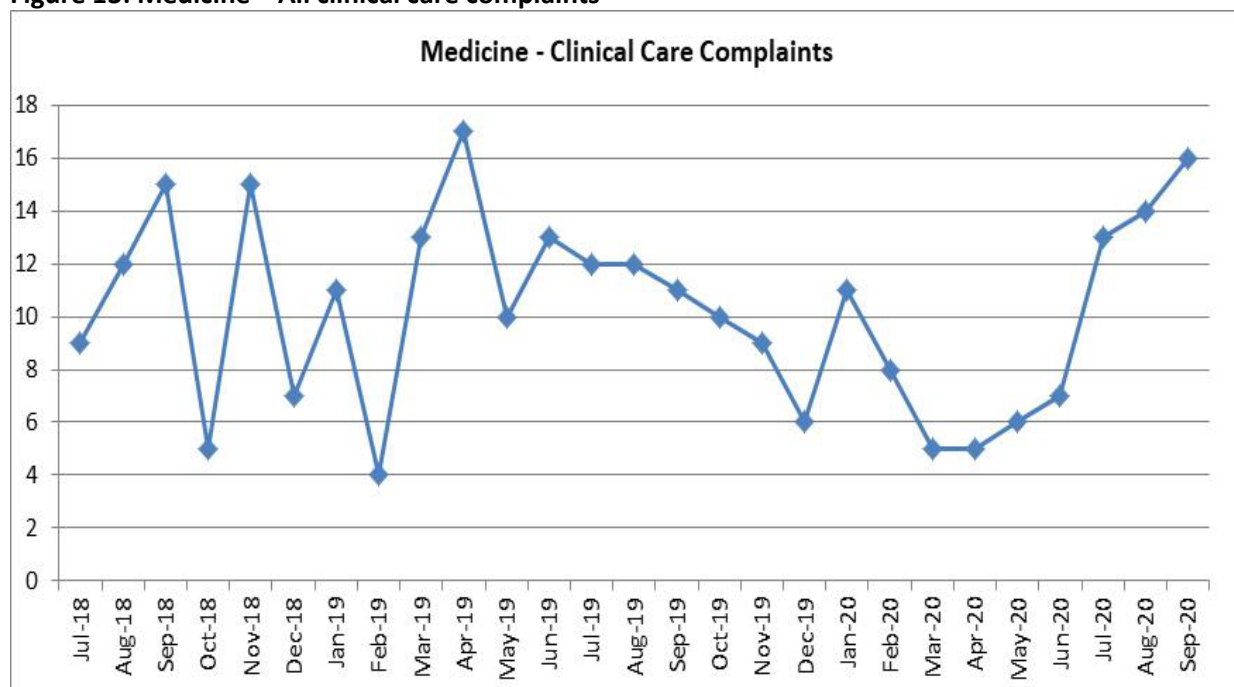


Figure 13: Medicine – All clinical care complaints



3.1.3 Division of Specialised Services

The Division of Specialised Services received 51 new complaints in Q2, compared with 28 in Q1. In line with the other Divisions, this was a significant increase with the previous quarter. In Q2, complaints about 'attitude and communication' took the top spot in the number of complaints by category for the division.

Of the 51 complaints received, 14 were investigated via the formal complaints process, whilst the majority (37) were dealt with informally.

Specialised Services was one of only two divisions in Q2 to achieve 100% of its target for responding to formal (16/16/) and informal (24/24) complaints within the agreed timescale, compared with 66.7% in Q1 for formal complaint responses. The Division achieved 100% performance for informal complaints for the third quarter in succession.

Table 8: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Attitude & Communication	15 (29.4% of total complaints) ↑	3 (10.7% of total complaints) ↓
Appointments & Admissions	14 (27.5%) ↑	10 (35.7%) ↓
Clinical Care	11 (21.7%) ↑	7 (25%) ↓
Information & Support	4 (7.8%) ↑	0 (0%) ↓
Facilities & Environment	3 (5.9%) ↓	4 (14.3%) ↑
Discharge/Transfer/Transport	2 (3.9%) ↑	1 (3.6%) ↑
Documentation	1 (1.9%) ↓	3 (10.7%) ↑
Access	1 (1.9%) ↑	0 (0%) =
Total	51	28

Table 9: Top sub-categories

Category	Number of complaints received – Q2 2020/21	Number of complaints received – Q1 2020/21
Clinical care (medical / surgical)	10 ↑	7 ↓
Cancelled or delayed appointments and operations	9 ↑	8 ↓
Failure to answer phone / failure to respond	6 ↑	2 ↓
Appointment administration issues	4 =	4 ↓
Communication with patient / relative	4 ↑	0 ↓

Figure 14: Specialised Services – formal and informal complaints received

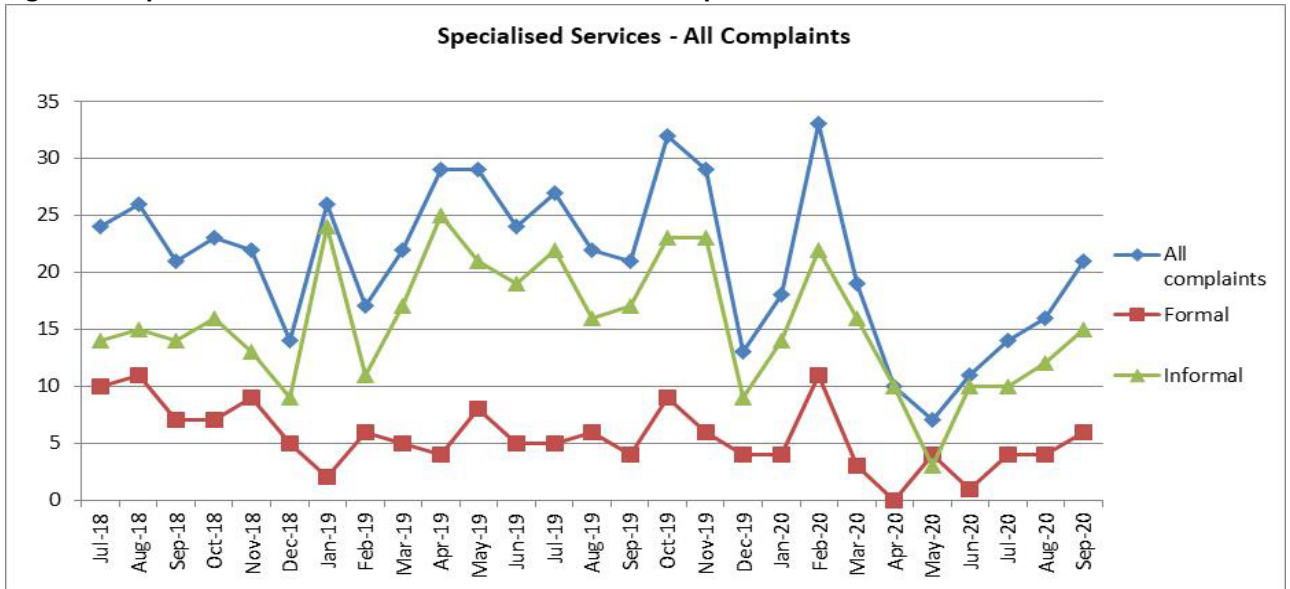


Figure 15: Complaints received by Bristol Heart Institute

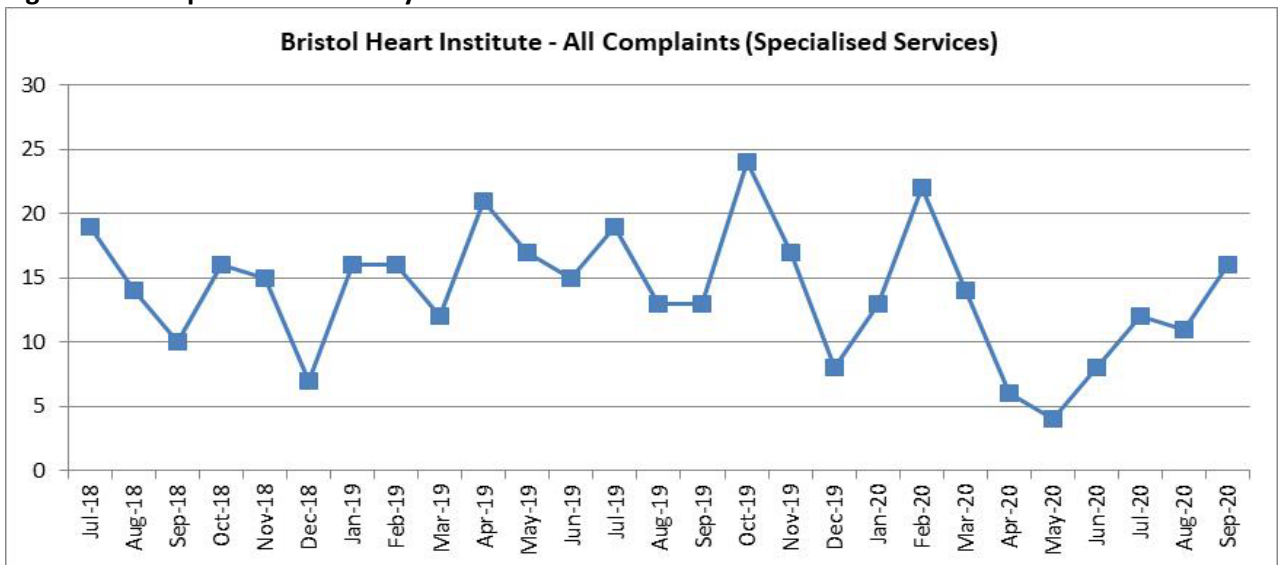
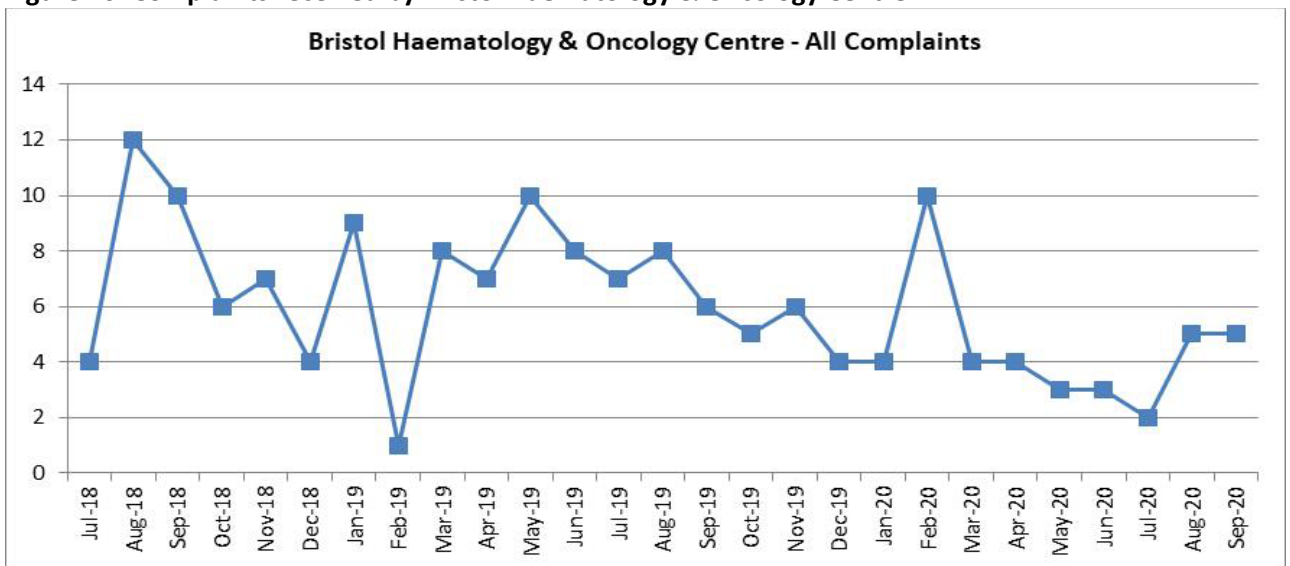


Figure 16: Complaints received by Bristol Haematology & Oncology Centre



3.1.4 Division of Women's and Children's Services

The total number of complaints received by the Division in Q2 1 was 91, a significant increase on the previous quarter (33), in common with all other Divisions. Complaints for Bristol Royal Hospital for Children (BRHC) accounted for 46 of the 91 complaints and 41 were received by St Michael's Hospital (StMH). In addition, there were three complaints for community midwifery services and one for the paediatric outpatients clinic at Southmead.

Of the 91 new complaints received in Q2, the Division managed 47 through the formal complaints process and 44 were investigated via the informal complaints process.

The Division achieved 93.3 % (28/30) against its target for responding to formal complaints within the agreed timescale in Q2, a significant improvement on the 79.2% (19/24) recorded in Q1. They achieved 97.1% (33/34) of target for informal responses within the agreed timescale, compared with 100% (16/16) in Q1. Please see section 3.3 Table 16 for details of where in the process any delays occurred - it should be noted that neither of the reported breaches were attributable to the Division.

Table 10: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Clinical Care	43 (47.3% of total complaints) ↑	12 (36.4% of total complaints) ↓
Appointments & Admissions	19 (20.8%) ↑	4 (12.1%) ↓
Attitude & Communication	18 (19.8%) ↑	9 (27.3%) ↓
Information & Support	7 (7.7%) ↑	5 (15.2%) ↓
Access	3 (3.3%) ↑	1 (3%) ↑
Documentation	1 (1.1%) =	1 (3%) ↓
Discharge/Transfer/ Transport	0 ↓	1 (3%) =
Facilities & Environment	0 (0%) =	0 (0%) ↓
Total	91	33

Table 11: Top sub-categories

Category	Number of complaints received – Q2 2020/21	Number of complaints received – Q1 2020/21
Clinical Care (medical/surgical)	21 ↑	4 ↓
Cancelled or delayed appointment or operation	18 ↑	3 ↓
Clinical Care (nursing/midwifery)	17 ↑	6 ↓
Visiting	9 ↑	0 =
Communication with patient/ relative	7 ↑	3 ↑

Figure 17: Women & Children – formal and informal complaints received

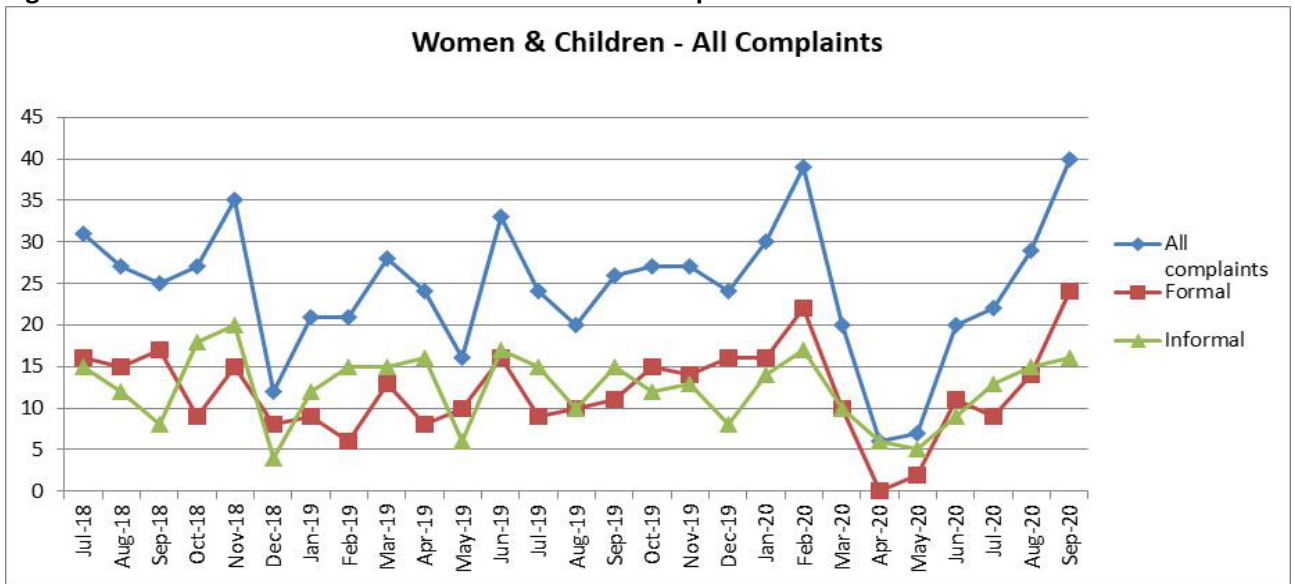


Figure 18: Complaints received by Bristol Royal Hospital for Children

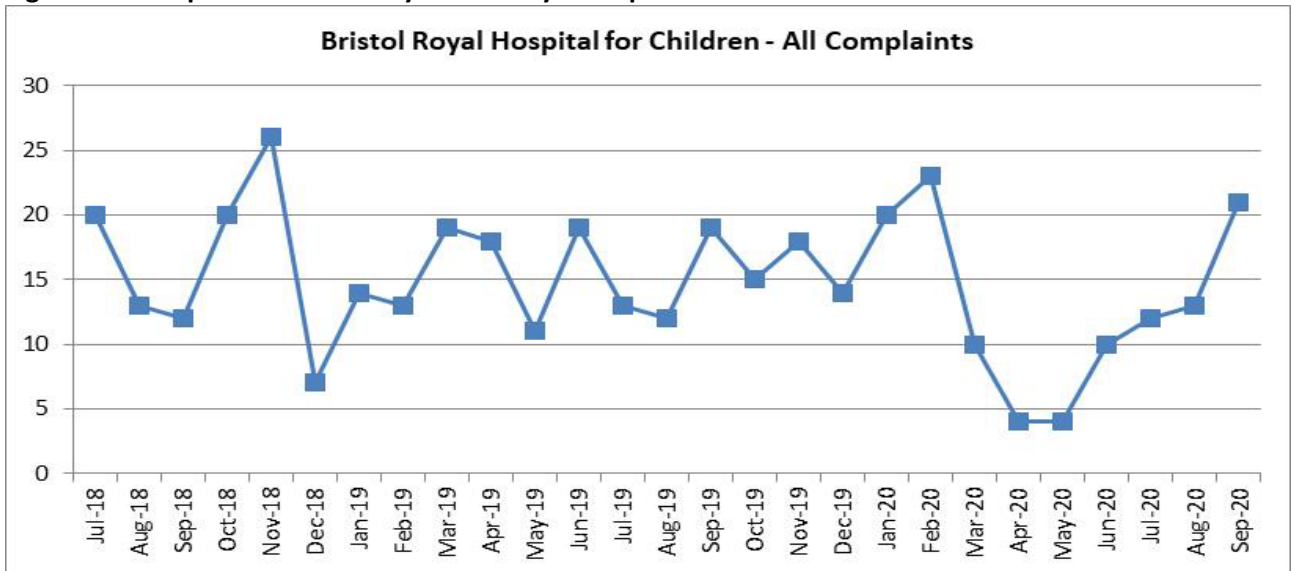


Figure 19: Complaints received by St Michael's Hospital



3.1.5 Division of Diagnostics & Therapies

Complaints received by the Division of Diagnostics and Therapies decreased significantly in Q2, along with all other Divisions – they received 19 complaints, compared with seven in Q1.

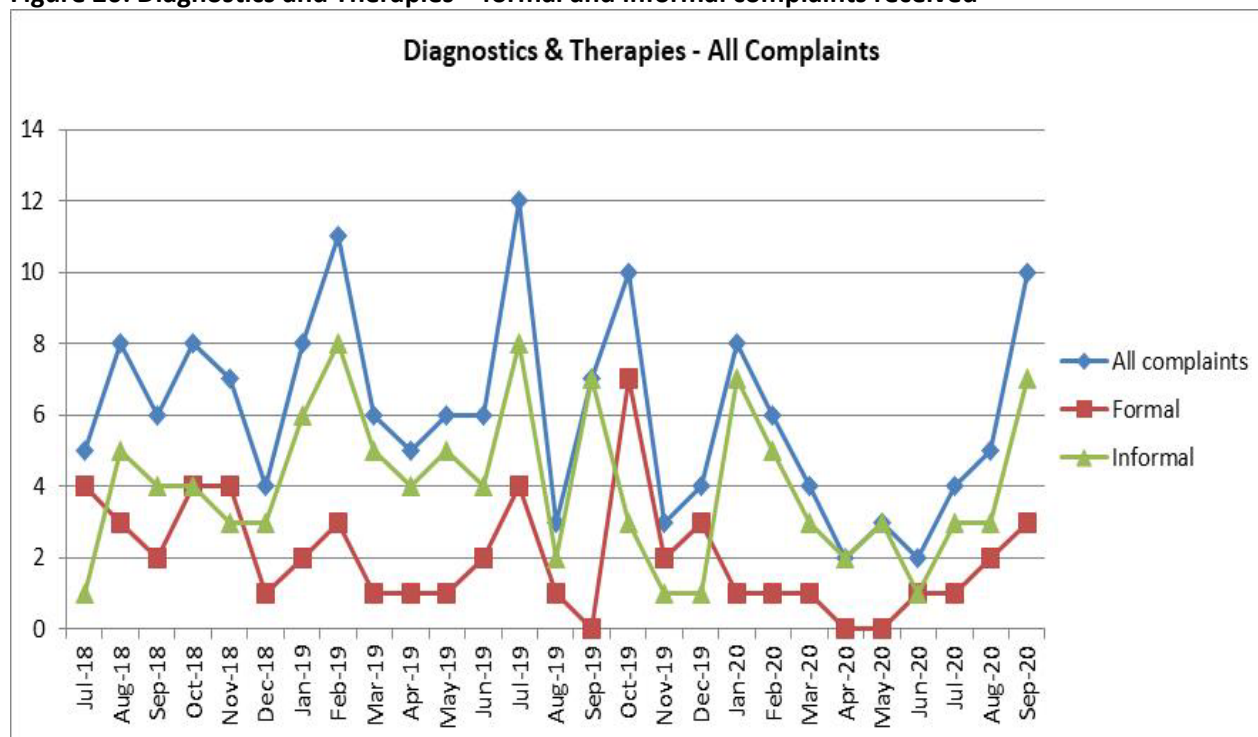
Number of complaints across all categories and sub-categories are very low, although 13 of the 19 complaints received were for Radiology. Six complaints were investigated via the formal complaints process, with the remaining 13 investigated through the informal process.

During Q2, the Division responded to three formal complaints, which were all sent to the complainant within the agreed timescale, meaning that the Division achieved 100% against its target. They also responded to 100% (6/6) of informal complaints within the agreed timescale. Diagnostics & Therapies was one of only two Divisions that achieved 100% in both formal and informal complaint responses in Q2.

Table 12: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Attitude & Communication	6 ↑	2 ↓
Appointments & Admissions	6 ↑	0 ↓
Information & Support	3 =	3 ↓
Clinical Care	2 =	2 ↓
Access	1 ↑	0 =
Discharge/Transfer/Transport	1 ↑	0 =
Facilities & Environment	0 =	0 ↓
Documentation	0 =	0 ↓
Total	19	7

Figure 20: 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 now includes data for the Division of Weston.

The Division received 103 new complaints in Q2 of 2020/21, compared with 18 reported in Q1. 65 of these new complaints were managed through the formal complaints process and the remaining 38 via the informal process.

During the same period, the Division responded to 34 formal complaints, achieving 44.1% (15/34) 66.7% (4/6) of responses being sent to complainants within the agreed timescale, compare with 66.7% (4/6) in Q1. The Division achieved 90.5% in respect of informal responses being responded to on time (19/21), compared with 80% (4/5) in Q1. See section 3.3 Table 16 for details of where delays occurred.

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 21: Division of Weston - formal and informal complaints received

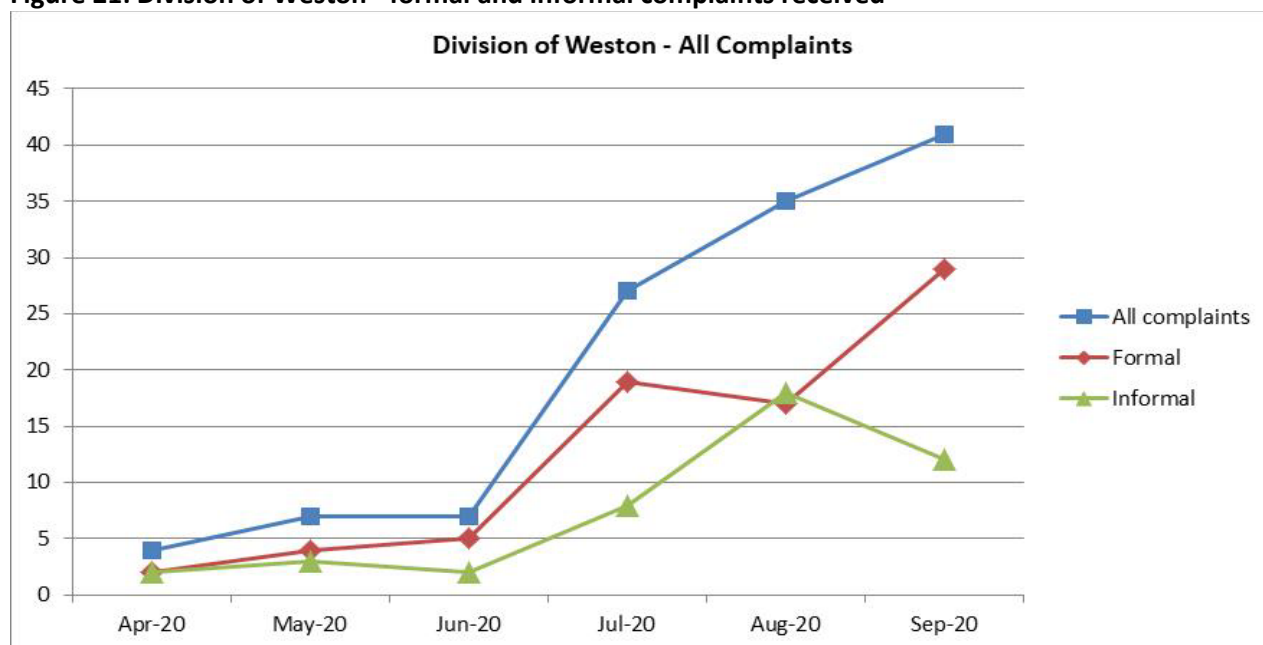


Table 13: Complaints by category type

Category Type	Number and % of complaints received – Q2 2020/21	Number and % of complaints received – Q1 2020/21
Clinical Care	48 (46.6% of total complaints) ↑	9 (50% of total complaints)
Attitude & Communication	18 (17.5%) ↑	5 (27.8%)
Appointments & Admissions	15 (14.6%) ↑	0 (0%)
Facilities & Environment	8 (7.8%) ↑	1 (5.6%)
Information & Support	6 (5.8%) ↑	1 (5.6%)
Discharge / Transfer / Transport	6 (5.8%) ↑	2 (11.1%)
Documentation	2 (1.9%) ↑	0 (0%)
Access	0 =	0 (0%)
Total	103	18

Table 14: Top sub-categories

Category	Number of complaints received – Q2 2020/21	Number of complaints received – Q1 2020/21
Clinical care (medical/surgical)	32 ↑	4
Cancelled or delayed appointment or operation	10 ↑	0
Communication with patient /relative	8 ↑	4
Infection control	7 ↑	0
Discharge arrangements	6 ↑	2
Clinical care (nursing/midwifery)	6 ↑	2
Lost personal property	5 ↑	1
Attitude of medical staff	4 ↑	0
Total	78	

3.1.7 Division of Trust Services

The Division of Trust Services, which includes Facilities & Estates, received 30 complaints in Q2 of 2020/21, compared with 26 in Q1. Of the 30 complaints received in Q2, nine were in respect of car parking; four were for the Private & Overseas Patients Team; and four related to patient transport.

Of the 30 new complaints received, seven were investigated via the formal complaints process, with the remaining 23 being managed informally.

The Division achieved 75% (3/4) against its target for responding to formal complaints within the agreed timescale in Q2 and 62.5% (5/8) for informal complaints. Please see section 3.3 Table 16 for details of where in the process any delays occurred.

Figure 22: Trust Services – all complaints received

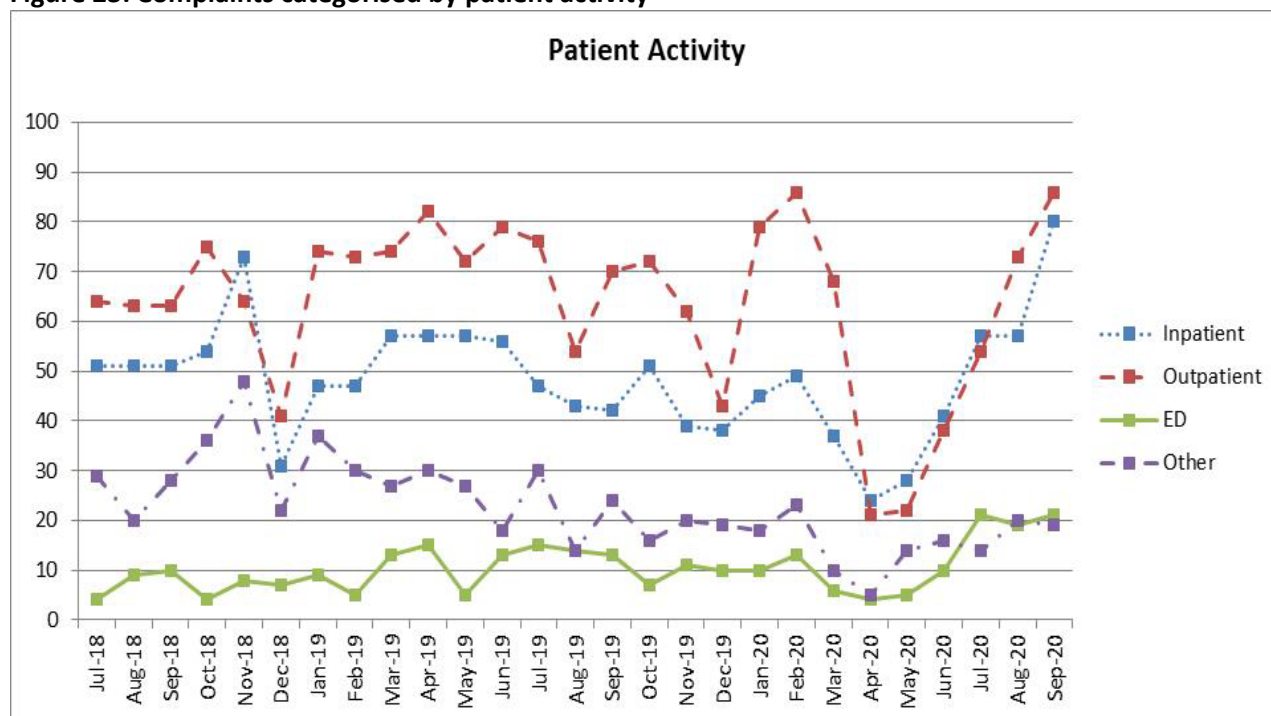


3.2 Breakdown of complaints by inpatient/outpatient/ED status

In order to more clearly identify the number of complaints received by the type of service, Figure 23 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 Q2, 41% (*35.5%) of complaints received were about outpatient services, 37.2% (40.8%) related to inpatient care, 11.6% (8.3%) were about emergency patients; and 10.2% (15.4%) were in the category of 'other' (as explained above). * Q1 percentages are shown in brackets for comparison.

Figure 23: Complaints categorised by patient activity



3.3 Complaints responded to within agreed timescale for formal resolution process

Specialised Services and Diagnostics & Therapies achieved 100% against target for formal responses sent out by the agreed deadline in Q2. The other divisions all reported breaches of formal complaint deadlines, with a total of 45 breaches reported Trustwide. This is the highest number of breaches since this report commenced and is a significant deterioration on the 27 breaches reported in Q1.

The Division of Weston reported 19 breaches of deadline, Medicine reported 14, Surgery had nine, Women & Children reported two and Trust Services (Estates & Facilities) had one breach. Please see Table 14 below for details of where in the process the delays occurred/who the breaches were attributable to.

In Q2, the Trust responded to 169 complaints via the formal complaints route and 73.4% of these were responded to by the agreed deadline, against a target of 95%, compared with 71.3% in Q1 and 85% in Q4.

Table 15: Breakdown of breached deadlines – Formal

Division	Q2 2020/21	Q1 2020/21	Q4 2019/20	Q3 2019/20
Weston	19 (55.9%)	2 (33.3%)		
Medicine	14 (36.8%)	5 (26.3%)	14 (28%)	12 (29.3%)
Surgery	9 (23.1%)	11 (33.3%)	4 (6.7%)	2 (2.6%)
Women & Children	2 (6.5%)	5 (20.8%)	3 (5.4%)	1 (2.6%)
Trust Services	1 (14.3%)	1 (50%)	4 (26.7%)	2 (40%)
Specialised Services	0 (0%)	3 (33.3%)	6 (22.2%)	5 (19.2%)
Diagnostics & Therapies	0 (0%)	0 (0%)	1 (20%)	1 (11.1%)
All	45 breaches	27 breaches	32 breaches	23 breaches

(So, as an example, there were 14 breaches of timescale in the Division of Medicine in Q2, which constituted 36.8% of the 38 complaint responses which were sent out by that division in Q2).

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 Q2. During this period, 26 breaches were attributable to the Divisions, 11 to the Executives and eight were caused by delays in the Patient Support & Complaints Team.

Table 16: Source of delay

Breach attributable to	Surgery	Medicine	Specialised Services	Women & Children	Diagnostics & Therapies	Trust Services	Weston	All
Division	0	9	0	0	0	0	17	26
PSCT	3	2	0	2	0	0	1	8
Execs/sign-off	6	3	0	0	0	1	1	11
All	9	14	0	2	0	1	19	45

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 Q2, the Trust responded to 219 complaints via the informal complaints route (compared with 137 in Q1) and 90% of these were responded to by the agreed deadline; a deterioration on the 97.9% reported in Q1.

Table 17: Breakdown of breached deadlines - Informal

Division	Q2 2020/21	Q1 2020/21	Q4 2019/20	Q3 2019/20
Medicine	11 (22.9%)	0 (0%)	0 (0%)	7 (17.5%)
Surgery	3 (4.2%)	0 (0%)	7 (8.9%)	8 (11.4%)
Trust Services	3 (20%)	2 (9.5%)	1 (4.2%)	2 (9.5%)
Weston	2 (6.1%)	1 (20%)		
Women & Children	0 (0%)	0 (0%)	2 (6.3%)	1 (3.6%)
Diagnostics & Therapies	0 (0%)	0 (0%)	1 (6.7%)	1 (16.7%)
Specialised Services	0 (0%)	0 (0%)	0 (0%)	2 (4.2%)
All	19	3	11	21

4. Covid-19 – the impact of the pandemic on the complaints service

From the beginning of April until the end of September 2020, the Trust had received a total of 69 complaints related to Covid-19 and the Coronavirus pandemic, with 30 of these being investigated via the Trust's formal complaints process and the remaining 39 being investigated informally.

The majority of complaints received were for the Division of Weston with 18 complaints, closely followed by Medicine and Surgery with 14 each, Women & Children and Trust Services with eight each, four for Diagnostics & Therapies and two for Specialised Services.

Most complaints were recorded under the primary category of Clinical Care, which accounted for 29.5% (20/69) of all complaints received, closely followed by Information & Support (17), Attitude & Communication (13) and Appointments & Admissions (10).

The main issues that arose from the 69 complaints recorded were concerns over staff wearing the correct Personal Protective Equipment (PPE) and poor communication with families of inpatients. There were also complaints relating to members of staff adding posts to social media that led to allegations of them not adhering to Covid-19 guidelines; appointments being cancelled due to the pandemic; and patients being discharged to care homes without a negative Covid-19 test.

With effect from July 2020, the Patient Support & Complaints Manager commenced weekly complaints reporting to the Covid Outbreak Group, chaired by the Chief Nurse and Medical Director.

5. 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 taken by the Trust in response to complaints during Q2 2020/21.

- A complaint was received from the family of a patient at Weston General Hospital (WGH) who were upset about communication and visiting restrictions in place to see the patient. Concerns were also raised by the patient's wife about a surgical stocking and name band on her husband's ankle that were too tight, causing swelling, and about there not seeming to be a common message relating to PPE requirements at WGH. As a direct result of this complaint, a standard procedure for implementing observations of care was written and this Observations of Care programme was disseminated to all Matrons and Ward Sisters at WGH.
- As a result of a complaint regarding a midwife contacting a patient, not knowing that she had experienced a miscarriage, a daily transfer of information to the Community Midwifery team was implemented regarding confirmed or possible miscarriages. This simple and prompt action will prevent additional upset and anxiety for future patients at such a difficult time (Women & Children).
- As part of a complaint received about the care of a patient who sadly passed away, his wife mentioned that the food her husband had in hospital looked disgusting and probably tasted that way. In response to this complaint, all catering supervisors are now conducting spot checks on wards to inspect the quality of the meals provided and ensure actions are taken to remedy any areas of deficiency (Estates & Facilities).

6. 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 269 enquiries were received in Q2, an increase of 14% on the 236 received in Q1. This figure includes 37 concerns recorded by the Patient Advice & Liaison Service (PALS) in Weston, compared with 84 recorded in Q1. The number of concerns recorded decreased significantly due to cases that had previously been recorded as 'concerns' now being recorded by the corporate complaints team as informal (or occasionally formal) complaints.

The Patient Support and Complaints Team also recorded and acknowledged 50 compliments received during Q2 and shared these with the staff involved and their Divisional teams. This is compared with 31 compliments reported in Q1.

In addition to the enquiries detailed above, in Q2 the Patient Support and Complaints Team recorded 172 enquiries that did not proceed, compared with 67 in Q1. 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 an increasingly high volume of activity, with a total of 962 separate enquiries in Q2.

7. 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 Q2, 299 complaints were received in writing (277 by email and 22 letters) and 214 were received verbally (6 in person via drop-in service and 208 by telephone). Eight complaints were also received in Q2 via the Trust's 'real-time feedback' service. Of the 228 complaints received in Q2, 84.5% (440 of 521) met the Trust's standard of being acknowledged within two working days (verbal) and three working days (written). This was the first time that this measure fell below 95% and was due to the unusually high volume of complaints and other enquiries received by the team.

8. PHSO (Ombudsman) cases

During Q2, the PHSO notified the Trust of its interest in one new complaint, for which copies of the complaint file and medical records have been sent to them.

Two cases were closed by the PHSO during Q2, both of which were recorded with an outcome of 'No Further Action' (this means that, based on their review of the Trust's complaint file and the patient's medical records, the Ombudsman decided not to carry out a full investigation).

There are currently 12 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.

9. 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 again for this quarter, due to the negligible number of completed surveys being returned, which would render the results inconclusive. The survey has however been extended into Weston Division with effect from 1st July 2020.

10. 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 18: 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 Q2, the Trust received 521 complaints, all of which have been severity rated by the Patient Support & Complaints Team. Of these 521 complaints, 249 were rated as being low severity, 223 as medium and 49 as high.

The increase in the number of complaints rated as 'high severity' was due to the number of high risk covid-related complaints received during the quarter.

Figure 24 below shows a breakdown of these severity ratings by month since April 2019.

Figure 24: Severity rating of complaints

