



# Complaints and Compliments Received by HSC Trusts (2022/23)

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Department of  
**Health**

An Roinn Sláinte

Máinnystrie O Poustie

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um Staitisticí agus Taighde

## Reader Information

Purpose	This publication monitors and reports the number of HSC Trust complaint issues received, by the programme of care, category, subject and specialty of the complaint issue, as well as demographic information and the time taken to provide a substantive response to complaints received. It also includes information on compliments received by HSC Trusts regarding the services they provide.
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# CONTENTS

## Key Points

4

### Section 1: Complaint Issues Received by HSC Trusts

What is the Difference between a Complaint and a Complaint Issue?	5
Complaint Issues Received by HSC Trusts	5
Complaint Issues Received by Programme of Care (POC)	7
Complaint Issues Received by POC and HSC Trust	8
Complaint Issues Received by Category	9
Complaint Issues Received by Category and HSC Trust	11
Complaint Issues Received by Specialty	13

### Section 2: Complaints Received by HSC Trusts

Age and Gender of Patient / Client	14
Relationship of Complainant to Patient / Client	16
Method of Complaint	17

### Section 3: Time Taken to Provide a Substantive Response to Complaints Received

Average Number of Working Days to Substantive Response	18
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### Section 4: Family Practitioner Service (FPS) Complaints

Local Resolution	20
Honest Broker	22

### Section 5: Compliments Received by HSC Trusts

Compliments Received by HSC Trusts	24
Subject of Compliment Received	25
Method of Compliment	26

### Section 6: Additional Tables

27

### Section 7: Appendices

35

### Latest Year (2022/23)

During 2022/23, 5,033 complaints relating to 7,671 complaint issues were received by HSC Trusts; equating to 97 complaints per week or almost 14 complaints per day (Tables 1 & 9).

Over half (4,246, 55.4%) of complaint issues received during 2022/23 related to the 'Acute' POC (Table 2, Figure 3).

During 2022/23, the highest number (1,545, 20.1%) of complaint issues related to a patient's 'Quality of Treatment & Care' (Table 4).

The highest percentage of complaint issues received in 2022/23 related to the 'Accident & Emergency' specialty (1,211, 15.8%) (Table 7).

Of the 5,033 complaints received, the median age of the patient / client was 45 years (Figure 9).

On average HSC Trusts took 31.9 working days to provide a substantive response to complaints received in 2022/23 (Table 9, Figure 14).

During 2022/23, 26,474 compliments (via card, email, feedback form, care opinion, letter, social media or telephone) were received by HSC Trusts in Northern Ireland (Table 16, Figure 22).

Of the 26,474 compliments received by HSC Trusts, 11,946 (45.1%) related to 'Quality of Treatment & Care', 8,327 (31.5%) to 'Staff Attitude & Behaviour', 2,398 (9.1%) to 'Information & Communication', 2,202 (8.3%) to 'Environment', and 1,601 (6.0%) to 'Other' subjects (Table 16, Figure 21).

### Last Five Years (2018/19 to 2022/23)

Since 2018/19, the number of complaint issues received by HSC Trusts increased from 6,049 to 7,671 in 2022/23 (Table 1, Figure 2).

Over the last five years, all six HSC Trusts reported an increase in the number of complaint issues received; with the largest increase (68.1%) reported by the Southern Trust (Table 1, Figure 2).

Between 2018/19 and 2022/23, the largest increase in the number of complaint issues (620, 17.1%) was reported in the 'Acute' POC (3,626 to 4,246) (Table 3).

Complaint's' issues relating to Family Practitioner Services decreased (109, 34.4%) in 2022/23 compared to the 2018/19 year (Table 10, Figure 15).

## Section 1: Complaint Issues Received by HSC Trusts

### Difference between a Complaint and a Complaint Issue?

A **complaint** is defined as an 'expression of dissatisfaction' received from or on behalf of patients, clients or other users of HSC Trust and/or Family Practitioner Services or facilities.

A single communication regarding a complaint, however, may refer to more than one issue. In such cases each individual **complaint issue** is recorded separately for the Programme of Care, Subject and Specialty to which it relates.

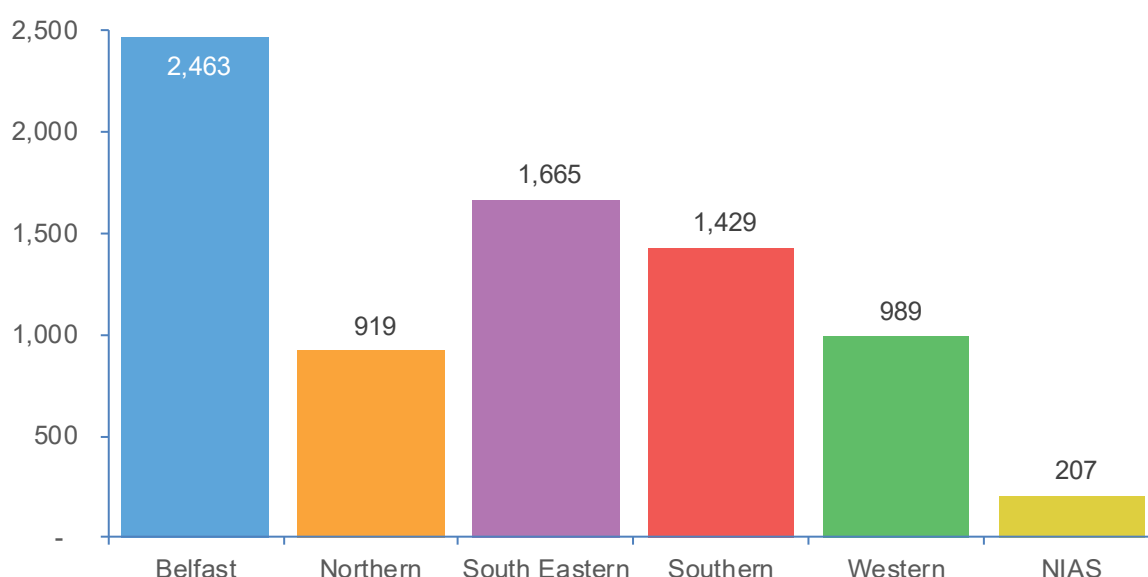
### Complaint Issues Received by HSC Trusts

During 2022/23, HSC Trusts received 5,033 complaints relating to 7,671 complaint issues (Tables 1 & 9).

Of the 7,671 complaint issues, almost a third (2,463, 32.1%) were received by the Belfast HSC Trust, 1,665 (21.7%) by the South Eastern HSC Trust, 1,429 (18.6%) by the Southern HSC Trust, 989 (12.9%) by the Western HSC Trust, 918 (12.0%) by the Northern HSC Trust and 207 (2.7%) by the Northern Ireland Ambulance Service (NIAS) (Tables 1 & 2, Figure 1).

**Almost a third**  
of complaint issues  
received by the  
Belfast HSC Trust.

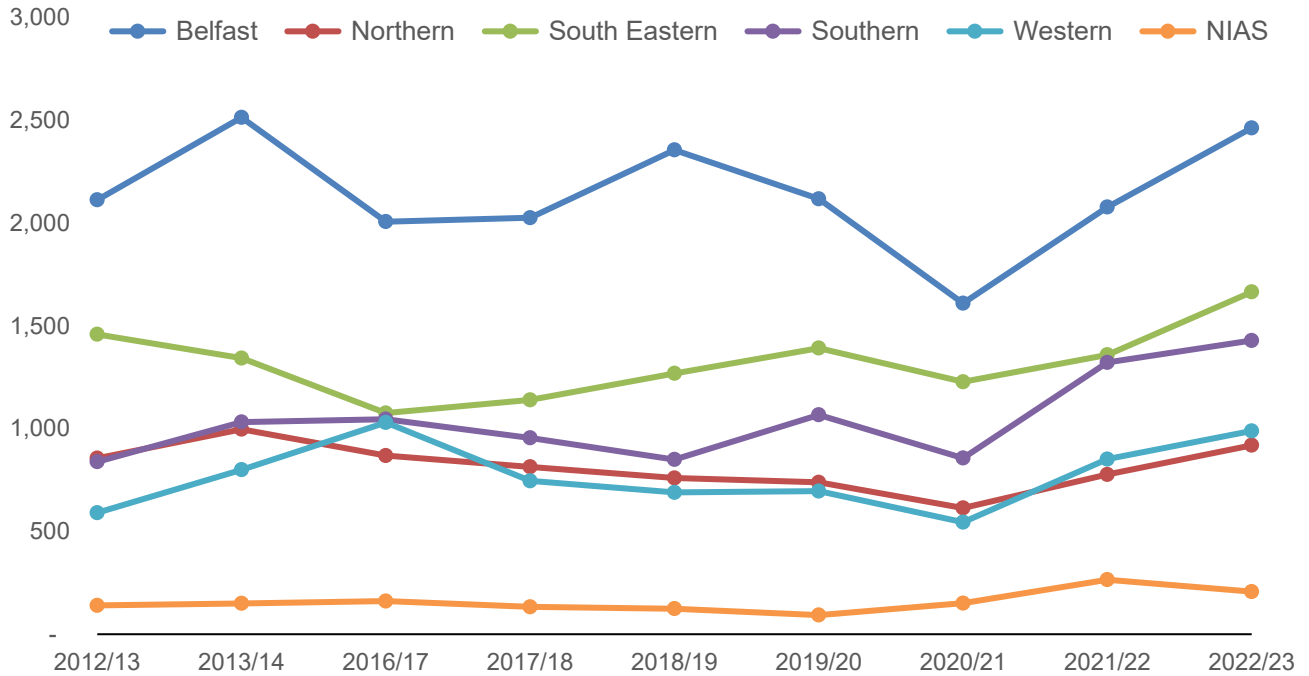
Figure 1: Complaint Issues Received by HSC Trusts



During the last five years, the highest number of complaint issues received by HSC Trusts was in 2022/23 (7,671) and the lowest in 2020/21 (5,005) (Table 1, Figure 2).

Since 2018/19, the number of complaint issues received increased in all HSC Trusts, with the Southern HSC Trust reporting the largest increase (579, 68.1%) from 850 in 2018/19 to 1,429 in 2022/23 (Table 1, Figure 2).

**Figure 2: Complaint Issues Received by HSC Trusts (2018/19 – 2022/23)**



## Complaint Issues Received by Programme of Care (POC) <sup>1</sup>

Each complaint issue received is recorded against the POC of the patient / client to whom the complaint relates. If a complaint is made by a user of HSC Trust facilities who is not a patient / client, the complaint issue will be recorded against the POC of that service.

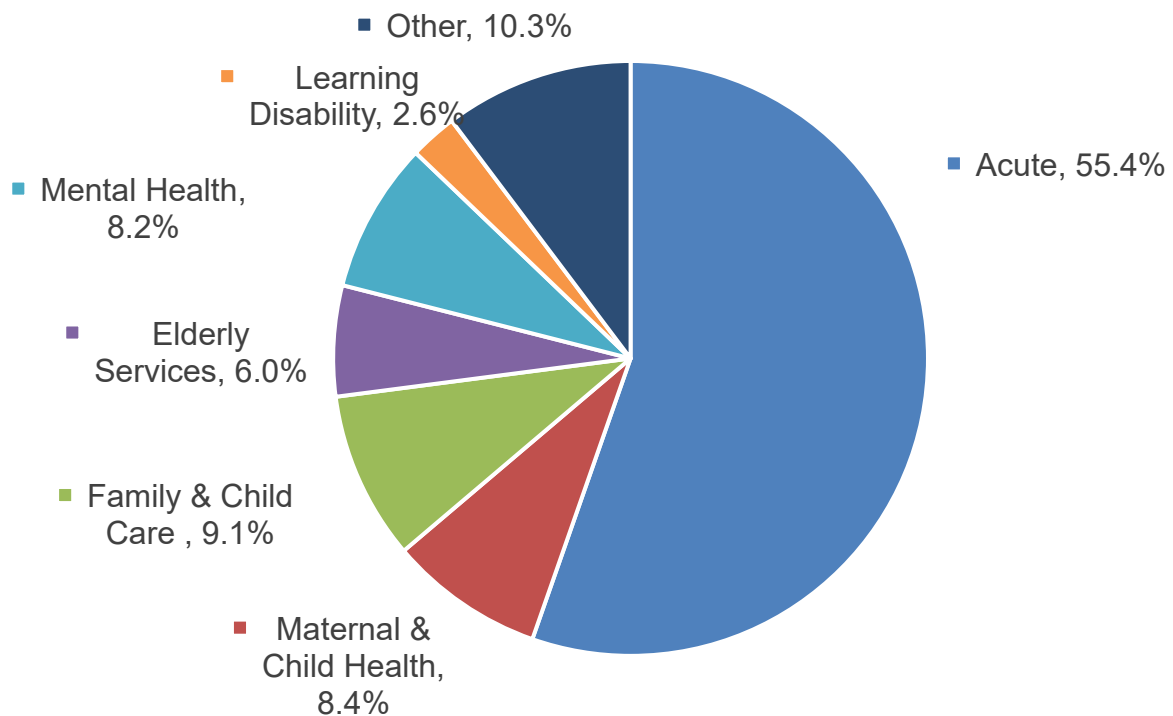
Of the 7,671 complaint issues received by HSC Trusts in 2022/23, more than half (4,246, 55.4%) related to the Acute POC (Table 2).

Four POCs accounted for almost 80% (6,223, 81.1%) of all complaint issues received during 2022/23; Acute POC (4,246, 55.4%), Family & Child Care POC (701, 9.1%), Maternal & Child Health POC (648, 8.4%) and Mental Health POC (628, 8.2%) (Table 2 & Figure 3).

Since 2018/19, the number of complaint issues received by HSC Trusts relating to the Mental Health POC increased by 52.4% (216), from 412 to 628 (Table 3).

**Over half**  
of complaint issues  
related to the Acute  
POC

**Figure 3: Complaint Issues by Programme of Care (2022/23) <sup>2</sup>**



<sup>1</sup> Refer to Appendix 2: Definitions for full list of Programmes of Care (POCs)

<sup>2</sup> The 'Other' category includes all complaint issues not included in the seven POCs above

## Complaint Issues Received by POC and HSC Trust

During 2022/23:

- Belfast HSC Trust reported the highest number of complaint issues relating to the Acute POC (1,489, 35.1%), Mental Health POC (241, 38.4%), Maternal and Child Health POC (268, 41.4%) and the Elderly Care POC (127, 27.5%) (Table 2).
- Of all complaint's' issues received in Northern Ireland, almost a fifth (1,489, 19.4%) related to the Acute POC in the Belfast HSC Trust.
- South Eastern HSC Trust reported the highest number of complaint issues relating to the Learning Disability POC (64, 32.3%), Primary Health & Adult Community POC (74, 42.5%) and Sensory Impairment & Physical Disability POC (31, 55.4%).
- The South Eastern HSC Trust is the sole provider of Prison Healthcare in Northern Ireland and reported 49 complaint issues in relation to this POC (Table 2).
- Southern HSC Trust reported the highest number of complaint issues relating to the Family & Child Care POC (333, 47.5%) (Table 2).
- The Western HSC Trust reported the highest number of complaint issues relating to the Health Promotion & Disease Prevention POC (22, 73.3%) (Table 2).

**20%**

of all complaint issues related to the Acute POC in Belfast HSC Trust

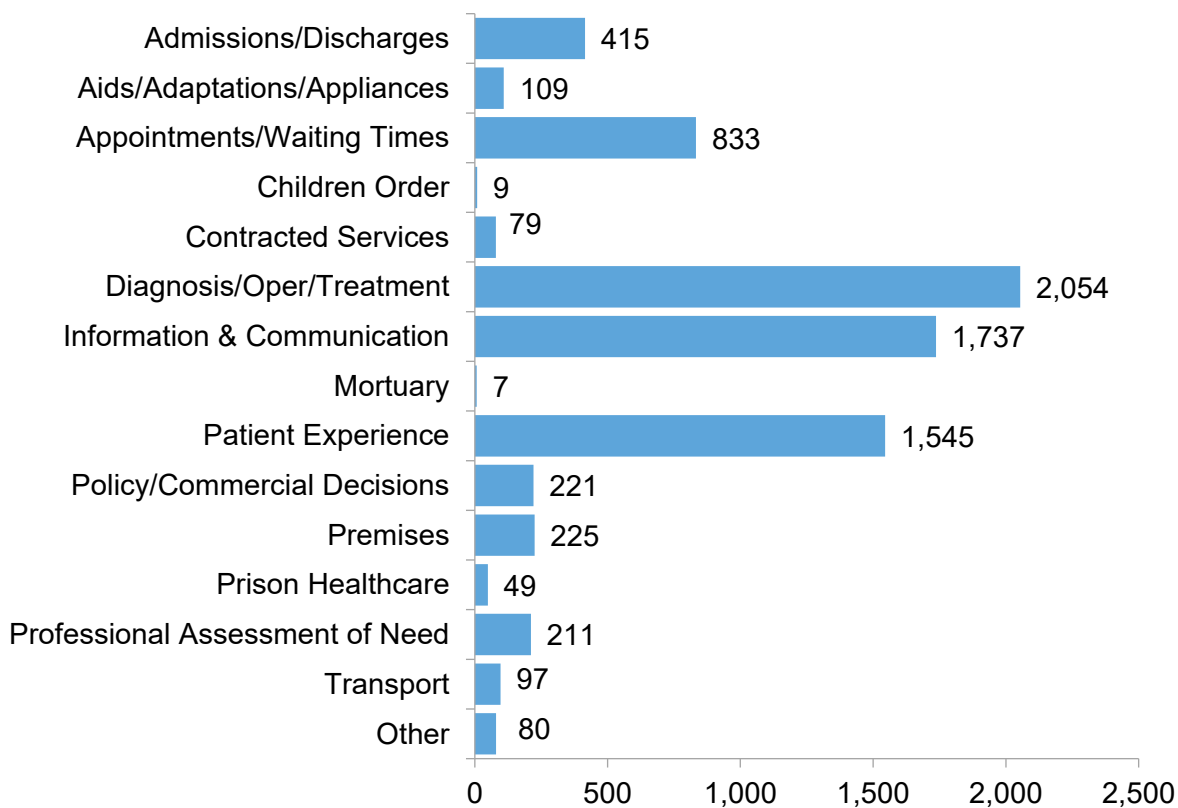


## Complaint Issues Received by Category

The category of each complaint issue is based on the subject<sup>3</sup> which best describes the nature of the patient's / client's concern. To enable the category of the complaint issue to be presented, the subject area of each complaint issue has been grouped into one of 15 main categories<sup>4</sup>:

During 2022/23, HSC Trusts reported that the highest number of complaint issues related to Diagnosis, Operation and Treatment (2,054, 26.8%), Information & Communication (1,737, 22.6%) and Patient Experience (1,545, 20.1%) (Figure 4, Table 5).

**Figure 4: Complaint Issues by Category of Complaint (2018/19 – 2022/23)**

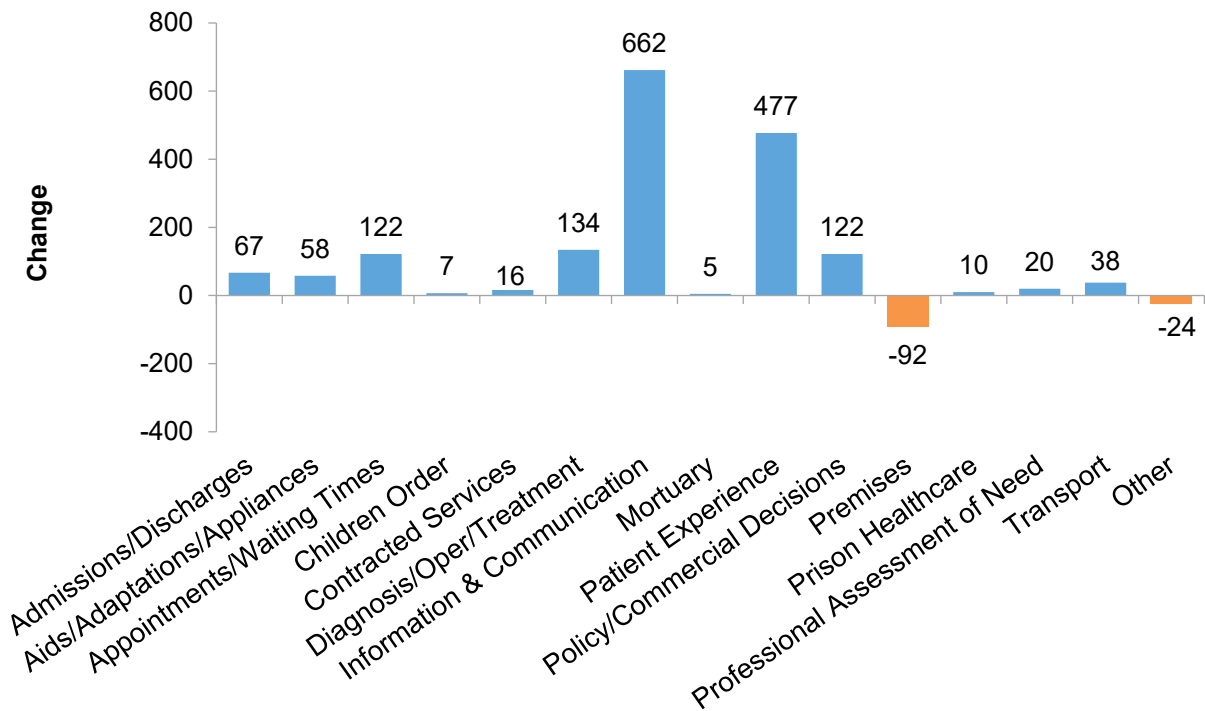


<sup>3</sup> A complete list of complaint issue subjects is detailed in Appendix 3, and an analysis of complaint issues by subject can be found in Table 4.

<sup>4</sup> A list of complaint issue subjects grouped by general category is detailed in Appendix 4.

Figure 5 below presents information on the change in the number of complaint issues received by HSC Trusts between 2018/19 and 2022/23 by Category of Complaint.

**Figure 5: Change in the Number of Complaint Issues, by Category of Complaint (2018/19 – 2022/23)**



Between 2018/19 and 2022/23, all categories reported, with exception of ‘Premises’ and ‘Other’, reported increases in the number of complaint issues received.

The ‘Information and Communication’ category reported the largest increase (662, 61.6%), from 1,075 in 2018/19 to 1,737 in 2022/23, whilst the ‘Premises’ category reported the largest decrease (92, 29.0%) during this period, from 317 to 225 (Figure 4, Table 5).

## Complaint Issues Received by Category and HSC Trust

Figure 6 overleaf presents a summary of the four largest categories, accounting for 80.4% (6,170) of complaint issues received during 2022/23 for each HSC Trust. In Figure 6 complaint issues not in the four largest categories are referred to as 'Other'.

### During 2022/23:

In the Belfast HSC Trust, a quarter (621, 25.2%) of complaint issues related to the 'Diagnosis/Operation/Treatment' category. The next largest categories were 'Information & Communication' (605, 24.6%) and 'Patient Experience' (440, 17.9%) (Figure 6, Table 6).

In the Northern HSC Trust, the largest category of complaint issues related to 'Diagnosis/Operation/Treatment' (378, 41.2%). The second largest category was 'Patient Experience' (155, 16.9%) (Figure 6, Table 6).

The 'Diagnosis/Operation/Treatment' category accounted for the largest number (486, 29.2%) of complaint issues received in the South Eastern HSC Trust followed by 'Information & Communication' (424, 25.5%) and 'Patient Experience' (323, 19.4%) (Figure 6, Table 6).

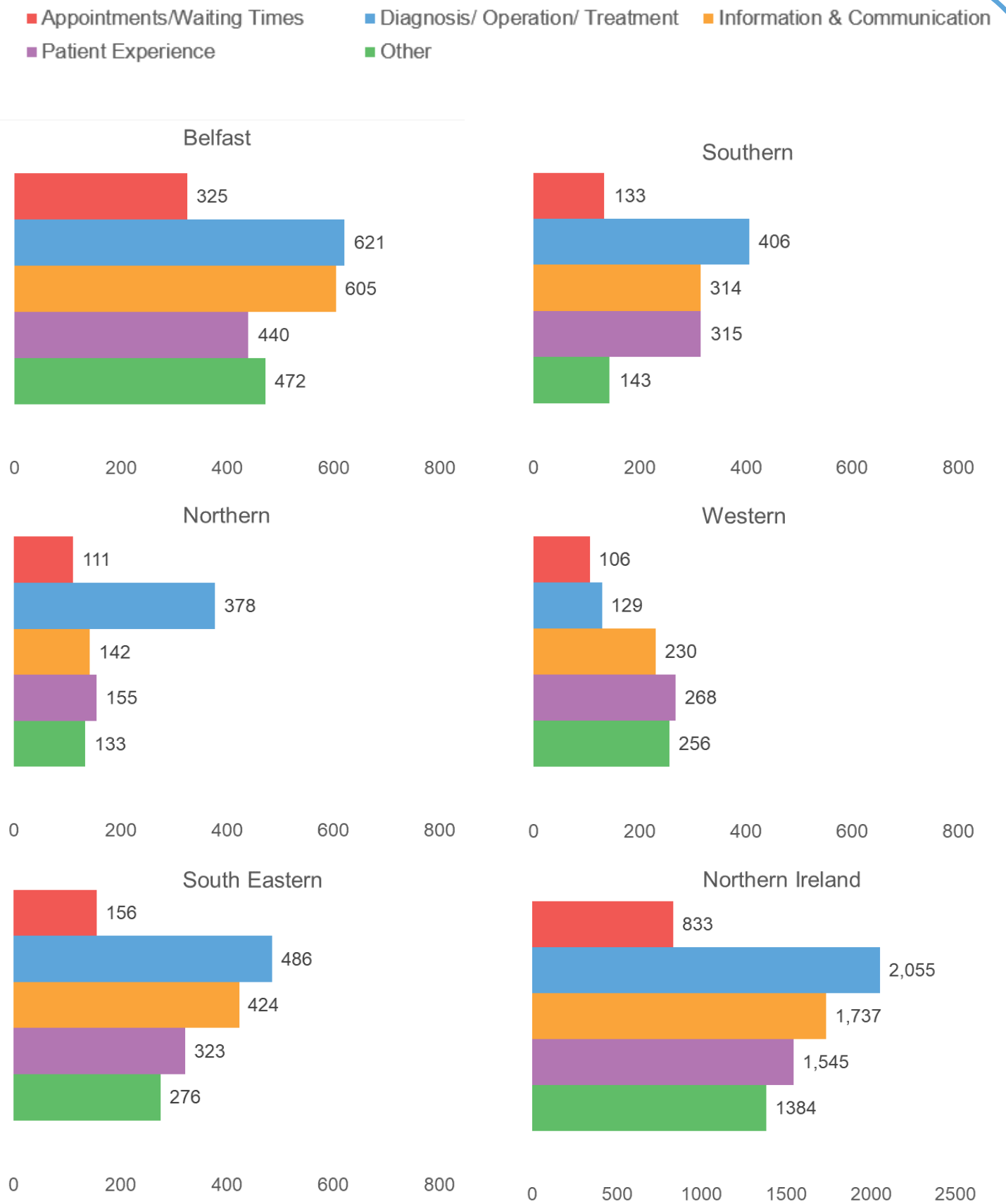
In the Southern HSC Trust, the largest number (406, 28.4%) of complaint issues related to the 'Diagnosis/Operation/Treatment' category. The next largest categories were 'Patient Experience' (315, 22.0%) and 'Information & Communication' (314, 22.0%) (Figure 6, Table 6).

The highest number (268, 27.1%) of complaint issues received by the Western HSC Trust related to 'Patient Experience'. The next largest category was 'Information & Communication' (230, 23.3%) (Figure 6, Table 6).

Complaint issues received by NIAS mainly related to 'Transport' (76, 36.7%) followed by 'Patient Experience' (44, 21.3%) and 'Diagnosis/Operation/Treatment' (34, 16.4%) (Table 6).

**Diagnosis /  
Operation /  
Treatment**  
was main reason  
of complaint  
issues received  
by all HSC Trusts

Figure 6: Main Category of Complaint Issues Received by HSC Trusts (2022/23)<sup>5</sup>



<sup>5</sup> Information for Northern Ireland includes complaint issues by all HSC Trusts including NIAS

## Complaint Issues Received by Specialty

During 2022/23, HSC Trusts reported that the highest number of complaint issues received related to the 'Accident & Emergency' (1,211, 15.8%), 'Children & Young People's Services' (610, 8.0%) and 'General Medicine' (518, 6.8%) (Figure 7, Table 7).

These three specialties accounted for almost a third (2,339, 30.5%) of all complaint issues received during this time (Table 7).

Figure 7: Complaint Issues Received by Specialty (2022/23)



**Accident & Emergency**

**1,211**



**Children & Young People  
Services**

**610**



**General Medicine**

**518**

## SECTION 2: COMPLAINTS RECEIVED BY HSC TRUSTS

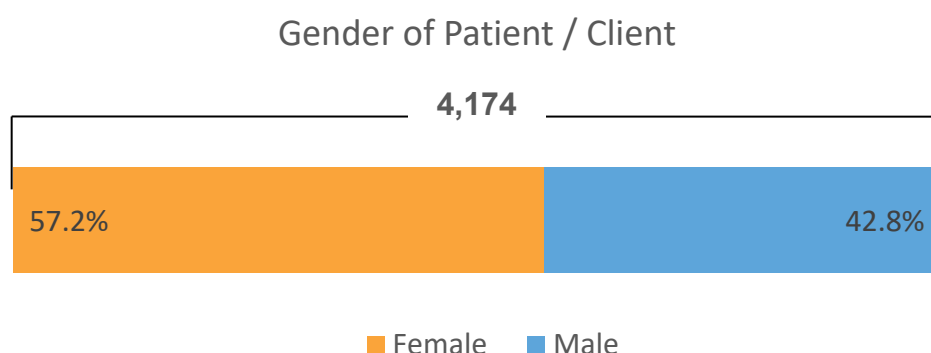
During 2022/23, HSC Trusts received 5,033 complaints, relating to 7,671 complaint issues. Section 2 presents a summary of information relating to these 5,033 complaints. Further information on the difference between a complaint and a complaint issue is detailed on page 5.

### Age and Gender of Patient / Client

During 2022/23, a patient/client's gender was recorded in 4,997 (99.3%) of complaints received by HSC Trusts (Figure 8).

Of those complaints where the gender of the patient / client was recorded, 2,859 (57.2%) were females and 2,138 (42.8%) were males (Figure 8).

**Figure 8: Gender of Patient / Client (2022/23)**



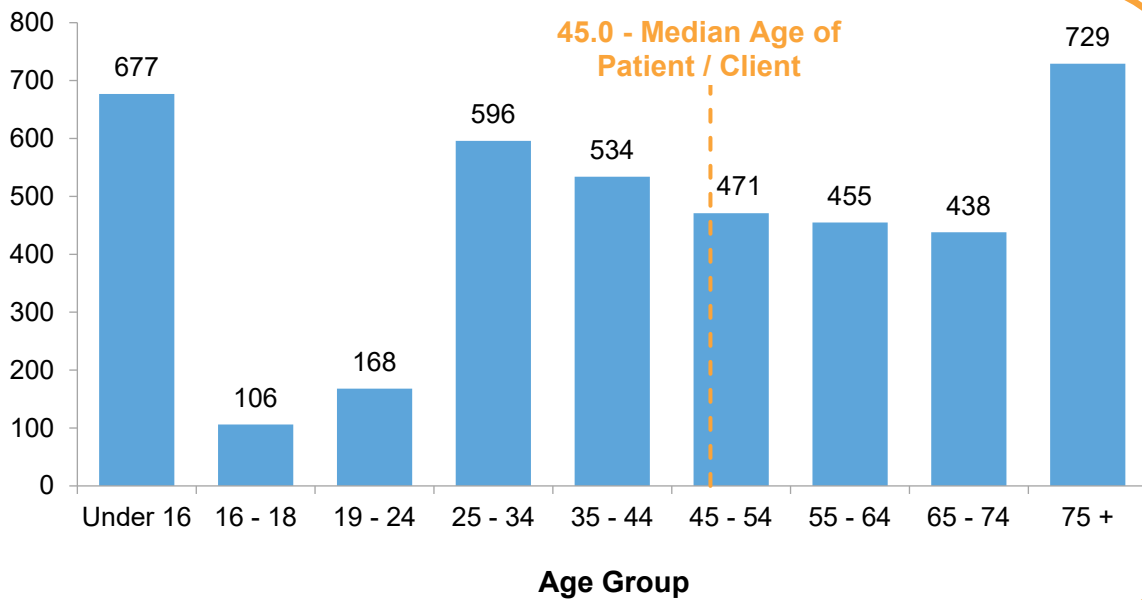
During 2022/23, both the age and gender of the patient / client was recorded in 4,174 (82.9%) of the complaints received by HSC Trusts.

For those complaints where the age and gender of the patient / client was recorded, 729 (17.5%) related to patients / clients aged 75 & over and 677 (16.2%) to those aged under 16 (Figure 8, Table 8).

Of the complaints received by HSC Trusts during 2022/23, the median age of the patient / client was 45 years (Figure 9).

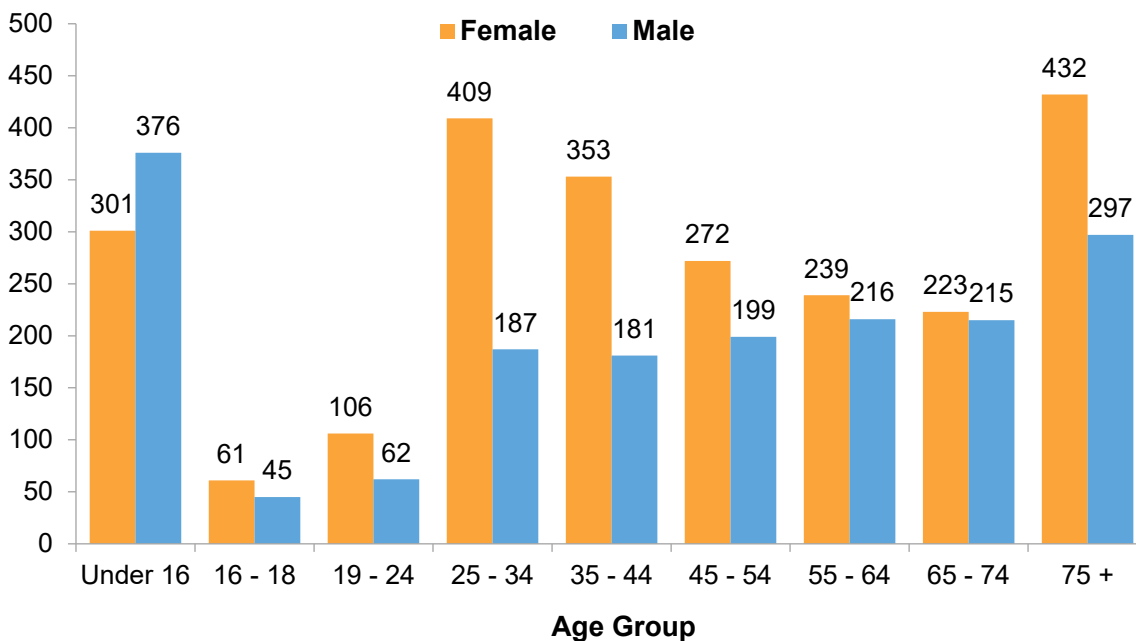
**45 years**  
median age of  
patient / client  
complaints  
received in  
2022/23

**Figure 9: Complaints Received by Age Group of Patient / Client (2022/23)**



Of the 4,174 complaints where the age and gender of the patient/client was recorded, 2,396 (57.4%) were females and 1,778 (42.6%) were males (Table 8, Figure 9).

**Figure 10: Complaints Received by Age Group and Gender of Patient / Client (2022/23)**



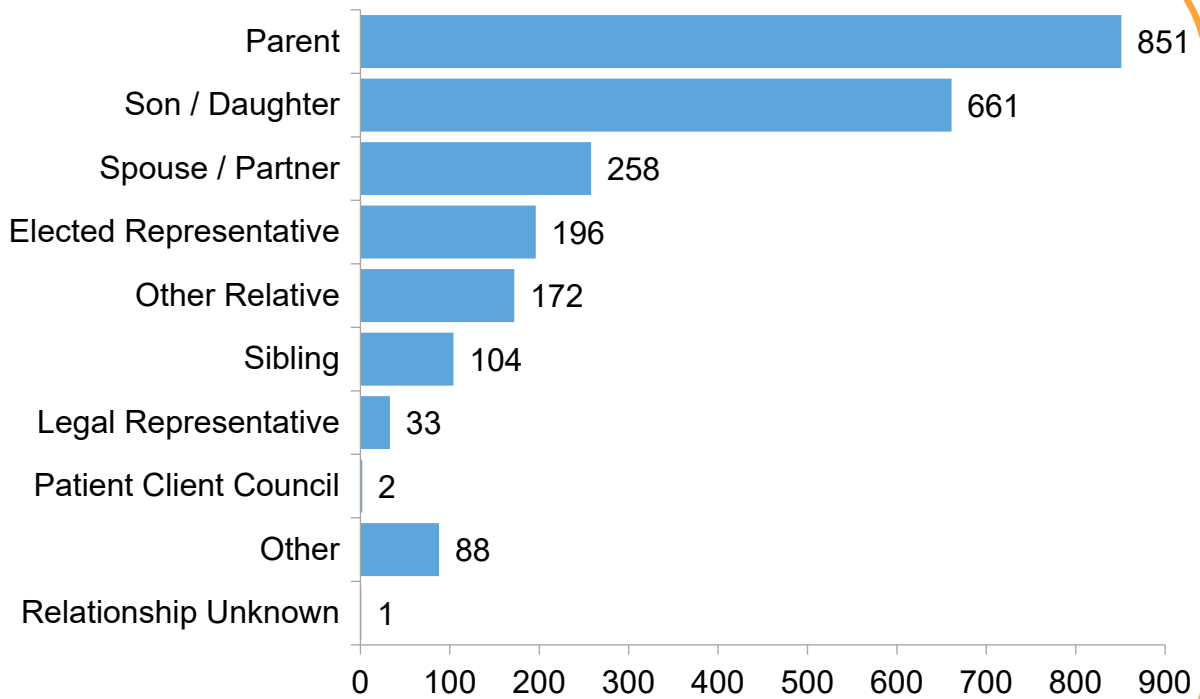
## Relationship of Complainant to Patient / Client

More than half (2,366, 47.0%) of all complaints received in 2022/23 were identified as being from the patient / client, with 2,667 (53.0%) complaints from persons acting on behalf of the patient / client.

Of the 2,366 complaints received from persons acting on behalf of the patient / client, over a third (851, 36.0%) were from the parent, 661 (27.9%) from the son / daughter of the patient / client, 258 (10.9%) from a spouse / partner and 196 (8.3%) from an elected representative (Figure 11, Table 15).

**53%**  
of complaints  
were received  
from those  
acting on behalf  
of patients /

Figure 11: Complaints Received by Relationship of Complainant (2022/23) <sup>6</sup>



<sup>6</sup> Includes only complaints made by persons acting on behalf of the patient / client, i.e. the complainant is not the patient / client

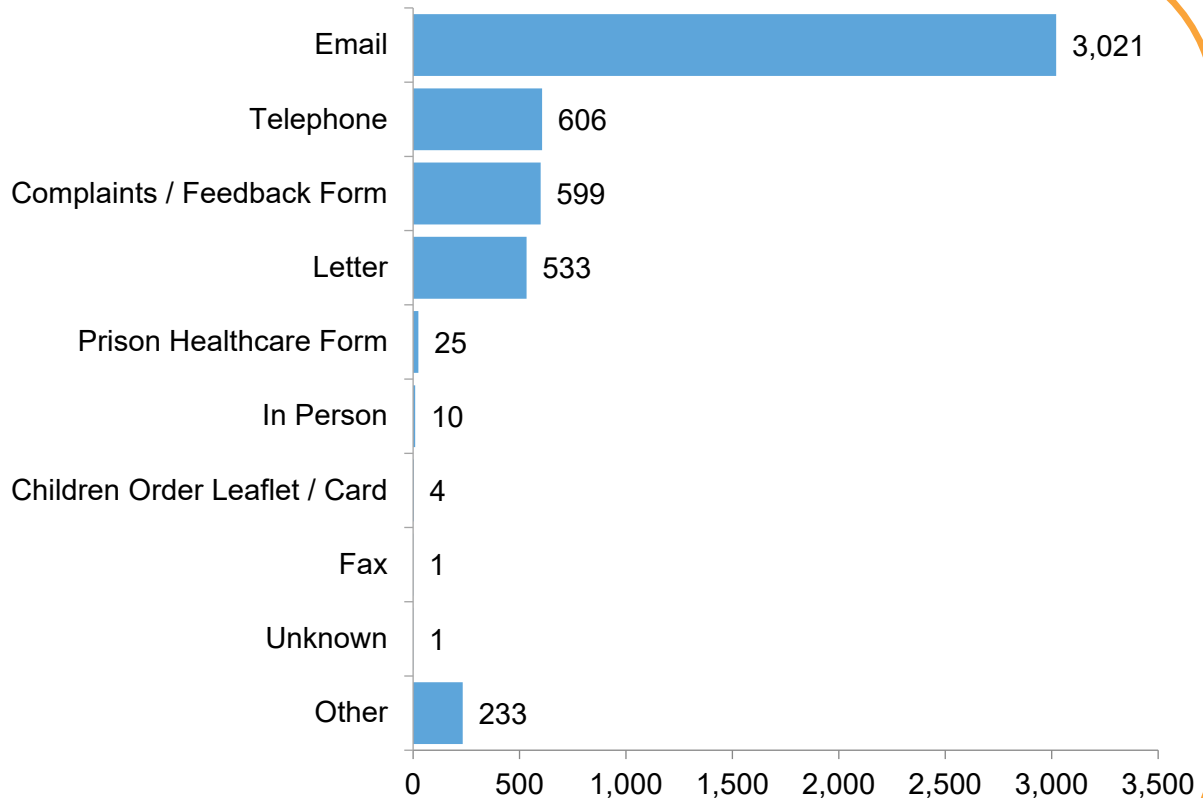


## Method of Complaint

Method of complaint refers to the method by which HSC Trusts received the complaint. Of the 5,033 complaints received during 2022/23, three fifths (3,021, 60.0%) were sent by Email, 606 (12.0%) by Telephone and 599 (11.9%) by Complaints / Feedback form (Figure 12).

**60%**  
of complaints  
received were  
sent by email in  
2022/23

Figure 12: Complaints Received by Method of Complaint (2022/23)



## SECTION 3: TIME TAKEN TO PROVIDE A SUBSTANTIVE RESPONSE TO COMPLAINTS RECEIVED

A substantive response is defined as a communication of the outcome of the complaint to the complainant following an investigation. It should be noted that a single substantive response will be provided to a complaint which may include a number of complaint issues.

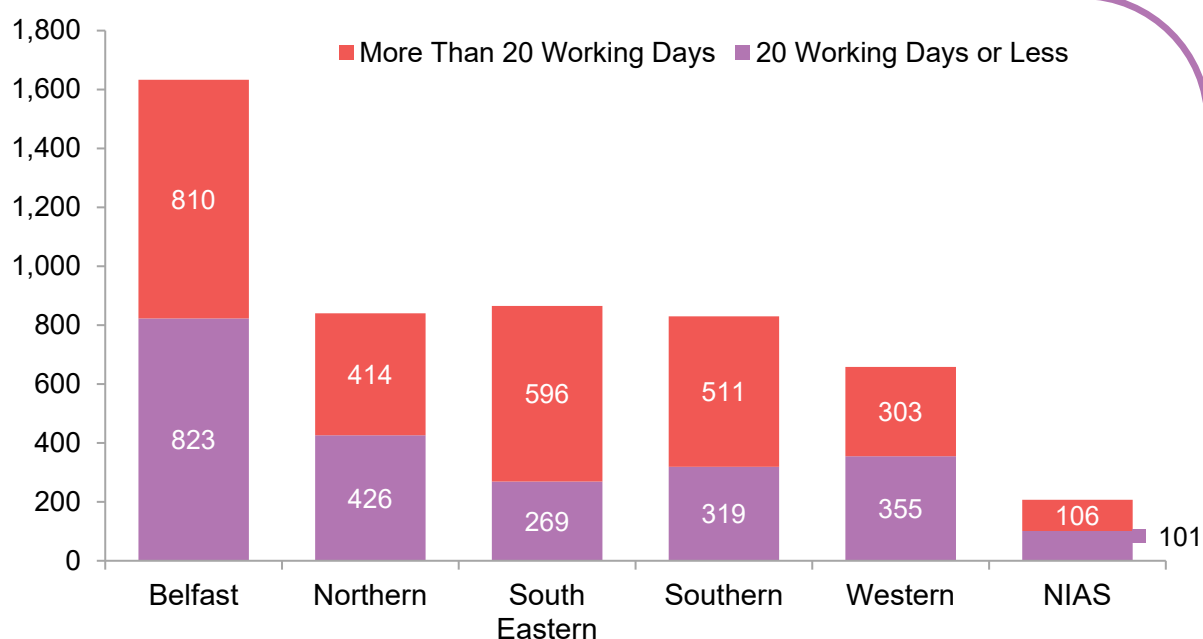
The HSC Complaints Policy requires HSC Trusts to provide a substantive response to the complainant within 20 working days of receipt of a complaint. Where this is not possible, a holding response explaining the reason for the delay is sent to the complainant. **All holding responses are issued in 20 working days or less.**

During 2022/23, Almost half (2,293, 45.6%) of substantive responses were provided by HSC Trusts within 20 working days of having received the complaint (Table 9, Figure 13).

The Western HSC Trust provided the highest proportion of substantive responses within 20 working days (355, 54.0%) during 2022/23, whilst the South Eastern provided the lowest (269, 31.1%) (Table 9, Figure 13).

**46%**  
of complaints  
received a  
substantive  
response within 20  
working days

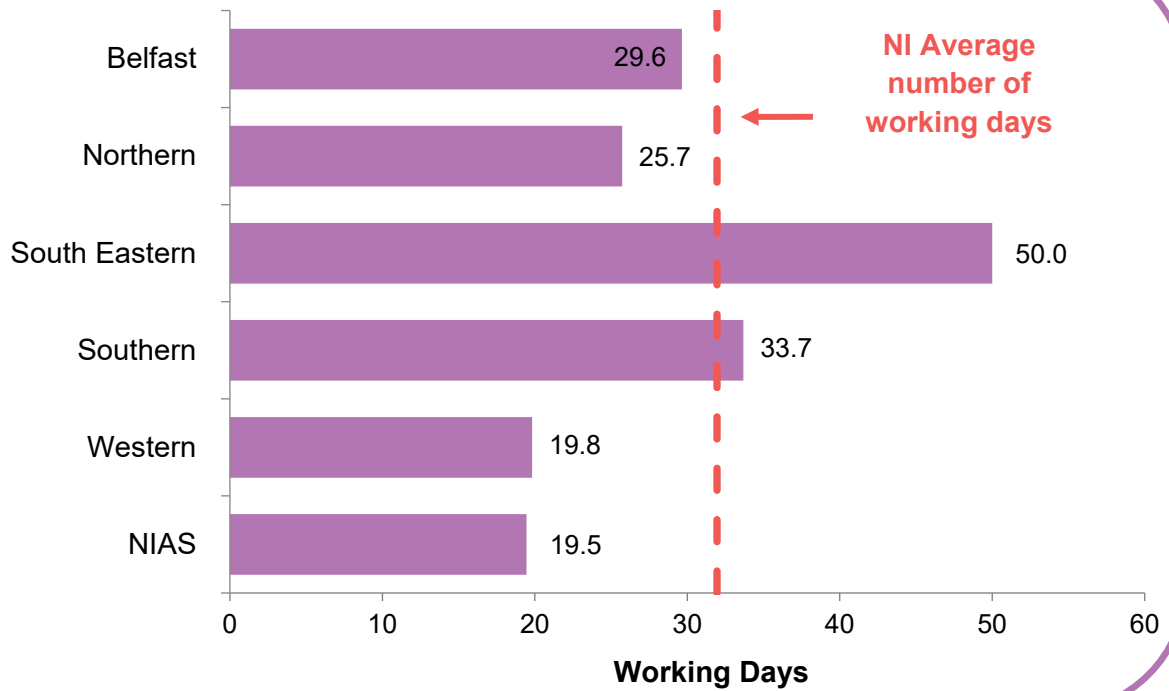
**Figure 13: Time Taken to Provide a Substantive Response to Complaints Received, by HSC Trusts (2022/23)**



## Average Number of Working Days to Substantive Response

On average (mean) HSC Trusts took 31.9 working days to provide a substantive response to a complaint received in 2022/23 (Table 9, Figure 14)

Figure 14: Average Number of Working Days to Provide a Substantive Response by HSC Trusts (2022/23)<sup>7</sup>



<sup>7</sup> Where it is not possible to provide a substantive response within 20 working days, a holding response explaining the reason for the delay is sent to the complainant. All holding responses are issued in 20 working days or less.

## SECTION 4: FAMILY PRACTITIONER SERVICE (FPS) COMPLAINTS

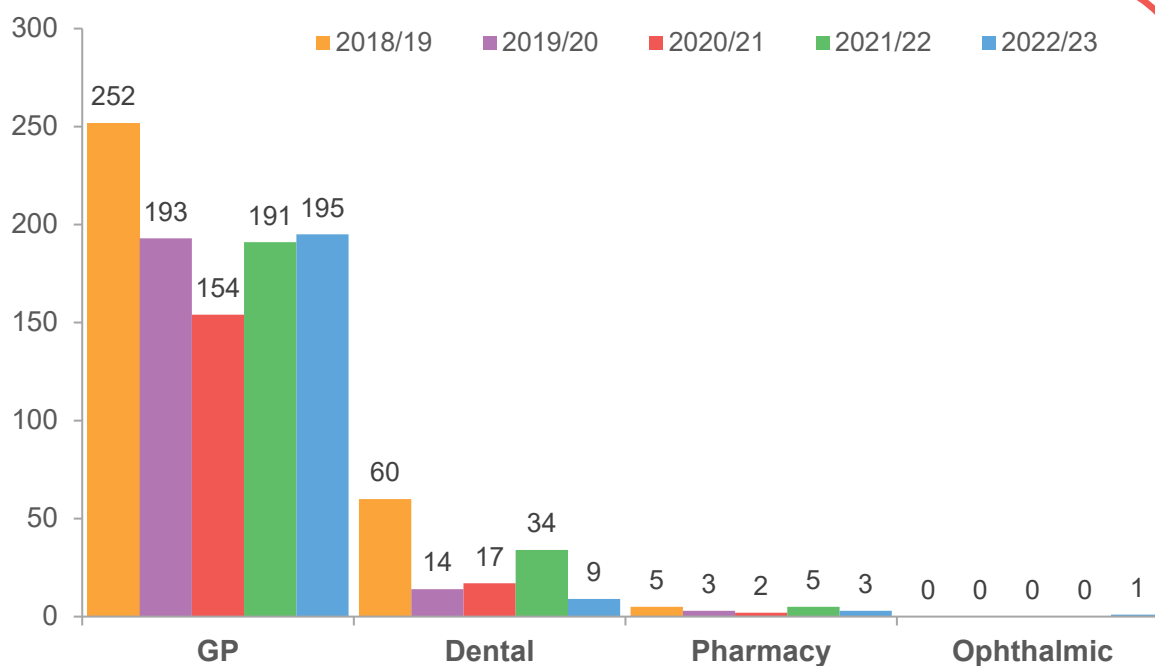
Information in this section refers to complaints received by the HSCB<sup>8</sup> regarding FPS practices in Northern Ireland.

There are over 1,500 FPS practices across Northern Ireland encompassing general practitioners, dental practitioners, pharmacists and optometrists. Under HSC Complaints Procedure all FPS practices are required to forward to the SPPG Complaints Team anonymised copies of each letter of complaint received along with the subsequent response, within 3 working days of this being issued.

Of the 208 complaints received by the SPPG Complaints Team regarding FPS practices in 2022/23, 127 (61.1%) were handled under Local Resolution and the SPPG Complaints Team acting as an Honest Broker in 81 (38.9%) (Tables 11 & 14, Figures 16 & 18).

**10%**  
decrease in  
FPS complaints  
in the last year

**Figure 15: FPS Complaints Handled by Practice Type (2018/19 – 2022/23)**



Between 2018/19 and 2022/23, the number of complaints made against FPS practices in Northern Ireland decreased by 34.4% (109), from 317 to 208 (Table 10, Figure 15).

<sup>8</sup> Refer to Appendix 5 for further details.

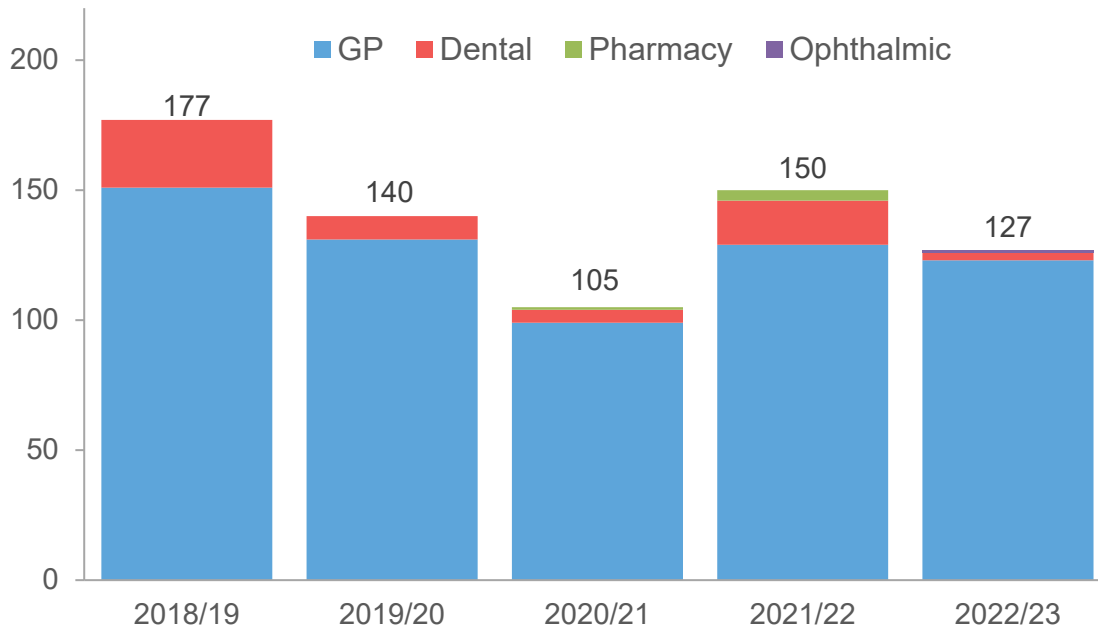
## Local resolution

The first stage of the HSC Complaints Procedure is known as 'local resolution'. The purpose of local resolution is to provide an opportunity for the complainant and the organisation to attempt a prompt and fair resolution of the complaint. In the case of FPS practices, local resolution involves a practitioner seeking to resolve the complaint through discussion and negotiation.

**97%**

**of complaints  
handled under  
Local Resolution  
related to GPs**

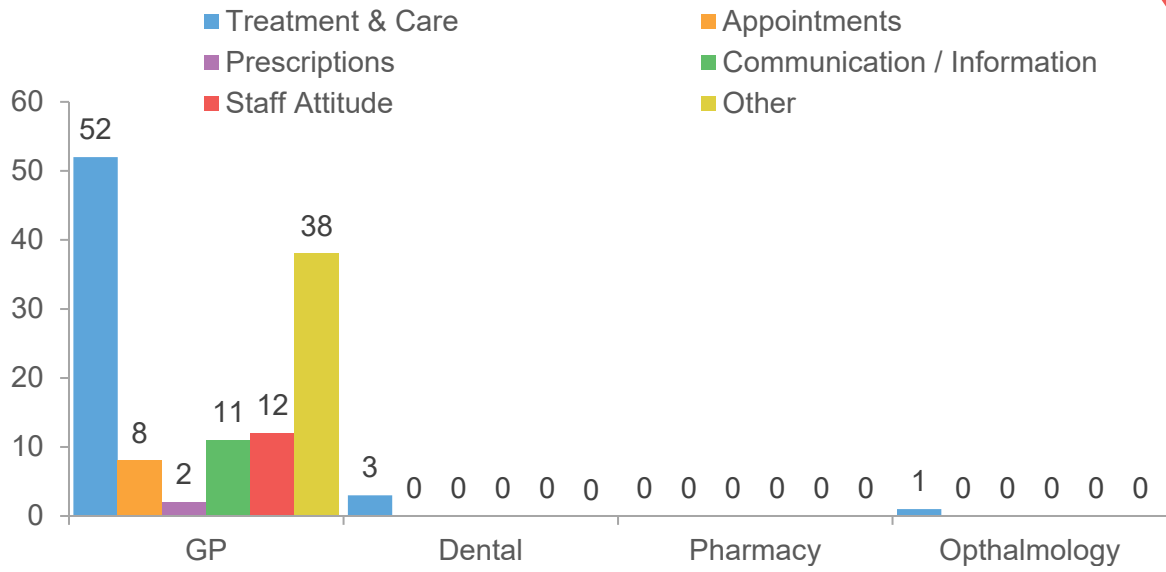
**Figure 16: FPS Complaints Handled Under Local Resolution, by Year and Practice Type (2018/19 – 2022/23) <sup>5</sup>**



During 2022/23, 123 (96.9%) complaints handled under local resolution related to GPs (Table 11, Figure 16).

In 2022/23, 'Treatment & Care' accounted for 44.1% (56) of all complaints handled under local resolution, 15 less than in the previous year (Table 12, Figure 17).

**Figure 17: FPS Complaints Handled Under Local Resolution, by Subject and Practice Type (2022/23)**

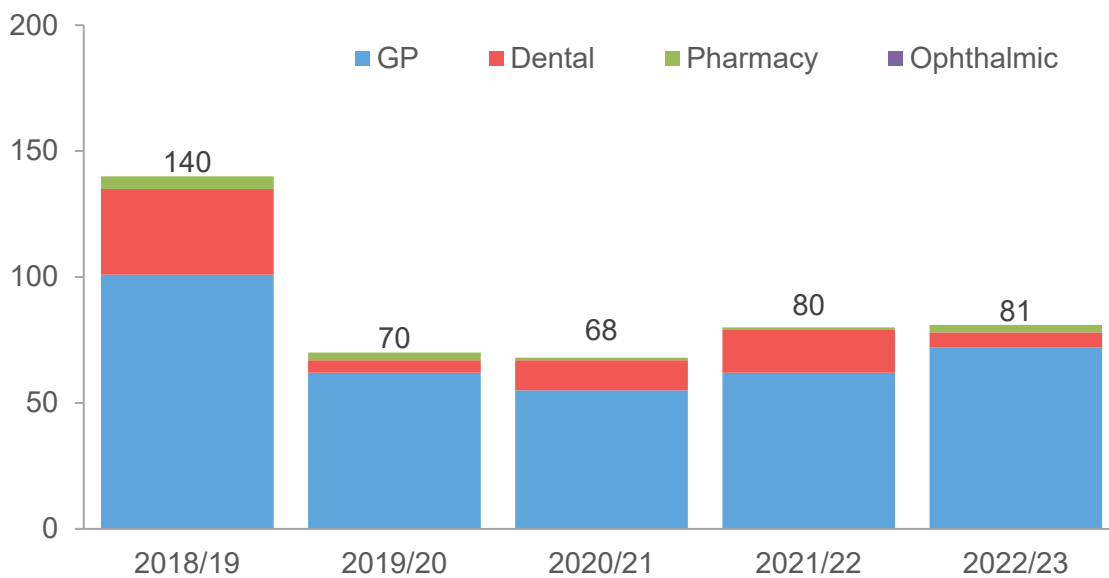


### Honest Broker

Where a complainant does not wish to approach the FPS practice directly, SPPG Complaints Team, with the agreement of both the practice and complainant, may act as an intermediary or 'honest broker' with the aim of assisting in the local resolution of the complaint.

**89%**  
of complaints,  
where the SPPG  
Complaints Team  
acted as an Honest  
Broker, related to

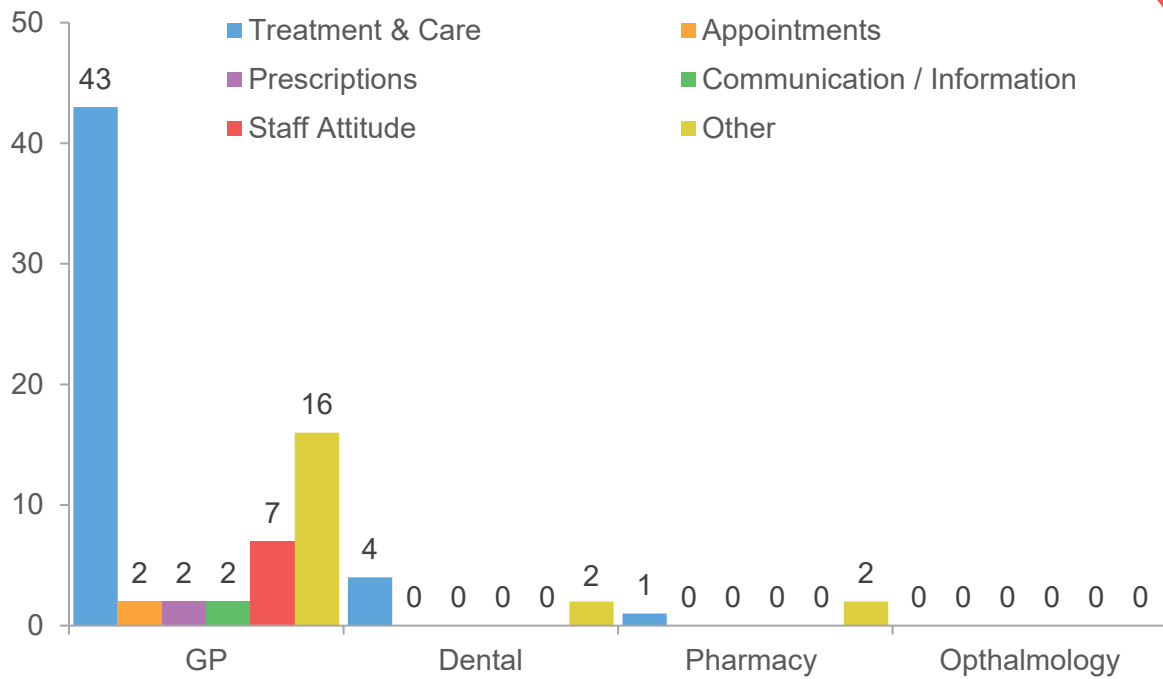
**Figure 18: FPS Complaints where the SPPG Complaints Team Acted as an Honest Broker, by Year and Practice Type (2018/19 – 2022/23) <sup>5</sup>**



The number of complaints where the SPPG Complaints Team acted as an honest broker remained similar in 2022/23 (81) compared with 2021/22 (80) (Table 13, Figure 18).

'Treatment & Care' accounted for three fifths (48, 59.3%), of all complaints in which the SPPG Complaints Team acted as an honest broker during 2022/23 (Table 14, Figure 19).

**Figure 19: FPS Complaints where SPPG Complaints Team Acted as an Honest Broker, by Subject and Practice Type (2022/23)**



## SECTION 5: COMPLIMENTS RECEIVED BY HSC TRUSTS

A statistical information return to collate information on compliments received by HSC Trusts was introduced in December 2017 <sup>9</sup>, with data first being published in the 2018/19 report.

For the purposes of this statistical collection, a compliment may be understood as ‘an expression of praise, commendation or admiration’. In addition, only compliments received by: Card, Email, Feedback Form, Letter, Social Media (Facebook & Twitter only) or Telephone should be included.

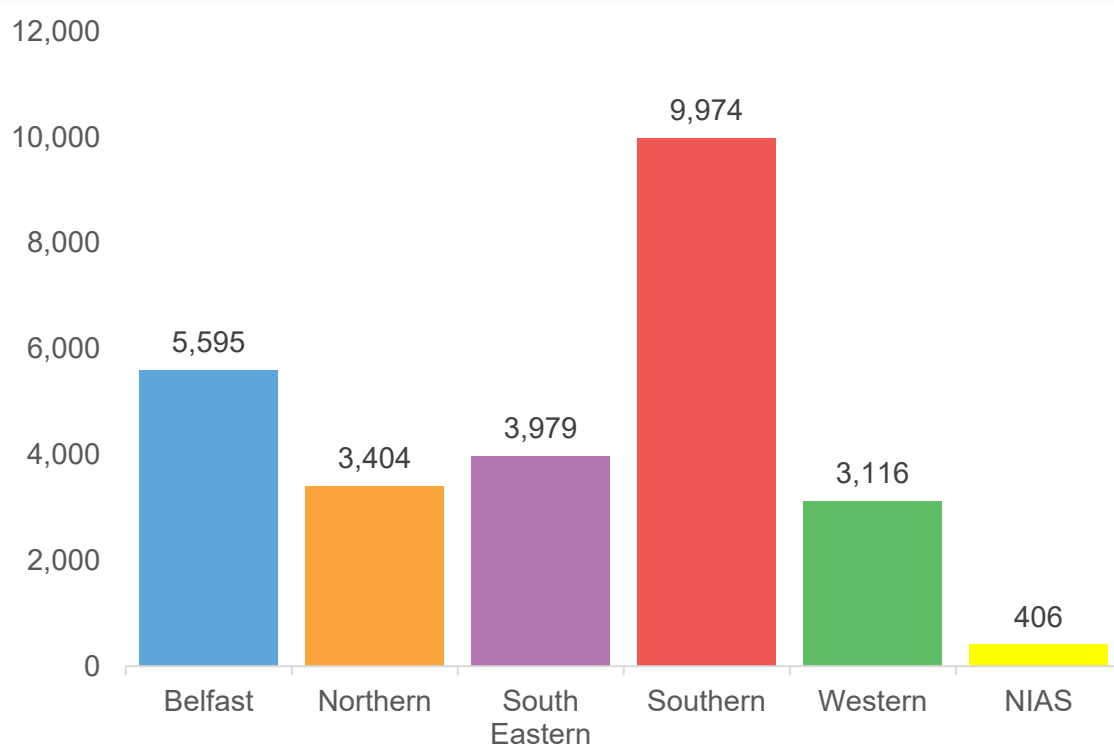
### Compliments Received by HSC Trusts

During 2022/23, HSC Trusts received 26,474 compliments.

Over a third (9,974, 37.7%) were received by the Southern HSC Trust, 5,595 (21.1%) by the Belfast HSC Trust, 3,979 (15.0%) by the the South Eastern HSC Trust, 3,404 (12.9%) by Northern HSC Trust, 3,116 (11.8%) by the Western HSC Trust and 406 (1.5%) by NIAS (Table 16, Figure 20).

Over  
**26,000**  
compliments  
received by HSC  
Trusts

Figure 20: Compliments Received by HSC Trusts (2022/23)



<sup>9</sup> Additional information on the compliments information collection is detailed in Appendix 1 & 6.



## Subject of Compliment Received

Of the 26,474 compliments received by HSC Trusts, 11,946 (45.1%) related to 'Quality of Treatment & Care', 8,327 (31.5%) to 'Staff Attitude & Behaviour', 2,398 (9.1%) to 'Information & Communication', 2,202 (8.3%) to 'Environment', and 1,601 (6.0%) to 'Other' subjects (Table 16, Figure 21).

Figure 21: Compliments received by Subject and HSC Trust (2022/23)

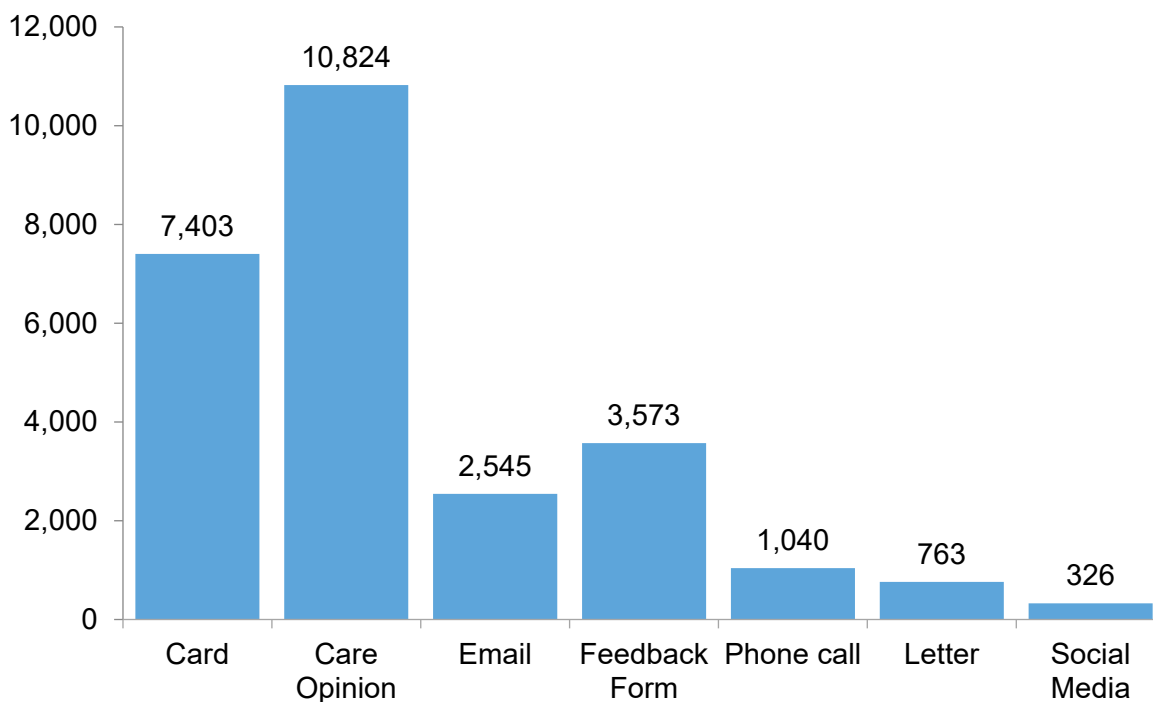
■ Quality of Treatment and Care 
 ■ Staff Attitude & Behaviour 
 ■ Information & Communication  
■ Environment 
 ■ Other



## Method of Compliment

Two fifths (10,824, 40.9%) of compliments received during 2022/23 were made by Care Opinion, 7,403 (28.0%) by Card, 3,573 (13.5%) by Feedback Form, 2,545 (9.6%) by Email, 1,040 (3.9%) by Phone, 763 (2.9%) by Letter and 326 (1.2%) by Social Media<sup>10</sup> (Figure 22).

Figure 22: Compliments received by HSC Trusts by Method (2022/23)



<sup>10</sup> Only Facebook posts / Tweets linked to the official organisational Facebook / Twitter accounts are included as social media compliments.

## SECTION 6: ADDITIONAL TABLES

**Table 1: Complaint Issues Received by HSC Trusts (2018/19 – 2022/23)**

HSC Trust	2018/19	2019/20	2020/21	2021/22	2022/23
Belfast	2,356	2,118	1,610	2,078	2,463
Northern	760	739	614	777	918
South Eastern	1,269	1,392	1,228	1,359	1,665
Southern	850	1,067	857	1,322	1,429
Western	690	696	545	852	989
NIAS	124	93	151	265	207
<b>Northern Ireland</b>	<b>6,049</b>	<b>6,105</b>	<b>5,005</b>	<b>6,653</b>	<b>7,671</b>

**Table 2: Complaint Issues Received by HSC Trusts, by POC (2022/23)<sup>11</sup>**

Programme of Care	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NIAS	Total
Acute	1,489	486	791	924	556	-	<b>4,246</b>
Maternal & Child Health	268	68	179	-	133	-	<b>648</b>
Family & Child Care	66	94	149	333	59	-	<b>701</b>
Elderly Care	127	74	125	53	83	-	<b>462</b>
Mental Health	241	121	121	70	75	-	<b>628</b>
Learning Disability	59	22	64	25	28	-	<b>198</b>
Sens Impairment & Physical Disability	1	13	31	8	3	-	<b>56</b>
Health Promotion & Disease Prevention	3	5	-	-	22	-	<b>30</b>
Primary Health & Adult Community	64	20	74	14	2	-	<b>174</b>
Prison Healthcare	-	-	49	-	-	-	<b>49</b>
None (No POC assigned)	145	15	82	2	28	207	<b>479</b>
<b>Total</b>	<b>2,463</b>	<b>918</b>	<b>1,665</b>	<b>1,429</b>	<b>989</b>	<b>207</b>	<b>7,671</b>

<sup>11</sup> The South Eastern HSC Trust is the sole provider of Prison Healthcare in Northern Ireland.

**Table 3: Complaint Issues Received by HSC Trusts, by POC (2018/19 – 2022/23)**

Programme of Care	2018/19	2019/20	2020/21	2021/22	2022/23
Acute	3,626	3,576	2,695	3,550	4,246
Maternal & Child Health	281	367	394	533	648
Family & Child Care	429	458	524	654	701
Elderly Care	322	426	413	450	462
Mental Health	412	474	368	609	628
Learning Disability	93	113	82	133	198
Sens Impairment & Physical Disability	58	40	28	97	56
Health Promotion & Disease Prevention	4	24	12	22	30
Primary Health & Adult Community	287	113	51	111	174
Prison Healthcare	39	40	62	49	49
None (No POC assigned)	498	474	376	445	479
<b>Total</b>	<b>6,049</b>	<b>6,105</b>	<b>5,005</b>	<b>6,653</b>	<b>7,671</b>

**Table 4: Subject of Complaint Issues by HSC Trust (2022/23)**

Subject	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NIAS	TOTAL
Access to Premises	18	5	11	7	4	-	45
Aids/Adaptations/Appliances	35	15	13	6	40	-	109
Children Order Complaints	-	-	-	-	9	-	9
Clinical Diagnosis	50	34	65	61	42	-	252
Communication/Information	551	131	377	274	178	18	1,529
Complaints Handling	1	-	4	-	2	-	7
Confidentiality	20	5	24	22	10	3	84
Consent to Treatment/Care	10	1	3	6	1	-	21
Contracted Regulated Childrens Services	-	-	-	1	1	-	2
Contracted Regulated Domiciliary Services	1	6	3	-	2	-	12
Contracted Regulated Residential Nursing	2	8	11	-	14	-	35
Contracted Independent Hospital Services	1	-	1	-	2	-	4
Other Contracted Services	3	2	13	-	8	-	26
Delay/Cancellation for Inpatients	10	1	4	4	1	-	20
Delayed Admission from A&E	1	1	5	1	2	-	10
Discharge/Transfer Arrangements	81	24	21	20	6	1	153
Discrimination	15	3	15	8	2	-	43
Environmental	34	4	17	18	7	-	80
Hotel/Support/Security Services (Excludes Contracted Services)	13	2	22	4	23	-	64
Infection Control	19	2	6	4	5	-	36
Mortuary & Post-Mortem	-	-	-	-	7	-	7
Policy/Commercial Decisions	27	20	27	40	107	1	222
Privacy/Dignity	45	4	23	23	3	-	98
Professional Assessment of Need	58	21	34	90	9	-	212
Property/Expenses/Finances	59	17	27	32	225	2	362
Records/Record Keeping	33	6	23	18	40	1	121
Staff Attitude/Behaviour	321	131	266	252	38	42	1,050
Transport, Late or Non-arrival/Journey Time	2	4	3	5	-	76	90
Transport, Suitability of Vehicle/Equipment	2	1	2	1	1	-	7
Quality of Treatment & Care	403	323	416	288	81	34	1,545
Quantity of Treatment & Care	148	19	24	47	4	-	242
Waiting List, Delay/Cancellation Community Based Appointments	32	28	47	33	60	-	200
Waiting List, Delay/Cancellation Outpatient Appointments	179	48	70	24	33	-	354
Waiting List, Delay/Cancellation Planned Admission to Hospital	166	11	24	44	7	-	252
Waiting Times, A&E Departments	39	27	21	50	3	2	142
Waiting Times, Community Services	35	1	4	20	3	-	63
Waiting Times, Outpatient Departments	40	7	23	6	7	-	83
Other	9	6	16	20	2	27	80
<b>Total Complaint Issues</b>	<b>2,463</b>	<b>918</b>	<b>1,665</b>	<b>1,429</b>	<b>989</b>	<b>207</b>	<b>7,671</b>

**Table 5: Category of Complaint Issue (2018/19 – 2022/23)**

Category of Complaint Issue	2018/19		2019/20		2020/21		2021/22		2022/23	
	No.	%	No.	%	No.	%	No.	%	No.	%
Admissions/Discharges	348	5.8%	372	6.1%	280	5.6%	365	4.6%	415	5.4%
Aids/Adaptations/Appliances	51	0.8%	62	1.0%	34	0.7%	54	0.9%	109	1.4%
Appointments/Waiting Times	711	11.8%	688	11.3%	351	7.0%	546	8.1%	833	10.9%
Children Order	2	0.0%	1	0.0%	5	0.1%	1	0.0%	9	0.1%
Contracted Services	63	1.0%	60	1.0%	32	0.6%	38	0.6%	79	1.0%
Diagnosis/Oper/Treatment	1,920	31.7%	1,855	30.4%	1,631	32.6%	2,058	31.4%	2,054	26.8%
Information & Communication	1,075	17.8%	1,176	19.3%	1,177	23.5%	1,465	22.0%	1,737	22.6%
Mortuary	2	0.0%	1	0.0%	1	0.0%	4	0.1%	7	0.1%
Patient Experience	1,068	17.7%	1,077	17.6%	962	19.2%	1,328	20.4%	1,545	20.1%
Policy/Commercial Decisions	99	1.6%	83	1.4%	67	1.3%	148	2.0%	221	2.9%
Premises	317	5.2%	302	4.9%	160	3.2%	159	2.2%	225	2.9%
Prison Healthcare	39	0.6%	40	0.7%	62	1.2%	49	0.8%	49	0.6%
Professional Assessment of Need	191	3.2%	196	3.2%	130	2.6%	212	3.3%	211	2.8%
Transport	59	1.0%	117	1.9%	60	1.2%	140	2.3%	97	1.3%
Other	104	1.7%	75	1.2%	53	1.1%	86	1.3%	80	1.0%
<b>Total</b>	<b>6,049</b>	<b>100.0%</b>	<b>6,105</b>	<b>100.0%</b>	<b>5,005</b>	<b>100.0%</b>	<b>6,653</b>	<b>100.0%</b>	<b>7,671</b>	<b>100.0%</b>

**Table 6: Category of Complaint Issue by HSC Trust (2022/23)<sup>12</sup>**

Category of Complaint Issue	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NIAS	TOTAL
Admissions/Discharges	248	36	50	65	15	1	415
Aids/Adaptations/Appliances	35	15	13	6	40	0	109
Appointments/Waiting Times	325	111	156	133	106	2	833
Children Order	0	0	0	0	9	0	9
Contracted Services	7	16	28	1	27	0	79
Diagnosis/ Operation/ Treatment	621	378	486	406	129	34	2,054
Information & Communication	605	142	424	314	230	22	1,737
Mortuary	0	0	0	0	7	0	7
Patient Experience	440	155	323	315	268	44	1,545
Policy/ Commercial Decisions	27	20	26	40	107	1	221
Premises	84	13	56	33	39	0	225
Prison Healthcare			49			0	49
Professional Assessment of Need	58	21	33	90	9	0	211
Transport	4	5	5	6	1	76	97
Other	9	6	16	20	2	27	80
<b>Total</b>	<b>2463</b>	<b>918</b>	<b>1665</b>	<b>1429</b>	<b>989</b>	<b>207</b>	<b>7,671</b>

<sup>12</sup>The South Eastern HSC Trust is the sole provider of Prison Healthcare in Northern Ireland.

**Table 7: Specialty of Complaint Issues by HSC Trust (2022/23)**

Specialty	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NIAS	TOTAL
Accident & Emergency	266	142	213	347	125	118	<b>1,211</b>
Allied Health Professions	57	21	73	45	15	.	<b>211</b>
Anaesthetics & Pain Management	18	6	7	12	7	.	<b>50</b>
Burns Plastic and Maxillofacial Surgery	15	.	27	.	7	.	<b>49</b>
Cardiology	34	16	14	24	31	.	<b>119</b>
Child & Adolescent Psychiatry	49	7	.	45	.	.	<b>101</b>
Children & Young Peoples Services	64	94	161	204	87	.	<b>610</b>
Clinical genetics	3	.	.	.	18	.	<b>21</b>
Community Nursing/Midwives	.	17	10	2	4	.	<b>33</b>
Community Paediatrics	25	9	5	22	2	.	<b>63</b>
Dentistry	19	6	.	14	.	.	<b>39</b>
Dermatology	28	1	22	4	2	.	<b>57</b>
Domicillary Services	9	11	7	16	16	.	<b>59</b>
ENT	42	13	29	5	10	.	<b>99</b>
General Medicine	94	72	187	137	28	.	<b>518</b>
General Surgery	83	48	56	86	42	.	<b>315</b>
Geriatric Medicine	86	28	6	.	71	.	<b>191</b>
Gynaecology	105	23	41	28	68	.	<b>265</b>
Joint Consultant Clinics	.	31	.	.	35	.	<b>66</b>
Learning Disability	21	19	64	16	3	.	<b>123</b>
Mental Health Acute	61	25	33	28	12	.	<b>159</b>
Mental Health Community	.	76	101	41	12	.	<b>230</b>
Neurology	36	.	16	8	47	.	<b>107</b>
Obstetrics	107	32	158	88	21	.	<b>406</b>
Occupational Health Medicine	.	.	.	.	28	.	<b>28</b>
Old Age Psychiatry	.	18	11	3	.	.	<b>32</b>
Oncology	35	8	20	1	6	.	<b>70</b>
Ophthalmology	110	.	1	.	7	.	<b>118</b>
Paediatrics	138	27	35	18	13	.	<b>231</b>
Pathology (Laboratory Services)	9	9	.	2	21	.	<b>41</b>
Physical Disability/ Sensory Support	5	.	31	8	.	.	<b>44</b>
Radiology	52	15	40	21	1	.	<b>129</b>
Rehabilitation	.	6	.	17	22	.	<b>45</b>
Residential Care	13	11	26	4	9	.	<b>63</b>
Supported Living	.	1	.	6	41	.	<b>48</b>
Trauma & Orthopaedics	204	7	30	40	10	.	<b>291</b>
Urology	70	.	23	30	23	.	<b>146</b>
Vascular	30	.	.	2	2	.	<b>34</b>
NIAS - Patient Care Services	.	.	.	.	.	26	<b>26</b>
NIAS - Emergency Ambulance Control	.	.	.	.	.	34	<b>34</b>
Other	575	119	218	105	143	29	<b>1,189</b>
<b>Total</b>	<b>2463</b>	<b>918</b>	<b>1665</b>	<b>1429</b>	<b>989</b>	<b>207</b>	<b>7,671</b>

**Table 8: Complaints by Age Group and Gender of Patient / Client (2022/23)** <sup>13</sup>

Age Group	Female	Male	Not Known	Total
Under 16	301	376	1	<b>678</b>
16 - 18	61	45	1	<b>107</b>
19 - 24	106	62	2	<b>170</b>
25 - 34	409	187	.	<b>596</b>
35 - 44	353	181	1	<b>535</b>
45 - 54	272	199	.	<b>471</b>
55 - 64	239	216	.	<b>455</b>
65 - 74	223	215	1	<b>439</b>
75 +	432	297	1	<b>730</b>
<b>Total</b>	<b>2,396</b>	<b>1,778</b>	<b>29</b>	<b>4,203</b>

**Table 9: Time Taken to Provide a Substantive Response to Complaints Received, by HSC Trust (2022/23)**

HSC Trust	20 Working Days or Less		More Than 20 Working Days		Total No.	Mean No. of Working Days
	No.	%	No.	%		
Belfast	823	<b>50.4%</b>	810	<b>49.6%</b>	<b>1,633</b>	29.6
Northern	426	<b>50.7%</b>	414	<b>49.3%</b>	<b>840</b>	25.7
South Eastern	269	<b>31.1%</b>	596	<b>68.9%</b>	<b>865</b>	50.0
Southern	319	<b>38.4%</b>	511	<b>61.6%</b>	<b>830</b>	33.7
Western	355	<b>54.0%</b>	303	<b>46.0%</b>	<b>658</b>	19.8
NIAS	101	<b>48.8%</b>	106	<b>51.2%</b>	<b>207</b>	19.5
<b>Northern Ireland</b>	<b>2,293</b>	<b>45.6%</b>	<b>2,740</b>	<b>54.4%</b>	<b>5,033</b>	31.9

**Table 10: FPS Complaints Handled (2018/19 – 2022/23)**

FPS Complaints	2018/19	2019/20	2020/21	2021/22	2022/23
GP	252	193	154	191	195
Dental	60	14	17	34	9
Pharmacy	5	3	2	5	3
Ophthalmic	0	0	0	0	1
<b>Total</b>	<b>317</b>	<b>210</b>	<b>173</b>	<b>230</b>	<b>208</b>

<sup>13</sup> Includes only those complaints where both age and gender of the patient / client was recorded.



**Table 11: FPS Complaints Handled Under Local Resolution (2018/19 – 2022/23)**

Local Resolution	2018/19	2019/20	2020/21	2021/22	2022/23
GP	151	131	99	129	123
Dental	26	9	5	17	3
Pharmacy	0	0	1	4	0
Ophthalmic	0	0	0	0	1
<b>Total</b>	<b>177</b>	<b>140</b>	<b>105</b>	<b>150</b>	<b>127</b>

**Table 12: FPS Complaints Handled Under Local Resolution, by Subject (2022/23)**

Local Resolution	GP	Dental	Pharmacy	Ophthalmology	Total
Treatment & Care	52	3	0	1	56
Appointments	8	0	0	0	8
Prescriptions	2	0	0	0	2
Communication / Information	11	0	0	0	11
Staff Attitude	12	0	0	0	12
Other	38	0	0	0	38
<b>Total</b>	<b>123</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>127</b>

**Table 13: FPS Complaints where the SPPG Complaints Team Acted as an Honest Broker (2018/19 – 2022/23)**

Honest Broker	2018/19	2019/20	2020/21	2021/22	2022/23
GP	101	62	55	62	72
Dental	34	5	12	17	6
Pharmacy	5	3	1	1	3
Ophthalmic	0	0	0	0	0
<b>Total</b>	<b>140</b>	<b>70</b>	<b>68</b>	<b>80</b>	<b>81</b>

**Table 14: FPS Complaints where the SPPG Complaints Team Acted as an Honest Broker, by Subject (2022/23)**

Honest Broker	GP	Dental	Pharmacy	Ophthalmology	Total
Treatment & Care	43	4	1	0	48
Appointments	2	0	0	0	2
Prescriptions	2	0	0	0	2
Communication / Information	2	0	0	0	2
Staff Attitude	7	0	0	0	7
Other	16	2	2	0	20
<b>Total</b>	<b>72</b>	<b>6</b>	<b>3</b>	<b>0</b>	<b>81</b>

**Table 15: Source of those complaints not from the Patient/Client (2022/23)**

Relationship of Complainant	No.	%
Parent	851	36.0%
Son / Daughter	661	27.9%
Spouse / Partner	258	10.9%
Elected Representative	196	8.3%
Other Relative	172	7.3%
Sibling	104	4.4%
Legal Representative	33	1.4%
Patient Client Council	2	0.1%
Other	88	3.7%
Relationship Unknown	1	0.0%
<b>Total</b>	<b>2,366</b>	<b>100.0%</b>

**Table 16: Subject of Compliments by HSC Trust (2022/23)**

Subject of Compliment	BHSCT	NHSCT	SEHSCT	SHSCT	WHSCT	NIAS	Northern Ireland
Quality of Treatment and Care	1,779	1,955	2,601	3,519	1,689	403	11,946
Staff Attitude & Behaviour	1,574	1,184	1,081	3,676	810	2	8,327
Information & Communication	796	201	170	942	289	-	2,398
Environment	116	62	52	1,827	145	-	2,202
Other	1,330	2	75	10	183	1	1,601
<b>Total</b>	<b>5,595</b>	<b>3,404</b>	<b>3,979</b>	<b>9,974</b>	<b>3,116</b>	<b>406</b>	<b>26,474</b>

This statistical release presents information on complaint issues received by HSC Trusts in Northern Ireland. It details the number of HSC Trust complaint issues received, by the programme of care, category, subject, specialty of the complaint and the time taken to provide a substantive response.

Information is also included on the number of complaints received by the SPPG Complaints Team regarding Family Practitioner Services in Northern Ireland.

### Data Collection

The information presented in this statistical release derives from the Departmental CH8 Revised statistical return provided by the six HSC Trusts, (including the NIAS) in Northern Ireland. The CH8 return was originally introduced in 1998 and updated in 2007 to take account of the structural changes within the HSC system following the Review of Public Administration (RPA). In 2014, the CH8 return was redesigned to allow the collection of patient level data on all complaints received by HSC Trusts. The patient level collection was titled CH8 Revised to distinguish it from the original CH8 aggregate return. This return is submitted on a quarterly basis by HSC Trusts, in respect of the services for which they have responsibility.

Information presented on FPS complaints forwarded to the SPPG Complaints Team derives from CHB statistical return. The CHB is collected on a quarterly basis by the SPPG Complaints Team, in respect of the services for which they have responsibility.

Data presented on compliments is collected from the six HSC Trusts on a quarterly basis using the compliments information return (CP1). The compliments information return was developed in consultation with HSC Trusts to ensure regional consistency, and enable comparisons across HSC Trusts.

Data providers are supplied with technical guidance documents outlining the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

<https://www.health-ni.gov.uk/publications/trust-complaints-form-ch8>

<https://www.health-ni.gov.uk/publications/trust-compliments-form-cp1>

### Rounding

Percentages have been rounded to one decimal place and as a consequence some totals may not sum to 100.

## Data Quality

All information presented in this bulletin has been provided by HSC Trusts / SPPG Complaints Team and has been validated and quality assured by Hospital Information Branch (HIB) prior to release.

For the CH8 Revised information collection, HSC Trusts are given a set period of time to submit the information. At the end of the financial year HIB carry out a detailed series of validations to verify that the information is consistent both within and across returns. Trend analyses are used to monitor annual variations and emerging trends. Queries arising from validation checks are presented to HSC Trusts for clarification and if required returns may be amended and/or re-submitted. This report incorporates all returns and amendments received up to 22<sup>nd</sup> July 2022.

The compliments information collection was introduced in December 2017 and took some time to embed, with data first being published in the 2018/19 report. In 2018/19, information had to be estimated for two of the six Trusts as they were only able to provide a partial return for the year because their monitoring systems had not been fully implemented. For 2020/21, full year's data was available for all Trusts. However for 2019/20, it should be noted that Belfast HSC Trust's telephone system to capture compliments was only effective from 1 October 2019, Western HSC Trust did not have a system in place to record compliments received by phone call and NIAS did not monitor compliments via social media.

## Main Uses of Data

The main uses of these data are to monitor and report the number of HSC Trust compliments, HSC Trust and FPS complaints received during the year, to help assess performance, for corporate monitoring, to inform and monitor related policy, and to respond to assembly questions and ad-hoc queries from the public.

## Contextual Information for Using Complaint and Compliment Statistics

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to read while using statistics from this publication.

This includes information on the current and future population, structures within the Health and Social Care system, the vision for future health services as well as targets and indicators. This information is available at the following link:

<https://www.health-ni.gov.uk/publications/contextual-information-using-hospital-statistics>

## Contact Information

As we want to engage with users of our statistics, we invite you to feedback your comments on the publication to: Hospital Information Branch Email: [statistics@health-ni.gov.uk](mailto:statistics@health-ni.gov.uk)

## APPENDIX 2: DEFINITIONS

### Programme of care

Programmes of care are divisions of health care, into which activity and finance data are assigned, so as to provide a common management framework. They are used to plan and monitor the health service, by allowing performance to be measured, targets set and services managed on a comparative basis. There are nine programmes of care as follows:

<i>POC1</i>	<i>Acute</i>	<i>POC6</i>	<i>Learning Disability</i>
<i>POC2</i>	<i>Maternity and Child Health</i>	<i>POC7</i>	<i>Sensory Impairment and Physical Disability</i>
<i>POC3</i>	<i>Family and Child Care</i>	<i>POC8</i>	<i>Health Promotion and Disease Prevention</i>
<i>POC4</i>	<i>Elderly Care</i>	<i>POC9</i>	<i>Primary Health and Adult Community</i>
<i>POC5</i>	<i>Mental Health</i>		

### Complaint Issues

For the purposes of the CH8 return, a complaint may be understood as ‘an expression of dissatisfaction requiring a response’. This return includes information on all formal complaints only, informal complaints or communications criticising a service or the quality of care but not adjudged to require a response, are not included on this form.

A single communication regarding a complaint may refer to more than one issue. In such cases each individual complaint issue is recorded separately for Programme of Care (POC) and Subject.

Only complaints received from/on behalf of patients/clients or other ‘existing or former users of a Trust’s services and facilities’ are included. Complaints from staff are not included.

Where separate communications in respect of a single patient / client refer to one episode, they are treated as a single complaint issue for the purposes of this publication. In other words, if two relatives complain about the same subject/episode in respect of the same patient, this will be treated as one complaint issue only. However, if two relatives complain about separate subjects/episodes but in the care of the same patient, these will be treated as separate complaint issues.

Where separate unconnected communications refer to the same episode/issue, they will be treated as separate complaint issues. In other words, if separate individuals complain about a matter they have all experienced, this would be treated as separate complaint issues, e.g. if ten clients complain individually about conditions in a day centre, these will be treated as ten separate complaint issues.

The logic of the complaints procedure is that it should afford a speedy resolution of cases of individual dissatisfaction of service. This differs from the case of petitions where the concern is primarily the

collective representation of views, e.g. if a single complaint is received from a group of users, it will be treated as a single complaint issue.

Where a complainant is dissatisfied with the Trust's response to his/her complaint and enters into further communications about the same matter/s, this is not a new complaint, rather it will be the same complaint reopened. Such a complaint would only be recorded once in the CH8 Revised, i.e. in the quarter it was initially received. However, if this complainant were to then complain about a separate/different matter, this would be a new complaint.

## 1. Access to Premises

This heading includes all issues concerning ease of movement inside and outside the buildings, e.g. signage, car parking, etc. Problems of wheelchair access / disabled parking etc. should also be included under this heading, if not covered under '*Discrimination*' (17).

## 2. Aids / Adaptations / Appliances

This heading refers to the suitability / availability of any aids / adaptations, once they have been recommended. Complaint issues about waiting for assessment should be included under '*Waiting Lists, Delay/Cancellation Community Based Appointments*' (32).

## 3. Children Order Complaints

This heading refers to all formal complaint issues received under the Children Order Representations and Complaint Issues Procedure, irrespective of their subject or content.

## 4. Clinical Diagnosis

This heading covers clinical diagnosis only and is to be distinguished from '*Professional Assessment of Need*' (24).

## 5. Communication / Information

This heading includes all issues of communication and information provided to patients / clients / families / carers regarding any aspect of their contact with staff. However, this should be distinguished from complaint issues about the attitude of staff when communicating with patients / clients, which would be logged under '*Staff Attitude / Behaviour*' (27).

## 6. Complaint Handling

This refers to handling of a complaint issue at any point up to and including the conclusion of local resolution stage, e.g. a complainant complains that he/she did not receive a response within the timescale. However, a complaint issue would not be included under this heading if it obviously falls under another heading, e.g. if the complaint issue is about attitude of staff handling the complaint issue, it would be logged under '*Staff Attitude / Behaviour*' (27).

## 7. Confidentiality

This heading includes any issues of confidentiality regarding patients / clients, e.g. (i) complaint by a patient regarding a breach of confidentiality or (ii) complaint by the parents of a young adolescent who are denied information by staff on the grounds of that adolescent's right to confidentiality.

## 8. Consent to Treatment / care

This refers to complaint issues made regarding consent to treatment/care.

## **9. Contracted Regulated Children's Services**

## **10. Contracted Regulated Domiciliary Agency**

## **11. Contracted Regulated Residential Nursing**

These three headings refer to complaints about services that are provided by Trusts via contractual / commissioned arrangements. Establishments may be children's homes, nursing or residential homes, while Agencies may be a domiciliary care agency, fostering agency or nursing agency. For a full list of Regulated Establishments and Agencies please refer to 'Quality & Improvement Regulation NI Order 2003, Article 8'.

In the first instance, the service provider is expected to deal with complaints, however, where the complainant, Trust or RQIA wishes, the matter may be investigated by the Trust under the HSC Complaint Procedure.

Examples: (i) the Trust (as the commissioner) is asked by either RQIA or a relative, to investigate a complaint about the care or treatment provided to a resident in a Residential Home; (ii) a patient / client asks the Trust (as the commissioner) to investigate a complaint about the attitude of a member of staff of a Voluntary Agency with whom the Trust has contracted a home care service (e.g. personal care).

## **12. Contracted Independent Hospital Services**

This heading refers to complaints about services that are provided by Trusts via contractual / commissioned arrangements with independent hospitals.

## **13. Contracted Services – Other**

This heading refers to complaint issues about services that are provided by Trusts via contractual / commissioned arrangements that are not captured in '*Contracted Regulated Children's Services/Domiciliary Agency/Residential Nursing*' (9, 10 & 11). In the first instance, the service provider is expected to deal with complaint issues, however, where the complainant or Trust wishes, the matter may be investigated by the Trust under the HSC Complaint Procedure.

Example: Attitude of a member of staff of facilities services operating under contract on Trust premises, (e.g. car clamping company or catering).

## **14. Delay/Cancellation for Inpatients**

This heading includes all aspects of delay or cancellation of operation or procedure once the patient is in hospital, e.g. Radiology investigation cancelled, or theatre cancelled due to lack of ICU beds, theatre overrun, no anaesthetist, etc. This should be distinguished from the cancellation or delay of admission for the procedure captured under '*Waiting List, Delay/Cancellation Planned Admission to Hospital*' (34).

## **15. Delayed Admission from A&E**

This refers to patients waiting in Accident & Emergency, following decision to 'admit', before being allocated a bed in a ward. This should be distinguished from '*Waiting Times, A&E Departments*' (35) and '*Waiting List, Delay/Cancellation Planned Admission to Hospital*' (34).

## **16. Discharge / Transfer Arrangements**

This heading refers to the adequacy of arrangements and includes early discharges or delayed discharges. It does not include failure to communicate discharge arrangements, which would be included under '*Communication / Information*' (5).



## **17. Discrimination**

This heading refers to complaint issues regarding disadvantageous treatment. It includes discrimination under the 9 Equality categories (i.e. age, gender, marital status, political opinions, religious belief, racial group, sexual orientation, persons with or without a disability, persons with or without dependents) and under the Human Rights Act (e.g. Article 1, Right to Life; Article 3, Right to Freedom from Torture, Inhuman or Degrading Treatment; Article 8, Right to Respect for Private or Family Life). Complaint issues about patient choice should also be included under this heading.

## **18. Environmental**

Complaint issues referring to the general condition or repair of the premises should be included under this heading. It also covers wider environmental issues, e.g. smoking.

## **19. Hotel / Support / Security Services**

This heading includes any complaint issue referring to ancillary or support services, e.g. portering, facilities, catering. It also refers to security issues, e.g. stolen vehicles parked on Trust property.

## **20. Infection Control**

This heading refers to compliance with infection control standards, e.g. hand hygiene; aseptic procedures; inappropriate use of personal protective equipment; incorrect disposal of waste or soiled linen; equipment / furniture not decontaminated. It covers issues around all infections but especially resistant micro-organism infections, e.g. MRSA, VRE. However, complaint issues about lack of information or not being informed would not be included in this heading, but would be logged under '*Communication / Information*' (5).

## **21. Mortuary & Post-Mortem**

This category refers to complaint issues in relation to the mortuary and/or post-mortem.

## **22. Policy / Commercial Decisions**

This category refers to complaint issues related to policy and/or commercial decisions.

## **23. Privacy / Dignity**

This heading includes complaint issues specifically relating to the privacy or personal dignity of patients/clients.

## **24. Professional Assessment of Need**

This heading refers to the assessment of need in either clinical or non-clinical contexts, however, should be distinguished from '*Clinical Diagnosis*' (4).

## **25. Property / Expenses / Finance**

Refers to issues of the personal property, expenses or finance of patients/clients, e.g. due money for fostering; issues around direct payments; concerns about Trust charging / invoicing for clients in Nursing/Residential Home (either Private or Trust Home); broken hearing aid; lost spectacles / dentures.

Property damaged by staff arising in the course of care / treatment would fall into this category; however, property stolen from a patient's locker (as not being entrusted to or in the custodianship of staff and not known to be attributable to staff) would come under the heading of '*Hotel/Support/Security Services*' (19).

Complaint issues about stolen vehicles (visitor or patient) and property lost or stolen from visitors should similarly be logged as a '*Hotel/Support/Security Services*' (19).

## **26. Records / Record Keeping**

This refers to cases where records (such as medical notes, case files, X-rays) are unavailable, e.g. records have been mislaid or misfiled. Complaint issues about access rights to deceased patients' health records (governed by Access to Health Records (1993) NI Order) should be included under this heading. Complaint issues about any aspect of content of records or right of access should only be included under this heading, if they are not more appropriately dealt with under other procedures, such as Data Protection Act or Freedom of Information Act appeals processes.

## **27. Staff Attitude / Behaviour**

This category refers to complaint issues related to staff attitude and/or staff behaviour.

## **28. Transport, Late or Non-arrival / Journey Time**

This heading refers to complaint issues about the late arrival or non-arrival of transport or about the length of journey.

## **29. Transport, Suitability of Vehicle / Equipment**

This heading refers to the appropriateness of the vehicle assigned and will include issues such as comfort, ease of access for the client group served. Complaint issues about the appropriateness of equipment would also be logged under this heading.

## **30. Quality of Treatment & Care**

This refers to the quality or standard of treatment and care provided. It also covers complaint issues relating to patient / client safety. However, it is to be distinguished from '*Quantity*' of Treatment & Care, (31) which refers to the quantity or amount of treatment and care.

## **31. Quantity of Treatment & Care**

This refers to the amount of treatment and care provided or available, e.g. someone receiving good quality home help but feel they are receiving inadequate number of hours.

## **32. Waiting Lists, Delay/Cancellation Community Based Appointments**

This heading refers to the time spent waiting for either assessment or for the delivery of services following assessment, e.g. waiting list for an OT assessment, waiting list for a care package. 'Unmet need' should also be logged under this heading. This heading should be distinguished from '*Waiting Times, Community Services*' (36).

## **33. Waiting Lists, Delay/Cancellation Outpatient Appointments**

This heading refers to delay or cancellation in securing an outpatient appointment, i.e. outpatient waiting lists. It is to be distinguished from '*Waiting Lists, Delay/Cancellation Community Based Appointments*' (32) and '*Waiting Times, Outpatient Departments*' (37).

## **34. Waiting Lists, Delay/Cancellation Planned Admission to Hospital**

This refers to delay or cancellation of a planned admission to hospital, e.g. waiting list for surgery. Delayed admissions from A&E should not be included in this category but under '*Delayed Admission from A&E*' (15).

### **35. Waiting Times, A&E Departments**

Complaint issues regarding waiting time for initial assessment or waiting time to be treated should all be logged under this heading. Complaint issues about delayed admission from A&E are not included here but should be listed under '*Delayed Admission from A&E*' (15).

### **36. Waiting Times, Community Services**

This heading refers to waiting time during delivery of community services. It would include such issues as erratic timing, failure of professional staff to turn up at the specified time for an appointment.

It should be distinguished from '*Waiting Lists, Delay/Cancellation Community Based Appointments*' (32).

### **37. Waiting Times, Outpatient Departments**

This heading refers to the time waiting at an outpatient appointment, other than at A&E. It should be distinguished from '*Waiting Lists, Delay/Cancellation Outpatient Appointments*' (33)'.

### **38. Other**

This is a residual heading for any complaint issues, which do not fall into any categories listed above.

### **Admissions/Discharges**

Delayed Admission from A&E

Discharge/Transfer Arrangements

Waiting Lists, Delay/Cancellation Planned Admission to Hospital

### **Aids/Adaptations/Appliance**

Aids/Adaptations/Appliances

### **Appointments/Waiting Times**

Waiting Lists, Delay/Cancellation Community Based Appointments

Waiting Lists, Delay/Cancellation Outpatient Appointments

Waiting Times, A&E Departments

Waiting Times, Community Services

Waiting Times, Outpatient Departments

### **Children Order**

Children Order Complaint Issues

### **Contracted Services**

Contracted Regulated Children's Services

Contracted Regulated Domiciliary Agency

Contracted Regulated Residential Nursing

Contracted Independent Hospital Services

Other Contracted Services

### **Diagnosis/Operation/Treatment**

Clinical Diagnosis

Consent to Treatment/Care

Delay/Cancellation for Inpatients

Treatment & Care, Quality

Treatment & Care, Quantity

## **Information & Communication**

Communication/Information to Patients

Complaints Handling

Confidentiality

Records/Records Keeping

## **Mortuary**

Mortuary & Post-Mortem

## **Patient Experience**

Discrimination

Privacy/Dignity

Property/Expenses/Finance

Staff Attitude/Behaviour

## **Policy/Commercial Decisions**

Policy/Commercial Decisions

## **Premises**

Access to Premises

Environmental

Hotel/Support/Security Services

Infection Control

## **Prison Health Care**

Prison Healthcare Related Complaint Issues

## **Professional Assessment of Need**

Professional Assessment of Need

## **Transport**

Transport, Late or Non-arrival/Journey Time

Transport, Suitability of Vehicle/Equipment

## **Other**

Other

## APPENDIX 5: SPPG COMPLAINTS

The information presented within this release relating to FPS complaints derives from the Strategic Planning and Performance Group (SPPG) CHB statistical return. The CHB is collected on a quarterly basis by the SPPG, in respect of the services for which they have responsibility.

The [Guidance in relation to the Health and Social Care Complaints Procedure](#) sets out how HSC organisations should deal with complaints raised by people who use or are waiting to use their services.

Under HSC Complaints Procedure all FPS practices are required to forward to the SPPG anonymised copies of each letter of complaint received along with the subsequent response, within 3 working days of this being issued.

FPS are required to have in place a practice based complaints procedure which forms part of the local resolution mechanism for settling complaints. The purpose of local resolution is to provide an opportunity for the complainant and the organisation to attempt a prompt and fair resolution of the complaint. In the case of FPS practices, local resolution involves a practitioner seeking to resolve the complaint through discussion and negotiation.

Where a complainant does not wish to approach the FPS practice directly, SPPG Complaints staff, with the agreement of both the practice and complainant, may act as an intermediary or 'honest broker' with the aim of assisting in the local resolution of the complaint.

The SPPG has a responsibility to record and monitor the outcome of all complaints lodged with them. It will provide support and advice to FPS in relation to the resolution of complaints and it will also appoint independent experts, lay persons or conciliation services, where appropriate.

## Introduction

The purpose of the CP1 return is to record the number of compliments received by Trusts during the quarter, the subject areas to which they referred and how the compliment was received.

The form should be returned quarterly by Trusts in respect of services for which they have responsibility. Deadline for receipt by Hospital Information Branch is no later than the last working day of the month after the end of the quarter to which the information refers.

## Compliments

For the purposes of this return a compliment may be understood as 'an expression of praise, commendation or admiration'.

Only compliments received from/on behalf of patients/clients or other 'existing or former users of a Trust's services and facilities' should be included. Compliments from staff should not be included on this form.

A single communication may include more than one compliment. In such cases each distinct compliment should be recorded separately on the return.

Only compliments pertaining to the services of the Trust returning the form to Hospital Information Branch (DoH) should be recorded on the CP1 return. Compliments received by a Trust, which properly refer to the services of another Trust, should be recorded on the return of the relevant Trust to which the compliment/s pertains.

Where separate communications (whether from a single party or from several parties in respect of a single patient) refer to one subject only, they should be treated as one compliment for the purposes of this form. In other words, if two relatives submit a compliment about the same subject/episode in respect of the same patient, this should be treated as one compliment only. However, if two relatives submit compliments about separate subjects/episodes in the care of the same patient, these should be treated as separate compliments.

## Subjects

This part deals with the subject of the compliment. The subject of the compliment is to be assigned on the basis of the subject that best describes the nature of the patient / client's praise.

### Definitions of Subjects:

#### Quality of Treatment & Care

This refers to the quality or standard of treatment and care provided. It also covers compliments relating to patient/client safety.

#### Staff Attitude & Behaviour

This category refers to compliments related to staff attitude and/or staff behaviour.

## Information & Communication

This heading includes all issues of communication and information provided to patients / clients / families / carers regarding any aspect of their contact with staff. However, this should be distinguished from compliments about the attitude of staff when communicating with patients / clients, which should be logged under 'Staff Attitude & Behaviour'.

## Environment

Compliments referring to the general condition or repair of the premises should be included under this heading.

## Other

This is a residual heading for any compliments which do not fall into any of the categories listed above. Where the subject is recorded as '*Other*' a brief description of the compliment should be provided in part 2 of the return.

## **Method of Compliment**

The CP1 return should include (A) written compliments received by (i) Card, (ii) Email, (iii) Feedback Form, (iv) Letter or (v) Social Media (Facebook & Twitter only), or (B) compliments received by telephone, whereby the primary purpose of the phone call is to express a compliment. Only Facebook posts / Tweets linked to the official organisational Facebook/Twitter accounts should be included.



Hospital Information Branch is responsible for the collection, quality assurance, analysis and publication of timely and accurate information derived from a wide range of statistical information returns supplied by the Health & Social Care (HSC) Trusts and the SPPG Complaints Team. Statistical information is collected routinely from a variety of electronic patient level administrative systems and pre-defined EXCEL survey return templates.

The Branch aims to present information in a meaningful way and provide advice on its uses to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DoH, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics, Cancer and Emergency Care). A detailed list of these publications is available from:

<https://www.health-ni.gov.uk/topics/doh-statistics-and-research>

The 'Complaints and Compliments Received by HSC Trusts in Northern Ireland (2021/22)' publication was originally due to be published on 8<sup>th</sup> July but was delayed due to pressures associated with the COVID-19 outbreak.

**Further information on HSC Trust Complaint Issues and Compliments in Northern Ireland is available from:**

Hospital Information Branch

Information & Analysis Directorate

Department of Health

Stormont Estate

Belfast, BT4 3SQ

**Email:** [statistics@health-ni.gov.uk](mailto:statistics@health-ni.gov.uk)