Complaints Summary

Subject	Overview of complaints
Purpose	For information
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St Catherine's Hospice is dedicated to delivering the highest standards of quality care and ensuring that patients and their representatives are always treated with fairness and respect. We aim to provide all our services and wider activities to a consistently high standard. However, we recognise that there may be times when we do not meet the expectations of those who use our services.

We welcome complaints as an important way for people to share their concerns when our service falls short. Feedback from patients, families, and other stakeholders is invaluable and helps us identify areas for improvement.

Our continued aim is to cultivate a culture where complaints are seen as a valuable source of insight that drives quality improvement, service development, and enhanced patient experience.

All complaints are recorded and monitored from the point of receipt through to final resolution. This document provides an overview of anonymised complaints received between April 2025 and March 2026. During this period, a total of thirty-one formal complaints were received.

A detailed review of all complaints received has been undertaken. No themes, patterns, or emerging trends have been identified in relation to:

- Clinical care delivery or service area.
- Specific staff groups.
- Locations.
- Time-of-year or operational pressures.

This provides assurance that complaint occurrences appear isolated and not indicative of systemic or recurring issues.

Complaints Summary

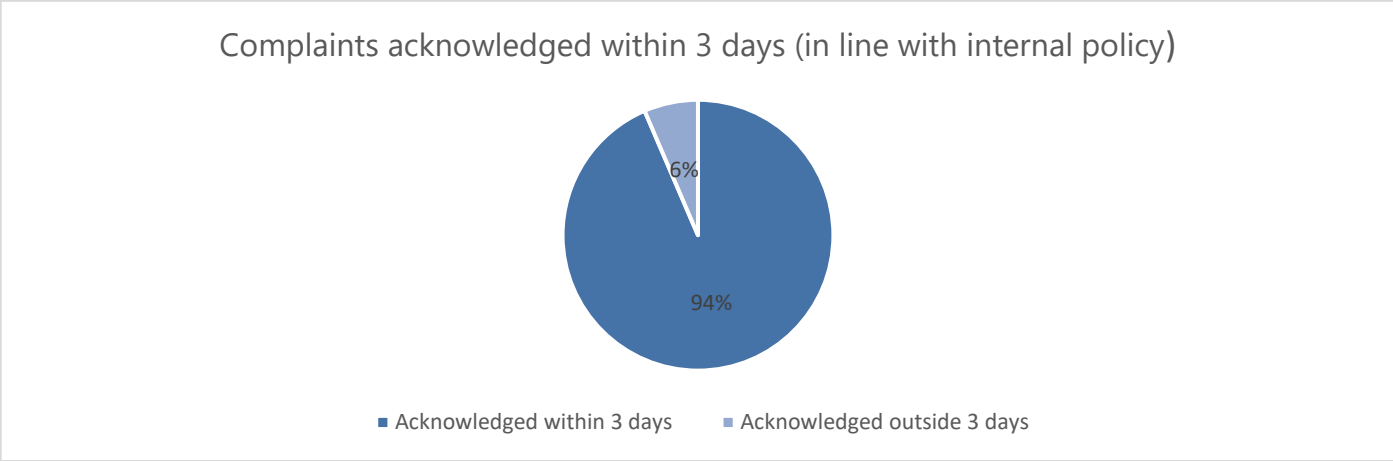
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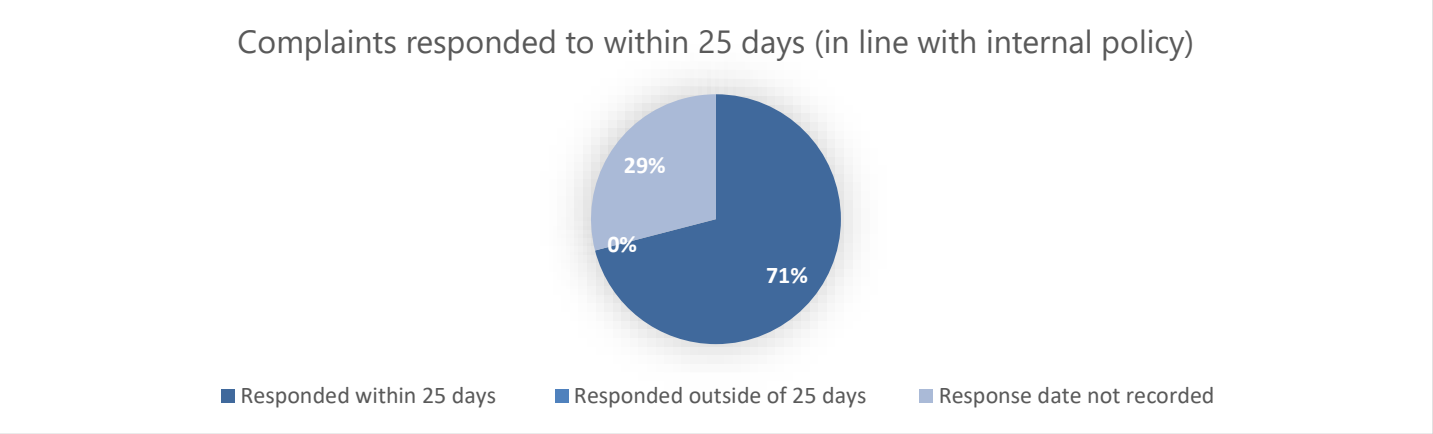
Complaint Overview

		By department								By complaint reason													By outcome				
		Café & Hub	Chief Executive Office	Community Team	Fundraising	Inpatient Unit	Medical	Trading	Wellbeing	Administration	Admissions & Transfers	Attitude & Behaviour	Bereavement Service	Catering	Communication	Delay in Access to Care	Failure to follow policy	Failure to provide a service	Fundraisers	Home Visit	Quality of Care	Retail Shop	Not recorded	Not upheld	Partially upheld	Upheld	Withdrawn
Apr-25	1	1												1												1	
May-25	0																										
Jun-25	5			4		1									2	1		1			1				5		
Jul-25	5			4		1						1			1		1	1		1			2	1	1	1	
Aug-25	1					1									1										1		
Sep-25	3			2				1				1			1							1			1	1	1
Oct-25	2					1			1			1						1					1		1		
Nov-25	2			1		1									1						1				1	1	
Dec-25	2				1	1						1									1					2	
Jan-26	3			2	1										2	1									2	1	
Feb-26	6			2			1	2	1	1	1	1			1	1						1		2	2	2	
Mar-26	1		1																			1		1			
Total	**31**	**1**	**1**	**15**	**2**	**6**	**1**	**3**	**2**	**1**	**1**	**5**	**0**	**1**	**9**	**3**	**1**	**3**	**0**	**1**	**3**	**3**	**3**	**5**	**14**	**9**	**1**

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Timeliness and Responsiveness





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Learning and Improvements

During 2025–2026, several improvements were progressed to enhance organisational learning, these included;

- Anonymised complaint to be used as reflective learning.
- Ensuring all complaints have an acknowledgement, outcome and learning documented.
- To make all volunteers aware of the donation procedures.
- Discharge letters will be reviewed alongside the wording on our website.

Activity Levels

The table below shows an overview of the total number of formal complaints and informal complaints received this financial year.

Type	2020/21	2021/22	2022/23	2023/24	2024/5	2025/6
Formal	10	13	20	19	33	31
Informal	29	28	43	35	38	17

In November 2025, informal complaints were removed as a category. In line with our complaints policy, all complaints will now be recorded and managed as formal complaints.

Twenty-two clinical complaints were received during this period, which remains low and is consistent with the average volume reported year-on-year. A detailed review of the data has been undertaken, and no patterns or emerging trends have been identified within the complaints received.

Looking ahead

Our focus for 2026–2027 will be to continue to work collaboratively with managers to ensure the internal system is fully utilised to provide clear evidence of policy compliance, particularly in relation to documenting acknowledgements and responses whilst embedding a strong culture of learning from complaints and feedback. The introduction of our new complaint reporting and management system has already enhanced our ability to meet internal policy requirements, and we will build on this foundation to further improve the consistency, transparency, and quality of our responses.

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