Supplementary material sensitivity analysis and supplementary tables 1-4

Sensitivity Analysis.

As a last step in the analysis, we performed a sensitivity analysis considering also missingness not at random (MNAR) for some of the key analyses. MNAR means that, even accounting for all the available observed information, the reason for observations being missing still depends on the unseen observations themselves. We performed a simple sensitivity analysis, assuming as a not ignorable missing model that depression, anxiety, hedging and avoiding are worse when the value is missing. Therefore, after multiple imputation under the MAR assumption using MICE, I increased each imputed value of depression (PHQ9) and anxiety (GAD7) by a certain number d. This number d was obtained as follows. First, a random number δ was sampled from a normal distribution with mean the estimated standard deviation of the distribution of PHQ9/GAD7, and standard deviation the square root of this value. Then $d=\max(\delta, 1)$, such that d is restricted to imply an increase in PHQ9/GAD7. Therefore, d instead of δ is added to the imputed value under missingness at random (MAR). After this, the new imputed value is rounded and bound at the maximum possible value, such that an integer number on the original scale is obtained. For hedging/avoiding, all missings were assumed to have displayed at least some hedging/avoiding behaviour. The actual score on the scale is irrelevant, because the scale is dichotomised prior to the analysis. After the imputations under MNAR are computed, analysis proceeds as usual, using Rubin's rules to combine results.

| Supprementary table 1. Sensitivity analysis 101 r mQ-9 | | | | | | | | | | |
|--------------------------------------------------------|-----------|-----------|-----------|-----------|--------------|--------------|--|--|--|--|
| Depression | No | Past | Recent/ | Total | Relative | Relative | | | | |
| (PHQ-9) ^a | complaint | complaint | current | n=7926 | risk for | risk for | | | | |
| | n=1780 | n=3889 | complaint | (100%) | past | recent | | | | |
| | (22.5%) | (49.1%) | n=2257 | | complaint | complaint | | | | |
| | | | (28.5%) | | group/ | group / | | | | |
| | | | | | mean | mean | | | | |
| | | | | | difference | difference | | | | |
| | | | | | (95% CI) | (95% CI) | | | | |
| Missings | 255 | 1144 | 214 | 1613 | | | | | | |
| - | (14%) | (29%) | (9%) | (20%) | | | | | | |
| Complete case | | | | | | | | | | |
| Mean (SD) | 3.8 (4.5) | 3.4 (4.6) | 5.2 (5.8) | 4.1 (5.0) | -0.4 | 1.4 | | | | |
| | | | | | (-0.7, 0.1) | (1.1, 1.7) | | | | |
| Moderate to severe | 160 | 254 | 363 | 777 | 0.88 | 1.69 | | | | |
| depression n (%) | (10.5%) | (9.3%) | (17.8%) | (12.3%) | (0.73, 1.06) | (1.42,2.02) | | | | |
| MI MAR | | | | | | | | | | |
| Mean (SD) | 3.7 (4.3) | 3.4 (4.2) | 5.1 (5.6) | 3.9 (4.7) | -0.3 | 1.4 | | | | |
| | | | | | (-0.6, -0.0) | (1.1, 1.7) | | | | |
| Moderate to severe | 169 | 303 | 381 | 852 | 0.81 | 1.77 | | | | |
| depression n (%) | (9.5%) | (7.8%) | (16.9%) | (10.8%) | (0.65, 1.01) | (1.48,2.13) | | | | |
| MI MNAR | | | | | | | | | | |
| Mean (SD) | 4.3 (4.6) | 4.7 (4.8) | 5.4 (5.7) | 4.8 (5.1) | 0.4 | 1.1 | | | | |
| | | | | | (0.1, 0.7) | (0.8, 1.4) | | | | |
| Moderate to severe | 238 | 593 | 432 | 1263 | 1.14 | 1.43 | | | | |
| depression n (%) | (13.4%) | (15.2%) | (19.2%) | (15.9%) | (0.95, 1.35) | (1.21, 1.70) | | | | |

Supplementary table 1: Sensitivity analysis for PHQ-9

^a The PHQ-9 depression scale ranges from 0 to 27. A score below five indicates absence of depression, a score between five and nine indicates mild depression, a score between ten and fourteen indicates moderate depression, a score between fifteen and nineteen indicates moderately severe depression and a score above nineteen indicates severe depression.

| Suppremental j tas | | | | | | |
|-----------------------------|-----------|-----------|-----------|-----------|-----------------|--------------|
| Anxiety (GAD7) ^b | No | Past | Recent/ | Total | Relative | Relative |
| - | complaint | complaint | current | n=7926 | risk for | risk for |
| | n=1780 | n=3889 | complaint | (100%) | past | recent |
| | (22.5%) | (49.1%) | n=2257 | | complaint | complaint |
| | | | (28.5%) | | group/ | group / |
| | | | | | mean | mean |
| | | | | | difference | difference |
| | | | | | (95% CI) | (95% CI) |
| Missings | 258 | 1148 | 201 | 1607 | | |
| | (14%) | (30%) | (9%) | (20%) | | |
| Complete case | | | | | | |
| Mean (SD) | 3.2 (3.9) | 3.0 (4.0) | 4.7 (5.0) | 3.6 (4.4) | -0.2 | 1.5 |
| | | | | | (-0.4, 0.1) | (1.2, 1.8) |
| Moderate to severe | 123 | 194 | 330 | 647 | 0.88 | 1.99 |
| depression n (%) | (8.1%) | (7.1%) | (16.1%) | (10.2%) | (0.71, 1.09) | (1.63, 2.42) |
| MI MAR | | | | | | |
| Mean (SD) | 3.1 (3.8) | 3.0 (3.8) | 4.5 (4.9) | 3.5 (4.2) | -0.1 | 1.4 |
| | | | | | (-0.4, 0.2) | (1.1, 1.7) |
| Moderate to severe | 131 | 234 | 338 | 703 | 0.80 | 2.08 |
| depression n (%) | (7.3%) | (6.0%) | (15.0%) | (8.9%) | (0.57, 1.13) | (1.61, 2.68) |
| MI MNAR | | | | | | |
| Mean (SD) | 3.7 (4.1) | 4.3 (4.4) | 4.9 (5.0) | 4.3 (4.6) | 0.5 | 1.2 |
| | | | | | (0.2, 0.9) | (0.9, 1.5) |
| Moderate to severe | 173 | 463 | 374 | 1011 | 1.22 | 1.71 |
| depression n (%) | (9.7%) | (11.9%) | (16.6%) | (1275%) | $(0.98 \ 1.51)$ | (1 35 2 18) |

Supplementary table 2: Sensitivity analysis for GAD-7

 depression n (%)
 (9.1%)
 (11.9%)
 (16.6%)
 (12.75%)
 (0.98, 1.51)
 (1.35, 2.18)

 b The GAD-7 anxiety scale ranges from 0 to 21. A score below five indicates minimal anxiety, a score between five and nine indicates mild anxiety, a score between ten and fourteen indicates moderate anxiety and a score of fifteen or above indicates severe anxiety.

Supplementary table 3: Sensitivity analysis for hedging.

| Because of your / | No | Past | Recent or | Total | Relative | Relative |
|-------------------|-----------|-----------|-----------|---------|-------------|--------------|
| other's | complaint | complaint | current | n=7926 | Risk | Risk |
| experiences with | n=1780 | n=3889 | complaint | (100%) | for past | for recent |
| complaints, have | (22.5%) | (49.1%) | n=2257 | | complaint | or current |
| you ever | | | (28.5%) | | (95% CI) | complaint |
| displayed | | | | | | (95% CI) |
| hedging | | | | | | |
| behaviour? | | | | | | |
| Missings | 268 | 1241 | 273 | 1782 | | |
| Complete case | | | | | | |
| n (%) | 1222 | 2135 | 1752 | 5109 | 1.00 | 1.09 |
| | (80.8%) | (80.6%) | (88.3%) | (83.1%) | (0.97,1.03) | (1.06,1.13) |
| MAR | | | | | | |
| n (%) | 1454 | 3212 | 1999 | 6665 | 1.01 | 1.08 |
| | (81.7%) | (82.6%) | (88.6%) | (84.1%) | (0.98,1.04) | (1.05, |
| | | | | | | 1.11) |
| MI MNAR | | | | | | |
| n (%) | 1484 | 3369 | 2023 | 6876 | 1.04 | 1.08 |
| | (83.4%) | (86.6%) | (89.6%) | (86.8%) | (1.01,1.06) | (1.05, 1.10) |

Supplementary table 4: Sensitivity analysis for avoidance.

| Because of your / other's experiences with complaints, have you ever displayed avoiding behaviour? | No complaint n=1780 (22.5%) | Past complaint n=3889 (49.1%) | Recent or current complaint n=2257 (28.5%) | Total n=7926 (100%) | Relative Risk for past complaint (95% CI) | Relative Risk for recent or current complaint (95% CI) |
|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------|--------------------------------------------------------|---------------------------|-------------------------------------------------------|-----------------------------------------------------------------------|
| Missings | 242 | 1222 | 257 | 1721 | | |
| Complete case | | | | | | |
| n (%) | 705 | 1137 | 995 | 2837 | 0.93 | 1.09 |
| | (45.8%) | (42.6%) | (49.8%) | (45.7%) | (0.87,1.00) | (1.01, 1.16) |
| MAR | | | | | | |
| n (%) | 820 | 1668 | 1124 | 3612 | 0.93 | 1.08 |
| | (46.1%) | (42.9%) | (49.8%) | (45.6%) | (0.87,1.00) | (1.00,1.17) |
| MI MNAR | | | | | | |
| n (%) | 947 | 2359 | 1252 | 4558 | 1.14 | 1.04 |
| | (53.2%) | (60.7%) | (55.5%) | (57.5%) | (1.08,1.20) | (0.98,1.10) |

Supplementary table 5: How doctors ranked the importance of different actions that might be taken to improve the complaints process might be improved (note these data are not imputed).

| | Not at | Α | To some | Quite a | A great | missing | total |
|------------------------------|---------|-------------|----------|-----------|----------|---------|-------|
| | all | little | extent | lot | deal | n | n |
| | n (%) | n (%) | n (%) | n (%) | n (%) | | |
| To allow the doctor to | 245 | 313 | 2256 | 1524 | 1973 | 3802 | 10113 |
| have more direct input into | (3.9%) | (5.0%) | (35.8%) | (24.2%) | (31.3%) | | |
| responses to patient | | | | | | | |
| complaints | | | | | | | |
| To be given a clear written | 217 | 342 | 1501 | 1846 | 2400 | 3807 | 10113 |
| protocol for any process at | (3.4%) | (5.4%) | (23.8%) | (29.3%) | (38.1%) | | |
| the onset | | | | | | | |
| To have strict adherence to | 199 | 402 | 1599 | 1732 | 2379 | 3803 | 10113 |
| a statutary timeframe for | (3.2%) | (6.4%) | (25.3%) | (27.5%) | (37.7%) | 2002 | 10110 |
| any complaint and | (012/0) | (011/0) | (20.070) | (_//) | (271770) | | |
| investigation process | | | | | | | |
| Brief colleagues about any | 261 | 440 | 1816 | 1972 | 1733 | 3891 | 10113 |
| complaint or investigation | (4.2%) | (7.1%) | (29.2%) | (31.7%) | (27.9%) | | |
| to ensure unambiguous | | | | () | (| | |
| internal communications | | | | | | | |
| If a complaint from a | 152 | 202 | 1202 | 1981 | 2690 | 3886 | 10113 |
| clinical or managerial | (2.4%) | (3.2%) | (19.3%%) | (31.8) | (43.2%) | | |
| colleague was found to be | () | (= != ! • ! | (| (0 2 0 0) | (1012/0) | | |
| vexations then to have the | | | | | | | |
| option of having this | | | | | | | |
| investigated and possible | | | | | | | |
| disciplinary measures | | | | | | | |
| taken | | | | | | | |
| If a complaint from a | 212 | 434 | 1296 | 1528 | 2837 | 3806 | 10113 |
| patient was found to be | (3.4%) | (6.9%) | (20.6%) | (24.2%) | (45.0%) | | |
| vexatious then to have the | ` ' | ` <i>´</i> | × , | · · · · | · · · · | | |
| option to take action | | | | | | | |
| against that person | | | | | | | |
| To set a limit to the time | 131 | 260 | 1315 | 1855 | 2668 | 3884 | 10113 |
| period when it is permitted | (2.1%) | (4.2%) | (21.1%) | (29.8%) | (42.8%) | | |
| to file multiple complaints | . , | | | | | | |
| relating to the same | | | | | | | |
| clinical incident or from | | | | | | | |
| the same person or persons | | | | | | | |
| If the doctor is exonerated | 64 | 138 | 785 | 1872 | 3455 | 3799 | 10113 |
| but has suffered financial | (1.0%) | (2.2%) | (12.4%) | (29.7%) | (54.7%) | | |
| loss during the process, | | | | | | | |
| then to have an avenue to | | | | | | | |
| make a claim for recovery | | | | | | | |
| of lost earnings or costs | | | | | | | |
| To have complete | 59 | 102 | 757 | 1770 | 3559 | 3866 | 10113 |
| transparency of any | (1.0%) | (2.2%) | (12.4%) | (28.3%) | (57.0%) | | |
| management | | | | | | | |
| communication about the | | | | | | | |
| subject of a complaint by | | | | | | | |
| giving access to this to the | | | | | | | |
| doctor's representatives | | | | | | | |
| For all managers to | 65 | 107 | 767 | 1744 | 3551 | 3879 | 10113 |
| demonstrate a full up to | (1.0%) | (1.7%) | (12.3%) | (28.0%) | (57.0%) | | |
| date knowledge of | | | | | | | |
| procedure in relation to | | | | | | | |
| complaints if they are | | | | | | | |
| made responsible for them | | | | | | | |

| The BMA and defence | 186 | 447 | 1601 | 1465 | 2575 | 3839 | 10113 |
|---------------------------|--------|---------|---------|---------|---------|------|-------|
| organisations should be | (3.0%) | (7.1%) | (25.5%) | (23.4%) | (41.0%) | | |
| more aggressive and less | · / | · · · · | × / | , , | ` ´ | | |
| reactive to complaints in | | | | | | | |
| general | | | | | | | |