

## **Parliamentary and Health Service Ombudsman**

### **Complaint Standards Framework: Have your say in shaping the future of NHS complaint handling**

#### **Do you think it's clear what the Framework is trying to achieve?**

YES

The Royal College of Physicians of Edinburgh is a professional membership organisation that sets clinical standards and aims to improve the quality of patient care. Founded in 1681, we support and educate doctors in the hospital sector throughout the UK and around the world with over 13,000 Fellows and Members in over 90 countries, covering 54 medical specialties and interests. The College enables a worldwide community of physicians and their teams to advance the health of our global population for the long-term benefit of society acting as the voice of our membership, engaging in health policy and promoting equality and human rights.

There is consensus among members of the College's Lay Advisory Committee that overall the Framework is clear. However, there are several points mentioned by members that they feel could be clarified. The framework gives no specific details of timescales or number of stages in the process. It also does not explain what governance reporting should look like or how learning is to be identified in a proportionate way. It is not clear what the practical goals of the framework are intended to be without this level of detail.

#### **Do you support what the Framework is trying to achieve?**

YES

The members of the Lay Advisory Committee support the Framework's aims; however, there is some concern that though the Framework has good intentions, without clarity on how it will put the Framework into action it may struggle to achieve any advance on the current complaint process.

#### **Do you think the Framework makes it clear what organisations are expected to do?**

Mixed views

**If not, please explain what you think is unclear and let us know how you think it could be made clearer.**

There are mixed opinions among Committee members on this particular question. Most feel as though the Framework does make what organisations are supposed to do clear, with some thinking that certain statements within the Framework lack clarity.

Those Committee members that did not feel the Framework clearly outlines the roles and expectations of organisation think that the statements are all laudable but lack detail of what this will actually look like in reality. There was acknowledgement that there may be a variety of ways of achieving these outcomes.

**Thinking about the recent impact of coronavirus on the NHS and public services, is there anything new or different the Framework should focus on to support complaints handling and learning?**

There were wide ranging responses from the Committee members on new and different areas of focus for the Framework in light of COVID-19. There was an overall belief that more detail would be beneficial, specifically in relation to expected timescales for the complaint process. In terms of timescales, there was also mention that recognition is required of the fact that during exceptional circumstances, such as, COVID-19, some delays in responses may be inevitable but should not serve as an excuse.

The inclusion of staff in the process as a matter of course (keeping them informed and empowering them to make changes happen) is very welcome. However media coverage of the difficulties experienced by some NHS staff in raising concerns has been worrying and mention could usefully be made of the mechanisms open to staff to raise their concerns – particularly as these may often overlap with patient concerns. This process should be transparent for all.

Committee members also feel that emphasis on the need for particular sensitivity in dealing with complaints about lack of access to the dead or dying/terminally ill should be made.

**Is there anything else that you think is missing, or not yet fully explained, in the Framework?**

YES

**If so, please explain what else you would like to see included in the Framework.**

The sentiments laid out in the Framework are commendable, however some Committee members feel that there is a lack of detail and / or examples to illustrate how this might look and function in practice. For example, there was concern that the lack of common timescales and stages may cause difficulties for patients receiving care across a number of health organisations. While the framework identifies the need for co-ordinated responses from a lead organisation, without common processes this can mean that the whole matter is handled at the pace and competency of the least competent organisation. This also adds uncertainty and frustration to those seeking to raise an issue who do not know the multiple systems well enough.

Additionally, there is no mention of how this process will work alongside other NHS review processes such as Significant Event Analysis.

Committee members also think that the Framework should state at the outset, that the achievement of standards requires effective leadership from the Board of Directors, senior managers, etc, as well as participation from all staff. The leadership team should show commitment to what is expected,

demonstrate their commitment to their staff, take responsibility for monitoring both the overall effectiveness of the procedures required to achieve the standards, and how well or otherwise these are being implemented.

As a specific example, a Committee member has commented that Step 5 on page 9 of the Framework assumes and encourages a desire to complain, which it was felt might be counter-productive. It is also difficult to see how someone would disagree with step 5 if they have agreed with the four previous steps. Committee members have suggested it would be better to re-phrase the heading to “I feel confident that the root cause of my complaint will not recur”. Similarly, the first and third bullets in that step should be removed. It is important to encourage feedback from patients both positive and negative.

Lastly, the Committee members agree that if staff are given confidence and time to investigate and make changes then this can work well at the local level. However, the human factors approach correctly suggested here potentially uncovers far reaching systemic changes originating well away from the zone of influence of the complaint handler – the governance mechanisms discussed here are largely limited to overseeing the learning from complaints when in fact they may need to include identifying and enabling the learning from complaints. Governance needs to be an active participant in the complaints processes and not merely an overseer.

**The Framework is based on My Expectations, which describes what the public expect to experience when they make a complaint about the NHS. Do you think that *My Expectations* fully captures what you would expect if making a complaint?**

Committee members’ replies to this were mixed, some believe that *My Expectations* fully captures what is expected when making a complaint, while others think there is room for improvement in the *My Expectations* document. These views are outlined in the next section.

**If not, please explain what changes you would like to see to *My Expectations***

While the Committee members very much support the approach taken in *My Expectations*; describing what the experience will be like, members believe it would be even more helpful to give concrete instances of what actions or outcomes might allow people to make such statements. One member suggested that an example would be “They felt that their views were taken into account BECAUSE they were asked at the outset what they wanted to happen. They felt involved in deciding which changes would be implemented and in how to make them.” The Committee members believe this approach will help ensure there is a mutual understanding of what the expectations would look like in practice.

Another point expressed by the Committee members was that they appreciated that *My Expectations* will reflect input from patients’ panels and other similar bodies, but some members put forward that where a complaint is not about a very serious matter, some complainants would – the

evidence suggests – be satisfied with their complaint being listened to by a named and understanding individual who provides a proper response - or apology if appropriate - in a timely manner. This can often prevent escalation. If empowerment of staff includes being allowed to do that, then that is welcome, however Committee members did not feel this was explicit. A final thought was that being given a response in a “time period....relevant to my particular case and complaint” is a beautiful bureaucratic construct, but risks excusing all kinds of delay and procrastination. Specific times should be agreed for all complaints and adhered to.

### ***Embedding the Framework and reporting progress against it***

*PHSO expects the Complaint Standards Framework guidance to be adopted by the organisations it investigates and be used by them to monitor their own performance towards meeting the Framework's expectations. PHSO will also play an active role in capturing and reporting on how organisations are doing to embed the Framework, and will help organisations to achieve that*

### **What steps do you think PHSO should take to ensure organisations embed the Framework in their own complaints processes?**

Committee members outlined several different interlinked steps that they believe would help ensure organisations embed the Framework in their complaints process.

Firstly, a wide distribution of the document and video throughout every organisation is essential. Once distributed, the Chairs, Directors and management of Trusts and organisations should be engaged to obtain their commitment to the standards outlined in the Framework. The success of the standards can depend on the leadership from the top and the leadership's ability to support and engage staff, which should be embedded as part of Trust values.

Provision of training to key staff and promoting good practice by telling the success stories will always be helpful. Ensuring that the standards outlined in the Framework are included in the training programmes of junior doctors and nurses, as well as Front of House staff (receptionists etc) would help to embed these standards in the complaints process. However, while the Framework only has the status of guidance, there must be a real likelihood that the organisations most likely to embed the Framework will be those who already recognise the opportunity presented by complaints rather than fearing the threat. It could be these organisations, which already understand the value of complaints that share their outcomes. This would help to develop expectations against which organisations could be measured as and when appropriate.

There is concern among members that voluntary arrangements have not historically worked to persuade those with governance responsibilities that higher numbers of complaints can indicate an open and healthy organisational culture rather than a PR disaster. For that reason, it will be of the first importance to engage with those with governance responsibilities and provide concrete examples to demonstrate the 'value' of complaints. It is too easy for organisations to simply repeat the standard 'we are a learning organisation and value complaints' rhetoric without actually putting

in place the systems and processes to make that a reality. The framework says, “Staff have the freedom to resolve issues quickly and to the satisfaction of everybody.” But without the authority to enact the resolution, front line staff can simply become frustrated by the same problems that occur time and time again and the excessive bureaucracy in place of simplistic plans.

**Do you think PHSO should regularly report on how organisations are performing towards meeting the Framework expectations?**

YES

**Do you think PHSO should undertake regular reviews to update the Framework in the future?**

YES

**To what extent would you agree or disagree that PHSO should be given legislative powers to set and enforce national complaint standards for the organisations it investigates?**

STRONGLY AGREE

AGREE

NEUTRAL

DISAGREE

STRONGLY DISAGREE

**Please provide any other comments you would like us to take into account regarding the Complaint Standards Framework.**

There was a suggestion that more details on expected target timescales would be helpful, alongside further details and suggestions of what might happen if a complaint is upheld.