

# Public Health Ombudsman Complaints Standard Framework consultation: NHS Providers response

## About NHS Providers

NHS Providers is the membership organisation for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS trusts and foundation trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

NHS Providers has all trusts in voluntary membership, collectively accounting for £87bn of annual expenditure and employing more than one million staff.

### Key points:

- Trusts are committed to listening and acting on their patients' concerns. They recognise that complaints handling and learning from complaints are important areas of work to get right and there is room for improvement.
- We see the draft Complaints Standard Framework as a welcome step in offering clear guidance for trusts, with a focus on evidence-based learning from complaints in a constructive way.
- We endorse the four principles outlined and support its development, agreeing that a single vision will help reduce confusion and contribute to creating a shared standard, and could form the appropriate basis for training and development programmes.
- We are however keen to highlight some areas where the guidance could be finessed and further developed in support of its implementation. These include an acknowledgement of the need for more insight on how combining organisational learning with improvement can happen in practice, awareness of the barriers facing organisations, alignment with other national work in this area, and the need to avoid creating additional burden at a local level.

## Introduction

NHS Providers welcomes the opportunity to comment on the draft Complaints Standards Framework, which sets out a single set of principles for complaint handling across the NHS. The Public Health Services Ombudsman (PHSO) worked with NHS and Government organisations on its development. This consultation follows a review into the current approach to complaints across the NHS and government departments, and how this can be improved to meet the needs of the public – [Making Complaints Count](#).

The Making Complaints Count report was developed in response to an invitation from the House of Commons Select Committee on Public Administration and Constitutional Affairs to [explore the 'state of local complaints handling' across the NHS and UK Government departments](#). It identified three key areas where improvements can be made:

- A lack of single vision for handling and resolving complaints
- A lack of consistent access to complaints handling training for staff
- A negative and under-valued view of complaints at a senior level

For PHSO, the Complaints Standard Framework is the first step in helping to strengthen work in these three areas, within the NHS. It identifies four underlying principles for providers to meet when handling complaints, aiming to create a consistent standard of response across the NHS and to support senior leaders to embed learning:

- Promoting a learning and improvement culture
- Positively seeking feedback
- Being thorough and fair
- Giving fair and accountable decisions

This report also builds on previous work, the development of which NHS Providers contributed to, on a national service user-led vision for complaints handling, [My Expectations](#). Trusts are using this tool to augment, benchmark and enhance their existing complaints handling procedures with staff, patients and service users.

The research underpinning the Making Complaints Count report revealed a consensus that the current approach to complaints needs strengthening and is not currently meeting the needs of the public. Healthcare providers are committed to listening and acting on their patients' concerns. They recognise that this is an important area of work to get right and that there is room for improvement. We hope that in responding to this consultation and helping to shape the standard framework

around complaints handling we contribute useful insight to help PHSO in developing a deeper understanding of why variation in providers exists and how it can be addressed.

## Our response

Complaints handling and learning from complaints within the NHS remain important issues to highlight. It is through this process, underpinned by a culture of openness and transparency, that continuous improvements can be made so that the NHS can deliver high quality care for patients.

This is an area where trusts are always looking to learn and have increased their focus of work in recent years. They are seeking to make wide-ranging improvements to how their staff receive, respond to and learn from feedback from patients and service users, and recognise the role they play in raising the visibility of, and the value placed in, the complaints process. Trusts recognise that more progress must be made to deliver a consistently high standard of NHS complaints handling.

In general, we support the development of the Complaints Standard Framework and agree that a single vision for how staff are expected to handle and resolve complaints will help reduce confusion and contribute to creating a shared standard for dealing with complaints from patients. We endorse the four principles and regard each as equally important, for a holistic approach to learning from complaints and supporting patients and staff.

We see the draft framework as a welcome step towards clear guidance for trusts, with a focus on evidence-based learning from complaints in a constructive way. It is a valuable contribution and the current tone and scope of the draft document could play a role in supporting a just and learning culture within the NHS.

We also agree that a single framework will be useful to help develop a professional skills training and support programme for all staff delivering NHS services. It is important to note that there have been wider challenges in relation to CPD training budgets in recent years, with reduced funding over a prolonged period, meaning that not all training needs will have been met. There is also a lack of certainty around future provision alongside an expectation that providers find additional funding from existing budgets to help meet training needs, which further creates prioritisation dilemmas for those at a local level. To support the expectation of a common vision and standard of complaints handling across the NHS, it will be essential for providers to have sufficient funds to enable a professional skills training and support programme for all staff delivering NHS services to be put in place.

We also appreciate the open approach taken by the PHSO, in engaging widely on the development of this framework, involving a range of stakeholders over a sustained period of time.

The resulting framework is driven by values and behaviours, over process, and as such, is a high-level and clear document that still allows sufficient flexibility in how it is applied in different local settings. We feel this will be beneficial to our members and supports an overall approach in which trust boards retain accountability and oversight of the quality of care their organisation provides.

The guidance clearly details how frontline staff can apply the framework and what boards can do to help their organisations to embed learning. It clarifies more clearly the role of boards in raising the status of complaints in their organisation, and the necessary time, focus and resource allocation from an executive level needed to support this.

## Where the PHSO could further build on this draft framework

There remain several areas where the PHSO could build on the draft further and important points to note for its implementation:

### 1. Learning and improvement culture at provider level

The draft framework seeks to bring together a high standard of complaints handling with a focus on learning and improvement. However it is important to note that while studies consistently show that patients and the public find it most important that their complaint leads to quality improvement, and despite much work in NHS organisations exploring how to collect and use data about patient experience, it is complex and challenging to do this in practice.<sup>1</sup>

A recent systemic review noted the need to develop policy strategies that sufficiently distinguish complaints reporting, analysis and improvement from complaint handling practice, and provide guidance on who is best placed for reporting and analysis, the necessary tools and training, an analysis strategy to generate actionable learning insights, and translation into quality improvement.<sup>2</sup>

Research literature also highlights various barriers that hamper using patient complaints to develop improvements. Whilst complaints could be taken out of isolation and more closely connected to other

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<sup>1</sup> <https://evidence.nihr.ac.uk/wp-content/uploads/2020/03/Patient-Feedback-WEB.pdf>

<sup>2</sup> van Dael J, Reader TW, Gillespie A, et al. BMJ Qual Saf Epub ahead of print: 24 August 2020. doi:10.1136/bmjqs-2019-009704

improvement processes, research shows that the associated costs and efforts will vary per organisation depending on operational considerations such as digital maturity or existing approaches to patient experience data.<sup>3</sup>

It's also notable that a number of national reports and strategies call for a better learning and improvement culture at provider level, and trusts are working hard to achieve this, prioritising it even in the particularly difficult circumstances of the last few months. However, coordination around how this is best supported, and understanding of the role played by national organisations such as PHSO in shaping the environment in which compassion, trust, openness and transparency can prosper is key.

## 2. Reporting expectations

It is important that there is coordination at a national level around any reporting expectations that evolve from this work. Aligned approaches to judge whether expectations are being met by different national bodies are needed. It is also important that the PHSO remains sensitive to the fact time and complexity of complaints handling may differ between sectors. The context of a complaint in an acute setting can be very different to that in an ambulance, mental health or community setting.

## 3. Alignment with related national work

There is a need to align the PHSO's valuable work with related initiatives at a national level. For instance, clarity around how this framework sits alongside the new Patient Safety Incident Management System which is expected to launch in the future would be helpful.<sup>4</sup> How to distinguish between a complaint and patient safety incident or near miss may not always be clear cut at a local level, so providing further support to providers to help them determine the best course of action in every instance may be useful.

This guidance also has relevance for safety investigations. The draft Patient Safety Incident Response Framework, to be piloted by NHS England and NHS Improvement, states that "Those managing complaints and those managing patient safety incidents must work closely together to align their approaches in response to patient safety incidents given the sizeable overlap in these valuable sources of learning."<sup>5</sup> It would be useful for PHSO to consider how learning from the upcoming

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<sup>3</sup> de Vos MS, Hamming JF, Marang-van de Mheen PJ. *BMJ Qual Saf* 2018;27:758–762

<sup>4</sup> <https://improvement.nhs.uk/resources/development-patient-safety-incident-management-system-dpsims-project-completes-its-alpha-phase/>

<sup>5</sup> <https://www.england.nhs.uk/patient-safety/incident-response-framework/>

Patient Safety Incident Response Framework pilot process could support and inform use of the Complaints Standard Framework, and what may help organisations further. For instance, how best providers can triangulate the different types of data called for by different national bodies for best learning and improvement.

Coordination between PHSO and NHS England and NHS Improvement on these two pieces of work could also avoid duplication and adding needless complexity for providers to navigate. We are pleased to see the call earlier this year from PHSO for alignment between the Complaints Standard Framework and the Patient Safety Partners Framework (currently under consultation) and we appreciate the fact that the importance of this issue has been recognised.

Another important point to note is that whilst being fair and objective is critical to any sound response to complaints, it can be difficult to ensure full objectivity as a complaint handler, particularly given the different pressures of 'representing' one's employer, and the impact of dealing with often emotional and distressing issues. Further help for providers to understand how best to support their staff in achieving this standard appropriately would be helpful, and we can see an opportunity here for further coordination nationally with related work being considered in this area, such as the work around safety culture and just culture outlined in the National Patient Safety Strategy 2019.

#### 4. Statutory complaint standards powers

We note that PHSO are asking to be granted statutory complaint standards powers to enforce this framework. We would urge PHSO to remain open to liaising with local organisations to ensure any change in their statutory basis does not create additional burden for trusts locally, and to work with all relevant national bodies to coordinate any resulting reporting requirements to remove duplication of effort. It is also crucial to create the right balance between empowerment and enforcement in keeping with the cultural ambitions outlined in the framework.

We appreciate the opportunity to comment on the draft framework during this consultation, and look forward to working with PHSO colleagues as the guidance is finalised.