

21 February 2014

Robbie Pearson  
Director of Scrutiny and Assurance  
Healthcare Improvement Scotland  
Gyle Square  
1 South Gyle Crescent  
Edinburgh  
EH12 9EB

Dear Mr Pearson

I welcome the opportunity to comment on the draft of Healthcare Improvement Scotland's (HIS) 2014/2015 Annual Scrutiny and Inspection plan.

I consider that, as the final stage for NHS complaints in Scotland and the organisation tasked by Parliament with improving complaints standards across the public services, our work and that of HIS can be complementary. We are increasingly involved with organisations like HIS and we have held discussions with the Scottish Health Council (SHC) about their current review of the Scottish Government's complaint handling guidance for the NHS "*Can I help you?*" Our Complaints Standards Authority (CSA) remains involved in discussions around NHS complaints handling and I have discussed with the Scottish Government our readiness to help implement recommended improvements from the SHC review. Our Training Unit will also continue to provide training and advice to NHS Boards on handling complaints and on how to ensure complaints are dealt with appropriately in governance structures.

There are a number of aspects of the plan where our working relationship with HIS in the coming year are most evident and where sharing of information is likely to be beneficial.

As set out in the plan, the SPSO will be represented on the Healthcare Intelligence Review group. You have also said you will be looking at how Boards are complying with the Patients Rights (Scotland) Act 2011.

Throughout the plan HIS refer to the importance of listening to patients, the public and to staff. I consider that it is this process of listening and then using that information to improve the service and ensure it is truly focused on the person that is the key to driving culture change and improvements. These two initiatives are good examples of the potential of that approach. Listening allows for early warning signs of problems to be picked up and we will be interested to see how the Healthcare Intelligence Review Group uses the different types of information held by its members to identify what are the key early signs of problems and helping HIS to react quickly to those.

The importance of responding openly and well to feedback including complaints was built into the Patients Rights legislation. There are key rights in the legislation which ensure people have a right to complain and to receive a response. The quality of that response is often critical. A defensive response can lead to a break down in relationships and failings

being repeated unnecessarily. A positive, warm, honest response can rebuild trust and ensure improvements are driven from the patient up.

There are a number of aspects of good complaints handling which provide a framework for the work of our CSA which we are encouraging regulators and other improvement and scrutiny bodies to build into their work where possible to help drive a valuing complaints culture across the public sector. When considering elements of complaints handling in the course of your work, the following would help HIS assess whether the requirements of the Patients Rights Act and associated guidance are in place and whether health boards are open and receptive to complaints and the learning to be gained from them:

- Clear accessibility and visibility of the complaints procedure and related information. This would include clear signposting and supporting those with needs or difficulties in accessing the system but also ensuring that real or perceived barriers to complaining have been identified and removed.
- A focus on resolving things early at the frontline, including whether apologies are given freely and action taken where things go wrong.
- Recording all complaints and monitoring and reporting on this regularly in line with Patients Rights Act requirements.
- Learning from service failures, with systems in place to record, analyse and report on complaints outcomes, trends and actions taken. This would include seeking opportunities to share learning across the NHS.
- ensuring that processes are in place to identify and respond immediately to critical or systemic service failures or risks identified from complaints.
- Strong, visible leadership on complaints from senior staff including support and training and a recognition of the importance of effective complaints handling to good governance.

Following on from a series of master-classes I delivered for NHS non-executive and executive directors last year I would, in particular, strongly encourage HIS to include complaints as a core element of its planned work on supporting good governance in the NHS given that this was a clear lesson emerging from the findings from the Francis Inquiry.

Given my role over prisons and prisons healthcare complaints I would also be able to help inform HIS planned work in this area in the context of complaints we have received and some of the concerns in how complaints are handled and how this might be addressed by HIS and Her Majesty's Inspectorate of Prisons.

I look forward to working with HIS and seeing the outcome of these developments and the other initiatives in the plan over the next 12 months and I or my office would be happy to discuss this in more detail.

Yours sincerely,

Jim Martin  
Ombudsman