

INDEPENDENT NATIONAL WHISTLEBLOWING OFFICER People Centred | Improvement Focused

How to make a good apology

An apology is more likely to resolve a complaint early than any other action you might take. Apologising and acknowledging that there is an issue is an important part of restoring trust and repairing a broken relationship with a customer, or an NHS whistleblower. When we consider a complaint and find there has been a problem that has impacted on a person we most often recommend that the organisation apologise. Apologies are very powerful and important. This guide will help you get apologies right for most people, most of the time.

Say it or write it?

Empathy and sincerity is much easier to express and recognise when we say (rather than write) it. When we speak to another person directly we come over as fellow humans and not a faceless organisation. Our body language and tone of voice backs up our words, ensuring our meaning is properly understood. When we talk to someone, we are more likely to notice if our words are not being well received and can correct misunderstandings before they escalate.

Written apologies are always trickier to get right, simply because we can't check whether we have been properly understood. Verbal apologies help avoid a lot of potential pitfalls. There will be situations where a written apology is needed. Following this guide will help you get that right.

A couple of common myths about apologies

"Apologies are always an admission of liability."

No. The Apology (Scotland) Act 2016 and the Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016 make it clear that apologies made by public bodies in Scotland cannot simply be assumed to be an admission of liability.

"We will get sued if we apologise."

No. Research into the impact of apologies consistently shows that a well-made, timely apology diminishes people's wish for compensation.



Who should apologise?

The earlier an apology is made, the more effective it is likely to be. Give it as soon as the problem is properly understood and it is known what the apology needs to be about: your organisation should support you to do this.

When complaints or NHS whistleblowing concerns escalate, or the issues are not limited to your area of responsibility, it may also be appropriate for the apology to come from a person with overall responsibility for the issues being raised, such as a Chief Executive, Director of Department or the person with governance responsibility for complaints. But be careful not to overdo it as too many apologies can appear insincere.

If the apology is the result of an SPSO or INWO recommendation, it must be made by someone with responsibility for all the areas where failings have been identified.

What do we mean by apology?

We use words like 'apology' and 'sorry' to mean different things in different situations.

Sometimes we are not really giving an apology, but simply telling another person that we recognise and acknowledge their difficulties: "I am so sorry to hear about the problems you have had". This is an expression of empathy. This will often be the appropriate level of response, especially if seeking early resolution. Empathy lets the other person know you have listened to them and that you are willing to discuss their issues with them. An empathetic response may even help avoid a complaint escalating unnecessarily.

At other times we are saying sorry and apologising as a recognition that the other person has suffered because of a failure by us or our organisation; "I am sorry that we did not process your application on time". This is an expression of **regret** which also makes it clear we are taking **responsibility** for the problem. Apologies will also include the reason for the problem. This shows that you have properly understood the issues. When there is recognised fault or failing, an apology should express regret, demonstrate responsibility and give the **reasons** why the apology is needed. The very best apologies will also explain what you and your organisation are going to do to **remedy** the problem. **These are the 4Rs of apology.**

Quick Tip: 4Rs of Apology

- > Regret (I am sorry)
- > **Responsibility** (we didn't provide you with support following your application)
- > **Reason** (we were short staffed at the time)
- > **Remedy** (I have now fast tracked your application)

DO

An apology should be personal, written for the specific occasion and be sensitive to the context in which the apology is being made. For instance, an apology to a member of the public for a minor communication error will be different to an apology to a patient who has suffered significant harm as a result of a clinical failing. An apology to an NHS whistleblower will be different again and will likely relate to any detriment or difficulties they have experienced.

It will include:



an expression of empathy; 'I was sad to read about the difficulties you encountered'

an acceptance of what has gone wrong; 'Staff didn't ensure that you understood the procedure you needed to follow'

an acceptance of responsibility; 'We should have explained the process to you adequately and we did not'

an acknowledgement of the effect the problems have had for the other person; 'you experienced significant delays and were left not knowing what was happening'

an explanation of why the problem occurred (this may be covered elsewhere in a letter if this is a written apology); 'Our computer system was down for routine maintenance and staff forgot to enter your data when the system went back on-line'

a description of anything that is being done to put matters right for the person directly concerned and/or to help avoid the problem happening again in the future (this may be covered elsewhere in a letter if this is a written apology); 'we have updated your records to reflect your change in circumstances and have used your poor experience to remind staff of the importance of ensuring sufficient information is recorded on our database'.

Quick Tip: Keep it short and straightforward. Once you have apologised, don't labour the point.

DON'T

Expressing empathy and apologising fail when we:



use standard words and phrases. This comes across as impersonal and lacking in empathy.



X distance ourselves from the fault; 'I apologise for ANY faults'. If there were no faults we don't need to apologise for these (though empathy will still be helpful) and if there were then we should admit to them



X shift the blame in whole or part to others; 'I am sorry this happened BUT it was someone else's fault'. Worst of all is if we seek to blame the person raising the issue 'I am sorry but if you hadn't been late then ..'



X give the impression we are only apologising because we are being forced to; 'I have been told I should apologise'. In particular it is bad practice to respond to an SPSO or INWO recommendation with the sentiment that 'The Ombudsman said we must apologise so we are...'



trivialise the problem; 'no one else raised the issue'

question whether the other person has actually suffered; 'I am sorry IF you were upset'

Quick Tip: Try to avoid using the words 'if', 'but', 'however' or 'any'.

How to contact the SPSO...

For enquiries relating to complaints about authorities or the SPSO:



SPSO Bridgeside House 99 McDonald Road Edinburgh EH7 4NS

Opening hours: Monday, Wednesday, Thursday, Friday 9am-5pm, Tuesday 10am-5pm

A freepost envelope can be supplied if this is required.



SPSO freephone **0800 377 7330**

Website **www.spso.org.uk** Online contact form **www.spso.org.uk/contact-form** For enquiries relating to whistleblowing complaints regarding the NHS in Scotland or the INWO:



INWO Bridgeside House 99 McDonald Road Edinburgh EH7 4NS

Opening hours: Monday, Wednesday, Thursday, Friday 9am-5pm, Tuesday 10am-5pm



A freepost envelope can be supplied if this is required.



INWO freephone **0800 008 6112**



Website **www.inwo.spso.org.uk** Online contact form **www.inwo.spso.org.uk/ contact-form**



Email INWO@spso.gov.scot

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