



Ein cyf/Our ref: MB/MD/4598/14

David Rees AM  
Chair  
Health and Social Care Committee  
National Assembly for Wales  
Cardiff Bay

[HSCCommittee@wales.gov.uk](mailto:HSCCommittee@wales.gov.uk)

13 November 2014

Dear David

I welcome the report produced by the Health and Social Care Committee following its inquiry into the NHS Complaints process in Wales. I am grateful for the evidence that the inquiry has provided which very much builds on, and endorses the findings and recommendations from the review undertaken by Mr Keith Evans: "Using the Gift of Complaints".

As you will be aware I was anxious that all parties had the opportunity to reflect on the report in more detail following its publication. I therefore ensured a period of reflection over the summer to enable this. Respondents for the most part welcomed and supported the conclusions and recommendations. There were calls for the NHS to take a more open and honest approach to complaints and for staff to be supported to deal with complaints at source. There were calls for clear information around the complaints process and the opportunity for complainants to speak to someone face to face about their complaint. The importance of learning the lessons from complaints was seen as critical.

I have considered this carefully, together with the evidence and conclusions of the committee report, which has very much informed my thinking and overall response to the report. I intend to issue a detailed written statement shortly to set out the next steps in taking the review forward. In the meantime, I will address some of the issues raised by the Committee.

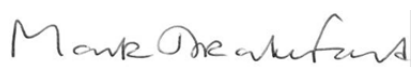
A number of the conclusions drawn by the committee focused very much on improvements that can, and do need to be made without delay. I would like to assure the committee that action has already been taken where this is the case. I made it clear in July that there were some recommendations that should be acted upon immediately. The NHS Wales Chief Executive wrote out to all chief executives stressing this point. These actions included: ensuring sufficient complaints resource to meet demand; improvements to timeliness of responses; senior and executive leadership in the complaints process; more visible reporting of complaints themes, actions and responsiveness at Board level. I am pleased that the National Quality and Safety Forum (NQSF) have agreed that this should be a key focus of its work in the coming months. It has already established a number of work streams to take forward the work. I am anxious to ensure a consistent approach across NHS Wales.

I am considering what elements could perhaps be undertaken on a national basis and I welcome the committee's contribution on this aspect. There is also clearly more to be done to embed the arrangements effectively within primary care. The committee raised the issue of the possible creation of a tier 1 priority in relation to complaints. Concerns handling is already a regular feature of meetings with local health boards and trusts and will be included in the revised NHS Outcomes Framework.

I agree that the role of Community Health Councils (CHCs) in the complaints process must be clear. The current consultation on changes to CHCs and the regulations that underpin their work, seek to strengthen their advocacy role through standards to be set by the Board of CHCs in Wales. Such standards would aim to improve the professional operation of the service. With regard to the role of HIW in the complaint's process, I am awaiting the outcome of the HW Review being led by Ruth Marks and any recommendations that she may make in this regard. I agree that there needs to be a greater understanding of the role HIW play in the overall process.

Finally there were a number of recommendations that are longer term in nature and which could require new legislation such as the introduction of an independent national NHS complaints regulator. I note the committee's conclusion that alternative mechanisms for independent regulation of complaints handling are needed. I will keep this in mind as the work progresses but believe there is much that can be done to improve the existing arrangements in the first instance.

I hope this is helpful and I would again like to thank the committee for its contribution to this important area of work.



**Mark Drakeford AC / AM**

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol  
Minister for Health and Social Services