

**Written statement of how Manx Care proposes to give effect to any recommendation made by the Health and Social Care Ombudsman Body**

In accordance with Regulation 25 (Department’s assurance of the implementation of recommendations):

- (1) *On receiving a report under Regulation 24(5), Manx Care must prepare a written statement of –*
  - (a) *how it proposes to give effect to any recommendations made in the report; and*
  - (b) *any other action which it proposes to take in response to the report, and the period within which it proposes to do so.*
- (2) *Manx Care must send the written statement to the Department.*
- (3) *Manx Care must publish the written statement on its website excluding any information from which the identity of a living individual could be ascertained.*

HSCOB Complaint Reference	Manx Care Complaint Reference	Date Original Complaint Made	Date Report Received by Manx Care from HSCOB
HSCOB / 2023 / 103	COM2713	13/10/2021	20/9/2023

HSCOB Recommendation	Actions by Manx Care	Action Owner	Target Date
1. Secure an agreed and published process for patients to seek a second opinion, thus ensuring that <i>[the patient’s]</i> experience is not repeated. If there are circumstances where this is not possible, its absence should equally be clearly articulated and published. This process would ideally include primary as well as secondary care.	a. Develop and approve a standardised operating procedure for the handling of a request for second opinion. This should be submitted to the Quality, Safety & Engagement (QSE) Committee for approval.	Medical Director/Primary Care Associate Medical Director	March 2024
2. Manx Care should issue an apology both for the distress <i>[the patient]</i> experienced as a result of the difficulties <i>[they]</i> have experienced in accessing appropriate care and treatment, but also for Manx Care failing to meet the requirements of the National Health Services Complaints Regulations Part 2.	a. A letter was sent to the patient apologising for Manx Care’s failings regarding various aspects of care delivery and the manner in which the subsequent complaint was handled. This included an explanation as to why the patient’s complaint was not fully addressed and how deviation from standard process had influenced the management of the complaint.	Chief Executive Officer	Completed December 2023

National Health Service (Complaints) Regulations 2022

<p>3. Manx Care should issue an apology in relation to <i>[the patient's]</i> treatment in the Emergency Department, and their consistent failure to respond to this element of <i>[their]</i> complaint.</p>	<p>a. In the letter sent by the CEO, we apologised for the patient's treatment in the Emergency Department and provided an explanation as to why specific terminology may have been used. We also apologised for the department's failure to respond to the patient's complaint.</p>	<p>Chief Executive Officer</p>	<p>Completed December 2023</p>
<p>4. <i>[The GP]</i> in Ramsey Group Practice should apologise for the failure to pass on relevant information provided by <i>[the patient]</i>, to Noble's Hospital, acknowledging the likely impact this had on <i>[the patient's]</i> subsequent care and treatment.</p>	<p>a. <i>{The GP}</i> and practice manager have been notified of this recommendation. As a contracted service, they will issue a separate apology and will provide an action plan to Manx Care for assurance. This will be monitored by Manx Care's Complaint Manager for Primary Care.</p>	<p>Ramsey Group Practice</p>	<p>December 2023</p>
<p>5. Manx Care should give consideration to making appropriate arrangements for care pathway of patients accessing care in the UK to be overseen on Island. This may be by means of identifying a lead clinician or pathway co-ordinator. The patient should be made aware of the contact details of the person fulfilling this role in each case.</p>	<p>a. The Executive Director of Operations has confirmed that an Off Island Pathway is presently being established which will encompass pathway tracking as well as the function of the Patient Transfer Office. Details of this pathway will be submitted to QSE for approval.</p> <p>b. An IT system, currently used in Jersey, is being adapted and will be introduced to ensure that all off island pathways have a responsible clinician on the IOM.</p>	<p>Executive Director of Operations</p>	<p>June 2024*</p> <p><i>(*to allow for staff recruitment &amp; implementation of IT systems)</i></p>
<p>6. The absence of the application of the requirements of the complaints legislation is a cause for significant concern. There is no evidence that an investigation was undertaken, although some clinicians were asked to give their view on the complaints via a rebuttal. There is no report of the investigation, and no outcome was ever communicated, although there are numerous reference to correspondence which was never received.</p> <p>Investigations should:</p> <ul style="list-style-type: none"> <li>• Provide structure and focus to the process of investigation.</li> <li>• Have an agreed terms of reference - that is, has a clear statement of the matter to be investigated, and the issue(s) to be addressed, including any</li> </ul>	<p>a. Actions taken by Manx Care regarding complaint handling are as follows:</p> <ul style="list-style-type: none"> <li>• Care Quality &amp; Safety (CQ&amp;S) staff have been reminded of Complaint Regulations and the need to adhere to its content.</li> <li>• Upon receipt of an HSCOB report in which failings have been highlighted, the original Complaint Handler and/or investigator, will be appointed an appraiser to review the handling of the complaint, and to implement any remedial actions necessary. This will facilitate learning for all involved thus improving the standard of future complaint responses.</li> </ul>	<p>Head of CQ&amp;S Team</p>	<p>Completed November 2023</p>

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<p>defined complaints and other issues to be considered.</p> <ul style="list-style-type: none"> <li>• Bring focus and clarity to what is often an emotive and difficult issue; and allows for the investigator(s) to be clear about which issues or complaints are upheld and which are not upheld.</li> <li>• Be completed in a timely manner, taking account of the complexity of issues raised, and where further information is required.</li> </ul>	<ul style="list-style-type: none"> <li>• Complaint letter templates now contain prompts to ensure that the following information is included in all responses: <ul style="list-style-type: none"> <li>- A summary of the issue(s) raised by the complainant</li> <li>- Details of the Regulations relating to complaint handling</li> <li>- The name and position of the person investigating the complaint and how it was investigated</li> <li>- Information regarding options available if the complainant is dissatisfied with the outcome of the investigation</li> </ul> </li> <li>• Details relating to meetings held with complainants are now mandatory fields on Datix (electronic complaints file); thus prompting staff into ensuring this action is completed.</li> <li>• Complaint response times are automatically calculated and displayed on Datix to facilitate deadline monitoring.</li> <li>• Complaint performance (including the number acknowledged and/or replied to on time) is continually monitored by the CQ&amp;S Team. Monthly statistics are available for perusal by Manx Care Executives and the Department of Health and Social Care.</li> </ul> <p>b. Assurance relating to the investigation of complaints:</p> <ul style="list-style-type: none"> <li>• A new policy and procedure for the management of complaints was introduced in October 2022.</li> <li>• A Complaint Handling module is available on eLearn Vannin for staff who are in need of additional training.</li> </ul>	<p>Head of Care, Quality &amp; Safety Team</p>	<p>Completed November 2023</p>
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**National Health Service (Complaints) Regulations 2022**

	<ul style="list-style-type: none"> <li>Complaint Handlers and/or Investigators whose complaint responses repeatedly fall below standard, will be encouraged to re-complete online training or to attend ad hoc classroom based training.</li> <li>The Primary Care Network (General Practice surgeries who work collaboratively to enhance services provided in Primary Care) have implemented a complaints policy which is based on National Health Service (Complaints) Regulations 2022.</li> </ul>		
<b>Additional Actions Taken</b>			
A process has been introduced for use within the Care, Quality & Safety Team to provide guidance for the timely response to any recommendations made by the ombudsman, including the role of the Appraiser in facilitating reflective practice and learning.	CQ&S Lead for Community Health	Completed November 2023	

Written statement in respect of *Regulation 25 (4) If Manx Care proposes not to give effect to any recommendation made in the report - (a) It must include in the written statement its reasons for not giving effect to the recommendation:*

<b>HSCOB Recommendation</b>	<b>Reasons why Manx Care proposes not to give effect to a recommendation</b>
Investigations should be undertaken by an appropriately skilled person, who is independent of the service area which is being investigated - that is, is not directly involved in, or managing, that service. This does not necessarily mean someone independent of Manx Care.	The investigation of all complaints is overseen by an allocated member of the CQ&S Team whose purpose is to provide an objective view on events and findings. Further to this, complaints meeting the criteria for a Serious Incident will also be overseen by the Serious Incident Review Group thus providing additional impartiality.