Parliamentary and Health Service Ombudsman

Service Model Policy and Guidance: Review and Feedback Team Guidance 6.0

Version: 6.0
Version date: 17/1/2019

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Role of the Review and Feedback Team

1. The Review and Feedback Team handles complaints about our decisions and service that have not been resolved by the relevant case owner (the person who was originally responsible for the case) or their manager. They also handle positive feedback and gather insight and learning.

2. Before the Review and Feedback Team considers a complaint they will usually expect the case owner involved to have taken appropriate action to try and resolve things first, or if a service complaint, their manager. This is because the person who handled the case is normally best placed to resolve any concerns and answer questions about it. If the case cannot be resolved, it can then be passed to the Review and Feedback Team.

3. Our decisions are final and can only be challenged by Judicial Review. We recognise though that this is a technical and expensive process, so in rare circumstances the Review and Feedback Team can review a decision we have made on a case. There is no automatic right to a review, and a case needs to meet specific criteria in order for us to conduct one. We will not review a case just because someone is unhappy or disagrees with what we have done.

4. We would usually expect the person or organisation to have raised any concerns with the original case owner or their manager within one month of the decision complained about. Requests for a review of a decision should then normally be received by the Review and Feedback Team within one month of the original case owner or their manager signposting the person or organisation to the Review and Feedback Team, unless there are exceptional circumstances where this is not possible.

5. A review is not the same as looking at an assessment or investigation again. The caseworker (on the Review and Feedback Team[1]) will instead be looking at whether anything went wrong, and if so, what impact it had on our decision. If we find we did something wrong, we will either look to put things right, or offer another form of remedy if we cannot do this. We will only review a case once, except in exceptional circumstances.

6. We encourage contact with the Review and Feedback Team to be by telephone as we want to build a more personal relationship with those using the service. However, if those providing feedback prefer to communicate another way, they can also contact us by email, online or in writing.

[1] Please note that through-out this guidance the term caseworker is used to describe the person handling the case on the Review and Feedback Team, and not the original case owner.

Process and timescales

7. All electronic feedback should be acknowledged upon receipt, unless it has been forwarded by the case owner and they have already sent an acknowledgement saying it is being passed to the Review and Feedback Team. **(Policy requirement)**

8. All new cases should be logged on Dynamics by the Workflow team and the individual or organisation complaining should be kept regularly updated as the case progresses. The outcome and our decision should also be captured here. **(Policy requirements)**

Resolving a service or decision complaint before it reaches the Review and Feedback Team

9. The Review and Feedback Team would usually expect the case owner involved in the case to have tried to resolve issues about a decision before the case comes to them.

10. The case owner should provide any further explanations of their decision that might resolve things or answer questions the individual or organisation complaining had about the decision before passing a case on. **(Policy requirement)**

11. The case owner should let the individual or organisation complaining know about the review process and signpost to the Review and Feedback Team or send the relevant forms. **(Policy requirement)**

12. The case owner should also make the individual or organisation aware of our one month timeframe for review requests when there is nothing further they can do to resolve their concerns. **(Policy requirement)**

13. If the case owner was supervised, the relevant manager who approved the decision should work with the case owner to see if there are more explanations that can be provided or actions taken to resolve things.

14. Complaints about the service being provided by an individual member of staff or team on an ongoing case should be considered by or passed to the relevant case owner's manager.

15. The manager should attempt to resolve these concerns before passing them to the Review and Feedback Team. **(Policy requirement)** This could involve apologising for a delay, arranging contact or showing how improvements will be made.

16. If the case owner or manager involved in the case is unable to resolve the complaint to the complainant's satisfaction, they should signpost the person or

organisation to the Review and Feedback Team. **(Policy requirement)** This could be because the case owner or manager considers the steps they have taken to resolve the complaint are reasonable, but the complainant is seeking further resolution or outcomes.

17. The case owner or manager should also pass a complaint to the Review and Feedback Team if they identify something has gone wrong that needs to be resolved, but this requires approval at a senior level. **(Policy requirement)** For example, if a manager considers a new assessment or investigation needs to be created.

18. When forwarding to the Review and Feedback Team the case owner or manager should provide any relevant case reference numbers and a brief summary of any steps they have already taken to try to resolve the outstanding issues. **(Policy requirement)**

19. The Review and Feedback Team can forward feedback they receive to the case owner involved in the case, or their manager, if they have not already had opportunity to resolve it. In these instances the Review and Feedback Team must explain to the complainant what is happening with their feedback. **(Policy requirement)**

20. Any formal complaint received about the amount of time it is taking for a case to be allocated at any stage of the process should be passed to the Review and Feedback Team and not to the workflow or shared services teams.

21. The Review and Feedback Team will usually also consider service complaints that involve a number of members of staff or different stages of the process or when the complaint is closed.

Cases that should be passed straight to the Legal Team

22. If a complaint about our decision includes a plausible threat of legal action, for example, a letter from a solicitor mentioning the issuing of proceedings, the feedback should first be passed to the Legal Team to consider. **(Policy requirement)** We should not wait until a pre-action protocol has been received to seek their involvement.

23. The Legal Team will consider the contents of the feedback and will decide if it should be more appropriately addressed by them or the Review and Feedback Team. The Legal Team will let the Review and Feedback Team know whether they are keeping the feedback, and share the outcome if appropriate.

Categorising our feedback

24. When the Review and Feedback Team receives feedback, either by the telephone or in writing, they should consider the information provided and

decide what action needs to be taken. The contact will usually fall into one of the following categories:

- Positive feedback
- Complaint about our service, either on an ongoing or a completed case
- Complaint about our decision
- Follow up correspondence about an outcome of a decision or service complaint
- General feedback about PHSO

25. The information below explains what to do with each of these types of contact.

Positive feedback

26. Anyone in PHSO who receives feedback which gives a positive view of our service or decision should pass it to the Review and Feedback Team to be recorded and considered. **(Policy requirement)** The Review and Feedback Team also receive positive feedback directly from people using the service.

27. All positive emails or notes of telephone calls should be forwarded to feedbackaboutus@ombudsman.org.uk. The Review and Feedback Team should arrange for the workflow team to create a feedback record on Dynamics. Similarly hard copy positive feedback should be scanned and sent to the same e-mail address. The Review and Feedback Team will also receive and record positive feedback received directly to the Team from those who have used our service.

28. The Review and Feedback Team may contact the person giving the feedback for more specific information about why using our service was a positive experience, to thank them for providing the feedback and to explain how we will use it.

29. The Review and Feedback Team should pass on feedback within PHSO as appropriate. This is to ensure that learning can be obtained from these positive experiences.

Complaints about our service

30. A service complaint can cover any dissatisfaction with the level of customer service we provide. For example, treating someone without courtesy or respect, causing unnecessary delays or not explaining our processes or decision clearly. These complaints can relate to any aspect of our service and anyone involved in the case, not just the original case owner.

31. Service complaints should usually first be addressed by the case owner’s manager. A complaint can be escalated straight to the Review and Feedback

Team though if the circumstances of the case require it, for example the case is a priority or particularly high risk. A service complaint will not be subject to a review.

32. In some cases, complaints will refer to our service but the feedback is essentially about our decision. The caseworker should identify whether that type of feedback should be treated as a complaint about our decision or about our service. **(Policy requirement)** If the outcome sought is ultimately a review or change to the decision, then the feedback is best suited to being looked at as a complaint about our decision.

<u>How the caseworker will look at the service complaint</u>

33. Some service complaints can be resolved promptly and effectively at the initial point of contact. For example, where the individual complains about a delay in the allocation of the case and this is addressed by explanations or priority allocation. Or where a complaint is raised that the person has not had contact, the Review and Feedback Team should arrange that contact.

34. The caseworker should always look for the most effective and customer-focused way to resolve an issue. If the person complaining is satisfied with the resolution proposed at that early point of contact, then they should record the service complaint as resolved at the initial point of contact. **(Policy requirement)**

35. If the complaint cannot be satisfactorily resolved at the initial point of contact, the caseworker should consider what information is likely to be needed to carry out an analysis of the complaint, how this information will be obtained, and by when. The caseworker should ensure they have identified all the information needed to understand the complaint. If more evidence is needed later on, this should be requested. **(Policy requirements)**

36. The caseworker should complete an appropriate consideration of the complaint on Dynamics. **(Policy requirement)** This analysis should:
    - explain why the person is unhappy with the service we have provided, how they have been affected and what they want as a remedy;
    - explain what evidence we have taken into account (we should usually speak to the staff member and to the person if necessary) and how we have considered their complaint;
    - consider whether the Service Model and Service Charter have been adhered to and if not, what impact this had on the person bringing the complaint to us.
    - explain what our proposed decision is (and whether we uphold/don't uphold), if we are recommending redress and how we are to explain this to the individual.

- Suggest any possible learning from the feedback either on an individual or organisational basis, where appropriate.

37. If a service complaint is upheld, the caseworker should suggest an appropriate remedy to resolve the complaint. **(Policy requirement)** This could include further explanations, apologies, service improvements or a financial remedy.

38. The decision on a service complaint should be reviewed and agreed in line with the Review and Feedback Team Supervision Model. **(Policy requirement)**

39. Although the caseworker should usually communicate the outcome to the complainant by telephone, if the person using our service asks that the outcome be provided by other means then their preference should take precedence. The caseworker should ensure we have an accurate note on the case file detailing what was discussed and/or agreed in the telephone call. **(Policy requirement)**

40. The Review and Feedback Team should ensure appropriate learning points are passed on to the relevant person/area in line with the insight model set out later in this guidance. **(Policy requirement)**

Complaints about our decision

41. These are complaints about a decision we have reached usually following an assessment or investigation. This is usually the final decision that is given when the case is closed. However, it could sometimes be on an open case where we have decided not to investigate certain parts of the complaint, for example, because they are out of remit or out of time.

<u>Timescales for receiving review requests</u>

42. When a review request is received by the Review and Feedback Team, an initial triage should check if this is within one month of the person or organisation being told to contact the Review and Feedback Team regarding the decision complained about. **(Policy requirement)**

43. If a request is received outside of this time frame the caseworker should give the person or organisation making the request the opportunity to explain why if they have not already provided explanations. They should then consider the reasons provided in order to decide if this time limit should be put aside and the request still considered. **(Policy requirements)**

44. Decisions to set the time limit aside will be made on a case by case basis. Some reasons we may still consider it appropriate to consider a request outside of the time frame though may include;

- an illness or bereavement;

- where additional support was needed to help make the review request from an advocate or MP, particularly if this was a reasonable adjustment;;
- problems obtaining relevant evidence essential to the review request;
- not being made aware sooner of the option of making a review request to the Review and Feedback Team.

45. Where there is no reasonable explanation for the review request being received outside the time limit, the caseworker should seek approval to decline the request from an appropriate person, in line with the Review and Feedback Supervision Model. **(Policy requirement)**

46. The caseworker should contact the person or organisation requesting the review to explain why the team will not be proceeding to consider the review request further. They should handle any concerns raised about this as a result. **(Policy requirements)**

Timescales for completing review requests and applications for Judicial Review

47. On rare occasions an individual or organisation may make a request for the Review and Feedback Team to undertake a review, while also considering issuing Judicial Review proceedings against us.

48. The Review and Feedback Team aim to give a decision within 40 working days, however there may be occasions when a review takes longer than this, for example when a case is particularly complex.

49. We understand Judicial Review applications need to be submitted promptly and usually no later than three months of a decision being made. We therefore will not usually challenge an application made to the courts on the basis of delay[2] if we received an application for a review within our one month timescale, and we took more than three months to reach a decision[3].

Considering whether to undertake a review

50. The Review and Feedback Team will need the person complaining to show what PHSO got wrong that could change the decision rather than repeating the original complaint in order to decide whether a review should be completed. We will not review a decision just because the person complaining disagrees with it.

51. The caseworker should consider whether the complainant has provided information explaining what they think we got wrong in reaching our decision

[2] It should be noted that while PHSO will not usually challenge the decision, it is ultimately for the court to decide whether to accept the application.
[3] This could be a decision on the review itself, or a decision the case does not meet our review criteria.

and why this might make a difference to the decision. These could include; **(Policy requirement)**

- We got facts wrong or made mistakes in our work which will make a difference to the decision in their case.
- They have new information or evidence that could change our decision
- We did not gather the right information/evidence.
- We did not understand what a complainant wanted us to look at or achieve.
- We missed out parts of the complaint which might change our decsion.
- We incorrectly told them we could not look at their complaint.
- We did not make a fair decision based on all the relevant evidence.
- We did not follow our policy or guidance for considering complaints when coming to a decision, and that had an impact on whether our decision is correct.

52. We may, on occasion, decide to undertake a review if we consider it would be beneficial for us to be able to confirm our original decision on a complaint. For example, when a case is high risk or high profile.

53. There are certain things that would not normally lead to us conducting a review. This would include where someone is unhappy with our decision but cannot tell us where we have made a mistake, or where poor service has been received, but this has not led to the wrong decision being made.

54. All complaints about our decision(s) should be triaged, before allocation, to decide if they should be handled by a caseworker or a senior caseworker. This will involve consideration to whether the case needs a priority allocation, review any risk involved and establish the complexity of the case. This work will be in line with the Review and Feedback Team triage process. **(Policy requirements)**

55. Before starting their work on a complaint about the decision once allocated, the caseworker should look at what has already been done to resolve things before the case came to the Team. **(Policy requirement)**

56. They should ensure the person or organisation making the complaint has been given the opportunity to make an informed complaint about our decision by making them aware of the review criteria. They should also establish what the person or organisation complaining would like to be done to resolve matters and that the process will only be undertaken once. **(Policy requirements)**

57. In cases where there is no initial indication that the review criteria are met or it is unclear, the caseworker should proactively contact the person complaining to explain our review process and review criteria, usually by phone. The caseworker should establish if the person has more information to give us to explain why they feel they meet the review criteria. **(Policy requirements)**

58. If, the individual needs more time to make a fully informed review request, then the caseworker should explain that the Review and Feedback Team will wait to hear from them with their full review request before proceeding. The caseworker should record that this review request is not ready for us to consider at this stage. **(Policy requirements)**

59. If, at that stage the individual either gives more information or feels they have given all the feedback they wish to about our decision, the caseworker should proceed to complete a consideration of the feedback. In these cases, the caseworker will decide if a decision form needs to be completed, depending on whether the review criteria have been met. If one is not needed, the caseworker should accurately detail on Dynamics why they are declining a review. **(Policy requirements)**

60. If one or more of the criteria are met, the Review and Feedback Team caseworker should complete the decision form and forward this for QA under the Review and Feedback Team supervision model. The form should clearly explain why the caseworker considers the review criteria have been met. If this is accepted for a review, then the caseworker should in most cases keep the review. **(Policy requirements)**

61. A caseworker undertaking work under supervision should submit their decision form to a Head of the Review and Feedback Team[4] for their consideration and approval. A formal risk assessment should be carried out if the decision is to review the case[5]. **(Policy requirements)**

62. The caseworker should explain to the person or organisation who has complained the outcome of their consideration of the case. This should include clarifying if relevant, why we will not be completing a review. **(Policy requirements)**

63. We should ensure we have an accurate note on the case file detailing the telephone call or a decision letter/email. If the person using our service asks that the outcome be provided by other means then their preference should take precedence. This should be completed within the relevant service standards. **(Policy requirements)**

64. In circumstances where the person complaining to us has asked us to wait for them to provide further information, we should wait for this to be received. The caseworker who is assigned the case should then follow the process set out above, recording this on Dynamics as receipt of full submission of feedback about our decision. **(Policy requirements)**

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[4] All decisions listed in this document as requiring approval by a Head of the Review and Feedback Team can also be made by an Assistant Director, or above.
[5] Further information about assessing risk is available in section 1 of the general guidance.

Completing a review of a decision

Contacting all parties

65. Usually a case will remain with the same caseworker when it has been accepted for review. If, however, the caseworker reviewing the case has not spoken to the complainant before, for example the case is reallocated, they must contact the complainant to introduce themselves and explain the review process. **(Policy requirement)**

66. The caseworker should contact the PHSO staff members involved in the complaint to tell them they will be carrying out a review. If a complaint involves a decision or action where the caseworker was supervised, the manager who took the action or decision should also be informed. **(Policy requirements)**

67. The responsible person, and manager if applicable, should be provided with the feedback case reference so they can monitor the progress of the review.

Undertaking a review

68. A review will usually be completed in line with the information available within the decision form.

69. An alternative approach can be taken if the circumstances of the case requires it, for example, the case is particularly complex. In these circumstances the caseworker should discuss how to approach the case with a Head of the Review and Feedback Team and record the approach to be taken on Dynamics. **(Policy requirement)**

70. The caseworker should record their review analysis on the Review and Feedback Team Decision Form and any relevant parts of the feedback case record. The caseworker should assure all relevant parts of the form are signed and agreed at the appropriate parts of the Review and Feedback Team Supervision Model. **(Policy requirements)**

Remedy

71. If a caseworker considers a case should be upheld, their review analysis should include relevant consideration to an appropriate remedy and clearly explain what remedy, if any, is being proposed. **(Policy requirement)**

72. The caseworker should use our Principles for Remedy in determining what types of redress may be appropriate. **(Policy requirement)** The caseworker should also consider;
    - the specific impact on the complainant;
    - if the remedy proposed is proportionate to the injustice sustained; and

- Whether the payment will put the complainant back into the position they would have been in if not for the poor service.

73. The type of remedy will depend on the circumstances of the case, but may include an apology, the opening of a new case, or a financial remedy.

Compensation for our poor service

74. In cases where an injustice cannot be put right, we may consider making a financial payment. Any proposal that includes a payment for our poor service should be considered in line with our Principles for Remedy and checked for consistency using our Typology of Injustice and severity of injustice scale.

75. If a financial remedy is agreed then a referral should be made to the Assistant Director – Intake and Resolution and the Executive Director of Finance and Governance (if over £500) for authorisation in line with the Finance Code[6]. Once given, that authorisation should be attached to the case record. **(Policy requirements)**

76. The number and amount of such payments should be kept under review as part of the regular internal insight reporting.

Opening a new assessment/investigation

77. If, having carried out the review, the Review and Feedback Team considers that we got the assessment/investigation decision wrong, we can decide to open a new case and have the complaint looked at again, either fully or in part.

78. This should only happen in exceptional circumstances and will usually be because the evidence we have used was flawed, we were unfair in the way we undertook the investigation, or we have received new information which would have had a significant impact on the decision we would have made.

79. If a new assessment is proposed, Review and Feedback Team can arrange the opening of the new case and the allocation of this as a priority to a relevant person to complete the assessment.

80. If a new investigation is proposed, the caseworker should write to the complainant and the organisation complained about to inform them of the proposal to open a new case. The caseworker should set out a summary of the complaint we propose to investigate. **(Policy requirement)** This will give them the opportunity to comment on the proposal. This must be agreed in line with the Delegation Scheme. **(Legal requirement)**

81. The caseworker should consider any comments in line with the Review and Feedback Team Supervision Model to decide if we should proceed with the proposal. If we do, a new case can be opened on Dynamics and send details of the case (and the case file if appropriate) to the Workflow Team explaining that it should be allocated as a priority. **(Policy requirements)**

82. All cases where a new investigation is recommended to be opened should be treated as a priority and the risk level should be reconsidered. **(Policy requirements)**

Issuing an amended version of a decision or report

83. If we have been told about minor issues in a report which would not have any impact on our decision, we may decide to send out amended versions. This will only be for inconsequential mistakes, for example, a misspelt name or unimportant date.

Quashing of reports or decisions

84. In considering a suitable way to remedy a complaint about a decision, we can consider quashing our own report or decision. This means that we would treat the report as invalid (and we would make that clear to all affected parties).

85. We will only quash a report or decision we have made in exceptional circumstances given the strong public interest in certainty around our decisions. These circumstances are;

    - We have missed significant material evidence which we should have considered, or significant new evidence has come to light, and/or;
    - Our decision is incontrovertibly and significantly wrong for some other reason, and;
    - There is no other way to resolve the matter, and;
    - It is in the public interest for the report to be quashed, for example because the existence of the report and its findings are having a demonstrable adverse impact.

86. If the Review and Feedback Team consider a report or decision should be quashed, they must raise this request with the Legal Team. They should provide details to the Legal Team of the case and the reasons they believe it means the circumstances listed above. **(Policy requirements)**

87. The final decision to whether a report should be quashed can only be made by the Ombudsman, or their deputies. **(Policy requirement)**

88. Executive Office will have arrangements for monitoring the number of occasions where reports are quashed.

Communicating the decision

89. Caseworkers must prepare a draft letter to explain the review outcome. This will be tailored to take account of the particular circumstances of the case. Draft review outcome letters must contain the following information: **(Policy requirements)**
    - A clear statement of what the outcome of the review is and the reasons for the decision;
    - If a complaint had been upheld, an apology and, where appropriate, an explanation of the specific action that PHSO will take (and by when) to provide a remedy;
    - A clear statement of the learning we have gained from the complaint and how we will take that learning forward
    - An explanation that once the review is completed this is the end of the complaints process and the only way to challenge the decision is by pursuing a Judicial Review.
90. The caseworker reviewing the case should inform the case owner (and their manager if the case was supervised) of the decision made on the review. **(Policy requirements)**

91. If it is identified that we could have done something better, either in the decision we have made or the service we have provided, the caseworker should provide feedback detailing the learning points from the review. If the caseworker identifies good practice in the review, this should also be highlighted and shared. **(Policy requirements)**

92. Once the learning and insight has been identified, this should be recorded on the feedback case and fed back the relevant case owner's manager. **(Policy requirements)**

Approving review decisions

93. All review proposals and draft responses should be made and agreed in line with the Review and Feedback Team Supervision Model and the Delegation Scheme. All decisions to open a new investigation following an upheld review must be shared and approved by the Ombudsman or Deputy Ombudsman. **(Policy requirements)**

Completing the complaints process

94. After we have completed a review or decided a review is not needed, the caseworker should inform the complainant in their review or review request decision letter that they have reached the end of our internal complaints process. **(Policy requirement)**

Follow up contact regarding decision or service complaint

95. After we have given the outcome of a complaint about our decision or service, the Review and Feedback Team may receive follow up contact about this decision. We will usually only complete a consideration or a review of a case once.

96. The caseworker should consider whether new evidence has come to light since the outcome; whether there is any indication we got something wrong in our consideration of the service or decision complaint or whether this is a repeat of the earlier complaint. **(Policy requirement)**

97. The caseworker should be customer-focused and decide whether we can give any further explanation about our decision or there is anything further of value that can be added. If the correspondence suggests any flaws in work considered by the team then a Head of the Feedback and Review Team should consider how best to address this. **(Policy requirement)**

98. If the correspondence adds nothing new to the case and there is nothing more that can be reasonably added, then a brief response should be sent or telephone call made explaining that we have reached the end of our internal complaints process and stating that we won't be taking any further action. A clear record on Dynamics should be added showing what consideration has been given to any follow-up correspondence. **(Policy requirements)**

Insight

Good practice

99. When the Review and Feedback Team identifies good practice, at any stage of the process or for any type of feedback, they should share it in line with the Feedback and Learning Model. This should also be recorded as a learning point on the feedback case. **(Policy requirement)**

100. There is no definition of what we consider to be good practice, and this can incorporate any technique, method or process the case owner uses which produces good results, and therefore could be shared or applied more widely in our casework.

101. When sharing instances of good practice the Review and Feedback Team should provide details of the case and complaint and include the reasons why it was being shared.

102. The caseworker should capture any good practice on the decision form and in the Dynamics record. **(Policy requirement)**

Learning points

103. When the Review and Feedback Team identifies learning points on a case, either for the individual or wider organisation, they should share them in line with the Feedback and Learning Model. The caseworker should record this in the decision form and in the Dynamics record. **(Policy requirement)**

104. Some examples of when sharing a learning point may be appropriate would be;
    - A casework process has not been followed that already exists and we want to ensure the case owner is made aware of it.
    - When we don't have existing requirements in place in relation to an area of casework, but it may be beneficial.
    - The case owner has followed the Service Model, but a deviation would have been appropriate given the circumstances of the case. For example, a request for a reasonable adjustment.

Joint Working with the Local Government and Social Care Ombudsman

105. Any joint decisions made by PHSO and the LGSCO are for the LGSCO not Review and Feedback Team to consider. If these are received, they should be directed to the Joint working Team to be considered in line with the LGSCO process. **(Policy requirement)**

106. There may be occasions when there is a complaint about what happened at PHSO before the joint working was agreed. These could be considered by Review and Feedback Team but only for actions or service before the joint working was agreed. It is advised to check with the joint working Team in those cases before Review and Feedback Team proceeds. **(Policy requirements)**

Complaints about our service and the role of the Public Administration and Constitutional Affairs Committee (PACAC)

107. It is sometimes the case that, after they have been in contact with Review and Feedback Team, some of our complainants are still dissatisfied and want to complain further. Complainants can challenge our decisions through a Judicial Review. However, there is no organisation that can specifically look into an individual complaint about the service we provide.

108. PACAC monitors complaints about the Ombudsman as a way of scrutinising the work of the office and identifying systemic problems, but they will not consider individual cases. Complainants may submit details of their dissatisfaction to PACAC to inform their general scrutiny, but should not expect

them to look into their complaint. Furthermore, it is not PACAC's role to act as a further appeal process for the cases that we consider. If a complainant still wants to contact PACAC after you have clarified their role, they should contact PACAC directly.

Feedback from MPs

109. If the office receive a course of business request from an MP or a member of their casework staff (a request for an update on the case for example), this should be dealt with by whoever receives the correspondence (Business Support Officer, caseworker etc.)

110. If an MP makes a complaint to us, then the original case owner or their manager should try to answer the complaint in the first instance. If that is not possible, then the complaint should be passed to the Review and Feedback Team. **(Policy requirements)**

111. If an MP makes a complaint to us, this should be taken into account when carrying out a risk assessment and documenting a mitigation plan. The case should also be added onto the casework assurance spreadsheet. **(Policy requirements)**

General Feedback on PHSO

112. Examples of this may include general feedback about our website or about one of our published reports. These may not always be from someone who has used our service. The caseworker should discuss these with a Head of Review and Feedback Team to decide who is best placed to respond.

Risk Assessment

113. Staff should be mindful of casework risk throughout their contact with a person providing feedback.

114. The Service Model general guidance says that a risk assessment should be carried out '*When we decide to do further work following a complaint about our service* or decision'. For more detail on the risk categories and how to carry out a formal risk assessment please refer to the Service Model general guidance.

Feedback not for Review and Feedback Team

115. We sometimes receive feedback from individuals that is not for the Review and Feedback Team's consideration. Examples would include; complaints about the type of software we use; commercial contracts we may have; our office

accommodation or issues relating to a public appearance the Ombudsman has made.

116. When received, these pieces of feedback should be forwarded to the relevant internal department, such as our Corporate Services or External Affairs and Insight directorates. **(Policy requirement)**

Casework assurance spreadsheet

117. Our casework assurance process sets out when a case needs to be passed to the Review and Feedback Team to share with the Chief Executive and/or Ombudsman for their oversight or approval.

118. The following case types should be considered under this process; **(Policy requirement)**
- Complaint about service or decision from, or supported by, an MP
- Correspondence from MP/organisation linked to wider stakeholder engagement in PHSO
- Correspondence from PACAC Chair or Health Select Committee Chair
- Post review or the Review and Feedback Team decision where the MP asks for the Ombudsman to respond.
- Concerns raised about personal conduct of a senior member of staff during handling of complaint.
- Correspondence that raises potentially significant systemic issues
- Correspondence that indicates potential legal challenge
- Potentially high profile case or possible media/social media interest
- Any new investigation that has arisen from an upheld review
- Correspondence from very vulnerable complainants.

119. If the Review and Feedback Team consider the case meets any of the criteria listed above, as well as the criteria for review, the case should be recorded onto the casework assurance spreadsheet. **(Policy requirement)** This will then be discussed with the Ombudsman or Chief Executive as appropriate.