



Public Administration Select Committee

Oral evidence: [Parliament's Ombudsman Service](#),
HC 655

Monday 16 December 2013

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Written evidence from witnesses:

- Dame Julie Mellor, [Parliamentary and Health Service Ombudsman](#)
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Members present: Mr Bernard Jenkin (Chair), Alun Cairns, Paul Flynn, Kelvin Hopkins, Greg Mulholland and Mr Andrew Turner.

Questions 143-243

Witnesses: **Dame Julie Mellor DBE**, Parliamentary and Health Service Ombudsman, and **Helen Hughes**, Chief Operating Officer, Parliamentary and Health Service Ombudsman, gave evidence.

Q143 Chair: Welcome to this annual scrutiny session of the Parliamentary and Health Service Ombudsman and on our two inquiries concerning good complaint-handling in Whitehall and about the future of the Ombudsman Service. We have a lot to get through, so we will try to keep our questions very short and to the point, and if you can answer quickly and to the point that would be very helpful. Could each of you very kindly identify yourselves for the record?

Dame Julie Mellor: I am Julie Mellor; I am the Parliamentary and Health Service Ombudsman.

Helen Hughes: I am Helen Hughes, the Chief Operating Officer.

Q144 Chair: Thank you for coming today. We are beginning to be aware of very different roles for the Ombudsman: dealing with individual cases, identifying systemic failure in public services, auditing and inspecting services and complaints procedures. How do you prioritise between these different roles?

Dame Julie Mellor: As the complaint-handler of last resort, the last one, in terms of auditing and inspecting, does not really apply to us, although we will check on compliance with our recommendations for redress. The first two apply to us, and at the moment I would say that the prioritisation comes out of the cases. We will be delivering investigations on individual cases, and where we see that there might be wider implications for services, then we will pull those together and look at whether we need to work with people to develop some wider systemic remedies to improve the service more broadly. A couple of examples of that are the work we have done recently on sepsis and on midwifery regulation, but both of those themes came out of our casework, so in that sense the priority at the moment is the casework.

Q145 Chair: Why have you changed what you call your high-level vision? To clarify, your 2011-12 report said you were to “provide an independent high quality complaint-handling service that rights individual wrongs, drives improvements in public services and informs public policy”. Now it says you are there “to make a difference and help to improve public services for everyone”. That sounds like a change in emphasis.

Dame Julie Mellor: Absolutely, because we are determined to have more impact for more people. There are a number of things that led to us developing that as our overall vision, to have more impact for more people and the strategy to deliver that. The first is that 18% of people told us that they had had something happen to them that they wanted to complain about, but 40% of them did not complain, and it was quite clear that they needed good information and advice, plus referral to advocacy, to enable them to make their complaint to the service provider. That is something we want to do more of.

Probably the most fundamental was listening to people, including those who had been distressed and frustrated by our decisions to decline to investigate cases. People were quite clear that they wanted us to do more investigations, because that involves a full explanation of what has happened and the certainty of a final adjudication, so we wanted to do more of that.

The third—and one of the things that really struck me personally—was the high proportion of people who go through with making a complaint and they still do not think it will make a difference. 64% think their complaint will not make a difference, and so we want to honour that aspiration for the complaint to make a difference, so that people know it is worth complaining and that can improve services for others.

The final one is that people have a resoundingly bad experience of complaining to the service providers themselves, as you know from your first inquiry on complaints. Therefore, we wanted to look at what we could do to use our expertise from the complaints that we look at to help others improve complaint-handling more generally.

That is the why. Would you like me to say what we have done differently this year?

Q146 Chair: I think we will come to that. I was going to ask how you have identified what the public needs. What process have you been through?

Dame Julie Mellor: All of those things that I have just said were from research with the public. We listened to the public. We listened to those who have used our service and what they felt we should do to improve it. We listened to Parliament and both yourselves and the Health Select Committee said that they wanted us to do more investigation and very much wanted us to have an evidence-based strategy, and so that is what we did.

Q147 Chair: What do you think are the key challenges in achieving your aims for 2013-18?

Dame Julie Mellor: I am probably a bit too much of an optimist to always see all the challenges. I think this year our staff have been absolutely fabulous at making that big change of beginning to do more investigations. That has not been easy, and people have found it hard, but the staff have been great. Thinking about the best use of resources would be another challenge, and, of course, as we are going to talk about in the second half of this hearing, some of the requirements, in our view, to change the law to give us more powers to enable us to serve the public better.

Q148 Chair: What do you think the key lessons are that you have learnt from the changes you have attempted to implement so far?

Helen Hughes: There are some internal issues and challenges, and some that are external to the organisation. Internally, we have been proceeding apace with the change and have had a lot of very committed staff helping us make that change. However, we need to proceed a little faster, I think. We are quite ambitious to do more investigations and will do that more next year; we have a new senior team that will help us.

Externally, with some of the challenges it is having that impact. It is working with bodies when we can see systemic changes that are needed and getting them to take those issues on board. That is one of the features of the ombudsman reform agenda that we are looking for. The two clinical reports and systemic reports that we have issued this year we have worked very collaboratively with others for our recommendations to be heard and responded to. However, increasingly, as we do more of that work we will want to work with other bodies, policymakers and parliamentarians, to have a greater impact on that.

Q149 Chair: You talked about internal challenges. How much internal resistance have you met to some of the changes you are trying to make?

Helen Hughes: It is slightly polarised. Many of our staff are very ambitious for us to make the changes and want us to go faster, and there are others who are saying, “We completely support the direction you are going in”—and our recent staff survey has said that—“but we are not very clear on what you are asking us to do and when”. Our staff have told us fairly loudly and clearly that we need to engage and communicate with them a bit better, so that is a top priority for us. However, as Dame Julie mentioned, the start of our strategy was listening to parliamentarians, listening to complainants and listening to staff, and our staff were saying, “We do investigations; we need to do more of them.”

Q150 Chair: What is it you are asking your staff to change in the way they think about their job and the role of the Ombudsman, because that is the hardest thing, is it not?

Dame Julie Mellor: This is where it may be helpful to tell you the four big things we have delivered this year, because that means people have had to work differently. The four big things we have delivered this year, having listened to the feedback from customers, from staff, from Parliament and from other stakeholders, including the bodies in jurisdiction, are, firstly, doing more investigations, which I think is the most fundamental. Our staff have been asked to work differently because we have completed four times more investigations so far this year than we had at the same time last year; we expect to complete around 2,000 by the end of the year. We did a review, led by Baroness Rennie Fritchie, into our approach to avoidable deaths, and decided that in future we would work on the presumption that we would investigate where there was any indication that service failure could have impacted life chances. That is another change that our staff were expected to take on board.

The second big change is how we work with others, and Helen and I have both alluded to that already, in that we investigate and make our findings impartially and independently. However, once we have made our findings in individual cases, we have asked our staff to work with others who can make the changes in services and, indeed, with charities to work out what the best solutions are. That is where we get the real multiplier effect. For example, in our report on sepsis we made a number of recommendations for more rapid diagnosis and treatment of sepsis. According to the UK Sepsis Trust, if those recommendations are implemented, it could save 12,500 lives a year. All of that work is something that our staff have been asked to do differently.

The third is a once-in-a-generation opportunity to influence complaint-handling in health, and so we have put a lot of focus of our energy into influencing the Department of Health's response to the Francis report on complaint-handling in the NHS. That was a whole work programme that was new for us.

Finally, the other change that we have delivered is we have sharpened up our executive leadership. We have appointed a new executive team, including people with experience of volume customer services, to add to our ombudsman expertise, so that we can provide a higher-volume service to the public. We have also strengthened our strategic leadership and scrutiny by introducing a board with formal governance arrangements and me as Chair. Again, for staff that means working very differently, because they did not have a unitary board like that to present things to in the past, in terms of that board making decisions.

Chair: Very good.

Q151 Mr Turner: To what extent is your organisation meeting your own principles for good complaints, and in what way does customer satisfaction change at each stage of the process?

Dame Julie Mellor: In terms of us learning from our customers, we absolutely use our principles. For example, when I am signing out a report of a complaint about our service or review decision, one of the things we are looking at is our six principles. If we are upholding the complaint or if we are upholding the request to review a decision, we will look at which of our principles we had not operated fully and how we might do so in future. Does that give you a sense on the using our principles?

Q152 Mr Turner: I think it does, but can you give me an example?

Dame Julie Mellor: Yes. One of the complaints about our service was someone who was visually impaired and had assisted software so that they could use their computer. To meet our data security requirements, we were hesitant to allow them to receive stuff by email. In the end, because of the way we worked, their computer software did not work, so they were without their assisted software for a period. As a result of that, we have changed how we communicate with visually impaired customers and that would be the principle about being customer-focused.

Helen Hughes: Might I add to that on the seeking continuous improvement, because we are making even stronger progress on that this year? All the reviews, particularly those on investigations when people are complaining to us about our investigations, we do with regard to all the principles, but they are signed out personally either by a director within the Operations Directorate, Dame Julie or myself personally. We have much better mechanisms now for feeding those back into the business, so we are getting the rich insight from anyone who complains about us, whether their complaint is upheld, partly upheld or not, about how we respond to them in terms of customer service. We are feeding that back in more directly, and I and the Executive Director of Operations are overseeing that on a regular basis. That is one of the examples of how we are adhering to our own principles.

Dame Julie Mellor: You also asked a question about customer satisfaction; would you like me to pick that one up?

Mr Turner: Yes please.

Dame Julie Mellor: You asked about how it varies at different stages. At a very simple level—I do not have the figures in my head, I am afraid—the satisfaction with our inquiries I think is slightly lower than the satisfaction with our investigations. Indeed, that was one of the indicators that made us look at this issue of whether we should have such a high threshold and be declining so many investigations, because that was part of what influenced that satisfaction rating.

When it comes to doing investigations, basically, in all ombudsman services you will see a difference in the satisfaction rate depending upon whether someone feels that they have won or lost their case. Therefore, the satisfaction rating where we have upheld a case is 98%; the satisfaction rating where we do not uphold is 57%. Compared to other ombudsman services where we have the data, both of those figures are higher than other services.

Q153 Mr Turner: Given a complete picture of customer service, how do you have that while at the same time you are only carrying out a random sample?

Dame Julie Mellor: Sorry, I am not sure I understand the question.

Mr Turner: To what extent does your customer service give a complete picture of service in your organisation, and why do you carry out only a random sample?

Dame Julie Mellor: In terms of measuring quality as a whole, the customer satisfaction survey would only be a part of it. We will look at outcomes, timeliness and customer satisfaction, and what we learn from complaints about us, so we will look at a range of data when looking at the quality of our service overall. What was the second part of your question?

Q154 Mr Turner: Why do you carry out only a random sample?

Dame Julie Mellor: That is a good question. Well, obviously not, because there are all those other things that we are also measuring or looking at. For example, on the timeliness one, we have some service standards about what percentage of our cases we think we will get done in three months, six months and a year, so there are other measures. However, you raise a very interesting point in terms of customer satisfaction, and that is one of the things, with our new team, where we will be looking at how we want to do this in the future. One thing we have already done is we brought together some recent complainants face to face with members of our staff to learn from them about their experience of our service. That fed into our board planning day, and it is more of that kind of thing that we will be doing in future. Indeed, if Members would like to come and participate in that, you would all be welcome.

Q155 Alun Cairns: Dame Julie, can you tell us precisely how you would envisage the changes to take place to ensure that you have a broad spread of the assessments, rather than just a sample? Precisely how do you envisage the model changing?

Dame Julie Mellor: For measuring satisfaction?

Q156 Alun Cairns: Yes.

Dame Julie Mellor: I cannot, because sitting behind me is one of our new directors, the Executive Director of Operations and Investigations, who will be developing that, but he joined us this month. It is an area that we know we want to attend to, but I do not have the answers yet.

Q157 Alun Cairns: In what time scale do you expect to make those changes?

Dame Julie Mellor: I do not want to commit without having the timetable in front of me, but I would be very happy to let you know afterwards.

Q158 Alun Cairns: When would it be reasonable for this Committee to expect some sort of changes?

Dame Julie Mellor: Changes in the way we measure satisfaction?

Alun Cairns: Yes.

Helen Hughes: I would suggest that that is a key priority and why we have been bringing in some additional expertise to help us with it. I would want to see that very much as a priority in our next year's business plan. That will be concluded by March 2014 and we will be in a position to give you an indication of the time scale that we think we can achieve that, so we could certainly send it to you by then.

Q159 Alun Cairns: So we can expect a new model in place potentially by March 2014.

Helen Hughes: No, no, no. I was saying that we will be planning how we want to achieve that, because that may involve getting our staff to do different things, and inviting complainants in. We would have a very detailed plan for that in March and then will be able to let you know when in the next financial year we could do it.

Alun Cairns: I hope we are not making more of a meal of this than potentially is the case. I would have thought that the sort of timing that we are talking about—having the plan in place of how the changes could take place by March 2014—seems to me quite a long time scale. I do not necessarily need a response, other than to say in the private sector organisations, when they look at how they need to address themselves and how they need to consider their satisfaction surveys, it takes place much, much quicker than has been suggested. I do not necessarily need a response on that.

Q160 Chair: On the question of your “Principles of Good Complaint Handling”, how would you revise that document now? What is missing from it?

Dame Julie Mellor: I think as principles they are completely sound. Where we might develop some ideas for how we might want to change it will be through the work that we have offered to do, and in fact the Secretary of State for Health has asked us now to do, which is working with Healthwatch England, specifically for the health part of our jurisdiction, on what should be patients' and their families' and their carers' expectations of the complaint system in health. Out of that work, working with the public, we may well get some ideas for how we might want to change the current principles that we use.

Q161 Chair: How important is it for someone dealing with a complaint to listen, to hear, to understand and to demonstrate to the complainant that there is that genuine understanding of what the person is going through?

Dame Julie Mellor: Incredibly important, and indeed we found that when we did the work that we did to feed into the Department of Health's response to Francis. One of the things that we said—and, indeed, I covered it in my evidence to the first inquiry on service provider complaint handling—is that there is no point in replacing one rigid set of complaint regulations with another rigid set of complaint regulations. Our focus has been

very much on complaint-handling being one part of how organisations will receive feedback on the quality of their service. So No. 1 is getting the feedback. The second is a focus on the front line, so how people listen on the front line and address concerns and resolve things before they ever become a complaint. The third, which was probably one of the main points I was making in the first hearing, is around board leadership. Going back to your earlier question, I think that might be one of the things that will change about our principles. There is something about board leadership, both of driving a culture change so that people are open to complaints and measuring it, that would be critical.

Q162 Chair: Looking at your six principles of good complaint-handling, it is about law, procedures, clear and accurate and complete information, fairness, acknowledging mistakes, and continuous improvement. Listening? Hearing? Understanding?

Dame Julie Mellor: Indeed, which is what I have just said, in terms of what I would expect people to do on the front line.

Q163 Chair: Therefore, when are you going to revise your “Principles of Good Complaint Handling”?

Dame Julie Mellor: As I said, we will have some information to help us think about whether we want to revise them when we have completed the work with Healthwatch England for the health sector.

Q164 Mr Turner: Could I just ask whether your customer service standards focus on process?

Dame Julie Mellor: I am not sure. Going back to what I was saying, our assessment of quality focuses on three things. No. 1 is the outcome, so the decisions that we make, and whether they are evidence-based impartial decisions and whether they are therefore the right decisions. One is on timeliness, because we all know that when someone brings a complaint to us they have already gone through quite a long experience of trying to get a resolution to their complaint from the service provider, and so they are keen to get it resolved as quickly as possible. That is where, for example, this year, in terms of an outcome as opposed to process, we know that our average time to complete a case has dropped quite dramatically from 317 days to 172 days, so that is an outcome measure. In terms of customer satisfaction, the kinds of things that people say they particularly like about our service are professionalism, being helpful and kept informed, and lovely feedback about people feeling that we have been “helpful and gentle”—that was one quote—in helping reassure people about the service that they had received. I would not say those were process things, to be honest.

Q165 Mr Turner: To what extent do you operate a target-driven culture?

Dame Julie Mellor: One could regard our service standards on time as targets, and I would say that is based on an estimate of demand and the resource required to meet that demand, so that we can monitor it during the year and deploy our resources effectively to

meet the demand. However, the fact that the standard on completing—I think it is 90% of investigations within 12 months—has not been met is probably an example of where what we regard as the most important thing is to get the investigation right, and so we do not go hell for leather to complete something when we know that we should take the time to complete the case.

Q166 Mr Turner: What input have members of the public had on the development of customer service standards?

Dame Julie Mellor: As I have already indicated, the feedback through the review process, the customer satisfaction feedback, the feedback in complaints about us, and the feedback more broadly, so that is one area where they have. Another that we just did recently, as I said, is bringing together some recent complainants, people who had brought complaints to us, recent customers of ours and our staff, and having a dialogue with them about their experience of our service.

Q167 Mr Turner: I am just trying to get at what proportion of members of the public have an input into the development of your customer service process. Is it 10% or 50%?

Dame Julie Mellor: I cannot remember offhand the number of people who are involved in the quantitative customer satisfaction surveys.

Helen Hughes: I cannot either. We can send that to you separately. How we are developing our customer service standards going forward, probably the answer would be not enough. We want to involve more of our complainants and, indeed, the service providers, our bodies in jurisdiction, because we undertake our work neutrally, to find out about their experience. We use friends-and-families tests, which I think NHS providers use as well: “Your experience of complaining and how we have supported you; would you advise your friends and family to come to us?” We do retain that, so that is a softer, emotional judgment assessment. However, as we responded to the earlier question, this is an area where we recognise we need to do much more work, and the appointments we have been making at our executive level are to supplement this, including people with significant private sector experience. Therefore, we will be shaping and improving this quite a lot.

Dame Julie Mellor: The other thing I would say is that, as a leader, there is nothing like listening to people yourself, and I have spent a large part of the last two years listening to our customers myself.

Q168 Kelvin Hopkins: I read your recent further evidence with interest, and it is brief and to the point, but remarkably you have increased your investigations by four times with the same number of staff. Does this suggest that in previous times the staff spent a lot of time finding reasons to explain why investigations were not going to take place and finding reasons to say no to complainants, rather than saying yes?

Dame Julie Mellor: There are probably two things in what you are asking. One is how we assess cases for investigation historically and now to make a decision; the other is the

resource issue of how we manage to take on eight times more investigations and complete four times more than the same time last year. In terms of the resource question, the lower threshold for taking on cases for investigation has meant that the assessment process is a lot, lot shorter and we have redeployed a very large proportion of the staff who used to do assessments to do investigations. We have 2.5 times more staff now doing investigations than before. It was 48, and at the moment it is about 122, so that is how we have been able to do it.

In terms of how we assess cases to decide whether to accept, we have fundamentally changed the threshold, and you are right: it therefore takes less time. However, it is the same criteria in that they are based on the law and the three basic criteria are around, has someone experienced injustice, was this due to maladministration or service failure, and is the injustice unremedied? Historically, we took what is called a merit-based approach, apparently, which is we set a very high hurdle, and so we did not investigate unless there was considerable evidence that those criteria were met. Therefore, it was pretty likely that we were going to uphold cases if we took them on for investigation, hence our uphold rate of 86% historically. We had thousands that were assessed, but hundreds that were investigated. Now we are operating a much more inclusive approach, so that if there is some indication of injustice or service failure and that the injustice is unremedied then we investigate. Does that help?

Q169 Kelvin Hopkins: Yes. How have staff reacted to all this, because it sounds to me as if they are doing a lot more work, but is it more enjoyable doing investigations? Is it more stimulating? What has staff satisfaction been?

Dame Julie Mellor: What I can tell you is when we did the research with the public last year to provide the evidence base for our changes, we took that back to staff and asked them what was the one thing that they would like to change by the end of last year, so by April this year. Overwhelmingly, people said they wanted us to do more investigations, so there was a real appetite to do that in the organisation.

Q170 Kelvin Hopkins: My questions are about capacity really. Given you have made this dramatic change, is the staff capacity there? Every senior person will always say, “Yes, I want more staff”, but are the staff coping?

Dame Julie Mellor: Yes, they are. As I said, we have increased the number of staff by 2.5 times doing investigations. Helen, did you want to add something on that?

Helen Hughes: Just that the evidence is that we are on for doing 2,200 investigations this year. Up to the end of November we have completed 869 investigations. The equivalent for this time last year was 219, so staff are doing this, and at recent meetings I had with some of our caseworkers last Friday in Manchester they are saying, “Yes, proceed apace”. This was their main frustration: that we were spending a long time doing very thorough assessments but then declining to investigate. They are very keen that we put the effort into doing the investigation and they are keen that we continue and at pace.

Q171 Kelvin Hopkins: We have heard evidence from the three other member nations of the United Kingdom, and at least one of them investigates complaints against outsourced services, which are now effectively private-sector contracting. We do not do that. What kind of resource would you need to be able to look at outsourced services, because this is going to become very important?

Dame Julie Mellor: Actually, we do do that. We follow the public pound, so if a public service that is paid for by the public pound is in our jurisdiction, we will investigate complaints. We have investigated complaints about Virgin primary care and about supermarkets providing optician services, so we are already investigating cases where a private firm is providing a publicly funded service.

Q172 Kelvin Hopkins: Earlier, you said that even when they have had their investigations, a lot of complainants feel that nothing is going to change and are very pessimistic about what is going to happen afterwards. Is that simply because they lean to pessimism or that there are real reasons why they think they are not going to get any change? Is it because the organisation is too powerful? What is the reason for that?

Dame Julie Mellor: I have every sympathy with people who feel that things are not going to change. That is one of the reasons that we are trying to provide a different service that does honour that ambition to have a service change as a result of complaining. It is why we are publicising more cases, so that the public can hear that there is somewhere to come to for an independent investigation, and that there will be remedies that apply not just to the individual but will improve the services. Examples this year where I think all of us would be very proud of the work that we do would include cases of avoidable death; cases of the quality of care provided to people with learning disabilities, which has been used by Parliament in debate; and a couple in their 80s who were left with inadequate heating for two years until we intervened, and now they have had personal assurances from the private contractor that that will not happen for others and how they are improving their service.

Helen Hughes: Would you mind if I followed up, because you are also asking why people feel so pessimistic? The experience that we see when people come to us is their complaint has not been treated properly in the first place, so maybe it is not just that the outcome of the complaint is not to their satisfaction, but also the manner in which the service provider has treated them has frustrated or annoyed them. What we are intending to do is not only share the knowledge and learning to improve services, but to also go back directly to those service providers and say, "Look, how you have handled this particular complaint is not satisfactory". As Dame Julie said, working in the NHS with the Government's response to the Francis report of really trying to design in more effective complaints handling, so that people get the redress that they need at that first stage and then, if they are not, they can come to us and we can make a difference. By making a difference, the more we can publicise that, people will have confidence that it does make a difference and so, in a way, that encapsulates our strategy.

Q173 Kelvin Hopkins: Towards the end of Dame Julie's paper you talk about the toxic cocktail of patients' and carers' reluctance to complain coupled with the culture of defensiveness by NHS organisations. Is that part of the problem, that the NHS tends to clam

up, shut up and is defensive, instead of saying, “Yes, you have a problem; we will address it.”?

Dame Julie Mellor: I believe it is, and that is why leadership is so important, because it is the board of every hospital, it is the board of every clinical commissioning group, and it is the leaders of general practices who, in health, need to be saying to all their staff, “The feedback from complaints is gold dust, in terms of making sure that we can learn from those and improve our services going forward. We want you to listen to people and we want the feedback, so do not feel defensive. Indeed, we will reward people if they can show us how they have listened and put things right.” Culture always requires leadership, so to change that culture will require boards saying they want something different.

Q174 Kelvin Hopkins: My last question might be controversial but is fairly obvious. As I understand it, the answer you get from the NHS or other Government Departments is not given to the complainant. They do not see the letters or the evidence that comes back saying why they acted in a particular way. That is the case, is it not? If there is a complaint against the NHS, and the NHS writes back to you and says, “No, this is the situation”, do the complainants get to see that letter?

Dame Julie Mellor: Are you talking about when people come to us specifically?

Kelvin Hopkins: Yes.

Dame Julie Mellor: When we take on a case or investigation, it is an inquisitorial approach; we are doing an investigation, rather than the court approach, which is adversarial. We will first collect evidence from the complainant—from the body in jurisdiction—and we will write up a very rigorous account of what has happened. While an individual complainant who comes to us may not get particular letters that have been brought to us in evidence, they will get an investigation report that gives them that rigorous account of what happened.

Q175 Chair: We are going to explore this question a bit later in the brief, but before we leave this section can I just ask: you are investigating more complaints, but we have had quite a lot of criticism and cynicism about what this really means in terms of outcomes for people who complain. One academic said that the methodology has not been explained. I think you have given some explanation, but we may seek further explanation from you on that. A lot of people feel that there is no point in having more investigations unless you investigate them properly, so how can you have proper investigations if you are investigating so many more cases? Surely you are just spreading yourselves more thinly.

Dame Julie Mellor: Perhaps I can answer it in two parts, Chair. You are right; I have given you some information about the assessment criteria that we use to decide whether to take something on. It might be worth just explaining what is different about an investigation from the further assessments that we used to do that Mr Hopkins was referring to.

Q176 Chair: Can you just answer the question: how do you avoid just spreading yourself more thinly, because your resource is declining, you have more investigations, which means less resource for each investigation?

Dame Julie Mellor: I think I have provided that information already, because we have 2.5 times more staff doing investigations than we did last year, so that is how we are able to do more investigations.

Q177 Chair: What you are saying is instead of deploying staff to prevent investigations getting into the system, you now employ these staff to do the investigations. Is that right? Have I understood that?

Dame Julie Mellor: Yes.

Q178 Chair: Therefore, are you resolving more complaints?

Dame Julie Mellor: Ah, yes; that is one of the figures that I had not got to. We are taking on eight times more investigations. We have completed four times more investigations. We have upheld more cases so far this year than we did to the same period last year. Last year, by this time we had upheld 187; this year, we have upheld 343. But I must say that we do impartial investigations, so our aim is not to uphold or not uphold. Our aim is to get to the facts and make a judgment about whether to uphold or not uphold.

Q179 Chair: So by carrying out eight times more investigations, you are in fact resolving three times more complaints.

Dame Julie Mellor: We have completed, so far, four times more complaints.

Q180 Chair: What about upholding?

Dame Julie Mellor: The uphold rate has gone down, as you would expect, because we have taken a lower threshold.

Q181 Chair: But the number upheld has gone up by three times.

Dame Julie Mellor: The uphold rate has gone from 86, which is incredibly high, to 41 at the moment, which is in line with—

Q182 Chair: What is that in numerical terms?

Dame Julie Mellor: I can tell you. The number upheld this year so far is 343, and the number not upheld is 460 of those 869—

Q183 Chair: How many were upheld in the previous period?

Dame Julie Mellor: In the previous year at this stage we had upheld 187.

Q184 Chair: Therefore, it is at least double, or getting on for double.

Dame Julie Mellor: Yes.

Q185 Chair: That would seem to be an interesting output. The other thing is about the length of inquiries, because we get the impression that sometimes an uncomfortable investigation can be elongated by the body you are seeking to investigate if they are uncomfortable with it; they can lengthen the process out. How do you deal with that?

Dame Julie Mellor: That does happen sometimes, but I would also like to reassure the Committee that in terms of how we are working at the moment, as I said, the average time for completing an investigation has gone down from 317 to 172.

Q186 Chair: Yes, but how do you deal with the particular cases where there is clearly a protraction of the process, because they are wondering how they can get out of this investigation?

Dame Julie Mellor: In the final analysis, we make a judgment based on the evidence in front of us.

Q187 Chair: Why are you so patient with these recalcitrant organisations?

Dame Julie Mellor: I am not sure that we are that patient.

Helen Hughes: One of our ambitions is, in order to feed back to service providers how well they are doing at complaint handling, we let them know what we think of their complaint-handling, and if they are too slow we need to start escalating that. Therefore, one of our ambitions is to encourage boards to take more direct involvement in the investigations that we do, and if we are having difficulty accessing information or getting the responses we need, then we need to be a bit more robust about escalating that within those organisations.

Dame Julie Mellor: There are probably two points that you may be thinking of, Chair. One is whether we can get information from people, and our powers to get information from service providers are enormous.

Chair: I appreciate that.

Dame Julie Mellor: I cannot remember the exact description. We use those where we need to. The other is when we send a body a draft report, they may have comments on it and that will be another stage where there may be some resistance, but in the final analysis it is our decision, not theirs. Therefore, having had their comments on the draft report we will finalise the report and make our final adjudication.

Q188 Chair: Why are you missing your own target for investigations over 12 months?

Dame Julie Mellor: You say missed the target; it was by 2% and, as I said in answer to Mr Turner's question, we do not want a target for timeliness to get in the way of doing the job we need to do.

Q189 Greg Mulholland: Good afternoon. If I could move on to the complaints about the service, going back to some of the discussions that we were having a couple of years ago and indeed probably about a year ago with you and also previously with your predecessor, there were two areas of dissatisfaction. One was the small proportion of investigations; the other was the seeming inability that many people perceived of challenging ombudsman decisions when they believed them to be wrong and had good reason to believe them to be wrong. I know that you have made some changes in this regard, so the first question is, could you just tell us what those changes are, and do you think that they have made a difference to the ability of people to legitimately challenge your decisions?

Dame Julie Mellor: I would like to answer that in two parts. I would like to give you credit, Mr Mulholland, for raising the issue of what are the criteria on which people can seek a review of a decision that we have made, because that prompted us to look again at the clarity. What we have now introduced is a bit like the appeal courts, where the grounds for seeking a review are, are there new material facts, are there factual inaccuracies or have we overlooked or ignored parts of the complaint that could change the decision? That is explained to people up front. We provide a simple form for people to complete so that it helps them focus on those three areas, and that is transparent and on our website. That is another change that we have introduced this year.

The other thing that I wanted to say is that most of the requests to review our service, by a huge proportion, were the decisions to decline to investigate, so we have listened to that feedback and have changed it. For example, last year, 946 people requested a review of our decisions on whether to investigate—officially it is the inquiry stage, but what people were unhappy with were the declines-to-investigate, and we have listened to that. When it comes to investigations the numbers are much, much smaller. Last year, we only had 33 people requesting a review of our decision, and we upheld five of those. I think that shows how we have looked at the feedback from that and changed our service as a result.

Q190 Greg Mulholland: Just to be clear, the figure that I have from last year was 1,004 complaints in total, so you are saying that only 33 of those were complaining about the decision that you made.

Dame Julie Mellor: About the decision on whether to uphold an investigation. Some of them were service complaints, and 946 of them were about the decision at the inquiry stage or inquiry-and-assessment stage. I do not have the breakdown, but my hunch is that almost all of those would have been requests to review the decision not to investigate.

Q191 Greg Mulholland: Okay. What I want to concentrate on is complaints about decisions that have been made. Do you have the figures on how many complaints there have been on decisions that have been made by the Ombudsman and how many have been upheld?

Dame Julie Mellor: Yes. Sorry; I am obviously not getting myself across clearly. There are two types of decision that people might complain about. One is a decision at the early stage on whether to investigate, and the other is when we have investigated and made a decision whether to uphold or not uphold. The first group, in terms of requests to review decisions on whether to investigate, was 946. The second group, where it is investigation decisions on whether to uphold the complaint, was 33. That shows where the unhappiness was, and that is why we have changed our service.

Q192 Greg Mulholland: Of those 33, you say in five you upheld the complaint about your decision.

Dame Julie Mellor: Our decision, yes.

Q193 Greg Mulholland: You revisited and then changed your decision?

Dame Julie Mellor: When we uphold a review request about an investigation decision, it can prompt a range of actions, but one of the main ones would be to say that it needs to be reinvestigated.

Q194 Greg Mulholland: What I am trying to get to is when someone has come to you saying, “You have got this wrong,” and given you evidence, how many times have you then said, “Yes, you are right. We have looked at it again, and you were right all along. Now, with the extra evidence or the mistakes that you pointed out, we have realised that you were right and have now upheld your complaint.”? Do you have that figure?

Dame Julie Mellor: Last year, in total that was 103.

Q195 Greg Mulholland: That is 103 including some of the ones where you initially did not investigate.

Dame Julie Mellor: Indeed.

Q196 Greg Mulholland: Do you have the proportion of how many of those you had investigated already and made a decision?

Dame Julie Mellor: That was five. We upheld five out of 33.

Q197 Greg Mulholland: Obviously that is an improvement; there is no doubt about that, but you are aware that there is still dissatisfaction from people who still feel that there is perhaps a fundamental flaw in that you only review how the decision was made and not, at that stage, review the decision. Do you not think that there should be the potential for an automatic trigger if someone comes forward with some evidence that clearly was not there, potentially evidence that was withheld by the body originally complained about, or indeed where there has been clearly a substantive error in the decision-making? Do you not think it would be

simpler, then, just to go straight to review the whole decision and the whole original complaint?

Dame Julie Mellor: That is what we do, in effect. If we uphold the review, we will look again at the content of the complaint. I think this is probably clouded by people where we decline to investigate, because of the high threshold—sorry; where we have declined to investigate, I have huge sympathy for people, because they have been wrapped in process. There was quite a long further assessment process that considered the high threshold of evidence against the three criteria for accepting for investigation. Then, when they ask for a review of that, because all ombudsman services have huge discretion on whether to take on cases it would be highly likely that the review decision was that it was a reasonable decision to make. I think people's frustration and distress comes back to that core of the decision to decline to investigate and that involved them in a whole lot of process. Hopefully, we are wiping that out by saying we will take on so many more for investigation in the first place.

Q198 Greg Mulholland: I would like that to be the case, but that certainly does not seem to be the case in terms of the people who are contacting us as part of our inquiry going forward—the people who remain dissatisfied. They feel that there is a fundamental flaw still in the way that the Ombudsman's office reviews decision-making. I suppose the obvious answer is, do you not think that that review process, instead of being done within the office, should be done externally?

Dame Julie Mellor: Picking up that question specifically, we are the only ombudsman service with a dedicated team, with a separate reporting line and that uses external reviewers for reviews of our decisions. We are the only ombudsman service that has those three things in place.

Q199 Greg Mulholland: In the UK?

Dame Julie Mellor: As far as I know, yes. Yes, we are definitely the only ombudsman service among the main public ombudsman services and the large private sector ones who have any external reviewers for reviews of decisions. Some of them will use external people to consider service complaints—whether someone was rude, messing up the computer, those kinds of complaints—but on reviewing decisions we are the only ombudsman service that has external reviewers. We use external reviewers for about 10% to 15% of our cases, and there is very little difference in the uphold rates for internal and external reviews. Does that answer your question?

Q200 Chair: I think there is an element of crossed purposes here. The evidence of dissatisfaction that has made an impression on us is people who have had investigations and they feel that the decision has been wrong, and then they feel that they are not allowed to contest the decision; they are only allowed to look at the process. They are still not allowed to look at the evidence that you have seen, so there is an impression of this rather cosy relationship between PHSO and the organisation you are investigating. You keep it secret, and then they have to put in freedom of information requests and then, when more

information comes to light, they are accused of enlarging the complaint or growing the complaint. How familiar is this account to you?

Dame Julie Mellor: I think you are right that we may be talking at cross purposes, because of those who submitted individual evidence to this Committee for this inquiry, all but a couple were cases where they were declined to investigate. A very, very small number were about the investigation decisions. They were about that earlier decision about whether we took them on for investigation.

Q201 Chair: How familiar is this language I am using that people have used to criticise you to us?

Dame Julie Mellor: Can you say the language again?

Chair: That they get accused of growing the complaint or enlarging the complaint as more information comes to light, or that they do not get access to the information that you have access to, and they have to put in freedom of information requests to get this information.

Dame Julie Mellor: I think the challenge is, as I say—

Q202 Chair: How familiar is that to you?

Dame Julie Mellor: “Growing the complaint” is not familiar at all.

Q203 Chair: That is language that your people on the telephone and in meetings use all the time, according to witnesses that we have had in private, and they would expect us to be blunt with you about that. How much do you think you have seen the total culture of your organisation, or do you think some of that is still being hidden from you?

Dame Julie Mellor: I am really proud of the work we do and proud of the people who do it. I do not think this is an issue about culture. I think this is an issue about what we, as leaders, set historically about how many cases we were going to take on. That is the fundamental issue here, and a lot of the things that people might talk about flow from that. Issues about accountability, issues about bias, issues about independence and issues about judicial review are all things that come up in relation to decisions to decline to investigate.

Q204 Chair: What do you learn from the complaints about your service?

Dame Julie Mellor: I think we have covered quite a lot of that already. That has been the most profound learning for me, as leader of the organisation, and our staff who are already there, in that they said the biggest change they wanted to make was for us to do more investigations.

Q205 Chair: That seems like a cracked record we are hearing—more investigations. Doing more investigations does not change the way your people behave in relation to the people

they are dealing with. What changes do you think have been required there, and how difficult is it to make those changes?

Dame Julie Mellor: I have every sympathy with those whose cases we may well have investigated under the new arrangements, and I have every sympathy with the frustration and distress that they have experienced. I do not think that is down to the culture of our staff. I think it is down to what flows from a decision to have a high threshold to accept cases for investigation, because then what our customers are experiencing is how we deal with that and the processes we have around that. I really do not think it is to do with the culture of the organisation.

Q206 Greg Mulholland: I am conscious that we are running out of time and we could explore this particular area for quite some time and we are not going to be able to do today. Can I ask you both, because we are clearly looking at this and therefore it is an opportunity for people to express their dissatisfactions, could we get from you some explanations on some of the cases that we have had, on the basis of the allegations that you have not looked at new evidence and therefore investigated or re-investigated? If we could put some of those things to you that would certainly—

Dame Julie Mellor: I think we have to be very careful here, Mr Mulholland, in terms of our accountabilities. Parliament intended for us to be accountable for our decisions to the courts and Parliament intended for us to be accountable for our service to Parliament. Therefore, I do not think it would be possible to go through individual cases with you, because our accountability is to the courts.

Greg Mulholland: However, again you accept—and I think this is something we will be coming on to, just briefly, as I say—that there is this role that we are scrutinising you as well and, in the end, if there are flaws in the review process and that is what people are suggesting, then that clearly is an area of work.

Chair: The relationship between the Ombudsman and Parliament is something we are going to discuss a little bit later, so we will come on to that. For brevity's sake, I wonder if we could write you a note and you could write to us in response with some examples of how you have helped deliver systemic improvements and deliver wider public benefit, because we need to get on.

Dame Julie Mellor: Yes.

Q207 Chair: I would like to move on to the next section about the relationship between the Ombudsman Service and Parliament, which is more about the legislative framework and the policy of Parliament towards the Ombudsman in future. Ms Hughes, I think you want to withdraw at this point, unless there is anything you want to add before you go.

Helen Hughes: No. Thank you very much.

Q208 Chair: Dame Julie, how do you think that the expectations and demands of citizens are changing compared to the legislative framework that you have inherited, which was set up in 1967?

Dame Julie Mellor: In a number of ways. One is people's expectation that complaints are responded to more quickly and resolved more quickly by service providers and, indeed, by ourselves. There are probably three things that I am concerned about in terms of what consumers need and, indeed, the wider public, as taxpayers. There are needs to improve access to ombudsman services; there are needs to have more impact, which we began to discuss, as a result of cases; and there are needs in terms of providing better value for money across the public ombudsman services. Those would be the three things that I would say are driving our thinking about how we can improve things for the public.

Q209 Chair: How much is the legislative framework you have inherited holding you back?

Dame Julie Mellor: What is still good and robust even now, 50 years later, is that there are very significant changes that have been achieved as a result of ombudsman investigations—Equitable Life being one of the most well known, payments to farmers, compensation to people who are badly advised on pensions. Those are all cases that are all examples of ombudsmanry at its best. We need to keep ombudsmanry as the apex of the complaint system, as impartial, independent investigators, and we need to keep that it is free for individuals and we need to keep its relationship with Parliament, in terms of Parliament being able to hold Government to account.

Q210 Chair: Okay, so what is bad about the legislation?

Dame Julie Mellor: In terms of access, I would say, first of all, we take quite a generous interpretation of what is called the scope for someone to go for an alternative legal remedy to an ombudsman service. However, we would like the law—the statutory bar on considering alternative cases, where there is alternative legal remedy—to be replaced by discretion so that we have more flexibility to take on cases where there is an alternative legal remedy.

Our health legislation requires that people submit their complaint in writing, which seems remarkably old-fashioned and obviously we find ways around it, and we will write things up for people where they tell us verbally on the phone, but it is going to be a lot more straightforward if we can just operate in the digital age.

The third is the issue of what has been known as the “MP filter” and where we are concerned that people are not getting access to justice because of that filter. We are proposing dual access, where people could continue to go through their MPs or they could come to us directly. We know when the local councillor referral mechanism—the filter mechanism—was removed that the Local Government Ombudsman saw a 20% increase in complaints coming to them. That is potentially the scale, on the central Government bit of our remit, of the dampening effect on people's access to justice.

Those would be the three things in terms of where I feel there are limits to people's access to our service.

Q211 Chair: Can you just explain what the reality is of the MP filter for the public you are seeking to serve? Can you explain what happens when somebody rings up and they have not been through the MP filter?

Dame Julie Mellor: If they have had a final response from the service provider, so they are ready for us to deal with, we will advise them that they need to get a form signed by their MP or a letter from their MP. We know that of those where that is the case and we then can send people a form to take to their MP, between a third and half of those cases that are referred back to the complainant to take to their MP never return to us.

Q212 Chair: Do you think that is because MPs resolve those cases on their constituents' behalf?

Dame Julie Mellor: No, because this is where people are ready for us to intervene, so they have already had a final response from the service provider.

Q213 Chair: Yes, but very often the MP intervenes and that gets the service provider to have another look at the problem and, "Oh, the MP is on to this now." We like to think that we are these fantastically powerful and effective people who can shake the tree and make things turn out right. You do not think that is happening.

Dame Julie Mellor: No, I think that is happening, and I think MPs and their caseworkers do a fantastic job of supporting thousands of individuals in trying to get a response to their complaint from the service provider. I am talking about the ones where all that has been done and it is ready for us to look at.

Q214 Chair: So the MPs have already had a go at it?

Dame Julie Mellor: Or the body is very clear that it has given its final response. That is a third to a half that are not returned, and I have sat on the phones with our staff myself and listened to our staff explaining that someone needs to get a referral from their MP, and the phone goes down. People have been so persistent to get that far and they just reach a point where they just give up, so it definitely has a dampening effect; 85% of the public want it removed.

Q215 Chair: Of course there is no MP filter on the health sector complaints made to PHSO, so do you feel you have a different relationship with the public when they are complaining about the health service than the rest?

Dame Julie Mellor: It certainly makes it easier that they do not have to go through another hoop in order to be ready for us to consider their complaint.

Q216 Chair: On the wider question of being able to initiate your own investigations without a complaint, how do you respond to somebody who describes this as PHSO attempting to do empire-building?

Dame Julie Mellor: With the reasons why I think we should have own-initiative powers. The limits on us being able to give access to justice for people because we do not have own initiative powers are the most vulnerable who are least likely to find us on their own, least likely to access our service. We could investigate on our own initiative, where there is evidence of some service failure, for those who are most vulnerable. It would enable us to focus on those experiencing the greatest service failure, making better use of intelligence from MPs. Last year, when we were discussing what the four issues are that are the highest in your casework—incapacity benefits, the Child Support Agency—those issues where there is evidence from yourselves or from the advice and advocacy sector or other intelligence of some service failure, we could investigate that. That would mean we could intervene early and prevent expensive escalation of complaints by sorting something out for the whole group, but it also prevents mistakes being repeated by being able to give a systemic remedy. To have maximum impact—our goal to have more impact for more people—the own-initiative powers would enable us to be better value for money, because we would be able to apply remedies to much wider groups of people, and that builds confidence in the whole complaints process.

Q217 Chair: The Ombudsman in Holland whom we visited has own-initiative powers and is regarded as a very much more political or controversial, at least, person than the way your office has traditionally been conducted. How would you avoid your service becoming more embroiled in matters of political controversy if you were choosing yourself what to investigate?

Dame Julie Mellor: The Northern Ireland Assembly is asking exactly these questions at the moment because the same issues are being looked at there. Probably the main thing is that there is prima facie evidence of a problem, so there has to be some evidence that there is a problem; we cannot just decide to go wherever. That we take the decisions independently, so it is part of our independence. Just as, for example, the NAO will choose its value-for-money studies that it does, the Ombudsman Service needs to be able to take the decision independently. We would want to consult with the NAO, Parliament and consumer organisations on what the issues are, so that it is informed by wide intelligence.

Q218 Greg Mulholland: If I can just follow up on your question, Chair, about the National Ombudsman in Holland—and I apologise; I have to go in about five minutes—there is a fundamental difference here, and this goes back to the legislation and your role, which is to be the Parliamentary Ombudsman on behalf of Parliament. Over there, the National Ombudsman is, effectively, the citizens' ombudsman. Much as I am a proud parliamentarian, in the modern age of empowered citizens with direct relationships with public organisations, as well as getting rid of the MP filter, which would give you a direct relationship, do you not think it is time to make the fundamental change and to change you from being the Parliamentary Ombudsman to the citizens' ombudsman for everyone in this country?

Dame Julie Mellor: I think the title “Parliamentary Ombudsman” is confusing, in that one assessment of what that means is that the scheme applies to central Government Departments and agencies, rather than being Parliament's Ombudsman Service. However,

the role of Parliament does not go away in Holland or here, in that Parliament has the two roles of both holding us to account and also using our help and advice and intelligence and our reports to hold Government services to account. Those do not go away however much you have a scheme with the right powers.

Q219 Mr Turner: Can I just ask a further question to the last couple? I think you said that 20% of local government complaints were complained of where there was no portal sort of thing. Is it not the case, though, that the more it comes to be something falling in your box they will not go through the operation of looking at the local authority, because the local authority will not deal with it very well, frankly, and they would rather leave it to someone else?

Dame Julie Mellor: No. The same thing applies to ourselves and the Local Government Ombudsman, which is we are normally expected to only consider complaints for investigation when they have had a final response from the service provider.

Q220 Mr Turner: Yes, but I am talking about the quality. The quality of what the local authority is capable of doing is not necessarily the same as its performance.

Dame Julie Mellor: I am really sorry. I am not sure I understand the question.

Q221 Mr Turner: I am suggesting that they go through them on paper, but they do not do the job.

Dame Julie Mellor: That may well be the case. That is why people need access to a service like ours.

Q222 Mr Turner: But you will end up with lots of stuff that should be dealt with by the local authority.

Dame Julie Mellor: No, because the 20% increase that the Local Government Ombudsman saw and the up to 50% who are not returning their forms signed by their MP to us is all where the local service provider has completed their own consideration of a complaint. This issue only arises once that has been done. It does not change that at all. It just means that when a complaint is ready for us to look at they do not have to have a form signed by an MP.

Q223 Mr Turner: No, but this is one of quality. What if the quality of what the local authority is doing is an automatic, “No, no, no. We have said no three times, so you will sort it out.”?

Dame Julie Mellor: That applies anyway. It is just that you have the MP filter as another hoop that people have to go through.

Q224 Mr Turner: Yes, but where the Member of Parliament knows that it is going on, you are more likely to get involved.

Dame Julie Mellor: Oh, I see. Sorry. I understand you now. You are talking about the clout of MPs, basically.

Mr Turner: Yes.

Dame Julie Mellor: Yes and we are not saying that people cannot go through their MPs. What we are recommending is that it is dual access, so people can go to their MPs or they can contact us directly, because what a number of people say is they do not want to contact their local MP. They do not want their local MP to have all their personal details about the detail of their case and it should be their choice as a consumer. They need access to justice, so they can do it through an MP or they can do it through us.

Q225 Mr Turner: Okay. To what extent would a single portal be a useful innovation? How realistic a prospect is one?

Dame Julie Mellor: There are probably several, rather than just one. This will need thinking through in terms of any recommendations the Committee may want to make in relation to a single portal. For example, with the EU directive on alternative dispute resolution there is a requirement for a digital platform for complaints, and this may speed up Ombudsman Service collaboration on a shared portal, which could go across public and private sector, for example. In health, NHS England has started a pilot called Care Connect with the aim of doing exactly that for health, so that someone can ring them up and say, “What do I do? I want to complain about X,” and, depending upon where they are—like whether this is the first time they have raised it or they have already tried to raise it with the hospital and they have got fed up—Care Connect will then refer them to the right place. It seems particularly relevant in health because, as you know, health is a very regulated sector. Sometimes people will think, “I want this clinician struck off,” and so they want the General Medical Council or the Nursing and Midwifery Council, to say, “I want to give you some intelligence about a particular clinician,” and so that might be the right referral. It might be they want to do that but they also want someone to address their complaint, so they need to go both to the regulator and to ourselves as an ombudsman service, so something specific for health makes sense.

For the UK services—the central Government Departments and agencies—at the moment there has been very little appetite, but I am quite concerned that we do not get many complaints about UK services coming from Scotland, Wales and Northern Ireland. Therefore, another portal to explore would be whether the public ombudsman services in the UK could do something jointly to make it easier for people to access the UK bit of our jurisdiction.

Q226 Mr Turner: Would it be difficult to implement a successful complaints portal?

Dame Julie Mellor: I think it is too early, in a sense, to respond to your question, Mr Turner, because there are a number of options, and we probably need to do some research with consumers to understand how they think about making a complaint and how

they think about using an ombudsman service, to know what the best configuration is and then look at those practical issues.

Q227 Mr Turner: What benefits do you think there are to having a single public services ombudsman?

Dame Julie Mellor: There are a number of benefits to rationalising the public ombudsman service landscape. One is ease of access for the consumer. For example, at the moment, if you have a complaint about something that has happened in a care home, you probably will not even know if that is something that is provided by the NHS or by the care home funded by the local authority or privately. That is a perfect example of where it is going to be much easier if everything is in one place.

Whatever is done would need to be coherent for the service providers. For example, it would not make sense to have all the different national UK ombudsmen services considering complaints about UK services within each nation, because you would then potentially have inconsistent decisions by different ombudsman services.

Chair: That is an extremely important point, and I had not really thought about that.

Dame Julie Mellor: In looking at how we can make this better for the consumer, we also need to look at comprehensive coverage. At the moment, we have our two schemes, health and UK services, we have the Local Government Ombudsman, we have the Housing Ombudsman, but education at the moment is a bit missing. Therefore, defining this as something that is about all public services rather than listing which services are in or out, for the public it is everything that is publicly funded—back to your point about private providers of public services as well.

Whatever we do needs to reflect the devolution settlement. We have great comprehensive services in Scotland, Wales and Northern Ireland that do that linking of the local and the national and we definitely need that for England. The bit that is probably more difficult to work through is the UK bit of our jurisdiction, but one thing to consider in our current devolution settlement is that Westminster deals with UK and England. Whatever we do needs to meet that principle of fitting with the current democratic and devolution settlement.

The last principle that would need to apply is value for money. Let us have this reduce the number of organisations, because it will cost less money.

Q228 Chair: Can I just ask about what Robert Hazell calls the devolution wrinkle? That to have an England public service ombudsman would clearly mirror what happens in Northern Ireland, Scotland and Wales, but of course to duplicate your role in England would seem to be rather otiose. How would you address the devolution wrinkle?

Dame Julie Mellor: I suppose that is partly why I laid out those principles, because rather than having a solution on a plate, this would need working through, and if those six principles were met those would be good tests for any designs that the Committee may consider. You are absolutely right: we need an English public ombudsman service, so that you get the national and local integrated in how we deal with complaints. We need to

think creatively about the UK part of it. I am not making a recommendation here, but there are some ideas for consideration on how we might meet those principles. For example, in a sense a bit like we are, you could have two schemes but delivered by one organisation, so you could have a UK scheme and an England scheme. They are separate schemes recognising the devolution wrinkle, if you like. You could have the virtual access—the portal idea of how we could get more complaints for the UK services from Scotland, Wales and Northern Ireland, which are very, very low at the moment, and so whether there is some kind of portal across all the public ombudsman services to bring that in.

Q229 Chair: Do you think it would be possible to get, say, the Scotland Ombudsman to resolve UK questions on your behalf according to your policies, or is that too complicated?

Dame Julie Mellor: That would not meet two of the principles that I have outlined. It would not meet the principle about the coherence for the service provider, as you have already noted, because you could get inconsistent decisions between different ombudsman services. The other one is it may be a devolution wrinkle but the devolution settlement in terms of accountability is that Westminster does cover both the UK and England.

Q230 Chair: Some of us did warn about these wrinkles before the devolution settlement—or unsettlement—was imposed. Could the Scotland Ombudsman act as a gateway to your service, so all complaints go through the Scotland Ombudsman, and they decide whether it is a UK matter or a Scottish matter?

Dame Julie Mellor: That is exactly the kind of creativity we need on this question.

Q231 Kelvin Hopkins: I wanted to intervene a little earlier about the question of scale, because England is 10 times the size of Scotland and more than that of Northern Ireland and Wales. Scale is significant in this if you are going to have relationships with all the organisations. Devolution possibly to regions might be a consideration.

Dame Julie Mellor: We have a Financial Ombudsman Service that deals with a million contacts a year, so I do not think scale has to be an issue at all. In terms of thinking specifically about the regional ombudsman, one of the challenges there and thinking of it from the customer perspective is that in England we do not have regional services. It has to be local or national and, as we know, phone and web are both local and global now, so in terms of access I do not think you need regional ombudsmen.

In terms of governance, I would not recommend having different ombudsmen in regions. We have just seen the Robert Gordon review of the governance arrangements for the Local Government Ombudsman, which is recommending moving from three ombudsmen in different parts of the country to one, exactly because of the need to have greater consistency, greater clarity of leadership and better governance.

Q232 Mr Turner: If the Financial Ombudsman can deal with a million, is that because it is a slightly easier job than your job?

Chair: Good question.

Dame Julie Mellor: I think we all have jobs that are easy and difficult in different ways. It is apples and pears; I do not think you can compare. I was just making the simpler point and, indeed, for ourselves, because we want to accept more cases for investigation and we want to deliver for more people, we are looking at becoming a much higher-volume organisation.

Mr Turner: It would be nice to have some evidence of the size.

Q233 Chair: We will write you a note about that. Can we move on briefly to the last topic, which is about our relationship? We are pushing over the time boundary, and I am craving the indulgence of colleagues just to do this very important piece. What do you think is wrong with our relationship? I would like to dwell on what is good about our relationship, but we must concentrate on the bad points.

Dame Julie Mellor: We are talking about the two relationships, are we not? We are talking about one in relation to us being accountable to Parliament for our service, as indeed other independent organisations are. The other is how Parliament can use our services to hold Government services to account. It is probably that latter one where there is an opportunity for Parliament and us working together to have more impact for the public.

Q234 Chair: When you produce a health service report, for example, what do you do in order to make sure that the Health Committee takes up the issue?

Dame Julie Mellor: Can I beg your indulgence and take it a step back?

Chair: Take a step back if you are quick.

Dame Julie Mellor: The opportunity to have greater impact, because this Committee has been very diligent over the years at taking our reports where a Government body has failed to accept our recommendations for action. Whether it was Equitable Life or pensions or rural payment, this Committee has done a fantastic job, and that is why we have nearly 100% compliance with our recommendations, because people know if they say, “No”, we come to you and you will hold a hearing.

Where there is the opportunity for greater impact is holding Government to account for action on service-wide or system-wide changes as we begin to do more of that. The examples would be on sepsis, on midwifery, on the Victims’ Code—a range of issues. That is where there is scope for Parliament to be holding to account.

On your question specifically about what we do to send to the Health Committee, we need to remember what the standing orders are here. This Committee is the inheritor of the Parliamentary Commissioner for Administration—my job—and its standing orders are to examine reports of PHSO. That is not in the standing orders of any of the subject Select Committees.

Q235 Chair: If we were to enlarge your impact or to recommend the House to enlarge your impact, what effect do you think it would have if we recommended that in fact every Departmental Select Committee should have in its standing orders to receive reports from you relevant to their remit and respond to them?

Dame Julie Mellor: There are a number of options that could be considered, and that is absolutely one of them, where PASC retains the responsibility that it has taken on itself where we are held to account and individual Select Committees take on the scrutiny of service failures. That is one option.

It is also worth looking at what this Committee recommended in 2007, where it accepted, with the dual roles of us being held to account and helping you hold services to account, that they were best done by separate Committees. In fact, they recommended an Officer of the House Commission, a bit like the Public Accounts Commission, for the accountability, then a bit like PASC for helping scrutinise services.

There are probably three options that the Committee might wish to consider. One is the one you have suggested of PASC retaining the scrutiny role and other Select Committees taking on the service-failure role. Another is this Officer of the House Commission to take the accountability role and PASC to take the role of scrutinising service failure. Short of legislation, there might also be a short-term solution to this one Committee doing both roles, which it is recognised there is a tension there.

Q236 Chair: Can you just explain why there is a tension there, and why you feel that that is an unsatisfactory role for us, both receiving your reports and scrutinising your performance?

Dame Julie Mellor: You raised one earlier, which is accusations of cosying up and collaboration between my office and this Committee. In the session with Oliver Letwin, I think you said that it inhibits the relationship with us in supporting you in holding services to account.

Q237 Chair: I am bound to agree with that, but what do you feel?

Dame Julie Mellor: I think that is right. There have been things where we would have been able to help you with other inquiries because of evidence from our casework, which there has been an inhibition to do because you are also holding us to account. I just think it is better for all if it is more transparent and if the scrutiny of the office is separated from the work we do together. It is what was recognised with the establishment of the National Audit Office with the two bodies.

Q238 Chair: If we start really thinking about your governance arrangements, you are the Parliamentary and Health Service Ombudsman. As an individual, you are chairman and chief executive of your organisation, in effect. These days we usually default to a very different type of governance arrangement with a non-executive chairman or a part-time chairman and a board of non-executives who appoint the chief executive. What do you feel about your inherited legislative governance arrangements and how do you feel that should change?

Dame Julie Mellor: The model you have just outlined is the right kind of model for robust governance and leadership of an organisation in the 21st century. We have tried to make a step towards that, as I said right at the beginning, where we have established a unitary board of executives and non-executives, which I chair. That was part of why we appointed Helen Hughes as the Chief Operating Officer, to lead the organisation. If you are proposing that there is a much more comprehensive public ombudsman service or services for the UK and England, all the way from local to national to UK, then that would be a perfect opportunity to look at governance arrangements afresh.

Q239 Chair: How would that work: the Ombudsman would be the chairman or the Ombudsman would be the chief executive?

Dame Julie Mellor: I think the Ombudsman would be the chief executive.

Q240 Chair: Who would appoint the Ombudsman?

Dame Julie Mellor: Indeed, if you need a named ombudsman. If you look at the model of the Legal Ombudsman Service and the Financial Ombudsman Service, the Financial Ombudsman Service has 80 named ombudsmen. We provide a service, and so the whole issue of personal jurisdiction is quite anachronistic and old-fashioned.

Chair: A bit Victorian.

Dame Julie Mellor: Yes, and so I think it would be much better for Parliament to appoint the chair of a public ombudsman service, the chair and Parliament together appoint the board and, as you suggest, the board then appoints the chief executive. One of the things that does is it provides a barrier for the person who is leading the organisation to guarantee the independence of the office.

Q241 Chair: The Scottish Ombudsman told us that he did not really feel he needed a parliamentary champion. What is your reaction to that?

Dame Julie Mellor: I think the work that we could do together to make sure that Government services are held to account is absolutely invaluable. Right now, on sepsis—

Q242 Chair: Yes, but that is work you have done that you have put into the public domain. Why do you need Parliament to pat you on the head and tell you, “Well done!”?

Dame Julie Mellor: Because I would love it if on next World Sepsis Day this Committee or a Committee in Parliament brought in those who committed to taking action to see if they have delivered, because that is where we would hold feet to the fire and make things happen.

Q243 Chair: That seems to be about your relationship with the other Departmental Committees. It would be the Health Committee that would do that.

Dame Julie Mellor: It could be. That is one of the options.

Q244 Kelvin Hopkins: Just briefly, you are talking about a much stronger role for the Ombudsman Service, for the Ombudsman and a world where your status is like that of the Comptroller and Auditor General and making Governments very nervous. They do not like reports by the NAO, especially when they condemn PFI as a complete waste of billions, for example. Governments do not like it, and I want to see a world where perhaps Government does not like what you say quite a lot.

Dame Julie Mellor: That is absolutely right, and it reminds me of something I was asked by Paul Flynn in my pre-appointment hearing, which was around independence. I took this job because I wanted to lead an independent organisation that could make a difference for the public.

Chair: If there are no further questions, I thank you very much for your evidence and if there is anything further you want to add, please do submit it in writing. We will be writing to you about the one matter that we do not feel we have covered, which I am sure you will be able to deal with in writing. With that, I will conclude this session.