# Complaints as opportunities: what can the National Health Service learn from negative employee feedback?

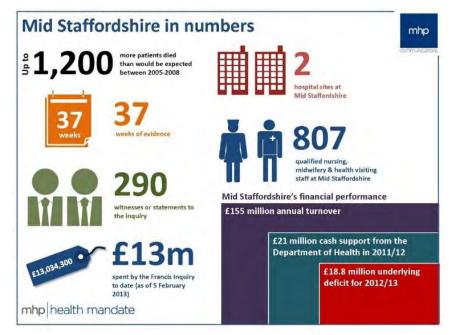
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## 1. Irony of learning in the NHS

There persists a culture of **organisational silence** in the National Health Service (NHS) that discourages staff from speaking up about potential threats to safety, but **staff feedback has long been identified as valuable for organisational learning and harm prevention**.

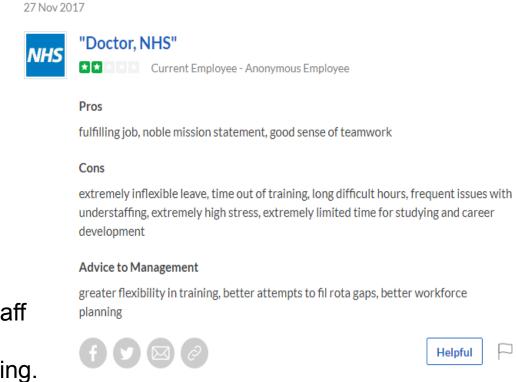


The 400-1200 **avoidable** deaths that occurred in Stafford Hospital in Staffordshire, UK attributed the cause of the deaths largely to a failure of organisational listening to staff and patient complaints (Francis, 2010, 2013).

Image retrieved from http://burningourmoney.blogspot.nl/2013/03/our-scary

# 2. Overcoming the irony: Glassdoor

- If staff do not speak up in the organisation do they speak up elsewhere?
- Employee review website: Glassdoor.co.uk.
- To date, there has been no attempt made to **aggregate** and **analyse** staff complaints as a facilitator for organisational monitoring and learning.



# 3. Project Overview

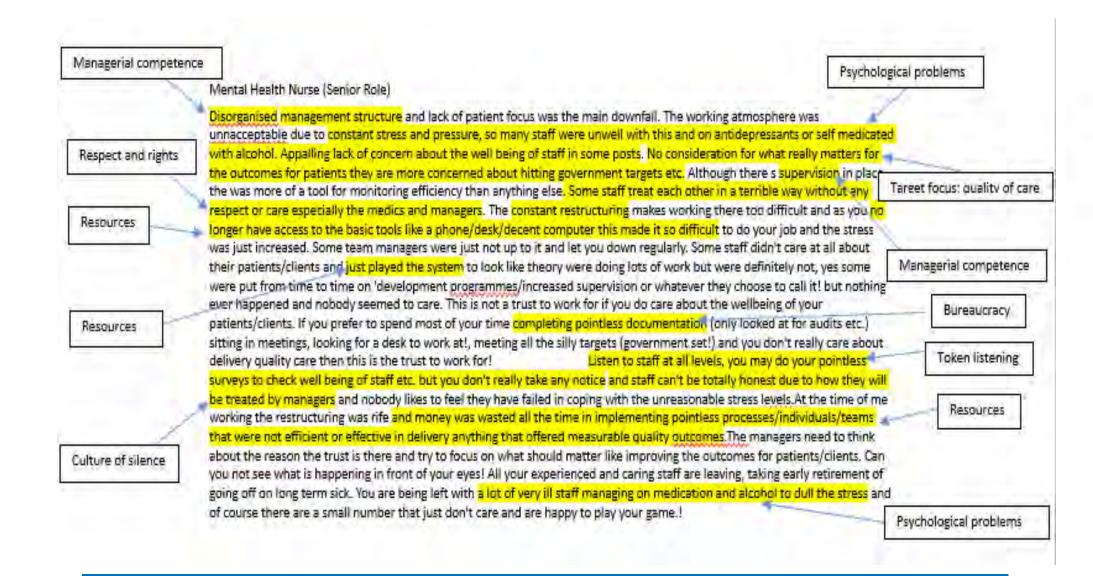
#### Research Questions

- 1) What problems are employees raising on Glassdoor?
- 2) How can these problems be analysed to facilitate organisational learning?

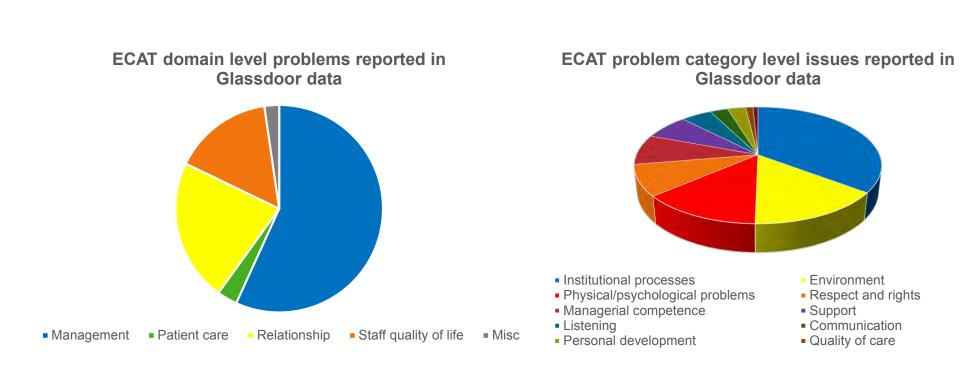
#### Methods

- Iteratively analysed 514 employee reviews on Glassdoor
- 2 studies, 1 deductive content analysis, 1 inductive content analysis
  - Study 1: deductively analysed data using Healthcare Complaints Analysis Tool (HCAT; Gillespie & Reader, 2016), a patient complaints coding framework
  - Study 2: **inductively** analysed the data and created a bespoke framework: the Employee Complaints Analysis Tool (ECAT) that achieved Excellent inter-rater reliability. There were ~2000 issues analysed from the 514 reviews.

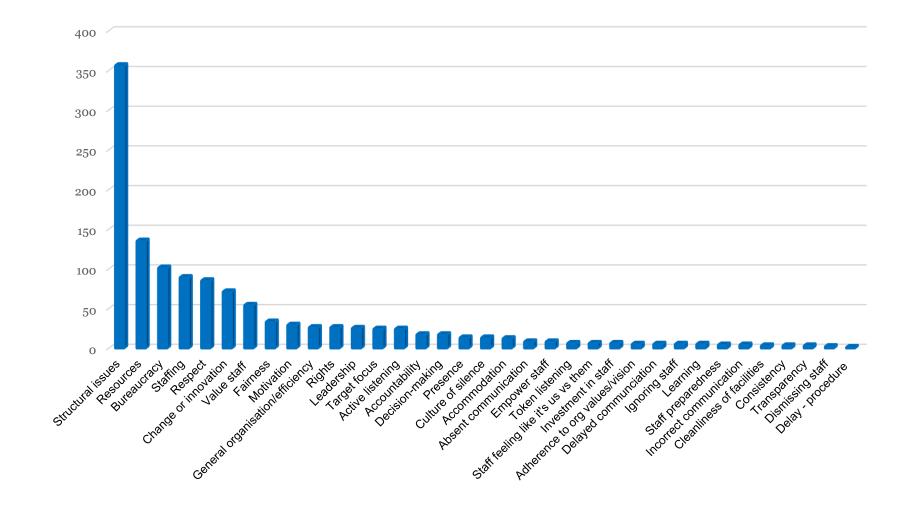
## 4. Complaint coding illustration



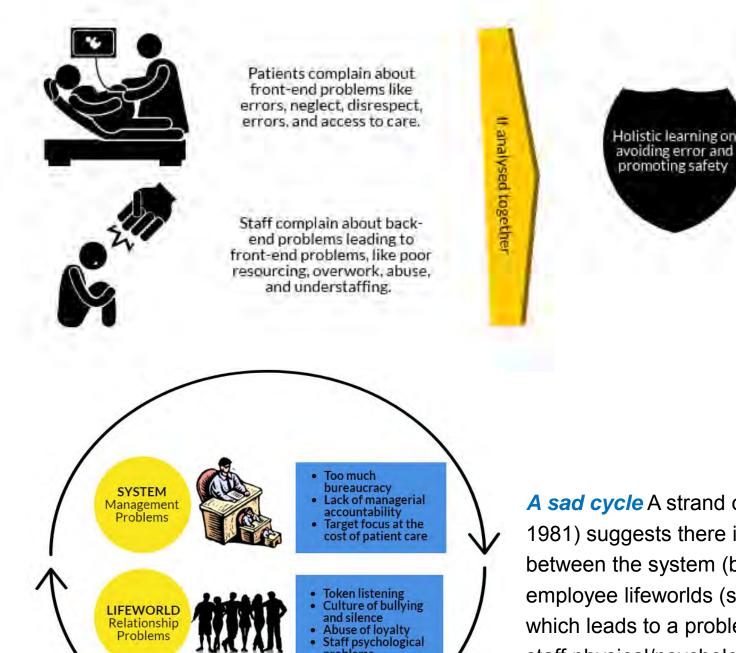
# 5. Key findings: aggregating complaints



#### ECAT subcategory level issues reported in Glassdoor data



## 6. Interpretation: what are these complaints telling us?



**Better together**. Patient safety literature shows that patients complain more about problems at the point-of-care (e.g. the nurse prescribed a wrong dosage of medicine), while the present study shows that staff complain about the back-end that patients don't have access to (e.g. the nurse is overworked and has few resources). This is a strength. If staff complaints and patient complaints were analysed together (using tools such as the HCAT and ECAT), it could provide the NHS with a holistic view on avoidable incidents.

A sad cycle A strand of sociological theory (Habermas, 1981) suggests there is a strong clash in the NHS between the system (bureaucratic elements) and the employee lifeworlds (social worlds, relational worlds), which leads to a problem in empathy and perpetuates staff physical/psychological problems. This, in turn, leads to poor patient outcomes, which only increases institutional pressures.

### 7. Conclusions

- This study showcases how:
  - Glassdoor.co.uk is a free, constantly populating, **unobtrusive source** that can provide valuable data on what employees are complaining about in an organization, and how when aggregated, analysed, and interpreted, these complaints can serve as powerful insights into safety failures in the NHS
- Contributions/implications:
  - <u>Theoretical</u>: furthers patient safety literature by including a new perspective crucial to patient care: employees
  - Methodological: identifies a novel, unobtrusive source of data in Glassdoor and successfully analyses the data within
  - <u>Practical</u>: develops a novel coding framework to analyse employee complaints (ECAT) that can be used by scholars and practitioners alike
- Limitations/future research
- More interpretation of data trends is needed
- More statistical testing of Employee Complaints Analysis Tool (ECAT), it being a novel coding framework





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