

Barriers and enablers to making a complaint to a professional regulator

Presenters: Melanie Venables, Director of Policy and Communications & Polly Rossetti, Policy Adviser

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Concerns about complaints – what's the problem?

Confusion, at both an individual patient, registrant and organisation level, about how to make a complaint and to whom.

Differences in the legislation for the regulators, and thresholds for concerns, can lead to inconsistencies in how concerns are handled.

Significant backlogs of concerns for some of the regulators we oversee.

So, our hypothesis is that learning and opportunities to prevent harm are being missed from concerns that are not reported or reported and not acted on... while some concerns may take years to resolve and result in no case to answer.

Taking a Right-touch approach to complaints



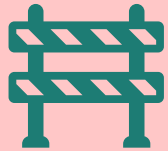


Barrier to complaints qualitative research

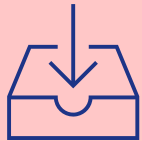


About the research

In autumn 2024, we commissioned the research agency
Thinks Insight & Strategy to undertake qualitative research
and produce a report outlining:



The barriers to raising a concern with a health professional regulator or register, including any that affect some groups more than others



What patients and service users would like/expect regulators and registers to do to help them raise a concern



What the experience was of those who had, and had not, complained



Tangible recommendations for improvements to the process and accessibility of raising a concern

Methodology - sample

Included patients/service users and health and care professionals who both had, and had not, complained to a regulator or accredited register - 42 participants in all

A spread of demographics across gender, age and ethnicity

Participants from across the UK (England, Scotland, Wales and Northern Ireland)

Different levels of digital confidence, as well as long-term health conditions and disabilities

A range of regulators complained to



Key findings

Health care professionals and patients/service users are primarily motivated by a desire to protect others, as well as holding those who have done harm to account

For both groups, the decision to complain to a regulator is not an easy one, and often dependent on confidence in their claim and their own ability to navigate the system.

On making the complaint there is agreement across cohorts that complaining to a regulator or accredited register feels difficult, almost by design.

Once the complaint has been made a lack of transparency and communication exacerbates and amplifies this experience.



Barriers to making a complaint

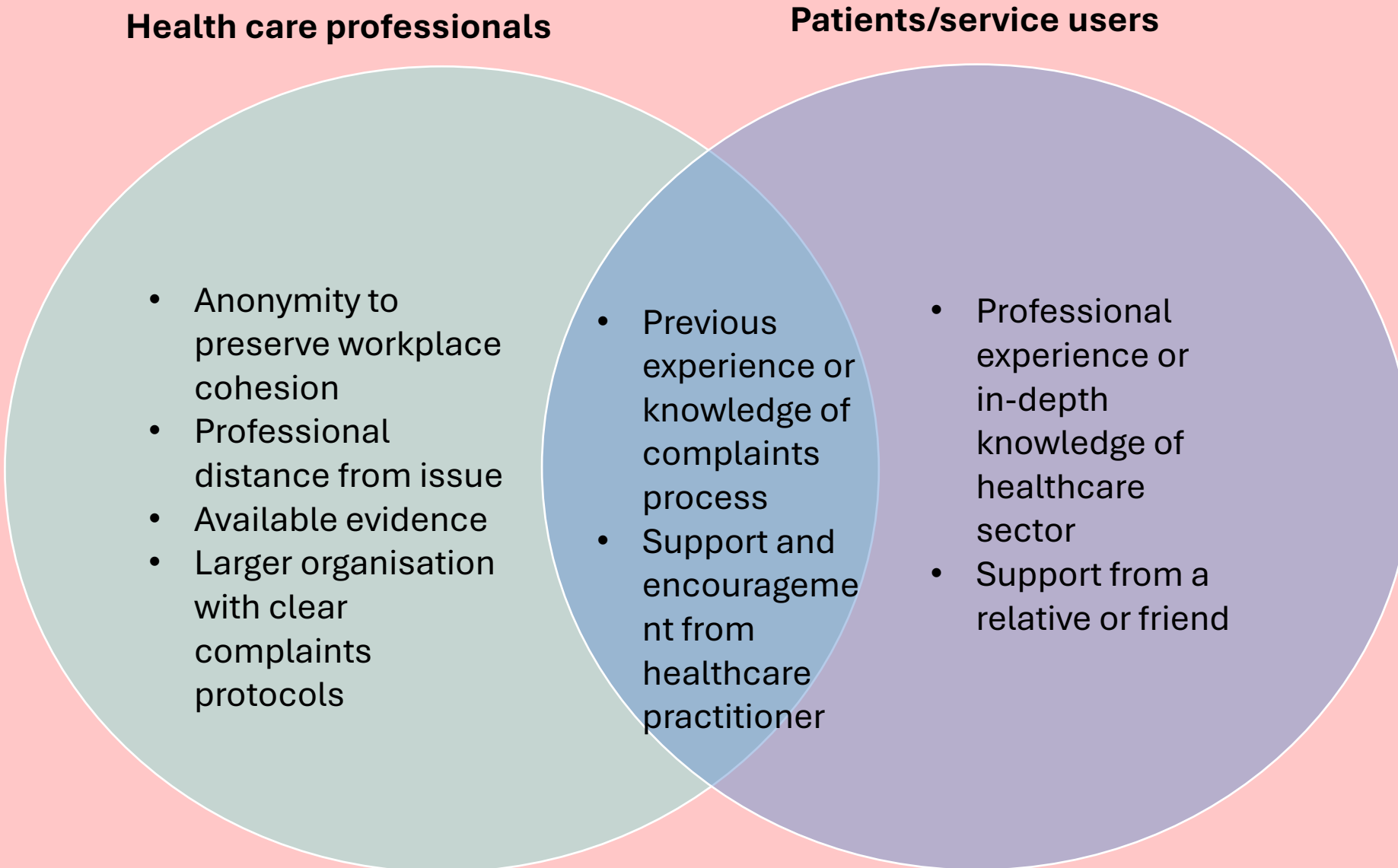
Health care professionals

- Lack of support from senior figures
- Concern for colleague's livelihood/wellbeing
- Difficulty collecting evidence

Patients/service users

- Fear of repercussions
 - Uncertainty over whether complaint is serious enough
 - Process feels difficult or complex
- Lack of knowledge about where to complain
 - Process feels emotionally burdensome
 - Digital disengagement

Enablers to making a complaint



What we heard from participants

Barriers to
Complaining
in Health and
Care

Handling complaints - key areas for improvement

There are four key areas where the current complaints process is seen to fall short

Setting expectations and explaining the process

Communications throughout the process

Speed of response and action

Accessibility and support



Recommendations for change



Regulators should clearly set out what types of complaint they investigate, what actions they take when a complaint is received, and how long the process is likely to take

Regulators should provide regular updates to complainants throughout the process

Regulators should provide more support to complainants, e.g. helplines, guidance on how to make a complaint and the information needed to complain

Regulators should consider allowing healthcare professionals to lodge their complaint anonymously (some already do)

Regulators should raise awareness of their role and independence

Regulators should provide advice and signposting on where to take less serious concerns

Overcoming audience-specific barriers

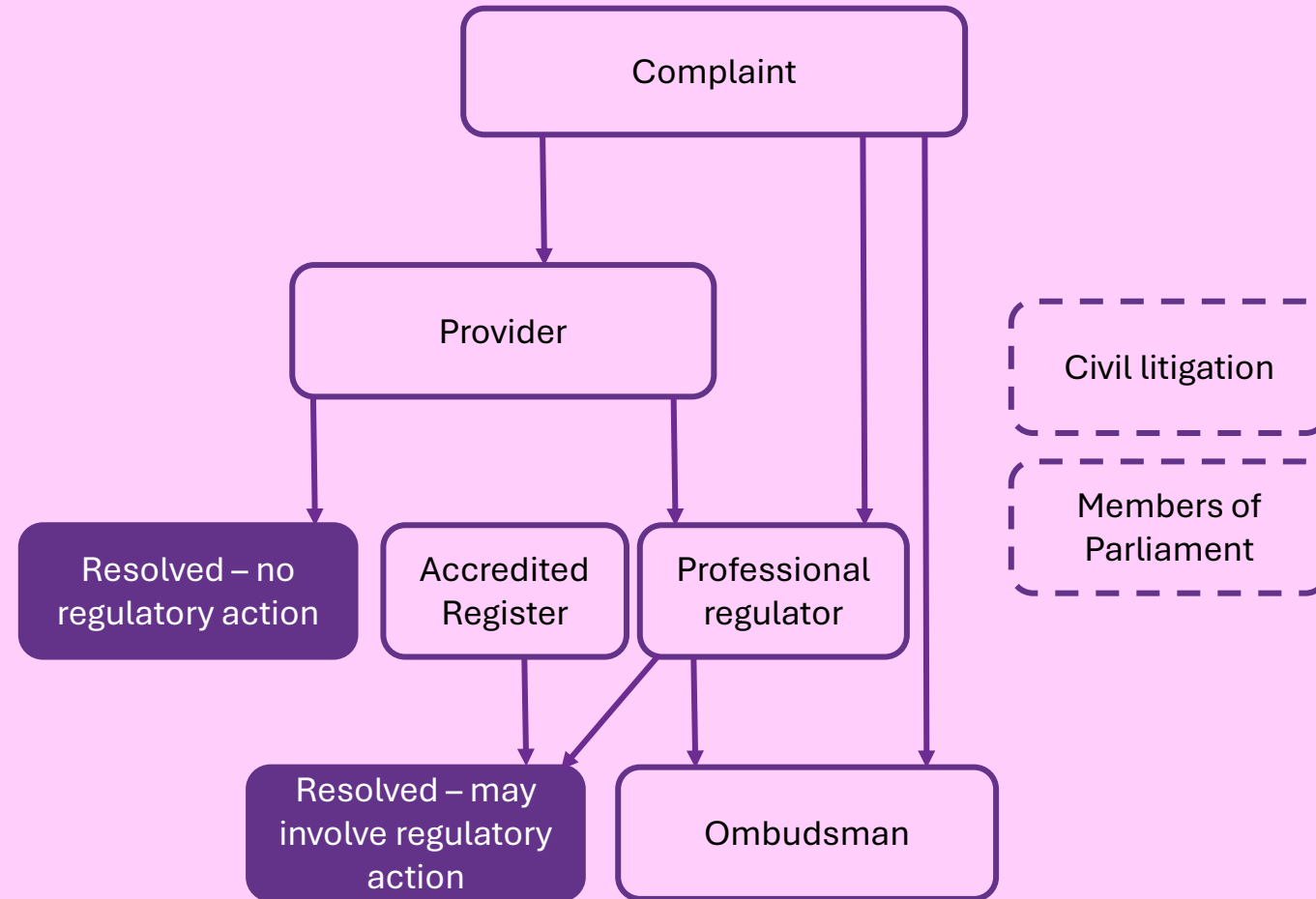
Cohort	Barrier	Type of measure/support
Service users	Digital disengagement	Maintaining different channels for getting in touch as well as offering or signposting to relevant support in navigating the process.
	Neurodiversity and ability to engage with the process	Offering or signposting to relevant support in navigating the process, e.g. one-on-one advice.
	Fear of impact on care	Reassurance of the independence of regulators and explanation of how the process works.
Both	Re-traumatisation	A trauma-informed approach to communicating with complainants, particularly when it comes to giving evidence.
	Uncertainty about the legitimacy of the complaint	Better guidance on what constitutes a Fitness to Practice concern, including examples, e.g. case studies, or a helpline offering advice on whether a complaint to a regulator is warranted and alternative channels where more appropriate.
	Collating evidence	Offer additional guidance on what type of evidence will be required, how best to collect and collate this, and an offer of support for those who are unable to do this for themselves.
HCPs	Career repercussions	Support HCPs to make a complaint anonymously and working with employers to ensure there are no negative repercussions for speaking up.
	Workplace culture and navigating the impact of denouncing a colleague	Remind HCPs in routine communications of the importance of complaints, focussing on patient safety, rather than blame. After a complaint has been made, providing reassurance to HCPs that they have made the right decision and thanking them for coming forward.



Addressing barriers to complaints through regulatory oversight



Complaints systems



Opportunities for change



Technology-driven healthcare reform, e.g. NHS 10 year plan for England – use of AI to help handle complaints



Reform of the legislation of the regulators we oversee – opportunity for swifter resolution of cases



PSA Standards and best practice



Collaboration between stakeholders, consistency of definitions of harm and 'seriousness' of cases

Driving improvement through our Standards for regulators



PSA's Standards of Good Regulation set out the standards we expect regulators to meet (including on complaints)



Each year we assess how well regulators are performing against the standards using evidence from a range of sources (including directly from the public via 'share your experience')



We are currently revising the Standards including making the standard around complaints more robust and complainant-focused



Addressing recommendations from the research

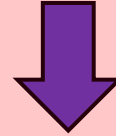
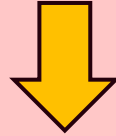
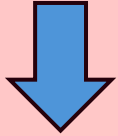
Recommendations from the research

Setting expectations and explaining the process

Communications throughout the process

Speed of response and action

Accessibility and support



How we are incorporating into our new Standards

Greater focus on clear, empathetic communications; collaboration across regulators for consistency

Continued focus on communications
Focus on regulator governance, leadership and culture

Focus on local resolution and effective resolution of concerns

More active responsibility to improve access to, and experience of, making a complaint; and avoiding compounded harm



How will we know we're making a difference?

The types of outcomes we'll be looking for:

Anyone can
raise a concern
about a
registrant

Anyone who
raises a
concern (or
wishes to do
so) feels
informed about
the process
and supported
to participate
effectively

Those who
raise a concern
are kept
updated
throughout the
lifetime of the
case

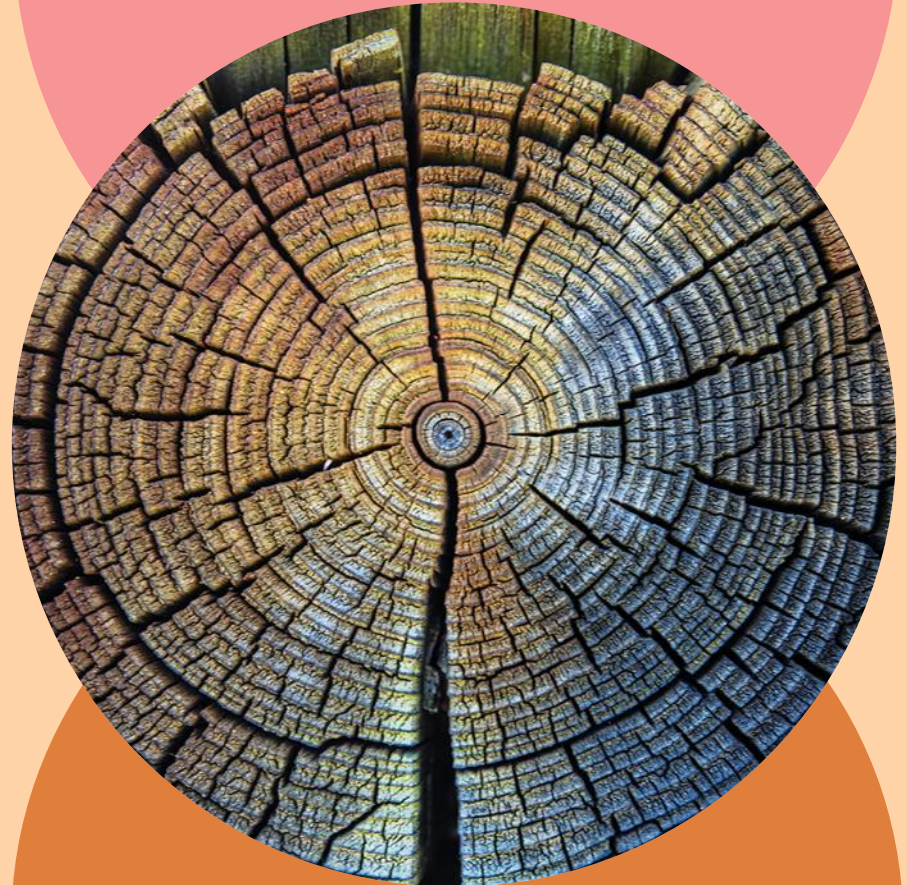
Those who
raise a concern
are treated
with dignity,
respect and
sensitivity

The complaints
process
minimises
further harm to
the health or
wellbeing of
complainants



Where are the gaps in the system?

- Need for a clearer and more cohesive complaints system
- Not clear where/who to complain to – need for a single complaints portal?
- Lack of a consistent threshold for referral to a regulator
- Need for better intelligence sharing/feedback loop between regulators and employers
- What happens to closed complaints?
- Changes to PSA processes (e.g. ‘share your experience’) needed?



**Melanie Venables, Director of Policy and
Communications**

melanie.venables@professionalstandards.org.uk

Polly Rossetti, Policy Adviser

polly.rossetti@professionalstandards.org.uk

020 7389 8030 | professionalstandards.org.uk