

# Doing the Right Thing When Things Go Wrong: Restorative Approaches to Complaints and Conflicts in the Health Sector

## Professor Chris Marshall

The Diana Unwin Chair in Restorative Justice, Victoria University of Wellington

Conflicts and complaints are a constant in every human society, organisation and employment setting; they are endemic to interpersonal relationships in general. As Charlie Chaplin once quipped, “I am at peace with God; my conflict is with man”. The ubiquity of interpersonal conflict means that learning how to deal with hurts, harms and hostilities in a positive, constructive and non-violent way is one of the most important life-skills anyone can acquire – and, it must be said, one of the rarest in existence. Most people “do” conflict badly. Most organisations and professional bodies also handle conflict poorly, whether by ignoring it or indulging it or trying to punish it out of existence through disciplinary processes.

For professional bodies and human services organisations, grievances and complaints come from two main sources – from colleagues or employees within the organisation (“workplace complaints”) and from customers or clients or stakeholders outside the organisation (“consumer complaints”). The grievances themselves fall into three main categories – complaints about personal (mis)conduct, complaints about professional (mis)conduct, and complaints about the quality of service delivery.

A variety of mechanisms, both formal and informal, have been developed to handle these complaints, though the steady growth in the volume and variety of complaints is placing enormous strain on existing resolution processes, as well as on all the parties involved.

The health sector is a particularly fertile source of both consumer complaints and workplace conflicts. Recent research has highlighted the disturbing prevalence of bullying and sexual harassment in hospitals and there is a direct link between dysfunctional workplace culture and adverse outcomes for patients. As well as improving the way complaints and conflicts are handled, there is an ongoing need to address the causes that give rise to complaints, grievances and interpersonal conflicts in the healthcare environment.

It is here that the principles and practices of restorative justice have something valuable to offer, at three levels. First restorative practices can enhance collaboration and communication within medical teams, overcoming the “silent disengagement” that characterizes toxic teams and is positively dangerous for patients. Second, restorative processes provide a helpful way of dealing with workplace conflicts and disputes before they escalate into full-blown grievances. Third, restorative processes can be used as part of formal complaints or disciplinary regimes, sometimes as an early resolution procedure and sometimes, where complaints are upheld, as a way of addressing the relational, emotional and moral needs of complainants. In every case, restorative engagements are characterized by such key restorative principles as democratic participation, respectful dialogue, accountability, storytelling and a concern to make things right and prevent repetition.