

The NHS Centre for Equality and Human Rights

Canolfan y GIG ar gyfer Cydraddoldeb a Hawliau Dynol



The NHS CEHR has provided a mediation service across NHS Wales over the last 5 years. During this time the Centre has undertaken more than 50 cases of mediation to resolve workplace conflict. Our experience has demonstrated that:

- mediation is effective in terms of take up with over two thirds of parties agreeing to engage in a mediation process;
- in terms of resolution, the success rates are very high, in over two thirds of cases, the parties have been able to find a resolution.
- mediation is a conflict resolution process that promotes fair and equal treatment and a respect for the difference of others. It avoids the traditional win-lose approach to resolving conflict, emphasising the importance of communication, understanding and promoting shared interest.

The other benefits of mediation are that it:

- empowers people to resolve their conflict;
- gives people the opportunity to speak and respond to the party with whom they are in conflict and to consider the issues from the other party's perspective;
- deals with the emotional elements of the case;
- promotes greater understanding of the complexity of the issues involved;
- becomes part of the healing process and
- is forward looking, with parties recognising that whilst it is not possible to turn back the clock, it is possible to influence and change the future.

We understand that mediation is used in medical negligence claims although all our experience is confined to workplace

disputes. However, we are aware of research evidence to suggest that the same benefits have been realised by parties in medical negligence claims.

Research also suggests that where mediation is used as an early intervention, the process is quicker than a formal procedure and is likely to be cheaper (Findlay & Reynolds 1997, Roberts 2004).

We would support the need for an NHS Redress Measure which will enable patients to secure redress without recourse to legal proceedings in the courts and which would form one part of a set of integrated arrangements that should also include, we would suggest, offering mediation to patients as a means of finding resolution (non financial) to their issues with the service. We would be prepared to share our experience of workplace mediation if this was considered to be beneficial to this consultation.

Another work area of relevance to this work is in relation to the facilitation of engagement with minority groups whether staff, the public or service users. We will be represented on one of the Task and Finish groups which is being set up by the DHSS which is considering user involvement.

Again, we would be happy to share further any experience of working with minority and under represented groups should this be of value to the Committee.