

## PALS AND COMPLAINTS REPORT April 2011-March 2012

As of the 1 April 2011, Southwark Provider Services transferred to Guy's and St Thomas' Foundation trust (GSTT) therefore any PALS enquiries or Complaints received about the services they provide are redirected to the PALS or Complaints teams within GSTT. There were two outstanding cases at the time of transfer of the services, one involving children's services, which was resolved and one which was a combined complaint involving both a GP practice and the district nursing team. This complaint was signed off in July 2011.

There were significant changes in the complaints and PALS team. The two PALS and Complaints Managers posts were combined into one post, and one Complaints Officer's post was deleted. NHS Direct served notice on the contract to run the PALS helpline, so this service was brought back in-house. Both Complaints and PALS cover Adult Social Care, which is not reflected in other complaints departments elsewhere.

### 1 Patient Advice and Liaison Service Activity

The PALS helpline, on 0800 5877 170, has been provided within NHS Southwark since 1 April 2011, initially for two hours a day (10 am-12 noon), but the hours were extended from 1 July 2011 to five hours a day (9.30 am-12.30pm and 2pm-4pm). This is answered by a dedicated officer. Over the last year there have been 1,700 enquiries to the helpline.. Some of the enquiries involved straight forward signposting for the service user, and others involve more time spent on them and greater interaction with the enquirers eg assistance with GP registration, practice opening times, prescriptions and appointments.

PALS enquiries can also arrive via email or direct to the office (letter or in person). Of all the enquiries received by the various routes mentioned 444 were more involved. The table below provides a break down of the services. There were 183 GP enquiries that needed casework, 37 dental enquiries, three pharmacy enquiries and two regarding SELDOC.

The good local knowledge and experience of the staff providing this service has provided both contractors and service users with a valuable resource over the last year and on occasions has helped deflect enquiries from becoming complaints.

#### 1.1 Casework

Service	Q1	Q2	Q3	Q4	Total
GPs	41	46	53	43	183
Dental	7	9	11	10	37
Commissioning	6	6	2	2	16
Patient Services	6	12	4	1	23
Mental Health	2	4	0	1	7
Pharmacy	1	1	0	1	3
Optometry	1	1	1	0	3
<b>Total</b>	<b>64</b>	<b>79</b>	<b>71</b>	<b>58</b>	<b>272</b>

#### 1.2 PALS in King's College Hospital Emergency Department (ED)

PALS provides a service within King's College Adult ED , five days a week. PALS was present in ED for 225 days last year. The role of the PALS officer is to support the redirection to

General Practice of patients attending ED with a Primary Care need. The PALS officer works closely with the “Meet and Greet” triage team. This team is run by senior ED nurses with advanced assessment skills who identify service users who may not require attendance at ED but can be safely redirected to other services eg GP or walk-in-centre. When the “meet and greet” triage team system is running, the PALS officer works along side the triage nurse for part of the day. When the “meet and greet” team is not in place, reception will refer patients to PALS. On these occasions the number of patients referred to PALS will be dependent on the knowledge base and experience of the individual staff on reception.

During the last year 3, 225 patients were seen by the PALS officer in the ED, and 702 of those patients were redirected to services outside hospital.

The table below provides a break down of the figures

April 2011 to March 2012	Total Patients Seen	GP Information (1)	GP Details (2)	Return to ED (3)	Redirected to GP services	Referrals to other services
1 <sup>st</sup> quarter	876	347	297	05	80	147
2nd	768	271	328	03	71	95
3rd	755	273	340	14	88	40
4 <sup>th</sup>	826	343	292	10	127	54
<b>Total</b>	<b>3225</b>	<b>1234</b>	<b>1257</b>	<b>32</b>	<b>366</b>	<b>336</b>

(1) – Patients who were given information/assistance leading to GP registration.

(2) – PALS provided correct GP details for patients who were unsure of their GP details or status (registered or not)

(3) – Patients that could have been discharged but that PALS was unable to arrange same day appointments for and who were then seen in ED.

Total patients seen: 3,225

Total patients redirected to GPs and other services: 702

Total patients seen by PALS who were not booked in: 619 (39 patients came to ED for GP registration)

## 2. COMPLAINTS REPORT

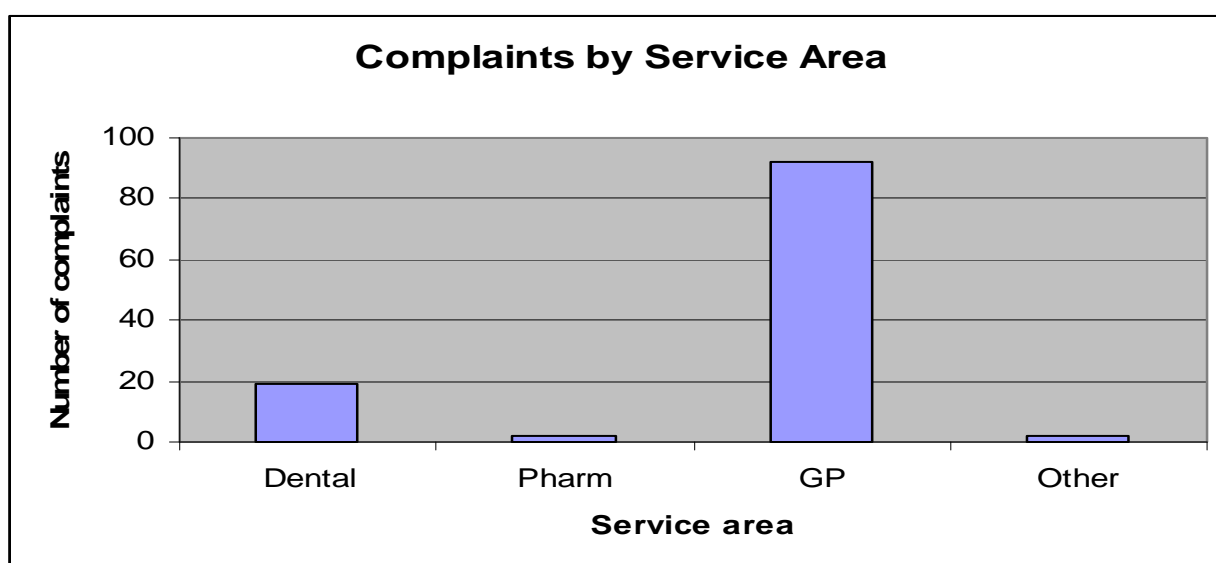
NHS Southwark received 117 (compared to 97 in the previous year) formal complaints from 1 April 2011 – 31 March 2012 relating to services within Southwark. Of the complaints received 92 involved General Practices (GPs – 78 in the previous year), 19 involved Dental Practices (12 in the previous year) and two about pharmacies (four in the previous year). There were 4 other complaints: one about the Walk in Centre, one about SELDOC (two in the previous year) and two about community outpatients: Ear Nose and Throat (ENT) and one about dermatology. This is an increase on the 97 complaints received in the previous year. The majority of the complaints received were related to general practice.

### 2.1 Independent Contracted Services

The contracted complaints received for each quarter is in the table below:

Quarter	Q1	Q2	Q3	Q4
Number of Complaints	33	30	21 (incl 2 about community outpatients)	33

**Table 1 Complaints by service providers**



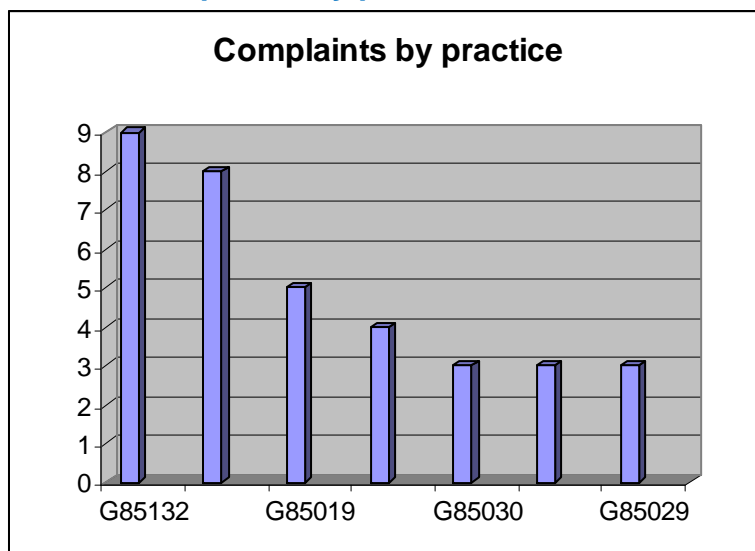
Of the General Practice complaints, there were several practices that received more than five complaints. A GP practice in the south received nine complaints, a GP practice in the North received eight complaints, another GP practice in the North received five complaints, another GP in the South received four complaints and three further all received three complaints.

No Dental Practice received more than two complaints in the year.

The Complaints team worked closely during the year with the members of the Issues of Concern team at NHS South East London. There continued to be concerns related to a GP

practice in the North regarding the failure to acknowledge or respond to complaints. This concern continues at the time of writing this report as the problem has not yet been suitably resolved.

**Table 2: Complaints by practice**



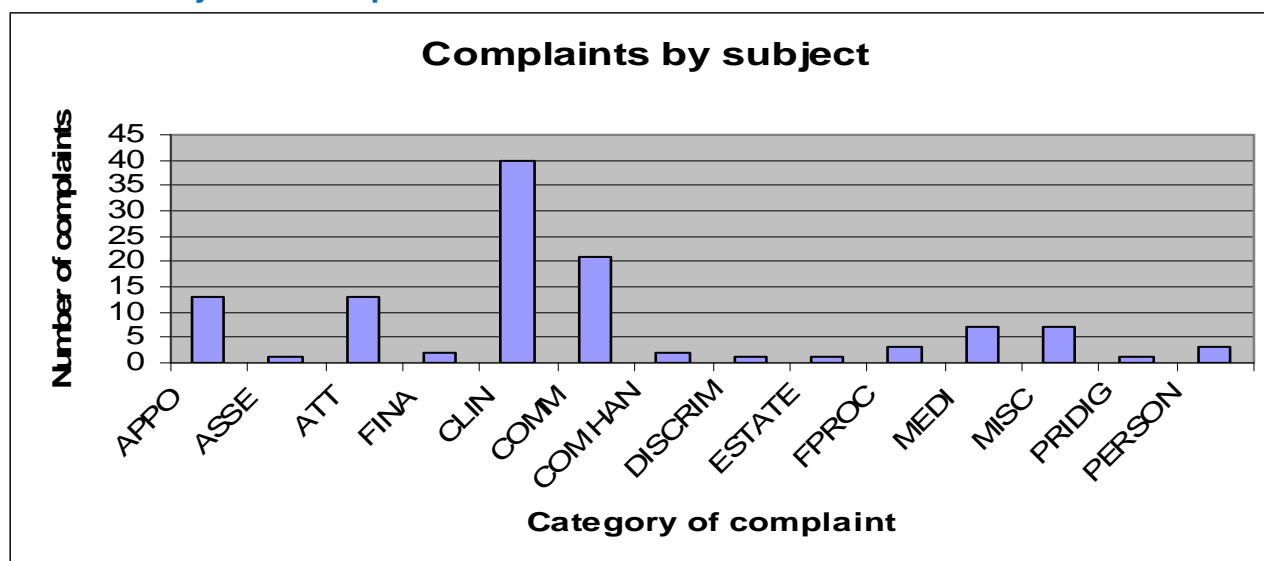
The above complaints are either where the complainant has chosen to copy us into the initial complaint directed to the practice, or have chosen to write direct to us with the complaint. If it is the latter, consent is required from the complainant to share the information with the practice. The complaints team do not actively become involved in managing complaints once they are forwarded to practices apart from to chase up responses, confirm that responses answer the complaint.

The complaints team can become more actively involved where more serious issues are identified and liaises with the primary care directorate at the NHS South East London where there is repeated failure to answer complaints and also liaises with the Medical Director for serious clinical concerns. In both of these latter cases the BSU / NHS South East London may choose to investigate the complaint directly rather than refer back to practice.

## 2.2 Subject of complaints

The most frequent causes of complaint were “clinical treatment” and communication/information to patients. Other notable categories were “appointment systems” and “Attitude of staff”.

**Table 3: Subject of Complaints**



**Key**

APPO=Appointments; ASSE=Assessments ; ATT=Attitude; FINA = Financial Cost of treatment, CLIN=Clinical; COMM=Communication; COMPHA=Complaints Handling; DISCRIM = Discrimination, ESTATE=Premises; FPROC=Failure to follow procedures; MEDI = Medication, OTHER=Miscellaneous, PRIDIG = Privacy and Dignity, PERSON – Personal

**2.3. Annual Complaints Return**

GPs and Dentists are required to report to us annually on the numbers and areas of the total complaints they receive. These figures are submitted to the Department of Health as the KO41b return. The number of complaints submitted via KO41b for the dentists in 2011-2012 was 70 (down from 136 the previous year) and the number submitted by General Practice equalled 399 (a rise from 359 recorded for the previous year)

The tables below denote the figures for both groups of contractors.

KO41(b) Return	Comms /Attitude	Clinical	Other	Surgery management	Premises	Total
GP Practices 2010-11	131	118	44	63	3	359
GP Practices 2011-12	99	130	35	58	4	399

It should be noted that although the number of complaints referring to attitude or communication had reduced in GP practice , there was an increase In the number of clinical complaints reported.

KO41(b) Return	Comms /Attitude	Clinical	Other	Surgery management	Premises	Total
Dental Practices 2010-11	41	41	27	19	8	136

<b>Dental Practices 2011-12</b>	15	24	12	9	1	<b>70</b>
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It should be noted that there was a significant reduction in the amount of complaints reported about dental practices during this year.

## 2.4 Trends in Complaints Handling

It should be noted that we have previously reported on provider response times, so this is the first time we have reported on independent contractor handling of acknowledging complaints and response times. 100% of the complaints received by the BSU complaints team were acknowledged within three working days, which is a statutory requirement. All independent contractors are required to have their own complaints process in place and acknowledge complaints within three working days.

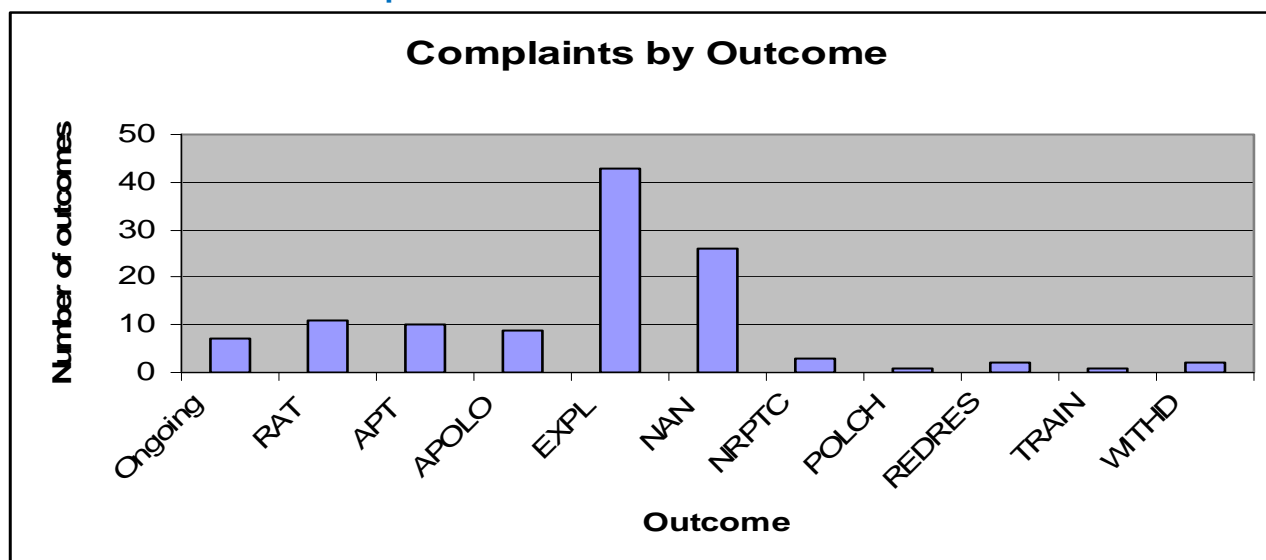
Although there are no statutory requirements in place for when a practice needs to respond to a complaint, other than the statutory six month timeframe, provided they keep the complainant informed, it is considered good practice to have a target date by which time the response should be sent.

Previously for the provider services there was a locally agreed time of 25 days, and we have set the same as a benchmark for complaints handling when we are aware of complaints that have arisen with independent contractors. In the past year 54% of the complaints have been responded to within 25 days.

## 2.5 Outcomes

The outcome of the complaints in many cases led to explanations (see table below). Although the number of apologies recorded is lower than explanations it would be expected that an apology is an integral part of the explanatory process, however this may not always be the case.

**Table 4: Outcome of Complaints**



### **Key to table**

ONGOING = Ongoing, RAT=Requested action taken; APT = Action Plan, APOLO=Apology; EXPLAN=Explanation; NAN=No action necessary; NRPTC = No Response from Practice to Complaint, POLCHN = Policy Changed, REDRES = Redress, TRAIN=Training; WITHD=Withdrawn

### **2.6 Complaints about commissioned services**

There were very few complaints with regards to commissioned services over the year. There was one about the community ENT clinic, which also involved the referral pathway and one about a member of the clinical staff in one of the community Dermatology clinics.

### **2.7 Requests for an Independent Review from the Parliamentary and Health Service Ombudsman (PHSO)**

There were three cases that progressed to PHSO, two concerning dentists, and one about deregistration of a patient from general practice. The two regarding the dental cases were both halted by the PHSO, one because there was a greater chance of local resolution as the dental practice had changed hands. In the other dental case the PHSO decided not to pursue the investigation, but did not provide a reason.

At the time of writing this report the one case concerning the deregistration is still under investigation by the PHSO.

One case that had been open at the end of the previous year was closed during this period. The complaint had involved a failure to diagnose and had involved both an acute provider, a GP practice and the PCT. The PHSO upheld the complaint on all accounts.

### **2.8. Future Developments**

As from 1 April 2012, NHS Southwark Clinical Commissioning Group will have a statutory complaints function for the services it commissions. The CCG will purchase this function from the NHS South London Commissioning Support Unit. The NHS Commissioning Board will have a statutory function for the services it contracts such as GPs, pharmacy, dental and opticians.