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PALS AND COMPLAINTS REPORT 1 October 2012- 31 December 2012

1 Patient Advice and Liaison Service Activity

The PALS Helpline is now provided in-house and is provided from 9.30 am - 12.30 pm and 2 pm - 4 pm.

The total number of enquiries the PALS Helpline dealt with in this quarter was 381, down from 436 in the previous quarter.

Of the 381 Helpline cases, 101 were straightforward signposting and 280 required more detailed information on a range of issues including GP registration, medication issues, dental charges and clinical treatment. Overall numbers of enquiries through the different PALS routes (helpline, email and direct to the office) amounted to 455.

1.1 Casework

110 of the PALS enquiries required case work. Of the 110 cases, 36 came from the Helpline, 71 via email and three directly to the office. Cases are enquiries where some investigation is required beyond information giving. A case may, for example, involve patients requesting immunisation records, individual funding requests or treatment abroad.

	Oct	Nov	Dec	Total
GP*	30*	13*	12*	55
Dental	4	2	3	9
Pharmacy	2	2	0	4
Optometry	0	0	0	0
IFR	4	0	0	4
Treatment Access Policy	0	0	0	0
Commissioning	0	1	0	1
Patient Services	1	2	1	4
Community services	4	3	3	10
Miscellaneous	3	4	7	14
SELDOC	0	0	0	0
Acute	1	4	0	5
FOI	1	2	1	4
Total	50	33	27	110

Below is a table of the cases logged for services:

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* GP breakdown	Oct	Nov	Dec	Total
Registration Issues	12	6	1	19
Access-appointments, phone	4	1	2	7
Clinical inc. medication	6	4	2	12
Other	8	2	7**	17
Total	30*	13*	12*	55

****3** of these were advice about making a complaint about the practice.

1 was positive feedback about their experience at the practice.

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

Until 30 September 2012 Southwark Business Support Unit had one PALS officer based in the adult Emergency Department at King's five days a week. The role of the PALS officer was to support the redirection to General Practice of patients attending ED with a primary care need. As from 1 October 2012, this ceased to be a NHS Southwark provision as the service TUPE'd over into Kings College Hospital.

2. COMPLAINTS REPORT

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2.1 Independent Contracted Services

Southwark received 32 formal complaints from 1 September 2012 – 31 December 2012 as opposed to 29 during the previous quarter. Two complaints related to Commissioned services -one complaint related to SELDOC and the other related to care received at the Lister Walk in Centre (still awaiting consent to share).

Of the other two non-Primary Care Independent Contractor complaints received one related to an individual funding request (IFR). The other one was a highly complex complaint received which crossed organisational boundaries. It involved primary care, community, intermediate care and adult social care. Because of the complexity of the complaint it was agreed by all organisations that each of the responsible services should respond, but that the handling of the complaint would be co-ordinated by the NHS Southwark Complaints Manager. This was agreed by the complainant.

At the time of writing the report the complainant has received responses from Southwark Council and Primary Care. Community and Intermediate Care still have to respond. The complainant is regularly updated with the progress of the investigation by the NHS Southwark Complaints Manager.

Of the 28 remaining complaints, 25 related to GP practices, two related to Pharmacies and one related to a Dental Practice.

Six complaints out of the 32 complaints received in the quarter were not investigated-four regarding GP practices, the Dental practice and one of the pharmacies did not proceed as we never received consent to share the complaints.

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Six complaints (five investigated) were concerning one particular practice, specifically relating to problems accessing appointments and the attitude of staff. One other practice received five complaints (four investigated) which mainly related to staff attitude, clinical care and appointments. Over the last few quarters we have had increasing problems receiving acknowledgements and responses from the latter of these two practices.

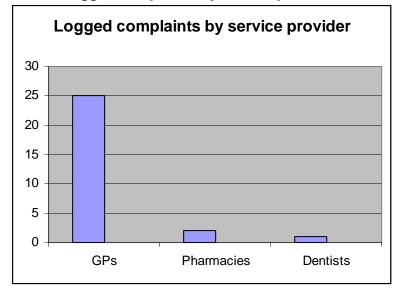


 Table 1 Logged complaints by service providers

The above complaints are either where the complainant has chosen to copy us into the initial complaint directed to the practice, or has 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, and to confirm that responses answer the initial 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 Southwark/ NHS South East London may choose to investigate the complaint directly rather then refer back to practice. The complaints team may co-ordinate complaint responses when they are about more than one service or a GP and another service.

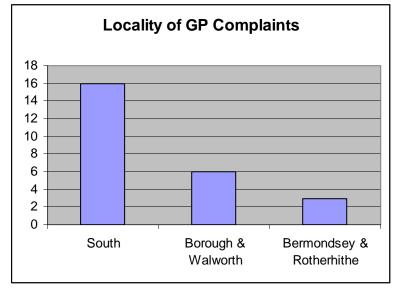
GPs and Dentists are required to report to us annually on the numbers and areas of the total complaints they receive. These figures are submitted to the Department of Health as the KO41 return in April of each year

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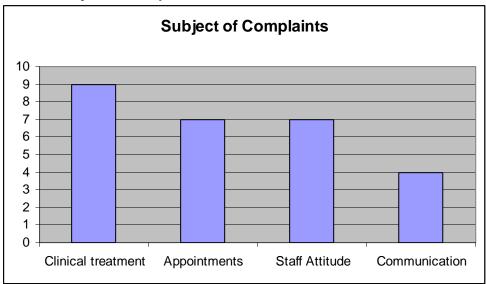
Table 2: Locality of GP complaints



2.2 Subject of complaints

The most frequent causes of complaint were "clinical treatment" (9) followed by seven each concerning appointments and staff attitude, and four concerning communication.

Table 3 Subject of complaints



2.3 Trends in Complaints Handling

100% of the complaints received by the Southwark 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.

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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.

8 (30%) of the complaints investigated between October and December were opened and closed within 25 days. Five (19%) were closed between 26 days. 13 (50%) of the cases remain ongoing at the time of writing the report.

2.4 Outcomes of Complaints

The outcome of the complaints in most cases led to explanations, apologies or requested actions being taken (see table below). Of the cases closed in this quarter there were five explanations, four apologies and three actions.

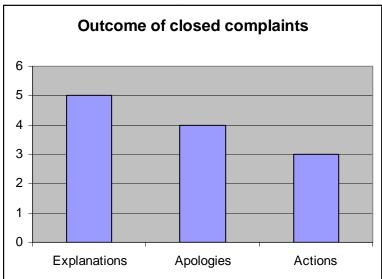


Table 4: Outcome of Complaints

2.5 Complaints about commissioned services

There was one complaint about the GP led walk in centre, and one complaint concerning SELDOC (this latter complaint also related to the ED services provided by the foundation Trust)

2.6 Requests for an Independent Review from the Parliamentary and Health Service Ombudsman (PHSO)

Currently there is one complaint with the Parliamentary and Health Service Ombudsman (PHSO). It relates to the removal of the patient from a GP practice list and also to do with clinical treatment provided. Removal from practice lists was an area highlighted in the Ombudsman's 2010-2012 Annual Report as an area of concern as she noted that 21% of the complaints about GPs that the Ombudsman investigated nationally were about being removed from GP lists. This has remained a common theme in 2011-2012 report,

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Listening and Learning, which has shown an increase on the number of complaints received by their service over the past year in relation to de-registration of patients.

Towards the end of the last quarter we received notification from a Dental practice that they had been contacted by the PHSO requesting details of a complaint they had answered. At the time of writing this report we have been contacted by the PHSO requesting information concerning this complaint. At this stage they are considering whether they will investigate further. This may be something that is not resolved by 31 March 2013.

2.7 Issues of concern involvement with complaints

Towards the end of the previous quarter we received a complaint regarding a serious clinical matter. The allegation was that the practice had failed to make a cancer diagnosis which subsequently led to the death of the patient. The complaint was flagged up with the Head of Issues of Concern and the Medical Directorate. The complaint remains ongoing at the time of this report.

One practice that had a number of outstanding complaints in the previous quarter continued to fail to respond to complaints. The Head of GP Contracting and Performance NHS South East London and the Complaints Manager of NHS Southwark have both worked with the GP to resolve this. This work remains ongoing. Ongoing intransigent problems in this area subsequently led to a further Breach of Contract notice being issued in December 2012

2.7 Future Developments

On 1 October 2012 NHS Southwark ceased to manage Adult Social Care complaints. This function has returned to Southwark Council.

Complaints handling for Commissioned Services will move into the South London Commissioning Support Unit.

It has been identified that the future handling of complaints concerning independent contractors will rest in the National Commissioning Board. There is still, however, no clarity about how this will be provided. In the meantime, NHS Southwark remains responsible for the management of complaints until its dissolution on 31 March 2013.