

Name of Meeting:		Paper Number	
Bracknell & Ascot CCG, Slough CCG, Windsor, Ascot & Maidenhead CCG Joint Quality Committee		BEFQ15-05-13	
Title of Paper			
PALS and Complaint Report – Q4 report and 2014/15 annual report			
Date of Paper		Date of Meeting	
April 2015		27 May 2015	
Purpose of Paper			
Review	<input checked="" type="checkbox"/>	Note	<input type="checkbox"/>
		Agree	<input type="checkbox"/>
Summary			
The Q4 and annual PALS and Complaints reports of complaints and PALS contacts made to the CCGs.			
Recommendations			
For Quality Committee to review the reports			
Has the content of this paper been discussed with CCG leads and if so what was the outcome?			
No			
Financial Implications			
None			
Has an Equity Impact Screening been undertaken? If so please attach			
N/A			
Please list any other committees or groups where this paper has been discussed.			
None			



*Bracknell and Ascot
Clinical Commissioning Group*



*Slough
Clinical Commissioning Group*



*Windsor, Ascot and Maidenhead
Clinical Commissioning Group*

PALS & Complaints Team (PACT) Report 2014/15

Quarter 4 (1 January to 31 March 2015)

1.0 Executive Summary

1.1 Purpose

The purpose of this report is to give an overview of all PALS and Complaints contacts for Quarter 4 - January to March 2015 in order to identify areas of concern which may require action by the NHS Clinical Commissioning Groups (CCGs) in the east of Berkshire.

1.2 Process

There are processes in place to ensure Central Southern Commissioning Support Unit (CSU) captures the relevant PALS and Complaints information required for CCG reporting.

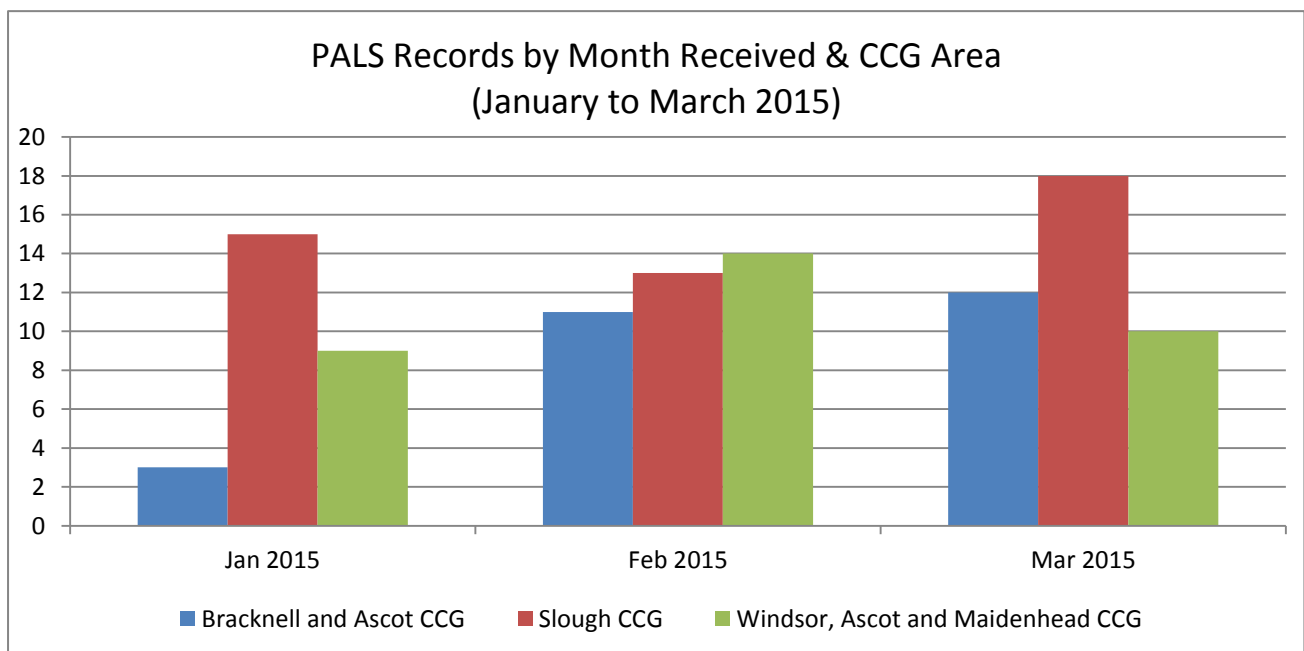
2.0 Patient Advice and Liaison Service (PALS)

2.1 PALS Contacts

In Quarter 4 of the financial year 2014/15 the Berkshire PALS Team dealt with a total of 195 enquiries countywide. Where possible, and if the enquirer is prepared to share the information, we obtain the details of the GP practice that the enquirer is registered with, in order to determine their CCG. As PALS is a confidential service not all enquirers are prepared to advise us of this information but we have been able to assign 105 enquiries to the following CCGs:

CCG	No. of PALS enquiries
Bracknell & Ascot	26
Slough	46
Windsor, Ascot & Maidenhead	33
Total	105

Of the 105 contacts recorded in Quarter 4, January saw 27 (25.7%) contacts; February 38 (36.2%) contacts and March 40 (38.1%) contacts.



2.2 PALS Contacts by Service Line

The table below shows PALS contacts recorded in Quarter 4 by service line. Concerns, comments and compliments are attributed to a total of 25 service lines.

The largest proportions of enquiries are represented by 'General Practice' 26 (24.8%); 'Acute Services' 21 (20%); and 'Dental Services' 10 (9.5%).

Basic enquiries relating to Primary Care have been dealt with by the PALS Team offering information, advice and signposting. Complex enquiries have been referred directly to the provider or to NHS England, the responsible commissioner for Primary Care services.

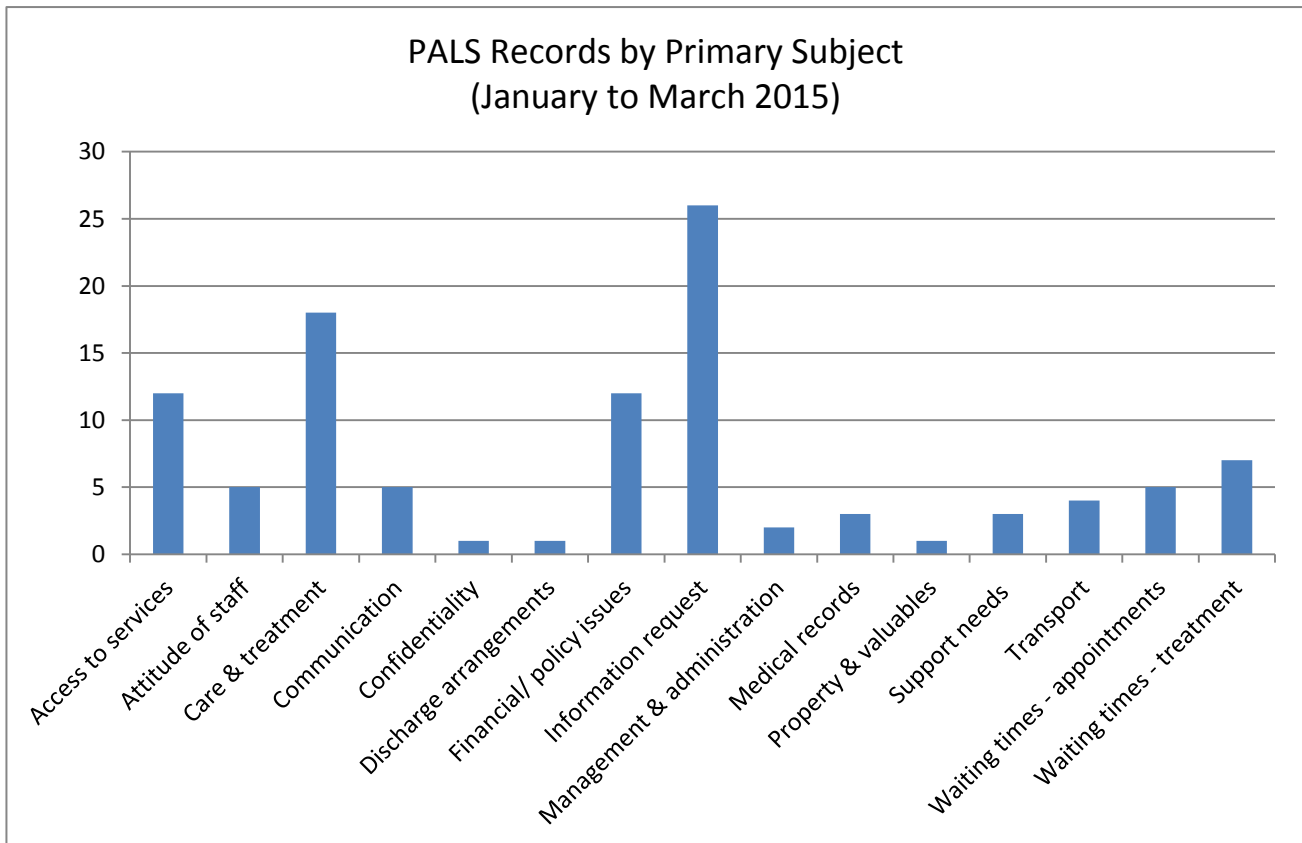
There were no identified service trends within the 21 'Acute Services' cases, although it is noted 3 cases concerned the KEV11 Eye Clinic.

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Acute services	7	8	6	21
Children's services	0	1	0	1
Commissioning	1	1	1	3
Continuing Care	1	1	3	5
Corporate/Policy	0	0	2	2
Dental services	4	5	1	10
District Nursing	1	0	0	1
Equipment/Medical Loans	0	1	0	1
General Practice	4	14	8	26
IFR	1	0	1	2
IT	0	1	0	1
IVF	0	1	1	2
Medical Records	0	2	0	2
Mental Health	1	1	1	3
Midwifery	0	1	0	1
Minor Injuries Unit	1	0	0	1
Non-emergency Helpline	0	2	2	4
Other	1	2	2	5
Out of Hours GP Services	1	1	0	2
Outpatients	0	0	1	1
PALS	0	0	1	1
Physiotherapy	0	0	1	1
Support services	0	1	0	1
Transport	3	2	2	7
Walk in Centre	0	1	0	1
Total	26	46	33	105

2.3 Top Themes by Primary Subject

PALS contacts from the East Berkshire area are categorised into the following primary subjects, which identify emerging themes and may require action by the CCGs.

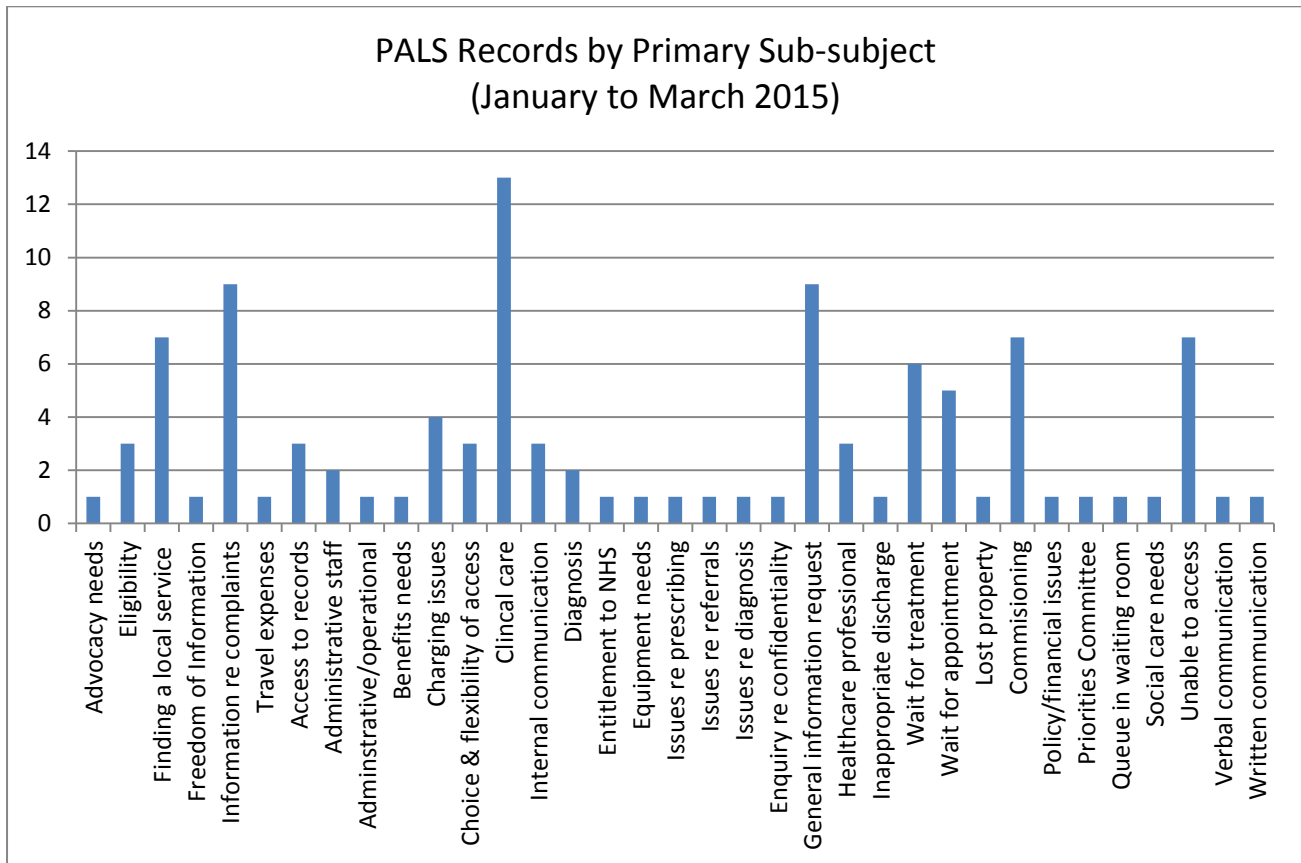
The top five themes which represent the largest proportion of enquiries during Quarter 4 are 'information requests' 26 (24.8%) followed by 'care and treatment' 18 (17.1%); 'access to services' 12 (11.4%); 'financial and policy issues' 12 (11.4%); and 'waiting for appointments and treatment - combined' 12 (11.4%).



2.4 Top themes by Sub-Subjects

The graph below shows a further breakdown of PALS contacts assigned to the three CCGs in the East Berkshire area.

In addition to the large volume of requests for general information, guidance about how to register with a new GP/NHS dental practice or making a complaint, PALS received a large portion of enquiries relating to clinical care in Quarter 4. There were no identified themes within this sub-subject and enquiries mainly concerned general practice.



2.5 Areas of concern/interest for the CCGs located within East Berkshire

There were no identified areas of concern in Quarter 4 to report to the CCGs.

4.0 Complaints

In Quarter 4 of the financial year 2014/15 the Complaints Team received a total of 32 formal complaints and MP letters on behalf of the three CCGs in East Berkshire, an increase of 13 complaints from the previous quarter.

This is made up of 14 cases for Bracknell & Ascot CCG, 6 cases for Slough CCG and 12 cases for Windsor, Ascot & Maidenhead CCG.

CCG	Total Contacts	Ack within 3 working days	Closed within 25 working days	Closed over 25 working days	Remain open
Bracknell & Ascot					
Complaints	4	4	0	2	2
MP Letters	10	10	5	1	4
Slough					
Complaints	6	5	3	0	3
MP Letters	0	0	0	0	0
Windsor, Ascot & Maidenhead					
Complaints	10	10	5	0	5
MP Letters	2	2	0	0	2
Total Complaints	32	31	13	3	16

100% of complaints were acknowledged within the three working day KPI timescale for Bracknell and Ascot CCG and Windsor, Ascot and Maidenhead CCG. One Slough CCG complaint was not acknowledged within the KPI timescale. This complaint concerned an internal CCG matter which was not immediately brought to the Complaints Team's attention. The CCG is handling this complaint internally but the Complaints Team has acknowledged and logged the complaint on their behalf.

In addition to the open complaint being handled by the CCG, a further 15 complaints remain open whilst the Complaints Team wait for input. Of these 15 complaints, eight were received in March 2015 and are therefore in progress and within the 25 working day timeframe.

Four open complaints were received in February 2015 and have recently breached the 25 working day timescale. Three complaints concern the CHC Service and we await input following the investigation. The fourth complaint relates to the commissioning pathway for a CT scan. The investigation has been completed but the Complaints Team are seeking clinical advice regarding the response.

Three open complaints were received in January 2015 and have breached our recommended timescale. Two of these complaints relate to the NHS 111 Service and the GP Out of Hours Service. Holding letters have been sent to the complainants explaining the delay is due to South Central Ambulance Service (SCAS) trying to trace the complainants' calls to their service in order for SCAS to do a thorough investigation. The third complaint concerned Wexham Park Hospital who requested an extension to their investigation deadline. The complainant has been informed.

Three complaints took over 25 working days to complete due to seeking further information from the Investigating Officer. All complainants were kept informed of progress during the delay.

4.1 Complaint Status

Of the 32 complaints received in Quarter 4, 16 have been closed with the following outcomes.

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Local resolution	0	0	1	1
Not upheld	2	0	0	2
Upheld	2	0	0	2
Case not pursued	0	1	2	3
Explanation given	1	0	1	2
No further action	0	2	0	2
Referred to other organisation	3	0	1	4
Total	8	3	5	16

4.2 Complaints by Service Line

The table below shows complaints recorded in Quarter 4 by service line.

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Acute services	2	2	1	5
Commissioning	0	1	0	1
Community Neuro Rehab	1	0	0	1
Continuing Care	3	1	6	10
Corporate/Policy	0	1	0	1
Dermatology	1	0	0	1
General Practice	1	0	0	1
Hearing & Balance services	1	0	0	1
IFR	1	0	0	1
Immunisation	1	0	0	1
IVF	1	0	0	1
Mental Health	0	0	2	2
Non-emergency Helpline	0	0	1	1
Out of Hours GP	0	0	1	1
Phlebotomy	1	0	0	1
Physiotherapy	0	0	1	1
Support services	1	0	0	1
Transport	0	1	0	1
Total	14	6	12	32

4.3 Complaints by Primary Themes

Complaints are categorised into the following primary subjects.

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Access to services	4	1	1	6
Attitude of staff	0	1	0	1
Care and treatment	2	2	2	6
Communication	0	1	2	3
Financial/policy issues	4	1	1	6
Management/administration	2	0	4	6
Support needs	1	0	0	1
Wait for treatment	0	0	2	2
Medication	1	0	0	1
Total	14	6	12	32

There were six complaints (18.75%) relating to each of the following main themes: 'access to services'; 'care and treatment'; 'financial and policy issues' and 'management and administration'.

The following complaints may be of interest to the CCGs:

Access to services

One MP letter highlighted the variation in the process for monitoring patients on Warfarin. Those patients attending their GP surgery receive a blood test, and their sample is sent to Frimley Park Hospital. The INR result is sent back to the GP who then determines whether the patient's Warfarin level should be altered. Those patients attending the hospital receive a pin prick blood test which provides instant results and a more streamlined process. The CCG response acknowledged this variation and advised the commissioning plans for 2015/16 will address this by offering a pin prick test to all patients as close to home as possible.

One complaint concerned a Bracknell patient who could not be directly referred for a CT scan by her GP due to a commissioning restriction. The GP was obliged to refer the patient to a consultant first who in turn would refer for the scan. The complaint was that this restriction had caused an unnecessary delay to the patient and that GPs should be able to directly refer patients for the scan if it is felt the most appropriate first line investigation. The complaint investigation suggested this restriction was only placed on Bracknell GPs as their commissioners feel there is a risk of GPs over referring. The Complaints Team are seeking further guidance on this matter ahead of drafting a response for the CCG.

One MP letter concerned a patient who had called NHS 111 four times on Christmas Eve 2014 but received no response. This complaint is currently being investigated by South Central Ambulance Service (SCAS) who have experienced difficulty in tracing the calls. The Complaints Team await input from SCAS and holding letters have been sent to the complainant.

Care and treatment

Three complaints were received about Wexham Park Hospital. Of these complaints only one has been led by the CCGs and is currently under investigation. This complaint raised concerns with clinical care, poor communication and out of date hospital food.

Financial and policy issues

Three complaints concerned the CHC Service. One case is particularly complex and relates to a tetraplegic patient who requires a new home care package. CHC are currently addressing the patient's needs and have been asked to respond to correspondence from a range of sources, including the patient, the patient's family, solicitors and a MP which has proved difficult to manage.

Management and administration

All six complaints relate to the CHC Service and mainly concern the time taken to process claims and poor communication. (In addition there were two complaints logged under 'Communication' from solicitors advising they had been unable to obtain an update on their CHC cases).

One MP complaint raised concerns with a care agency employed to assist a CHC funded patient. The complaint upheld the concerns regarding the original care agency and explained how CHC had intervened to resolve the ongoing care needs for the patient.

Waiting times for treatment

One MP complaint remains open whilst the CCGs ratify the input received from SCAS (NHS 111) and the GP Out of Hours Service regarding service provision. The complaint outlined a patient's experience of waiting 11 hours for a GP visit to prescribe medication for a UTI. Concern has been made about staff shortages due to the difficulty in recruiting GPs to work for the Out of Hours Service and the commissioning of NHS 111. The MP and constituent have been sent holding letters whilst this review takes place.

4.4 Actions taken following Complaints

There were two upheld complaints for the CCGs to note in Quarter 4. One complaint concerned the variation in Warfarin testing, and one complaint concerned care agency provision. The CCGs are asked to note the reference to the CCG commissioning plans for 2015/16 in regard to the monitoring of Warfarin patients.

4.5 Recommendations

There were no emerging trends, themes or hotspot areas requiring immediate attention during Quarter 4.

5.0 SEAP referrals

There were no complaints referred to the CCG by SEAP Advocacy Service in Quarter 4.

6.0 Ombudsman

The Complaints Team was not made aware of any new complaints received by the CCGs in East Berkshire from the Parliamentary and Health Service Ombudsman in Quarter 4 2014/15.

Patient Advice and Complaints Team (PACT)

Annual Report

1 April 2014 to 31 March 2015

Bracknell & Ascot CCG

Slough CCG

Windsor, Ascot & Maidenhead CCG

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Executive Summary

1.0 Purpose

The purpose of this report is to give an overview of all Patient Advice and Liaison Service (PALS) and Complaints contacts for the year 1 April 2014 to 31 March 2015.

This report examines the complaints received by the three Clinical Commissioning Groups (CCGs) in the east of Berkshire during the financial year 2014/15. The organisation has a statutory duty to respond to complaints from users of its services and of the services it commissions, and to record and report under the Local Authority Social Services and National Health Service Complaints {England} Regulations 2009:

- The number of complaints
- The number that were well-founded (upheld)
- The number referred to the Parliamentary and Health Service Ombudsman
- The subject matter of importance arising from the complaints or handling thereof
- Action taken, or being taken, to improve services as a result of the complaints received.

This report provides assurance that the CCGs are systematically recording the formal complaints and concerns raised through PALS, noting trends in complaints and taking action to address concerns raised by users of its services.

1.1 Objectives and 'making a difference'

A key objective of the organisation is the willingness to change, improve and evolve in response to complaints. The lessons learned and trends identified through monitoring data collected through complaints plays a key role in improving the quality of care received by patients and is a priority for the CCGs.

There are processes in place to ensure South, Central and West Commissioning Support Unit; formerly Central Southern Commissioning Support Unit (Central Southern) captures the relevant PALS & Complaints information required for CCG reporting.

1.2 Compliance with response targets

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 set out the rights of complainants and the expectations to investigate and respond in an appropriate and timely manner. The CCGs monitor compliance with these requirements by measuring:

- Performance of acknowledgement of complaints within three working days, against a target of 100%.

The CCGs in the east of Berkshire achieved 97.8% against this target for 2014/15 (table one, page five).

- Performance against agreed timescale for final response:

The CCGs have chosen to maintain a target of full written response, sent from the Chief Officer within 25 working days of receipt of complaint. Complaints received via MPs are handled in line with the NHS

complaints regulations, also signed by the Chief Officer of the three CCGs within 25 working days (table one, page five).

1.3 Complaints referred to the Parliamentary and Health Service Ombudsman (PHSO)

All complainants are advised of their right to approach the PHSO if they are dissatisfied with their response. The CCGs were made aware of two new referrals to the PHSO in 2014/15. All referrals to the PHSO are reviewed to identify learning and improvement by the CCGs (section 3.0, page 11).

1.4 “Well founded” complaints

It is a requirement of the complaints regulations that CCGs set out in their annual report the number of complaints which the CCG decided were well founded during the financial year.

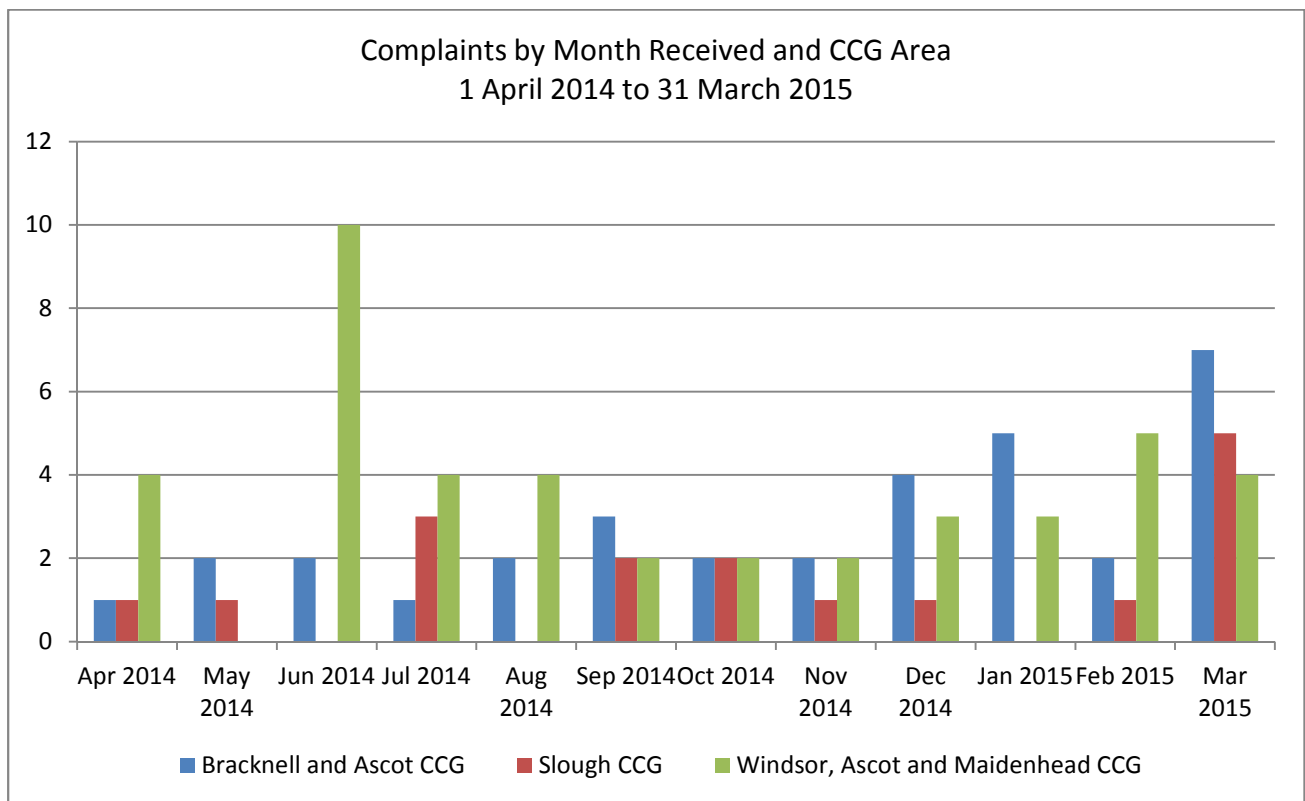
There were 14 complaints upheld in the financial year 2014/15 (table four, page nine).

2.0 Complaints

2.1 Complaints Activity 2014/15

There were a total 93 formal complaints received, of which 45 were raised in MP letters and handled formally (table one, page five).

Chart one – Complaints received by month and CCG – 2014/15



2.2 Complaints Handling

Table one – breakdown of complaints handling in 2014/15

CCG	Total Contacts	Ack within 3 working days	Closed within 25 working days	Closed over 25 working days	Remain open
Bracknell & Ascot					
Complaints	11	11	4	6	1
MP Letters	22	22	14	5	3
CCG Total	33	33	18	11	4
Slough					
Complaints	14	13	10	2	2
MP Letters	3	2	1	2	0
CCG Total	17	15	11	4	2
Windsor, Ascot & Maidenhead					
Complaints	23	23	12	6	5
MP Letters	20	20	8	10	2
CCG Total	43	43	20	16	7
Grand Total	93	91	49	31	13

Of the 93 complaints received, two complaints were not acknowledged within the three working day KPI timescale. This was due to the Complaints Team not being passed the complaint correspondence in the first instance, causing a delay in the process.

31 complaints did not meet the response target of 25 working days, often by just a few days. This was due to the complexity of the complaints; or waiting for a response from the provider organisation or internal service, such as the Individual Funding Request (IFR) Team and Continuing Healthcare (CHC) Service. All complainants were kept informed of progress throughout the process in line the 2009 regulations.

At the time of producing this annual report, 13 complaints remain open. Of these 13 complaints, six relate to CHC and are under investigation. Three of these CHC complaints are currently within the 25 working day timescale, and three complaints have recently breached.

Two complaints concern the IFR Team, of which one case has recently breached the response timescale whilst further information is being sought. The second complaint is under investigation and within timescale.

Two complaints regarding our commissioned services were received in January 2015 and have breached the 25 working day timescale whilst the Complaints Team await provider input. This information has been regularly chased to ensure this is received as soon as possible.

Input has recently been received for two complaints regarding commissioned services and the responses are currently being drafted for the CCGs. The Complaints Team are waiting for authority to act in order to progress with the investigation of the final open complaint.

In all cases where a response has breached the 25 working day timescale the complainants have been kept informed of progress and received an apology for the delay.

Table two – Complaints outcomes (closed cases)

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Local Resolution	2	0	2	4
Not Upheld	8	3	12	23
Partially Upheld	1	1	3	5
Upheld	6	2	6	14
Not pursued by complainant	2	2	3	7
Explanation Given	4	2	4	10
Funding Provided	0	0	1	1
No Further Action	0	2	1	3
Referred to other organisation	6	3	4	13
Total	29	15	36	80

Table three – Complaints by service line

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Acute Dietetics	1	0	0	1
Acute Services	6	4	4	14
Benefits	1	0	0	1
Commissioning	2	2	3	7
Community Neuro Rehab	1	0	0	1
Continuing Care	8	4	18	30
Corporate/Policy	0	1	1	2
Dermatology	1	0	0	1
Drug & Alcohol Services	1	0	0	1
Estates	0	0	1	1
General Practice	3	1	3	7
Hearing & Balance Services	1	0	0	1
IFR	2	2	6	10
Immunisation	1	0	0	1
IVF	1	0	0	1
Mental Health	0	0	3	3
Midwifery	1	1	1	3
Mobility Service	1	0	0	1
Non-Emergency Helpline	0	0	1	1
Out of Hours GP	0	0	1	1
Phlebotomy	1	0	0	1
Physiotherapy - Rehab	0	0	1	1
Support Services	1	0	0	1
Transport	0	1	0	1
Walk in Centre	0	1	0	1
Total	33	17	43	93

2.3 Complaints Themes

Chart two, page eight, highlights the top subject matter for the three CCGs in the east of Berkshire. There were 36 complaints regarding CCG ‘financial and policy issues’ and 14 complaints regarding ‘management and administration’. The majority of these cases related to CHC.

12 complaints concerned ‘care and treatment’. These complaints related to a number of NHS services and there no identified themes, although it is noted five complaints concerned treatment provided by Heatherwood and Wexham Park NHS Trust, now Frimley Health NHS Foundation Trust.

Chart two - Complaints by primary subject

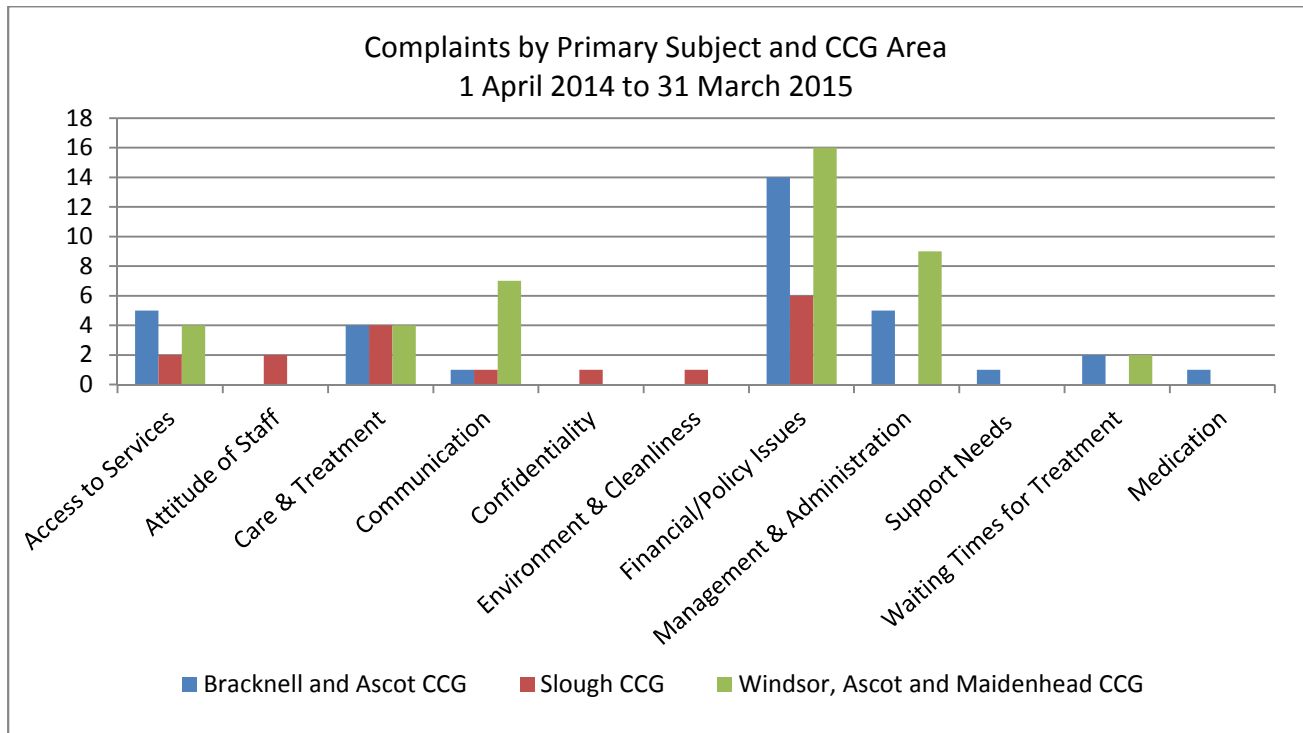
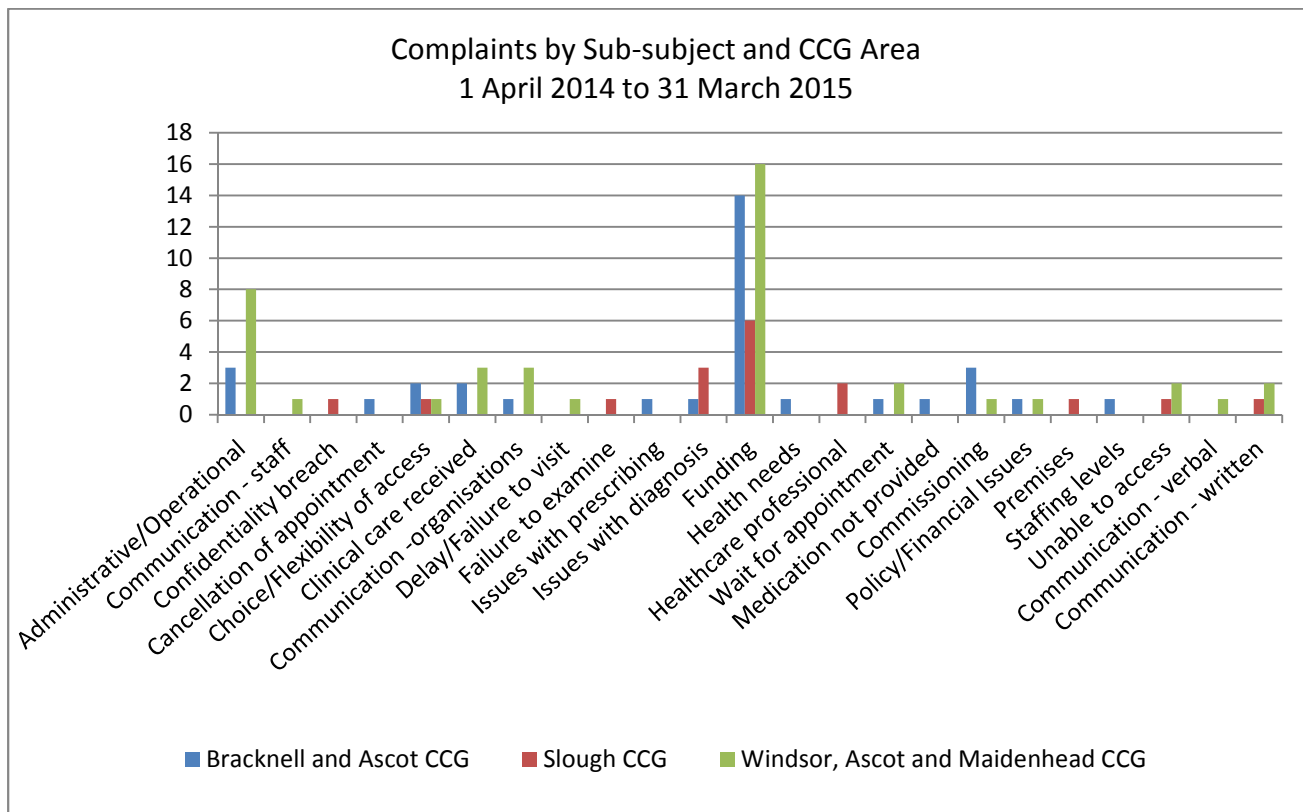


Chart three – Complaints by sub-subject



2.4 Learning and improvement

Table four below provides examples of learning and improvement following complaints received by the CCGs in the east of Berkshire.

Table four – Actions taken following upheld complaints

Service Line	Issues	Actions to Improve Services
Acute Services	Bracknell patient could not be directly referred for a CT scan. The GP was obliged to refer the patient to a consultant first, who in turn would refer for the scan. The complaint advised this restriction had caused an unnecessary delay to the patient.	CCG response recognised the delay on this occasion and explained the reason for this process. The response confirmed this pathway is continually reviewed in line with NICE guidance and patient feedback.
Acute Services	Patient attended Wexham Park Hospital for surgery, as instructed within the appointment letter. However, there was no bed available and the letter had omitted the advice that patients must call on the morning of their operation to check a bed is allocated to them. Patient requests reimbursement for her relative's petrol and loss of earnings that day, and measures put in place to prevent this happening to others.	HWWP response provided an apology for the admin error. They enclosed a goodwill cheque to cover the patient's costs and advised all letters will now provide advice to patients about calling ahead of their surgery to check bed availability. The response also confirmed the patient's surgery has been rescheduled.
Commissioning	Information Governance (IG) issue reported concerning the reception desk at a local Marie Stopes clinic.	The IG Team investigated this complaint with Marie Stopes. The response confirmed the learning outcomes and changes made to their clinic's operational procedures and laptop to ensure the security of patient data and their property.
Continuing Healthcare	The length of time taken to progress a CHC retrospective claim.	CCG response explained the process and volume of cases received, apologising for the delay whilst the CHC service ensured cases are processed in line with the DH guidance.
Continuing Healthcare	The length of time taken for CHC to process and make payment following a retrospective claim (approximately 22 months).	CCG response apologised for the time taken to progress the CHC case and payment. Response explained the current demand on the CHC Service which has had an impact on their ability to progress claims. Response informed that administrative changes had been made to improve the service for future patients.

Continuing Healthcare	Lack of communication to the family regarding a CHC case, and an IG breach.	CCG response apologises for the IG breach, confirming it has been reported. Two patients had been mixed up. Response also apologises for the poor communication to the patient's family and confirmed the case will be looked at again.
Continuing Healthcare	Concern that a CHC appeal had been rejected, and a letter sent via recorded delivery had not been responded to.	CCG response advised an administrative error meant the CHC case had not been processed correctly, so the case would go back to appeal for reconsideration. Response confirmed a new Administrator had been recruited to prevent further errors.
Continuing Healthcare	The length of time taken to progress a CHC retrospective claim.	CCG response explained the process and volume of cases received, apologising for the delay whilst the CHC Service ensured cases are processed in line with the DH guidance. Response apologised for a communication error where the claimant had been informed all the necessary documentation had been received and it was later identified further documentation was required, causing additional delay.
Continuing Healthcare	Patient in need of 24 hour specialist nursing has been trying to obtain CHC for a year.	CCG response apologised for the time taken to do this assessment but confirmed CHC funding had now been agreed and this would be back paid for the patient.
Continuing Healthcare	Original CHC application submitted in April 2010 with no response.	CCG response advised the CHC case notes had been misfiled and despite a search of the filing system this information could not be located. CHC has reported the incident to the IG Lead who is currently investigating. Response advised CHC would be reconsidered if the documentation could be resubmitted.
Continuing Healthcare	The length of time taken to progress a CHC claim, one year after the patient's assessment.	CCG response provided an apology and explanation for the delay. Information was provided about the current progress made on the CHC case and that priority will be given due to the waiting time experienced.
Mobility Service	Patient has waited one year for an electric wheelchair following paralysis.	CCG response confirmed the Mobility Service has contacted the patient to arrange an assessment within a few weeks. If patient meets the eligibility

		criteria she will receive an electric wheelchair much sooner than originally indicated. Response acknowledged the waiting time, advising BHFT are working with commissioners to reduce this.
Phlebotomy	Patients receiving their blood tests in their GP Surgery do not receive the same efficient service as those attending hospital.	CCG response advised this will be considered within the commissioning plans for 2015/16. The CCGs wish to address the variation in service to offer patients a pin prick test as close to home as possible, to improve patient experience and ensure best value for money when purchasing the required equipment.
Support Services	Patient is CHC funded to receive two carers per home visit, but routinely the agency only provides one carer. The patient's non-trained wife is then expected to assist.	CCG response confirmed CHC were aware of the issue and had made alternative arrangements with another care provider. They liaised with the patient's wife to ensure the package was appropriate.

3.0 Parliamentary and Health Service Ombudsman (PHSO)

Two complaints were referred to the PHSO (in Quarter 1 and Quarter 2) within the financial year 2014/15. The first case concerned Continuing Healthcare and was not upheld by the PHSO following their review. The second case related to declined funding via the IFR process which was not investigated by the PHSO and closed.

In all cases, the CCGs within the east of Berkshire, supported by the Complaints Team, worked to ensure all complainants received a full, clear and open response to their concerns, with an assurance of learning and improvement.

4.0 Patient Advice and Liaison Service (PALS)

4.1 PALS Contacts

PALS received a total of 844 enquiries countywide in the financial year 2014/15 of which a total of 484 can be assigned to the three CCGs in the east of Berkshire.

Chart four – PALS contacts by financial quarter

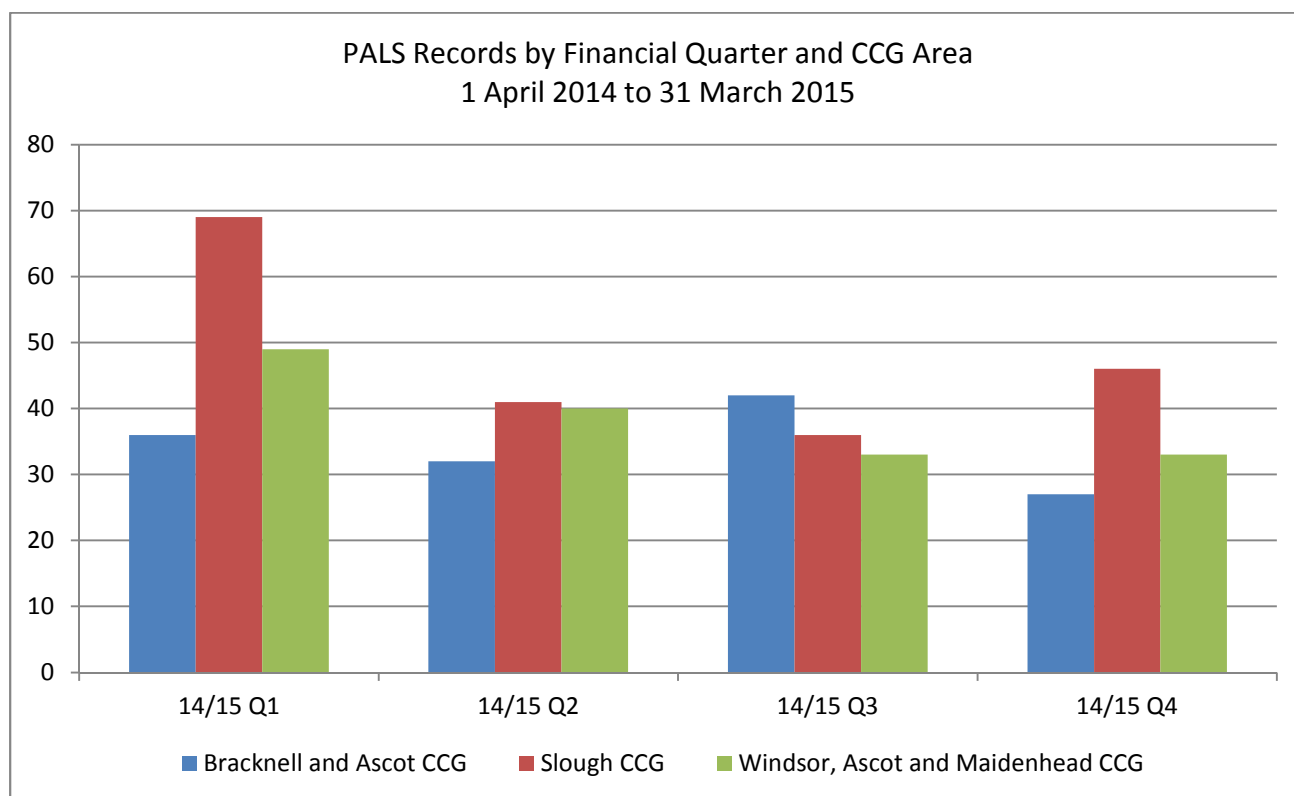
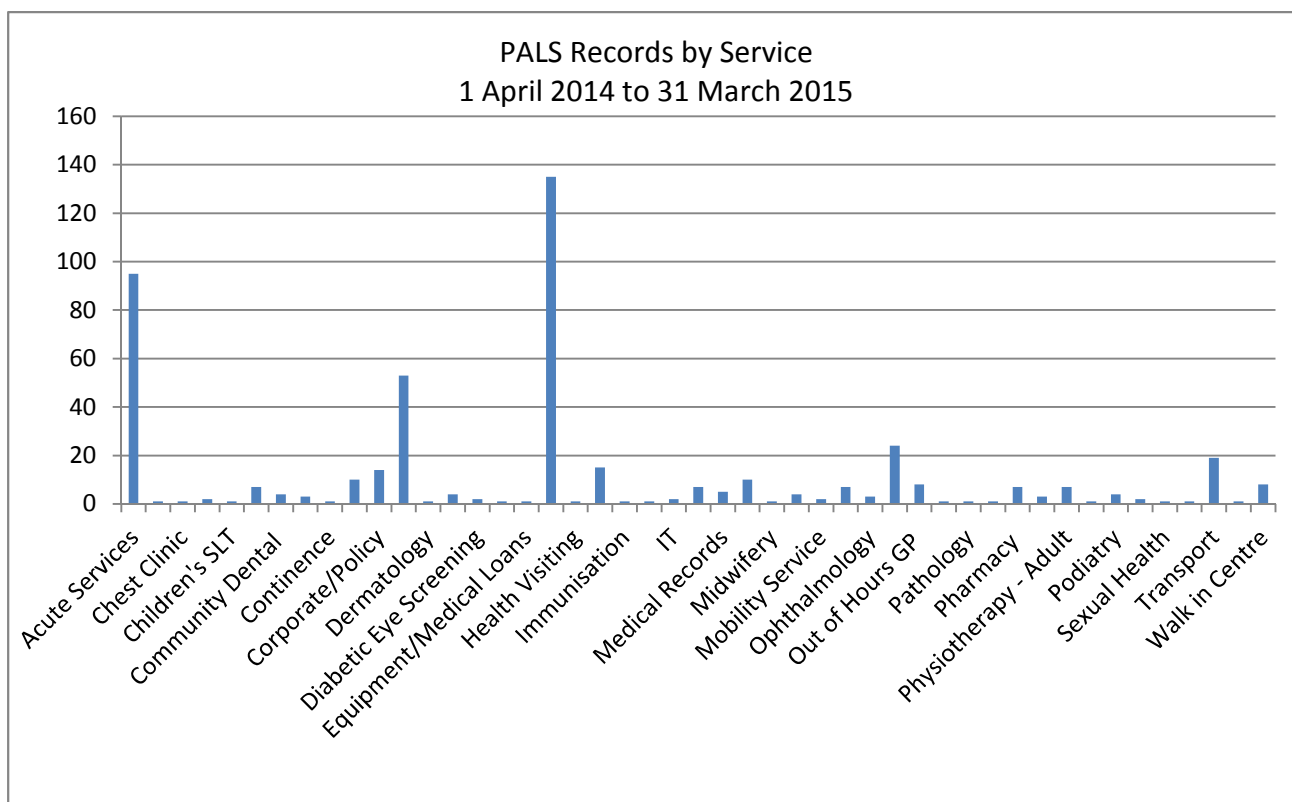


Chart five – PALS contacts by service line



42.8% of the PALS enquiries received related to an NHS primary care service (i.e. GP, dentist, pharmacy and optician). Basic enquiries for local information, advice and signposting were handled by the PALS Team directly; however these services are commissioned by NHS England therefore complex PALS enquiries and formal complaints were all referred to their national contact centre to address.

4.2 PALS Themes

All contacts to PALS are categorised into subjects and sub-subjects to help identify any emerging themes which may require action by the CCGs.

Table five – PALS contacts by subject

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Abuse	0	0	1	1
Access to services	12	17	17	46
Attitude of staff	7	10	7	24
Care & treatment	22	26	20	68
Communication	3	2	2	7
Confidentiality	1	2	0	3
Discharge arrangements	0	1	2	3
Discrimination/Cultural issues	0	1	0	1
Financial/Policy issues	16	16	16	48
Information request	43	74	63	180
Management & administration	3	6	1	10
Medical records	2	6	2	10
Patient's property & valuables	0	1	0	1
Support needs	1	1	3	5
Transport	11	2	3	16
Wait for diagnostic	2	0	1	3
Wait for appointments	9	13	11	33
Wait for treatment	5	14	6	25
Total	137	192	155	484

Table six – PALS contacts further broken down into sub-subjects

	Bracknell and Ascot CCG	Slough CCG	Windsor, Ascot and Maidenhead CCG	Total
Advocacy needs	1	0	0	1
Choose & Book	1	0	0	1
Eligibility	3	0	1	4
Finding a local service	6	12	19	37
Freedom of Information	2	1	3	6
Entitlement for UK residents	1	0	1	2
Information - how to complain	14	26	13	53
IVF	4	1	1	6
Public Health campaigns	2	1	0	3
Requesting clinical info	0	1	2	3
Summary Care Records	0	1	0	1
Travel expenses	5	1	0	6
Access to records	0	4	1	5
Administrative staff	0	7	2	9
Administrative/Operational	1	6	1	8
Benefits needs	1	1	0	2
Cancellation of appointment	2	1	2	5

Charged inappropriately	0	0	1	1
Charging issues	4	3	4	11
Choice & Flexibility of access	1	5	8	14
Clinical care received	12	15	15	42
Communication-other orgs	2	2	0	4
Continuing Care	0	0	1	1
Delay/Failure to visit	0	1	0	1
Delays/Cancellations	0	1	0	1
Diagnosis	4	2	1	7
Did not arrive	0	1	1	2
Discharge planning	0	1	1	2
Entitlement to NHS services	0	0	2	2
Equipment needs	0	1	1	2
Failure to issue results	0	0	1	1
Failure to prescribe	4	3	1	8
Failure to refer	1	1	1	3
Failure to diagnose	1	1	2	4
Enquiry re confidentiality	1	2	0	3
General info request	18	33	25	76
Healthcare professional	7	3	5	15
Inaccurate records	0	1	0	1
Inappropriate discharge	0	0	1	1
Length of wait for treatment	5	11	6	22
Long wait for appointment	7	12	9	28
Lost property	0	1	0	1
Needs interpretation	0	1	0	1
Transport not booked	3	0	0	3
Commissioning	5	6	7	18
Policy/Financial issues	1	0	0	1
Poor dental treatment	0	1	0	1
Poorly fitting dentures	0	2	0	2
Priorities Committee/CRC	3	6	3	12
Queue in waiting room	0	2	0	2
Refused to transport patient	0	0	1	1
Social Care needs	0	0	2	2
Unable to access	10	11	6	27
Unavailability of records	2	0	0	2
Verbal abuse	0	0	1	1
Communication - verbal	0	0	2	2
Waiting time for results	1	0	1	2
Waiting time for test	1	0	0	1
Communication - written	1	0	0	1
Total	137	192	155	484

4.3 Areas of concern raised by PALS enquirers

There were no major themes identified by PALS across the east of Berkshire for the year 2014/15 requiring urgent attention from the CCGs. The trends in PALS enquiries were in line with the last financial year 2013/14 and included:

GP and NHS dental services:

- Registering with a local practice
- Difficulties in accessing an appointment
- How to make a complaint.

As previously mentioned, complex enquiries relating to primary care services were redirected (with the enquirer's consent) to NHS England, as the responsible commissioner.

Acute services:

- How to make a complaint
- How to access the breast screening service/make an appointment for a mammogram
- Concerns regarding accessing appointments in the eye clinic (RBFT)
- Concerns regarding waiting times for an appointment

Commissioning

- PALS regularly receive invitations to engagement events and general information requests addressed to the CCGs. This correspondence is redirected to the relevant CCG members for response.
- Enquiries regarding funding policies and the IFR process.