

Item: 8.4

Report to:	Primary Care Commissioning Committee
Date of Meeting:	22 nd February 2019
Title of Report:	Handling of Pals and Complaints for Primary Care
Presented by:	Sue Lee, Associate Director of Communications and Engagement
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STATUS OF THE REPORT:

To approve	<input checked="" type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input type="checkbox"/>		

PURPOSE OF REPORT:
The purpose of this report is to outline the delegation options for complaints handling in relation to primary care commissioning, and makes a recommendation for a preferred delegated arrangement; and to seek approval to initiate delegation from NHS England.

RECOMMENDATIONS:
It is recommended that:

- a) The committee support Option 2: The full delegation of primary care complaints handling and that NHS Hull CCG becomes responsible and accountable for the:
 - Investigation of a complaint
 - Compiling a response
 - Signing off the response
- b) The CCG initiates delegation for complaints handling from NHS England.

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

If yes, detail grounds for exemption:

CCG STRATEGIC OBJECTIVE
Fully delegated primary care complaints handling will contribute to the achievement of the CCG objectives

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),

Finance	The delegation complaint function should not have a significant financial impact
HR	None specific to this report.
Quality	There is an expectation that delegation will improve the quality of the complaints service provision, and the experience of the service, in primary care.
Safety	The delegation of complaints function should support the improvement of patient safety issue detection.

ENGAGEMENT: (Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)

The Primary Care Communications and Engagement Group, CCG officers working as part of integrated delivery and Healthwatch have been involved in discussions regarding the revision of the delegation arrangements.

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

There are no additional legal issues associated with the delegation of Primary Care Complaints

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG’s duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	✓
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in the enclosed report.	

An Equality Impact Assessment has been completed for the Hull CCG Patient relations service

delegation of primary care complaints would not change this assessment and related actions

THE NHS CONSTITUTION: (*How the report supports the NHS Constitution*)

The NHS Constitution, “The NHS belongs to us all” (March 2012), outlines 7 key principles which guide the NHS in all it does. These are underpinned by core NHS values which have been derived from extensive discussions with staff, patients and the public.

These are:

1. The NHS provides a comprehensive service, available to all.
2. Access to NHS services is based on clinical need, not an individual’s ability to pay.
3. The NHS aspires to the highest standards of excellence and professionalism
4. NHS services must reflect the needs and preferences of patients, their families and their carers’.
5. The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.
6. The NHS is committed to providing best value for taxpayers’ money and the most effective, fair and sustainable use of finite resources.
7. The NHS is accountable to the public, communities and patients that it serves.

This Constitution establishes the principles and values of the NHS in England. It sets out rights to which patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with responsibilities which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively. All NHS bodies and private and third sector providers supplying NHS services are required by law to take account of this Constitution in their decisions and actions.

This paper supports **Key Principles 1-7**.

OPTIONS FOR PRIMARY CARE COMMISSIONING DELEGATION RELATING TO COMPLAINTS

1. INTRODUCTION

The purpose of this report is to outline the delegation options for primary care commissioning relating to complaints, making a recommendation for a preferred delegated arrangement; and to seek approval to initiate delegation from NHS England. For the purposes of this report, the term primary care relates only to GP services.

2. BACKGROUND

The requirements for handling of formal complaints are described in The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009. The NHS Constitution states that the individual has the right for either the provider of service to investigate and respond to their complaint or for the commissioner of the service to investigate and respond to the complaint. NHS Hull CCG became fully delegated for primary care commissioning on 1st April 2017, however the complaints function was not delegated and remains with NHS England.

The NHS Hull CCG Patient Relations Service officially transferred, on Monday 25th July 2016, from North Yorkshire and Humber Commissioning Support Unit (NYHCSU). The transfer was complete on Friday 22nd July 2016. The Patient Relations Service has a Patient Advice and Liaison (PALS) function, complaints function and manages MP correspondence. For issues relating to general practice, the service only supports PALS contacts i.e. dealing with compliments, concerns, comments and enquiries. Formal complaints are handled by NHS England.

Since the transfer in house, the level of service received by people calling the CCG's Patient Relations Service has been maintained with some improvements. When a person contacts CCG's Patient Relations Service, full details are taken in order for the CCG to fully understand the nature of the issue. In some instances this can be a lengthy process as the issue can be complex, involve several providers and often callers are upset and distressed. On occasions when the nature of the concern relates to a service provider, the Patient Relations Service seeks consent from the caller to share the concern with the provider(s) to investigate, with the CCG acting in a coordinating capacity.

At the present time, and under the current arrangements for handling primary care complaints, this option is not available and the patient is re-directed to NHS England. This can lead to frustration with people stating that they feel they are being passed from one organisation to another, and leaves them questioning whether they will get help or support for their issue.

3. SERVICE ACTIVITY

For the period 1st April 2017 – 31st March 2018, NHS England received 55 formal complaints relating to primary care in Hull. For the period 1st April 2018 to 31st January 2019, NHS England received 24 formal complaints relating to primary care in Hull. This equates to 3.5 complaints a month, or 1 complaint a week. For the same time periods the CCG received 677 patient relations contacts (1st April 2017 – 31st March 2018), and 449 (1st April 2018 to 31st January 2019) equating to 51 contacts per month, or 12 per week.

Estimating patient relations activity is difficult as it can be affected by a number of factors both in and out of control of the CCG; furthermore it should be noted that following the transfer of the patient relations service there followed an increase in contacts due, in part, to the improved level of service.

Based on this information, although there would be an increase in activity for the CCG patient relations service, it would not be significant i.e. outside the expected variation of contacts seen week to week or annual growth.

3. OPTIONS

3.1 Option 1: Maintain existing delegation arrangements

All patient issues, be they questions, concerns or complaints should be dealt with as close to the point of issue, both time and location, as possible. More often than not, if issues are dealt with in the service at the time, they do not develop into patient relation contacts or complaints.

The current delegation arrangement for primary care complaints are that NHS England is responsible and accountable for the:

- Investigation
- Compiling a response
- Signing off the response

In practical terms this means that if an issue cannot be resolved by the practice or by the Patient Relations Service, provided by the CCG, then the individual is directed to NHS England to make a formal complaint. NHS England then investigates this working alongside the practice. NHS England then composes and sends the complainant a written response. NHS Hull is not involved in this process, nor sighted on the response and outcome.

NHS Hull CCG uses the intelligence gathered through the provision of the Patient Relations Service to support the quality and performance monitoring of all providers it commissions. Secondary care service quality and performance is managed through a number of structures within the CCG, with the Quality and Performance Committee having oversight and delegated authority to act from the Board; similarly primary care quality and performance is managed through Primary Care Quality and Performance Committee with delegated authority to act from the Primary Care Commissioning Committee; neither of these mechanisms is designed to manage the performance of individual clinicians, nurses or allied health professionals. If

intelligence suggests issue with an individual healthcare professional, this is escalated appropriately and managed through alternative means.

Under the current delegation arrangements, the experience of primary care complaints can be frustrating for patients as feel they are “passed from pillar to post” repeating the issue they experience to each person they contact; one individual could raise an issue at the practice, be referred to the Patient Relations Service at the CCG and then on again to NHS England if they feel they want their issue to be treated formally.

The current delegation arrangements also mean that the CCG does not have the full picture of issues in Primary Care as some issues are dealt with by NHS England. Although some data is shared with the CCG relating to the contacts NHS England has with Hull patients, it lacks a level of detail and there is a data lag making it difficult to be responsive to issues. Although NHS England do share basic intelligence this is not at a level that is meaningful to influence the CCG’s commissioning processes.

3.2 Option 2: Full delegation of primary care complaints handling

The proposed delegation arrangement for primary care complaints is that NHS Hull CCG becomes responsible and accountable for the:

- Investigation
- Compiling a response
- Signing off the response

Though NHS England as joint commissioner would still be supportive, consulted and informed.

In practical terms this means that if an issue cannot be resolved by the practice it would be dealt with by the Patient Relations Service provided by the CCG, who would investigate the issue working alongside the practice, then compose and send the complainant’s written response. The intelligence gathered as a result of this change would be reported to NHS England to inform their quality and performance arrangements, and this would be tailored to their needs to ensure the minimum disruption.

The proposed revision to the delegated arrangements would resolve the issues highlighted above. Patient experience would be improved, not only due to the reduction in the number of steps and organisations involved in the process of making a complaint, but due to the local knowledge and insight that the CCG has about Hull and the health and social care landscape within the city. The CCG would also have access to the rich intelligence regarding primary care that comes from complaints and would be able to analyse the information to give a full picture to inform quality and performance monitoring of primary care services.

Revising the delegation arrangements would increase the workload of the CCG’s Patient Relations Service, although this is estimated to equate to one complaint a week, investigating and responding to complaints particularly complex cases is a significant amount of work. However, by having a less complex process for raising issues the number of formal complaints may reduce as levels of frustration are

reduced. Based on the current information although there would be an increase in activity, this would not necessarily result in the need for additional staff resource above the current needs of the service. The overall capacity of current service is regularly reviewed to ensure it is fit for purpose.

3.3 Summary of advantages and disadvantages

Table 1 below, presents a summary of the advantages / disadvantages of the two options for handling primary care complaints:

Table 1

From of delegation	Advantages	Disadvantages	Recommendation
<p>OPTION1 Complaints not delegated</p> <p>Handled by NHS England</p>	<ul style="list-style-type: none"> • No change to existing patient relations service arrangements or reporting, therefore no increased workload. 	<ul style="list-style-type: none"> • Risk of poor patient experience of resolving issues. • CCG has an incomplete picture of the issues arising in primary care. 	Not preferred
<p>OPTION 2 Complaints fully delegated</p> <p>Handled by NHS Hull CCG</p>	<ul style="list-style-type: none"> • Improved patient experience due to simpler process for managing issues and local knowledge and insight. • Improved intelligence to support quality and performance monitoring and management • Improved patient experience of primary care due to better intelligence relating to services and improved decision making. 	<ul style="list-style-type: none"> • Increase in workload for existing CCG Patient Relations Service. 	Preferred option

Based on the table above, a revision to the delegated responsibilities for primary care commissioning, with particular regard to complaints, is recommended.

4. RECOMMENDATIONS

It is recommended that:

- a) The committee supports Option 2: The full delegation of primary care complaints handling and that NHS Hull CCG becomes responsible and accountable for the:
 - Investigation of a complaint
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- b) The CCG initiates delegation for complaints handling from NHS England.