Document Details	
Title	Patient Advice and Liaison Policy (PALS)
Trust Ref No	881- 50755
Local Ref (optional)	
Main points the document covers	This policy sets out the arrangements for the Patient Advice and Liaison Service
Who is the document aimed at?	The document aims to make staff aware of the service, to enable signposting and to set out the process for managing concerns
Owner	Mark Crisp and Natalie Hughes, Complaints & PALS Managers
Approval process	
Who has been consulted in the development of this policy?	Quality and Safety Delivery Group Staff operating the service
Approved by (Committee/Director)	Quality and Safety Deliveryl Group
Approval Date	13th February 2019
Initial Equality Impact Screening	Yes
Full Equality Impact Assessment	No
Lead Director	Director of People
Category	General
Sub Category	
Review date	1st February 2022
Distribution	
Who the policy will be distributed to	All staff via intranet and Managers via the alerting system
Method	As above
Keywords	PALS, enquiries. Raising concerns, concerns, complaints
Document Links	
Required by CQC	Regulation 16 Receiving and Acting on Complaints
Other	None
Amendments History	

No	Date	Amendment
1	7th February 2019	Reference to Director of Corporate Affairs changed to Director of People throughout, contact email address changed in para 6.1 to shropcom.customerservices@nhs.net and grammatical corrections made.
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SHROPSHIRE COMMUNITY HEALTH NHS TRUST

PATIENT ADVICE AND LIAISON SERVICE (PALS) POLICY

1. Introduction

The PALS service was set up as part of the response to the NHS plan in 2000. The service gives patient, carers and other patient representatives a central point of contact other than the services themselves for enquiries, issues and concerns.

The Patient Advice and Liaison Service (PALS) was established in response to the NHS Plan (DH 2000) which placed emphasis on the NHS putting the patient at the heart of decision making both in terms of their care and shaping the NHS in the future. The NHS Plan also set out that patients should have an avenue to raise their concerns and to get those concerns addressed. It identified PALS as a facilitator to handle patient and family concerns, with direct access to the Chief Executive and the power to negotiate immediate solutions.

2. What is PALS?

PALS provides a free, impartial and confidential service to the people, their carers, family and friends, who use the Trust's services. The strength of PALS is that it can hold a position of neutrality within the organisation, bridging and mediating the gap between the service user experience and expectation and the organisation's systems and culture, in order to increase understanding and learning for all.

Core Functions:

- Listen to the concerns of people, their families and carers who use the Trust's services.
- Act as an independent facilitator in addressing the concerns of patients, their families or carers with the power to negotiate solutions or resolutions of issues as speedily as possible.
- Provide reliable, updated information about Trust services and health issues.
- Act as a catalyst for organisational change, service and quality improvement suggested by the feedback of service users.
- Act as a navigator, providing access to Trust services through signposting and advice.
- Advise and recommend changes in services and work co-operatively with staff and managers in facilitating change and improvements in services.
- Inform staff about PALS and support staff to proactively engage with and learn from the experience of service users.
- Act as a source of systematic intelligence gathering by recording and analysing the feedback of service users and the outcomes associated with activity, and reporting into Trust systems to promote service, quality and organisational change.

3. Objectives

Examples of the types of issues raised in SCHT are:

) Concerns about the care received
) Information needed about a service or treatment
) Clarification about provision of treatment (including services not provided)
) Help in getting appointments or accessing a service
) Signposting to a service
) Compliments about the services provided

In 2003 the Department of Health produced a set of core standards for PALS, these are still applicable today, and provide a useful set of values for the service:

) PALS is identifiable and accessible to the community served by the Trust.
) PALS will be seamless across health and social care.
) PALS will be sensitive and provide a confidential service that meets individual needs.
) PALS will have systems that make their findings known as part of routine monitoring in order to facilitate change.
) PALS enables people to access information about Trust's services and information about health and social care issues.
) PALS play a key role in bringing culture change in the NHS by placing patients at the heart of service planning and delivery.
) PALS will actively seek the view of service users, carers and the public to ensure effective services.

The PALS service, and this policy is complimentary to the Complaints Policy, in that it provides an alternative independent means of raising concerns relating to care.

PALS is available to all patients, their relatives and carers using NHS services provided by Shropshire Community Health NHS Trust. The service will, whenever possible and where appropriate, also offer advice and information to anyone contacting the service. Staff may also use the service to seek advice as part of their role in supporting patients.

4. Purpose

This policy sets the framework for the PALS function within Shropshire Community Health NHS Trust (SCHT). The policy will be useful to all staff to assist in signposting the service, and informing patients of the support available as well as providing the framework for dealing with enquiries

5. Duties

The **Chief Executive** has ultimate responsibility for all services within the Trust. However, the Executive Lead for PALS is the Director of People who is responsible for the strategic arrangements of the service.

PALS Manager will:
) Be responsible for the operational function, ensuring that PALS provides a quality service which meets the needs of service users.
) Produce quarterly & annual PALS report and present it to Quality & Safety Committee highlighting any trends.
) Attend Divisional Quality & Safety meetings and present PALS reports.
) Promote PALS both within the organisation and outside.

All staff will:
) Ensure they are aware of PALS and how to contact the service, ensuring leaflets and information is readily available in all areas of the Trust.
) Promote the use of PALS to service users, carers, relatives and the public.
) Support anyone who wishes to contact PALS with a concern, comment or suggestion.
) Ensure that service users are not discriminated against or treated any differently as a result of raising concerns.
) Take appropriate and speedy action to respond and resolve PALS concerns.

6. How do patients access the service?

6.1 Information leaflets are widely available across all services and provide information on how to contact the service to raise concerns, seek advice or information or make suggestions. Information on PALS is also available on the Trust website.

A concern/comment/suggestion/feedback about Trust services may be brought to PALS by any individual. PALS can be accessed by the following methods:

) Calling the free phone number on 0800 032 1107, available Monday to Friday 9.00am to 5.00pm (excluding weekends and bank holidays. An answer-phone will take out-of-hours messages and PALS team will try to get back as soon as possible.
) Calling direct on 01743 277689, available Monday to Friday 9.00am to 5.00pm (excluding weekends and bank holidays). An answer-phone will take out-of-hours messages and the PALS team will try to get back as soon as possible.
) Asking the switch-board on 01743 277500 to transfer you to the PALS service.
) E-mailing: shropcom.customerservices@nhs.net .
) Writing to: PALS Manager, Shropshire Community Health NHS Trust, William Farr House, Mytton Oak Road, Shrewsbury, Shropshire, SY3 8XL.
) Completing comment cards which are available in some services.

Information on the service can be accessed on the Trust's website here

6.2 Support to access PALS

PALS operate an open referral system. Anyone can self-refer or refer someone to PALS. Where patients/relatives/carers require assistance from PALS but need additional support to do so, PALS will access appropriate support, for example

interpreters and signers. The information leaflet can be made available in other languages, Braille, symbols, large print format and on audio tape on request.

7. What happens to the requests

7.1 The PALS team will act on the request according to the type of request raised. The following are examples of the types of action that may be taken:

-) Liaising with a service to resolve an issue
-) Identify learning if appropriate and supporting Managers to initiate changes in process/system
-) Requesting a service to resolve the issue
-) Signposting the enquirer to a service
-) Contacting a service or other organisation on behalf of the enquirer

In all cases the PALS team will agree with the enquirer how they will go about dealing with the enquiry and will keep them informed throughout the process using an agreed method. Wherever possible the enquiry will be dealt with by one team member, where this is not possible the enquirer will be informed who is their point of contact.

The enquirer will be informed of the outcome of the process; this should include an apology where it is appropriate to do so.

7.2 Time-scale

Issues will be dealt with as quickly as possible, should there be any delay in responding back individuals will be kept informed at all times and a time-scale agreed.

7.3 Documentation

Details of all PALS enquiries, any action taken and outcome will be recorded on the Datix, risk management system.

8. Learning from PALS

All managers and staff have a responsibility to respond to any learning or actions required that are identified through PALS. The PALS team will assist Managers in generating solutions to problems. Lessons learnt from PALS cases will be shared quarterly at the Quality and Safety Operational Group and Committee as part of Patient Experience report. An annual report will go to the Board

9. PALS and complaints relationship

As a result of early intervention, PALS expects to reduce the number of issues that escalate. It is the choice of the individual to use either PALS or the Complaints procedure to address any concerns or difficulties that individuals experience while using services provided by the Trust.

PALS and Complaints will not be used in parallel for the same issue, but there may be circumstances where the PALS and complaints team work side by side in covering different aspects of the same concern. Using PALS will not preclude a service user from using the complaints procedure to seek resolution of their issue if they continue to remain dissatisfied.

10. Confidentiality and consent

All who use the service have a right to privacy and confidentiality. PALS will maintain confidentiality and seek consent if it is deemed necessary to pass on or obtain confidential information in order to resolve concerns. PALS will not disclose any confidential information to any third party without the consent of the individual concerned. When issues have been identified, possible options will be explored with the individual. The principles of Data Protection Act will be followed by the team at all times.

11. Training

PALS will provide regular training through induction or team meetings to raise awareness of the service within the Trust and increase the profile of the service. Information leaflets and posters will be available and displayed in all clinic setting and Community Hospitals.

12. Consultation

Members of the Quality and Safety Operational Group have been consulted in the development of this policy.

13. Monitoring compliance

Performance of the service will be monitored by the Quality and Safety Operational Group. The Group will receive information quarterly about the number and subject of enquiries, services involved timeliness of response and actions taken as a result of enquiries.

14. References

- Department of Health (National Standards and Evaluation Framework, Department of Health – 2003).
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and associated Care Quality Commission Guidance.

15. Associated documents

- Shropshire Community Health Trust's Complaints Policy and Data Protection Policy.