THE EVOLUTION OF PALS

Patient Advice and Liaison Service

Fair, Collaborative, Accountable, Patient-centred, Improving, Listening, Empowered, Collaborative, Responding
Responsibilities

PALS are responsible for:

- Managing the first contact for those who wish to raise a concern or share a compliment via telephone, letter, email or face to face meetings.

- Supporting patient’s decision to raise concerns as a PALS or a formal complaint.

- Directing a concern to the correct people in the Trust.

- Working closely with the departments involved to ensure complaints and compliments are responded to in a timely manner.

- Monitoring and responding to social media.

- Directing people to advocacy services.

- Reaching out to communities and supporting them in raising their concerns and informing them about services which are available to them.
What PALS do

PALS work closely with all departments in the Trust to ensure that we learn lessons from the complaints and compliments that we receive allowing us to improve the quality of our services.

Patients and carers should receive an Initial response within two working days.

During the months of January to March 2016 the CSU’s achieved a success rate of 67% in comparison to January to March 2015 when they achieved 53%.

We are working closely with all departments to improve this percentage.

Some examples of common concerns raised are:
• Long waiting list times.
• Communication with patients and relatives
• Difficulty contacting departments via telephone
How PALS Data is shared

Monthly PALS reports are sent to all Heads of Nursing documenting:

- Number of PALS raised in that month
- The percentage of PALS resolved.
- The percentage of PALS still unresolved.
- Percentage of people contacted within two working days.
- Details of the most common PALS raised in that month.
The new Dashboard will enable departments to run reports and track PALS concerns. This will also enable them to check their information as and when required, providing them with up to date and real time information.
Top Five Themes for PALS – April 2015 to March 2016

- CM006 - Communication with patient
- AD38 - Waiting list time OP
- AD004 - Cancelled/rescheduled clinic/appointment
- CM018 - Difficulty contacting department
- CM007 - Communication with relatives/carers
PALS - Total Pals Received in Financial Year 2015/16

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‘Speak to Sister, Message to Matron’ is an initiative that was first piloted in October 2015 in the Abdominal Medicine and Surgery department.

The initiative was then introduced to Acute Medicine in December; it was then released Trust wide in January 2016. The aim of this is to provide access to local resolution for patient/carer concerns and prevent concerns escalating to PALS or formal complaints.

The poster is located around the hospital with the purpose of signposting patients and their families to the Ward Sister in the first instance, if they have any comments or concerns they would like to discuss.
The Patient Advice and Liaison Service (PALS) posters and leaflets have been updated with:

- Information on raising a concern or a compliment.
- Information on advocacy services
- Contact details for other PALS if your concerns do not directly relate to Leeds Teaching Hospitals Trust.

Leaflets are available in:

- Large print
- Braille and
- Audio versions,
- Easy read
- Several different languages.

Posters, business cards and leaflets are available in clinical areas and on reception desks throughout the Trust – any member of staff should be able to help you to access a leaflet.
PALS recognise that people within the deaf and hard of hearing community have particular needs which were not being met.

As a starting point PALS staff are learning British Sign Language (BSL) to enable them to communicate better with the community.

Work is also planned to undertake outreach work with this particular community.
Recent Improvements

The Complaints Team developed and introduced ‘child friendly literature’ that supports younger people in raising a concern. This was presented at a National Children’s Conference hosted by Leeds Teaching Hospitals NHS Trust.

The PALS team are also working on a leaflet focusing on bereavement related concerns which will be available soon.
Recent Improvements

Over the last two years PALS have increased their staffing levels.

In 2014 the PALS team consisted of 2 full time PALS Officers and 1 part time PALS Officer.

The team now consists of 4 full time PALS Officers and 2 part time Officers.

This has enabled our service to become more efficient and responsive.
PALS Patient Advice and Liaison Service

Evolution of PALS over the last two years

- PALS and Complaints now have their own identity.
- Two additional Band 4 PALS Officers recruited to provide enhanced service.
- Email correspondence becoming more popular method of communication.
- PALS monitoring and responding to social media feedback enhanced.
- New Band 5 introduced as Line Manager plus one additional Band 4 PALS Officer recruited.

Our Next Steps

- Development of Bereavement PALS leaflet
- Improved process for monitoring complex PALS
- British Sign Language (BSL) training of PALS staff commenced to improve communication with patient groups.

Front of House

- Front of house PALS launch at SJUH and LGI.
- New telephone system introduced.
- New PALS leaflets and posters launched.
The PALS telephones are now on a loop system.

When PALS are contacted, the call is automatically transferred to the next available PALS officer. This prevents people waiting in a queue.

Service users are automatically informed that they are through to the PALS department, avoiding calls that are meant for a different service.

PALS also have a computerised voicemail system.

When a voicemail is left, an email is immediately generated and sent to the PALS email address, which ensures voicemails are responded to promptly. This also allows PALS to keep an electronic record of the contact.
Since January 2016, PALS have provided a front of house service, making PALS much more accessible to everyone.

The launch of the front of house services followed a successful pilot and recognises the fact that many patients and their families would like to speak to a member of the PALS team face to face.
Communication

PALS use social media to enable the public to provide feedback about the services that they have experienced.

PALS are currently on Twitter, Patient Opinion and NHS Choices. People can also post on the Trusts Facebook page.

Patient Opinion: https://www.patientopinion.org.uk/services/rr8

Lessons Learned From PALS

You said:

A hearing impaired patient said it was hard to know where to sit in the large Radiotherapy Department to make sure they didn’t miss being called.

We did:

The department has said it will use name cards as a visual prompt in addition to calling a patient through for treatment verbally. An electronic check in system for patients will be put in place to complement reception staff.
## Lessons Learned from PALS

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<th>You said:</th>
<th>We did:</th>
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<td>A patient contacted PALS regarding the smoking shelter located directly underneath the Cystic Fibrosis and Respiratory Wards. A patient was unable to open a window and could get no fresh air.</td>
<td>The Smoking Control Policy Group discussed this and it was decided that it was unacceptable for the Ward above the shelter and the Shelter has since been relocated.</td>
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Aims and Objectives for 2016-17

Making it easier to access the patient voice
• Establish a Patient Reference Group
• Develop Patient Leaders to support the Trust
• Implement a membership PCPI database
• Support staff to gain skills in PCPI

Improving effective use of our feedback
• Implement mechanism for monitoring FFT % recommended scores to introduce near ‘real-time’ feedback to ward areas.

Demonstrating we learn and improve from our feedback
• Respond to patient feedback through delivery of programmes in outpatients to address key themes arising from PALS and complaints
• Improve data capture methods for actions arising from PALS / FFT / PCPI feedback across the Trust and communicate these to patients and staff.
Patient Carer and Public Involvement

Engagement - This refers to the level of influence that patients, carers and the public have in the decision making process regarding how the Trust runs and how services are delivered.

Involvement - This is used in regard to the type of activity used to utilize patient carer and public voice and experience. Some methods will lend themselves to having more influence than others.
The Ladder of Involvement: It's all about power!

Patient carer and public led

Shared decision making.
Collaboration

Consultation

Provision of Information:

Patient Leaders

Representation at governance level, workshops

Public meeting, surveys, focus groups questionnaires, national local consultation, patient / carer forums, patient reference group.

Newsletters, road show, posters, leaflets
Some examples....

Whose shoes?

Admissions Lounge

Patient Stories

Patient Leaders

Patient Reference Group
Patient, Carer and Public Involvement Team

To find out more about how to get involved, please contact:

Scott Cunningham  0113 2067077
Adejumobi Sowole  0113 2067364
Volunteering

We currently have around 450 volunteers in the Trust and are looking for volunteers in the following areas:

• Hospital Guides
• Activities Volunteers
• Mealtime Volunteers
• Bereavement services

To find out more about Volunteering, please contact:
Rosemary Horsman on (0113) 2065591