Patient Advice and Liaison (PALS) Standard Operating Procedure	University Hospitals of Leicester NHS NHS Trust
	Trust Ref number: B64/2024

1. Introduction

This Standard Operating Procedure (SOP) describes the processes and utilization of the UHL Patient Advice and Liaison Team (PALS). The aim of the service is to provide support and advice to those that seek help with accessing or using UHL services and provide an early resolution to any concerns or issues.

2. Scope

This SOP will outline the typical daily operation of the service; the SOP will define both the roles and responsibilities of staff working within the team with the aim of resolving patient concerns in a timely and effective manner.

By Adhering to this SOP the following should be achieved

- Timely acknowledgement of patient concerns either via phone, email or face to face
- Appropriate feedback to patients and departments answering the concerns to patient satisfaction

3. Recommendations, Standards and Procedural Statements

Opening and Closing of PALS Office

The PALS Base is on the first Floor of the Balmoral Building at the Leicester Royal Infirmary, the core working hours of the team are Monday – Friday 08:00 – 16:00.

The base reception will be staffed and ready to accept walk ins from 09:00 – 12:00, 12:30 15:00, walk ins can either be pre-arranged or ad hoc.

Should it be necessary to close the PALS reception during core opening times for up to 10 minutes then a sign will be hung in reception to indicate when staff will return. Reception must not be closed for more than 10 minutes without the agreement of the PALS lead.

PALS Office opening procedure
- Admin staff to ensure the following meeting rooms are clean and ready to use
- Check hand sanitizer in meeting rooms full
- Clean the reception desk

PALS Closing procedure
- Ensure all lights are switched off
- Ensure that no confidential paper information is left on desks
- All computers are switched off
- The door of office is locked and secured

PALS Email Inbox

- New concerns to be triaged by PALS matron and either moved to either a logging inbox folder or forwarded to the complaints function of Pals.
- PALS admin staff will document onto datix all concerns in the logging inbox folder and save initial email onto the datix record.
- All emailed concerns will have an acknowledgement email reply from PALS
- All emailed concerns will then be forwarded to the relevant department and this will be documented on the progress notes of the newly created datix.
- If further information is required the reception staff or PALS lead will proactively contact the individual raising the concern
- Consent must clearly be documented on datix, if consent is required then an email requesting consent will be sent
- Email responses to existing concerns will be moved into the appropriate email folder and an action logged on datix to alert the concern handler
- The day of documentation on datix will count as day 0

PALS Telephone Enquiries

- At present all telephoned enquires will be documented onto datix by the complaints team
- PALS admin staff to run a report of previous working days telephone calls and forward these to the relevant services, this will then be documented on progress notes of datix.

Member of the Public attending PALS

- All visitors attending PALS will have an initial triage form completed by the reception staff which will include name, hospital number and a nerve centre check to ensure there are no patient alerts.
- When and if appropriate visitors will be taken into one of the private interview rooms
- PALS staff **MUST** ensure that a colleague is aware that they are using the interview room with a visitor
- A member of the PALS team must remain in the office whilst the interview rooms are in use and use the viewing window to observe colleague every 5 minutes
- PALS staff must inform the visitor that they will be taking notes and this can be done either onto paper or directly onto the PALS datix module
- If at any time the PALS staff feel uncomfortable or threatened they may hit the panic strip on the wall or immediately leave the interview room
- FOR EMERGENCIES STAFF SHOULD PHONE 999, FOLLOWED BY SECURITY (e.g. Violent or in possession of a weapon
- FOR NON EMERGENCIES STAFF SHOULD PHONE 101 (e.g. Verbal threats)

Morning briefing meeting

- Meeting to start at 08:20 and finish no later than 08:50
- Meeting will be managed by PALS lead

- All concern handlers to have a list of all concerns that are 3 days + old with up to date information and progress
- PALS lead to challenge and advise on next steps
- PALS Lead to allocate new concerns from the being reviewed folder of datix and allocate a handler and change status to being reviewed
- Concern handlers are not to be allocated any more than 20 concerns at any one time.

Attending the Ward

- PALS staff to pro-actively visit wards to attend patients
- On entering a ward area PALS staff must identify themselves either to the Ward Leader or Nurse in Charge and explain the nature of the visit and the service they represent
- When attending a patient the PALS staff may document on either paper or directly onto the PALS datix module
- If using paper the notes must be transcribed onto datix and all paper discarded into confidential waste before leaving the ward
- PALS will attempt to liaise with medical or nursing team whilst on the ward to resolve concern accepting that in times of high clinical pressures they may need to return to speak with clinical teams.

Managing and escalating concerns

- The concern handler will be expected to pro-actively contact all new concerns to acknowledge that PALS are managing the concern
- If the concern is related to an inpatient , the concerns handlers will proactively visit wards to attend the patient and liaise with clinical teams to resolve concerns
- On the receipt of a concern the PALS team will initially email the relevant service, if there is no response after 3 working days they will follow up with phone calls for 2 working days and then visit the department. If after 5 working days there is no progress the concern will be discussed with the PALS lead.
- All progress or actions must be added to the progress notes of datix and the action list to be updated
- If concerns move to 10 days + then management of these concerns may be handled by the PALS lead who will discuss with the Complaints lead whether the concern should be logged formally.
- If the PALS team require further information from the individual, they will attempt to contact at most three times by phone and leave, where possible a voice mail with contact information. The onus will then be on the individual to contact the service otherwise the concern will be closed.
- On the resolution of a concern the PALS team will attempt to contact the service user three times by phone and then follow up with an email explaining that the concern has been resolved and contact details for the service user to phone the team.

Resolution of Concerns

- The onus will always be on the relevant service to feedback the outcome of concerns to patients/friends and relatives. In exceptional circumstances the PALS Officers may assist with feedback.

- All relevant information will be documented on datix and the concern to then be move into awaiting final approval
- PALS Lead to review all cases and when satisfied with outcome finally approve
- If complainant unhappy with outcome then concern handler to discuss with PALS lead to escalate to formal complaint.

4. Monitoring and Audit Criteria

Key Performance Indicator	Method of Assessment	Frequency	Lead
5 Working Day Resolution	Datix Report	Monthly	PALS Lead
Weekly Concerns received vs Concerns Closed	Datix Report	Monthly	PALS Lead
Decrease in Formal Complaints	Datix Report	Monthly	PALS/Complaints Lead

5. Key Words

List of words, phrases that may be used by staff searching for the Policy on SharePoint

- Patient Advice and Liaison
- PALS
- Complaints
- Concerns

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This table is used to track the development and approval and dissemination of the document and any changes made on revised / reviewed versions

DEVELOPMENT AND APPROVAL RECORD FOR THIS DOCUMENT			
Author / Lead Officer:	Owain McAteer / Emma Evans		**Job Title:** Matron PALS Service
Reviewed by:			
Approved by:	**Policy and Guideline Committee**		**Date Approved: 21.6.24**
REVIEW RECORD			
Date	**Issue Number**	**Reviewed By**	**Description Of Changes (If Any)**
DISTRIBUTION RECORD:			
Date	**Name**	**Dept**	**Received**