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Dear Andrew

Re: Complaints system for primary care complaints and concerns in the new NHS infrastructure

I am writing further to a recent meeting of Thurrock CCG's Commissioning Reference Group (CRG) and associated discussions with colleagues in Thurrock HealthWatch and Thurrock CCG to raise some issues around primary care complaints in the new NHS infrastructure.

As you know, the CRG is one of the CCG's main vehicles for engaging patients and the public, as well as key stakeholders such as local councillors, representatives of the Health and Wellbeing Board and Thurrock HealthWatch. At our recent meeting, we had an interesting debate, during which individuals and those representing different groups and organisations conveyed their unfortunately variable experiences of the new complaints infrastructure.

The CRG were keen to obtain clarity on how effectively the new system for handling primary care complaints is operating. As you know, the process established by NHS England is for all complaints and concerns about primary care contractors to be made directly to the practitioner concerned or to NHS England as the post-PCT commissioner of primary care services.

Members of the CRG were concerned that whilst this makes sense strategically, the apparent requirement for all such complaints to be raised through a national call centre in the Midlands and only in writing or by email appears to diminish both the accessibility of the complaints process and the capacity to resolve concerns quickly and informally wherever possible, in the interests of both patients and practitioners. The lack of a facility for complainants to lodge their concerns verbally to the call centre has specific implications for NHS England's compliance with equalities legislation due to the differential impact upon those with visual or physical impairments or learning disabilities. We also understand that the central call centre has experienced significant difficulties managing the volume of complaints and concerns it has received since 1st April 2013 and that there is currently a backlog of cases waiting to be investigated. I am sure you would agree that such a situation would be unacceptable in terms of customer service, the scope to resolve concerns promptly and of course, compliance with the NHS Complaints Regulations.

Chair: Dr Deshpande Anand

Interim Accountable Officer: Dr T Nimal-Raj

Clinical Commissioning Group

Given that complaints are recorded by NHS England centrally, we would appreciate some assurance as to how the “soft” and “hard” intelligence that arises from these contacts from the public is communicated to the Essex Area Team as the organisation who is responsible for managing primary care contracts locally so that patient feedback is fed into the primary care commissioning, contracting and quality management processes.

The above issues seem to us to indicate the value of responsibility for all aspects of primary care complaints handling to be devolved from the centralised functions of NHS England to the Area Teams who could provide a service along the lines of the former PCT PALS Service. This would enable concerns and complaints to be received by telephone as well as by letter and email and would support all parties to achieve rapid informal resolution where possible, as well as instigating more formal investigations where appropriate.

A separate but interconnected issue I wished to raise following our CRG meeting was the flow of information regarding primary care complaints (and performance in general) into CCGs.

We are of course aware that CCGs do not currently have a formal role in managing and improving quality in primary care, which rests with the Area Teams. However colleagues in our CRG clearly felt that as the CCG will be seen by the general public as their local point of accountability for the NHS, that the CCG should at least be aware of any significant performance issues or proposed service changes so that we could maintain an overview of all NHS services in Thurrock. We would welcome your views on how this oversight can be achieved, whilst respecting the highly sensitive nature of performance issues associated with individual practitioners or practices.

I look forward to your response which I would like to share with CRG members. If you or your colleagues in the Area Team would like to attend a future CRG meeting to discuss these or any other issues with our key stakeholders in the Thurrock community, we would be delighted to welcome you.

Please do not hesitate to contact me if you wish to discuss any aspect of this letter.

Yours sincerely



Len Green

Deputy Chair & Lay Member for Patient and Public Engagement