

To: Heads of Primary Care, Medical Directors

From: Steve Verdon, Director of Governance

Date: 13 March 2017

Dear Colleagues

This briefing follows on from my previous update of 12 December 2016 concerning the NHS Shared Business Services incident, whereby correspondence in the mail redirection service did not reach the intended recipients. I hope you find it useful, and I would specifically like to draw your attention to the area of returning assessments where your assistance would be appreciated

Media coverage

You will be aware that the incident was covered, extensively, in the media last week. In responding to media enquiries, we have been careful to ensure that the public are not unduly alarmed by the headlines, and receive accurate information about the incident and the progress made to repatriate the correspondence to GP practices.

Unfortunately, some coverage did include inaccurate references to “a loss” of correspondence. I want to reiterate that there has been no loss of correspondence. All correspondence has been securely held, and has been repatriated to GP practices by the incident team.

All media enquiries relating to this incident are being handled centrally by the NHS England press office. Please could I ask you to remind your communications leads not to respond to any local media requests but to seek advice from the NHS England press office in the first instance.

Repatriation of correspondence

You will recall from my December update that the Incident team managed the repatriation of correspondence to the patient’s registered GP practice between October and December 2017. This followed an earlier repatriation (July 2016) of items that had been clinically assessed as being of high priority.

Each GP practice received a letter (see below) which explained the process GPs should follow upon receipt of the correspondence. This process required all GP practices to undertake a clinical assessment, in the context of the wider medical notes, of any impact of the delay in the correspondence being received by the GP. However, to date, only 40% of practices have responded to the letter.

We are writing to GP practices this week to ask them to urgently complete their

review of the outstanding correspondence, and to respond to the Incident Team by 31 March 2017.

In addition, I kindly ask for your essential support in encouraging the GPs in your area to complete the response and send it back to us by this date.

NHS England has provided GPs with a dedicated phone line and email address on which they can contact us with queries. Telephone: 0800 028 9723
Email address: england.sbsincident@nhs.net

Additional repatriation

Some repatriated correspondence has been returned to the Incident team following advice that the patient is no longer registered with the practice. The Incident team have checked the patient details on the spine and, wherever possible, identified the new GP. In addition the Incident team has been successful in identifying the registered GP for patients who NHS Shared Business Services had previously been unable to locate. The correspondence relating to these patients will be repatriated to the current registered GP on 16 March 2017.

Payments

In order to support GP practices, which have been required to review and assess large numbers of returned documentation arising from this incident, we agreed payments with the British Medical Association's General Practitioners Committee on behalf of GPs. The details of these payments were set out in my previous update.

The payments are intended to provide recompense for the time required to review and assess the documentation in the context of relevant patient medical records; to communicate with patients about the incident where necessary; and to report to NHS England the outcome of this work and whether there is any potential harm caused because of the delay

The vast majority of payments were made in February 2017. The remaining payments will be processed this month (March 2017).

Clinical review

All cases of potential patient harm, following local GP assessment, are now being reviewed by NHS England GP National Clinical Directors and, where required, a full clinical review will take place to establish whether any harm was suffered.

No cases of confirmed harm have yet been identified.

End of briefing

Practice address

Primary Care Support Services
NHS England
Blenheim House
Duncombe Street
Leeds
West Yorkshire
LS1 4PL

Telephone: 0800 028 9723

Email address: england.pcsadmin@nhs.net

Deemed date: date of receipt at practice

Dear Doctor

I enclose a number of documents* which relate to patients currently registered with your practice. I would be grateful if you could review these documents and identify any steps that ought to be taken to ensure that patient care is maintained. Could you please also ensure that the documents are included in the appropriate individual medical record.

Brief background

These documents were originally despatched to the incorrect recipient, who then forwarded them on to NHS Shared Business Services (NHS SBS) for redirection to the appropriate GP as part of the support service that NHS SBS provided at the time. It has become apparent that these documents may not have reached you as the current registered GP.

Under the direction of NHS England, a team including clinicians such as GPs has carried out an initial review of all documents affected to identify the greatest areas of potential risk. Any correspondence which indicated ongoing clinical concerns has already been identified and prioritised, and immediate steps have been taken.

In order to ensure patient safety, we are now asking for your support to include the remainder of these delayed documents in the appropriate individual medical record, and assess any impact on the patient resulting from the delay in receipt, in the context of the patient's medical record.

Initial action by you

Each of these documents should be included in the relevant patient's medical record. It is of course also essential that we identify and respond to any impact on the

patient from the delay in receipt of the item by you as their GP.

We are therefore asking if you would please review these documents against the patients' clinical records, complete the attached general response form (Enclosure 1) and return it to NHS England as soon as possible.

You should of course also take any immediate steps as you consider necessary in light of your review, in terms of contacting any patients and ensuring that they receive appropriate treatment, referral or other follow up. Please don't delay any actions in order to complete the response documents.

We are currently in discussion with the GPC with a view to agreeing appropriate payments to be made to GP practices affected by this incident. These payments are intended to provide recompense for the time required to review the items in the context of the medical records, communicate with patients about the incident where necessary and report to NHS England as requested in this letter. Further information will be provided about these payments once they are agreed. However please do not wait for this information before commencing review of the enclosed documents.

Assessment of impact

When you review each item, could you please consider whether the patient may have suffered harm as a result of a delay in receipt of this item by their GP. In this context "harm" includes any significant impact on prognosis, any extension to the period in which significant symptoms were experienced and any increase in the intensity or duration of treatment required.

Return of information to NHS England

When you have completed your review of all of the enclosed items, we would ask you to complete and return the enclosed General Response Form (Enclosure 1). This will provide confirmation that you have reviewed the items and information about the number of cases, if any, in which you have identified a risk that the patient may have suffered harm from delay in receipt of the item.

Once we have received the response form, we will be in contact with you again to discuss how we might work together to ensure you have sufficient information to respond to any questions affected patients, may have regarding this issue.

I am sorry that this situation has arisen and that it is necessary to ask you to take these actions. We really appreciate your support with this additional work.

If any of the correspondence enclosed relates to patients no longer registered at your practice please contact my team on the details below. Please **do not** destroy these documents.

If you have any questions regarding this letter or about completing the response form, you can contact my team via england.pcsadmin@nhs.net or by telephone, on 0800 028 9723.

Yours sincerely

Jill Matthews
Managing Director
Primary Care Support Services

* A document is defined as a single complete instance of correspondence, consisting of one or more pages. A document is likely to include a communication such as a letter, email or notification. Any attachments or enclosures to that communication are regarded as part of the same document.

Enclosure 1: General Response Form, to be completed by letter recipient in all cases

