

Complaints in Primary Care:

A snapshot of how complaints procedures work in GP Practices across Sefton.



September 2016

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Introduction

This report is the first in a number of reports which will be published by Healthwatch Sefton on the topic of complaints. This report details the findings from a fact finding exercise, which was carried out to help our review into how the complaints process works in primary care. This area of work is included within our work plan and follows on from the national work undertaken by Healthwatch England. The focus of this work was to look at how complaints are managed within GP practices across Sefton. This area was chosen as the process relating to primary care complaints has become less clear since April 2013.

It can be hard to make a complaint about Primary Care. Prior to their abolition, Primary Care Trusts had the power to handle all complaints about Primary Care services and there was a clear process. Since April 2013, the process relating to Primary Care complaints has become less clear. Many of the calls local Healthwatch receive are from people who do not know how and where to go to make a complaint about a service.

Who is responsible for GP services? It can be confusing to work out who is responsible and who a patient can raise concerns with. Most GPs are not employed directly by the NHS. They have a contract to provide NHS services. They employ their own staff and therefore if a patient has concerns about a member of staff at their GP surgery, they can complain to the GP who employs them. At every GP surgery, there has to be a procedure to deal with complaints, and someone who is responsible for dealing with complaints.

NHS England is responsible for a GP's contract and making sure that GPs carry out the terms of their contracts. If a patient has a complaint about a GP/GP practice, the patient can either complain directly to the organisation providing the service, or to NHS England who commissions the service. For example, a patient may not feel comfortable complaining directly to their GP, so could complain to NHS England instead.

Complaints provide rich information to healthcare providers and regulators. However, the Healthwatch England report into the health and social care complaints system, 'Suffering in Silence; <http://www.healthwatch.co.uk/complaints/report>, found that patients are often reluctant to complain about poor care. Healthwatch England found that when considering whether to make a complaint many people worry about speaking out

and the potential impact this might have on their care. Add to this the fact that people do not know that they can complain or how to do it, you end up with many people not raising a concern at all. This stops patients from raising the alarm when they are routinely kept waiting for appointments, or when they receive or witness poor care. Healthwatch England found that people are not given the information they need to complain and do not have confidence that complaining will change anything, so poor service like this goes unchallenged.

Background information on Healthwatch Sefton.

Healthwatch is unique in that our sole purpose is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf.

Using the views of the public we identify where and why things are not working and, most importantly, how people want things done differently.

Healthwatch Sefton is an independent health and social care champion giving children, young people and adults a powerful voice in shaping local services. Healthwatch Sefton is an independent company limited by guarantee, under the auspices of Sefton Council for Voluntary Service (Sefton CVS) and has been working in Sefton since 1st April 2013.

Healthwatch Sefton:

- Promotes and supports the involvement of local people in the commissioning, the provision and scrutiny of local care services.
- Enables local people to monitor the standard of provision of local care services.
- Obtain the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known.
- Produces reports and recommendations and share them with providers, commissioners, people responsible for managing/scrutinising local care services and Healthwatch England which will influence the way services are designed and delivered.
- Influences how services are commissioned by having a seat on the local Health and Well Being Board.

- Supports trained volunteers to complete Enter and View visits on health and social care services accessed by Sefton residents.
- Provides advice and information through its signposting and information service about access to local services so choices can be made about local care services.

Acknowledgements

Healthwatch Sefton would like to thank the following people for their support in promoting this work and encouraging GP practices to share information:

- Colette Riley, Practice manager, The Hollies and NHS Southport and Formby CCG Governing Body.
- Anne Lucy, Locality Development Support, NHS South Sefton CCG and NHS Southport and Formby CCG.
- Angela Curran, Locality Development Support, NHS South Sefton CCG
- Ryan McKernan, Communications and Engagement Support Officer, NHS South Sefton CCG and NHS Southport and Formby CCG

We would also like to thank the 18 GP practices who responded to the survey.

Methodology

A short survey was drafted by the Healthwatch Sefton support team and following amendments was authorised by the steering group membership at their meeting held Wednesday 23rd March 2016. The clinical commissioning groups (CCGs) across Sefton were kept informed of this work via its Engagement and Patient Experience Group meetings and NHS England were updated at meetings of the NHS Southport and Formby CCG and NHS England Joint Commissioning Committee.

The survey was hosted online and an invitation to get involved and fill in the survey from Healthwatch Sefton was emailed to all **51** GP practices* across Sefton via contacts at both NHS Southport and Formby CCG and NHS South Sefton CCG on 26th May 2016. The survey was also promoted in the weekly CCG bulletin. The deadline for responses was 24th June 2016.

18 responses were received from the survey, **12** from Southport and Formby based practices and **6** from South Sefton. Overall this provided a **35%** return rate.

There was a **63%** return rate from Southport and Formby based practices and **19%** from South Sefton.

*There are 19 GP practices based in Southport and Formby and 32 based in South Sefton.

Findings from the survey

The findings below provide a summary for each of the 14 questions. The first 2 questions of the survey asked for the name of the practice and the name of the person completing the survey and are not included within this report. Question 14 offered the opportunity to provide further information and where a response was made this has been incorporated into the relevant section. Responses from the survey are provided anonymously within this report so that no individual practice is identified.

The report details the responses from practices and does not take into account the patient population of each practice, practice catchment area and other demographic influences.

3. Please tell us about the complaints procedure at the practice.

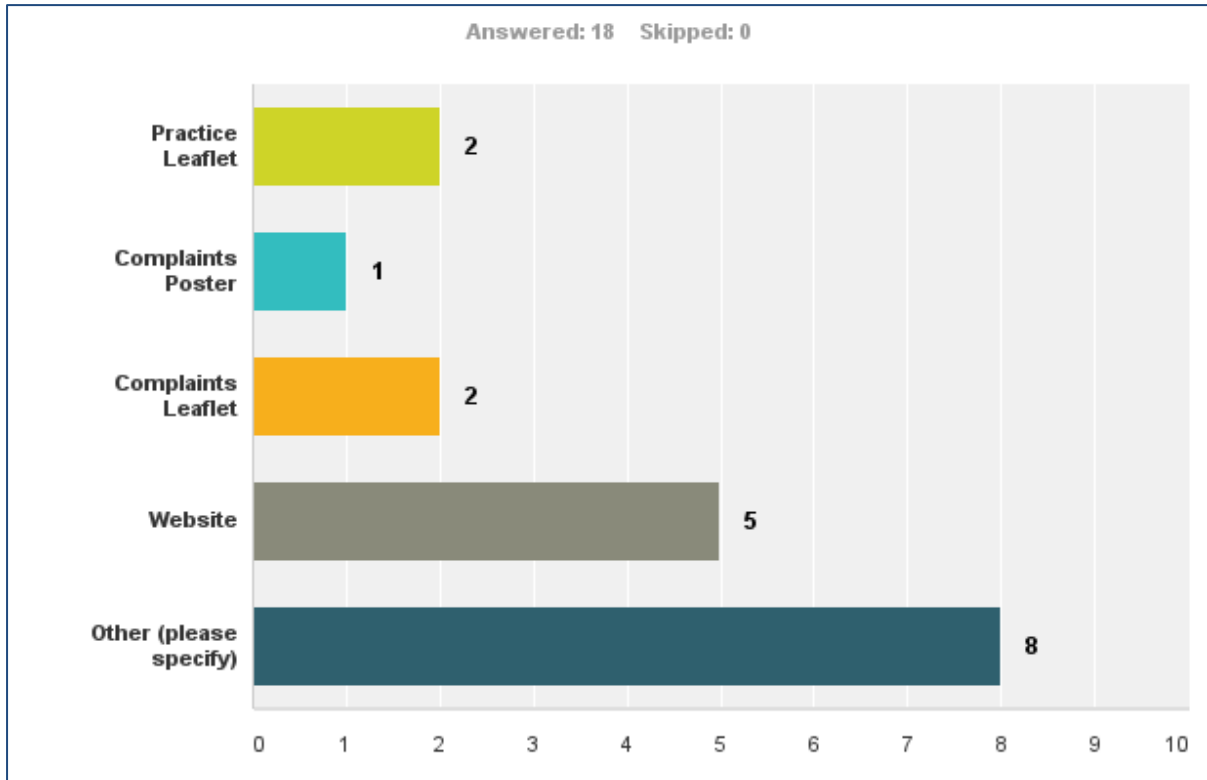
In summary a number of responding practices informed us that complaints could be made verbally or in writing to the practice manager/assistant practice manager. Some practices would only accept written complaints, some having a specific form to complete.

2 practices told us that they would have an initial discussion with the patient if appropriate in an effort to resolve the matter.

A wait of 3 working days for an acknowledgment was cited with a response to the full investigation within 14 working days of the date the complaint was received were the average response times quoted, with one practice responding within 5 working days.

4. How do you promote the complaints procedure to patients?

All responding practices use the methods below/a combination of the below to promote their complaints procedures to patients.



Other:

- Practice leaflet, complaints leaflet and website
- All of the above
- We promote on website and practice leaflet
- All of the above
- Practice leaflet and website
- All of the above
- We actually do all of the above
- We have a complaints leaflet on a notice board and it is highlighted in the Practice Leaflet - also on the website

5. Do you evaluate your complaints procedure?

All **18** responding practices told us that they evaluate their complaints procedure. **9** practices told us that they review the procedure on an annual basis. Practices also shared information about how information from complaints is shared and discussed on a regular basis by partners and practice staff:

- 🌱 We discuss all complaints at the partners meetings and also at the Practice staff meetings.
- 🌱 Contractual requirement on an annual basis.
- 🌱 we look at our complaints policy annually to ensure we comply with national guidelines.
- 🌱 We review all complaints as a team and do an annual complaint review. The complaints procedure is also reviewed annually.
- 🌱 We discuss complaints regularly with partners and staff at our practice meetings. We discuss any negative feedback as a group. We regularly discuss attitude/problems etc with all reception staff and have regular training sessions to improve our service and systems.
- 🌱 We evaluate the procedure to ensure that all aspects of the way patients can approach us to make a complaint are sufficient and accessible to all.
- 🌱 Any complaints discussed at team meeting. Will discuss to see if complaint was justified and how it could have been avoided.
- 🌱 We review our complaints annually and monthly at Practice Meeting.
- 🌱 We review it annually.
- 🌱 They are discussed at practice meetings.
- 🌱 As well as the discussions that take place during the complaints process and afterwards with GP's and staff we conduct an annual evaluation and summarise the findings.
- 🌱 Reviewed annually.
- 🌱 We have a protocol that we follow and we review this annually.
- 🌱 We review all procedures annually to check they are still fit for purpose and up to date. We would obviously look closely at the procedure if patients complained about the procedure not being effective or easy to use.
- 🌱 Any complaints / incidents received at the practice are discussed at our monthly in house team meetings this enables the whole team to be kept up

to date with proceedings. Any learning from the incident is reviewed a few months later to ensure any changes to procedures are being adhered to. The practice finds these team discussions of all complaints/ incidents helps us to evaluate the effectiveness of the complaints procedure and to clarify that the patient has been treated fairly, in a timely manner and with respect.

- We discussed the process in 2014 - we try to solve any issues without recourse to the Complaints Procedure, but this is not always possible or appropriate (particularly if clinical issue).
- We discuss monthly at the practice meeting every month.

6. Does the practice learn from complaints?

All **18** practices responding to the survey told us that they learn from complaints and shared information on how partners and staff are involved in discussions/evaluation of the complaint and what changes (if any) may be required;

- All complaints are discussed within the whole team, and any lessons learned are noted.
- Depending on the complaint we look at our procedures, if they were followed, is there anything we could have done different do our procedures need changing. What we need to change to ensure it doesn't happen again
- Annual complaint review undertaken. Common areas of complaints are identified.
- We discuss complaints during the GP Partners meeting and have an annual review meeting. We look to see if there are any reoccurring items that patients complain about and agree a plan to rectify the issue if possible.
- When we review the practice complaints we look for learning points as a team and act upon them.
- By discussing regularly making improvements to our service and amending our systems if necessary.
- After a complaint has been received all members of the practice team are spoken with to compile a formal response. The complaint and the response are then discussed at practice and staff meetings to ensure the whole team

is aware of the complaint and to ensure that there are learning points taken from the subject of the complaint.

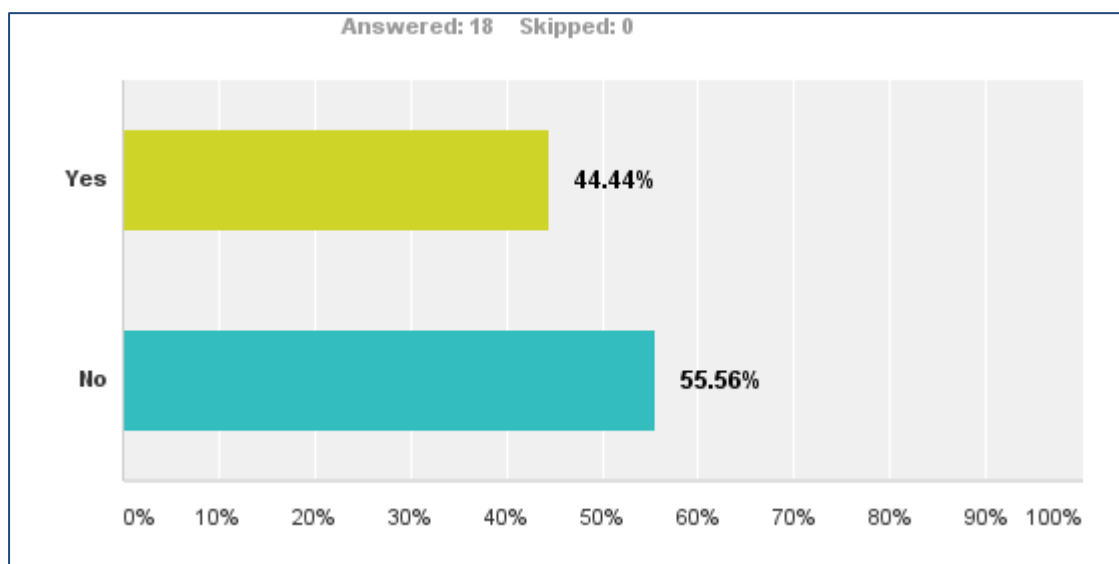
- Discussed to see how complaint could have been avoided and how we can avoid same complaint being made again
- Discussion, with all partners and relevant staff members, documented fully and then review after appropriate time period.
- We will discuss a complaint with all members of staff and how it could have been avoided.
- Practice implements new information to help stop complaints in the future.
- Sometimes a change in process is required after a complaint has highlighted an area that may not be clearly defined. The series of events that may have led up to the point at which a complaint is made are investigated and discussed as a "lessons learnt" session with appropriate members of the team Training needs can also come to light during the investigation/evaluation process
- Reviewed annually included what we did differently as a result of the complaint and how we can improve. Many complaints give rise to significant events which are systematically reviewed to make sure the changes have been implemented.
- Once the complaint has been dealt with we discuss action to be taken if applicable
- Complaints are discussed at a weekly meeting with all GP's and the Practice Manager present. Any learning points are minuted and actioned accordingly, with the PM disseminating learning information to other reception/admin staff as appropriate.
- By carrying out evaluations/ team discussions we learn from any mistakes that have happened. How the complaint is dealt with, how it is handled and how it is resolved ensure that any lessons are learnt and steps are put in place to ensure the mistake would hopefully be prevented from happening again.
- We try to. Some complaints are beyond our scope (GPs who work part time etc) We discuss any complaints at a Practice Team Meeting; if there is a clinical complaint, that stays within the Clinicians Meeting
- We learn and discuss an action plan or we do it as a SEA

7. Do you promote the Healthwatch Merseyside & Cheshire Complaints advocacy service to patients when they contact you about making a complaint?

8 practices told us that they promote the above service with 10 practices informing us that they did not undertake promotion.

The Healthwatch Merseyside & Cheshire Complaints advocacy service is provided by the Carers Federation and provides practical support and information to help people who want to make an NHS complaint.

Healthwatch Sefton will discuss the findings from this survey with the manager of the service to ensure all Sefton based GP practices are aware of the Complaints Advocacy service.



- 🌸 In response letter.
- 🌸 By poster
- 🌸 Practice Complaints Leaflet Website
- 🌸 This is the first time I have had knowledge of this service!
- 🌸 We have leaflet in reception and posters. We also draw these to patient's attention.
- 🌸 The complaints procedure is advertised on our website.

- All complaints on a minor basis. Perhaps we would promote this service depending on complaint
- Did not know we should. Will do from now on.
- Haven't done in the past but will start to.
- We tend to direct patients to the PALS officers if and when the need arises. I was not aware that the advocacy service was still in operation
- I am quite a new Practice manager so I don't really know about this but I will actively look now
- It is quoted on all complaint response letters and documented in our procedures and on our website.
- Healthwatch signs are in the waiting room.
- No - we should do - Healthwatch box is in our Waiting Room - this is something we will discuss at our next Practice Meeting

8. How many complaints has the practice received this year? (April 2015 - to date)

9. How many of the complaints received April 2015 – to date were upheld?

10. How many of the complaints received April 2015 – to date were not upheld?

Responses to the above 3 questions can be found in the following table. The responses to the questions were interesting to note.

The number of complaints received per practice is variable with some practices having a low number of complaints (1 practice had no recorded complaints) whilst other practices have more than 20 complaints.

Responses also show that the number of complaints not upheld is higher than those which are upheld.

One practice informed us that they did not think it was possible to define 'upheld';

“The majority of our complaints refer to not being able to access an appointment at a convenient time or being able to get through on our phone lines. We have and continue to strive to do everything possible to maximise patient access but the demand is ever increasing. It is therefore hard to define whether these complaints are upheld?”

Practice	Number of Complaints	Number of complaints upheld	Number of complaints not upheld
A	11	4	7
B	4	0	4
C	7	0	7
D	7	2	5
E	1	1	0
F	21	1	20
G	2	0	2
H	3	0	3
I	6	0	6
J	3	0	3
K	0	0	0
L	7	3	4
M	25	2	23
N	7	3	4
O	27	0??	0??
P	2	1	1
Q	0	0	0
R	10	6	4

“Over the past year we have only received 3 complaints non of which were serious.”

“We have had no complaints so far since 1/4/2015 - We do however have 2 outstanding complaints, both relating to clinical aspects of care, which have been passed to the appropriate GP Defence Organisation. One of these complaints came to us via NHSE, as the patient was not longer registered as a patient here In our area, and this could possibly be specific to x, our patients appear aware of their options for directing complaints, including NHSE and the Ombudsman, together with a direct complaint to the Practice”

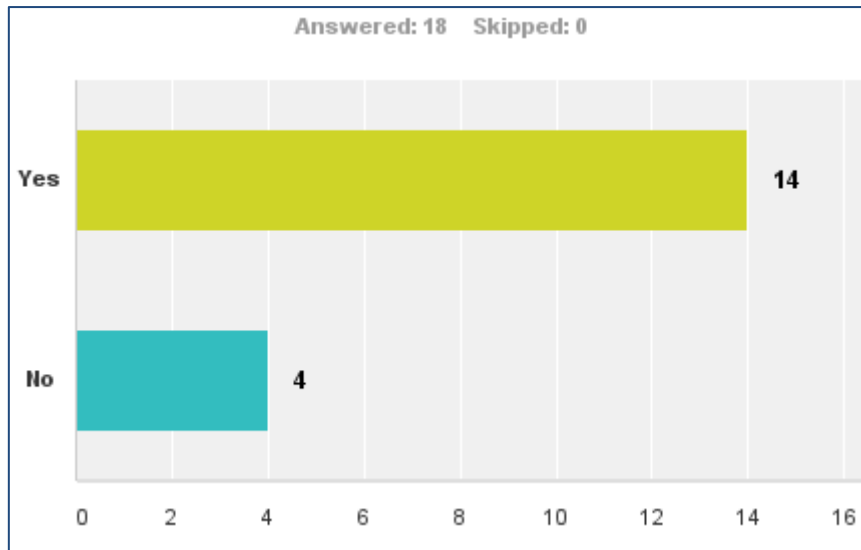
11. Do you share complaints information from your practice with NHS England?

We are aware that GP practices are contractually obliged to submit their complaints data on an annual basis to NHS England. This is called a KO41b return. **3** of the **18** responding practices told us that they did not share their complaints information with NHS England. The following comments were shared with us;

- Annually
- If they ask for the information and If it is relevant to the complaint
- Contractual requirement
- via HSCIC
- Annually
- By way of complaints audit- yearly
- When they ask for the information, usually on an annual submission basis.
- As and when a complaint is made
- Annually
- Annually.
- Annual return is required by NHSE
- Only if we feel it is something we need to share.
- Once a year when we are required to submit an Annual Complaints Submission via the Primary Care Web Tool
- The annual mandatory complaints form is completed.
- We have an annual report to complete
- We do an annual audit
- Some of the information requested in the survey is available from NHSE as it is a contractual requirement for Practices to report, on an annual basis, the number of complaint received. Information regarding the number of complaints received in a financial year is in the public domain.

12. Do you have a system in place to capture compliments about services at the practice?

14 of the responding practices told us that they capture compliments. **4** practices told us that they had no system in place (**1** practice told us they would be introducing a system and **1** practice informed us that they receive compliments but they did not have a specific system in place).



- 🌸 Feedback box in reception, we keep any thank you cards, we log all compliments received.
- 🌸 This is something we are going to introduce.
- 🌸 FFT Patient Questionnaires Verbal Compliments are discussed in significant event reviews and shared with the Practice team.
- 🌸 We have a suggestions box and friends and family test.
- 🌸 Yes, we have a folder and we discuss at practice meetings
- 🌸 There is no specific system in place to capture compliments; however we do receive letters and cards from the patients expressing their gratitude for services they have received.
- 🌸 Recorded as a significant event
- 🌸 Suggestion box, NHS choices
- 🌸 Box in waiting room. Friends & Family test. Patient questionnaire.
- 🌸 Keep thank you cards or any other compliment methods
- 🌸 We have a comments/suggestion box for patients to utilise - this is in the waiting area. Patients will often send cards or letters of thanks
- 🌸 Kept in a file. Shared with whole team
- 🌸 We scan them into a shared file.
- 🌸 We receive a number of letters or verbal communication (which is then documented) from patients complimenting our services. These are recorded in the same way as complaints and staff are made aware of the compliments to boost morale.
- 🌸 We have a suggestions box in the waiting room. There is a sign next to it encouraging patient comments both positive and negative to help us improve our practice. We ask patients for feedback via NHS choices-forms

detailing website are on the reception counter. We ask patients to complete the friends and family questionnaire-forms for completion are on the reception counter. We display the monthly results in the waiting room and on the website. We carry out in house patient surveys. We have a patient participation group.

- 🌱 Only via Friends and Family - patients are surveyed often, and we struggle to coax patients to complete the F&F if they have completed one previously, so to add a further request for opinion may negatively impact on the number of F&F responses

13. Does the practice use the Friends and Family test?

All **18** practices use the Friends and Family test. The Friends and Family Test (FFT) is a feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience. It asks people if they would recommend the services they have used and offers a range of responses. When combined with supplementary follow-up questions, the FFT provides a mechanism to highlight both good and poor patient experience. This kind of feedback is vital in transforming NHS services and supporting patient choice. Since it was initially launched in April 2013, the FFT has been rolled out in phases to most NHS-funded services in England, giving all patients the opportunity to leave feedback on their care and treatment.

- 🌱 Information goes into practice annual report.
- 🌱 We inform staff at monthly meetings and on notice board
- 🌱 Monthly audit published for patients to view
- 🌱 We use this information to make practice improvements and involve the PPG in discussions.
- 🌱 We have very few responses.
- 🌱 The information gathered from the friends and family test is submitted to NHSE.
- 🌱 No negative comments on surveys
- 🌱 Via CQRS to NHSE
- 🌱 Displayed in waiting room, on website.
- 🌱 Very few cards filled in now. Any comments are passed on to the relevant section.

- 6 Summary information is shared with staff at their meetings and summary results are sometimes posted in the waiting area.
- 6 Very low response rate. We read all comments and make changes where appropriate.
- 6 We look at what the patients highlight that they are not happy about and act on this if applicable.
- 6 We are required to report on our Friends and Family test information every month in the CQRS portal so are constantly monitoring the data.
- 6 We ask patients to complete the friends and family questionnaire-forms for completion are on the reception counter. We display the monthly results in the waiting room and on the website. We have a "you said, we did" action board in the waiting room. We feedback the responses to our Patient participation group.
- 6 Usually complimentary - which is shared with team
- 6 Leaflets in reception, reception staff give out and it's on the website.

Conclusion

This report details information gathered during our fact finding exercise about how complaints are handled at different GP practices across Sefton.

The number of complaints made per practice varies, some having less than 5 complaints to some having more than 20 annually. **Is this because some patients know they have a right to complain and some don't. Is this because some patients were made aware of how to complain and some weren't? Do some patients know for certain that their care would not be compromised by making a complaint and some don't?**

The number of complaints not upheld, outweigh those which were upheld. One practice informed us that they did not think it was possible to define upheld as many of the complaints they received related to not being able to get an appointment/ telephone system.

Within 'My Expectations for raising concerns and complaints', http://www.ombudsman.org.uk/_data/assets/pdf_file/0007/28816/Vision_report.pdf, a piece of work which Healthwatch England contributed to, the language of complaints was discussed. For example for some, the term complaint should only be used when a formal written complaint has been made, for others a complaint covered a lot of different kinds of dialogue including; comments,

suggestions, feedback, concerns and grievances. **How do we locally define a complaint, a concern, and a compliment?**

Point 6 of the Healthwatch England 'Every Complaint Matters', a seven-point plan for the NHS and social care asks the government to make it mandatory for every commissioner, provider and regulator across health and social care to report every complaint to the Health and Social Care Information Centre (HSCIC) regardless of how it is made or which service it is about - enabling a national measure of consumer experience of the complaints process to track progress in improving this experience.

http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/15062015_every_complaint_matters_-_action_plan.pdf

GP practices are independent organisations and will have their own policies for handling complaints. Complaints provide vital information about how well services are performing. Information from complaints also helps to provide important information to help us to carry out our statutory duties. We are aware from the responses that the majority of practices return their complaints data annually to HSCIC, some informed us that they didn't. As a commissioner, how does NHS England (Merseyside and Cheshire) receive timely information on what patients are making complaints about at a practice level? **One of the challenges we face in terms of complaints is the slightly different approach taken by each local provider and making sure that locally we have access to up to date information.**

Recommendations

- 1) We found from this fact finding work that not all GP practices across Sefton promote the Healthwatch Merseyside & Cheshire Complaints Advocacy Service. **Recommendation:** Healthwatch Sefton Manager to make contact with the manager of the advocacy service to address this gap.
- 2) We have been discussing the findings from this fact finding exercise with the Chair and Vice Chair of the Overview and Scrutiny Committee (Adult Social Care and Health) who have raised concerns relating to complaints processes. A committee report 'complaints regarding GP Practices' was


discussed at their meeting held, 6th September and the setting up of a working group to look at this was agreed. **Recommendation:** Healthwatch Sefton to agree to have a seat on this working group. The aim for Healthwatch from sitting on this working group would be that a local declaration of understanding about how to manage complaints is established.

Next Steps

As a Healthwatch organisation, it is important that we include a patient perspective to this work and our next steps will be to work with patients of GP practices to find out if:

- 🍷 patients are given information they need to make a complaint.
- 🍷 patients have confidence in local systems to resolve their concerns.
- 🍷 patients find the complaints system easy to use or find it complex and confusing.
- 🍷 patients need support to ensure their voices are heard.

Appendix 1: Copy of the survey sent out to all GP practices across Sefton



Finding out about complaints processes in primary care (GP Practices)

Finding out about complaints processes in primary care (GP Practices)

This short survey will help Healthwatch Sefton to capture a snapshot of how complaints processes work across different GP practices.

*** 1. Name of Practice:**

*** 2. Name of person completing survey:**

3. Please tell us about the complaints procedure at the practice. (you can also email a copy of the complaints procedure to info@healthwatchsefton.co.uk)

*** 4. How do you promote the complaints procedure to patients?**

Practice Leaflet

Complaints Poster

Complaints Leaflet

Website

Other (please specify)

1

*** 5. Do you evaluate your complaints procedure?**

- Yes
- No

If answering yes, please tell us how you evaluate the complaints procedure? If answering no, please tell us why the practice doesn't evaluate the complaints procedure.

*** 6. Does the practice learn from complaints?**

- Yes
- No

If answering Yes, how does the practice learn from complaints?, If answering No, please tell us why.

*** 7. Do you promote the Healthwatch Merseyside & Cheshire Complaints advocacy service to patients when they contact you about making a complaint?**

- Yes
- No

If you promote the service please tell us how you do this? If you answered no to this question please tell us why you don't promote the service

*** 8. How many complaints has the practice received this year? (April 2015 - to date)**

*** 9. How many of the complaints received April 2015 - to date were upheld?**

*** 10. How many of the complaints received April 2015 - to date were not upheld?**

*** 11. Do you share complaints information from your practice with NHS England?**

Yes

No

If answering 'yes', how often do you report to NHS England? If answering 'no', why don't you share information?

12. Do you have a system in place to capture compliments about services at the practice?

Yes

No

If answering 'yes' please tell us how you capture compliments and how the practice uses this information. If answering 'no' please let us know why there is no system in place.

13. Does the practice use the Friends and Family test?

Yes

No

If answering 'yes' please tell us how you use the information shared from the Friends and Family test. If answering 'no' please tell us why the practice does not use the test.

*** 14. Thank you for completing this short survey. Please use this space to provide any further information:**