



## Peartree Medical Centre: Annual Complaints Report

February 2016

### 1. Purpose of this report

- To set out the number and nature of complaints made to the Practice Manager during the year to 31 January 2016.
- To inform the Practice Team and the Patient Reference Group.
- To determine any learning outcomes.

### 2. Background

This is the fourth formal annual report prepared by the Practice on complaints made directly to the Practice Manager. This covers any written complaints; complaints made over the internet, by telephone or in person in the surgery.

The Practice has a formal complaints procedure which is available from display units in the surgery waiting room or on the website. The Practice Leaflet also explains the Complaints Procedure. All Reception staff receive formal training in the handling of complaints and as part of wider annual Customer Care training. From this training, staff are encouraged to (“LESS”):-

Listen  
Empathise  
Summarise  
Solve

If they are unable to complete all four steps, the complainant will be routinely referred to the Practice Manager.

All complaints are recorded in the Register by the Practice Manager as they occur. Every six months – or more frequently if the issue were to warrant it – a summary of all the complaints are presented to the monthly Clinical Meeting for discussion and action by all Clinical Staff. At the same time, the latest Significant Events are presented so that they can be considered for any similar themes or areas of overlap.

During 2015, the Practice has actively promoted the Friends and Family Test (FFT). This is important complementary data for this report and is considered further below. FFT has also been discussed in the Clinical Meeting throughout the year.

If as a result of the Clinical Meeting discussion, there are learning outcomes for administrative staff, the Practice Manager & Senior Receptionist will raise these in the subsequent monthly Reception meeting.

The Practice has self-assessed its processes for the purpose of registration with the Care Quality Commission and has declared itself compliant with those outcomes directly or indirectly related to complaints and patient feedback.

By the nature of the services that are delivered by the Practice, some of the complaints relate to confidential patient sensitive issues and therefore, the report anonymises these accordingly.

Feedback from patients at the main Patient Group meeting and the Ladies Only Group has also been utilised to validate the findings. During the year, the following formal meetings have been held:-

- January 2015 Ladies Patient Group
- March 2015 Main Patient Group
- October 2015 Ladies Patient Group
- November 2015 Main Patient Group

During the year, patients have also been actively encouraged to provide feedback via NHS Choices.

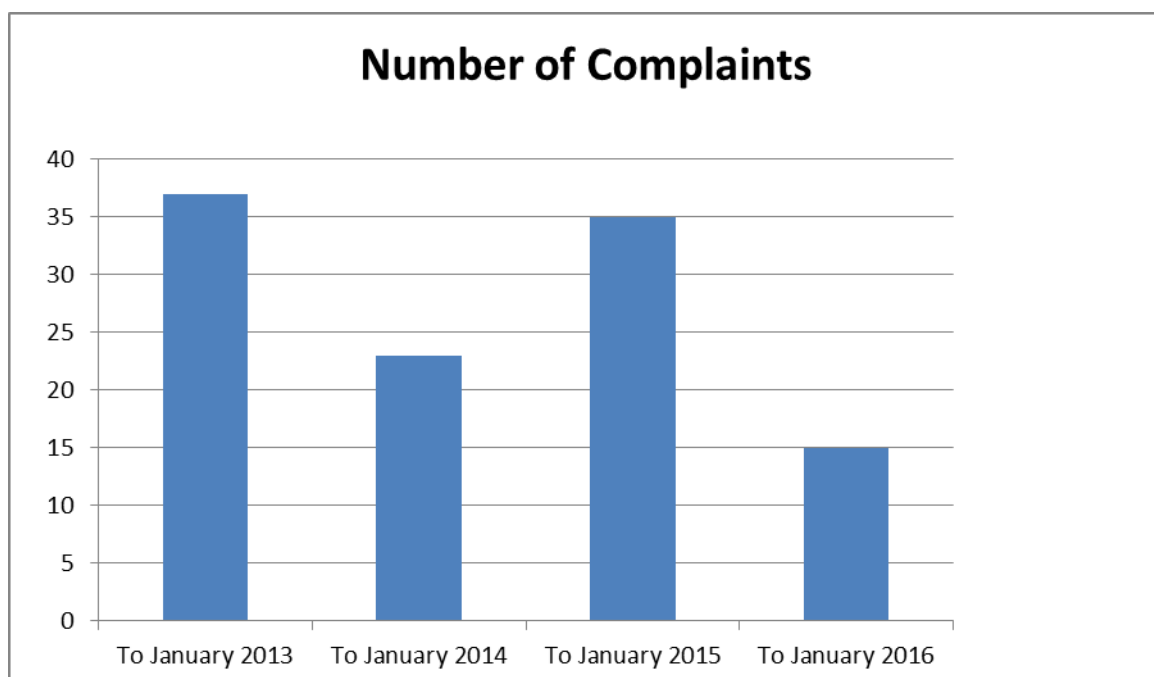
Literacy and language skills can be a barrier to effective communication. The Practice is the only surgery in Derby with its own interpreter. This service has been the subject of a recent audit which demonstrates that it is working well.

The Practice has also considered the outcomes from this report alongside the most recent findings from the Primary Care Web Tool (PCWT). This is also addressed below.

This report will be considered at the main Patient Group meeting set for March 2016.

### **3. Number of Complaints**

The number of individual complaints recorded by the Practice Manager in the year to 31 January 2016 (with comparative data) is as follows:-



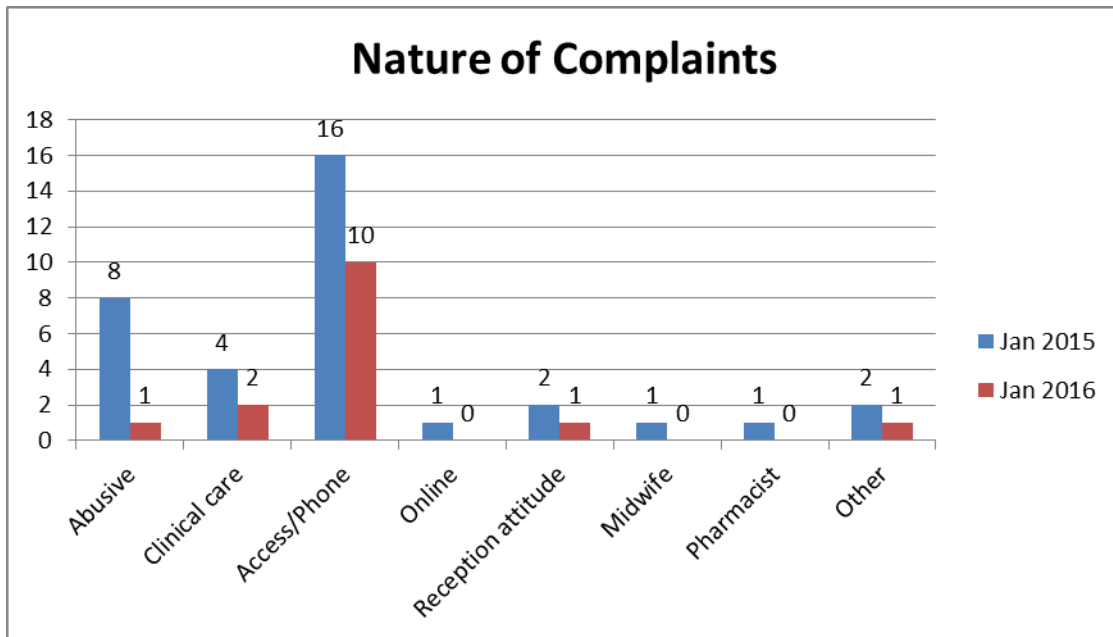
In an average week, it is estimated that there are approximately 660 direct patient contacts with clinicians in the surgery (face to face & telephone) as well as an indeterminate number of contacts with administrative staff at the Reception counter or over the phone.

For a year, therefore, there would be conservatively 34,320 individual patient contacts. Complaints made to the Practice Manager, therefore, represent 0.04% of total contacts.

This year has witnessed the lowest recorded level of formal complaints during the last four years. This outcome is considered further below.

#### 4. Nature of Complaints

The nature of complaints fielded by the Practice Manager compared to the previous year are as follows:-



##### Abusive

During the year, there has been a marked reduction in abusive patients warranting deduction from the patient list who then subsequently lodge a complaint.

The one incident recorded relates to a patient whose behaviour was border line abusive. She subsequently took her complaint to NHS England who endorsed the actions taken by the Practice to deduct her.

##### Clinical care/attitude

There were two specific cases about the quality of care provided. It is difficult to provide further details without compromising confidentiality. Both instances were reviewed thoroughly by the clinicians and any issues addressed.

Neither complaint compromised patient care; neither complaint led to a Significant Event and neither complaint was escalated to NHS England or others.

### GP Access & Telephone system:

As in previous years, the linked issue of GP access and the telephone system show the highest level of complaints. However, these are at their lowest annual level.

It is possible that the provision of more telephone consultations is helping to address access issues. An audit during the year, whose outcomes were shared with the Patient Group, set out the twin positive impact of robust management of Did Not Attends (DNAs) together with more telephone consultations.

There were several complaints in the prior year ending January 2015 about the new telephone system. It was installed in February 2014 and there were a number of 'bedding in' issues which have been ironed out. There were only two complaints specifically about the phone system during the year to January 2016. Both of these proved to be technical faults which the supplier addressed.

However, GP access continues to be a significant issue as evidenced by the FFT. This is considered further below.

### Online services

The full suite of online services has now been introduced including Electronic Prescribing in 2015. There were no complaints about online services during the year. This includes the detailed coded patient record.

There has been a steady trickle of patients registering for online services each month during the year. This continues to be encouraged via the website and waiting room notices.

### Reception attitude

There was one instance of a patient complaining about a receptionist's attitude. This is relatively very low given the level of day to day patient contact. Complaints via the Friends & Family Test about Receptionist attitude have also been encouragingly low.

### Other

This complaint related to a Peartree patient being unhappy with the service received from a hospital department following referral by the GP. Advice was given on how to progress this complaint with the offer of

further support should the patient be dissatisfied with the response. This did not directly relate to anything which the Practice had done or could learn from.

#### **5. Friends and Family Test (FFT)**

The Practice has embraced the FFT encouraging a steady monthly flow of FFT feedback. Further detail is set out in the Appendix.

The response rate is 8.5% of the total patient population.

The response rate is 11.9% of the total population over 16 years of age. (ie those likely to participate)

#### **6. Significant Events**

There were no Significant Events that resulted in formal complaints.

#### **7. Primary Care Web Tool (PCWT)**

This is a web based audit tool which positions the surgery against its peers on a number of clinical and non-clinical indicators. If the surgery is an outlier against its peers, the extent of the difference is graded as a Level 1; Level 2 or Level 3 trigger. Level 1 is the least amount of deviation and Level 3 is the most.

The Practice has three Level 1 satisfaction triggers for patient care, access and overall quality from the responses made. It is believed that the response rate is about 70 patients and the data is older than the period covered by this report.

#### **8. NHS Choices**

The latest status on the NHS Choices website records a rating of 70.9% of patients recommending the surgery. There are 13 responses. Several responses pre-date the period covered by this report.

## **9. Generic Learning outcomes**

The report above sets out a significant amount of evidence to support a thorough assessment of patient feedback and learning outcomes for the Practice. This is current and drawn from a broad based sample – particularly the FFT & Complaints data. Learning outcomes have been identified as follows:-

### **(i) Access**

It is clear that the telephone system has now bedded in well. Both patients and staff are more comfortable with its operation. Through the Ladies Only Group, patient recommendations to adjust the opening message and menus have been well received.

Formal complaints about access are at a significant low and telephone consultations coupled with reduced DNAs may be contributing to this outcome. Direct actions to reduce telephone waiting times at busy periods may also be helping.

However, it would be naïve to assume that access is no longer an issue as evidenced by the FFT Question Two analysis in particular. Whilst the surgery has a high rating of 86%+ of patients recommending us, nearly one in three are still saying that access is a problem. The majority of complaints also refer to this issue.

The challenge for the Practice is still to educate patients on the best use of the NHS; to promote the alternative of a telephone consultation if appropriate and to mitigate the impact on clinical services of reducing budgets in forthcoming years.

The audit work on telephone answering times and remedial action will continue and be refined in 2016-17.

The Practice understands the access conundrum and will continue to monitor this with its patient groups looking at all the various inter-related issues. There is no simple 'off the shelf' answer when resourcing is scarce.

### **(ii) Online services**

There is a steady trickle of patients registering for online services each month. The Practice population is not as 'internet savvy' as other areas of Derby but the feedback from the Patient Group is that this is increasing eg growing use of online supermarket shopping.

The Practice will continue to ensure that all online services are routinely available as the practice population's appetite develops promoting this wherever possible. This is included in the 2016-17 Action Plan.

(iii) Patient engagement

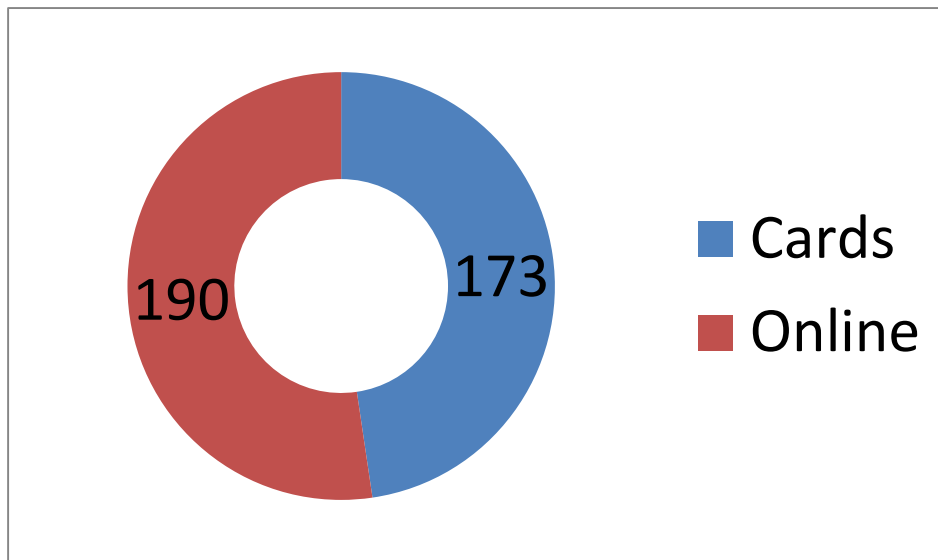
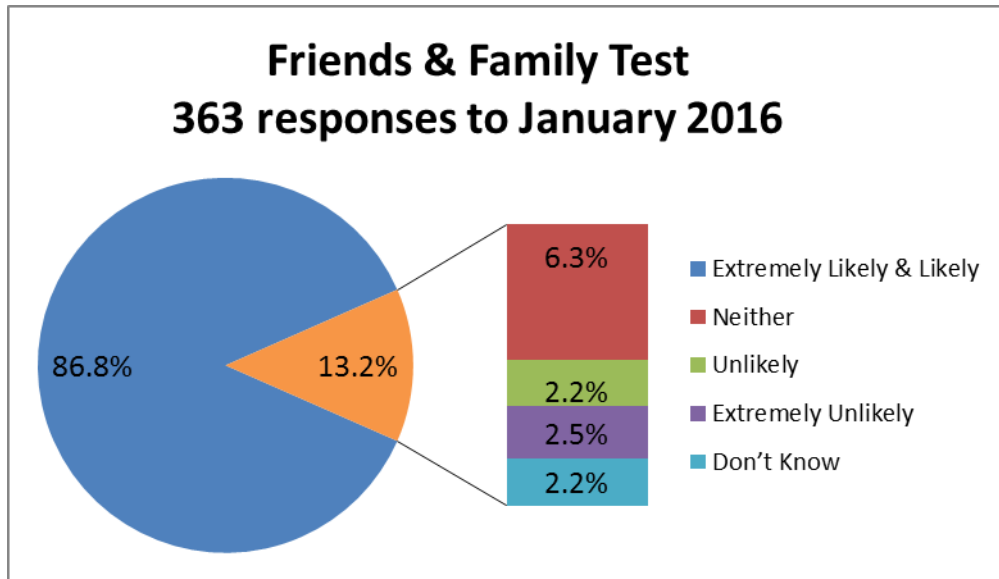
The Practice is firmly committed to a programme of patient engagement which will drive the development of services. It will continue to press on with capturing patient views regularly through the various sources identified in this document.

**Mike Newbold, Practice Manager**

**February 2016**



Friends and Family Test Feedback  
January 2016



### Friends & Family Feedback Question Two Comments

