

Friends and Family Test Policy – General Practice

February 2018 – Version 1.2



DOCUMENT STATUS	Draft
DATE ISSUED	10/5/2018
DATE TO BE REVIEWED	

AMENDMENT HISTORY

Version	Date	Amendment History
1.0	15/2/2018	
1.1	6/3/2018	Addition of proposed monitoring of zero and suppressed data
1.2	10/5/2018	

REVIEWERS

This document has been reviewed by:

Name	Title/Responsibility	Date	Version
Gill Shelley	Primary Care Contract Manager	6/3/2018	1.1
Marion Janavicius	Contract Manager	27/2/2018	1.1
Dr B Mehta	General Practitioner	7/3/2018	1.1

APPROVALS

This document has been approved by:

Group/Committee	Date	Version

DISTRIBUTION

This document has been distributed to:

Distributed to	Distributed by/when	Paper/Electronic	Document location

Contents

1. Purpose	4
2. Background.....	4
3. Responsibilities of Commissioners	5
4. FFT in Wolverhampton General Practice	6
5. FFT in General Practice Policy	6

1. Purpose

The Purpose of this document is to provide a single overarching policy for Friends and Family Test submission within Wolverhampton General Practice. This policy sets out national guidance and contractual requirements and local procedures for supporting FFT submission, increasing uptake and managing repeated non-submission.

2. Background

Friends and Family Test (FFT) is a feedback tool enabling people that use all NHS services to have an opportunity to provide feedback on their experience. FFT was launched in April 2013 by NHS England (NHSE), and has been rolled out to most NHS-funded services in England, including General Practice (NHS England, 2014), where it is now a contractual obligation.

The three key requirements of GP practices for FFT are:

- **To make the opportunity to provide feedback through FFT available to all patients at any time.**
- **To submit FFT data to the NHS England analytical team via the Calculating Quality Reporting Service (CQRS) each month.**
- **Publish the data locally.**

The aim of FFT is to be as flexible and inclusive as possible, but not to place additional burden on the practice to gather data and on patients to provide it. The key is to provide a continuous feedback loop between practice and patient that allows identification of issues, improvement of services and celebration of successes. NHSE are clear however that the aim is not to allow comparison between practices, and that it should not be used as a performance dashboard, but that it can be used to track progress over time.

Guidance provided by NHSE (2014) outlines the following aims of FFT:

- Gather useful feedback from people who use services that can be fed back directly to the staff that provide their care in a simple format in near real time.
- Identify areas where improvements can be made in order to take practical actions.
- Inform current and prospective patients about the experiences of those that use the practices services.

Data collection should be continuous, allowing patients to respond after every episode of care if they wish to do so, it should be anonymous, simple and the results made available publicly in a transparent way e.g. on practice website, in reception, via the NHS Choices platform. There is no target response rate, and practices are responsible locally for collecting and submitting their data.

Data can also be used by commissioners alongside other insight and quality information for service planning and contract development. It may also provide insight to other advisory and regulatory bodies such as Care Quality Commission (CQC) and Health Watch.

As FFT is a contractual requirement for GP practices there are a number of mandatory elements to the programme:

- **The standard question wording must be used (please see below)**
- **One supplementary free text follow up question must also be used**
- **It must be anonymous (unless there are issues such as safeguarding or fitness to practice identified)**

- **Data must be submitted to NHSE monthly in the standard format**
- **Results must be published locally**

FFT asks people the following question:

“We would like you to think about your recent experiences of our service. How likely are you to recommend our GP practice to friends and family if they needed similar care or treatment?”

There is a range of responses using a Likert scale (Extremely Likely, Likely, Neither, Unlikely, Extremely Unlikely and Unsure). This can be combined with supplementary free text follow-up questions, as a platform to highlight both positive and negative patient experience. Feedback around patient experience is vital for transforming NHS services and supporting patient choice, and this can be coupled with GP patient survey, in-house patient surveys and information posted on platforms such as NHS Choices. The free text responses are particularly important in providing insight into issues that may be quickly and easily resolved.

Responses can be made by patients in a variety of ways:

- Paper responses using cards and a ballot box available from NHS England to place in reception
- SMS text message responses
- Electronic responses via patient check-in screen or practice website
- Telephone responses
- Verbal responses

The responses are then collated by the practice and submitted to NHSE via Calculating Quality Reporting Service (CQRS). These results are [published on a monthly basis by NHSE](#) and are available to the general public to view. Practices must submit the following information:

- Number of responses in each category
- Number of responses collected by each method

Free text and additional responses should not be submitted to NHSE, but collated within the practice and used as feedback.

3. Responsibilities of Commissioners

NHSE have provided comprehensive advice for commissioners around FFT for GPs. The focus for commissioners of GP services is on influencing future behaviour in practices that are either not submitting data or submitting data that raises concerns e.g. low or zero submissions. The aim is to encourage practices to participate in FFT and use the process to inform and improve patient experience and care, which is in keeping with most CCG aims and objectives around promoting quality and reducing health inequalities.

Non-submission of Data

NHSE state that “Commissioners should contact practices that do not submit data to remind them that FFT is a contractual requirement.” A standard letter has been produced which can be sent to GP practices that do not submit data and this can be seen in Appendix 1. If a practice fails to submit data for a second month, a further letter can be sent (see Appendix 1).

If a practice fails to submit for a third month, commissioners should consider issuing a breach of contract notice. Where contract breaches are given, the practice in question must provide a remedial action plan providing assurances around improving uptake and submission, and outlining how they will address the issue.

Concerns about data quality

Where the NHS England analytical team has concerns about the data (generally because the number of responses is significantly higher than they would expect) it will be published in italics. Commissioners may then contact practices where the number of responses is very low, or unexpectedly high to ask them to consider how the FFT is working, and to see if it could be improved.

Incorrect data submitted

The CQRS system does not allow practices to resubmit data once it has been submitted. The commissioning guidance states that “Practices that realise they have submitted incorrect data, before the deadline for submitting data, can ask for their data to be removed by completing a simple proforma, In this case, the NHS England analytical team will replace the data with the words: ‘data submitted but not published due to issues with the data entry process’”.

4. FFT in Wolverhampton General Practice

When considering FFT responses the fact that only those who have attended a GP appointment or their representative would be invited to participate needs to be kept in mind. NHSE data considers the whole eligible population when calculating response rates, when compared to total GP appointment responses are low, but this would include children and others without capacity to respond, those who decline to participate and those who may submit blank questionnaires.

FFT in general practice in Wolverhampton has consistently compared favourably to national and regional performance and continues to improve, returns are monitored by the CCG Quality Team and by Contracting.

5. FFT in General Practice Policy

The following will be implemented by the CCG as the commissioner of services as part of a gold standard framework for FFT:

- a. Issue of a breach notice for those practices that fail to submit on 3 occasions between 1st April and 31st March.
- b. Monitoring of practices with repeat zero submissions and suppressed data.
- c. Monitoring of those practices that receive high numbers of “would not recommends” and “neither” or “unsure” responses.

The following will be implemented by practices and monitored by the CCG:

- a. Practices who receive breach notices will provide a remedial action plan outlining how they will address the issue and support will be provided by the CCG Quality Team where it is needed.
- b. Provision of action plans by practices that receive high numbers of zero submissions, suppressed data outlining how the practice is addressing the issue.
- c. Provision of action plans by practices that receive high numbers of “would not recommends” and “neither” or “unsure” responses outlining how the practice is addressing the issue.
- d. Collation of free-text responses received and use of a “you said – we did” forum undertaken in collaboration with the practice Patient Participation Group and results displayed within the practice and online. If no active PPG is present at the practice, then this should be promoted by the practice management team.
- e. Triangulation of FFT data with other data such as GP Survey and NHS Choices comments, practice complaints, and use of this information to celebrate and share good practice across the city, and to learn from what could be done better.

- f. To share good practice and learning with other members of the practice group and PPG.

The CCG will facilitate local practice groups to enable them to promote active participation and identify effective platforms for data collection across their members:

- a. Support for practices from CCG Contracting and Quality and Risk Teams, in conjunction with the LMC where no and low submissions have traditionally been a concern to improve uptake.
- b. Identification of formalised supplementary questions that can be added to the FFT questionnaire and the data collected and used to inform services.
- c. Engagement with local Patient Participation Groups to promote uptake

Appendix 1 –Non-submission Letters

Level 1 Letter

Technology Centre
Wolverhampton Science Park
Glaisher Drive
Wolverhampton
WV10 9RU

Tel: 01902 444878
Fax: 01902 444313
Email: WOLCCG.WCCG@nhs.net

Dear Colleague

Friends and Family Test

As you are aware since 1st December 2014 GP practices have been required to implement the Friends and Family Test (FFT), in line with the [guidance published by NHS England in July 2014, which can be found here](#). In addition to the formal guidance, NHS England has also published a [shorter summary guidance that you can find here](#).

It is a fundamental principle of the FFT that all NHS patients should have the opportunity to provide feedback about the services they receive. The FFT can provide practices with a rich source of patient views that can be used locally to highlight and address concerns much faster than more traditional survey methods.

NHS England has sought to make the FFT process as flexible and inclusive as possible, while creating as low a burden as possible on practices and patients who wish to give feedback.

One of the key requirements of the FFT is that practices must submit their results to NHS England each month through the CQRS. NHS England has [published guidance on what should be submitted and how here](#). The FFT results for every practice in England are then published nationally on the NHS England website and on NHS Choices. NHS England is not able to amend or add data after the deadline for submission.

We are concerned to note that NHS England did not receive FFT data from your practice for September 2017.

<http://www.england.nhs.uk/ourwork/pe/fft/friends-and-family-test-data/>

Please can you confirm by return the following information via email to liz.corrigan@nhs.net:

- Whether your practice has submitted data for September 2017?
- That you will be able to submit data for October 2017 by the deadline of 9th November 2017.

It is important to note the following:

1. It is a contractual requirement that the practice submits FFT data every month via CQRS before the deadline of the 12th working day of the month.
2. If you have not had any returns you still need to submit a nil return.
3. It is not possible to retrospectively submit data once the deadline for that month has passed.
4. The CCG cannot submit data on your behalf.
5. Continued failure to submit a monthly return may result in contractual sanctions

If you need any additional help or advice, or if you are not able to comply with the guidance for any reason, please use the contact e-mail address above to email NHSE and cc me in so that we are aware of any issues.

If you need support or advice on how to implement FFT you can:

- find advice, support materials, frequently asked questions, case studies etc. on the NHS England website at the address above; or
- e-mail the national FFT team: england.friendsandfamilytest@nhs.net

Kind regards

Level 2 Letter

Technology Centre
Wolverhampton Science Park
Glaiser Drive
Wolverhampton
WV10 9RU

Tel: 01902 444878
Fax: 01902 444313
Email: WOLCCG.WCCG@nhs.net

Dear Colleague

We are concerned to note that your practice has failed to submit FFT data for the months of xxx and xxx xxxx.

As you are aware there are 3 key requirements of GP Practices set out in the guidance:

1. to make the opportunity to provide feedback through the FFT available to all patients at any time;
2. to submit FFT data to the NHS England analytical team via the Calculating Quality Reporting Service (CQRS) each month; and
3. publish the data locally

NHS England are working with Wolverhampton CCG to identify practices who are participating in accordance with their contractual obligations and also identifying those who are not. The consequence of not fulfilling this requirement may result in the practice incurring a contractual sanction.

Please confirm to the CCG that you have submitted your practice data for xxx xxxx and when you did/have done so.

The deadline for submission via CQRS is the 12th working day of the month, i.e. no later than **xxx for xxx data**.

If you need support or advice on how to implement FFT you have a number of options:





- You can find advice, support materials, frequently asked questions, case studies etc. on the NHS England website; or
- You can e-mail the national FFT team: england.friendsandfamilytest@nhs.net.

Additionally the Wolverhampton Local Medical Committee (LMC) have offered to help any practice with advise and practical support to help achieve the implementation of the Friends and Family Contractual requirement – E-mail contact - rwh-tr.LMCWolverhampton@nhs.net

Together NHS England, Wolverhampton CCG and LMC are working together to maximise the friends and family test and urge you to respond to this email.

Kind regards

Appendix 2 – Example Response Card

The Friends and Family Test					
Name of service: _____					
We would like you to think about your recent experience of our service.					
How likely are you to recommend our service to friends and family if they needed similar care or treatment?					
Extremely likely	Likely	Neither likely or unlikely	Unlikely	Extremely unlikely	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					
Thinking about your answer to this question tell us why you feel this way?					
<div style="border: 1px solid black; height: 50px;"></div>					
Is there anything that would have made your experience better?					
<div style="border: 1px solid black; height: 50px;"></div>					

Wolverhampton Clinical Commissioning Group

Technology Centre
Wolverhampton Science Park
Glaiser Drive
Wolverhampton
WV10 9RU

Email: wolccg.wccg@nhs.net

Telephone: 01902 44487

