

Mediation Making a Difference

VCMS Supporting Client-Practice Relationships Through Resolution and Insight

VCMS Activity 2019-20







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1 Introduction



The 2019-20 VCMS year has certainly been a 'tail' of two halves.

November 2019 saw the VCMS begin a fourth year of delivering complaint resolution through mediation across the veterinary sector. Having seen a 27% year-on-year increase in activity in 2018-19, the service expected to see a continued but tempered increase in this fourth year, as the awareness of the service levelled and we moved into a phase where the service was an embedded and integrated part of the sector.

The driving motivation of the VCMS is to resolve complaints in a positive way which focuses on how both animal owners and practices can move constructively forward from a complaint situation. The feedback from both consumer and practice perspective continues to inspire the VCMS on a daily basis – 'we think your service is absolutely fab and we tell owners to use your services if we are struggling to find a resolution to their complaint' (practice director) and 'I would advise anyone to use VCMS instead of leaving sad and angry reviews on websites and social media, which do not really help or resolve anything' (animal owner).

Feedback often refers to mediation 'deciphering' and 'translating' the issues, which illustrates the core element of most of the complaints referred to the service, and arising in practice – communication. If a practice and owner do not understand each others' perspective and stop listening to one another, a worry or a grumble can escalate.

The service was referenced in the RCVS corporate strategic review and highlighted the positive impact of the VCMS which included reducing formal complaints registered with the RCVS. More importantly, the review also stressed the benefits for both veterinary professionals and consumers in addressing concerns in a less stressful and adversarial way.

The second half of the VCMS year has brought this into clearer focus. COVID-19 and the restrictions implemented from March 2020 to protect public health, turned all of our lives upside-down.

The veterinary sector was no exception. Whether adapting a small animal, equire or farming practice, or involved in vital food production, veterinary professionals were operating in a continually evolving situation. During 2020,

the VCMS has heard first hand of the amazing efforts made by veterinary practices to assess the challenges of the COVID-19 pandemic, and then implement plans to meet the needs of patients and clients.

The year has seen both animal owners and individuals within practices facing pressures and challenges. Whether these related to their own physical or mental health, the health of their family, friends or colleagues, or the unforeseeable changes in financial/commercial circumstances, the world has felt a very different place.

As you will read within this report, the reduction in veterinary interactions and the strict lockdown measures resulted in fewer complaints referred to the service in April and May. This also reflected the supportive and collaborative atmosphere within society as we 'clapped for carers' and dug deep as a nation to get through the pandemic.

As we moved into the summer, and saw the easing of restrictions followed then by a resurgence of COVID-19 in autumn 2020, frustrations and stresses saw the consumer-professional relationship shift. This was not unique to the veterinary profession. Both human healthcare and other regulated professions shared the same anecdotal experience.

The VCMS saw a dramatic increase in complaints during July-August. Complaint referrals started to fall back slightly in September and October, and the VCMS ended the year with a 30% increase in complaint referrals.

The insight suggests the communication issues which often trigger and drive complaints were exacerbated by the necessary COVID-secure measures and the stresses felt by both animal owners and practice teams as we live with a prolonged period of uncertainty. New restrictions on fundamental aspects of our lives such as family life and employment have created the 'imperfect storm' and placed some practice-client relationships under unique pressure.

The VCMS will continue to share insight from the complaint trends as we have done this year. The key message has to be: to see the situation from the other perspective, we must communicate with clarity and compassion and then listen to understand. If we can nurture this approach during these more challenging times, it will help to make the interaction between the animal owner and practice team more constructive for all involved and focused on the making the best decisions for the care and welfare of the animal.

VCMS understands the important role the mediation service plays during periods of increased conflict and pressures on those on all sides of veterinary medicine. As set out in this report, we have and will continue to evolve the service and how we approach mediations to ensure the service provides what is needed by animal owners, individual practices and the profession as a whole.



by Jennie JonesHead of VCMS
Partner at Nockolds Resolution

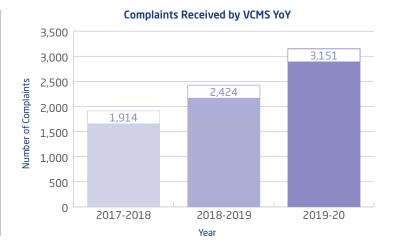
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Executive Summary

Impact of pre-mediation activity:

- » Diffuses emotion
- » Brings clarity
- » Narrows issues
- » Advice and information to resolve issues
- » Sets realistic expectations (timescales & outcomes)

Effective and supports local resolution at the practice level as less than 7% return to VCMS



Data for 2019-20

67%

Pre-mediation
Supporting local
resolution

54 % resolutions are

13%
Animal owner or practice decline mediation

20% Mediation provided by the VCMS



FEES PAID

77%

of mediations result in a resolved or concluded complaint

In 37% of resolutions, outstanding fees were addressed. Where the resolution involves payment of outstanding fees, the full balance was paid in 45% of the resolutions. In the remaining 55% an agreement was reached.

85% of practices approached engaged in mediation

Average Goodwill Gesture

£299.97 and agreed in 8% of resolutions

Over 90% felt that the VCMS understood their concerns

88% of owners and 95% of practices would use the VCMS again





On average to provide pre-mediation advice and local resolution support.

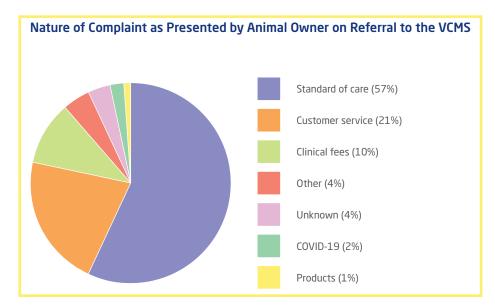


On average to conclude a full VCMS mediation.





IMPACT ON COMPLAINTS





Analysis of mediated to communication and expectations





Complaints involving purely COVID-19 issues accounted for 2% of referrals

MEDIATION IN ACTION →

Most Common Situations Referred to the VCMS

Standard of care	Animal owner believes the practice did not investigate or undertake sufficient diagnostics to diagnose the animal's condition.
Standard of care	Animal owner believes the practice made the wrong diagnosis.
Customer service	Animal owner was dissatisfied with the level of service and communication around gaining consent for treatment.
Standard of care	Animal owner has raised a complaint as the outcome of the treatment plan was an unexpected outcome.
Standard of care	Animal owner believes there was a delay in diagnosing the condition.

However, COVID-19 challenges were exacerbating factors in most post-March '20 referrals.

e.g. complaints process delayed so owner did not receive a response / communication at a distance or in different environments / pressures and stresses felt by both practices and owners impacting on complaints made

3

Objectives 2019-20



Share insight and analysis from 2018-19.

Deliver proportionate and effective complaint mediation within a 60-day timeframe.

Encourage engagement with the VCMS mediation process by practices.

Continue to engage with stakeholders and the professions.

Maintain trust and confidence in the RCVS \rightarrow VCMS referral of SPM cases.

Continue to improve practice engagement at as wide a level as is appropriate.

Share the insight into client complaints gained by the VCMS with veterinary professionals at a grass roots level, and to prioritise the promotion of insight sharing and CET workshop sessions to generate practitioner discussions and best practice sharing. This will assist in improving efficiency of consumer communication and management of expectations.

Deepen constructive and productive working relationships with major employer groups through feedback meetings, complaint engagement and insight.

Support practices and individual veterinary professionals to further develop effective local complaint handling processes and skills to increase local resolution.

Provide ongoing guidance to dissatisfied veterinary clients to support the raising of complaints with the practice in a constructive way to facilitate local resolution.

Consider how the VCMS can support quality improvement within the veterinary sector, to support reflective intelligence-led practice and learning culture.

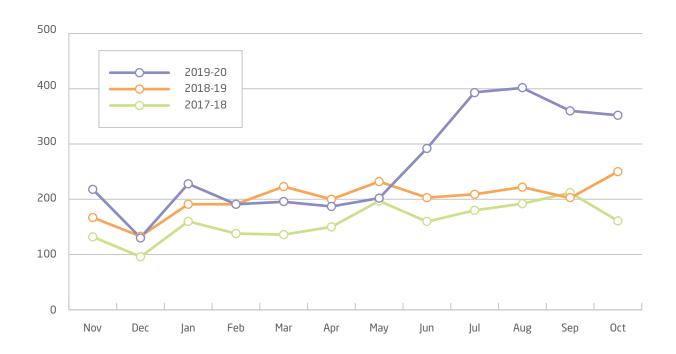
Improve feedback response rates to ensure VCMS effectiveness can be quantified and monitored.

4 A Year at the VCMS



4.1. Activity

Fig. 1 Complaint Referral Numbers YoY (2017-2020)



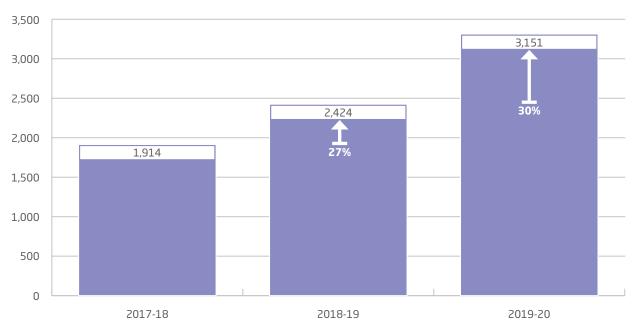
30% Increase

Has there been a COVID-19 impact at the VCMS?

Between 1 November 2019 and 31 October 2020, the VCMS handled 3,151 complaint referrals.

Since October 2016, the VCMS has handled over 8,300 complaint referrals.

Fig. 2 Complaints Received by VCMS YoY



VCMS annual activity figures only tell part of the story of the last 12 months. When analysing and comparing activity, it is important to consider the national situation and the context within the wider veterinary sector.

It was anticipated that the rate of increase in activity in 2019-20 would continue but at a slower pace than in 2017-18 and 2018-19. The unprecedented events of 2020 impacted on activity across the veterinary sector, fundamentally changing the interactions between practice teams and animal owners, and resulted in pressures across all areas of life. The functioning remit of the VCMS was

no exception.

2019-20 VCMS activity can be seen as three distinct periods:

NOVEMBER 2019 - FEBRUARY 2020

In the period November 2019 to February 2020, there had been an increase in referrals to the VCMS by around 12% (with marked increases in November and January, which is consistent with previous years). During the same period in 2018-19, the average number of referrals per month was 170.5, and in 2019-20 this increased to 191.8.

MARCH 2020 - MAY 2020

As indicated by the results of the RCVS COVID Practice Surveys (3-7 April, and 1-5 May 2020), practice activity from 24 March to the end of May was significantly reduced with 97% of practices limiting services to emergency care in April. The situation evolved, and in May, 69% of practices reported a reduced case load, with 26% operating on an emergency care only basis.

As well as reduced caseloads, veterinary clients were likely to be focused on acute COVID-19 worries, with immediate public health and financial concerns a priority.

The VCMS incoming referrals in March, April and May were therefore down 12% compared to 2019. As of 31 May 2020, annual activity was on a level with the same period in the previous year.

JUNE 2020 - OCTOBER 2020

During the next phase of the pandemic, the veterinary profession transitioned into a risk assessed resumption of non-emergency care, and reported an increase in activity and caseloads. This return in volume must be seen in the context of the major operational changes which practices were required to implement to provide COVID-secure workplaces and treatment clinics. Each practice was implementing its own COVID-19 risk assessment and adjusted protocols which placed pressure on practice teams and needed time to settle and bed down. Animal owners were also adjusting to the new parameters and systems in place.

There will generally be a time lag between complaint circumstances arising, the complaint being raised and handled under the practice's complaint process, and the need for a VCMS referral where local resolution is not possible.

In June 2020, the VCMS started to see an increase in complaint referrals, and this continued until year end in October 2020. These referrals related to: a) complaints arising during March and April as practices operated under the RCVS initial guidance issued on 25 March, and then updated on 9 April 2020, and; b) 'real time' complaints arising as government restrictions were relaxed and practices resumed wider activities.

This increase peaked at 402 in August. As we moved into the autumn, referred complaints per month then fell compared to previous months, by 12%, to 360 in September and 352 in October.

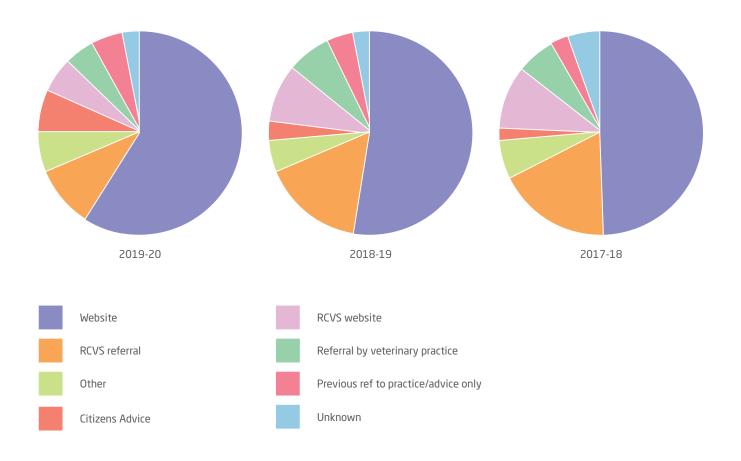
The average month-on-month increase in complaint referrals compared to the same period in 2018-19 was 66%, with complaints in July nearly doubling in comparison to 2019(+92%).

The increase in referrals between 1 March and 31 October 2020, compared to the same period in 2019, was 37%.

Within this report, the VCMS will detail the trends and share the insight from the complaints referred to the service. This paper will then consider what this increase tells us in terms of the impact of the COVID-19 restrictions across the four nations, and the relationship between animal owner and veterinary practice during COVID-19.

4.2. Awareness

Fig. 3 How Do Veterinary Clients Find the VCMS?



59% of animal owners contacting the VCMS quoted the VCMS website as their source of information about the existence of the service. This is a 6.4% increase compared to quoted in 2019.

While we can only speculate, the restrictions preventing animal owners entering some practices, and the impact of restrictions on working practices and in-person contact has increased the use of online remote tools in general. This is to be expected given the COVID-secure measures implemented.

The trend of a reducing proportion of complaints being referred directly by the RCVS Professional Conduct team continued in 2019-20. The aim is to provide animal owners with sufficient information to enable them to self-determine whether the RCVS or the VCMS is the appropriate pathway for their complaint. During 2019-20, 15% (460) complaints were referred to the VCMS via the RCVS Professional Conduct team and the RCVS website for animal owners.

The VCMS saw referrals from the Citizens Advice Bureau almost triple from 77 to 195 (6% of all referrals in 2019-20. This is likely to be linked to raised awareness in the CAB network through VCMS communication archives, animal owners seeking consumer advice given the challenges presented and shifting situations caused by the ramifications of COVID-19.

Can the VCMS mediate all complaints?

4.3. Out of Remit

The VCMS mediates complaints by individual animal owners (clients) regarding a veterinary practice.

95% of enquiries received by the VCMS in 2019-20 fell within the remit of the service, which is consistent with the previous year.

WHEN DO COMPLAINTS FALL OUTSIDE THE VCMS REMIT?

a. Serious Professional Misconduct

 Where the complaint involves allegations, which if proven could amount to serious professional misconduct, and required referral to Professional Conduct team at the RCVS;



Less than 1% of complaints received by the VCMS result in a referral by the VCMS to the Professional Conduct Team at the RCVS. In 2019-20, there was an increase from 0.7% in 2018-19, to 0.84% this year.

The VCMS team continues to have constructive dialogue with the RCVS Professional Conduct team to identify potential allegations to ensure appropriate referrals are made.

b. Other circumstances where the situation falls outside the remit of the VCMS:

- » Historic complaint where the final complaint response by the veterinary practice was given more than 12 months ago, or the complaint was not raised by the animal owner within 12 months of them being aware of the issues involved - 23 referrals were in this category;
- » Commercial/professional keeper of animals the VCMS provides complaint mediation for disputes between veterinary practices and consumers (individual animal owners). In 2019-20, the VCMS received 16 complaints from commercial animal owners;
- Complainant is not the owner of the animal receiving care the complaint must be raised by the animal owner and the client of the practice. Where complaints regarding veterinary care or service are received from third parties, the VCMS will explain the remit of the service and signpost or invite the animal owner to be contacted by the VCMS. The VCMS received 29 referrals of this nature;
- Complaint concerns a veterinary practice outside the UK 14;
- Circumstances of the enquiry are not a veterinary complaint (49) such as:
 - » Insurance company complaints;
 - » Frustration that the treatment parameters offered by a charity during the COVID-19 pandemic;
 - » Disputes within families following relationship breakdown;

» Inter-practice conflict.

4.4. When Can VCMS Mediation Assist?

If the complaint falls within the remit of the VCMS, the team reviews the information to understand the status of the complaint. The first step is to ascertain whether the practice and animal owner have tried to resolve the complaint within the practice..

DEFINITION OF MEDIATION:

'Mediation is a confidential process that gives parties control over the outcome. Mediators might provide participants with information...or options available to parties, but they do so from a neutral perspective with no interest in the outcome of the dispute and cannot impose a solution'.

- Civil Mediation Council

The VCMS uses mediation techniques to support and facilitate resolution at each stage of the VCMS process. Complaints will conclude their interaction with the VCMS process at varying stages depending on where the complaint sits in the practice's local complaint process and the decisions made by the parties about the appropriateness of mediation.

Outcome of concluded complaints (in remit)	% 2019-20	% 2018-19
Pre-mediation advice and local resolution support	67	64
Owner does not proceed with mediation ¹	4	5
Practice decline mediation	9	10
Complaint concluded in mediation	16	17.5
Mediation concluded without resolution	4	2.5

VCMS concluded 3,077 referrals during 2019-20 (26% increase on 2018-19 2,441)

PHASE A - PRE-MEDIATION ADVICE AND LOCAL RESOLUTION SUPPORT

If the practice's complaint procedure has not concluded at a local level, then the owner receives pre-mediation input before being referred to the practice to try and resolve locally. VCMS input before being referred to the practice to try and resolve matters locally.

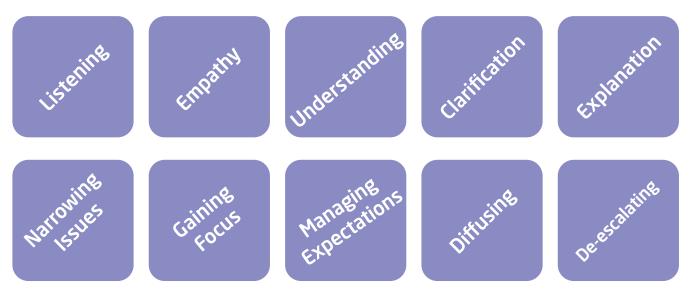
Interactions with the VCMS team in this phase will include:

- Telephone contact;
- Email contact;

¹ Reviewed outcomes in 2019-20. Where the animal owner has exhausted local resolution, but contact with the VCMS results in the complaint being drawn to a close and no further action taken, this is included in 'Complaint concluded in mediation'.

Provision of further information from RCVS, VCMS and other veterinary professional body libraries.

The VCMS pre-mediation advice and support looks to facilitate local resolution in the following ways:



67% of complaints concluded their VCMS interaction at this stage:

- In 47% of cases, the VCMS provided pre-mediation support to facilitte local resolution at practice level;
- In 20% of cases, the VCMS provided advice or information with the aim of concluding the complaint at that stage. Examples of this included:
 - » References to the COVID-19 advice and guidance issued by the RCVS to explain and give context to the changes made within practices because of the COVID-19 restrictions;
 - » Information on reasonable response timescales for complaints raised with a practice, complaint processes, how to raise a complaint constructively and subject specific queries where complainants are provided information relevant to their complaint which will help them to consider their expectations, proposals made by a practice in their complaint response and address any misunderstanding which can be addressed at an early stage.

Last year's <u>VCMS annual report</u> detailed examples of complaints referred to the VCMS before local resolution had been exhausted, sharing the impact of the service in this area.

The increase in referrals handled at this pre-mediation phase during 2019-20 may be affected by COVID factors, such as:

- Communication challenges during COVID-19 practices have explained that complaint responses have
 taken longer to send due to clinical or operation pressures, and members of practice teams who would
 normally handle complaints may have been furloughed or redeployed into front line care roles. If an animal
 owner becomes frustrated or feels ignored, they seek to escalate the complaint and have the option of
 contacting the VCMS rather than the RCVS or legal pathway;
- Animal owners were seeking information to sense check or explore their particular views on the very unusual situations and circumstances;
- The frustrations and wider anxiety across society, which continues to increase levels of tension and stress

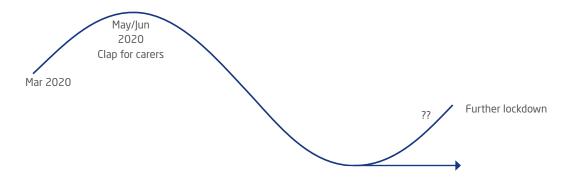
in all areas of life;

 Pressures on practice teams - their concerns and anxieties impacting on the tone and nature of response to owner queries, feedback, or complaints.

During 2019-20, the VCMS produced further guidance for animal owners on raising and progressing complaints in a constructive and compassionate way. This information helps to manage expectations, particularly around timescales, and focus on the complaint issue.

Wider Consumer-Professional Context:

- Striving to deliver great customer care has always been 'just the right thing to do'
- What are we seeing at Nockolds Resolution during the pandemic?
 - » Disruptive innovation new threats and opportunities
 - » Evaporating societal goodwill



Now, more than ever, great customer care will be key to ensure that practices survive and thrive.

The increase in pre-mediation complaint support contacts was expected, and consistent with other sectors in which Nockolds Resolution operates.

The veterinary practices will often be unaware of the VCMS involvement as complaints at this stage may not have been raised or have not yet concluded the local complaint process within the practice. These interactions are managed sensitively and cost effectively to give the parties the best chance of resolving the complaint locally.

Animal owners explain they contact the VCMS before the local complaint process is concluded for the following reasons:

They seek a steer on whether their complaint is reasonable

The VCMS team does not adjudicate, however, using mediation techniques the team helps the animal owner to put their issues into context, and to explain in clear terms why they are unhappy and the outcome they are seeking. The team encourages animal owners to think about wider, non-financial resolutions.

They seek a third party to raise the complaint with the practice on their behalf

The animal owner may feel that a third party should be informed. The VCMS explains that the most effective way to resolve the complaint is to liaise with the practice, and this must be the first port of call.

They have not received an acknowledgment or response to their complaint in the given or expected timescale	The VCMS has provided guidance on acceptable complaint response timescales aligned with other professionals and healthcare providers. Where an owner is seeking immediate input relating to urgent veterinary care, they are advised to contact the veterinary practice as a matter of urgency.
The response addresses some of the issues raised but others remain live or pending	In this situation, the VCMS will help the animal owner to consider the response given and to reflect on the importance of those issues not addressed. Where these are incidental, the animal owner will consider if it is productive to revert. Where those issues remain live and important to the animal owner, the VCMS will encourage them to continue dialogue with the practice, having diffused the owner's frustration.
They feel a complaint to the practice will be 'ignored' or 'pointless'	The VCMS team will explain the importance of allowing the practice to have the opportunity to respond and emphasise that the practice is best placed to understand their complaint and to progress to a resolution. The team also reminds the animal owner that the VCMS mediation process is available to them if the practice does not respond constructively and follow an appropriate complaint process.
Level of emotion involved and feeling that interactions are becoming more confrontational	In highly emotive complaint scenarios, the VCMS role at this preliminary stage can be critical in diffusing the emotion. This interaction can help the animal owner to share their emotions, acknowledge the impact on the complaint and explore the best way to constructively raise the complaint in such a way that the practice can respond and progress.

The guidance and information referred to above, enables animal owners to access assistance without having to make contact with the VCMS team. Complainants often want to feel heard, and will contact the VCMS to receive this acknowledgement. This has been important with pressures on practices hampering complaint responses. VCMS interaction allows this to be given in a cost-proportionate way within an independent and non-judgemental process, minimising distress and pressure on the practice.

Having referred the animal owner back to the practice, only 4.7% of those complaints return to the VCMS for independent mediation, at which point the VCMS will contact the practice to begin full mediation. This is a testament to the positive impact of the VCMS work at this phase and the commitment of practice teams to resolve complaints at a local level.

The VCMS remains committed to delivering this local resolution support as cost effectively as possible, while retaining the positive impact to support both animal owners and practices achieve swift and effective resolutions.

This area of complaint resolution also provides the VCMS with insight to complaint scenarios at an early stage, allowing the VCMS to share this insight through its feedback initiatives.

Beyond local resolution

PHASE B - ENGAGEMENT

The VCMS reports on outcomes in terms of overall activity (Table page 1 and Appendix A), and then provides further analysis on the 3 phases of activity.

Phase A concerns the work of the VCMS in resolving complaints at a local level without the need for full mediation.

Phase B and C involve those referrals where local resolution has been exhausted, and one of the parties seeks independent mediation to try and find a resolution. Referrals to the service are made by animal owners eve where a practice is seeking to use the VCMS service. This avoids concerns around the sharing of personal data by a practice with the VCMS.

Phase B relates to party engagement.

As an overall outcome of referrals to the VCMS, 9% of referrals conclude with the practice declining to engage.

ANIMAL OWNER ENGAGEMENT

In 3% of referred complaints, the animal owner opted not to proceed with the mediation as they wanted an investigation via a legal claim process and did not want to attempt mediation before doing so (consistent with 2018-19).

When local resolution has been exhausted and the animal owner wishes to progress with the mediation, the VCMS will then contact the veterinary practice ².

VETERINARY PRACTICE ENGAGEMENT

In recent years, practice engagement rates have been consistent, with positive incremental increases in recent years. Further increasing practice engagement was an objective for the VCMS in 2019-20.

As an overall outcome, in 9% of VCMS referrals, VCMS input concluded as the practice declined to engage. This provides a comparison with previous years.

As a direct comparison with the analysis in 2018-19 as at 31 October 2020 (disregarding the ongoing active mediations), 72% of practices invited to mediate had engaged and the mediation was concluded, which is consistent with 2018-19 engagement levels. This is a positive outcome considering the impact of COVID-19 on the profession.

It is then more helpful to consider how many practices, who were invited to engage in mediation, did accept the invitation and participate in the mediation process.

In 2019-20, on average:

» 141 complaints per month were active within Phase B and C or have concluded after full mediation;

² In 2018-19, the VCMS included complaints where the animal owner took no further action following initial interaction with the VCMS. This year, these matters have required more mediation input and so rightly have been included within the mediated complaints.

- » Of these, 22 practices a month declined to proceed into mediation;
- » In 15.6% of referrals which could have progressed into full mediation, the practice decline to do so;
- » In 84% of referrals where full mediation was available to the parties, was underway or concluded in a month, the veterinary practice engaged in the VCMS mediation.

This assessment takes into account those complaint referrals active within mediation and those concluded each month.

HAS PRACTICE ENGAGEMENT BEEN IMPACTED BY COVID-19?

During 2020, practice engagement was above 'the monthly average rates' in eight of 12 months this year.

In the months where engagement was slightly below the average, these followed months with lower incoming referrals (December and April/May) which will result in monthly anomalies.

The overall practice engagement rate is encouraging, particularly during the COVID-19 pandemic.

Given the challenges presented by the pandemic, including the impact on team structures, ways of operating and reduced team resources, the VCMS prepared an action plan to support practices and facilitate engagement.

The VCMS has been sensitive to the current challenges navigated by veterinary practices during the COVID-19 pandemic. Ordinarily, the team will make initial contact with the practice by telephone. Since April 2020, an email introduction has been the preference and this enables the veterinary practice team to respond at a convenient time and for VCMS contact to be handled remotely (i.e. outside the practice setting).

Where complaints arise or escalate because of interpretation or communication of COVID-19 restrictions and guidance issued by the RCVS, the VCMS team has sought to diffuse these escalating situations. The team provides confirmation of the guidance issued and explains that each practice must interpret the regulations and professional guidance, taking into account the practice setting and local circumstances.

The mediation process has been agile and flexible to enable as many practices as possible to participate in mediation during these current challenges. The key has been communication and ensuring both parties have a clear understanding of timescales and the next steps.

The overall rated practice engagement has been maintained and improved slightly as a proportion of all conclusions (9% improved from 10% in 2019) which, given the increase in complaint referrals, represents a real terms numerical increase.

The VCMS offered a flexible approach:

- To requested response times;
- To arranging the mediation calls including timings and availability; and
- To progressing the mediation process 22 mediations were paused at the request and agreement of the parties involved, with the majority paused between 24 March and the end of April 2020, being the height of the first lockdown across the UK. The VCMS kept in regular contact with both parties to maintain communication and to facilitate matters as soon as the practice were able to resume dialogue.

To support positive engagement by practices, the following initiatives were introduced or expanded:

- Short video guide for practices what happens and what to consider when deciding whether to mediate;
- Practice focused VCMS annual summary published;
- Case studies insight sharing;
- Reviewed language in the communication with practices both during telephone and email contacts;
- Further outreach work with indemnity insurers, professional bodies, and major employers.

It is important that the VCMS maximises practice engagement as animal owners will be further frustrated if they seek to mediate their complaint via the VCMS and the practice declines the option. As explained in previous annual reports, mediation will not be appropriate in all complaints, and there may be occasions where the nature of the dispute means the practice concludes (on occasions on the advice of their indemnity insurers) that a telephone-based ADR scheme is not the most suitable medium to deal with the dispute. Where a practice declines due to concerns about contact with the animal owner, time involved in the mediation process or where they feel the complaint is not justified, the VCMS team will explore these views and ensure the practice have a clear understanding to make an informed decision.

Continuing to further increase engagement will remain a focus of the VCMS in 2020-21.

As mediation is most effective in a voluntary process, the VCMS does not propose to revise the status of the mediation service and process.

4.5. How Effective is Mediation in Resolving Complaints?

Pre-mediation advice and local resolution support within Phase A use mediation technique to diffuse and de-escalate complaints which have not yet completed the practice's own complaint procedure. In 93% of complaints handled by the VCMS at this stage, there is no further contact by the complainant, which suggests the mediation inspired support is effective, and facilitates local resolution without further input by the VCMS.

Where local resolution has been exhausted, the VCMS resolution managers use telephone mediation to help clients and practices to explore the complaint and work towards a resolution.

During 2019-20, the VCMS mediations (within Phase C of the VCMS process) increased by 34.9% compared to 2018-19, which exceeded the overall increase in referrals closed in the previous year.

At this mediation stage, outcomes which bring the complaint to a conclusion are achieved in **77**% of cases and include:

- Early resolution

Animal owner has exhausted local resolution, and following interaction with the VCMS, the complaint is closed. Mediation techniques used to bring an escalating complaint to a close; or

Resolved on mediation

Resolution found addressing all concerns. Mediation Agreement signed by both parties;

Mediation concluded without formal resolution - unlikely to escalate
 Mediation concluded without signed mediation agreement.

In 23% of mediated complaints, the complaint may be continuing and escalate.

- Mediation concluded as requires formal claim process
 Mediation halted as one or both parties decide that a formal claim process is more suitable forum and legal proceedings are likely;
- Mediation concluded without resolution
 Mediation concluded without any resolution. Proposals not put forward by either party.

This year, greater input was focused on resolving disputes as early as possible without practice involvement. For that reason, these conclusions are included in the mediation outcomes.

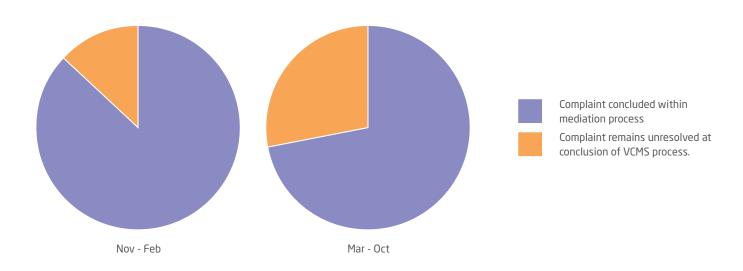
77% 2019-20

of mediations result in resolved or concluded complaints (82% 2016-20)

Did the VCMS see a variation in resolution rates during 2019-20?

The VCMS has analysed activity monthly during the second half of this year to monitor the impact of COVID-19. As with referrals to the service, resolution data suggests there have been two phases to 2019-20:

Fig. 4 Resolution Pre and Post-COVID-19



Monthly outcome data is at Appendix 1.

In the 10 most common complaint situations referred to the VCMS (listed below), the average mediation resolution rate was 80.7%.

Standard of care	Owner feels the practice could and should have done more at an earlier stage to diagnose and treat their animal's condition or illness.
Standard of care	Owner feels the practice made an incorrect diagnosis and this was unreasonable in the circumstances.
Customer service	Owner feels the discussion around the treatment pathway was insufficient or unclear, so they did not make an informed decision and therefore feel they did not fully consent to the treatment or costs incurred.
Standard of care	The outcome was unexpected by the owner and they feel that either something went wrong or they were not informed of the risks, to enable an informed decision to be made.
Standard of care	Owner feels a condition or injury could have been diagnosed earlier.
Standard of care	The animal was in the recovery stage following treatment or surgery, and experienced a complication. The owner considers there to be aspects of the care provided which caused or contributed to this complication.
Standard of care	The animal experienced a complication during surgery. The owner considers there to be aspects of the care provided which caused or contributed to this complication.
Clinical fees	The owner considers the fee charged to be excessive for the care, service received or product purchased.

Customer service	The owner feels their views on their animal's condition, their observations or possible diagnosis were ignored or dismissed, leaving them feeling belittled and often, where the owner's input was closely aligned to the ultimate diagnosis.
Customer service	The owner feels the practice did not demonstrate or convey any or sufficient empathy, and they considered the practice to be uncaring and prioritising fees over animal care.

4.6. Resolutions Achieved Through VCMS Mediation

Non-financial agreements in 54% of resolutions, such as:

- Apologies;
- Acknowledgement and recognition;
- Further explanation;
- Resolving misunderstandings;
- Reassurance;
- Helping an owner to reach a point of acceptance;
- Provision of further information to assist with pet insurance claims.

Complaints concluding with a financial resolution involved four types of resolution (46% of resolutions):

Financial Resolution	2019-20	2018-19
A goodwill gesture paid by the practice to their client	 A goodwill gesture forms part of the resolution in 8% of mediated complaints As an average, across the VCMS the average goodwill gesture is £296.97 	 The average goodwill gesture decreased by £30.74 The proportion of complaints where a goodwill gesture was agreed fell from 17% of mediated complaints to 8% in 2019-20
A refund or a reduction in the fees	 In 21% of mediated resolutions, fees had been paid by the client, and a refund was agreed as part of resolution 	 The proportion of mediated complaints where an agreement to reduce or refund fees was reached decreased by 5%, to 21%
Payment of outstanding fees by the client	 In 16% of resolutions, the resolution addresses outstanding fees In 45% of those resolutions, the outstanding fees were paid as the owner's complaint was resolved. The average fee payment was £571.45 with a total of £32,572.20 covered by VCMS mediation agreements 	 As a proportion of resolutions, payment of outstanding fees (in full or partial) has remained consistent compared to previous years The average fee payment did fall by £122.82, and there was also a reduction in the total fees covered by mediation agreements in 2019-20
Memorials or donations to recognise the impact on the owner and family	 These resolutions accounted for 1% of the agreements reach, and included charity donations, purchasing memorial items 	

4.7. The Impacts of COVID on Mediations and Complaint Resolution

Due to remote working and the shifting complaints landscape, from early April 2020, the resolution management team met weekly to review the progress of mediations and to consider the changing

dynamics within dispute resolution. This has enabled the team to adjust approaches and techniques to meet the challenges faced in resolving complaints during the COVID-19 pandemic.

As set out in *Section 7: Insight Sharing*, the number of complaints arising purely because of the pandemic or the related restrictions has remained low, but the impact of the COVID-19 restrictions across the four nations has exacerbated communication challenges, made it harder for practices to provide reassurance or early resolution at the time of a consult or an event and increased the number of escalating complaints. This does also appear to have had an impact on resolution rates. Given the challenges in practices and the wider anxieties felt by animal owners, mediations have been more emotive and complex.

Mediation facilitates an agile and practical approach to complaint resolution, and provides a blank canvas to explore all options and avenues to address and resolve the complaint. This has been increasingly important during COVID-19 as traditional and established resolutions may not have been as readily available.

In terms of the outcomes sought by animal owners as they enter mediation, these have remained consistent with previous years. In around 75% of complaints referred to the VCMS, the complainant comes to mediation seeking a financial resolution to their complaint. These include refunds, contributions to cost of further treatment or compensation for their distress. For example, practice financial and commercial pressures means refunds/goodwill gestures may not be as readily available. The owner may have financial pressure meaning they are more determined to claim a financial resolution.

Practices have continued to offer goodwill gestures, payment plans, apology letters, clinical explanations, and changes in protocol. The proportion of complaints continuing and escalating into a civil claim, legal process is consistent to 2018-19.

Reflections from the VCMS team indicate that outcomes and resolutions during 2019-20 have been affected by:

- Anecdotal reports of financial pressures for animal owners due to job losses, furlough and tighter personal budgets;
- Heightened levels of general anxiety and frustration directed to the veterinary complaint. This
 means mediations can be more challenging as parties are more entrenched;
- Pressures on practices impacting on how a complaint is handled locally, meaning the parties are more entrenched when the complaint is escalated;
- Owners feeling more disconnected with the veterinary care their animal receives, and this risks issues of trust and confidence: 'I don't believe the vet did X, Y, Z';
- The telephone mediation calls have taken longer to arrange as working patterns and roles within
 practice teams have had to adjust to meet the primary demands in the practice. This can make
 feedback calls (following the initial mediation contact) more challenging if the momentum from
 the initial calls cannot be maintained;
- Animal owners have felt far more determined to achieve their desired outcomes, especially on the expectations of goodwill gestures. It has been challenging to manage their expectations of a realistic goodwill gesture;
- Anecdotally, some animal owners have had more time to reflect on their complaint, and this can deepen entrenched views which can be harder to rationalise during the mediation;

With more family members at home during the pandemic, mediations can be complicated by other parties seeking to have an input in parts of the mediation discussions. Where a complaint involves joint owners or strong family involvement, the VCMS will explain to the complainant that any interested parties should participate in the full mediation and not intermittently. As with the practice team, those who need to be involved in the decision-making should participate in the full mediation to ensure it is effective.

The reflections on VCMS mediations align with the wider pressures across society caused by the anxieties arising from COVID-19, personal and economic worries and frustrations building over the past eight months. Sensitive and empathetic mediation has been key, as both parties are feeling weary and have been subjected to a lengthy period of pressure and uncertainty. The resolution rates and agreements achieved demonstrate the continued positive impact of mediation in veterinary complaint resolution.

RESOLUTION MANAGER REFLECTION:

'In some mediations, the impact of the pandemic on us all has made finding a resolution harder. There have been more cases where both parties come into the process with an all or nothing mindset so we have to work to gain understanding that a little movement on either side can truly help to draw a close to things. I have found it is about each side being willing to accept they may not be completely happy with each other's perspective but being able to find a way to draw closure to the complaint weighing up the down sides to it continuing.'

VETERINARY ADVISORY INPUT

The veterinary advisors continue to support the VCMS team and the mediation process. During 2019-20, the VCMS team has engaged and consulted the veterinary advisors in the following ways:

- Discussions to help determine if a received complaint should be referred to the RCVS Professional Conduct team:
- Early resolution interactions where early input help allows the VCMS team to address particular issues in less contentious complaints;
- Resolution Managers have been liaising with veterinary advisors where the facts of the complaint or the interaction between the animal owner and practice suggests that the owner does not accept the explanation provided by the practice. Veterinary input allows the Resolution Manager to explore the explanation given, ascertain why the explanation did not resolve the complaint and to help generate proposals which may be acceptable to the parties and bring the complaint to a conclusion. This form of engagement can be helpful where the basis of the animal owner's complaint is trust and they do not believe the practice the combination of mediation and veterinary insight work well together;
- Strategic analysis to help adapt and evolve the VCMS mediation process to improve practice engagement and resolution rates.

Engagement with advisors is normally on an individual case basis, but has also included a companion animal team advisor meeting and insight sharing to consider how the VCMS could support the profession and animal owners in the most effective way.

During this year, it has not been necessary to engage with the equine veterinary advisor.

SENIOR RESOLUTION REVIEW

Four complaints were reviewed at Senior Resolution Manager level.

All involved scenarios where an animal owner felt the practice response to the complaint and the proposals offered during the mediation process were inadequate. The Senior Resolution Manager review considers two aspects:

- Whether the mediation has been conducted impartially and fairly;
- Whether further mediation may be beneficial for either party.

In the mediations considered within a Senior Resolution Manager review, three resulted in the complaint being concluded, and one remained likely to proceed to a legal claim against the practice.

4.8. How Long Does Mediation Take?

Average timescale to:

- To conclude all enquiries 41.6 days;
- Review and provide preliminary mediation to support local resolution, 4.7 days;
- Conclude pre-mediation advice and support local resolution complaints 54.1 compared to 55.7 days which is a reduction of 1.6 days.

Fig. 5 Timescales



(Calculated from the date the complaint is referred to the VCMS. Standard ADR KPI's measure timelines from the date all relevant information is provided by both parties. The VCMS seeks to progress a complaint to mediation as swiftly as possible as this enhances the experience for service users and increases the likelihood of a resolution).

5

Operational Reviews



During 2019-20, the continual improvement reviews have led to:

- Correspondence amendments ongoing template reviews including around the language used when making initial contact with the practice;
- Practice guide what to expect from mediation with VCMS video guide sent to all practices when the VCMS makes initial contact;
- Re-categorisation of complaint nature following mediation to assess whether the root cause and nature of the complaint are as presented and perceived at the outset;
- Increased provision of information and resources to help resolve complaints locally without contacting the VCMS directly:
 - » Prescriptions and medication supply;
 - » COVID-19 restrictions and raising awareness of both professional and animal owner focused resources and campaigns by the RCVS and professional bodies;
 - » Pet insurance awareness of the difference between policies, the relationship between insurer/ animal owner and where the veterinary practice sits within the arrangement.
- The team also shifted operations to 100% remote working.

6

Supporting Those Involved



The VCMS provides effective complaint resolution via empathetic mediation techniques.

By their nature, veterinary complaints are emotive. The heightened anxiety and uncertainty caused by COVID-19 has added to the levels of emotions involved.

Animal Owner	Practice
Grief	Frustration
Worry about decisions made	Misreading owner's position or state of mind
Guilt about decisions made or actions taken	Feeling protective of the team
Financial worries	Discomfort with owner's response
Embarrassment - understanding, financial	Fear - escalation both within the practice or professionally

Resolution will be influenced by how a party feels and if these emotional drivers have been recognised.

Addressing the emotional elements of a complaint is an important aspect of mediation. To achieve resolutions and to also secure future engagement by that service user and the wider veterinary community, mediation has to be, and be seen to be:

- Independent;
- Impartial;
- Fair
- Able to understand the events and responses of those involved.

Feedback from VCMS service users during 2019-20 tells us:

	Animal Owners	Veterinary Practices
Would use the VCMS again	88%	95%
Would recommend the VCMS to others	87%	92%
Found it easy to contact the VCMS	91%	92%
Felt the VCMS understood their concerns	92%	95%
Felt the VCMS were helpful	95%	97%
Felt the VCMS team were efficient	86%	97%
Felt the VCMS process was productive	77%	91%
Felt the VCMS was fair	70%	87%

Feedback Response Rates

Response rates have fallen this year to 10% of mediations conducted (6% of clients and 4% of practices, compared to 17% in 2018/19).

Narrative feedback in the form of emails and post mediation comments has continued to be shared by VCMS service users. These are contained within the report to illustrate the positive impact of the service.

As the number of formal responses to the feedback request has decreased, the VCMS has continued to amend and evaluate the way in which feedback is requested. The decrease is likely to be related to the demands on practices and the priorities of animal owners during the pandemic. The VCMS will continue to work on increasing response rates as the pressures of COVID-19 ease in 2021.

Feedback is also obtained from the stakeholders such as the VDS and from major employers in the VCMS insight sharing sessions. Responses have been positive from the claims consultants, professional services and clinical leads within these organisations.

What is the impact of the VCMS on individual complainants?

Service users provide feedback via the formal satisfaction survey and also in comments shared with the team or Head of Service. Here are some examples of feedback comments received during 2019-20:



Thank you for everything yesterday. It was much appreciated by me and [my team].

- Clinical Director



[We] think your service is absolutely fab and always tell owners to use your service if we are struggling to find a resolution to their complaint.

- Practice Director and Practice Manager



We really cannot thank you enough for your help and the speed with which this has been resolved. Visiting [the practice] will be really hard but at least we will be able to see for ourselves the place where her ashes were scattered and feel that we have obtained some justice for our ginger boy. Our very grateful thanks.

- Client



I just wanted to thank you for all your help and support regarding my complaint about [the] vets. I have now received a long, dragged out letter from them, apologising for not replying to my two letters. You do a terrific job, and I know [the practice] wouldn't have even acknowledged my letters if it wasn't for you contacting them

- Client



Are you a charity because if you are I wanted to give a donation because you've made me feel so much better and I feel like you actually listened and understood what I was saying whereas the Head Office just made me feel like I was talking a foreign language!

- Client



Many thanks once again for all your help, and particularly your patience with [this client]. Keep safe.

- Practice



Thank you for your quick turn around time. I would like to thank you for time taken and help given in order to bring this matter to a fair and satisfactory close, it has been very much appreciated, as this outcome would not have been achieved without your assistance.

- Client



Thank you for your time yesterday, we all thought it a very useful process to go through. I thank you for drawing it to a conclusion. I am glad that, although [the client] still believes she requested the appointment, she concedes it can go no further. I will be more than happy to recommend this service to any clients in the future if needed.

- Practice Manager



I cannot tell you how much this process had meant to all of us individually, you have been amazing and dealt with this situation so professionally and personally, We all would like to thank you from the bottom of our hearts for helping to bring closure to our heartache. I'm not sure if there's any feedback forms I can do for you but if there ever is I will gladly fill those out, we are all happy and healthy hope you and your close ones are doing well and staying safe.

- Client



I would just like to thank you and your team for all your help. The cheque from [the vets] arrived this morning. Once again thank you, your help has allowed my wife and I to finally put Sam to rest.

- Client.



May I take this opportunity to thank you and your team for all the work you have done, it is a shame that I had to go to go to such lengths before an agreement could be reached, albeit not the outcome I wanted but never the less we have an agreement.

- Client



Thank you so much for all your help, and being so patient - especially during what's been such a difficult time. I hope I never have to use the VCMS again, but should the need arise, I know I'll be in good hands.

- Client



On behalf of me, my dog, and my friend, I want to say a big thank you. We've got more done in mediation than we have with the practice since August. Without coming to mediation, my complaint would have escalated and probably got nasty. Thank you so much for all your help.

- Client



Thank you for your time and effort in this case. I do believe the VCMS is a fabulous service and am sorry we could not reach an agreement in this case.

- Practice



I am happy to accept this offer. Thank you for your help in this matter. Really appreciate it. I do wish we could have come to this conclusion though without your involvement. Once again really appreciate your time.

- Client



Thank you. Helpful to know. It is calming to know that they would have to provide first aid and pain relief in an emergency, thank you for letting me know this. I am sorry to ask so many questions. Many thanks for taking the time to help me.

- Client



Having had a look through the notes I'd be happy for your team to work their magic. I am confident with the service [we] provided and do not feel anything has been done poorly but the client is obviously dissatisfied. I will wait to hear from you.

- Practice



You were brilliant in deciphering my issues and breaking them down into a way of forwarding and discussing my complaint. This was done very quickly and there was never any feeling that I needed to chase up the matter.

- Client



Extremely efficient! Minimum correspondence, fast turn around and a calm professional attitude when dealing with my complaint from start to finish.

- Client



I have received excellent service throughout my complaint, especially from the Resolution Manager who dealt with my mediation case. My initial request of a 50% reduction in bill was not met, however the amount which has been agreed is still satisfactory.

- Client



As well as being understanding, all staff have been helpful in understanding my concerns and helping me come to terms with the possible options and outcomes regarding my complaint/issues.

- Client



I would recommend this service to anyone who felt they had received a rough time from any veterinary practice as there is nowhere else to take your complaint unless you go through possible expensive legal process. I would advise anyone to use VCMS instead of the usually very sad or very angry reviews that are left on websites that do not really help or even help resolve anything,

- Client



Was put in touch with the VCMS, and [the person who assisted me] was an absolute diamond who put me at ease and helped me tremendously.

- Client



Would I recommend the VCMS? 100%.

- Client



Public feedback at online SPVS-VMG event - Courageous Conversations 'chat':

Have been involved in a couple of mediation circumstances and am always impressed with the skills shown and the outcomes attained. Thank you VCMS.

- Practice

How can the VCMS improve the service delivered?

The VCMS focuses on customer service standards, clear and accessible communication and timely actions as these are areas of importance to many complainants.

Many of the VMCS service users will already feel frustrated and will be seeking a specific pathway or resolution. While the VCMS delivers high standards and achieves positive feedback, the service reviews all feedback carefully to deliver continual improvement and to inform the evolution of the service. As in previous years, constructive feedback is more likely to be expressed when mediation does not resolve the complaint to one or both parties' satisfaction.

This feedback can be categorised into three areas:

The VCMS needs the power to force practices to engage (2 responses)

The VCMS provides clear information at the initial point of contact to explain that mediation is a voluntary process. This is also discussed with the animal owner as the VCMS contacts the practice. Understandably, owners will be frustrated if a practice refers them, or refers within their complaint process, to the VCMS, but then declines to engage. If a complaint process directs a complainant to the VCMS, it is important that practices make a positive decision to always engage with mediation. Alternatively, the practice should word the policy appropriately to reference the option of mediation which will be considered on a case-by-case basis.

The VCMS should be an ombudsman (2 responses)

Mediation is an effective dispute resolution method used successfully by the VCMS. In the few situations where a service user expresses the need for an adjudicator or ombudsman, the service user is seeking

an outcome which is unlikely to be achieved through mediation, such as a disciplinary or requiring the vet to cease practicing. These outcomes are matters for the employer or the RCVS in situations involving allegations of serious professional misconduct. While mediation can often be successful in addressing these issues and expectations, it is not a guaranteed process. The VCMS places great importance on defining and explaining mediation at the outset particularly where parties are clearly entrenched or seeking unrealistic outcomes. In many of these complaints, an adjudication is unlikely to satisfy the complainant as it would not automatically determine the issue in their favour and does not address the emotional drivers of the complaint.

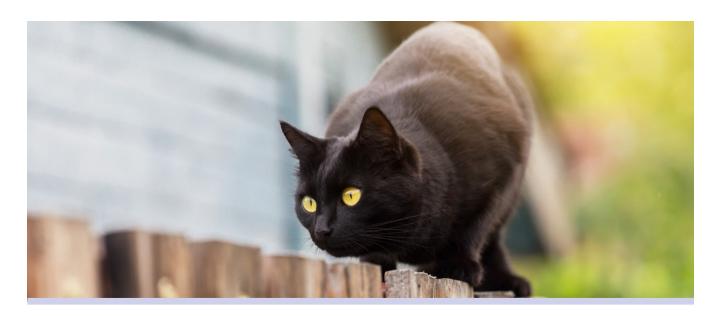
Making contact with the VCMS

There have been five reports across all interactions with service users (0.15% of referrals) that they were unable to contact the VCMS in their desired timescale. The VCMS team provides full-time cover for the telephone enquiry line, email, and online form submissions. Whenever a service user provides feedback, their difficulty is shared with the services manager and the telephone system provider, Avaya. Wherever telephone calls are not answered and a voicemail is left, calls are returned within 24-hours (the VCMS target is within two working days). The VCMS notes that animal owners with vulnerabilities may need additional support to refer and escalate their veterinary complaint to the service. While the service does operate a three-option triage phone system to appropriately direct callers at different stage of the VCMS process, the team works collaboratively and will arrange for a call-back within our target response times irrespective of where the complaint sits in the VCMS process. Where needed, the team will offer a range of support options including postal paper copy referral forms, support in collating and providing the necessary information and translation/transcript services to ensure the service is accessible to as many people as possible.

Outcomes

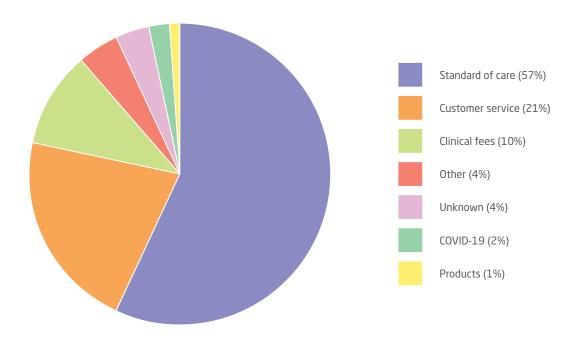
The VCMS continues to monitor overall resolution rates to evolve and develop mediation strategies to counter the exacerbators of conflict during COVID-19.

7 Complaint Insight



What can VCMS mediations tell us about veterinary complaints and the relationship between veterinary practices and animal owners?

Fig. 6 Nature of Complaint as Presented by Animal Owner on Referral to the VCMS



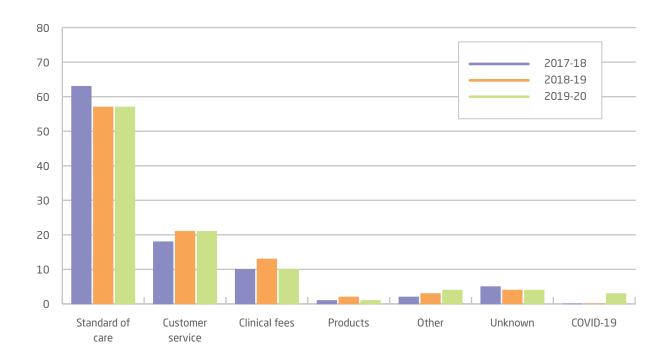


Fig. 7 Nature of Complaint YoY Comparison (%)

7.1. Most Common Complaint Scenarios Escalated to the VCMS

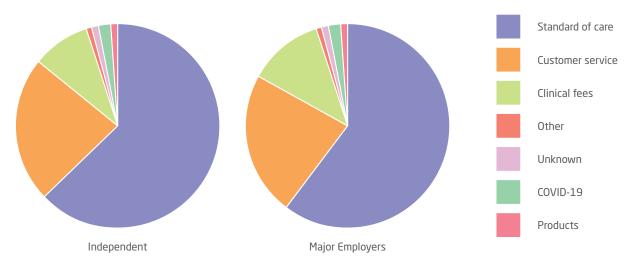
COMPLAINT ALLEGATION RELATES TO		
Standard of care	Animal owner believes the practice did not investigate or undertake sufficient diagnostics to diagnose the animal's condition.	
Standard of care	Animal owner believes the practice made the wrong diagnosis.	
Customer service	Animal owner was dissatisfied with the level of service and communication around gaining consent for treatment.	
Standard of care	Animal owner has raised a complaint as the outcome of the treatment plan was unexpected outcome.	
Standard of care	Animal owner believes there was a delay in diagnosing the condition.	

7.2. Key Insights on the Nature of Complaints Referred to the VCMS and the Outcomes

- A higher proportion of complaint referrals relating to veterinary fees were resolved at Phase A, pre-mediation stage, compared to other types of complaint;
- Over 80% of 'pure' COVID-19 referrals were handled with pre-mediation advice and input supporting local resolution and have not had to revert for further mediation. The VCMS has been committed to supporting swift and proportionate resolutions in these complaints as many arose from the stress of the pandemic restrictions and initial communication challenges. Examples are provided in the case studies in *Appendix 3*;

- Veterinary practice engagements rates are slightly higher in complaints relating to veterinary
 fees and customer service issues than complaints relating to the standard of care. It is important
 to note that many of these complaints are centred around communication rather than clinical
 errors or omissions. This is further explored in the VCMS analysis of the nature of complaints as
 perceived by the animal owner and the mediated issues once the complaint progresses to the end
 of the VCMS process;
- Mediation resolution rates in referrals involving clinical fees and customer service complaints are above the service average;
- There was no significant variation in the nature of complaints referred to the VCMS by independent or major employer practices;

Fig. 8 Nature of Complaint by Business Type



 Complaints concerning veterinary care provided to different species remains consistent with previous years. Over two-thirds relates to dog, and 21% cats with around 4% equine related complaints, and 4% rabbits.

7.3. Re-Categorisation Nature of Complaint After Mediation

As mediations progress, the underlying reason for the complaint becomes clearer. Complaints relating to the standard of care provided account for 60% of referrals received (disregarding COVID-19 related complaints in 2019-20). When reviewing the complaints mediated by the VCMS, the nature and underlying reason for the complaint has been revisited. Analysis reveals that the complaints in this category, once explored and mediated are triggered by communication and client care issues:

Owner feels a condition or injury could have been diagnosed earlier.	50% of these related to communication and client expectations, rather than clinically 'late' diagnosis.
Owner feels the practice could and should have done more at an earlier stage to diagnose and treat their animal's condition or illness.	36% of these complaints related to communication and understanding.

The animal was in the recovery stage following treatment or surgery, and experienced a complication. The owner considers there to be aspects of the care provided which caused or contributed to this complication.	63% of these complaints related to service and communication, rather than clinical errors or failings.
Owner feels the practice made an incorrect diagnosis and this was unreasonable in the circumstances.	81% of these complaints related to client care, (with 65% related to communication issues).
Complaints involving dental treatments and extractions.	56% of these related to communication and expectation.

As an example:

A complication develops during recovery. The practice contacts the owner to explain and to recommend overnight care for the animal. Having agreed, the practice then informs the owner they will need to collect the animal and be transferred to the overnight care provider 10 miles away at the practice's hospital site.

The owner complains and states that the complication arose because the vet who performed the procedure was rushing - they had explained the delay in calling the owner to confirm all was well following the procedure was due to a back-to-back list and an emergency case which came in as the procedure was completed.

During mediation, the owner was clearly distraught at having to transfer their animal and felt this had caused further problems. The owner was not expecting to have to transport their animal and felt unprepared.

It is unusual for a complaint which is presented as a client care issue to be found to be caused by a standard of care concern. Many of the complaints relating to fees also include elements of communication and client care, as they involve expectations and clients being aware or informed of options and possible outcomes/fee implications.

The VCMS is keen to emphasise to veterinary practice teams that minimising and preventing complaints from arising or escalating can be achieved by focusing on communication, and importantly what a client has understood, assumed or expects from an interaction.

Learning from complaints to see where communication can be adapted or evolved to address the potential for misunderstanding or conflict is a useful Quality Improvement tool. Where possible, involving clients in this can be a powerful exercise for both practice teams and also to bring resolution and re-engage with the client.

7.4. Complaint Insight: Qualitative

Mediation case studies are included within this report at Appendix 3. They walk through the mediation process and show how the complaint was resolved. The process of mediation provides an independent insight into the reasons why complaints arise and why they escalate. In this section the VCMS will share some thematic insight gained during 2019-20.

7.4.1. DIAGNOSIS RELATED COMPLAINTS

A significant proportion of complaints referred to the VCMS involve diagnostic pathways. This is entirely

reasonable and expected as this is the core element of a veterinary surgeon/animal owner interaction.

These complaints can generally be categorised as:

- Perceived or alleged error in the diagnosis;
- Animal owners expressing strongly held views that the diagnosis should have been made earlier, and if it had, the treatment would have been more effective or a prognosis improved. Complaints can include allegations that the practice should have offered or undertaken more diagnostic tests earlier in the interaction or explained the importance of the tests, to enable the owner to make an informed decision:

From analysis of the complaints mediated and the outcomes, the VCMS notes:

- Communication and understanding sit at the core of many of these complaints. A complaint can arise where the expectation of a client and approach of a practice may be misaligned. For example:
 - 'The owner feels a diagnosis should have been made earlier. The practice explain they offered blood tests or other diagnostics which were declined by the owner. The owner responds saying they did not understand the potential importance or the benefits of obtaining the results. The practice feel they offered the tests, so the onus is on the owner. The owner believes the practice should have provided more information so an informed decision could have been made. Both parties are viewing the situation with hindsight, and the importance may not have been apparent at that time, and the owner may have declined even with further information being provided.'
- Progression of an illness is also a factor. The diagnosis may become more apparent as an illness develops, and will then move from a differential diagnosis situation to a confirmed diagnosis.

RESOLUTION MANAGER REFLECTIONS: COMPLAINTS ABOUT DIAGNOSIS

'Complaints relating to diagnosis, often lead back to communication. An owner will feel the vet should have done more, earlier in the pathway. Commonly, differential diagnoses or diagnostic pathways will be recorded in the clinical notes highlighting that the vet was considering these wider options, but they will not always be communicated effectively to the client. The vet may explain that they did not feel this was necessary at this early stage. In some of the complaints I have mediated, the practice team have indicated that on reflection, a more in-depth conversation with the client about differential diagnosis or types of investigation would have prevented the issue arising. In many scenarios, the vet would not be advising or advocating that course of action, but by making the owner aware that these options are available, if needed, later down the line, the owner feels more engaged. If the owner is then keen to explore these options at an earlier stage, this is their decision.

'This is particularly evident when treating allergies. Animal owners may have an expectation of a definitive diagnostic tests for allergies. Where an owner then seeks an alternative opinion, and the second practice diagnoses an allergy and treats effectively, the owner may raise a complaint regarding the timescale and costs of the diagnostic pathway. In many instances, mediation explores the progression of the condition and the role played by the results of test conducted or examinations by the first practice.'

7.4.2. EUTHANASIA AND OF LIFE CONSULTATIONS

Complaints involving end of life care are often the most emotive, with a myriad of emotions involved for both parties.

In some of the complaints relating to end-of-life care, the owner explains that they feel the euthanasia process was rushed. Some also refer to a perceived lack of empathy from the practice team. This can arise where the owner feels the vet's empathy is not a reflection of the owner's level of emotion. Complaints relating to end of life can arise where an owner is not prepared or aware of a possible reaction. If their experience is quite different from a previous euthanasia, such as a known complication (vein blown or difficulty with a cannula) or reaction of the animal (agonal gasping), the owner's distress can be heightened, and they may conclude 'the vet must have done something wrong'.

End of life complaints can also involve cremation administration errors (communal v individual) and animal belongings being mislaid and unable to be returned to the owner. While largely administrative, these are important aspects of client care, which require careful, empathetic responses by a practice to avoid escalation.

7.4.3. UNEXPECTED OUTCOMES

When analysing the complaints referred to the VCMS, as a reflection of the wider complaint triggers and circumstances, it is clear that unexpected outcomes often contribute to a breakdown in the relationship between veterinary practice and animal owner. Common scenarios include:

- Dental cleans and extractions complaints will often involve scenarios where more teeth were removed than expected, and the owner worries about how the animal will manage post-recovery. In addition, where the animal unfortunately experiences complications following the general anaesthetic, complaints can be highly emotional and escalate quickly. Very often owners will feel guilty for consenting to the procedure or respond from a position of shock and grief;
- Complaints arising where a mass or foreign body is subsequently diagnosed or found during
 laparotomies, and there has been an earlier radiological diagnostic. A complaint can arise when an
 owner concludes the object was missed on the scan or the scan/x-ray was not conducted properly.
 The owner may not understand the nature of the scan and the results, i.e. what can be detected
 from a scan and where the composition of the 'object' means it was not visible on a scan or x-ray;
- Unexpected death following a positive discharge these scenarios are difficult for both parties as the animal has successfully undergone surgery or treatment, and the practice is satisfied that they can be discharged. An owner will then feel hopeful that the 'risk' has passed, and they may also not be aware of the warning signs. Some complaints also reference frustrations where the animal owner cannot find contact details or information on who to contact if a situation develops outside of normal practice hours.

7.4.4. SECOND PRACTICE INVOLVEMENT

Where animal owners have either sought a second opinion or had to attend another practice (e.g. out of hours care) if comments are made by the second practice team, this can place a seed of doubt. The animal owner may then second guess the initial advice/recommendations. While this is generally an innocuous response or may be an interpretation by the animal owner, this can cause tension in the relationships with

both practices. Key elements relate to animal owner understanding of hindsight, progression of the illness or process of elimination and responses to previous treatments, which can all aid diagnostics or successful treatment plans.

7.4.5. COMMUNICATION

In almost every complaint, communication is a factor. Communication issues will contribute to the breakdown in the trust and confidence between practice and owner or increase the emotional response to a situation. These include:

Trust and Confidence

- Owners feeling their concerns or complaints are being ignored, particularly where a complaint is
 not acknowledged promptly. This year, response times have been challenging for practice teams
 for understandable reasons such as the demands placed on teams by the COVID-19 pandemic
 restrictions and reduced staff numbers through team rotations, furlough, illness or self-isolation.
 An acknowledgement and a realistic timetable will help to keep communication on a
 constructive path;
- Owners feeling as though they have not been kept informed and given updates on charges or treatment. On occasions, administration errors can be a contributing factor, i.e. out of date telephone numbers on records which mean that calls to owners are made but not connected. The issue will escalate if the practice responds highlighting that clients are responsible for checking contact details, and owners will query if calls were actually made. Allegations of dishonesty have then been mooted. The practice then feels aggrieved, with tensions escalating.

Estimates and Fees

- Clearly exceeding a given estimate when the care provided was all expected will often lead to complaints;
- Clarifying the understanding of the cost information provided and, in particular, the distinction between a quote and an estimate can help. There is also a benefit in explaining what is and is not included within the total figure provided.

Pet Insurance

- Many of the complaints involving pet insurance referred to the VCMS arise from misunderstanding around the relationship between the animal owner, their insurer, the practice, the exclusions of the policy and information recorded on the clinical notes, such as differential diagnosis. Clarity around where the responsibility lies would assist practices. Complaints arise where the animal owner believes the practice has an obligation to know their policy details including reserves, limits and authorisation requirements. This can lead to problems later down the line when the insurance will not cover some or all of the claim, and the animal owner feels aggrieved with the practice;
- Another area of conflict is where the clinical records include mention of a differential diagnosis, the findings of an examination or a noted symptom which later become highly relevant as an insurer declines a claim based on a pre-existing condition. If an owner was not aware or did not recall the particular issue, and has not disclosed this to a new insurer, they can feel aggrieved

when the insurer gives their reasoning for declining the claim. The VCMS has received referrals where the animal owner feels information or details were not shared with them during a non-contact consult, and subsequently, a claim is declined based on information of which the animal owner states they have no knowledge.

'Being Too Kind'

There have also been examples where the practice chose to spare the emotions of the owner and limit the options presented when the prognosis is poor. Owners have complained and expressed that the treatment plan should be their choice, not the vet's. In these scenarios, the prognosis or the outcome would not have changed, but the owner feels they would have been better prepared and would have felt that everything that could be done, had been considered. The practice expressed their view that this approach was based on experience and with the owner and animal's interests at heart.

7.5. The Impacts of COVID on the Relationship Between Animal Owner and Veterinary Practice Team:

When reflecting on the impact of the COVID-19 pandemic and restrictions on the relationship between veterinary practices and animal owners, key insights from the VCMS team are:

PRE-CONSULTATION

- If an owner is self-isolating, or was shielding during the restrictions, a friend or family member can
 bring the animal to the practice. This has increased the distance between the owner and the vet,
 meaning there can be greater scope for misunderstanding and miscommunication. The interaction
 may also miss the benefits of a strong long-standing connection between an owner and the vet or
 wider team:
- Animal owners who were particularly anxious complained that wait times contributed to their
 frustrations and worries. Some expressed feeling helpless when sat waiting in their car for the
 vet to return and share the outcome of the consultation. When in the waiting area, information is
 available and may help owners stay occupied. The front of house team will also reassure;
- The fast-paced change in ways of working and operational protocols within practice teams
 did, and still does result in some communication delays such as passing on messages, admin
 processing and also complaint handling including sending written responses to complaints or not
 sending written responses at all;

CONSULTATION

The physical separation of vet and animal owner during consultations has increased the potential for communication issues, and misunderstanding. Where complications or unexpected outcomes arise, some owners have found it difficult to maintain trust in the vet and the practice team as they were handing over their animal in the car park or practice entrance, and not observing the consultation or treatment administered. In some extreme complaints, animal owners did not believe the vet's account of the examination or treatment. Even where an aspect is recorded in

- the clinical notes, an owner may still have a level of distrust as they have not seen this being performed or noted;
- The team also saw an increase in animal owners asking why CCTV or video links to the consultations were not provided, either to allay concerns at the time or to provide confirmation of what took place;
- When relying solely on verbal communication between the vet and the animal owner pre- and post-examination, this can mean aspects are overlooked or forgotten. The owner will often share anecdotal comments or 'nuggets' of what they consider to be irrelevant information. These can be 'key' details in unloading the diagnosis. They also provide invaluable insight into the owners needs and worries. When an owner is present during the examination, they will observe what is being done, and will often be in discussion with the veterinary professional during the examination. When they are not present, the vet or veterinary nurse has to convey all the necessary information during the 'feedback' element of the consultation. In some complaints, owners have explained they felt this element was rushed or the veterinary professional had to prioritise the information provided. In some complaints, owners have explained they have felt there has been less time available to make a decision;
- Practices have had to adjust their approach to obtaining consent. Often these conversations
 between vet and animal owner are taking place in quite different settings car parks, remotely
 or at a distance depending on the COVID-secure measures in place. Some clients have indicated
 they feel disengaged with the process. The restrictions anecdotally have increased the usual
 challenges in ensuring an owner understands the risks associated with the diagnostic or
 treatment plan, and that they are 'on-board' and confident in the decision made;

Qualitative insight from mediations suggests a number of factors may be influencing both parties' responses:

- Due to the demands on the practice teams, vets may not have been able to call a client with an
 update or test results until the end of their shift, and animal owners have become more anxious
 over that period;
- The owner experience of the consult will be different waiting and arrival, location, interaction at a distance mean the contact feels different for both the owners and initially the practice teams. This has required an ongoing period of adjustment for practice teams. With often emotive conversations about increasingly complex diagnostic pathways and treatment options, communication is key and this unfamiliarity can be a seedbed for miscommunication, complaints and conflict. Last year, the VCMS highlighted the importance of tone of voice and body language in communications;
- The verbal explanations of aspects which would normally be observed require more time, and consume a proportion of the discussion time within a consult;
- The COVID-secure measures (including PPE changes), movement of the patients and staff between outdoor consult areas and consult rooms and sanitisation/cleaning requirements mean consult schedules are quite different, and may be or feel more rushed. A practice will have made adjustments and implemented COVID-secure measures to protect their team and clients. Clear communication on what to expect and how the visit to the practice will be different has helped in some scenarios as owners then felt prepared and understood why certain steps were necessary.

What may be obvious to a practice, is not obvious to an owner. For example, complaints have included concerns that the animal was collected from the car park by a member of the team who came into close contact to take the animal or to hand over items, but the owner was not allowed to accompany the animal into the practice. During the initial mediation phase, the VCMS seeks to understand the approach taken by the practice and then explain this to the owner within the mediation, e.g. if a team member was in close proximity of an owner who subsequently tested positive for COVID-19, that team member would have to self-isolate which has a significant impact on the ability of the practice to continue to deliver care. Close contact is defined by the NHS as:

- » Close face-to-face contact (under one-metre) for any length of time including talking to them or coughing on them;
- » Being within one to two metres of each other for more than 15 minutes including travelling in a small vehicle;
- » Spending lots of time in your home.

Practices had to adapt their ways of working to minimise this direct contact and the risk an entire team becoming unwell or needing to isolate. Owners are helped to understand that if this did arise, many practices would not be able to continue to deliver care;

'Dr Google' impact is increasingly a factor, as animal owners explain they seek further information online between interactions with practice. As an example, the veterinary surgeon prescribes medication, and explains the animal owner will need to collect these from the practice. The owner may research the medication online before attending the practice to collect and pay for the dispensed medication. Practices must provide owners with information explaining the option of obtaining a prescription from the practice and sourcing the medication elsewhere. This is often displayed in a waiting area. With many practices not allowing owners into their premises from March 2020, this information was not available to owners. Some have provided this online or when prescribing. Ordinarily, when the animal owner queries the cost or the need for the medication with the front of house team, they may reference the prescription policy and explain the reasons for the difference in pricing, this allows issues to be resolved at that early stage. The VCMS has published information to give the context and further explanations to help both owners and practice teams.

RESOLUTION MANAGE: KEY REFLECTIONS OF 2019-20

'One area I have had to work on this year has been to get a client to accept a realistic and often generous resolution. I have had to use my mediation skills to help them look into the future for best and worst outcomes if the complaint is not resolved. Many complainants come with the expectation of their complaint being resolved by the practice agreeing to all of their desired outcomes. This is the initial mediation phase and requires this expectation to be managed.'

8

Engaging and Collaborating



8.1. **RCVS**

Throughout the year, the VCMS team has been in regular contact with the Professional Conduct team at the RCVS. These interactions often involve individual complaints/concerns, and ensure that concerns are progressed in the appropriate pathway.

At a strategic level, the VCMS/RCVS interaction has included:

- Team-team session to share insights and ways of working February 2020;
- Provision of complaint data to support the RCVS response to DEFRA data request;
- The annual VCMS audit was undertaken, and concluded remotely (January April 2020);
- Head of VCMS and Registrar/Head of Professional Conduct team 1-1's during Q3 and Q4 to share insight and discuss the way in which the VCMS could provide support and contribute to early dispute resolution during the pandemic.

The VCMS was referenced in the 2020-24 Corporate Plan: Clarity, Compassion, courage, confidence: the future of the Royal College of Veterinary Surgeons, which highlighted the impact on the VCMS since 2016.

8.2. Indemnity Insurers

The VCMS continues complaint-based dialogue with the indemnity insurers, with indemnity insurers participating in the mediations on behalf of practices in a minority of complaints.

In August 2020, the VCMS and VDS teams had a cross-organisation workshop session. Both organisations shared updates on activity, insights and trends. Collaborative discussions then explored:

- Practice engagement the VDS confirmed this was good and they felt engagement rates were
 high, with decisions made on a case-by-case basis. The VDS continued to encourage engagement
 with the VCMS process, save in complaints where telephone mediation was not likely to be
 appropriate. The VDS reported that awareness of the service had increased. The VCMS will
 continue to seek support and input from the VDS in terms of practice engagement and feedback
 on the impact of the service.
- Check-ins the Head of VCMS continues to check in with claims consultants and the leadership team at the VDS to ensure the good, constructive working relationship is maintained and strengthened wherever possible.

8.3. Professional Bodies

During the course of 2019-20, the VCMS has met and engaged with the following professional bodies to raise awareness, and also with veterinary professionals in independent practice. These interactions included:

- Sharing VCMS 2019-20 insight;
- Collaborating to inform how the VCMS can best operate and have a positive impact on complaint resolution and client relationships during the COVID-19 pandemic.









8.4. Major Employers and Charities

The VCMS has provided an annual overview, with COVID-19 impact insight to the major employer group. The attendees participated in a facilitated insight led discussion following the overview, sharing experiences and ongoing initiatives to manage the increase in complaints seen across the sector. This exchange allowed the VCMS to share an umbrella perspective and also gain further detail on front line challenges and how practices were meeting these challenges.

The VCMS also provides regular feedback to individual professional services teams within the major employers, sharing updates on the engagement within their group, outcomes as well as trends and themes.

8.5. Animal Owners

The VCMS has published a range of communication pieces focused on complaint trends, e.g. pet insurance, estimates and medication supply. These were informed by VCMS activity and insight gained during mediation activity in the pre-mediation advice phase of the VCMS process, and full mediations.

The information is shared in the form of online content so it can be found by animal owners if they search for guidance on particular topics or concerns. The content is often reviewed by VCMS veterinary advisors and consumer experts within the organisation, using our best endeavours to produce balanced and effective information.





Canine Arthritis contacted the VCMS to share their insight on challenges in the animal owner and veterinary practice relationship, particularly when diagnosing, treating and living with long term management of a chronic condition. Further details of communication work with this charity is detailed in section 9.

- https://caninearthritis.co.uk/cam-conversation-with-angela-pinkney-about-insurance/
- https://caninearthritis.co.uk/cam-conversation-with-staci-baldwin-about-communication-skills-before-during-and-after-a-veterinary-consultation/
- https://www.youtube.com/watch?v=17rEvdUd|VQ

9

Awareness and Insight



9.1. Communication Strategy

Despite being defined by a series of unprecedented challenges, 2020 has been a year full of productive activity for the VCMS communications team. From implementing a successful social media strategy and creating targeted digital content, the VCMS has continued to inform and engage veterinary practices and members of the public.

At the forefront of communications this year was a move to dispel the myth that the VCMS exists solely to refund vet owners involved in a dispute. Recognising the need to clearly define the work and services we provide, and how our meditation processes serve to assist both parties, the VCMS tasked itself with recalibrating communications to ensure VCMS organisation goals are clearly understood.

To achieve this objective, the VCMS produced and promoted articles that clearly state the procedures and how they are designed to help both veterinary practices as well as members of the public. By creating a comprehensive guide that clearly states the effectiveness of mediation, the VCMS has sought to properly educate its growing audience on how the service works. The VCMS also created a piece that explains how the service was created to overcome stalemates and that 86% of cases are resolved by mediation to help further build trust amongst veterinary practices.

Adapting to the current climate, VCMS communications in 2020 also provided vital information relating to the COVID-19 pandemic. Clearly explaining how government guidelines continue to affect operations, the VCMS has utilised its social media channels and reach to inform both veterinary practices and members of the public in a timely manner. To make these communications as effective as possible, the VCMS also shared a range of resources published by the BVA. Recognising the need to support this organisation more than ever, the VCMS helped increase the visibility of their COVID-19 guidelines as well as their messaging relating to pet insurance.

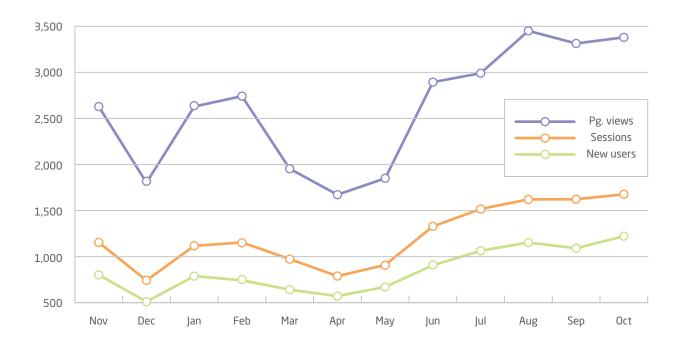
It is important to note, however, that VCMS social activity never lost sight of other pressing issues at hand, which is why time was dedicated to informing its audience on the implications Brexit will have for both vets and pet owners.

A testament to the strength of the VCMS overall social media strategy, the social media channels have seen a 60% increase in engagement and reach extend by 68% across Facebook and Instagram.

As well as progressing VCMS initiatives, communications this year saw the VCMS engage in a range of collaborative projects. Namely, the VCMS worked closely with Canine Arthritis Management to help produce and promote articles that provide solutions to trending problems they identified. The VCMS communications team is excited to continue working in a collaborative capacity and has planned a series of articles with the BVNA which will provide informative insight from a vet nurse perspective.

Altogether, the communications carried out by the VCMS this year has delivered crucial support and clarity at a time when vets and pet owners needed it most. By creating engaging content that helps to educate readers on a wide range of timely topics, the VCMS is confident that it has provided value to its audience as well as promoting the broader objectives of the VCMS.





TOP WEBSITE PAGES

- 1. https://www.vetmediation.co.uk/ (13,150)
- 2. https://www.vetmediation.co.uk/complaints (5,070)
- 3. https://www.vetmediation.co.uk/clients (2,573)
- 4. https://www.vetmediation.co.uk/what-we-offer/the-process (2,347)

- 5. https://www.vetmediation.co.uk/resources/faqs (1,765)
- 6. https://www.vetmediation.co.uk/resources/news/news-details/2019/09/26/it's-not-about-right-and-wrong-veterinary-complaints-and-negligence (1,180)

9.2. Engaging with Veterinary Professionals in person



The VCMS team attended the London Vet Show 2019, and in addition to meeting with delegates to discuss individual complaint issues, Jennie Jones delivered:

- Workshop peer discussion session I've done all I can to resolve this complaint How can mediation help?
- 'It's not what you do, it's the way that you do it' showcase session which was over-subscribed by delegates.



During the Congress in January 2020 in Cardiff, the team met with delegates from across the UK, and in particular from the independent sector and practice management roles.

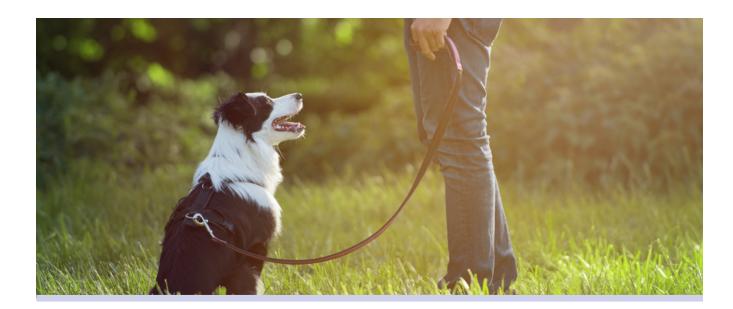
At the event, the VCMS team attended and contributed to the RCVS Knowledge Quality Improvement - research presentation.

Wider activity during 2019-20 included:

- Insight sharing and profile raising;
- Group VCMS Workshop sessions;
- 'It's not the act, it's how you react' workshop at Blue Cross Conference, Jan 2020.

Since March 2020, the opportunity to attend events has been curtailed by the pandemic. The VCMS continues to liaise with the veterinary professional bodies such as the BVA, BSAVA and SPVS-VMG to explore virtual events. The VCMS appreciates that the professions' focus has been on operational matters and the delivery of effective clinical care. The communication activity of the VCMS has sought to share information or insight which will be helpful and relevant to veterinary practices during this period, while respecting the COVID-19 focus of all involved in the profession.

10 Proposed Objectives 2020-21



	 Share insight and analysis from 2019-20; Improve feedback response rates to ensure VCMS effectiveness can be quantified
Confidence	and monitored;
	 Improve feedback response rates to ensure VCMS effectiveness can be quantified and monitored.
Clarity	 Deliver proportionate and effective complaint mediation within 60-day timeframe;
Ciaiity	 Continue to engage with stakeholders and the professions.
	 Encourage engagement with the VCMS mediation process by practices;
Courage	 Consider how the VCMS can support quality improvement within the veterinary sector, to support reflective intelligence led practice and learning culture.
Commission	 Support practices and individual veterinary professionals to further develop effective local complaint handling processes and skills to increase local resolution;
Compassion	 Provide ongoing guidance to dissatisfied veterinary clients to support the raising of complaints with the practice in a constructive way to facilitate local resolution.

11 Conclusion



As we reflect on 2019-20 and then look forward to 2020-21, it is apparent that the role and impact of the VCMS in the current environment is more important than ever.

When the reality of COVID-19 distances people, using techniques and approaches to bring a clearer understanding of the other party's perspective and break down the differences to find the commonality is vital.

With increased activity, the VCMS has continued to provide a time-efficient and worthwhile resolution service and despite the challenges, improved the timeline to bringing a complaint mediation to a conclusion.

More entrenched positions, the impact of the stresses and pressures felt in response to COVID-19 has made mediations harder. The VCMS continues to evolve and develop its approach to mediation. The team brings an agility that has enabled the service to deliver a positive impact, both in terms of supporting local resolution and through full mediations notwithstanding the unprecedented situation.

It was anticipated that COVID-19 would have a more restricting impact on mediation, so while resolution rates are slightly lower than in 2018-19, engagement by practices has been maintained and the outcomes achieved are to be applauded. Ongoing learnings from 2020 will continue to inform what we do and how the service supports the public and profession in the most effective and efficient way possible.

The measures needed to provide continuity of veterinary care during the pandemic have also resulted in significant changes in practice operations. Necessity has been the mother of innovation, and resulted in permanent changes in how veterinary care is delivered going forward.

Alongside this, the profession itself is looking at the changes necessary to ensure the professional meets the future needs of society. Legislative reform and ongoing consultations on changes to how veterinary care is delivered, such as tele-medicine and remote prescribing, are prime examples.

There is little doubt that the profession will seek to retain the positive aspects of the innovation necessary during

the pandemic. Where these are beneficial for animals, owners and the practice team, practices will look to embed these in the day-to-day activities.

As well as clinical learnings, quality improvement through insight and analysis must also be applied to the practice-client relationship and client care. Complaints have a valuable part to play in any reflective professional practice.

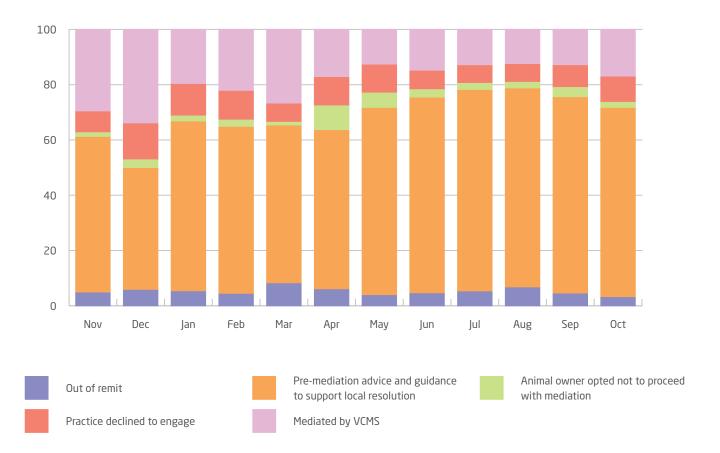
Veterinary complaints do involve themes which are common across other healthcare sectors and professions – communication, expectations and the impact of the imbalance of knowledge. They are, however, also very unique – the emotional investment of both parties in the individual animal and the 'calling' felt by many within the practice team mean that issues can rapidly escalate and become emotive.

In the longer term, the VCMS has a role to play in supporting the profession to approach conflict and complaints in a more positive way. Nurturing the view that a complaint can provide an opportunity for learning, and handled in an open and collaborative way, can strengthen the relationship with the client and minimise the stress felt by veterinary professional in a complaint scenario.

A relationship of trust and respect is the ideal for both animal owners and practice teams. Understanding and listening to the alternative perspective is a cornerstone of that relationship. It is a two way process requiring respect and compassion from both parties. Bringing the animal owner voice into the resolution process is a fundamental aspect of mediation. As a forward looking profession, that voice must be an influence and component as the RCVS and veterinary professionals reach out to define and shape the profession of the future.

Appendix 1: Outcomes Data

Monthly Outcomes 2019-20 (%)



Annual Comparison of Outcomes

Outcome - All	% of All	2019-20	2018-19 (%)	YoY Comparison	Comparison v 2016 to date
Out of remit	5%	160	4	-1%	-
Pre-mediation advice and guidance to support local resolution	63%	1951	61	4%	0.5%
Animal Owner did not proceed	3%	101	7	-	-2.8%
Practice declined to engage	8%	274	9	-1%	-1.2%
Mediation - concluded complaint	16%	455	16	-5%	-1%
Mediation - complaint escalating	4%	136	2	-2%	2.4%
Total	100%	3077			

Outcomes by Sub-Category

		Out Of Remit	Pre- mediation advice and support for local resolution	Client not to proceed with mediation	Practice declined to engage	Complaint concluded during VCMS mediation process	Complaint not concluded within VCMS mediation process
Complaint Nature	Sub Nature						
	Consent - uninformed/ risk not covered	3.4%	69.5%	6.8%	8.5%	6.8%	5.1%
	Delay in diagnosing	1.1%	54.1%	1.6%	10.4%	23.5%	9.3%
	Diagnostic pathway - insufficient	4.4%	55.8%	3.9%	11.7%	18.1%	6.1%
	Diagnostic pathway - too extensive	3.5%	63.2%	3.5%	8.8%	14.0%	7.0%
	Discharge	3.5%	62.1%	3.5%	10.3%	13.8%	6.9%
	Elective surgery complication	5.6%	67.6%	5.6%	8.5%	8.5%	4.2%
	Euthanasia	2.2%	71.1%	0%	6.7%	17.8%	2.2%
	Failed to explain options	0%	66.1%	3.4%	5.1%	23.7%	1.7%
	Out of hours	6.3%	68.8%	6.3%	0%	18.8%	0%
	Recovery - complication	3.8%	60.8%	2.5%	10.7%	16.5%	5.7%
	Surgery - complication	1.6%	67.2%	3.1%	11.7%	12.5%	3.9%
	Unexpected outcome - dental	3.9%	62.8%	3.9%	7.8%	21.6%	0%
	Unexpected outcome - other	6.1%	66.5%	6.6%	8.6%	8.6%	3.6%
	Wrong diagnosis	2.8%	57.2%	4.2%	13.3%	17.5%	5.0%
	Unknown	19.4%	71.0%	3.2%	0%	6.5%	0%
Standard of Care Total		3.7%	60.9%	3.9%	10.4%	16.0%	5.1%
Customer Service	Complaint handling	4.3%	60.0%	5.7%	10.0%	10.0%	10.0%
	Consent - service/ communication	6.9%	65.3%	3.4%	8.4%	13.1%	2.8%
	Disregarded O views or feelings	4.9%	58.0%	3.7%	7.4%	24.7%	1.2%
	End of life - client care	1.8%	69.6%	3.6%	12.5%	8.9%	3.6%
	Failed to update	0%	72.7%	0%	9.1%	18.2%	0%
	Lack of empathy	6.9%	70.8%	2.8%	5.6%	12.5%	1.4%

	Records issue	17.2%	57.8%	0%	9.4%	12.5%	3.1%
	Unknown	0%	75.0%	0%	0%	12.5%	12.5%
Customer Service Total		6.7%	64.4%	2	8.5%	13.8%	3.4%
Clinical Fees	Charging/invoice error	10.3%	69.2%	0%	0%	12.8%	7.7%
	Estimate -exceeded	3.4%	59.3%	3.4%	6.8%	18.6%	8.5%
	Fee - excessive	3.3%	74.6%	1.6%	4.1%	15.6%	0.8%
	Insurance claim related issue	6.4%	57.5%	2.1%	12.8%	14.9%	6.4%
	Insurance cover issue	7.3%	58.5%	0%	12.2%	19.5%	2.4%
	Medication charge	0%	79.3%	0%	6.9%	13.8%	0%
	Prescription Charge	0%	100%	0%	0%	0%	0%
	Unknown	0%	100%	0%	0%	0%	0%
Clinical Fees Total		4.6%	68.3%	1.4%	6.3%	15.6%	3.8%
Products	Allergic Reaction	12.5%	50.0%	0%	0%	12.5%	25.0%
	Non veterinary product	0%	100%	0%	0%	0%	0%
	Product not working as expected	5.3%	63.2%	0%	10.5%	15.8%	5.3%
	Unknown	0%	100%	0%	0%	0%	0%
Products Total		6.7%	63.3%	0%	6.7%	13.3%	10.0%
Other	Unknown	13.8%	86.2%	0%	0%	0%	0%
Other Total		13.8%	86.2%	0%	0%	0%	0%
Unknown	Fee - excessive	0%	100%	0%	0%	0%	0%
	Unknown	4.0%	89.5%	1.6%	0%	4.8%	0%
Unknown Total		4.0%	89.6%	1.6%	0%	4.8%	0%
COVID-19	Dispensing medication	0%	91.7%	0%	8.3%	0%	0%
	Emergency Treatment Dispute	0%	90.0%	0%	0%	5.0%	5.0%
	Poor Communication / Lack of Empathy	3.2%	77.4%	3.2%	3.2%	6.5%	6.5%
	Vaccines	28.6%	57.1%	0%	0%	14.3%	0%
	Unknown	0%	100%	0%	0%	0%	0%
COVID-19 Total		4.1%	82.2%	1.4%	2.7%	5.5%	4.1%
Total		5.0%	65.2%	3.1%	8.5%	14.1%	4.2%

Appendix 2: Nature

	Standard of care	Customer Service	Clinical Fees	Products	Unknown	Other	COVID-19
Practice declined to engage as % of all referrals	10.4%	8.5%	6.3%	6.7%	0%	0%	2.7%

Clinical Fees		340
	Charging/invoice error	37
	Estimate -exceeded	59
	Fee - excessive	120
	Insurance claim related issue	49
	Insurance cover issue	36
	Medication charge	29
	Prescription Charge	9
	Unknown	1
COVID-19		75
	Dispensing medication	12
	Emergency Treatment Dispute	21
	Poor Communication / Lack of Empathy	32
	Unknown	3
	Vaccines	7
Customer Service		
	Complaint handling	70
	Consent - service/communication	349
	Consent service/communication	1
	Disregarded O views or feelings	80
	End of life - client care	55
	Failed to update	12
	Lack of empathy	70
	Records issue	63
	Unknown	8
Other		72
	Unknown	72

Other		1
	Other	1
Products	29	
	Allergic Reaction	8
	Non veterinary product	2
	Product not working as expected	18
	Unknown	1
Standard of Care		1883
	Consent - uninformed/risk not covered	66
	Delay in diagnosing	179
	Diagnostic pathway - insufficient	381
	Diagnostic pathway - too extensive	61
	Discharge	58
	Elective surgery complication	69
	Euthanasia	46
	Failed to explain options	66
	Out of hours	16
	Recovery - complication	165
	Surgery - complication	121
	Unexpected outcome - dental	51
	Unexpected outcome - other	207
	Unknown	32
	Wrong diagnosis	365
	Unknown	43
	Fee - excessive	1
	Standard of Care	1
	Unknown	41
Grand Total		3151

Appendix 3: Mediation Case Studies

Emergency Contact and Unexpected Outcome (9935)

OWNER'S COMPLAINT:

Mrs A had mixed chemicals for a swimming pool within a confined room, and unfortunately, her dog was present.

In mixing the chemicals, noxious fumes were emitted. The dog suffered breathing difficulties, and Mrs A booked an urgent consultation with the vet. The dog was examined by the vet.

At discharge the vet explained to Mrs A that her dog would struggle to breathe for a few days but the practice team were confident it would make a good recovery. The dog unfortunately became very ill that evening. Mrs A tried to support her dog's breathing, whilst trying to call the out of hours care team. She felt she was administering CPR.

Mrs A explained to the VCMS that she could not find the emergency telephone number or know if the emergency team would have access to her dog's notes. Having contacted the out of hours team, Mrs A was told to bring her dog into the practice immediately. Unfortunately, her dog passed away in transit to the emergency appointment.

ANIMAL OWNER'S DESIRED OUTCOME:

- A goodwill gesture;
- Clarity on emergency numbers and where to take your animal in an emergency;
- Explanations of the treatment given and why she was given 'false hope'.

WHY MEDIATION WORKED WELL:

During the initial mediation session/call, the Resolution Manager sought to understand from the owner the underlying issues around the emergency contact issue.

Mrs A explained what happened at home while she was trying to call the out of hours number. This was a distressing episode for Mrs A and she was able to share how she felt as tried to find pen and paper to take down the number from the recorded message, whilst she felt that she was giving her dog CPR in a desperate attempt to revive it.

Her daughter drove Mrs A and her dog to the appointment, and there was confusion about the location of the out of hours practice. Mrs A explained that they had both been in a state of panic and almost hysterical trying to work out what to do. This explanation was conveyed to the vet to help him appreciate Mrs A's perspective of the event, and this allowed the vet to acknowledge the impact and understand why Mrs A was so distressed.

The practice team explained to the Resolution Manager the process and their efforts to source and to operate an effective phone system. The practice explained the reasons why the system was set up in this way and the alternatives they had trialled previously. There had been pros and cons to the different options, but no perfect answer. The practice asked what they could do in this situation. The Resolution Manager explored the option of an information sheet given to an owner following discharge. This could provide an owner with the out of hours procedure, numbers, and addresses, so they can keep this to hand in the short term and the immediate

post discharge period. The vet loved this idea and agreed to put it into action immediately. The practice also acknowledged that Mrs A's distressing experience had been exacerbated by these contact challenges. To reflect this, the practice offered a goodwill gesture to a charity of Mrs A's choosing.

During the mediation process, Mrs A also explained that she had questions and worries about the treatment given to her dog earlier that day. The vet took the Resolution Manager through the treatment and provide reassurance. This was an unusual and unexpected outcome.

Mrs A accepted the explanation, and the offer of a charitable donation to a local wildlife charity.

Paws for Thought

Practices may find it helpful to review their information and literature and consider this from their clients' perspective – if in distress, can the information needed by found easily? Is that information clear and does it provide everything needed?



Post-Surgery Complications and Managing Expectations (9375)

CLIENT'S ISSUES:

Following an operation for an internal blockage, the dog suffered a wound breakdown, which became infected and the dog sadly passed away.

Mr B referred their complaint to the VCMS having exhausted the practice's own complaint process. Mr B felt that the surgery should not have been performed in a practice where 24-hour care was not available. He explained that he had not been informed that his dog would have to be transported to another practice after the operation, to continue his recovery. His dog had to jump into the back of his truck, and he believed this was the reason the wound broke down, which in turn resulted in the infection.

These issues culminated in Mr B questioning the competence of the practice to perform the surgery.

MR B'S DESIRED OUTCOME:

- £800 to buy a new dog and the cost of his lost dog reimbursed;
- A full explanation of why his dog had died perhaps the operation was not carried out correctly;
- A change in protocol regarding:
 - » Advising the client of the need for transportation;
 - » Assistance for owners to get their animals into their vehicle;
 - » Possible full negligence claim and referral to RCVS.

WHY MEDIATION WORKED WELL:

The Resolution Manager did consult with a VCMS vet advisor in this mediation to inform the approach and direction of mediation discussions.

The practice explained they did understand why Mr B felt that his dog jumping up into the car was the reason for the wound breakdown. The practice went on to explain in detail why this was highly unlikely to have been the reason. A full explanation of the suturing method provided a visual explanation.

Having conveyed this to Mr B, he appreciated the risk was small and may not have been a factor. He was still adamant that given the risk, the practice should provide another way of getting the dog into the truck.

Mediation explored the process and key elements of a civil claim for negligence, and also the serious professional conduct remit of the RCVS. Mr B concluded that neither pathway was appropriate in his circumstances.

Mr B had a number of practical solutions which he felt should be considered by the practice including: the purchase of a stretcher, and pre-operative information on recovery and after-care provided to owners.

The practice agreed that the stretcher would be a good addition to their equipment and that they would make it clear to clients what will happen when overnight care is required.

Mr B accepted these actions as a resolution to his complaint. During the mediation, Mr B was able to share his passion for his particular breed of dogs, and felt that other animal owners would benefit from the new protocols and equipment, which was more important than a financial resolution.

Paws for Thought

This is a good example of the positive power of complaints and Quality Improvement.



Standing in the owner's shoes is key - would they expect post-operative care to be provided by the practice? Would they expect to have to transport their animal? What can be done to support them in transporting their animal, as many owners would find this distressing.

COVID-19: Managing Expectations, Communication and Complaint Handling (7771)

CLIENT'S ISSUES:

During an appointment for her horse's vaccinations, Ms B was unhappy with the level of communication and concerned that a member of the practice team was not following COVID-secure procedures.

Ms B was unable to be present for the administering of the vaccinations due to COVID restrictions in place. She felt there was no open channel of communication between the vet and herself. Ms B was worried as the horse had a history of allergies and that she had not been given opportunity to discuss.

Once Ms B raised these concerns, her issue escalated to include the handling of the complaint, as she felt dismissed by the practice, and in her eyes, the potential seriousness of her concerns were being ignored.

MS B'S DESIRED OUTCOME:

- Acknowledgement of concerns including complaint handling;
- Waiving of outstanding bill.

WHY MEDIATION WORKED WELL:

Having explored the owner's concerns, the Resolution Manager began the mediation by discussing the practice's position from an impartial position.

The practice explained that while they had acknowledged the shortfalls in service due to the restrictions and procedures in place, and had addressed these accordingly for future clients, they felt strongly that trust had been lost between them and the owner. The practice felt that any financial goodwill gesture would not help to restore this.

Mediation explored the options available to help bring this matter to a close - to which the practice suggested if they accepted the request to waive the bill, they would no longer offer their services to Ms B, due to the loss of trust in the relationship.

Ms B was initially upset by this added proviso to the proposal; however, the Resolution Manager discussed this further, and the client acknowledged that they would most probably have not re-attended out of choice, following this experience anyway.

Ms B accepted this offer as a resolution to her complaint. Ideally, mediation would seek to repair and rebuild the relationship between client and practice, but this is not always the case. During the mediation, Ms B was able to share her feedback and also begin to listen to the reassurance being offered by the practice. This allowed both parties to reach a resolution and conclude matters in a much more amicable way.

Paws for Thought

This is a good example of the positive power of complaints and Quality Improvement.

Acknowledging the points being raised by the client and leading with reflections and learnings/ level of candour can have a positive impact and help to resolve complaints even if the conclusion does involve the end of a relationship. As in this complaint, the practice was anxious to avoid any social media 'blasts' or continued 'bad press', if left unresolved/addressed.