

Veterinary Client Mediation Service

**Supporting Relationships Between
Vet Practices and Animal Owners**

Insight Report 2022-23





Contents

Introduction	3
Executive Summary	4
Insight and Highlighted Trends	18
Appendices	30





"During 2023, the VCMS saw activity remain steady, but showing an increase in enquiries in the later quarter of the year".

As we reflect on the activity and events of 2023, it is apparent that the uncertainties faced in the early 2020's continued. The pressures on household finances extended into 2023. Societal goodwill and expectations continued to be influenced by the consequential impact of the pandemic and world events. In human healthcare, we have seen severe challenges in the NHS in terms of delivery and capacity. In consumer relations, many sectors have reported increased expectations and consumer focus on value for money.

During 2023, the VCMS saw activity remain steady, but showing an increase in enquiries in the later quarter of the year. Qualitative and quantitative insight suggests that the trends reported in other sectors, have also been increasingly prevalent in veterinary complaints.

Resolutions were reached in 84% of the complaints mediated. With an increased focus on value for money, and desire for a financial outcome, while the VCMS saw an increase in financial resolutions (from 52% to 57%), a significant proportion were resolved through communication, explanations, apologies and quality improvement.

We explore these trends in more detail in this annual report for 2023, informed by the work undertaken by the VCMS to support local resolution, and then in mediating the escalated complaints referred to the VCMS.



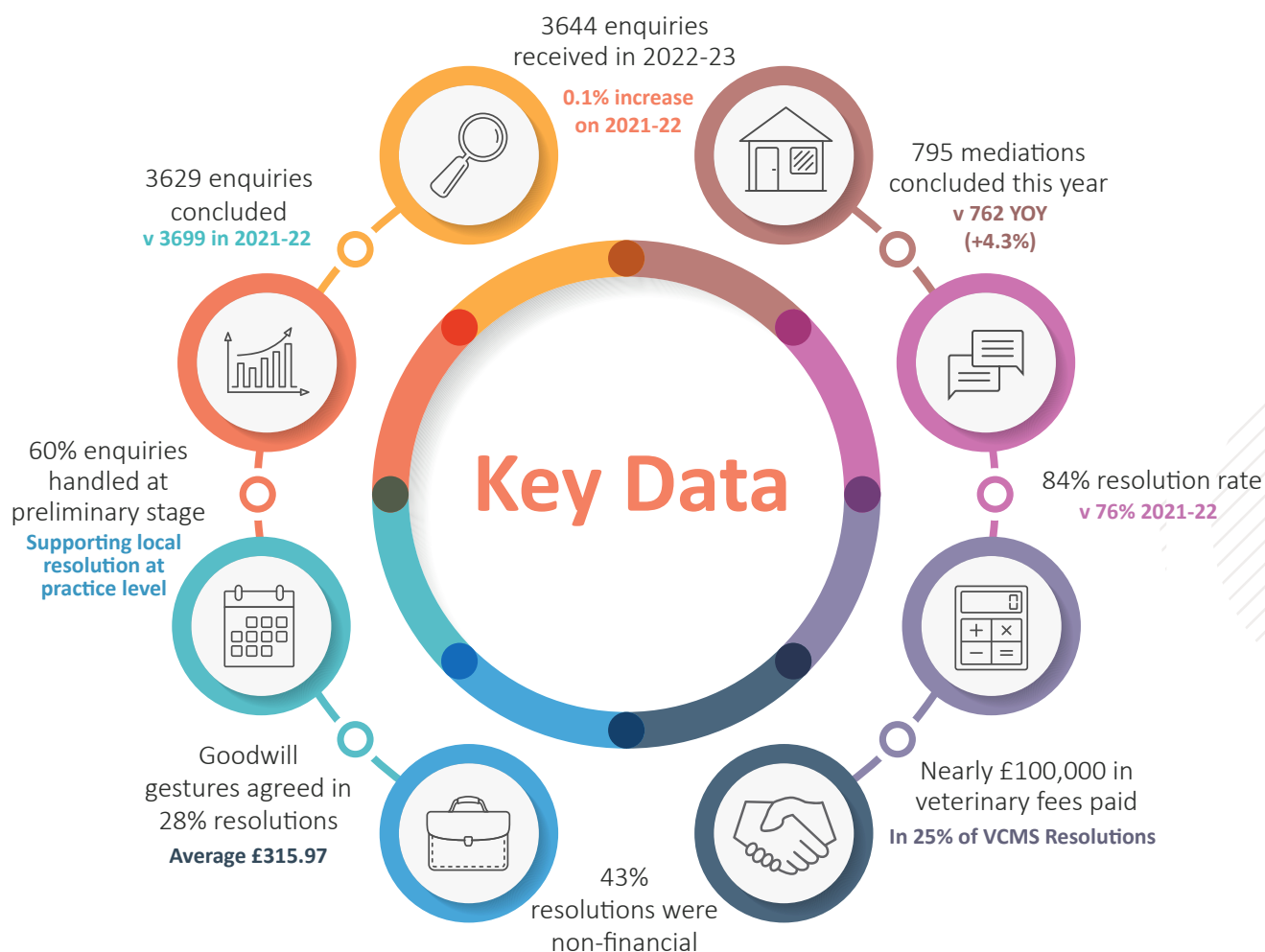
Jennie Jones

Head of Veterinary Client Mediation Service

Tel: 0345 040 5834

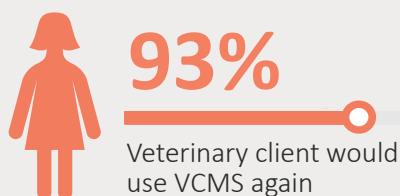
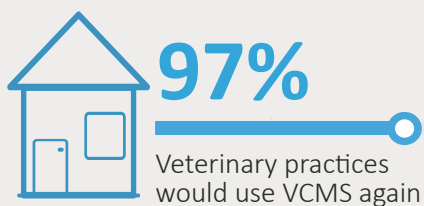
Email: jenniejones@vetmediation.co.uk

Executive Summary



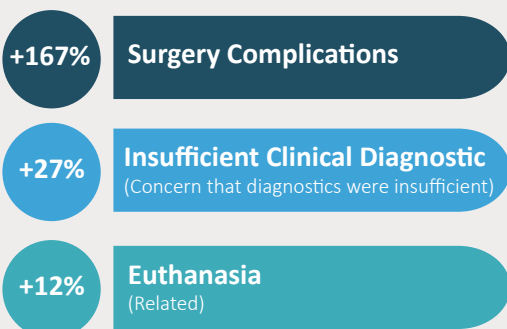
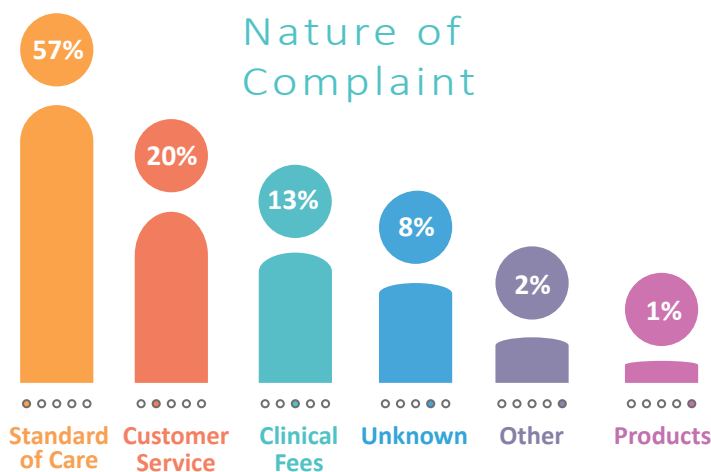
Executive Summary

Confidence in the VCMS



Nature of Complaint

Complaints relating to the standard of care increased as a proportion of the complaints referred to the VCMS.



Complaints relating solely to fees and charges did increase in 2023. The more common fee related issues were around **clarity, being kept up to date on charges** and **cost benefit analysis** on treatment options.

17.1 days

Average
15.9 days 2021-22

39.6 days

Mediated
29.3 days 2021-22

80%

Concluded within 60 days
88% in 2021-22

12.5%

Concluded in 61-90 days
7% in 2021-22

7.5%

required more than 91 days
5% in 2021-22

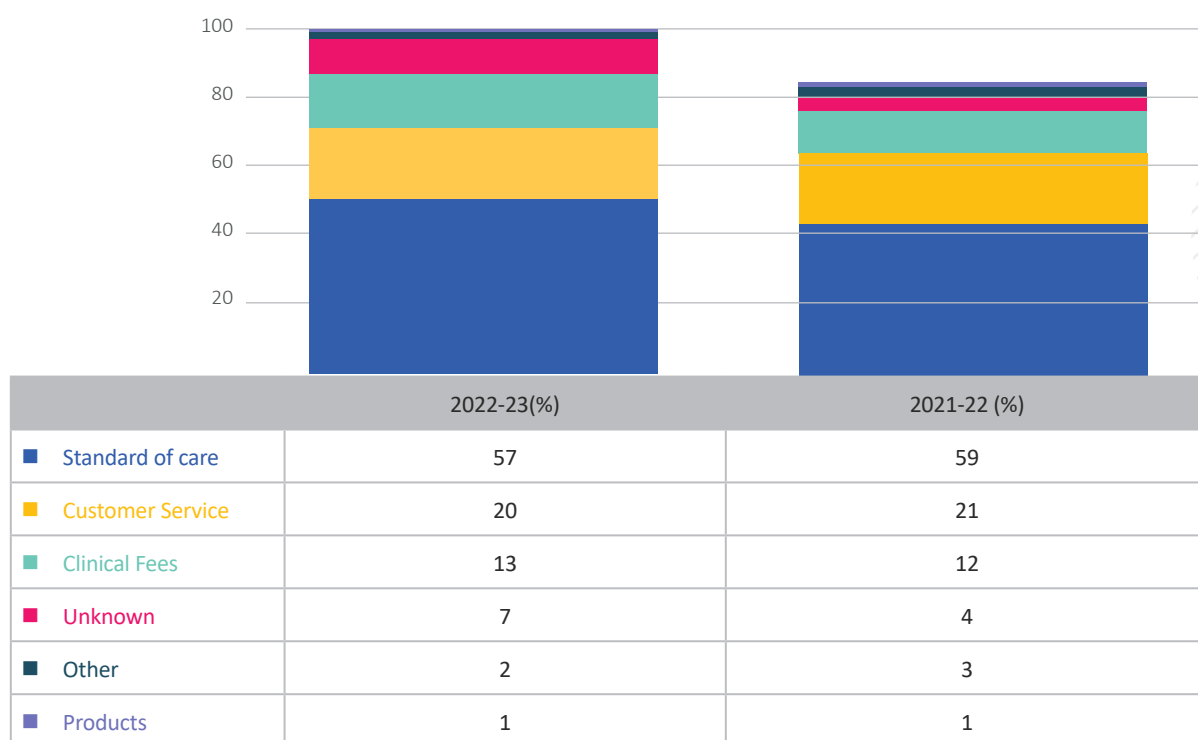
Timescales for Resolution

Insight and Highlighted Trends

Complaint Insight

From the complaints received, the VCMS analyses the trends emerging that help to inform our insight sharing. Fig. 8 details the nature of complaints, and shows 2022-23 activity is consistent with previous years.

Fig. 8: Nature of Complaint (2021-22 - 2022-23)



5 most common complaint circumstances received by VCMS (% = 2021-22)

1. Client believes the practice did not undertake sufficient diagnostic tests +27%
2. Unexpected Outcome -5%
3. Consent - Service and Communication +12%
4. Client believes the practice made an incorrect diagnosis -10%
5. Client considers the fees charged to be excessive +55%

Full data tables are provided at Appendix 2.

Trends in 2022-23

Complaints Involving Client Concerns About the Standard of Care Provided (-3% YOY)

While the number of complaints relating to standards of care have reduced slightly, the VCMS saw an increase in the following complaint circumstances:

- » Surgery complication: +167% YOY (54 to 144)
- » Insufficient pathway: +27% YOY (387 to 493)
- » Euthanasia: +12% YOY (52 to 58)

While complaints relating to unexpected outcomes remain one of the most common issues escalating to the VCMS, the number of complaints received in this category during 2022-23 reduced in numerical terms by 5%



VCMS Complaint Case Study 1

Complaint concerned end of life care for German Shepherd out of hours on a Sunday morning. The animal owner complained that they were kept waiting in the car park as the entrance was locked, and then the team had an issue with the practice computer. The animal owner felt the practice team were unprofessional – as they were laughing at the computer issue and when trying to find a chair for the client to sit down as they held the dog. The vet took the dog to an area out the back of the consult room to fit the canula. The owner was upset by this as they wanted to remain with their dog, but was told there was no alternative option. There was an issue around sedation and the owner felt that had she been present, the dog would not have needed the sedation. Vet carried the dog out and then returned her when the canula was fitted. The dog was then euthanised. The animal owner felt that their dog deserved a more respectful passing.

Through the mediation, the animal owner shared how distressed she was by the experience, particularly as her dog seemed panicked when taken for the canula to be fitted. Based on, previous experience, she felt that the cannula was unnecessary. Overall she felt the practice had not been compassionate or respectful, and this had made a distressing situation far worse. The owner did not want to leave the practice as she had 2 other dogs that attended the practice.

The practice reflected on the feedback and acknowledged that the communication on that day had not been as they would intend it to be. The practice reassured the animal owner that they would spend time as a team taking on board her feedback, clarity of explanations – why something has to be done a certain way, and understanding the unintended impact of comments and interactions. It was also recognised by the animal owner that the team had not intended to be disrespectful but were trying to bring the ease and relax the situation. The animal owner appreciated this and accepted a goodwill charity donation of £25 as a resolution.

Concerns around complaint handling and empathy have reduced in real terms which is encouraging, when considering concerns about a lack of empathy, quantitative insight suggests concerns that may have been raised in these areas are more overtly raised as cost related concerns in 2022-23.

Complaints Related to Fees (+7% YOY)

Complaints where the client considered the fees to be excessive (without substantive clinical or services issues being raised) increased from 129 in 2021-22 to 200 in 2023.

Complaints relating to invoices errors increased by 64%.

The increase in complaints relating to fee issues, is in the context of fewer complaints regarding insurance related issues being escalated to the VCMS.

Insight Focus: Cost Related Complaints and Concerns

2022-23 saw UK household finances coming under greater pressure. There has also been increased media interest in the relationship between veterinary practices and animal owners, with a focus on fees and affordability. As such, this year's report considers the impact of those pressures on the veterinary client/practice relationship.

Appendix 2(b) contains analysis of cost related complaint data since 2017.

- » Number of complaints solely linked to pricing or payment terms remains low. Complaints of this nature account for 13% of VCMS activity.
- » This proportion has increased from 9% in 2020-21 and 12% in 2021-22.
- » Complaints are rarely about costs alone. Qualitative insight indicates that client concerns about fees and charges are often multi-faceted. Complaints which raise concerns about standards of care and service or communication issues, may include elements relating to fees and expectations. These issues include:
 - » Clients did not expect the overall total;
 - » Clients not satisfied that the diagnostic or treatment pathways were appropriate – and therefore the fees should not have been incurred;
 - » Clients did not understand why certain tests or treatment plans were undertaken;
 - » Clients complaining that they were not informed of the charges in advance;
 - » They did not feel estimates were fully explained or updated.



VCMS Complaint Case Study 2

A cat was involved in a road traffic collision and sustained serious injuries. The practice provided an estimate of £5,500 for diagnostic scans to assess prognosis, and if prognosis supported, surgery. Client spent 10 minutes with the veterinary surgeon.

Following tests, the veterinary surgeon telephoned the client and explained the prognosis was worse than initially suspected and given poor quality of life if survived, it was advisable to consider euthanasia. The client agreed. The client then received an invoice for £4,000 and disputed the fees stating as he expected the invoice to be £2,000 maximum. The client had apportioned the total estimate equally across the diagnostics and potential treatment plan.

Mediation insight – client's perspective was focused on the time spent in the consult room with the veterinary surgeon and didn't take into account the overall veterinary surgeon input. The client also felt the prognosis was not significantly different to that known prior to the scan. During the consult, the client had stated they could not afford more than the insurance limit (£3,500). Client was therefore shocked when diagnostics came to £4,000.

VCMS Mediation explored the basis of the client's perspective. In explaining, the Veterinary Surgeon had examined the cat in the presence of the client. He had also performed wider diagnostic examinations as well as the scan, and then interpreted the scan as well as taking into account the input of the wider Veterinary team. This included an ophthalmic opinion and further orthopaedic expertise.

The practice acknowledged the global estimate had not allowed the client to appreciate the charges included in the diagnostic phase. The team also recognised that the client had indicated their financial constraints, but also felt the client had been adamant they wanted to take all possible steps to save the cat, given other recent family bereavements and personal issues. The practice had therefore followed the client's instructions to "do all you can". The complaint was resolved with a goodwill discount to reflect the practice's acknowledgement that a clearer estimate may have helped the client to make a more informed decision. The client agreed a payment plan for the balance of the fees in order to bring matters to a close.

Referral or Out of Hours Fees and Charges

- » The need to access care and incur the respective fees. These complaints can be complex where a practice considers the client did not attend the practice promptly, or where a client feels the practice did not act promptly or in an appropriate time frame which means their animal is being transferred over to the OOH provider.

Misunderstanding About Insurance

- » Less cover than expected.
- » Claim is unexpectedly declined.
- » "Gaps" in cover where animal owners change insurers.
- » 'Client concerned they have only been given the 'Gold standard' diagnostic and treatment pathways and not the wider options were not considered which may have been more suitable for the client.

There continues to be a disconnect in understanding regarding the insurance relationship. The question is the pet insured?' identifies whether a policy is in place, but does not confirm the cover available and whether the insurer will accept the claim. Some veterinary clients expect or assume the veterinary practice should have full knowledge of their policy and are responsible for the terms and decisions of the insurer. There is not always a clear understanding on the part of clients, that the insurance policy is a contract between the insurer and the client. There are also significant variations in policy terms and cover, and this is not always appreciated or understood by clients, who only view their own policies.

In recent years, fewer practices offer direct claim options and so fees have to be settled by clients and then recovered from the insurer. Where a claim is unexpectedly declined, this can be an underlying factor in client's querying or challenging the fees paid or outstanding. Where practices help clients to appreciate the importance of understanding the details and nuances of their own policies, and check cover levels in advance, clients are able to make more informed decisions, which also helps to avoid conflict and frustrations down the line, benefiting both clients and practice teams.

Entitlement – perspective

During the last year, the VCMS has seen higher incidences of complaints where the client indicates they are 'Happy with the care, but unhappy I have to pay for this' particularly where household incomes are stretched. We have also seen animal owners expressing frustration that there is no NHS for animals and practices should have to provide care.

VCMS mediations seek to de-escalate situations where clients feel guilty that they have not been able to afford particular treatment plans and feel resentful, which may be directed at the practice. Strong client/practice relationships rely on open communication where both parties work together to help the client make the best decision for the animal **and** client.

Affordability pressures can encourage scenarios where practices seek to adjust charges and policies: 'being too kind'. This can involve not charging at commercial rates, trying to save the client money, or not charging for all items. Where this assistance is not transparent on invoices/statements, it is impossible for clients to be aware of this, and it can be a shock for them when a practice reaches their limit and draws a line. Clients may be unaware of the concessions made by the practice, and then doubt the care/treatment was provided if the practice then seeks to bring this to the client's attention. This can undermine the trust between the practice and the client.



VCMS Complaint Case Study 3

A practice performed an ultrasound scan free of charge, as the client had limited funds. Within the complaint, the client disputed the scan was done as this was not officially recorded as DICOM. This created a highly emotive complaint situation as the client disputed care and fees, whilst the practice felt strongly that they had tried to help both the animal and owner.

Mediation helped both parties to appreciate the other's perspective i.e to explore how the practice could reassure the client that the scan had been performed and for the practice to understand why the client came to that conclusion. The complaint was resolved with an explanation and reassurance.

For some clients, the affordability of veterinary fees, may not have been a consideration. Where circumstances change or different insurance policies purchased, this can leave clients in a very different and frustrating position.

As an illustration, VCMS mediations seek to resolve complaints where treatment costs are disputed and it transpires the client is not able to afford the treatment costs incurred (particularly where fees have exceeded an estimate or insurance limits).

An additional element in the complaint can be the outstanding fees for an individual cremation and casket. For some clients, they feel this is expected of them and demonstrates the love they felt for their pet. On occasions practices are unable to recover the outstanding fees which includes the third- party cremation fees.

There is an art as well as science involved in achieving the right balance in cost conversations. Clients need clarity and information so they are able to ask questions and make informed decisions. Good and effective conversations incorporate empathy, allow clients to make decisions that are best for the animal and their family overall, with compassion and open dialogue. These conversations are easier when information on fees and estimates is given in advance, and allows clients to reflect and make informed decisions.



Insight Focus - Engagement and Expectations

Consent Conversations

The most effective discussions combine the clinical options with the cost information and prognosis to enable clients to make an informed decision which is appropriate for their particular circumstances.

When these conversations take place, it can reduce guilt on animal owners, aiding improved decision making and engagement in the decision made. Allowing owners the space to reflect on a 'money no object', 'do what you need to do' position to one that considers the wider picture.

Enabling practices to develop confident and compassionate communication skills that mean they can approach the delivery of veterinary care as a business (and all the commercial realities this entails) whilst still offering empathetic and animal centred care. This is also aided by supporting veterinary professionals



to be more confident about their value/worth so they are more able to have effective discussions about cost affordability and risk/benefits.


The satisfaction with the outcome of an interaction between an animal owner and a veterinary practice can vary as a consequence of many factors:

- » The response to treatment
- » Experiences which exacerbate or reduce distress at end of life
- » Expectation around outcomes
- » Personal connection between animal owner and members of the practice team.
- » Engagement with the decisions made
- » Feeling heard and knowledge/experience of the animal owner being recognised
- » Other external factors such as being a carer or a relative being ill
- » Previous experience at that practice or another veterinary practice

Research and insight suggests that engagement and collaborative decision making improve satisfaction levels and how an animal owner views value for money and confidence in the veterinary professionals involved.

Factors which are relevant to creating this collaboration and mutual engagement can be linked to the Self Determination Theory (ARC):

- » **Autonomy:** Providing options and choices, to enable animal owners to make decisions
- » **Competence:** Information to make informed decisions, with input, knowledge and expertise of veterinary professionals
- » **Relatedness:** Applying the information to this particular situation (this animal, in this family at this time).



This holistic and engaged decision making process, recognises that the animal owner is the expert on their animal and their day to day care (i.e. the vet is not the only expert in the room), animal owners feel they make better decisions and are more confident in those decisions, irrespective of the outcome. Collaborative and open conversations around options, prognosis and costs support better decisions for the owner and their pet moving forward.

Appendices

Appendix 1: Nature of Complaint
Appendix 2: Sub-Categories
Appendix 3: Outcomes
Appendix 4: Client EDI Data
Appendix 5: Feedback

Appendix 1: Nature of Complaint

Nature of Complaint

Nature of Complaint	2022-23	2021 - 22
Clinical Fees	474	441
COVID-19	1	18
Customer Service	726	747
Other	76	100
Products	27	35
Standard of care	2064	2119
Unknown	276	144
Grand Total	3644	3604

Nature of Complaint (%)

Nature of Complaint	2022-23	2021 - 22
Clinical Fees	13	12
COVID-19	0	0
Customer Service	20	21
Other	2	3
Products	1	1
Standard of care	57	59
Unknown	8	4
Grand Total	100	100

Appendix 2: Sub-Categories

2a: Complaint Sub Category

Complaint Sub Category As presented by client at outset	2022-23	2021-22	2020-21	YoY Comparison (%)
Clinical fees	474	441	348	+7
Charging/invoice error	131	80	46	+64
Estimate - exceeded	44	69	36	-36
Fee - excessive	200	129	137	+55
Insurance claim related	42	67	49	-37
Insurance cover issue	28	43	29	-35
Medication charge	12	22	35	-45
Pet Healthcare Plan issue ¹	5	-	-	-
Prescription charge	4	18	10	-78
Unknown	8	13	6	-38
COVID-19	1	18	31	-
Poor Communication / Lack of Empathy	1	17	-	-94
Customer service	726	747	916	-3
Complaint handling	53	94	88	-57
Consent - service/communication	287	253	430	+3
Disregarded others views or feelings	58	95	95	+27
End of life - client care	56	58	58	-2
Failed to update	100	54	54	+85
Lack of empathy	48	91	91	-32
Records issue	96	89	89	+13
Unhappy with attitude of Reception staff ¹	4	-	-	-
Unhappy with attitude of Veterinary staff ¹	13	-	-	-
Unknown	11	29	11	-62
Other	76	100	87	-24
Unknown	76	100	-	-24
Products	27	35	26	-23
Allergic Reaction	2	8	-	-78

Non Veterinary Product	3	1	-	+200
Product Not Working as Expected	19	23	-	-17
Unknown	3	3		
Standard of care	2064	2119	2535	-3
Consent - uninformed /risk not covered	10	23	126	-57
Delay in diagnosing	179	173	236	+3
Diagnostic pathway - insufficient	493	387	464	+27
Diagnostic pathway - too extensive	54	54	67	-
Disagree with treatment plan	3	-	-	-
Discharge	6	18	47	-67
Elective surgery complication	86	87	95	-1
Euthanasia	58	52	55	+12
Failed to explain options	71	98	101	-28
Medication overdose ¹	5	-	-	-
Out of hours	34	30	37	+13
Pre-purchase examination ¹	2	-	-	-
Recovery - complication	107	194	169	-45
Surgery - complication	144	54	91	+167
Unexpected outcome - dental	56	63	59	-11
Unexpected outcome - other	471	497	545	-5
Unknown	35	112	73	-69
Wrong diagnosis	250	277	370	-10
Unknown	276	144	20	+92
Unknown	276	144	-	+92
Total	3,644	3604	-	101

¹ Category introduced in 2022-23

2b: Fee Related Complaint Data

	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18
Clinical fees	474	441	348	341	320	194
As a % of all complaints	13%	12%	9%	10%	13%	10%
Issue with Invoice (e.g. Error)	131	80	46	38	19	-
Estimate Exceeded	44	69	36	59	53	-
Fee Considered to be Excessive	200	129	137	120	105	-
Insurance Claim Related Issue	42	67	49	49	69	-
Insurance Cover Issue	28	43	29	36	10	-
Medication Charge	12	22	35	29	52	-
Prescription charge	4	18	10	9	12	-
Other	1	13	6	1	8	-
Pet Healthcare Plan ²	5	-	-	-	-	-

² Category introduced in 2022-23

Appendix 3: Outcomes

	2022-23	2021-22	All (%)	Closed (in remit) (%)	Engagement (%)	Mediated (%)
Phase A						
Out of remit (referred to practice)	88	98	2%	-	-	-
Preliminary mediation (advice only)	1780	1926	49%	50%	-	-
Preliminary mediation	369	418	10%	10.5%		
Phase B						
Client not to proceed with mediation	271	259	7%	8%	19%	
Practice declined to engage	326	282	9%	9%	23%	
Phase C						
Resolved on mediation	668	540	18%	19%	47%	84%
Mediation concluded without resolution	49	98	1%	1.5%	3%	6%
Mediation concluded as required formal claim process	78	77	2%	2%	6%	10%
Grand Total	3629	3699	-	3541	1415	795
In mediation as at 31.10.2023				23%	2%	

Out of Remit (YOY)

Reason	2022-23	2021 - 22
Referral to RCVS	7	13
Complaint circumstances over 12 months old	14	8
Commercial animal/relationship with practice	12	8
Complainant is not the animal owner or appointed representative	11	14
Outside UK	17	22
Previous use of ADR trial or VCMS	4	0
Other	23	34
Grand Total	88	99

Phase B & C Engagement (2021-22 - 2022-23)

Phase B & C	2022-23	2021 - 22
Practice declined to engage	326	282
Complaint concluded through mediation	668	540
Mediation concluded without resolution	49	98
Mediation concluded as requires formal claim process	78	77
In mediation	23	46
Invited to mediate	1144	1043
Practice accepted invitation in 2022-23	818	762
Practice engagement in 2022-23	72%	73%

Mediation Outcomes (%)

Mediation Outcomes	%
Complaint concluded through mediation	84
Mediation concluded without resolution	6
Mediation concluded as required foemal claim process	10
Grand Total	100

Outcome by Business Type (%)

Outcome 2022-23	Independent Practices (%)	Major Employer Practices (%)
Phase A - Preliminary Local Resolution Support		
Out of remit	2	2
Supporting local resolution at practice level - preliminary mediation and advice	53	55
Phase B - Engagement		
Client not to proceed with mediation	8	9
Practice declined to engage	12	10
Phase C - Mediation		
Complaint concluded through mediation	20	21
Mediation concluded as requires formal claim process	4	2
Mediation concluded without resolution	2	2
Grand Total	100	100

Outcome by Nature of Complaint (%)

Outcome by Nature of Complaint	Standard of Care (%)	Customer Service (%)	Clinical Fees (%)	Unknown (%)	Other (%)	Products (%)	COVID-19 (%)
Out of remit	1	2	2	10	12	12	0
Supporting local resolution - preliminary mediation	54	63	63	79	84	65	100
Client not to proceed with mediation	8	8	6	6	1	0	0
Practice declined to engage	11	9	9	3	0	0	0
Concluded on mediation	21	16	18	1	3	19	0
Mediation concluded as requires formal claim process	3	1	1	1	0	4	0
Mediation concluded without resolution	1	1	2	0	0	0	0
Grand Total	100	100	100	100	100	100	100

Resolution Data 2019-2023 (Financial and Non-Financial)

	Resolution Rate (%)	Financial/ Non-Financial Resolutions (%)	GWG / Discounts (£)	Fees Paid by Clients (£)
2022-23	84	43/57	£315.97/432.29	£817.99
2021-22	76	48/52	£558.05 / 510.80	£1007.38
2020-21	71	50/50	£328.38 / 510.80	£748.87
2019-20	77	46/54	£296.97/ ***	£571.45
2018-19	-	44/56	£327.71/ ***	£694.27

***Data not collated at this time.

Appendix 4: Client EDI Data

Age (%)

Age	Count of Age Range (%)
16-24	7.53
25-34	24.08
35-44	21.30
45-54	24.46
55-64	16.58
65 Or over	6.05
Grand Total	100

Gender (%)

Gender	Count of Gender (%)
Female	73.20
Male	26.80
Grand Total	100

Disability (%)

Disability	Count of Disability (%)
No	86.43
Yes	13.57
Grand Total	100

Ethnicity (%)

Ethnicity	Count of Ethnicity (%)
Asian	2.05
Black	0.40
Mixed	2.12
Other	1.85
White	93.59
Grand Total	100

Sexuality (%)

Sexual Orientation	Count of Sexual Orientation (%)
Bisexual	1.21
Gay	3.86
Heterosexual	92.58
Other	2.53
Grand Total	100

Religion (%)

	Religion (%)
Buddhist	0.69
Christian	47.62
Hindu	0.61
Jewish	0.54
Muslim	0.81
None	40.01
Other	4.07
Prefer not to say	5.34
Sikh	0.31
Grand Total	100

Appendix 5: Feedback

	2021-22		2022-23	
	Client feedback	Practice feedback	Client feedback	Practice feedback
Response rate %	80%	30%	83%	45%
/10				
How well did we understand your concerns	9.8	9.6	9.5	9.8
How satisfied were you with the outcome	8.3	9.6	7.6	9.1
How satisfied were you with the process	9.8	9.3	9.3	9.4
Easy to contact VCMS	10	9.6	9.7	9.7
%				
Would recommend VCMS to others	98%	96%	91%	95%
Would use VCMS again	98%	96%	93%	97%
Would use ADR again	100%	96%	93%	96%
Consider VCMS to be:				
Fair	71%	86%	74%	87%
Helpful & efficient	98%	98%	93%	98%
Productive	96%	96%	87%	92%