

# Rolling out the Friends and Family Test

*Dr Neil Bacon provides a ten-step checklist for the new requirement to gather patient feedback*

From this month,[ December 2014] GP practices across England are introducing the Friends and Family Test (FFT) in order to meet their contractual requirements.

The test requires that patients seen in your practice are asked a simple question: 'How likely are you to recommend the practice to your friends and family if they needed similar care or treatment?' Patients can answer with one of six options, from 'extremely likely' to 'extremely unlikely'.

Practices must ask the FFT question, and add a question of their choice that gives a free-text box in which patients can comment. Hospitals have already introduced the test and all other NHS-funded services are required to roll it out by April 2015. Whether your practice has already begun the work or not, this feature acts as a checklist of tasks we would recommend every practice undertakes to meet the requirements of the scheme, and get a few business benefits from fulfilling the obligation while you are at it.

## **1 Make sure you understand what is needed to meet all the requirements**

Detailed guidance is published by NHS England about the collection methods, how the results must be reported back to NHS England and how they will be published. Your CCG or LMC may also host webinars or meetings to help.

As well asking the FFT question and one follow-up question (of your choice), NHS England also states practices must:

- Use the standard wording of the FFT question (see above) and report the responses exactly.
- Submit data to NHS England monthly.

- Publish results locally, but keep feedback anonymous (unless it is inappropriate to do so).
- Inform patients of the opportunity to do the FFT.
- Make it possible for patients to give FFT feedback after each experience.
- Help patients give feedback through a third party, such as a carer or interpreter, if they are unable to do so unaided.

NHS England also recommends collecting demographic data at the same time to ensure the results are representative. But it does not set a minimum response rate.

## **2 Write your own second question**

NHS England says the FFT question must be followed by at least one question giving patients the opportunity to provide free text feedback. Practices can decide on this themselves, but NHS England suggests gathering information on local issues or following up comments made in previous surveys.

The following phrase, suggested by the company I run, meets the guidance and has been used in practices that have already put systems in place: 'Please help others get great care by sharing your views and experience. The more detail you can add the better. Say what is good about our service and what you like. Please make constructive suggestions on how the service could improve.'

Alternatively you can opt for the more succinct version previously used in hospitals: 'What was good about your care, and what could be improved?'

You do not need to submit the responses to this question to NHS England.

## **3 Don't focus on the most vocal patients**

It is a recommendation (but not a requirement) that the FFT captures a range of views, including those of children, blind or deaf people, people with learning disabilities or dementia, and people

with little or no English. Ensure whichever system you put in place enables all patients to provide feedback, regardless of their language, learning ability or age.

An SMS or paper form alone will not meet the recommended levels of engagement, because these are usually available only in English and so will not be sufficient for some patient groups. Also, the additional demographic questions recommended to ensure practices have approached a representative selection of patients could not be included without potentially sending several messages per review.

Feedback methods must be inclusive and accessible. This requires multiple languages to be available, as well as easy-read versions and an option for patients with visual impairment.

The general guidance published last July advocates using interpreters, professional translation, pictures or online applications. My company uses the Google Translate widget on its website, which is a simple way to translate the forms.

#### **4 Reflect the diversity of your list**

As the guidance states: 'Although this is not obligatory, practices may wish to ask demographic questions to collect equality and diversity information for their own internal analysis that ensures they are getting feedback from a reasonable spread of their local population, and to enable comparisons between the experiences of different groups.'

For example, you may choose to do this according to age, gender, ethnicity and long-term conditions. They can be included in a simple format such as a report for internal use where staff can see at a glance how many reviews they've had, the average scores compared with previous months and the numbers of male versus female respondents. There is no recommendation on how to do this

## **5 Check that your data are in the required format to submit**

Answers to the FFT question have to be tabulated in a specified format. This should then be uploaded according to the timetable specified by NHS England, with the free text reviews stripped out. Each month, GPs must report how many responses patients gave for each answer to the first question, plus the number of responses given via each method.

NHS England has not yet specified the format, but it is likely to be an Excel template. Results should be submitted via CQRS and details on how to submit data are expected this month, with GPs' first reports due in January. Data from the first complete month of December can be submitted up to 10 days after the end of the month so reports won't be published until after this deadline.

## **6 Advertise the scheme**

It is an important requirement of the guidance that every patient should have the 'opportunity' to leave feedback using the FFT. But it is up to individual practices how they do this.

Practices should ensure patients are actively made aware of the opportunity to participate. Make sure patients know what the FFT is, why their views are being sought and how their feedback helps improve care. Many patients want to say thank you for the care they receive, while those with complaints or problems typically want to know their concern has been heard and will lead to improvements in care for other patients where necessary. Posters in waiting rooms, URLs on appointment cards and emailed reminders are all good ways to encourage patients to provide feedback, as is a 'call to action' on the home page of the practice website.

## **7 Publish your results locally**

Publishing all FFT patient responses, after redacting identifying remarks about particular patients and staff, is a requirement, and practices are not allowed to filter out or remove the bad ones. The

simplest way to do this is on your practice website. However, if the practice does decide to publish free text comments, individual patients must be able to refuse permission, for example via a tick-box on the form.

All comments must be transcribed and checked to ensure no confidentiality is breached before being shared.

## **8 Discuss results with your PPG if you have one**

NHS England urges practices that participate in the patient participation enhanced service to use the results of the FFT to inform their work with their patient participation group (PPG).

Use the feedback you collect to inform practice and PPG meetings. When done properly the FFT can be much more than a tick-box exercise. It gives insight into the experiences of those you care for. GPs who are already collecting real-time feedback from patients frequently say 'it reminds me why I came into medicine' - it shows them the difference they are making every day to patients' lives.

## **9 Use results elsewhere, such as in your CQC portfolio**

GPs might like to use FFT data, as hospitals have already, to:

- Share patient comments directly with staff and front-line teams as a morale-boosting exercise.
- Identify areas for service improvement.
- Publish data to market the quality of service offered at the practice.
- Highlight specific safety issues in a timely manner and fix them quickly.

Perhaps most pertinently, information and feedback provided by FFT responses can help you meet a fundamental CQC requirement of your practice - showing you are listening to and acting on the feedback and experiences of your patients. By collecting feedback on the care you are providing, you will create a

body of information to analyse, which will improve your performance on, for example, the CQC inspection question: 'Is the practice responsive to people's needs?'

## 10 Consider outsourcing the work

Practices can commission a third-party supplier to carry out the FFT. There are several offering FFT services, but ensure you check they meet the minimum requirements of the guidance.

There is of course a financial saving to be made by doing the work in-house, but outsourcing may prove cost-effective, particularly for smaller practices. Tasks required to meet FFT requirements include collection, transcribing, reporting, publishing and uploading results each month.

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*Declaration of interest: Dr Neil Bacon is founder and CEO of iWantGreatCare, which offers a free-of-charge FFT solution to more than 1,000 GP practices across the UK*