

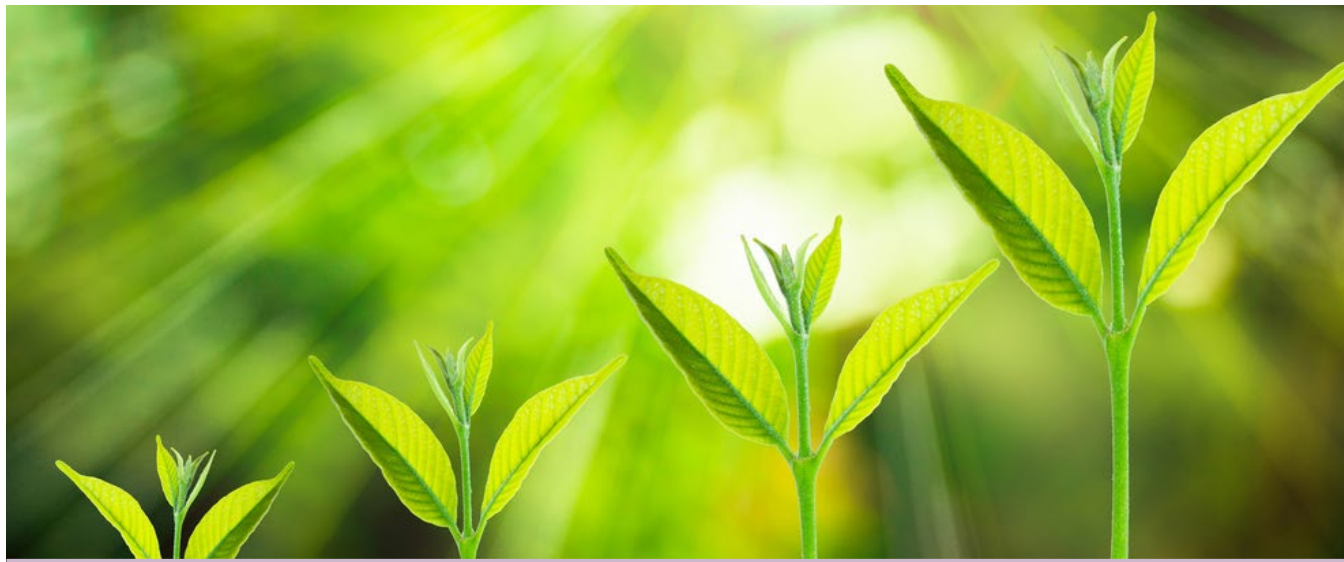
Annual Report

April 2016 - March 2017



Section	Content	Page
1	Introduction	3
2	Executive Summary	5-9
3	Complaints Resolution & Mediation	10-18
	3.1 Enquiries	
	3.2 Activity levels	
	3.3 Source of enquiry	
	3.4 Outcomes	
	(a) Concluded enquiries	
	i) Outside OCCS remit	
	ii) Enquiries mediated by OCCS (Complaints)	
	iii) OCCS complaints	
4	Analysis & Trends	19-39
	4.1 Increased activity	
	4.2 Nature of complaint	
	(a) Customer service	
	(b) Concerns regarding the quality of service or product supplied	
	(c) Costs/charges of others	
	(d) Other	
	4.3 Business Type	
	4.5 Location	
	4.6 Equality & diversity	
	4.7 Process of data capture and evidence	
5	Reporting	40-41
6	How We Work	42-43
	6.1 Mediation process	
	6.2 Timescales	
	6.3 Methods of communication	
7	Clinical Input and Opinion	44
8	General Optical Council	45-46
	8.1 Contract extension	
	8.2 Interaction between OCCS and with GOC Fitness to Practise team	
9	Feedback	47-51
10	Evaluation and Revisions	52-53
11	Stakeholder Engagement	54-55
12	Practitioner and Public Communication	56-58
	12.1 Communication activity	
	12.2 Practitioner communication	
	12.3 Consumer communication	
13	Conclusion	59-60
14	Appendices	61-72

Introduction



1. The purpose of the OCCS is to mediate consumer complaints raised by members of the public/patients and optical professionals or practices regulated by the General Optical Council.
2. The OCCS utilise mediation skills to assist practitioners and consumers to resolve complaints which cannot be satisfactorily concluded within the practice.
3. The service operates Monday to Friday 8am – 6pm. Complaints can be referred to the OCCS via the 0344 800 5071 phone line during service hours or the website and email at any time.
4. Nockolds Solicitors Ltd deliver the service under a 3 year contract, which commenced on 1 April 2014 and was extended for a further 2 years from 1 April 2017.
5. This is the annual report of the OCCS service provision to between 1 April 2016 and 31 March 2017.

Foreword



Nockolds have now been delivering the complaint mediation service at the OCCS for 3 years. April 2014 saw the relaunch of the OCCS and over that period, we have seen an uptake in the use of the service by consumers and practitioner by 124% compared to 2014-15. I am incredibly proud of this, as I know this means the OCCS are assisting more practices and consumers than ever. From speaking to optical consumers and GOC registrants and stakeholders and given the UK sees over 23 million eye examinations across the UK, I remain impressed by the high quality consumer experience provided by optical practices across the UK. The OCCS provide independent mediation where challenges do arise, and importantly the desire by the optical professionals, practices and stakeholders to learn from the insight gained during these mediations, is testament to the commitment of all involved in optics to keep the consumer at the forefront.

The OCCS does see a number of recurring themes in our case load and are keen to share insights and suggestions with practitioners and stakeholders to collaborate and help to improve consumer experience wherever possible. Using the insight gained over the past 3 years, we are now able to share key insights with practitioners through accredited interactive CET workshops with the stated objective of each attendee writing an individual action plan to achieve practical solutions in complaint management and developing ways to develop best practice, minimising these recurrent complaints. In light of the new GOC Practice Standards relating to complaint handling this is proving to be a very popular approach and this year we have delivered over 30 CET sessions to almost 1500 registrants.

As 2017-18 looks to be a period of political uncertainty, we, at the OCCS, will continue to deliver our stable ongoing complaint mediation sharing learnings and supporting the sector to benefit consumers. Some things don't change...



Foreword by Jennie Jones

Head of OCCS

Executive Summary



6. This report provides an overview of Optical Consumer Complaints Service operational activity and a review of the quantitative and qualitative insight gained during 2016-17.
7. For full details of the process and the development of the service since 1 April 2014, refer to the Annual Reports of 2014-15 and 2015-16.

Mediation and Complaints Resolution

8. The OCCS has received 1399 enquiries regarding optical consumer complaints between 1 April 2016 and 31 March 2017. This is a 45% increase on 15-16 activity.
9. 'Enquiries' are all new complaint circumstances received by the OCCS (via telephone calls, emails, letters and new online complaint forms.) These have in the main, been received from consumers but practitioners have contacted the OCCS to seek guidance and to refer particular complaints for mediation.
10. 'Complaints' are those enquiries which relate to consumer issues and where the OCCS become involved.
11. With a national consumer spend of over £3067million in the optical sector, it is clear the number of interactions resulting in an escalated or protracted complain remain incredibly low.
12. In summary:
 - 94% of the enquiries received related to consumer complaints;
 - 48% of concluded enquiries received involved issues at an early stage, where the consumer or practitioner consulted the OCCS for guidance before lodging a complaint with the practice, or had not yet raised the complaint and given the practice an opportunity to resolve the complaint. A further 14% contacted the service for advice. This is a further annual increase on 15-16 activity;
 - 7% of enquiries received were explored with the consumer or practitioner, following which the individual decided no further action was needed. This is down from 10% in the previous year;
 - 98% of consumer enquiries were concluded and successfully mediated by the OCCS;

- 6% related to issues which were not consumer complaints within the remit of the OCCS (e.g. practitioner was not a GOC registrant or clinical negligence seeking compensation);
 - 2% of those non-consumer related enquiries involved concerns which were related to professional conduct which require investigation by the General Optical Council FTP team. The numbers referred are low and referrals are directed to the GOC FtP team where public or patient safety and safeguarding issues are suspected.
- 13.** Independent, objective and swift mediation has enabled the OCCS to successfully conclude 98.7% of consumer complaints. This is consistent with resolution rates achieved in the previous two years. Successful resolution is defined as an outcome where the consumer accepts the complaint is concluded following their interaction with the OCCS. These include those complaints resolved directly with the practice following advice or consultation with the OCCS resolution managers, the consumer takes no further action and mediated resolutions.
- 14.** Complaint circumstances referred to the OCCS have concerned:
- Complaints about the quality of the care service received or the products purchased. The most common circumstances in this category of complaint continue to be: varifocal adjustment and intolerance, concerns regarding the prescription and the eye examination/sight test and difficulties arising where a consumer purchases glasses or lenses from a practice using a prescription from another practice. These account for 53.5% of enquiries (47% relating to the care and product, and 6.5% relating solely to product issues);
 - 33% concern customer service dissatisfaction, with consumer perception of practitioners reluctance to address and resolve their concerns. This is a reduction compared to 15-16;
 - 7% involve fee or cost issues, such as promotional offer terms and conditions or additional unforeseen charges. The increase is largely attributable to refund processes relating to one supplier.
 - The remaining 6% are miscellaneous.
- 15.** The most commonly referred complaints relate to:
- Concerns regarding accuracy of prescription
 - Dispensing of Varifocal/progressive lenses
 - Response to concerns or a complaint raised
 - Prescription dispensed by another practice
 - Laser eye surgery outcomes and complaints

Stakeholder Engagement

- 16.** Stakeholder activity continued to be a priority for the OCCS during 2016-17. The team have attended meetings and events -100% Optical, AIO, Optrafair, Optical Confederation CEO meeting, NOAA meeting and a number of Multiple group CET events. These meetings have enabled the OCCS to consult with stakeholders and share insights from our data. Of particular note is the work we are doing with the FMO relating to raise awareness of the issues around the dispensing of varifocals and how the sector can facilitate improvements. As this area of the market represents 3 of the most likely complaint circumstances to be referred to the OCCS namely: prescription concerns (which are likely to be more problematic where varifocals are purchased), dispensing varifocals and where the prescription from one practice is dispensed by another.
- 17.** The OCCS have continued to develop clear and effective chains of communication with most of the corporate/multiple optical care providers (to include Vision Express, Tesco, Asda, Boots Opticians, Optical Express, Specsavers, Outside Clinic and Scrivens).
- 18.** Which? Citizens Advice Bureau, Trading Standards Institute and optical and vulnerable consumer charities were the current targets for consumer stakeholder engagement. In September 2016, the OCCS participated in a Which? Opticians phone where we fielded around 50 calls relating to a wide range of optical consumer queries.

19. During 2016-17 the OCCS have been keen to share insight with the optical sector via bi monthly articles in Optician Magazine covering areas such as varifocal dispensing through dispute resolution to Contact lens complaint management with consumer organisations to ensure correct guidance is being provided to consumers.

Performance Measures

Satisfaction

20. The OCCS requests feedback from all service users at the conclusion of their complaint. To date, we have achieved a 35% response rate in terms of Complaints mediated by the OCCS.
21. 90% of responders indicated they were entirely satisfied or satisfied with the overall experience of interacting with the OCCS.
22. 84% of responders would recommend the service to others and would be happy to use the OCCS again, should they have cause to do so in the future.
23. OCCS service users are asked to provide a rating out of 10 for the outcome and the process. The average response ratings are:

Average satisfaction with the outcome **7.2/10 (8.1 @ 31.3.16)**

Average satisfaction with the process **8.3/10 (9 @ 31.3.16)**

The average ratings have seen a slight decrease during 2016-17. This feedback was primarily driven by increased volume which put the team under great pressure during the year. Having invested in a new web based CRM and recruited some additional administration support, the OCCS is confident this has been addressed

Resolution

24. The OCCS has attained a consistent 98% resolution rate achieved since 2014-2015. This resolution rate has been achieved through an ongoing focus on swift and efficient communication and deploying appropriate mediation skills to the range of complaints referred to the service. The more complex and lengthy complaints continue to require a team approach to combine appropriate mediation techniques and where necessary, clinical opinion to assist the consumer to understand the situation and the practitioner to appreciate the consumer perspective and the contractual entitlement of both parties involved.

Evaluation of Objectives

25. 2016-17 objectives for the OCCS:

Objective	Summary of Activity	Status
Share insight and analysis from 2015-16;	<ul style="list-style-type: none"> Presented to GOC May Council 2016 meeting Detailed presentation to FtP Director and team Stakeholder presentations Body Corporate feedback meetings Publication of annual review 'Customer Care in Optics: Exceeding expectations 	Achieved
Support the sector following 1 April 2016 during the implementation of the new Practice Standards for individual registrants and students;	<ul style="list-style-type: none"> Inclusion within CET programme Increased practitioner enquiries 	Achieved
Continue to review accessibility to the service for consumers with disabilities and implement any steps needed to ensure they are supported to raise complaints and obtain resolutions;	<ul style="list-style-type: none"> Working Party set up Working party met twice Accessibility plan and safeguarding policy drafted Consulting key stakeholders to develop improved strategies 	On-Going
Continue to engage with stakeholders and the professions;	<ul style="list-style-type: none"> Annual feedback meetings with stakeholders and representative bodies Project with FMO to assist in improved patient experience in varifocal dispensing 	Achieved
Share the insight into consumer complaints gained by the OCCS with the public and optical 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;	<ul style="list-style-type: none"> Certified as GOC approved CET provider Full programme of CET events offered at Local Optical Committees across the country CET provided at key industry events - Optrafair and 100% Optical Presentations at several body corporate conferences 	Achieved
Continue to facilitate the use of OCCS insight and experience to assist practitioners to reduce complaints involving customer communication issues and attitudinal grievances;	Our clinical consultant regularly provides feedback to registrants to improve performance in this regard. This is an area with potential future development for the service.	Achieved
Continue projects and improving consumer contact pathways to increase direct enquiries with the OCCS rather than other organisations such as GOC FTP team and Citizens Advice Bureau;	OCCS team are working increasingly effectively with the FtP team to manage the flow of complaints to the most appropriate channel	Achieved

26. Objectives for the forthcoming OCCS year (2017-18):

Objective
Share insight and analysis from 2016-17;
Supporting the GOC Strategy for Managing Fitness to Practise, by identifying and implementing ongoing plans to assist the FtP team to conclude FtP complaints more quickly and effectively and in the delivery of the milestones to track progress.
Implement plan for improved accessibility for vulnerable consumers to the service for consumers with disabilities, measure impact of the plan and further evaluate to deliver further measured improvements for vulnerable stakeholders by improving EDI response rates;
Continue to engage with stakeholders and the professions;
Continue to engage with stakeholders and the professions;
Supporting the optical sector to review and deliver improvements in varifocal dispensing to enhance the patient experience and reduce the consumer complaints circumstances involving the supply of multi focal lenses;
Share the insight into consumer complaints gained by the OCCS with the public and optical 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;
Continue projects and improving consumer contact pathways to increase direct enquiries with the OCCS rather than other organisations such as GOC FtP team and Citizens Advice Bureau;
Improve feedback response rates to ensure OCCS effectiveness can be quantified and monitored.

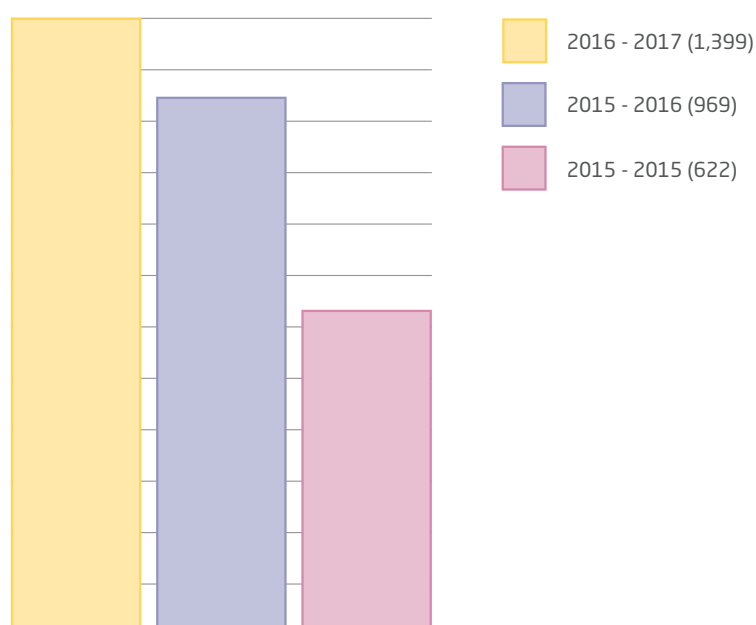
Complaints Resolution and Mediation



3.1. Enquiries

27. Since 1 April 2016, the OCCS has received 1399 enquiries, which is a 45% increase on 2015/16 (969 enquiries).
28. In total, the OCCS under this contractual period has received 2987 enquiries

Fig. A Number of Enquiries Received by OCCS

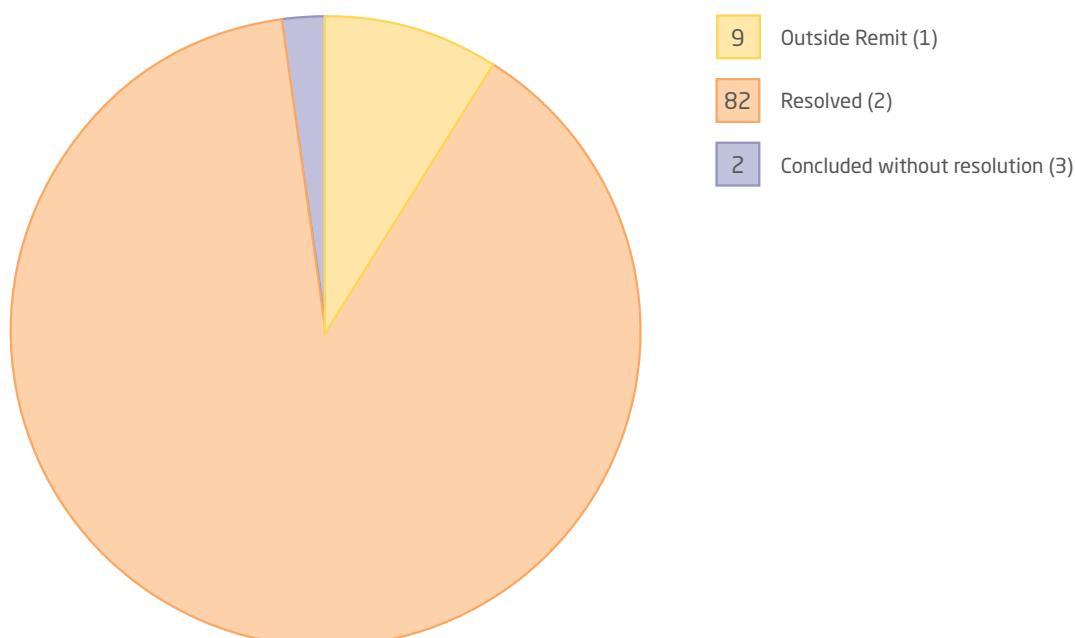


29. Enquiry rates have doubled since 2014-15, however the most significant increase is in preliminary enquiries where the complaint procedure in the practice has not yet been exhausted or concluded. Advice is given and the parties referred back to the complaint procedure of the practice. Utilising the highly experienced OCCS team as a first point of contact enables rapid and effective direction and resolution of these simple complaints.
30. In addition to mediating complaints, the OCCS continues to provide a point of contact for optical patients and practitioners. As such, enquiries have concerned:
- Consumer complaints at an early stage;
 - Complaints where the practice’s complaint procedure has been exhausted and the consumer’s concerns remain unresolved;
 - Consumer queries;
 - Consumer dissatisfaction which has not yet been raised with the practice;
 - Practitioners seeking advice and guidance on how to manage a particular situation or consumer concern.

Enquiries - Total to Date

2989	Total
8.8%	Enquiries concerning non consumer issues
1%	Ongoing consumer complaints
96%	Consumer complaints concluded

Fig. B Concluded Enquiries Received 01.04.14 - 31.03.17 (%)



31. With over 22.5 million sight tests performed in the UK, 4.5 million NHS vouchers to put towards the cost of spectacles or contact lenses and an estimated consumer spend of £3067 million per year, the interactions between optical professional and consumer that lead to a dispute or an unresolved complaint referred to the OCCS are infinitesimal.

For information a summary of the OCCS process is provided at Appendix A.

32. During 2016-17, of the 1399 Enquiries received:

- 94% involved consumer complaints (5% ongoing as at 31 March 2016);
- 6.3% related to non-consumer issues and the consumer was signposted elsewhere. These include:
 - 2.2% (increasing from 1.5% in 2015-16) involving businesses not regulated by the GOC;
 - 2.4% where the patient was seeking compensation, decreasing from 5% in 2015-16;
 - 1.7% where the circumstances of the consumer's complaint related to the practitioner's professional conduct which may require investigation under Fitness to Practice function by GOC.

33. The OCCS continues to signpost consumers to the appropriate forum for their complaint and to help them in assessing the full reason for the complaint and the outcome they seek. This is increasingly important in addressing consumer concerns but avoiding the utilisation of GOC or NHS resources unless necessary or appropriate.

34. Of the Enquiries relating to consumer complaints and concerns, 64% of those involve circumstances where the complaint is at a preliminary stage. This includes:

- Where the consumer had not raised the complaint with the practice;
- Practitioner enquiries
- Where consumers seek guidance or information

35. This is a comparable % to 2015-16, but due to the increase in Enquiries received, this represents a considerable increase in terms of consumers and practitioners assisted by the OCCS at this early stage (827). The OCCS continue to welcome this increase as early communication will often facilitate a resolution whilst preserving the practitioner-consumer relationship

Table 1: Status of all Enquiries received from 1 April 2014 to 31 March 2017

Status	Total 1.4.2014 to 31.3.17	Total 1.4.2016 to 31.3.2017
Enquiries	2989	1399
Consumer complaints		
Preliminary enquiry prior to any complaint raised by consumer	1309 - 43%	638 - 48%
Party contacts OCCS for advice	189 - 6%	191 - 14.5%
Consumer did not pursue (circumstances fall within OCCS criteria but Consumer opts to take no further action or does not return consent form)	266 - 9%	93 - 7%
Of those complaints mediated by OCCS		
Resolved	850 - 29%	297 - 26%
Currently in active mediation	35	35 - 5%
No resolution agreed	54 - 1.8%	19 - 1.2%
Of those resolved following referral to Senior Mediator team (i.e. appeal)	5 - 0.2%	0 - 0%
Circumstances outside remit of the OCCS	267 - 10%	47 - 3.5%
Practitioner not regulated by GOC	50 - 20%	14 - 1%

Circumstances relate to professional conduct and Fitness to Practise issues	76 - 3%	12 - 1%
Circumstances relate to professional conduct and Fitness to Practise issues	141 - 5%	21 - 1.6%

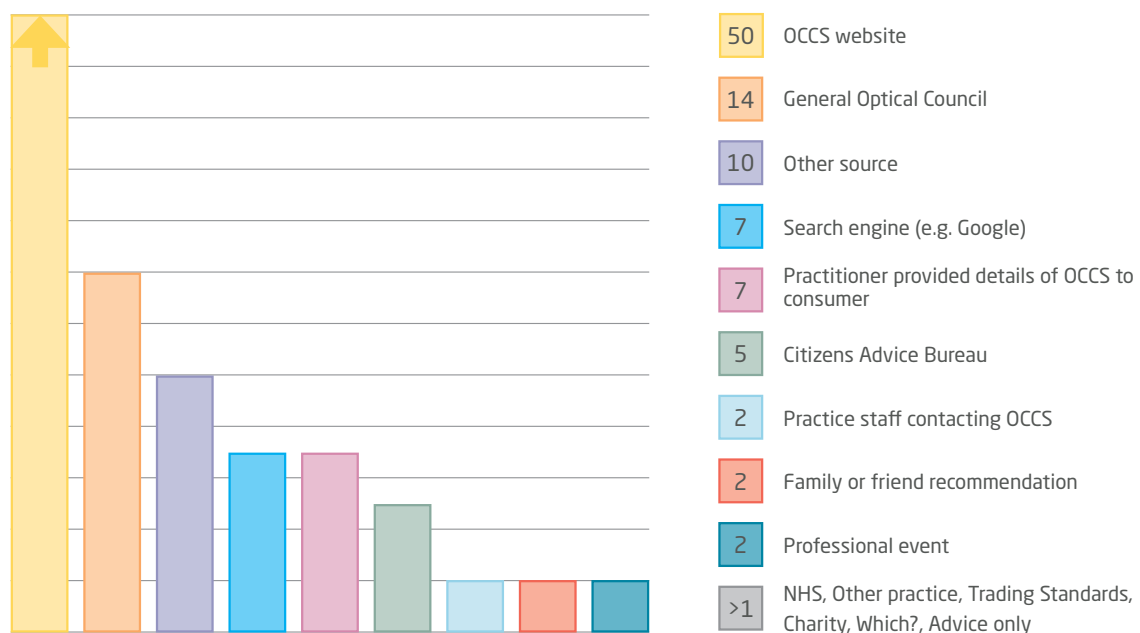
3.2 Activity levels

36. The figures in table 1 above reflect the number of consumers or practitioners contacting the OCCS regarding a consumer issue or complaint.
37. The OCCS complaints mediation team has handled over 9,000 telephone calls during 2016-17 which represents a 90% increase on 2015-16
38. The increase in Enquiries has resulted in a significant increase in administration and mediation activity. In order to manage this increase, additional administration support has been provided to the OCCS. This will assist in maintain response and resolution timescales during 2017-18.

3.3 Source of Enquiries

39. Those contacting the OCCS find the service by a number of means:

Fig. C Source - (How Consumers Come to Know About OCCS) (%)



- 40.** Where a complaint has been raised with the practice, the consumer is often provided with details for the OCCS by the practice if a solution cannot be found. The online complaint form has assisted in capturing responses since October 2016.
- 41.** 50% of enquirers who contact the OCCS directly following an online search. Some will have the www.opticalcomplaints.co.uk link (from practitioner information) and others will use search engines such as google or yahoo and become aware of the service.
- 42.** The OCCS has seen a further increase in referrals from the General Optical Council. This 4% increase represents a significant increase in terms of numbers. This positive development has been achieved through developing closer working relationships between the OCCS and GOC FtP teams and the FtP triage process. Increasing these referrals is an ongoing objective throughout 2017-19.
- 43.** This year we have also refined practitioner related referrals to distinguish:
- Practitioner enquiries/advice requests
 - Practitioner referring the consumer to OCCS
 - Practitioner providing the consumer with OCCS details but consumer then pro-actively contacts the service.

Overall we have seen an ongoing increase in practitioners contacting and referring consumers to the service. This is attributable to the profile raising activity, CET offer and importantly Practice Standard 18 requiring practitioners to inform consumers of the existence of the OCCS at an appropriate time.

We will review these categories as data responses increase during 2017-18.

3.4 Outcomes

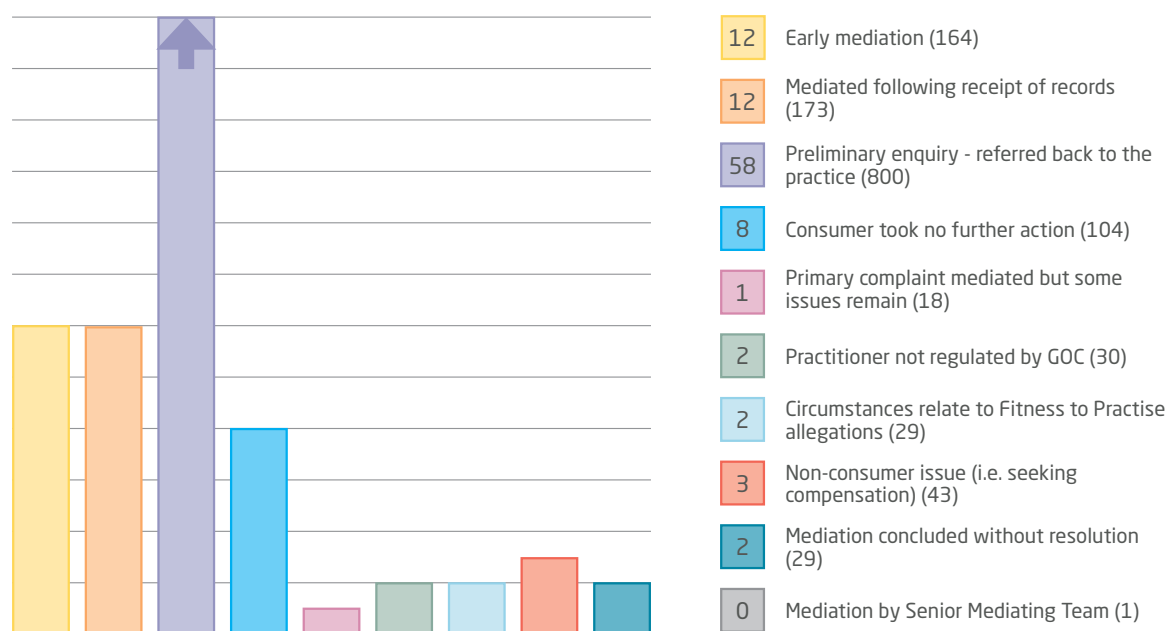
44. As at the 31 March 2017, of the 1399 enquiries referred to OCCS:

97.5% have been concluded.

35 are active within our mediation process.

45. We were able to achieve a conclusion in over 98% of the consumer Enquiries received by the OCCS during 2016-17 which is consistent with resolution rates achieved in 2014-15 and 2015-16

Fig. D Outcomes - All Enquiries Received by the OCCS 2016-17 (%)

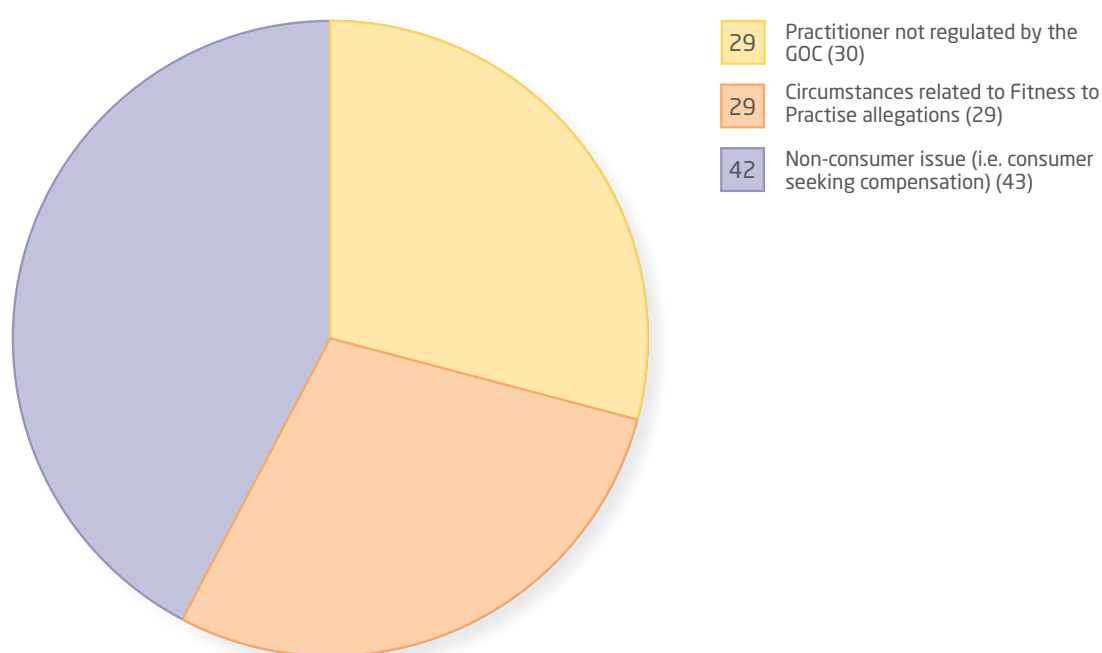


3.4a Concluded enquiries

i) Outside OCCS remit

46. 1229 Enquiries have been concluded and of these, 7% (102) involved issues which fall outside the consumer complaints remit of OCCS (comparable with 8% in 2015-16).

Fig. E Outcomes - Enquiries Received and are Outside Remit (%)



47. The OCCS continues to provide clear signposting to complainants whose circumstances do not fall within the remit of the service.

NHS complaints which are not resolved by the practice <ul style="list-style-type: none"> NHS England Patient Advice Services Scotland, Board of Community Health Council Wales Northern Ireland Patient and Client Council Ombudsman services available in the 4 countries 	Requiring independent legal advice where the dispute is not a consumer issue <ul style="list-style-type: none"> Where the Enquirer requires insolvency advice – CAB Action Against Medical Accident (AVMA) and Law Society if consumer alleging negligence Professional Indemnity Insurer if practitioner seeking legal advice
General Optical Council <ul style="list-style-type: none"> Issues relating to professional conduct where the issues posed a risk to public safety 	

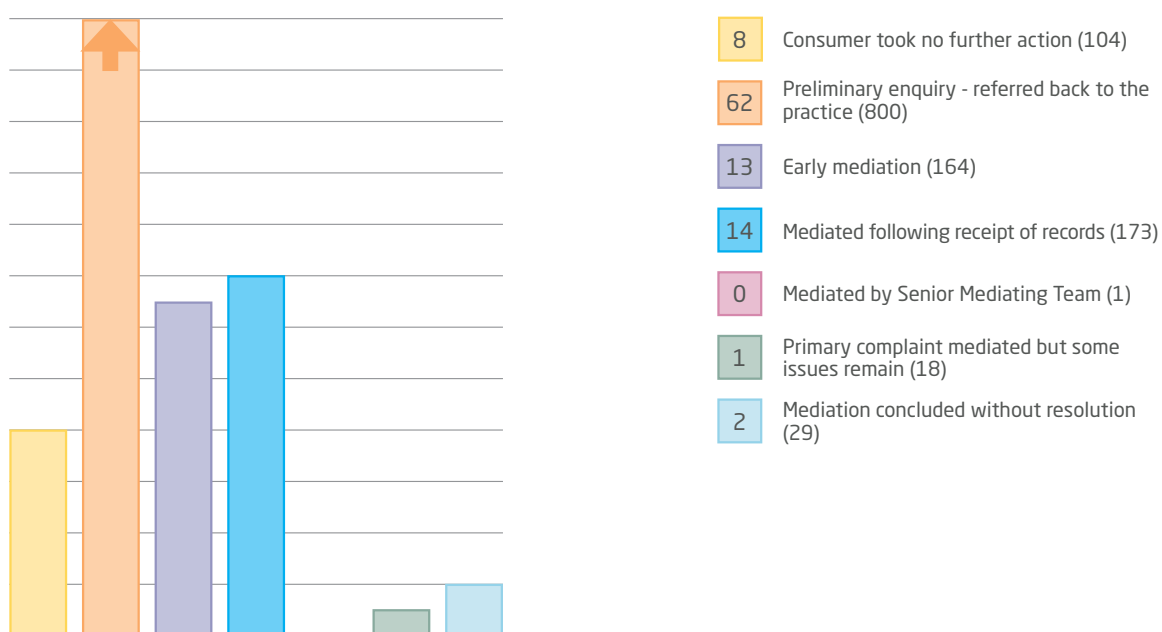
48. In 7% of enquiries, the consumer decides to take no further action after discussing their complaint with the OCCS (104 enquiries), which is down 3% on 2015-16.

These 'outside remit' enquiries included:

	Number	% All Enquiries	% Outside Remit
(i) Circumstances where the consumer seeks compensation for negligence or alleges damage or injury.	21	1.6	45% ⁴
(ii) Circumstances which relate to the practitioner's professional conduct and may give rise to a potential fitness to practice issue, in which case the consumer is informed that professional conduct is regulated by the GOC.	12	1	26% ⁵
(iii) Circumstances involving practitioners who are not regulated by the GOC e.g. consumer and practitioner reside in EIRE, New Zealand, or where neither practice nor practitioners are registered with GOC.	14	1.1	29% ⁶

ii) Outcomes of Enquiries involving consumer complaints by OCCS ('Complaints')

Fig. F Outcomes - Enquiries Involving Consumer Complaints (Within Remit) 2016-17 (%)



⁴ Complaints concerning claims for compensation 2015-16

5% all enquiries, 68% outside remit, number - 50.

2014-15 8% all enquiries, 53% outside remit, number - 48.

⁵ Complaints involving allegations relating to fitness to practise.

This represents an increase in terms of % of the complaints outside remit, but rests less than 2% of total enquiries received and still around 50% of the number referred in 14-15.

2015-16 1% all enquiries, 14% outside remit, number 10

2014-15 6% all enquiries, 41% outside remit, number - 37

⁶ Complaints involving practitioners not regulated by GOC

2015-16 1.5% all enquiries, 19% outside remit, number - 14

2014-15 1% all enquiries, 6% outside remit, number - 6.

iii) Outcomes of Enquiries mediated by OCCS

- 49.** 94% of enquiries received fell within remit, and of those 98% have been successfully concluded. Successful resolution is defined as an outcome where the consumer accepts the complaint is concluded following their interaction with the OCCS. These include those complaints resolved directly with the practice following advice or consultation with the OCCS resolution managers, the consumer takes no further action and mediated resolutions. As in previous years, resolutions have included:

Preliminary Enquiries

- Initial advice and guidance for consumers on how to approach the practice;
- Advice to the practitioner on how to respond and resolve the consumer's complaint;
- Advice on consumer rights and extent of any obligation owed by the practice, e.g. provision of prescription, validity of prescription and what the prescription must include.

Consumer Complaints

- Replacement product;
 - Re-examination;
 - Interaction with either prescribing or dispensing practice;
 - Review by independent local practice (as agreed by both parties);
 - Apology;
 - Refund (partial and full);
 - Consumer advised to accept the proposal put forward by the practitioner.
- 50.** 81% of Complaints are resolved at Stage 1, either prior to the enquiry proceeding to mediation (preliminary enquiry) or following mediation by our complaint resolution team.
- 51.** Less than 2% of the enquiries received by the OCCS proceed through a full mediation process and conclude without a resolution being agreed. In 2016-17 this equated to 29 enquiries of 1399. At the present time, the OCCS do not follow up with these complainants to identify those who proceed with their complaint via other means such as civil court proceedings or a referral to the GOC7. If the complainant concludes the OCCS process without an agreement being found but does not take further action, this is arguably a resolution as it brings the complaint to an end.
- 52.** Given the small numbers, the OCCS only keep anecdotal records of the intended action by complainant, and this will include:
- Refer the matter to the Trading Standards Service;
 - Pursue their consumer rights through the small claims county process or
 - Taking legal advice on the merits of any clinical negligence claim.
- 53.** The OCCS are proud to report maintained resolution rates despite a further year on year increase in activity and enquiries. The process operated by the OCCS provides a proportionate and effective method of consumer complaint resolution which is widely supported by the optical professions and body corporates operating in the sector.

Analysis and Trends

Who Complains and Why

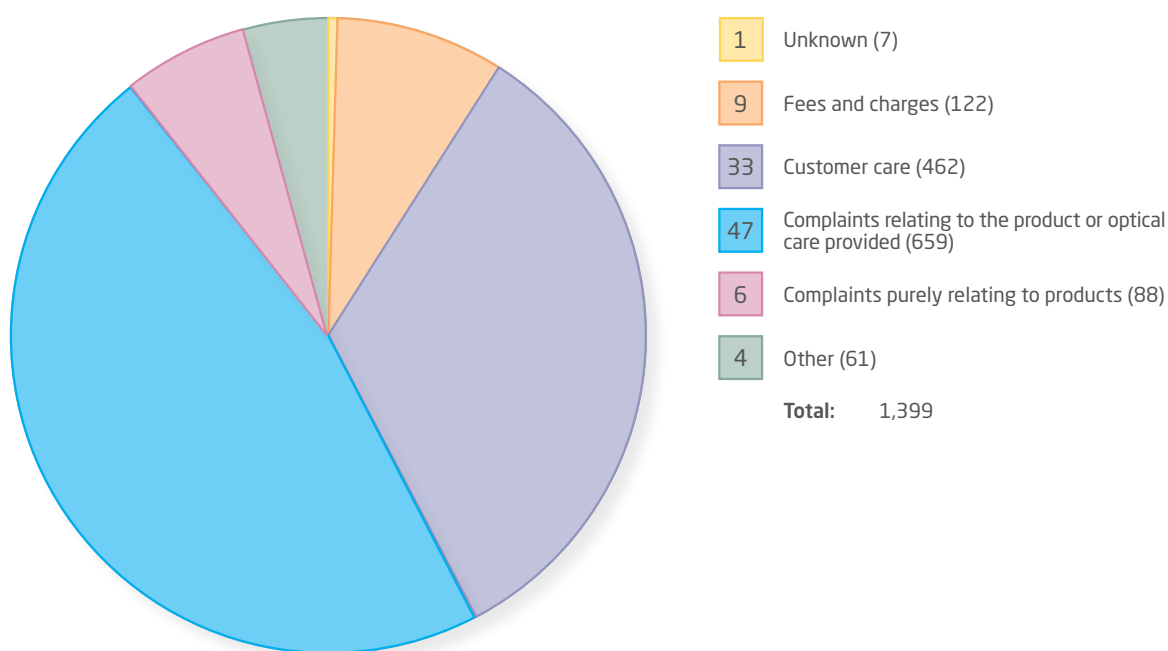


54. For both consumers and optical practices, it is important that consumer complaint insight is shared and used to inform practices and approaches within the optical sector. By reviewing why complaints arise and then escalate, the OCCS can disseminate this useful information to guide education and practice standards.
55. With a market of over £3067million, the number and value of consumer complaints within the optical sector remains low. With around 57% of adults attending an optical practice for an eye examination and sight test in 2016. The number of enquiries received by the OCCS, suggest the overall level of satisfaction felt by consumers remains high with an ongoing commitment of practitioners to resolve any concerns or queries arising.
56. By way of reminder, the OCCS remit extends to private optical healthcare, and excludes complaints regarding NHS funded sight tests. NHS sight tests account for two thirds of all sight tests. Complaints relating to optical products purchased using an NHS voucher or contribution are considered to be private optical care and therefore do fall within the OCCS remit.
57. With almost a quarter of consumers switching to another practice for their last sight test, consumer loyalty is becoming increasingly fluid within the sector. Many cite financial offers and deals, but quality of staff and the value placed by staff on the consumer/patient experience is also a major factor. Insight as to why the consumer relationship becomes strained and potentially irretrievably breakdown is invaluable and informs staff training and processes within practices that can improve the experience of consumers when visiting for a sight test, eye examination or to purchase vision aids.
58. Analysis of enquiries and complaints must be insightful and useful, with a view to the OCCS:
 - Informing and providing evidence of trends, potential changes within the sector and consumer service standards;
 - Sharing key learnings with practitioner groups for continuing education and professional development at an individual and business level;

- Identifying commonly occurring scenarios where complaints are more likely to occur and sharing best practice to help avoid these;
- Evaluating how the role of the OCCS can support proportionate resolution of concerns and dissatisfaction outside the regulatory arena;
- Service efficiencies; and OCCS future development.

4.1 Nature of Complaint ⁸

Fig. G Nature of Complaint (%)



59. The primary nature of the enquiries received is categorised as follows:

Table 2a. Nature of complaints to date (1.4.16- 31.3.17)

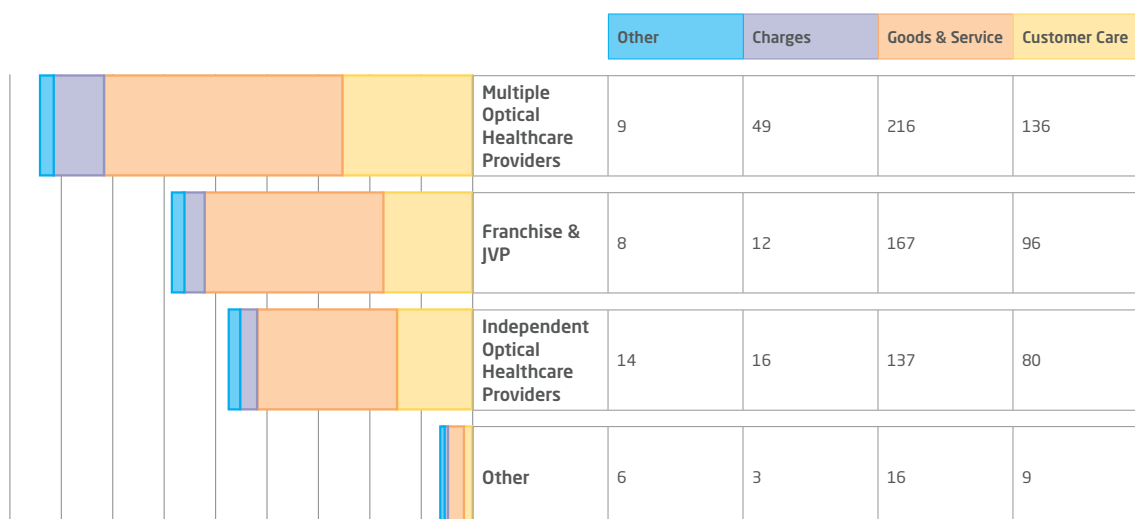
Category	16-17 Total	16-17 %	15-16 %	Variation on 15-16
Customer Service issues	462	33	36	-3%
Quality of services and goods	747	53.5	50	+3.5%
Charges and fee issues	122	9	7	+2%
Other	61	4	8	-4%

⁸ The definition of the categories used April 2016 – March 2017 can be found at Appendix C

⁹ There 7 enquiries which have not been categorised as the complainant did not provide sufficient information to enable an accurate assessment and then did not respond to communication.

60. As anticipated due to the clinical and patient nature of the relationship between consumer and practice, the two most common causes for complaint given are:
- Customer service (the consumer experience and handling of any concerns or dissatisfaction), and
 - Concerns regarding the quality of the service and goods provided.
61. There has been a slight decrease in the % of complaints relating to customer care. This categories reflects complaints which relate to communication and the relationship between the practice and the consumer. They include circumstances such as:
- Complaint handling
 - Perceived indifference by the practice or attitude of staff which consumers perceive to be negative
 - Delay
62. The OCCS has focused insight sharing, the CET programme and published information on key relationship issues. The aim is to assist practitioners in understanding how the consumer relationship can become strained and provide practical assistance to help to avoid the deterioration of the relationship or to re-establish trust where the interaction becomes strained.
63. The number of enquiries regarding the explanation of charges, fees or consumer offers (incentives) remains low, but has increased by 2% to a total of 9% of enquiries received.
64. At Appendix C are data reports on the nature of the complaint, which provides figures for primary and secondary reason for complaint recorded.

Fig. H Nature of Complaint by Business Type



65. There is no significant variation in the nature of complaints from the multiple and the independent areas of the sector.
66. Appendix E contains the summary guide published alongside this report which provides an overview and narrative on the circumstances which commonly lead to complaints and outcomes.
67. The most commonly occurring complaint scenarios are:
1. Supply and dispensing of varifocals and progressive lenses
 2. Consumer concerns regarding the sight test and prescription issued
 3. Attitude and approach of staff to consumers
 4. Complaint handling
 5. Dissatisfaction with product where prescription is dispensed by another practice
 6. Outcome of Laser eye surgery

4.1a Customer Service

68. These complaints relate to the consumer experience within the practice and ranging from:
- Delays in supplying products,
 - The way staff and practitioners address consumers,
 - Practitioner 'bed-side' manner.
69. The OCCS see escalating complaints which involve circumstances managed and resolved by practices in a daily basis across the UK. The query or issue raised by the consumer becomes a protracted complaint when the consumer loses trust and confidence in the practice staff to resolve the complaint. Examples would include: perceived indifference, delays in responding to the query, not responding (or responding fully) to a written complaint, failing to follow their own complaint procedure and other actions which do not concern the clinical care or product supplied, can damage the trust and confidence between practice and consumer.

Fig. 4.1a(i) Customer Care (2016-17)

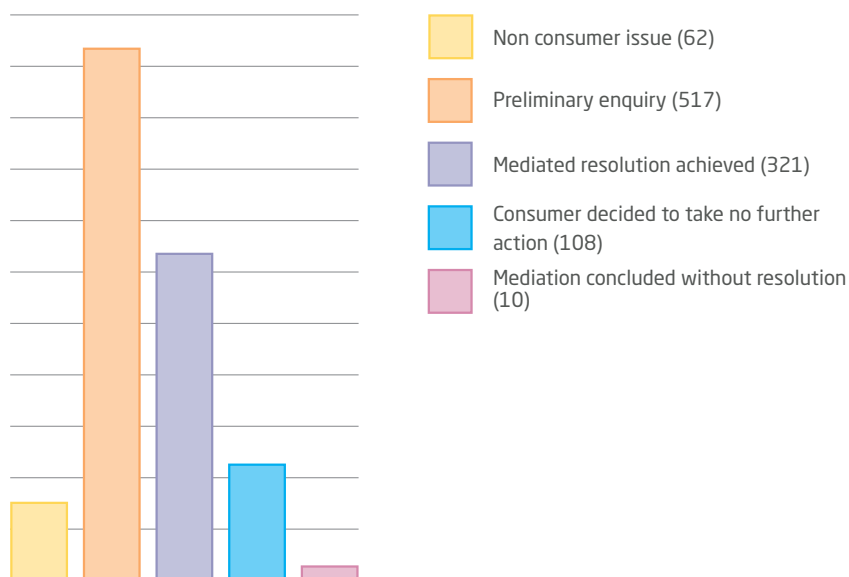
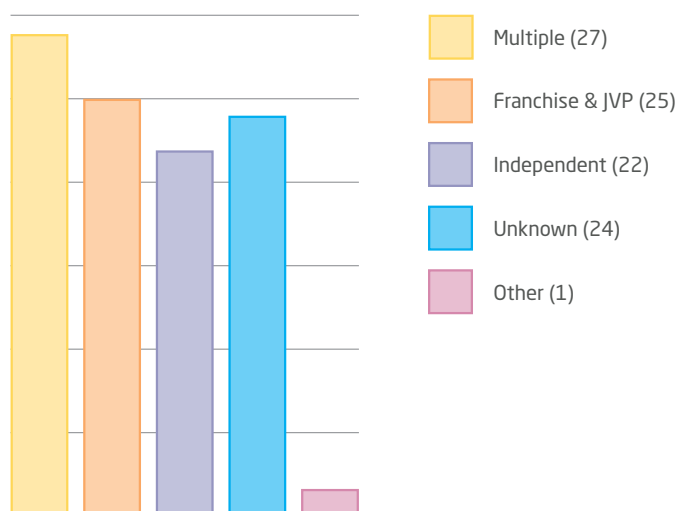
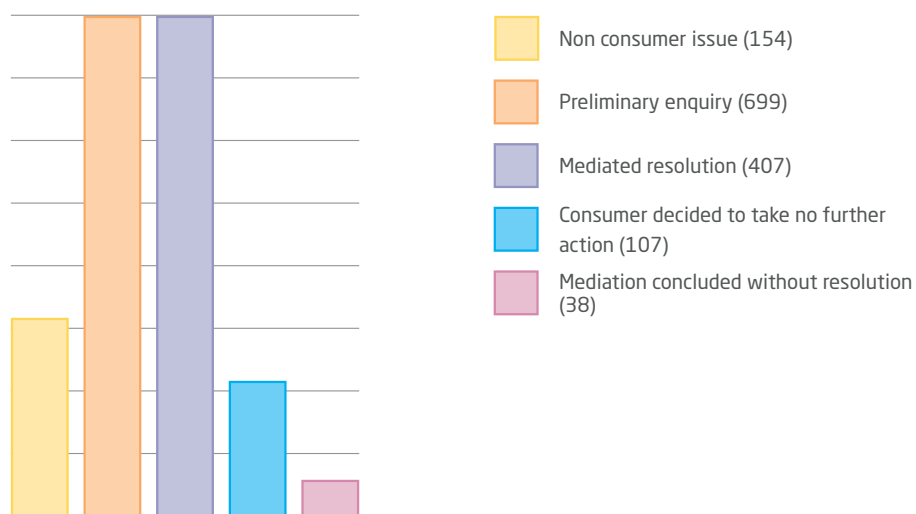
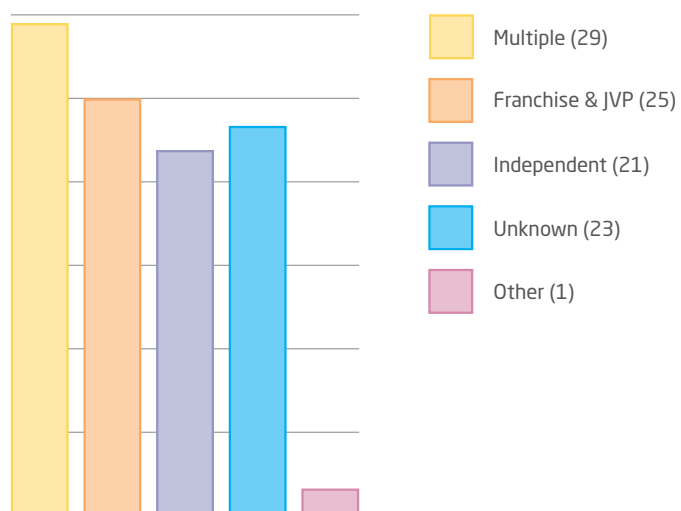


Fig. 4.1a(i) Customer Care by Business Type(2016-17)

- 70.** Consumer complaints can arise where a consumer feels the customer service is below their expectations. This is a very subjective area and one consumer's expectation may not satisfy another. Concerns relating to a lack of clear communication and failure to adhere to timetables and response times in a practice's own complaint procedure are repeat factors in escalated complaints relating to complaint handling.
- 71.** At section 8.3, of 2015-16 Annual Report, the OCCS analysed the consumer-practitioner relationship and the causes of tension. This analysis highlights why the loss of trust, communication difficulties and emotional responses are all intrinsically linked and contributing factors in complaints and their escalation.
- 72.** In our analysis of complaint circumstances, we have reviewed the categories for customer care complaints. In previous years, laser eye surgery/refractive surgery complaints have been recorded under a single category. In 2016-17 we captured complaint circumstances under i) laser surgery - complaint handling and ii) outcome of laser surgery. This reflects the subtle difference in the types of concerns referred to the OCCS in this area.

4.1b Concerns Regarding the Services Supplied or Good Purchased

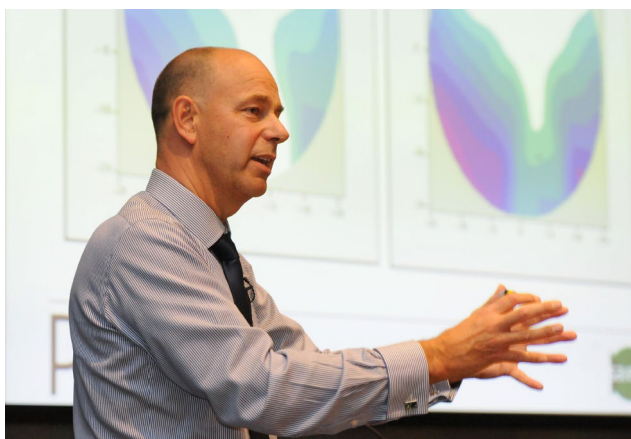
- 73.** Consistent with previous years, 53% of the enquiries received relate to concerns or complaints regarding the quality of the service or goods supplied.

Fig. 4.1b(i) Goods and Services (2016-17)**Fig. 4.1b(ii) Goods and Services by Business Type (2016-17)**

- 74.** The most commonly referred complaints are:
1. Concerns regarding the accuracy of the prescription;
 2. Varifocal/progressive lens tolerance;
 3. Difficulties arising where prescription is dispensed by another practice and the consumer is dissatisfied with the spectacles;
 4. Outcome of laser eye surgery
- 75.** The OCCS have seen a reduction in the % of complaints which concern or relate to contact lenses.

Varifocal/Progressive Lens Tolerance

- 76.** These complaints relate to a consumer's satisfaction with the vision achieved with varifocal or progressive lenses and account for the single biggest issue we see at the OCCS. For some, this is a first prescription and adaptation is the issue. However some issues arise from poor dispensing accuracy. Paradoxically as varifocal lens design improves the accuracy required in successfully dispensing these products also increases. The insights gained by the team have formed the bedrock of our CET workshops to raise awareness of the need for increased accuracy in dispensing measurements.



- 77.** Resolutions in these complaints range from full explanations to the consumer so they can understand timescales for adaptation, remakes and transfer into single vision spectacles.
- 78.** The supply of varifocals has now overtaken bifocal sales and therefore the number of enquiries relating to these products is not unexpected.
- 79.** Over the course of 2016-17, the OCCS has continued to consult with key stakeholders, and in particular Federation of Manufacturing Opticians to explore the challenges and barriers to a good consumer experience. This work will continue as a priority in 2017-18 and the consumer decision making process and the dispensing of varifocal and progressive lenses will remain as a key element in insight sharing and any CET delivery.

Complaints Involving a Prescription Dispensed by Another Practice

- 80.** With consumers becoming increasingly 'savvy', the number of prescriptions taken from one practice and dispensed by another, rises year on year.
- 81.** There are many factors influencing this decision:
- Product choice
 - Offers and financial incentives
 - Staff trust
- 82.** Where dissatisfaction arises, the circumstances are complicated as the reason for any 'defect' or dissatisfaction may be attributable to the prescription or the dispensing element of supply.
- 83.** If the dispenser is unwilling to make any changes etc, the consumer can feel bounced from one practice to another. They can experience frustration that no-one is assisting them and they have to find out why they are struggling to use the dispensed spectacles. Trust in optical professionals is also damaged where a consumer hears one professional criticises another whether openly or unintentionally.

84. The OCCS continue to support and promote awareness of the guidance was issued by the Optical Confederation in December 2014. Whilst not a panacea this guidance is a pragmatic proposal that supports customer service and the reputation of the profession,
85. The OCCS will continue to work the OC to share this guidance and will develop protocols to help ensure that the practical implementation is as fair and as efficient as possible however two issues can emerge when we are dealing with these scenarios.
86. The OC guidance is just that-it is guidance and is not legally binding-some prescribing practitioners refer to the guidance as the law-registrants must be clear with consumers and not inadvertently or otherwise mislead consumers.
87. Similarly nothing in the guidance diminishes the responsibility of the prescriber in their professional function. A prescribing error cannot be abdicated by reference to the guidance. We have made this clear on a number of occasions and advised regarding the accuracy of 'disclaimers' issued by some practices.

Outcome of Laser Surgery/Refractive

88. As mentioned above, laser eye surgery complaints have been categorised slightly different in 2016-17. Of the complaints relating to this area of practice, the majority do concern consumer satisfaction with the outcome of the surgery. These concerns can include:
- Regression of outcome
 - The consented risk of over or under correction
 - Dry eyes and other associated complications
 - Extent of aftercare required
89. The OCCS work closely with the providers of refractive surgery who are regulated by the GOC. We do not provide mediation services for any providers who are regulated by others, such as General Medical Council. These complaints are often emotive as the available solutions and options may be costly or limited (in terms of further surgery or retreats). This ambiguity for consumers is less than ideal and we would support a pan industry approach to complaint resolution and redress.
90. Successful resolution rates remain high, but are slightly lower than compared to the overall resolution level of the OCCS. This must be credited to the OCCS team who work closely with the providers to explore all possible solutions and offer support and further explanation to consumers in what are often protracted and entrenched complaints.

Contact Lens Related Complaints

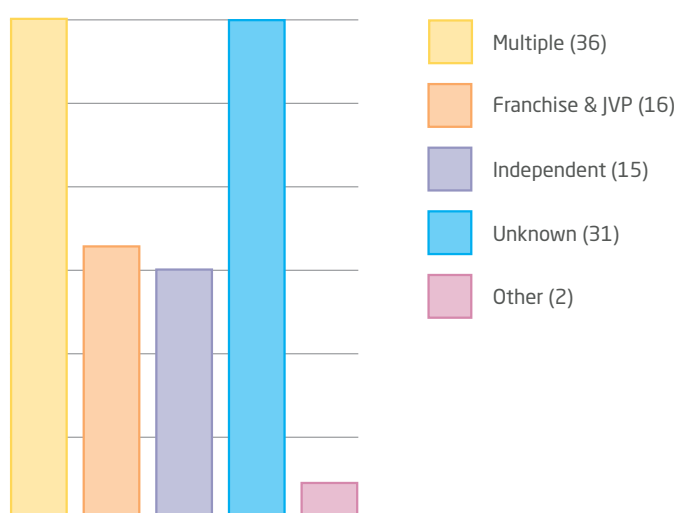
91. During 2015-2016 the OCCS saw an increase in complaints involving contact lenses. This has not been repeated in 2016-17. Given the significant increase in this area of the market, we will continue to monitor the fluctuations in these types of complaint. It is likely that the flexibility of the supply and the ongoing relationship between consumer and CL practitioner make account for the low levels seen.
92. Of those complaints referred to the OCCS, consumer enquiries regarding the timing and its provision of contact lens specification - 'When is fitting complete?' have been received. These may continue with increased online purchasing.
93. Analysis shows that many relate to charges, fees, ambiguity around provision of a CL specification and aftercare requirements for ongoing supply we have advised some practices to be vigilant about the risks of annual aftercare checks 'slipping through the net' when direct debit scheme wearers are mobile between practices. Equally we recognise the need to be pragmatic when busy lens wearers and busy practices are challenged to ensure check ups strictly within the expiration of lens specification.

94. The OCCS have also supported the Love Your Lenses campaign by creating and delivering six interactive CET events based on the BMG research insights of 2015 to highlight the variable propensity to risk across the wearer demographic and how ECPs should take steps to reduce risk.

4.1c Costs/Charges and Others

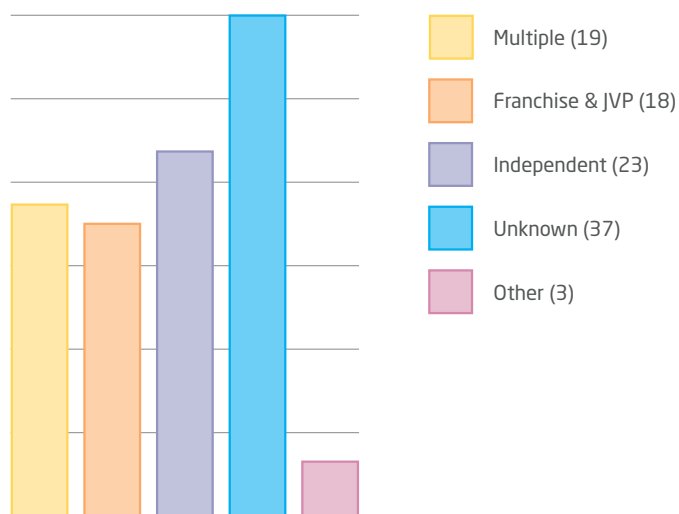
95. The number of Enquiries relating to charges and fees have increased again in 2016-17, to 9%, which still represent a low number of consumer interactions. These complaints have once again concerned:
- Refunding processing and in particular delays in processing refunds which were promised under a contractual term within a specific working days by one supplier, and were then either delayed or confusing to consumers as they understood the timescale to be 35 days.
 - Refunds for LASIK or refractive surgery where the consent process results in the surgery not proceeding.

Fig. 4.1c Complaints Regarding Charges and Fees by Business Type (2016-17)(%)

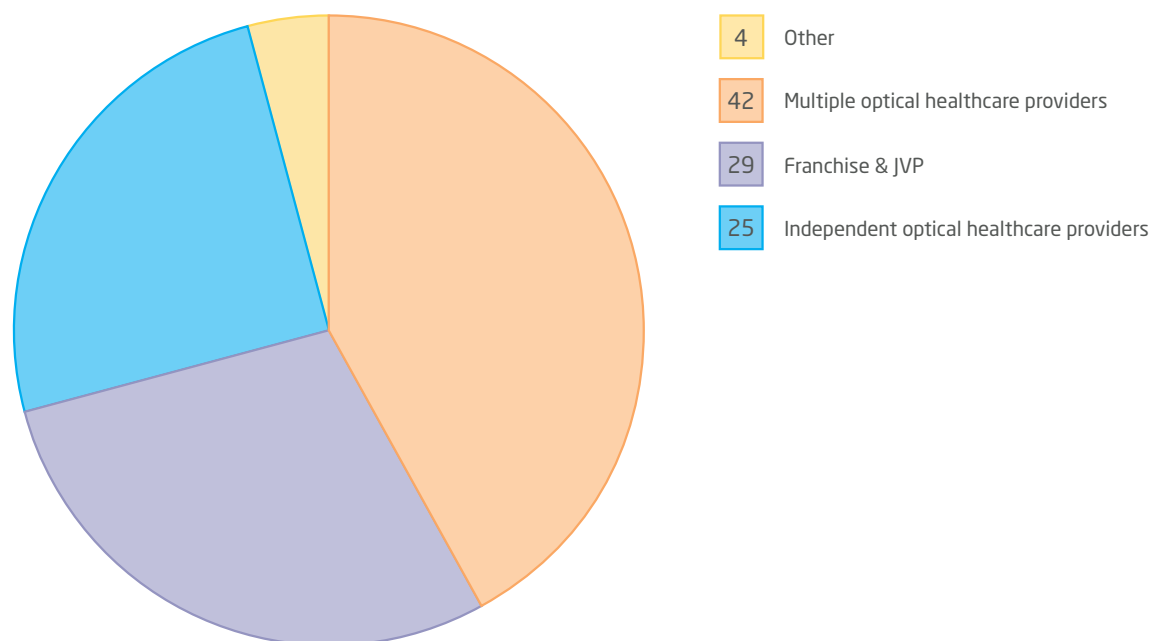


4.1d Other

96. We have reduced the number of Enquires categorised as 'other' by increasing the sub category of complaint circumstances to improve analysis.
97. The analysis below shows these miscellaneous complaints are received from all business types in proportions which reflect market share. The circumstances of these enquiries are often preliminary enquiries or fall outside the remit of the OCCS.

Fig. 4.1c Other Complaints by Business Type (2016-17)(%)

4.2 Business Type

Fig. I Enquiries by Business Type (%)

98. It is estimated that multiple providers (corporates, franchisees and joint venture partnerships) now deliver 80% of the optical healthcare in the UK, with 3 of the largest optical businesses accounting for two-thirds. Enquiries concerning these largest optical healthcare providers account for 71% of the enquiries received by the OCCS, slightly under

representing their market share.

99. This is expected however as independent practitioners deal directly with all aspects of consumer care and do not have sophisticated customer care support or procedures which may facilitate resolution between the practice and the consumer, rather than escalating to an independent third party at an earlier stage. The OCCS have been consulted by the AIO regarding consumer relationships and complaint handling approaches, which may be informed by the insight gained by the OCCS.
100. The corporate optical care providers offer a central complaints handling process to try and resolve consumer complaints. Each company has their own approach and process. The enquiries received by the OCCS once the internal complaints handling process has been completed can be challenging for different reasons. The trust may have been lost if different explanations have been given or the consumer feels they have not been taken seriously. Consumers may also have different expectations from large organisations and well known consumer brands.
101. Where the circumstances involve a franchisee or joint venture partnership, the complaint can involve the practice, a central support service and the consumer, or even multiple branches of the same franchise. Consumers may not always be aware of the franchise business model and may have different expectations if they consider the practice to be part of a large corporate organisation.
102. The OCCS continued to provide sector and large practice reviews to the relevant professional bodies or businesses. This helped to share insight although the trends seen in terms of the reasons for complaint are largely consistent across business types.

4.3 Insight on Why Consumers Complain

103. Many of the issues referred to the OCCS arise in optical practices across the UK and are successfully addressed by optical professionals within practice on a daily basis. In previous Annual Reports, the OCCS have highlighted why some concerns escalate and complaints become contentious.
104. As in previous years, we have seen a further increase in the preliminary enquiries received by the OCCS. These are complaints where the consumer has not yet raised concerns with the practice. This is often related to a lack of understanding of their consumer rights or where the consumer may feel vulnerable in terms of asking the question or acknowledging they do not understand.
105. Optical healthcare is a complex and competitive market. It encompasses NHS and private healthcare in a retail setting. Sophisticated business models and a wide range of pricing and financial incentives mean consumer experiences and spend vary greatly. The market is changing rapidly with increasing online presence from online suppliers and known brand name bringing greater choice but also challenges for both consumers and practitioners. The relationship between optical professional and consumer can be strong, even life saving but in the private healthcare retail market it can also be fluid and subject to strain.

Examples of why and how the relationship can deteriorate:

- The prescribing and dispensing of glasses and lenses is bespoke for each consumer;
- Remakes and adjustments can challenge the consumer's belief in the professional's ability and expertise;
- It is often a high cost purchase;
- There can be an overlap between NHS funding and self-funding, and the administrative requirements and restrictions placed on practices under NHS GOS;
- Sight and eye health can be connected with other health problems or medical conditions causing anxiety for consumers;
- Consumers have expectations depending on the practice visited, whether that be the reputation of an independent or the brand image of a corporate or franchise optical practice.

- 106.** The breakdown of the relationship between consumer and practitioner leads to loss of trust and is key factors in escalation of minor issues into a complaint.
- 107.** The introduction of Practice Standard 18 in April 2016 is relevant to this relationship in terms of professional conduct and practical resolution of complaints.
- 108.** Responding to complaints honestly, openly, politely and constructively is now a requirement of a competent registrant and is the approach most likely to see a satisfactory resolution for all parties. The OCCS have referred registrants to this new Practice Standard and helped them to conclude what this means for them and their practice.
- 109.** Poor communication and attitude of the practitioner also appears as an exacerbating factor in a number of complaints. Given the new GOC Practice Standards, while most practices deliver excellent service and customer care across the board by all members of staff to all consumers, this is an area that the profession should reflect on.
- 110.** With complaint handling a significant factor in the referral of concerns to the OCCS, it is clear that the approach to complaints and communication in difficult situations is relevant. The OCCS provides a central role in diffusing the heightened emotional responses and facilitating communication. Each party must be heard and must also hear the view of the other party.
- 111.** It is worth repeating the OCCS approach to mediation and conflict resolution, as this is key to achieving 98% successful resolution rates:
- **Understand** the root cause of the complaint. This may not be the initial reason given by the consumer;
 - **Listen** to the consumer and the practice. Both parties must feel their concerns have been heard and recognised to allow the complaint to move forward;
 - Help both to **communicate** their position in a way which is understood (and where appropriate, accepted);
 - Explore what each considers to be an acceptable outcome (which can involve a journey from their initially desired remedy);
 - Establish a **clear resolution** with the requirements on each party set out, with timescales;
 - **Feedback** to the practice why the consumer felt so aggrieved and why the complaint escalated.
- 112.** Last year, the OCCS considered potential future trends in complaints or key consumer issues:

Online suppliers	Slight increase in enquiries concerning unregulated businesses including online.
Any increased enquiries or complaints arising during an initial implementation phase of the new Practice Standards for individual registrants;	The OCCS have not seen any increase in complainants referring directly to the practice standards introduced in April 2016.
Increase complaints arising within circumstances where pre-prescription is dispensed by another practice;	Complaints involving these circumstances continue to represent a significant proportion of OCCS mediations.
Varifocal/progressive dispensing	Complaints involving these circumstances continue to represent a significant proportion of OCCS mediations.

Ongoing activity to improve handling of non-professional conduct enquiries and complaints by OCCS rather than FTP team (to include addressing frivolous, habitual or vexatious complaints and complainants).

This work has continued and will be a priority for 2017-18. The increase in % of complainants referred to the OCCS by the GOC illustrates the effectiveness of the work undertaken.

4.4 Consumer and Practitioner Data

113. The OCCS request and capture the age bracket, gender and regional location of the consumers and practitioners. This should allow us to investigate the existence of trends such as levels of particular types of complaints arising within certain business types, geographical (or NHS) areas or consumer groups.

114. The type of practitioner business is also recorded (where possible) in the following categories:

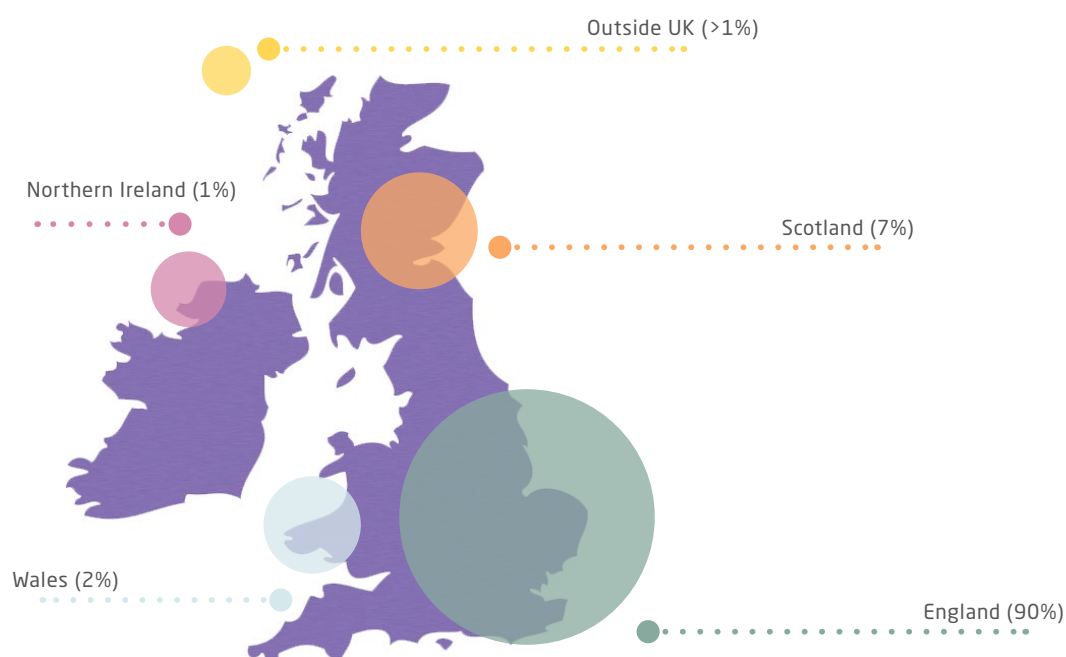
- Independent - Sole practitioner/Partnership/Limited company
- Multiple branch
- Corporate/Multiple
- Franchise & Joint Venture Partnership
- NHS
- Other

115. The OCCS will provide sub-sector analysis to the multiple service providers and to professional bodies who represent the professions and independent practitioners such as AOP/AIO and LOCs.

4.5 Location

116. Each enquirer is asked to provide their contact details including address and postcode. Those making preliminary enquiries can be reluctant to provide personal information. The OCCS do record the consumer and practitioner location for all complaints mediated and for many of the enquiries which involve circumstances falling outside the remit of a complaints mediation service.

Fig. J Location of Complainants (%)



- 117.** We have location information for 70% of enquiries.
- 118.** Complaints and Enquiries have been received from all 4 Nations. Activity reflects the UK population, and it is not possible to take into account any regional variation in optical healthcare provision in the four countries as this not available.
- 119.** In order to ensure UK wide engagement, the OCCS has:
1. Northern Ireland – preliminary dialogue with Northern Ireland Optometric Association to provide interactive workshop sessions. Also offered to multiple practices in Northern Ireland;
 2. Wales – CET and guidance sharing planned with Optometry Wales
 3. Scotland – CET and guidance sharing with Optometry Scotland, attendance at OS Council meeting in January 2016, attendance at industry events such as SCLOSS in November 2015
 4. England – NOC attendance, Local Optical Committees via LOCSU for regional feedback
- 120.** The national consumer profile raising campaigns detailed in section 11 will also increase accessibility in all four countries.
- 121.** In terms of the category of complaints received, these are similar on a country and regional basis. As a proportion of the total enquiries from Scotland, the % relating to customer service issues were slightly lower than the overall UK % in 2014-15. This year, 6% of Enquiries were received from Scotland. This is partly explained by the increase in complaint handling related laser surgery circumstances. There is however increase in referrals from consumers and practitioners based in Scotland.
- 122.** In addition to UK wide insight sharing and education/development activities, the OCCS 4 Nations activity in 2016-17 will concentrate on:
- Northern Ireland – stakeholders
 - Wales – stakeholders and education
 - Scotland – stakeholders NHS Scotland
 - England – grass roots interaction

4.6 Equality and Diversity

- 123.** Equality and diversity data is requested and obtained from consumers and practitioners. The participants are asked for details of their:
- Gender
 - Sexual orientation
 - Ethnicity
 - Disability
 - Gender reassignment
 - Religion (since March 2015)
 - Marital status (since March 2015)
- 124.** These continue to reflect the GOC's revised EDI scheme to allow analysis of consumer complaints, OCCS reporting and to monitor accessibility and use of the OCCS by the UK population as required by the General Optical Council (detailed in the Equality Diversity and Inclusion Scheme 2014-17 policy document.
- 125.** The analysis below indicates the responses received from enquirers remain consistent with the UK national population. With the increase in complaint circumstances at an early stage, an increasing number of complainants may not interacting with the OCCS over a prolonged period or need to return documentation to us. This has an impact on the

EDI response rates. We will continue to review and ensure the process for supplying this information is as user friendly as possible.

a) Age ¹⁰

Fig. 4.6a(i) Population by Age

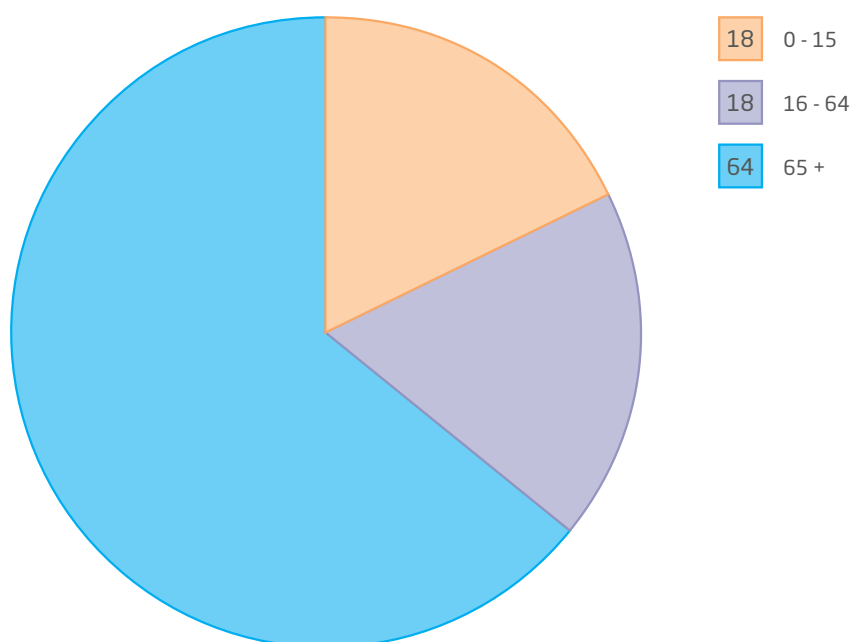
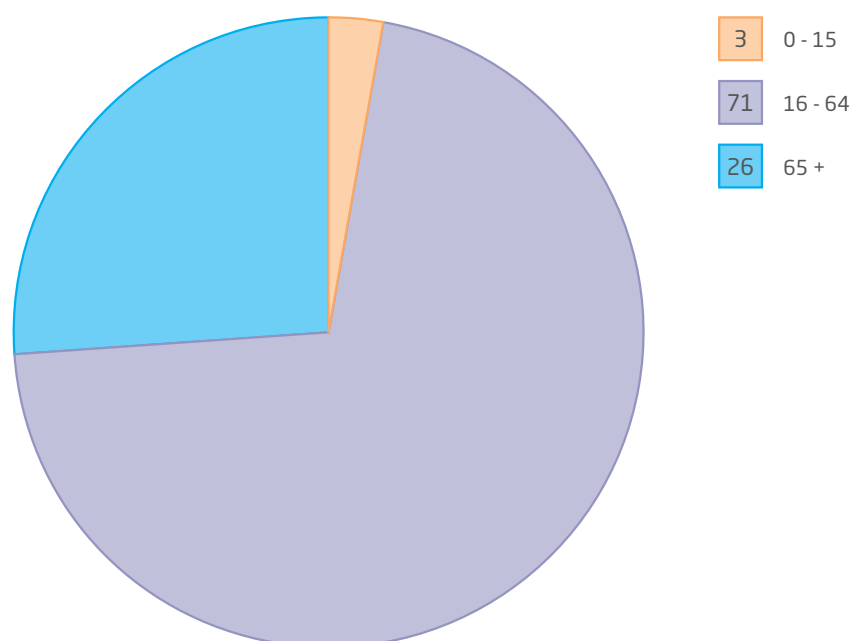
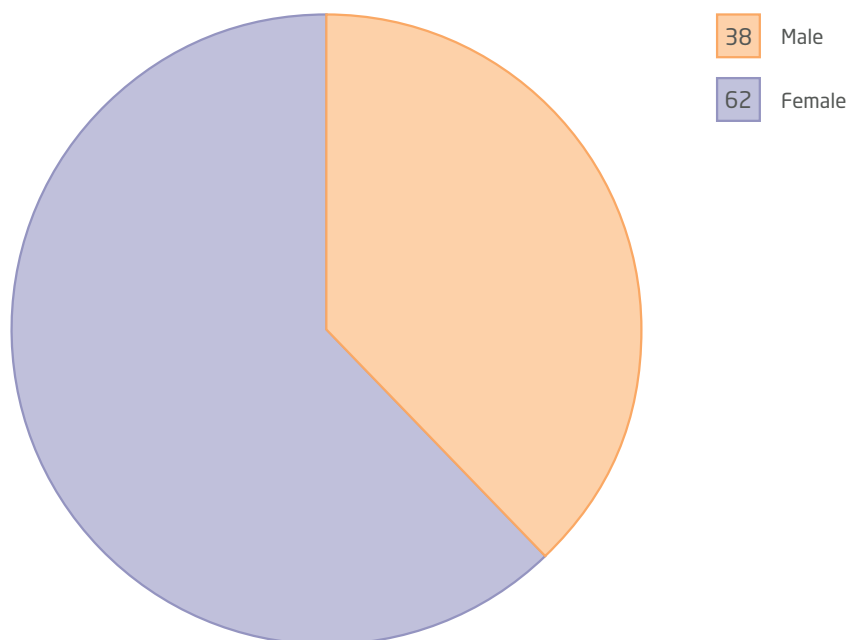


Fig. 4.6a(ii) OCCS Complainants by Age



¹⁰ ONS 2015 Population Ageing in UK, it's constituent countries and EU & 2011 Census data and summary ONS

b) Gender

Fig. 4.6b Gender of OCCS Complainantsc) Ethnicity ¹¹

On par with national population %

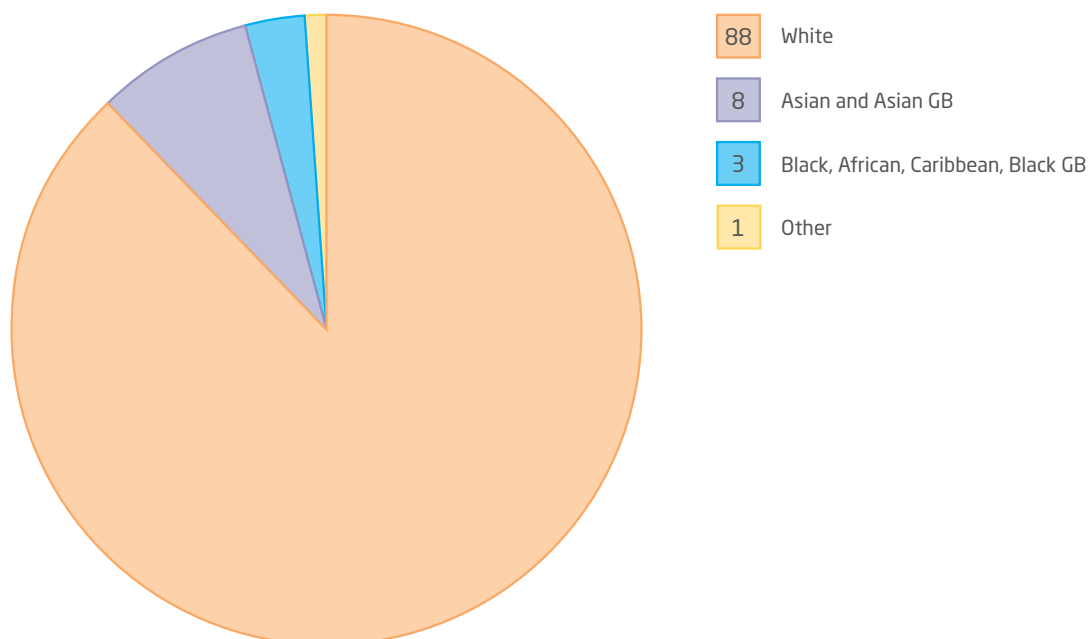
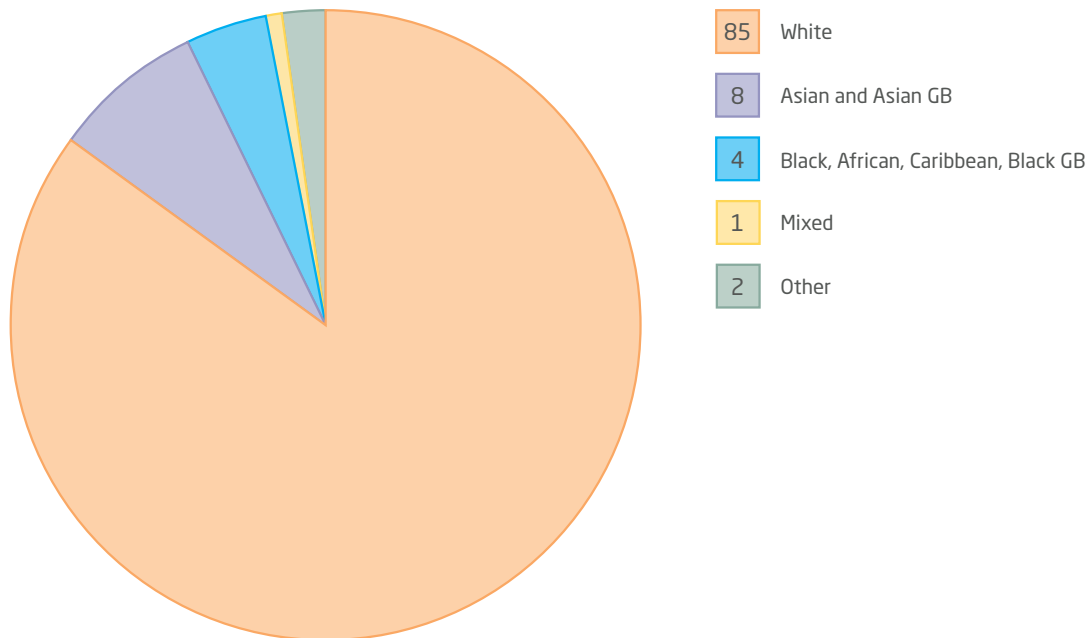
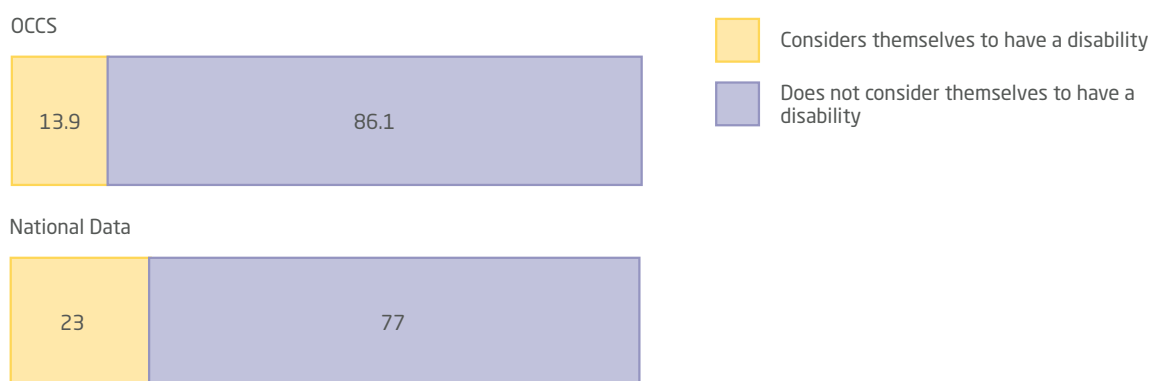
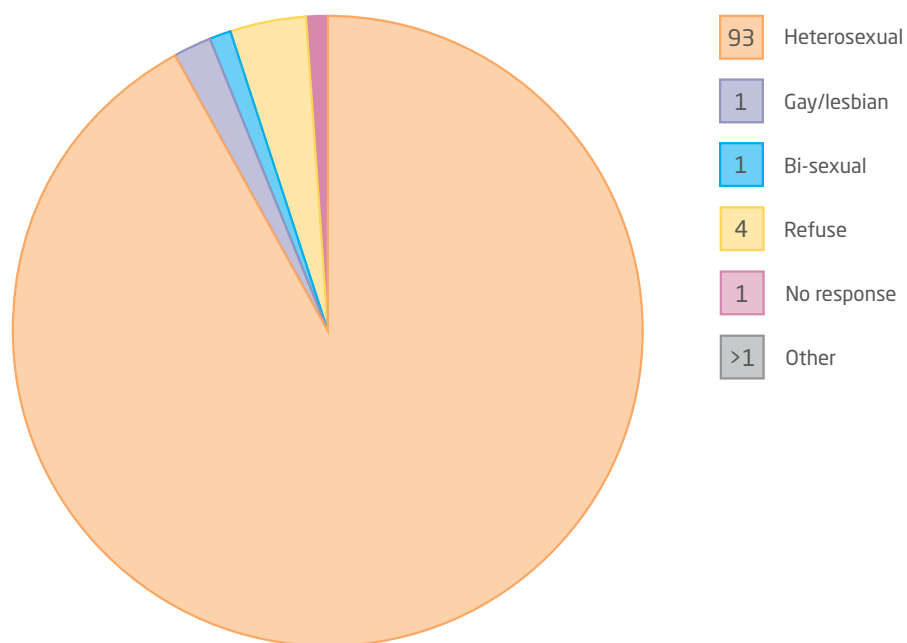
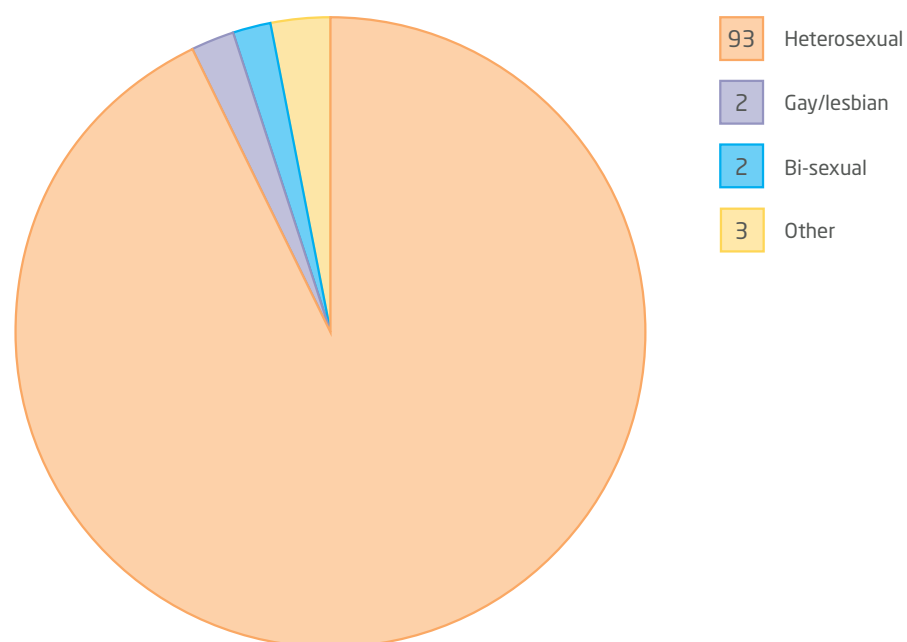
Fig. 4.6c(i) Ethnicity of General Population

Fig. 4.6c(ii) Ethnicity of OCCS Complainants**d) Disability¹²**

Complainants who consider themselves to be disabled are under represented when compared to the national population %

Fig. 4.6d Disability (OCCS Complainants %)

e) Sexuality13

Fig. 4.6e(i) Sexuality of General Population**Fig. 4.6e(ii)** Sexuality of OCCS Complainants

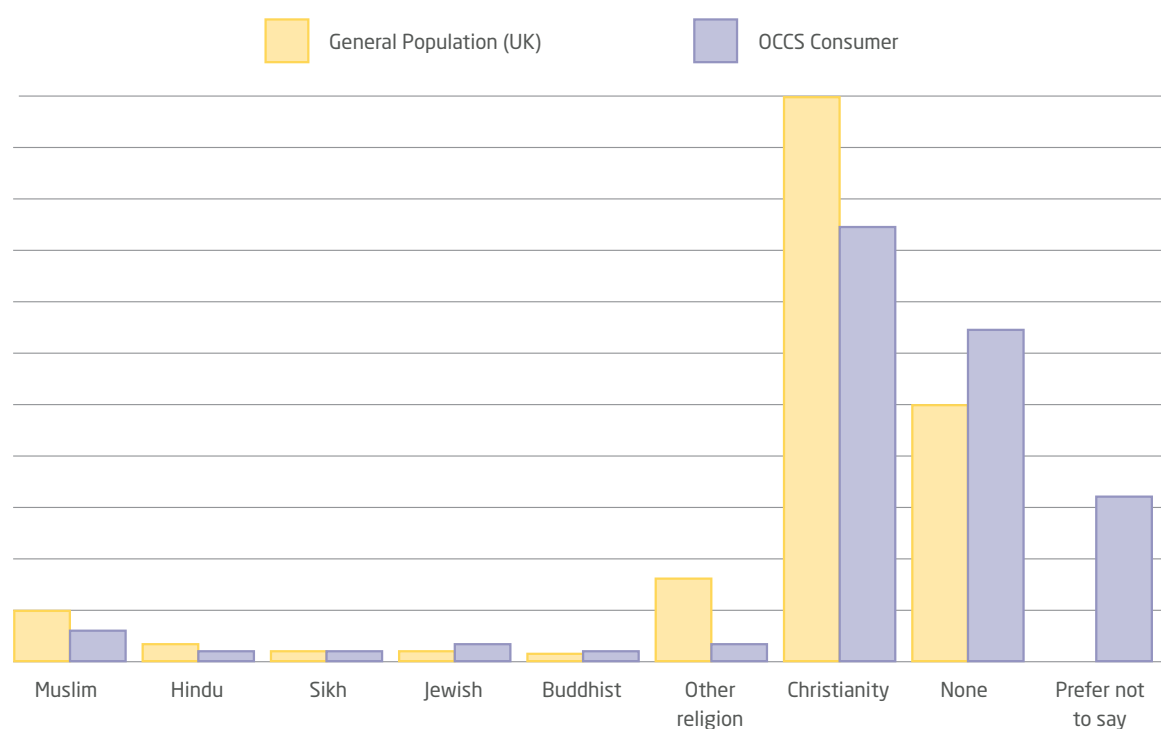
f) Gender Reassignment

- 126.** None of the EDI responses have indicated that the participant has undergone gender re-assignment. GIRES research estimates that 20 people per 100 000 of the population undergo gender reassignment.

g) Religion ¹⁴

26% of responders stated they would prefer not to state their religion.

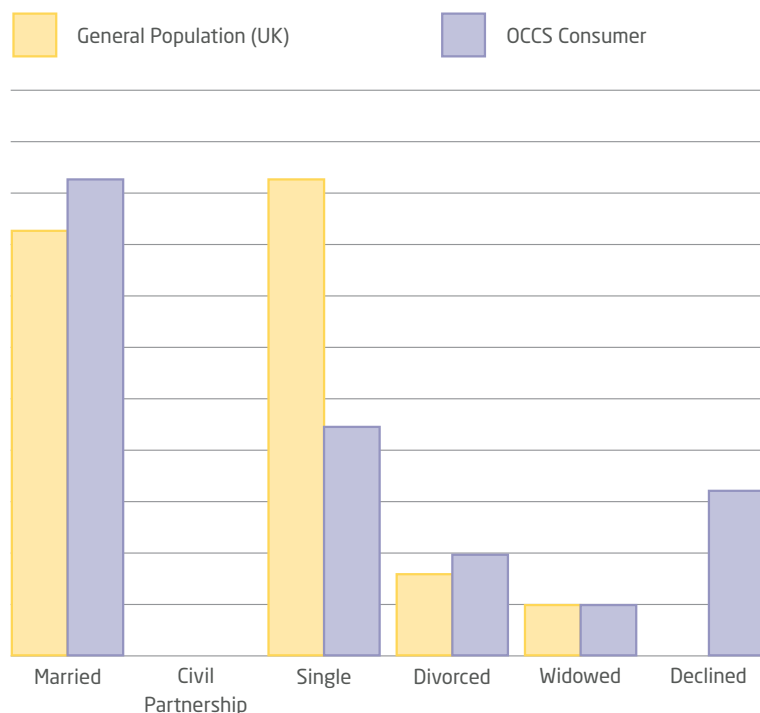
Fig. 4.6g Religion - (OCCS Enquiries Compared to General Population 2016-17, %)



h) Marital Status ¹⁵

15% of those responding indicated they would prefer not to give their marital status.

Fig. 4.6h Marital Status (%)



4.7 Process of Data Capture and Evaluation

- 128.** In October 2016, the OCCS introduced a revised online complaint form alongside a new complaint management software system.
- 129.** This system collects EDI data within the online form to encourage completion in preliminary enquiry records. We continue to promote to consumers and practitioners the benefits of providing this data in terms of the useful sector wide knowledge gained to guide further training, patient information and resource allocation. With the increase in preliminary enquiries received over the telephone (those referred back to the practice or where brief advice is given), the overall % decrease in responses is to be expected. Where the complainant does not interact with the service or return a consent form, they are unlikely and unwilling to provide key personal information.
- 130.** We do continue to request EDI responses via an online or paper survey. The request is also made of practitioners when the consumer's consent is passed to them. Both parties are then asked again at the conclusion of the complaint (if the information has not already been provided).
- 131.** The response rates fell during Q1 and Q2 2016-17 (approximately 250) and measures were introduced to improve response rates. These included requesting EDI data in the initial complaint enquiry form and requesting this EDI again in complaints mediated (at the stage a signed form of authority is requested). This has assisted and with increased administrative support in the OCCS team, this will continue to be a focus in 2017-18.
- 132.** Since moving to the new complaint management system, of the complaints mediated 37% do provide EDI responses.

- 133.** Response rates from Practitioners did increase but remain low. As the complaints referred to the OCCS are approached from a 'practice wide' perspective and not related to an individual practitioner, we propose not to continue to seek to collect this data in 2017-18.
- 134.** The EDI request was included within the feedback survey and practitioners declined to complete this for the reasons set out above. We have reviewed the methods of collecting this data against the benefits gained from collection and analysis. Having done so, the OCCS conclude that attempts to collect this data from practices should not be pursued.
- 135.** This will be welcomed by practices as:
1. They focus on responding to the complaint and liaising with OCCS on the central issue;
 2. Frequently complaints do not relate to a single individual in a practice and therefore the Equality & Diversity information may not always be relevant on an individual basis. In the case of multiples, the OCCS interact with the Head Office team rather than the individual practice involved;
 3. Consumers are completing personal details (contact information, date of birth etc.) and therefore continue and complete E&D survey;
 4. Practitioners are focused on providing feedback and this may be given priority over Equality & Diversity data;
 5. Practitioners may be reluctant to provide this information.

¹¹ National Office of Statistics 2011 census

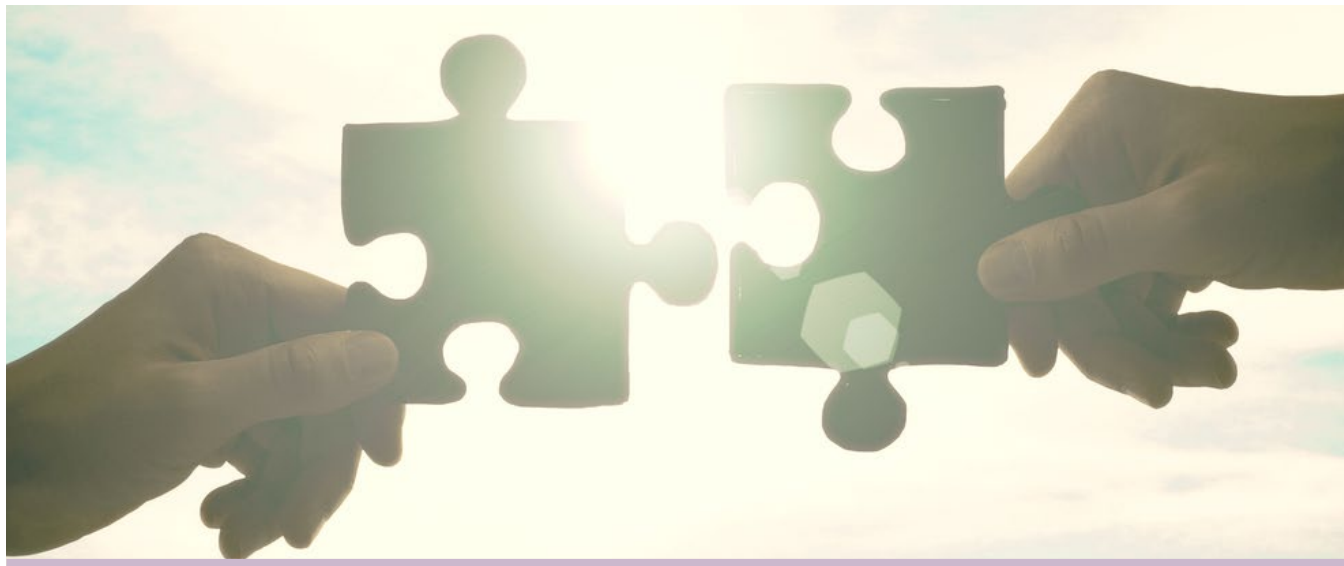
¹² <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

¹³ ONS 2012 Sexual Identity in the UK

¹⁴ 2011 UK Census data

¹⁵ ONS 2015 data

Reporting



- 136.** The new complaint management software system enables the OCCS to provide flexible and responsive analysis. During Q3 and Q4, the OCCS have reviewed the reports and analysis provided to the the GOC on a monthly basis. We continue to provide the GOC with the following basic data:
1. Referrals received
 2. Number of referrals which are outside OCCS remit
 3. Number of referrals mediated
 4. Number of live matters
 5. % of referrals within the 45 day resolution period
 6. Number of concluded referrals
- 137.** The OCCS have however reviewed the approach to reporting and in conjunction with the GOC FtP team, have evaluated the manner in which OCCS activity and analysis can be shared with the GOC to maximise benefit and cost effective interaction. The OCCS and FtP team now met on a bi-monthly basis, and provides an statistical overview and importantly case reviews. This facilitates the working relationship between the teams and encourages trust and confidence allowing low level complaints to be referred to the OCCS by the FtP where proportionate and appropriate to do so15.
- 138.** A monthly operational conference call is also held to discuss the data and any provide feedback on recent OCCS activity.
- 139.** The OCCS Annual Report ensures the OCCS provided analysis on:
1. Outcomes achieved in complaints involving different issues (e.g. customer service or provision of good quality service and products);
 2. Demographic data analysing consumer and/or practitioner groups, geographical areas and the nature of the complaint raised;
 3. Simultaneous FTP and OCCS involvement;
 4. Satisfaction rates for complainants according to the nature of their complaint; and

5. Further data analysis which may be insightful for the professions and the GOC.

140. The OCCS will also present a summary of the 2016-17 annual results to the General Optical Council at public meeting in July 2017.

¹⁵ Refer to section 7 FtP Interaction for full details.

How We Work



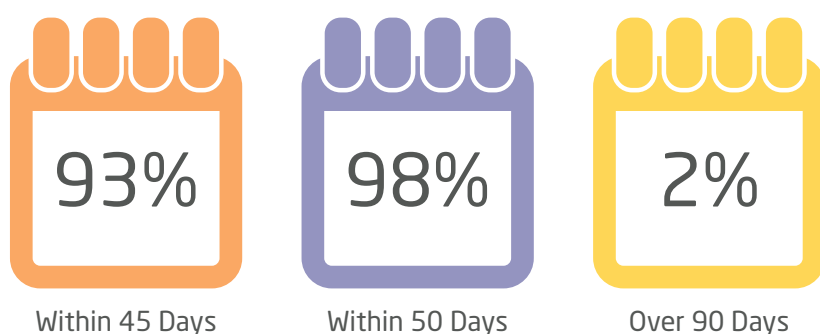
6.1 Mediation Process

- 141. The mediation process as set out in the service standards reflected in the contract between Nockolds Solicitors Ltd and the General Optical Council has been implemented and an interim evaluation has been conducted.
- 142. At present the process continues to provide an effective Alternative Dispute Resolution scheme for the optical sector.
- 143. A summary of the mediation process can be found in Appendix A.

6.2 Timescale

- 144. The OCCS has set itself the objective of resolving referrals within 45 days (with a further period provided if the matter is referred to the Senior Mediating team). This is well within the 90 day recommended resolution period considered appropriate in the EU Directive 'Alternative Dispute Resolution for consumer disputes' ¹⁷.
- 145. As at 31 March 2017, of the 1399 referrals received since 1 April 2016:

Fig. KResolution Time - % of Enquiries Resolved in 2016-17



- 146.** On evaluating the resolution timescales:
- 1.** We have seen an increase in the % of complaints which took over 90 days to resolve. When analysing these complaints, it is clear these are by their nature the most contentious and emotive e.g laser/refractive surgery. There has also been some delay in record closure due to the transfer to the new complaint management software system in October 2016.
- 147.** In March 2017, additional resources were also allocated to the OCCS team to assist with administration allowing resolution managers to focus on mediation and complaint resolution. This has had an immediate positive impact on satisfaction and complaint closure rates

6.3 Methods of Communication

- 148.** The majority of communication is by telephone and email, but first class post is used if this is the consumer's preferred method of communication.
- 149.** The telephone call volumes reflect the focus on direct communication via telephone and where necessary, by email.

¹⁷ Directive 2013/11/EU and UK Government – Department of Business Innovation & Skills Consultation Response and Proposal – November 2014

Clinical Input and Opinion



150. A panel of appropriate clinical advisors is available for the team to contact where optical or clinical guidance is needed.

151. Richard Edwards is assisting OCCS on a consultancy basis and provides some clinical advice when required. Richard comments:

Twelve months ago the OCCS team embarked on a commitment to deliver significant volumes of CET into the profession to support the sector in raising standards of customer care. Having delivered 30 events in the last year to almost 1500 delegates I believe we have met that ambition and really started to play a significant role in pro actively driving up standards in the sector.

The work we have commenced with the FMO to improve standards of varifocal dispensing gives me great hope that we can play a key role in improving the experience for many wearers and enable more people to experience the benefits of new technology in lens design. Reflecting on the past twelve months I believe the OCCS team have been hugely successful in meeting the challenge of a significant increase in workload driven by our higher profile in the sector and I salute their commitment to delivering great care to both optical customers and practice teams alike.

I am also increasingly excited about the opportunities I see for OCCS to continue to evolve our approach with the GOC team to develop proportionate and pragmatic mechanisms to manage consumer concerns effectively. I believe that through this increasingly collaborative approach the OCCS and GOC can lead the way in how healthcare professions manage such issues and I believe others will ultimately seek to replicate the pragmatic and effective processes we are building.

I would like to note my thanks to the many customers, practitioners and practice teams for their support over the past year. Given the twenty million plus eye examinations performed each year, the relatively small number of issues that require mediation by the OCCS is a testimony to a profession that truly puts customer care at the heart of it's role in society and is one that we should all be proud of.



Richard Edwards
Clinical Consultant OCCS

152. The OCCS continue to call upon the panel of optometric and dispensing optician advisors when required. The OCCS has no plans to further expand this panel of advisors during 2017-18.

General Optical Council



8.1 Contract Extension

- 153.** At the July 2016 Council meeting, the proposal to extend the contract with Nockolds Solicitors Ltd to provide and deliver the complaint mediation service as the OCCS was approved. The 2014-17 contract was therefore extended and Nockolds will continue to deliver the service until 31 March 2019.

8.2 Interaction with GOC Fitness to Practise (FTP) Team

- 154.** One of the main successes of the OCCS scheme is the effective and proportionate communication between the OCCS and the GOC FTP team.
- 155.** The OCCS continue to consider if the circumstances justify a 'Red Flag' notification to the GOC. If so, the OCCS will also inform the Fitness to Practise team of the name of the consumer and brief details. If not a re- flag incident, the consumer is provided with information and they are then able to take action as they see fit. The OCCS then log the advice to monitor patterns of behaviour which may in turn prompt a red flag notification to the GOC.
- 156.** During 2016-17, 24 circumstances were not progressed by the OCCS team as they were considered to relate to regulatory fitness to practise issues. These complaint circumstances were assessed by the Head of OCCS and a clinical advisor and then where appropriate, either a referral was made or the complainant confirmed they had referred or intended to refer to the GOC FtP team.
- 157.** Clinical opinion is often obtained where a clinical decision is relevant to the assessment. Judgment must be exercised carefully at all times as public protection is paramount in these circumstances. There is also a need to balance the independence of the OCCS and to ensure it is fair to all parties involved. Engagement by consumers and practitioners is crucial for mediation to succeed. If there is any question as to whether a referral should be made, the OCCS team will advise or refer the complaint to the FtP team. The OCCS welcome to introduction of Roma Malik to the FtP team and work in collaboration with her to ensure proportionate and fair management of areas of overlap between the two parties.
- 158.** The OCCS and FtP team will liaise 'in principle on the facts' where there are scenarios that may involve professional

misconduct allegations but the issues are not obvious.

159. To summarise:

1. Where a serious or 'Red Flag' allegation or concern, immediately notification to the FTP team. This has occurred on 2 occasions in 2015-16;
2. Where the consumer has contacted the OCCS directly, they are encouraged to contact the FtP team themselves and/or consent to the OCCS passing the basic contact details to the FtP team;
3. If the consumer is unwilling to consent, but there is a clear public protection justification, the OCCS will provide the FtP with the relevant and necessary details for the FtP team to investigate further. These are classified as 'Red Flag' complaints;
4. If the consumer is unwilling to consent to the OCCS passing their details to the FtP team, the consumer is informed that we record when FtP advice is given and will provide basic data in a monthly report to the GOC. The consumer will have been advised to contact the FtP team and contact details given. The FtP team are then able to cross reference enquiries to ensure concerns are investigated.

160. The format of the monthly report is at Appendix H.

161. The interaction between the OCCS and FtP team will continue to be developed including the aim to obtain further OCCS assistance in circumstances where consumer/patient dissatisfaction is reported to the GOC, and a resolution would benefit the consumer where there is no risk to public and patient safety or to the integrity of the professions.

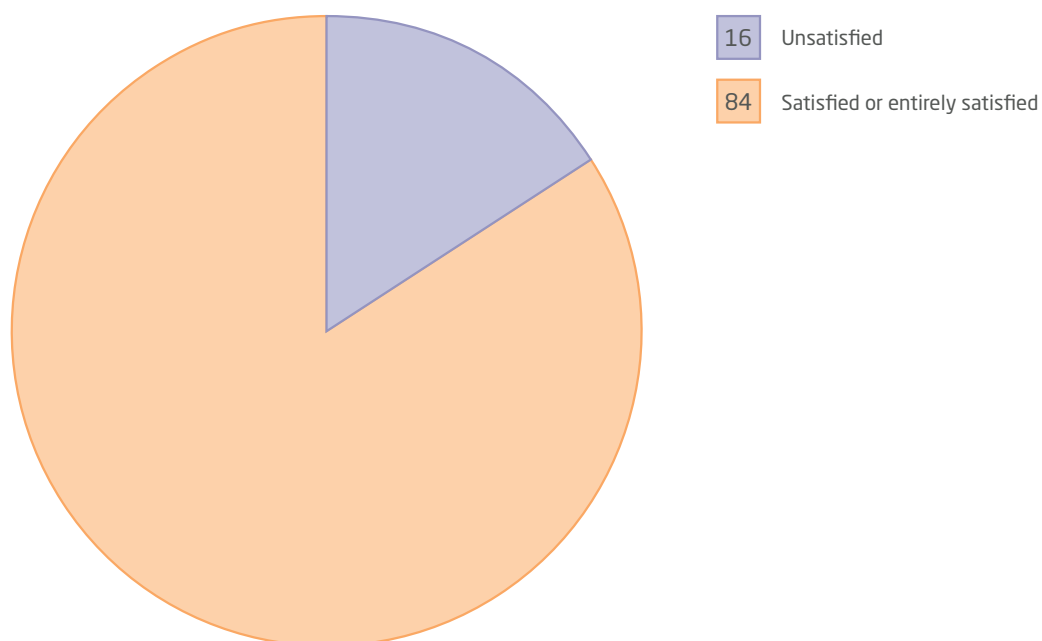
162. This area of work is crucial to allow the OCCS to assist the GOC FtP Strategy for Managing Fitness to Practise complaints more quickly and efficiently. The OCCS and FtP team will continue to hone interaction to enable concerns which do not involve issues of patient safety or significant breaches of Practice Standards can be referred to the OCCS. The objective is to facilitate resolution and addressing the consumers' dissatisfaction while also delivering pro-active improvements across the sector. The experience since 2014 illustrates collaboration can be effective and where appropriate concerns are and can be referred by the OCCS to the GOC.

Feedback



163. All parties are provided with a feedback survey at the conclusion of the referral.

Fig. 9.1 Satisfaction with Outcome (2016-17)



164. 57% of responders have scored their satisfaction with the process is 10/10.

Fig. 9.2 Satisfaction with Overall Experience (2016-17)

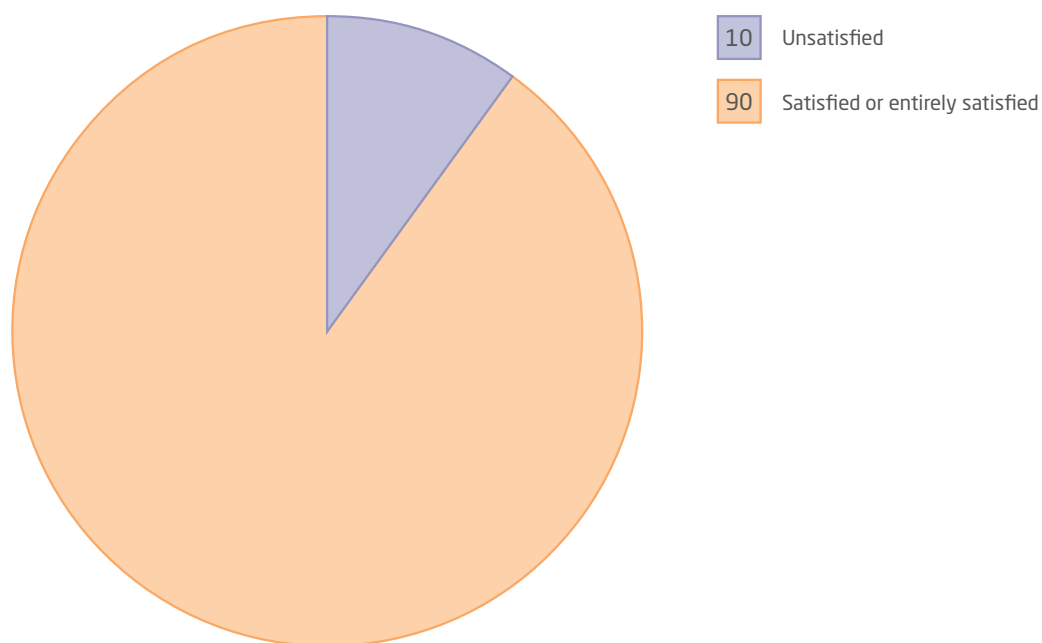


Fig. 9.3 Recommend the OCCS

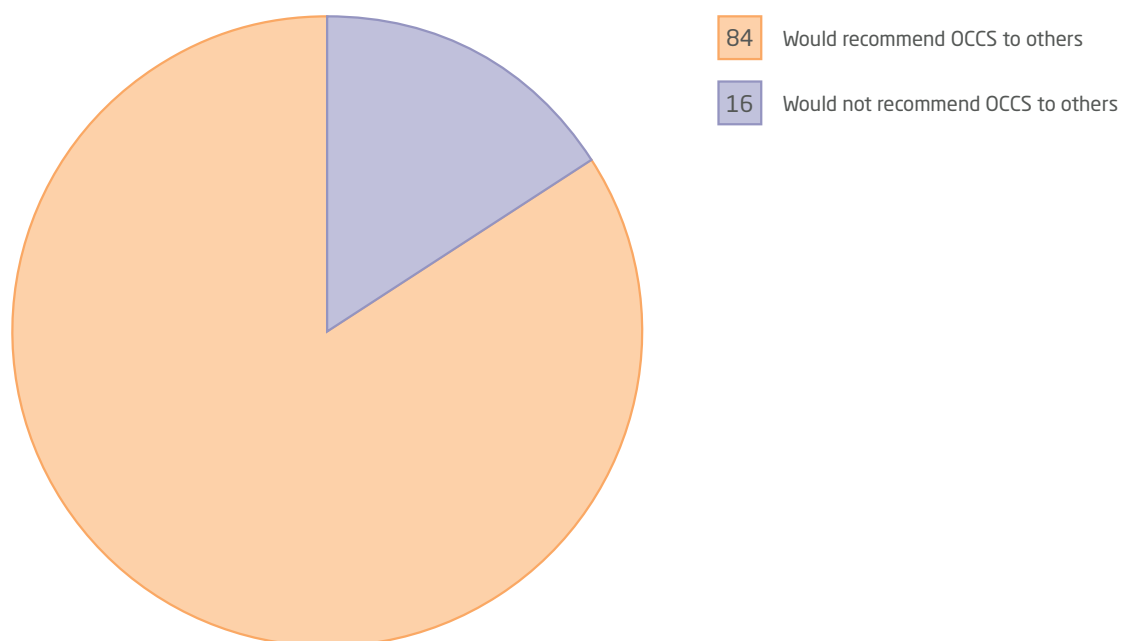
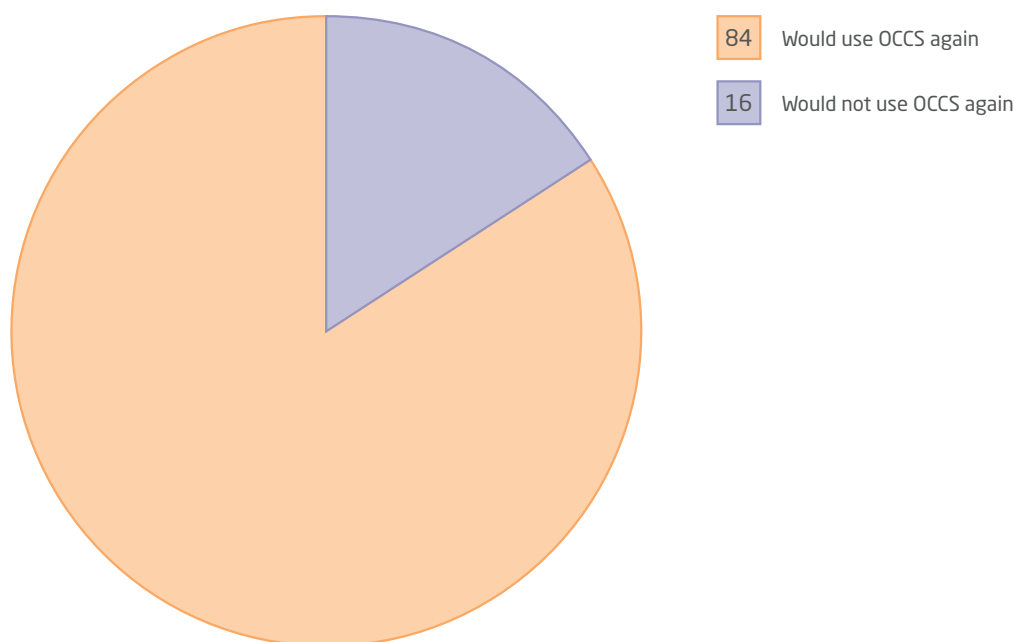


Fig. 9.4 Would You Use the OCCS Again?



- 165.** In addition to the above overall ratings, all responses have been collated to calculate an average response (responses received between 1 April 2016 and 31 March 2017):

Average satisfaction with the outcome	7.2/10 (8.1 @ 31.3.16)
Average satisfaction with the process	8.3/10 (9 @ 31.3.16)

The average ratings have seen a slight decrease during 2016-17. This feedback was primarily driven by increased volume which put the team under great pressure during the year. Having invested in a new web based CRM and recruited some additional administration support, the OCCS are confident this has been addressed. Satisfaction ratings remain consistently high and well above the average for complaint resolution services, which it is believed are in the region of 4/10 (or equating to 40% of responders considered themselves satisfied with the outcome. (footnote ref: Legal Ombudsman 2013-14 and Scottish Public Services Ombudsman 2015-16).

- 166.** In addition, parties are asked to indicate:

1. How easy was it to contact us?
2. How well did we understand your problems and concerns?
3. Are you satisfied with the outcome of the complaint?
4. How did you find your overall experience with OCCS?
5. Did you find our process to be:
 - a. Helpful
 - b. Productive
 - c. Efficient
 - d. Fair
6. How did you find out about our service?
7. Would you recommend the OCCS to others?

8. Would you use us again?

Responders are asked to rate their satisfaction as a score out of ten, with 0/10 being entirely dissatisfied, 5/10 being satisfied and 10/10 completely satisfied.

167. Comments and suggestions are also invited.

	Average Responses
1. How easy was it to contact us?	8.5
2. How well did we understand your problems and concerns?	8.2
3. Are you satisfied with the outcome of the complaint?	7.2
4. How did you find your overall experience with OCCS?	8
5. Did you find our process to be:	
a. Helpful	90%
b. Productive	92%
c. Efficient	90%
d. Fair	87%
6. Would you recommend the OCCS to others?	84%
7. Would you use us again?	84%

168. The response rate equates to 38% of enquiries mediated which is a decrease on 2015-16 response rates (45%). Response rates in feedback requests are consistently falling and according to published data, responses to feedback surveys where there no promotional incentives are given are generally found to be 10-15%. The OCCS are however committed to obtaining feedback from all sources. While practitioner feedback can be gained from stakeholder consultation, complainant feedback is largely dependent on feedback responses, and therefore a key objective for 2017-18 will be to improve response rates.

169. Feedback over the past twelve months:

Everything went well from start to finish. I was treated with such kindness. Nothing can be improved upon.

It was a first class service, provided by really lovely people. Gold Star

They managed to get a solution from a very difficult person

XXXX was incredibly helpful all the way through this process. I cannot thank her enough for her patience and understanding. I rarely complain about anything so I found the necessity to complain itself upsetting. Thankfully XXX and the OCCS made the whole thing much more bearable.

I have nothing but praise. [P] immediately offered a full refund. I met with a brick wall but at your mediation [P] gave me a full refund.

OCCS could not have got a better outcome for me. My communication with OCCS was simple, straightforward and they dealt with my complaint in a very efficient and timely manner.

The issue was handled extremely well from start to finish by XXXX. Would recommend OCCS to other practitioners

Without your help I do not think my complaint would have had such a happy outcome.

The whole process went very smoothly, from the initial complaint -the follow through and resolution - thank you

Excellent service, easy to use and professional approach. Extremely satisfied with outcome. From the start, you were understanding, patient and professional.

Glad the service is available as people in my position find it difficult I to complain

Could man phones better as it's difficult to keep coming back to them

I supposed I was expecting more form the OCCS but it seems your powers are very limited

I emailed all correspondence & records and the result was that we had dealt with the complaint fairly. The OCCS explained this to the patient although she is still unhappy. Overall I felt both sides were treated well and a balanced decision and advice was given

I felt supported throughout and was kept well informed. The process has seemed to go on for a long time.

I appreciate the dedication - I am very pleased with the outcome and thanks to you and your team for all your efforts on my behalf, despite the difficulties with [P].

Satisfaction with OCCS

- 170.** During 2016-17, there was one complaint regarding the OCCS process, from a consumer who was dissatisfied with our mediation approach. The consumer expected adjudication and wanted the OCCS to act as his advocate. The complaint was referred through the OCCS complaint process. Following communication with Jennie Jones, as Head of OCCS, the complaint re-entered mediation and a conclusion was achieved.
- 171.** We continually review the mediation process and the OCCS complaints procedure following this to evaluate and considered how we can improve the service.
- 172.** A written complaints procedure is available to any party who is dissatisfied with the service provided by the OCCS. The complaint procedure has been reviewed as part of the annual evaluation process.
- 173.** Complaints relating to the service provided by the OCCS equate to less than 0.1% of the enquiries received and referrals considered and mediated by the OCCS since 1 April 2014.

Evaluation and Revisions



- 174.** As highlighted in the relevant sections above, the process and activity of the OCCS are continually evaluated to plan and implement adaptations and changes as soon as possible, however specific revisions include:
- **Feedback requests**
- 175.** A new internal complaint management software system was introduced on 1 October 2016. Internal process and documentation reviews were undertaken prior to the introduction of the new system.
- **0344 telephone number**
- 176.** On 1 November 2016, the OCCS introduced a new 0344 telephone number enabling service users to contact the OCCS and incur local rate charges. The 0844 telephone number diverts to the same telephone line. To avoid the need for practices to amend any literature, the OCCS will continue to operate the re-direction until calls cease.
- **Increased use of online complaint form**
- 177.** The website now utilises an online form and any enquiring party is referred to the online form rather than invited to contact the OCCS by email. Telephone enquires are also invited to submit an online complaint form wherever possible as this provides the most cost and time efficient method of providing all information and the equality and diversity data.
- 178.** Evaluation and further development of the OCCS procedures and mediation process will continue on an ongoing basis.
- **Laser Eye Surgery complaints resolution process**
- 179.** The OCCS continue to receive enquiries and referrals concerning laser eye surgery ranging from expectations, outcomes, complaint handling and communication. There is ongoing dialogue with registrants practicing in this area of the sector. As a result of these ongoing discussions, we have seen a commitment from one provider to evolve and further develop their consent process to include customisation which is a positive step in improving the patient experience and minimise the risk of complaints.
- **Improving Accessibility for Vulnerable Consumers 2017-18**

- 180.** The OCCS have embarked upon reviewing the accessibility of the service for Vulnerable Consumers and how we can better understand the most effective way to communicate and reach consumers that may be vulnerable. The OCCS are keen to develop its understanding and approaches towards vulnerable customers. With this in mind it has set up a Working Party Group with representatives from organisations such as Citizens advice & SeeAbility
- 181.** The Working Party Group is chaired by Jennie Jones and its intention is to meet on a 6 monthly basis and to consult with experts & stakeholders throughout the sector. Further representation is being sought from additional organisations which include Age UK, Mind & Alzheimer's UK
- 182.** The OCCS aim to engage with charity sectors, public and trade organisation to canvass expert views, ideas and to develop best practice advice.
- 183.** The implementation plan is at appendix F.
- FTP and OCCS interaction
- 184.** Training was provided by the GOC to ensure the OCCS resolution managers were fully briefed on the new Practice Standards for individual registrants. This was coupled with a process and approach sharing session which was of real benefit for both teams.

Objective and Priorities for 2017-18

- 185.** The evaluation at the conclusion of 2016-17 has informed the objectives and priorities for 2017-18, which have been set as follows:
1. Share insight and analysis from 2016-17;
 2. Implement plan for improved accessibility for vulnerable consumers to the service for consumers with disabilities, measure impact of the plan and further evaluate to deliver further measured improvements for vulnerable stakeholders by improving EDI response rates;
 3. Continue to engage with stakeholders and the professions;
 4. Share the insight into consumer complaints gained by the OCCS with the public and optical 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;
 5. Continue to facilitate the use of OCCS insight and experience to assist practitioners to reduce complaints involving customer communication issues and attitudinal grievances;
 6. Continue to review the OCCS process and interaction with GOC FtP team to maximise the opportunity to provide a proportionate and appropriate dispute resolution service for low level concerns, achieving a more constructive resolution for the parties and releasing resources from the FtP team. In light of the success of the OCCS in achieving resolutions for both practices and consumers, the OCCS and FTP team will explore how low level concerns can be effectively and appropriately resolved within the mediation process offered by the OCCS. The OCCS can also facilitate insight sharing and communication to improve local resolution rates and supporting practices to find practical resolutions to consumer concerns at an earlier stage.
 7. Improve feedback response rates to ensure OCCS effectiveness can be quantified and monitored.
- 186.** This will be reviewed quarterly to measure progress and relevance to the current OCCS service provision and development.

Stakeholder Engagement



11a. Optical Sector Stakeholders

- 187.** Stakeholder activity continued to be a priority for the OCCS during 2016-17. The team have attended meetings and events throughout the year including:
- 100% Optical,
 - AIO conference,
 - Optrafair,
 - Optical Confederation CEO meeting,
 - NOAA meeting
- 188.** In addition, the OCCS team have delivered a number of Multiple group CET events. These meetings have enabled the OCCS to consult with stakeholders and share insights from our data.
- 189.** Of particular note is the work we are doing with the FMO relating to raise awareness of the issues around the dispensing of varifocals and how the sector can facilitate improvements.
- 190.** This year we have made great progress in engaging the membership of the FMO to work with us to address some of the key the issues relating to varifocal non tolerance. We have held workshops from which a clear priority and action plan has now been distilled.
- 191.** In 2017-18 we will be working together to implement this plan raising awareness of the issues and delivering a programme of CET activity to registrants as well as producing staff training materials to ensure improved consistency in varifocal dispensing accuracy.
- 192.** The OCCS will remain focused on ensuring the service is independent and effective, but appreciating the perspective of the practitioner and consumer assists the mediation process.

11b. Ongoing Engagement Opportunities - NHS

- 193.** Complaints concerning care provided under GOS fall within the remit of the NHS complaints teams across the 4 nations and ultimately, the relevant Ombudsman bodies on appeal.
- 194.** During the 2016-17 year, the OCCS has engaged with NHS bodies including the National Optometric Advisers Association in order to:
- Consider the role of the NHS complaints bodies within the optical consumer complaints sector to scrutinise the overlap between the remit of the two complaint systems,
 - Communication pathways particularly for vulnerable consumers;
 - Understand NHS England approach to GOS voucher reversals and administration;
 - Reporting of any safeguarding or public protection concerns;
- 195.** We will therefore look to further engage with the NHS bodies and Ombudsmen into 2017-18 to develop additional strategies and communication pathways across the 4 Nations.

11c. Consumer Stakeholders

- 196.** In terms of consumer stakeholder engagement, the OCCS have centred this activity around accessibility for vulnerable consumers. Over the summer we researched and approached those who can provide insight and perspective to allow us to further develop tools and approaches that will facilitate improved accessibility for vulnerable consumers. This will include:
- Consumers with disabilities
 - Consumers seeking domiciliary optical care
 - Consumers whose first or only language is not English
 - Consumers who may be more vulnerable due to age, isolation and other social factors.
- 2.** A working party has been convened inviting representatives from:
- SeeAbility
 - Citizens Advice Bureau
 - Trading Standards
 - Age Concern
 - MIND
 - GOC
- 3.** The aim of the working party has been to consider the needs of vulnerable consumers and explore strategies to assist in accessing the service and ongoing communication and engagement with the OCCS during the course of mediation.

Practitioner & Public Communication



12.1 Rebranding

- 197.** During Q1 and Q2, the OCCS and the GOC reviewed the effectiveness of the OCCS as a brand and name for the service. Consideration was given to including mediation within the name of the service. Feedback had been received during the course of the past year that the name OCCS did not reflect the impartial nature of the service. Some felt it suggest the service was predominantly a consumer advocate service.
- 198.** This view was weighed against the profile gained over recent years and the work undertaken in raising awareness. In light of the costs involved to the GOC, OCCS and practices across the UK and the overwhelming views expressed by stakeholders that the OCCS name was known and the role of the service understood, the decision was taken to continue to operate using 'The Optical Consumer Complaints Service'.

Communication Activity - Website

- 199.** The www.opticalcomplaints.co.uk continues to provide online information and methods of communication for the OCCS. The domain name was acquired by the GOC in 2016-17 and the website plus content is supplied by the OCCS.

	1st April 2016 - 31st March 2017	1st April 2015 - 31st March 2016	Percentage Change
Visitors	20,798	14,560	42.8%
Page Views	38,911	28,013	38.9%
New Visitors	17,266	12,105	42.6%
Avg. Time Spent on Site	01:20	01:23	
Top Referrer	which.co.uk	which.co.uk	
Top Page	Resources - FAQs	Resources - FAQs	

- 200.** The online complaint form was revised this year and all communication via the website is being directed towards this medium to ensure consistency and to increase Equality & Diversity Information responses.
- 201.** OCCS will continue to develop the website by updating:
- Additional online guidance to consumer which will be informed by common and frequently asked questions received via the 0344 telephone line and emailed queries;
 - Contact details of multiple customer care teams
 - Contact details for complaints concerning Independent practitioners

Social Media Presence

- 202.** Our twitter feed continues to be used as a channel of communication and to distribute news, media comment and guidance. There has been increased social media activity throughout 2016-17 in order to maintain and raise the profile of the service.
- 203.** For example, the twitter feed has over 200 followers and tweets focus on key service user information and sharing event activity.

Newsletters and Information Publications

- 204.** All GOC registrants and practitioner service users receive regular newsletters. These have covered articles on 2015-16 activity, dispensing challenges in varifocal supply and contact lens supply.
- 205.** The consumer newsletters are circulated to consumer groups, NHS bodies, consumer protection organisations and charities.

Optical Media

- 206.** There is ongoing interaction with the optical media. To date, the OCCS has been profiled or mentioned in:
- Optometry Today
 - Bi-monthly articles in The Optician

12.2 Practitioner Communication

- 207.** Individual practitioners are increasingly contacting the OCCS to ask questions and seek guidance. The OCCS are delighted to speak to both parties and happy to talk through situations with practitioners to assist in resolving complaints without our involvement.
- 208.** Further publication of guidance and advice on how to minimise complaints, complaints handling and key relevant trend topics has taken place throughout the year, namely via bimonthly articles in Optician Magazine. These have covered subjects such as varifocal dispensing through dispute resolution to Contact lens complaint management.
- 209.** During the year there has been ongoing operational contact between the OCCS resolution team and the Practice Standards and Customer Care teams at:
- Asda Opticians
 - Boots Opticians
 - Optical Express

- Outside Clinic
- Scrivens
- Specsaver
- Tesco Opticians
- Vision Express

Annual meetings are now planned with multiples and corporates in the sector.

- 215.** The OCCS are also working closely with the AIO in order to support their development of the AIO code and provide independent means of redress to underpin this initiative
- 216.** The OCCS attended 100% Optical, Eyecare and Optrafair events as a CET provider.
- 217.** The bedrock of our CET work has been the workshop Customer Complaint management-prevention is better than cure. The OCCS have provided this event at numerous LOC meetings this year. We plan to deliver the session at Northern Ireland optometric Society this year thus marking the coverage of all four home nations.
- 218.** Richard Edwards has presented the session for most of the multiple groups at their annual conferences including Specsavers, Boots, Asda and Vision Express
- 219.** The OCCS are an approved CET supplier for the General Optical Council and are happy to work with any Local Optical Committee who would like to discuss the option to deliver a CET peer group discussion at a future event (Richard.edwards@optomiseconsulting.co.uk). These sessions allow direct interaction between practitioners and the OCCS team. There are multiple benefits including insight sharing and reassuring practitioners that the OCCS is independent, non-judgemental and supportive to all parties.

12.3 Consumer Communication

- 210.** During 2016-17 the OCCS has continued targeted profile raising consumer activity.
- 211.** There are links to the OCCS website via other key consumer organisations such as Which? relevant NHS websites, other consumer protection groups and charities. The Which? website is now the top link into the OCS website (after search engines).
- 212.** Of particular note this year was the participation of OCCS in September 2016 WHICH? & Consumers Association Optician phone in. The team were inundated with calls across a whole range of optometric and consumer issues and we look forward to contributing to this event again in the future.
- 213.** Citizens Advice have also agreed to distribute updated guidance to all advisors and volunteers to ensure the availability of the OCCS is known and communicated to consumers contacting CABs across the UK.
- 214.** 2016-17 saw the OCCS consult consumer stakeholders on the project to improve accessibility for vulnerable consumers. The working party has met twice and a plan (at appendix F is being implemented throughout 2017-18. The aim is to improve access to the service for those vulnerable consumers who have a complaint regarding their optical practice and to then enhance the effectiveness of the service for vulnerable consumers who have need to refer a complaint to the OCCS.
- 215.** The OCCS will also provide relevant information to consumer and mainstream press as appropriate, and consider any opportunity for useful comment or insight relating to the optical sector in the consumer media.

Conclusion



- 216.** The independent and proactive mediation approach of the OCCS has delivered another effective year of complaint mediation in the optical sector 2016-17. Ongoing engagement with practices and stakeholders has enabled the OCCS to achieve high resolution rates for practices and consumers, while investing insight gained to support sector wide improvements through stakeholder interaction and support.
- 217.** A 45% increase in activity and enquiries received at the OCCS has required an increase in resources but the commitment of the OCCS team and the effectiveness of the mediation model has enabled the OCCS to maintain the resolution rates of 98%.
- 218.** Learning from complaints and using these to identify risks to consumer safety and confidence means a negative experience can be converted to a positive outcome. The OCCS see it as fundamental to our mission to help make this a reality and the delivery of CET events combined with collaborative approach as evidenced in our work with FMO reflects our commitment to driving up standards in the sector.
- 219.** A key element of the OCCS role is to ensure consumer concerns and complaints are resolved in a proportionate manner, thereby allowing serious and significant conduct and fitness to practise matters to be dealt with the GOC as part of their regulatory duty. During 2017-18 & 2018-19, the OCCS will continue to utilise our influence and ability to share best practice in customer care and complaint handling to minimise protracted damage to consumer trust and relationship with optical professionals generally. We will continue to work collaboratively with the GOC FtP team to explore how this independent and proportionate approach can be used to deliver solutions and redress for the public while minimising the overall sector impact of unnecessary escalation of complaints to either legal or disciplinary proceedings.
- 220.** Objectives for next year have been set as follows:
1. Share insight and analysis from 2016-17 to raise awareness of the OCCS and support the sector in improving local and early resolution of complaints;
 1. (pls also insert this amend in the table of objectives in Exec Summary and section 10 - evaluation);
 2. Supporting the GOC Strategy for Managing Fitness to Practise, by identifying and implementing ongoing plans to assist the FtP team to conclude FtP complaints more quickly and effectively and in the delivery of the milestones to track the Strategy's progress. Over the coming year, by revisiting the Working Together Policy and implementing defined initiatives to further develop collaboration in the early stages of the FTP process, we can maximise the benefits to be gained from the mediation approach of the OCCS.

3. Implement plan for improved accessibility for vulnerable consumers to the service for consumers with disabilities, measure impact of the plan and further evaluate to deliver further measured improvements for vulnerable stakeholders;
4. Continue to engage with stakeholders and the professions;
5. Supporting the optical sector to review and deliver improvements in varifocal dispensing to enhance the patient experience and reduce the consumer complaints circumstances involving the supply of multi focal lenses;
6. Share the insight into consumer complaints gained by the OCCS with the public and optical 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;

Should any queries or matters for discussion arise from this report, please contact Jennie Jones on 01279 712580 or jenniejones@opticalcomplaints.co.uk

Appendix A:

Mediation Process

Step 1 - Party Contacts OCCS with Enquiry

Ask the enquirer to give details of their enquiry and circumstances of their complaint.
Review enquiry and ensure the circumstances fall within the remit of the OCCS.



Within OCCS remit?



Complaint Mediated by OCCS

Ask consumer to provide signed consent form to allow the practitioner to release their records and any personal information held.
Upon receipt of consent, forward it to the practice and speak to the practitioner to see if the complaint can be resolved immediately.

Enquiry is Outside Remit of OCCS

Consumer is signposted to the relevant organisation with a full explanation as to why the OCCS cannot assist.



Feedback

Request feedback from the consumer and practitioner.



END OF OCCS INVOLVEMENT



Step 2 - Gather Information

If it cannot be resolved and is appropriate forum, then make further enquiries, including obtaining copies of optical records.
Ask both parties to provide equality and diversity information.
If there is any delay in gathering all the relevant information, update the consumer and/or the practitioner.

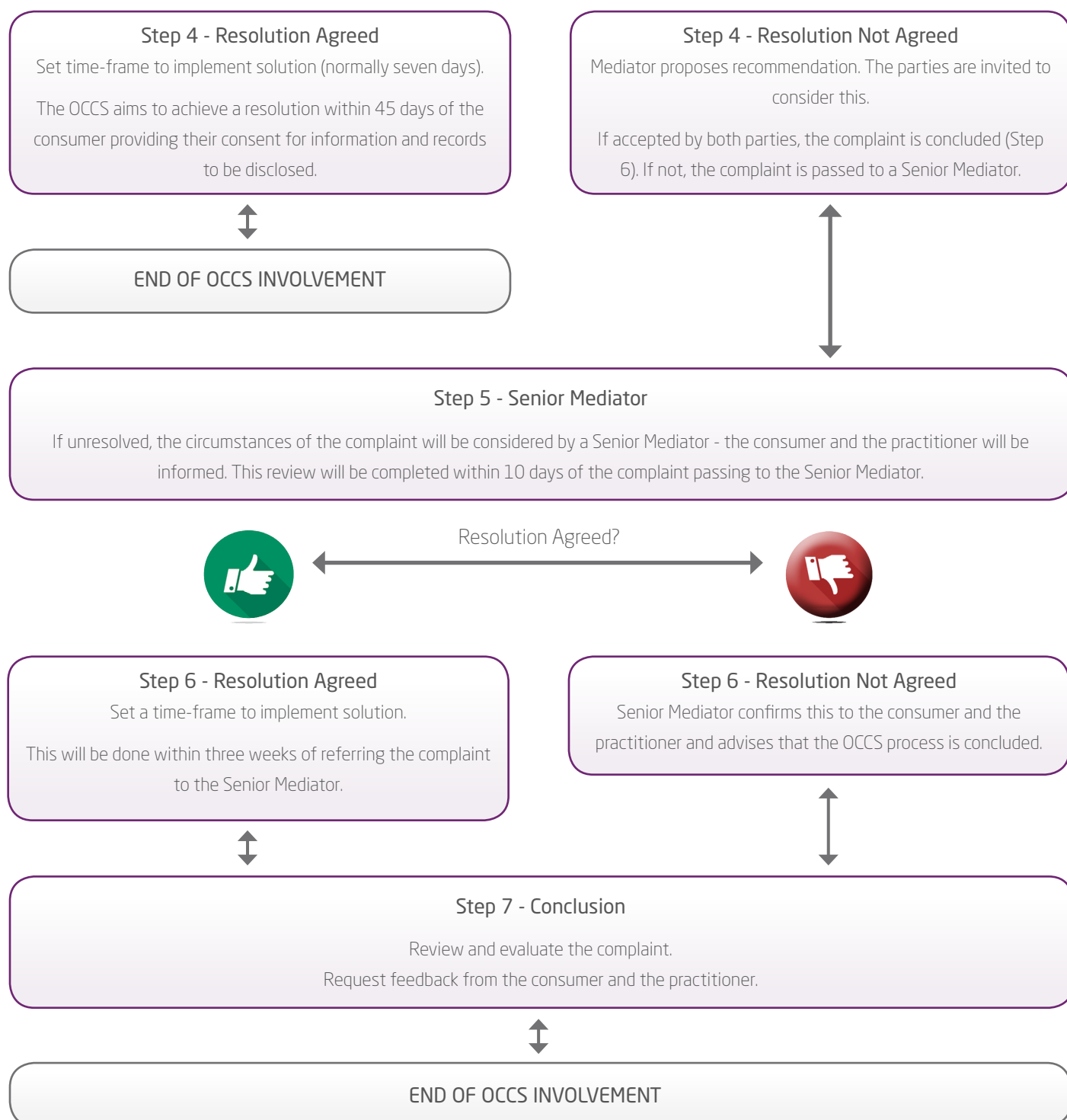
Step 3 - Gather, Review and Mediate

Review the information and establish what has happened. Identify if, or where, there is any factual disagreement, the desired outcome and opportunities for compromise.
Confirm the details with both the consumer and practitioner. At this stage, the mediator seeks to help those involved to find a solution.



Resolution Agreed?





Appendix B:

Enquiries Status

Status	Total 1.4.2014 to 31.3.2017		Total 1.4.2016 to 31.3.2017		Total 1.4.2015 to 31.3.2016		Total 1.4.2014 to 31.3.2015	
Enquiries	2,987		1,399		969		622	
Consumer Complaints								
Preliminary enquiry prior to any complaint raised by consumer	1,307	43%	636	48%	495	66%	204	34%
Party contacts OCCS for advice	189	6%	191	14.5%				
Mediated by OCCS								
Consumer did not pursue (circumstances fall within OCCS criteria but Consumer opts to take no further action or does not return consent form)	266	9%	93	7%	96	10%	65	11%
Of those complaints mediated by OCCS:								
Resolved	850	29%	297	26%	240	31.7%	227	38%
Currently in active mediation	35		35	5%	42	2.6%	26	4%
No resolution agreed	54	1.8%	19	1.2%	10	1.3%	10	2%
Of those resolved following referral to Senior Mediator team (i.e. appeal)	5	0.2%	0	0%	1	0.1%	4	0.7%
Circumstances outside remit of the OCCS	267	10%	47	3.5%				
Practitioner not regulated by GOC	50	2%	14	1%	14	1%		
Circumstances relate to professional conduct and Fitness to Practise issues	76	3%	12	1%	10	6%		
Other (e.g. clinical negligence, non-consumer issue)	141	5%	21	1.6%	50	8%		

Appendix C:

Categories of Complaint 16-17

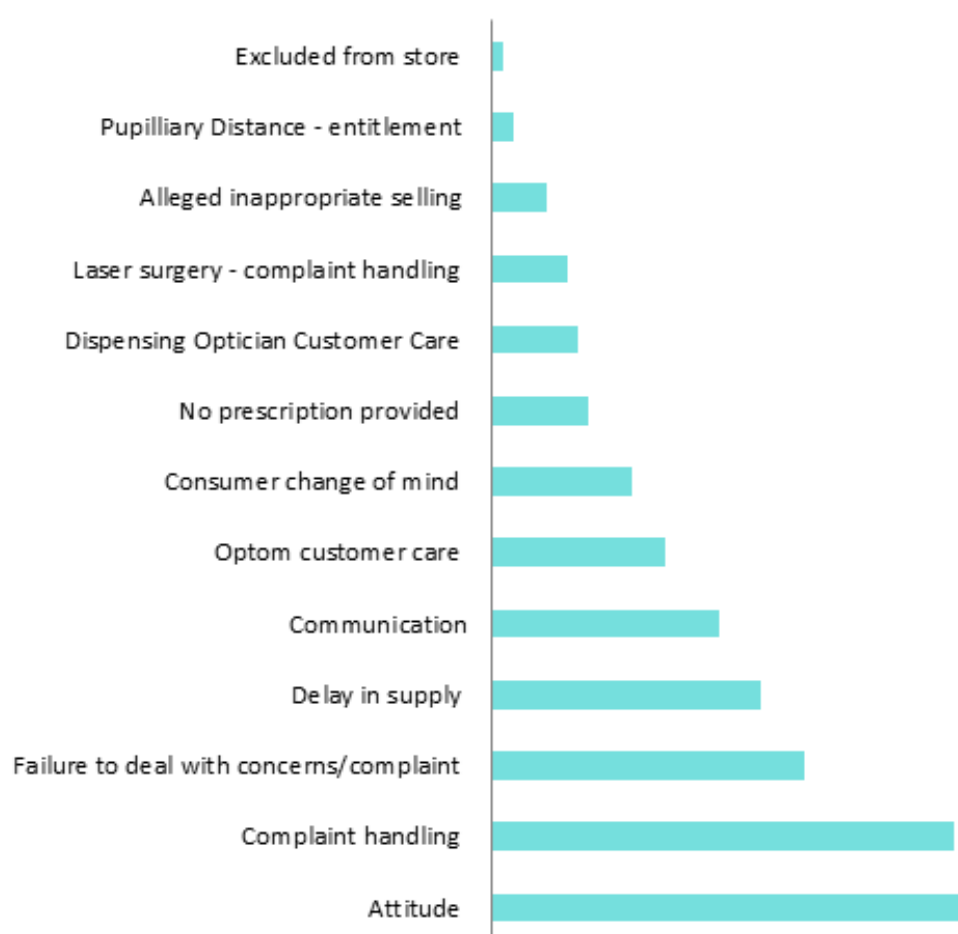
Categories of Primary Complaint - Current

Primary category	Issues recorded in the category
Customer Service Issues	Communication issues, delays, complaints handling issues, customer service
Quality of services and goods	Concerns regarding clinical care provided, Complaints regarding quality of products & dissatisfaction with adjustments
Charges and fee issues	Concerns regarding charges and fees
Other	Issues not covered by the above categories

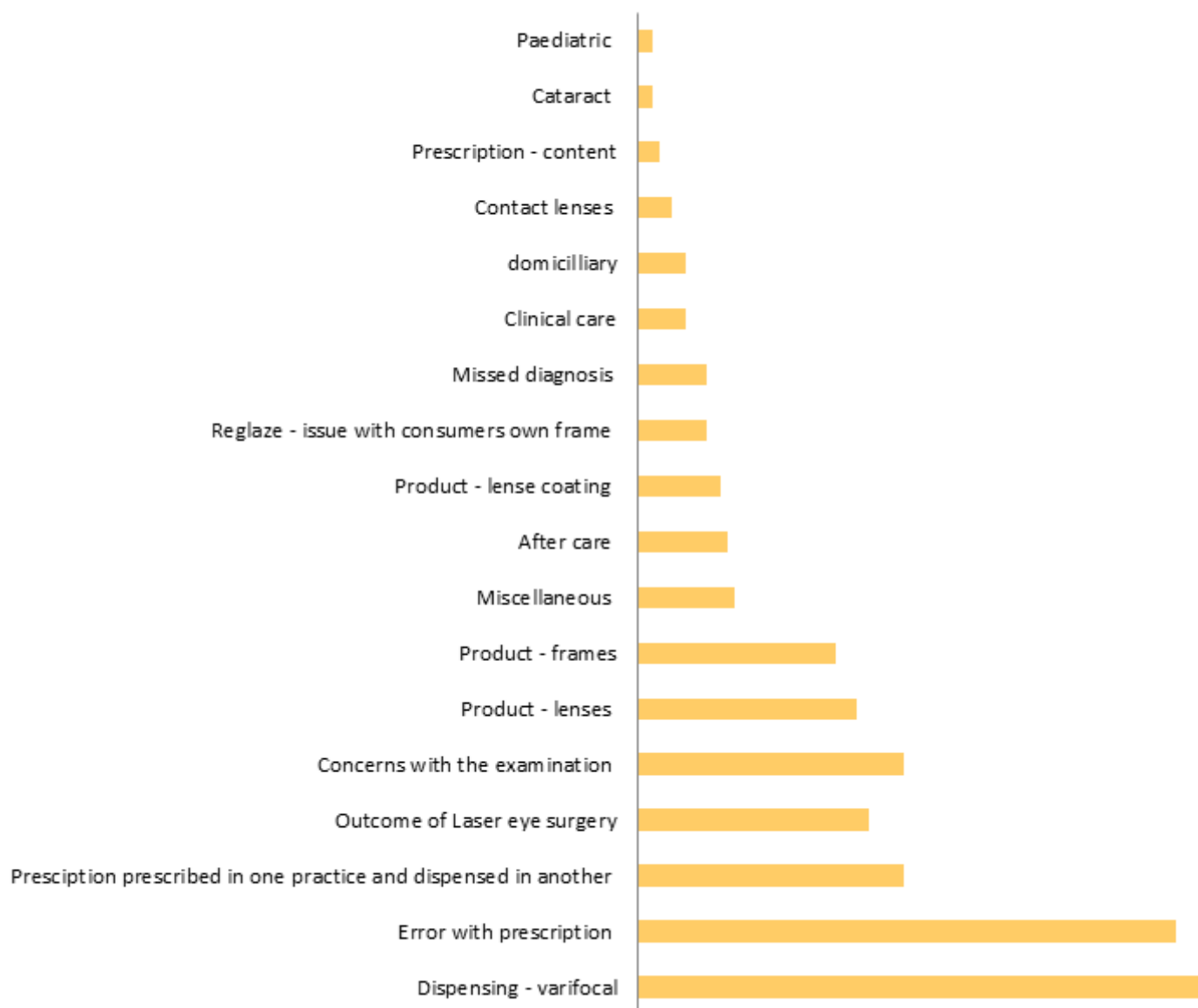
Appendix D:

Primary and Secondary Reasons for Complaints

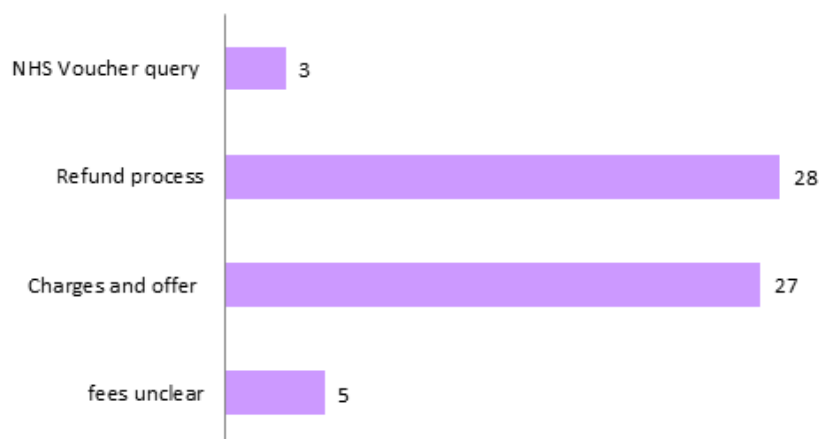
Customer care - circumstances of complaint (2016-17)



Goods & Services - complaint circumstances (2016-17)



Costs and fees (2016-17)



Appendix E:

2016-17 Guide: The Customer Experience and Expectations in Optics

An accessible summary of this report will be published in August 2017.

Appendix F:

Improving Accessibility: Vulnerable Consumers

The OCCS have embarked upon reviewing the accessibility of the service for Vulnerable Consumers and how we can better understand the most effective way to communicate and reach consumers that may be vulnerable. The OCCS are keen to develop its understanding and approaches towards vulnerable customers. With this in mind it has set up a Working Party Group with representatives from organisations such as Citizens advice & SeeAbility

The Working Party Group is chaired by Jennie Jones and its intention is to meet on a 6 monthly basis and to consult with experts & stakeholders throughout the sector. Further representation is being sought from additional organisations which include Age UK, Mind & Alzheimer's UK

The OCCS aim to engage with charity sectors, public and trade organisation to canvass expert views, ideas and to develop best practice advice.

Access	1. Improve OCCS website links to SeeAbility	Completed
	2. Produce OCCS literature in easy read format for review by working party	Drafting in progress
	3. Investigate opportunity Videos on website - how to complain, how to contact us, what is mediation??	Currently under review
	4. Review/improve communication pathways with NHS England/NHS Scotland/ Wales & NI - collaboration where overlap NHS complaint issues & raise awareness	Planned interaction 2017-18
	5. Review and circulate LD pathways - OCCS awareness	Completed
	6. Awareness campaign with LD and other vulnerable consumer charities: a. SeeAbility conference b. National Family Carers Network c. National forum for LD d. CAB e. Age Concern f. MIND g. Alzheimer's UK	Planned activity 2017-18
Effective Mediation & Solution	7. Source mental health issues training and how to assist/engage/interact with consumers experiencing mental health issues - MIND	Sourced
	8. Explore SeeAbility training on how to engage with people who have LD	Sourced and conducted May 2017
	9. Contact list for advocacy services across the UK	Being compiled
	10. Safeguarding for vulnerable consumer policy to be devised for discussion with working party	Draft in progress

Appendix G:

Activity Summary 2016-17

Date	Location	Activity
April 20	Wigan LOC	CET
May 10	VE Bristol	CET
May 18	VE Birmingham	CET
May 19	VE Nottingham	CET
Aug 16	Optician Article	Managing Complaints
May 25	VE London	CET
Sept 19	Dudley LOC	CET
Sept 20	VE York	CET
Sept 25	ABDO Peterborough	CET
Oct 5	VE Croydon	CET
Oct 5	Boots Bexleyheath	CET
Oct 9	AIO Cardiff	CET 2 lectures
Oct 16	Optician Article	Record Keeping
Oct 16	Joint Healthcare Regulators Equality Diversity Forum	OCCS Attendance
Oct 18	VE Nottingham	CET
Oct 18	Ipswich LOC	CET
Nov 6	Boots Manchester	CET
Nov 10	VE Edinburgh	CET
Nov 13	Boots Birmingham	CET
Nov 14	Preston LOC	CET 3 lectures
Nov 16	Asda Leeds	CET
Dec 6	Lincoln LOC	CET
Dec 16	1st meeting - Working party	Accessibility for vulnerable consumers
Jan 17	Optician Article	How to write a complaint letter
Jan 17	SeeAbility	Training delivered to OCCS team - Managing complaints for Consumers with Learning Disabilities
Jan 20	CCC Conference	CET Lecture
Jan 23	Eyecare Glasgow	CET Lecture
Feb 4	100% London	Sponsorship - Award
Feb 6	100% London	CET Lecture
March 13	Preston LOC	CET Lecture
March	Optician Article	Contact lens research - how to reduce complaints
March	Joint Healthcare Regulators Equality and Diversity Forum	OCCS Attendance
April 1	Optrafair Birmingham	CET Lecture & Award Sponsorship

Appendix H:

Details provided to GOC FTP Team

Format of report - matters referred to GOC Fitness to Practise team.

OCCS ref	Consumer	Date received	Nature of complaint	Date referred to FTP
56/0000X	Z, Mrs A	05.04.14	04 Indifference to concerns	27.5.15

Appendix I:

Feedback Survey



OCCS Satisfaction Survey

We are committed to maintaining a high level of service to both Consumers and Optical Practitioners. Your comments will help us to assess the overall quality of our service and whether we are meeting your expectations. We would therefore be grateful if you could take a few moments to complete this questionnaire and send it to us.

How easy was it to contact us? *

1 2 3 4 5 6 7 8 9 10

Very difficult ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Very easy

How well did we understand your problems and concerns? *

1 2 3 4 5 6 7 8 9 10

No understanding ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Completely understood

Are you satisfied with the outcome of the complaint? *

1 2 3 4 5 6 7 8 9 10

Very dissatisfied ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Very satisfied

How did you find your overall experience with OCCS? *

1 2 3 4 5 6 7 8 9 10

Very dissatisfied ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Very satisfied

Did you find our process to be:

✓ Helpful

✓ Productive

✓ Efficient

✓ Fair

How did you find out about our service? *

OCCS website	General Optical Council	Optician
NHS	Citizens Advice Bureau	Trading Standards
Charity - Optical	Charity - Other	Google
Other		

Would you recommend the OCCS to others? *

☐ Yes

☐ No

Would you use us again? *

☐ Yes

☐ No

Your unique reference number *

This can be found on the email we sent you

Thank you for taking the time to complete this questionnaire. Please now click Send

Send



Optical Consumer Complaints Service
6 Market Square, Bishop's Stortford, Herts CM23 3UZ
Tel: 0844 800 5071
enquiries@opticalcomplaints.co.uk
www.opticalcomplaints.co.uk