

Annual Service User Feedback Report 2022/2023

Introduction

The Southern Health and Social Care Trust (SHSCT) delivers services and treatment to a population of approximately 388,700 within its area, with an annual budget of £1008 million and a workforce of 16,111 (12,768 Whole Time Equivalent) staff and managing an estate of £354 million.

Within 2022-23 the SHSCT provided treatment and care for;

47,842 inpatients

36,420 out-patient day cases

162,676 A&E patients

4,934 births

Patient experience and involvement is an extremely important and valuable resource to the Trust. The SHSCT want to give the best service to all residents, services users and clients, and their relatives and carers. The vast majority of service users who receive treatment and care from SHSCT have a positive experience while being cared for by well trained, professional and supportive staff, all of whom are highly dedicated. However like any organisation, things can go wrong and when this is the case the Trust make it their goal to listen, learn and improve.

The Trust aims to continually improve and those who have experienced or observed services can help to inform learning and improvement by sharing their experiences.

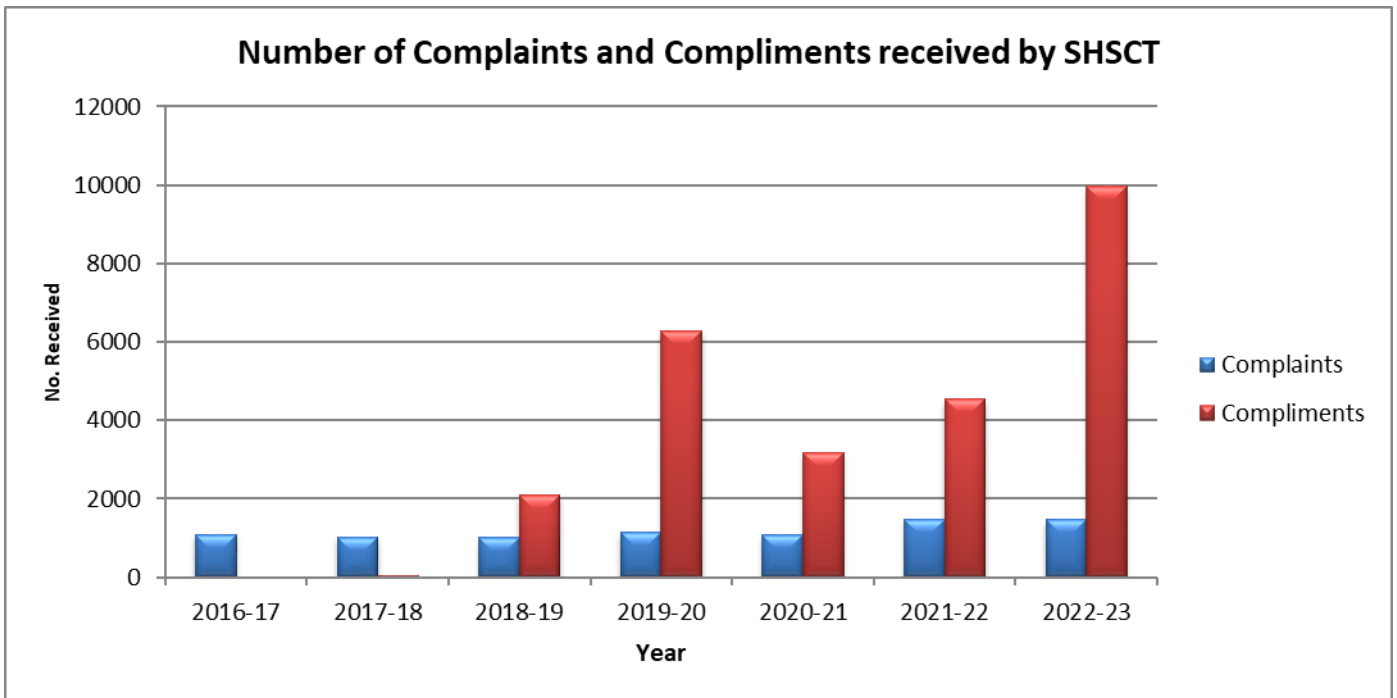
Complaints and Compliments

Regionally, complaints are categorised and reported by the subject within a complaint. One complaint letter may have multiple complaint subjects and one compliment may have more than one compliment subject.

During the past year (2022/23), the SHSCT has seen a slight decrease in the number of formal complaints by subject and an increase in the number of compliments by subject recorded.

As illustrated in Chart 1, the Trust received 1476 subjects of complaints and 9969 subjects of compliments in 2022/23.

Chart 1: Number of Complaints and Compliments received by SHSCT April 2016 - March 2023



Complaints can be multi-faceted, involving multidisciplinary teams and relate to events over a short or extended period of time. Complaints regarding Quality of Treatment and Care, Communication, Staff Attitude and Behaviour, Wait Times and Professional Assessment of Need are the top five areas of complaints within 2022/23; see Chart 2 below.

Chart 2: Top 5 Complaint Subjects April 2022 – March 2023



Top 10 Complaints by Subject

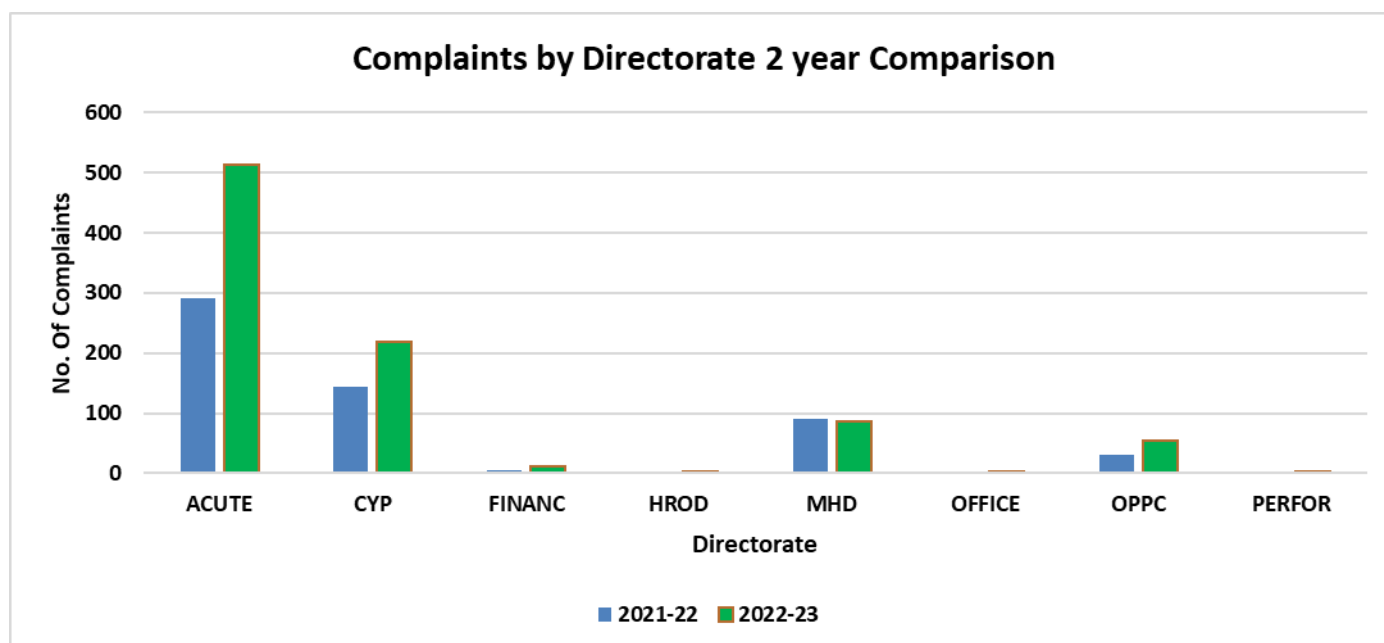
Details of the top 10 complaint subjects in percentage for the reporting year 2022 - 2023 can be found in Table 1, with comparative information for the previous reporting year 2021 - 2022.

Table 1: Percentage of Top 10 Complaint Subjects

Complaint Subject	Percentage Share of Total Complaints							
	Apr-Jun 21	Jul - Sep 2021	Oct - Dec 2021	Jan - Mar 2022	Apr - Jun 2022	Jul - Sep 2022	Oct - Dec 2022	Jan - Mar 2023
Quality of Treatment & Care	18.47%	19.19%	18.84%	20.25%	16.15%	20.78%	20.63%	21.67%
Communication/Information	28.41%	19.91%	28.57%	20.99%	17.19%	15.66%	19.50%	21.39%
Staff Attitude/Behaviour	15.06%	18.96%	19.45%	17.78%	19.53%	17.17%	14.74%	16.94%
Waiting Lists/Times	6.82%	9.00%	7.29%	10.12%	13.54%	12.35%	12.70%	10.00%
Quantity of Treatment & Care	2.84%	1.90%	3.04%	3.95%	3.65%	3.01%	3.63%	6.67%
Professional Assessment of Need	11.93%	7.82%	6.08%	5.19%	6.51%	6.33%	7.71%	4.72%
Policy/Commercial Decisions	1.14%	4.27%	2.74%	2.96%	4.69%	3.61%	3.85%	3.33%
Clinical Diagnosis	2.84%	5.45%	2.43%	2.47%	4.17%	4.22%	4.76%	3.06%
Property & Expenses	3.00%	3.00%	3.00%	2.00%	2.00%	2.00%	2.00%	0.00%
Confidentiality	1.00%	1.00%	1.00%	1.00%	1.00%	1.00%	2.00%	0.00%

Throughout the year, the SHSCT received complaints about many aspects of the services provided across a number of Directorates. The number of complaints received per Directorate over the last two years from April 2022 to March 2023 in Chart 3, highlights Acute and Children and Young People Services Directorates have consistently received the largest number of complaints within this period, which is typical given the level of activity and nature of the services they provide.

Chart 3: Complaints by Directorate



A further breakdown of complaints received this year (Table 2) identifies the top five subjects of complaints which account for the highest percentage of complaints, Quality of Treatment and Care, Communication and Information, Staff Attitude and Behaviour, Wait Times and Professional Assessment of Need.

It is important to note that Complaints can have more than one subject area.

Table 2: Complaint Subjects

Subjects per Complaint	2021-22		2022-23	
	Count	Percentage	Count	Percentage
Quality of Treatment & Care	289	19.45%	296	20.05%
Communication/Information	359	24.16%	270	18.29%
Staff Attitude/Behaviour	267	17.97%	251	17.01%
Wait time	127	8.55%	183	12.40%
Professional Assessment of Need	115	7.74%	95	6.44%
Clinical Diagnosis	51	3.43%	65	4.40%
Policy/Commercial Decisions	44	2.96%	58	3.93%
Quantity of Treatment & Care	43	2.89%	57	3.86%
Property/Expenses/Finances	45	3.03%	32	2.17%
Privacy/Dignity	12	0.81%	24	1.63%
Discharge/Transfer Arrangements	24	1.62%	22	1.49%
Confidentiality	14	0.94%	21	1.42%
Environmental	11	0.74%	20	1.36%
Other	13	0.87%	18	1.22%
Records/Record Keeping	16	1.08%	16	1.08%
Discrimination	4	0.27%	9	0.61%
Access to Premises	2	0.13%	7	0.47%
Aids/Adaptions/Appliances	9	0.61%	6	0.41%
Consent to Treatment/Care	1	0.07%	6	0.41%
Delay/Cancellation for Inpatients	4	0.27%	4	0.27%
Hotel/Support/Security Services (Excludes Contracted Services)	4	0.27%	4	0.27%
Infection Control	22	1.48%	4	0.27%
Transport, Late or Non-arrival/Journey Time	2	0.13%	4	0.27%
Contracted Independent Hospital Services	0	0.00%	1	0.07%
Contracted Regulated Children's Services	0	0.00%	1	0.07%
Delayed Admission from A&E	2	0.13%	1	0.07%
Transport, Suitability of Vehicle/Equipment	1	0.07%	1	0.07%
Complaints Handling	1	0.07%	0	0.00%
Contracted Regulated Domiciliary Agency	1	0.07%	0	0.00%
Mortuary & Post-Mortem	2	0.13%	0	0.00%
Other Contracted Services	1	0.07%	0	0.00%
	1486	100.00%	1476	100.00%

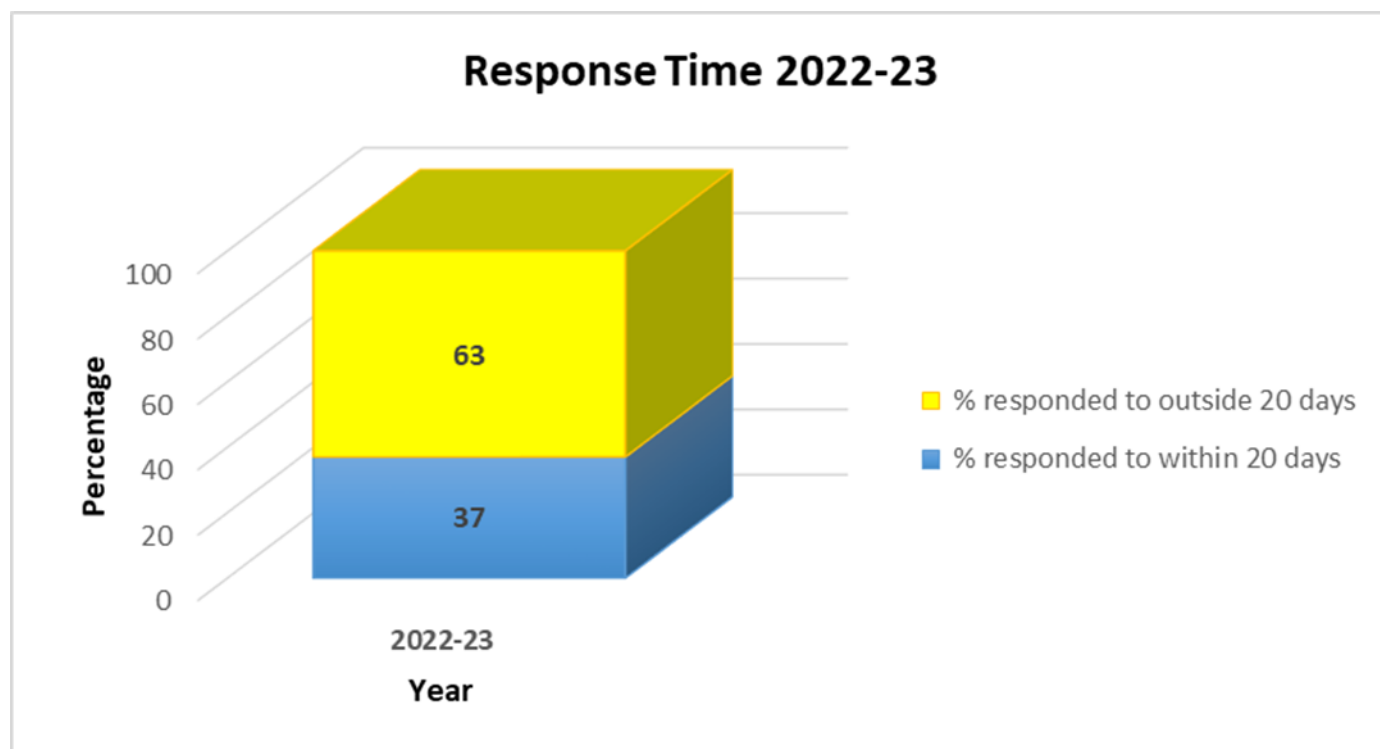
Response Times

Where possible, the Trust will seek to resolve complaint issues using local resolution, this can be less distressing for service users and their families, providing a positive outcome. However, there will be times when local resolution is not possible and the formal complaints process is required.

The HSC Complaints Policy requires Trusts to provide an acknowledgement to the complaint within two working days and a formal response to the complainant within 20 working days of receipt of a complaint and where applicable following receipt of valid consent. If the Trust requires more time to complete a thorough investigation, the complainant is notified formally using a holding response letter explaining the reason for the delay. The Trust often offers meetings with complainants and the relevant clinical teams to assist with resolution of their complaint. Throughout the complaints process the SHSCT aims to provide the complainant with a positive experience aiming to resolve issues identified within the complaint. The Trust values all service user feedback and will use this as an opportunity to learn, putting measures in place to improve services.

99% Complaints Acknowledged within two Working Days

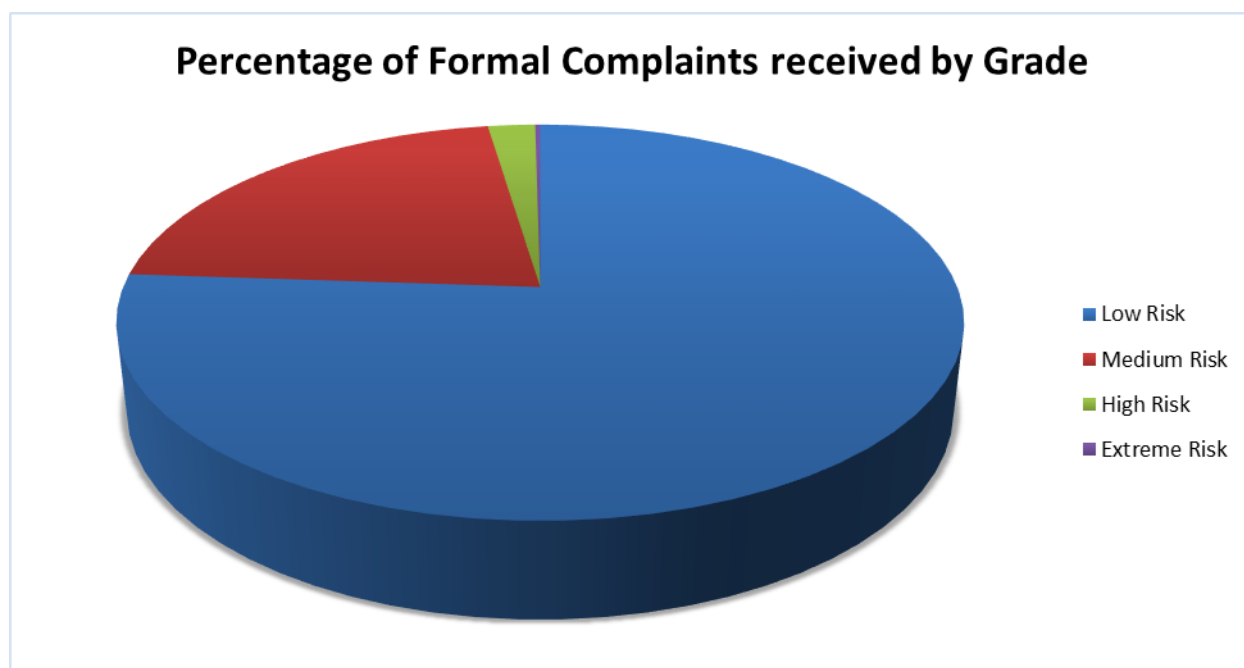
Chart 4: Response Times 2022-23



Complaints received by Grade

All formal complaints received by the SHSCT are assessed, risk evaluated and graded according to severity by the individual Directorate Governance teams. The severity will either be Low, Medium, High or extremely High. As demonstrated in Chart 5, of the formal complaints received in 2022-23; 76% were Low Risk, 22% were graded as Medium Risk, 2% as High Risk and 0.2% as extreme High Risk.

Chart 5: Percentage of Complaints by risk grade



Learning from Complaints

The Trust continues to investigate complaints in an open and transparent way, using concerns raised through the complaints process as an important source of information for safety and quality improvement.

Sharing the outcome and learning from complaints investigations is one of the ways the Trust improves the experience of people using services, and ultimately the safety and quality of the treatment and care provided. Within the Trust, it is the responsibility of all staff to utilise the information and trends from complaints to ensure learning and continuous improvement takes place. This information is shared at the Trust's Governance forums, as well as being directly fed back to staff involved. Regular analysis of complaint reports are shared at Senior Leadership Team Governance meetings, Directorate meetings and Patient Client Experience Committee to highlight themes and trends across the Trust to ensure the Trust is continuing to listen, learn and improve.

In addition to the Strategic Planning and Performance Group (SPPG) complaints classification, the Trust uses the 'Health Care Analysis Tool' (HCAT) to further analyse complaints from service users. This enables organisational listening through aggregating individual healthcare complaints so that service users concerns can facilitate service monitoring and organisational learning.

The Trust reviews complaints processes by auditing complaints and complaint responses – to work towards improving complaints processes and management systems.

Below are two examples of how learning from complaints has changed practices within the Trust.

Complaint 1	
Complaint Subjects	Quality of Treatment and Care
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>Attended ED with query ectopic pregnancy. Waited significant period of time to be seen by gynae registrar. Doctor was rude. Further left a number of hours to wait on a bed.</p> <p>Patient was told that they didn't think it was an ectopic pregnancy only to be disappointed 2 hours later.</p> <p>Transferred to ward - no post-surgery support given. Not provided any literature or written information and not signposted for emotional support.</p>	<p>Apology for the lack of empathy shown and that the facilities were not up to standard whilst awaiting surgery. Patient was fasted from 10am previous morning and surgery was delayed to 16.45 hours the following day. No fluids administered. Agreement that this should not have happened.</p> <p>The overall attitude and coldness of the doctors were shocking and apology offered.</p> <p>No options given regarding burial or cremation and no discussion around this. Apology for this and agreed whole experience was unacceptable.</p> <p>Assurances that changes will be made to facilitate better information given to patients in similar circumstances. Offer of bereavement counselling given and leaflet to patient.</p> <p>Lessons Learned Leaflets regarding pregnancy loss, counselling and arrangements regarding cremation/burial to be given to all patients who suffer loss.</p> <p>Actions Taken Meeting took place with patient and further review at clinic offered if patient wished to avail of it.</p> <p>Leaflet given regarding counselling service with Bereavement Midwife.</p> <p>Website needs to be updated with information relating to pregnancy loss and services available to help.</p> <p>Patient to be given information on the Remembrance Service and when it is to take place.</p>

Complaint 2	
Complaint Subjects	Quality of Treatment and Care
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>The husband of a service user who is a wheelchair user, finds it difficult to attend her appointments in an outpatient facility as the wheelchair access door does not open as it should.</p>	<p>Outcome: Noted that the outpatient centre was constructed in 2010 to requirements in line with disability legislation at that time, which could present some increased difficulty for wheelchair users.</p> <p>Lessons Learned: Guidance should be continually reviewed with Estates to ensure accessibility is suitable for all service users, visitors and staff.</p> <p>Automatic doors should be checked regularly and where they have been disabled for any particular reason this should remain under review.</p> <p>Actions Taken: The door threshold has been revised in line with updated requirements to create a more gradual transition and enhance compliance with the regulations.</p> <p>With regard to the automatic door, the door operator had been disabled due to historical issues managing security into the building.</p> <p>The door operating mechanism is now enabled.</p>

Ombudsman Cases

When the SHSCT complaints process has been fully exhausted but the service user remains unsatisfied with the outcome of their complaint, they can raise concerns with the Northern Ireland Public Services Ombudsman (NIPSO).

In 2022-23, 37 cases were brought to the Trust by the Ombudsman. Of these cases 28 were closed, eight are open and one is pending.

The Trust is committed to working with the Ombudsman's office to resolve service user complaints, identifying and implementing learning, continuing to work with the Ombudsman on cases raised during previous years.

Below is one example of recommendations and learning:

Background/ Issues of Complaint	Recommendations/ Learning
<p>The complainant raised concerns about the care and treatment the Trust provided to her late husband on 17 and 28 September 2019 at the hospital.</p> <p>Did the Trust appropriately apply a client contribution charge to the short break provision?</p> <p>Was the Trust's decision to use Residential Home A, as a benchmark for assessing short break payments, appropriate and reasonable?</p>	<p>It was recommended that the Trust remind ED staff of the importance of record keeping as required by the Good Medical Practice (GMC) guidance.</p> <ol style="list-style-type: none"> 1. Recommend that the Trust review its current policies and guidance and the payment of a 'contribution charge' to include action to be taken in the case when respite is to be taken outside of a residential/nursing homes as against legislation as it currently exists. This review should consider the particular case of the complainant following its review. The Trust should communicate the results of this review to this office within 6 months of the date of the final issue of this report. 2. Recommended that the Trust cease deducting the contribution charge from the payments made towards the complainant's daughters short break provisions and that any monies deducted in this manner to date be repaid to the complainant on Miss A's behalf within 6 months from the date of this final report. The Trust should liaise with the complainant as to the particular method of payment. 3. Recommend that the Trust undertake a review of the system of direct payments to determine if other clients, subject to a similar scenario to that of the complainant are similarly affected. This review should be completed within six months of the date of this report in final form. 4. Findings and conclusions on this matter will be brought to the attention of the Department of Health and other Health and Social Care Trusts in Northern Ireland.

Background/ Issues of Complaint	Recommendations/ Learning
	<p data-bbox="587 129 1104 163">Learning / service improvements:</p> <p data-bbox="587 185 1485 555">The Trust undertake a needs analysis of its Learning Disability population who require respite / short term care and their range of unique needs to develop a wider range of Trust based facilities, with smaller bed numbers, to meet these needs. This would sit alongside the Trust Options Appraisal of Short Break Beds undertaken in February 2020 to ensure the Options paper considers the service users needs. The Trust should ensure this takes place within 6 months of the final date of this report.</p> <p data-bbox="587 633 1485 1003">In this particular case the Trust should give consideration to the assessment of ‘respite’ as being seen against the additional parental caring roles in the family when the patient is removed for their respite. There should not be an assumption of full parental / carer respite, thereby having an opportunity to rest/recover/ reenergise, is happening when additional carer responsibilities remain in the home. The Trust should provide evidence of this consideration to this office within one month of the final date of this report.</p> <p data-bbox="587 1081 1171 1115">Trust Response to Recommendations</p> <p data-bbox="587 1193 1485 1384">Intends to review current practice around the application of client contributions to access flexible short breaks outside of residential and nursing home environments and to share findings/seek approval from the Trust’s Senior Management Team for full implementation</p> <ol data-bbox="587 1473 1485 2067" style="list-style-type: none"> <li data-bbox="587 1473 1485 1552">2. Is in agreement to repay Miss A’s client contributions since they commenced in 2016 <li data-bbox="587 1630 1485 1753">3. Agrees to undertake a review of the system of direct payments to determine if other clients, subject to a similar scenario to that of the complainant, are similarly affected <li data-bbox="587 1832 1485 2067">4. The Trust welcomes the intention to bring findings and conclusion on this matter to the attention of the Department of Health and other Health and Social Care Trusts in Northern Ireland. The Trust stated that it would welcome guidance from the department of Health and the Strategic Planning and Performance Group.

Compliments and Suggestions

The Trust is keen to learn from all service user feedback including positive experiences received from service users and their families and what aspect made it a positive experience for them.

Receiving compliments helps us identify areas of good practice. This enables organisational listening through aggregating individual compliments so that positive service user experience can facilitate organisational learning. It is also encouraging for staff to receive recognition for the vital work that they undertake.

Thank you for taking the time to tell us about your experience

In the period April 2022 to March 2023, the Trust received 9969 compliments by subject, an additional 5,432 compared to April 2021 to March 2022, as illustrated in Table 3 which shows the number of subjects excluding those received via Care Opinion.

Table 3: Compliment Subject and method of receipt

Subject of Compliment	Card	Email	Feedback Form	Letter	Social Media*	Phone call**	Care Opinion	Total
Quality of Treatment and Care	529	68	44	37	2	16	2821	3517
Staff Attitude & Behaviour	439	73	40	39	2	20	3063	3676
Information & Communication	197	47	16	19	0	10	653	942
Environment	135	13	5	5	0	2	1667	1827
Other	5	0	1	1	0	0	0	7
Total Compliments	1305	201	106	101	4	48	8204	9969

*Social media refers to compliments received via official Facebook and Twitter accounts only.

**Phone calls relate to calls that have been recorded/documentated in phone message books etc.

Below are some examples of the feedback the SHSCT has received in the last financial year from our service users. They have been identified per area and subject.

WE JUST WANT TO SAY... **THANK YOU!**

Specialty	Description of Compliment	Subject of Compliment
Theatres STH	I had a colonoscopy at the hospital and from the moment I arrived at 2pm until I left at 6.30pm I couldn't have been more impressed with your staff.	Staff Attitude and Behaviour Quality of Treatment and Care

Specialty	Description of Compliment	Subject of Compliment
Rheumatology	We recently attended an appointment at the rheumatology clinic in South Tyrone Hospital. This is an absolutely fantastic and efficient service. From the minute we entered the hospital until we left, my husband was treated amazingly. When we arrived he was taken straight away by a nurse. Then we went in to see the consultant rheumatologist. My husband had a thorough consultation and examination. The Consultant listened and explained the next steps and the referrals she was going to make. Then he went straight to get bloods done and multiple x-rays. All of which was completed in just over an hour. We want to thank everyone involved. Excellent service!	Staff Attitude Quality of Treatment and Care

Specialty	Description of Compliment	Subject of Compliment
Children with Disability Services	Mother of a child known to the Children with Disabilities team who is transitioning into Adult Services addressed the LAC chairperson at the conclusion of the review advising that the service they received was from CYP was second to none. The level of compassion that her and her family have received specifically from her child's CWD Social Worker. Mother reported how fortunate her family have been to have had her son's Social Worker for so long. Mother advised that the Social Worker advocated strongly on behalf of her child and it was very clear she had his best interested at heart. Mother also praised staff at Oakland's for the care afforded to her son over the number of years he attended and how much he will miss that environment.	Quality of Treatment and Care

Specialty	Description of Compliment	Subject of Compliment
Silverwood Ward, Blue-stone Unit	The staff, in particular my assigned nurses, have gone above and beyond all my preconceptions/expectations. They have treated me with the utmost respect and dignity. Through my period of illness, they have done nothing but support and reassure me.	Quality of Treatment and Care Staff Attitude and Behaviour

Patient Client Experience Committee

The Patient Client Committee (PCE) consists of service user representatives, Directorate staff and Trust Board members. The PCE aim to promote and encourage service user experience and involvement, providing assurance to the Trust Board that SHSCT services, systems and processes provide effective measures of patient/client and community experience and involvement.

On a quarterly basis, Service User Feedback information is provided to the PCE Committee in relation to:

- Variations in the number of Complaints received within the reporting period benchmarked against previous reporting periods
- Examples of learning from Complaints
- Variations in the number of Compliments received this period within the reporting period benchmarked against previous reporting periods.
- Examples of learning and Compliments
- HCAT data within the reporting period benchmarked against previous reporting periods.
- Areas of improvements/achievement and concern

Information is also provided to PCE from Care Opinion:



Care Opinion is the new online patient feedback platform for health and social care services across Northern Ireland. It is safe and simple to use and leads to learning and change. Care Opinion allows a service user to leave anonymous feedback in a number of ways:

 Online with text - www.careopinion.org.uk

 Online with Images - www.careopinion.org.uk

 Free post leaflet – write or draw

 Freephone: 0800 122 3135

Impact of feedback 2022-23

- 23 changes made
- 37 changes planned

Changes planned/made were across the following areas:

- Adult Community Services
- Craigavon Area Hospital
- Daisy Hill Hospital
- Enhanced Care
- Lurgan Hospital
- Primary Care

You said	We did
<p>The only thing that needs fixed is the curtains, they do not work and it is very bright at 4.30am</p>	<p>Replacement blinds have been ordered.... Blinds have now all been replaced</p>
<p>Female Medical DHH There are no mirrors in the bathrooms so it is hard to see where to shave...</p>	<p>Mirrors (shatterproof) have been ordered for the bathroom and handheld mirrors have been ordered for patients who can't get to the bathroom</p>
<p>I received an Epilepsy Information pack which has all links information in it. However this would have been more of lifeline if I had received this 2 years ago. This pack should be given to those who have a seizure for the first time within a week as it is at that time which is scariest and all the questions are that need answered.</p>	<p>In response to your suggestion of having the epilepsy information pack within one week of diagnosis, the epilepsy service will provide epilepsy information packs and will request that the consultant neurologist will share with individuals who have a new diagnosis of epilepsy, whilst awaiting an appointment with the epilepsy nursing service.</p>

PCE Activity continues to be actively promoted throughout the Trust through:

- Umatter
- SHSCT Connect App
- SHSCT Facebook, Twitter, all Trust digital screens, engagement with staff etc.
- SharePoint

Information is shared with the PCE Steering Group and PCE Committee on a quarterly basis.

Production of a quarterly Patient Client Experience Newsletter for staff to update staff on current 10,000 More Voices, Care Opinion feedback and projects and outcomes to date. Three newsletters were produced 2022 to 2023 to coincide the quarterly reporting periods

- July to Sept 22
- Oct to Dec 22
- Jan to March 23



Service User Feedback Team/CSCG
Southern Health and Social Care Trust
Lurgan Hospital
100 Sloan Street
Lurgan
BT66 3NX

Phone: (028) 37564600

Email: serviceuserfeedback@southerntrust.hscni.net