



SOUTHERN HEALTH AND SOCIAL CARE TRUST

ANNUAL SERVICE USER FEEDBACK REPORT

2024-25

Introduction

This Report provides an overview of Service User Feedback received by the Southern Health and Social Care Trust (SHSCT) from service users, patients, their carers and relatives for the period 1st April 2024 to 31st March 2025.

The Southern Trust delivers services and treatment to a population of approximately 391,796 within its area, covering Armagh City, Banbridge and Craigavon, parts of Newry, Mourne and Down and Mid Ulster. The SHSCT also provided services to those who travel to the Southern Trust to avail of a regionally provided service. Almost £3.3 million is spent per day delivering care and support with a workforce of 15,797.

Within 1st April 2024 to 31st March 2025, the SHSCT provided treatment and care for:

- 52,375 inpatients
- 358,793 out-patient day cases
- 160,870 ED patients
- 4,483 births

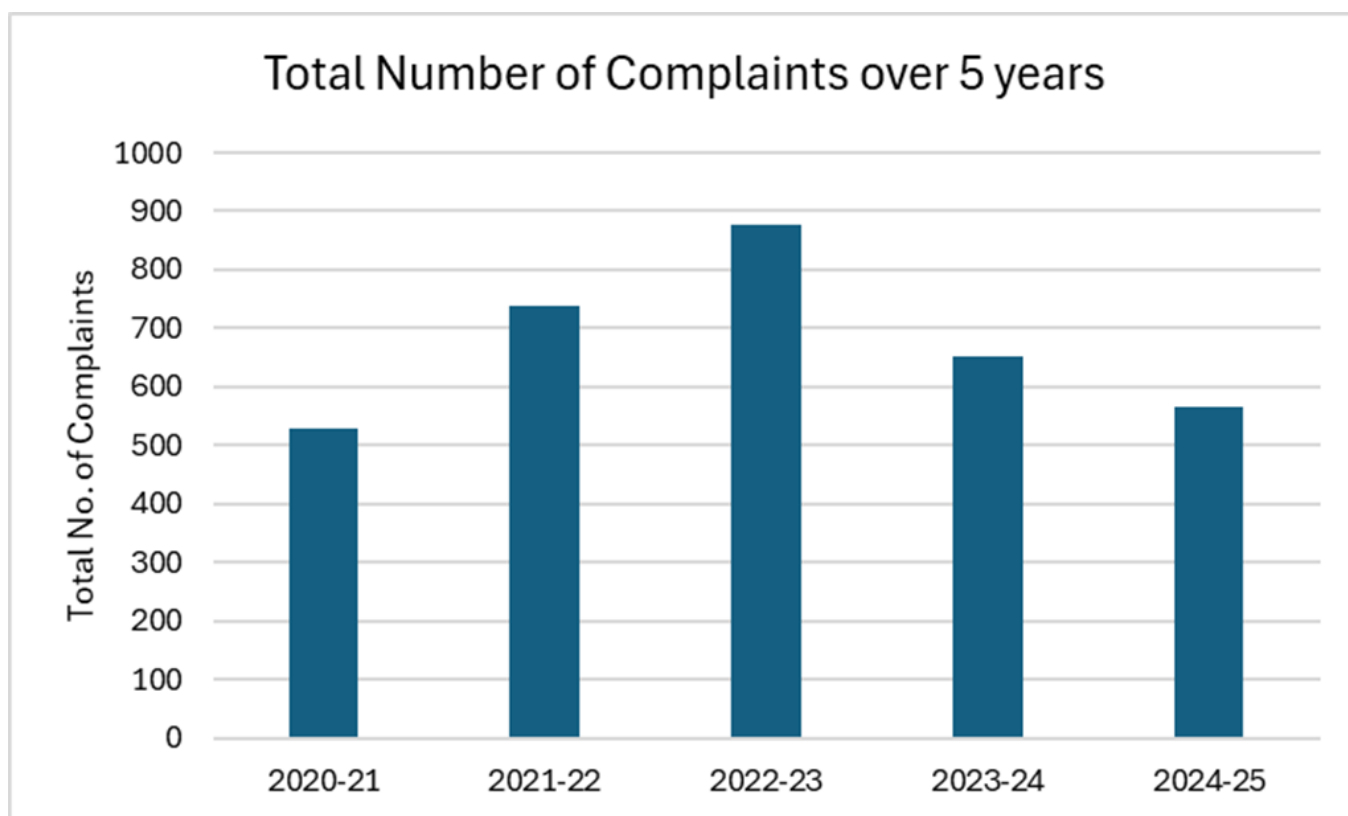
The majority of service users who receive treatment and care from the Trust have a positive experience and are cared for by well trained professional and supportive staff, all of whom are highly dedicated. However, like any organisation, sometimes things can go wrong, when this happens the Trust's objective is to listen, learn and improve.

The Trust aims to continually improve, so the quality of services provided is particularly important. People who have experienced or observed our services can help ensure the Trust continues to learn and improve by sharing their experiences.

Complaints

From 1st April 2024 – 31st March 2025, the SHSCT received 567 formal complaints, a 13% decrease compared to the number of complaints received in the previous year 1st April 2023 – 31st March 2024. The chart below (Chart 1) reflects the total number of complaints received by SHSCT over the past 5 years.

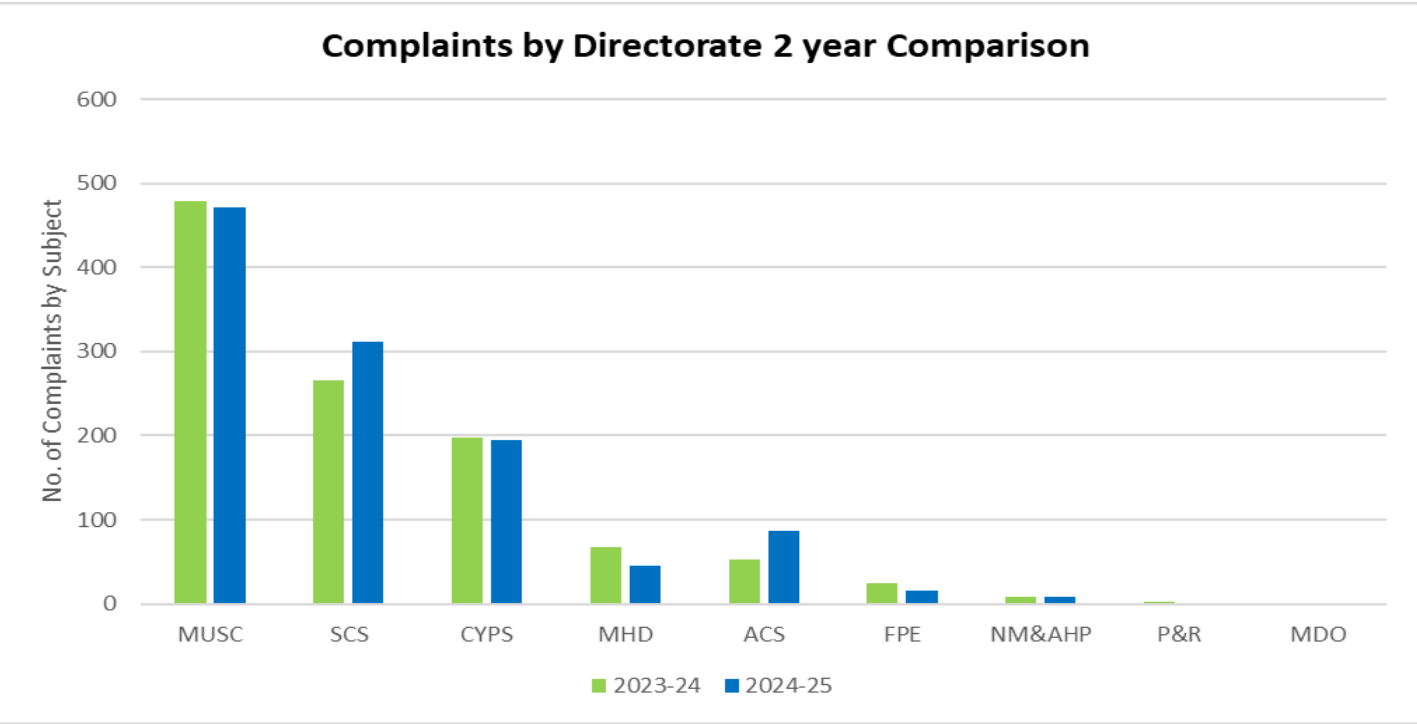
Chart 1: Number of Complaints received April 2020 - March 2025



Complaints by Directorate

Throughout the year (1st April 2024 – 31st March 2025), the SHSCT received complaints relating to services provided across a number of Directorates. The number of complaints received per Directorate is illustrated in Chart 2. On comparison to the previous reporting period (1st April 2023 – 31st March 2024), Medicine and Unscheduled Care (MUSC), Surgery and Clinical Services (SCS) and Children and Young People Services (CYP) Directorates continue to receive the largest number of complaints. This is partly due to the high volume of activity and the specialised nature of the services provided by these Directorates.

Chart 2: Complaints by Directorate

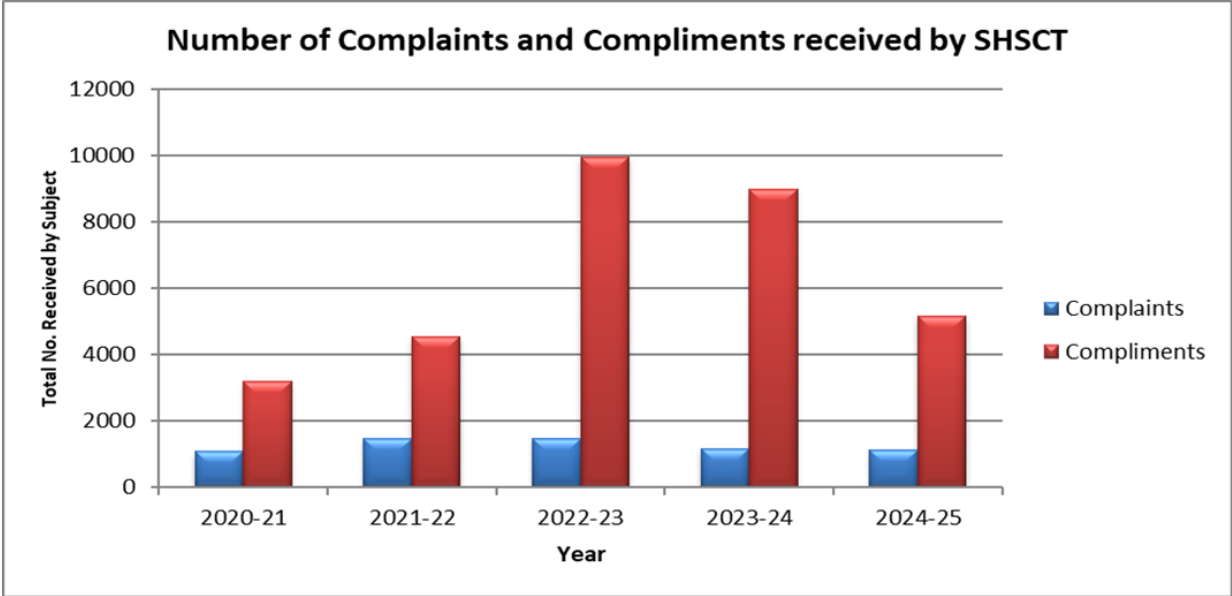


ACS - Adult Community Services, CYPs - Children and Young People Services, HROD - Human Resources and Organisational Development, MUSC - Medicine and Unscheduled Care, MHD - Mental Health and Disability, NM&AHP - Nursing Midwifery and Allied Health Professionals, P&R - Performance and Reform, SCS - Surgery and Clinical Services, MDO - Medical Directors Office

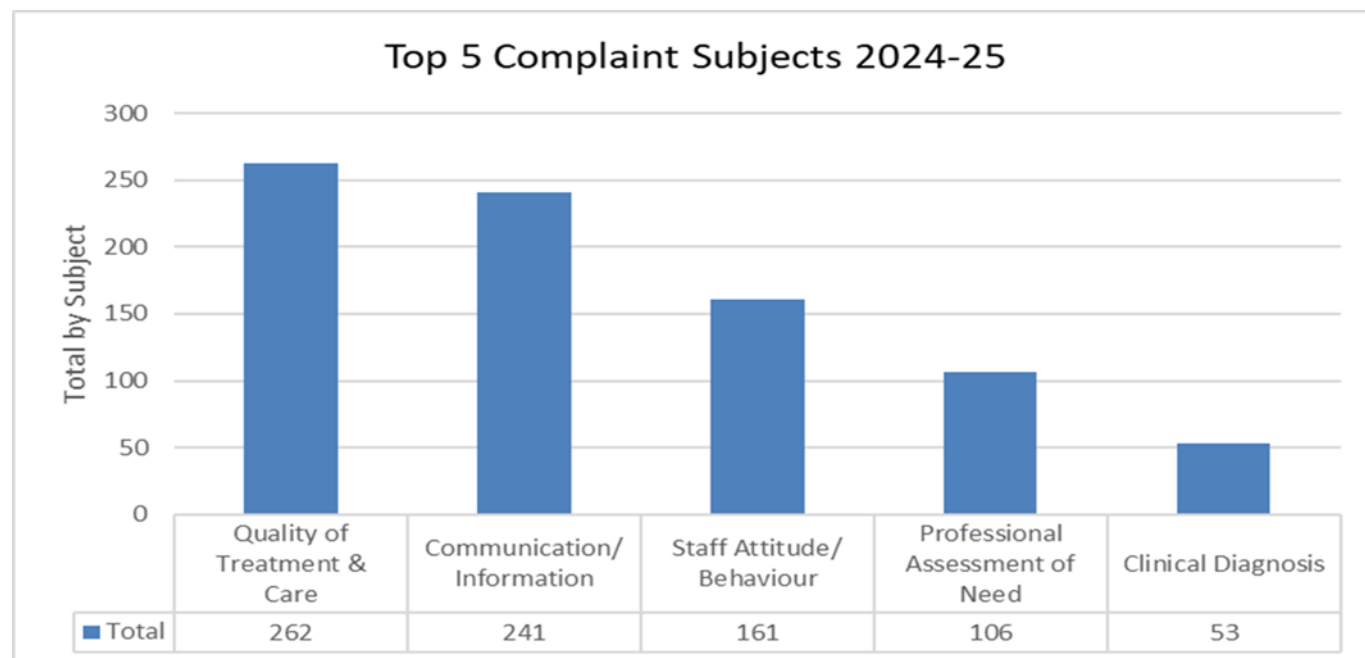
Complaint and Compliment Subjects

Complaints and compliments received from service users can often contain more than one issue, or subject. Therefore, the SHSCT record and report on the number of subjects contained within feedback received. During the past year (1st April 2024 – 31st March 2025), there has been a decrease in both the number of formal complaint subjects and the number of compliment subjects. The SHSCT recorded 1135 complaints subjects and 5166 compliment subjects during 1st April 2024 – 31st March 2025, as illustrated in Chart 3:

Chart 3: Number of Complaint and Compliment subjects, received by SHSCT April 2020 - March 2025



Some complaints received can be complex, involving a number of service areas and relate to events over a short or extended period. As illustrated in Chart 4, complaints regarding Quality of Treatment and Care, Communication and Information, Staff Attitude and Behaviour, Professional Assessment of Need and Clinical Diagnosis are the top five complaint subjects received within 2024-25.



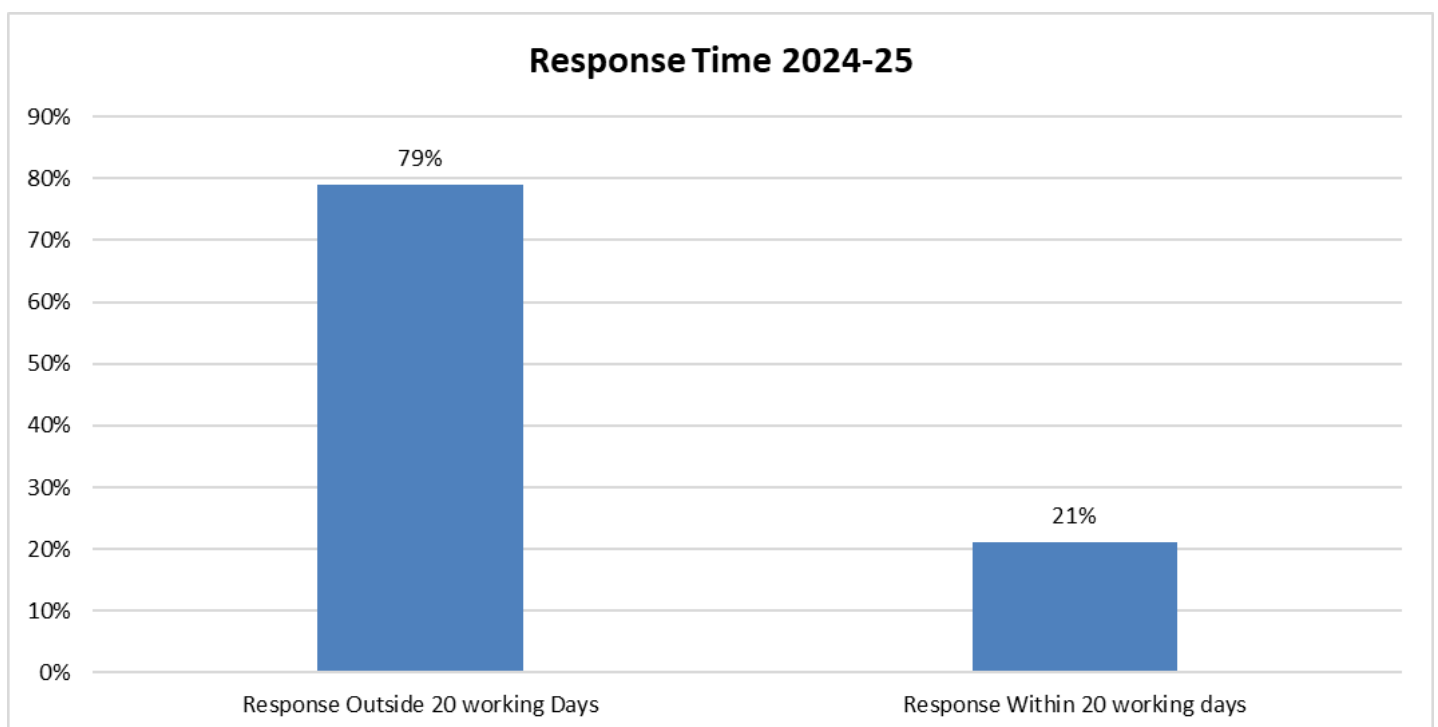
Response Times

The Department of Health (DoH), Health and Social Care Complaints Procedure 2023 requires all Trusts across the region of Northern Ireland to provide an acknowledgement to a complaint within 2 working days and a formal response within 20 working days, following receipt of valid consent (where applicable). Trust compliance with response timeframes is detailed in Chart 5.

Should the Trust require additional time to complete a thorough review of the issues identified within a complaint, the complainant is notified formally in writing with an explanation as to the reason for the delay and an anticipated response date. The relevant clinical teams may offer to meet with complainants to assist with the resolution of a complaint.

Throughout the complaints process, the Trust's objective is to provide the complainant with a positive experience aimed at resolving the issues identified. The SHSCT values all service user feedback and will use the information provided as an opportunity to learn, to improve service provision.

Chart 5: Response Times 2024 - 2025

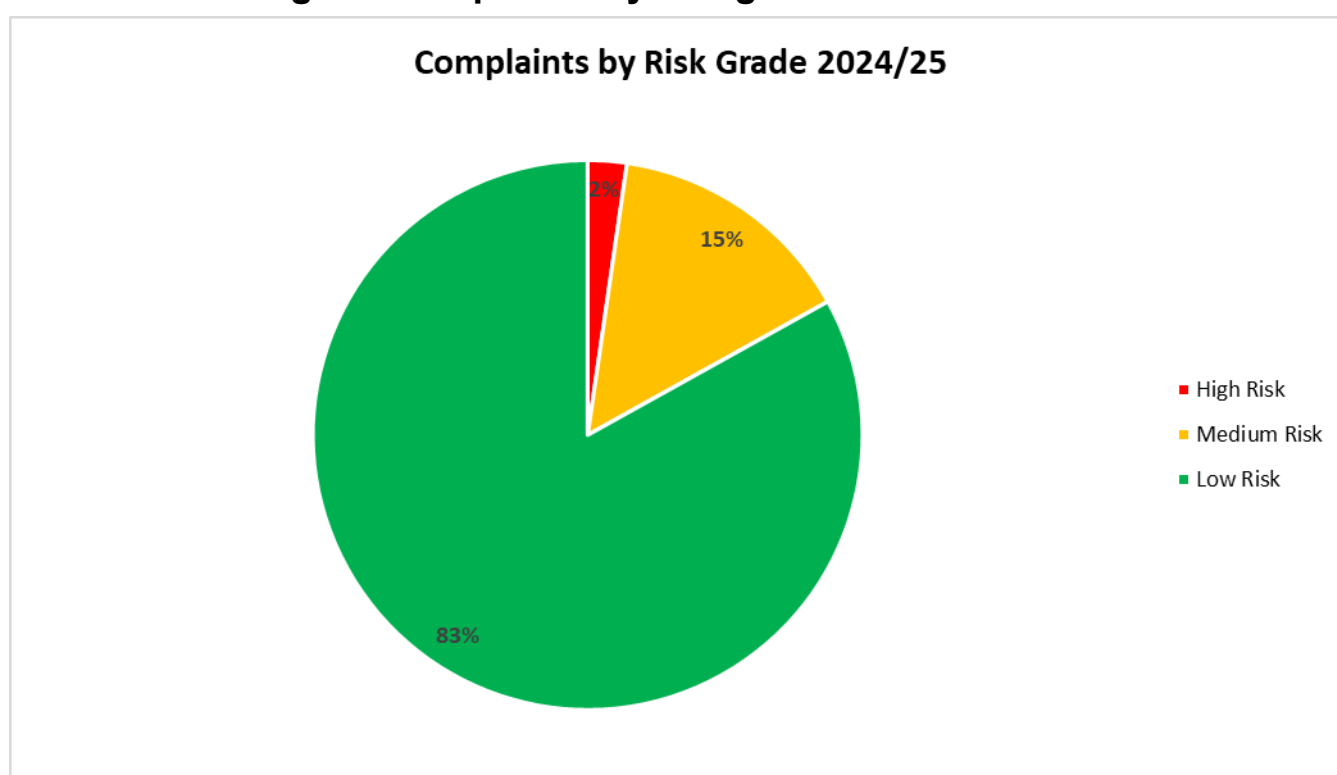


Complaints received by Grade

All formal complaints received by the SHSCT are reviewed, risk assessed and graded as Low, Medium, High or Extremely High depending on the severity of the issues identified within the complaint.

As demonstrated in Chart 6, of the formal complaints received in 2024-25; 83% were graded as Low Risk, 15% were graded as Medium Risk, 2% as High Risk and there were no Extremely High Risk graded complaints received during this period.

Chart 6: Percentage of Complaints by risk grade



Learning from Complaints

Learning identified through the review of complaints is used to inform service improvement and enhance patient experience.

Below are three examples of how learning from complaints has changed practice within the SHSCT:

Complaint 1	
Complaint Subjects	Professional Assessment of Need Discharge/ Transfer Arrangements
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>1. Lack of Available Care Packages</p> <p>2. Emergency Direct Payments: option was neither offered, nor discussed, with the family at the time of discharge.</p> <p>3. Alternative Offered - Nursing Care: complainant does not consider that this offer discharges the duty to fulfil the assessed need for domiciliary care.</p>	<p>Outcome:</p> <p>1. A request for a home care (domiciliary care) package was received, no provider was available at that time and the request went on the outstanding waiting list to be offered to care agencies on a daily basis. After a period of time, the care package request was accepted by a Trust Home Care.</p> <p>2. No evidence of discussion regarding Emergency Direct Payments. Emergency Direct Payments should be discussed with Family members, who can apply for this on behalf of the Patient, if they hold Enduring Power of Attorney (EPOA). An apology was offered for this information not being discussed with Family members.</p> <p>3. Discussion with the Service User's relative whilst the Service User was in hospital advising of the following potential options to support with the Service User's care when discharged home:</p> <p style="padding-left: 40px;">A Trust sourced Package of Care (POC). Direct Payments if Enduring Power of Attorney (EPOA) was in place; and A Trust funded placement in a Nursing Home, whilst awaiting a POC.</p> <p>Lessons Learned: The importance of ensuring that Emergency Direct Payments are discussed with the Patient, or their Family prior to the Patient being discharged was reiterated to Hospital Social Workers.</p> <p>Actions Taken: All concerns within the complaint were reviewed and responded to through a letter to the complainant. Learning identified was shared with relevant staff.</p>

Complaint 2	
Complaint Subjects	Communication/Information Quality of Treatment and Care Professional Assessment of Need Staff Attitude/Behaviour Policy/Commercial Decisions
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>Complaint regarding nursing care provided in relation to;</p> <p>Communication and continuity of care</p> <p>Inadequate attention to basic care needs</p> <p>Failure to administer timely treatments and reviews</p> <p>Prolonged discomfort and inattention to pressure relief</p> <p>Injuries and incident reporting</p> <p>Unsafe discharge planning.</p> <p>Family were seeking;</p> <ol style="list-style-type: none"> 1. A thorough investigation into these issues, including explanation and staff accountability for the failures outlined. 2. Immediate assurances that similar failings will not affect other vulnerable patients. 3. An explanation of the hospital's procedures for ensuring consistent communication between shifts and adherence to care plans. 4. Confirmation of measures to ensure transparency in incident reporting 	<p>Outcome: An apology was offered to the complainant and their family. All issues raised within the complaint were investigated, learning identified was shared with staff for service improvement.</p> <p>Lessons Learned:</p> <ul style="list-style-type: none"> The importance of communication between staff members on the ward regarding patient care The importance of early commencement of food charts and Dietician referrals The importance of accurately completing food charts and nursing notes The importance of escalating all skin tears The importance of regular communication with families The necessity of escalating family members concerns to a senior staff member if appropriate <p>Actions Taken: Issues outlined within the complaint and learning identified has been shared with staff.</p>

Complaint 3	
Complaint Subjects	Clinical Diagnosis
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>Concerns regarding newborn were dismissed on multiple occasions. Baby continued to feed poorly with mucus in nose and mouth, at one stage turning purple/blue.</p> <p>Later transferred to the Royal Children's Hospital for an operation to correct an issue with their oesophagus.</p>	<p>Outcome: Ward Sister offered an apology for the care the complainant and patient received, that complainant was advised incorrectly re: bed rest and that there was a delay in their ability to mobilise following birth.</p> <p>Lessons learned: The importance of listening to women's concerns and providing evidence-based care.</p> <p>Midwives working on the postnatal ward must ensure all the necessary assessments have been carried out according to policy.</p> <p>Any deviations from normal procedure should be escalated and actioned in a timely manner.</p> <p>Actions Taken: The staff involved in the complaint underwent supervision in relation to the issues raised.</p> <p>Staff also completed a professional reflection of the complaint issues.</p> <p>Additional training was provided to staff.</p>

Ombudsman Cases

When the SHSCT complaints process has been fully exhausted and the complainant remains unsatisfied with the outcome of their complaint, they may escalate their concern with the Northern Ireland Public Services Ombudsman (NIPSO).

In 2024-25, 65 cases were brought to the SHSCT by the Ombudsman. Of these cases, 34 were closed, 8 were opened and 23 are pending. The SHSCT is committed to working with the Ombudsman's office to resolve service user complaints, identify and implement learning.

Compliments and Suggestions

The SHSCT are also keen to learn from the positive experiences of service users and their families, to understand what aspects made this experience positive to enable continuity of this good practice and promote shared learning across the organisation. In addition, receiving compliments encourages staff and provides personal recognition for the vital work that they undertake.

In the period 1st April 2024 to 31st March 2025, the SHSCT received 5166 compliments by subject, a decrease of 3825 compared to 1st April 2023 to 31st March 2024, as illustrated in Table 3 which shows the number of subjects, including those received through Care Opinion.

Table 3: Compliment Subject and method of receipt. *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.

Subject of Compliment	Card	Email	Feedback Form	Letter	Social Media*	Phone Call**	Care Opinion	Total
Quality of Treatment and Care	413	62	111	17	4	9	1,330	1,946
Staff Attitude & Behaviour	357	65	101	17	2	9	1,416	1,967
Information & Communication	92	44	80	7	0	7	900	1,130
Environment	24	17	24	3	0	1	30	99
Other	18	4	1	0	1	0	0	24
Total Compliments	904	192	317	44	7	26	3,676	5,166

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
Emergency Department CAH	<p>Service user wrote to the Chief Executive's office to give sincere thanks to all staff at the hospital from support staff, domestic staff, trainees to nurses and doctors for the care he received.</p> <p>Service user felt staff were cheerful, attentive, caring and professional whilst working under great pressure and describes them as a credit to the health service.</p> <p>Service user stated that he received first class treatment and care.</p>	<p>Quality of Treatment and Care</p> <p>Staff Attitude/ Behaviour</p>

Specialty	Description of Compliment	Subject of Compliment
Stroke Unit CAH	<p>Service user's daughter wanted to thank all staff in the CAH Stroke Unit and described the care received as 'amazing'.</p> <p>Service user's daughter felt staff showed a positive attitude and were very knowledgeable when answering all of her questions and concerns.</p>	<p>Communication / Information</p> <p>Quality of Treatment & Care</p> <p>Staff Attitude/ Behaviour</p>

Specialty	Description of Compliment	Subject of Compliment
Community Paediatrics	<p>Both my children attended Community Paediatric Service and were extremely lucky to have met our Consultant Paediatrician.</p> <p>Our Consultant was so informative, extremely easy to talk to, went out of her way to help us, spoke in simple language so that I understand everything. I never felt rushed in either appointment and felt that she spoke to both my children at their level and made us all feel so comfortable, which made it easier for my children to engage with her.</p> <p>I would like to sincerely thank our Consultant for everything she done for us we very much appreciate it. I thoroughly believe people come into our lives at certain times for a reason and she came at the right time.</p>	<p>Quality of Treatment & Care</p> <p>Staff Attitude & Behaviour</p> <p>Information & Communication</p>

Specialty	Description of Compliment	Subject of Compliment
Public Health Nursing	<p>My son was born in 2021 with a bilateral cleft lip and palate. This was a very difficult time for our family. My son had 3 surgeries before his second birthday but just after his last surgery I noticed he had stopped meeting his milestones, he was still non-verbal, he wasn't sleeping his eating was not great, wouldn't interact with his toys and behaviour was starting to become difficult to deal with. I raised my concerns of ASD to some of his care providers.</p> <p>My daughter was born in January and our family Health Visitor called to carry out our daughter's baby checks and noticed how much I was struggling to manage my sons behaviour and my own mental health. Our Health Visitor instantly stepped in to help, calling my doctor to help with my mental help and reaching out to anyone she could for resources for me and my son. In the year since my daughter was born she calls out monthly and checks in with more resources for us and because of her and her hard work with us my son's behaviour is improving. We have received the much needed help to support for our family and my mental health has improved to the best it has been.</p> <p>I can't thank her enough for everything she has done and her continued support of our family.</p>	<p>Quality of Treatment & Care</p> <p>Staff Attitude & Behaviour</p> <p>Information & Communication</p>

Specialty	Description of Compliment	Subject of Compliment
Physiotherapy	<p>I have been attending Physiotherapy in CAH for the past few months initially for knee pain and more recently back pain. With the help of my fantastic Physio, I have recovered from my knee injury a lot quicker than I expected. I have received the most fantastic treatment from XX.</p> <p>XX has worked with me to challenge my mobility but also ensuring I am comfortable. She has been very considerate of my pain levels and knows how the past few months have been a struggle as I am a mother of 3 young children.</p> <p>Without the amazing help and treatment from XX I would not be in the position I am today, and I cannot thank her enough. She is a dedicated amazing physio and such a warm and welcoming personality which has always made me feel at ease.</p>	Staff Attitude and Behaviour & Quality of Treatment and Care

Specialty	Description of Compliment	Subject of Compliment
Loane House	<p>A family member spent two and a half weeks at Loane House, Dungannon from November through to December as he moved from Craigavon Area Hospital for Rehabilitation.</p> <p>Our relative made great progress due to the therapy received and the collaborative teamwork from all staff. We also received great communication and information from everyone.</p> <p>It was evident how the unit was managed so well and we had no apprehension of approaching any staff as they were courteous and helpful throughout our relative's stay.</p> <p>What a pleasure to be kept informed from all professionals and support staff.</p> <p>Thank you to all.</p>	Staff Attitude and Behaviour & Quality of Treatment and Care

Specialty	Description of Compliment	Subject of Compliment
HDU	<p>Service user's daughter wanted to pass on her compliments to the HDU team who looked after her mum in her final days. Staff were described as fantastic, compassionate, kind and professional.</p> <p>Service user's daughter felt staff went out of their way to make sure her mum was comfortable and made sure to always smile and be friendly when caring for her mother</p>	<p>Staff Attitude/ Behaviour</p> <p>Quality of Treatment & Care</p>

Specialty	Description of Compliment	Subject of Compliment
DHH Maternity	<p>Service user gave birth on 13th March 2025 in DHH. The service user said her whole experience from antenatal care through to delivery was nothing short of fantastic. Service user felt staff could not have done enough for her and my baby, ensuring they were both safe and cared.</p> <p>Service user felt staff explained the whole process to her and her husband clearly and wanted to pass on her thanks.</p>	<p>Staff Attitude/ Behaviour</p> <p>Quality of Treatment & Care</p> <p>Communication/Information</p>

Specialty	Description of Compliment	Subject of Compliment
Psychiatry of old age	<p>Service user reported that XX visited her last week when she was "not in a good place". She stated that XX was kind and considerate and enabled her to talk through her situation. She stated "I don't think I would have been here today without XX. Service user was grateful to XX for the time and support that she provided to her when she was in a difficult place with her mental health and states that XX input is also of benefit to her husband. Service user went on to state that she knew most people rang to complain but that she wanted XX bosses to know the difference that she makes to peoples lives.</p>	<p>Quality of Treatment & Care</p>

Specialty	Description of Compliment	Subject of Compliment
Community Mental Health	<p>I can't praise highly enough Tower Hill Armagh's Primary Mental Health Care. Beforehand I was apprehensive about receiving help due to pretty poor experience with another Trust. I shouldn't have been!</p> <p>Since September 2023, the psychiatrist Dr. XX pieced a picture together from 3 or 4 interviews with myself and a communication with a previous (circa 2006) psychologist. The psychiatrist was a good man with a clinical and professional approach. I found myself treated with humanity, clarity and insight under his charge.</p> <p>The counsellor was wonderful. Her advice and direction really did focus on what would be most beneficial and helpful in the circumstances. She was very impressive given how chaotic things were presenting from myself.</p> <p>When the time came for discharge in August 2024, I admit being disappointed to be losing the support of these fine people. However, a wholly appropriate longer term plan was in place. It was decided due to my nature or personality disorder that C.B.T. would not be suitable or productive. Instead, I now attend AMH - Action Mental Health one day a week. My mental and physical mobility issues are taken into consideration. It will provide socialisation were I had been isolated, and also present goals of new skills. I'm very grateful to all the staff at Tower Hill Armagh's Primary Mental Health Care.</p>	Quality of Treatment & Care

Patient and Service User Experience Committee

The Patient and Service User Experience (PSUE) Committee consists of service user representatives, [SHSCT](#) staff and SHSCT Board members. The PSUE Committee aim to promote and encourage service user experience and involvement, providing assurance to the SHSCT 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 PSUE 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 compliments
- Areas of improvements/achievement and concern
- Information is also provided to the PSUE Committee from Care Opinion.

Care Opinion is a regional on-line service user feedback platform used within Northern Ireland Health and Social Care Trusts. The Trust's Patient/Client Experience Team continue to engage with teams to embed Care Opinion, so that feedback from patients, visitors, relatives and carers is understood as an important and integral part of practice across all areas in the Trust.

Feedback, or stories, submitted through Care Opinion is anonymous, however the platform does allow for two-way communication with the author. Responses to stories are provided from Trust staff within seven days. All feedback provided through Care Opinion is reviewed and used by the Trust for reflection and improvement, assuring patients and their families/carers that the Trust will listen to and learn from their individual stories.

What story authors felt was **good** about their experience:



During 2024/2025 – **1848** Care Opinion stories were published in relation to the SHSCT - these stories have been read a total of **206,862** times