



Southern Health
and Social Care Trust

Quality Care - for you, with you

Annual Service User Feedback Report 2021/2022

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 £991 million and a workforce of 15,663 staff.

Within 2021-22 we provided treatment and care for:

- **47,183 inpatients**
- **25,264 out-patient day cases**
- **160,595 ED (Emergency Department) patients**
- **5,284 births**

Patient Experience and involvement is an extremely important and valuable resource to us. We 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 our Trust have a positive experience and are cared for by well trained professional and supportive service 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.

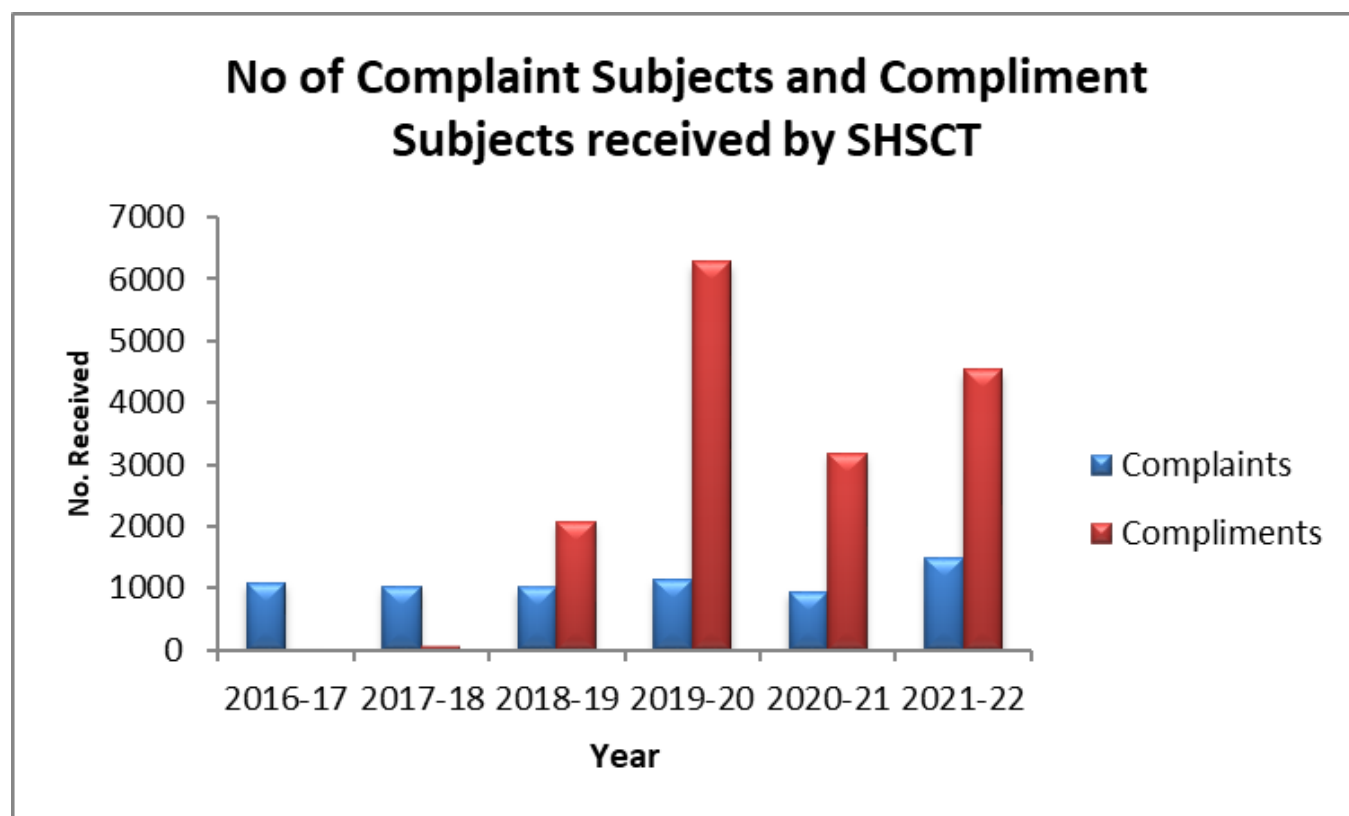
The Trust aims to continually improve and those who have experienced or observed our services can help us to learn and improve by sharing their experiences.

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.

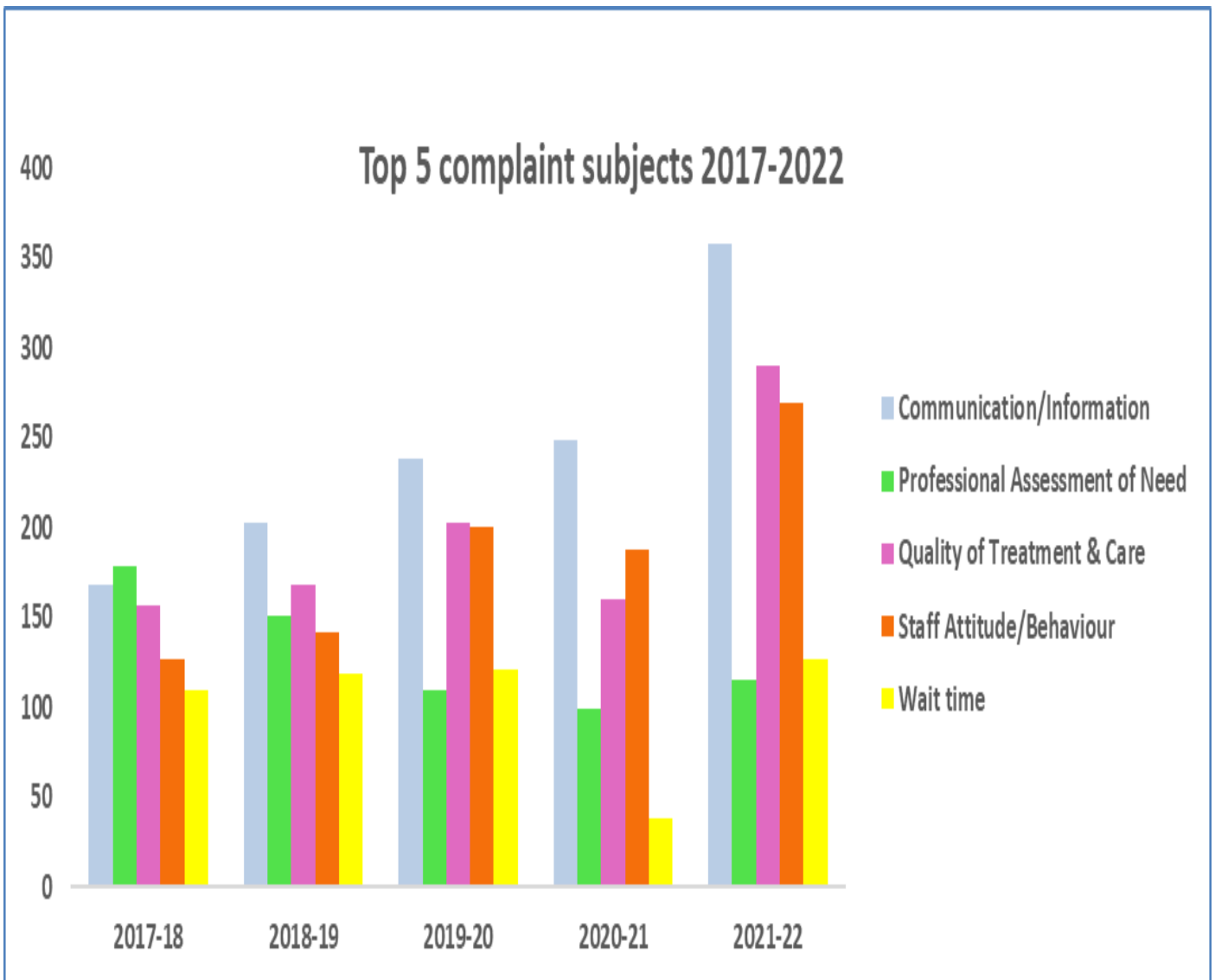
During the past year (2021/22), SHSCT has seen an increase in the number of formal complaints by subject. There has also been a slight increase in the number of compliments by subject. As seen in chart 1, the Trust received 1488 subjects of complaints and 4537 subjects of compliments in 2021/22.

Chart 1



Complaints can be multi-faceted, involving multidisciplinary teams and relate to events over a short or extended period of time. Complaints regarding Treatment and Care, Staff Attitude, Communication, Professional Assessment of Need and Wait Times are the top five areas of complaints; see chart 2 below which illustrates the top five complaint subjects over the last five years;

Chart 2.



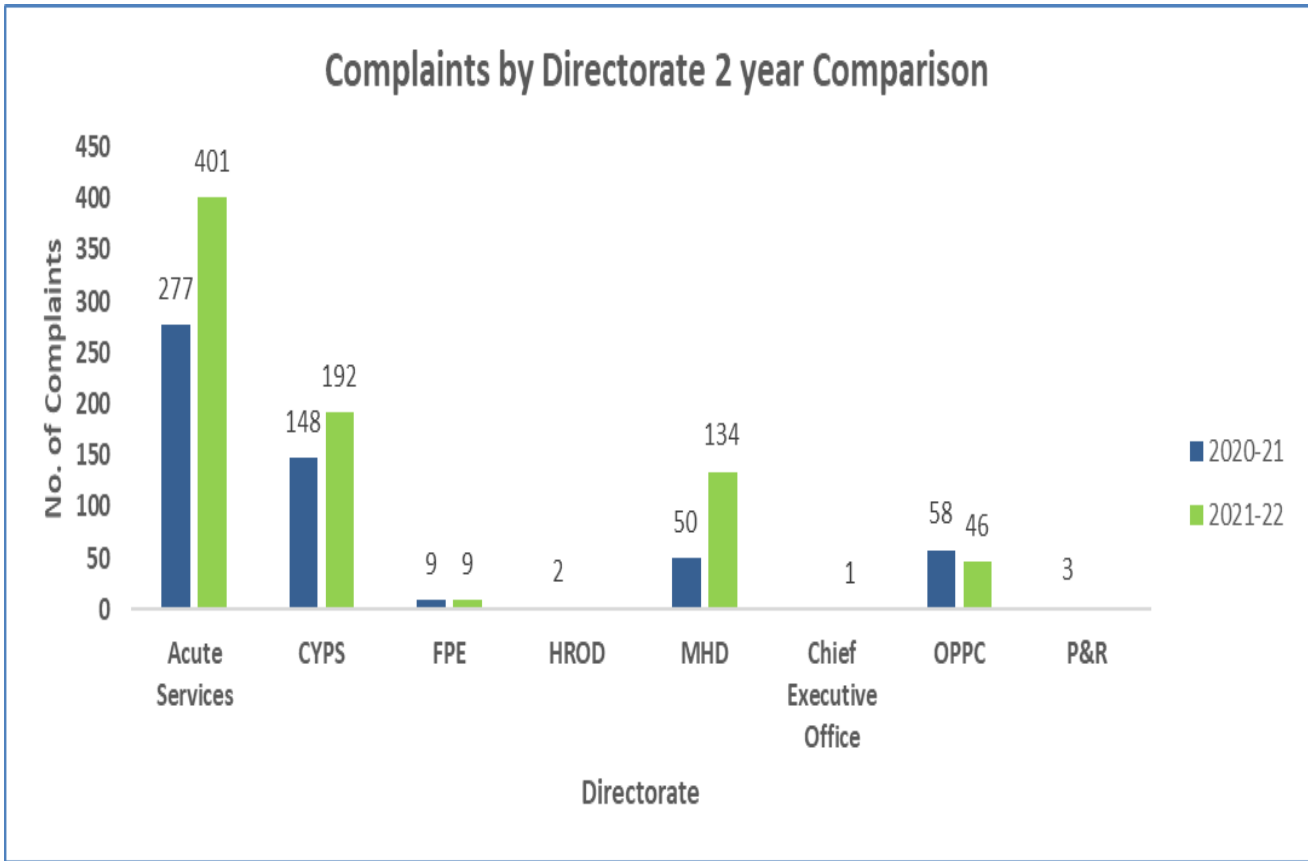
Top 10 Complaints by Subject

The table below (table 1) details the top 10 complaint subjects. These subjects account for 92% share of the overall subject totals. It also compares the level of those complaint subjects against previous quarters.

Table 1.

Complaint Subject	Apr - Jun 21	Jul - Sep 21	Oct - Dec 21	Jan - Mar 22	Diff + or - previous Quarter	Subject %
Communication/ Information	100	82	91	85	-6	24%
Quality of Treatment and Care	65	81	62	82	+20	19%
Staff Attitude/ Behaviour	53	80	64	72	+8	18%
Waiting Times	24	38	24	41	+17	9%
Professional Assessment of Need	42	32	20	21	+1	8%
Quantity of Treatment & Care	7	10	10	16	+6	3%
Discharge and Transfer Arrangements	3	6	4	11	+7	3%
Clinical Diagnosis	10	22	8	10	+2	3%
Property/Expenses/ Finances	9	15	10	10	0	3%
Policy/Commercial Decisions	4	18	9	12	+3	2%

Chart 3.



A

further break down below identifies the top four subjects of complaints which account for the highest percentage of complaints, Communication and Information, Staff Attitude and Behaviour, Quality of Treatment and Care and Professional Assessment of Need.

Complaints can have more than one subject.

Table 2

Subject (Per Complaint)	2020/21		2021/22	
Communication/Information	248	26.22%	358	24.06%
Quality of Treatment & Care	160	16.91%	290	19.49%
Staff Attitude/Behaviour	187	19.77%	269	18.08%
Waiting Times	38	4.02%	127	8.53%
Professional Assessment of Need	99	10.47%	115	7.73%
Clinical Diagnosis	35	3.70%	50	3.36%
Property/Expenses/Finances	19	2.01%	44	2.96%
Policy/Commercial Decisions	12	1.27%	43	2.89%
Quantity of Treatment & Care	37	3.91%	43	2.89%
Discharge/Transfer Arrangements	18	1.90%	24	1.61%
Infection Control	9	0.96%	22	1.48%
Records/Record Keeping	8	0.85%	17	1.14%
Confidentiality	9	0.95%	15	1.01%
Other	12	1.27%	13	0.87%
Privacy/Dignity	3	0.64%	12	0.81%
Environmental	11	1.16%	12	0.81%
Aids/Adaptions/Appliances	6	0.62%	9	0.60%
Hotel/Support/Security Services (Excludes Contracted Services)	9	0.95%	4	0.27%
Discrimination	5	0.53%	4	0.27%
Delay/Cancellation for Inpatients	9	0.95%	4	0.27%
Mortuary & Post-Mortem	0	0.00%	2	0.13%
Transport, Late or Non-arrival/Journey Time	1	0.11%	2	0.13%
Delayed Admission from A&E	4	0.42%	2	0.13%
Access to Premises	3	0.00%	2	0.13%
Contracted Regulated Domiciliary Agency	0	0.00%	1	0.07%
Other Contracted Services	0	0.00%	1	0.07%
Transport, Suitability of Vehicle/Equipment	0	0.00%	1	0.07%
Complaints Handling	1	0.11%	1	0.07%
Consent to Treatment/Care	2	0.21%	1	0.07%
Contracted Regulated Residential Nursing	1	0.11%	0	0.00%
Total	946	100%	1488	100%

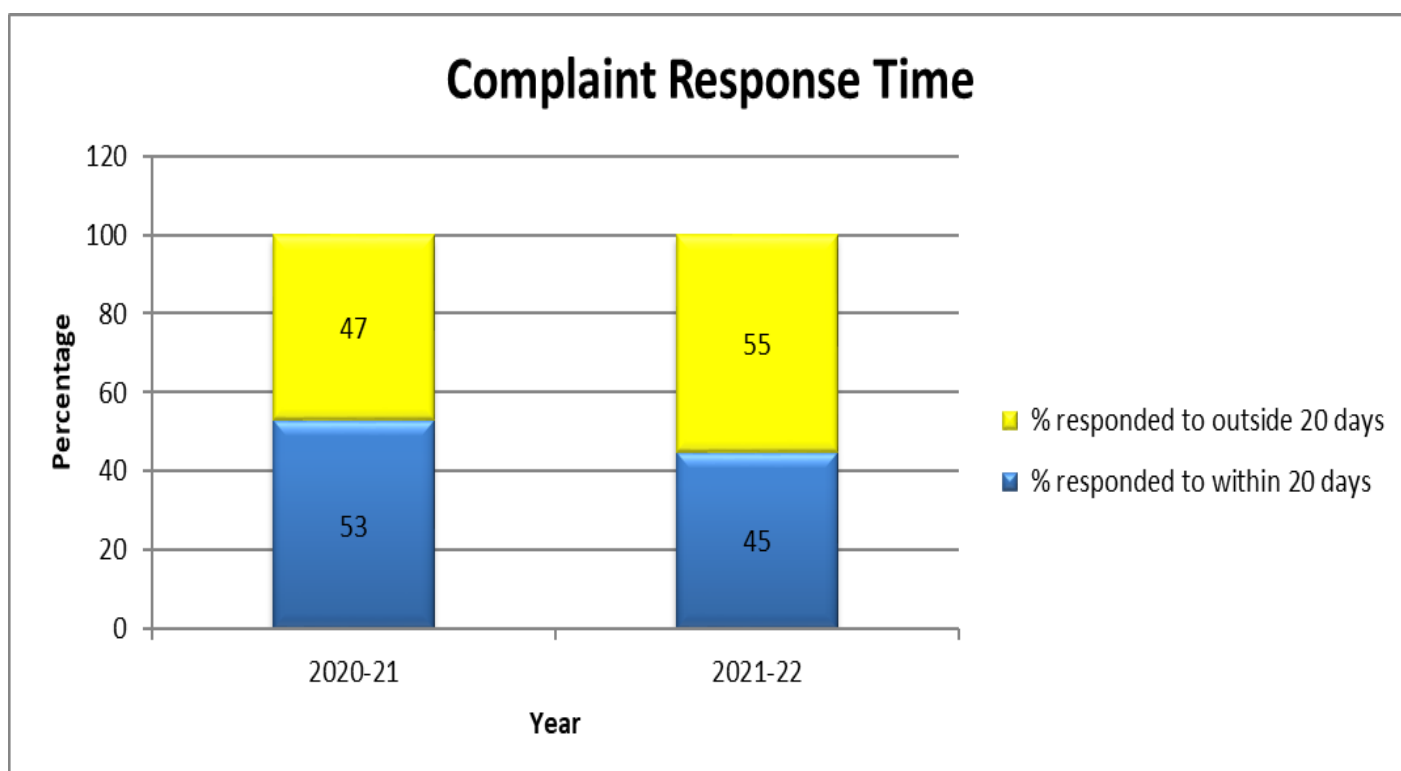
Response Times

Where possible, the Trust will seek to resolve complaint issues using local resolution. This can be less distressing for our 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 Trust 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.

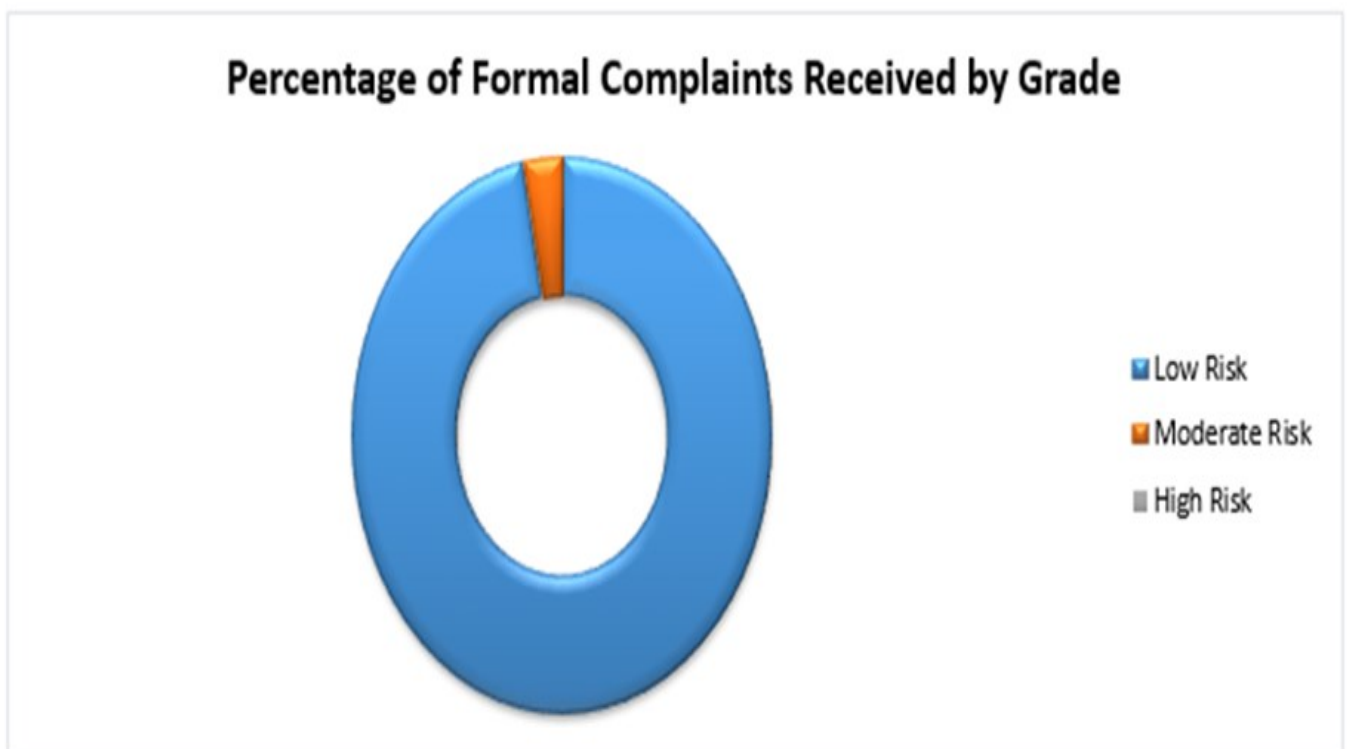


Complaints received by Grade

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, Moderate or High. The chart 5 demonstrates the formal complaints received by grade in 2021-22.

97% of all formal complaints received were Low Risk, 3% (17 complaints) were graded as Moderate Risk, and no High Risk complaints were identified.

Chart 5.



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 we improve the experience of people using our services, and ultimately the safety and quality of the treatment and care we provide.

Within the Trust, it is the responsibility of all staff to utilise the information and trends from complaints to ensure learning and development 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 Management Governance meetings and Directorate meetings to highlight themes and trends across the Trust to ensure we 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 our complaints processes and management systems.

Below is one example of how learning from complaints has changed practices within the Trust.

Complaint 1

Complaint Subjects	Communication/Information
Complaint Background	Outcome / Lessons Learned / Actions Taken
<p>Service user was dissatisfied that her son received the flu vaccine from the School Nursing Team following her withdrawing parental consent.</p> <p>Complainant made direct contact with her son's school to withdraw consent and left a voice message with the School Nursing team, however parental consent was not amended on the required consent form.</p>	<p>The School Nursing Team Manager made direct contact with complainant and sincerely apologised that her son received the Flu vaccine in error following her withdrawal of parental consent.</p> <p>Learning has been identified in relation to the review and update of the communication processes when messages are received by the School Nursing Service and/or schools in relation to consent for vaccinations. School Nursing Staff will be reminded of the need to check voicemails/messages received while they are out in schools daily.</p> <p>Staff will be reminded of the actions to be completed by the School Nursing staff when additional information is documented on a child or young person's consent form, and the importance of sharing the information with other members of the School Nursing team.</p> <p>An update of School Nursing Operating Procedures has been undertaken to mitigate the risk of further incidents occurring due to breakdown in communication processes.</p>

Ombudsman Cases

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

In 2021 – 2022, there were 33 cases brought by the Ombudsman, *Also within this time, 29 cases have been closed, 21 of which were closed at initial assessment and not accepted for investigation, 6 are open and 13 remain pending.

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

Below is an example of how the Trust has responded and improved in light of an Ombudsman case for shared learning:

***These numbers relate to previous years cases as well as those received within the 2021-22 time frame.**

Background/ Issues of Complaint	Recommendations/Learning
<p>The first complaint was accepted by the Trust on the 31st July 2017 with the following issues highlighted</p> <p>The complainant was diagnosed with hyperthyroidism in March 2014. In June 2014, patient was referred to an endocrinologist who diagnosed Grave's disease.</p> <p>She was treated at the Ear Nose and Throat (ENT) department at CAH. Oral surgeon removed a lymph node on 1 July 2014. Patient experienced a swelling in throat following the surgery. Patient also reported other symptoms following procedure. Patient had a total thyroidectomy and prescribed thyroid medication. Patient believed that all ongoing symptoms were caused by the thyroidectomy and wanted a full investigation into this.</p> <p>Patient was issued a formal trust response. A further complaint was sent in by the patient who was dissatisfied with the initial response. A meeting was offered to her by the Trust. Patient declined offer of a meeting to try and locally resolve concerns, due to ill health and therefore a further response was issued by the Trust. Patient approached the PCC and another complaint with the same issues were highlighted. The Trust offered a meeting once again. Response was issue by the Trust signposting to the Ombudsman.</p>	<p>Recommend that the Trust provides the complainant with a written apology in accordance with NIPSO 'Guidance on issuing an apology' (June 2016), for the injustice caused as a result of the failure identified in relation to issue two within one month of the date of this report</p> <p><i>(Issue two of this report investigated whether the surgery for removal of the thyroid in June 2016 was performed to the required standard. The Ombudsman concluded: The complainant's symptoms following the thyroidectomy in June 2016 were appropriately addressed including referrals to ENT, dermatology and neurology. There ought to have been further input from the endocrinologist following surgery, in view of the known risk of the complainant's failing to take her medication as prescribed. The Ombudsman found this to be a failing in care and treatment.)</i></p> <p>Recommend, for service improvement and to prevent future recurrence that the Trust asks the oral surgeons and consultant endocrinologist to reflect on this case and identify what lessons they have learned from this investigation regarding post-operative care.</p>

Background/ Issues of Complaint	Recommendations/Learning
<p>The Ombudsman letter came to the Trust on the 20th August 2020 and responded to on the 12th October 2020. The Ombudsman accepted the case for investigation under the following headings.</p> <p>Issue one: Whether the care and treatment provided to the complainant from March 2014 to June 2016 following the diagnoses of hyperthyroidism and Grave’s disease was appropriate?</p> <p>Issue two: Whether the surgery for removal of the thyroid in June 2016 was performed to the required standard?</p> <p>Issue three: Whether Neurological investigations and subsequent actions were carried out appropriately at CAH?</p> <p>A full and factual assessment report was sent to the Ombudsman addressing the questions sought on the 12th October 2020. The draft report was issued by the Ombudsman on the 6th October 2021.</p> <p>Comments were returned to the Ombudsman on the draft report 02nd November 2021 with the final report being issued by the Ombudsman to the Trust on the 31st January 2022 with recommendations to be completed within three months</p>	<p>Recommend that the Trust implements an action plan in relation to the latter recommendation and provides Ombudsman with an update within three months of the date of the final report. That action plan should be supported by evidence to confirm that appropriate action has been taken including, where appropriate, records of any relevant meetings, training records and/or self-declaration forms which indicate that staff have read and understood any related policies.</p> <p>Learning/Recommendations</p> <p>The recommendations were carried out and action plan completed in April 2022. An apology was written and signed by the Chief Executive in February 2022.</p> <p>Learning shared with the relevant teams involved identification of a failure in the communication between the Endocrine Department and ENT and a process has now been put in place that all discharge letters pertaining to Endocrine patients directly related with ENT services will now be added to the discharge letter for review and sent accordingly to avoid this happening again.</p> <p>All Doctors reflected on the case and along with the action plan, the information was sent to the Ombudsman in May 2022 and the case closed.</p>

Compliments and suggestions

The Trust is keen to learn from the positive experiences of our patients, 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 our staff to receive recognition for the vital work that they undertake.

Thank you for taking time to tell us about your experience

Since November 2018 the Trust has continued to use a system for recording compliments received to enable learning in the same way as we do from complaints.

In the period April 2021 to March 2022 the Trust received 4537 compliments by subject, an additional 1,377 compared to 2020-21.

Table 3 shows the number of subjects including those received via Care Opinion.

Table 3.

Subject of Compliment	Card	Email	Feed-back Form	Letter	Social Media*	Phone call	Care Opinion	Total
Quality of Treatment and Care	605	56	8	54	36	3	1080	1,842
Staff Attitude and Behaviour	552	71	7	56	54	2	565	1,307
Information and Communication	234	40	4	36	28	0	473	815
Environment	187	11	5	24	36	1	307	571
Other	0	0	0	2	0	0	0	2
Total Compliments	1,578	178	24	172	154	6	2,425	4,537

***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 we have 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!**

“

Seen quickly in ED and staff were very empathetic and explained everything in great detail.

When admitted to the ward the staff were equally attentive and communicated frequently regarding patient and prognosis.

Family were offered tea throughout the night and kept informed of what was happening to their loved one. They were allowed to be with patient until they passed away. Everything was handled in a very compassionate and to a very high standard.

A service under extreme pressure were a credit to the NHS.

”

Staff Attitude, Quality of Treatment and Care Dignity

“

Staff were amazing and acted very quickly. 1 South all staff were extremely caring and efficient with all elements of medical care. In a clearly overstretched NHS, the staff were amazing.

”

**Staff Attitude
Quality of Treatment and Care**

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

“Compliment the male receptionist in CAH ED this morning (8.30am approx.). I was attending to drop off some clothes for a family member who was being admitted. He was very helpful and very polite. Lovely to be greeted in a friendly professional manner. I felt that feedback should be given, especially as it can be a challenging for admin on the front line who may not always feel appreciated by the public.”

Staff Attitude



Care Opinion

What's your story?

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 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

During the period 01/04/2021- 31/03/2022 a total of 2291 stories were received

There were 28 changes made and 35 changes planned across the following areas:

- Blossom ward
- Emergency Departments
- Virtual visiting service
- 4 North
- 2 South
- 3 South

PCE Newsletters

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

Production of a quarterly Patient Client Experience Newsletter to update staff on current 10,000 More Voices projects and outcomes to date. Three newsletters were produced 2021 to 2022 (June 2021, Sept 2021, and January 2022). Newsletters are available on SharePoint.



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Working together



Excellence



Openness & Honesty



Compassion