South Eastern Health and Social Care Trust

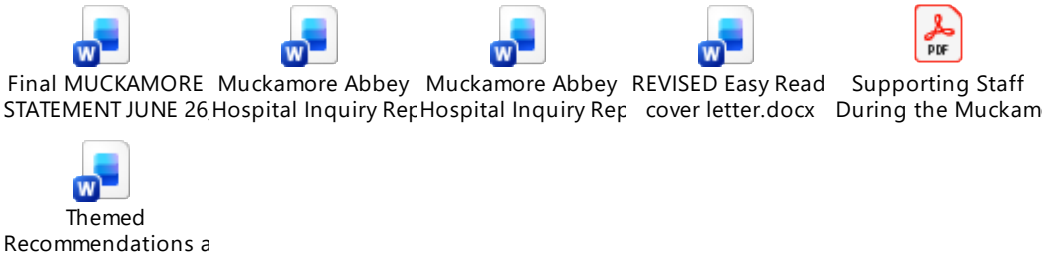
Paper No: SET/105/26	
Trust Board Meeting: 24 June 2026	
Public Agenda Item 8.5	

Title of Paper:	**Muckamore Abbey Hospital Inquiry Report**		
	For Assurance	**For Information**	

1.0	**Background:**
	The publication of the Muckamore Abbey Hospital Public Inquiry report on 18 June 2026 is an extremely sad moment for the Health and Social Care system in Northern Ireland. We recognise the profound impact on the individuals and families who experienced harm and the distress the report's findings will cause for many others who rely on HSC services. The report examines the historical abuse of vulnerable adults from across the region within Muckamore Abbey Hospital, a Belfast Trust facility, between 1999 and 2021. At its heart, the report documents the experiences of vulnerable adults who suffered abuse and of families whose trust in care services was profoundly damaged. It highlights the distressing consequences of failures to safeguard some of the most vulnerable people in our society and identifies significant shortcomings in governance, workforce oversight and organisational culture. The inquiry has made 106 recommendations for the Health and Social Care system in Northern Ireland aimed at strengthening accountability, safeguarding and the quality of care. Muckamore Inquiry Report June 2026 (E|_Muckamore_Inquir Executive_Summary
2.0	**Key Issues:**
	The key issues centre on the impact of the report on individuals and families, many of whom may experience renewed distress, trauma and anxiety as a result of the findings. There is a risk of heightened concern among service users and carers about safety and the potential recurrence of past failings, requiring clear reassurance and accessible communication. The report is also likely to generate a high level of public and media scrutiny, with associated political and reputational pressures for Health and Social Care organisations, alongside potential workforce impacts, including staff distress, anxiety, reduced morale and absence.
3.0	**Link to Strategic Objectives:**
	Our People ☒ Population Health & Health Inequalities ☐ Delivering Care Closer to Home ☐ Hospital Care ☒ Safety, Quality and Experience of Care ☒
4.0	**Resource Implications (inc Organisational, Financial, Human Resources):**
	1. Organisational
	An Organisational Readiness Plan has been put in place to ensure a coordinated, consistent and compassionate response to the report. Focus is on maintaining confidence in current services while responding to increased scrutiny. There is a

	strong emphasis on coordination across departments, particularly in handling enquiries, complaints and assurance requests. The Communications Department plays a central role in managing: • Public messaging • Media engagement • Ensuring a consistent organisational narrative
	2. Financial
	Increased demand (enquiries, complaints, support services) is likely to create additional financial pressures in the short term. Resources will need to be allocated for: • Enhanced communication activity • Psychological support provision • Administrative and operational response capacity There may be a significant financial impact in the longer term related to the reform of Adult Learning Disability Services aligned to the recommendations within the Inquiry Report. Financial implications may include in enhanced governance structures, an expected increase in demand for CCTV and an increase in service provision to meet complex need. It is anticipated although not confirmed that funding will be identified by the DoH, to implement the new Learning Disability Service Model for NI.
	3. Human Resources
	Likely increased workload for staff, particularly in frontline, complaints handling, and communications roles. Additional psychological support sessions are being provided to: • Staff • Service users • Carers There is a focus on staff wellbeing and resilience, recognising the emotional impact of the report. Requirement for: • Adequate staffing levels • Support mechanisms to manage stress and maintain service delivery
	4. Environmental Factors? Yes ☒ No ☐
	The Trust is operating in a highly sensitive external environment following publication of the report. Anticipated: • Increased public, media and stakeholder scrutiny • Heightened expectations for transparency and assurance • Reputational environment requires: • Clear, timely and coordinated communication • Maintaining trust and confidence in ongoing services The wider context is one of system-wide attention on safeguarding and service quality, influencing operational pressures.

5.0	**Impact on Safety, Quality and Experience (SQE):**
	1. Safety
	In the short term, service users and carers may experience increased anxiety, which could affect their perception of safety and trust in services, despite strengthened safeguarding arrangements. Operational pressures (e.g. increased complaints, enquiries and scrutiny) may create risks to safe service delivery if not effectively managed. In the longer term, implementation of Inquiry recommendations is expected to: • Strengthen safeguarding practices • Improve governance and oversight • Enhance overall patient safety frameworks
	2. Quality
	Staff may experience emotional distress and reduced morale, which could impact: • Consistency of care • Standards of service delivery Increased operational demand may place strain on services, potentially affecting responsiveness and reliability. Over time, improvements are expected through: • Enhanced governance and leadership visibility • Stronger quality assurance processes • More robust oversight and accountability
	3. Experience
	Service users and carers may initially experience: • Reduced confidence and trust • Heightened concern about care provision Increased system pressure may impact service user experience, particularly around responsiveness to enquiries or complaints. Longer term, the Inquiry is expected to: • Improve communication and transparency • Enhance engagement with service users and carers • Lead to better overall experience and outcomes, with restored confidence in services
6.0	**Key Risks and Proposals to Mitigate:**
	1. Key Risks
	The Trust faces a combination of reputational, operational and service risks following publication of the Inquiry. There is likely to be heightened public, media and political scrutiny alongside reduced confidence among service users and carers, driven by anxiety about safety and past failures. Internally, staff may experience emotional distress, low morale and increased workload due to a surge in complaints, enquiries and requests for assurance, creating pressure on responsiveness and service continuity. These combined factors present risks to the quality and consistency of care, safeguarding assurance, and the organisation’s ability to effectively identify and respond to emerging issues in a timely and coordinated way.

	2. Proposals to Mitigate
	Mitigation is centred on a coordinated organisational response that strengthens governance, communication and workforce support while driving longer-term system improvement. The implementation of an Organisational Readiness Plan, enhanced communications strategy and visible senior leadership engagement will support transparency and rebuild confidence. Strengthening safeguarding systems, governance oversight, data monitoring and early warning mechanisms will improve safety and accountability. Investment in workforce wellbeing, culture improvement and training will help maintain service quality, while improved complaints handling, co-production with service users and carers, and development of integrated, community-based care models will enhance experience and deliver sustainable service improvement over time.  Final MUCKAMORE STATEMENT JUNE 26 Muckamore Abbey Hospital Inquiry Rep Muckamore Abbey Hospital Inquiry Rep REVISED Easy Read cover letter.docx Supporting Staff During the Muckam Themed Recommendations a
7.0	**Risk Register:**
	It is listed on BAF? Yes ☐ No ☐ Is it listed on CRR? Yes ☐ No ☐

Lead Director:	**Professor Stephen Kirk, Medical Director & Mrs Rachel Gibbs, Director of Mental Health, Learning Disability, Healthcare in Prison & Psychological Services**
Date:	**19 June 2026**

Reasons for Paper Presentation

Approval	*Used when an item requires a formal agreement or endorsement by the meeting / committee members. Examples are approving minutes, budgets, proposals or policies.*
Assurance	*Used when an item can be measured against a certain criteria / standard. Examples are a project is on course with delivery or financial targets are being met.*
Information	*Used when an item is presented for the purpose of updating or informing the attendees without requiring a decision or action, such as reports, updates, or announcements.*
Discussion	*Used when an item is listed primarily for open discussion, brainstorming or gathering input from the members without requiring an immediate decision.*