

# Involve



## Invovement and Experience Annual Report 2024 – 2025



# Involve

# Contents

## FOREWORD

## BACKGROUND

## LEADERSHIP AND GOVERNANCE

## MEASUREMENT AND MONITORING

## OPPORTUNITIES FOR INVOLVEMENT

## INVOLVEMENT IN PRACTICE

### HOME CARE REFORM

### NEONATAL MEMORY MILESTONE BOOKLET

### LOCAL ENGAGEMENT PARTNERSHIP

### THINK YELLOW FALLS

### CHILDREN AND YOUNG PEOPLES RESIDENTIAL SERVICES

## SERVICE USER FEEDBACK

### CARE OPINION

### 10,000 MORE VOICES

### NO MORE SILOS PROGRAMME

### PATIENT AND CLIENT EXPERIENCE STANDARDS PROGRAMME

## KNOWLEDGE AND SKILLS

## KEY PRIORITIES 2025 – 2026

## CONSULTATIONS / ACKNOWLEDGEMENTS

# Foreword

Welcome to the South Eastern Health and Social Care Trust's Annual Involvement & Experience Report.

As a Trust, we pride ourselves on the importance of listening and responding to the views and experiences of our service users, carers, staff and other key stakeholders. This is essential to ensuring that we continue to provide safe, high quality and effective care. By working collectively we can better address both the challenges and opportunities that are facing health and social care today.

This report highlights how the Trust has continued to progress service user and carer involvement during 2024 - 2025, with some key highlights as to how involvement and experience has been put into action to make positive dynamic changes to how we deliver services. As a Trust we have remained nationally recognised as a Care Opinion exemplar organisation and continued to exceed Involvement and Patient, Client Experience Standard priorities.

Over the next year, we are committed to enhancing our involvement priorities and will continue to embrace a culture of partnership working between the people who use and deliver our services.

I would like to take the opportunity to thank everyone for their valuable contributions, your voice is so important to help us improve our services and shape future services.



**David Robinson**

*Deputy Chief Executive and Executive Director  
of Nursing and Midwifery and Director of Allied  
Health Professionals and Patient Experience*



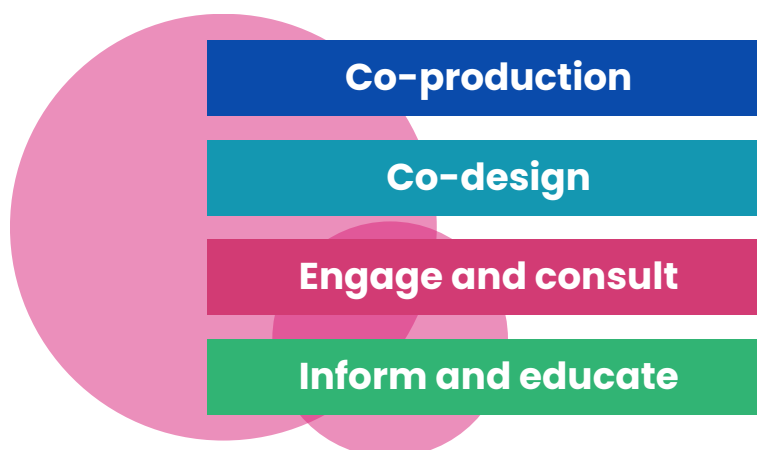
# Background

The involvement of service users, carers and other key stakeholders is critical in the effective planning, commissioning, delivery and evaluation of health and social care services<sup>1</sup>. Involvement helps to ensure that voices are heard, views are listened to, experiences are shared and expertise is valued, respected and utilised to achieve the best outcomes within person-centred health and social care services<sup>1</sup>.

Health and Social Care Trusts, including The South Eastern Health and Social Care Trust (South Eastern Trust), have a legal obligation to involve service users and carers, as set out in the Health and Social Care Reform Act (Northern Ireland) 2009.

Involvement can take place at different levels (see Figure 1 below). This can range for example, from people giving feedback on their experience of using our services to help continually improve them (engage and consult); to services users and/or carers working in equal partnership with healthcare professionals to plan, deliver and evaluate services (co-design and co-production). All levels of involvement are important, and different levels are appropriate at different times and in different circumstances. Click [here](#)\* to watch a video explaining the levels of involvement.

**Figure 1: Levels of service user/carers involvement**



This report outlines how the South Eastern Trust has continued to progress service user and carer Involvement and Experience programmes during 2024/25, as well as key highlights. This report also set out some of the priorities within Involvement and Experience for the year ahead.

\*Video URL: [engage.hscni.net/site/wp-content/uploads/2023/06/Levels-of-Involvement-Vs3.mp4](https://engage.hscni.net/site/wp-content/uploads/2023/06/Levels-of-Involvement-Vs3.mp4)

# Leadership and Governance

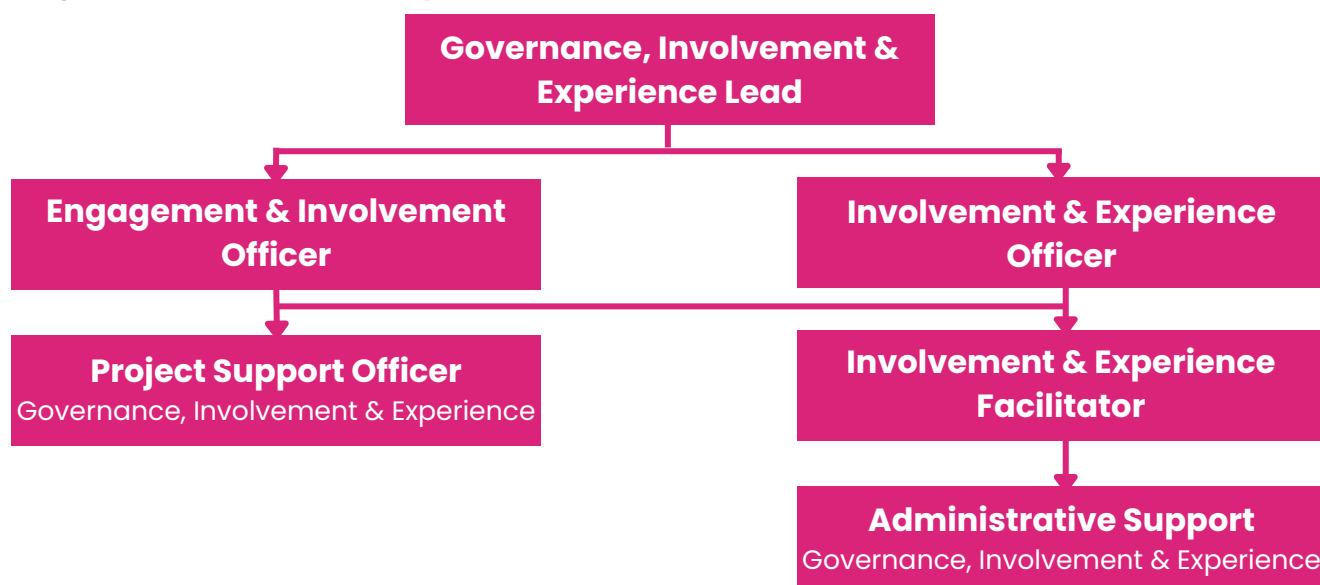
The South Eastern Trust has a clear leadership and governance structure in place to ensure service user and carer Involvement and Experience is embedded into policy and practice. David Robinson (*Deputy Chief Executive and Executive Director of Nursing and Midwifery and Director of Allied Health Professionals and Patient Experience*) and Helen Minford (*Non-Executive Director, concluded post in November 2024*), have acted as the executive and non-executive leads for Involvement and Experience respectively. The non-executive lead new appointee, Kieran Donaghy, commenced in May 2025. The governance structure is shown in Figure 2 below:

**Figure 2: Outline of Trust Involvement and Experience Governance Structure**



The Trust has a central Involvement and Experience team, the role of which is to promote and support the embedding of service user and carer Involvement and Experience across the Trust at all levels. The structure of the team is outlined in Figure 3 below:

**Figure 3: Involvement and Experience Team structure**



## Involvement and Experience Leadership Committee

The key function of the Involvement and Experience Leadership Committee is to lead the strategic development of the service user and carer Involvement and Experience agenda across the Trust and to ensure that Involvement and Experience principles, programmes and initiatives are embedded at service level. As displayed in Figure 2 the committee reports to Trust Board through the governance structure. The committee seeks assurance that the Trust is compliant with its statutory requirement to involve service users and carers. Committee membership consists of Trust staff, health and social care partners and service user and carer representatives. The committee met four times in 2024/25. A workshop was held in May 2024 to discuss Involvement and Experience priorities for the new action period. The workshop reflected on current positive work and explored areas for improvement, and from this identified key actions for the coming two years. In 2025/26 the engagement with staff, service users and carers will be a priority focus with action to continue to improve the support and shared learning mechanisms in place.

## Regional Health and Social Care Personal and Public Involvement (PPI) Forum

The purpose of the regional Health and Social Care PPI Forum is to aid in the development and application of the regional PPI Action Plan. Members consist of service users, carers, representatives from the community/voluntary sector and staff from each health and social care organisation. The Trust continues to contribute to ongoing work of the regional PPI Forum, to include contribution to the development of a new regional monitoring process for service user involvement.

## Patient Client Experience (PCE) Regional Working Group and Facilitators Group

Throughout 2024/25, the South Eastern Trust continued to make active regional-level contributions on a quarterly meeting basis. The two groups allow for the regional objectives across key priorities such as Care Opinion and 10,000 More Voices to be communicated, progressed and monitored at a regional level.

# Measurement and Monitoring

The Trust co-produces service user feedback tools to ensure that an understanding of process, outcome and experience is captured. This allows service leadership and frontline teams to understand service user perspective of how well staff have performed for them, the impact that the service made for the service user, how it felt to be a patient of their service and service user level of confidence in the service.

Each particular user experience programme produces a set of metrics to support planning and decision-making.

Involvement activity is monitored through a Public Health Agency data collection tool whereby services enter an account of the involvement initiative undertaken with a set of accompanying measures. In addition an "Involvement Human Library" was introduced in June 2024 whereby four Involvement projects attend a panel led by Public Health Agency.

Accountability arrangements within the Trust ensure that Involvement and Experience assurance is provided to Involvement and Experience Leadership Committee which reports upward to Safety, Quality Improvement and Innovation Committee with onward assurance arrangements to Governance Assurance Committee and Trust Board in place.

2024/25 activity will be reviewed at the May 2025 Involvement and Experience Leadership Committee meeting and this work will inform the onward priorities and action plan for the Trust for the year ahead.



# Opportunities for Involvement

The Trust has an established Involvement Network of service users and carers who are interested in supporting Trust business through involvement opportunities. The Involvement Network currently has 80 members and is continuing to grow.

If you would like to become a member of the Service User Network, please visit [setrust.hscni.net/getinvolved/involving-you/involving-you-expression-of-interest/](https://setrust.hscni.net/getinvolved/involving-you/involving-you-expression-of-interest/) or contact [involvement@setrust.hscni.net](mailto:involvement@setrust.hscni.net)

Opportunities are also circulated to the Trust's Carers Network which consists of approximately 4,000 members and to the Patient Client Council which currently has a membership of 476 individuals from the Trust area. Opportunities for involvement are also advertised via the regional Engage site: [engage.hscni.net](https://engage.hscni.net)

The Involvement and Experience team issue an involvement opportunities bulletin to the Involvement Network bi-monthly to promote Trust and regional current opportunities, provide information about becoming involved and to showcase involvement activity.

Figure 4: Examples of involvement opportunities bulletin



# Involvement & Experience in Practice

## Home Care Reform

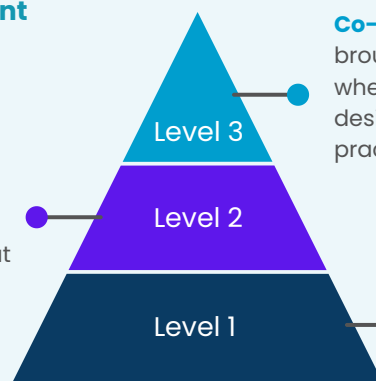


[Click here to access the home care user guide or scan the QR code](#)

The development of the Home Care Services User Guide was undertaken to create a resource that genuinely reflects the needs, preferences and voices of the individuals who rely on these essential services. Central to this initiative was the implementation of a 3-tier model of involvement, designed to ensure a meaningful and inclusive approach to user engagement at every stage of the process. The 3-tier model enabled involvement at a level that suited the individual, as they were able to opt into any or all of the involvement levels.

**Figure 5: 3-tier model of involvement**

**Consult:** Deeper involvement was facilitated through attendance at meetings and group discussions, enabling more detailed feedback and collaborative discussions about service improvements.



**Co-Produce:** The highest level of involvement brought users into focus groups and workshops, where they worked alongside stakeholders to co-design and refine the guide, ensuring it was both practical and user-focused.

**Engage:** Initial engagement with service users was achieved through activities such as surveys and questionnaires, allowing for broad participation and gathering diverse perspectives.

**Figure 6: Home Care User Guide**



The Home Care Services User Guide Project successfully produced a comprehensive and user-focused guide through an enhanced engagement process. By involving both service users and professionals, the project collaboratively defined the guide's purpose, content and design. The final guide serves as a two-way communication aid, empowering service users and professionals to navigate the complex and deeply personal journey of Home Care Services together. This involvement project fostered better understanding, clarity, and collaboration, enhancing the quality and accessibility of care.



# Involvement & Experience in Practice

## Neonatal Memory Milestone Booklet

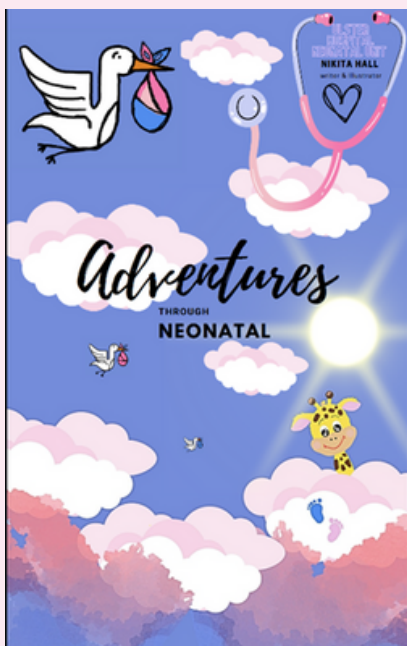
The Neonatal Intensive Care Unit (NICU) can be a high intensity, machine noisy, overstimulating, emotional rollercoaster for any family that requires care immediately after birth. Family Integrated Care (FiCare) has been an integral factor in Neonatal services, aiming to promote a culture of partnership between all staff and families. A factor often overlooked is the impact of memory making and celebrating milestones.

*“Every memory we make is a footprint on the path of life we make together”*

The aim of this project was to increase the number of parents using the memory milestone booklet who attended the South Eastern Trust Neonatal Unit. The objectives of the project was to reduce anxiety of families and provide memory making in a way that was family led.

The key actions identified were the development of a memory milestone booklet and the introduction of new camera and equipment. The Project team continuously reviewed and adjusted the content within the memory milestone booklet until a reasonable and appropriate sample was created for parents to use. The project followed quality improvement methodology of Plan Do Study Act (PDSA). By November 2024, 100% of admitted families received a photograph within 24 hours of admission.

**Figure 7: Adventures through Neonatal**



Focus groups with parents were used to co-produce the memory milestone booklet. TinyLife supported the Project team to reach previous parents within the wider Neonatal network of parents to include their wishes and experiences. The partnership between families and staff ensured that booklet was designed with the insight of parents and included what they felt mattered most; as well as having contribution from staff to ensure that the content provided best support alongside care.

# Involvement & Experience in Practice

## Local Engagement Partnership

The Local Engagement Partnership (LEP) has championed co-production since it was established in 2017. LEP is active across Social Work/Social Care in the Trust, also involving those with lived experience, community and voluntary organisations as equal partners who together are committed to using co-production to improve Social Work/Social Care services.

**Figure 8: LEP logo**



The logo for LEP demonstrates the approach followed by the group, ***'All ideas welcome, All voices heard, Nothing set in stone, Not afraid to change'***

During 2024/25 in response to the regional strategic drivers that came from 10,000 More Voices findings, LEP members co-designed and co-delivered the Quality Improvement methodology led ***'Working Together: Everyone Benefits'*** workshop, providing Social Work/Social Care teams with an interactive opportunity to explore the core values of practice. Feedback from the workshop pilot highlights 100% of participants agreed the content was thought-provoking.

LEP lived experience members regularly co-deliver at **biannual new Social Work/Social Care staff and student induction** with the aim of supporting practitioners to understand what those using services want from practitioners. This innovative approach to education has significant benefit as evidenced in the feedback comment from one induction facilitator,

*"Your input was poignant, insightful and above all critical for students to hear. With the best will in the world, none of us (practitioners) could have delivered the messages you did so powerfully" (Staff)*



At a strategic level one LEP member with lived experience is also working with the Trust **Children's Safeguarding Reform Board**, ensuring the voice of lived experience is represented in decision-making around this reform.

During 2024, LEP sought to increase the number of members with lived experience in the group and used quality improvement methodology to increase the membership. This was successful and LEP continue to show leadership within the Trust for co-production. In 2025 LEP are piloting the **Co-Production Café** as a way of bringing the work of LEP and the concept of co-production to the public in community venues such as hospitals, libraries and leisure centres.

Figure 9: Working Together: Everyone Benefits Workshop promotion

The poster features a large title 'WORKING TOGETHER EVERYONE BENEFITS WORKSHOP' in orange, blue, and pink. The South Eastern Trust Local Engagement Partnership logo is in the top right. Below the title, it states: 'The Workshop key themes: The SET Local Engagement Partnership (LEP) have developed this Value-Based Workshop to bring together social workers and people with lived experience to explore the core values of social work in practice. Via facilitated discussions, real-world case studies, and interactive activities; we will support a safe, reflective space where you can:'. A list of three bullet points follows: 'Strengthen your understanding of value-based practice', 'Enhance your partnership working skills with people who use services', and 'Celebrate your passion and purpose for value-based practice'. The bottom of the poster is decorated with an illustration of many diverse hands raised in a crowd, with small red hearts floating above them.

# Involvement & Experience in Practice

## Think Yellow Falls

During 2024/25 the Falls Prevention Service as part of a quality improvement (QI) initiative carried out the Think Yellow Blanket project within the Ulster Hospital Emergency Department. This allowed staff to take proactive falls prevention actions to maintain the person's safety. The Yellow Blanket visually communicates to all staff that a person has an increased risk of falls. Having this initiative in place in the interim to the completion of the multifactorial falls assessment (target for completion is within 6 hours of admission by Health Care Staff) the Yellow Blanket may help with reducing falls by preventative measures being put in place in response to the visual cue.



### Quality Improvement Project aim:

***“Reduce patient falls in the purple, blue and ambulance triage zones of the Ulster Hospital Emergency Department by 20%, using the yellow blanket as a visual cue of a person’s increased falls risk within 16 weeks.”***

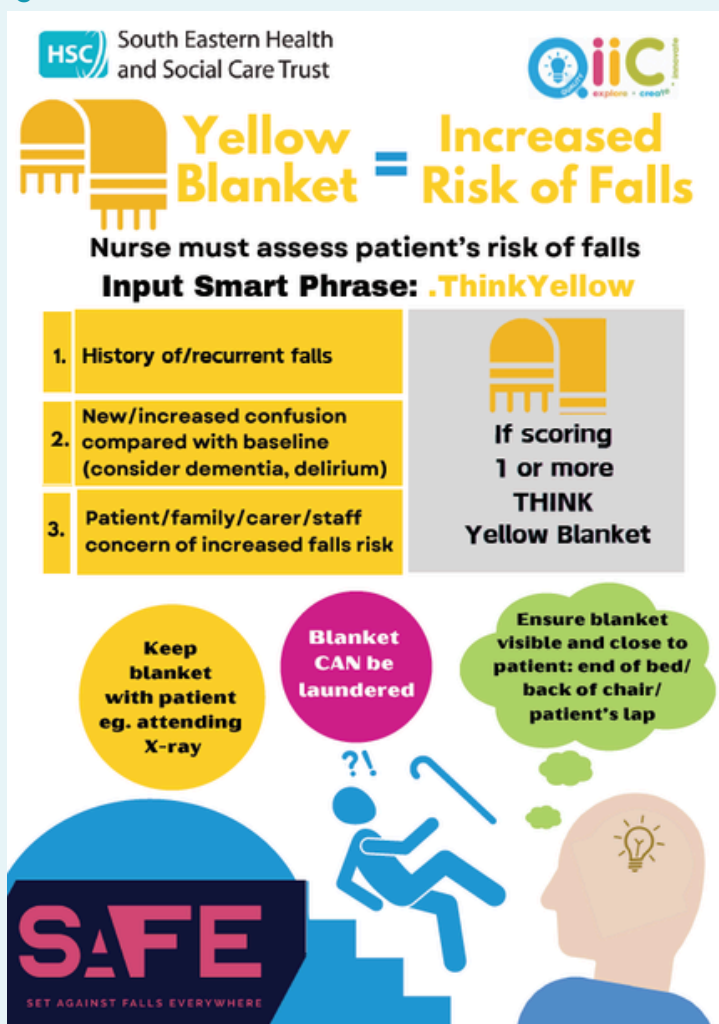
The Emergency Department Nurses followed a falls prevention plan to triage and immediately provide the Yellow Blanket to patients who were of higher risk of falls. The Falls Team delivered education sessions to Emergency Department staff prior to and throughout the project to maximise staff awareness and support to help reduce falls within the Ambulance Triage, Purple and Blue zones of the Emergency Department. Action was taken by the Falls team to support staff with triage, provision of the blanket and preventative measures, including the use of posters.

The project sought to gain service user opinion at the early planning stage through the Involvement Network. Co-production helped to maximise the implementation of the project. Staff, service user and carer perceptions and thoughts of the Think Yellow Falls patient safety initiative were gathered and used to inform the design of the project. Service users insight into the type of blanket they felt would best highlight the person’s increased falls risk to the Emergency Department’s Multi-Disciplinary Team, but still be tolerable for the patient was adopted.

Service users were also able to tell how they felt about receiving a blanket and willingness to consent to receiving the blanket with connotations of this being that they are of increased falls risk. All feedback received was used and the success of the project highlights the importance of co-production from the beginning of a project.

The Falls team gathered feedback using a service user/carers experience survey and this was circulated via post, QR code for online completion and telephone completion was offered also. The Falls team undertook Emergency Department drop in sessions for compliance audits and staff support visits and gathered staff feedback. Examples of the feedback received include:

**Figure 10: Falls Awareness Poster**



***"I think this is a great idea and an easy way to highlight a fall risk within a busy department, which is very reassuring" (Service user)***

***"Think Yellow has been an effective efficient way to identify and minimize risk, it takes two minutes to do and we have seen the results" (Staff)***

***"It is a simple visual tool to help keep patients safe in a dignified way, less falls have meant less reactive tasks to complete and more time to care" (Staff)***

**As a result, there was a 31% reduction in the amount of falls in the Ulster Hospital Emergency Department achieved**

# Involvement & Experience in Practice

## Childrens and Young Peoples Residential Services –Parent and Carer Support Group

The South Eastern HSC Trust Children and Young People's Residential Services (ReSET) in response to current strategic documents '**A Life Deserved: "Caring" for Children and Young People in Northern Ireland**' strategy (2021) and **Children and Young People's Strategy 2020–2030** (2021) developed an innovative approach to supporting parents and carers of children and young people in care.

In August 2023 all ReSET staff completed the Trust's PPI training and began to plan how they would reach out to and build trust with parents and carers. The ReSET team used quality improvement methodology to increase the engagement of parents in the service.

ReSET established a group to offer support to parents and carers of children who live in Trust Children's homes. The group aims to offer information, support (for example, around self-care activities), peer support, and provides an opportunity for the service to listen to feedback and learn about how to improve and shape the service. Using a co-production approach from the beginning the ReSET team asked parents and carers to design the programme and fixtures for the support group as shown in Figure 12.

### Quality Improvement Project aim:

***"Increase participation of families/carers of the current young person population in children's residential in a group from 0% to 50% by June 2024."***

**Figure 11: Information gathering design tool**

**PARENTS AND CARERS SUPPORT GROUP**

Together with YOU, we would like to design a program for our support group.  
Is there any certain topic/activity you would be interested in? .....

Below are our ideas on how we can spend time together.  
Mark each from 0 to 5.  
5 means that you are most interested.

- ☒ a day in the forest with coffee .....
- ☒ Information session about residential therapeutic service (OT/SLT) .....
- ☒ relaxation session with sound .....
- ☒ managing challenging behaviour .....
- ☒ art painting session .....
- ☒ drug and alcohol awareness .....
- ☒ cold water swimming .....
- ☒ fishing .....
- ☒ cooking session .....
- ☒ mental health sessions .....
- ☒ pottery sessions .....
- ☒ information session with managers of children's residential service .....

General information:  
What time of day are you available?  
In the morning..... In the afternoon.....  
In the evening..... at any time ....  
Do you need help with child care? .....

YES NO  
Do you need help with transport? .....

Any dietary requirements? .....

YES NO  
Name and contact number .....

Thank you

**NOTES:**  
THE FIRST INFORMATION SESSION  
PLANNED ON APRIL 11 AT 6 PM

**NOTES:**  
WHAT WOULD WE LIKE TO OFFER YOUR  
SUPPORT YOUR OTHER PARENTS AND CARERS,  
SHARE YOUR OWN  
EXPERIENCE OF PROGRAM  
OR VARIOUS TOPICS

**NOTES:**  
SUPPORT YOURSELF WITH PEOPLE WHO  
EXPERIENCE YOU,  
BELIEVE IN YOU,  
SUPPORT YOU,  
UPSET YOU,  
PUNISH YOU,  
AND APPRECIATE YOU



The outcome was to deliver programmes in 8 week 'blocks' as shown in figure 12 with a wide range of sessions including the following activities contributors: Contracting, Art, Sound bath, Speech and Language Therapy, Occupational Therapy, Psychologist, Therapeutic Crisis Intervention (TCI) Trainer, Pottery, Pizza making, Forest School, Q&A Senior Managers, Voice of Young People in Care (VOYPIC), Northern Ireland Framework for Integrated Therapeutic Care (NIFITC), 'Charter' workshop, Trust Structure, Cupcake decorating; and Aromatherapy.

**Figure 12: Parent and Carers Group Programme**



There are 9 parents and carers who are members of the support group and the ReSET team value and strive for meaningful involvement in all that they do. The ReSET team asked for and listened to feedback, helped to organise child care, transport, and considered venue so as to ensure attendance was possible for members.

They recognised the need to provide a space where members felt safe, that there was confidentiality, that attendance was voluntary, and to have a communication mechanism that fitted the needs of members. The support of senior management for co-production enabled this group to develop and have a positive impact. Members shared testimonies describing how parents and carers of children and young people can feel marginalised and that the support group gave them their voice. Through being empowered by co-production, this helped to inspire members to address other issues they were facing. Surveys are used to collect feedback and satisfaction levels have remained at 9 out of 10, example of feedback from parents on benefits of the support group are reflected in these statements,

***"Breaks down the them and us"***

***"You are investing in your child"***

***"The support, peer support, honesty, trust"***



# Service User Feedback

The South Eastern Trust continually strives to improve the quality of the services it delivers for all service users.

In order to improve services, it is essential that the service user voice is sought, listened to and responded to. Change process are in place to influence and drive change based on service user experience.

The Trust receives feedback from service users and carers/relatives through a range of methods, to include:

Patient & Client Experience  
Standards Programme

Quality Improvement  
Always Events

10,000 More Voices

No More Silos  
Programme

Online User Feedback  
System (Care Opinion)

Compliments

Bespoke Surveys  
Programme

Complaints



# Care Opinion



The Trust launched the Regional Online User Feedback System in 2020 and has successfully implemented the system to become a key component of the organisation's suite of user feedback tools.

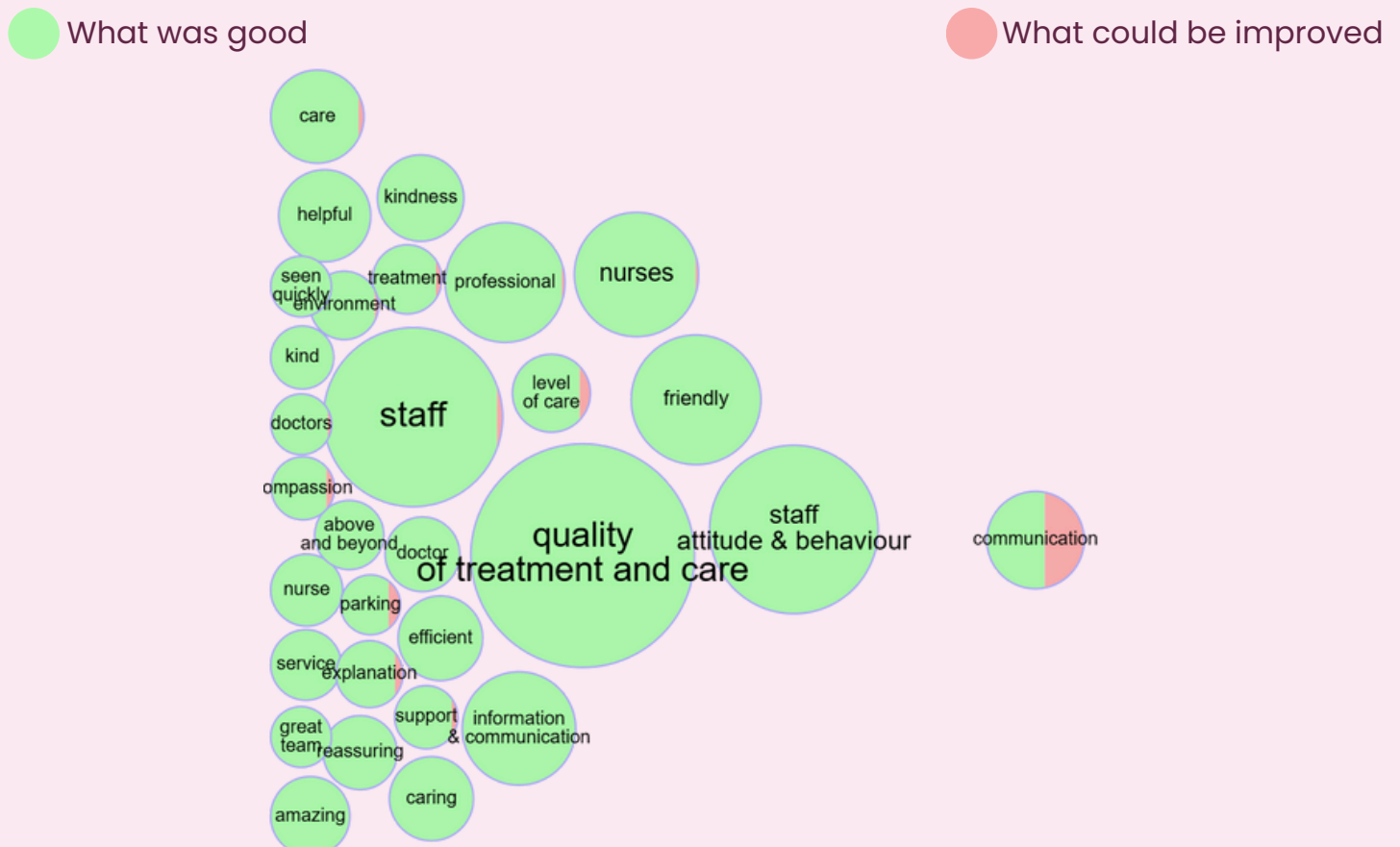
The system uses the Care Opinion platform. The Trust has had over 2,912 patient stories submitted with 833 stories shared across 2024/25 (a 43% increase on 2023/24).

The South Eastern Trust subscription currently sits at 527 across our Trust staff and we hold a 100% response rate to stories shared via Care Opinion.

Across 2024/25, South Eastern Trust did not receive any criticality score 4 or 5 stories and received a relatively small percentage of criticality score 3 stories (3.1%) which were responded to appropriately and resolved with opportunities for learning availed of.

Themes arising across 2024/25 are demonstrated below:

**Figure 13: Care Opinion Visualisation—"Tag Bubble", all stories published between 01/04/2024 and 31/03/2025**



# Involvement & Experience in Practice



## More training on acceptance of autism

A story shared by a parent about their experience initially expressed positivity around the attitude and behaviour of staff before their son's procedure, however when collecting their son from Ulster Hospital Theatres they encountered another member of staff who did not show a comprehensive understanding of autism and learning disability. The parent and child's experience highlighted the need for further training on the "acceptance of autism and how not to alienate parents".

Service management explored the options available to further knowledge of Learning Disability & Autism across the service. Management completed "Supporting Children and Young People with Autism – Workshops for Trust staff" that includes 3 modules "What is autism?", "Adapting your practice" and "what works". Service management requested that all theatre and recovery staff undertake the training to provide assurance that staff attitude and behaviour is in alignment with the high-level quality of care we seek to provide to every service user, relative and carer. This was also shared with Theatre/Recovery support services and administrative staff to help further improve experience. Staff have found this training to be very beneficial. The story author found this response to be helpful.

**Figure 14: Turnaround story quote poster**

**Care Opinion**  
What's your story?

**To share your story...**  
Visit the website  
[careopinion.org.uk](https://careopinion.org.uk)  
Scan the QR code  
Or call the telephone number  
0800 122 3135  
**Your story can make  
a difference!**

**"More training on acceptance of autism"**  
- Ulster Hospital, Theatres / Recovery

**No pity please said...**  
"My son was in for a hearing test under GA. My son has ASD and Severe Learning Difficulties... When my son was coming round after the GA he woke and the nurse had to come get us. We went in and a staff member was holding him. I took him from their arms. Staff member was asking questions about him. Will he grow out of it? Did you know there was a problem? Is there any help? Surely there is help from somewhere? I explained the waiting times etc. It was the pity the staff member's voice and tone. The pity head tilt. That was offensive. Staff shouldn't assume that parents need help or that there is a fix. Or that we should be sad about it? I felt like I had to advocate for my sons acceptance. More training on acceptance of autism and how to not alienate parents would be advisable."  
January 2025

**What we did...**  
Response from Linda Gibson, Lead Nurse ATICS:  
"I am wishing to follow up, on my previous response to your Care Opinion and I would like to let you know that the staff involved have been spoken to. I have also reached out and received the link to the Trust's Autism on line training for all trust staff. I now have completed the training myself and have disseminated it to all managers, requesting that all our theatre and recovery staff, undertake the training. I found the training to be very beneficial, hence my request that all staff complete it. I do hope this goes some way, to reassure you, that we have taken your Care Opinion most seriously."

Care Opinion is Independent of the National Health Service.  
All feedback is anonymous and is published on the  
Care Opinion website.

This example of a 'Change Made' is showcased by the Theatres team, where they display the "Turnaround Story Quote" poster in their circulation spaces to allow shared learning for staff across the various services that would interact with Theatres, and also demonstrate to service users, families and carers that their voices are being heard.

To read the full story on the Care Opinion website go to: [More training on acceptance of autism | Care Opinion](https://www.careopinion.org.uk/1316772) ([www.careopinion.org.uk/1316772](https://www.careopinion.org.uk/1316772))

# 10,000 More Voices



The aim of 10,000 More Voices Programme is to cultivate a culture of partnership, involvement and listening. It gives individuals an opportunity to highlight what is important to them, such as what they particularly liked or disliked about their healthcare experience and what matters to them.

The 10,000 More Voices Programme aims to gather stories from patients, clients, families, carers and staff regarding their experiences in health and social care, in order to understand and improve user experience.

The 10,000 More Voices Programme is led by Public Health Agency in partnership with Cognitive Edge which provides the Sensemaker software used to analyse and theme service user feedback.

The 10,000 More Voices projects led across 2024/25 are detailed below:

- “My Experience of a Care Home – A resident’s perspective”
- “My Experience of Waiting for a Package of Care”
- “My Experience of Decisions About My Care” (Shared Decision Making)
- “My experience of seeing the Nurse at my GP Surgery”

To keep up to date, check out all published reports on Engage:

**[engage.hscni.net/pce-resources](https://engage.hscni.net/pce-resources)**

**Figure 15: 20240730 My Experience of a Care Home – A Residents Perspective\_Survey**

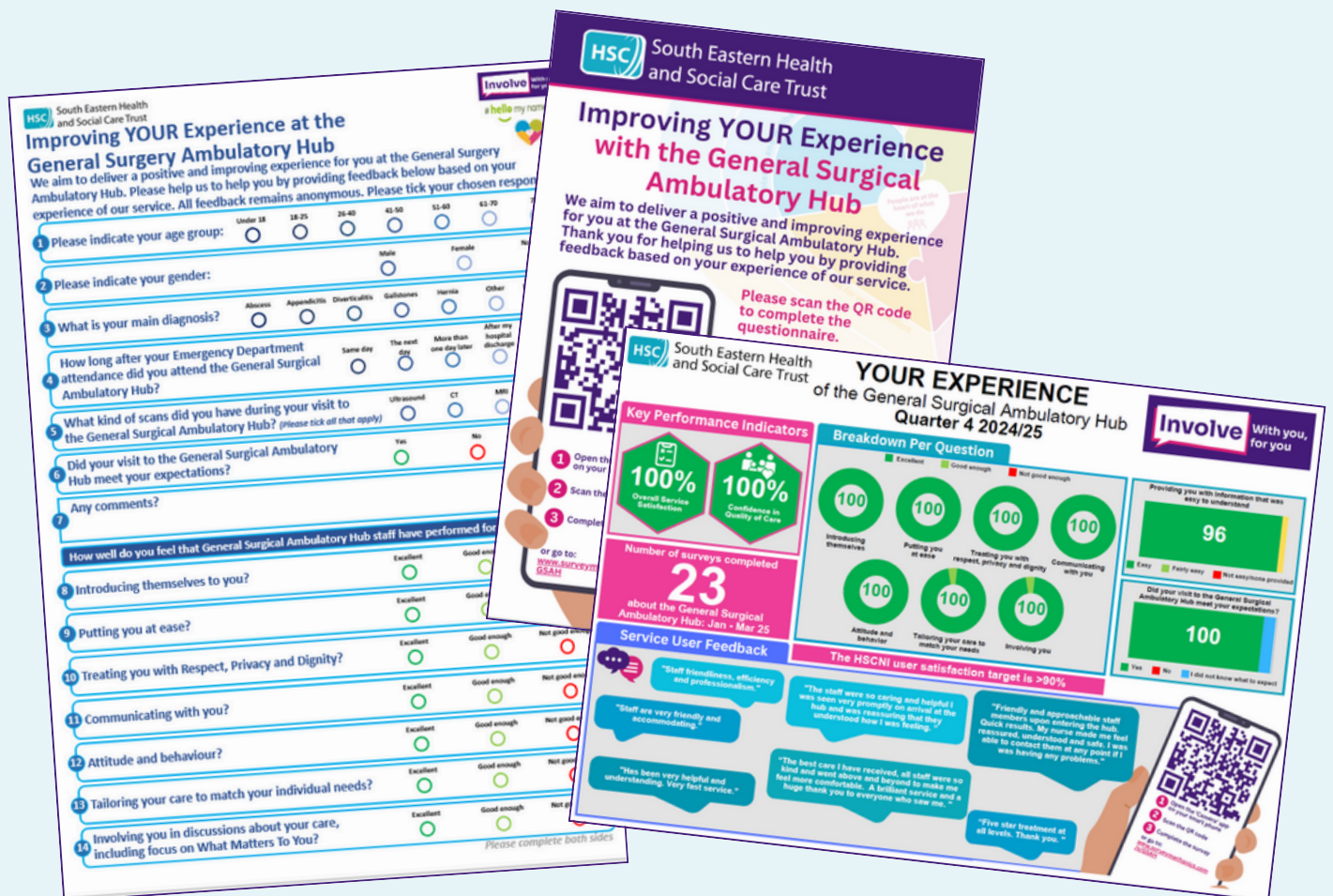


# No More Silos Programme

A full suite of user experience surveys are active across the **Ambulatory Care Hubs** (Acute Medicine Hub, Acute Oncology Same Day Emergency Care Hub, Cardiology Hub, Community Palliative Care Centre, Diabetes Hub, Gastro Hub, Neurovascular Transient Ischaemic Attack Hub, Paediatric Care Hub and Surgical Hub). **Unscheduled Care areas** (Emergency Department, Urgent Care Centres, and Minor Injury Units) have all received user experience tools to begin capturing service user feedback. Previous survey projects for these areas focused on the experience of transition of services. The focus has shifted to embedding satisfaction within service provision across unscheduled care services.

Quarterly reports prepared for all reporting areas with a planned year-end thematic review based on qualitative feedback provided. The survey and reporting tool were reviewed with each service during Quarter 3 2024/25. All Ambulatory Care Hub surveys have been made available online and QR code posters circulated to services for display.

Figure 16: Surgical Ambulatory Hub suite of user experience tools





# Patient and Client Experience Standards Programme

The South Eastern Trust's Involvement and Experience Team manages the Patient and Client Experience Standards Programme, which supports the implementation of user feedback surveys across inpatient, outpatient, primary and community care and other service areas on a bespoke basis.

The programme continued to see a high volume of project reports produced during 2024/25, service user voices were an integral part of informing the quality improvement action plan content within the report.

The Health and Social Care Northern Ireland (HSCNI) user satisfaction target is greater than 90%. The South Eastern Trust achieved and exceeded this target across all key fronts.

The inpatient, outpatient and primary & community care Unit Average Satisfaction and Confidence in Quality of Care scores are evidenced below:

## Inpatient Wards

Completed surveys across 2024/25: 3224

- Unit Average Satisfaction: 98.3%
- Confidence in Quality of Care: 99.1%

## Outpatient Departments

Completed surveys across 2024/25: 4423

- Unit Average Satisfaction: 99.8%
- Confidence in Quality of Care: 99.9%

## Primary and Community Care Services

Completed surveys across 2024/25: 1136

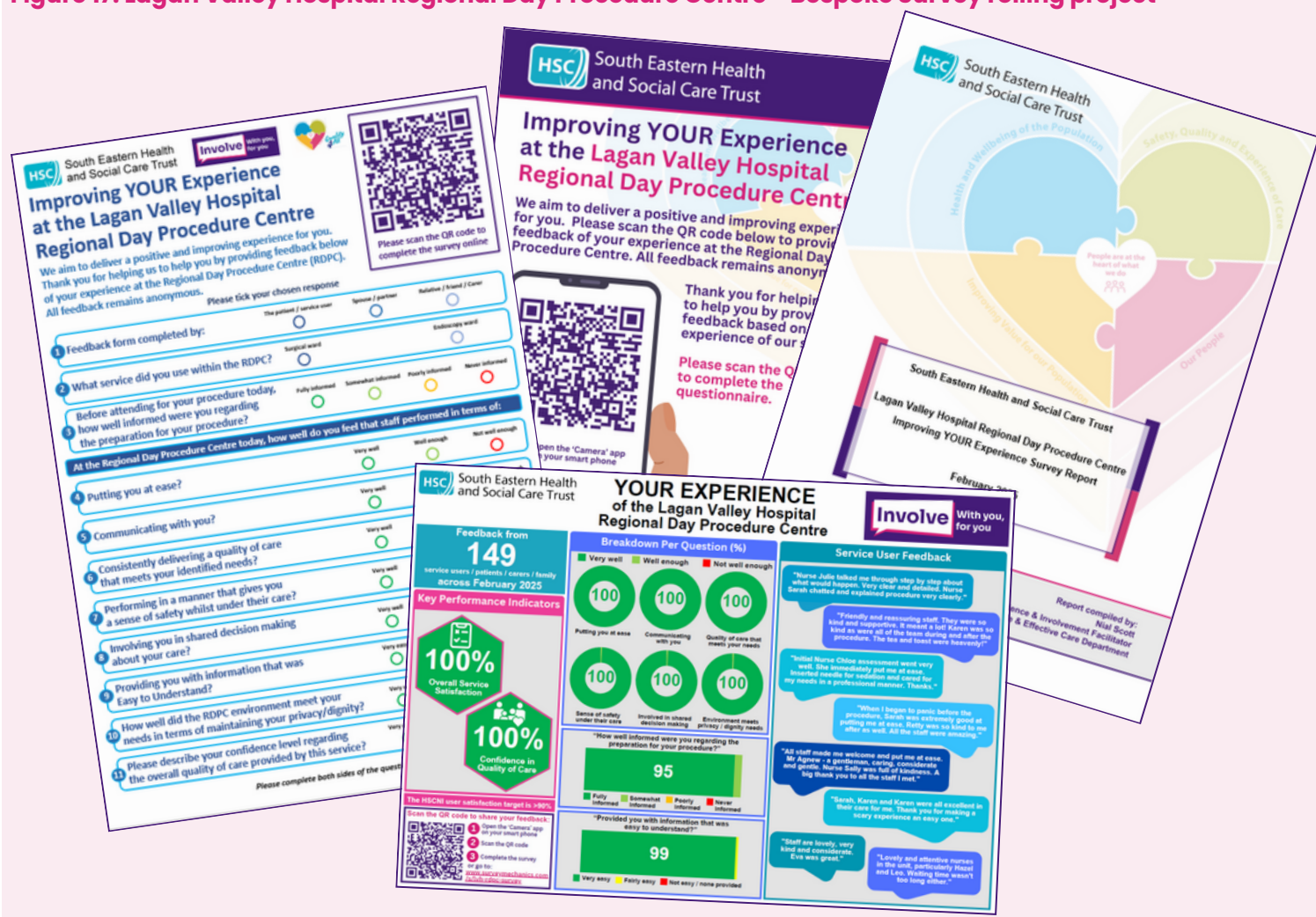
- Unit Average Satisfaction: 99.6%
- Confidence in Quality of Care: 99.8%

# Bespoke Surveys Programme

A bespoke projects stream is in operation to support a wide range of services to gather, understand, learn from the service user experience in order to inform and influence change. 43 bespoke survey projects commenced during 2024/25. 22 of these projects alongside 9 projects that commenced in 2023/24 have concluded and user feedback results shared with respective services. There are an additional 19 projects that operate on a rolling basis (monthly, quarterly, biannually or annually).

Each service participating in the programme receives a results report and public display results poster. Action plans are issued as required, with service held to account to complete. Actions are listed against any indicator where service user satisfaction rates fell below 90% or where thematic analysis highlighted areas of concern.

**Figure 17: Lagan Valley Hospital Regional Day Procedure Centre - Bespoke Survey rolling project**



# Knowledge and Skills

The Trust continues to deliver training to staff to help build capacity and confidence with regards to involving service users and carers.

## Care Opinion training

Within the Trust, two modules were launched on LearnHSCNI during Quarter 4 of 2024/25. These modules include:

- Introduction to Care Opinion Northern Ireland (Regional e-learning module)
- Care Opinion Responder Training (Bookable facilitator-led session)

Across 2024/25, 40 individuals were trained within the Trust with a further 7 through the webinar hosted externally by Care Opinion.

## Personal and Public Involvement (PPI) training

During 2024/25 the Trust offered two learning modules to staff; Involving service users: the essentials and Methods for involving service users. A total of 112 training spaces were attended by Trust staff during April 2024 – March 2025.

Bespoke training sessions are also delivered to teams across the Trust to help raise awareness of service user and carer involvement amongst staff and to provide support and advice with regards to designing and implementing their involvement plans. A service engagement session was delivered in March 2025 with 20 staff in attendance.

Increases in knowledge in relation to service user and carer involvement have been reported by all staff attending the training. The Trust worked with health and social care colleagues to develop a regional involvement training programme to ensure consistency across Trusts. A scoping exercise of the training offered by all Trusts was carried out in 2024 and a draft package was issued in February 2025.



# Key Priorities for 2025 – 2026

## Promote

Continue to promote how to capture patient experience in ways to make meaningful change for future healthcare delivery. Putting our service users and carers at the heart of what we do. Sharing learning and showcase best practice.

## Grow

Continue to optimise the joined up working between Experience and Involvement work programmes to fully embed a Trust integrated Involvement and Experience direction. Learn from good practice across the region.

## Develop

To further develop training to support and equip service users/carers and staff with the knowledge and skills to participate in involvement activity. To advance the Trust champion network model across each Directorate to promote and develop the involve agenda.

## This will allow the Trust to....

### Listen

Continue seeking feedback and actively listen to hear what service users, carers and their families say about their experiences, and then actively involve them in how we could improve this. Ensuring patients feel heard and understood.

### Act

Work with and empower services to ensure that staff are confident and competent in asking for feedback from service users, carers and families on experience. Using this experience to seek understanding. Increase the influence of our service users, carers and families through representation in Trust groups to help shape development of patient safety initiatives. Engaging our service users in their care.

### Improve

Build involvement into how we provide and improve all aspects of our services, for both clinical and non clinical staff, which has an impact on service users, carers and families. Ensuring lived experience is supporting service improvement with meaningful engagement in partnership. Aspiring to experience, engagement and involvement being part of our normal way of working.



# Consultations

No formal public consultations were undertaken by the Trust in 2024/25.

# Acknowledgement

We would like to extend our sincere appreciation to our staff, service users, carers and other key stakeholders for their continued commitment to involvement. Your voice will help shape our future services.

Please contact the Involvement & Experience Team for further information on our work or if you wish to join our Involvement Network.

[involvement@setrust.hscni.net](mailto:involvement@setrust.hscni.net)

