South Eastern Health and Social Care Trust

Compliments & Complaints Annual Report 2025/26

Foreword



As the Director with responsibility for feedback received across the South Eastern Health and Social Care Trust, I wish to present the Compliments and Complaints Annual Report for 2025/26.

In 2025/26 the Trust received 3,896 compliments. I would like to express my appreciation to those patients, families and carers who have taken the time to recognise and acknowledge the care, professionalism, and dedication demonstrated by our staff and teams.

The Trust continues to value feedback in the form of comments and concerns raised through complaints. These provide valuable insight into the services we provide and as such support learning and service improvement. We remain committed to achieving the best possible outcomes for all our patients and service users. When standards fall short, it is important that we are made aware so that appropriate remedial action can be taken and measures put in place to improve our service and prevent recurrence(s).

In January 2026, the Trust implemented the Northern Ireland's Public Services Ombudsman's 2 Stage Model Complaints Handling Procedure. This revised approach aims to ensure that all complaints are registered, including those that may have previously been recorded as informal concerns, and that they are addressed within a shorter timescale. Key principles of the new procedure are that complaints can be documented by anyone and may now progress through a two-stage process, depending on their complexity.

The MCHP anticipates that the majority of complaints will be managed at Stage 1. Early feedback on the implementation of the new procedure has been encouraging. We appreciate the importance for patients and their families of improved timeliness and early resolution for those who raise concerns. We believe that this new process will facilitate improved patient care.

The ongoing challenges within the Health and Social Care sector are well recognised. I would like to take this opportunity to acknowledge and thank all staff for their continued commitment to ensuring we address concerns and complaints constructively, effectively and with sensitivity, recognising the importance to patients, service users, and their families.

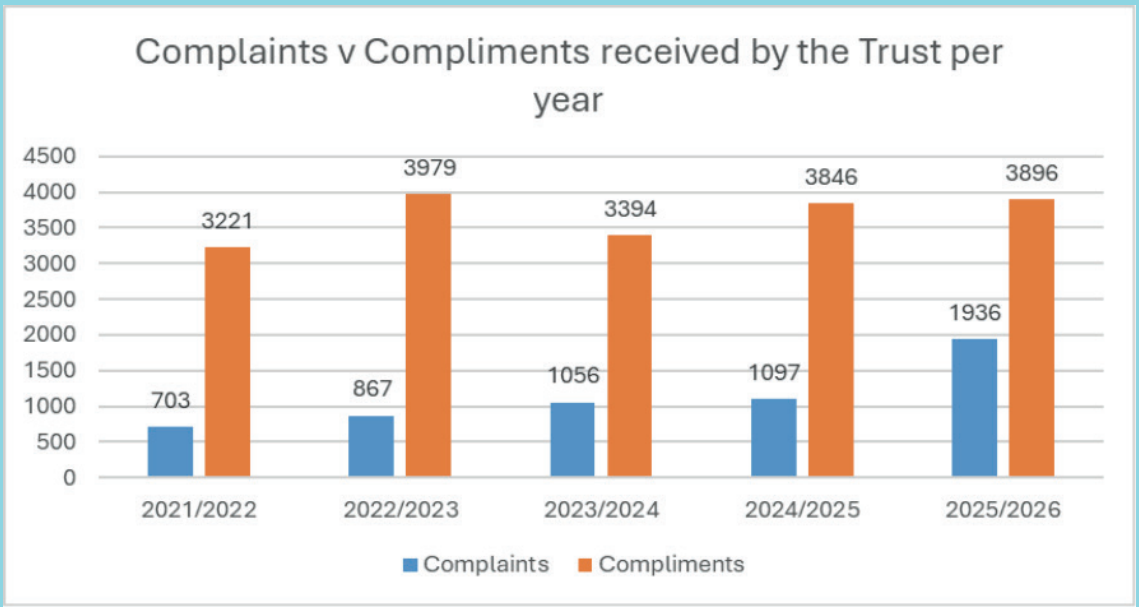
Facts & Figures

In the financial year 1 April 2025 to 31 March 2026:

- **3,896** Compliments were received
- **1,936** Complaints were received
- **Top 3 reasons** of complaint were Institutional, Quality and issues relating to Communication.

How did we do this year?

During the past year (2025/26), the Trust received **3,896** compliments and **1,936** complaints. The graph below shows the number of complaints and compliments received per year over the last 5 years.



Over the past five years, the number of complaints received by the Trust has trebled, with a particularly notable increase in 2025/26 following the introduction of the Model Complaints Handling Process (MCHP) in January 2026.. This increase is largely attributable to all Trust staff now being able to log complaints at point of receipt, enabling complaints to be recorded in real time and resulting in more comprehensive reporting and capture of complaints across the organisation.

Of the 1,936 complaints logged over the year, 1,059 complaints were logged under the previous HSC Complaints Policy between 1 April and 31 December 2025 , and an additional 877 were logged under the MCHP between 1 January 2026 and 31 March 2026.

Under the MCHP, complaints submitted to the Trust are initially logged as **Stage 1** with the aim of being responded to and resolved within 5 working days. Some complaints are more complex, requiring a more detailed investigation and may be moved to **Stage 2** of the process allowing a longer timeframe to provide a response. As such, direct comparison of complaint numbers before and after the introduction of the MCHP should be considered within the context of these changes to complaint recording and classification arrangements.

Care Opinion

Care Opinion is the regional Health & Social Care online user feedback platform, launched in August 2020, enabling service users, families and carers to share their experiences directly with the Trust and receive a response from the service where care was delivered.

Between April 2025 – March 2026, a total of **999** stories were shared across the Trust by patients/service users, families and carers. This is an increase of 20% from the previous year.

The stories received are awarded a criticality score (0=not critical, to 5=severely critical). The overall safety concern profile remains very low, with 85% (848 stories) assessed as not or minimally critical, only one story rated as strongly critical, and no stories assessed as severely critical. This provides continued assurance regarding the safety and quality of care experienced by service users.

The Trust achieved a 99% response rate, with most stories responded to within seven days, demonstrating strong local engagement and a continued strive towards transparency, accountability, and where possible timely learning from feedback.

Feedback themes continue to highlight that staff are recognised for their kindness, professionalism and compassion, with both positive and negative stories actively used to inform service improvement, support shared learning, and drive experience-led change across services.

Compliments

As a Trust we recognise that care sometimes falls below the standard we would expect. However, alongside this we receive thousands of expressions of appreciation and thanks to acknowledge the excellent services that are provided.
We are proud of our staff and ensure that positive feedback is shared and celebrated. Our staff certainly appreciate feedback from their patients and clients, and knowing when things go well.

In 2025/26 the Trust received **3,896** compliments (see below for some examples).

Please see table below which shows the subjects of compliments by the method received.

	Card	Email	Feedback Form	Formal Verbal	Letter	Social Media	Care Opinion	Total
Quality of Treatment and Care	1005	70	313	162	29	6	547	**2,132**
Staff Attitude & Behaviour	257	58	276	69	16	2	419	**1,097**
Information & Communication	3	11	17	7	0	0	280	**318**
Environment	1	2	4	1	0	0	25	**33**
Other	79	6	12	217	0	1	1	**316**
Total	**1345**	**147**	**622**	**456**	**45**	**9**	**1,272**	**3,896**

Some examples of Compliments received are as follows:

"My brother-in-law became unwell while visiting NI. He deteriorated suddenly and passed away despite attempts at resuscitation. I wish to express my sincere thanks to all staff in Lagan Valley ED where my brother-in-law initially presented and to all staff of Ward 3C UHD. The care and dedication afforded to him was a shining example of all that is good in our NHS and I cannot speak highly enough of the care and attention that he received. Both he and my sister were kept informed, always treated with dignity and respect. When it became evident that he was not going to survive, the staff spoke to us sympathetically and with great empathy."

"I would like to formally compliment and thank my Physiotherapist. He was always on time, approachable and professional when completing regular assessments of my hip. He provided a graded home exercise program and offered advice which has helped me regain strength and reduce pain caused by a recent injury."

"Thanks to the District Nursing Team for the exemplary care provided to my late father-in-law. For just over three years they have gone above and beyond in their care towards him. They got calls from a very worried mother-in-law for help on many occasions including during the night and they without fail answered issues that arose and were there to support."

"Day Procedure Unit, Downe Hospital, can't praise the staff enough all so kind caring and professional. Unit was calm, friendly and clean. All staff from reception to nursing to medics to theatre staff and student staff showed amazing care, attention and compassion. Thank you for making a nervous experience less stressful."

"I contacted Phone First at 9 am. I was given an appointment in Minor Injuries at 12 noon. Had a scan on my knee and referred to GP for ongoing treatment. An efficient and effective service from start to finish."

"I gave birth in the Home from Home unit. Our two midwives were simply amazing. I came into hospital at 7-8cm dilated but still they managed to read and implement my birth plan. I felt so looked after and affirmed during labour. "

"Recently we had a security alert in our area, and as a result Council and the Trust activated emergency procedures. The representative from the Trust was incredible in alleviating displaced resident's concerns, and really offered a pillar of support that I know settled them throughout the incident and the time they were out of their homes"

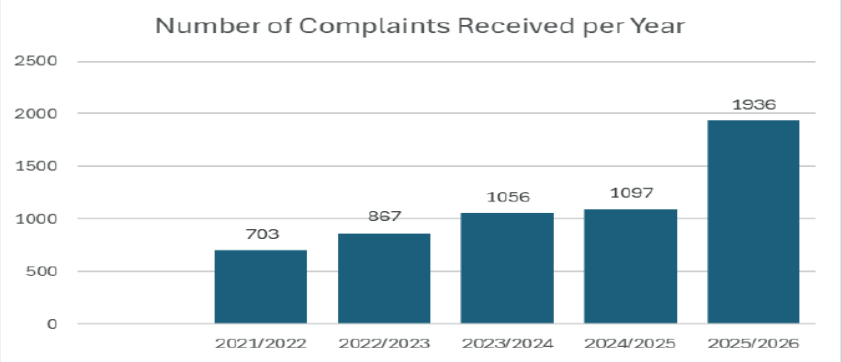
Complaints

Despite the increase in complaints recorded during the year, the overall number of complaints remains low. This should be considered in the context of the large geographical area served by the Trust and the significant volume of interactions that Trust staff have with patients, service users, clients, and their families on a daily basis. This continued low level of complaints reflects the substantial amount of care and support provided across Trust services, while also highlighting the importance of ensuring that concerns and complaints are effectively captured, recorded, and addressed when they arise.

The Trust:

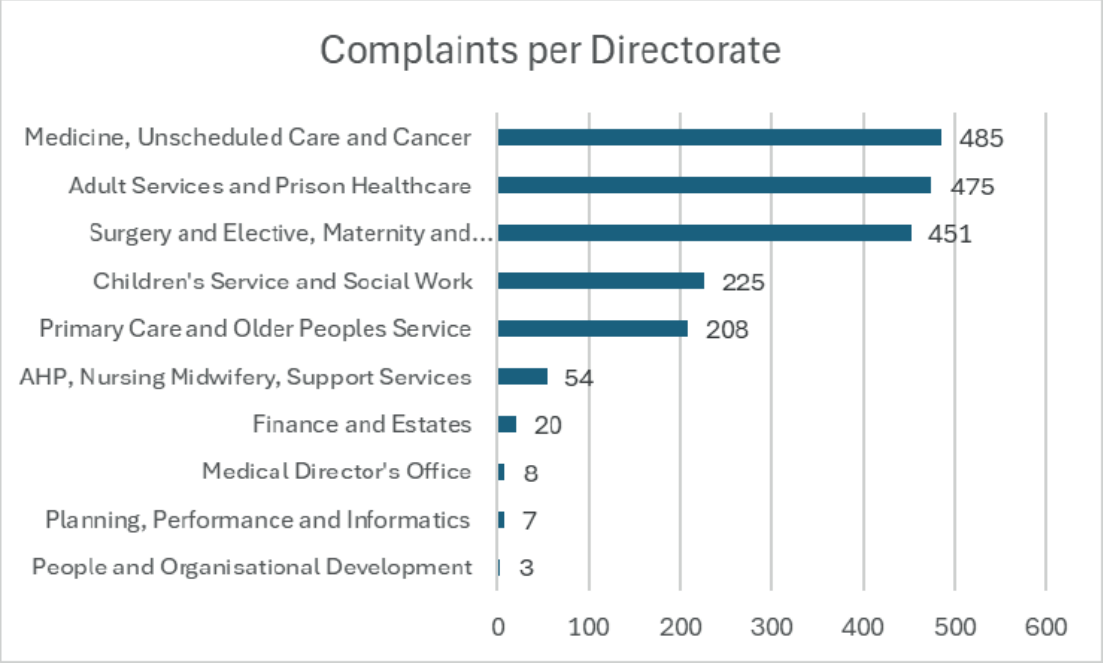
- Serves a population of approximately 375,917
- Employs over 15,945 staff
- Provides a wide range of health and social care services to people in their own homes, in community settings and in the Ulster, Lagan Valley, Downe, Newtownards and Bangor Hospitals
- In addition, approximately 183,298 people attended our Emergency Departments during the year with approximately 58,651 people treated in hospital as day cases and about 76,440 people being admitted to our 3 main hospitals (Ulster, Downe and Lagan Valley). This is a notable increase from 2024/25.

The number of complaints received continues to increase as highlighted in the graph below.



The South Eastern Trust provides healthcare to the prison population across Northern Ireland. In 2025/26, complaints relating to Healthcare in Prison accounted for 6% of the total number received by the Trust.

A more detailed breakdown of complaints by Directorate is shown in the diagram below.



What people complained about

In line with the introduction of the MCHP, new categories were introduced which will ensure consistency of reporting across all HSC organisations.

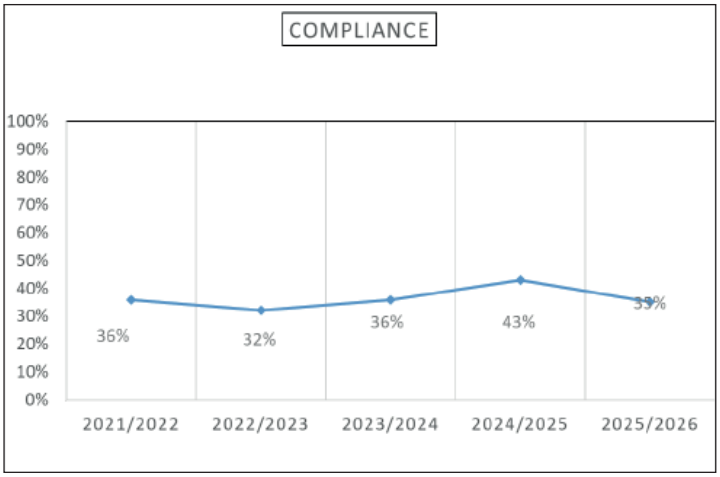
The table below shows the number of complaints by subject for the past year (2025/26). The figures are per issue of complaint, as a complaint can have more than one issue. For 2025/26 we received 1,936 complaints and these raised 3,301 issues, compared with 1,056 complaints and 2,194 issues during 2024/25.

The top three subjects of complaint in the past year were Institutional, Quality and Communication. These are the same top subjects as last year, and this is similar across other Health & Social Care Trusts.

Category of Issue	Number	Percentage
Institutional	911	28%
Quality	883	27%
Communication	520	16%
Rights	311	9%
Listening	240	7%
Environment	174	5%
Safety	168	5%
Administration	94	3%
Totals	3,301	100%

Response Times to Complaints

35% of complaints received prior to the introduction of the MCHP (1 April 2025 – 31 December 2025) were responded to within the target of 20 working days, which is a decrease of 8% from the previous year (43%), as shown in the graph.



The decrease in compliance during the reporting period, has been primarily due to the increased volume of complaints being received and logged. This has placed significant pressures on investigators, particularly those working in clinical roles, impacting their capacity to complete investigations within the required timescales.

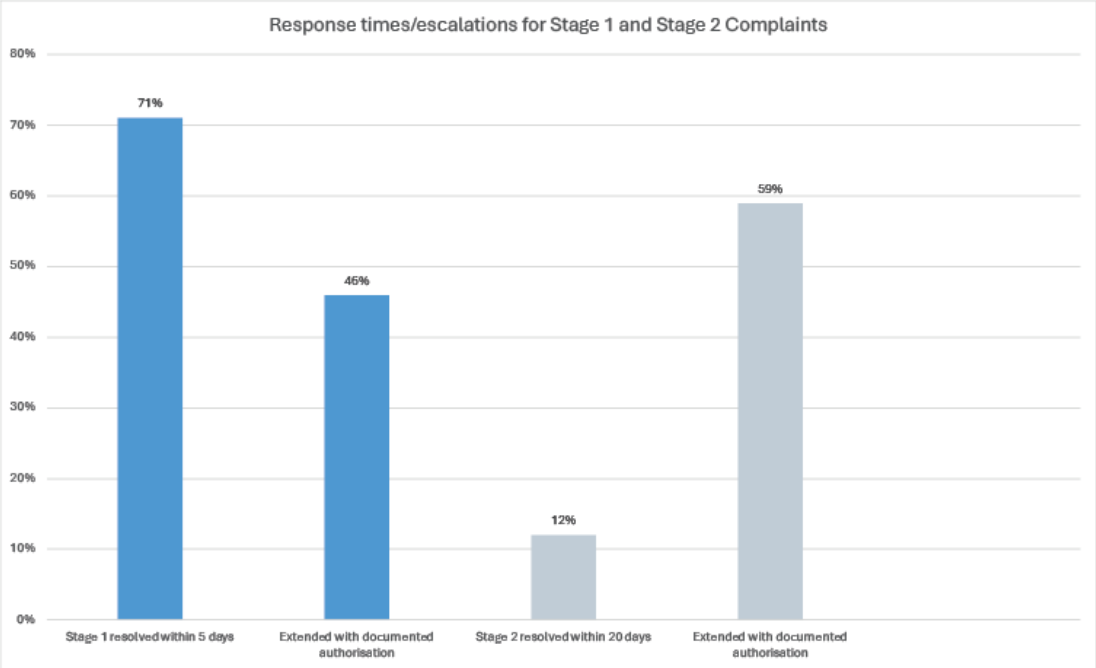
Implementation of the MCHP 2-stage complaints process is expected to provide improved oversight and assist Directorates with responsiveness to complaints overall and improve performance. The aim is to address all complaints where possible at Stage 1 within shorter timescales, while more complex cases may need to be escalated to Stage 2, providing investigators with sufficient time to undertake detailed investigations and deliver high-quality responses following a robust investigation.

Of the 877 complaints logged under the MCHP since 01 January 2026,198 were escalated from Stage 1 to Stage 2 for further investigation.

Response Times to Complaints cont'd

During the period 1 January 2026 to 31 March 2026, 672 Stage 1 complaints were closed with 71% (474) of Stage 1 complaints responded to within the 5 working day target. Of the complaints requiring an extension, 46% (148) had documented authorisation in place.

A total of 178 Stage 2 complaints were closed during the reporting period with 12% (21) receiving a response within the 20 working day target. Of those requiring an extension, 59% (39) had authorised extensions recorded.



The average time taken to issue a full response was 7 working days for Stage 1 complaints and 64 working days for Stage 2 complaints, reflecting the increased complexity and investigative requirements associated with complaints managed at Stage 2.

Complaint outcomes at Stage 1 were largely positive, with 585 complaints (87%) resolved, and 44 (7%) not upheld, 23 partially upheld (3%) and 20 (3%) upheld.

At Stage 2, outcomes demonstrated that investigations frequently identified areas where aspects of the complaint were substantiated. Of the 178 complaints closed, 58 (33%) were partially upheld, 21 (12%) were upheld, 43 (24%) were resolved, and 56 (31%) were not upheld. The high proportion of upheld and partially upheld outcomes highlights the value of detailed Stage 2 investigations in identifying learning opportunities and service improvements, while the number of resolved outcomes reflects a continued focus on addressing concerns and achieving resolution for complainants where appropriate.

If people remain dissatisfied

Sometimes people are not always happy with the outcome of the investigation into their complaint. We encourage people to let us know if they are unhappy, and we consider other options to attempt to resolve their concerns. We have continued to offer meetings with complainants, as this allows the opportunity for more detailed discussions, either virtually or face-to-face.

In the last year 16% of complainants contacted us to tell us they were not entirely satisfied, which is the same as during 2024/25.

Ombudsman

Following the complaints process being concluded within the Trust, complainants have the option to approach the Northern Ireland Public Services Ombudsman (the Ombudsman) directly.

In 2025/26 34 complainants (18%) approached the Ombudsman to request an investigation of their complaint, an increase from 16% in the previous year. Of these 34, 3 were not accepted for investigation by the Ombudsman, 12 are currently under consideration and 19 are ongoing.

A total of 12 complaints were closed by the Ombudsman during 2025/26:

- Four were not accepted for investigation by the Ombudsman
- In 4 cases the Ombudsman did not uphold any of the complaint
- Four cases had failings identified and recommendations made by the Ombudsman for remedy/improvement to services.

Trends in Ombudsman cases

Decrease in cases where no further investigation was completed by Ombudsman

2022 - 2023	2023 - 2024	2025 - 2026
4	5	4

Examples of actions taken to settle cases:

- Apologise for lack of apology in Trust response to the complaint
- Provide letter of apology identifying the service improvements that have been made
- Further meeting with complainant to discuss complaint/resolution.

Cases where failings were identified by Ombudsman

2022- 2023	2023- 2024	2025 - 2026
3	7	4

Themes in the failings identified continue to relate to:

- Record keeping
- Quality of treatment & care
- Communication.

Examples of recommendations implemented made as a result of failings:

- MRI imaging protocol revised and priority triaging given to Red Flag or Urgent clinical indications.
- New booking tracker in place to optimise workflow
- Attendance validation process implemented to maximise attendance and reallocate free appointments to waiting list
- Procedure regarding grave signing reviewed and updated.

Independent Sector Complaints

Social care providers within the Independent Sector that hold a contract with the Trust are required to report all complaints to ensure compliance with contractual obligations, as well as relevant regulations and legislation.

During the 2025/2026 reporting period, a total of **135 complaints** were recorded from the Independent Sector of which **82** related to Care Homes, **50** were related to Domiciliary Care and **3** related to Supported Living.

Complaints Procedure - Children Order

Complaints by, or on behalf of, children about services provided to them under Part IV of the Children (NI) Order 1995, are dealt with under a separate procedure – the Children Order Representations & Complaints Procedure.

Over the year, there were 7 complaints managed at the informal 'problem-solving' stage. All were resolved and none progressed to Stage 1 formal internal investigation. Under the new MCHP, problem solving/local resolution will now be logged as Stage 1 complaints.

Lessons Learnt / Improvements from Complaints

We welcome complaints so that we can learn lessons and improve our services. The web-based system for recording complaints has given the Trust greater visibility of learning identified, actions taken and allows better trend analysis to be completed. Following feedback from service users, Trust responses should record lessons learnt where applicable so patients can clearly see what has happened following their complaint. Complaints are also discussed with staff concerned and brought to team meetings for discussion as to how services can be improved. A number of improvements have been put in place over 2025/26 following complaints.

You said, We did

There were many service improvements as a result of complaints in 2025/26 and a few examples are listed below:

You Said:

Multiple requests for X-rays via GP were not acted on. X-ray completed in Bangor Hospital did not show up significant findings. Symptoms continued to get worse and resulted in patient being hospitalised. Patient later diagnosed with lung cancer.

We Did:

A new red flag reporting pathway was implemented. Two training sessions were arranged for all radiographers and case discussed. Training encouraged prompt awareness for radiographers to mark appropriate images for urgent/red flag reporting.

You Said:

Patient felt ridiculed and that NHS guidelines were not followed while being treated.

We Did:

Additional reference documentation available regarding this particular treatment. All staff reminded to communicate appropriately with all patients at all times.

You Said:

Patient arrived for appointment to find it had been cancelled due to staff annual leave and they had not been informed.

We Did:

Ulster Hospital Secretaries to liaise with Downe and Lagan Valley Hospital Secretaries regarding all medical staff leave - to ensure all teams are aware of staff annual leave and appointments are rescheduled in a timely manner.

You Said:

Parent was turned away despite their child having a severe allergy and needing medical attention. Staff were unhelpful and unsympathetic to the child's situation.

We Did:

Guidance has been updated regarding walk ins and circulated to all clinicians and admin support staff.

Governance

Complaints are discussed at a live weekly governance call with representation from all Directorates providing a forum to identify and explore any emerging patient safety themes. In addition, Directorates are required to discuss complaints, review learning and implement actions as part of their individual governance arrangements.

To provide the Trust with good oversight of complaints received and learning identified, regular reports are provided to the Corporate Governance Committee and the Governance Assurance Committee (a subcommittee of Trust Board).

Learning from complaints is an integral part of the process and this has been managed and supported through the governance and Directorate structures. However further work is needed to ensure that this continues to be embedded across the Trust.

Complaints/Patient Liaison Department
Lough House, Ards Hospital, Church Street, Newtownards, BT23 4AS
T: (028) 9056 1427 E: complaints@setrust.hscni.net E: compliments@setrust.hscni.net