

Meeting:	Grampian NHS Board
Meeting date:	8 October 2026
Item Number:	9.2
Title:	NHSG Feedback and Complaints Annual Report 2025 - 2026
Responsible Executive:	Rabina Tindale, Interim Executive Nurse Director
Report Author:	Gillian Poskitt, Associate Director Quality Improvement and Assurance

1 Purpose and Recommendations

This report is presented to the Board for:

- Assurance

Recommendation(s)

The Board is asked to:

- Discuss the findings of NHS Grampian Feedback and Complaints Annual Report 2025/26 and the planned improvement activity for 2026/27.
- Note that the annual report was scrutinised and endorsed as suitable for publication by the NHS Grampian Clinical Governance Committee on 18 August 2026.
- Note that the annual report is being published on the NHS Grampian public website and that the required national Key Performance Indicator return will be submitted to Public Health Scotland by 30 September 2026.

This report relates to:

- Legal requirement

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

The subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section below):

- 3068: Deviation from recognised service standards of practice and delivery.

2 Report summary

2.1 Situation

The Scottish Government requires NHS Boards to publish an annual report detailing performance against the NHS Scotland Model Complaints Handling Procedure Key Performance Indicators. The NHS Grampian Feedback and Complaints Annual Report 2025/26 is attached at Appendix 1.

The report was scrutinised by the NHS Grampian Clinical Governance Committee on 18 August 2026 and endorsed as suitable for publication. The Committee confirmed that no matters required escalation and that no additional routine reporting to the Committee was required unless requested. Following endorsement by the Committee, the report is presented to the Board for acknowledgement and discussion in public.

Publication of the annual report and submission of the associated KPI return to Public Health Scotland will be completed before the end of September 2026 in line with national requirements.

2.2 Background

In accordance with NHS Scotland requirements, the annual report summarises complaints performance, learning and improvement activity, experience of the complaints process, workforce development, Care Opinion feedback and performance against the national complaints handling indicators.

2.3 Assessment

The annual report demonstrates that feedback and complaints continue to provide important insight into patient, family and carer experience across NHS Grampian. During 2025/26, NHS Grampian received 1,846 complaints, an increase from 1,605 in the previous year. The report also notes 800 Care Opinion stories, 75% of which were completely positive. The most common complaint themes were about our staff, treatment and waiting times.

The report provides evidence that services are listening and responding to feedback, with learning from complaints recorded, reviewed and shared through local governance and learning routes. Feedback and complaints, including trends, are regularly discussed by clinical teams, and actions are recorded where changes or improvements are required. Partial assurance is provided in relation to complaints handling performance. The annual report identifies ongoing challenges in relation to response times, communication, clarity of responses and consistency of experience. These issues remain important, particularly in supporting public confidence and demonstrating timely learning and action from complaints. The areas where partial assurance is provided are reflected within existing improvement activity and risk management arrangements associated with Strategic Risk 3068.

Planned improvement activity for 2026/27 includes further work to reduce the longest open complaints, continued awareness raising through social media and accessible formats, and the introduction of a Real Time Feedback approach across 10 wards at ARI and Woodend.

During its scrutiny of the report on 18 August 2026, the Clinical Governance Committee considered the reported increase in complaints during 2025/26 and the improvement activity set out in response to continuing complaints handling challenges. Members discussed the importance of understanding positive patient experience alongside formal complaints, including the use of Care Opinion and the introduction of Real Time Feedback to capture a broader range of patient views.

The Committee discussed opportunities to improve awareness of feedback routes for patients, families and carers, and the arrangements for monitoring complaints and feedback through the Clinical Risk Meeting and Clinical Governance Committee governance structures. Discussion also included the planned rollout of Real Time Feedback across ten wards at Aberdeen Royal Infirmary and Woodend and how this will support earlier identification of concerns, learning from feedback and improved visibility of positive patient experience.

The Committee noted that complaints represent approximately 0.1% of NHS Grampian inpatient and outpatient activity and recognised the importance of developing a broader understanding of patient experience through qualitative and quantitative feedback. Following scrutiny, the Committee endorsed the annual report as suitable for publication and identified no matters requiring escalation.

2.3.1 Quality / Patient Care

The report demonstrates how feedback and complaints are used to support learning and improvement across NHS Grampian. It includes examples where patient feedback has informed service improvements, highlights learning from complaints, and describes how this learning is shared through local governance arrangements. The report also outlines the planned introduction of Real Time Feedback across inpatient areas to strengthen understanding of patient experience closer to the point of care.

2.3.2 Workforce

Complaints and feedback provide an important source of learning for staff and services. The report describes workforce development activity, including complaints handling, Duty of Candour, Adverse Event Review and Equality and Diversity training, supporting a culture of continuous improvement and person-centred care.

2.3.3 Financial

There are no financial implications arising directly from this report.

2.3.4 Risk Assessment / Management

No new strategic risks arise directly from this report. However, the annual report identifies continuing challenges in relation to complaints response times, communication with complainants and consistency of complaints handling experience. These issues have the potential to impact public confidence and NHS Grampian's ability to demonstrate timely learning and improvement from complaints.

The risks associated with complaints handling performance are recognised within Strategic Risk 3068. Ongoing oversight is provided through established governance arrangements, including the NHS Grampian's Clinical Risk Meeting and NHS Grampian's Clinical Governance Committee. Improvement activity is underway to reduce the longest open complaints, strengthen oversight and reporting arrangements, improve visibility of performance and learning, and support sustained improvement in complaints handling performance.

2.3.5 Equality and Diversity, including health inequalities

The annual report recognises the importance of ensuring that complaints and feedback processes are accessible to all patients, families and carers. Information can be provided in alternative formats, languages and communication methods on request, supported by interpreting and translation services where required. This supports equitable access to complaints and feedback processes across NHS Grampian.

2.3.6 Other impacts

The annual report supports NHS Grampian's commitment to person-centred care, quality improvement and learning from patient experience. Feedback, concerns and complaints provide important insight into the experiences of patients, families and carers and inform service improvement activity across NHS Grampian. The report also contributes to organisational assurance regarding the effectiveness of complaints handling arrangements and demonstrates compliance with national reporting requirements. Planned improvement activity for 2026/27 includes further work to reduce the longest open complaints, continued awareness raising through social media and accessible formats, and the introduction of a Real Time Feedback approach across 10 wards at Aberdeen Royal Infirmary and Woodend.

2.3.7 Communication, involvement, engagement and consultation

The annual report has been informed by feedback received from patients, families and carers through complaints, concerns, compliments, Care Opinion stories and other feedback routes. The report demonstrates how patient and family experience is used to inform learning, service improvement and organisational priorities. Planned improvement activity includes continued promotion of feedback routes and the introduction of Real Time Feedback to strengthen patient and family engagement and ensure a broader understanding of experience across NHS Grampian.

2.3.8 Route to the Meeting

This report has previously been considered by the following groups and meetings as part of its development. The groups and meetings either supported the content or provided feedback that informed the content presented in this report.

- NHS Grampian's Clinical Risk Meeting on 3 August 2026.
- NHSG Executive Team on 4 August 2026.
- NHS Grampian's Clinical Governance Committee on 18 August 2026, where the report was scrutinised and endorsed as suitable for publication. The Committee discussed complaints handling performance, learning from complaints and feedback, Real Time Feedback implementation, and planned improvement activity for 2026/27. The Committee confirmed that no matters required escalation to another Board Committee or the Board and that no additional future reporting to the Committee was required unless requested.

2.4 Recommendation(s)

The Board is asked to:

- Discuss the findings of NHS Grampian Feedback and Complaints Annual Report 2025/26 and the planned improvement activity for 2026/27.
- Note that the annual report was scrutinised and endorsed as suitable for publication by the NHS Grampian Clinical Governance Committee on 18 August 2026.
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3 Appendix / List of appendices

The following appendix is included with this report:

- Appendix 1 – NHSG Feedback and Complaints Annual Report 2025 - 2026