

Feedback & Complaints **Annual Report** **2025 - 2026**

Listening to experiences. Learning together. Improving care.



On behalf of:

Professor June Brown, Executive Nurse Director

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**Feedback & Complaints
Annual Report
2025 – 2026**

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**Professor June Brown,
Executive Nurse Director**

Foreword

I am pleased to introduce the NHS Grampian Feedback and Complaints Annual Report 2025 - 2026. Feedback, whether it comes as a compliment, concern, comment or complaint, is one of the most important ways we understand what matters to people who use our services, their families and carers, and our staff. It helps us recognise where care and support are working well, where people's experiences have fallen short, and where we need to take action to improve.

NHS Grampian is committed to listening and working with patients, staff, communities and partners. We recognise that people who take the time to share their experience are helping us to improve care, services and people's experience of work. Every piece of feedback gives us an opportunity to learn, to reflect, and to strengthen the way we deliver safe, effective and person-centred care across Grampian.

During 2025-2026, NHS Grampian received 1,846 complaints, an increase from the previous year, and 800 stories were shared through Care Opinion, with 75% of those stories being completely positive.

The report also highlights the main themes from complaints, including staffing, treatment and waiting times.

These themes provide important insight into the areas where people most often tell us improvement is needed, while the positive feedback reminds us of the compassion, professionalism and kindness shown by staff every day.

This year's report also reflects the ongoing work of the Complaints and Feedback Team and colleagues across NHS Grampian to respond to concerns, support early resolution where possible, and ensure that learning from complaints is identified and acted upon. Complaints and feedback are regularly discussed by clinical teams, with learning shared across services and actions recorded where changes or improvements are required.

As we look ahead to 2026/27, our priorities for delivery across People, Leadership and Governance reinforce the importance of strengthening how we listen, learn and improve.

The introduction of a Real Time Feedback approach will support this ambition by enabling our Complaints and Feedback Team to be present in wards, speaking directly with patients and gathering feedback closer to the point of care.

“Every piece of feedback gives us an opportunity to listen, learn and improve the care we provide.”

This will help staff to spot and sort issues at the earliest opportunity, while also recognising and making visible the small acts of care, kindness and communication that make a real difference to people's experience.

In the first year, this Real Time Feedback process will be rolled out across 10 wards at ARI and Woodend, with a view to extending to a further 10 wards in 2027/28.

Alongside this, the development of the HOPE Collaborative will support a system-wide approach with health and social care partners, helping us put people first by actively involving them in shaping health and care services, supporting Getting it Right for Everyone, and promoting realistic medicine by placing people at the centre of decisions about their care.

I would like to thank everyone who has shared feedback with NHS Grampian during the year.

I also want to thank the Complaints and Feedback Team, colleagues who respond to complaints and concerns, and all those who contributed to producing this report.

Your work is essential to creating a culture where feedback is welcomed, learning is shared, and improvement is part of everyday practice.

By listening well, responding with compassion, and acting on what people tell us, we can continue to improve care and services for the people of Grampian and support a positive experience for the staff who deliver them.



2025 – 2026 at a Glance



Performance

Performance: 57.2% response rate to Stage 1 complaints within five days with an average time of 6 days, (compared to 63.8% response rate to Stage 1 complaints within five days with an average time of 4.8 days to the previous year).



Complaints

Complaints: 1846 complaints received, an increase of 241 on the previous year (1605).



SPSO

SPSO: 46 complaints to the Scottish Public Services Ombudsman – an increase of 5 on the previous year (41).



Care Opinion

What's your story?

Care Opinion

Care Opinion: 800 stories shared on Care Opinion. 75% were completely positive. Each story has been read an average of 231 times)



Complaint Themes

Complaint Themes: Top 3 themes with percentages – Staffing (40%) Treatment (27%) and Waiting Times (17%).



NHS Grampian on Social Media 2025-2026



Facebook
www.facebook.com/NHSGrampian

73,175

Facebook followers, up 6.9% from 68,455



Page sentiment (received comments in response to posts).

- **Positive: 83%**
- **Neutral: 14%**
- **Negative: 3%**



Instagram
www.instagram.com/nhs_grampian

15,443

Instagram followers, up 9.7% from 14,077



Page sentiment (received comments in response to posts and direct messages).

- **Neutral: 63%**
- **Positive: 33%**
- **Negative: 4%**



LinkedIn
www.linkedin.com/company/nhs-grampian

24,617

LinkedIn followers, up 21.8% from 20,216.



X
x.com/NHSGrampian

23,828

X followers, down 1.2% from 24,107.



Page sentiment (received comments in response to posts and direct messages).

- **Positive: 56%**
- **Neutral: 32%**
- **Negative: 12%**

Introduction

Welcome to the NHS Grampian Feedback and Complaints Annual report for 2025-2026

This report includes a summary of the feedback received by NHS Grampian during 2025-2026 and a summary of the feedback received by other independent health service providers within Grampian.

NHS Grampian provides healthcare services to the population of the North East of Scotland. NHS Grampian cover the areas administered by Aberdeen City, Aberdeenshire and Moray Councils. As an employer, NHS Grampian employs approximately 16,900 staff who deliver services to 500,000 people, spread across 3,000 square miles of city, town, village and rural communities. Most of NHS Grampian's larger hospitals are in Aberdeen City with Dr Gray's, a district general hospital located in Elgin in the Moray region of Grampian, and there are 14 community hospitals.

NHS Grampian aims to provide the highest quality care for everyone who uses their services. Where possible, NHS Grampian aims to help people receive care at home or in a homely setting. Thank you to all NHS Grampian patient and families who have provided feedback about their care/experience

Thank you to the NHS Grampian Complaints and Feedback Team, NHS Grampian colleagues who have responded to complaints and NHS Grampian colleagues who contributed to the development of this report.

Encouraging and Gathering Feedback

NHS Grampian has a wide variety of methods, to encourage, and gather, real time and right time feedback, with the aim of people feeling their feedback is welcomed. All feedback service staff are trained in Equality and Diversity and can arrange interpreting services, translations and alternative formats for letters where needed, and work continues to raise awareness of the different ways people can give feedback through social media, websites and community partners with information shared in different languages and formats to encourage people to give feedback.

Local processes and procedures have been developed to comply with the principles and policy intentions of the Patient Rights (Scotland) Act 2011 to support delivery of compassionate, person centred care.

As well as the more formal ways people share feedback many areas receive informal compliments verbally as well as boxes of chocolates and thank you cards which are not recorded but always very much appreciated by staff.

Experiences of the People who Complain

NHS Grampian Feedback Service welcomes all feedback and works in line with the NHS Scotland Model Complaint Handling Procedure. The majority of feedback the service receives comes to us via email but is regularly received through the post by letter or on our paper complaints and feedback form. Patients, families and carers are also welcome to get in touch by telephone and information on how to get in touch is publicly available in all service areas and online.

Once received, feedback is immediately logged as a complaint, concern or compliment on our secure electronic system (Datix) and the staff within the relevant service are automatically notified. Where possible complaints are explored and resolved early, often by telephone. A letter goes out to the complainant acknowledging their complaint, noting the next steps in the process and details of who to contact if they need support (PASS, SPSO etc).

We encourage all staff within the service the complaint is about to speak directly with the person raising the complaint. This helps gain a better understanding of what matters to them and what outcome they are hoping for. Meetings can also be offered if someone would prefer to talk things through in person or in more detail. If an issue can be resolved early, a written response and agreed actions will be offered. Complex, sensitive or bereavement related complaints are supported by a named feedback officer, who will explain the process and let the person know if a complaint is likely to take longer than 20 working days to receive a full response.

To ensure learning and improvement takes place from the feedback we receive, service managers' record actions taken and improvements to services on Datix and they are encouraged to share learning at local Shared Learning Events and within Assurance Reports.

82% felt they were treated respectfully.

"I felt listened to..."

"The process was clear..."

"I wanted an explanation..."



Care Opinion

Care Opinion plays a crucial role in enabling citizens to provide honest, safe and anonymous feedback on the healthcare services we provide. Citizens can share their feedback (often described as story) via the easy-to-use online platform, by telephone, or by completing a feedback card and returning freepost.

Anonymous feedback allows citizens to safely express their views, whilst helping the healthcare provider understand what matters most and where to focus improvement. When feedback is added to Care Opinion the relevant staff are directly alerted and can respond as required. All feedback and our responses are available to view ([Insert Link](#)) where you can also share your story.





800

stories were published about NHS Grampian.



39%

increase from 24/25.



75%

of stories were completely positive.



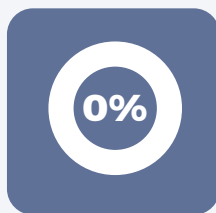
6%

increase from 24/25.



0%

of stories were strongly critical.



2%

decrease from 24/25.



231

times each story was read approximately.



17%

decrease from 24/25.



27

new staff trained to respond to stories this year (258 in total).



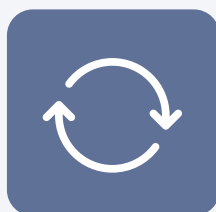
21%

decrease from 24/25.



5

responses indicated a change was made or planned.



37%

decrease from 24/25.



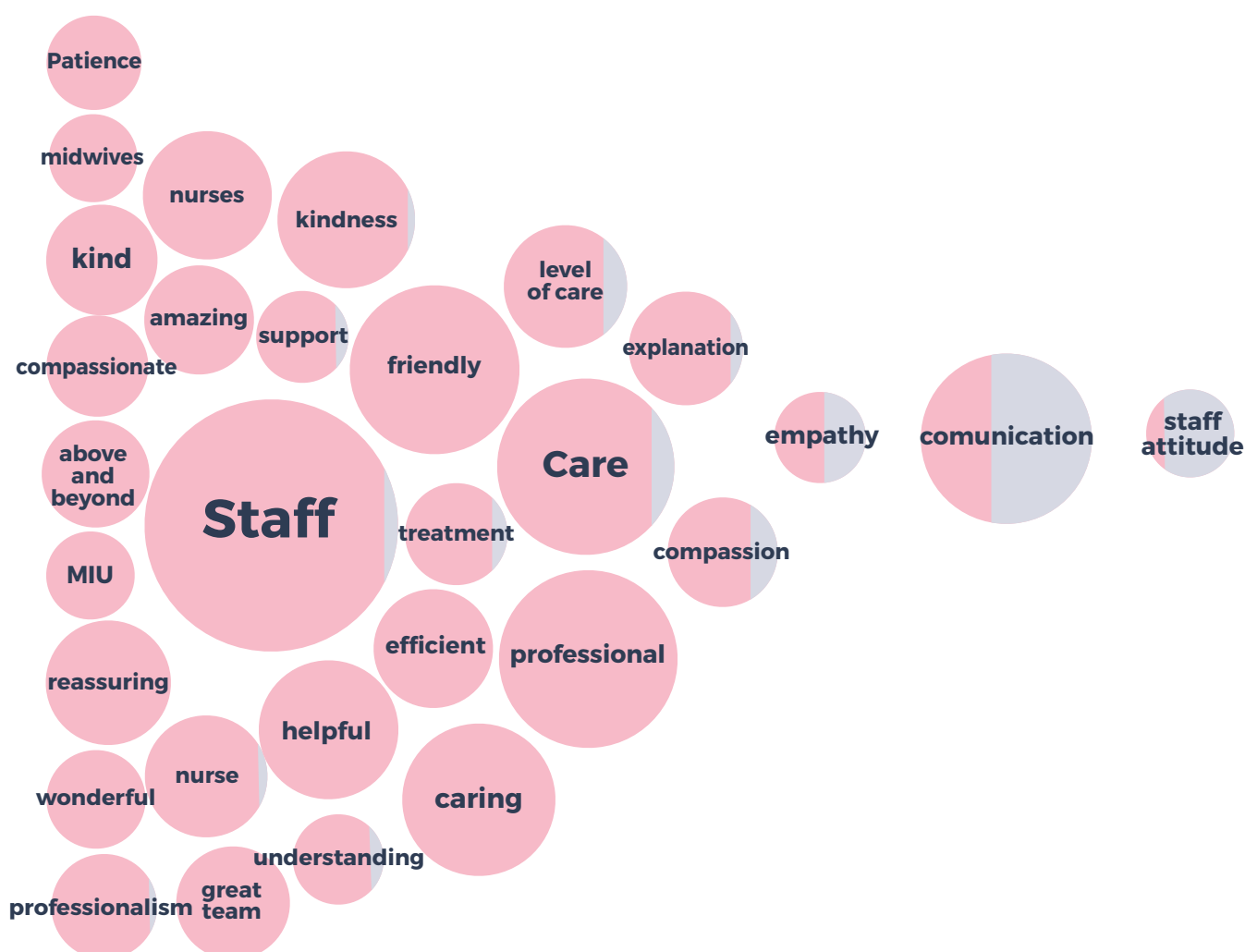
When a service is responding to a story, they have the ability to identify if a change is planned or made. The progress can then be shared with the story author, and any other readers, via the Care Opinion platform.

This helps enhance trust between our services and our citizens by demonstrating we are listening and continuously evolving.

About: Royal Cornhill Hospital / Dietetics

I feel so so sorry for the staff at this new clinic (Fulton clinic). My session had to be cut short because there was only one member of staff on and they seemed so stressed and kept repeating themselves over and over. I never actually got to state what I wanted as a plan or what the plan options were because someone knocked on the door to get them to see other people.

The place seemed to me to be just loaded with people abusing the service for supplementations and shakes and I think it must be hard for staff to know which people have actual diet issues and which people are just seeking free stuff. The abuse that I witnessed was also shocking. Shouting and swearing at staff and people in all sorts of states being a danger to people.



Responses

Response from Jackie Berry, AHP Lead, Royal Cornhill Hospital, NHS Grampian (2 weeks ago).

We have made a change.

Hello Theoneleftbehind,

Thank you for taking the time to share your experience with us. I'm really sorry we have taken so long to reply. There was a gap in our system which meant your feedback didn't reach us when it should have.

I'm sorry to hear your session felt rushed and that you didn't get the chance to talk through what you wanted or explore the options available to you. That must have been frustrating, especially when you came looking for support.

It also sounds like the environment on the day felt quite overwhelming, both for you and for the staff member you saw. We're sorry that this impacted your experience, and we appreciate you taking the time to highlight this to us.

Since then, we've made some changes to try and improve things. We've moved away from the SMS drop-in sessions, as we recognised they could become difficult to manage at times. We now offer planned appointments, so people have more dedicated time to talk through their needs and agree a plan together.

We're also changing how supplements are provided, moving towards prescriptions rather than issuing supplements directly at the clinic (aside from a small initial supply where needed). This is to help ensure support is tailored appropriately and to reduce pressure on both staff and the service.

Alongside this, we've introduced clearer referral processes to make sure the clinic is supporting those who would benefit most, and we continue to run a dedicated clinic to help people stay connected with the wider team.

Thanks again for your feedback - it genuinely helps us reflect and make improvements.

Take care,

Jackie



Complaints

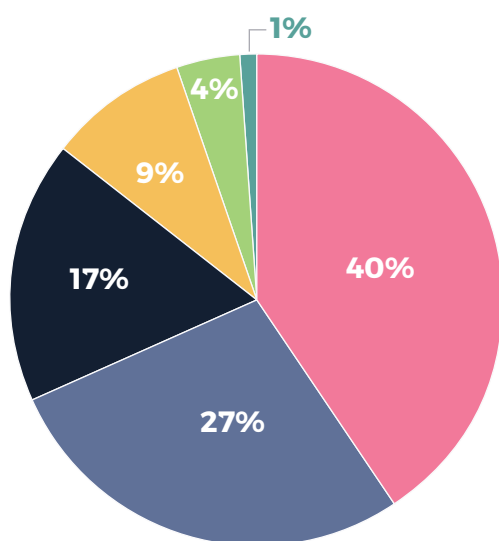
NHS Grampian follows the NHS Model Complaints Handling Procedure which was adopted across Scotland in 2017.

The Complaints Handling Procedure gives everyone who accesses our services a voice to ask questions when they feel let down by poor care and/or experience. It also creates an opportunity for staff to listen, learn and use feedback to support improvement and enhance the care experience of those using our services.

Each Health Board in Scotland is required to submit a data return demonstrating that Boards are taking a person-centred approach to complaints handling, following the national processes and importantly developing a learning culture that enables services to improve.

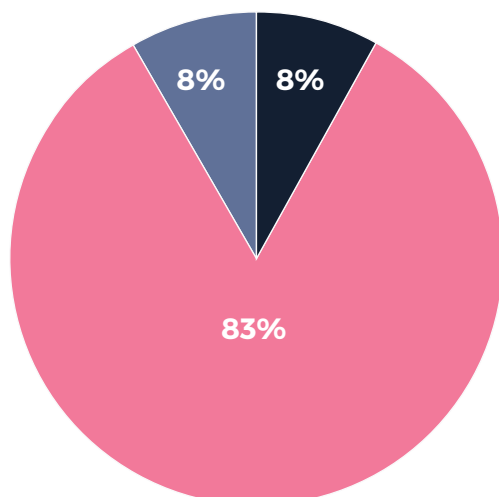
Themes from Complaints

NHS Grampian shares learning from complaints, encouraging staff to reflect on practice, culture and behaviours. The information from themes also helps to drive improvements that patients identify within team settings. The top themes do not change much from year to year and rarely vary between clinical divisions and specialities. Below is a breakdown of the complaints themes across NHS Grampian.



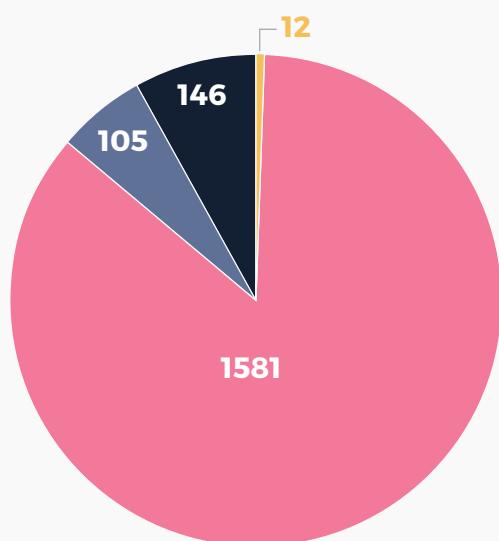
Summary of NHSG Complaints received during 2025-2026

- **Staffing 40%**
- **Treatment 27%**
- **Waiting Times 17%**
- **Other 9%**
- **Environment/Domestic 4%**
- **Transport Procedural 1%**



Summary of the Staff Groups People Complained about during 2025-2026

- **Not Recorded 8%**
- **Medical/Dental 83%**
- **Nursing/Midwifery 8%**



Summary of the Complaint Severity for 2025-2026

- Major 12
- Minor 1581
- Moderate 105
- Negligible 146
- Not Recorded N/A

Governance

Feedback and complaints reporting is through the NHS Grampian Clinical Risk Meeting and the NHS Grampian Clinical Governance Committee.

Complaints Performance Indicators

In this section we will provide detail on NHS Grampian's performance against the nine national Key Performance Indicators (KPIs).

Indicator 1: Learning from Complaints

NHS Grampian uses complaints and feedback as an important way to learn and improve services. The focus is on understanding what went wrong, sharing that learning, and making changes where needed to improve people's experiences.

Feedback and complaints, including trends, are regularly discussed by clinical teams, and learning is shared across services at a variety of learning events so that improvements are shared widely, not just in one area. We also look at feedback as part of service reviews to spot common themes and identify where extra support or change is needed.

When a complaint highlights learning, this is recorded and reviewed to make sure actions are taken and followed up. Changes or improvements to services are put in place where required, and steps are taken to reduce the chance of the same issues happening again.

Learning from complaints is considered alongside feedback, concerns, comments and compliments. Together, this helps us understand what matters to people using our services and make improvements based on what they tell us.

Indicator 2: Complaint Process Experience

Experience of the Complaints Handling Process Aligned to SPSO Complaints Improvement Framework

People are invited to share their experience of the NHS Grampian complaints handling process through an anonymous online survey. An invitation is emailed approximately two months after a complaint is recorded as closed on the Risk Management reporting system (DATIX).

Survey questions are aligned to the themes within the Complaints Standards Authority (CSA) of the Scottish Public Services Ombudsman (SPSO), supporting the expectation that organisations actively seek and obtain feedback on customer satisfaction with how complaints are handled¹.

Between April 2025 and February 2026, a total of 233 responses were received, representing 32% of those invited to complete the survey. Quantitative results and freetext qualitative comments were analysed together to provide a comprehensive view of patient experience.

(Microsoft Copilot was used to assist with data analysis²).

Key Findings

Survey results show variation in experience, with both positive and negative themes emerging.

Positive experiences were most commonly associated with individual staff behaviours, particularly empathy, professionalism and feeling listened to. Respondents described these experiences in their own words, including:

“The person dealing with my complaint was very understanding and sympathetic. She made me feel heard and took my complaint seriously.”

“Professional, kind and compassionate — it made a real difference.”

“The person who dealt with my complaint was superb.”

“Once I spoke to the right person, I felt taken seriously.”

These experiences align well with CSA expectations around personcentred communication and respectful engagement.

However, concerns were raised around process and outcomes. Respondents consistently highlighted dissatisfaction with timeliness, communication, and clarity of responses, often describing the need to repeatedly follow up for information:

“I had to keep chasing for months and still got no clear answers.”

“The reply I got was ambiguous. It really was a page of waffle with no direct plan to address the issue going forward. I feel that I wasted my time.”

“My complaint still has not been resolved, the communication has also now stopped. At no point was I kept up to date with what was happening.”

“My complaint was handled by the same team I was complaining about – there was no sense of impartiality.”

Quantitative findings supported these views, with lower levels of agreement reported for statements relating to response times, being kept informed, having all issues answered, and overall satisfaction.

Conclusions

When handled well, the complaints process can have a positive and reassuring impact, with respondents describing feeling heard, respected and supported. However, combined quantitative and qualitative findings indicate inconsistent experiences across the system, particularly in relation to timeliness, communication, being kept informed, having issues fully answered, and demonstrable learning from complaints.

Verbatim feedback highlights that delays, unclear outcomes, and limited followup can undermine confidence in the complaints process and diminish its role as a driver for improvement. Strengthening consistency, improving communication, and more clearly demonstrating learning and action in response to complaints will be critical to improving patient confidence and aligning practice more closely with SPSO Complaints Standards.

References

1. Scottish Public Services Ombudsman (SPSO). Complaints Improvement Framework / Complaints Standards Authority (CSA).
2. Microsoft (2024) Microsoft Copilot. Available at: <https://www.microsoft.com/en-gb/microsoft-copilot> (Accessed: 17 April 2026).

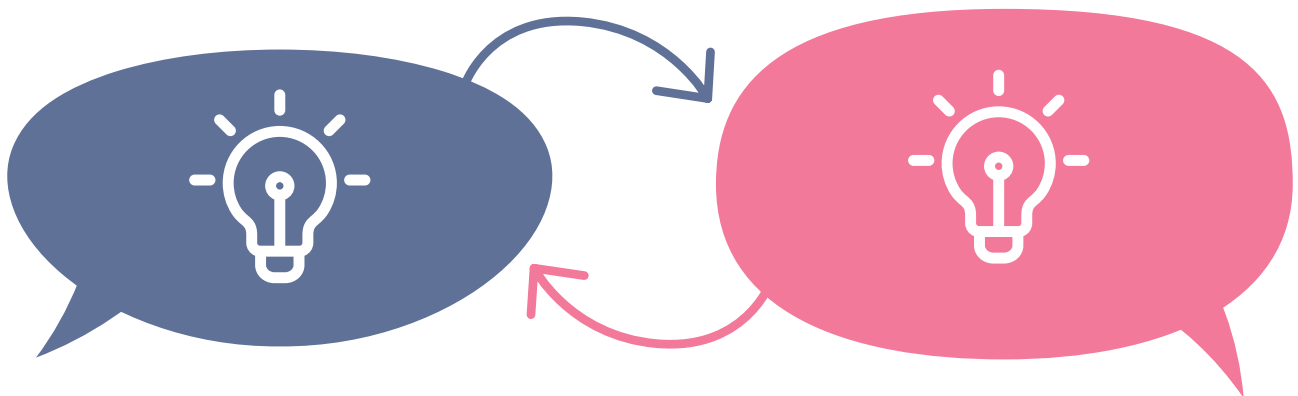




Indicator 3: Staff Awareness and Training

The Complaints and Feedback service supports ongoing development in responding to and managing complaints and feedback, with the team committed to ensuring all staff across the organisation have access to the training and expertise required to ensure communication with the people sharing feedback.

Over this last year there has been an increase in the uptake of small group, formal and informal training in complaints handling helping embed learning and improve practice across NHS Grampian.



Staff Development

NHS Grampian provided a range of opportunities to support development of person-centred experience:



8

8 eLearning complaint handling process modules have been undertaken by staff. The training helps ensure staff are aware of the complaints handling process and the work of the Scottish Public Services Ombudsman. Real cases, anonymised, are discussed and staff are always interested to follow a case from beginning to end and learn about a person-centred approach to complaints.



317

317 Modules of NHS Grampian Adverse Event Review training have been completed by staff. The elearning is a valuable opportunity for staff to learn the key skills needed for review of an adverse event and to support the safety of our healthcare system for everyone. The modules are designed to allow staff to complete the sections most relevant to the area of adverse events they are involved in.



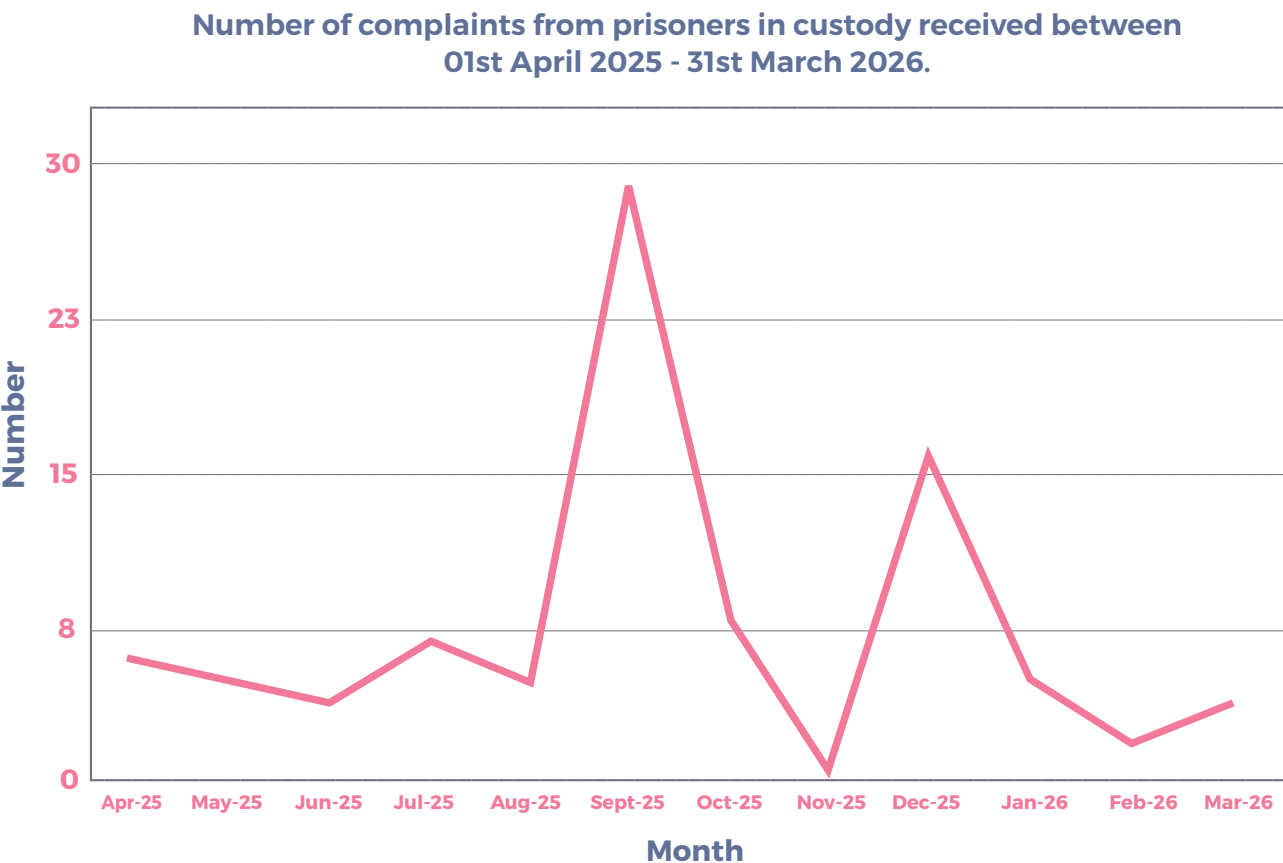
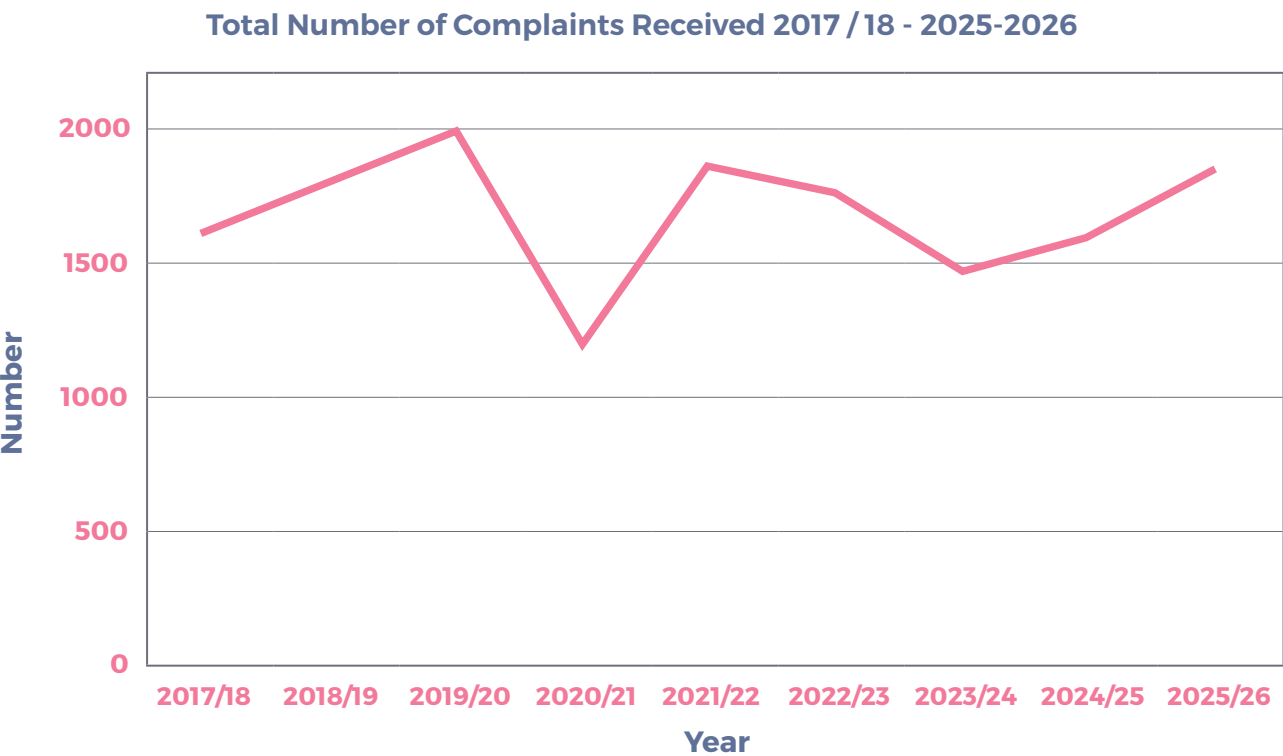
3953 Staff completed a comprehensive Equality and Diversity programme ensuring staff are aware of their responsibilities in this field.



164 staff have completed Duty of Candour eLearning to support staff in understanding the Duty of Candour and what it means for their role.

Indicator 4: Total Number of Complaints Received

The total number of complaints received by NHS Grampian during 2025/26 was 1846. The chart below illustrates the number of complaints received by financial year from 2017/18 to 2025/26. The number of complaints to the Board have increased over the last two years.



How Complaints Progress

01 – Stage 1

Early Resolution
Resolved within
5 working days.



02 – Stage 2

Non-Escalated
Investigation
Response within
20 working days.



03 – Stage 2

Escalated
Full Investigation
Response within
20 working days.

Indicator 5: Complaints Closed at Each Stage

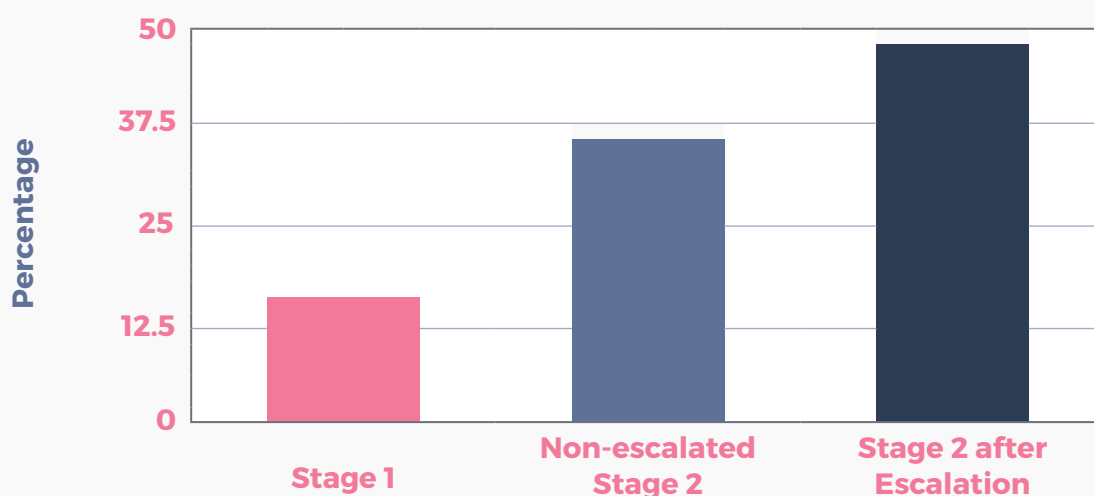
Each complaint shared with the NHS Grampian Complaints and Feedback Team is assigned a stage. Complaints are handled in stages to make sure they are dealt with at the right level. Of all the complaints received by NHS Grampian approximately 17 percent are closed at Stage one. Complaints come into the NHS Grampian Feedback Service from various routes, with the majority by Email.

Once a complaint is received, an Email communication takes place with relevant complaint lead on the day the complaint is received. This is to encourage prompt investigation and resolution of the complaint by telephone, where appropriate. All complaints, associated documents and communications are held centrally within our electronic risk management system, Datix.

Complaint leads are encouraged to make direct contact with individuals involved by telephone providing a more person-centred approach to complaint handling. We understand how important this is for complainants to clarify the issues they wish to raise and the outcome they are looking for. Meetings can also be offered to allow further discussion of the concerns raised.

If the complaint can be resolved at an early stage, a written response to confirm the outcome, and any agreed actions to be undertaken by the service is offered.

Number of Complaints closed at Stage 1, Stage 2 Non-escalated and Stage 2 after Escalation as a % of all complaints closed April 2025 - March 2026.



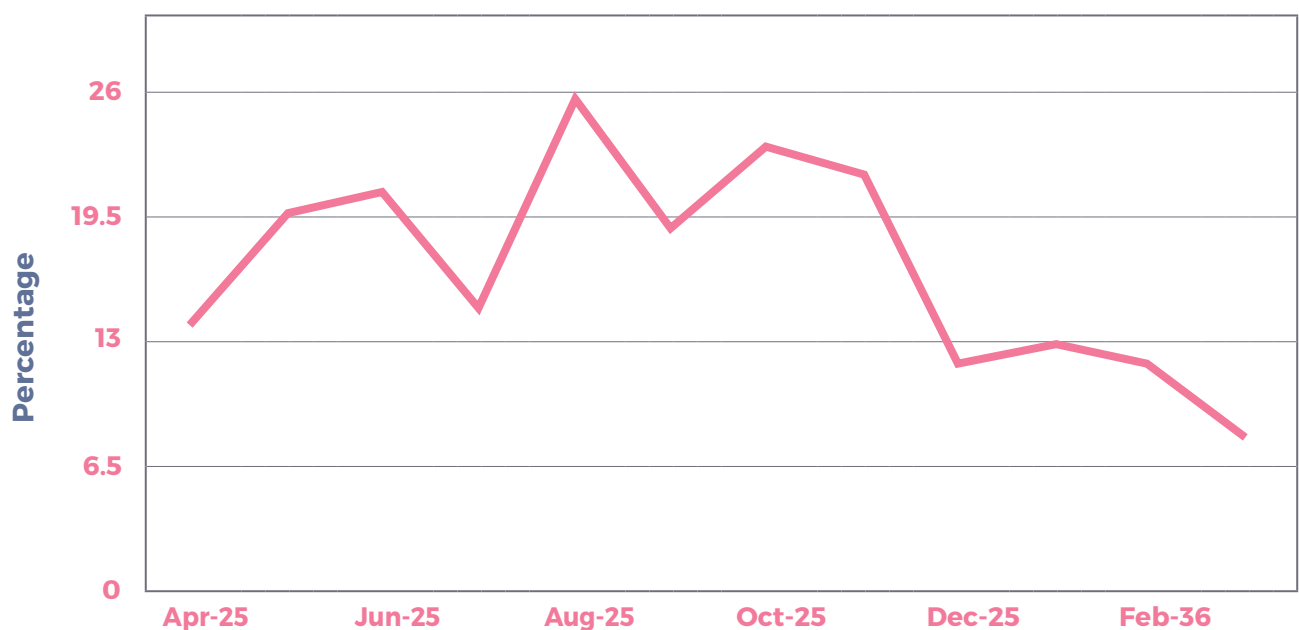
This chart illustrates the percentage of complaints closed this year at each stage.

Number of Complaints closed at Stage 1, Stage 2 Non-escalated and Stage 2 after Escalation as a % of all complaints closed per month.



This chart shows the complaints closed, in full, within timescales for each stage per month.

Number of complaints closed at Stage 1 as a % of all complaints closed per month.



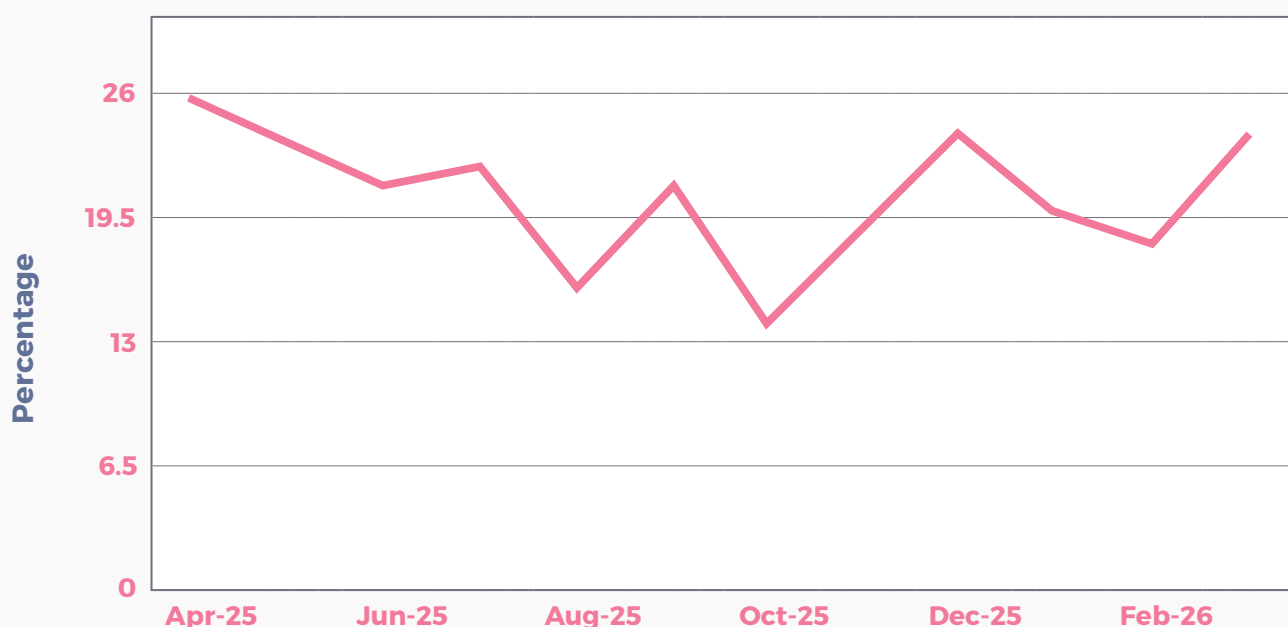
This chart shows the complaints closed, in full, within timescales for Stage 1 per month.

Clinical treatment, bereaved, sensitive and complex complaints are, when suitable, supported by a named Feedback Officer, who will make contact with the individual to clarify issues, explain the process and to ask if they would like a meeting. This helps to ensure that individuals are aware of who to contact, the process and helps understanding that complex or cross sector complaints may take longer than 20 working days to complete.

In addition the Feedback officers are always available should any of the Independent Contractors require assistance dealing with a complaint. The Feedback service remain in contact with independent contractors throughout the year.

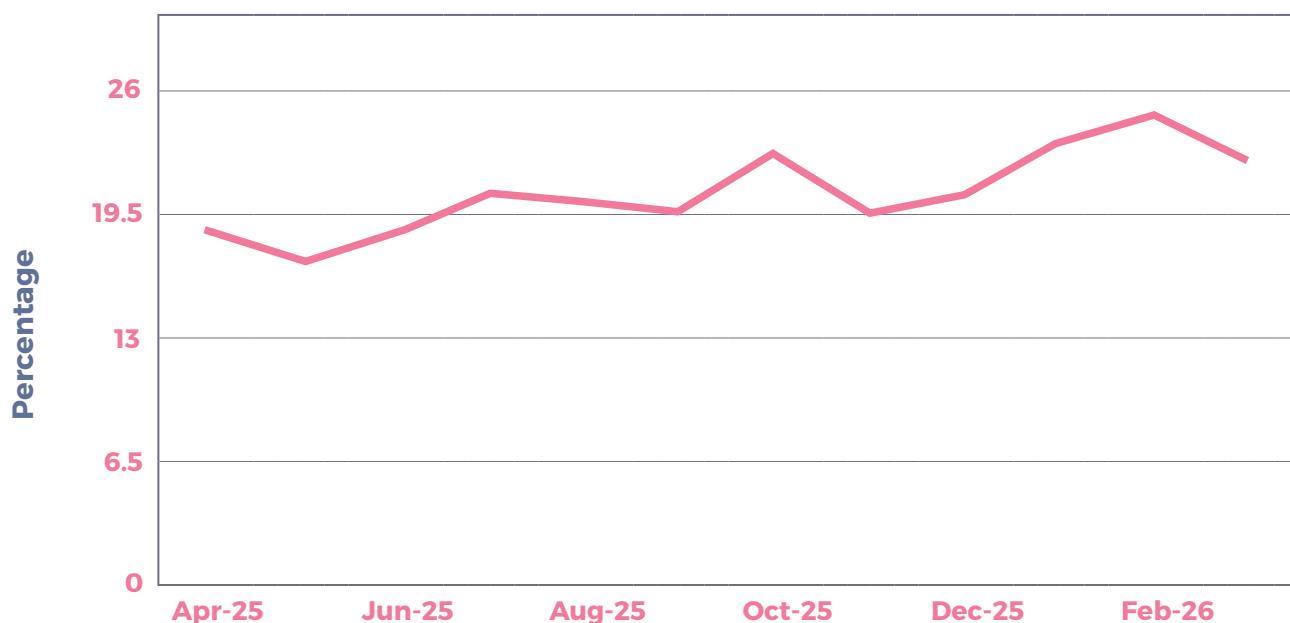
To ensure learning occurs from feedback, service managers identify the learning opportunities for improvement, and record actions taken on Datix. Learning outcomes are included in shared learning events and assurance reports to demonstrate the learning and actions taken across NHS Grampian.

Number of non-escalated complaints closed at Stage 2 as a % of all complaints closed.



This chart shows the complaints closed, in full, within timescales for Stage 2 Non-escalated per month.

Number of complaints closed at Stage 2 after escalation as a % of all complaints closed.



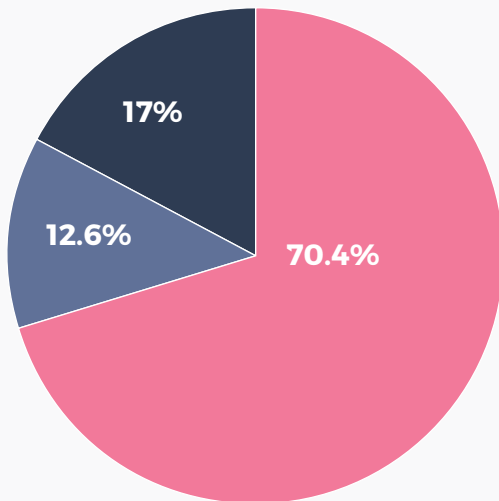
This chart shows the complaints closed, in full, within timescales for Stage 2 after Escalation per month.

Indicator 6: Complaints Upheld, Partially Upheld and Not Upheld

All Boards in Scotland are required to record a formal outcome (upheld, partially upheld, or not upheld) for each complaint they close. The outcome falls into one of three categories: upheld, partially upheld or not upheld.

If a complaint is 'upheld' it means NHS Grampian agrees with the issues raised in the complaint. If the complaint is recorded as 'partially upheld' it means some parts of the complaint were agreed with, but not everything was supported during the investigation.

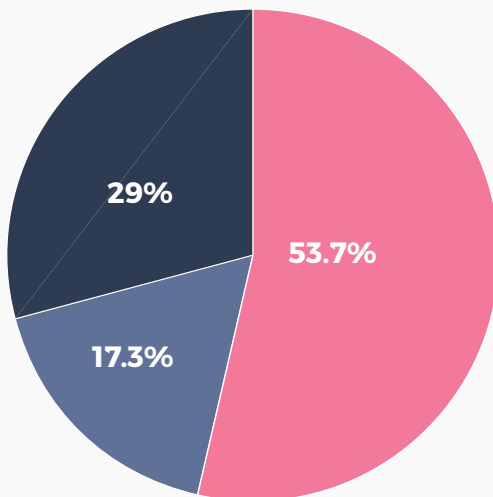
Where a complaint is 'not upheld', it means after investigation there was no evidence found in relation to the points raised in the complaint.



Stage 1 Complaints Upheld, Not Upheld and Partially Upheld April 2025 - March 2026.

- Upheld - 70.4%
- Not Upheld - 12.6%
- Partially Upheld - 17%

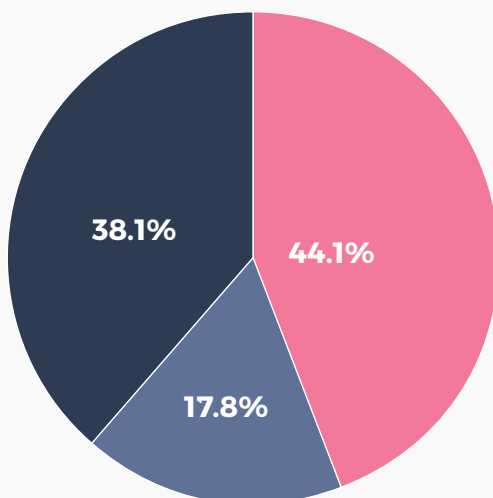
This chart illustrates the percentage of Stage 1 complaints which were upheld, not upheld and were partially upheld during 2025-2026.



Stage 2 Non-escalated Complaints Upheld, Not Upheld and Partially Upheld April 2025 - March 2026.

- Upheld - 53.7%
- Not Upheld - 17.3%
- Partially Upheld - 29%

This chart illustrates the percentage of Stage 2 Non-escalated complaints which were upheld, not upheld and were partially upheld during 2025-2026.



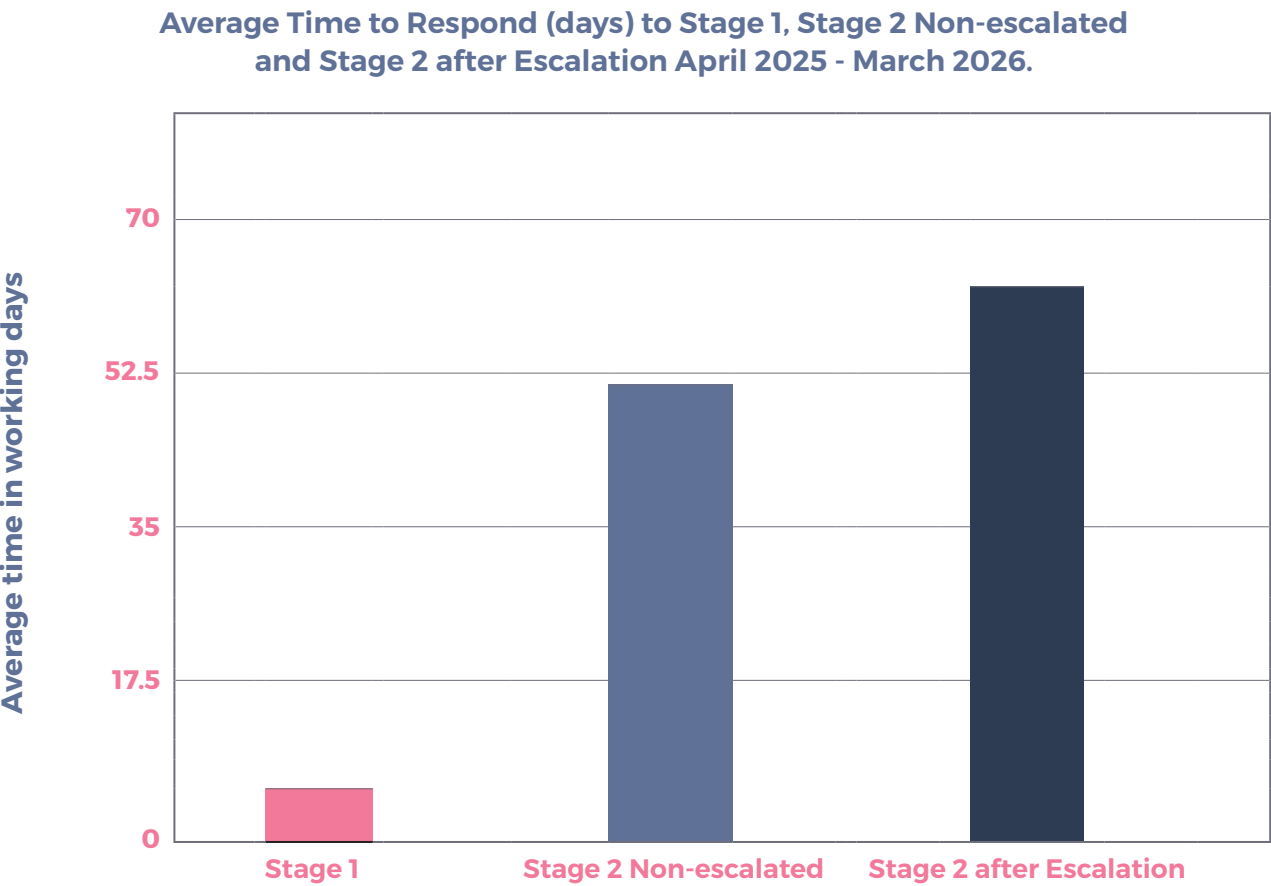
Stage 2 Escalated Complaints Upheld, Not Upheld and Partially Upheld April 2025 - March 2026.

- Upheld - 44.1%
- Not Upheld - 17.8%
- Partially Upheld - 38.1%

This chart illustrates the percentage of Stage 2 after Escalation complaints which were upheld, not upheld and were partially upheld during 2025-2026.

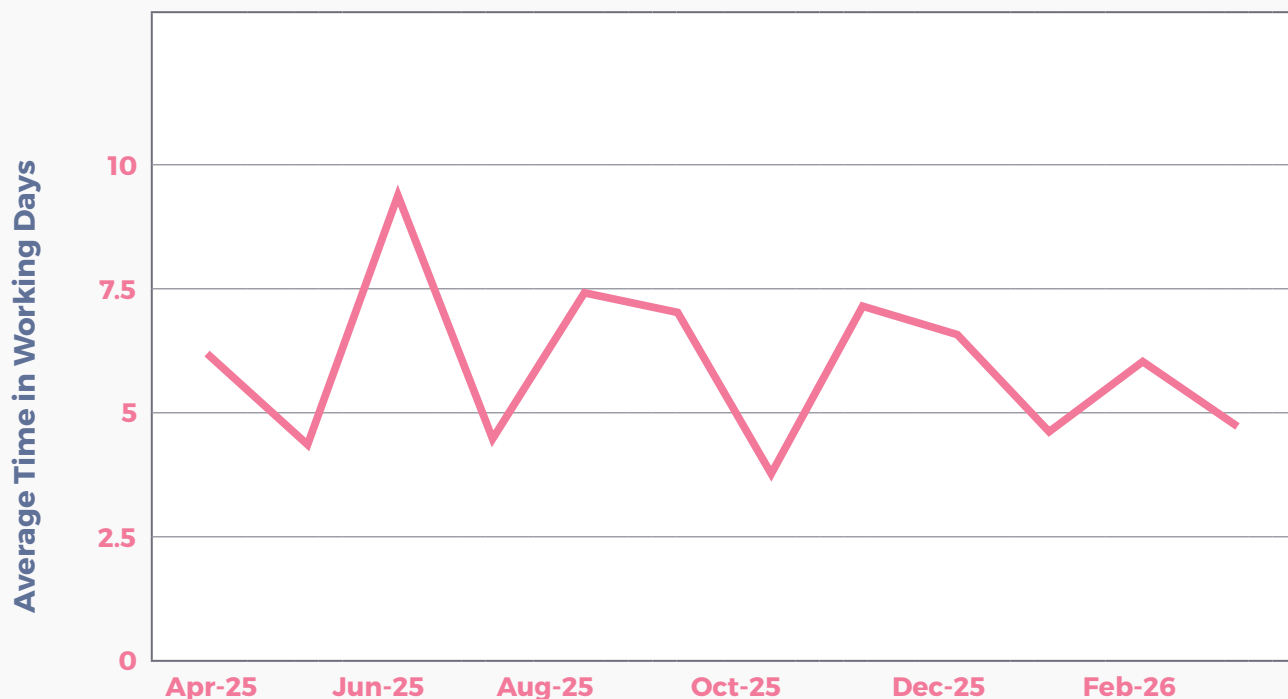
Indicator 7: Average Times

The average time to respond to a complaint, in working days, is shown in the graphs below. This remains an area for further work to show sustained improvement. Some complaints may involve multiple services and in order to ensure a full investigation, with comprehensive answers to the issues raised, an extension to the response time is authorised. The number of complaints that require this extension is small and can be seen in the chart within indicator 9.



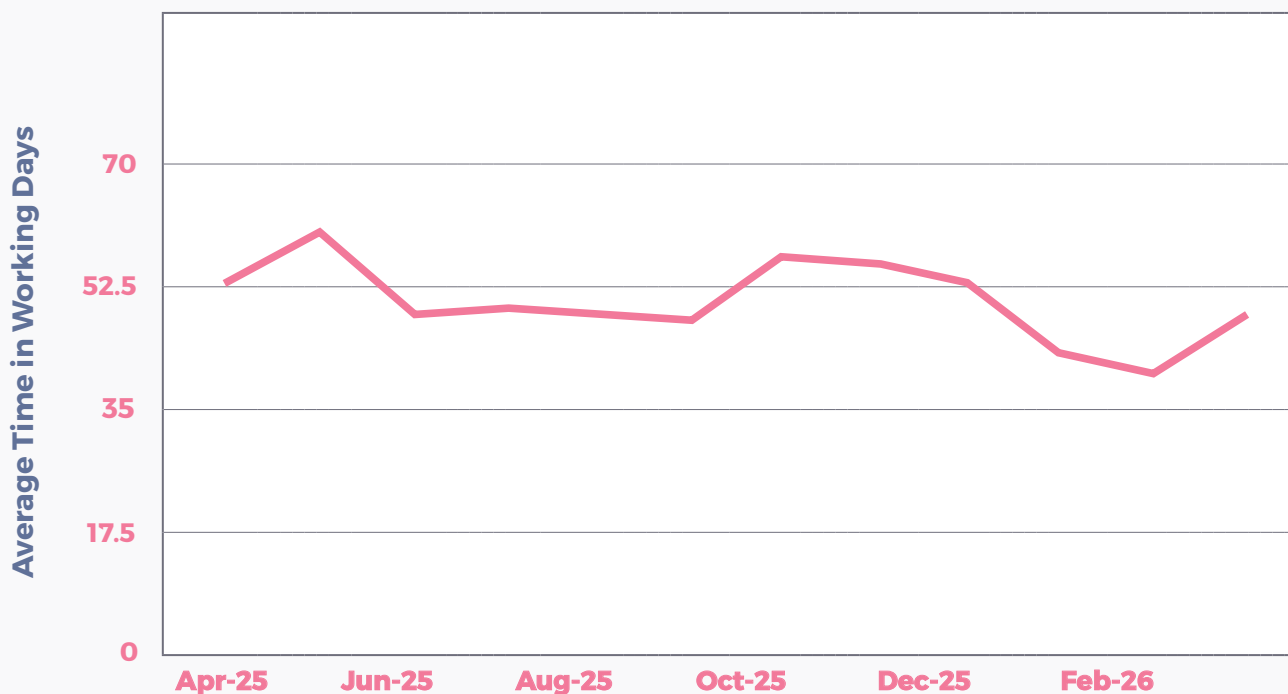
This chart illustrates the average time to respond in days to Stage 1, Stage 2 Non-escalated and Stage 2 after Escalation Complaints for the year.

Average Time to Respond (days) to Stage 1 Complaints April 2025 - March 2026.



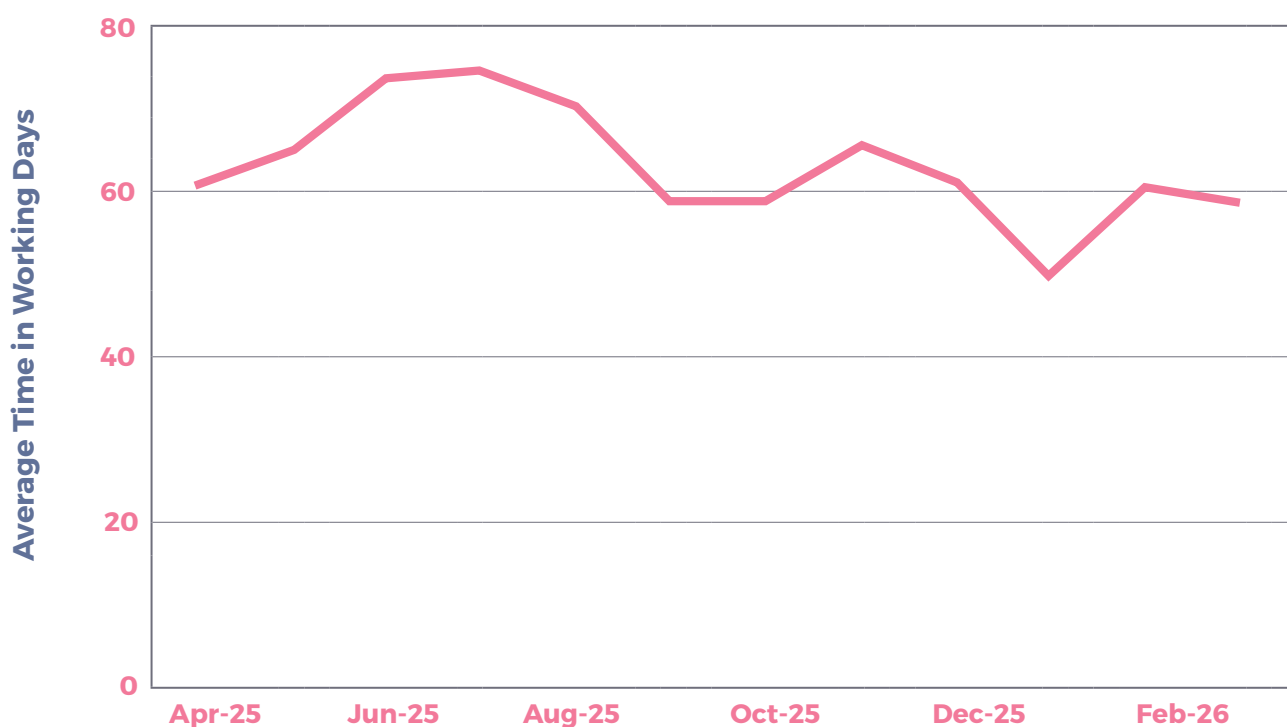
This chart illustrates the average time to respond in days to Stage 1, Complaints per month.

Average Time to Respond (days) to Stage 2 Non-escalated Complaints April 2025 - March 2026.



This chart illustrates the average time to respond in days to Stage 2 Non-escalated Complaints per month.

**Average Time to Respond (days) to Stage 2 after Escalation Complaints
April 2025 - March 2026.**



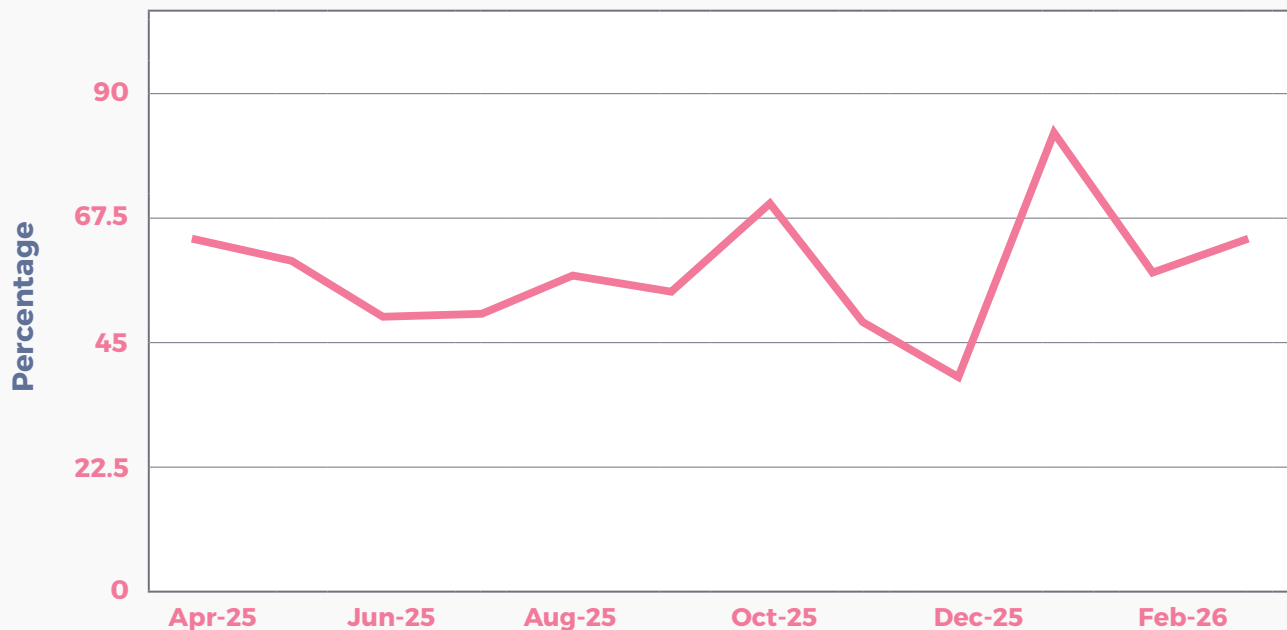
This chart illustrates the average time to respond in days to Stage 2 after Escalation Complaints per month.



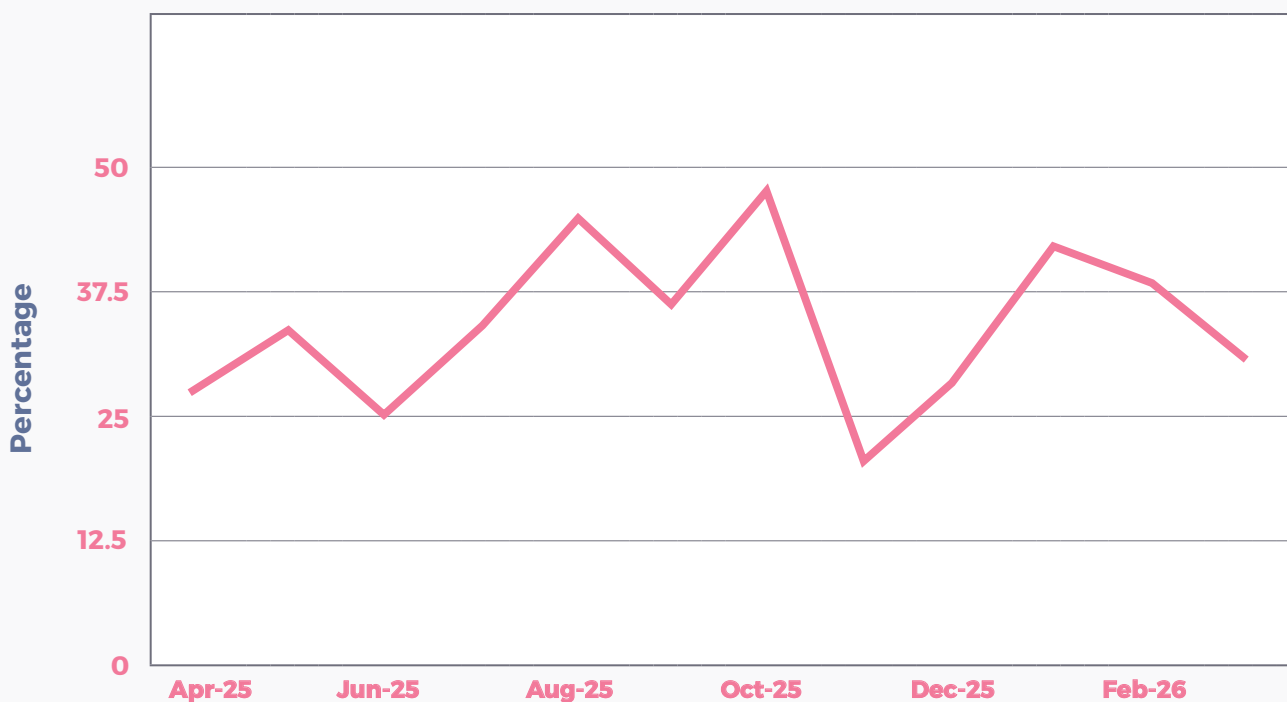
Indicator 8: Complaints Closed in Full Within Timescales

The charts below show the complaints closed, in full, within the timescales for each month.

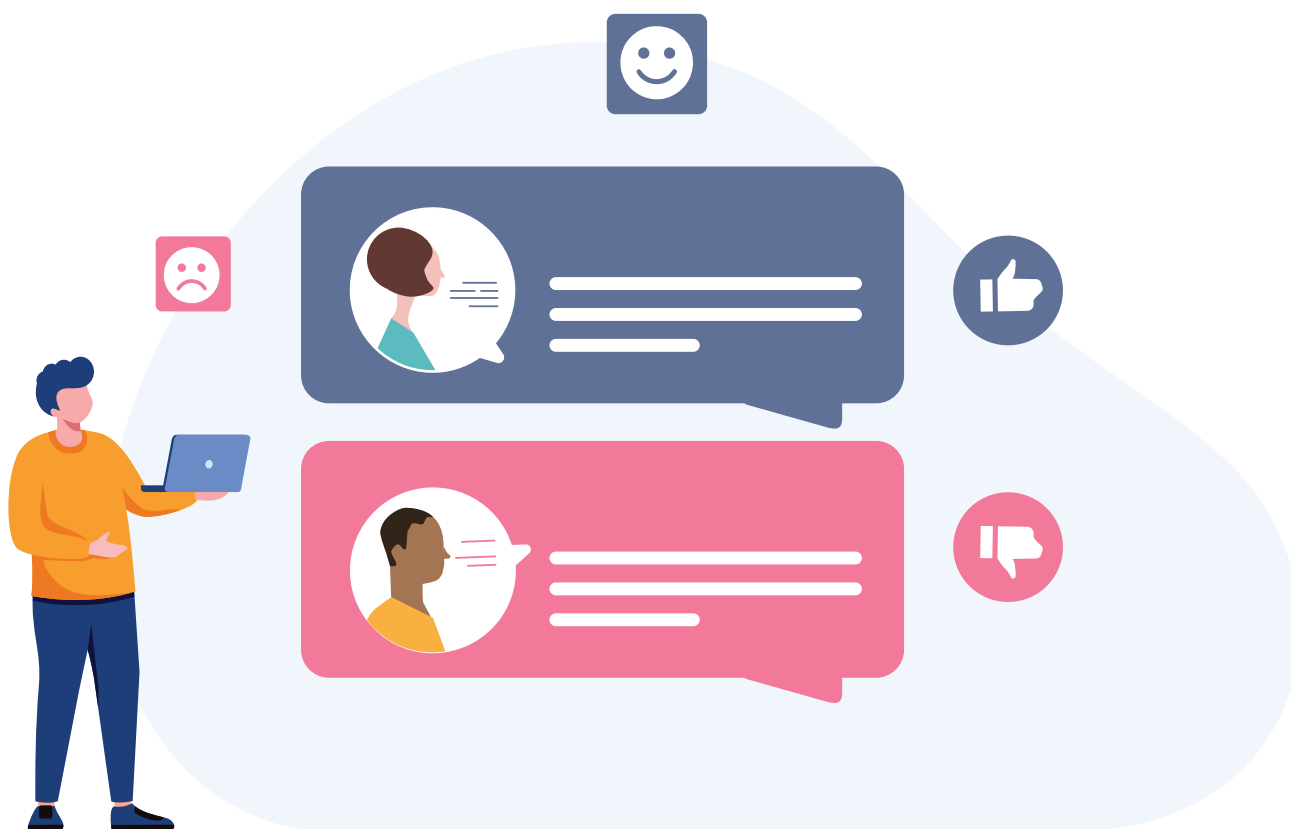
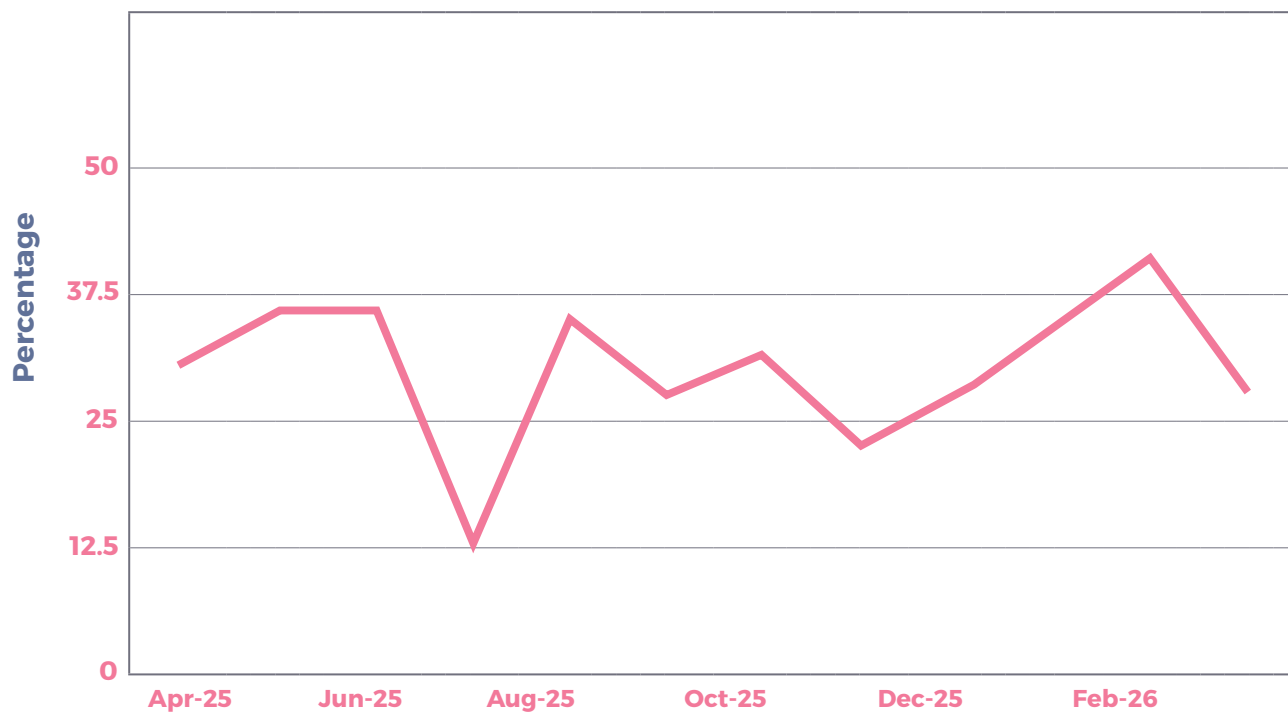
Percentage of Stage 1 Complaints closed within 5 working days per month.



Percentage of Stage 2 Non-escalated Complaints closed within 20 working days.



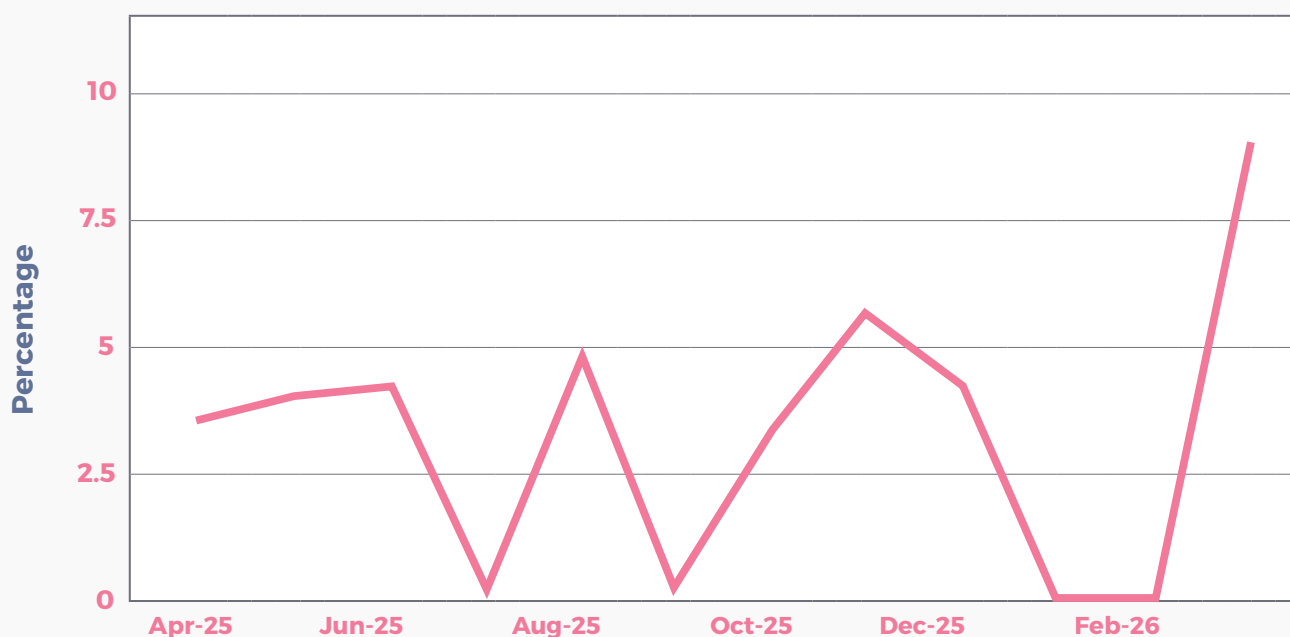
Percentage of Stage 2 after Escalation Complaints closed within 20 working days.



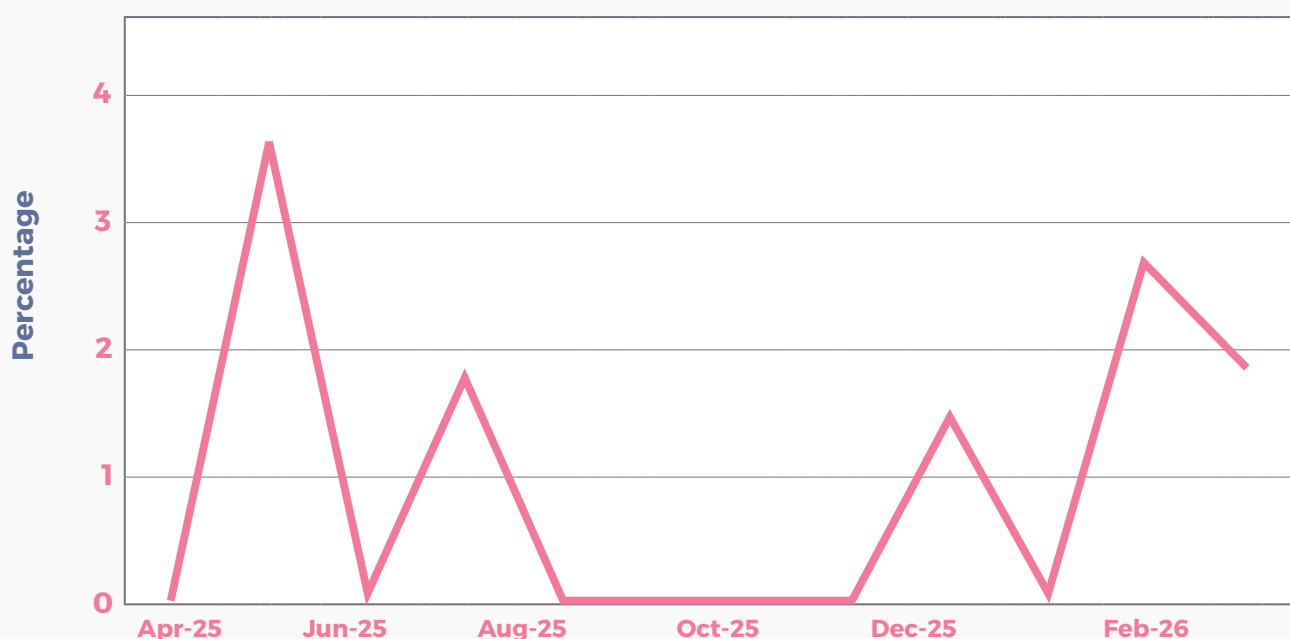
Indicator 9: Number of Cases Where an Extension is Authorised

The graphs below show the number of complaints which have been granted an extension to the time given to provide a response. This happens in very small number of cases usually where the complaint covers multiple services and extra time is required to ensure a full investigation is conducted in each area and a coordinated, comprehensive response can be provided to the complainant.

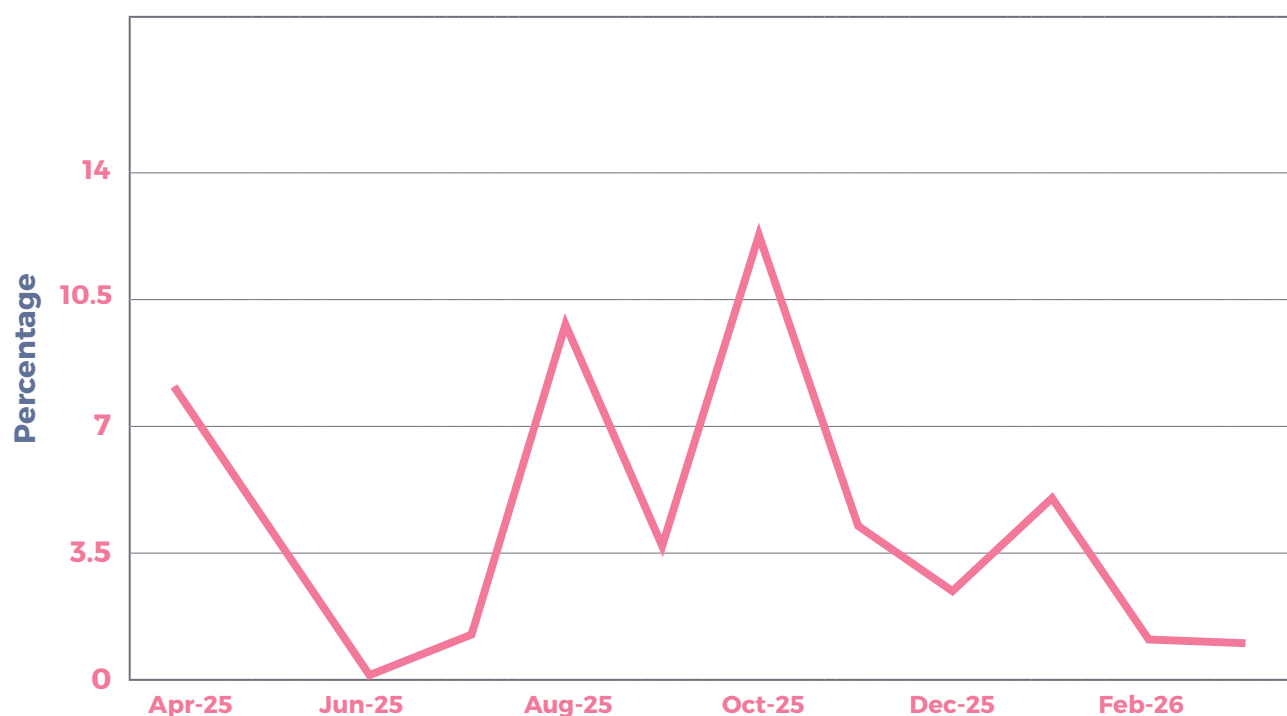
Percentage of Complaints closed at Stage 1 where extension was authorised as a % of all complaints at Stage 1.



Percentage of Complaints closed at Stage 2 Non-escalated where extension was authorised as a % of all complaints at Stage 2 Non-escalated.



Percentage of Complaints closed at Stage 2 Non-escalated where extension was authorised as a % of all complaints at Stage 2 Non-escalated.



Independent Contractor Complaints

In line with the NHS Complaints Procedure, Independent Contractors are contacted on a quarterly basis to complete a survey providing information on any complaints they have received. The table below illustrates the total number for each Independent Contractor Group for the 2025-2026 period.

Type of Independent Contractor	GP	Dental	Pharmacy	Optician	Total
Number of Complaints Received	1016	158	70	6	1250

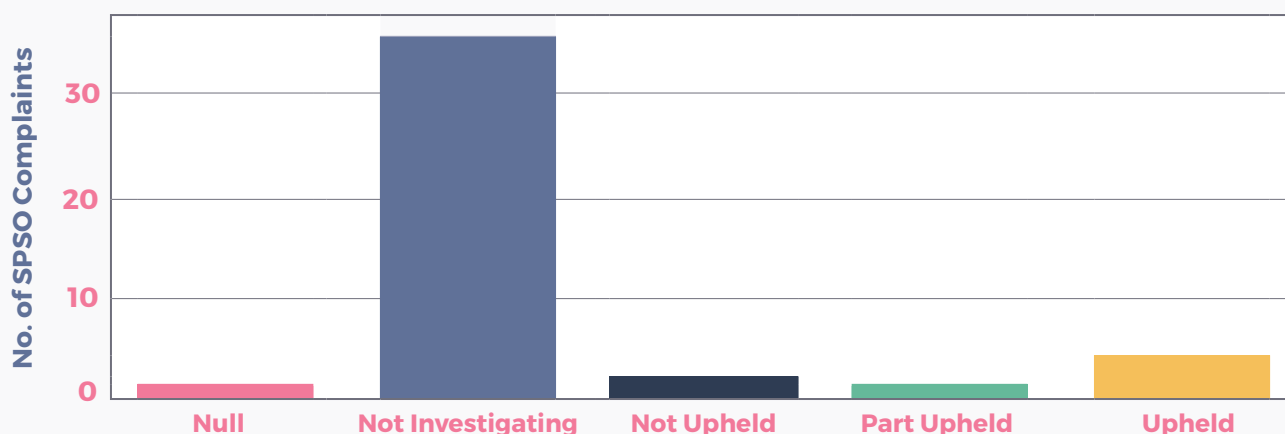
Scottish Public Services Ombudsman (SPSO)

If, after receiving the NHS Grampian final decision on a complaint, the complainant remains dissatisfied with the decision or the way the complaint was handled, they can ask the SPSO to consider it. NHS Grampian advises how to do this when the final decision is sent.

The SPSO will decide whether to investigate a case or not; if they do investigate the case there are three principal outcomes: not upheld, partially upheld or fully upheld. The below chart shows the number of SPSP cases not investigated, not upheld, partially upheld or fully upheld during 2025-2026

Ombudsman Complaints Closed by Outcome

Between 01/04/2025 and 31/03/2026.



What Next for 2026 – 2027

What Next for 2025 – 2026 (Recap)

We Said:

Improve uptake of training across services.

We did:

Training sessions held on a weekly basis throughout one month targeting the nursing staff within Medicine and Unscheduled Care following an identified issue around complaints handling. Held a complaints and feedback workshop (May 2026) involving a number of delegates throughout NHS Grampian, promoted training during event.

Our training has been advertised in our Inspiring Quality newsletter that goes out.

We Said:

Improve our response times.

We did:

Work closely with senior colleagues to ensure our longest waits are being overseen at a senior level. Discussed at a weekly NHSG Clinical Risk Meeting. Discuss complaints that have been over 80 days.

Further development to existing dashboards to support visibility of open complaints, enhanced oversight, improved data quality and more targeted operational grip through existing governance routes, and ability to identify complaints linked to Adverse Event Reviews (AERs) which are a known cause for delay in complaint timelines.

We Said:

Raise awareness through social media, post messages and information in various languages/formats to encourage feedback.

We did:

This will be a focus for 2026/27.

2026 – 2027

We will:

- Raise awareness through social media, post messages and information in various languages/formats to encourage feedback.
- Further reduction in our longest open complaints.

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