



Patient Feedback Annual Report 2024-2025

Produced July 2025

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or via [contactSCOTLAND-BSL](#).

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Foreword



I am pleased to introduce this year's Patient Feedback Annual Report for 2024/25.

Each piece of feedback we receive, whether it's a word of thanks, a suggestion, or a concern, is a valuable insight into how our services are experienced by the people who matter most - our patients and their families.

It is both humbling and inspiring to hear how our staff have made a difference in people's lives. The compassion, professionalism and commitment shown across our teams continues to shine through in the many messages of gratitude we receive. These stories remind us of the profound impact that kindness and person-centred care can have.

We also recognise that there are times when we do not meet the standards we strive for. When this happens, we are committed to listening, learning and improving. Honest feedback, especially when it highlights where we've fallen short, is essential to helping us grow and deliver safer, more responsive care. In this report, you'll find examples of how we've used your feedback to make meaningful changes.

We want to ensure that everyone feels heard. If you have something to share about your experience with our services, I encourage you to get in touch. Your voice helps shape the care we provide.

You can find more information about how to share your feedback on our website:

www.nhsdg.co.uk/how-did-we-do

Thank you for your continued support and trust.

Mark Kelly, Executive Nurse Director

We Welcome Your Feedback

Encouraging and Gathering Feedback



There are many accessible ways for individuals to share their experiences with us. Feedback can be provided by post, online forms, email, social media, telephone, or via ContactScotland BSL for British Sign Language users. We also welcome in person feedback during appointments, community events, or meetings, as well as through virtual platforms such as video calls. For those who prefer support in sharing their views, or would rather not contact us directly, services like the Patient Advice and Support Service and Care Opinion offer alternative routes for patients and families to share their stories.



What We're Doing Well

We are proud of the robust and inclusive systems we have in place to gather feedback from patients, families and carers. A wide range of feedback channels are available and clearly promoted across our services.



Where We Can Improve

That said, we recognise there is room for further improvement and we will continue to actively explore new and creative ways to engage with people, with the aim of making it even easier for everyone to share their experiences with us.



We Welcome Your Feedback

2024-25 at a Glance

131 Compliments

We recorded **131** compliments for excellent care and treatment. This is in addition to the hundreds of thank you cards and messages teams received directly.



407 Complaints

We received **407** complaints, which is more than the **355** received last year.



413 Early Resolutions

We received **163** concerns, which is a decrease on previous years. Patient Experience also resolved **250** 'business as usual' issues. These issues are typically resolved at the first point of contact.



159 Care Opinion Stories

We received **159** Care Opinion stories, which were read **25,045** times. Whilst the number of stories received is consistent with last year, the number of views has increased significantly.



Training

We continue to deliver **Managing Conflict** training for staff to help them build on their dispute resolution skills and increase their confidence in dealing with difficult conversations.



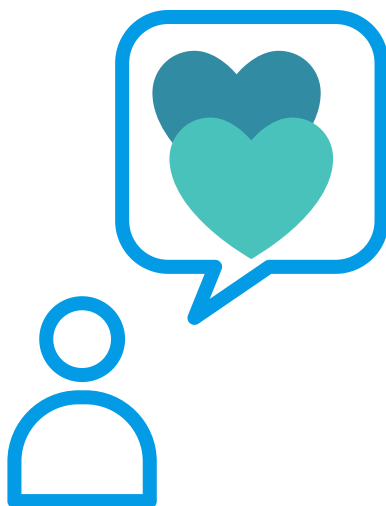
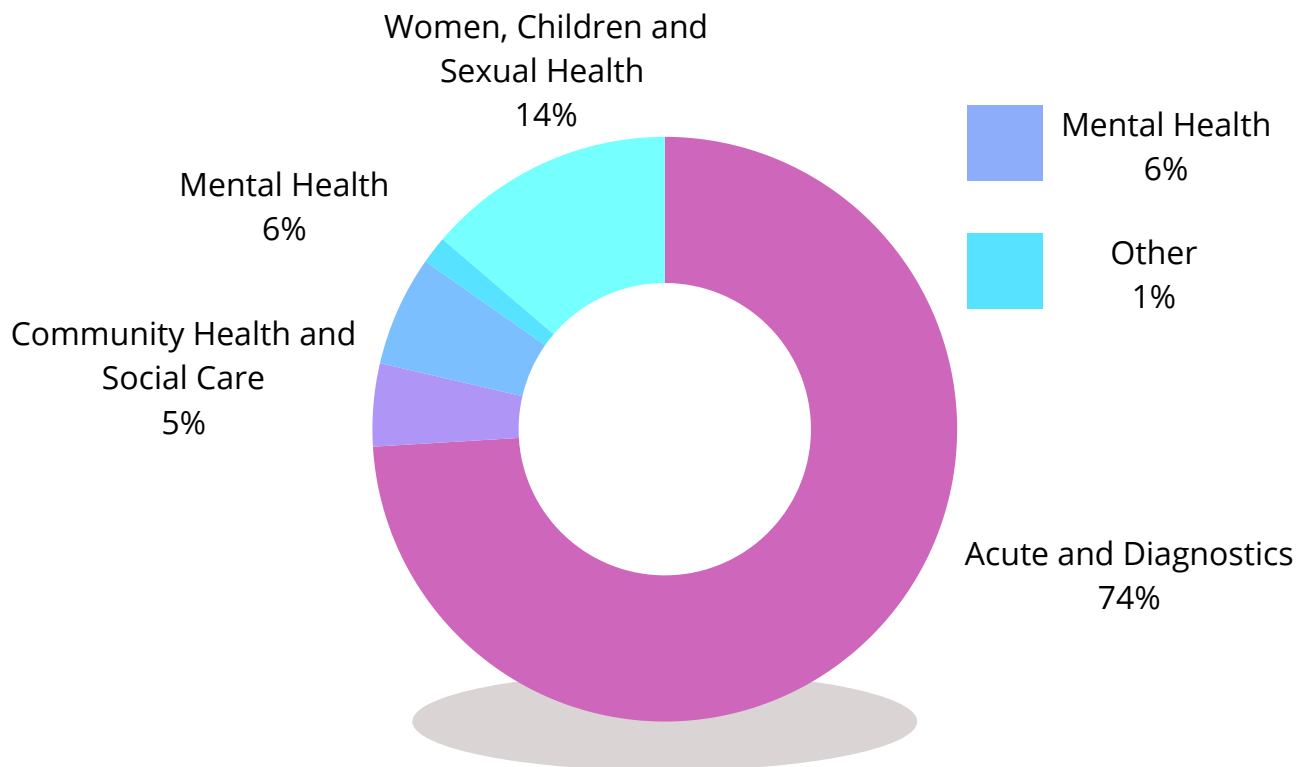
35 SPSO Cases

The Scottish Public Services Ombudsman (SPSO) contacted us about **35** cases during the period.



Compliments

The majority of the compliments we receive relate to Acute and Diagnostics, which is our largest Directorate.



Most of the positive feedback we received highlighted the high standard of care and treatment provided. Some comments praised specific aspects of care, while others offered more general appreciation.

A recurring theme was the kindness and empathy shown by staff, with many people noting how this helped them feel reassured and at ease.

We Welcome Your Feedback

Compliments

'The service we received from staff was exceptional.. Everyone we encountered was sympathetic, efficient and considerate.'

'I [spoke to a nurse in the maternity unit and I] just wanted to feedback she was the most calming and reassuring person to have spoken to. She really took all my worry and panic away and had a really wonderful manner. So just wanted to pass on my thanks to her and the team and highlight some really great patient care.'

'From the moment I had the pre-surgery meeting through pre-op, theatre, first and second phase recovery the care and professionalism was first class. I was reassured throughout the whole process.'

'...I attended DGRI...for surgery...The team that dealt with me were all excellent from Surgeon to Anaesthetist and Nursing staff. They were all very professional kept me calm, explained everything in full and my experience was first class...I was very nervous about this procedure as never had experience of this before but I could not praise the team highly enough...'

'I was admitted to Dumfries Royal Infirmary as an emergency... I spent 2 weeks in hospital and the standard of care and attention was absolutely fantastic. I could not fault it.'

'During one of the most challenging times of my life, when I experienced an episode of psychosis, [the Early Intervention for Psychosis] became a lifeline for me. Their compassionate, expert care helped me navigate a frightening and disorienting experience, providing not only medical and psychological support but also the reassurance that recovery was possible.'

Care Opinion

Care Opinion is an online approach, which enables the public to provide and view feedback on our services. When a story is added to Care Opinion the relevant staff are alerted so that they can view the feedback and respond as required. We have increased our promotion of Care Opinion this year and as a result, have seen our story numbers more than double.

159
Stories were
shared on the
Care Opinion
website

Our stories
were read
25,045
times

We replied
to **99%**
of stories

72%
of stories
shared were
positive



Share your story at
www.careopinion.org.uk

10%
of stories
shared were
significantly
critical

The majority of the feedback the Board receives through Care Opinion is positive. When a story is critical, the author is invited to make direct contact in order that we can provide further advice and support to resolve any issues raised. The below details some of the most frequently used words and phrases from our 2024-25 stories



Complaints


The Board is required to report performance against nine statutory indicators in relation to complaints. A summary of performance against each indicator is included below.

Indicator 1 - Learning from Complaints

Feedback provides a valuable opportunity for us to learn from the experiences of our patients, service users, carers and visitors. As well as our local commitment to learning and improving, we are also obliged to identify, record and report on learning under our Performance Indicators.




What We're Doing Well

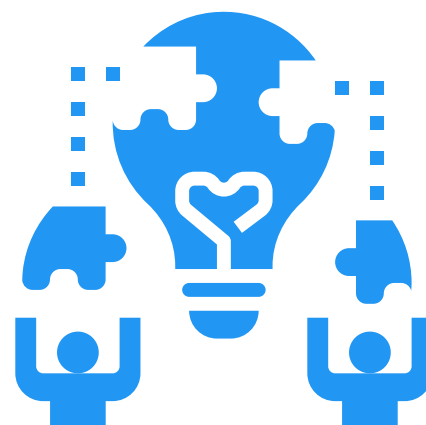
- Learning is identified from both individual cases and collectively.
 - Patient feedback data is considered alongside other key performance information at the Quality and Safety Board. This helps us to identify potential themes and trends, to inform learning.
 - Learning from complex and SPSO complaints is considered by our Patient Safety Group to help identify wider improvement opportunities.
- 



Where We Can Improve

- Whilst we have started gathering and sharing patient feedback in new ways, there is more work to do to ensure that we maximise the potential of these powerful and moving stories.
 - In line with the new Child Friendly Complaints Handling Procedure, we need to further develop how we engage with children and young people around their patient experiences and feedback.
- 

The following pages detail our approach to learning and some of the improvements we have made in response to the feedback received over 2024/25.



We Welcome Your Feedback

Learning from Complaints

Learning is one of the key outcomes sought when people complain. They often tell us that they want to ensure the organisation improves as a result of their feedback.

A patient advised they were having difficulty getting an alternative catheter that better suited their needs. Our investigation found that there was a knowledge gap for some staff and a programme of education on catheter care was rolled out to assist.

A number of patients shared examples of unclear communication. In each case, we fed the patient's experience back to the relevant staff and explored ways to improve communication moving forward.



A patient shared concerns about their experience during a miscarriage. They explained that whilst most of the care they received was excellent, there was scope for improvement in relation to some communications - which had caused distress. The team agreed several improvement actions, including further education sessions for staff and a review of their patient information leaflets.

Learning was identified from patient experiences relating to falls, and as a result an Enhanced Patient Observations policy is being rolled out to support those patients who require a higher level of supervision.

We Welcome Your Feedback

Patient feedback identified an issue with medication resulting from a change in name and packaging. The complaint investigation identified a need for further education in relation to 'the 10 rights of medication administration' and this was rolled out accordingly.

Feedback identified opportunities for improvement in relation to how we discuss DNACPR (Do Not Attempt Cardiopulmonary Resuscitation) status with patients and families, particularly where there has been changes in the patient's circumstances during admission.



One of our wards identified an opportunity to improve how information is shared when patients are moved between locations. They are now testing a transfer checklist for patients which will include an update to relatives about the transfer, the rationale for this, and the change in focus of care.

Feedback has identified the need for enhanced support for some patients when they are receiving tests or treatment that involves intimate areas. Whilst significant provisions are in place to ensure support in those situations, there is scope for us to further improve our communication.

Feedback from the Scottish Public Services Ombudsman identified the need for us to improve how we manage complaints in line with the new Child Friendly Complaints Handling Procedure. Whilst the Board has implemented the procedure, the feedback highlighted a need for us to further develop and improve our internal processes for such complaints, which we are in the process of actioning.

Complaints

Indicator 2 - Complaints Process Experience



People are invited to share their experience of the complaints process when we send a complaint response letter. Our survey questions are based on the suggested themes in the model Complaints Handling Procedure from the SPSO and are consistent with the questions being asked by other Boards.

We received **six** survey responses during the period. Due to the low number of returns (less than 2% of complainants) the results are unlikely to provide an accurate representation of people's experience of the complaints procedure. That said, there is still valuable learning we can take from those that did take the time to share their feedback.

What We're Doing Well

- People commented on how well they felt listened to and supported them through the process.
- One respondent commented on how apologetic staff were for their poor experience.

Where We Can Improve

- Some people reflected that they would like to see more robust learning from their feedback in order to be assured services would improve.
- A number of people commented on how long their complaint responses took.

We recognise that the current approach to gathering feedback for this indicator is ineffective. We will therefore review our approach for 2025/26 with a view to testing something different.

Complaints

Indicator 3 - Staff Awareness and Training

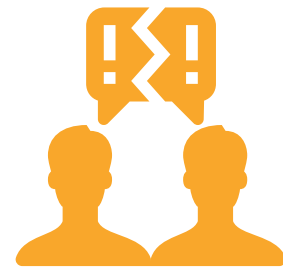
A number of training courses were delivered during 2024/25 in addition to the ongoing support offered to teams in relation to specific cases.

A number of teams were supported to better utilise Care Opinion for gathering feedback about their services.



We delivered 'Managing Conflict' training sessions to a colleagues across various teams.

Support and training was offered to a number of teams around interpretation and translation.



We continued our promotion of NHS Education for Scotland's online complaints training courses and Care Opinion's 'how to' sessions.

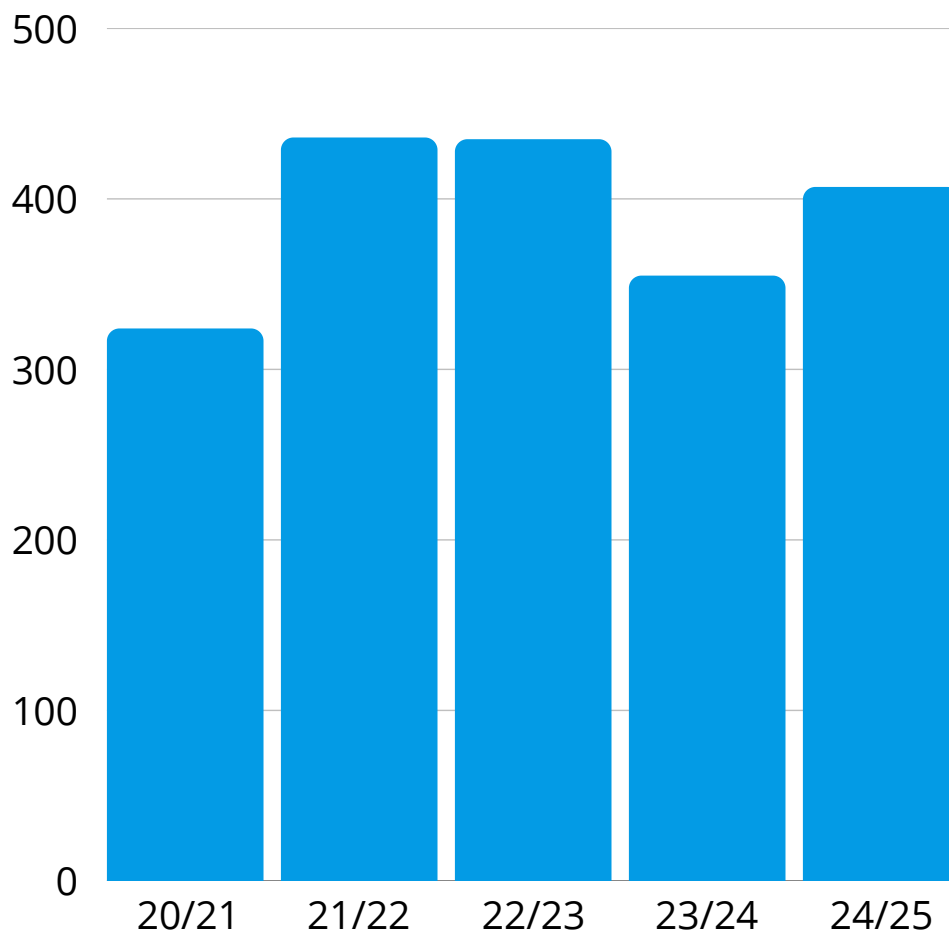


We continued to develop the patient feedback areas on both our intranet pages and our public website.

Complaints

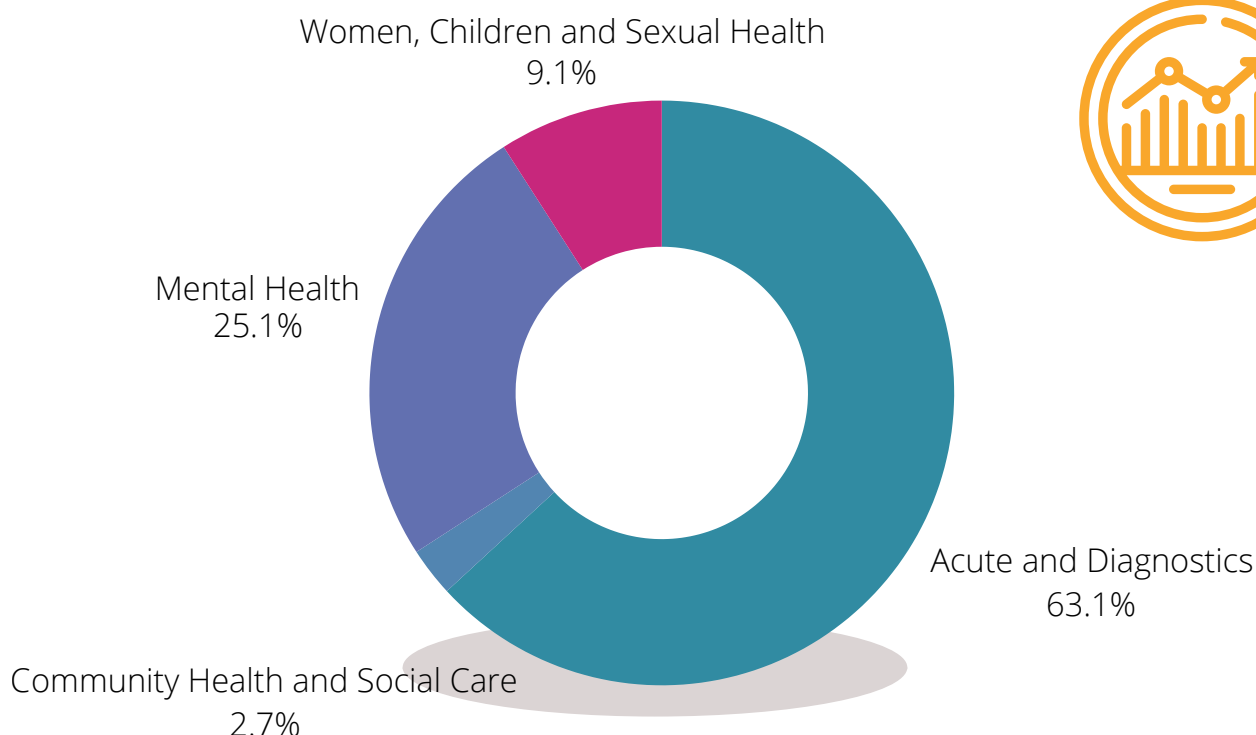
Indicator 4 - Complaints Received

We received **407 complaints** during 2024/25, which is significantly more than the **355** received last year. Where possible, we aim to resolve issues at the earliest opportunity and before they enter the complaints procedure, to ensure a prompt outcome for patients, carers and families.

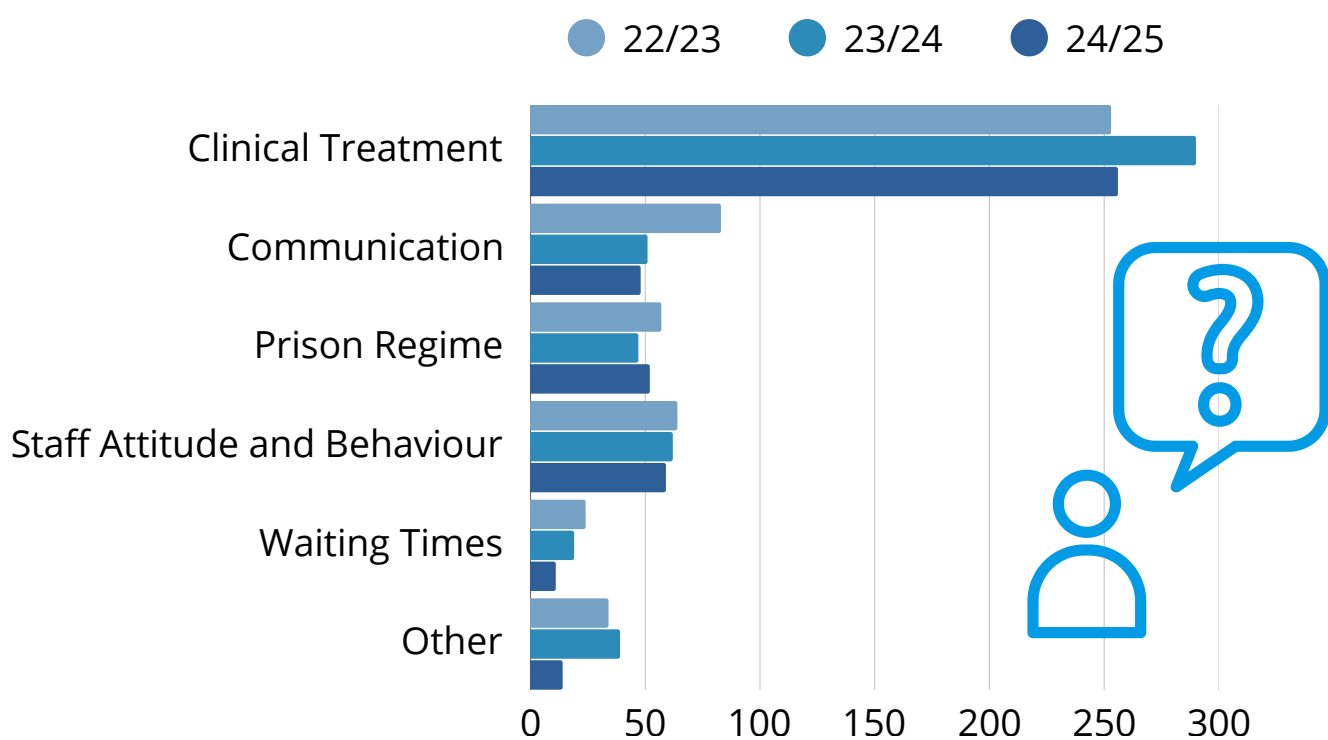


Complaints

The majority of the complaints we receive relate to Acute and Diagnostics, which is our largest Directorate.



When we record complaints, we identify themes using nationally agreed 'codes'. Some complaints identify several themes. The top themes for 2024/25 (those mentioned in more than 10 complaints) were:

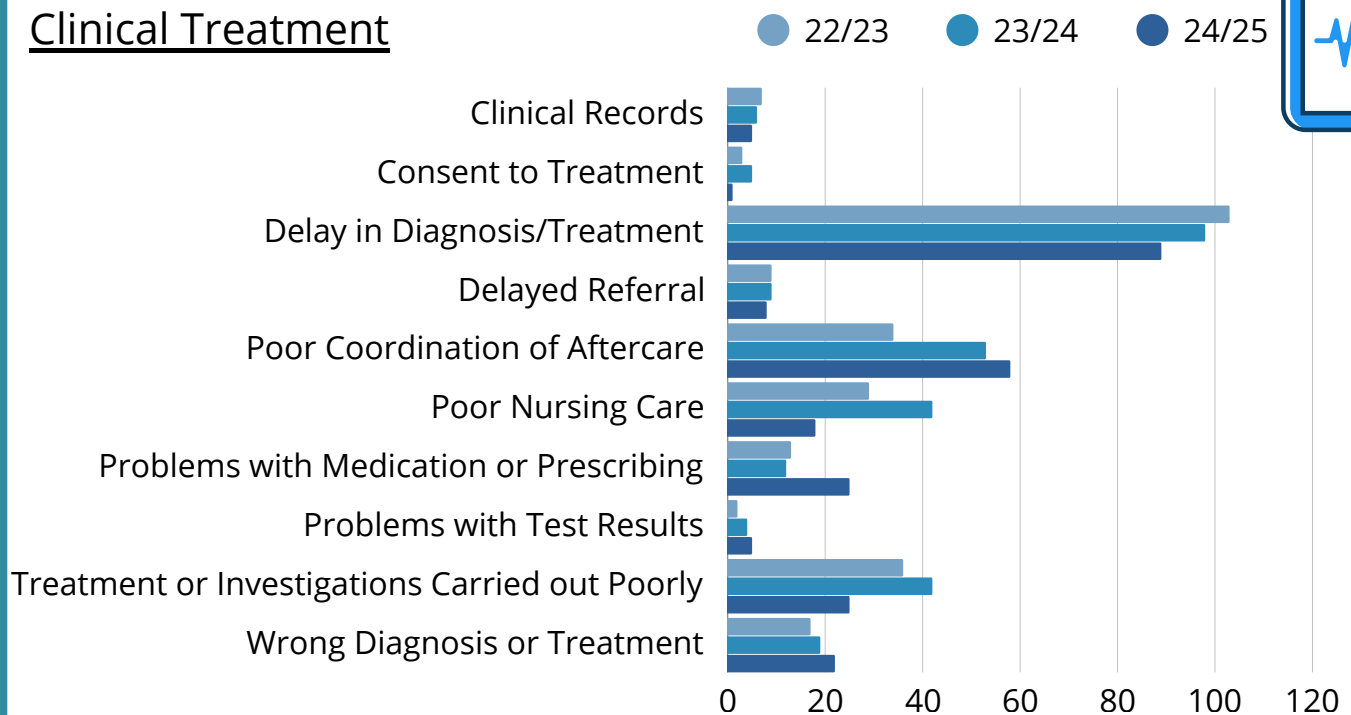


Those under 'other' covered a number of subjects relating to a wide variety of issues.

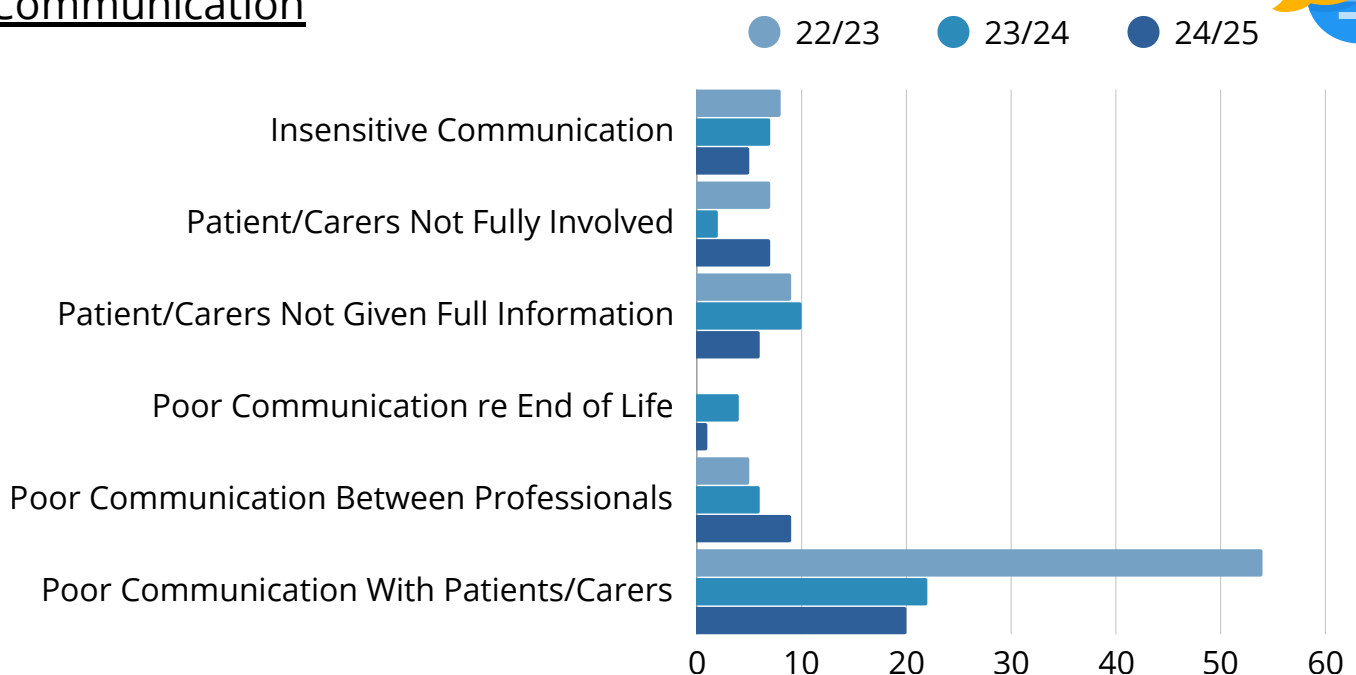
Complaints

Consistent with previous years, Clinical Treatment concerns were the most frequently raised issue during 2024/25. Communication issues were also a raised as a key concern. The below provides further detail around those themes:

Clinical Treatment



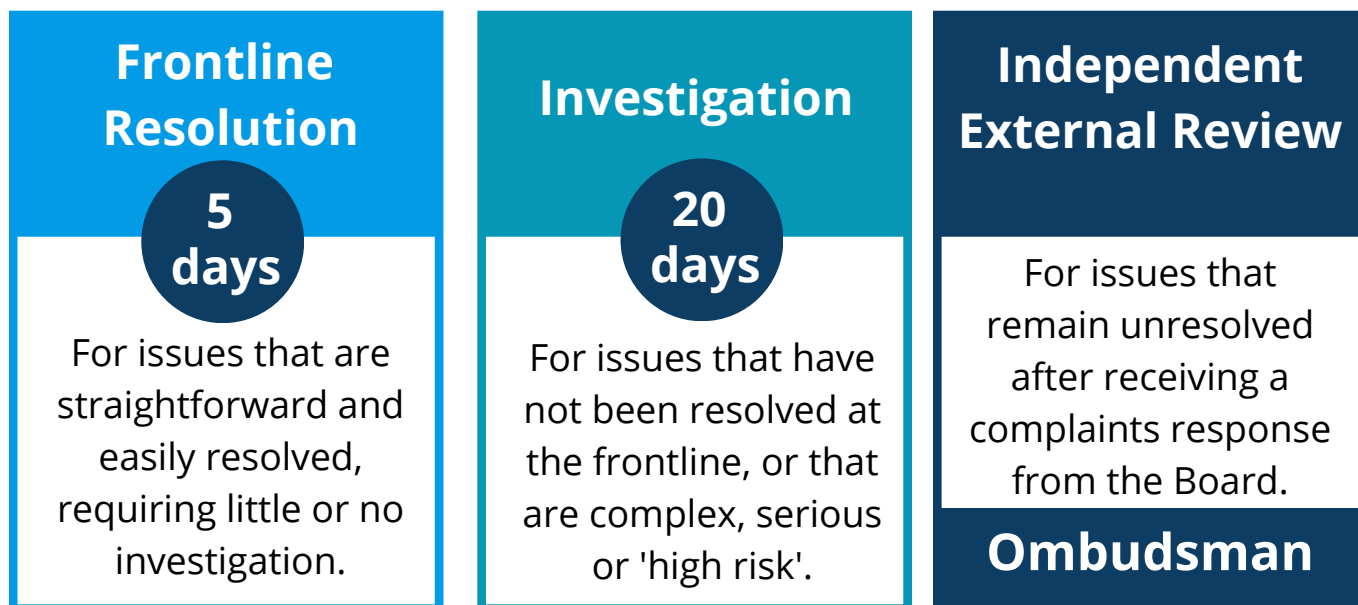
Communication



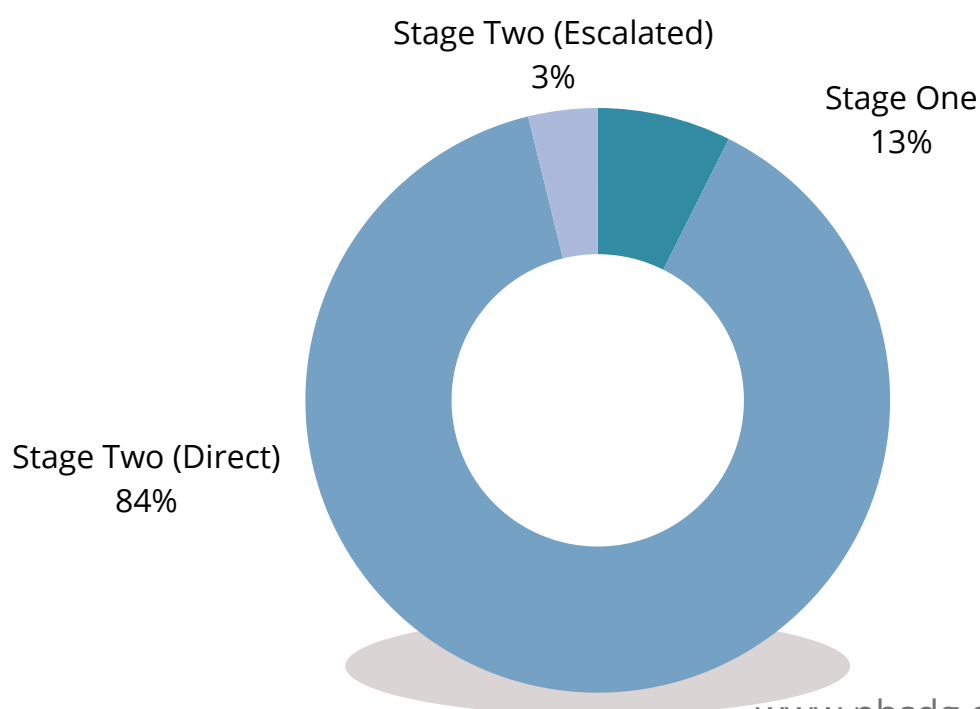
Complaints

Indicator 5 - Complaints Closed at Each Stage

NHS Boards in Scotland have a two stage complaints procedure. The first stage focuses on early resolution and the second stage provides the opportunity for detailed investigation of issues raised. Complaints can go directly to Stage Two or be escalated there after Stage One.



We responded to **392** complaints during the period, compared to **398** in the previous year. The majority of those (348) were complaints that went directly to Stage Two. We also responded to 29 Stage One complaints and 15 that were escalated to Stage Two. These numbers differ to complaints received, as some complaints remain 'live' at the end of the financial year.



Complaints

Indicator 6 - Complaint Outcomes

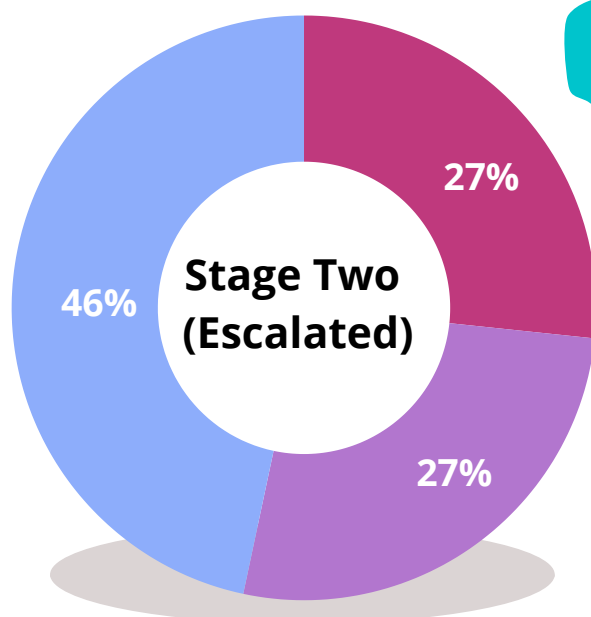
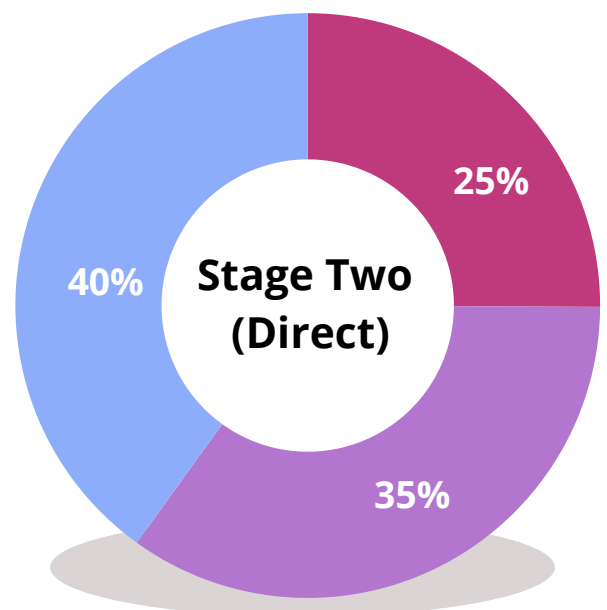
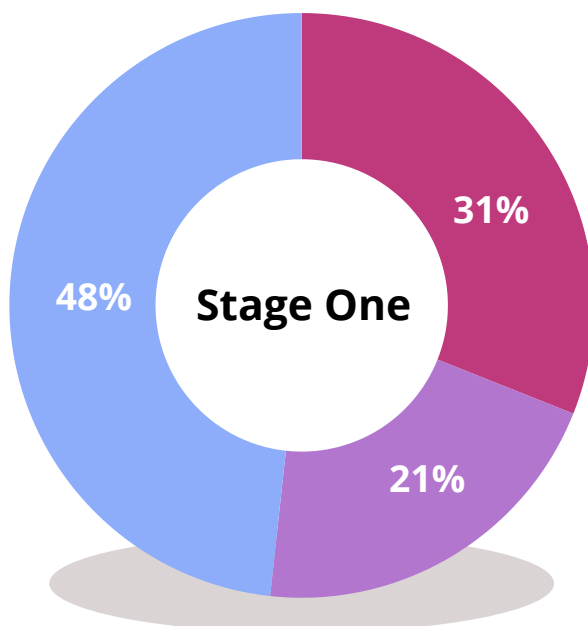
When we respond to a complaint, we provide an outcome of 'upheld', 'partially upheld' or 'not upheld'. The below details our outcomes for each Stage of the process.

KEY

Upheld

Partially Upheld

Not Upheld

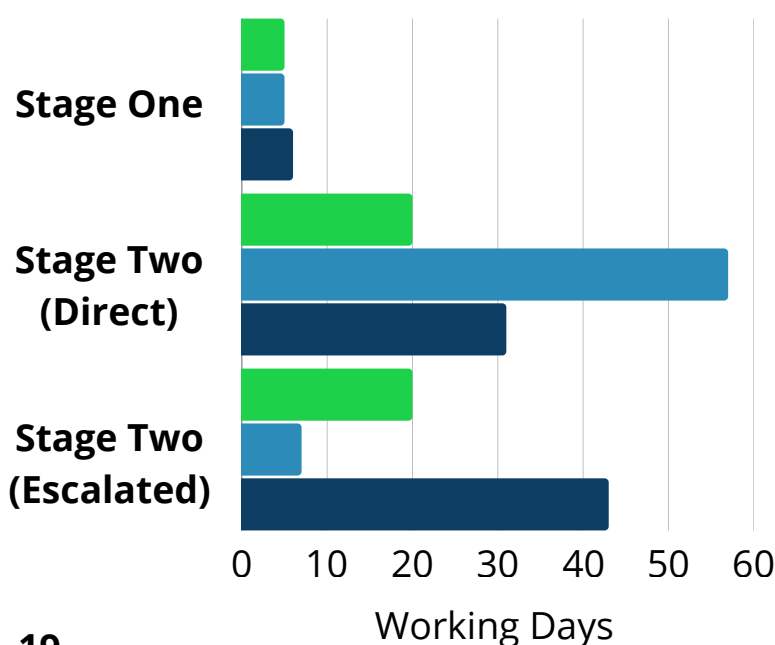
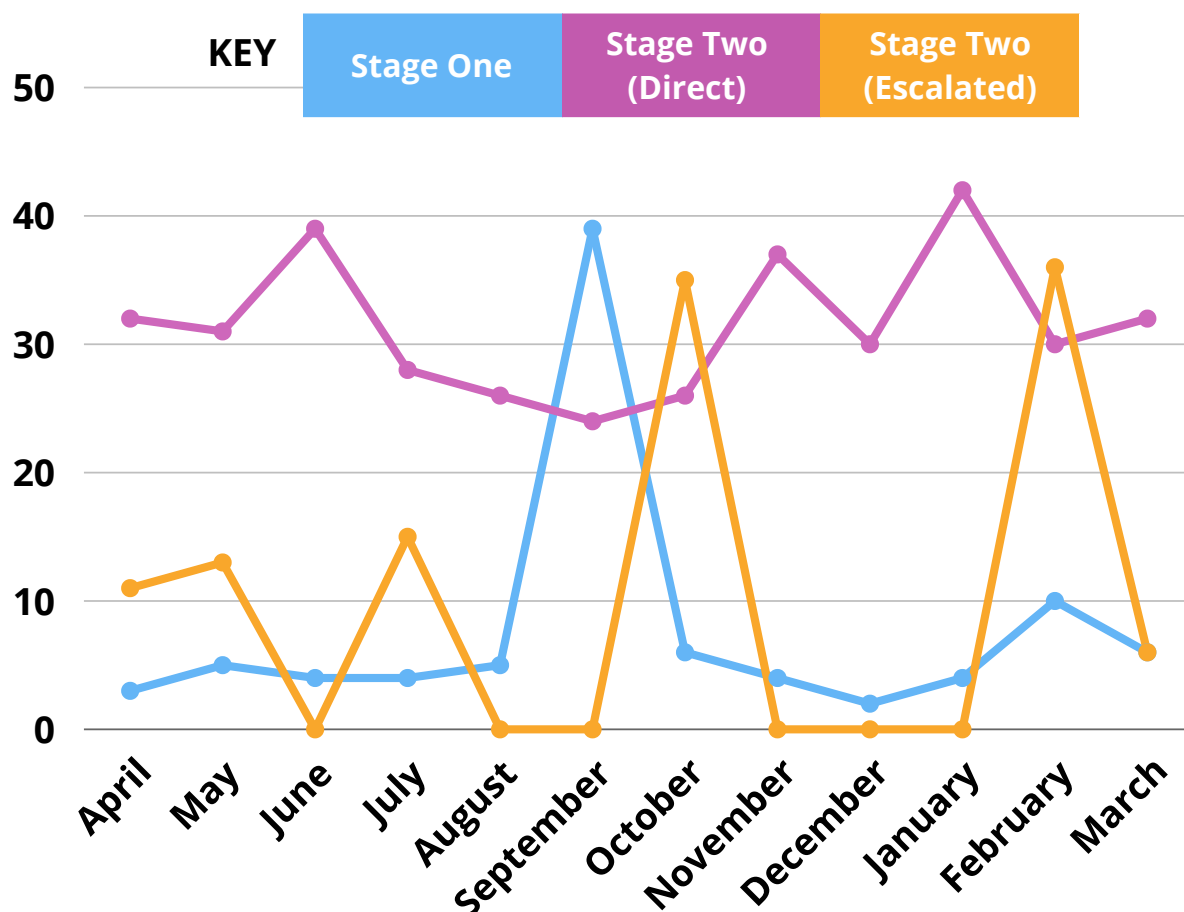


59% of our complaints were upheld or partially upheld which is a significant decrease on the 66% last year and 84% the previous year. We fully upheld 25% of complaints during this period, compared to 30% last year and 48% the previous year. The majority of our upheld and partially upheld complaints related to poor communication.

Complaints

Indicator 7 - Average Response Times

The Complaints Handling Procedure requires Boards to respond to Stage One complaints within 5 working days and Stage Two complaints within 20 working days. The charts below show our response times over the period.

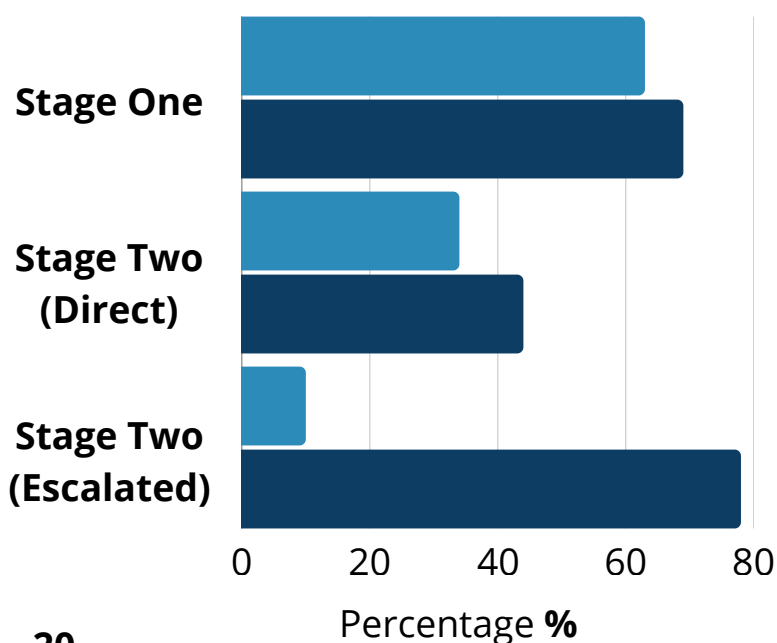
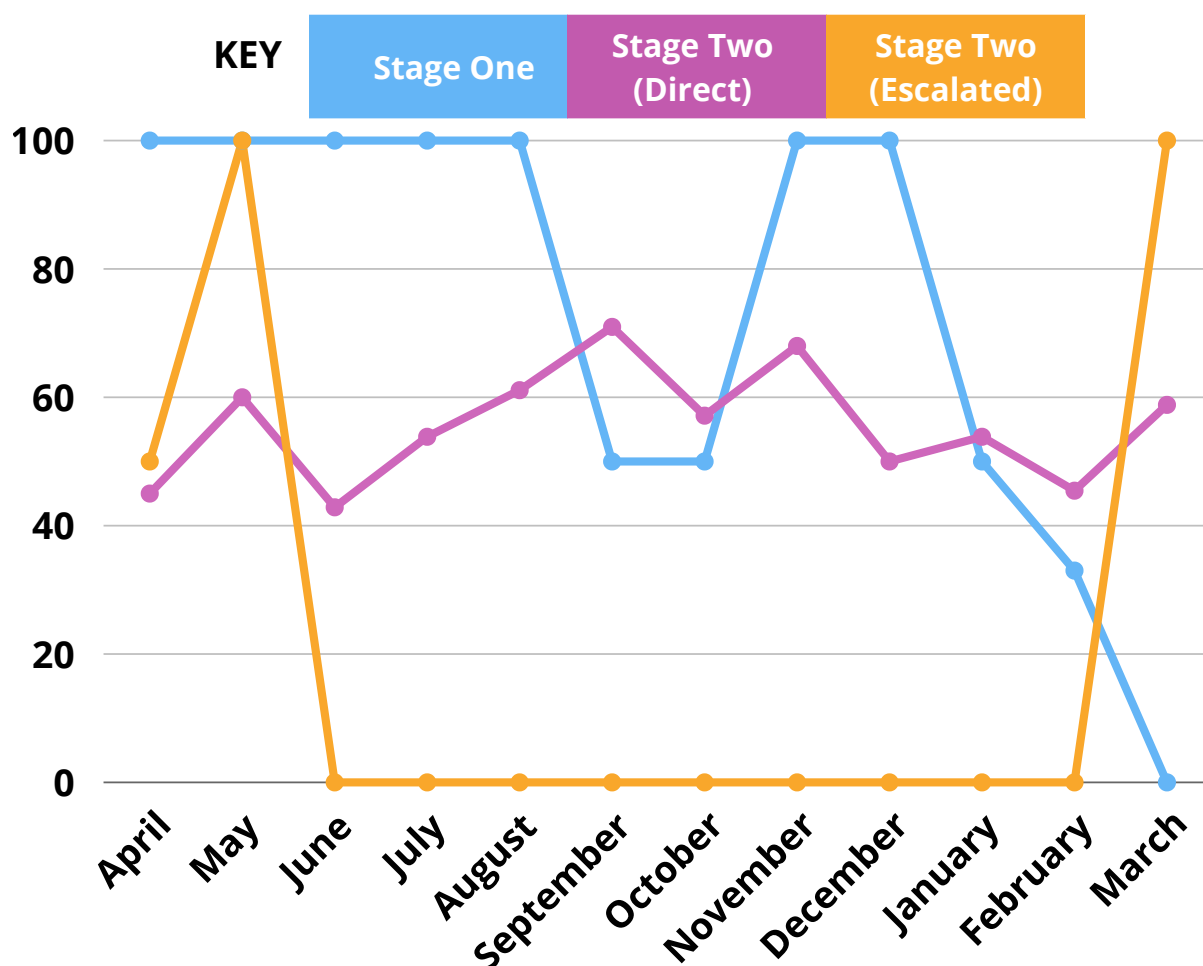


The chart to the left shows our response times for **this year** and **last year** against the **statutory response times**. Our response times have improved significantly for Stage Two Direct and whilst there is still work to do, this is encouraging. Stage Two Escalated continues to fluctuate due to low numbers.

Complaints

Indicator 8 - Closed Within Timescale

The chart below demonstrates the percentage of complaints we responded to within timescale during the period. Performance for Stage Two Escalated complaints fluctuates due to the very low numbers.

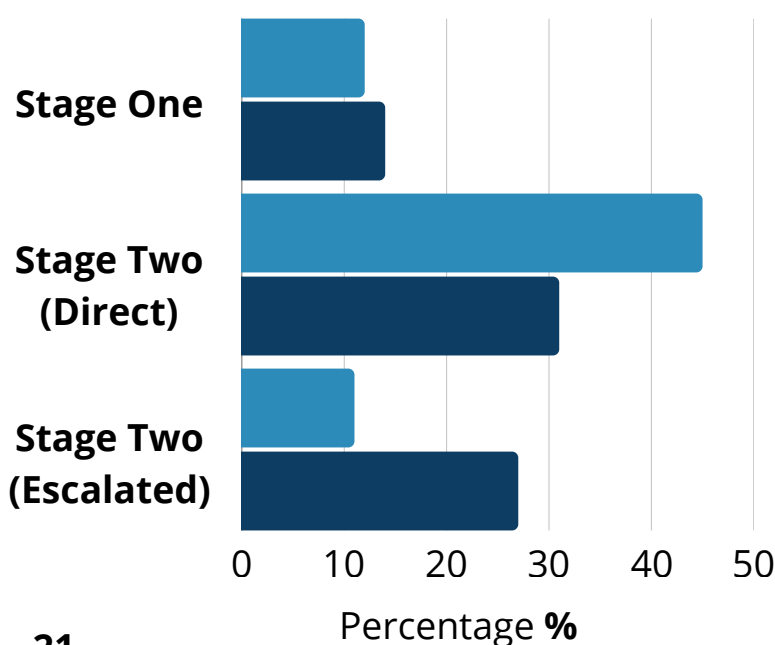
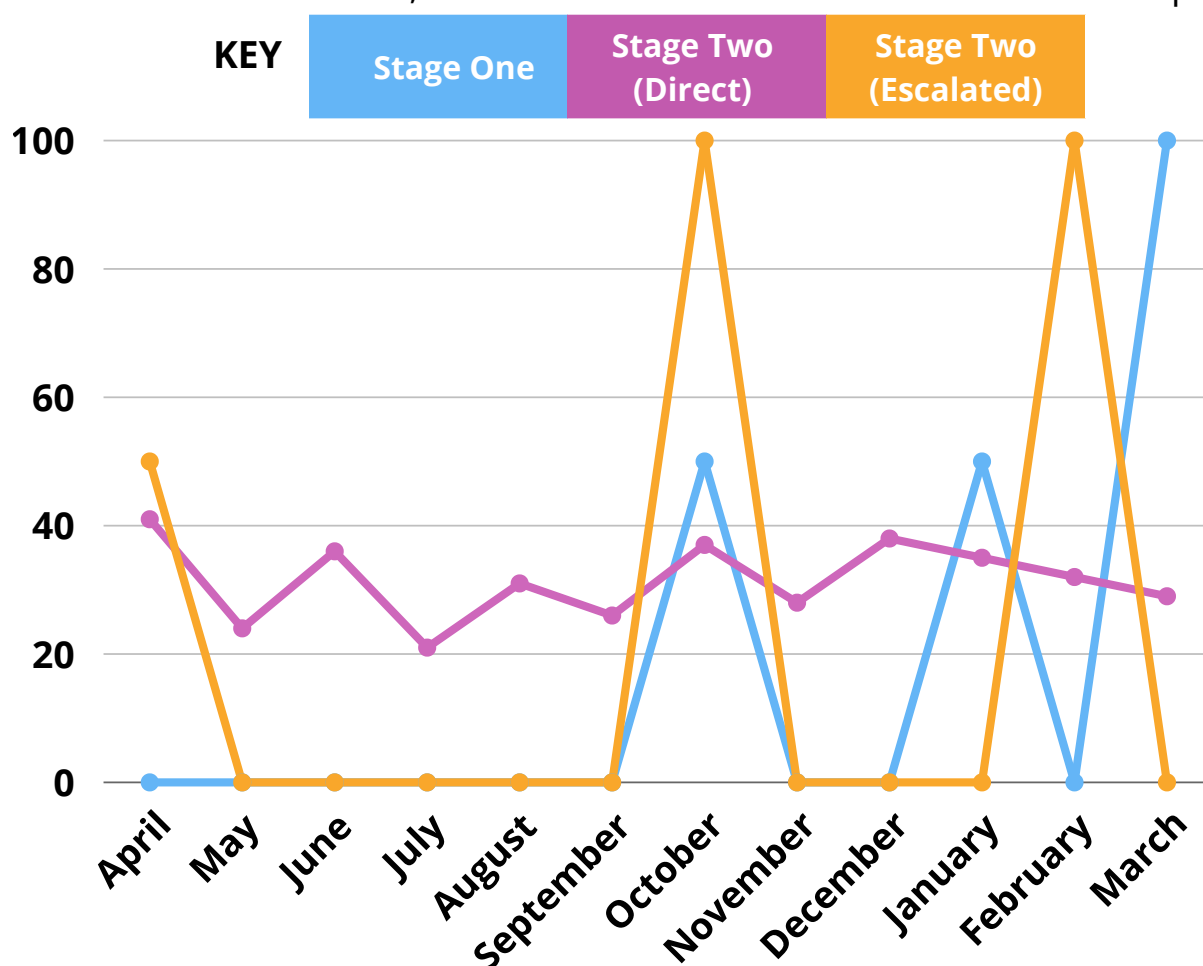


The chart to the left shows the percentage of complaints that were closed within timescales for **this year** and **last year**. We have improved our timescale compliance for all stages. However, there is scope to further improve. Particularly in relation to Stage 2 Direct complaints.

Complaints

Indicator 9 - Number of Cases Extended

Where we are unable to meet timescales for complaints, we have the option to agree an extension with the complainant. This indicator shows the percentage of cases where an extension was put in place. Some cases did go overdue without extension, which is an area we continue to work to improve.



The chart to the left shows the percentage of complaints that had extensions agreed for **this year** and **last year**. Extension requests increased slightly for Stage One and Stage Two Escalated complaints, but improved significantly for Stage 2 Direct complaints.

Complaints

Scottish Public Services Ombudsman

Individuals who are dissatisfied with the Board's handling of their concerns can refer their complaint for further investigation to the Scottish Public Services Ombudsman (SPSO).

The SPSO contacted us about **35** cases during the period.

The Board has received an outcome for **29** of those cases.

26 of those cases did not progress to an SPSO investigation.

Two cases were deferred back to the Board and **one** case was withdrawn.

We received **one** decision letter during the period (for a 2023/24 case), which **upheld** both points of complaint.

If the SPSO investigate and uphold a complaint, they typically make recommendations to assist the Board to ensure learning, improvement and where possible remedy. The SPSO place timescales on those recommendations and require evidence to confirm that they have been undertaken. The case remains open with the SPSO until they have confirmed that they are satisfied with that evidence. The SPSO publish all of their Decision Letters on their website.

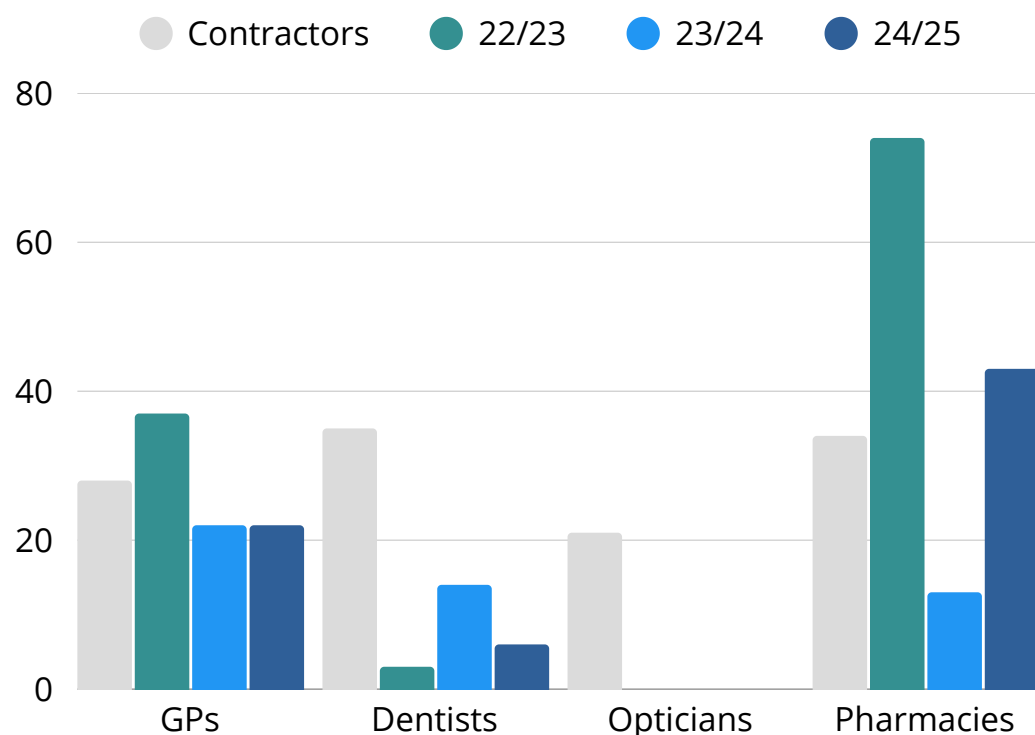
For more information on the SPSO please visit www.spsos.org.uk

Complaints

Family Health Services, Independent Contractors Complaints

Local GPs, Dentists, Opticians and Pharmacists provide the Board with monthly performance information relating to the number of complaints they have received.

In accordance with the Complaints Directions, relevant NHS Bodies have a responsibility to gather and review information from their own services and their service providers. Service providers also have a duty to supply this information to their relevant NHS Body as soon as is reasonably practicable after the end of the month to which it relates.



Independent Contractors received a total of **71** complaints during 2024/25, compared to 50 in the previous year.

Return rates for independent contractor submissions continue to be low. Patient Services continue to work with contractors and Primary Care Development colleagues to support the submission of figures. In addition to the complaints listed above, Patient Services continue to receive a high number of 'business as usual' calls to the Board regarding contractors. These concerns are generally directed back to the relevant practice. During the period, the majority related to access to dentistry.

Complaints

Prison Service Complaints

NHS Dumfries and Galloway is responsible for the provision of healthcare to prisoners at HMP Dumfries. Where Boards are responsible for delivering health care within a prison, there is a requirement to provide narrative on complaints handling specific to that setting.

We received **52** complaints about Prison Healthcare during 2024/25.

That is a increase on the **37** complaints received during 2023/24.

Most complaints related to the Prison regime or clinical treatment.

Of the complaints investigated, none were upheld.

One of the complaints progressed to the Ombudsman, who were satisfied with the Board's handling and did not investigate.

The outcome for each of the complaints responded to was 'not upheld'. This is consistent with previous years, where the vast majority of prison healthcare complaints are 'not upheld'. This is consistent with the national picture.

Complaints

Accountability and Governance

We produce a number of internal and publicly available performance reports (available on our website). These reports aid monitoring of our performance against the performance indicators set out by the Scottish Public Services Ombudsman. They also support accountability and governance, as well as helping us to learn and improve.



Regular reports on new and 'live' complaints are provided to Senior Managers and Feedback Leads via automated 'dashboards'.



Bi-monthly reports are provided to Board and Healthcare Governance Committee, detailing performance against the national indicators.



An annual report is published publicly each year, and formally submitted to the Scottish Government and Scottish Public Services Ombudsman.

Conclusion

We continue to strengthen our areas of good practice, with a sustained focus on early resolution. Although there has been an increase in the number of complaints received, we are successfully resolving the majority of concerns before they escalate. When they do escalate, we remain committed to improving our response times and we have made significant progress in that area.

Our promotion of Care Opinion remains a key priority, enabling us to maintain the momentum from last year in capturing a high volume of patient stories, most of which reflect positive experiences. We are also exploring more creative and engaging ways to collect and share patient feedback.

We would like to extend our sincere thanks to everyone who has taken the time to share their feedback with the Board over the past year. Your stories are invaluable in helping us improve. Thank you.