



NSS Feedback and Complaints Annual Report



2024 - 2025

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1. Executive Summary

This report provides a summary of the service user feedback and complaints recorded by NHS National Services Scotland (NSS) during the period 1 April 2024 to 31 March 2025.

NSS welcomes and values all forms of feedback, recognising it as a key mechanism to inform our governance and quality improvement frameworks. Insights from feedback are systematically reviewed by directorate-level leads, reported to the Executive Management Team, and inform our quarterly Service Excellence reports and associated improvement plans. Receiving feedback ensures that our services deliver the maximum impact for our users by driving continuous quality improvement. There are currently three main measures of regular feedback:

- Customer Engagement Index¹ (CEI) annual surveys
- Compliments
- Complaints

Insights from all feedback routes inform directorate-level quality improvement planning and are escalated through governance structures to ensure NSS remains responsive and accountable to our service users.

In 2024/25, four directorates carried out surveys with external stakeholders and service users, Human Resources, Counter Fraud Services, National Contact Centre and Finance, Corporate Governance and Legal Services.

NSS received 239 compliments and 624 complaints during the same period. This represents a 17.8% decrease in complaints compared to the previous year.

Two complaints were referred to the Scottish Public Services Ombudsman² (SPSO), and neither was upheld.

NSS resolved 90% of complex complaints within the guidelines set out by the Model Complaints Handling Procedure (MCHP), a slight decrease from 94% the previous year. The average response time remained consistent at 10.2 days, compared with 10.3 days in the previous year.

¹ [UK Customer Satisfaction Index \(UKCSI\)](#) ★ [Institute of Customer Service](#)

² [About us | SPSO](#)

2. Introduction

2.1 About NSS

NHS National Services Scotland (NSS) was established to provide services common to all Health Boards in Scotland. NSS began operating on 1 April 1974 under The National Health Service (Functions of the Common Services Agency) (Scotland) Order 1974.

In 2013, the Public Services Reform³(Functions of the Common Services Agency for the Scottish Health Service) (Scotland) Order extended NSS's remit to include services for local authorities and government departments. The Public Bodies (Joint Working) (Scotland) Act 2014⁴ reinforced this requirement.

NSS works across Scotland. You can learn more about our budget, workforce and sites in our latest Annual Accounts⁵.

Table 1: Key facts about NSS

Aspect	Fact
Budget:	1,105 million
Workforce:	3,166 Whole Time Equivalent (WTE) staff
Sites:	22

3. Introduction to the Report

This report is the annual feedback and complaints report for 2024/25. The report provides information on our performance against the NHS Model Complaints Handling Procedure⁶.

NSS continues to work in partnership with the Community Engagement team at Healthcare Improvement Scotland (HIS) to review and improve feedback methods. As a National Board, our approach differs from Territorial Boards.

We use feedback, comments, and complaints to improve services. Our three main insight sources are:

- Directorate and service user surveys
- Compliments
- Complaints data

³ [Public Services Reform \(Scotland\) Act 2010](#)

⁴ [Public Bodies \(Joint Working\) \(Scotland\) Act 2014: statutory guidance - gov.scot](#)

⁵ [Annual report and Accounts 2023–2024 | National Services Scotland](#)

⁶ [The Model Complaints Handling Procedures | SPSO](#)

These insights inform NSS's Service Excellence reporting to the Executive Management Team.

We follow best practice approaches, including the Planning with People guidance⁷, the Scottish Approach to Change, the NHSScotland Quality Management System Framework⁸ and the NHS Model Complaints Handling Procedure (MCHP).

4.1 The Model Complaints Handling Procedure

Introduced on 1 April 2017, the MCHP aims to:

- Take a consistently person-centred approach to complaints handling
- Implement a standard process across NHS Scotland
- Encourage learning from complaints to improve services

The MCHP includes nine key performance indicators. These indicators help measure effectiveness, decision-making quality, and continuous improvement. The detail can be found in appendix 4.

In 2024/25, the MCHP was updated to require full accuracy checks of complaints data before submission.

4.2 Complaints Management Approach in NSS

Given the scale and diversity of NSS's national remit, ranging from clinical services to logistics, digital infrastructure, and legal support, NSS does not have a central complaints team. Each directorate manages its own complaints, with a designated complaints lead appointed. The directorate complaints leads are responsible for ensuring compliance with the MCHP within their own directorate. These leads meet monthly to share learning and best practice, whilst maintaining consistent standards through our governance structures.

Complaints are recorded on the ServiceNow⁹ portal, allowing us to identify common themes. Quarterly complaints data is included in the NSS Service Excellence report and discussed at the Executive Management Team meetings.

This approach also ensures complaints are handled by those with service-specific knowledge and professionalism, improving the responsiveness to complaints and the learning from complaints received.

⁷ [Health and social care - Planning with People: community engagement and participation guidance - updated 2024 - gov.scot](#)

⁸ [Scottish Approach to Change – Healthcare Improvement Scotland hisengage.scot/quality-framework](#)

⁹ [Customer Service Management - CSM - ServiceNow](#)

5. Service User Feedback

5.1 Encouraging and gathering feedback

We are committed to delivering high-quality services while protecting health and the environment. All feedback¹⁰ is welcomed and is viewed as an opportunity to learn and improve our services.

NSS is registered with Care Opinion¹¹. However, stories related to national programmes (e.g. breast screening) are responded to by the local NHS Boards. We are currently developing a user experience strategy to further improve how we gather and act on feedback. Service excellence is a strategic objective for NSS, with complaints and compliments directly aligned to support and measure progress against this goal.

5.2 Compliments

Positive feedback provides valuable insight into the services and behaviours our users appreciate. Capturing compliments across a large, diverse organisation presents challenges. Staff often receive praise informally and through various channels. Furthermore, there is no mandatory reporting requirement.

Directorates are encouraged to record and reflect on informal compliments through team meetings, monthly feedback reviews, and reporting to the complaints leads network. While informal comments are not centrally logged, they contribute to local service insight and help identify recurring patterns of positive user experience

In 2024/25 NSS recorded 239 compliments, a decrease from 368 the previous year.

The main themes from compliments recorded are:

- Professionalism and expertise
- Person-centred approach
- Responsiveness and efficiency
- Teamwork and collaboration

Other themes included:

- Positive experiences at training courses
- Knowledge sharing
- Loyalty towards those accessing services

¹⁰ [NHSMCHPMarch2021.docx](#) – definition of Feedback

¹¹ [Care Opinion](#)

Chart 1: Number of Compliments Received by Theme 2024/25

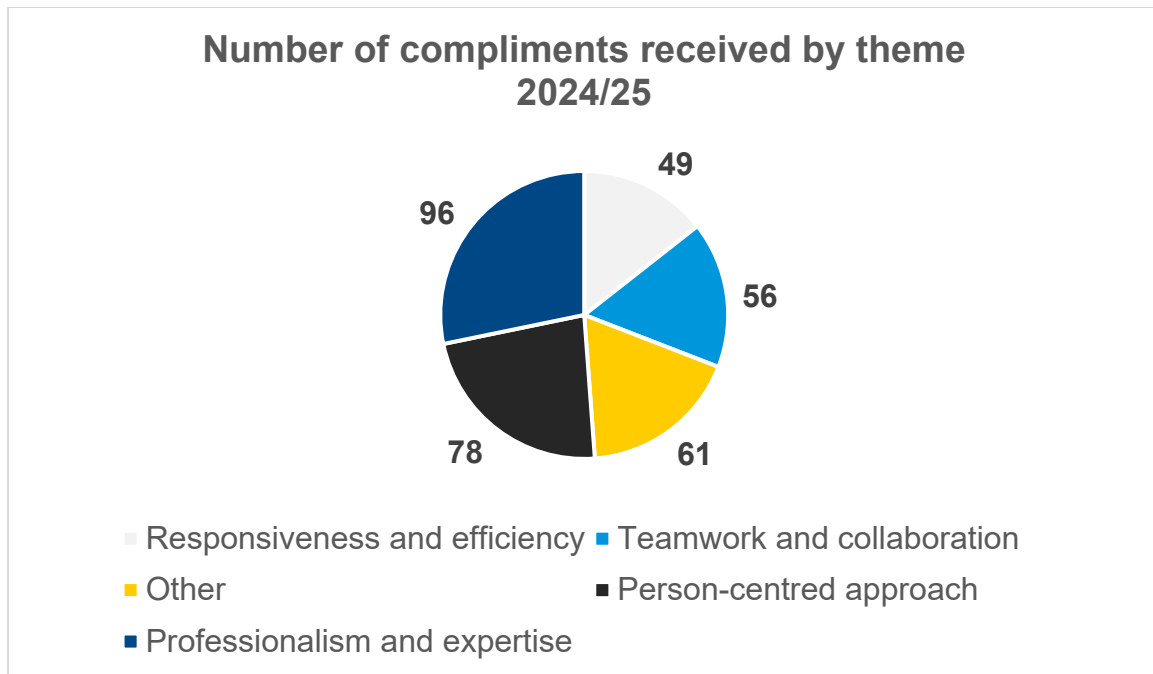
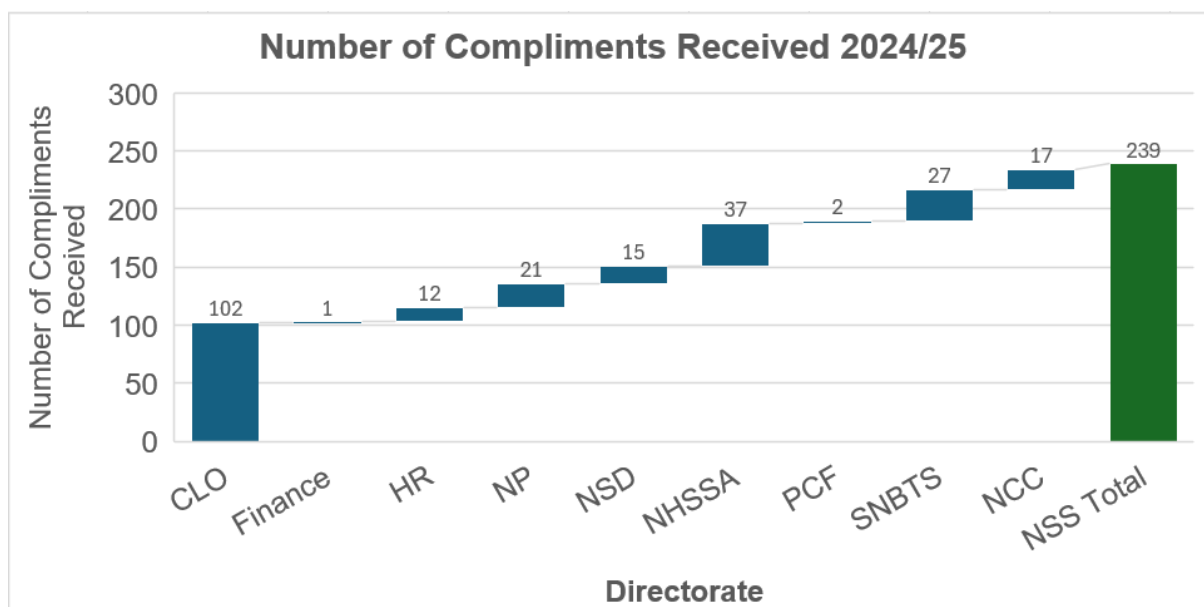


Chart 2: Number of Compliments received 2024/25



The number of recorded compliments decreased by 34.6% compared to the previous year total of 368. This is due to a decrease in compliments within CLO and more details can be found in the FCGLS directorate summary later in the paper.

Table 1 in appendix two provides some examples of the compliments NSS Directorates have recorded in the reporting period of 2024/25.

6. Complaints Overview

Between 1 April 2024 and 31 March 2025, NSS received 624 complaints. This represents a reduction of 135 (17.8%) when compared to the 759 complaints received in 2023/24. This reduction occurred during a period in which overall service delivery activity remained stable across directorates. This suggests that improvements to our complaints handling processes and quality interventions may have contributed to the downward trend in complaints.

The combined total in 2024/25 includes:

- 160 stage 1 complaints (26%)
- 189 stage 2 complaints (30%)
- 273 complaints related to third party suppliers (44%)

Of the 160 stage 1 complaints received:

- 60 were not upheld
- 17 were partially upheld
- 83 were upheld

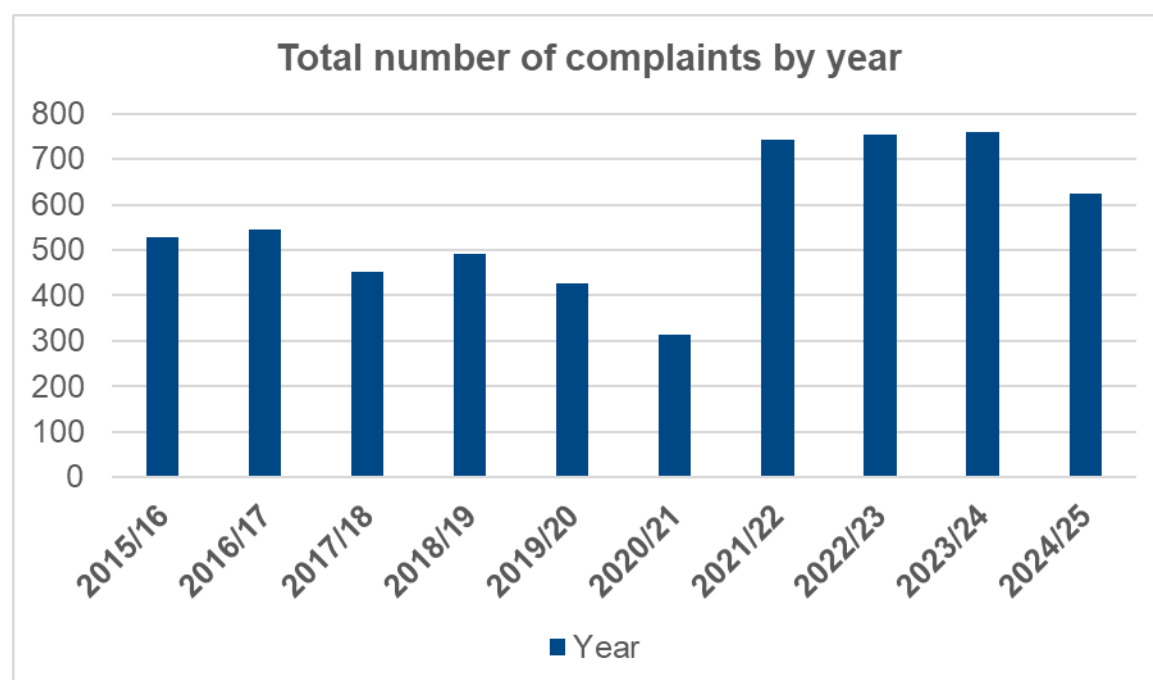
Of the stage 2 complaints received:

- 51 were not upheld
- 41 were partially upheld
- 97 were upheld

In 2024/25 two complaints were referred to the SPSO. Out of those two, none were upheld. This is compared to five complaints reported to SPSO in 2023/24, none of which were upheld. This reduction in referrals to the SPSO reflects a strengthened focus on the quality of our handling and response to complaints and adoption of the MCHP.

In 2024/25, 89% of Stage 2 complex complaints were resolved within the MCHP guideline of 20 working days, compared to 94% the previous year. The average response time was 10.3 days, consistent with last year's 10.2 day average. The chart below provides a comparison of total complaints received each year, from 2015 to 2025.

Chart 3: Total number of complaints received by year from the period 2015 to 2025

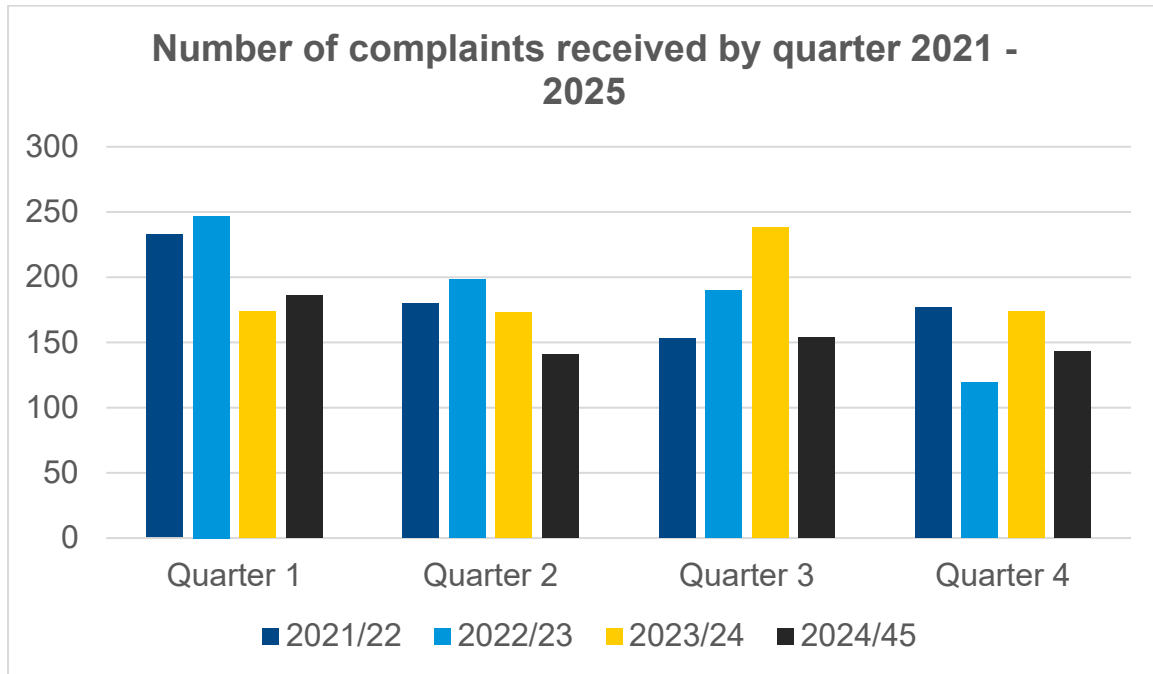


The table below shows the number of complaints received each quarter from 2022 to 2025.

Table 1: Total quarterly and cumulative totals for 2024/25 with a comparator with 2023/24 and 2022/23

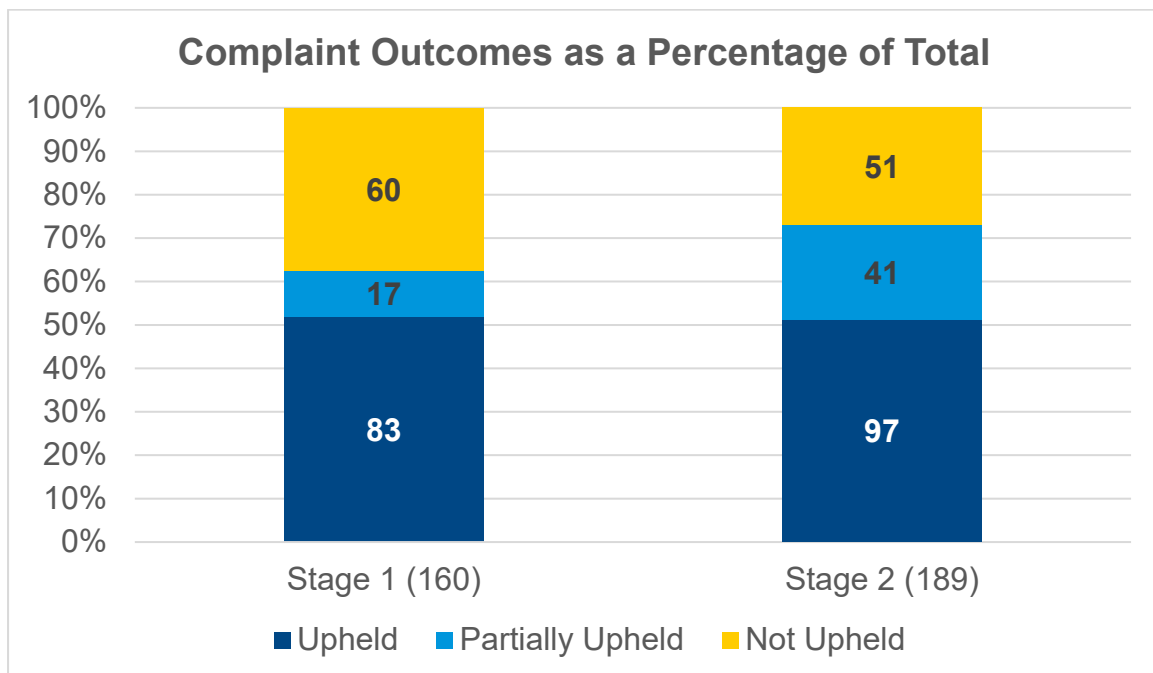
	Quarterly Total 2024/25	Cumulative Total 2024/25	Quarterly Total 2023/24	Cumulative Total 2023/24	Quarterly Total 2022/23	Cumulative Total 2022/23
Quarter 1	186	186	174	174	247	247
Quarter 2	141	327	173	347	198	445
Quarter 3	154	481	238	585	190	635
Quarter 4	143	624	174	759	119	754
Total		624		759		754

Except for quarter one (where complaint numbers were slightly higher), the quarterly data shows that complaints volume has remained at similar levels across the financial year. Further analysis is provided within the Directorate Summaries (beginning at section 8 from page 16) of this report.



The chart below illustrates the stage 1 and 2 complaint outcomes.

Chart 5: Stage 1 and Stage 2 Complaint Outcomes



With 32.2% of complaints upheld and a further 23.4% partially upheld, over half of the complaints received led to full or partial agreement with the complainant's concerns. This suggests that complaints remain a valuable mechanism for identifying service challenges, whilst informing corrective action and driving service improvement.

NSS continues to commit to the requirements set out in the NHS MCHP. In our policy we acknowledge complaints within three working days, resolve less complex (stage 1) complaints within five working days and resolve more complex (stage 2) complaints within the 20 working-day timescale.

The table below illustrates the response times for stage 1 and stage 2 complaints.

Table 2: Handling complaints – average response times for all complaints in days

	Q1 2024/ 25	Q2 2024/ 25	Q3 2024/ 25	Q4 2024/ 25	Annual 2024/25	Annual 2023/24
Average response time against target response time of five working days (less complex)	2.9	2.9	2.4	2.5	2.7	3.2
Average response time against target response time of 20 working days (more complex)	8.7	9.8	9.8	12.9	10.3	10.2
Responses within target (20 working days)	92%	91%	92%	80%	89%	94%
Number of responses out with target (20 working days)	4	4	4	9	19	19

The year-on-year decrease in complaint volumes, alongside lower SPSO referral rates and a high proportion of upheld complaints, indicates that our resolution and quality assurance processes are contributing to more timely and effective responses.

6.1 Referrals to the Scottish Public Services Ombudsman

The Scottish Public Services Ombudsman (SPSO) will look at complaints after a complainant has gone through the NHS complaints procedure. If they have already complained to the NHS and are unhappy, they can ask the SPSO to look at the complaint. This is referred to as the right to redress.

Two NSS complaints were referred to the SPSO in 2024/25. Of those two, none were upheld. Indicating that the SPSO was satisfied that NSS handled the two complaints according to the MCHP. This is compared to five complaints reported to SPSO in 2023/24, where none were upheld.

7. Directorate Summaries

Each NSS directorate is responsible for recording, responding to, and learning from feedback relevant to its unique service area. The following summaries highlight complaint volumes, thematic insights, and examples of service improvements or assurances undertaken in 2024/25.

Each directorate's complaints data is summarised below, including:

- Scottish National Blood Transfusion Service (SNBTS)
- National Procurement (NP)
- National Contact Centre (NCC)
- Human Resources (HR)
- Digital and Security (DaS)
- Finance, Corporate Governance and Legal Services (FCGLS)
- Contractor Finance and Counter Fraud Services (CF and CFS)
- National Services Directorate (NSD)
- Practitioner Services (PSD)
- NHSScotland Assure (NHSSA)

Not all directorates and service areas receive complaints. Directorates with no complaints data have provided narrative regarding their feedback, service improvement and ways in which they resolve any service issues, in line with the expectations of the MCHP.

8. Scottish National Blood Transfusion Service (SNBTS)

Table 3 shows the number of complaints SNBTS has received from blood donors, with a comparison from the previous year.

Table 3: SNBTS donor complaints

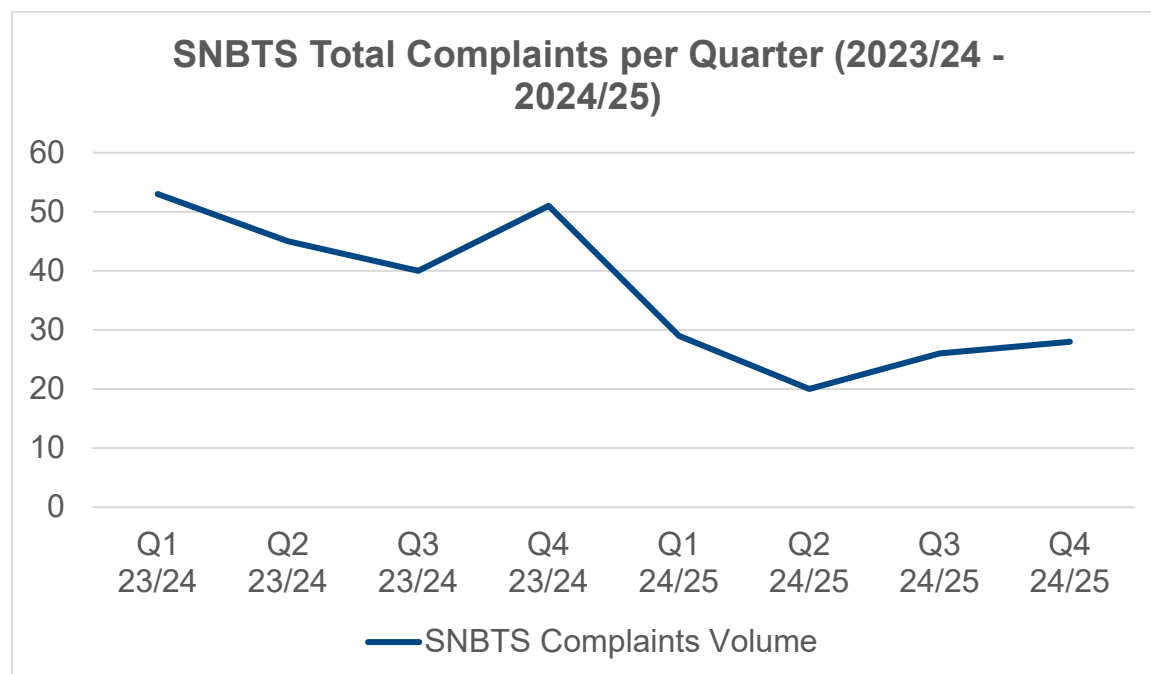
Code/Type of Complaint*		Q1 24/25	Q1 23/24	Q2 24/25	Q2 23/24	Q3 24/25	Q3 23/24	Q4 24/25	Q4 23/24
1	Anti-HBc Lookback	1	0	0	0	0	0	0	1
2	Appointment Availability	1	1	0	2	0	6	0	2
3	Appointments	3	3	5	10	4	6	1	8
4	Adverse Events	0	0	3	0	3	1	0	3
5	Disruption	0	0	0	0	0	0	0	2
6	Documents and Records	0	4	1	3	0	0	0	2
7	Donor Communication	2	4	1	9	4	13	5	5
8	Donor Selection	5	7	0	2	1	2	2	5
9	Donor Web Portal	4	3	1	1	2	1	3	3
10	Facilities (incl. Parking)	2	0	0	1	3	1	2	1
11	Health & Safety	1	1	1	0	1	0	1	1
12	Legal claim	0	0	0	1	0	0	0	0

13	New Regulatory Change	0	17	1	2	0	4	0	1
14	Opening Hours	0	0	0	0	0	0	1	0
15	Opportunity to donate	7	5	1	5	1	4	3	7
16	Special Needs (DDA)	0	0	0	0	0	0	1	1
17	Special Redesign/ change	0	2	0	0	0	0	0	0
18	Staff Attitude & Behaviour	3	4	3	9	6	2	9	9
19	Vexatious	0	1	0	0	0	0	0	0
20	Voluntary Organiser Attitude & Behaviour	0	0	0	0	0	0	0	0
21	Waiting Times	0	0	2	0	1	0	0	0
	Total	29	53	20	45	26	40	28	51

*SNBTS code their complaints' categories one to twenty-one.

The line graph below compares the total number of complaints received in each quarter for the financial years 2023/24 and 2024/25.

Graph 1: SNBTS complaints per quarter 2023/24 – 2024/25



Overall, there has been a downward trend in total complaints since last year. Key complaint categories include:

- Staff Attitude & Behavior
- Appointments
- Donor Communications
- Opportunity to Donate

There were thirteen complaints related to appointments in 2024/25, which is a decrease from twenty-seven appointment-related complaints in 2023/24. This can be attributed to the trial reintroduction of walk-in appointments in some donor centres in response to donor feedback. These have proved to be successful, and there are plans underway to roll this out further.

There is also a review underway of the customer care standards for the Scotblood website¹², aimed at further improving donor experience and communication.

¹² [Scotblood | Homepage](#)

Table 5: SNBTS staff attitude and behaviour complaints 2024/25 and 2023/24

Q1 24/25	Q1 23/24	Q2 24/25	Q2 23/24	Q3 24/25	Q3 23/24	Q4 24/25	Q4 23/24
3	4	3	9	6	2	9	9

Complaints related to staff attitude and behaviour have reduced, from twenty-four received in 2023/24, to 21 in 2024/25. In context, this represents less than 0.01% of all donor/patient attendances.

Where staff complaints have been received, they are discussed with individuals and teams where appropriate and focused feedback and training is put in place.

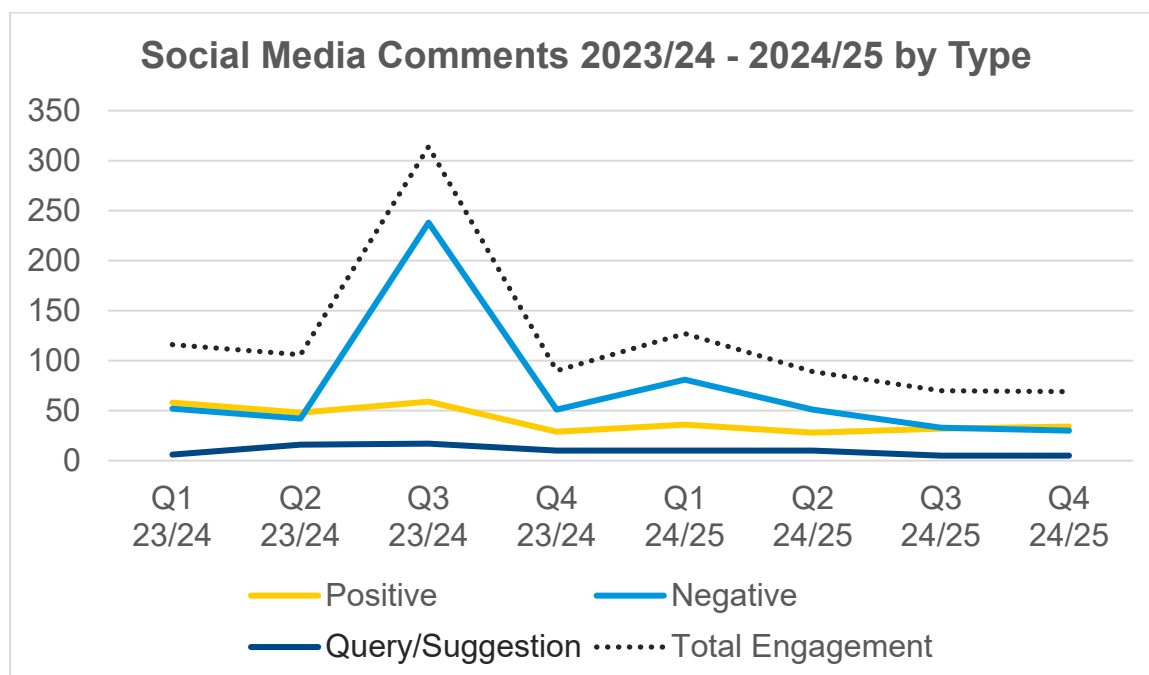
All staff need to complete customer care training when they commence employment with SNBTS. This is supported by the ongoing values and behaviours training that the Heads of Territory and Senior Nurses run with their teams. All teams have also had training in 'civility saves lives'¹³.

Table 6: SNBTS social media comments

Type of Social Media Comment	Q1 24/25	Q1 23/24	Q2 24/25	Q2 23/24	Q3 24/25	Q3 23/24	Q4 24/25	Q4 23/24
Positive	36	58	28	48	32	59	34	29
Negative	81	52	51	42	33	238	30	51
Query	8	3	5	16	2	10	4	7
Suggestion	2	3	5	0	3	7	1	3

¹³ [Home | Civility Saves Lives](#)

Graph 2: SNBTS social media comments



Social media engagement is reviewed and reported quarterly. Where appropriate, individuals are responded to directly. Although there has been an overall reduction in social media engagement since 2023/24, there is a very active donor marketing and engagement team who continuously engage with donors through social media posts, radio and tv adverts.

There is consistent positive feedback about donor staff, highlighting the level of care donors receive.

Other top themes include:

- Opportunity to donate
- Appointments
- Requests to reinstate 'walk-in' appointments, which are being addressed through the 'walk-in' trials.

9. National Procurement

In 2023, the Procurement, Commissioning and Facilities (PCF) strategic business unit (SBU) was reorganised. This SBU previously brought together the National Services Directorate (Specialist Healthcare Commissioning), National Procurement (NP), and NHSScotland Assure under a single SBU. Following the change, these three divisions became separate directorates. Despite this organisational change, there was no disruption to service delivery. Each service continued to operate as before, maintaining their existing roles and commitments to customers. The Quality Team continues to support all three directorates in managing complaints.

National Procurement received 427 complaints in 2024/25, of which 304 (71%) were related to 3rd party suppliers.

This is compared with 393 complaints in 2023/24, giving an increase of 34 complaints. Given the scale of NP's operations the volume of complaints remains proportionately low. NP handled 4,562,901 transactions in 2024/25, meaning that only 0.009% of these resulted in a complaint.

This suggests that existing contract management and escalation pathways are generally effective in resolving issues early.

New quality control measures in Logistics have contributed to a sustained reduction in complaints throughout 2024/25. Stock is assessed and given a red, amber or green status based on shelf life. Any stock with a red status is written off, whereas stock with an amber status indicates it will be approaching the end of its life, the process minimised waste by closely monitoring expiry dates, prioritising usage and redistributing stock where possible.

An improvement project is underway to further improve monitoring, engagement, and performance with 3rd party suppliers, taking a tiered, risk-based approach. The work is aimed at improving quality and should reduce the number of complaints related to 3rd party suppliers in future.

Where any trends are identified with 3rd party complaints, NP work quickly to engage with the suppliers and customers to resolve issues quickly. Close relationships are maintained with suppliers and Health Boards to trace and resolve any quality issues, whilst promoting a culture of continuous improvement.

NP regularly publicise all complaints received, holding staff briefings to share findings and promote best practice. Staff retraining is implemented as necessary, and improvement projects are initiated to reverse any wider complaint trends. For example, new printers were introduced to address labelling issues, consignment checks were reinforced to address delivery complaints, and new signage was introduced to clarify packaging practices.

NP closely monitors complaints received and, where an adverse trend is identified, will work with suppliers and relevant NHS Boards, to develop and agree a recovery, corrective action, and improvement plan. As part of any corrective and preventative action (CAPA) plan, NP will issue a product alert or recall notice to NHS boards. National Procurement's National Distribution Service accounts for most of the NP complaints.

The overall error rate is regularly reported at between 0.001% and 0.002%.

Table 7: NP complaints by cause (excluding 3rd party suppliers)

Cause	Q1	Q2	Q3	Q4	2024/25 Total
Late/Incorrect/No Delivery	10	8	13	6	37
Product Out of Date	11	4	5	6	26
Wrong/confusing/missing information	3	12	1	4	20
Other	13	8	13	6	40
Sub Total	37	32	32	22	123

Line graph 3: NP quarterly complaints by cause (excluding 3rd party suppliers)

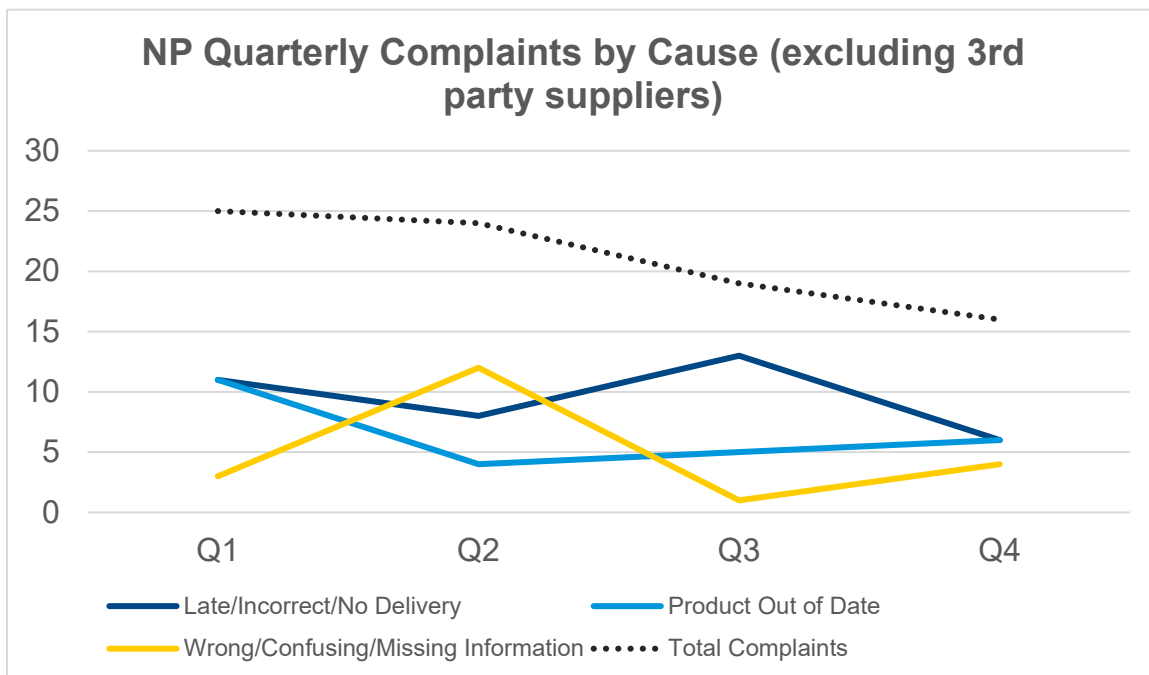
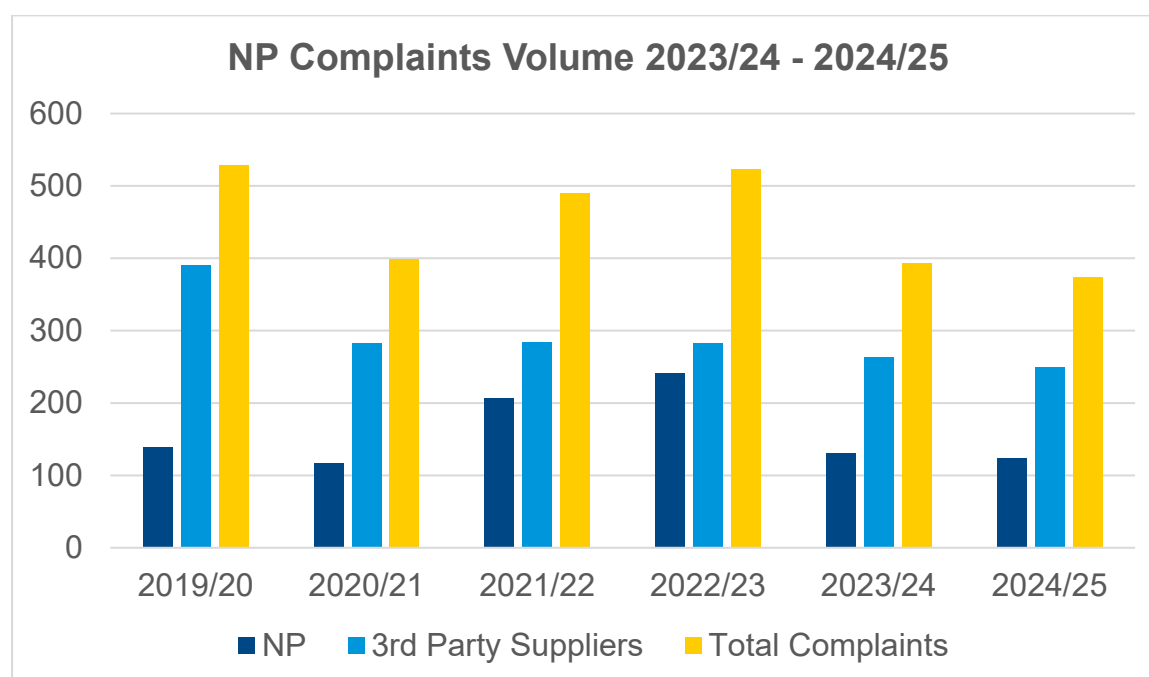


Table 8: 3rd Party supplier complaints by cause

Cause	Q1	Q2	Q3	Q4	24/25 Total
Product not performing as expected	58	49	36	52	195
Damaged Product	5	8	7	8	28
Late/Incorrect/No Delivery	10	5	6	7	28
Other	19	13	12	9	53
Sub Total	91	75	61	78	304

Chart 6: NP complaints volume 2023/24 – 2024/25



10. National Contact Centre

The National Contact Centre (NCC) delivers call centre services to the people of Scotland, supporting access to health and care services. This includes booking and rescheduling vaccination appointments, as well as providing information, guidance, and support. Information and guidance provided includes signposting to other NHS services, vaccine eligibility, locations of vaccination centres. We also offer support during calls, including talking the caller through resetting passwords to the vaccination booking portal, allowing them to then self-serve.

In the most recent reporting period, NCC received 54 complaints - a 49.5% reduction compared to 2023/24.

During 2024/25 NCC continued to deliver several services including:

- Covid/Flu Vaccination programme¹⁴
- Testing
- Warm Scottish Welcome¹⁵
- Child Health
- NECU (National Elective Coordination Unit¹⁶) support

Child Health support did not involve phone interactions, however, all other workstreams have done so.

The 54 complaints NCC received represents less than 0.0001% of call interactions (493,499 calls) across NCC, compared to 109 complaints, representing 0.0002% of call interactions (524,479 calls) during the previous year.

NCC has continued to improve its call quality review (CQR) process which was rolled out in August 2023. Calls are scored against questions covering Values, Security and Process. Across 2024/25, 2214 CQRs were completed scoring on average of 95.67%.

Through the CQR process, we identified key areas within our staff onboarding training that required renewal. An extensive review of all training materials and onboarding training sessions was completed. This was first used during the Spring 2025/26 campaign and has helped improve quality, reducing adverse events and complaints.

NCC continues to offer service users the option of a 'post call survey' at the end of all calls. Scoring from this remains excellent for the year across all areas.

Table 9: NCC complaints data

NCC	Number of complaints	Upheld	Partially upheld	Not upheld
2024/25	54	19	3	32

NCC handled a total of 54 complaints between 1 April 2024 – 31 March 2025. This total was split evenly between NCC complaints and external complaints.

¹⁴ [Winter Programme – Seasonal Flu and COVID-19 Vaccination](#)

¹⁵ [Warm Scots Welcome - Scotland's support for displaced people from Ukraine: Super Sponsor Scheme review - gov.scot](#)

¹⁶ [National Elective Coordination Unit | The national Centre](#)

Chart 7: Breakdown of NCC feedback categories

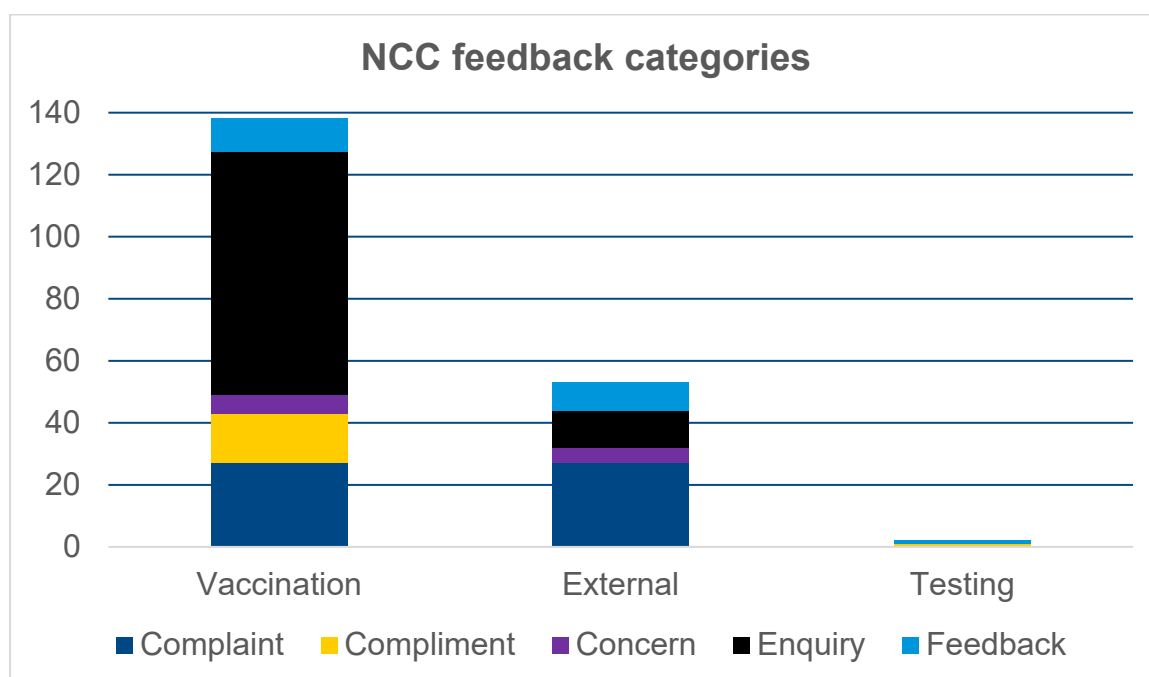


Table 10: Number of NCC complaints by theme

Complaint Themes		Vaccination	Testing	Warm Scottish Welcome	Child Health	NECU (National Elective Coordination Unit) Support
1	Professionalism – Staff Behaviour	17	0	0	0	0
2	Eligibility	2	0	0	0	0
3	Portal	2	0	0	0	0
4	No appointment communication received	3	0	0	0	0
5	Misinformation	3	0	0	0	0

Table 11: Number of NCC external complaints and organisation

Complaint Themes		NHS Lanarkshire	NHS Forth Valley	NHS GGC	NHS Tayside	NHS Fife
1	Clinic location/Clinic venue	4	0	1	0	0
2	System Error	3	0	0	0	0
3	Staff behaviours	3	0	1	1	0
4	No appointment communication	0	1	0	0	0
5	Scheduling	0	1	0	1	0
6	Eligibility	0	0	0	0	1
7	Section 47 process	0	0	0	1	0

Table 12: Number of NCC external complaints and organisation (continued)

Complaint Themes		NHS Lothian	NHS Highland	NHS Grampian	NHS A&A	PHS
1	Clinic location/Clinic venue	0	1	0	1	0
2	System Error	1	0	0	0	0
3	Staff behaviours	2	0	0	0	0
4	No appointment communication	0	0	0	0	0
5	Scheduling/No appointments	0	1	1	0	0
6	Eligibility	1	0	0	0	0
7	Section 47 process	0	0	0	0	0
8	Opt out	0	0	0	0	1

Table 13: Yearly Call comparison split between NCC workstreams

Helplines	2022/23	2023/24	2024/25
Vaccination	910k	509k	448k
Covid Status	267k	15k	0
Contact Tracing	37k	0	0
Testing	2k	8k	5k
Warm Scottish Welcome	5k	176	82
NECU	0	0	2.5k
Outbound across NCC	305k	100k	67.5k
Total Call Interactions	1,527k	632k	523k

11. Human Resources (HR)

Human Resources provide a range of shared corporate services to Public Health Scotland¹⁷ and Occupational Health Services to NHS Healthcare Improvement Scotland (HIS)¹⁸, the Scottish Ambulance Service (SAS)¹⁹ and NHS Education for Scotland (NES)²⁰.

Over the course of the year HR received one complaint, compared with five in 2023/24. The complaint related to a delayed response to ServiceNow calls and was closed within five working days. This led to an investigation to determine the cause of the delay and provisions were put in place to prevent recurrence.

The reduction in complaints since 2023/24 can be attributed to the continuous review that is undertaken of HR services and a focus on utilising feedback for improvement.

12. Digital and Security (DaS)

Digital and Security (DaS) provides a range of external digital shared services to NHS Boards across Scotland. These include desktop IT, networking, web hosting, and information security. In addition, DaS delivers management services and continuous quality improvement for major national digital systems and programmes.

¹⁷ [Public Health Scotland](#)

¹⁸ [Healthcare Improvement Scotland](#)

¹⁹ [Scottish Ambulance Service](#)

²⁰ [NHS Education for Scotland | NES](#)

Complaints and Feedback

During this reporting period, DaS received zero complaints and zero compliments. Due to the nature of the DaS service provision, there are multiple established routes for raising and resolving issues before they escalate to complaints. This also applies to compliments and feedback, which is often addressed through informal channels, resulting in minimal complaints or compliments being received.

Service Improvement and Assurance

DaS are committed to continuous improvement. Over the past year, DaS has initiated a transformation programme focused on the totality of its operating model. This multi-year initiative aims to enhance how we work across all dimensions of service delivery and support. As the programme progresses, it will continue to strengthen our assurance, governance, and feedback mechanisms, ensuring they remain robust, responsive, and aligned with evolving organisational needs.

13. Finance, Corporate Governance and Legal Services (FCGLS)

The Finance, Corporate Governance and Legal Services Directorate (FCGLS) brought together the previous Financial Services and Corporate Governance Departments, along with the Central Legal Office (CLO) and Counter Fraud Service (CFS).

Finance delivers a broad range of financial services such as financial support to Directorates, transaction processing and Payroll to NSS and other NHSScotland Boards through shared services arrangements. The CLO provide a national shared legal service to NHSScotland and the wider public sector across all relevant areas of Scottish and UK legislation. Each area has its own lead for co-ordinating the handling of complaints and the results for each area are reviewed on a quarterly basis.

The FCGLS Directorate experienced a modest increase in complaints in 2024/25 compared to previous years, with a total of 18 complaints received. CLO saw a rise in complaints, particularly in Quarter 4, attributed mainly to parties involved in claims/liasing with CLO lodging complaints due to not fully understanding legal processes.

Patients or relatives of patients who have raised a claim against Health Boards may not have legal representation during the process of such claim. Due to lack of knowledge of legal procedures and timescales, they may raise complaints against the legal staff that represent the Health Boards. The responses to these complaints provide information in relation to the legal processes followed.

Table 14: Number of complaints received within FCGLS by status 2023/24.

Finance	Number of complaints	Upheld	Partially upheld	Not upheld
2024/25	18	0	3	10

Table 15: Total number of quarterly complaints received by service

Quarter	CLO	Finance	CF	CFS
Q1	1	2	2	0
Q2	1	1	0	0
Q3	2	1	0	0
Q4	6	0	2	0

Table 16: Number of complaints received by quarter and status

Quarter	Complaints	Upheld	Partially upheld	Not upheld
Q1	5	0	3	2
Q2	2	0	2	0
Q3	3	0	3	0
Q4	8	0	7	1

14. Contractor Finance and Counter Fraud Services (CF and CFS)

Counter Fraud Services (CFS) is a specialist reporting agency working in partnership with the NHS in Scotland to prevent, detect and investigate fraud, bribery and corruption in NHS Scotland.

They provide a full service to all NHSScotland Health Boards, through a centrally based, professionally qualified team of specialists, dedicated to counter fraud work. CFS are determined to combat fraud wherever it arises and aim to ensure, as far as possible, that healthcare funding is used for legitimate patient care. They are also responsible for checking patient exemptions in respect of NHS Scotland patient charges and collecting payments for incorrectly claimed exemptions.

Contractor Finance (CF) provides payment, reporting, and payment verification services to all Health Boards. Contractor finance reimburses various primary care practitioners/contractors for the services they provide and these practitioner payments totalling approximately £3.5bn are made by NSS and recorded in the NHS Boards' financial statements through NHS Board Reporting which is performed monthly for each NHS Board for whom we make payments on behalf. Contractor Finance acts on behalf of NHS Boards when making payments to Primary Care Contractors and there are four contractor groups which NSS provide payments to for their services to NHSScotland:

- General Medical Services (GMS)
- General Pharmaceutical Services (GPS)
- General Dental Services (GDS)
- General Ophthalmic Services (GOS)

Additional responsibility includes the management of patient compensation schemes, such as the Scottish Infected Blood Support Scheme (SIBSS).

CF and CFS received 4 complaints in 2024/25. This is a reduction of 71% when compared to the 14 complaints received in 2023/24.

All four complaints relate to the Contractor Finance service, three of which were partially upheld and one fully upheld. Issues ranged from missing COVID-19 top-up payments and unresolved General Dental Practice Allowance (GDPA) calculations to delayed maternity leave payments and dissatisfaction with refund handling. In each case, apologies were issued for poor communication and delays. Investigations confirmed payment correctness or identified missing payments, which were subsequently processed. Additionally, a 'lessons learned' session was held with staff, to ensure prompt responses to any communication in future.

15. National Services Directorate (NSD)

National Services Directorate (NSD) currently commission more than 60 national designated specialist services on behalf of Scottish Government and NHSScotland Health Boards.

Specialist and highly specialist healthcare services treat patients living with a rare condition or who have specialist needs. These services are therefore not available in every hospital because they can only be delivered by teams of doctors, nurses and other health professionals who have the necessary training, skills and experience. However rare the condition, we strive to create fair and effective care pathways that offer the best support to patients.

NSD received 6 complaints in 2024/25, which is a slight reduction on the 8 complaints received in 2023/24.

There was a recurring issue with travelling reimbursements in Quarter 1 and Quarter 2 which caused an increase in complaints. Remedial actions were put in place to resolve this, including full reviews and partial reimbursements.

Table 17: Number of complaints received by status

NSD	Number of complaints	Upheld	Partially upheld	Not upheld
2024/25	6	3	2	1

16. Practitioner Services (PSD)

Practitioner Services (PSD) supports the delivery of better care by providing essential services to primary care practitioners across Scotland, including GPs, dentists, opticians, and community pharmacies. Key functions include:

- Supporting dispensing contractors in delivering care.
- Ensuring clinical governance across Scotland's community dental services.
- Operating a high-volume scanning service, processing approximately 6 million paper prescriptions per month. This scanning function initiates a complex pharmacy payment process, ensuring accurate reimbursement to community pharmacies, dispensing doctors, and appliance suppliers.
- Managing patient registration and medical records transfer.

While complaint volumes remain low, a number of concerns were raised regarding delays in retrieving medical records. In response, PSD reviewed and enhanced its processes. A standardised approach has now been implemented across all sites and operators, featuring improved logging and auditability to reduce the risk of future complaints.

Table 18: Number of complaints received by status

PSD	Number of complaints	Upheld	Partially upheld	Not upheld

2024/25	7	3	0	4
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Chart 8: Number of complaints received by quarter

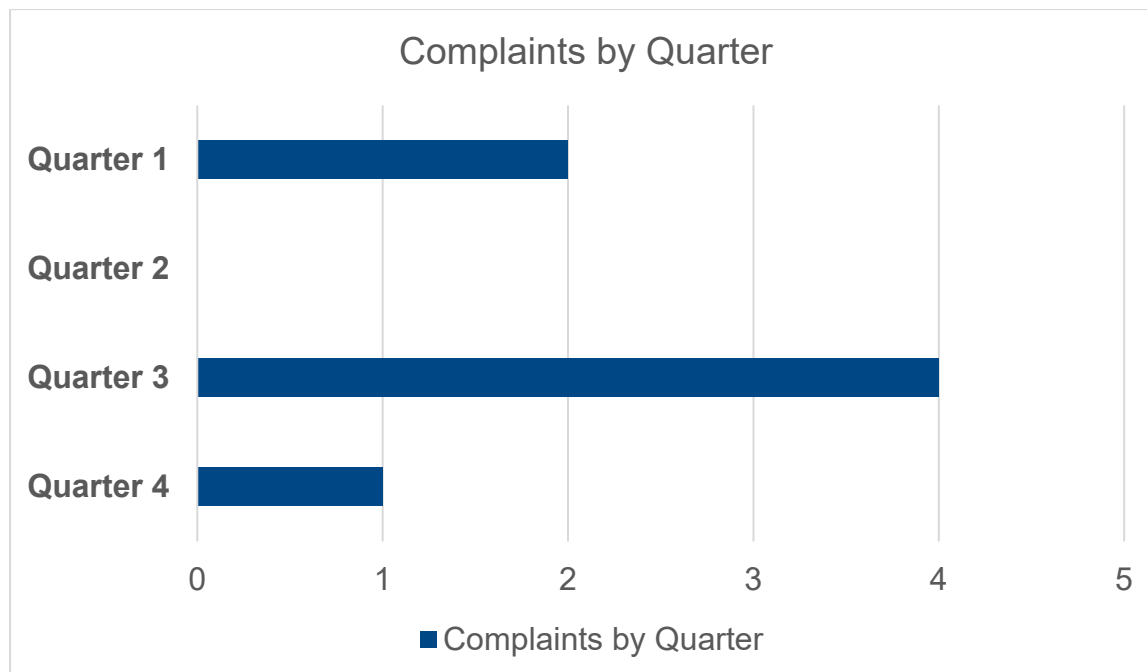
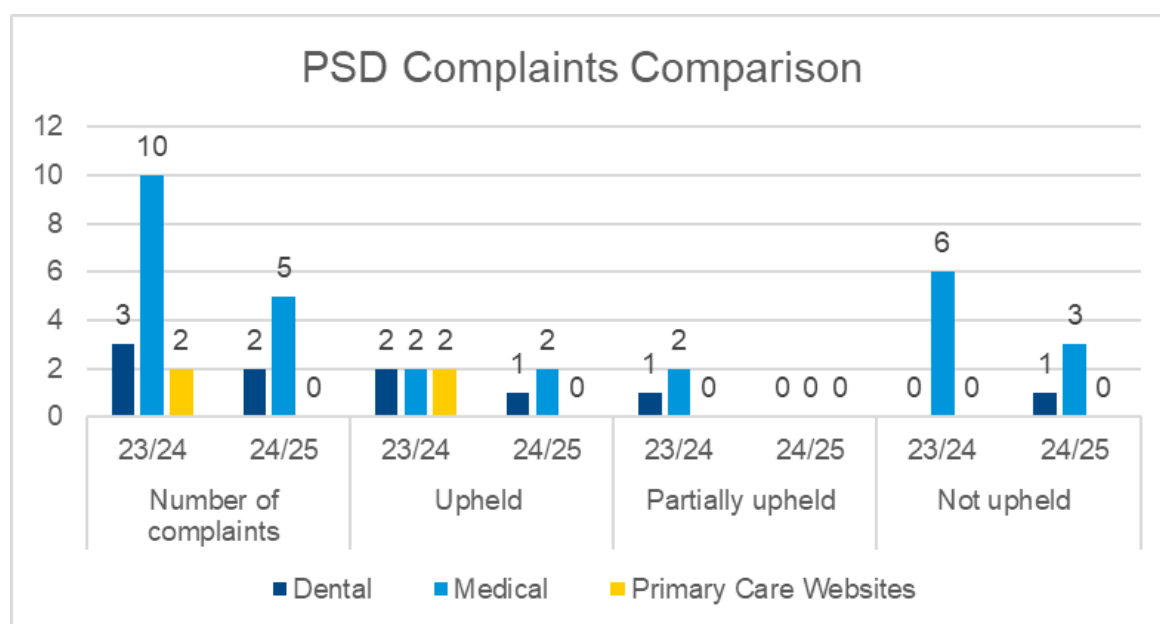


Table 19: Complaints comparison with 2023/24

Service area	Number of complaints		Upheld		Partially upheld		Not upheld	
	23/24	24/25	23/24	24/25	23/24	24/25	23/24	24/25
Dental	3	2	2	1	1	0	0	1
Medical	10	5	2	2	2	0	6	3
Primary Care Websites	2	0	2	0	0	0	0	0
Total	15	7	6	3	3	0	6	4

PSD received 7 complaints in 2024/25. This is a reduction of 53% when compared to the 15 complaints received in 2023/24.

Chart 9: Complaints status by service area



17. NHSScotland Assure (NHSSA)

NHSScotland Assure is responsible for several services and consists of:

- Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland
- Assurance Services
- Climate Change and Sustainability
- Engineering
- Facilities Management
- Property and Capital Planning
- Research and Intelligence

No complaints were registered against NHSSA during 2024/2025.

18. User Feedback Driven Improvement

18.1 Good practice

Understanding the views and experiences of our service users continues to be a powerful way to ensure that our services are fit for purpose and deliver value added benefit for the people of Scotland. To welcome and respond to feedback and complaints ensures that our service users feel valued.

To continue our commitment to the Customer Engagement Index (CEI) survey and the Model Complaints Handling Procedure (MCHP) all directorates of NSS feature in the quarterly reports and agreed improvement plans are adopted and implemented as part of the quality improvement service model.

18.2 Improvement

Valuing all feedback, both positive and negative is a key driver in developing service plans and informing quality improvement activities.

To improve the quality of the feedback we receive from our service user surveys, some of our directorates continuously collect feedback throughout the year following the delivery of specific services. These services include Digital and Security (DaS), Human Resources (HR), and Finance.

All directorates record complaints using the Service Now platform. This allows us to monitor complaints activity across the organisation. Training on the online portal has been provided to complaint leads across the organisation.

Real-time monitoring and reporting of complaints will not be possible for all our services as some directorates are not able to record and update the system in real time. This is due to the nature of the service and a lack of access to the online tool or secure internet connection in some locations where they interact with service users. For example, if a complaint were to occur in a mobile blood donation unit in a remote location the complaint could not be logged in the moment if there is no secure internet access.

NSS directorate and service complaint leads meet monthly to discuss good practice, share learning, and are provided with tools, guidance, and templates to ensure that there is a consistent approach across NSS. The meetings provide the leads with an opportunity to network and creates a community of interest for those leading on complaints reporting for their area.

User feedback is a central component of our Quality Management Framework. We are committed to continually improving how we ask, listen to and act on the feedback received. Complaints, compliments, and Customer Experience Insight (CEI) data are routinely analysed alongside operational performance, with findings reported to directorate leadership teams and the Executive Management Team. This integrated approach has supported targeted service improvements, including updated communication methods at the National Contact Centre and enhanced donor experience initiatives by SNBTS.

A number of cross-cutting themes emerged during 2024/25, including the importance of clear public communication, the need for timely follow-up on external dependencies (e.g., courier services), and the value of user trust in shaping service reputation. These insights have informed directorate-level planning and reinforce NSS's commitment to continuous quality improvement across all services.

18.3 Accountability and Governance

The executive lead for feedback and complaints is the Director of Strategy, Performance and Service Transformation. Complaints are reviewed at multiple levels:

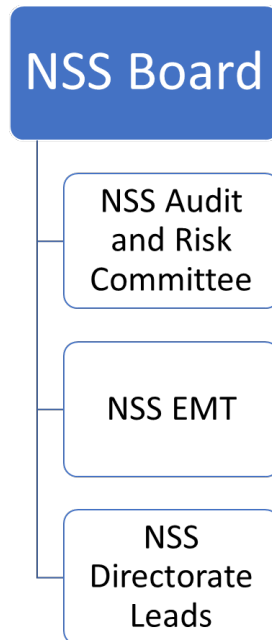
- Directorate level
- Executive Management Team
- Audit and Risk Committee
- Staff Governance Committee
- Clinical Governance Committee (for clinical complaints)

All NSS complaints are first reviewed within the directorates. Complaints performance is then reviewed at Executive Management Team meetings and the complaints reports are scrutinised at the Audit and Risk Committee.

Staff related complaints are integrated into the People Report presented to our Staff Governance Committee. The EMT receive the performance figures against the NHS Model Complaints Handling Procedure Key Performance Indicators. The Audit and Risk Committee receives the annual report.

Those relating to clinical services or the professional behaviour/practice of NSS clinical staff are reviewed by the Clinical directorate team. The Clinical Governance Committee (CGC) review clinical complaints.

Hierarchy of governance arrangements for feedback and complaints reporting



18. Appendices

Appendix one: Our Services

Our Services Information

We provide services and advice to the NHS and wider public sector.

This section outlines the scope of NSS's operational services, each of which is responsible for capturing, managing, and acting upon user feedback in accordance with the Model Complaints Handling Procedure.

Since its inception, NSS has provided a wide range of national services that ensure Health Boards and other health, and care partners can deliver their services with confidence.

Digital and security

Our expertise includes delivery and management of national digital platforms, supporting services and cyber security. Our innovative and person-centred scalable technology is delivered through local and national digital solutions, providing clinical informatics and information security and governance.

National Contact Centre

We provide call centre services to the people of Scotland. This includes appointment booking and rescheduling and providing advice, support and guidance to support them with access to health and care services.

Primary care support

We support general practitioners, dentists, opticians, community pharmacies and dispensing contractors to deliver primary care across Scotland. This includes managing contractor payments, maintaining an up-to-date patient registration database, medical record transfers and clinical governance for dental services.

Specialist healthcare commissioning

We commission a range of specialist and rare condition treatments supporting NHSScotland to ensure equitable and affordable access to these services when needed. We also commission a range of screening programmes.

Population screening

From April 2024, a new team brought together the different national screening functions delivered by NSS. They are responsible for oversight, quality assurance and coordination at the national level of the six population screening programmes.

Legal

We provide specialist legal advice and assistance in most areas of law relevant to

the public sector. With a wide range of experience, the Central Legal Office (CLO) provides clients with a comprehensive legal service. We have close links to Scottish Government and its legal service and counsel clients on a wide range of policy issues.

Programme management

We act as a national delivery provider and work with our partners to offer total solutions in portfolio, programme, project management and transformation services. By equipping our clients with the right people and approaches, we can support the delivery of complex and challenging change programmes.

National procurement

We provide procurement services to NHSScotland. We work collaboratively to provide best quality, fit for purpose and best value commercial solutions – weighing up cost, added value and sustainability. Our expert logistics services include distribution, supply chain, warehouse operations and fleet management. We also provide national eProcurement solutions.

Fraud prevention

We work in partnership with NHSScotland and across the Scottish public sector to provide a comprehensive service to reduce the risk of fraud and corruption. We are responsible for checking patient exemptions in respect of NHSScotland patient charges and collecting payments for incorrectly claimed exemptions.

Blood, tissues and cells

The Scottish National Blood Transfusion Service (SNBTS) provides blood, tissues and cells to NHSScotland, ensuring they are available 24 hours a day, every day of the year. We also provide specialist treatment and therapeutic solutions, specialist testing and diagnostic services appropriate for Scottish patient needs.

Corporate services

We provide corporate services to other health boards in vital areas such as finance, HR, digital, facilities, procurement, and business support. This includes managing payroll for eight NHSScotland boards and delivering a full corporate shared services solution for Public Health Scotland.

NHSScotland Assure

We deliver a co-ordinated approach to the improvement of risk management and quality in the healthcare environment across NHSScotland. We encompass services provided by Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland and Health Facilities Scotland (HFS). Our goal is to promote excellence, protect patients from the risk of infection and support better health outcomes for all.

The wide range of services outlined above leads to variability in the types, volumes and channels of feedback received, all of which are reflected in the directorate summaries presented later in the report.

For more information about our services, visit our website at www.nss.nhs.scot

Appendix two: Table 1: Examples of Compliments received 2024/25

Includes quotes from service users across SNBTS, NP, HR, CLO, NSD and NHSSA. These are the words of those providing the compliments and are verbatim.

Directorate	Compliments
SNBTS	Inverness: "I just wanted to pass on my thanks to all of the team for being so nice, despite everyone having had a long day. The process of donating was simple, friendly and the atmosphere was calm and professional. ... Overall, thanks to the team for all the hard work and I look forward to donating again!!" (Donor)
National Procurement (NP)	"I just wanted to take this opportunity to thank everyone at NDS for all their help and support over the past year. It has been a particularly difficult one for me on a personal level but each and every one of you offered help and support throughout the year. I couldn't do my job without your help which is always given in a friendly and professional manner, so thank you all." (NHS Health Board staff member)
Human Resources (HR)	"(HR staff member) was brilliant and really supportive - understood what the issue was and worked quickly to get it resolved - making sure there was ongoing support until the issue was closed off. Many thanks - really appreciated." (Public Health Scotland staff member)
FCGLS CLO	"I am extremely satisfied with the Central Legal Office's (Commercial Property) service and advice. The team consistently provides high-quality legal support, combining professionalism with a friendly, approachable manner. It is always easy to work with them, as they are responsive and clear in their communication, ensuring a smooth and efficient process." (NHS Fife)
SNBTS	Ayrshire: "I donated blood in Beith and just wanted to say what a lovely experience it was. The chap at the door was

	so friendly and professional, and the woman who took my blood was amazing - there is barely a mark! ... Such a lovely encounter and a lovely team!" (Donor)
Human Resources (HR)	"Answer to my query was quick, but more importantly - precise. It gave complete clarity on what I was previously unsure of."
National Procurement (NP)	"The communication from (NP staff member) from customer service to the warehouse team picking the goods and also the delivery aspect of delivering x4 wagons double amount of cages to site was very impressive and appreciated by all, especially during this busy period. I would like to thank everyone involved for going the extra mile and I have linked in with our System team to highlight the impact to our teams and NDS teams." (NHS Greater Glasgow and Clyde staff member)
National Services Division (NSD)	"I just wanted to say a very BIG thank you for all your support and guidance over the past several weeks to get everything ready and in place for the audits and coming away with great outcomes from both. With all the recent unexpected vacancies in management within the inventory department it would have been extremely difficult(Impossible) to have achieved what we needed on all the new processes and changes in forms without all of you going above and beyond and I'm so grateful for all your help." (National Procurement Inventory Supervisor)
FCGLS CLO	"Throughout the years I have dealt with a number of CLO staff. I have always found them to be approachable, hardworking, diligent, helpful, informative and knowledgeable. I have frequently recommended and encouraged others the use of the CLO services." (NHS 24)
NHS Scotland Assure (NHSSA)	"Many thanks for the excellent course which you gave us....

	<p>This was a very helpful reminder and a useful update.</p> <p>It was lovely to meet with you and the rest of the team face to face for this important core CPD event.” (Course participant)</p>
FCGLS CLO	<p>“CLO has worked closely with me and other board colleagues, this has been wide reaching has included supporting attending court. Advice is clear and concise and they have taken the time to enhance and ensure understanding. CLO colleagues have also developed education sessions for colleagues to support career development and understanding of the legal process.” (NHS Ayrshire & Arran)</p>
NHS Scotland Assure (NHSSA)	<p>“Thanks for everyone’s time and attention to try to resolve this issue for us.</p> <p>Thanks so much for this. Greatly appreciated.” (NHS Greater Glasgow and Clyde)</p>

Appendix three: Customer Engagement Index Scores

A customer engagement score is a quantitative measure used to assess the level of interaction, involvement, and satisfaction of individual customers with our brand, products, and services. The following summarises Customer Engagement Index scores for directorates that completed surveys in 2024/25.

Table one: Counter Fraud Services (CFS) Customer Engagement Index results

CEI measure	CEI score
Customer Satisfaction	74%
Net Promoter Score	20%
Customer Effort Score	64%

Table two: FCGLS (Central Legal Office) Customer Engagement Index Results

CEI measure	CEI score
Customer Satisfaction	98%
Net Promoter Score	82%
Customer Effort Score	98%

Table three: FCGLS (Finance) Customer Engagement Index Results

CEI measure	CEI score
Customer Satisfaction	89%
Net Promoter Score	68%

Customer Effort Score	88%
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Table four: National Contact Centre (NCC) Customer Engagement Index Results

CEI measure	CEI score
Satisfaction of Service	93%
Satisfaction with Staff	96%
Recommend Service	94%

Table five: Human Resources Customer Engagement Index Results

CEI measure	CEI score
Customer Satisfaction	88%
Net Promoter Score	62%
Customer Effort Score	85%

Appendix four: Scottish Government performance indicator form. NSS submission 2024/25

NSS's submission to the Scottish Government for 2024 to 2025.

Performance Indicator Four:

4. Summary of total number of complaints received in the reporting year

4a. Number of complaints received by the NHS territorial board or NHS special board Complaints and Feedback team	624
4b. Number of complaints received by NHS Primary Care service contractors (<i>territorial boards only</i>)	n/a
4c. Total number of complaints received in the NHS Board area	624

NHS Board – sub-groups of complaints received

NHS Board managed Primary Care services:	
4d. General Practitioner	n/a
4e. Dental	n/a
4f. Ophthalmic	n/a
4g. Pharmacy	n/a
Independent Contractors - Primary Care services:	
4h. General Practitioner	n/a
4i. Dental	n/a
4j. Ophthalmic	n/a
4k. Pharmacy	n/a
4l. Total of Primary Care Services complaints	n/a
4m. Total of prisoner complaints received (<i>Boards with prisons in their area only</i>) Note: Do not count complaints which are unable to be concluded due to liberation of prisoner / loss of contact.	n/a

Performance Indicator Five

5. The total number of complaints closed by NHS Boards in the reporting year (*do not include contractor data, withdrawn cases or cases where consent not received*).

Number of complaints closed by the NHS Board	Number	As a % of all NHS Board complaints closed (not contractors)
5a. Stage one	160	45.85%

5b. Stage two – non escalated	183	52.43%
5c. Stage two – escalated	6	1.72%
5e. Total complaints closed by NHS Board	349	100%

6. Complaints upheld, partially upheld, and not upheld

Stage one complaints

	Number	As a % of all complaints closed by NHS Board at stage one
6a. Number of complaints upheld at stage one	83	51.87%
6b. Number of complaints not upheld at stage one	60	37.5%
6c. Number of complaints partially upheld at stage one	17	10.63%
6e. Total stage one complaints outcomes	160	100%

Stage two complaints

Non-escalated complaints	Number	As a % of all complaints closed by NHS Boards at stage two
6f. Number of non-escalated complaints upheld at stage two	96	50.79%
6g. Number of non-escalated complaints not upheld at stage two	47	24.87%
6h. Number of non-escalated complaints partially upheld at stage two	40	21.16%
6j. Total stage two, non-escalated complaints outcomes	183	96.83%

Stage two escalated complaints

Escalated complaints	Number	As a % of all escalated complaints closed by NHS boards at stage two
6k. Number of escalated complaints upheld at stage two	1	16.67%
6l. Number of escalated complaints not upheld at stage two	4	66.67%
6m. Number of escalated complaints partially upheld at stage two	1	16.67%
6o. Total stage two escalated complaints outcomes	6	100%

Performance Indicator Eight

8. Complaints closed in full within the timescales

This indicator measures complaints closed within five working days at stage one and 20 working days at stage two.

	Number	As a % of complaints closed by NHS boards at each stage
8a. Number of complaints closed at stage one within five working days.	160	100%
8b. Number of non-escalated complaints closed at stage two within 20 working days		
8c. Number of escalated complaints closed at stage two within 20 working days		
8d. Total number of complaints closed within timescales	160	100%

Performance Indicator Nine

9. Number of cases where an extension is authorised

This indicator measures the number of complaints not closed within the Complaints Handling Procedure (CHP) timescale, where an extension was authorised.*

	Number	As a % of complaints closed by NHS boards at each stage
9a. Number of complaints closed at stage one where extension was authorised	0	0 %
9b. Number of complaints closed at stage two where extension was authorised (this includes both escalated and non-escalated complaints)	0	0 %
9c. Total number of extensions authorised	0	0%

***Note:** The SPSO confirm that there is no prescriptive approach about who exactly should authorise an extension – only that the organisation takes a proportionate approach to determining an appropriate senior person – and this is something that NHS Boards should develop a process for internally. This indicator aims to manage the risk of cases being extended beyond the CHP timescale without any senior officer approval.