SPSO decision report



Case:	201200873, A Medical Practice in the Lothian NHS Board area
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	some upheld, no recommendations

Summary

Mrs C's late sister (Mrs A) suffered from dementia and lived in sheltered housing. Mrs C held welfare power of attorney for her. When Mrs A first joined the medical practice, she was on regular medications for a number of conditions, including dementia, and was under the care of her GP and a community psychiatric nurse. She was prescribed an antidepressant and medication for her dementia. Care staff, however, became increasingly concerned about her challenging behaviour. After visiting Mrs A in response to a phone call from care staff , her GP prescribed diazepam on an 'as required' basis. Several days later, Mrs C contacted the GP expressing concern about the prescription and the fact that the GP had not consulted Mrs C about it, given that she held welfare power of attorney for her sister. Mrs C also believed that the GP prescribed the diazepam on the basis of a phone call with staff, and did not see Mrs A in person. Mrs C said that during a meeting with the community psychiatric nurse the day before the prescription, they had agreed to continue to monitor Mrs A's progress on the antidepressant.

Mrs C complained that care staff may be trained to administer medication, but they are not qualified to make medical decisions about when the medication is required and that the practice failed to ensure there was an appropriate system for administering the drugs. Mrs C said that within days of Mrs A moving to another practice, the GP said she needed a full assessment and admitted her to hospital where her medication was reduced and where she stayed for three months before moving to a nursing home.

Several days after the prescription of diazepam, Mrs C phoned the GP to discuss her concerns. She followed this up by letter. She did not hear from the practice and approached the health board with a complaint three weeks later. The health board forwarded her written complaint to the practice who responded in writing two weeks later. Mrs C was unhappy with the practice's complaints handling.

After taking independent advice from one of our medical advisers, we upheld only two of Mrs C's six complaints. We found that the prescription of diazepam was reasonable in relation to both the prescription and the system to administer the drugs. We also found that the GP's assessment of Mrs A's medication and care needs was reasonable. However, we found that the GP's communication with Mrs C was unreasonable, given that under the Adults with Incapacity (Scotland) Act 2000 Mrs C should have been consulted about the prescription of diazepam, and that there were shortcomings in the way the practice dealt with her complaint. As result of Mrs C's complaint, the GP and the practice took action that we considered appropriate, therefore, we did not find it necessary to make recommendations.