SPSO decision report



Case:	201508198, Grampian NHS Board
Sector:	health
Subject:	appointments / admissions (delay / cancellation / waiting lists)
Outcome:	some upheld, recommendations

Summary

Mr C complained about the board's management of healthcare appointments for his child, who suffers from allergies and diabetes. In particular, Mr C was concerned that the board cancelled an out-of-area appointment for a joint allergy and gastroenterology clinic, on the basis that equivalent local services were available. However, the board did not provide a gastroenterology appointment until about six months later.

The board acknowledged that some of the appointments were outwith the

12-week waiting time target for new out-patient appointments, including a clinical genetics appointment (delayed due to a missed referral), an allergy appointment (provided out-of-area as the child's GP had requested this), and a gastroenterology appointment (which took longer to arrange as it was a joint appointment with gastroenterology and the head of the local allergy service, and was further delayed by a consultant gastroenterologist leaving the board).

After taking independent medical advice, we found that it was reasonable for the board to take the position that an out-of-area referral for allergy and gastroenterology was not required, as there were equivalent services available within Scotland. We found that the delay in the clinical genetics appointment was unreasonable, and while the board had already acknowledged this and addressed the problem, we considered they should also apologise to Mr C. However, we were not critical of the timeframes for the gastroenterology and allergy appointments. While we acknowledged these were outwith the 12-week target, we noted that the target is for 95 percent of cases to meet these timeframes, and in this case we considered the timeframes were reasonable in view of the specific circumstances.

Mr C also said the board gave inaccurate information in their complaint response about what kind of support it was agreed at a clinical meeting the health visitor should provide. We found there were conflicting accounts about exactly what was said at the meeting, but the board's description of this was consistent with the health visitor's role and in keeping with the support actually provided, and we therefore did not uphold this aspect of Mr C's complaint.

Recommendations

We recommended that the board:

• apologise to Mr C for failing to meet the waiting time target for his child's clinical genetics appointment.