

SPSO decision report

Case: 201703659, Lanarkshire NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Decision: upheld, recommendations

Summary

Mr C, a solicitor, complained on behalf of his client (Ms B) regarding the way the board managed her daughter's (Ms A) transition from paediatric services to adult services. In particular, Ms B was concerned about the co-ordination of Ms A's care and her ability to access services when she needed to.

We took independent advice from a consultant paediatrician. While we found evidence of good practice in relation to a number of areas of transition care, we found little evidence of co-ordinated planning to support transition. In particular, we considered that a healthcare professional responsible for managing and co-ordinating transition should have been identified, as indicated by the board's transition guidance. We further noted that the board's guidance did not appear to have been reviewed in line with the planned timescales for review. We found that the board had appropriately met with Ms A's family and listened to their concerns, however, there was also evidence that the board and Ms A's GP had differing views on who was leading clinically. On balance, we upheld Mr C's complaint.

Recommendations

What we asked the organisation to do in this case:

- Apologise to Ms A and Ms B for the lack of coordination and support from a lead healthcare professional during the transition from paediatric services to adult services. The apology should meet the standards set out in the SPSO guidelines on apology available at www.spsso.org.uk/leaflets-and-guidance.

What we said should change to put things right in future:

- Clinical teams within paediatric and adult services should have structured discussion to contribute to the planning of patients' transitions and this should be documented.
- There should be guidance in place detailing a clear pathway for transition from children's to adult services for practitioners to use to guide transition management.
- Patients with complex health needs, their family members and carers should be properly informed about who is responsible for coordinating their care at different stages of transition.