

## SPSO decision report

**Case:** 202106214, Glasgow City Health and Social Care Partnership  
**Sector:** Health and Social Care  
**Subject:** Community Mental health services  
**Decision:** upheld, recommendations

### Summary

C, an adult with autism, was receiving treatment from the Partnership as a new patient after moving into the area and was unhappy with their psychiatrist. C felt that the Partnership did not have appropriate staff who specialised in treating adults with autism.

C complained that the psychiatrist questioned the diagnoses and treatment plan already in place, that the psychiatrist told them that the treatment plan was wrong, that they asked questions in an unstructured way and made unreasonable remarks about C's personal life. Further, during an online consultation the psychiatrist allowed a second person to be present without having made C aware this would happen and ignored their request for an adjustment to have a doctor of the same gender as them. C also complained that the Partnership accused them of being misogynistic by asking for a same-gender doctor.

The Partnership said that the psychiatrist did agree to provide the prescription C was seeking as C was very fixed on the recommendations made by their previous psychiatrist. The Partnership also said that C was derogatory towards the psychiatrist due to their gender and questioned their ability.

We took independent advice from an adult consultant psychiatrist. We found that the evidence showed that the Partnership provided elements of good care and treatment to C. However, their response to C's request for a same-gendered doctor was unreasonable, the consultation deviated significantly from recognised good medical practice and it was unreasonable to have an additional person present without C having been told or asked for consent beforehand. In addition, we found that there was no evidence that would support the Partnership's position that C was derogatory towards the psychiatrist due to their gender, and there was no evidence to suggest C was significantly hostile. Therefore, the Partnership's assertions about C's manner were unreasonable. As such, we upheld C's complaints.

### Recommendations

What we asked the organisation to do in this case:

- Apologise to C for the failings identified in this complaint. The apology should meet the standards set out in the SPSO guidelines on apology available at [www.spsso.org.uk/information-leaflets](http://www.spsso.org.uk/information-leaflets).

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

- Complaints should be investigated in line with the Model NHS Complaints Handling Procedure. Particularly they should identify and clarify all points to be investigated at the outset of the investigation, address all of the points raised and be person-centred and non-confrontational.
- New patients should receive initial appointments with clinicians that are conducted reasonably and in line with good practice. Particularly these should ensure questioning and summarisation of clinical information is structured, appreciate the importance of establishing a therapeutic relationship between the clinician

and new patient and establish the patient's expectations from the outset.

- Observations and opinions on a patient's manner and motivations should be fair, accurate, and evidenced in so far as possible.
- When student or trainee clinicians sit in on appointments for training, the Partnership should introduce the person and explain why they are there, where possible, the patient should be informed in advance of the appointment and the patient's consent should be sought. When a patient does not consent to a trainee/student being present they should leave the appointment.

We have asked the organisation to provide us with evidence that they have implemented the recommendations we have made on this case by the deadline we set.