

## SPSO decision report



**Case:** 202402498, Grampian NHS Board  
**Sector:** Health  
**Subject:** Appointments / Admissions (delay / cancellation / waiting lists)  
**Decision:** upheld, recommendations

### Summary

C complained that the board failed to carry out their sibling (A)'s hip replacement surgery within a reasonable time. C said that A had made no progress with their surgery since their pre-assessment appointment.

We took independent advice from a consultant orthopaedic surgeon (specialist in the treatment of diseases and injuries of the musculoskeletal system). We found that A's surgery was Category 2 (urgent) which meant it should have been carried out within 90 days. Given A's significant mobility issues and difficulties with day-to-day living, it was unreasonable to leave their case for more than 90 days. We were concerned that A waited 15 months for their surgery and that the surgery only took place after intervention from this office.

Although the board apologised for the delay in A's surgery, we found that the reasons given were unreasonable. The board had a contract with another health board to provide the type of surgery A required during the time period under consideration and as A met the criteria for acceptance, it was unreasonable that the board did not explore this avenue of care. We noted that the board could also have explored an out of area and exceptional referral for A to another health board and considered the use of non-NHS providers who specialised in filling gaps where there were staffing issues due to staff absences.

We upheld C's complaint.

### Recommendations

What we asked the organisation to do in this case:

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

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

- The board should put in place a short/medium term solution, in the form of a recovery plan, to prevent this failing from happening to other patients, whether that be three session day operating or six day a week operating, potentially supplemented by other providers if the staffing issues persisted. [In response to a draft copy of this decision notice that was issued to both parties, the board provided some evidence of action they have already taken in relation to this matter.]
- In cases such as this, the board should explore alternative pathways to manage urgent cases in a timely manner.

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.