

Case: 201000645, Grampian NHS Board
Sector: health
Subject: admission, discharge and transfer procedures
Outcome: some upheld, recommendations

Summary

Mr C was unhappy about the suspension of his psychological therapy. He complained that the suspension took place on the basis of a tentative change of diagnosis which was later discounted. The advice from our medical adviser suggested that the suspension of treatment was premature, and we upheld the complaint.

Mr C also complained of a delay in his referral for alternative psychological therapy. He was referred in 2010 despite his psychiatrist having first considered a referral in 2009. We acknowledged the psychiatrist's concerns that Mr C may not have been ready for the treatment, but noted that a referral would only have been to assess whether he was a suitable candidate. We, therefore, concluded that the delay was unreasonable and upheld the complaint.

Mr C was prescribed anti-depressant medication, which had potentially serious side effects when mixed with alcohol. His psychiatrist informed him of the risks and referred him to a pharmacist for specialist advice. The pharmacist also provided Mr C with guidance from the drug manufacturer which said that alcohol presented a moderate risk. Mr C complained that this advice was inconsistent with the other advice offered. He felt that it had not been made sufficiently clear that alcohol should be avoided. We were satisfied that Mr C was appropriately told about the risks, so we did not uphold this complaint. However, we found that the pharmacist had not recorded details of her contact with Mr C or the advice given, and we made a recommendation to address this.

Finally, Mr C complained about the board's handling of his complaint. He felt that his complaint had a negative impact on his treatment but we found no evidence to support this. However, we found an unexplained delay in responding to his initial complaint and also that his last letter of complaint did not receive a response at all. In addition, complaints handling staff tasked

Mr C's psychiatrist with gathering information on his complaint during a clinical appointment, which we considered to be inappropriate use of a therapeutic consultation. In these circumstances, we upheld this complaint.

Recommendations

We recommended that the board:

- apologise to Mr C for prematurely suspending his treatment;
- remind clinicians to ensure that, when writing to a patient's GP, they copy in other relevant professionals involved in the patient's care, especially when the content of the letter suggests a change of diagnosis and/or treatment direction;
- remind clinicians that, where there is a clear diagnosis, patients need to know what that is, and where there is uncertainty, they need to know why;
- apologise to Mr C for the delay in referring him for an assessment for further psychological therapy;
- remind pharmacists who have therapeutic contact with patients of the importance of recording their interactions and, in particular, any medication advice provided;
- ensure that, where they are unable to respond to complaints within their target timeframe, they explain the reason for this to complainants and advise of when they expect to be able to respond;
- ensure that they respond to all correspondence from complainants and provide clear guidance on what steps they should take if they remain unhappy;
- highlight to complaints handling staff that it is not appropriate to use therapeutic consultations for complaint information gathering purposes; and
- apologise to Mr C for the inappropriate handling of his complaint, as identified in our investigation.