

SPSO decision report

Case: 201202635, Greater Glasgow and Clyde NHS Board
Sector: health
Subject: appointments/admissions (delay, cancellation, waiting lists)
Outcome: not upheld, recommendations

Summary

Miss C, who has a complex eye condition requiring regular ophthalmology (the branch of medicine that deals with the anatomy, physiology and diseases of the eye) interventions, complained about the process for accessing these services. Her condition can flare up at short notice requiring her to seek an urgent ophthalmology appointment.

The board's previous process for seeing an ophthalmologist involved attending an eye casualty service which was very busy and could involve waiting the full day to be seen. In order to improve this service, and try to filter out patients whose conditions could be treated by a GP or optometrist (at a community optician practice), the board changed the system. Patients are now required to attend either their GP or optometrist for initial examination and onward ophthalmology referral if required. This should still lead to an ophthalmology appointment within 24 to 48 hours. Miss C complained that she has to re-start this process from the beginning each time, despite her flare ups being regular and onward referral to ophthalmology being inevitable. In responding, the board indicated that, where required, Miss C could obtain repeat appointments by contacting her consultant's secretary. However, Miss C said that this only applies during normal weekday working hours and only while she was under a specific consultant.

Our enquiries revealed that the old eye casualty service was open seven days a week from 09:00 to 16:30. The new clinic hours are the same but it is not open on a Sunday. As prior referral to this clinic is required, this means that Miss C has no direct access to the clinic at weekends when her consultant's secretary is unavailable. We acknowledged that this might be frustrating for her but noted that the provisions in place will still result in Miss C being seen within the 48 hour target timescale. We also noted that emergency intervention at weekends could still be sought via NHS 24 or direct presentation at an accident and emergency department. As such, we did not uphold the complaint. However, we noted that when Miss C complained to the board, she expressed concern that she might lose her eyesight if she did not receive immediate treatment. Although the board appeared to have noted this while considering the complaint, they did not respond to it. We were critical of them for this and made a recommendation about it.

Recommendations

We recommended that the board:

- respond to Miss C's concerns about the long-term effect of the condition on her eyesight should she not receive immediate treatment.