

SPSO decision report

Case: 201404055, Greater Glasgow and Clyde NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Outcome: some upheld, recommendations

Summary

Mr C complained about the care and treatment received by his daughter (Miss A). Mr C raised concerns that there was not a reasonable care plan in place to address Miss A's borderline personality disorder (BPD) diagnosis and that the input she was receiving was not sufficient and was not in line with recognised guidance in this area. He also raised concerns that Miss A had been prescribed anti-psychotic medication despite this not being recommended for the treatment of BPD.

We took independent medical advice from two consultant psychiatrists. We were advised that there was a reasonable care plan in place for Miss A over the period in question. However, there was no evidence that this had been appropriately reviewed on a regular basis. It also noted that the care plan might have benefited from the inclusion of additional information. While a more structured approach to Miss A's care planning (known as the Care Programme Approach) might reasonably have been deemed unnecessary given her circumstances, we saw no evidence of this having been considered. We were advised it would have been good practice for this to have been considered and for any decision not to utilise this approach to have been documented. On balance, we upheld this aspect of the complaint.

With regards to the level of intensity of treatment provided to Miss A, we were advised that she had been considered for a range of additional therapies but deemed unsuitable at the time of each assessment. As such, the advisers considered that the current level of provision was appropriate to her circumstances. Mr C also complained that group treatment sessions had not been provided but we noted that Miss A had also been assessed, and deemed unsuitable, for therapies that could have been delivered as group sessions. We did not uphold these aspects of the complaint.

We were advised that it was common practice for anti-psychotic medication to be used to help alleviate some of the effects of BPD, despite there being very little evidence for such an approach. We concluded that this was reasonable in Miss A's circumstances and did not uphold this aspect of the complaint. However, we noted that the rationale for this should have been discussed with Miss A and that it would have been helpful for this to have been recorded in her care plan.

Recommendations

We recommended that the board:

- remind Community Mental Health Teams (CMHTs) to ensure that review dates are set and adhered to for care plans and that reviews should be clearly documented in the records;
- remind CMHTs to consider the use of the Care Programme Approach in complex cases and clearly document any decision not to utilise this approach; and
- ask CMHT staff to reflect on the advice we received and consider enhancing the level of detail included in future care plans.