

SPSO decision report

Case: 201405122, Lanarkshire NHS Board
Sector: health
Subject: appointments / admissions (delay / cancellation / waiting lists)
Outcome: upheld, recommendations

Summary

Mrs C complained about a delay in providing treatment in the ear, nose and throat (ENT) clinic at Wishaw General Hospital. Her GP referred her with a suspected acoustic neuroma (a benign tumour on one of the nerves connecting the inner ear to the brain) and she was frustrated at having to attend multiple appointments before receiving a diagnosis. She was seen first by audiology, then an ENT doctor reviewed her and she attended again for a scan, before being seen by ENT again to discuss the results. These four separate attendances occurred over a five-month period. Her scan result was normal and confirmed that she did not have an acoustic neuroma.

The board treated the audiology and ENT appointments as separate specialist referrals and, therefore, as two separate events for the purposes of treatment time targets. This meant that, in their view, the relevant waiting targets had been met. They noted that referrals to ENT were vetted and, if patients met certain criteria, they were sent to audiology. They advised that audiology can often meet patients' clinical needs and, where this is the case, no onward referral to ENT is necessary.

We took independent advice from both a GP adviser and a consultant ENT surgeon. It was noted that Mrs C's GP had referred her specifically to ENT with a particular concern. We were advised that a direct appointment to audiology was common practice and in line with relevant guidance. However, the board's vetting criteria did not appear to match up with this guidance. The advice we received indicated that it would only be appropriate to treat an audiology appointment as a separate specialist referral if audiology were able to fully investigate and decide on treatment for the concern in question. This was not the case with Mrs C and it appeared that it was always going to be necessary for her to see an ENT doctor in order to be fully assessed. As such, the audiology appointment appeared to be a routine precursor to the ENT assessment and should not have been viewed as a separate event. We concluded that Mrs C's overall wait within the ENT clinic system was unreasonable and we upheld the complaint.

Recommendations

We recommended that the board:

- take steps to ensure that ENT waiting times are accurately categorised and provide us with details of the action taken;
- review their ENT and audiology referral process to ensure it is reasonable and takes account of relevant guidance;
- consider introducing a system of writing to patients when assessment results are normal, to avoid causing unnecessary anxiety for them while waiting for a follow-up appointment to discuss these results; and
- issue a written apology to Mrs C for the failings we found.