

**Mishandling of ophthalmology referral  
(07HDC19869, 3 October 2008)**

*District health board ~ Retinal detachment ~ Ophthalmology ~ Referral ~ Rights 4(1), 4(5), 6(1)(c)*

A woman complained about a district health board's mishandling of her husband's ophthalmology referral from another DHB. Following receipt, the referral was filed by mistake and the man was not allocated an ophthalmology appointment. Six months later, when the error was discovered, corrective surgery was no longer an option. Several months later, the man had surgery to remove his left eye, and was given a prosthesis.

It was held that the DHB breached Rights 4(1) and 4(5) for failing to have an appropriate referral receipt system in place, and failing to co-ordinate its ophthalmology services with the referring DHB. It also breached Right 6(1)(c) as the man did not receive adequate information about his referral, including an approximate timeframe for an appointment.

District health boards owe patients a duty of care in handling outpatient referrals, under Right 4(1). A referring DHB must: (1) copy all referrals to the patient and his or her GP; and (2) have a system in place to ensure that a referral has been received (and follow up in the absence of confirmation of receipt), and that the care of the patient has been accepted by the receiving DHB.

A receiving DHB owes referred patients a duty of care to: (1) acknowledge receipt of the referral; (2) prioritise it; (3) arrange for patients to be seen in a timely fashion, in their agreed priority; and (4) keep the patient and his or her GP informed whether, and if so when, the patient will be seen.