

SPSO decision report

Case: 201102663, Ayrshire and Arran NHS Board
Sector: health
Subject: clinical treatment; diagnosis
Outcome: some upheld, recommendations

Summary

Ms C was admitted to hospital on two occasions. She said that before each admission she had lodged an advance decision with the board to cover the care and treatment she was prepared to accept. She was unhappy with the care and treatment she received. She said it did not agree with her advance decision; that the advance decision was not recorded in her notes until after the first admission; she waited around six hours before receiving treatment; she was incorrectly told to take her own medication; staff took offence at her; her advance decision was not respected and it was inappropriate for staff to ask about her mental health problems.

Our investigation took account of all the available information, including Ms C's medical records. We obtained medical advice from two medical advisers.

A medical adviser said that advance decisions are drawn up to indicate how an individual would wish to be treated, should they be unable to make that decision at the time. There was no indication in the medical records that Ms C was in that position at the times concerned. However, we found that the advance decision was not inserted in her records at the right time and that on admission, she waited too long before receiving treatment and we upheld her complaints about these matters. We also found that staff told her, incorrectly, to continue taking her own medication once she was admitted to a ward and that in view of this a member of the medical team (correctly) refused to continue to give her strong pain relief. There was, however, no evidence to show that a member of staff took any offence at Ms C or her requests. We also found that it was appropriate for staff to discuss Ms C's mental health with her even though it had no apparent bearing on her physical presentation at the time.

Recommendations

We recommended that the board:

- apologise for the delay in 2010 in attaching the advance decision to the relevant notes;
- audit their current process to lodge records information and act on any recommendations subsequently made; and
- review the means, in Crosshouse Hospital, by which they ensure that acute admissions are promptly assessed by medical and surgical staff in their acute wards and that actions taken to ensure attainment of the four hour target do not compromise patient care. An audit of time from presentation at Accident and Emergency to review by medical staff would support such an aim.