## **SPSO decision report**



Case:	201305954, Forth Valley NHS Board
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	not upheld, no recommendations

## Summary

Mrs C was admitted to Forth Valley Royal Hospital suffering from shortness of breath and oedema (swelling) caused by fluid retention due to her chronic (long-term) congestive heart failure. She also suffered from kidney disease and insulin-dependent diabetes. Despite treatment, Mrs C died some two weeks later, and her husband (Mr C) then complained about her care and treatment. As he held power of attorney (PoA - a legal document appointing someone to act or make decisions for another person) for Mrs C, Mr C said it was inappropriate for staff to speak to his wife alone about her condition and treatment, and he complained that he and his family were not kept informed about her care and treatment.

We took independent advice on Mr C's complaint from two of our advisers, a doctor and a nurse, and we also reviewed the relevant legislation and medical guidance. Mr C was concerned that one of the drugs (furosemide) that his wife was prescribed for fluid retention was making her worse and contributing to the worsening of her kidney disease. National guidance says that this is the recommended first-line treatment, but that it can cause kidney damage and needs to be carefully monitored. We found that it was monitored and that when Mrs C's kidney function continued to deteriorate the drug was stopped. Mr C also had concerns that Mrs C's diabetes was not being appropriately managed but this was not supported by the evidence in the medical and nursing notes, and there was evidence of regular reviews by a diabetic nurse specialist and a dietician. We were, therefore, satisfied that the care and treatment provided to Mrs C was reasonable, appropriate and timely.

In relation to the PoA and general communication issues, the PoA clearly stated that it was to be invoked only if Mrs C lacked capacity - this is in line with the relevant legislation (the Adults with Incapacity (Scotland) Act 2000). Guidance issued by the General Medical Council (GMC) and Nursing and Midwifery Council (NMC) (the governing bodies for doctors and nurses respectively) says that a patient should be deemed to have capacity to make decisions about their care unless it can be demonstrated that they do not. There was ample evidence within Mrs C's notes that staff considered her to have capacity, so we took the view that it was reasonable and appropriate for staff to discuss care and treatment with Mrs C herself and to act upon her wishes. We also found evidence of numerous discussions between medical and nursing staff with members of the family, including Mr C. In light of this, we did not uphold Mr C's complaint.