SPSO decision report

Case: **201703707, Ayrshire and Arran NHS Board**
Sector: health
Subject: clinical treatment / diagnosis
Decision: upheld, recommendations

Summary

Mr C complained about the care and treatment he received at University Hospital Crosshouse following a referral made by his GP. He was suffering from chest pain and was seen by a consultant cardiologist (a doctor who specialises in finding, treating and preventing diseases of the heart and blood vessels) at the hospital. Mr C complained that the examination he received was poor and that the consultant failed to take into account all the information provided by his GP. At a later appointment, Mr C underwent an echocardiogram (echo - a heart scan that uses sound waves to create images) and was fitted with a Holter monitor (a device that measures and records the heart's activity). Mr C considered that the results were not properly reported and no follow-up appointment was made. He complained to the board who confirmed that there had been errors in the consultant's note taking but that they did not impact upon his care. Mr C was unhappy with this response and brought his complaint to us.

We took independent advice from a consultant cardiologist. We found that some records contained inaccuracies and that there had been no reference made to Mr C's chest pain which was the reason for his attendance. We also found that no investigations were made at his initial referral and the adviser noted that they would have expected an electrocardiogram (ECG - a test that records the electrical activity of the heart) to be carried out. We found that the subsequent echo was reported as normal although there were some abnormalities. We considered that the board failed to provide reasonable care and treatment and upheld Mr C's complaint. However, we noted that although some information was not recorded correctly, this would not have affected Mr C's treatment.

Recommendations

What we asked the organisation to do in this case:

- Apologise to Mr C for failing to provide a reasonable level of cardiology care and treatment. The apology should meet the standards set out in the SPSO guidelines on apology available at www.spso.org.uk/leaflets-and-guidance.

What we said should change to put things right in future:

- The cardiology department should consider whether all new cardiology patients should have an ECG on arrival and consider whether or not provision should be made to arrange other tests prior to, or very soon after, consultation.
- In their clinical records, the named consultant in cardiology should consider and offer opinion about their patients' presenting symptoms.

We have asked the organisation to provide us with evidence that they have implemented the recommendations we have made on this case by the deadline we set.