## **SPSO** decision report



Case: 201802780, Lothian NHS Board - Acute Division

Sector: health

Subject: clinical treatment / diagnosis

Decision: some upheld, recommendations

## **Summary**

Mr C complained about the care and treatment he received in relation to a coronary artery bypass graft (a surgical procedure used to treat coronary heart disease) at the Royal Infirmary of Edinburgh.

We took independent advice from a consultant cardiologist (a specialist in diseases and abnormalities of the heart). We found that Mr C was identified as having ostial left anterior descending artery disease (a narrowing in the blood vessels of the heart) and that the initial choice of treatment for this, bypass surgery, was reasonable. Mr C then had an uncommon but recognised complication of bypass surgery. We found that the decision to perform a second procedure to implant a stent (a small tube used to keep passageways open) was reasonable. We also noted that there was no reason to believe that performing a stent procedure earlier would have translated to any clinical benefit for Mr C. We considered that the clinical care Mr C received was reasonable and did not uphold this aspect of his complaint.

Mr C also complained about aspects of his nursing care during his hospital admission when the stent procedure was performed. We took advice from a consultant nurse in cardiology. We found that Mr C was not prescribed appropriate pain relief and that there was contradictory evidence in the records around the management of his pain. Mr C's pain should have been managed better and the failure to do so was unreasonable. We also identified failings in record-keeping, in particular, a failure to complete care documentation, around communication with Mr C and his family, and his discharge from hospital. We considered that the nursing care Mr C received was unreasonable and upheld this aspect of his complaint.

## Recommendations

What we asked the organisation to do in this case:

Apologise to Mr C for failing provide him with reasonable pain relief, failures in record-keeping, and failing
to provide him with reasonable nursing care. The apology should meet the standards set out in the SPSO
guidelines on apology available at www.spso.org.uk/information-leaflets.

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

Patients who are in pain should have their pain needs addressed as soon as possible. Following a surgical
procedure, patients pain needs should be proactively addressed even though they are waiting to be
clerked into the ward. Nursing staff should ensure the documentation of a patient's care following a
surgical intervention should be completed. Nursing staff should maintain reasonable records, consistent
with the Nursing and Midwifery Code of Conduct.

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.