

SPSO decision report



Case: 201802802, A Medical Practice in the Grampian NHS Board area
Sector: health
Subject: clinical treatment / diagnosis
Decision: upheld, recommendations

Summary

Mrs C complained about the care and treatment provided to her late brother (Mr A), who had chronic obstructive pulmonary disease (COPD) (a disease of the lungs in which the airways become narrowed) and a mental health condition.

Mrs C complained that the practice failed to admit Mr A to hospital in the months leading to his death. Mrs C had contacted the practice to raise concern about Mr A's physical health. Shortly following this, the GP attempted to carry out a home visit, but found no response on attendance at Mr A's property. A week later, Mr A was examined during a home visit by one of the board's out-of-hours doctors who initiated treatment for his COPD. At this time, Mr A had very low oxygen saturation and potential signs and symptoms of heart failure. A report of the out-of-hours consultation was sent to the practice. The practice arranged to visit Mr C again approximately ten days later, but when the GP attended Mr A refused an examination. The GP felt that the symptoms were likely due to COPD and treatment was commenced with a plan to review Mr A in ten days time. Mr A died on the date of the planned review, with the cause of death unknown.

We took independent advice from a GP adviser. We were unable to conclude that the practice reviewed the details of the out-of-hours report, which contained details of concerning symptoms, and used this to determine a working diagnosis and management plan at the penultimate home visit attempt. We considered that the practice's decision that there was no clinical indication for hospital admission following the home visit was unreasonable. We upheld this complaint.

Recommendations

What we asked the organisation to do in this case:

- Apologise to Mrs C for failing to consider the details of the out-of-hours report and use this to determine a working diagnosis and management plan; and for the unreasonable decision that there was no clinical indication for hospital admission following a home visit. The apology should meet the standards set out in the SPSO guidelines on apology available at www.spsso.org.uk/leaflets-and-guidance.

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

- When an acutely unwell patient refuses examination, a GP should consider what other evidence is available – including details of recent examinations and clinical history for background information – to assist clinical decision making and the management plan.