SPSO decision report



Case:201803709, Lanarkshire NHS BoardSector:HealthSubject:admission / discharge / transfer proceduresDecision:not upheld, no recommendations

Summary

Mr C complained about the care and treatment his mother (Mrs A) received at University Hospital Monklands during her initial admission and subsequent readmission to hospital for treatment for supraglottis with parapharyngeal oedema (infections of the upper airways/throat).

We took independent advice from an ear, nose and throat consultant and from a consultant radiologist (a doctor who specialises in diagnosing and treating disease and injury through the use of medical imaging techniques) with experience in interventional procedures (procedure used for diagnosis or treatment that involves incision; puncture; entry into a body cavity; or the use of ionising, electromagnetic or acoustic energy).

Mr C said that the board unreasonably discharged Mrs A from hospital following her initial admission. We found that, at the point Mrs A was discharged, there were no clinical indicators to suggest that this was the wrong decision and, based on what was recorded in the nursing and medical notes at that time, she appeared to be improving at that stage. We did not uphold this aspect of the complaint.

Mr C also said that the board failed to provide Mrs A with appropriate care and treatment following her readmission to hospital. We found that the decision to undertake a scan-guided drainage of Mrs A's abscess was reasonable in the circumstances in order to improve her condition, which was very serious at the time, and to avoid major surgery to her chest. The procedure was a technically difficult one, but it was clinically successful because it did lead to draining of the abscess. The catheter becoming dislodged during this is a common problem with any drainage procedure and it was not possible to conclude that the blood clot that developed was either a result of the procedure itself, or the dislodging of the catheter, rather than a result of Mrs A's condition at that time. We did not uphold this aspect of Mr C's complaint.

Lastly, Mr C complained that the board failed to respond appropriately to his letter of complaint about Mrs A's care and treatment. We recognised that Mr C did not agree with the response the board gave about why Mrs A was discharged. However, we considered that the board accurately identified Mr C's concern and provided a reasonable response, which was an accurate reflection of what was recorded in the medical records. We considered that the board provided a general response to a specific question Mr C asked about Mrs A's discharge, by acknowledging that there had been a difference in recollections and that this was something that the board would strive to improve. Therefore, we did not uphold this aspect of the complaint.