

Scottish Parliament Region: Highlands and Islands

Case 200502580: Highland NHS Board

Summary of Investigation

Category

Health: Hospital; General Medical

Overview

The complainant raised a number of issues regarding his treatment during and following a hospital admission.

Specific complaints and conclusions

The complaints which have been investigated are that:

- (a) staff administered injections without the complainant's permission (*not upheld*); and
- (b) staff failed to provide Mr C with home oxygen (*not upheld*).

Redress and recommendations

The Ombudsman has no recommendations to make.

Main Investigation Report

Introduction

1. On 22 December 2005 the Ombudsman received a complaint from the complainant (Mr C) about the treatment he received from Highland NHS Board (the Board) following a hospital admission on 25 August 2004. Mr C complained that staff administered injections without his permission and this led to a deterioration in his health. Mr C complained to the Board but was dissatisfied with the responses he had received and subsequently complained to the Ombudsman.

2. The complaint from Mr C which I have investigated is that:

(a) staff administered injections without Mr C's permission.

3. As the investigation progressed, I identified issues concerning whether Mr C should have been commenced on home oxygen supply. I, therefore, informed the Board and Mr C that the investigation would additionally consider whether:

(b) Staff failed to provide Mr C with home oxygen.

Investigation

4. In writing this report I have had access to Mr C's clinical records and the complaints correspondence from the Board. I met Mr C to clarify the aspects of his complaints which he felt were unresolved.

5. I have obtained and accepted advice from the Ombudsman's professional adviser (the adviser) on the clinical aspects of this complaint.

6. I have not included in this report every detail investigated but I am satisfied that no matter of significance has been overlooked. An explanation of the abbreviations used in this report is contained in Annex 1 with a glossary of terms used at annex 2. Mr C and the Board were given an opportunity to comment on a draft of this report.

(a) Staff administered injections without Mr C's permission

7. Mr C was admitted to Raigmore Hospital, Inverness on 25 August 2004 following a referral from his general practitioner (GP). His presenting symptoms were shortness of breath, epigastric pain and he had also suffered a collapse at

home. Blood tests proved negative and a chest x-ray showed some chronic lung changes and possible shadowing in the left upper zone. Mr C was treated for pneumonia and was discharged on 27 August 2004 after his inhalers had been reviewed and his epigastric pain had resolved.

8. Mr C complained to the consultant (Consultant 1) on 4 November 2004 that while he was a patient he was given two injections into his stomach. He asked the ward staff why he required the injections but they could not give an explanation. Mr C said that since returning home his condition generally appeared to have worsened and he could not now manage short walks which he could prior to the hospital admission.

9. In his response dated 1 December 2004 to Mr C, Consultant 1 said that while Mr C was a patient in the ward staff had given him injections of Heparin into his stomach. Heparin is prescribed to patients who are immobile to stop blood clots forming in the veins of their legs which are called deep vein thrombosis. Consultant 1 continued that he did not feel the injections would have contributed to Mr C's health problems and suggested that Mr C might wish to discuss the situation with his GP. Consultant 1's letter was copied to the GP. The GP wrote to Consultant 1 on 10 December 2004 and said that he too had tried to explain the rationale for staff providing Mr C with subcutaneous Heparin.

10. Mr C then made numerous telephone calls to the Board and the Board's Head of Clinical Governance and Risk Management (Manager 1) wrote to Mr C on 20 September 2005. Manager 1 explained that she had reviewed Mr C's clinical records and that the injections of Heparin were a routine procedure given to patients who are not very mobile to stop them getting blood clots in their legs while they are in hospital and, therefore, spending a lot of time in bed. Manager 1 said that this procedure is carried out on many patients and would not normally be a cause of any new health problems.

11. Mr C continued to make numerous telephone calls to the Board and now said that the nurses had assaulted him by giving the injections by force and that they had held him down. The Board formally investigated the complaint under the NHS Complaints Procedure and their medical director (Director 1) wrote to Mr C on 2 December 2005. Director 1 repeated the explanation that it was extremely

unlikely that the Heparin injections had caused the problems which Mr C was experiencing. Director 1 said that in Mr C's original letter of complaint he stated that he had asked the ward staff why he required the injections but they could not offer an explanation. His letter made no mention of being given injections against his will. The Board investigation revealed no mention in Mr C's clinical records that he did not wish to receive Heparin injections. Due to the passage of time which had elapsed since the hospital admission it was not possible to identify the specific nurses who would have administered the injections but nursing staff are aware that patients have the right to refuse drugs and would record if that was the case.

(a) Conclusion

12. The adviser considered that the Board had spent a considerable time attempting to satisfy Mr C that the advice they had provided was correct. The adviser said the Heparin treatment was appropriate and that had Mr C made it clear that he wished to refuse the treatment then staff would have followed a procedure whereby he could have signed a refusal form. It would also not be normal practice to seek consent to routine medication and she would not have expected this to be done in Mr C's case. If Mr C had concerns about the prescribed treatment or showed distress during the treatment she would have expected note of this in Mr C's clinical records. However, the records give no indication that Mr C had concerns about the administration of Heparin. I, therefore, do not uphold this complaint. The Ombudsman makes no recommendation on this complaint.

(b) Staff failed to provide Mr C with home oxygen

13. Mr C complained that he had asked Consultant 1 on many occasions why he had not been prescribed oxygen for use at home. He was not sure whether he had put these concerns in writing and that it was causing him great distress.

14. I made an enquiry of the Board and Manager 1 sent me a copy of a letter which Consultant 1 had sent to the GP and had been copied to Mr C. The letter explained that Mr C's oxygen saturation on air was 94% and blood gases showed he had a pA02 of 9.8. Mr C did not need domiciliary oxygen. The National Guidelines suggested that oxygen is provided at home if the pA02 is less than 7.3 or in particular circumstances less than 8.

(b) Conclusion

15. The adviser told me that the information provided to Mr C by Consultant 1 regarding home oxygen was accurate and appropriate. I do not uphold this complaint and the Ombudsman has no recommendation to make in this regard. I hope that Mr C will take some comfort in knowing that his concerns have been independently considered and that he has received full and appropriate explanations.

31 October 2006

Explanation of abbreviations used

Mr C	The complainant
Consultant 1	The consultant physician in charge of Mr C's hospital treatment
GP	Mr C's general practitioner
Manager 1	The Board's Head of Clinical Governance and Risk Management
Director 1	The Board's Medical Director
The adviser	The Ombudsman's professional adviser
The Board	Highland NHS Board

Glossary of terms

Epigastric pain	Pain lying on or over the stomach
Heparin	A drug which helps to prevent blood clots forming
Pneumonia	Lung infection
Subcutaneous	Beneath the skin (subcutaneous injections)