

SPSO decision report

Case: 201205291, Greater Glasgow and Clyde NHS Board - Acute Services Division
Sector: health
Subject: clinical treatment / diagnosis
Outcome: not upheld, no recommendations

Summary

Mrs C complained about the care and treatment provided to her late brother (Mr A), who had a number of medical conditions. She said that when he was admitted to hospital, despite his complex medical history he was denied admission to intensive care. He was instead admitted to the acute medical unit, where he died some nine days later. Mrs C said that the care and treatment her brother received was less than he deserved and meant that he was denied the chance to live. She also complained that the board did not communicate well with the family, and that the family were unaware of Mr A's 'not for resuscitation' status (a decision taken that means a doctor is not required to resuscitate the patient if their heart stops).

In investigating the complaint we carefully considered all the relevant documentation, including Mr A's medical records and the complaints correspondence, and obtained independent medical advice from one of our advisers, a consultant in acute internal medicine.

Our investigation found that when Mr A was admitted to hospital, he was comatose (unconscious) and in a very serious condition. Because he had a complex and difficult medical history, he was reviewed and doctors decided that Mr A should not go to intensive care, but to the acute medical unit. Our adviser said that this decision was based on what was best for Mr A and was in accordance with the board's policy and national clinical guidance. The adviser recognised the gravity of the decision, but said that to do otherwise would have been futile and unethical, as more invasive treatment would have meant that Mr A's final days would have been needlessly uncomfortable and painful. While this was contrary to what the family wished, good practice was to put the interests of the patient first and to make Mr A as comfortable as possible. Mr A was extremely unwell, and in the circumstances we found all his care and treatment to have been reasonable.

We found that the decision not to treat Mr A should his heart or breathing stop was documented, and that Mrs C was told about it. Although Mrs C said that she was not told what was happening to Mr A or about the decision not to resuscitate him, the records detailed a number of conversations with her and other family members.