

SPSO decision report

Case: 201303729, Ayrshire and Arran NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Outcome: some upheld, recommendations

Summary

After an accident, Mr C was admitted to the emergency department at University Hospital Ayr with a suspected broken collarbone. He was in severe pain and had been given pain relief by ambulance paramedics. The medical records showed that he was placed in an 'urgent' triage category, with a target time of having a medical assessment within one hour of admission. (Triage is the process of deciding which patients should be treated first based on how sick or seriously injured they are.) However, Mr C was not assessed by an orthopaedic doctor (dealing with conditions involving the musculoskeletal system) until several hours later. The doctor ordered an x-ray and while at the radiology department, a healthcare professional adjusted Mr C's position and he felt a shooting pain. After the x-ray was taken, Mr C said the doctor told him that he had no broken bones, and that the arm might have been dislocated, but popped back into place. Mr C was told to take pain relief and soak in a hot bath, and was discharged with pain relief medicine an hour later. Nine days later, he returned to work. The next day, while involved in manual labour, he suffered a further injury and went back to the emergency department. Tests showed that he had a fracture of the neck of the shoulder blade.

Mr C complained about the time it took before he saw a doctor on his first visit, and said that the doctor did not make him aware of the severity of his injury. Mr C also said that although the board said in their response to his complaint that the use of a sling had been discussed with him and that he had a full range of movement when he left hospital, he did not agree with this. He said that he had felt relief when he returned from x-ray, but this was due to the medication. Mr C also complained about the board's complaints handling.

After taking independent advice from one of our medical advisers, we found that Mr C's wait was well within the national target timescale (four hours from admission to completion of management), particularly as dislocation of the shoulder was not initially suspected and there was no evidence to support that it had been dislocated. We also noted that, while Mr C was waiting, the emergency department had to deal with three emergencies that required more immediate medical attention than he did. Our adviser said that the care and treatment and discharge advice Mr C received was reasonable. An x-ray was performed (the results of which the adviser said were normal), and an assessment of the range of movement in the shoulder was carried out and noted. The advice Mr C received when he was discharged was, therefore, reasonable in light of the evidence of his injury, as was the doctor's decision not to provide a sling. In view of all of this, we did not uphold Mr C's complaints about his care and treatment.

We did, however, uphold the complaint about the board's complaints handling. We found that there were delays and that they did not respond all the elements of Mr C's complaint. We were also concerned that Mr C was not told that he could approach us (as he should have been) when the board contacted him about the delay in responding to his complaint.

Recommendations

We recommended that the board:

- review their complaints handling process in the light of our findings, and raise the shortcomings identified with relevant staff; and
- apologise to Mr C for their failure to fully address the complaint he raised.