

## SPSO decision report

**Case:** 201507934, Lanarkshire NHS Board  
**Sector:** health  
**Subject:** clinical treatment / diagnosis  
**Decision:** upheld, recommendations

### Summary

Mr C complained that staff at Hairmyres Hospital failed to provide him with appropriate care and treatment.

Mr C became unwell with sepsis (an infection of the blood) following an operation to treat an abscess on his abdominal wall. He was discharged with arrangements to have his wound cared for by district nurses. Mr C was later readmitted with symptoms of pain, swelling and wound discharge and was discharged the same day. Mr C then went on to develop a hernia some months later.

Mr C raised specific concerns that the operation to treat his abscess was carried out too late in the evening. He said the surgeon did not take into account information relayed concerning a scan that he had undergone. Mr C also said a surgeon opened his wound with a scalpel to further drain it while he was on the ward. Mr C attributed his subsequent health problems to the way the board handled his condition. The board said Mr C's condition was identified accurately, and that he received appropriate surgery. They considered Mr C's subsequent problems were not due to any deficit in care.

We took independent advice from a surgeon. We found that overall, the board had provided appropriate treatment. In particular, we found that the surgeon carried out the correct operation, including taking into account Mr C's scan, and that this was not carried out at an inappropriate time. However, we did find that there was an unreasonable delay in Mr C receiving surgery, as this occurred several days into his admission. We found that the board should have made a decision and operated on Mr C at an earlier stage. We therefore upheld Mr C's complaint.

### Recommendations

We recommended that the board:

- apologise to Mr C for the delay in surgery identified in this investigation; and
- consider steps they can take to reduce the impact of avoidable delays on treatment in the future.