

SPSO decision report



Case: 202203748, Greater Glasgow and Clyde NHS Board - Acute Services Division

Sector: Health

Subject: Clinical treatment / diagnosis

Decision: not upheld, no recommendations

Summary

C complained about the care and treatment that their partner (A) received during an emergency admission to hospital for treatment of a back injury following a fall at home. During admission, C reported that A's abdomen became very swollen which they were advised by staff was due to constipation and a build-up of faeces, and which was appropriately being treated with laxatives. A's condition deteriorated and they were subsequently diagnosed with a perforated colon which required emergency surgery. This resulted in a stoma (a surgically made pouch on the outside of the body) and a prolonged period of recovery in hospital.

C complained that the board had failed to diagnose and treat A's abdominal symptoms earlier. They considered that this may have resulted in a better surgical outcome for A, with no stoma being required. C also complained that the board failed to identify or treat a deep laceration on A's arm, and they complained about the board's failure to respect A's dignity by discussing personal matters in the open ward.

The board's response advised that A's abdominal symptoms were timeously managed and treated, particularly noting that there had been no evidence during the admission assessments of a problem with A's bowel. The board apologised that A's arm injury had gone unnoticed and for personal matters being openly discussed, which they had provided as feedback to the ward charge nurse for learning and improvement.

We took independent advice from an upper gastrointestinal and general surgeon adviser. We found that A's bowel perforation had been timeously diagnosed and treated, and the procedure that they received was appropriate to their presenting condition at the time. In relation to A's arm laceration, we were critical of the board's failure to identify and treat this as part of the assessment process. In relation to there being open discussion of private matters on the ward, we acknowledged the apology and action taken by the board in response to C's complaint. On balance, we did not uphold C's complaint.