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Ombudsman finds that proper care and treatment of patient by Trust 'may have improved her chances of survival'

An investigation by the Northern Ireland Public Services Ombudsman has found that the Northern Health and Social Care Trust failed to provide adequate care and treatment to a patient who died of multiple organ failure in the Causeway Hospital, Coleraine on 26 September 2015.

The Ombudsman, Marie Anderson, concluded that although the patient was severely ill on being admitted to the hospital, repeated failures in the care given to her meant she was not given the best possible chance of survival.

Following her death the patient's husband made a complaint to the Ombudsman. He complained that a check to see whether his wife had a bacterial infection was not carried out quickly enough, and that there was a lengthy delay in giving her antibiotics.

He said that when she did receive the antibiotics they were not specifically targeted for her infection. He also claimed that she was weakened by the inadequate nutrition and hydration provided to her while she was in hospital.

The investigator obtained all of the relevant records and information from the Trust. A consultant hepatologist's report commissioned by the Trust into the care of the patient was obtained by the Ombudsman and considered as part of her investigation. An independent consultant hepatologist was also asked for his opinion on the patient's care.

The independent advisor explained that for patients presenting with this type of liver disease it was important for medical staff to obtain a sample of fluid from the abdomen, in a procedure known as paracentesis. This is because bacterial infections are common in such patients and can cause life threatening complications, including sepsis. Therefore careful assessment and prompt treatment with antibiotics is vital.

However, medical records disclosed that despite the patient's ill health upon admittance to hospital on 31 August 2015, paracentesis was not attempted until 12 days later.

Unfortunately this procedure was not successful. Although a clinical note recorded that the Trust considered that another attempt should be made, the procedure was not carried out.

The Ombudsman's investigation also found that the patient was not given an antibiotic until 12 September. This was despite three potential sources of infection having been identified early in the admission and against a background of worsening liver failure.

In relation to the complaint about the patient's nutrition, an examination of hospital records disclosed that she was not referred for review by a dietitian until 10 days after admission. The Ombudsman found that there was no proactive approach regarding 'aggressive nutritional therapy' as recommended in the guidelines, and that there was no consideration by clinicians of the option of nasograstric feeding (feeding through the nose).

Based on the available evidence, the opinion of the independent advisor, the complainant's allegations and responses from the Trust, the Ombudsman concluded that there were multiple and serious failures in the care and treatment of the patient.

Ms Anderson stated, 'This was a sad case in which the patient's limited chances for survival from her illness were dependent on her receiving timely and appropriate care. However, my investigation found a number of significant failures by the Trust and its clinicians.

'Although I cannot conclude that her death was avoidable, I have no doubt that prompt treatment of potential sepsis and the provision of appropriate fluids and nutrition would have improved her chances of survival.'

Given the serious failings, the Ombudsman recommended that the Trust provide a payment of £10,000 to the family in recognition of the upset, frustration, and distress caused.

She also recommended that the complainant and his family receive a personal apology from the Chief Executive of the Trust and from each of the clinicians involved in the patient's care.

To ensure that lessons had been learned from this case the Ombudsman recommended that the Trust carry out an audit of patients with decompensated liver disease to make sure they had been screened for malnutrition and hydration.

The Trust acknowledged the failures identified in the report and accepted the Ombudsman's recommendations.