Service failures put down to poor monitoring of patients

Ombudsman suggests that some nurses lack skills to recognise the significance of deterioration

By Nick Liplcy

HEALTH SERVICE ombudsman officials have raised concerns over service failures in emergency care due to the poor monitoring of patients.

Nursing adviser Lindsay Etherington spoke about such failures when addressing the RCN Emergency Care Association annual conference, held last month in Manchester.

Ms Etherington, who has a background in emergency nursing, said: ‘There is an emerging theme of inadequate observations, due either to non-adherence to monitoring regimes or to nurses failing to understand the significance of what they see.’

She suggested that senior staff should consider whether all nurses have the skills to recognise the sickest patients and what to do if they see patients deteriorating.

Responsibility for undertaking these tasks correctly also lies with doctors, she told Emergency Nurse. ‘Junior nurses do not always understand the importance of observations and do not escalate, or they do not receive clinical responses from medical colleagues when they do escalate.’

Complaints

Failures to monitor patients properly, and inappropriate clinical treatments and categorisations of patients at triage are among the chief complaints about emergency care received by the health service ombudsman this year. Other complaints concern poor communication, poor attitude of staff and discharge.

Investigation manager Amanda Harrington presented an anonymised case study of a man with lower right abdominal pain who was taken to an emergency department (ED) by ambulance.

He was said to have been ‘grey and clammy’ on admission, with a blood pressure of 75/50, a respiratory rate of 28 breaths per minute, pulse of 114 beats per minute and a pain score of 8 out of 10.

The triage nurse placed him in the yellow triage category, to be seen by a doctor within an hour, but despite fluctuations in his blood pressure, he was not seen for another two hours. Even then, no action was taken to address his obvious deterioration and staff failed to consider whether he had an abdominal bleed. The patient subsequently died of a gastrointestinal haemorrhage. He was 51.

After his death, his partner complained to the health service ombudsman, claiming that nurses had failed to listen to her. The ombudsman found a failure by the triage nurse to recognise the significance of the patient’s condition, delayed clinical review, poor staff attitude, inadequate clinical decision making, and a failure to monitor or escalate in response to observations. See feature, page 23

Research into views on skill mix leads to smaller teams

A STUDY of how nurses and managers perceive staff allocation has led to smaller teams in a London emergency department.

Emergency department senior sister Clare Carter-Jones invited 11 staff at Royal Free London NHS Foundation to focus groups and semi-structured interviews to discuss their experiences and perceptions.

The staff comprised three band 5, three band 6 and three band 7 nurses, as well as a matron and a consultant doctor.

Ms Carter-Jones said that ‘participants perceived skill mix to be defined by “ability and experience” rather than by band, and that seniority was “depicted negatively” because senior staff are too concerned with government-set indicators and not enough with patient care.

Teams in her department are now smaller and each includes only one band 7 nurse, she said, and there is more one-to-one mentoring. ‘Team days’, which may involve a mixture of teaching on one day and bowling on another, have been introduced to develop team cohesion.

There have also been attempts to improve communication between staff, for example by using the trust email system more.

Ms Carter-Jones said: ‘By enhancing team relationships, departments can improve workload without more resources.’

Committee members elect children’s expert to chair association

NURSE CONSULTANT in emergency care at Calderdale and Huddersfield NHS Trust Janet Youd has been elected chair of the RCN Emergency Care Association.

Ms Youd, who leads on the care of children and young people, was elected unopposed by the seven-strong committee after current chair Andrew Frazer, a consultant emergency nurse at Barts Health, London, announced that he intends to step down next month to work in Qatar.