

6 March 2002

Chief Executive Officer
District Health Board

Dear Chief Executive Officer

Consumer, Mr A

Thank you for your response to my provisional opinion. I appreciate your prompt consideration of my recommendations.

Dr B

I have now formed my opinion on the part of the complaint relating to the care provided by Dr B. In my opinion Dr B did not breach the Code. My reasons are set out in the attached letter to Mrs C, the consumer's wife.

Response to complaint

During this investigation I considered information provided by Ms D, Acting Operations Manager, and Dr E, Clinical Director of the District Health Board, and Mr A and Mrs C.

I obtained the District Health Board's 'Policy for Compliments and Complaints' and 'Discharge Planning Checklist'.

Mrs C's concerns were that:

- Mrs C sent a complaint letter to a public hospital on 15 February 2001 and was informed that she would have a response within a month. At 20 March 2001 Mrs C had not received this response.

In my opinion the District Health Board breached Rights 10(3) and 10(4) by not responding to Mrs C's complaint in a timely manner or providing her with monthly information about the progress of her complaint. The reasons for my decision are as follows:

Information gathered

Background

On 10 January 2001 Mr A received multiple injuries when he was hit by a vehicle as he was crossing the road at a pedestrian crossing.

Clinical record of Mr A's admission to the public hospital

Mr A was taken by ambulance to the public hospital's Emergency Department where he was triaged at 3.45pm on 10 January 2001 and noted to be in severe pain from injuries to his right arm and both shoulders.

The clinical notes showed that Dr B, registrar, saw Mr A at 4.00pm on 10 January 2001, and ordered intravenous morphine 10mg and Maxolon (anti-nausea medication) 10mg. Dr B took a full history and performed a comprehensive physical examination of Mr A. His provisional diagnosis was that Mr A had a fracture of his right shoulder and a dislocation of his left shoulder.

Mr A's shoulders were x-rayed to confirm the fracture and dislocation. The dislocated left shoulder was reduced under conscious sedation, using midazolam 5mg (short-acting hypnotic). Mr A was given 7.5mg of morphine at 4.40pm, and following the reduction was reported as "now very comfortable".

Mrs C's recollection of events

Mrs C stated that she was concerned about the bruising to her husband's right leg, and asked Dr B to x-ray this leg. She recalled that he "flatly refused to x-ray the right leg".

She said that when her husband was sent home approximately five hours after his accident, this was too early. She said that the intravenous luer was not removed and that Dr B had prescribed Paradex for her husband for pain relief which was inadequate pain relief in the circumstances.

Mrs C wrote a letter of complaint to the District Health Board on 15 February 2001. Ms F, the administrator, Quality and Risk of the District Health Board, wrote to Mrs C on 15 February 2001 advising that her concerns would be investigated, and that she would receive a response within a month. Mrs C did not receive a response to her complaint until 20 June 2001.

The District Health Board's comments on the complaint issues

Dr E, the Clinical Director of the District Health Board, stated:

"It is clearly documented in [the District Health Board's] policy for dealing with complaints that a response will be provided within one month of receipt of the complaint. This did not happen in this case.

The complaint was received on 15 February 2001 and an initial response was sent to [Mrs C] to acknowledge the receipt of her letter and to advise her that it would be investigated and that every effort would be made to attend to the issues within one month. The complaint was then transferred to the Emergency Department for investigation and management.

The initial investigation involved obtaining and analysing the clinical record and the Clinical Director [Dr E] interviewed the staff involved. From this investigation [Dr E] then formulated a draft response. This all took some considerable time and the pressures of the clinical workload took priority and meant that the response was not completed for some weeks.

[Mrs C] later approached a staff member from the department and expressed her disappointment and annoyance that she had received no reply from us regarding her complaints.

[Dr E] phoned [Mrs C] the next business day to apologise. He arranged to meet [Mr A and Mrs C] the following week to discuss the issues. Unfortunately [Mrs C] rang the day before the meeting was to take place saying that she could no longer meet with us, and asked that we did not contact her.

[Dr E] then completed the response letter and then sent it on to her.”

The ‘*Policy for Compliments and Complaints*’ prepared by the Quality and Risk Service in May 2000 for [the District Health Board] states:

“9. STANDARDS FOR RESPONDING TO COMPLAINTS

...

9.2 All complaints must be dealt with fairly, speedily and efficiently. Every effort is to be made to resolve complaints within 10 working days. If this is not possible, then 30 days is the maximum that resolution of non-statutory complaints should take.

Every effort must be made to respond to Commissioner’s enquiries re statutory complaints within 30 days.”

Code of Health and Disability Services Consumers’ Rights

The following Rights in the Code of Health and Disability Services Consumers’ Rights are applicable to this complaint:

*RIGHT 10
Right to Complain*

...

- 3) *Every provider must facilitate the fair, simple, speedy, and efficient resolution of complaints.*
- 4) *Every provider must inform a consumer about progress on the consumer’s complaint at intervals of not more than 1 month.*

...

Commissioner's opinion

Right 10(3) and (4): Breach

In my opinion the District Health Board breached Rights 10(3) and 10(4) of the Code of Health and Disability Services Consumers' Rights in the following respects.

The District Health Board's Policy for Compliments and Complaints (May 2000) specifies that "All complaints must be dealt with fairly, speedily and efficiently. Every effort is made to resolve complaints within 10 working days"; and that 30 days is the acceptable maximum time to resolve a complaint. I note that this is generally within the timeframes set out in Rights 10(6) and (7) of the Code.

Mrs C, supported by her husband, complained on 15 February 2001 about the treatment and care her husband received at the public hospital's Emergency Department on 10 January 2001. Ms F wrote to Mrs C on 15 February 2001 informing her that she would receive a response within the month.

This matter was passed to Dr E who acknowledged that due to the investigation process and work commitments he was unable to complete his response within the time limits imposed by the Complaints Policy.

There was no attempt made by the District Health Board to inform Mrs C on the progress of the investigation of her complaint. Mrs C did not receive a response until 20 June 2001.

The District Health Board failed to facilitate a speedy and efficient resolution of Mrs C's complaint and did not inform her about the progress of her complaint at monthly intervals. Therefore, in my opinion, the District Health Board breached Rights 10(3) and 10(4) of the Code.

I have sent your apology to Mrs C. As you have implemented my recommendations, the file has been closed.

Yours sincerely

Ron Paterson
Health and Disability Commissioner

Ref: 01HDC03353

Enc.

cc: The consumer