

Standard of care in a rest home (09HDC02110, 2 March 2012)

Rest home ~ Registered nurse ~ General manager ~ Clinical co-ordinator ~ Caregiver ~ Constipation ~ Standard of care ~ Supervision of staff ~ Clinical governance and quality systems ~ Right 4(1)

An elderly resident in a rest home became unwell with abdominal pain one morning. A caregiver reported the man's condition to the clinical coordinator, a registered nurse. The clinical co-ordinator instructed the caregiver to telephone the doctor and ask the doctor to visit the man.

The caregiver advised the doctor that the man had not had a bowel motion for three days. The doctor instructed the caregiver to assess the man's vital signs and then report back. The caregiver had difficulty assessing the man's blood pressure and pulse and advised the clinical coordinator of his concerns.

The clinical co-ordinator assessed the man, reported her assessment of the man's vital signs to the doctor and made an appointment for the man to be seen at the doctor's practice later that afternoon. The clinical coordinator then left to attend a meeting.

The man was escorted to the doctor's surgery. The doctor performed an urgent examination of the man's abdomen and diagnosed that he was seriously unwell. The man collapsed and died before an ambulance could be called.

It was held that the clinical co-ordinator was responsible for the overall management of patient care and therefore was expected to provide care at the level of a registered nurse. On the day the events occurred, the clinical coordinator did not undertake an adequate assessment of the man's condition, and failed to give the caregiver sufficient instructions for the man's care before leaving for her meeting. Accordingly, she breached Right 4(1).

The general manager of the rest home was not directly involved in the care of the man at the time. Nor was she advised by any staff member that there were concerns about the man's condition. In the circumstances, it was reasonable for the general manager to assume that the clinical co-ordinator would provide an appropriate standard of care to all residents. Accordingly, the general manager did not breach the Code.

The clinical co-ordinator and the general manager considered themselves to be overworked and not sufficiently supported to perform their duties adequately. While the rest home had a responsibility to have appropriate structures in place, it was held that there was insufficient evidence to establish that any inadequacies on the part of the rest home were sufficient to impact on the clinical co-ordinator's ability to properly assess the man and provide him with an appropriate standard of care. Therefore the rest home was not found in breach of the Code.