

Nursing care of a patient with motor neurone disease (12HDC00953, 24 February 2014)

Registered nurse ~ Public hospital ~ District health board ~ Nursing agency ~ Motor neurone disease ~ Medication administration ~ Respect ~ Abbreviations ~ Swallowing difficulties ~ Refusal of services ~ Rights 1(1), 4(1), 4(3) and 7(7)

A woman with motor neurone disease was admitted to hospital because of a sudden onset of chest pain. She was unable to speak, and communicated via an iPad. She had difficulty swallowing, which was documented numerous times in her clinical records and the handover note. Her clinical records also noted her preference for intravenous (IV) rather than oral paracetamol.

Overnight, an agency registered nurse (RN) provided care for the woman. The clinical notes, including a written handover sheet, noted that the woman had “MND” (ie, motor neurone disease). The RN did not recognise the abbreviation “MND” and did not take steps to find out what it meant. However, the RN said that she read the clinical notes during the shift. The notes clearly stated that the woman had motor neurone disease.

The woman rang the bell because she needed to go to the toilet. The RN assisted the woman to the toilet and back to bed. The woman asked for pain relief, and the RN offered her paracetamol elixir. The woman wrote on her iPad that she required IV paracetamol and could not swallow elixir. The RN administered IV paracetamol.

Later the woman again needed to go to the toilet and was assisted by the RN. The woman requested more pain relief, and the RN again brought paracetamol elixir. The woman indicated that she could not take it, but the RN administered some of the elixir into the woman’s mouth. During administration of the elixir, the woman felt as though she was choking. Later the RN returned with IV paracetamol, but did not flush the luer and, after administering the paracetamol, threw the syringe on the woman’s bed and walked away.

It was held that the RN’s conduct and manner towards the woman were unkind and unprofessional. Her behaviour demonstrated a lack of respect for the woman and, as a result, the RN breached Right 1(1). The RN should have been aware of the woman’s diagnosis of motor neurone disease and familiarised herself with the woman’s needs and preferences in order to provide safe care to her. The RN’s failure to take those steps meant that she failed to provide services in a manner consistent with the woman’s needs and breached Right 4(3).

In addition, by failing to flush the woman’s luer prior to administering IV paracetamol the second time, the RN failed to provide services with appropriate care and skill and, in doing so, breached Right 4(1). In disregarding the woman’s refusal to take paracetamol elixir, the RN breached Right 7(7) of the Code. She was referred to the Director of Proceedings. The Director decided not to issue a proceeding.

It was held that that neither the district health board nor the nursing agency breached the Code.