



Northern Ireland

Public Services

Ombudsman

Investigation of a complaint against the Belfast Health & Social Care Trust

Report Reference: 202004213

The Northern Ireland Public Services Ombudsman

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The Role of the Ombudsman

The Northern Ireland Public Services Ombudsman (NIPSO) provides a free, independent and impartial service for investigating complaints about public service providers in Northern Ireland.

The role of the Ombudsman is set out in the Public Services Ombudsman Act (Northern Ireland) 2016 (the 2016 Act). The Ombudsman can normally only accept a complaint after the complaints process of the public service provider has been exhausted.

The Ombudsman may investigate complaints about maladministration on the part of listed authorities, and on the merits of a decision taken by health and social care bodies, general health care providers and independent providers of health and social care. The purpose of an investigation is to ascertain if the matters alleged in the complaint properly warrant investigation and are in substance true.

Maladministration is not defined in the legislation, but is generally taken to include decisions made following improper consideration, action or inaction; delay; failure to follow procedures or the law; misleading or inaccurate statements; bias; or inadequate record keeping.

The Ombudsman must also consider whether maladministration has resulted in an injustice. Injustice is also not defined in legislation but can include upset, inconvenience, or frustration. A remedy may be recommended where injustice is found as a consequence of the failings identified in a report.

Reporting in the Public Interest

This report is published pursuant to section 44 of the 2016 Act which allows the Ombudsman to publish an investigation report when it is in the public interest to do so.

The Ombudsman has taken into account the interests of the person aggrieved and other persons prior to publishing this report.

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Case Reference: 202004213

Listed Authority: Belfast Health and Social Care Trust

BACKGROUND

1. The complainant attended the Emergency Department (ED) in the Mater Hospital on 11 February 2023 at approximately 18.53. The complainant presented with rib pain due to a fall a few days previously with his friend landing on top of him. Following a x-ray a clinical diagnosis of rib fractures was made. Analgesia was the first line of treatment.

THE COMPLAINT

2. The complainant raised concerns that he was not treated adequately as he was not progressed to another department for further treatment. The investigation will consider the following issue of complaint:
 - Whether the care and treatment the Trust provided to the complainant at the ED on 11 February 2023 was appropriate and in accordance with relevant standards.

INVESTIGATION METHODOLOGY

3. To investigate the complaint, this office obtained from the Trust all relevant documentation together with its comments on the issues the complainant raised.

Independent Professional Advice Sought

4. After further consideration of the issue I obtained independent professional advice from the following independent professional advisor (IPA):
 - A Consultant in Emergency Medicine (MD, MPH, FRCEM) with 21 years' experience (C IPA).

ANALYSIS

The Trust response

5. The Trust stated the complainant presented to ED via ambulance at 18.53 on 11 February 2023. Triage was performed at 18.58. The presenting complaint was pain to the left side of his chest wall following a friend falling on him two days previously. Observations were unremarkable aside from a mildly elevated heart rate at 94. In accordance with the Manchester Triage system¹ the complainant was triaged as Category 3.

6. A Doctor examined the complainant at 22.15. He noted the presenting complaint to be that a friend had fallen onto his chest two days prior to his attendance. The complainant stated he was tender over the left chest wall. The complainant denied shortness of breath, temperature, cough or central chest pain. On examination he had equal expansion on palpation² of his chest wall with mild bruising noted to left lateral chest wall.

Relevant Independent Professional Advice

7. The C IPA advised following a call made to the Northern Ireland Ambulance Service on 11 February 2023 an ambulance attended the complainant at 17.50. The complainant was noted to complain of '*rib pain*' due to a fall a few days previously with '*his friend landing on top of him.*'

8. The C IPA advised the complainant attended ED on 11 February 2023 at 18.53. A nurse undertook triage of the complainant at 18.58 with a presenting complaint of '*states friend fell onto him two days ago, larger gentleman. Pain on aspiration and to touch left side of ribs.*' A Doctor subsequently examined the complainant at 22.15. The history noted is similar to the history obtained by the Ambulance Service and at triage. In addition there is a documented examination of the complainant at this time. Of note on examination, positive findings were bruising to the left lower chest with an otherwise unremarkable examination.

¹ All patients arriving to ED undergo a structured procedure to assess their urgency. The Manchester triage system make use of an assessment of the patient's presentation and symptoms

² A method of feeling with fingers or hands during physical examination.

9. The C IPA advised at triage physiological observations were undertaken and were within normal limits. The complainant also underwent a chest x-ray and there was no radiological evidence of rib fracture, or significant pathology. The radiologist's subsequent review of the chest x-ray was reported as normal. An electrocardiogram (ECG) was conducted at 19.07 on 11 February 2023 which showed a normal sinus rhythm with a rate of 72 beats per minute. In addition, the complainant '*was offered appropriate analgesia and given clear discharge advice, with worsening advice also.*'

10. The C IPA advised '*the assessment, examination and treatment of the patient is entirely appropriate and of a high standard. The treatment plan for the clinical diagnosis of a rib fracture is appropriate and in keeping with the guidance supplied by the Trust.*'

Relevant Guidance

11. I viewed the guidance Initial Evaluation and Management of Rib Fractures and note the following relevant sections:
 - ***Chest radiographs (all patients)*** — *In patients with suspected rib fractures or chest wall trauma, chest radiographs (CXRs) are obtained primarily to rule out associated injuries (eg, pneumothorax, hemothorax) with a secondary goal of confirming the presence of rib fractures.*

 - ***Analgesia and pulmonary hygiene*** — *The cornerstone of rib fracture management is pain control once significant associated injuries have been evaluated and treated.*

Early and adequate pain relief helps avoid pulmonary complications (eg, pneumonia) from splinting and atelectasis. The choice of analgesia depends upon the injury, the clinician's comfort performing nerve blocks, and the ease with which more invasive treatments can be performed. Analgesia for isolated rib fractures (ie, one or two ribs) includes nonsteroidal anti-inflammatory drugs (NSAIDs) with or without opioids.

CONCLUSION

12. I considered whether the care and treatment provided to the complainant was appropriate.
13. The medical records demonstrate the complainant was triaged, seen by the Doctor and underwent a chest x-ray, which was reported as normal. The complainant was offered analgesia and given discharge advice which included what to do if the pain became worse.
14. The C IPA advised *“the assessment, examination and treatment of the patient is entirely appropriate and of a high standard. The treatment plan for the clinical diagnosis of a rib fracture is appropriate and in keeping with the guidance supplied by the Trust.* I accept this advice.
15. Overall, the investigation found the Trust’s actions in relation to the care and treatment the complainant received in ED was appropriate. I do not uphold this complaint.
16. I hope this report has provided reassurance to the complainant the care and treatment provided to him on this occasion was appropriate.

MARGARET KELLY
Ombudsman

October 2024

PRINCIPLES OF GOOD ADMINISTRATION

Good administration by public service providers means:

1. Getting it right

- Acting in accordance with the law and with regard for the rights of those concerned.
- Acting in accordance with the public body's policy and guidance (published or internal).
- Taking proper account of established good practice.
- Providing effective services, using appropriately trained and competent staff.
- Taking reasonable decisions, based on all relevant considerations.

2. Being customer focused

- Ensuring people can access services easily.
- Informing customers what they can expect and what the public body expects of them.
- Keeping to its commitments, including any published service standards.
- Dealing with people helpfully, promptly and sensitively, bearing in mind their individual circumstances
- Responding to customers' needs flexibly, including, where appropriate, co-ordinating a response with other service providers.

3. Being open and accountable

- Being open and clear about policies and procedures and ensuring that information, and any advice provided, is clear, accurate and complete.
- Stating its criteria for decision making and giving reasons for decisions
- Handling information properly and appropriately.
- Keeping proper and appropriate records.
- Taking responsibility for its actions.

4. Acting fairly and proportionately

- Treating people impartially, with respect and courtesy.
- Treating people without unlawful discrimination or prejudice, and ensuring no conflict of interests.
- Dealing with people and issues objectively and consistently.
- Ensuring that decisions and actions are proportionate, appropriate and fair.

5. Putting things right

- Acknowledging mistakes and apologising where appropriate.
- Putting mistakes right quickly and effectively.
- Providing clear and timely information on how and when to appeal or complain.
- Operating an effective complaints procedure, which includes offering a fair and appropriate remedy when a complaint is upheld.

6. Seeking continuous improvement

- Reviewing policies and procedures regularly to ensure they are effective.
- Asking for feedback and using it to improve services and performance.
- Ensuring that the public body learns lessons from complaints and uses these to improve services and performance.