

Complaint case study (December 2019)

Ms D raised a complaint with the Trust regarding her partner's poor experience when he attended the Emergency Department (ED) with a hand injury

Ms D explained that her partner attended the ED with a crush injury to 3 fingers and a deep laceration (open wound). He was given pain relief and the triage nurse wrapped his hand in gauze. The gauze subsequently came undone and when Ms D asked a nurse for help with it, a nurse responded 'Do it yourself'. Ms D complained about the lack of assistance provided and explained that this has been a traumatic experience for her.

Her partner was taken for an x-ray and seen by the doctor. They were told that there was no damage to the bones in his fingers. An appointment was arranged for the patient to attend the specialist outpatient clinic and his hand was dressed. The patient was discharged with antibiotics.

When the patient attended the outpatient appointment, staff there raised concern that the dressing was inappropriate and that, because nothing had been used underneath the gauze applied, the dressing had become stuck to the wound. The patient was asked if the wound had been cleaned when he attended ED, which it had not. The patient was then advised that the x-rays taken showed that two of the bones had been damaged.

Ms D raised complaints about the lack of help shown by the ED nurse, that incorrect dressing were used and that the x-rays had been interpreted incorrectly.

Our findings

This complaint was investigated by the ED Matron and the Consultant and Clinical Lead for Tunbridge Wells ED. The complaint was upheld.

Unfortunately, the matron was unable to establish which member of nursing staff suggested that Ms D should dress the wound herself. Apologies were offered for this and for the poor service experienced in this respect. Following the complaint, the ED practice development nurse organised minor injury study days for all new staff, including teaching on dressings and documentation of care. Staff were also reminded to seek advice from the nurse in charge or contact the specialist centre if they were unsure how to manage a wound.

The patient's hand was examined by the ED doctor, who also reviewed the x-rays and sought a second opinion from a senior colleague. They concluded that there were no fractures and no loss of sensation (which would indicate nerve damage). Apologies were offered that the fractures to the tips of the middle and ring finger were not identified when the patient attended the ED. The ED doctor discussed the case with his educational supervisor for learning.

The ED doctor photographed the wound and sent the images to the specialist centre for advice from the plastic surgery team. They advised cleaning and dressing the wound, prescribing antibiotics and for the patient to be seen in their outpatient clinic in a couple of days. As part of the investigation, comments were sought from the specialist centre. They advised that nothing was recorded in the patient's notes with regards to the type of dressing applied in the ED or if there was any difficulty in the dressing being removed.