

SPSO decision report



Case: 201707698, Greater Glasgow and Clyde NHS Board - Acute Services Division
Sector: health
Subject: clinical treatment / diagnosis
Decision: upheld, recommendations

Summary

Miss C complained about the care and treatment she received from a podiatrist (a physician who specialises in the study and medical treatment of disorders of the foot, ankle and lower extremity) at Glasgow Royal Infirmary for pain in her foot. Miss C said that the way the podiatrist handled her foot caused damage to it. Miss C also said that she was told she would be referred for an ultrasound guided steroid injection and that the podiatrist would follow up on this and ensure something was in place by her next podiatry appointment, but this did not happen.

We took independent advice from a podiatrist. Although it was not possible to determine exactly how the podiatrist handled Miss C's foot, we found that the evidence suggested that the initial manipulation/mobilisation treatment by the podiatrist did cause a flare up of Miss C's symptoms. This was accepted by the board and the podiatrist involved. The board said that the podiatrist apologised, however, there was no record of this. We noted that it would be reasonable to expect that mobilisation/manipulation might create an increase in symptoms, however, there did not appear to be any evidence that Miss C was informed of this or a record of her consent to the treatment. We also found that there were no treatment notes for any of Miss C's appointments.

In terms of the ultrasound guided steroid injection, it appeared that the podiatrist's referral letter for this was not received by the rheumatology department (the branch of medicine specialising in rheumatism, arthritis, and other disorders of the joints, muscles, and ligaments) due to a system failure and this might have resulted in a delay in Miss C's treatment. Therefore, we upheld Miss C's complaint. However, we noted that the podiatrist apologised to Miss C for the length of time it took for review by some of the departments involved in her treatment. We found no evidence that Miss C was advised that the podiatrist would follow up on the steroid injection prior to her next appointment.

Recommendations

What we asked the organisation to do in this case:

- Apologise to Miss C for failing to advise her that mobilisation and manipulation treatment could have the potential to exacerbate her symptoms, to obtain her consent for such treatment and adequately document this and for the failure in the referral process. The apology should meet the standards set out in the SPSO guidelines on apology available at www.spsso.org.uk/leaflets-and-guidance.

What we said should change to put things right in future:

- Patients who are to receive mobilisation and manipulation treatment should be advised that the treatment can have the potential to exacerbate symptoms, where appropriate, their consent obtained and the information should be documented. There should be appropriate treatment notes for patients' appointments with podiatrists.
- The board should have a robust process in place for such referrals from podiatry to rheumatology.