

Hampshire **NHS**  
Primary Care Trust

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Email Address: Code A

21 November 2008

Ref: NSE0837

**PRIVATE AND CONFIDENTIAL**

Mrs S Marlow

**Code A**

Dear Mrs Marlow

Thank you for your letter dated 14 October 2008, in which you raise concerns regarding the care your father, Mr Thomas Peel, received whilst he was an inpatient at the Gosport War Memorial Hospital (GWMH). Firstly, I would like to offer my sincere condolences following the death of your father.

Hampshire Primary Care Trust (PCT) takes all complaints seriously and views them as an opportunity to review and improve our service. The concerns that you have raised have been investigated by the Clinical Manager of Sultan Ward, and shared with me.

Mr Peel was admitted to Sultan Ward with a number of medical issues, the most significant being his diagnosis of malignancy, diabetes and the prognosis that he may require palliative care, although I understand that he was still being actively treated with medication at that time. I also believe that Mrs Peel was finding things difficult to manage at home.

The main issues raised in your letter were as follows:

1. Mr Peel's nutritional requirements
2. Catering facilities within the Hospital
3. Attitude of a member of staff
4. Clinical care following Mr Peel's fall

**Mr Peel's nutritional requirements**

In your letter you mention the fact that Mr Peel had oral thrush, which made eating difficult, and as a family it seemed appropriate to provide foods that Mr Peel enjoyed. Whilst I agree that this may have seemed the best option to enable your father to eat, I am told that his diabetes at that time was uncontrolled and the nursing staff correctly tried to rectify this by modifying the amount of carbohydrate and sugary food that Mr Peel was eating. I do feel the nurses acted appropriately, as Mr Peel's blood sugars were consistently high, which can lead to a coma if left untreated. However, if the doctors were happy for Mr Peel to have these foods, this needed to be communicated and discussed within the multidisciplinary network, and this is an action point that the team need to learn from.

### **Catering facilities within the hospital**

With regard to the allocation of milk, the ward has an allocation of milk as provided by the catering department. I understand that you wished to bring some milk in for your father, and I am sorry that you were treated insensitively when you tried to enter the kitchen. This issue will be raised at the next staff meeting and it will also be ensured that there is suitable signage on the ward so that patients and relatives are aware of the areas that can be accessed. It is acknowledged that a sandwich may not have been appropriate to your father's nutritional need and as a result the Clinical Manager will be implementing a policy as a working draft to ensure that the nutritional needs of patients are being met.

### **Attitude of a member of staff**

Both the Clinical Manager and I agree that the attitude of one of the nurses towards your daughter which you describe in your letter, whilst she was assisting Mr Peel to the toilet, is wholly unacceptable. We do actively encourage relatives to become involved in the care and welfare of their loved ones, but need to assist and support families at all times. All the concerns you have raised regarding staff communication have been discussed fully with the Clinical Manager, and will be actioned at an open forum session in the next staff meeting.

### **Clinical care following Mr Peel's fall**

On consultation of the medical notes, it is documented that on 11 September 2008, Mr Peel was mobilising to the toilet, with the supervision of a nurse and his walking aid, but fell to the floor sustaining injuries to his knees. Mr Peel was thoroughly checked by both nursing staff and a GP following this incident. It is always distressing to see relatives with any injury sustained from an accidental fall. The medication that Mr Peel had been prescribed may have also contributed to his skin fragility. However, I would like to apologise that you had not been fully informed of the event, and consequently unprepared for how your father presented to you that day.

Mr Peel's medical deterioration, prior to his pending transfer to Thalassa Nursing Home, was swift. His prognosis of being well enough to be transferred to a nursing home changed rapidly to palliative treatment on the ward. The Clinical Manager and Modern Matron are satisfied that Mr Peel and his wife were fully involved in all the decisions made regarding Mr Peel's end of life care, and they would like to offer their sympathy to you and your family at this sad time.

I would like to apologise unreservedly for the distress caused to both you and your family during this time. I would like to give my assurance that your concerns are being fully addressed by the Clinical Manager and Modern Matron of Sultan Ward to prevent a similar situation arising in the future.

I do hope that you feel the above explanation has fully addressed the concerns that you raised in your letter. However, if there are any issues that remain unresolved or if you have any queries regarding any of the points mentioned above, please do not hesitate to contact the Customer Services Team on 01252 335165.

You also have the right to ask the Healthcare Commission to review your case should you remain dissatisfied following any further investigation. This should be done within 6 months of the conclusion of local resolution. You can contact the Healthcare Commission on **0845 601 3012** or write to them at: **The Healthcare Commission, Complaints Team, Peter House, Oxford Street, Manchester, M1 5AX** or visit them at [www.healthcarecommission.org.uk](http://www.healthcarecommission.org.uk).

Yours sincerely

**Code A**

Gareth Cruddace  
Chief Executive

Complaints Office  
Harness House  
Aldermaston Road  
Basingstoke  
Hampshire  
RG24 9NB

Mrs S Marlow

**Code A**

14<sup>th</sup> October 2008

Dear Sir/Madam

My father, Mr. Thomas Peel [Code A] recently had the misfortune to be admitted to Sultan ward at Gosport War Memorial Hospital, for respite care. "Care" is the last word I would use to describe how he was looked after. He was admitted on 3<sup>rd</sup> September, and almost straight away, there were issues surrounding his needs. He was suffering from cancerous brain lesions, and as such, was not expected to live for many more months. He also suffered from amongst a host of other things, diabetes. He also had a severe case of oral thrush, which made eating a painful affair. He obviously found soft sweet foods attractive and easy to eat, but when my daughter brought him in cream cakes, and a trifle, she was admonished by staff for doing so, citing his diabetes as a reason. She then sought advice from the Doctor on the ward, who was quite happy for my father to eat whatever he wanted, considering his condition and life expectancy.

I was in the habit of bringing him in milk, as this item almost always seemed to be short supply. My father was fond of milky drinks, but there was never enough to go around, a dash in a cup of tea was considered a luxury. I made the mistake of entering the kitchen area once, to place some milk in the fridge, and was given a telling off for doing so. Apparently this area is out of bounds for visitors, and is only for staff and patients. Quite frankly, considering the condition of most of the patients, I would have thought that they would have been a distinct liability in that area. My father was not capable of walking very far, and so would have had to request a member of staff to fetch whatever he had in the fridge, something I cannot imagine would have gone down too well as the staff seemed to have difficulty in attending to even his most basic needs.

There also seemed to be a distinct lack of thought given to patients needs in regard to food offered – despite my father being asked what he wished to eat for tea on one occasion, he was presented with a corn beef sandwich. Needless to say it could not be eaten, but no alternative was offered.

I arrived one day on the ward to find my daughter waiting by the patients' toilets for my father. He had needed to visit the lavatory, and a member of staff had told him "to hang on, I am busy with another patient". That was the last thing he was capable of. He was lying in a bed, surrounded by three other patients, plus their visitors, and would have been deeply embarrassed to have had an accident, so my daughter escorted him to the toilet, which is where I found her waiting. She then asked through the door if he was okay, to which he answered that there was no toilet paper. She dutifully went to the nurses' station, hoping that someone would assist her. They did, but not in the way she or I imagined – she was presented with a roll of toilet paper, to which she retorted that it was surely their job to attend to that department, which they then did.

The final straw came on Friday 12<sup>th</sup> when my father had been escorted to the lavatory, and had fallen, despite being supposedly supervised. The exact details of how this occurred, I have never fully discovered. When I visited my father later that day, I was horrified at the state I found him in. His arms were severely bruised and he himself was considerably shaken, and as such his speech was very slurred. When pressed as to how this had happened, he made a hand action to imitate talking, which I took to mean that he was not being given full attention by whoever was with him.

17-OCT-2008 09:36 FROM:

01256376481

TO: 901252335101

P.S

He had been offered a place at Thallassa Nursing Home, in Gosport, and was very much looking forward to going there on Tuesday 16th September, because as he said to my mother on the Sunday (14<sup>th</sup>), he was desperate to get out of here, meaning the War Memorial, as "they're killing me in here".

How prophetic – he died at 7.00am on Tuesday 16<sup>th</sup>, his death I believe hastened by the appalling so called standard of "care" in that hospital.

I await your comments.

Mrs S Marlow

**Code A** (home)  
(work)

**Mcbride, Annette**

**From:** [Code A] [Code A]  
**Sent:** 21 November 2008 14:03  
**To:** [Code A]  
**Subject:** Complaint response - Mrs M

**Importance:** High



Letter of complaint.pdf (1 MB). Draft response v4.doc (84 KB)

Dear Annette

Please find attached the final response to the complaint received from Mrs Marlow, regarding her father, Mr Peel. The response has been drafted by [Code A] and approved by both Elizabeth Emms and Sue Harriman.

Please could you now forward the response to Gareth for signature and send a signed copy to me for the file.

Also attached is the original letter of complaint from Mrs Marlow.

Thank you.

Regards

[Code A]

[Code A]  
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Thank you.

2008 marks the 60th anniversary of the NHS. It's an opportunity to pay tribute to the NHS staff and volunteers who help shape the service, and celebrate their achievements.

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