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Ref Gladys Richards DOB

Code A

Tuesday 11th Aug. 98 Admitted from Hasker. Able to walk Pain free
 Wednesday 12 Generic instead. Oramorph given (Knocked off) so no funds could be
Thursday 13 Aug. given. Thought her distress was Pain.

Seen to be in pain by Granddaughter. Mrs Reed 1.30 - 2.15pm

Brought to ward Staff's attention. Thought to be dementia th.
 Mother showing with pain to ward that there had great pain in hip. For you

- ① At what time did Mrs Richards feel? info Mrs Reed is a qualified Nurse th.
- ② Who attended to her.
- ③ who moved her and how.
- ④ 3.45 - 4pm.
 I arrived and saw my mother was in pain. Anxious expression, weeping - calling out. I spoke to several trained and untrained staff. I was told - There is nothing wrong - it's her dementia & I asked had she seen a Doctor? Could she be X-rayed? At supper time while my mother was quiet and I was reasponing her some soup I was asked "Do you think your mother is in pain?" by RN doing the drug round. "Not at the moment while I'm feeding her?" I said "Well you said she was in pain". "Yes" I said "she has been very uncomfortable" since I got here". "Do you think she has done some damage?" "No" she only fell on the bottom from the chair" I stayed till 7.45pm by mother was in great distress throughout.

At 9.30pm. I received a phone call from the ward.

"When we put your mother to bed she was in great pain and she may have done something. The Doctor feels its too late to send her to Hasker and our X-ray unit is closed. We will give her Oramorph for the night to keep her pain free and X-ray her in the morning."

This was an avoidable delay. Why? Any lay person could have seen she was hurt by the angle of her thigh & leg to FRIDAY 14th. I arrived as she was taken to X-ray

some peers at the company by our team soul "No need
that she would be going AM. I asked if I could
be recommended. I rang him at 8.30am to be
seen early as Friday when things had
been managed.
She packages in Sunday and was easily
lured and in fact because well acceptable.
for herself she ate and drank and it didn't
hurt a minute for the time and weight loss
was dramatic. No change was required - she was able
but legs hurt and thought shown to me by
the remains part free in full length leg split.
All my outfit since before Xmas in life.
she slipped on the road a dip as she had her
she was then unable to lift the leg need to
due to amount of muscle fatigue from the procedure.
She did our regular exercises in the room (is) in the
house.

to put the hip back in the socket how the she was pain
She arrived at Hessle and will in the had a manipulation
to put the hip back in the socket how the she was pain
to do what why no transfer? ⑥
Hessle open day. Why us examine? why
Q.W.H-
Xrays and position of hip - when I had seen
casually. He then said we. He showed me the
examiner. The examiner was blase. He said "It's in
the same place as Hessle. Let's have a look." She was
told - "You're worry fears of less' might appear to be true.
Office by Philip - word manager and Dr Ballin
we dedicated to the word. I was asked in to the
I stayed with his to comfort her.
She was X-rayed. The movement caused pain and
she was deeply unwell with nausophy.
Dreadfuls. ⑦

(3)

"She is fine." I went to G.W.H about 10.45am and was told the ambulance was due about mid day. I arrived back at 12.15 mid day.

On entering through the swing doors to the ward I heard my mother screaming. On arrival to the room a care assistant said "You try feeding her I can't do it she is screaming all the time". My mother had a suffering anxious expression. She was gripping her RV high up site tightly. She uttered the words "Do something do something the pain the pain - don't just stand there - I don't understand it the pain the pain sharp sharp - this is some adventure". A SRN came into the room at all the noise. I moved the sheet and said "look at the awful position she is in, she was lying awkwardly towards the left side with the full length split not straight and the hips uneven. She cried in pain. I said to the RN "can we please move her" We moved her together with our arms together under her lower back and the other around her thighs we placed her squarely on her buttocks and within minutes she stopped the screaming.

(7) Why when returned to bed from the ambulance was her position not checked?

Why was the source of pain not sought? From 1pm onwards the Charge Nurse Manager frequently checked my mother. He acknowledged our concern. He acknowledged her obvious pain. We asked for X-rays. We asked what had happened between leaving Haslar and back into her bed at G.W.H. It was acknowledged that "something" had happened

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The charge nurse was concerned for the pain and analgesia was given 3 times before his admission at 6pm.

Phillip's ward manager agreed she needed X-ray to establish if damage had been done or had occurred to the hip.

X-ray Dept refused forms signed PP for the DR who was unavailable.

An appointment for X-ray was made for 3.45pm as the DR called was expected at about 3.15pm. The charge Nurse did all he could to expedite this - keeping us informed and constantly checking. Father's obvious severe pain. He administered pain very in readiness for the X-rays. He was considerate and attentive at all times.

DR Barton arrived and we left the room as asked. She examined my father. She stated she did not think there was full dislocation but the X-ray would go ahead. A review would be held later when X-rays had been seen.

We went to X-ray. My mother was in pain despite her pain relief. I was not allowed in with her as I was the previous week. I could hear her wailing through the doors while the X-ray plates were put in place. We returned to the ward. We were told there was no dislocation but obviously something had happened. We were told she would be given Bromoph for the pain hourly through the night for pain relief and reviewed in the morning.

On Tues 18 we arrived on the ward and were told she had had a peaceful night. We were told that she had a massive haemorrhage causing pain at the op site.

(5)

and the plan of management was to use a syringe driver to ensure she was pain free and she would not suffe when she was washed - used a changed sheet & she became incontinent.

The outcome of the use of a syringe driver was explained to us fully. We agreed.

A little later Dr Barton appeared and confirmed that a haematoma was present and that this was the kindest way to treat her. She also stated "and the next thing will be a chest infection". Totally insensitive to those already in the first stages of bereavement. Because the syringe driver was essential following the night of analgesia for pain - my mother of course would now regain consciousness, speak, open her eyes to see us, or hear anything anymore. To us Mother as we know her is already gone.

(8) How was she brought from Haslar? Was there an escort? Was anyone in the car with her? When did she start to show pain? What caused it? (9) I request again to see the last X-rays even though we made to do nothing but allow to die patient. Answers to the numbered questions are sought in greater detail. (1-9) please.

Trivial things added to our trauma. Her clothing already cash's name tags marked. - had all gone the day after ISV admission for marking - despite my agreeing to do the washing daily. So she wore other peoples clothing from then on (8 days) continually.

Asking to remove, to insisting today that Mother be allowed to wear her own clothes has resulted in item being brought by taxi from SR Hys 8 days later - still unmarked and all totally unnecessary. - as was a staff Nurse yesterday asking to take her day clothes away - "because we get them up here you know". Our reply was - Just look at her - she will not be getting up anywhere.

The contents of events in this report were in the majority witnessed by my older sister Mrs Mackenzie.

Stay back.

* It should be noted that on Monday 17th I left my sister at G.W.H. and went to Hasker about lunchtime. I was so appalled at my mother's condition discomfort and severe pain. I went to the ward E3 and asked how my mother was when she had left the ward. I asked because when I had spoken to the ward on the phone that morning they said the consultant was happy to send her back to G.W.H. She was eating, drinking, using commode and able to stand if aided. This was Monday 17th am. On leaving the ward I bumped into the DR who had been in Casualty Theatre for my mother's second operation. He was with the consultant when all the procedures were explained to me on Friday 14th. He said "How's your mother?" I explained in detail. He said "We've had no refusal. Get them to refer her back. we'll see her." ~~I said I had asked you to transfer her to another hospital but~~ ~~I~~ ~~it would be referred on Friday but~~ I told him she was in severe pain since the transfer.