

Hugh Williams

From: Charles Farthing; Code A
Sent: 15 August 2008 09:38
To: Hugh Williams
Subject: General Medical Council
Attachments: INH-CRSF (23 Nov 98) 2 of 20001.pdf; INH-CRSF (23 Nov 98) 1 of 20001.pdf; CRSF-INH (23 Sep 98) 2 of 20001.pdf; CRSF-INH (23 Sep 98) 1 of 20001.pdf

Dear Hugh,

Further to our conversation yesterday afternoon, please find attached the first (1) of three packages of information sent separately to keep the contents together and to minimise file size.

They are:

- (1) Letters relating to my complaint to Inspector of Nursing Homes
- (2) Letters relating to my complaint to the Portsmouth Health Care Trust
- (3) Letters relating to my complaint to the General Medical Council

I hold many other related letters concerning (3), written by Eversheds and later Field Fisher Waterhouse.

With kind regards,
Charles Farthing



Portsmouth and
South East Hampshire

Health Authority

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Code A

JT/CH

23 November 1998

Mr C R S Farthing

Code A

Dear Mr Farthing

Re: Thalassa Nursing Home

I am now in a position to respond to your complaints in regards to the care received by Mr Cunningham whilst he was a patient in the above nursing home.

There is no dispute that Mr Cunningham was admitted to Dryad Ward, Gosport War Memorial Hospital, for treatment of a pressure sore on the 21 September 1998.

From your letter, it would appear that your complaint was raised following a discussion with a registered nurse who informed you that Mr Cunningham should have been admitted to hospital two weeks previously and in her opinion, had she allowed a pressure sore to develop to 50% of Mr Cunningham's, she would have been dismissed. The identity of this registered nurse whilst known to you, has not been declared to the Registration & Inspection Unit.

Therefore, in view of these comments, the nursing notes from the Nursing Home and Day Hospital have been viewed in order to ascertain:

- a) When the pressure sore developed.
- b) The actions taken by nursing staff.
- c) Was there any medical intervention prior to Mr Cunningham's admission on 21 September 1998.

The nursing notes have confirmed:

- a) The nursing notes record that on admission to Thalassa Nursing Home on 28 August 1998, Mr Cunningham had a dressing to his sacral area and that the skin was intact but red. The nursing staff in their assessment have concluded that tissue damage had occurred.

- b) The care plan and nursing notes identify that pressure relieving equipment was used and actions taken to ensure that Mr Cunningham did not have constant pressure to the affected area. Later nursing notes identify that the original pressure relieving mattress used was replaced by a Quatro Mattress which is an electronic air mattress.
- c) Mr Cunningham attended the Day Hospital on 14 September 1998 and although the pressure sore was not viewed by medical staff, nursing staff attended to the wound. A further attendance on 17 September 1998 noted that the wound was not re-dressed but it was noted that there was excudate present. On his third visit, Mr Cunningham was admitted for "aggressive" treatment to the pressure sore.

In viewing these notes, any comments passed have to be based on whether the notes indicate that actions/interventions undertaken by staff are reasonable.

Therefore, the notes would indicate that there was no medical advice sought from the time Mr Cunningham was admitted to Thalassa until he came under the care of the Day Hospital. However, the nursing notes give no indication that medical intervention was necessary. From the notes, it is apparent that the wound began to deteriorate following the visit to the Day Hospital on the 17 September 1998. When Mr Cunningham was admitted to Dryad Ward, the nursing home was requested to hold the "bed" for 2/3 weeks. From past experience when a patient is admitted to hospital for whatever reason and this request is made, it is because there is every intention for the patient to return. Additionally, I also have to acknowledge that there were occasions when Mr Cunningham refused or was reluctant to accept care.

The copy of the Death Certificate that you kindly forwarded to me states clearly that Parkinson's Disease and Sacral Ulcer are other significant conditions contributing to the death but not related to either the disease or condition causing it which was Bronchopneumonia. This is acknowledged as fact.

Therefore your complaint that Mr Cunningham was admitted to hospital with a pressure sore is substantiated. In regards to the comments made to you by a senior member of the nursing team of Dryad Ward, whilst this was a professional opinion at the time, the nursing notes made at Thalassa Nursing Home show that reasonable care and attention was given to Mr Cunningham whilst he resided there. I am not in a position to state whether the admission should have occurred earlier than it did as when a decision was made it was based on the clinical evidence at the time. Therefore I am unable to comment on the professional opinions given by the staff concerned.

I appreciate that you may find this response unhelpful in answering your complaint but feel that you have been given an account of the findings from the nursing notes in relation to your complaint.

If I can be of further assistance, please do not hesitate to contact me.

Yours sincerely

Code A

Jackie Tarrant (Mrs)
Nursing/Residential Care Home Inspector

Tel. Code A

*Note sent on 29/9 informing of
Brian's demise on 26/9.*

Tel: Code A

Code A

23 Sep 98

Inspector of Nursing Homes
Finchdean House
Milton Road
Portsmouth
PO16 8SF

FAO: J Tarrant

Dear Sir/Madam,

Re. BRIAN CUNNINGHAM

I refer to my telephone conversation this morning with Jackie Tarrant relating to the very unsatisfactory circumstances associated with my step-father, Brian Cunningham.

A broad outline of events is that he was admitted to the War Memorial Hospital in Gosport two days ago with chronic pressure sores after only about 3/4 weeks in Thalassa Nursing Home, Western Way, Alverstoke. This followed a period of some 3 weeks in the same hospital for assessment of his nursing needs, and resulted in an upgrading from residential to nursing care. I'm sorry I cannot be more precise about dates which is due to my absence abroad when he was moved from hospital to nursing home. Further details, however, should be forthcoming should you contact his social overrser, Mr Sean Golding, at Gosport Social Services Dept

Code A

GILL HAMBLIN

Without naming individuals at this stage, I was given the very clear impression by the duty nursing staff whom admitted him that his condition was so serious it was unlikely he could survive - and how right that prediction seems to have been when now he is virtually incommunicado and living on serial morphine. In the opinion of a senior member of the nursing staff, he was so bad she firmly believed she would have been dismissed for allowing things to deteriorate to even 50% of what she saw, and thought he should have been admitted to hospital as much as 2 weeks before he was.

It goes without saying that things do not seem to be in order somewhere down the line of responsibility, and I would therefore ask that the matter be thoroughly investigated and reported upon.

I should perhaps mention that Mr Cunningham was severely disabled in the 39-45 war, and had poor mobility. Also, he has suffered progressively from Parkinson's Disease

for the last 10-12 years. He had learnt to live with both conditions, and was reasonably healthy on 10 Sep which was the previous occasion my wife and I last saw him, although he mentioned to my wife then that he "had a sore behind" and that his GP was due to see him in a day or so.

I am sure you will hear that Mr Cunningham was never the easiest of people to please, I am well aware of that, and no doubt you will hear much about his unseemly behaviour. Whatever the facts, as I am sure you will agree, he most certainly did not deserve to be treated like this.

I look forward to hearing from you in due course.

Yours faithfully,

Code A

C R S Farthing