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### Exploring healthcare negligence: A nurse researcher's journey in a developing country

**Statement of the Problem:** In Cape Town, South Africa, little if any educational preparation is available for nurses embarking on the role of expert nurse witness in medical negligence lawsuits. Until recently litigation was prevalent in the private healthcare sector but recently healthcare consumers in the public sector are becoming litigious, with consequences for the national health budget.

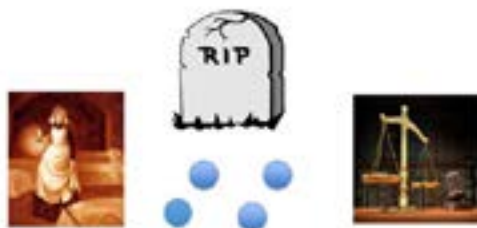
The purpose of this paper is to describe a personal journey of research into patient safety with particular reference to the development and testing of an early warning scoring (EWS) vital signs observations chart for general medical and surgical wards for recognition of early signs of clinical deterioration. In some instances of reported healthcare negligence, exploration is best achieved using aspects of the Root Cause Analysis (RCA) approach.

**Findings:** The modified EWS (MEWS) designed for local use has provided a valid measuring tool to plot clinical and physiological deterioration. Our randomized controlled trials (RCTs) have shown that there was a significant difference in recording between trial arms for physiological parameters listed on the MEWS chart but omitted from the traditional/standard ward observations chart: Respiration rate, oxygen saturation, level of consciousness and for clinical parameters omitted from the traditional/standard ward observations chart: Skin colour (pallor/cyanosis), pain, sweating, wound oozing, pedal pulses, glucose, haemoglobin and 'looks unwell'. Improved reporting did not result in escalated calls for review of patients. In a case of successful patient suicide, use of a modified RCA approach was helpful in giving a written opinion.

**Conclusion & Significance:** A validated local MEWS vital signs observations chart and a modified RCA approach are useful for structuring an expert nurse witness' report in healthcare negligence lawsuits.

**Recommendations:** Nurse practitioners should receive instruction in recognition of early signs of deterioration and in the RCA approach to prevent adverse events and healthcare negligence lawsuits.

Medical negligence  
Connecting the dots between practice, mortality and justice



## Recent Publications

1. Burger D, Jordan S, Kyriacos U (corresponding author) (2017) Validation of a Modified Early Warning Score-linked Situation-Background-Assessment-Recommendation (SBAR) communication tool: A mixed methods study. *Journal of Clinical Nursing* 00:1–13. <https://doi.org/10.1111/jocn.13852>.
2. Rafferty B, Kyriacos, U (corresponding author) (2016) Fourth year student nurses' self-reported knowledge and understanding of the biological sciences and perceptions of relevance to practice. *International Journal of Nursing & Midwifery*, 8(5) May DOI: 10.5897/IJNM2016.0208.
3. Kyriacos U, Jelsma J, James, M, Jordan S (2015) Early warning scoring systems versus standard observations charts for wards in South Africa: A cluster randomised controlled trial. *Trials* 16:103 DOI 10.1186/s13063-015-0624-2.
4. Leonard M, Kyriacos U (corresponding author) (2015) Final year nursing students' ability to recognize abnormal vital signs recordings. *Nurse Education Today* DOI: <http://dx.doi.org/10.1016/j.nedt.2015.04.013>.
5. Kyriacos U, Jelsma J, James M, Jordan S (2014) Monitoring vital signs: development of a modified early warning scoring (MEWS) system for general wards in a developing country. *PLoS ONE*, 9(1): e87073. doi:10.1371/journal.pone.0087073.

## Biography

Una Kyriacos is an Emeritus Associate Professor at the University of Cape Town, South Africa. Her research interest and experience is in patient safety, and in particular, vital signs monitoring and nurses' knowledge and use of the biosciences. She has developed a local validated modified early warning score (MEWS) vital signs observations chart for manual entry of parameters on general medical and surgical wards. She is often invited to give an expert opinion in healthcare lawsuits as a registered critical care nurse, ophthalmic nurse and researcher. She has publications in her research areas of interest, has numerous citations and receives many requests from a number of countries for permission to replicate her studies.

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