

## What is the extent of a hospital receptionist's duty in A&E?

The extent of the duty of care owed by hospital receptionists to patients came under the spotlight in the High Court case of [Darnley v Croydon health services](#) in July 2015.

Mr Darnley was unlawfully attacked and struck on the head by unknown assailants in May 2010. After a time, he began to feel unwell and was persuaded by his friend to go to the A&E department of Mayday University Hospital. He was booked in at reception at 20:26 and left the hospital at 20:45 without having been seen by a clinician because he felt very drowsy and had a severe headache - making it difficult for him to speak.

When he returned home his condition deteriorated and an ambulance was called. He was taken back to the Mayday Hospital where it was shown that he had an extradural haematoma on his brain. He was transferred to St George's Hospital for neurosurgery but suffered a damaging brain injury leaving him with left hemiplegia and wheelchair dependant. It was agreed that had he been treated sooner he would have made a complete recovery.

Mr Darnley argued that he should not have been told by the hospital receptionist that he would have to wait up to four hours before being seen and instead should have been told that he would be seen by a triage nurse within 30 minutes. If he had been told this he would have waited in reception. Instead he left after 19 minutes because he felt so unwell at the time.

The Judge found that whilst it was reasonably foreseeable that some patients might leave A&E departments without being seen or treated and that in such cases harm may result, receptionists in A&E departments are not under a duty to guard patients against harm caused by failure to wait to be seen and therefore it was not reasonable to impose a liability on the receptionist.

It was said that the primary role of the receptionist was to complete registration forms so that clinical decisions can be taken by healthcare professionals. Giving information regarding waiting times was merely a matter of courtesy even though it could result in the patient leaving A&E without being seen and without treatment.

The case is to be appealed in February 2017.

Deborah Blythe, partner and head of the clinical negligence and personal injury team, and who acted for Mr Darnley, comments *"The extent of the duty owed by a receptionist in an A&E setting in respect of the provision of information is of considerable public importance. This is the first occasion on which the issue as to the role of A& E reception staff has been judicially tested and the outcome of the Appeal will be important both for patients attending A&E and A&E departments."*

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