

**SPRINGANK NURSING HOME  
COLLEGE ROAD  
BARRY**

**RESPONSE TO REGULATION 28 REQUIREMENT MADE BY CHRISTOPHER JOHN WOOLEY  
FOLLOWING THE CORONER INVESTIGATION INTO THE DEATH OF SANDRA WORDINGHAM**

**RESPONDENT'S NAME & POSITION**

My name is [REDACTED] and I am the Managing Director of Springbank Care Home Limited, and the Responsible Individual for Springbank Nursing Home.

**REASON FOR RESPONSE**

I have received the Regulation 28 report prepared by Christopher John Wooley, Assistant Coroner for the Coroner for Cardiff and the Vale of Glamorgan following the investigation into the death of Sandra Wordingham who was a resident at Springbank Nursing Home, requiring a response prior to the 11th February 2014.

**Following the investigation the Coroner expressed specific concerns in that;**

Sandra Wordingham was put to bed in Springbank Nursing Home in an unconscious state by nursing staff who suspected that she had suffered an epileptic fit, when she had actually suffered a primary intra-cerebral haemorrhage, was unconscious state throughout the night and that no medical attention was sought for her

Whilst Sandra Wordingham suffered a profound insult which could not have been altered, had she suffered a gradual onset stroke, early medical attention would have saved her life.

Residents in a unconscious state who are treated in the future in the same way as Sandra Wordingham may be at risk of unnecessary death or injury

The Regulation 28 Report has required an Action Plan to prevent the unnecessary injury or deaths to residents who are found to be unconscious. [REDACTED] Operations Manager (who was also the Acting Manager at the time) and [REDACTED] who is now the Manager at Springbank have assisted me by looking at the following:

1. If the core skills and knowledge to care for an unconscious person can be reasonably expected from a professional nurse trained in a University / National Health Service setting and registered with the Nursing & Midwifery Council
2. If the core skills and knowledge to care for an unconscious person are expected to be within the scope of a professional nurse and be a reasonable part of the professional nurse's periodic declaration to remain registered with the Nursing & Midwifery Council
3. If it is a reasonable for the Employer to expect that a professional nurse trained in a University / National Health Service setting and registered with the Nursing & Midwifery Council should work within the limits and scope of their training, knowledge, experience and working within the Nursing & Midwifery Council Code.
4. How performance deficits in professional nurse's knowledge is identified and what education & training is/should be provided to them.

When considering points 1, 2 and 3 above it is reasonable to expect that the care of an unconscious person should be well within the capability of a professional nurse trained in a University / National Health Service setting and registered with the Nursing & Midwifery Council

### **Time & Payment for Education & Training**

In my capacity as the Responsible Individual for Springbank Nursing Home I continue to provide the necessary funding and time required for staff to train / retrain and am cognisant of the Company's duty-of-care to ensure that staff are trained to provide care for our residents. When considering point 4 above it is reasonable to expect the Company to provide ongoing training for all of its staff, and the Company does provide 30 paid hours annual training for members of staff.

### **Types of Training**

There is a growing list of mandatory training that is required by the Local Authority(s) and University Health Board(s) in addition to list of other mandatory core training.

### **Training Needs**

Training needs are identified in 2 ways:

1. Managers / Department Heads meet with Employees to identify education and training needs to support / enhance clinical performance.
2. All registered nurses have an obligation to inform their manager of any matters that may affect their performance and identify specific education and training needs.

### **Incident 19.30pm 22.07.13 until 07.30am 23.07.13**

The nurses on duty from 19.30pm 22.07.13 until 07.30am 23.07.13 were

1. [REDACTED] RGN
2. [REDACTED] RGN

### **The Company's Reasonable Expectation of the care of Sandra Wordingham by [REDACTED] RGN and Beryl Hartland RGN**

1. It is considered reasonable for the Company to expect that [REDACTED] [REDACTED] as qualified professional nurses, both of whom were trained in a University / National Health Service setting, and both registered with the Nursing & Midwifery Council, should have worked within the limits and scope of their training, knowledge, experience, and to the Nursing & Midwifery Council Code.
2. The Company considers it reasonable to believe and expect that as both [REDACTED] and [REDACTED] are qualified professional nurses, who were trained in a University / National Health Service setting and registered with the Nursing & Midwifery Council, had been trained to a level whereby they should have recognised Sandra Wordingham's altered state of consciousness and irrespective of possible clinical reasons, should have assessed and treated Sandra Wordingham appropriately, and that they should have summoned medical assistance in a timely manner.

The company took immediate & secondary actions to ensure the safety of current residents living in Springbank Nursing Home

Responses	Action Taken	Persons Responsible	Date By
Initial actions taken to ensure the safety of residents	<ul style="list-style-type: none"> <li>• [REDACTED] who was a nurse on the night of 22nd July was interviewed and suspended from duty</li> </ul>	[REDACTED] Operations Manager & Acting Manager at Springbank Nursing Home	23rd July 2013
Secondary Actions taken to ensure the safety of residents (Following investigation by South Wales Police & Safeguarding)	<ul style="list-style-type: none"> <li>• [REDACTED] who was a nurse on duty on the night of 22nd July was interviewed and, at a later point suspended from duty</li> </ul>	[REDACTED] Operations Manager & Acting Manager at Springbank Nursing Home	23.07.13
	<ul style="list-style-type: none"> <li>• The company required [REDACTED] to attend disciplinary procedures for gross misconduct. She was dismissed from her position as a qualified nurse and a copy of the hearing notes and outcome was provided to the Nursing &amp; Midwifery Council</li> </ul>	[REDACTED] Responsible Individual for Springbank Nursing Home	31.12.13
	<ul style="list-style-type: none"> <li>• The company required [REDACTED] to attend disciplinary procedures for gross misconduct. The process is ongoing. When this is concluded a copy of the hearing notes and the decision / outcome will be forwarded to the Nursing &amp; Midwifery Council</li> </ul>	[REDACTED] Responsible Individual for Springbank Nursing Home	This will be concluded as soon as possible

**REGULATION 28 ACTION PLAN**

Item	Action Taken	Persons Responsible	Date By
Improved First Aid & Life Support Training	All staff to attend training with specific training element for the immediate care of the unconscious person	[REDACTED] Operations Manager Springbank & [REDACTED] Manager	Planned for March 2014.
Ensuring Nursing Staff Competency	Following training and instruction nurses will have an assessment of their competency to; <ul style="list-style-type: none"> <li>• recognise consciousness levels</li> <li>• undertake appropriate life support and neurological observations</li> <li>• record &amp; document life support and neurological</li> </ul>	[REDACTED] Operations Manager Springbank & [REDACTED]	Planned for March 2014 as part of 1 <sup>st</sup> Aid Training

	<ul style="list-style-type: none"> <li>observations</li> <li>record &amp; document life support and neurological observations</li> <li>be aware of a DNNAR arrangement with the agreement of the resident / relative, and signed by the resident's GP not to actively seek emergency assistance when the resident may be dying.</li> <li>assure their line-manager that they will comply with training &amp; guidance</li> </ul>	<p>&amp;</p> <p>[Redacted] Manager</p>	Aid Training
Adherence to Nursing & Midwifery Council Codes	<ul style="list-style-type: none"> <li>All nurses have been provided with a copy of the NMC code</li> <li>All nurses have been reminded to practice within their levels of training, competency, knowledge and experience</li> <li>All nurses have been reminded of their obligation for public protection</li> <li>All nurses have been reminded of their obligation to maintain their knowledge and skills through PREP</li> </ul>	<p>[Redacted] Operations Manager Springbank &amp; [Redacted] Manager</p>	5 <sup>th</sup> February 2014 & 11 <sup>th</sup> February 2014
Summoning Emergency Assistance	<ul style="list-style-type: none"> <li>All staff have been instructed to summon emergency services to attend to all unconscious residents as quickly as possible</li> <li>Where a valid DNNAR is in place the nurse MUST follow the GP's instruction(s)</li> <li>If Emergency Service Staff attend they must be shown the valid DNNAR</li> <li>Where there is doubt about the level or recovery of consciousness nurses MUST err on safety and summon the Emergency Services</li> <li>A protocol has been produced and made available to all staff working at Springbank Nursing Home</li> </ul>	<p>[Redacted] Operations Manager Springbank &amp; [Redacted] Manager</p>	6 <sup>th</sup> February 2014 & 11 <sup>th</sup> February 2014
Knowledge of probable reasons and causes for residents who may become unconscious due to epilepsy (and other illnesses)	<ul style="list-style-type: none"> <li>The risk assessments and care plans will contain accurate and specific information about the possible or probable causes and reasons why a specific resident may become unconscious.</li> <li>Risk Assessment and Care Plan for epilepsy must contain details of the type of fits that the person may have (e.g. grand mal, petite mal, partial incomplete seizures etc, and whether the person has a prolonged post-seizure recovery period)</li> </ul>	<p>[Redacted] Operations Manager Springbank &amp; [Redacted] Manager</p>	Care Plan Audits for Epilepsy and Diabetes are available to tackle this.
Providing & Sharing Information about the management of unconscious people with Bank and Agency Nurses working occasional shifts	<ul style="list-style-type: none"> <li>The protocol for managing the unconscious person has been provided for all "occasional staff" and is included in the Agency Nurse Induction form</li> <li>The Nurse Agencies will be informed and a copy of the protocol will be provided to their head offices</li> </ul>	<p>[Redacted] Operations Manager Springbank &amp; [Redacted] Manager</p>	6 <sup>th</sup> February 2014

<p>In the event of failure to summon timely medical assistance</p>	<ul style="list-style-type: none"> <li>• The member of staff will be required to explain their action/ inaction</li> <li>• The member of staff will be reported to the Safeguarding Team. This may lead to a criminal investigation and prosecution</li> <li>• The member of staff will be suspended from duty and disciplined. This may lead to dismissal and referral to the Nursing &amp; Midwifery Council</li> </ul>	<p>Operations Manager Springbank &amp; Manager</p>	<p>Immediate &amp; Ongoing</p>
--	---	--	--------------------------------

Name: [Redacted]

Signature [Redacted]

Date 10/2/2014

Position: Responsible Individual, Springbank Nursing Home