

The Bull Archive and Australia Barbara and Account

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Our ref: PMP/ams

28 July 2014

Mr P Smith Coroner's Officer HM Coroner's Office The Court House Woburn Street Ampthill Bedfordshire MK45 2HX

By email:

Dear Mr Smith

Inquest touching the death of Aimee Sarah VARNEY Inquest held on 19<sup>th</sup> May 2014 at Coroner's Court, Ampthill

Thank you for your Regulation 28 Report, dated 2<sup>nd</sup> June 2014, in response to the death of Aimee Varney.

The Trust has considered the following matter of concern:

1) That the NICE (National Institute for Health and Care Excellence) Guidelines for referring a patient with suspected epilepsy to a specialist tertiary centre were not followed.

The Medical Director is responsible for ensuring every new NICE guideline is allocated to the relevant speciality. The appropriate Clinical Audit and Effectiveness Committee (CAEC) Lead, the Finance and the Clinical Director all receive copies for discussion and dissemination. As for all NHS bodies there are occasions where the hospital cannot immediately comply with NICE guidance. This can be due to resources and requires negotiation with our commissioners to fund, for example, high value new drug therapies.

The allocations are recorded on a central database managed by the Clinical Quality Department. They also record whether the relevant speciality has declared the guideline to be non-applicable, applicable and implemented or applicable but the Trust is non-compliant. A Risk Register is kept of all guidelines the Trust is not able to immediately comply with; this is regularly monitored to ensure the relevant changes are made as soon as possible.

Individual Clinicians have ready access to the relevant NICE guidelines via the Hospital's Intranet. They can also gain access via the NICE website <a href="https://www.nice.org.uk/guidance">www.nice.org.uk/guidance</a>





However it must be emphasised that they are guidelines, not tramlines that the treating clinician must rigidly follow. NICE state "...health and social care professionals are actively encouraged to follow our recommendations to help them deliver the highest quality care. Of course, our recommendations are not intended to replace the professional expertise and clinical judgement of health professionals, as they discuss treatment options with their patients." There will be individual patients where the treating clinician uses their own judgement and does not follow the absolute guidance.

In this particular case the expert report was prepared by a clinician with a special interest in epilepsy, from a specialist tertiary centre. Their report may not reflect what is considered acceptable practice by a general neurologist, with a general neurology practice, that is managing a patient with epilepsy. For this reason we are commissioning a further report, from an independent general neurologist, to get assurance that the individual clinician's practice did not fall outside the threshold of reasonable practice.

I hope you are reassured that the Trust has appropriate systems for the logging and disseminating of NICE Guidelines.

Yours sincerely

Pauline Philip
Chief Executive Officer