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9<sup>th</sup> July 2018

Ms Caroline Saunders  
HM Assistant Coroner for Gloucestershire  
Gloucestershire Coroner's Court  
Corinium Avenue, Barnwood  
Gloucester, GL4 3DJ

Dear Ms Saunders

**The Late Mr Jonathan Earp**

I am writing in response to the letter dated 8 May 2018 from your Officer [REDACTED] enclosing the Regulation 28 Report to prevent future deaths.

The Trust has noted your outstanding concerns as described in paragraph 5 of your Report.

Following the inquest, the Trust has further reviewed the circumstances of the administration of fentanyl to Mr Earp.

Under the direction of Mr Steve Hams, Director of Quality and Chief Nurse, this case has been discussed with the ward staff who looked after Mr Earp, and has been presented to the Senior Nurse and Midwifery Committee.

The enclosed Action Plan confirms the work which the Trust has undertaken, and continues to work on, as a result of Mr Earp's death. The Trust Quality Delivery Group will maintain oversight of these actions and ensure they are being delivered.

I hope this is helpful.

Please do not hesitate to contact me if you require further information

Yours sincerely



**Deborah Lee**  
Chief Executive

Chair: Peter Lachecki  
Chief Executive: Deborah Lee



Mr Jonathan Earp – Action Plan

Action required	Action Planned	Persons responsible	Date for completion	Status
To check the control drugs daily	Check controlled drugs daily and document in controlled drug record book. Also to document all controlled drug wastage by two qualified nurses	Ward Manager	July 2018	Current practice
Safety brief per shift	To identify at each safety brief vulnerable patients with the potential to have risky behaviours.	Ward Manager	July 2018	Current practice
Improve monitoring of transdermal patch application and removal	<ol style="list-style-type: none"> <li>1. Document and counter sign removal and wastage of transdermal patches in controlled drug book.</li> <li>2. Carryout clinical audit of compliance and feedback to ward staff.</li> </ol>	Ward Manager	July 2018	Current practice
Early identification of vulnerable service users at risk of risky behaviours	Review of behavioural contracts and treatment contracts, stating expectations of treatment. Explore the use out of hours with Security Advisor	Matron Security Adviser	September 2018	Planning
Access of safety alerts identifying those at risk	Alerts to be discussed and added to Trak care if appropriate.	Matron Trak Care Lead	September 2018	Planning
Senior Doctor review of medication, should transdermal patches be lost or removed	To escalate to Registrar to review medication and consider re prescribing Patch. Not to be re-administered without medical review.	Unscheduled Care Consultant	September 2018	Planning
ADM6 action card (POPAM)	Review and standardise drug chart	Lead Pharmacist	March 2018	Complete



<p>Review policy and flowchart on <b>"OPIOID USERS ON THE WARD – MANAGEMENT GUIDELINES"</b></p>	<p>These guidelines have been drawn up to advise doctors, nurses and pharmacists on managing patients who have co-morbid opiate dependence and provides an escalation pathway for further advice on prescribing from the Acute Pain Management team and/or the providers of the Drug dependency service.</p>	<p>Consultant for Acute Pain Management</p>	<p>July 2018</p>	<p>Complete</p>
<p>Safety briefing developed to share all lessons learnt across the organisation to include reference to prescribing advice</p>	<p>Safety briefing to be sent to all ward managers and department heads to share with teams and at key meetings.</p>	<p>Director of Safety</p>	<p>July 2018</p>	<p>Complete</p>