

From Nadine Dorries MP Parliamentary Under Secretary of State for Mental Health, Suicide Prevention and Patient Safety

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Our Ref: PFD-1188207

Mr André Rebello
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Kth January 2020

De Mr Rebello,

Thank you for your correspondence of 24 June 2019, received by the Department of Health and Social Care on 27 August 2019, about the death of Mr Lewis James Doyle. I am replying as Minister with responsibility for patient safety and I am grateful for the additional time in which to do so.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Doyle's death and I extend my deepest sympathies to his family and loved ones.

I have noted the concerns in your report about ineffective communication between Mr Doyle's medical practitioners and your recommendation that all medical attendants involved in a patient's care should be sent discharge letters to ensure that they are aware of changes to that patient's medication.

I am aware that NHS England and NHS Improvement has advised you in its response of the requirements under the NHS Standard Contract 2019-20¹ for providers of care to share information on the discharge of patients, or transfer of their care, and that supporting guidance² recommends that information on medications should include those that have been stopped and the reasons why.

¹ https://www.england.nhs.uk/wp-content/uploads/2019/03/3-FL-SCs-1920-sepsis.pdf

² https://theprsb.org/wp-content/uploads/2019/02/eDischarge-Summary-Maintenance-Release-Implementation-Guidance-Report-v2.1-23.1.19.pdf

More generally, clinicians have a duty to share information about their patients as they consider appropriate.

Section 251B of the Health and Social Care Act 2012³⁴ places a duty on health and social care providers to share information about an individual with other health and care providers where it is likely to facilitate the care provided to the individual and is in their best interests.

In addition, health professionals owe a duty of care to those they treat and this includes ensuring that information about their direct care is shared appropriately with other health and care professionals.

The General Medical Council (GMC) regulates doctors in the UK. The GMC's guidance, Good Medical Practice⁵, sets out the standards that doctors should meet in order to practice in the UK. This includes sharing 'relevant information with colleagues involved in your patients' care within and outside the team'. In addition, the GMC's ethical guidance on Leadership and Management⁶, says that 'It is essential for good and safe patient care that doctors work effectively with colleagues from other health and social care disciplines, both within and between teams and organisations'.

I am advised that these legal and professional duties provide a clear framework for the effective sharing of information to support the care and treatment of patients, enabling medical professionals to make decisions on a case by case basis about the information that should be shared.

I expect the local NHS to consider carefully the care provided to Mr Doyle and to take action where necessary to implement any learnings.

While we do not believe that imposing further requirements to share data are necessary, the Government is committed to supporting the work of the Medicine Safety Improvement Programme⁷, led by NHS England and NHS Improvement, which aims to increase safety across the medication pathway, including in areas such as regular medication reviews and safe patient discharge.

³ http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted

⁴ http://www.legislation.gov.uk/ukpga/2015/28/crossheading/continuity-of-information/enacted

⁵ https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice

⁶ https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/leadership-and-management-for-all-doctors

⁷ https://improvement.nhs.uk/resources/national-medicines-safety-programme/

The Medicine Safety Improvement Programme will bring together a variety of projects to support medicine safety, from engaging patients as their own safety advocates, through to improvements to technology, to enabling the workforce to operate safely with strong systems and practices, to prevent harm.

I am aware that NHS England and NHS Improvement has provided more detail in its reply to you on the work that is taking place to support the NHS with better technology to improve access to, and sharing of, clinical information.

I hope this response is helpful.

NADINE DORRIES

