

10 MAR 2020



County Durham
and Darlington
NHS Foundation Trust

Executive Corridor
Darlington Memorial Hospital
Hollyhurst Road
Darlington,
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E-mail: [REDACTED]

[REDACTED]

2nd March 2020

Mr. J. Chipperfield
H.M. Coroners
PO Box 282
Bishop Auckland
Co Durham
DL14 4FY

Dear Mr Chipperfield

Re: Agnes Gwenllian Sansom

I am writing in response to Regulation 28 Report To Prevent Future Deaths, which you issued to County Durham & Darlington NHS Foundation Trust on 6th January 2020. You raised two matters of concern that create the risk of other deaths and I will respond to each in turn.

- i) *Existing patient record systems fail to ensure that important and urgent information is brought, in a timely way, to the attention of those who need it.*

The root cause analysis report has been reviewed and we have concluded that a misleading choice of words have been used as follows:

"The matron advised that nursing staff primarily utilise Nervecentre (an electronic patient record) accessed by a hand held device as the main source of information during a shift rather than the patient's paper health record".

It is not factual to describe Nervecentre as an electronic patient record. The Trust does not have an electronic patient record in place. Nervecentre is an electronic observations system which is also used for some patient risk assessments; including falls risk assessment and mobility gallery.

Detailed patient care records are multi-disciplinary and in paper format within the Trust. Both nursing and physiotherapy records, along with medical entries are recorded contemporaneously within the paper record. In relation to Ms Sansom the physiotherapist had recorded within the paper record, placed mobility advice above the bed and handed over this advice verbally to the nursing staff.

On further discussion with the nursing staff they have confirmed that this is the accepted process, however, have also said that as Nervecentre is a hand held device they will on occasion refer to the mobility gallery within Nervecentre also.

To address this issue physiotherapists now record in the mobility gallery in Nervecentre if they identify change in mobility or change in interventions required. This does not replace the detailed paper record but ensures that all staff are aware of this whether accessing paper records or Nervecentre.

ii) *"vulnerable patients are obliged to share walking aids on hospital wards"*

During traditional working hours walking aids are provided by physiotherapists following assessment of the patient. We have implemented a buffer stock of walking aids in the hospitals to ensure there is an adequate supply out of hours. Ideally the buffer stock should not be used as it is preferable that patients requiring a walking aid have a physiotherapist assessment first, however, if someone presents who does require a walking frame out of hours we have ensured that there is a buffer stock available for emergency use.

I hope that you find the actions taken by the Trust to be adequate to address the issues that you have raised, but please do not hesitate to contact me if you require further information.

Yours sincerely

Executive Director of Nursing

cc.

CEO

Medical Director

Associate Director of Nursing, Patient safety