



HMC Mary Hassell
Inner North London
St Pancras Coroners Court
Camley Street
London
N1C 4PP

Your Ref :
Our Ref : 4034
20 March 2020

Dear Ms Hassell

Regulation 28: Prevention of Future Deaths Report for Shanté Andréé Marie Turay-Thomas

Thank you for your Regulation 28 Prevention of Future Deaths Report ("PFD") dated 27 January 2020. I would like to take this opportunity at the outset of my letter to offer my condolences to Ms Turay-Thomas's family.

Following the conclusion of the above inquest, the London Ambulance Service ("LAS") understands that the learned Coroner has raised a query as to whether the LAS would be able to assist in relation to the latter two sub-paragraphs (3 and 4) of paragraph 16 of the PFD report. Those paragraphs provide as follows:

"I heard at this inquest that NHS Digital has since changed its categorisation [of calls relating to acute anaphylaxis]. However, I also heard that for those areas (I think approximately half the country, though this is not completely clear to me) where the 999 service and the 111 service are supported by different computer systems rather than the same system being common to both services, there could remain inconsistencies of categorisation between 999 and 111.

Even where there are inconsistencies in categorisation, the 999 service will not re-categorise following a 111 clinician's categorisation, unless a 999 clinician has spoken to the patient, so inappropriate 111 categorisation will not be safety netted by the 999 service. This must be recognised and factored in".

The learned Coroner is correct that, as per the evidence of the LAS as given in this inquest, in parts of the United Kingdom different triage systems are in use by the 999 and 111 services. NHS 111 only use NHS Pathways (owned and designed by NHS Digital) whereas UK Ambulance Trusts can use either NHS Pathways or MPDS (owned and designed by Priority Dispatch Corp. ("PDC")).

Had the LAS triaged the call made by [REDACTED] through its 999 system, as the LAS stated in their evidence, it would have been triaged using the MPDS algorithms in use by the LAS.

The LAS use the MPDS algorithm and supporting software on licence from PDC. We refer the learned Coroner to Appendix 2 attached to these for further details of the MPDS algorithm itself and its operation.

The Response Priority for each MPDS determinant descriptor – being the Category of ambulance it requires – is set by ECPAG. This is because final decisions about categorisation are made by ECPAG on behalf of NHS England. It is, therefore, this organisation (if any) who has the power to take the action the learned Coroner is seeking at sub-paragraph 3 above and, where possible, would be capable of identifying any inconsistencies between the categories of ambulance assigned to dispositions within the NHS Digital system on the one hand and PDC on the other, in relation to acute anaphylaxis and otherwise.

The LAS, as an MPDS user for its 999 services and an NHS Pathways user for its 111 services, attend the relevant user groups with other ambulance trusts and fully participate in such meetings, where there is the opportunity to share data back and forth, discuss cases of note and share learning in order to make continual improvements through the feedback mechanisms to NHS Digital and the Academy at PDC process. The LAS will discuss the findings of PFD report at such user groups. Ultimately, however, changes to how the triage system operates are a matter for the International Academies of Emergency Dispatch (IAED) where MPDS (owned by PDC) is concerned, or for NHS Digital under their national clinical governance group where NHS Pathways is concerned.

From the LAS's understanding however, there are limitations to ECPAG's ability to align the two systems – NHS Pathways and MPDS – as they operate differently and have two different methodologies for reaching a triage decision.

In order to assist the learned Coroner, as indicated, the LAS attaches as Appendix 2- a detailed summary from the LAS formally setting out how it is UK Ambulance Services manage 999 calls and the national system for prioritisation of those calls.

I hope this reply is helpful in explaining the actions undertaken by the LAS.

Yours sincerely



Chief Executive Officer