

National Medical Director
NHS England & NHS Improvement
Skipton House
80 London Road
London
SE1 6LH

Mr A. A. Haig, HM Senior Coroner
Staffordshire South
1 Staffordshire Place
Stafford
ST16 2LP

29th July 2021

Dear Mr Haig,

**Re: Regulation 28 Report to Prevent Future Deaths – Mr Kevin John Lovatt;
date of death 22 December 2017.**

Thank you for your Regulation 28 Report (hereafter 'report') dated 15 January 2021 concerning the death of Mr Kevin John Lovatt on 22 December 2017. I would like to express my deep condolences to Mr Lovatt's family.

Your report concludes Mr Lovatt's death was a result of obstruction of his internal airways whilst under restraint.

Following the inquest, you raised concerns in your report to NHS England and NHS Improvement (NHS E/I) about the availability within the prison estate of staff trained to Advanced Life Support (ALS) level.

NHS E/I is the responsible organisation for the commissioning of healthcare into prisons, which is devolved to the seven regional teams. Commissioning healthcare in prisons is done on a principle of equivalence, which has been defined by the Royal College of General Practitioners. This definition broadly states that the aim is to ensure people detained in prisons in England are afforded provision of and access to appropriate services and treatment that is considered to be at least consistent in range and quality, with that available in the wider community.

The Service Specification – primary care service, medical and nursing for prisons in England, published in March 2020, includes a section on unplanned and emergency care¹. This outlines the requirements for the healthcare provider to develop and implement protocols, specific to each prison, for responding to and managing emergencies. It also details exclusion criteria of injuries or illnesses that require

¹ [primary-care-service-spec-medical-nursing-for-prisons-2020.pdf \(england.nhs.uk\)](#)



medical or emergency intervention, beyond the scope and practice of primary care nursing and general medical practice.

This reflects the Resuscitation Council UK Quality Standards: Primary Care², which states at Section 3 of its standards:

“...training must be in place to ensure that clinical staff can undertake cardiopulmonary resuscitation (CPR). Training and facilities must ensure that, when cardiorespiratory arrest occurs, as a minimum all clinical staff can:

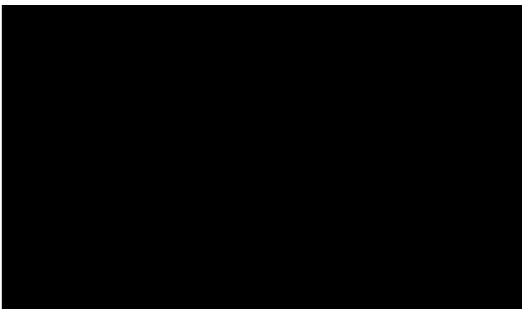
- recognise cardiopulmonary arrest
- summon help
- start CPR
- attempt defibrillation (if appropriate) with an automated external defibrillator (AED) with a minimum of delay, whenever possible within minutes of collapse.”

The Resuscitation Council UK, who provide the recognised guidelines, including training, for England, outline that Advanced Life Support is appropriate for healthcare professionals who would undertake advanced life support as part of their clinical duties. This includes doctors, paramedics and nurses working in acute care areas (e.g. Emergency Departments, Coronary Care Units, Intensive Care Units, high dependency units, operating theatres, acute medical admissions units) or on resuscitation/medical emergency Critical Care outreach Teams. Advanced Life Support also involves some specialist clinical procedures which, to be clinically effective and cause no harm, must be performed as a regular part of clinical duties.

Healthcare professionals working in prisons, which includes a significant proportion of mental health nurses, do not fall within the specified appropriate categories for Advanced Life Support therefore, these procedures, if carried out, may lead to staff working outside of their registered professional clinical competencies.

Thank you for bringing this important patient safety issue to my attention and please do not hesitate to contact me should you need any further information.

Yours sincerely,



National Medical Director

² <https://www.resus.org.uk/library/quality-standards-cpr/primary-care#:~:text=All%20staff%20in%20a%20primary%20care%20organisation%2C%20including,regular%20intervals%20thereafter%20to%20maintain%20knowledge%20and%20skills.>