

Miss Emma Brown

HM Area Coroner for Birmingham and Solihull Coroner's Court Steelhouse Lane Birmingham B4 6BJ National Medical Director NHS England Wellington House 133 - 155 Waterloo Road

155 Waterloo Road London SE1 8UG

14/09/2022

Dear Miss Brown,

Re: Regulation 28 Report to Prevent Future Deaths – Lee Anthony Caruana who died on 6 October 2021

Thank you for your Report to Prevent Future Deaths (hereafter "Report") dated 16 June 2022 concerning the death of Lee Anthony Caruana on 6 October 2021. I would like to express my deep condolences to Mr Caruana's family.

Following the inquest, you raised concerns in your Report regarding the delay in ambulance attendance. You concluded that, from a national perspective, the availability of ambulance crews is being compromised by delays at hospitals, resulting in delays in response times which creates a risk to the life.

For NHS England (NHSE), resolving handover delays and the related impact on ambulance response is of the highest priority. A national letter (Appendix A) was issued jointly from NHSE and the Care Quality Commission in February 2022, setting out the need for integrated care systems to come together to address the risk of harm to patients in the community caused by long delays in handing over patients at Emergency Departments. This was followed up with meetings between systems and the NHSE Chief Operating Officer, where systems were asked to set out plans to tackle handover delays and share risks across health and care services at system level.

In addition, NHSE set out the next steps in increasing capacity and operational resilience in urgent and emergency care ahead of winter, in a letter on 12 August 2022 (Appendix B). This again highlighted the need to target Category 2 response times and ambulance handover delays.

NHSE continue to provide targeted support to some of the hospitals facing the greatest delays in the handover of patients, helping them to identify short- and longer-term interventions to improve delays and get ambulances swiftly back out on the road. The 10 trusts with the highest amount of hours lost to ambulance handover delays are receiving intensive support from NHSE (including capital and revenue as required). In addition, NHSE are developing a wider support programme for all acute trusts to deliver improvements in ambulance handover. Work is taking place across all Integrated Care Boards to determine the amount of capacity needed to support

performance and how this can be delivered. Focus remains on improving flow, including maximising alternative pathways to Emergency Departments, and reducing occupancy through the work of the National Discharge Taskforce.

Reducing avoidable conveyance ultimately reduces the number of ambulance crews attending Emergency Departments, which in turn will reduce handover delays. Ambulance services have been working closely with their local systems to reduce avoidable conveyance, and to support patients to get the care they need outside of hospital. Current conveyance rates to Emergency Departments are the some of the lowest ever outside periods of national lockdown. Indeed, ambulance conveyance rates have fallen considerably in the last few years (from 59.1% in 2018-19 to 50.0% for July 22). An avoidable conveyance is when a patient, whose health and social care needs could be effectively and safely met in the community, within or close to their own home (or an alternative setting to an emergency department), is conveyed to hospital unnecessarily.

I would also like to provide further assurances on the national NHSE work taking place around the Reports to Prevent Future Deaths. All reports received are discussed by the Regulation 28 Working Group, comprising Regional Medical Directors and other clinical and quality colleagues from across the regions. This ensures that key learnings and insights around events, such as the sad death of Mr Caruana, are shared across the NHS at both a national and regional level, and helps us to pay close attention to any emerging trends that may require further review and action.

I note the response from the Birmingham and Solihull Integrated Care Board Chief Executive, and the initiatives being undertaken to improve patient flow within the Urgent and Emergency Care pathways.

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

Yours sincerely,



Appendix A



Appendix B

<u>B1929_Next-steps-in-increasing-capacity-and-operational-resilience-in-urgent-and-emergency-care-ahead-of-winte.pdf</u> (england.nhs.uk)