



Department
of Health &
Social Care

Minister of State for Care
39 Victoria Street
London
SW1H 0EU

Our Ref: PFD – 1438236

Alison Mutch
HM Senior Coroner
Coroner's Court,
1 Mount Tabor Street,
Stockport
SK1 3AG

By email: [REDACTED]

3 July 2024

Dear Ms Mutch,

Thank you for your letter of 10 February 2023 regarding the death of Celia Sanderson. I am replying as Minister with responsibility for urgent and emergency care. Please accept my sincere apologies for the significant delay in responding to this matter. I would like to assure you that the department is mindful of the statutory responsibilities in relation to prevention of future deaths reports and we are prioritising responses as a matter of urgency.

Firstly, I would like to say how deeply sorry I was to read of the circumstances of Ms Sanderson's death, and I offer my sincere condolences to her family and loved ones. It is vital that where Regulation 28 reports raise matters of concern these are looked at carefully so that NHS care can be improved. I am grateful to you for bringing these matters to my attention.

Your report raises concerns about the treatment provided at Wythenshawe Hospital, Manchester University NHS Foundation Trust. I understand that NHS England (NHSE) have written to you to address these concerns, including information from Greater Manchester Integrated Care and the Integrated Care Board on the action taken locally. This includes NHS Greater Manchester's action plan to respond to urgent and emergency care demand pressures, as well as their Major Trauma Network. This network provides care to patients who have sustained major trauma injuries; partners work collaboratively to ensure trauma is recognised and treated appropriately. Learning from the investigation into Ms Sanderson's death has been used to improve practice across the network.

NHSE recognises the importance of identifying and supporting older people with frailty and is working to improve and standardise these services. They have committed to ensuring all Type 1 providers have an acute frailty service in place for at least 10 hours a day, 7 days a week. These services will implement a comprehensive geriatric

assessment at the front door as well as the minimum standards in the FRAIL strategy. More information on the FRAIL strategy can be seen here: [NHS England » FRAIL strategy](#). NHSE have also recently launched the non-ambulatory fragility fracture (NAFF) pathway to underpin the delivery of care for older orthopaedic trauma patients. More information can be seen here: [Non Ambulatory Fragility Fracture pathway](#).

Departmental officials have also made enquiries with the Care Quality Commission (CQC), who reviewed your report in line with their Regulation 28 guidance. The CQC has taken no specific regulatory action in this case and is continuing its ongoing monitoring and engagement with the Manchester University NHS Foundation Trust.

As Minister with responsibility for urgent and emergency care services, I recognise the significant pressure the urgent and emergency care system is facing. In January 2023, NHS England published a two year 'Delivery plan for recovering urgent and emergency care services' which aims to deliver sustained improvements in waiting times with targets for this year for a minimum of 78% of patients being admitted, transferred, or discharged within four hours by March 2025, and to reduce Category 2 ambulance response times to 30 minutes on average. An update to this plan has now been published, to build on learnings from the first year and to continue to support systems to improve performance and reduce waiting times. The plan is available at: [NHS England » Urgent and emergency care recovery plan year 2: building on learning from 2023/24](#).

To improve patient flow and bed capacity within hospitals £1 billion of dedicated funding was provided to increase staffed core hospital beds by 5,000 compared to 2022/23 plans. £1.6 billion of funding was also made available over two years to support the NHS and local authorities to ensure timely and effective discharge from hospital, helping to free up beds and reduce long waits for admission from A&E.

Since publication of the plan in January 2023, there have been improvements in performance. National average A&E 4-hour performance has improved from 70.8% in 2022/23 to 72.1% in 2023/24.

Thank you once again for bringing these concerns to my attention.

Yours,

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