

Chief Executive Office
Level 3 Balmoral
Leicester Royal Infirmary
Infirmary Square | Leicester | LE1 5WW

20th February 2024

**Re: Regulation 28: Report to prevent future deaths – After inquest action for
WALTON P [REDACTED]**

Dear His Majesty's Coroner office for Leicester City and South Leicestershire:

We would like to acknowledge the concerns raised in the Regulation 28 report, and once again offer our apologies for the error in the management of dual anticoagulation which led to haemorrhage for Patricia.

We have put in place robust measures to prevent a similar error in the future, including:

- Changes to the way anticoagulation is prescribed in our electronic prescription system.
- Recruiting new staff to deliver a robust specialist trust wide anticoagulation review service during core working hours.
- Anticoagulation is one of our key learning points for the new NHS Patient Safety Incident Response Framework (PSRIF) starting in April 2024.

In relation to the preventing future deaths action regarding medical staffing. We have already increased medical staffing at the site where the incident occurred. During bank holiday and weekend periods, we are rostering for a medical consultant to be present 9am to 5pm onsite, the consultant is supported by a medical registrar onsite 24hr/7days a week and by a junior doctor onsite 24hrs/7days a week.

Across all our sites, patient safety is the paramount focus for all staff. We employ several escalation policies for any staff member to raise concerns regarding any patient at any time, including:

- Early deterioration in physiological parameters (Early Warning Scores).
- A clear handover process for nursing teams when patients are transferred between wards.
- An experienced trust wide deterioration patient team who responds proactively to help support clinical teams.

Whilst Patricia was an inpatient over a bank holiday weekend, we are confident this did not impact on her care. Irrespective of the time of year, based on the clinical deterioration triggers there was no cause to raise clinical concerns sooner during her admission. If Patricia's clinical condition had worsened earlier, our escalation policies

would have ensured a clinical review took place, regardless of the bank holiday weekend staffing levels.

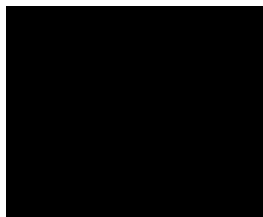
To strengthen our deterioration response, as of the first week in February 2024, the board has approved, through the deteriorating patient team, patients and relatives will be able to request an independent clinical review of care if they have unresolved concerns about potential deterioration. We are also working towards making it clearer and easier for patients and families to formally make their concerns known to clinical staff through better documentation of their ideas, concerns, and expectations.

We have reviewed the potential for increasing our medical workforce across all our sites during bank holidays and weekends. However, as is the case for all other NHS trusts, there are considerable workforce challenges that limit us in our ability to maintain a consistent number of inpatient medical staff 7 days a week, 365 days a year. These challenges become particularly acute during public holidays when our staffing levels reflect the social cultural context of UK society taking holidays, especially during the winter holiday period.

Time shifting our medical workforce to allow a more even distribution between normal days and weekend/bank holidays would bring significant disruption to our existing elective services including needing to cancel elective operations and outpatient resources, meaning more patients are placed on our waiting lists. However, despite these challenges over the Christmas and New Year period between the 23rd of December 2023 to 1st of January 2024 we had at least 350 medical staff rostered to provide inpatient care across our hospitals.

We continue to develop innovative ways to improve patient safety within our allocated resources and will work with the national team to explore all options to address workforce challenges.

Yours sincerely




Chief Executive

University Hospitals of Leicester NHS Trust and University Hospitals of Northamptonshire
NHS Group