

H.M Coroner's Office
HM Area Coroner for Essex
Ms Sonia Hayes
SEAX House
Victoria Road South
Chelmsford
Essex
CM1 1QH

████████████████████
29 January 2024

Dear Ms Hayes

Regulation 28 Report- Master William Gray

I write further to your Regulation 28 Report to Prevent Future Deaths (PFDR) dated 8 December 2023.

I have been appraised of the Inquest findings in relation to Master William Gray, and your concerns relevant to our Trust contained within the PFDR report as follows:

“Mid and South Essex NHS Foundation Trust

(1) Experienced hospital paediatric doctors all gave evidence that they were unaware that administration of intramuscular adrenaline by paramedics is part of the Joint Royal Colleges Ambulances Liaison Committee JRCALC protocol for life-threatening asthma. The beneficial effects of the administration of adrenaline was not considered, William's presentation on arrival at hospital was falsely reassuring.”

The Inquest findings in this tragic case have highlighted the need for our training to specifically include the potential impact of pre-hospital resuscitation measures on our patients. Following the Inquest conclusion in November 2023, our clinicians immediately shared the learning with their teams to raise awareness of the JRCALC protocol on managing severe asthma in children, and since then, a plan has been devised for wider learning.

████████████████████ Consultant Paediatrician, who you will be aware was a witness at the Inquest hearing for Master Gray, has been collaborating with colleagues to produce training materials and a robust plan to train medical and nursing staff. Attached to this letter is a copy of the slides that will be used to deliver the first training session to staff on 30 January 2024, 'Understanding medicines in asthma'. Slide ten will focus specifically on the role of Adrenaline in treating acute asthma, both in-hospital and pre-hospital settings.

We recognise that this training must be repeated and refreshed to capture new staff joining/moving across specialties. We must also keep abreast of clinical developments and any changes to protocols/guidance. Therefore, this training will be reviewed and repeated at least on a quarterly basis, and the training attendance records will be kept monitoring compliance.

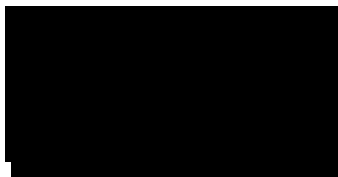
In addition to this, a comprehensive email was sent to consultants and junior medical staff regarding the use of Adrenaline in pre-hospital asthma resuscitation by ambulance crew, and the potential impact it has when patients are assessed at the hospital. The email reminded the clinicians that where Adrenaline has been administered out of hospital, the patient should remain in hospital for detailed review and assessment for a minimum of 12-24 hours to facilitate planning of further management. Please see attached email of 10 January 2024 for your reference.

These actions together with our Serious Incident Investigation action plan will ensure that staff are fully aware of potential out of hospital use of Adrenaline for not only life-threatening Asthma, but also Cardiorespiratory arrest in both Asthma and Anaphylaxis.

We appreciate this opportunity to demonstrate further learning, and I can personally assure you that we are absolutely committed to improving the safety of our patients.

If you have any further concerns or you would like to discuss this case further, please do not hesitate to contact me.

Yours sincerely




Chief Executive
Mid and South Essex NHS Foundation Trust

Enc. 'Understanding medicines in asthma' slide deck
Copy email sent to staff 10.01.2024

Cc. CQC, ICB & Southend Safeguarding Partnership (SSP)