

6 April 2024

Medical Directors Office
Cliftonville
Northampton
NN1 5BD

Private and Confidential

Mr J Dixey
Assistant Coroner
The Guildhall
St Giles' Square
Northampton

Dear Mr Dixey

Letter to prevent future deaths

Thank you for your letter as specified above, your concerns have been reviewed by the Trust and we are pleased to be given the opportunity to respond.

Following the incident in December 2022 the paediatric department have been working on the actions that have been identified.

Currently the trust has one whole time equivalent radiologist that can undertake paediatric radiology. One of the paediatric consultants is undertaking training in Point Of Care Ultrasound (POCUS) and there is a charitable funds request for the purchase of a POCUS ultrasound machine for the department. There is a further paediatric consultant who can already undertake chest ultrasound scanning.

The radiology department are currently reviewing the possibility of joint recruitment of a radiologist with a paediatric sub specialism working between Northampton General Hospital NHS Trust (NGH) and University Hospitals of Leicester NHS Trust (UHL). There are currently discussions with both UHL and University Hospitals of Northamptonshire NHS Group (incorporating NGH and Kettering General Hospital NHS Foundation Trust) to review how the providers within the system can work more collaboratively, reviewing current pathways and provision.

There has been a suggestion that the current on call registrar / consultant radiologists are trained in basic paediatric thoracic ultrasound. However, Radiology have expressed a concern that this would not be achievable with current on call and staffing numbers and would potentially underestimate the role and specialism of paediatric radiologists.

Given the low numbers of this type of investigation that would be required, trained staff may not see sufficient numbers to maintain diagnostic competence. Trained paediatric radiologists are short in number nationally. As a result of these uncontrolled variables, the provision of 24/7 trained paediatric radiology would be unachievable in all District General Hospitals.

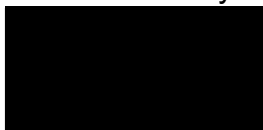
Following the raising of the incident and acknowledged in the inquest, it was also identified that there was a missed opportunity to perform a chest x-ray the previous day, and that

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information provided to support clinicians in children presenting with these conditions had not reached all the clinical team. An action plan to address these issues was created, and evidence has been submitted to complete the actions identified.

The issue that has been raised by the coroner in relation to the provision of paediatric radiology is a much wider issue than NGH itself. A Regulation 28 Prevention of Future Deaths has also been issued to the Integrated Care Board (ICB) as well as NHS England. The trust will await these responses to develop future further actions if required.

Yours sincerely


Medical Director