Office of the Managing Director
MD: Mr Stephen Collman
[redacted]

Worcestershire Acute Hospitals NHS Trust

[redacted]

22 March 2024

Mr D D W Reid
H M Senior Coroner
Worcestershire Coroner's Court
Martins Way
Stourport-on-Severn
Worcestershire
DY13 8UN

[redacted]

Dear Mr Reid

Re: Mr Michael Pegg deceased
Regulation 28 Report to Prevent Future Deaths

Thank you for forwarding on your Regulation 28 report. I have read your report with great care and note the concerns that you have raised as a result of the coronial inquiry into the death of Mr Michael Pegg.

In your Regulation 28 report you identified the following matters of concern relating to the Worcestershire Acute Hospitals NHS Trust (WAHT) and I will respond to these concerns below, as a sequence, where appropriate.

Concerns

1) *The steroid treatment provided to Mr Pegg during this admission fell far short the guidelines.*

2) *None of those treating him had sufficient awareness of the NICE Guidelines as to be able to apply them properly in his case. Unless action is taken to ensure clinicians employed by the Trust are aware of, and are able to apply these Guidelines, there remains a risk that another patient with adrenal insufficiency may die in similar circumstances.*

3) *Patient's wellbeing may be put at risk because a Hospital Trust may not be able properly to ensure that the staff it employs are aware of, and able to apply NICE Guidelines*

The Trust has now implemented both further learning and additional checks, to ensure that steroid treatment provided to future patients will not fall short of the NICE Guidelines in the future. I have noted the actions taken below and I hope that they will ensure clinicians employed by the Trust are aware of, and are able to apply the relevant Guidelines in the future.

- Steroid replacement therapy has been discussed in both the Trust Patient Safety Incident Response Group and the Deteriorating Patient, Resuscitation, End of Life and Mortality Group on

several occasions since Mr Pegg's sad death. Discussions included the importance of the adult patient document in the Emergency Department which was updated in June 2023. This now

includes a time critical medications (highlighted steroid replacement) (please see appendix 1 attached). This is automatically included for all adults presenting to the Emergency Department.

- A "detect and reflect" document and "time critical medication safety flash" have been circulated to all Emergency and Medical staff to raise awareness of the need for steroid replacement therapy (appendix 2, 3). These are displayed in the Emergency Department handover area.

- Steroid replacement (and other time critical meds) has been highlighted in effective handover in ED in 2023 and will be repeated (appendix 4) to raise and maintain awareness for all medical staff working in the ED.

- The Trust is due to move to an electronic patient record in the Emergency Department in Autumn 2024 – time critical medications including steroids are due to be incorporated into this.

- The Emergency Departments on both sites are participating in a Royal College of Emergency Medicine audit looking at the prescribing and administration of time critical medicines, including steroids. This audit will provide a "benchmark" for the Trust and also highlight areas where further improvement is required. The audit is still in data collection phase but results will be available later in the year.

- The Acting Chief Medical Officer will be attending the Induction for new doctors in August in order to highlight this area of focus for the Trust for all junior doctors rotating into our hospitals.

- The Medical Examiners, at the request of the Trust, are working with Adrenal Insufficiency/Steroid Replacement as one of their high priority conditions which means that any concerns identified with steroid replacement will trigger further case review. The focus therefore remains on this area and will continue to be so until we are fully assured that our processes for identifying and managing this condition are effective.

- The "overflow area" of the ED is no longer being used, having closed in October 2023.

As a Trust, we have reflected on our practices as a result of Mr Pegg's death. I hope the above demonstrates our commitment to ongoing learning and reassurance of our commitment to reinforce the NICE guidelines in relation to steroid treatment for patients.

I trust that the foregoing has adequately addressed the Regulation 28 report issued subsequently to the inquest into the death of Mr Pegg.

Should you require any further information in relation to this matter, please do not hesitate to ask.

I confirm that I have not forwarded a copy of this response to any other Interested Person and would therefore be grateful if you could do so, as appropriate.

Worcestershire Acute Hospitals NHS Trust

I also confirm that the Trust is content for both the regulation 28 report and the response to be released or published should the Chief Coroner wish.

Yours sincerely

[redacted]

Managing Director

Appendices
1. WEDAdult
2. Time Critical Medication Safety Flash v8
3. Detect and Reflect -WEB 207182 Addisonian Crisis.
4. Effective Handover June