

E: [REDACTED]

Date: 27 August 2024

**Private & Confidential**

Ms Alison Mutch  
H M Senior Coroner  
Coroner's Court  
1 Mount Tabor Street  
Stockport  
SK1 3AG

Dear Ms Mutch

**Re: Regulation 28 Report to Prevent Future Deaths**

Thank you for your Regulation 28 Report dated 2<sup>nd</sup> of July 2024 regarding the sad death of James Cockburn. On behalf of NHS Greater Manchester Integrated Care (NHS GM), We would like to begin by offering our sincere condolences to Jame's family for their loss.

Thank you for highlighting your concerns during the inquest which concluded on the 29<sup>th</sup> of May 2024. On behalf of NHS GM, we apologise that you have had to bring these matters of concern to our attention. We recognise it is very important to ensure we make the necessary improvements to the quality and safety of future services.

During the inquest you identified the following cause for concern: -

**The inquest heard that despite the referral being in August 2022 he had to wait months for his appointment due to the demand on cardiac services. This was significant across Greater Manchester but reflected a national picture of significant delays in patients waiting to see a cardiologist. As a consequence, patient/s with cardiac issues are subject to delays in treatment plans and decision making regarding suitability for potentially lifesaving surgical procedures. In Mr Cockburn's case he died whilst waiting assessment for his suitability for open heart surgery. It was 9 months since the first referral.**

Cardiovascular disease or CVD is a general term for conditions affecting the heart or blood vessels and includes angina, heart attacks, strokes, and heart failure. CVD has been identified as the single biggest area where our NHS can save lives over the next 10 years. Not only does it contribute to the gap in life expectancy between the rich and poor, it is also the leading cause of premature death and health inequalities across Greater Manchester (GM) where heart and circulatory diseases will kill more than 1 in 4 people.

NHS Greater Manchester ICB has a CVD prevention plan<sup>1</sup> (based on the National CVD Prevention Recovery Plan 2022) and the key objective within this GM plan for CVD improvement is to support recovery from COVID-19 and return performance to pre-pandemic levels. This includes improving waiting times for patients to see a cardiologist and access to the key diagnostic tests.

This plan is overseen by the GM CVD Prevention Oversight Group and addresses the need to respond to the national CVD Prevention Recovery Plan and builds on our existing workstreams, structures and networks. It sets out an innovative, whole-system, population-health approach that empowers clinicians, non-clinical partners, patients, and communities across our system to work together to prevent CVD by providing alignment and co-ordination across different parts of the system.

Positive progress is being made on waiting times to access cardiac services and related diagnostic tests. However positive progress in relation to early detection and timely referral of patients at risk of CVD has increased demand on tertiary specialist referrals and related diagnostic tests. Progression of the NHS GM CVD Prevention Plan remains a key priority for NHS GM.

**The position the inquest was told is exacerbated due to significant wait times for essential tests such as trans oesophageal echocardiograms to be carried out due to a shortage of suitably qualified professionals to carry them out.**

Radiologist shortages are being experienced nationally, with a 15% vacancy rate across Greater Manchester at consultant grade.

The Greater Manchester Imaging Network are supporting the upskilling and change of skill mix within the Imaging workforce by allocating funding for reporting radiographers, focusing on computerised tomography (CT) and magnetic resonance imaging (MRI) reporting radiographers. Furthermore, the network are coordinating international recruitment via community diagnostic centres (CDC) funding stream to bring in more radiologists.

The Imaging network are exploring the use of a collaborative staff bank, including CT, to reduce reliance on agencies etc. Also, the use of picture archiving and communication system (PACS) based reporting in future will be an enabler for an insourcing model or more centralised service to be used for reporting. PACS are Picture and Communication Systems, which provide economical storage and convenient access to images from multiple modalities and could therefore be used as central storage systems that can be used across GM, reducing the staffing resource required to do the reporting. The implementation of PACS is currently a key scheme within the Imaging Digital Programme.

**In his case the position was further exacerbated by delays in communication between two different trusts – NCA and MUFT. Their IT systems are completely separate and cannot transmit information into the others patient records easily. This meant that it was almost a month before the system at MUFT was updated with the test results from Salford Royal.**

Inter-operability of different information technology systems to enable efficient and effective communication across primary care, secondary care, tertiary care and wider system partners is a challenge. This is both at a Greater Manchester level and wider. We continue to work towards improving this as a system.

<sup>1</sup> [Greater-Manchester-Recovery-and-Prevention-Plan\\_final.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/wp-content/uploads/2022/03/greater-manchester-recovery-and-prevention-plan-final.pdf)

Health and social care organisations in Greater Manchester have established the GM Care Record (GMCR), a shared care record which amalgamates essential information for 2.8 million citizens and is used by health and social care professionals for direct care across the region's 10 localities.

This shared care record is seen as a priority in the regional provision of care. The number of unique monthly users grew over 100% between April 2020 and December 2020 and continues to grow, with more than 4,000 patient records being accessed each day. Graphnet's CareCentric shared care record software collates information from and provides information to over 500 health and social care organisations.

Data held in the shared care record includes:

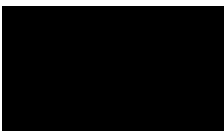
- appointments and visits
- assessment and test information
- care packages
- critical clinical support requirements such as allergies, medications, and alerts


We acknowledge that there is still further work to do in relation to this and we will be challenging the leaders who support our digital transformation programmes to look in more detail at improving the interface between secondary and tertiary care systems and our providers in these sectors as to how they work together to enable this.

We will be sharing this learning at the Greater Manchester System Quality Group on the 19<sup>th</sup> of September 2024.

Thank you for bringing this matter to our attention.

Best wishes



  
Chief Nursing Officer  
NHS Greater Manchester