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**National Medical Director**  
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25/09/2024

Dear Coroner,

**Re: Regulation 28 Report to Prevent Future Deaths – Josh Andrew Smith who died on 22 December 2022.**

Thank you for your Report to Prevent Future Deaths (hereafter "Report") dated 15 July 2024 concerning the death of Josh Andrew Smith on 22 December 2022. In advance of responding to the specific concerns raised in your Report, I would like to express my deep condolences to Josh's family and loved ones. NHS England are keen to assure the family and the Coroner that the concerns raised about Josh's care have been listened to and reflected upon.

I am grateful for the further time granted to respond to your Report, and I apologise for any anguish this delay may have caused Josh's family or friends. I realise that responses to Coroner's Reports can form part of the important process of family and friends coming to terms with what has happened to their loved ones, and I appreciate this will have been an incredibly difficult time for them.

Your Report raised concerns over continued delays to ambulance handovers at hospitals and the impact this was having on the speed of ambulance response times.

NHS England recognises the ongoing significant pressure on all NHS services, including ambulances, and continues to prioritise improvements to response times, as well as 4-hour performance in Emergency Departments, to recover and improve urgent and emergency care services. Despite significant challenges, including unprecedented industrial action and higher than anticipated demand, there has been a marked improvement, with over 2.5 million more people completing their A&E treatment within 4 hours in 2023/24 compared to 2022/23.

National work has also focused on the need to increase ambulance capacity through growing the workforce, improve flow through hospitals and reduce handover delays, speed up discharges from hospital and expand new services in the community; all of which support improved patient flow. The NHS is also working more closely with local authorities to improve the timely discharge of patients and has developed discharge metrics to monitor performance improvements.

Response times for Category 2 ambulance calls have improved over the past year, with an average response time over 13 minutes faster compared to the previous year. Other benefits for patients include:

- Tens of thousands more people received the care they needed to return home quickly and safely due to the expansion of same day emergency care (SDEC) services.
- On average, around 500 fewer patients a day had to spend the night in hospital because of a discharge delay, and 13% more patients received a short-term package of health or social care to help them continue their recovery after discharge.
- Urgent community response teams provided 720,000 people with an alternative to going to hospital between April and January 2024.
- Virtual wards have supported more than 240,000 people to get the hospital-level care and monitoring they needed in the comfort of their own home.

The ambitions for 2024/25 have recently been set out in the [NHS priorities and operational planning guidance](#). Relevant to your Report, these are:

- Improve A&E performance with 78% of patients being admitted, transferred, or discharged within 4 hours by March 2025.
- Improve Category 2 ambulance response times relative to 2023/24, to an average of 30 minutes across 2024/25.

NHS England's operational planning guidance has asked [systems](#) to focus on three areas to deliver these ambitions:

1. Maintaining the capacity expansion delivered through 2023/24.
2. Increasing the productivity of acute and non-acute services across bedded and non-bedded capacity, improving flow and length of stay, and clinical outcomes.
3. Continuing to develop services that shift activity from acute hospital settings to settings outside an acute hospital for patients with unplanned urgent needs, supporting proactive care, admissions avoidance and hospital discharge.

During 2024/25, providers have access to funding of £150 million to support specific local improvement plans for urgent services, including for mental health care. These new improvements will support patients being treated more quickly in A&E or by other services in the community. Up to £150 million will also be available to incentivise the best performing areas and those that improve fastest. The NHS and local authorities will also work together to expand intermediate care services, both in people's own homes and in community beds, thanks to the additional £400 million [Better Care Fund](#) (BCF) available to support further improvements in hospital discharge. There will also be further improvements to, and co-ordination of, community-based services that support people to avoid ambulance call-outs and hospital admissions, by treating people in the most appropriate place for their level of need.

NHS England will also be prioritising:

- Improving the length of stay for all admitted patients (specifically emergency admissions with a length of stay of 1+ day).

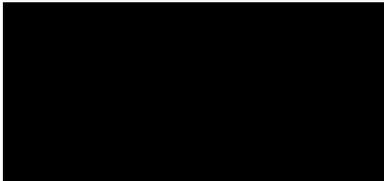
- Reducing delays.
- Improving the length of stay in NHS commissioned community beds.

My regional colleagues in the North East & Yorkshire have also engaged with colleagues at the West Yorkshire Integrated Care Board (WYICB) in relation to your concerns, who have advised us of several measures underway to improve flow and ambulance delivery. I understand that WYICB are responding directly to the Coroner, and I refer you to their response for further information on local and system steps.

I would also like to provide further assurances on the national NHS England work taking place around the Reports to Prevent Future Deaths. All reports received are discussed by the Regulation 28 Working Group, comprising Regional Medical Directors, and other clinical and quality colleagues from across the regions. This ensures that key learnings and insights around events, such as the sad death of Josh, are shared across the NHS at both a national and regional level and helps us to pay close attention to any emerging trends that may require further review and action.

Thank you for bringing these important patient safety issues to my attention and please do not hesitate to contact me should you need any further information.

Yours sincerely,



National Medical Director