

## Department of Health & Social Care

Our ref:

Anne Pember His Majesty's Senior Coroner The Guildhall St Giles' Square Northampton NN1 1DE Northamptonshire

By email:

Minister of State for Health

39 Victoria Street London SW1H 0EU

22<sup>nd</sup> August 2024

Dear Ms Pember,

Thank you for your two reports of 4 July regarding the death of Harry Peter Dunn. I am replying as Minister with responsibility for urgent and emergency care.

Firstly, I would like to offer my sincere condolences to Mr Dunn's family and loved ones. It is vital that where Regulation 28 reports raise matters of concern, these are looked at carefully so that NHS care can be improved. I am grateful for you bringing these matters to my attention.

Your reports raise concerns with East Midlands Ambulance Service NHS Trust's (EMAS) response times, and paramedic access to analgesics.

In preparing this response, Departmental officials have made enquiries with NHS England (NHSE) and the Medicines and Healthcare products Regulatory Agency (MHRA). I understand MHRA will write to you separately regarding the report for which they are a direct recipient.

In relation to ambulance service performance, the Government accepts that response times have been below the high standards that patients should expect in recent years. The NHS has been broken and it will take time to fix. However, we are determined to do so and have committed to returning urgent and emergency care waiting times to the safe operational waiting time standards set out in the NHS constitution. For Category 2 incidents, this would mean an average response time of 18 minutes compared with current NHS performance (July 2024) of 33 minutes 25 seconds.

As a first step, the Health Secretary has ordered a full and independent investigation into NHS performance to provide a frank assessment of the issues and challenges it faces. The investigation's findings will feed into the Government's work on a 10-year plan to radically reform the NHS and build a health service that is fit for the future.

In the shorter-term, a range of action is being taken by the NHS this year to improve performance including maintaining the increase in ambulance capacity (hours on the road) delivered in 2023/24, where NHSE reported a circa 6% increase year-on-year for December 2023. There is a focus on reducing ambulance handover delays to support patient flow and on increasing direct referrals into community services to reduce conveyance rates to acute hospitals.

NHSE has advised my officials that the regional team for the Midlands will continue to have regular review meetings with EMAS including on the support needed to improve response times performance and the quality of care for patients. It is recognised that operational productivity has fallen since the pandemic, and while there was improvement during 2023/24, further improvement is required. The NHS's operational target for 2024-25 is for Category 2 response times to improve to an average of 30 minutes across the year.

Regarding your concerns on paramedic access to nasal analgesics, as of 31 December 2023, paramedic independent prescribers who are registered with the Health and Care Professions Council can prescribe and administer the following five controlled drugs:

- Morphine sulphate by oral administration or by injection
- Diazepam by oral administration or by injection
- Midazolam by oromucosal administration or by injection
- Lorazepam by injection
- Codeine phosphate by oral administration

Paramedics without an independent prescribing qualification can also administer a range of medicines on their own initiative via exemptions under the Human Medicines Regulations 2012.

Please be assured that we will take account of your concerns when agreeing the next steps in our joint work programme with NHSE regarding expanding supply, administration and prescribing of medicines responsibilities for regulated healthcare professionals.

Thank you once again for bringing these concerns to my attention.

Yours sincerely,

