

Ein cyf/Our ref:

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Dyddiad/Date: 16th August 2024

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FREEPOST FEEDBACK@HYWELDDA

Dear Mr Bennett

Thank you for contacting the Health Board on 20th June 2024 regarding Susan Margaret Williams' care and treatment within Withybush General Hospital (WGH.)

I am sorry to hear the treatment Mrs Williams received has given you cause for concern. The Health Board strives to provide the absolute best of care to our patients, and where concerns are raised, it is important that we undertake a thorough review and provide a formal response to you. Where failings are identified, I can assure you that the Health Board is eager to acknowledge this openly, learn lessons and take action to prevent similar incidents occurring again.

You have raised two matters in the Regulation 28 Report. First, the medication record/chart in the Emergency Department does not have a box for the time at which medication is prescribed. There are boxes for when the medication is to be given, and a box for when the medication has been given. In Mrs Williams' case, she was written up for analgesic, anti emetic and two antibiotics by the same Doctor. Time to be given was "stat" (immediately). However, only the anti emetic and analgesia were immediately given.

The medication chart in the Emergency Department is a Wales NHS approved chart. Hywel Dda University Health Board is not able to unilaterally change the chart, although it can put forward proposals for variations to the national group. The Learned Coroner will appreciate that this takes quite some time, and we are aware that the issue has been raised with the National Authority directly in a separate, but linked PFD Report.

Electronic Prescribing and Medicines Administration System (EPMA) is currently being rolled out in NHS Wales. EPMA will address this issue because it is live system: any intervention which you make will automatically record who carried out the intervention together with the date and time. This is not unlike the Welsh Nursing Care Record (WNCR) with which the Coroner will be familiar. The precise commencement depends on a number of factors including system purchase, roll out and education.

In the interim we will implement that the "time to be given" box on the Medication Card (Emergency Department) is always completed with an actual time. Practitioners will be directed not to write "stat". The time written will be the time when the antibiotic was prescribed, as immediate administration will always be required with intravenous

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antibiotics in this situation. The intention is to roll out these steps rapidly to staff include presentation by Pharmacy at the Grand Round in w/ 12th August 2024.

The second matter concerns the A and E Card/ cascard which contains a narrative entry from the clinician. In this case, the entry by the Doctor is dated but not timed. The entry is brief and does not refer to commencing the sepsis six bundle or the decision to prescribe medicines.

The entry is not compliant with record keeping policy which states entries need to be timed. The timed entry represents the time of writing that entry in the notes unless annotated otherwise. Clinicians are expected to date and time every separate entry. We would not expect a clinician to write specifically what drugs they are prescribing in the narrative clinical record, though they may write 'antibiotics' for example, or the name of a drug in their narrative. The narrative, even if dated and timed, would never trigger a drug being given because the drug chart itself is what carries the legal prescription and includes dose, route, signature, and time to be given.

In respect of this second issue, we have sent an email to all clinicians reminding them of the Health Board's policy on clinical record keeping standards. An audit will be carried out to ensure adherence.

The Health Board is grateful for you bringing these concerns to our attention, as it allowed us to make relevant changes, to prevent similar events reoccurring. Action has been taken to address the issues identified.

Please do not hesitate to contact the Health Board again should you require any further information.

Yours sincerely

Interim Chief Executive