

Private and Confidential

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Via email

16 October 2024

Dear Madam

RE: Regulation 28: Prevention of Future Deaths report - Daniel KLOSI (died 02.04.23)

We write to you in response to the Regulation 28: Prevention of Future Deaths report following the Inquest touching the death of Daniel Klosi. The Royal Free London NHS Foundation Trust has carefully considered the matters of concern raised in the Regulation 28 report.

At the inquest, The Royal Free London NHS Trust Divisional Director of Women and Children's services gave evidence that changes have been introduced since Daniel's death:

"More training has been given and reflection has been undertaken".

The Royal Free Hospital Paediatric Emergency Department team can confirm that training has occurred in relation to children with a deteriorating condition. This links to the use of the Paediatric Early Warning Score tool as well as the identifying sepsis tool. Staff have also been re-familiarised with escalating this information using the SBAR (Situation, Background, Assessment, Recommendation) communication tool. A child who has a deteriorating condition Nurse Champion has been appointed as a senior nurse with a specialist interest in this situation. This person is responsible for leading on training with members of the paediatric nursing team and for undertaking audits to monitor knowledge and the management of such clinical cases.

There is a mandated sepsis assessment tool within the initial paediatric triage form on the EPR (Electronic Patient Record) that has been implemented to support the assessment and recognition of a child with sepsis. This tool works in conjunction with the Manchester Triage System tool and local sepsis guidelines.

"A child reattending the emergency department will now be seen by the next available doctor, rather than waiting for a paediatrician to become available".

A pathway for children who reattend the emergency department policy has been implemented across Royal Free London Hospital Group.

“The trust is trying to gain a more sophisticated understanding of the ways in which neurodiverse patients can present and how best to interpret their presentation”.

The Royal Free Hospital Paediatric ED has delivered simulation teaching to ED nursing and clinical staff about the management of neurodiverse children. The Royal Free London Paediatric Emergency Departments have distraction kits to support children and families during clinical assessments.

Two areas were noted to benefit from further consideration by the Trust.

1. *“It was difficult for the nursing staff to obtain Daniel’s observations because he was so distressed. That was understandable, but because of the long wait in a busy department, it meant that on the fourth attendance Daniel did not have a full set of observations for over four hours and shortly afterwards suffered a catastrophic cardiovascular compromise. I heard that obtaining no observations should be regarded in the same light as obtaining worrying observations and should be escalated without delay. It seems that this has not been emphasised explicitly to nursing and medical staff at the trust”.*

The Trust has ratified and disseminated an updated guideline for recording and escalating physiological observations in children and young people. This includes guidance for staff that the inability to obtain observations should be considered and escalated in the same way as abnormal observations.

In addition, the Trust will be implementing the new national PEWS (Paediatric Early Warning Score) that has been mandated by NHSE as well as the updated paediatric sepsis bundle of care and alerts system. This is being integrated into the EPR and there will be a programme of staff training.

2. *“The trust emergency department electronic patient records do not show how many times a patient has presented to hospital with the same signs and symptoms during their current illness – and of course this may be the case in other emergency departments”.*

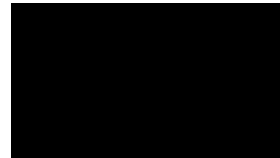
The Trust can confirm that for patients who reattend an icon is visible next to the patients name on EPR indicating previous attendances within 30 days. The Trust is running refresher training on identifying these icons, and this is covered at the digital training induction for all new medical staff.

The Trust is committed to ensuring that the lessons are learned from Daniel's tragic death and to continue to identify opportunities to improve patient safety. The Trust will be monitoring the adherence to these ongoing improvement plans.

Yours sincerely



**Medical Director, Barnet Hospital
Hospital
Royal Free London Group NHS Trust
Trust**



**Medical Director, Royal Free
Hospital
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Trust**