

## REGULATION 28: REPORT TO PREVENT FUTURE DEATHS (1)

*NOTE: This form is to be used **after** an inquest.*

	<b>REGULATION 28 REPORT TO PREVENT FUTURE DEATHS</b>  <b>THIS REPORT IS BEING SENT TO:</b>  1. [REDACTED] Secretary of State for Education
1	<b>CORONER</b>  I am Rachael Clare Griffin, Senior Coroner, for the Coroner Area of Dorset.
2	<b>CORONER'S LEGAL POWERS</b>  I make this report under paragraph 7, Schedule 5, of the Coroners and Justice Act 2009 and regulations 28 and 29 of the Coroners (Investigations) Regulations 2013.
3	<b>INVESTIGATION and INQUEST</b>  On the 2 <sup>nd</sup> June 2023, an investigation was commenced into the deaths of Sunnah Summayah Khan, born on the 11 <sup>th</sup> January 2011 and Joseph Ian Abbess born on 22 <sup>nd</sup> November 2005.  The investigation concluded at the end of the Inquest on the 4 <sup>th</sup> October 2024.  The medical causes of death were:  Ia Drowning  The conclusion of both of the Inquests was accident
4	<b>CIRCUMSTANCES OF THE DEATH</b>  On the 31st May 2023 both Sunnah, who was 12 years of age, and Joe, who was 17 years of age, travelled to Bournemouth to spend the day at Bournemouth East Beach. Sunnah had travelled with her family and Joe had travelled with his friends. Neither knew each other. At some point after 15.14 hours they, separately, entered the waters at the beach in the designated safer swim zone, where they remained. At approximately 15.45 hours an intense flash rip current occurred in the waters, and both became separated from those they were with in the water. At approximately 16.18 hours, Joe was seen in an unresponsive condition faced down in the water. He was recovered from the water straight away and despite attempts at resuscitation and a brief period of return of spontaneous circulation, his death was confirmed later that day. At approximately 16.45 hours, Sunnah was seen in an unresponsive condition faced down in the water at the shoreline. She was recovered from the water straight away and despite attempts at resuscitation, her death was confirmed later that day.

**CORONER'S CONCERNS**

During the course of the inquest the evidence revealed matters giving rise to concern. In my opinion there is a risk that future deaths will occur unless action is taken. In the circumstances it is my statutory duty to report to you.

The **MATTERS OF CONCERN** are as follows:

1. During the inquest evidence was heard that:

- i. As the Maritime and Coastguard Agency (the MCA) "Managing Beach Safety" document ([found here](#)) highlights, UK beaches are special places which attract millions of people every year to enjoy the beauty of the beach and create lifelong memories. Like every other body of water there is an element of risk and unpredictability which can lead to fatalities through drowning.
- ii. One of the ways to reduce fatalities through drowning is by warning and informing users the water of the potential dangers.
- iii. The National Water Safety Forum (NWSF) was formed in 2004 and is a UK-focused voluntary network working to reduce water-related deaths and associated harm. Members of the NWSF have undertaken a great deal of work to supplement the awareness of water safety. This includes, for example, work by the Royal National Lifeboat Institution (the RNLI), the MCA and the Royal Lifeguarding Safety Society (the RLSS) to name just a few organisations. Despite the great efforts by these agencies, unfortunately this information is only available to those who have access to it, whether that be through the internet, media campaigns or other resources.
- iv. Water safety is covered in the physical education part of the curriculum at primary schools in the UK and by the end of primary school all children should be able to swim at least 25 metres and have an understanding of self-rescue and survival skills to undertake the practical element of this learning.
- v. Research, which was undertaken prior to the covid pandemic which began in March 2020, has shown that 1 in 4 children do not get access to this education. Further since the covid pandemic there has been a reduction in schools' access to swimming pools.
- vi. If children do not get access to this vital lifesaving education in school, there are concerns as to where this awareness will come from. Some will receive it from privately funded swimming lessons, however not every child is fortunate enough to have such lessons.
- vii. The RLSS and Sunnah and Joe's mothers have been advocating for water safety to become part of the classroom part of the curriculum as opposed to the physical education part of the

	<p>curriculum on the basis that if children cannot do the practical part of water safety, they will at least have access to water safety awareness and lifesaving skills in a classroom setting.</p> <p>viii. Members of the NWSF, for example, volunteer members of the RNLI, the MCA do go into schools to provide talks to children, however, this would not be provided at every school. Further, the RLSS and Swim England provide resources that can be used in schools to educate children about the risks and survival skills around water safety. Again, this is delivered on a voluntary basis and will not be provided in every school.</p> <p>2. I have concerns with regard to the following:</p> <p>i. There are inherent dangers of using any form of water and it is crucial for people to have an awareness of these risks and how to manage them as the lack of awareness could lead to more deaths from drowning.</p> <p>ii. An ideal opportunity to warn and inform all members of the public would be through educating children of the risks. The lack of providing education to children around these risks through the national classroom curriculum could lead to future deaths.</p>
6	<p><b>ACTION SHOULD BE TAKEN</b></p> <p>In my opinion urgent action should be taken to prevent future deaths and I believe you and/or your organisation have the power to take such action.</p>
7	<p><b>YOUR RESPONSE</b></p> <p>You are under a duty to respond to this report within 56 days of the date of this report, 5<sup>th</sup> December 2024. I, the coroner, may extend the period.</p> <p>Your response must contain details of action taken or proposed to be taken, setting out the timetable for action. Otherwise you must explain why no action is proposed.</p>
8	<p><b>COPIES and PUBLICATION</b></p> <p>I have sent a copy of my report to the Chief Coroner and to the following Interested Persons:</p> <ul style="list-style-type: none"> <li>(1) Sunnah's family</li> <li>(2) Joe's family</li> <li>(3) Royal National Lifeboat Institution</li> <li>(4) Maritime and Coastguard Agency on behalf of His Majesty's Coastguard</li> <li>(5) BCP Council</li> <li>(6) South West Ambulance Service NHS Foundation Trust</li> </ul> <p>I am also under a duty to send the Chief Coroner a copy of your response.</p>

