

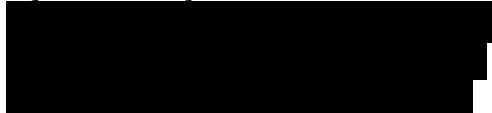
Office of the Chief Medical Officer
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Private & Confidential

For the attention of HMC Ian Potter

Bow Coroner's Court
Bow Road
London E3 3AA
By email only:



9 December 2024

Dear Sir,

RE: REGULATION 28 REPORT TO PREVENT FUTURE DEATHS

1. This is a formal response to your Regulation 28 report issued on 28 October 2024 where you set out concerns relating to the care of the late Mr. Kashim Ali whilst he was under East London NHS Foundation Trust's (the 'Trust's') care.
2. I understand that at the inquest into Mr. Ali's death, you heard evidence which gave rise to the following concerns:
 - Concern 1 – Failure to escalate NEWS2 scores
 - Concern 2 – Inappropriate staff practices
 - Concern 3 – Inaccurate record keeping at times
3. I am therefore writing to reassure you and the family of Mr. Ali that the Trust has carefully reviewed these issues as highlighted in the Regulation 28 Report and has either taken or plans to take the actions outlined below.

RESPONSE



We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.
We care . We respect . We are inclusive



Concern 1: Failure to Escalate NEWS2 Score

4. I was concerned to hear that on more than two occasions while on Millharbour Ward, Mr. Ali achieved a NEWS2 score which was not escalated to the nurse in charge for review.
5. The Trust takes the monitoring and escalation of NEWS2 scores extremely seriously, as it is a key part of ensuring patients' physical health is closely managed and responded to appropriately. I have set out below the processes in place which are relevant to this concern.

Staff Training

6. All in-patient nursing staff across the Trust are now required to attend a two-day physical health training course. This course includes comprehensive instruction on NEWS2, its significance, and the appropriate escalation procedures. This training is mandatory and forms part of the Trust's ongoing commitment to ensure that inpatient clinical staff have the knowledge and skills required to respond effectively to physical health concerns.
7. In addition to the initial physical health training, NEWS2 training is also included in the Trust's annual mandatory online training programme. This ensures that all inpatient nursing staff are refreshed on the key aspects of NEWS2, including recognising deteriorating physical health and the correct process for escalating concerns to senior staff. Completion of this training is monitored.

Nursing Handover Process

8. The nursing handover process has been standardised in Tower Hamlets and is set to be rolled out across other directorates in the Trust to ensure that the care needs and risks for each patient are clearly communicated at the start of each shift. This includes a thorough review of physical health issues, with a particular emphasis on the frequency and appropriateness of physical health observations, including NEWS2 scores. The handover is designed to ensure that all staff are aware of the specific needs of each patient, including any concerns related to their vital signs or deterioration.
9. Every ward across the Trust also hold a daily MDT meeting, where any concerns regarding physical health observations, including NEWS2 scores, are raised and discussed. This provides an additional layer of oversight to ensure that all potential issues are flagged early and responded to appropriately.



10. A further safeguard is in place with the the directorate’s inpatient unit’s midday huddle, where a report is generated from the RIO system to identify any patient who has a NEWS2 score of 3 or above (3 or above being the level that requires escalation) within the previous 24 hours. If such a score is identified, the ward teams’ interventions and escalation process are reviewed to ensure that appropriate actions have been taken. This process is recorded for audit purposes and provides a clear trail to confirm that physical health concerns have been addressed.
11. As part of the the directorate’s inpatient unit’s new handover process, there is now a specific training tool for the Nurse in Charge, which covers the importance of monitoring and escalating physical health observations, including NEWS2 scores. Section 11 of this tool directly addresses the importance of overseeing physical health observations and ensuring they are carried out and acted upon. Each Nurse in Charge is required to confirm they have reviewed and understood this process, ensuring that they are fully aware of their responsibilities in managing and escalating NEWS2 scores.

11.	As the nurse in charge you hold responsibility to check that tasks are allocated to staff with the appropriate competencies and that they are completed. The physical health observations and the therapeutic observations are the two tasks you will need to monitor closely. If the patient has an increased vital observation plan you need to check that these are done, you also need to check all routine and enhanced vital signs to ensure they are within normal limits for each patient.	
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Concern 2: Inappropriate Staff Practices

12. I was concerned to learn about the inappropriate staff practices you set out in your Regulation 28 notice. The Trust takes these matters very seriously, and I would like to outline the steps we are taking to address the concerns raised and to reinforce our expectations regarding staff conduct and clinical practices.

Disciplinary Action for Non-Compliance

13. The Trust has thoroughly investigated the incident and is following established disciplinary procedures for each staff member who failed to comply with the required observation standards in relation to Mr. Ali's care. Where evidence of non-compliance with the Trust’s policies or failure to meet expected clinical standards has been identified, appropriate action is being taken in line with our disciplinary framework. This is to ensure accountability and to prevent recurrence of such lapses in care.



Reinforcement of Mobile Phone Policy

14. We recognise that the inappropriate use of personal mobile phones by staff during clinical shifts can be detrimental to patient safety and the quality of care. In response to this concern, the Trust has reviewed and updated its mobile phone policy to establish clear guidelines on the acceptable use of personal phones within clinical settings, with the effect that staff are completely prohibited from using personal mobile phones during shifts. This policy is designed to ensure that staff remain fully engaged with their patients and the clinical environment, minimising distractions and maintaining focus on patient care.
15. To further ensure that these issues are being addressed at the local level, the frequency of visits by a lead Nurse or a Matron on night shifts has been increased to twice a month from once a month for three months. These visits are focused on maintaining high standards of care and ensuring that all clinical practices, including the monitoring of physical health observations, are being consistently followed. As part of these visits, any use of mobile phones by staff is specifically observed to ensure compliance with the updated policy. These increased visits are also an opportunity to address any concerns directly with staff and to reinforce the Trust's expectations regarding clinical standards.

Concern 3: Inaccurate Record Keeping at times

16. The Trust fully acknowledges the importance of accurate and timely record-keeping in delivering safe and effective care. The concerns raised regarding inaccurate or incomplete records in relation to Mr. Ali's observations are taken very seriously, and I would like to outline the steps we have taken to address this issue and improve the quality of documentation across the Trust.
17. As the Trust PSII set out, work is progressing on introducing an e-observations system which will prompt staff to enter both their observations and engagement with the patient (rather than just the location of the patient), and this will be time-stamped. On the app each patient's observation care plan will be linked to their record of observation. This ensures continuity of care. Any reviews in level of observations will require an entry to be made verifying the escalation and decision making process.

Amendment to Ward's Daily Spot Check Audit



18. In response to the concerns raised, the Directorate has amended the daily spot check audit process on all wards, including Millharbour Ward, to ensure that the quality of patient records is closely monitored. The daily spot check now specifically includes a detailed review of the records kept during patient observations, including physical health observations and any clinical actions taken in response to changes in a patient's condition. This enhancement to the audit process is designed to ensure that any gaps or inaccuracies in record-keeping are identified early and addressed promptly.
19. The amended spot check audit now includes an evaluation of the following key areas:
- Accuracy of recorded observations: Checking that vital signs, including NEWS2 scores, are accurately documented, with any changes in the patient's condition clearly reflected in the records.
 - Timeliness of documentation: Ensuring that records are completed in real-time or as close to the observation as possible, rather than being left incomplete or delayed.
 - Clarity and completeness of entries: Verifying that all entries are clear, legible, and provide sufficient detail regarding the patient's condition and any actions taken by staff.
20. This more thorough approach to daily spot checks will be overseen by the Unit Matron and ward managers to ensure that accurate and complete records are always maintained. Any issues identified during the audits will be escalated immediately, and targeted interventions will be put in place to address any deficiencies in record-keeping practices.

Updated Observations and Therapeutic Engagement Policy

21. The Trust has just introduced an updated Observations and Therapeutic Engagement Policy (ratified 27th November 2024). The updated policy now includes additional material covering (1) expected standards of engagement and documentation following period of enhanced observations (2) expected standards of documentation including process to be followed for observations not undertaken (3) Trust wide agreed 'change ideas' to improve therapeutic engagement and observations and (4) the addition of Honesty in Documentation training as part of the observation competency training staff must complete.



Ongoing Training and Support

22. The Trust recognises that accurate record-keeping is not only crucial for the continuity of care but also for accountability and auditing purposes. As such, the Trust is committed to reinforcing these standards through regular audits, continuous training, and a robust system of checks to ensure that patient records are always completed in a timely, accurate, and thorough manner.
23. The Trust will continue to review and enhance its processes for record-keeping and auditing as part of our ongoing commitment to improving the quality of care we provide. By ensuring that all documentation is accurate and up to date, we can better support clinical decision-making, improve patient outcomes, and ensure that our practices remain aligned with the highest standards of care.

Conclusion

24. I hope this response provides sufficient reassurances to you and to the family of Mr. Ali about the additional learning that has taken place at the Trust because of his sad death.
25. I would like to offer my sincere and heart-felt condolences to Mr. Ali's family at this difficult time.

Yours sincerely,




Chief Medical Officer

