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Stoke on Trent
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[REDACTED]
9 April 2024

STRICTLY PRIVATE & CONFIDENTIAL

Mr Daniel Howe
H M Assistant Coroner
Stoke on Trent and North Staffordshire

[REDACTED]

[REDACTED]

Dear Mr Howe

Joshua BURGESS

Further to your letter 13 February 2024, I am pleased to provide a response under paragraph 7 of Schedule 5 of the Coroners and Justice Act 2009 and Regulations 28 and 29 of the coroner's (Investigations) Regulations 2013, addressing your concerns surrounding the death of Joshua Burgess.

This response is provided on behalf of Brooke Medical Centre and the University Hospitals of North Midlands NHS Trust.

Concerns

During the course of the inquest, you felt that evidence revealed matters giving rise for concern. In your opinion, matters for concern are as follows:

1. The Neurology department of the Royal Stoke University Hospital operated a system whereby it did not instruct the prescribing GP to amend the prescription of Brivaracetam when changes to dosage had been agreed with Mr Burgess' mother. The evidence from the Consultant Neurologist was that an assumption was made that when changes to medication had been discussed and agreed that Mr Burgess' mother would attend the GP surgery to discuss the changes in medication. The same witness gave evidence that it was assumed a pharmacist within the GP surgery would read the correspondence from the neurology department and make the necessary changes to prescriptions without express instructions to do so.
2. The 'workflow' within the Brook Medical Centre was such that letters sent from the Neurology Department discussing changes in medication (albeit not containing a request to amend the prescription) were processed by support staff and not referred to a clinician to consider and so no changes were made to the prescription.

3. The letter of 27 July 2022 from the Neurology Department to Brook Medical Centre seeking clarification as to the correct dosage of Brivaracetam was processed by support staff and a summary medication sent without referral to a clinician.
4. Godfrey Care were informed by Mr Burgess' mother and the Neurology Department of Royal Stoke University Hospital that the appropriate dose of Brivaracetam was 4ml twice daily. Medication was withheld between 22-26 July 2022 due to the information not being in writing from the prescriber, however the evidence at inquest was that 10ml twice daily was commenced on 26 July following a call to the 111 service.

You reported this matter under Paragraph 7, Schedule 5 of the Coroners and Justice Act 2009 and Regulations 28 and 29 of the coroners (Investigations) Regulations 2013.

In your opinion, action should be taken to prevent future deaths.

Action Taken

The University Hospitals of North Midlands NHS Trust has taken the issues highlighted during the inquest seriously and indeed, I am grateful that you have raised your concerns.

We have taken this opportunity to work together with our partners in primary care and have consulted with colleagues from the wider the Integrated Care System (ICS).

1. The Trust's outpatient clinic letter standards describe the structure of clinic letters based on standard headings. You will recall that [REDACTED] (GP) gave evidence at the inquest to the effect that there were areas in the acute Trust setting which already provided discharge information which he considered to be of a 'gold standard.' The Trust is committed to working towards improving compliance with these standards. To support this, we are working towards creation of a standardised template in our 'Medisec' system (system where letters are created). This will include a section for changes to medications and clear actions for those in the primary care setting, for example, instructions for the prescribing GP to amend prescriptions.
2. We have discussed the above process with nominated individuals from the ICS. Due to the timeframes that would be required for the creation of standardised template for clinic letters within the 'Medisec' system across the Trust, we are reiterating the Trust standards and [REDACTED] has agreed, with immediate effect, that all clinic letters received from neurology will be reviewed by a GP at Brook Medical Centre. This has been implemented due to the acknowledgement that neurological conditions are often complex, and it is more likely that they will require frequent medication changes, titration and/or closer monitoring.
3. This concern will also be addressed by the interim solution implemented by Brook Medical Centre, in that all correspondence from the neurology department will be reviewed and triaged by a GP.
4. Whilst this concern is not directly addressed to the acute Trust (UHNM) or Brook medical Centre, it has been considered as part of the wider learning following Joshua's death. Medications for epilepsy is considered across the healthcare economy to be 'critical'. The National Patient Safety Agency (2010) defined critical medicines as 'medicines which can result in patient death or serious harm if

there are delays in their administration'. Whilst the Coroner found that the delay in administering medications on this occasion did not contribute to Joshua's death, we believe that further education within the care home setting is required. With this in mind, we will work together with the local authority to ensure that up to date communications are shared across the Stoke on Trent and North Staffordshire health and social care economy to reiterate this message. Whilst this has not yet been implemented, it will be taken forward by end of May 2024.

Whilst some changes have been implemented with immediate effect, other planned changes may take longer. However, we are committed to ensuring that correspondence between service providers is provided in an accurate and consistent manner.

We do hope that the above information provides assurance that the Trust and Brook Medical Centre have taken the concerns raised at the inquest seriously and that we are working together to ensure that communication of medication changes is clear and unambiguous between partners across the Staffordshire and Stoke on Trent health economy.

Should you wish to discuss any aspect of this report further, please do not hesitate to contact us directly.

Yours sincerely

[Redacted Signature]

(electronically approved)

[Redacted Signature]

(electronically approved)

[Redacted Name]
CHIEF EXECUTIVE

[Redacted Name]
BROOK MEDICAL CENTRE