

Mr Heath Westerman, Assistant Coroner
HM Coroners Service
Shirehall
Abbey Foregate
Shrewsbury
Shropshire SY2 6ND

22nd April 2025

Dear Mr Westman,

Thank you for your letter dated 28th February 2025 issued under Regulation 28: Report to prevent future deaths, in relation to the risks you identified through the inquest examining the death of the late William Stephen Green.

I write to provide details of the steps that we have taken and plan to address the issues highlighted in your letter.

- 1. Once any patient at The Royal Shrewsbury Hospital is initiated on a new prescribed drug during an admission, no written record is ever made anywhere by anyone including pharmacy; nurses; doctors or consultants explaining or counselling the patient upon the possible side-effects or complications as a result of taking a specific prescribed drug; nor is there any written record on what to look out for and what to do in such circumstances and where they can get assistance.*
- 2. No provision seems to be in place to record what should happen when the patient lacks capacity to understand such an explanation even when it is offered.*

Record of counselling

The counselling of a patient in hospital should be undertaken by the medical staff on prescribing the medication, by the nursing staff and pharmacy staff in preparation for discharge. All professions have a role in drug counselling, our pharmacists are the specialists in medication and counselling and have access to additional resources and referral services.

Pharmacy led counselling/documentation:

- The current medication counselling standard operating procedure (SOP) only requests a memo is entered into the eScript software (the pharmacy drug management system) if there is concern a patient does not fully understand the explanation of the new medication. This SOP is being updated to require all counselling episodes to be documented. This will be fully implemented by the end of May 2025.
- A referral to the community-based support services (see below) will also require documented evidence on eScript.

- A new patient medication leaflet has been designed and is being introduced to help provide further patient information. This leaflet will signpost patients to the NHS drug information website that has patient directed information on many of the drugs prescribed, including specific information on high-risk drugs and immediate actions to take for serious side-effects. This leaflet will be available by September 2025; it has been drafted and is currently being taken through the trust accessibility and governance processes.
 - The community services outlined below will supplement the patient information leaflet for those patients where the leaflet is not adequate.

Nurse led counselling:

- The nursing staff have a role in providing information especially around the time of discharge. The printed discharge summaries will be adapted with the NHS drug website highlighted to aid this counselling process.
- When a patient is discharged from a non-inpatient area, the patient information leaflet will be available to give to patients as they are counselled.

Informed consent/counselling when prescribing a new medication:

Treating clinicians have a duty and responsibility to ensure patients are aware of any material risk associated with planned treatment, this includes significant side effects of medication.

- All senior doctors have statutory training which include safe prescribing. This case will be incorporated into this training as a learning example, highlighting the importance of adequate counselling, the importance of documenting the process and reminding them of the support available for patients who may not immediately understand. The training is delivered by the trust pharmacists.

Ongoing support and counselling

Not all patients may be able to fully understand and comprehend the new medications started in hospital for a variety of reasons. It is also recognised that some medications are high risk, they have potentially serious implications of not complying with the medication or have potentially serious complications (anti-epilepsy medication is included in this list).

Once a patient has been discharged from hospital, there are two Integrated Care System (ICS) led services that patients can be referred to for ongoing support and monitoring. The Discharge Medication Service (DMS) and the Structured Medication Review (SMR) service.

The DMS is a service where patients identified in the acute care setting who require additional support in relation to their medication management can be referred by the pharmacy team. The hospital ward staff, doctors or nurses can highlight patients of concern to pharmacy to trigger a referral. The general referral criteria are: Admitted patients only, patients initiated on a high-risk medication or patients who have been identified with compliance concerns. The referral is directed to the patients nominated community pharmacist who will provide counselling and additional support in a less stressful environment.

The SMR is a service where referral is to the GP or the PCN pharmacist for a full medication review. This service is to review patient compliance and provide further information/education and counselling. There will also be a review of all the medications to ensure they are appropriate and optimised. The pharmacy team at SaTH would initiate a referral to this service.

Following the death of Mr Green and as a result of the internal investigation, a multi-disciplinary working group has been set up to address the concerns raised and ensure appropriate actions are developed, implemented and embedded in future care.

Thank you for bringing your concerns to my attention. I hope that you are assured that I have taken them seriously, investigated then appropriately and we are putting in place systems and processes to reduce future harm. If I can provide any further information, please do not hesitate to contact me at the above address.

Yours sincerely

A black rectangular box redacting the signature of the Chief Executive Officer.

Chief Executive Officer