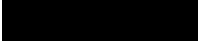






Department
of Health &
Social Care


*Parliamentary Under-Secretary of State
for Public Health and Prevention*

*39 Victoria Street
London
SW1H 0EU*

Our ref: 

HM Coroner Heidi J Connor
Coroner's Office
Reading Town Hall
Blagrove Street
Reading
RG1 1QH

By email: 

18 June 2025

Dear Ms Connor,

Thank you for the Regulation 28 report of 23rd April 2025 sent to the Department of Health and Social Care about the death of Lorraine Parker. I am replying as the Minister with responsibility for cancer policy.

Firstly, I would like to say how saddened I was to read of the circumstances of Ms Parker's death, and I offer my sincere condolences to her family and loved ones. The circumstances your report describes are concerning and I am grateful to you for bringing these matters to my attention.

The report raises concerns over the lack of formal guidance requiring consultant surgeons to consider CT scanning for post-operative patients with persistently high or rising CRP levels, and an over-reliance on clinical judgement without sufficient consideration of objective markers such as CRP. It also notes the absence of clear documentation around decisions to use, or not use, imaging in these scenarios, and raised a broader concern that apparent clinical improvement at the bedside may mask serious post-surgical complications that could only be identified through appropriate imaging.

In preparing this response, my officials have made enquiries with colleagues across the health system, including the National Institute for Health and Care Excellence (NICE), the Care Quality Commission (CQC) and multiple teams across the Department of Health and Social Care to ensure we adequately address your concerns.

In this case, there was not one single error but multiple errors that contributed to the death of Ms Parker.

Lord Darzi's independent report on the state of the NHS highlighted the challenges facing our health service, which is why we have launched:

- a 10-Year Health Plan to reform the NHS and make it fit for the future

- a refreshed workforce plan to ensure the NHS has the right people in the right places with the right skills to deliver the care patients need
- a National Cancer Plan for England to reduce the number of lives lost to cancer and improve patient experiences and outcomes.

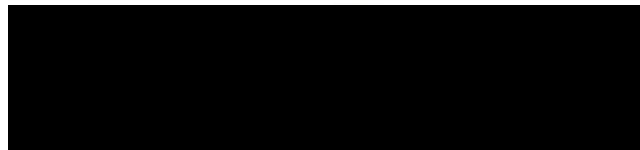
With regard to concerns about guidance for clinicians, the NICE guideline on colorectal cancer (NG151) aims to improve quality of life and survival for adults with colorectal cancer by providing evidence-based recommendations on the management of both local disease and metastatic (secondary) cancer. It covers which interventions should be used for different types and stages of the disease, helping to guide decisions on surgery, chemotherapy, and other treatments.

The NICE guideline does not provide detailed protocols for postoperative tests or scans, and clinicians would be expected to use their judgement and follow local protocols or other relevant professional guidance. However, whilst the Department has no immediate plans to instruct NICE to produce standalone guidance on post-surgery imaging based on CRP thresholds, details of this case have been shared with colleagues in NICE's prioritisation team to consider if further action should be taken.

With regard to concerns about clinical judgement, NHS Trusts are responsible for ensuring staff are sufficiently competent to deliver care. Accordingly, the Trust in question should consider their protocols in the wake of this case. The CQC has passed details of the case to the relevant inspection team for Royal Berkshire Hospital for further consideration.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

Yours sincerely,

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