

Executive Medical Directors Office  
Huddersfield Royal Infirmary  
Acre Street  
Huddersfield  
HD3 3EA

22 October 2025

VIA EMAIL

Ms Charlotte Keighley  
HM Assistant Coroner  
The West Yorkshire (Western) Division  
Cater Building  
1 Cater Street  
Bradford  
BD1 5AS

Dear Ms Keighley,

**Re: Prevention of Future Deaths Report – Ms Kore Padgett**

Thank you for your Regulation 28 report following the inquest into the death of Ms Kore Elizabeth Padgett. Calderdale and Huddersfield NHS Foundation Trust once again extends its sincere condolences to Ms Padgett's family and acknowledges the concerns raised in your report.

In response, a comprehensive multi-disciplinary team (MDT) review was convened on 29 September 2025 to examine the issues identified and to ensure that appropriate learning and improvement actions are taken. The review included senior clinical, governance, legal, and operational stakeholders across relevant specialties, with input from Leeds Teaching Hospitals where neurosurgical care was involved.

The MDT focused on four key areas of concern raised in the PFD:

1. Staff training in the application of hard collars
2. Communication with the neurosurgical team regarding treatment options
3. Consideration of risks versus benefits of collar use and informed consent
4. Ward-level communication and multidisciplinary decision-making

## ***MDT Conclusion***

The review highlighted that although specialist teams like Orthotics and Physiotherapy follow well-established training protocols, there is no unified Trust-wide competency framework for the application of hard collars among all relevant staff groups. As a result, staff often depend on informal experience, which can contribute to variability in practice.

The review also identified missed opportunities for collaborative decision-making and escalation regarding collar-related complications. Documentation of MDT discussions, patient preferences, and risk-benefit considerations were found to be insufficient, limiting the ability to demonstrate informed consent and person-centred care.

Furthermore, the absence of a structured escalation pathway and designated ward for cervical spine injury management contributed to fragmented communication and delayed reassessment of treatment plans.

## ***Safety Improvement Actions***

The Trust has taken proactive and comprehensive steps to ensure the safe and consistent care of patients with cervical spine injuries. In response to concerns raised, we have developed a robust clinical pathway to guide admission, and treatment within dedicated acute orthopaedic wards. This pathway ensures that patients are consistently placed in clinical areas with the appropriate skills and resources to support all aspects of their care. The pathway also incorporates coordinated support from ortho-geriatricians and the multidisciplinary team (MDT). An ongoing audit is evaluating the admitting ward allocation, treatment, and patient outcomes. This work is led by Will Ainslie, Consultant and Divisional Director for Surgery and Anaesthetics, and Yaqoob Ghumro, Consultant and Clinical Director for Acute Medicine, and is on track for delivery by November 2025.

To support this pathway, CHFT guidance and protocols are being revised to provide clear escalation processes for clinical advice, complications and neurosurgical liaison and involvement relating to cervical spine injury. These revisions are being led by Dr Gudrun Seebass, Consultant in Care of the Elderly, and will ensure that patients are managed consistently in line with updated standards. This work is also scheduled for completion by November 2025 and is progressing as planned.

Following implementation of the pathway and protocols, audits will be conducted at 1, 3, and 6 months to assess adherence to best practice and identify any areas requiring further optimisation. The frequency of future audits will be reviewed based on the findings and determined by whether additional improvements are needed.

Patients with cervical spine injuries who require management with a neck collar are being admitted to Wards 19 and 21 at Huddersfield Royal Infirmary (acute

orthopaedic wards) to support continuity of care and operational efficiency. To ensure safe and effective treatment, competency-based training will be provided to all clinical professionals involved in their care, including Registered Nurses, Allied Health Professionals, and substantive ward based Medical Staff. Led by Phillip Taylor (Senior Clinical Orthotist) and Nicola Glasby (Outpatient Therapy Services Manager), the training focuses on validated competency in the application, monitoring, and management of neck collars. Two sessions have been scheduled for Ward 19 staff in December 2025, with further sessions planned for Ward 21 staff in January 2026. Compliance will be monitored through annual audits, beginning one month after training implementation. The initiative remains on track for completion by the end of January 2026.

A Standard Operating Procedure (SOP) for collar initiation and management is also being developed. This SOP will include guidance on consent, risk versus benefit, informed decision-making, collaborative input from the neurosurgical team, and clear escalation protocols. Led by Dr Gudrun Seebass and Claire Alletson, Matron for Surgery and Anaesthetics, the SOP will be embedded within the competency framework and is scheduled for implementation by the end of January 2026.

In addition, CHFT is further embedding person-centred care principles to support informed consent when a patient has a collar in place. Led by Rachel Rae, Associate Director of Nursing for Surgery and Anaesthetics and Matron Claire Alletson, care plans are being revised to ensure that discussions around risk and benefit are documented clearly within the Electronic Patient Record (EPR). This initiative will be monitored through EPR audits and Quality Assurance Leadership walk rounds and is scheduled for completion by January 2026.

CHFT remains committed to delivering safe, consistent, and person-centred care for patients with cervical spine injuries. All actions are progressing within agreed timelines, with appropriate governance and audit mechanisms in place. We are confident that these measures will prevent future harm and ensure high standards of care across our services.

Yours sincerely,



**Neeraj Bhasin**  
Executive Medical Director