

**Mr Hassan Shah**  
Assistant Coroner  
Northamptonshire Coroner's Service  
The Guildhall  
St Giles Square  
Northampton  
NN1 1DE

**National Medical Director**  
NHS England  
Wellington House  
133-155 Waterloo Road  
London  
SE1 8UG

**17th March 2026**

By Email: [REDACTED]

Dear Coroner,

**Re: Regulation 28 Report to Prevent Future Deaths – Akhona Moyo who died on 26 November 2022.**

Thank you for your Report to Prevent Future Deaths (hereafter "Report") dated 28 January 2026 concerning the death of Akhona Moyo on 26 November 2022. In advance of responding to the specific concerns raised in your Report, I would like to express my deep condolences to Akhona's family and loved ones. NHS England is keen to assure the family and yourself that the concerns raised about Akhona's care have been listened to and reflected upon.

Your Report raised concerns around the lack of electronic access to primary care medical notes for hospital doctors, including in the emergency department and paediatric departments. This is particularly important in cases such as this where the patient is autistic and non-verbal.

NHS England recognises that limited information sharing between care settings can contribute to delays in discharge, incomplete handovers and less effective continuity of care, particularly when patients receive support across organisational or geographical boundaries. NHS England has developed and led the [Frontline Digitisation \(FD\) Programme](#), which has supported provider organisations to adopt [Electronic Patient Record \(EPR\) systems](#) which support increased consistency in digital maturity but also improve information sharing within and between organisations.

The FD Programme not only enables organisations to purchase EPR systems, but also advises on safe and effective deployment. However, whilst the FD Programme supports investment into local digital capabilities, interoperability i.e. how different digital systems communicate with one another, it is typically configured and managed at a local level, based on local arrangements between provider organisations (although regional centres will be cognisant of the wider catchment area) and their technology suppliers. As such, interoperability may vary depending on local infrastructure and information governance arrangements.

Access and information contained within the local 'Northamptonshire Care Record' is determined by local policy and procedures and therefore falls outside of NHS England's remit to comment upon.

As part of the FD Programme, Northampton General Hospital secured funding and went live with the [Nervecentre Electronic Patient Record](#) (EPR) on 27 June 2025. Prior to adoption, patient information was recorded through a range of non-standardised processes rather than a single integrated EPR. NHS England are unable to state the ability of Nervecentre to integrate or view GP primary care records as this would be dependant on the local trust and organisation. We would suggest that the Coroner directs this query to the Trust.

Further digital investment has been confirmed for the [Frontline Productivity \(FP\) Programme](#), a four-year initiative which is beginning in April 2026. The programme aims to help NHS organisations realise the full benefits of digitised patient information by developing the capabilities enabled through EPR systems, building on the successful implementation funding provided through the FD Programme.

For organisations with lower levels of digital maturity, the FP Programme will focus on improving access to relevant patient information. More digitally mature organisations will be supported to implement automated and digital workflow functionalities within or connected to their EPR systems. The overarching aim is to enable healthcare professionals to spend more time on direct patient care and to facilitate faster, more accurate communication. In addition the [National Care Records Service](#) (NCRS) enables access to the patient's [Summary Care Record](#) (SCR) which can be accessed by those with suitable permissions. In the event that the patient is not able to provide 'Permission to View' their SCR, an emergency access option is available to clinicians. 'Additional information' is also available on the SCR which may include further medical information with regards to the patient.

The newly published [Fit for the Future: 10 Year Health Plan for England](#), sets out the government's plan for healthcare in England over the next 10 years. It also sets out a commitment to give patients 'a single, secure and authoritative account of their data – a single patient record – to enable more coordinated, personalised and predictive care.'

NHS England is aware of the challenge in sharing medical records between providers and the variability between areas using different technologies. We are also aware that use of the SCR is variable across different care settings. We are therefore working across the health system to support greater integration and awareness of record sharing between providers. We are also working with the SCR Programme to support wider access to relevant patient information.

We note that your Report has also been addressed to Northampton General Hospital. The Trust responsible for this hospital (Northampton General Hospital NHS Trust) will be better placed to respond to the concerns raised.

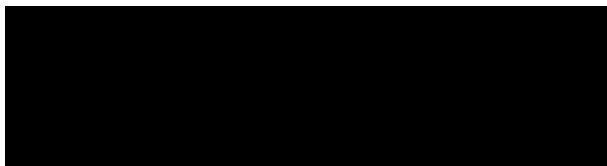
## **Regional Response**

The NHS England Midlands Region Team have provided details on the local IT infrastructure. They have advised that acute providers in the region would have had access to the NHS Spine. The Spine supports the IT infrastructure for health and social care in England. NHS Spine access now includes access to the National Care Records Services (NCRS) and [GP Connect](#). The NCRS includes clinical information such as flags or alerts, reasonable adjustments, access to the summary care record, links to documents on the patient record, covid-19 vaccination status and GP Connect information (this is available in pilot areas). The NCRS also includes all data from the Personal Demographics Service (PDS). The PDS is the national master database of all NHS patients in England. It holds basic patient demographic details such as name, address, date of birth, contact details, registered GP and nominated pharmacy, as well as a national unique identifier - the NHS number. The PDS is used for direct care which is defined as *“clinical, social or public health activity concerned with the prevention, investigation and treatment of illness and the alleviation of suffering of individuals”*.

I would also like to provide further assurances on the national NHS England work taking place around the Reports to Prevent Future Deaths. All reports received are discussed by the Regulation 28 Working Group, comprising Regional Medical Directors, and other clinical and quality colleagues from across the regions. This ensures that key learnings and insights around events, such as the sad death of Akhona, are shared across the NHS at both a national and regional level and helps us to pay close attention to any emerging trends that may require further review and action.

Thank you for bringing these important patient safety issues to my attention and please do not hesitate to contact me should you need any further information.

Yours sincerely,

A large black rectangular redaction box covering the signature area.A black rectangular redaction box covering the name of the National Medical Director.

National Medical Director  
NHS England