



**University Hospitals Sussex**  
NHS Foundation Trust

HM Area Coroner  
Mr Joseph Turner  
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**University Hospitals Sussex NHS Foundation Trust**  
**Trust Headquarters**  
**Royal Sussex County Hospital**  
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5 June 2026



Dear Mr Turner

### **Inquest into the death of Paul Guy Robert Harries**

Thank you for your letter of 20 April 2026, enclosing your formal report under Regulation 28 to Prevent Future Deaths.

My sincere condolences go to Mr Harries' family. I am so sorry for their loss.

Your Regulation 28 report has been shared widely at the Trust to ensure learning and senior oversight of the actions we have taken.

The Lead Consultant for the Emergency Department (ED) at the Royal Sussex County Hospital has confirmed that there is now a system in place, introduced in 2026, to review all imaging reports obtained in the ED. The ED team check on incidental or relevant unrelated findings and ensure that follow-up arrangements are in place and/or the patient's GP is informed. In addition, our hospital imaging reports are also available on the electronic system which the GPs access and review.

The function of e-RS allows for identification of urgent or routine patients providing referring GPs and triaging Consultants use this function accurately and convert referrals from one category to another when clinically appropriate. Internally, this has resulted in education for the triaging Consultants to ensure that they are aware of the functions of e-RS and are able to use it accurately. It has also resulted in regular audits to check the categorisation of referrals against the narrative provided by the triaging Consultants.

We are looking into integrating the electronic systems so that GPs and referring Consultants are notified when patients do not attend appointments for investigations or imaging arranged for them. This is being developed locally for the Vascular Assessment Unit patients with a view to piloting it. For patients with AAA who have met the threshold for surgical intervention, we have developed a database to enable us to track the investigation and follow-up of all patients. This is reviewed weekly. Mr Harries never met the threshold

for treatment and hence would not have been included in this database had it been present at the time, but it does serve to protect eligible patients.

Our Chief Information Officer is supporting this work while the Trust fully implements the Trust wide EPR (electronic patient record) system.

I hope this letter provides you with assurance that the Trust has made significant improvements, we are working to continuously improve patient safety and reduce risk.

Yours sincerely,



**Chief Executive**