Exceptional care for the individual

elizabeth finn homes

Mr N Graham
Assistant HM Coroner for Oxfordshire
Oxfordshire District Register Office
2nd Floor, 1 Tidmarsh Lane
Oxford
OX1 1NS

19 March 2014

Dear Mr Graham,

I write in response to your report dated 28th February 2014, regarding the circumstances surrounding the death of Dr Peter Nott, a resident at Rush Court care home.

The report highlights some concerns that were discussed at the inquest and the organisation's duty to respond with an improvement plan within the timescale set. For clarity I will deal with each point raised in turn.

Concern One: I recommend that Rush Court Nursing Home review their procedures for attending on a patient after a fall (whether conscious or not) in order to identify the appropriate level of examination and nursing attention required.

The organisation has reviewed its polices and procedures when dealing with a resident who has experienced an unwitnessed fall. This procedure will be cascaded to all clinical staff with instructions that should a resident fall and it is unwitnessed, then nursing staff or the person in charge of a residential home, should commence neurological observations. These will be recorded using the Glasgow Coma Scale and incorporated into a resident's care plan.

This procedure will be reinforced during staff meetings and any individual training needs will be monitored through the supervision, learning and development programme. Basic competencies for head injury care will be reviewed with all clinical staff and the person in charge of our residential home.

The timescale for this action to be completed is 1st April 2014.

Concern Two: Rush Court Nursing Home review the information they provide to paramedics attending and the procedures in place to ensure the accuracy of the information can be passed to paramedical staff attending the home.

Procedures have been reviewed with reference to information given to paramedics attending the home. The procedure states that only a Registered Nurse or person in charge of the home must hand over clinical information to the paramedic team. This is to be clear and concise, detailing observations and clinical judgement where appropriate. This will then be recorded clearly in the resident's care plan for future

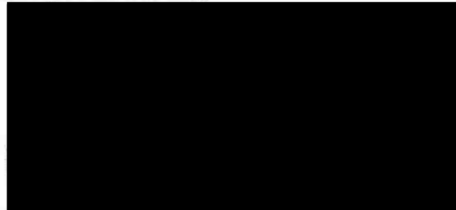
reference. This information will be given to staff during staff meetings and all staff will sign as per policy to confirm they have agreed to and understood the procedure.

The timescale for this action to be completed is 1st April 2014.

Elizabeth Finn Homes strives to offer quality clinical care to all of our residents and to review policies and procedures on an annual basis to ensure best practice is maintained.

We have welcomed your advice upon how to further improve our policies and procedures and hope that this action will help to improve our practice.

Yours sincerely



Head of Care Operations
Elizabeth Finn Homes Limited