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Our Ref: I.001893
Your Ref: APW/CAH/3875-2014

Bolton 
NHS Foundation Trust

Bolton NHS Foundation Trust
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25th November 2015

Mr Alan P Walsh
HM Area Coroner
West District
Paderborn House, Civic Centre
BOLTON
BL1 1JW

Dear Mr Walsh

Re: Maureen Chatterley– Deceased

Re: Regulation 28 Report to Prevent Future Deaths

I am writing in response to your Regulation 28 Report to Prevent Future Deaths, issued following the Inquest into the death of Maureen Chatterley held on 29 September 2015. May I take this opportunity to extend my sincere condolences to the family of Mrs Chatterley for their loss.

On receipt of the Regulation 28, I requested that the Chief Pharmacist and Medicines Safety Group review the matters detailed in your Report and I am now in a position to respond to your concerns outlined in Section 5 (1) and (2) of the Report as follows:-

The Medicines Safety Group was created in 2013 with the purpose to develop, implement and maintain a medication governance strategy and work plan within Bolton Foundation Trust around the safe and effective use and management of medicines. The full terms of reference for this group are attached for your information.

The procedures for security and safe keeping of medicines on wards is regulated by the standards set out in the Safe and Secure Handling of Medicines (2005), formally known as the Duthie Report (<http://www.dhsspsni.gov.uk/the-safe-and-secure-handling-of-medicines.pdf>).

All clinical areas are audited quarterly, by pharmacy staff, against these standards and the results are discussed with the ward managers. In addition to this the Medicines Safety Group has recently introduced additional measures to audit the security of medicines by introducing the NHS Protect's Medicines Security Ward/Department checklist. These are completed by ward staff and collated for each division and the results and action plans discussed at the Medicines Safety Group. Copies of both audit forms have been included for information.

Local processes already in place that mitigate the risks related to medicines storage include the ordering of stock medicines by pharmacy staff for individual clinical areas. This completed, as a minimum, weekly but is based on demand.

While Safe and Secure Handling of Medicines (2005) deals in the main with medicines storage, the legal requirements for prescribing, administration and storage are regulated by the Medicines Act 1968 and the Misuse of Drugs Regulation 2001. These key pieces of legislation along with documents such as Safe and Secure Handling of Medicines (2005) inform the development of our Trust medicines policy (attached).

As you will be aware, the Misuse of Drug Regulations 2001, regulate the activities for certain medicines considered to be potentially harmful or dangerous and these are referred to as controlled drugs. Under the various Schedules within the regulations only those medicines in Schedules 1 or 2 e.g. morphine are subject to the requirement of running balances. The Trust completes quarterly controlled drug audits against the regulations.

Many Trusts, including Bolton NHS Foundation Trust have introduced additional controls for medicines where local intelligence would suggest further restrictions beyond those required of the Medicines Act 1968 should be introduced. This is often referred to as restricted drugs. Legally they can't be referred to as controlled drugs but restrictions on their use are similar to that imposed by the Misuse of Drugs Regulations 2001. The Medicines Safety Group has considered, in light of your concerns raised, the inclusion of Lorazepam as a restricted drug. However we feel adequate controls are in place, as outlined above, that do not warrant Lorazepam's inclusion to a restricted list. This decision has been taken in consideration of the restrictions balanced against the potential for missed doses, delays in administration and increase in nursing time in medicines administration.

To facilitate the flow of patients through the organisation, Bolton NHS Foundation Trust has in place a one stop dispensing process. This not only encourages the use of patients own drugs during admission but also encourages the dispensing of medicines to patients for individual use, therefore reducing the use of stock medicines. The process in pharmacy provides a permanent record in the patient's shared electronic record of the date of dispensing, the quantity supplied and a date to review the stock levels and need for re-supply before the supply is exhausted.

Where a patient brings their own medicines into the Trust, these are assessed for suitability of use (Appendix 16, Medicines Policy). The quantity brought in is recorded by pharmacy staff according to local policy DOP30b- Procedure for ward visit.

The above outlines the measures in place that the Medicines Safety Group believes will mitigate the matters of concern highlighted in your report, however in addition to the above the Group have also agreed the following actions and timescales:

Action	Target Date	To be actioned by
Introduce new Wardex, which includes a section for pharmacists to record reviews of the wardex. This includes the clinical review and supply of medicines	Dec 2015	Medicines Safety Group
Develop and implement a local endorsement policy by pharmacy staff of the Wardex, to include supply and quantity details.	Feb 2016	Medicines Safety Group
Safe and Secure Handling of Medicines Audits (Duthie) to be presented to Medicines Safety Group for discussion and agreement of action plans.	Dec 2015	Medicines Safety Group

I am confident that the Trust has the necessary systems in place to ensure that medication which is kept on wards is stored safely and securely and that the Trust is able to verify at any point in time the medication stored in both stock cupboards and patient's medication drawers.

I do hope that my response has provided you with the assurance that you and the family are looking for. If you need any further information, or if I can be of any further assistance please do not hesitate to contact me.

Yours sincerely

A handwritten signature in black ink that reads "Jackie Bene". The signature is written in a cursive, flowing style.

Dr Jackie Bene
Chief Executive

