East Midlands Ambulance Service NHS
NHS Trust

Emergency Care | Urgent Care | We Care

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Our ref: [redacted]

25 July 2016

Mrs Lydia Brown
HM Assistant Coroner
Leicester City and Leicestershire South
The Coroner's Court
Town Hall
Town Hall Square
Leicester
LE1 9BG

Dear Mrs Brown

Re: Report to Prevent Future Deaths: Ahmedreza Fathi (DECEASED)

Thank you for your Regulation 28 Report to Prevent Future Deaths, dated 11 May 2016, bringing to my attention HM Coroner's concerns arising from the Inquest into the death of Ahmedreza Fathi. I would like to re-emphasise our apologies for the failure to respond to the original Regulation 28 Report. An initial investigation has not found evidence of receipt of this report, however our management of Coronial processes is under review to ensure stronger and more robust handling of all cases to avoid such events in the future.

I would like to reassure you that within the East Midlands Ambulance Service (EMAS) all matters related to patient safety are taken extremely seriously. In particular, any matters arising from Coroner's Inquests from which lessons can be learnt, and this includes any Prevention of Future Deaths notices, are discussed within the Coroners Working Group. The Coroners Working Group, having considered all the relevant issues of concern relating to the particular Inquest at hand, will then develop an appropriate action plan with specified timelines for each action, together with identified individuals to deliver the actions specified.

This process has been applied to the Prevention of Future Deaths notice (PFD notice) pertaining to the Inquest into the death of Ahmedreza Fathi.

The **MATTERS OF CONCERN** are as follows:

- On previous occasions following deaths in prison locally in Leicester, the Coroner and the PPO have raised concerns regarding delays in requesting 999 emergency assistance. On the night of 12 May 2015 there was a delay in summonsing an ambulance, in breach of PSI 03/13 and the prisons own internal policy. The then serving Head of Safety advised the Court that she "dealt with this problem a lot". There appeared to be a perception from gatehouse staff that calls had to be delayed until further information could be obtained from those officers at the scene.

- EMAS advised the court that 3 protocols already exist between other stakeholders and discussions to consider a prison/emergency response protocol would be welcomed and could be accommodated. I therefore encourage both the prison and EMAS to arrange a meeting to take this matter forward.

I set out below the actions EMAS has taken and our response to HM Coroner's concerns as detailed in the PFD notice.

To address the specific issues identified in relation to Gartree Prison, alongside informing wider regional secure units, an initial meeting has been scheduled for Wednesday 3 August 2016. This meeting will be attended by the [redacted] (Deputy Medical Director), [redacted] (Consultant Paramedic Lead) from EMAS, and the Head of Operations and Senior Operations Team from HMP Gartree. This meeting will aim to set an agenda to address access issues, ambulance activation protocols and partnership working principles. It is planned that this will be the first of a number of meetings and workshops to address the identified issues and available opportunities.

EMAS has been proactively working with secure environment teams to develop working practices to create safe and efficient care delivery. This has been led by local management teams based upon locally identified needs. A key example of this working is the provision of SEND cards (Secondary Emergency Notification of Dispatch) for all secure environments for staff issue. These cards identify the core information required by the AMPDS triage system to appropriately triage patients and act as an aide memoire for front line police and public safety officials.

In order to provide suitable oversight, leadership and empowerment to change, EMAS has now formed a senior regional group to address issues relating to secure environments such as prisons and secure mental health units etc. This centralised approach will enable a consistent and informed approach to this complex area of healthcare provision. This group has membership of senior team members from the Operations Directorate, Medical Directorate, Emergency Planning and Resilience Directorate and Emergency Operations Centre.

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I hope that you agree that EMAS have taken initial steps to ensure that the provision of high quality emergency care for secure environments working alongside partner agencies. I can assure you that we are taking the actions identified with a view to ensuring that similar tragic events can be avoided wherever possible in the future and that lessons are learnt.

Please do not hesitate to contact me should you require any additional information, or any clarification, in connection with the above.

Yours sincerely

[redacted]
Interim Chief Executive