

Our Ref: GF/MLS/C9/15/33/GF181/SF

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Dear Ms Harrold

**The Late Jean Stockley, date of birth: 20 January 1931**  
**NHS No: 416 747 3917**

Thank you for your letter of 15 August 2016, and for drawing your concerns to my attention. As you may know, this Trust is always willing to review our practices, in order to identify improvements which can be made in the light of experience. Your report has been circulated to relevant senior staff within the Trust to ensure that learning is as wide as possible.

Using the same numbering as in section 5 of your report, for ease of reference, I hope the following comments will help to reassure you about progress that has been made since April 2015:

1. I regret that the documentation arising from the nurse's call to the doctor after the NEWS score had risen was so brief, and that neither the doctor nor the nurse concerned could recall this telephone conversation at all. The ward has since adopted a protocol known as SBAR (**Situation / Background/ Assessment/ Recommendation**), which includes documentation. This helps staff (especially nurses) to frame critical conversations raising concern about their patient, and has been shown to improve communication and patient safety. A special form is used to prepare for and record such telephone conversations, and is then placed in the patient's health records as a record of the call. I was disappointed to learn that on this occasion the doctor had apparently not visited the ward when he was notified of the sudden rise in Mrs Stockley's NEWS score.
2. Since April 2015, there have been several changes at the Princess Royal Hospital. The Critical Care Outreach Team, to whom you refer, implemented a 24 hour service on the site from June 2015, so are readily available to support and advise on the care of any patient whose condition is deteriorating. A revised NEWS policy has been introduced but it is recognised that some flexibility is required to ensure that contact is made with the member of staff who is most likely to be able to offer timely assistance to the patient. At night, there is no orthopaedic registrar present on the Princess Royal Hospital site, and the critical care and medical registrars who are on site are often better placed to assess the immediate needs of a patient whose condition has unexpectedly changed.

With our partner

3. Nursing staff on Twineham ward have been reminded that rather than simply handing over to the nurse who will be taking over direct care of a patient on the next shift, any concern about a patient should be drawn to the attention of the nurse in charge. Since June 2016, a senior nurse (band 6) has been rostered to be on duty on the ward throughout the 24 hour period. This person is trained to provide advice, support and clinical guidance to other nurses, including ensuring that appropriate assistance is obtained in the event of a patient deteriorating. It is also the responsibility of the Band 6 nurse to contact a more senior member of the medical team if there is cause for concern arising from the advice received from the junior doctor first contacted.
4. The Trust is considering carefully the series of actions which will need to be taken to enable an electronic NEWS system to be introduced. The Trust provides clinical services in a wide range of buildings across several sites. As an essential preliminary step, WiFi cover is being extended to cover the whole Trust. It is anticipated that this will be in place in 2017, enabling the Trust to make further progress in automating observations.

Thank you once again for raising your concerns with me.

Finally, I would like to extend my sincere condolences to the family of Mrs Stockley on their sad loss.

Yours sincerely

Dr Gillian Fairfield  
**Chief Executive**

A handwritten signature in black ink, appearing to read 'G. Fairfield', with a long horizontal stroke extending to the right.