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**Lewisham
Clinical Commissioning Group**

Mr John Thompson
Clerk to Senior Coroner
Coroner for Inner South District Greater London
Inner London South Coroner's Court
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1st November 2016

Dear Mr Thompson

Thank you for sending the Coroner's concerns in relation to the death of Mrs McCorkle.

Lewisham CCG was not present at the inquest, but has been named as being able to take action to prevent future deaths.

As commissioners of the Lewisham community District Nursing services, provided by Lewisham and Greenwich NHS Trust, we are responsible for ensuring the quality and safety of patients discharged to their care. We will take steps to ensure that there is a marked improvement in the risk assessment of patients who are discharged from hospital with pressure ulcers into the care of community services. We have established a Community Pressure Ulcer Panel with the Lewisham and Greenwich NHS Trust and London Borough of Lewisham as part of adult safeguarding processes to review the causes and predisposing factors of pressure ulcers and to ensure that adequate care, interventions and protection arrangements are in place. Additionally we established an "acute pressure ulcer panel" which reviews the Root Cause Analysis (RCAs) of all pressure ulcers acquired in the community and ensures the lessons learned are taken back to practice. This has seen a significant reduction in community acquired pressure ulcers and changed practice in skin care by Domiciliary Care Agencies. We will also take steps to ensure that where a patient is discharged by choice into the care of their family, they are supported to be able to care for them at home. When a family is unable to provide this level of support, the patient should not be discharged home and alternative arrangements made including assessment for eligibility for Continuing Health Care (CHC) in a nursing home. We will be monitoring this through our contract management process at the Clinical Quality Review Group (CQRG).

In some exceptional circumstances and if there is eligibility, CHC can include 24 hour nursing care for patients at home. Examples of this could be long term such as patients who are ventilated or short term for those at the immediate end of life where they have chosen to die at home. This type of 24 hour nursing care is commissioned on a case by case basis from mainly private providers and is needs assessed.

Patients who reach the thresholds for continuing health care (CHC) may be cared for at home or in a nursing home, depending on their personal choice. However many patients and their families chose to care for their loved ones at the end of life or if they have long term conditions. They are supported by

Chair: Dr Marc Rowland

Chief Officer: Martin Wilkinson