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29 May 2018

Mr G Sullivan
Senior Coroner for Hertfordshire
The Old Courthouse
St Albans Road East
Hatfield
Hertfordshire
AL10 0ES

Dear Mr Sullivan

Matthew Faulkner (Deceased)

I am writing in response to your Regulation 28 report to Prevent Future Deaths, dated 29 March 2018, regarding the above named. I was saddened to learn of the circumstances of Mr Faulkner's death on 30 May 2017.

Whilst I am aware that this Trust was not directly involved in the Inquest, I entirely understand why, having heard the evidence from the East of England Ambulance Service (EEAS), you issued this report to ourselves, Luton & Dunstable Hospital and the Princess Alexandra Hospital in Harlow.

As you will be aware, there is a national concern with regard to ambulance handover times at Emergency Departments and it was pleasing to hear recently that the Government are allocating additional funding to the ambulance service to assist with this. However, in this particular instance and in general, we are acutely aware of how ambulance and hospital services need to work together in improving the local situation.

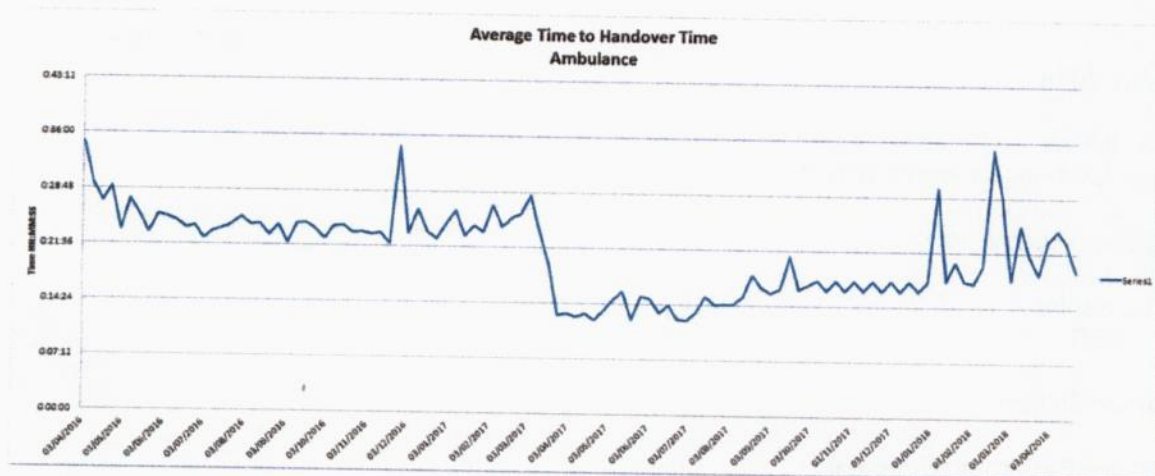
In January 2017 we identified ambulance handover times as a key challenge within our performance targets and in order to address this in March 2017 we sought external expertise to reconfigure the handover process, our aim being to reduce handover times to meet the national standard of 100% within 15 min of arrival, thus releasing ambulance crews in a timelier manner.

Using the principles of lean management, all non-essential tasks were removed from the handover process significantly reducing the workload of the nurse responsible for handover. This reduced the time of handover from 14 min per patient to 5 min significantly improving the department's ability to meet the peak demands. In practical terms this increased our capacity to meet the target for 6 patients in a 30 min period, increased from 2 patients in a 30 min period.

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It is noteworthy that at times demand will out strip capacity leading to breaches in the 15 min target for some patients, whilst the average handover time may remain below 15 minutes.

However, as a result of the work described above the department achieved some of the best average performance in the region and managed to maintain this until September 2017 as demonstrated in the graph below.



In September 2017, we introduced new computerised patient record and observation systems, which regrettably, though understandably, slowed down patient throughput, specifically in the Emergency department. This in combination with winter pressures caused the handover time to slip.

As a consequence of introducing the new systems we are regrettably unable at present to confirm, with certainty, the actual Emergency Department activity (eg. flow of patients, numbers waiting at any point) on 30th May 2017 to explain the ambulance delays relevant to this incident.

We are conducting a focus week in June 2018, mirroring the methods we used to improve the situation last year, in order to bring performance back to the same levels as in April 2017. Having achieved the improvements required, the performance will be monitored on a weekly basis and focus weeks conducted if performance slips.

I hope you will agree that the above measures demonstrate our commitment to ensuring an improvement in ambulance handover times within the hospital setting.

Yours sincerely


Nick Carver
Chief Executive

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