

Ms Nadia Persaud
Her Majesty's Coroner - East London
Sent by email to: [REDACTED]


13 January 2021

Dear Ms Persaud,

**Re: Inquest touching upon the death of James David Alexander Taylor – Regulation 28
(Preventing Future Deaths) report**

Thank you for your letter of 23 Dec 2020 regarding the death of Mr Taylor. Please pass on my condolences to his family and friends. I am replying as Joint Honorary Secretary of the Royal College of General Practitioners. The Royal College of General Practitioners (RCGP) is the largest membership organisation in the United Kingdom solely for GPs. It aims to encourage and maintain the highest standards of general medical practice and to act as the 'voice' of GPs on issues concerned with education; training; research; and clinical standards. Founded in 1952, the RCGP has just over 54,000 members who are committed to improving patient care, developing their own skills and promoting general practice as a discipline.

From your letter, it would appear that Mr Taylor had a number of complex problems, particularly following a road traffic collision. It is also clear that Mr Taylor changed GP surgeries on four occasions prior to unfortunately taking his own life. I understand that the question you have posed is regarding the structure of the GP records that are transferred from one surgery to another and specifically with regard to a summary problem list and medication. In responding to this question, it is worth noting that general practice in the UK is the most computerised element of the health service and has been so for many years. It is now very rare that handwritten notes are made and GPs rely upon specialist computer systems to record and transfer records, as patients move from one surgery to another. The standards and approaches are governed by NHS England and NHS Digital but in summary they include not just the content but also the structure of record keeping. There are a number of GP IT suppliers but the largest is EMIS, which supports the majority of GP surgeries in England. Within the computer programmes, they automatically populate a current and/or significant problem list and secondly an inactive problem list. Examples



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of the former might be a serious health problem such as heart attack or significant mental health difficulty and for the latter, a more routine problem such as a chest infection which would initially be in the current problem list and then move onto the inactive list after a period of time. They also automatically document immediate and repeat prescriptions.

In terms of notes moving from one practice to another, almost always this is a "pull system" whereby it is registration of the patient at their new chosen surgery that starts a process of the previous medical notes being transferred. Whilst in a small number of occasions, a patient may indicate that they are moving to another surgery and give an opportunity for the "leaving" practice to have a clinical handover to the "receiving" practice, this is relatively rare; although when there are complex problems it can be helpful.

Increasingly, although not universally, upon registration, medical records are transferred electronically using a system called GP2GP electronic transfer. See details [here](#), which is run by Primary Care Support England. This has the important set of advantages that the whole record is transferred across and usually seamlessly. This would include any active problem lists, medications and other details. It is also much quicker. However, paper transfer is also used - this still requires that the "leaving" surgery print out the full medical record and the "receiving" surgery to then go through the record, scan it and act upon any obvious issues. There are clearly potential timing and resource risks with this latter process. I have attached the necessary guidance from Primary Care Support Services for your information. The responsibility for the system of transferring records lies with Primary Care Support England rather than RCGP, but our position is to support electronic transfer for the reasons articulated above.

I trust that this reply is helpful and if you have any questions, please do not hesitate to contact me.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Hal', is positioned below the text 'Yours sincerely,'.