NCEPOD SEPSIS STUDY

Dear Colleague

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) is an independent organisation that aims to review clinical practice in the NHS and independent sector and to make recommendations to improve quality of care.

We are currently undertaking a new study to identify and explore avoidable and remediable factors in the process of hospital care for patients with known or suspected sepsis. This work was proposed by Ron Daniels of the Sepsis Trust UK and Imogen Stephens (Public Health England) and the proposal was supported by the Global Sepsis Alliance, Intensive Care Society, Intensive Care National Audit and Research Centre (ICNARC), The College of Emergency Medicine, Royal College of Nursing, Royal College of Surgeons of England, Society for Acute Medicine, and Patients’ Association.

1) It will be a prospective study from 6th - 20th May 2014 inclusive. We will be asking each hospital to nominate a study contact in critical care (Level 2 and 3) and their critical care outreach team if applicable. They will be responsible for identifying patients with sepsis who have been admitted to Level 2/3 or seen by the critical care outreach team during that 2 week period, and will be asked to collect a few patient identifiers on a case identification spreadsheet. Some Local Reporters (NCEPOD contacts in hospitals) may wish to take on this role directly.

From the patients identified, further case information will be obtained retrospectively. This includes a data collection spreadsheet (with admission and discharge dates for example), clinician questionnaires, and case note extracts for peer review by a multidisciplinary group. Organisational data will also be collected from each hospital via an organisational questionnaire.

A copy of the protocol and further information is available to download from our website http://www.ncepod.org.uk/sepsis.htm

The excluded patients from this study are:

- Immunosuppressed neutropaenic patients on chemotherapy, immunosuppressant drugs or transplant programmes;
- Pregnant women up to 6 weeks post-partum (as these cases would be covered by MBRRACE-UK study into maternal sepsis);
- Patients on an end-of-life care pathway at time of diagnosis or where a consultant-led decision had been made not to escalate care (prior to entry into the study);
- Patients who develop sepsis after 48 hours on ICU/HDU; and
- Children <16 years.

2) We are also seeking healthcare professionals from emergency medicine, acute medicine, general medicine, critical care outreach, general surgery and intensive care to become members of a multidisciplinary team of advisors to review case notes and assess the quality of care provided to patients in the study. Advisors would be required to attend a training day in central London in June 2014 (date TBC), as well as 4-6 meetings at NCEPOD, commencing in August 2014 until approximately March 2015. All advisor meetings will be held at NCEPOD as we are constrained by the requirement to maintain confidentiality by holding patient notes on our own premises, but we will reimburse travel expenses.

The closing date is **31st March 2014** and applicants should email or post their CV and the names of two referees to us. Please see our study page for further details: [http://www.ncepod.org.uk/sepsis.htm](http://www.ncepod.org.uk/sepsis.htm)

The quality of the reports we generate, and the potential to improve patient care, is very much dependent on the individual co-operation of colleagues such as you. The reports from previous studies and more general information about NCEPOD are available via [http://www.ncepod.org.uk](http://www.ncepod.org.uk)

Should you have any questions, please email us at sepsis@ncepod.org.uk or phone Hannah Shotton or Karen Protopapa on 020 7251 9060.

We would like to thank you for your support with this study.

Yours sincerely

Alex Goodwin
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Karen Protopapa

Anaesthetist
Acute Physician
Clinical Researcher
Researcher

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*Celebrating 25 years of promoting improvements in patient care and safety*