

Ms Nadia Persaud
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Dear Ms Persaud

RE: Regulation 28 in the case of MC-S, NELFT and Fullwell Cross Medical Centre

I refer to the Regulation 28 dated 28th March 2018 in relation to the sad death of Maureen Campbell-Scott. Please note that NELFT have been liaising with colleagues from both, Fullwell Cross Medical Centre and Redbridge CCG in regards to the action plan to address the issues raised in the Regulation 28 report. We have made good progress in regards to completion of the actions and there remain only two actions yet to be completed by NELFT alone. I have attached the latest version of the action plan for your information.

I understand that [REDACTED] Fullwell Cross Practice Manager, has also returned the action plan to you to evidence progress, which NELFT are grateful for. We understand that he has made a note on the action plan regarding there yet to be an agreement between Primary Care colleagues and NELFT Psychiatrists in regards to prescribing of medication changes and titration of drugs.

We have had two meetings with the Fullwell Cross Practice and believe that we had agreed a process regarding the prescribing of medication to our shared patients. It was only on Tuesday of this week that we were informed that the practice had some late reservations about this specific aspect of the joint action plan. As such we are reconvening a meeting with Primary Care Colleagues to discuss the position further and agree a way forward.

We understand that Fullwell Cross Medical Centre are now of the view that NELFT should undertake the prescribing duty, whereas our clinicians advise this is not practical for a number of reason, these broadly being the following:

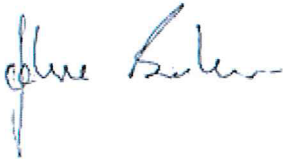
- Risks to patient safety. The GP has the overview of the entire patient's medication. If the mental health medication is prescribed in isolation there is a significant patient safety risk. Medications may have interactions and contraindication that we as potential prescribers may be unaware of as we do not have an overview.
- Due to advanced frailty of many of the patients, they cannot get their own prescription or do not have family members who are able to do it for them. NELFT do not have arrangements with community pharmacists to ensure medication is provided.
- Many patients under the Older Adult Mental Health Team do not have capacity; therefore prescribing via FP10 is not feasible.
- Many of our patients use compliance aids like dosett box/blister packs therefore the medication needs to be organised via the GP. NELFT are unable to facilitate this via local pharmacists.
- Many of our patients are in care homes, nursing homes and sheltered accommodation who will not accept a prescription via the FP10, as this would need to be filled by a community pharmacist.

Chair: Joe Fielder
Chief executive: John Brouder

We have already agreed to provide personal contact details of NELFT Consultant's to GPs for additional support and this action is already in place to allow GP's to access advice regarding the management of people who have mental health problems. NELFT attended a very successful event with all Redbridge GP's last week, where our staff did a series of table presentation to the GP's. The theme was around mental health services and the crisis care pathway. We believe this will aid our future joint working with GP's within the borough. The event was coordinated by [REDACTED] who is the BHR CCG Lead GP for Mental Health. At the event he briefed GP's regarding future communication methods and that all communication will move to being electronic in line with the action plan in relation to this regulation 28.

I apologise for the slight delay in forwarding the action plan, but as stated above this was due to the concerns raised by the practice. You may be assured that as an organisation NELFT and our officers will not leave the matter here, but continue to do all that we can to ensure that the gap in responsibility is closed.


Yours sincerely

A handwritten signature in blue ink, appearing to read 'John Brouder', with a vertical line extending downwards from the end of the signature.




John Brouder
Chief Executive

Office Ref:


Joint NELFT / Fullwell Cross Medical Centre Action Plan

Action Plan Title: Regulation 28 from Her Majesty's Coroner Eastern Area of Greater London Nadia Persaud				Start Date: 11-04-2018	
Action Plan Owner: NELFT and Fullwell Cross Medical Practice		Priority: Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/>		Service/Team: Mental Health Redbridge and GP	
Target Date: 23-05-2018	Business Unit: Mental Health		Directorate: Redbridge, Havering and Barking & Dagenham		
Source: Her Majesty's Coroner, Eastern Area of Greater London - Hearing <input type="checkbox"/> Serious Incident <input type="checkbox"/>					
Summary of the overall Action Plan: Regulation 28 from Her Majesty's Coroner Eastern Area of Greater London – Nadia Persaud following the death of MC-S a service user of Older Adults Community Mental Health Team Redbridge – Older Adults Home Treatment Team Redbridge and Fullwell Cross Medical Practice					
Recommendation	Action no	Action	By Whom	By When	Progress/comments
The GP had sent the referral to the wrong team of the mental health trust. The referral then got lost between the receiving team and the correct team (older age mental health team). This resulted in a 4 month delay in Maureen Campbell-Scott receiving an assessment	1a	GP Action NELFT referral forms on GP clinical system to be separated in to different age categories.	Andrew Watson <i>(Practice Manager)</i>	30/04/18	Completed
	1b	NELFT Action All referrals into NELFT will be processed, if the referral is sent to the wrong team NELFT will ensure the referral goes to the correct team within 2 working days.	NELFT Bob Edwards ICD for Redbridge	18/05/18	Completed  Regulation 28 action plan 1b.msg NELFT Integrated Care Director has sent an email to all service managers, senior administrators and administrators with the instruction that referrals will be followed through until the correct team has confirmed that they have

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					received it.
There were often delays (in excess of 14 days) in the delivery to the GP of clinic letters from the mental health trust. Often, the clinic letters contained requests for the GP to made changes to medication	2a	NELFT Action All correspondence to be sent via email. Subject of emails to be patient NHS number and patient initials.	NELFT Dr Shweta Anand & Maria Thorn Assistant Director	18/05/18	Completed  email from Dr Anand to Consultants and Dr Shweta Anand – Associate Medical Director, Redbridge to send an email to all Doctors to ensure this practice is adopted. Dr Maria Thorn Assistant Director, Redbridge to send an email to all service managers and leads to ensure this practice is adopted.
	2b	NELFT Action Medication changes to be emailed to GP within 24 working hours.	NELFT Dr Shweta Anand	18/05/18	Completed  email from Dr Anand to Consultants and Dr Shweta Anand – Associate Medical Director, Redbridge to send an email to all Doctors to ensure this practice is adopted.
	2c	NELFT Action All Doctors to add their telephone number to the bottom of 'change of medication notification'	NELFT Dr Shweta Anand	18/05/18	Completed  email from Dr Anand to Consultants and Dr Shweta Anand – Associate Medical Director, Redbridge to send an email to all Doctors to ensure this practice is adopted.
	2d	CCG Action GP alert system to be re-activated	CCG	18/05/18	

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	2e	Action for ALL Email communication to be adopted by NELFT and GP's. This action to be communicated to all Redbridge GP's and Mental Health Services at 'Protected learning event' on 16 th May 2018	All	16/05/18	Completed This action was announced at a protected learning event attended by all Redbridge GPs and NELFT services on 16 th May 2018
The prescribing by the GP did not always follow the direction given by the psychiatric team.	3a	GP Action Only clinicians to add medication to the repeat list, medication when first initiated or dosage change should only be authorised for 1 month at a time.	All Clinical staff	05/03/18	In Place
	3b	GP Action When medication is being stepped up or stepped down, this should only be added to the acute list and the original repeat removed from the repeat list.	All Clinical staff	05/03/18	In Place
	3c	GP Action Any new medication changes received in writing from the Mental Health Team, will require the patient to have a consultation with a GP to ensure they have understood the regime/changes that have been made.	All Clinical staff	05/03/18	In Place
	3d	GP Action Telephone requests for medication whether it be a repeat request from a patient or change in medication from secondary care is to stop. (Special exception for housebound patients)	All Clinical staff	05/03/18	In Place
In times of acute mental health crisis, medication is often rapidly changed / supplemented. Mrs Campbell-	4a	NELFT Action All NELFT Doctors to ensure that they add their NELFT mobile telephone numbers to	NELFT Dr Shweta	18/05/18	 email from Dr Anand to Consultants and

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Scott had 7 changes in her medication regime between 21 November 2016 to 23 February 2017. It is challenging for GP's to be able to ensure rapid and accurate changes when medication changes are directed by the specialist team		the bottom of 'change of medication notification'	Anand, Maria Thorn Assistant Director		Email correspondence from Dr Shweta Anand AMD to all Redbridge Doctors to ensure this practice is adopted. Email correspondence from Maria Thorn to all Redbridge service managers to ensure this practice is adopted. Completed
	4b	NELFT Action A list of Consultant Psychiatrist NELFT telephone numbers to be re-distributed to all GP's, ensuring they have the option of contacting the prescribing clinician.	Maria Thorn AD & Dr Raj Kumar	30/05/18	This action will be completed by the end of May 2018. List being compiled and then phone numbers to be sent to email addresses of all GP surgeries within Redbridge
	4c	NELFT Action NELFT will provide Doctors Medical Secretaries direct number to GP's. If a Doctor is on leave, a colleague number will be made available.	Dr Shweta Anand, Maria Thorn Assistant Director	30/05/18	This action will be completed by the end of May 2018. List being compiled and then phone numbers to be sent to email addresses of all GP surgeries within Redbridge
At the time of the Inquest hearing, there had been no joint meeting between the mental health trust and the GP practice to consider the best way forward in terms of referrals to the service: prescribing during	5a	GP / NELFT Action Meeting between NELFT and Fullwell Cross Surgery was arranged and attended on 11th April 2018 Follow-up meeting was held on 9 th May 2018.	GP NELFT	11/04/18 09/05/18	Completed Completed and further follow-up meetings to be arranged.

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times of dynamic medication changes and general communication between the GP and the psychiatrist		<p>In attendance Senior Managers NELFT, Consultant Psychiatrists NELFT, Jacqui Himbury CCG. Dr Raj Kumar, BHR clinical lead for mental health. Andrew Watson, Practice manager, Fullwell Cross surgery Partners, GP's from Fullwell Cross Surgery. Dr Anil Mehta</p>			
It is accepted that the concerns in this case are unlikely to be restricted to the Fullwell Cross Surgery. If a joint protocol is agreed between the Trust and the Practice, this could be shared more widely with other practices.	6a	<p>NELFT Action To roll out good practices as above with all Commissioned Boroughs Barking & Dagenham, Havering and Waltham Forest</p>	<p>NELFT CCG Dr Raj Kumar</p>	18/05/18	<p>Dr Raj Kumar (BHR clinical lead for mental health) attended the meeting of the 9th May 2018 and is committed to working with NELFT and the CCG to roll out improved practice within Barking, Havering and Redbridge, BHR</p>

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