

# University Hospitals of Leicester

NHS Trust

Our Ref: [REDACTED]  
Your ref: CEM/GA/00350-2017

**Leicester Royal Infirmary**  
Chief Executive's Corridor  
Level 3, Balmoral Building  
Infirmary Square  
Leicester  
LE1 5WW  
Tel: 0116 258 8940  
[REDACTED]

7 August 2018

Mrs LC Brown  
HM Assistant Deputy Coroner  
Leicester City and South Leicestershire  
Leicester Town Hall Square  
Leicester  
LE1 9BG

Dear Mrs Brown

## Re John Charles HAZLEWOOD

Thank you for your letter dated 21<sup>st</sup> June 2018 in connection with the above matter. I am now in a position to respond.

I note that the court made no criticism of the care that we delivered to Mr Hazlewood and I am also pleased to note that the clinical team caring for Mr Hazlewood appropriately contacted Leicester Partnership Trust (LPT) for expert advice on how to best manage Mr Hazlewood's condition.

You asked me to address the issue about the training that we provide to staff on mental illness and I am of course happy to do so.

Firstly it is important to say that the Trust recognises that the management and treatment of mental illness is a priority for all healthcare bodies including this Trust. To that end we have established a Mental Health Board which is chaired by [REDACTED], our Deputy Chief Operating Officer. Representatives from LPT, the CCGs, EMAS the police and a Patient Partner attend meetings along with subject matter experts and representatives from our Clinical Management Groups. Our Clinical Lead for Mental Health is [REDACTED], Consultant in Emergency Medicine. The Trust, through the Mental Health Board, has drafted a three year mental health strategy, led by [REDACTED], which is expected to be finalised by October 2018.

Whilst mental health is not part of our core business we fully accept that we must ensure that our staff are appropriately trained to enable them to deliver appropriate care to patients with mental illness. Nevertheless it will be remain important for UHL staff to seek appropriate advice from LPT staff in the management of patients with mental illnesses as their staff are the recognised experts in this area and a failure to do this this would be expected to result in significant patient harm.

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Currently we deliver training in self-harm by a number of methods. For staff in our ED, EDU and AMU training is provided to doctors and nurses as part of their orientation/induction programme. Additionally we deliver a Mental Health Study Day which is provided for all nursing staff in ED/EDU and open to other staff. Further training is provided to our medical staff on mental health as part of teaching programmes eg local registrar training and international doctors teaching. We also deliver mental health training through the EM3 website which is operated by the ED education team.

To further support staff in this area we have a trust-wide Policy and Procedure for detaining patients under the Mental Health Act 1983. It covers the sections of the Mental Health Act that are most commonly used within a general hospital setting including Sections 2 and 5. This policy has been developed in line with the CQC's Guidance for general hospitals, the Department of Health's 2015 guidance and the Mental Health Act 1983 Revised Code of Practice. This policy is led by our Safeguarding Team and the Board Director Lead for this policy is our Acting Chief Nurse.

As you would expect we keep our safeguarding training under regular review and our Head of Safeguarding, [REDACTED], will be presenting a paper to the Safeguarding Assurance Committee on the 15th August 2018 which will recommend strengthening and making more robust our training for all staff who care for people who self-harm. As we will need to involve an external organisation in the development of this training it is anticipated that this will take approximately 6 months to put in place. In the meantime, and as a result of this inquest, our Head of Safeguarding is to ensure that all UHL staff receive a communication to remind them of the escalation process that they can use if they have any concerns about a patient who they feel is at risk of self-harm. We are working with LPT on this communication and we expect this to be sent out before the 15th August 2018.

I trust that this letter provides you with the assurance that we are taking this matter seriously.

If you would like any further information then please do not hesitate to contact me.

Yours sincerely



John Adler  
**Chief Executive**