



Lancashire Care
NHS Foundation Trust

Lancashire Care NHS Foundation Trust

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Alan Wilson
Senior Coroner for Blackpool and the Fylde
Office of HM Coroner
Municipal Buildings,
Corporation Street
Blackpool FY1 1GB

07 September 2018

Dear Mr Wilson,

Adam Carter (deceased) – Regulation 28 report to prevent future deaths

The Trust acknowledges receipt of your regulation 28 notice dated 12 July 2018. In the notice you raise the following concerns:

1. The poor quality of record keeping, including Mr Carters use of leave, the lack of a completed risk assessment and no evidence of the Leave Authorisation required to grant leave as required under section 17, prior to Mr Carters escorted leave on the 10 September 2017.

We are committed to delivering the highest quality of care, and we deeply regret on this occasion that there were things that should have been done better. We have used the findings of the inquest and your notice to make improvements in the quality of our care. We will endeavor to make our documentation of Section 17 leave more robust by requiring teams to document clearly the reasons for the leave, the risks associated with the leave and the progress that patients are making in relation to leave.

This is already in accordance with the Code of Practice and our policies and procedures and so in addition we will take the following actions in response to the concerns you have raised:

ACTION 1 – Risk assessment prior to all leave being taken

Once leave has been agreed by the Multi Disciplinary Team, the nursing team on each ward will be prompted to fully consider the patients risks and state of mind immediately prior to the patient taking this leave, and reminded to document their up to date decision in the clinical record.

The senior matron and lead nurse will establish how these prompts are implemented by 28 September 2018.

ACTION 2 – Policy issues

Leave that is given regularly to a patient is already discussed and agreed in the context of the Multi Disciplinary Team, and should be documented in the clinical record, however some points around how this is care planned are not currently included in our Leave Policy and so the Mental Health Law Manager will consider a minor amendment to the policy by 28 September 2018.

ACTION 3 – Routine evaluation of Leave

How leave went for the patient should already be documented and discussed in the wider MDT forum; in addition a pilot of “leave diaries” is currently taking place in our secure services, if it is found to increase the quality of post leave documentation this will later be rolled out to all wards.

ACTION 4 - Communication

The Clinical Director will write to consultants and ward managers about these actions by 14 September 2018 and reiterate the importance of documenting the rationale, risks and benefits for each individual accessing leave.

ACTION 5 – Audit

The impact of the above actions will be included in a clinical audit in January 2019. Matrons and ward managers will then review the findings from these audits and feed the results back during clinical supervision with their teams.

The standards for this audit will include:

1. All patients who have leave granted will have a copy of the Section 17 Leave Authorisation form in their record
2. An assessment of their presentation / mental state and / or risk assessment must be undertaken on the day leave is to take place.

I hope this addresses your concerns and wish to assure you that we have implemented measures to prevent similar incidents in the future.

Should you require any further information the Trust will be more than willing to assist.

Yours sincerely

Associate Director of Safety