



Department
of Health &
Social Care

*From Jackie Doyle-Price MP
Parliamentary Under Secretary of State for Mental Health and Inequalities*

*Department of Health and Social Care
39 Victoria Street
London
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Our reference: PFD 1143538

Dr Shirley Radcliffe
HM Assistant Coroner, Inner West London
Westminster Coroner's Court
65 Horseferry Road
London
SW1P 2ED

12 September 2018

Dear Dr Radcliffe

Thank you for your letter of 26 July to the Secretary of State for Health and Social Care about the death of Mr Daniel Young. I am responding as Minister with portfolio responsibility for Mental Health.

I have noted carefully the concerns in your report. My officials have made enquiries with NHS England on these matters.

You will be interested to know that NHS England is currently developing a framework for community mental health services which will articulate models of improved joint working between primary and secondary mental health services in community settings.

This will support teams to work together to plan a patients' care holistically and ensure that any transitions between settings and different teams can be facilitated with the relevant professionals having ready access to all relevant information. This is particularly important for people transitioning between service settings, for whom medication reviews need to be followed up.

In addition, I am advised that the framework will set out quality benchmarks and recommendations for local systems, reflecting current evidence and existing guidance

published by the National Institute for Health and Care Excellence (NICE), to support commissioners and providers across the health and care system to model and implement the framework. It will include key considerations regarding medication adherence and medicines optimisation.

To support improved care coordination in the community, the framework will set out the key competencies and skills that staff from different professional backgrounds will need in order to support people they care for, and to link with other professionals and services to ensure all of a person's needs are met. The framework will recognise needs that require special attention, such as support from a community or specialist mental health pharmacist to discuss medication choices and compliance.

The community framework will also include examples of best practice information, including evidence-based community discharge processes. These will specifically reference the importance of considering a person's discharge destination and ongoing care needs and communicating with relevant teams to ensure that the necessary support is put in place in a timely manner to enable smooth transition.

In the interim, NHS England has confirmed that it will undertake the following actions by the end of the year to address the issues noted in your report:

- NHS England will write to GP practices to make them aware of this issue and to consider what mechanism they do or could employ to monitor the collection of antipsychotic medication prescriptions;
- NHS England will explore with NHS Digital what opportunities there are for primary care clinical systems to alert GPs around prescription collection issues for named patients and named drugs; and
- NHS England will work with NHS Improvement on a communication to providers around making discharge letters explicit on medication risks that need to be monitored in primary care.

I hope this response is helpful. Thank you for bringing your concerns to our attention.



JACKIE DOYLE-PRICE