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Miss Emma Serrano
Assistant Coroner
Black Country Area
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5th April 2019

Dear Miss Serrano,

Re: Regulation 28 Report to Prevent Future Deaths – David Squire – 25 July 2018

Thank you for your Regulation 28 Report (hereinafter 'report') issued on 25 January 2019 following the inquest into the death of David Squire on 25 July 2018. I would like to begin by expressing my deep condolences to David Squire's family.

I am aware that the conclusion of the recent inquest was misadventure with David Squire's death found to be the result of hanging by ligature.

Following the inquest, you raised concerns in your report regarding NHS England's guidance on smoke-free hospitals and in particular when applied to mental health hospitals dealing with detained patients, and their specific use of section 17 leave.

I can confirm that NHS England, in collaboration with Public Health England (PHE), is working to reduce very high smoking rates in people with severe mental illness and, following the publication of the 'Five Year Forward View for Mental Health' in February 2016, a commitment was made to deliver smoke-free mental health inpatient units and facilities by 2018.

As part of going 'smoke-free' trusts are ensuring the implementation of NICE guidance PH48 and PH45 to ensure access to a full range of evidence-based treatment options to support quitting smoking or temporary abstinence for both patients and staff. When a service user is admitted to a smoke-free inpatient mental health service, they should be supported to stop smoking or to reduce smoking in the longer term, or, where they do not wish to stop or reduce smoking, they should be supported to temporarily abstain from smoking for the duration of their admission. The NICE guidelines state that the use of Nicotine Replacement Therapy, in conjunction with behavioural therapy from trained staff, should be available within a timely manner. Further the [PHE guidance](#) to support the implementation of the smoke-free mental health trust policy highlights that smoke-free policies must be complemented by the ready availability of smoking cessation programmes and training, with robust implementation engagement strategies with staff and service users recommended.

In addition to the PHE guidance, the Mental Health Act Code of Practice published by the Department of Health in 2015 (the statutory guidance for providers of mental health services) sets out that leave of absence can be an important part of a person's care plan. The Code of Practice advises that when considering and planning leave of absence, responsible clinicians should, among other issues, consider the benefits and any risks to the patient's health (both mental and physical) and safety of granting or refusing leave. This is a complex area and the Code of Practice sets out that responsible clinicians should also, of course, take account of the patient's wishes and consider the benefits of granting leave for facilitating the patient's recovery.

In response to your request for further consideration I can confirm NHS England will raise the complexity of this issue with the Department of Health & Social Care as part of its contributions to the government-led response to the Independent Review of the Mental Health Act that reported to the Prime Minister in December 2018. The government has signalled its intention to legislate in response to the review, and NHS England will suggest that the issue of smoking and use of section 17 leave should also be considered as part of future revisions to the Code of Practice.

Admittedly, although there is variation in how fully mental health trusts have implemented smoke-free policies across the country, there are a number of examples of successful and safe implementation and NHS England will continue to work alongside PHE to address the stark physical health inequalities experienced by people with mental health problems. To this end and in response to the House of Commons Science and Technology Committee's recommendation, NHS England and NHS Improvement are developing guidance on the use of electronic cigarettes for providers of NHS care (with a specific focus on mental health facilities). This is being developed in conjunction with trusts, clinicians and patient groups to help reduce any disparity in access to electronic cigarettes and to give a real alternative to patients for whom traditional nicotine replacement therapies have failed. We intend to publish this guidance in Spring 2019 and will provide you with a copy for your information.

Thank you for bringing these important patient safety issues to my attention. I hope the information above addresses the concerns you have raised within your report and provides you with the assurances that you requested. If you require any further information please do not hesitate to contact me.

Yours sincerely

A handwritten signature in black ink, appearing to read 'S. Powis', with a large, sweeping initial stroke.

Professor Stephen Powis
National Medical Director
NHS England and NHS Improvement