

- 7 MAY 2019

Our Ref: JW/ML

**Private and Confidential**

Mrs J Lake  
Senior Coroner for Norfolk  
Carrow House  
301 King Street  
Norwich  
NR1 2TN

**Trust Management**  
**1<sup>st</sup> Floor Admin**  
Hellesdon Hospital  
Drayton High Road  
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NR6 5BE

3 May 2019

Dear Mrs Lake

**Re: Ms Tamsin Grundy**

I write in response to your prevention of future deaths report dated 13 March 2019 which followed the conclusion of the inquest into the death of Ms Tamsin Grundy. I know you will share a copy of this response with Ms Grundy's family and I would like to express my condolences for their loss. Every death is a tragedy and the safety of those in our care is the Trust's priority.

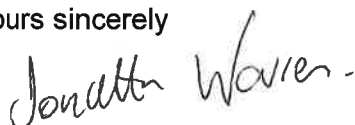
Your report expressed Ms Grundy's experience that she was concerned at the number of staff involved in her care, particularly during the time she was receiving contact from the Crisis Resolution and Home Treatment (CRHT) team, which was six months before her tragic death. Ms Grundy's experience was that it was difficult to explain her circumstances on each occasion and to relate to so many people.

Ms Grundy was in contact with the Trust's Youth Service since 2016. She was allocated a staff member whose role was to coordinate her care. This member plays an important role in forming a therapeutic relationship with the service user, working together to implement plans to help respond to the individual's needs. There are occasions where an individual's need changes requiring a period of more intensive support which is provided by the Trust's acute services. The CRHT provide intensive periods of support in the community for short periods, supplementing the care provided by the community team. This means the team have to be flexible and adaptable in approach requiring staff to work over a 24 hour period, seven days per week. Appointments with users may range from multiple contacts in a day to every few days. Given the team's role in providing this enhanced contact it is a challenge to provide a model that would absolutely ensure an individual is guaranteed to see a limited number of staff.

Notwithstanding this challenge, it was the expressed experience of Ms Grundy that having such numbers of staff involved made it difficult to form full therapeutic relationships. To support continued development of the service provided, the CRHT team is using a national 39 point fidelity scale to help it reflect on current practices identifying areas of focus and improvement. One of the points refers directly to this matter and the team are working to apply this on a consistent basis, using daily planning to match clinicians with individual visits where a positive therapeutic relationship has developed. The scale is being used more widely across the Trust.

Thank you for raising this matter which has been of assistance to us.

Yours sincerely



Jonathan Warren  
Chief Executive

