Best care by the best people

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PRIVATE & CONFIDENTIAL
Ms Nadia Persaud
Senior Coroner
Waltham Forest Coroners Court
Queens Road
Walthamstow
London
E17 8QP
Sent by email to:
Coroners@walthamforest.gov.uk

29th January 2020

Your ref: NP/sc/8101
Our ref: 604

Dear Ms Persaud,

Re: Inquest touching upon the death of Samantha Louise Higgins

Thank you for your letter dated 12 December 2019, when you issued Regulation 28 report regarding the provision of psychotherapy services, care planning and key-working within Access Assessment and Brief Intervention Team.

We are extremely saddened by the death of Ms Higgins and are grateful for your report highlighting areas of concern identified at the inquest hearing.

We have considered the issues arose in the Regulation 28 report and agreed a number of actions to address these issues. Please find enclosed the Trust's action plan to address these issues.

I hope that the attached action plan adequately reflects Trust's commitment to improve care quality and patient safety and acts as reassurance to you that the Trust has taken this sad incident very seriously.

If you have any further queries, please contact my office on 0300 555 1201.

Yours sincerely,

Interim Chief Executive Officer

Office Ref:

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NELFT Action Plan			
Action Plan Title: Regulation 28 (604) BDAABIT and Integrated Psychology Services			**Start Date: 31/01/2020**
Action Plan Owner: [redacted]	**Priority:** High X	**Service/Team: B&D Mental Health Services**	
Target Date: 30th September 2020	**Business Unit: Adult Services**	**Directorate: BDB**	

Source: Complaints ☐ Clinical Audit ☐ External Inspection ☐ Internal Inspection ☐ Internal Audit ☐ Safeguarding ☐
Serious Incident X Medicines Management ☐ Infection Control ☐ QPS ☐ H&S ☐ Serious Case Review ☐ Safety Thermometer ☐
External Inspection ☐ Dashboard ☐ Other x Regulation 28

Summary of the overall Action Plan:

Address the specific findings from the East London Coroners enquiry into case 604 in respect of the B&D AABIT and Specialist Psychological Services. The action plan will support the development of an improved intervention programme in the AABIT pathway, ensure that all staff including medical staff are fully aware of the named key worker function and ensure that there is no caseload drift (i.e. patients will not remain in the AABIT pathway beyond a clinically reasonable period of time). Additionally the plan will address the patient flow and waiting times for specialist psychological interventions, maximising the commissioned capacity into clinically facing activity to reduce waiting times for this type of intervention.

Concern raised by the Coroner	Action no.	Action (short form)	Action (long form)	By Whom	By When	Progress /comments
Key Theme/point : Finding 1 – as per Regulation 28(604)						
Care was provided under the BDAABIT for almost 3 years, this went beyond 'brief intervention'.	1	Audit -Compliance with AABIT SOP which outlines the expected service offer	To complete a monthly RiO audit to monitor compliance with standards for minimum contacts whilst on the caseload. To discuss the findings of the above audit at the AABIT team meeting. This will highlight any patients who have not been seen within a 3/12 month period. All cases that are identified on above report (i.e. not seen within minimum 3/12 months) will then be actively reviewed to ensure an appropriate clinical plan is in place.	[redacted] Operational Lead AABIT & BD Business Support team	31.01.2020	

	2	Reminder- Clinical risk management	A reminder will be issued to all supervisors within AABIT asking to ensure that active caseload review, with particular focus on high risk and long term patients, is undertaken during clinical supervision sessions for clinical staff.	[redacted] Operational Lead AABIT	31.01.2020	
	3	Policy/practice update -Compliance with terms of AABIT SOP	Implement additional 'Brief intervention pathway' (BIT pathway) programmes (e.g. group sessions and structured short term psychological interventions) as per the BDAABIT team development plan to ensure there is compliance with the AABIT SOP and that service users receive short term support that is responsive to their needs. These brief intervention programmes will form part of the whole service pathway and where necessary patients will step up or down to additional support in line with their individual care plan.	Head of Service – Adult Mental health services SS/BT	30.06.2020	
	4	Service change - clinical risk management	Support the implementation of the NELFT Acute Mental Health care pathway redesign within B&D to ensure that the patients are referred to and receive care from and are receiving care from the appropriate services/teams	[redacted] Director Adult Services	30.09.2020	
There was no overarching care plan and no one was appointed to oversee the care	5	Reminder - Record keeping	A reminder will be issued to ensure that all AABIT Zoning meetings are fully minuted and recorded within the patient's RiO progress notes to evidence what has been discussed and what actions have been agreed.	[redacted] Operational Lead AABIT	31.01.2020	

	6	Reminder - Care planning	A reminder will be issued for a care plan template on RiO for each patient to be updated to ensure that the overarching care plan is up to date at all times and that the service users are receiving the care which meets their clinical needs.	[redacted]s Operational Lead AABIT	31.01.2020	
	7	Audit – care/crisis management plan compliance	A RiO report demonstrating compliance with 'care plan/crisis plan on correct RiO template' to be generated on a monthly basis and discussed at the AABIT team meeting.	[redacted] Operational Lead AABIT & BD Business Support team	31.01.2020	
	8	Policy/practice update -Compliance with terms of AABIT SOP	A reminder will be issued to all clinical staff for the named 'key worker'/caseload holder to be identified in the correct section of RiO clinical record - API section.	[redacted] Operational Lead AABIT	31.01.2020	
	9	Audit – record keeping	A RiO report demonstrating compliance with named 'key worker' record keeping will be completed on a quarterly basis to ensure continued compliance with the AABIT SOP	[redacted] Operational Lead AABIT	31.03.2020	
Medical staff within the team were not aware of the key worker function or the overarching care plan	10	Policy/practice update – clinical risk management	Implement RiO functionality to display the *'named key worker'* onto the front page of the clinical electronic record (RiO) so that this is immediately visible to all staff – This will ensure monitoring of action 8 above.	[redacted] RiO Clinical Systems Manager	28.02.2020	
	11	Reminder/guidance – clinical risk management	Consultant leads to attend and participate in the AABIT Team meetings where service quality, performance, patient safety matters and service developments are discussed to ensure that there is a full multi-disciplinary team functioning.	[redacted] AMD	31.01.2020	

	12	Reminder - Policy/practice compliance with AABIT SOP for zoning	A reminder will be issued to all staff at AABIT for zoning meetings to include medical staff attendance as a minimum quorum.	[redacted] AMD	31.01.2020	
Key Theme/point: Finding 2 - as per Regulation 28(604)						
Delayed response to a referral from the BDAABIT to the Specialist Psychological services panel resulted in no psychological care being provided	13	Service change – clinical risk management	Formally consult and Integrate the B&D MAP Specialist Psychological Service into the BDAABIT service to create a single service, with clear care pathways that are fully multi-disciplinary under single managerial role (to be repeated for the Psychosis Service in the Community Recovery Service). This is to streamline the delivery of Psychological Services and to ensure that capacity released (due for example cancelled appointments) is utilised effectively to shorten the waiting times. The NELFT Adult MH community of practice will provide support and oversight in order to determine best practice and Trust wide learning.	[redacted] Assistant Director Adult Services [redacted] Trust wide PS lead & [redacted] Operational Lead AABIT	30.09.2020	
	14	Service change in line with recommended best practice	Review the psychological services panel processes and internal referral points between the AABIT service and the specialist psychological pathways to ensure that they are effective and efficient in directing patients to the correct clinical intervention/pathway. This will further support release of clinical capacity for front line delivery as per action 12	[redacted] Trust wide PS lead	31.07.2020	

	15	Audit- clinical risk management	Each zoning meeting chair to ensure that actions for referral for specialist psychological interventions has been completed to reduce risk of delayed decision. Any uncompleted actions will be escalated to the relevant clinical case-holder.	[redacted] Lead AABIT	30.01.2020	
Long waiting times for specialist psychological interventions give rise to the risk of future deaths	16	Policy/practice update – clinical risk management	In the meantime and while the developments are being implemented, the service manager has been asked to contact the service users who have been on the waiting list for more than 18 weeks (national standard for waiting times) to: 1. Assess the needs/risk of the patient to ensure that the health has not deteriorated and it is safe for the service user to remain on the waiting list; 2. Enquire if there is any other support needed while the service user is on the waiting list. The above practice will be carried out until the required changes within the service will be completed.	Service lead for MAP and Psychosis Specialist Psychological services	30.01.2020	
	17	Audit– clinical risk management	Waiting list times for MAP service to be added to the Trust risk register as a high risk and monitored on a monthly basis for	Head of Service – Adult Mental health services	30.01.2020	

	18	Service change – clinical risk management	Develop the multidisciplinary team function in conjunction with the brief intervention (BIT pathway – see Action 4 above) to offer a range of lower intensity psychological interventions as a way of reducing the need for higher intensity interventions.	[redacted] Operational Lead AABIT & Sara Tresilian Trust wide PS lead	31.07.2020	
	19	Recruitment – clinical risk management	Review the current vacancy levels in the BDAABIT, MAP and Psychosis teams to collate outstanding vacancies across the service disciplines in order to create additional band 7 Psychology roles within the BDAABIT to increase the capacity within Psychological Services to meet the demands of the increasing caseload and to shorten the waiting times for psychological interventions.	Head of Service – Adult Mental health services SS/BT	31.01.2020	
	20	Service change – clinical risk management	Review the monthly 18 week wait report for the current service configuration and develop a timed trajectory for improvement to deliver the required standard of a maximum wait of 18 weeks. This will be monitored for achievement via the divisional business meeting	Head of Service – Adult Mental health services	28.02.2020	
	21	Service change – clinical risk management	A Demand and capacity report to be prepared in relation to Psychological Services, and service improvement plan to be presented to the commissioners to ensure that gaps in service are effectively addressed. This is in addition to any service improvement actions detailed in this action plan.	[redacted] Assistant Director Adult Services	31.05.2020	