

## **Trust Headquarters**

Fulwood House Old Fulwood Road SHEFFIELD S10 3TH

www.shsc.nhs.uk

16 May 2022

By post to: Mr Stephen Eccleston Office of HM Coroner The Medico-legal Centre Watery Street Sheffield S3 7ET

Dear Mr Eccleston

## Joshua Adey Rennard (Deceased)

Following the conclusion of the inquest touching the death of Joshua Adey Rennard on 18th March 2022, you issued a Prevention of Future Deaths Report to Sheffield Health & Social Care NHS Foundation Trust and requested that we submit evidence in response.

Firstly, may I take this opportunity to express sincere condolences on behalf of Sheffield Health & Social Care NHS Foundation Trust to Joshua Rennard's family.

You asked for our response to the following concerns:

1. What action will be taken to prevent the risk of deaths while a person who is recommended for assessment for section is waiting for the assessment to take place

## 2. What action will be taken to eliminate such waits for assessment

Sheffield Health & Social Care NHS Foundation Trust has been challenged to identify mental health hospital beds at the point of need on some occasions. Some people, including those awaiting assessment under the Mental Health Act (1983), have experienced unacceptable waits to access a mental health hospital bed. This challenge is not unique to Sheffield, is reported nationally and we agree this needs to improve.

To address these challenges, Sheffield Health & Social Care NHS Foundation Trust has set out a detailed plan to improve the rate of patient flow for our crisis pathway, and to assess and manage any risk of harm to patients or others, whilst a hospital bed is made available. This includes implementing controls to reduce length of stay across our mental health hospitals. Unfortunately, it is very unlikely that Sheffield Health & Social Care NHS Foundation Trust, as is the case nationally, will totally eliminate waits for beds as the waits are multifactorial, the controls below will minimise waiting times and ensure the safety of those patients waiting for a bed.

These controls actively support discharge from our ward to increase bed capacity and include daily multi-disciplinary care planning meetings; the introduction of an NHS England/Improvement approved methodology to support patient flow, called the 'red to green' visual management systems, and in-reach into our wards from our Home Treatment community services to support early and efficient discharge pathways. These changes will improve the availability of mental health hospital beds at the point of need.

In addition, we have received investment to deliver a 24/7 Crisis Resolution and Home Treatment Service. Once fully recruited, the service will take clinical responsibility for all patients who are waiting to access a mental health hospital bed. This change will mean that people, such as Joshua, will benefit from a daily multi-disciplinary review of their care and risk management plan. This will inform the care delivered by the Crisis Resolution and Home Treatment Service and will enable clinical prioritisation for the next available hospital bed. This change in practice will facilitate improved crisis care, an improved rate of patient flow, and more targeted use of mental health hospital beds.

Finally, our clinical leaders are developing a systematic method of providing a daily multidisciplinary review meeting to discuss all patients who are waiting for a mental health hospital bed. This process will be overseen by the Clinical Director and Head of Nursing for the Acute and Community Directorate. It will be used to clinically prioritise hospital beds based upon the needs and risk of harm of those people waiting, and to organise alternative forms of care, where required.

Detailed below are the relevant components of our improvement plan for your information:

Action	Responsible	Completion Date	Outcome
All hospital admissions will be gatekept by our Crisis Resolution and Home Treatment Service. This will include an assessment of need and risk to determine a plan of community and/or hospital care.	Service Manager of the Crisis Resolution & Home Treatment Service and General Manager of Crisis Services	July 2022	This action will reduce the risk of harm while someone is awaiting an assessment and will improve clinical decision making.
Crisis Resolution and Home Treatment Service will be responsible for the care of all people waiting for a mental health hospital bed.	Service Manager of the Crisis Resolution & Home Treatment Service and General Manager of Crisis Services	July 2022	This action will reduce the risk of harm while someone is awaiting an assessment and will improve risk management and care planning.

Fully recruit to the Crisis Resolution and Home Treatment Service.	Service Manager of the Crisis Resolution & Home Treatment Service	August 2022	Support 24/7 availability of service. Reduce risk of harm while someone is awaiting an assessment
Weekly Consultant Psychiatrist meeting to safely manage the patients who are believed to be near or requiring admission to a mental health hospital bed.	Clinical Director for the Acute and Community Directorate	June 2022	Improve communication between community and hospital-based services to reduce risk while someone is awaiting an assessment.
Red to Green visual	Matrons of our Acute	July 2022	Reduce waiting times for
management system will	Mental Health		assessment by
be introduced across our	Hospital beds and		supporting patient flow
mental health hospital	General Manager for		through our acute and
wards.	Acute Care		crisis services.
Daily care planning	Matrons of our Acute	June 2022	Reduce waiting times for
meetings to be	Mental Health		assessment by
introduced across all	Hospital beds and		supporting patient flow
mental health hospital	General Manager for		through our acute and
wards	Acute Care		crisis services.

We trust that this response has addressed the concerns you have raised and please do not hesitate to contact us if you require any further information.

Yours sincerely

Executive Director of Nursing, Professions & Operations