

27 JUL 2022



**Suffolk and  
North East Essex**  
Integrated Care Board

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Mr Peter Taheri  
Assistant Coroner  
The Coroners Court and Offices  
Beacon House  
Whitehouse Road  
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21<sup>st</sup> July 2022

**Ref: Paul Alexander Meadows**

Dear Mr Taheri

Further to your report under paragraph 7, Schedule 5, of the Coroners and Justice Act 2009 and Regulations 28 and 29 of the Coroners (Investigations) Regulations 2013, thank you for sending your concerns for the attention of the Ipswich & East Suffolk Clinical Commissioning Group (now Suffolk and North East Essex Integrated Care Board).

These concerns were:

*"The Norfolk & Suffolk NHS Foundation Trust accepted that there were broad issues in relation to thoroughness of risk assessment and safety planning in other cases as well as Paul's case. There were inconsistencies in judgement of triage scale and the level of professional curiosity around risk and suicidal ideation.*

*It was accepted that, in Summer 2021, due to resource pressure – specifically, a discrepancy between the anticipated activity and the actual, significant, volume of callers, there were occasions when First Response Service practitioners did not have enough time to gather the required information and properly to triage and risk assess.*

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*The evidence was that, although the position now varies considerably from day to day, due in particular to difficulties with vacancies, it would be unfair to say that staff do not still feel pressured at times on calls.*

*The evidence was that the difficulties in recruitment are associated with differences in funding for the First Response Service between the commissioners for different counties. For example, there is a significant difference between the funding available to Norfolk and to Suffolk, despite both counties having a similar volume of calls.*

*The Commissioners are aware of the number of calls unanswered because of practitioners being unable to take the calls received and the matter remains one that is raised with the Commissioners on an ongoing basis and subject to ongoing negotiation.*

*Nevertheless, the Court has, to recap, received evidence that, given difficulties in recruitment arising out of the level of funding received by the First Response Service in Suffolk, it remains the position that practitioners do not always have sufficient time on calls to gather the required information and properly to triage and risk assess. Where, for these reasons, First Response Service practitioners are not able properly to triage and risk assess, this creates a risk of future deaths that will occur or will continue to exist in the future.*

*The evidence was also that this is not just a concern in one county, but one that is experienced nationally."*

The response to those concerns is as follows.

- Suffolk established the First Response Service (FRS) mental health telephone line in March 2020 to deliver the aim of the National Health Service England (NHSE) long term plan of 100% coverage of 24/7 age-appropriate crisis-care accessible via NHSE 111.
- After consultation with service users and because of the situation nationally with NHSE it was decided to establish the First Response Service as a standalone number.
- The initial plan was to have a crisis only telephone number but due to the expected concern caused by Covid, Suffolk were asked by NHSE to adapt the crisis line to be a service that would respond to all mental health enquiries whether they were crisis or not.
- This request put additional pressure on the service as practitioners were not only responding to crisis calls but also managing general mental health enquiries from the wider public.
- Suffolk has invested £1.3m in the First Response Service and call volumes were considerably higher than planned from the inception of the service. Demand and capacity work was completed as part of the business case underpinning the First Response Service.
- Suffolk adequately funded the service from the outset but were not able to financially respond to the sudden increase caused by the request to make the service accessible to anyone with a mental health query. The Suffolk First Response Service was further advanced than the Norfolk equivalent service when the FRS went live in March 2020 and initially supported Norfolk calls too whilst the Norfolk service offer was further developed.
- There have been challenges recruiting to the First Response Service team and this is representative of the wider issue with attracting staff to work in Norfolk and Suffolk Foundation Trust (NSFT). NSFT have worked extensively to attract staff across their workforce but are careful to employ people who can add quality to the service.

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- Suffolk and North East Essex Integrated Care System (ICS) and NSFT agreed to repurpose the FRS and transition to NHS111 option 2. This would refocus the service to revert to the 'Crisis' Response service that was initially planned. This change in April 2022, has seen a reduction in calls and abandonment rate and seen an improvement in call response times. It has also helped the team to spend more time with individuals who are accessing the service.
- The amount of funding does not have a direct impact on how NSFT can successfully recruit to vacancies. The ICS has provided additional funding to create additional support from voluntary, community and social enterprise partner(s) to provide targeted help to individuals who access the First Response Service frequently. These approaches have helped to increase capacity for our crisis response teams to support more individual callers. It has also allowed the FRS to have a more focused community approach to reduce crisis situations.
- The ICS will continue to work with NSFT to reduce the number of vacancies in the team and continue to improve the offer for people who are experiencing a mental health crisis in Suffolk.

The ICS is committed to working closely with HM Coroner and others to ensure that the local health and care system learns from all deaths, to prevent avoidable harm to our patients. I trust the response provided here adequately responds to your concerns, and I remain available for further assistance should it be required.

Yours sincerely



Medical Director and CIO

Cc: , CEO SNEE ICB