

**PRIVATE AND CONFIDENTIAL**

For the attention of:

His Majesty's Assistant Coroner  
North London Coroner's Court  
29 Wood Street,  
Barnet  
EN5 4BE

Barnet Enfield and Haringey Mental Health NHS Trust  
Trust Headquarters  
St Ann's Hospital  
St Ann's Road  
London N15 3TH

**Date:** 20 April 2023

Dear Sir,

This letter forms the Barnet Enfield and Haringey Mental Health NHS Trust's ("the Trust") response to the applicable sections of the Prevention of Future Deaths Report following the hearing touching the death of Sophie Gwen Williams, held on 17<sup>th</sup> -19<sup>th</sup> January 2023 before Assistant Coroner Taylor at North London Coroner's Court.

*"Matters of concern, for trans persons on a Personality Disorder Pathway, arise out of a provision of the following:*

A. *by local NHS Trusts.*

1. *The assignment over a single, named point of contact, available (aside from holiday and sickness absence) when needed by the patient*
2. *the training of staff assigned to provide care and treatment to such persons, both at the time of their appointment, and annually thereafter, with a focus on:*
  - a. *The needs of the trans persons*
  - b. *gender affirming care*
  - c. *dissociation and psychosis*
3. *Scrutiny of the delivery and implementation of such training, by way of Quality Assurance*

4. *The absence from the assessment protocol of a provision to ensure that a full account is taken of:*
  - a. *any previous diagnosis and treatment*
  - b. *all other information (including information from those who have previously provided care and treatment to the patient) available to the member of the team*
  - c. *the risks to (and effects on) patients with (or likely to develop) conditions of dissociation and/or psychosis including, in particular, the risks of self-harm and loss of life*
  - d. *the views of those who are close to the patient, including the patient's carers, family, and advocates (both formal and informal), who should be contacted, for that purpose."*

The above matters were considered, and the steps taken by the Trust are outlined below.

1. **The assignment of a single, named point of contact, available (aside from holiday and sickness absence) when needed by the patient.**

Service Users on the Personality Disorder pathway are notified of a named contact person within the team at the point of initial assessment. From 20<sup>th</sup> March 2023, all service users will be given a named point of contact from the point of referral. This name will be provided to all service users in the referral acknowledgement letter sent prior to any first assessment

2. **the training of staff assigned to provide care and treatment to such persons, both at the time of their appointment, and annually thereafter, with a focus on:**

- a. **The needs of the trans persons**
- b. **gender affirming care**
- c. **dissociation and psychosis**

The Personality Disorder Service received training in 'Working with trans people and gender affirming care' on 7<sup>th</sup> December 2022 which 95% of the Personality Disorder Team attended; this was delivered in a workshop format by the Personality Disorder Pathway Lead who is a senior social worker and the Mentalisation-Based Therapist (MBT).

Further training has been scheduled for the team on 3<sup>rd</sup> of May 2023 on 'diversity Identity training', covering: awareness of diverse identity; micro affirmation; how to case note transgender, intersex and gender dysphoria, inequalities that transgender people experience across a range of domains. Attendance at the training sessions will be expected of all team members. Those not attending will be logged and followed up accordingly.

**3. Scrutiny of the delivery and implementation of such training, by way of Quality Assurance**

Training is monitored at monthly meetings with line management staff and training sessions held on the first Wednesday of each month. Clinical supervision is provided to all staff on a monthly basis where learning from training will be discussed. Staff within the team are able to access case discussions and outcomes entered onto the electronic clinical records system (Rio) with training compliance monitored at annual staff appraisals.

**4. The absence from the assessment protocol of a provision to ensure that a full account is taken of:**

**a. any previous diagnosis and treatment**

The personality disorder initial assessment protocol and guide includes the explicit expectation, that when assessing conditions, staff also examine previous treatments and diagnosis referred to in their records, and done so in consultation with the service user.

**b. all other information (including information from those who have previously provided care and treatment to the patient) available to the member of the team**

Records of previous engagements and treatments will be sought from within the Trust and also from external clinical records to inform and develop the assessment and treatment plan for each service user. Information provided by the service user and from those individuals providing support (where appropriate and with the permission of the service user) will inform the process of treatment .

**c. the risks to (and effects on) patients with (or likely to develop) conditions of dissociation**

Within the assessment protocol and the guide, there are specific parameters referring to the assessment of dissociation and psychosis .In particular, the need for those assessing to consider any possible risk from self-harm and/or suicidality .

**d. the views of those who are close to the patient, including the patient's carers, family, and advocates (both formal and informal), who should be contacted, for that purpose.**

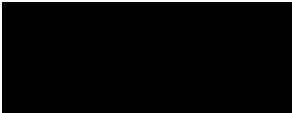
From 20<sup>th</sup> March 2023, the assessment protocol requires all clinicians to ask the service user to invite family members, carers, and those from whom they receive support from, to attend the assessment; this ensures that the process of delivering treatment proceeds in the most appropriate way . The contact details of carers, supporters, family and advocates, including the nature of their involvement, will be uploaded onto the Rio as part of this process.


The Trust is grateful for the opportunity to demonstrate the enhanced procedures its developed following Sophie's passing. Further learning and training is being provided to staff with regular reviews; covering the needs of trans people, the provision of gender affirming care and patients with dissociation and/or psychosis.

Finally, the Trust offers its sincere condolences to the partner, friends and family of Sophie. In doing so, the Trust remains committed to the delivery of patient-centric and holistic care to its service users.

We hope the above has addressed the matters raised in the Prevention of Future Deaths report.

Yours Sincerely



  
Director of Nursing – Quality Governance  
Barnet, Enfield and Haringey NHS Trust