

Anna Crawford

Surrey HM Coroner's Court Station Approach Woking GU22 7AP National Medical Director NHS England Wellington House 133-155 Waterloo Road

London SE1 8UG

9 May 2024

Dear Coroner,

Re: Regulation 28 Report to Prevent Future Deaths – Jonathan Harris who died on 27 June 2022.

Thank you for your Report to Prevent Future Deaths (hereafter "Report") dated 20 March 2024 concerning the death of Jonathan Harris on 27 June 2022 and directed to the Chair of NHS England. I am responding on behalf of the organisation in my capacity as National Medical Director but would like to assure you that the Chair has also been sighted on and reviewed your Report and our response. In advance of responding to the specific concerns raised in your Report, I would also like to express my deep condolences to Jonathan's family and loved ones. NHS England are keen to assure the family and the coroner that the concerns raised about Jonathan's care have been listened to and reflected upon.

Your Report raises the concern that a Consultant Psychiatrist post in the Community Mental Health Team treating Jonathan has been vacant for nearly two years and that this was within the context of a national shortage of suitably qualified psychiatrists.

NHS England is working at a national level to deliver the <u>Long Term Workforce Plan</u>. This is a robust and effective strategy to ensure we have the right number of people, with the right skills and support in place to be able to deliver the kind of care people need. It heralds the start of the biggest recruitment drive in health service history, but also of an ongoing programme of strategic workforce planning. It includes ambitious commitments to grow the workforce by significantly expanding domestic education, training and recruitment, as well as actions aimed at improving culture, leadership and wellbeing so that more staff are retained in NHS employment over the next 15 years.

The Plan includes a specific focus on the mental health workforce, including a commitment to grow the number and proportion of NHS staff working in mental health, primary and community care. The plan sets out an ambition to grow these roles by 73% by 2036/37. The Royal College of Psychiatrists is also actively engaged in workforce planning and ensuring that there is a sustainable workforce of well-trained psychiatrists.

These actions will aim to close anticipated staffing shortfalls in the NHS in the long term, however Trusts have a responsibility to ensure safe staffing levels in the current day to day operation of their hospitals. This is in line with <u>Care Quality Commission</u> (CQC) Regulation 18 which states that providers must deploy enough suitably

qualified, competent and experienced staff to enable them to meet all other regulatory requirements.

NHS England has engaged with Surrey and Borders Partnership Foundation Trust (SABPT) on your concerns. We are advised that they are working to improve their consultant recruitment rate and are making their recruitment offer more attractive by offering recruitment bonuses, increasing junior doctor support and education and leadership opportunities and introducing flexible working. We would refer you to the Trust for further details on this.

Your Report also raises the concern that there is an ongoing shortage of available psychiatric beds in Surrey, amidst a national shortage.

The number of mental health beds required to support a local population is dependent on both local mental health need and the effectiveness of the whole local mental health system in providing timely access to care and supporting people to stay well in the community, therefore reducing the likelihood of an admission being necessary.

In some local areas where there is a need for more beds, this is being addressed in part through investment in new units, however, this should be considered as part of whole system transformation approach. This is supported by the NHS Long Term Plan (LTP), which is seeing an additional £2.3bn funding invested in mental health services from 2019/20 – 2023/24, around £1.3bn of which is for adult community, crisis and acute mental health services to help people get quicker access to the care they need and prevent avoidable deterioration and hospital admission. A further £1.6bn has been made available via the better care fund from 2023-25 which can be used to support mental health inpatient services as well as the wider system which should help to reduce pressures on local inpatient services so that those who need to access beds can do so quickly and locally.

In 2024/25 NHS England and systems will have a renewed focus on improving patient flow and reducing the use of out of area placements. This will be delivered through ongoing improvements to community mental health services, as well as focussed work to reduce inpatient lengths of stay and delays around discharge linked to onward care, support and housing, all of which will improve access to mental health beds closer to home for patients.

SABPT have a 6 bedded residence called The Retreat, which is hosted by an independent organisation, Comfort Care. The service offers an alternative to in-patient admission, providing non-clinical, therapeutic support in a less restrictive environment. Their Home Treatment Teams oversee the referral process to this facility.

I would also like to provide further assurances on national NHS England work taking place around the Reports to Prevent Future Deaths. All reports received are discussed by the Regulation 28 Working Group, comprising Regional Medical Directors, and other clinical and quality colleagues from across the regions. This ensures that key learnings and insights around preventable deaths are shared across the NHS at both

a national and regional level and helps us pay close attention to any emerging trends that may require further review and action.

Thank you for bringing these important patient safety issues to my attention and please do not hesitate to contact me should you need any further information.

Yours sincerely,



National Medical Director