NHS
Birmingham and Solihull
Mental Health
NHS Foundation Trust

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[redacted]

Mr James Bennett,
Area Coroner,
Birmingham and Solihull Areas,
BIRMINGHAM
B4 6BJ

BY EMAIL ONLY TO: [redacted]

Our Ref: [redacted]

Your Ref: [redacted]

Date: 26 July 2024

Dear Mr Bennett,

Re: Prevention of Future deaths Tcherno Bari

Thank you for your Prevention of Future Death (PFD) report dated 3 June 2024, which I understand has also been sent to other parties for their response. I would like to begin by offering my sincere condolences to Mr Bari's family. Please accept my assurances that as a Trust, we have learned lessons from the information which came out of the inquest and we will continue to work together with West Midlands Police and other agencies going forward to ensure that patients receive the best possible care.

I will address each of the points that you have raised in turn. Some points West Midlands Police may be able to provide more detailed information than BSMHFT.

1) You were not reassured BSMHFT staff are handing attending police officers 'appendix C – risk rating' as required by their missing person policy.

At the time of the inquest the Missing Persons Policy was being upated, in line with changes from Right Care Right Person (RCRP). Since this time the update has been completed and there have been a number of changes made. In addition the Trust have a new Executive Director of Quality and Safety/Chief Nursing officer who will be accountable for the policy. The updated policy has included valued feedback from the inquest. I can inform you that the appendix C risk rating form that you saw at the inquest has been stepped down, due to emerging evidence in the area. The new version of Appendix C form is a decision recording form which also includes a section which sets out 'why the risk is considered to be present'. The form will be read out to the police in the recorded phone call and it will also be handed over to the police when they attend. I enclose a copy of the updated policy which I hope will provide you with reassurance of the progress made from the old policy.

2) A 'monitoring tool' in the BMSHFT Missing Patient Policy requires routine monitoring to ensure nurses are completing 'appendix A' and 'appendix B', but not 'appendix C – risk rating'.

The updated policy, which has now been approved by both the Trust and our colleagues in the West Midlands Police has an updated Audit and Monitoring tool which requires quarterly and annual audits to be presented to the clinical governance committee for assurance, lead by the Matron for each inpatient area. Whilst this previously did not include Appendix C, it has now been updated to include this.

3) You were not reassured BSMHFT Clinical Service Managers ('CSMs') are (a) coordinating the attempts to locate high-risk missing patients, and (b) inviting a representative from WMP to attend 'daily appraisal' meetings to discuss the high-risk missing patient's absence as required by their missing patient policy.

On 25 June 2024 there was a training session put together which was attended by Clinical Service Managers, Nurse Managers, Matrons, Ward Managers for the in-patient wards and the Home Treatment Team Managers. During the session this inquest was used as a training tool and staff were reminded of their professional responsilibties, particularly around the co-ordination with police and daily meetings. Flash cards were provided to ensure that CSM's are reminded of what they should be doing when patients go missing.

Since the inquest, when incidents of patient's going missing have occurred the correct processes have been followed. Reflection is being prepared for the most recent case and will be shared with the areas to ensure lesson learning is being shared.

4) I am not reassured the RCRP 'challenge' process has been effectively communicated to BSMHFT.

The updated policy sets out clearly the RCRP escalation process (challenge process) under Appendix K. This has been circulated to responsible clinicians and senior nurses within BSMHFT. As the escalation procedure contact details alter in the future, the process will continue to be updated and circulated to all senior clinicians in BSMHFT and will continue to be part of the missing persons policy.

The Trust Updated missing person policy also now states explicitly that there is a expectation that the police recognise the expertise of BSMHFT clinicians in identifying missing persons with critical concern in the mentally ill. There is an expectation that this is respected by the police. Any disagreements are handled via the escalation process at a senior level. As I explained earlier this Policy was developed in conjunction with West Midlands Police..

The new policy has now been approved on 2 July and in addition to this being circulated to all clnical staff, training on the Policy will also be in place in the next 6 weeks. The training will target two key areas; there will be online training for staff to watch and also flash cards and posters in clinical areas which will flag the key points staff needed to remember to do in the cases of patients going missing. There will also be promotion on the Trust intranet for staff to alert them to the new policy and the training materials.

5) The BSMHFT Missing Person Policy purports to append WMP's missing person process but makes no mention of RCRP. I am not reassured the BSMHFT Missing Person Policy is therefore accurate and up-to-date.

As identified earlier in our letter, at the time of the inquest the Missing Persons Policy had not yet been finalised following the introduction of RCRP. The National Chief Police Offcers Council and National College of Policing have issued guidance in line with RCRP. RCRP National partnership agreement has been signed by the Department of health and Social care and the Home office. Following this the trust has comprehensively updated its missing person policy in line with the National guidance and partnership agreement on RCRP**.** The policy is attached for your reassurance.

6) RCRP does not require WMP to formally indicate to BSMHFT (i.e. via a form) when the police have taken a different view about the risk category. BSMHFT will often be unaware of the different view taken by the police rendering the 'challenge' process redundant and reducing the chances of the police identifying they have overlooked key information.

Under the updated policy the police will formally notify BSMHFT in writing, with their decision and reasoning if they have decided not to deploy immediately, when critical concern is communicated to them by a mental health nurse in regard to a inpatient who is missing. This would enable the escalation process to be taken forward by senior clinicians as set out in Appendix K, if necessary.

7) The BSMHFT Missing Patient Policy and RCRP do not require BSMHFT to hand attending constables a copy of the risk assessment, or require attending constables, or later the Locate team, to request a copy of the risk assessment. In the event of a conflict about risk category, requiring attending constables to take early possession of the written risk assessment may lead to the police identifying they have overlooked key information and revisit their own risk category.

The fundamental expertise of BSMHFT clinicians in assessing critical concern in the mentally ill is crucial for the police to recognise. Appendix C has been now been developed into a document which sets out the reasoning for critical concern for the missing person by BSMHFT clincians. Sharing this will assist the police in understanding the rationale for why a clinician may consider a patient to be high risk. The escalation process also enables a more detailed discussion at a senior level between BSMHFT and the Police to assess and convey critical concern and share the basis for reaching such a conclusion.

8) RCRP and APP do not require attending constables to have particular regard to the expertise of mental health clinicians and hesitate or be extra vigilant before rejecting their opinion on risk category.

This is a point which the Trust would not be able to respond to as this is for West Midlands Police. We will therefore let them provide you with their response to this point.

Yours sincerely

[redacted]

[redacted]
Chief Executive
BSMHFT