



Legal Department
Uffculme Centre
52 Queensbridge Road
Moseley
Birmingham B13 8QY

Tel: [REDACTED]

Mr Adam Hodson,
Assistant Coroner,
Birmingham and Solihull Areas,
BIRMINGHAM
B4 6BJ

BY EMAIL ONLY TO: [REDACTED]

Our Ref: [REDACTED]

Your Ref: [REDACTED]

Date: 10 October 2024

Dear Mr Hodson

Re: Prevention of Future deaths Juliette Sewell

Thank you for your Prevention of Future Death Report dated 19 August 2023. I would like to take this opportunity to offer my sincere condolences to Juliette's family for their loss and also offer my assurances that we have carefully reviewed her case and made improvements.

In relation to the outstanding action you have highlighted. I can confirm that in order to provide you with assurances by the date of your PFD response, we have brought forward the necessary steps to ensure the completion of the action earlier than anticipated. I can confirm that there continues to be an ongoing review of our Electronic Patient Record (EPR) RiO records for service users who have not been seen by any clinician within the team for over 12 months as part of ongoing monitoring.

As of September 2024, there are 553 service users who have not had contact with Lyndon CMHT in over a year, which is 21.14% of the total caseload. Of the 553 service users, 36.99% (204) have been offered at least one appointment in the last year by the team but did not attend (DNA). The caseload stratification work described at the inquest continues to develop, to date, 1028 desktop reviews have been completed. Of this number, 436 have since had contact with the CMHT and a further 110 have an appointment booked on the system. Lyndon CMHT books appointments up to five weeks ahead, so the remaining 482 service users will be booked in when new appointment slots become available. The 482 patients are existing patients of the CMHT, they have had appointments with the CMHT and have Care Support Plans in place. Further appointments are being made with them to review the next stage in their ongoing treatment and care and consider whether their needs can be met by the Neighbourhood Mental Health Team.

Patients are informed at their appointment by the relevant clinician that they will be offered a further appointment, in the meantime if the need arises, they are advised to contact the CMHT duty worker or

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out of hours numbers. This contingency plan is also included in the care support plans that patients receive following their appointment. Where patients require more urgent appointments, this is discussed with the relevant doctor to make arrangements for the patient to be seen by a duty worker or by a doctor in an urgent outpatient slot.

The team also review service user needs by way of MDTs for those patients who have been waiting for an extended period time. STR workers will also go out and visit service users if we have not been able to reach them on the phone. There are process to ensure clinical contact with patients to check on their mental health and wellbeing, and if necessary any urgent need for an appointment would be expedited with an appointment being booked in the next available slot or an urgent appointment to be arranged.

Alongside this work, the team are also implementing a new system to improve the booking of out-patient appointments and development of a report that will easily identify those who are approaching the scheduled date of their next appointment with the team. This work is underway and significant changes have already been made to the processes for booking of appointments, which has seen a reduction in our DNA rates. The development of the report relies upon changes being made to RiO. These changes are due to be added to the 'test' system by 27th September 2024 and will go 'live' from 31st October 2024. Once data has been input into RiO the report can be finalised and launched.

All other systems are in place to support the report from the 'go live' date, and this will strengthen the clinical oversight we have of the caseload. Whilst waiting for the above work to be implemented, there is scrutiny of the waiting lists by the Associate Director, Head of Nursing, Clinical Director, and Clinical Services Manager fortnightly. The Clinical Services Manager also scrutinises the waiting lists and those who have not been seen for over 12 months at a monthly meeting with the Hub Manager and Business Support Services Manager.

The following processes are continuing:

- The list of those who are open but not seen for over 12 months is available via Insight reports. This is scrutinised on a regular basis by the Business Support Services Manager and their team, who then highlight these cases to a senior clinician (i.e. Psychiatrist, Hub Manager, Clinical Lead) within the team so that they can determine the management plan and when the service user needs to be seen.
- Continue with current meetings to scrutinise waiting lists and overall caseload.
- Hub Manager to provide Clinical Services Manager with a weekly position update of progress being made for those who have not been seen for over 12 months, and to escalate any barriers that may be hindering this.
- Caseload stratification work to continue, with monthly updates to be sent to Clinical Services Manager detailing how many have been completed and the outcome of these (e.g. seen by team, discharged to GP, transferred, etc).

We hope that we have been able to offer reassurances that as a Trust we are committed to improving services for our patients and ensuring that improvements are made as soon as possible.

If we can provide any further information, please do not hesitate to contact us.

Yours sincerely


**Chief Executive
BSMHFT**