

Trust Management Offices

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Mr Christopher Murray
His Majesty's Assistant Coroner, Manchester South

Sent by email: [REDACTED]

26th November 2024

Dear Mr Murray

Re: Inquest touching the death of Mr Michael Sean Heath – Regulation 28 response

Thank you for highlighting your concerns following the inquest into the tragic circumstances surrounding Mr Heath's death. Can I apologise that you have had to bring these matters of concern to the Trust's attention, on behalf of Greater Manchester Mental Health NHS Trust, I would like to offer Mr Heath's family our sincere condolences at this difficult time. This information is provided in addition to the evidence you have already received from [REDACTED] (which was accepted during the inquest) and from [REDACTED], dated 5th September 2024.

Please find below our responses to the specific concerns outlined in your report:

Notification to carers following admission under the Mental Health Act

The Trust's Admission, Treatment, and Discharge Standards Policy mandates that carers and families are notified within 24 hours of a patient's admission under the Mental Health Act. Ward contact details are provided, and carers are invited to participate in the first multi-disciplinary team (MDT) review. This policy is available to all staff on the Trust's Intranet and reinforced during induction and ongoing training.

Noting that this did not occur in the case of Mr Heath, the Trust has emphasised this expectation through daily staff huddles across GMMH. The wards have implemented a process to ensure written information is provided to carers within 72 hours of admission. All Ward Managers receive a daily report which identifies any missing fields i.e. carer identified & recorded, and information pack provided, that they are required to follow up. Compliance with these requirements is currently being audited across the Trust, this audit is due to be completed by the end of December 2024.

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Chair: [REDACTED]

Chief Executive: [REDACTED]

Access to Independent Mental Health Advocates (IMHA)

The Trust's Policy and Procedural Guidance on Patients' Rights, Section 132, Mental Health Act 1983, requires that all patients detained under the Mental Health Act are offered and supported to access an IMHA. This is in person with a designated clinical worker on their ward.

In addition to support understanding, within five working days of admission, the Mental Health Act Administrator issues a standard letter to each detained patient, summarising their rights and providing details on IMHA support. In Salford, the Advocacy Service is co-located with inpatient wards, enabling timely and proactive engagement with patients. Advocates also visit wards regularly to identify and assist new inpatients to ensure they have an in person offer as well as working through the staff teams.

The Trust will review the monitoring of IMHA referrals and set up a system of audit so we can assure contact has been made to offer IMHA services by the end of March 2025.

Connectivity between UK and overseas Mental Health Services during repatriation

Following this incident, the Trust has revised its Repatriation Procedure, as part of the newly developed Community Mental Health Transformation policy which outlines the steps necessary to ensure seamless communication and care for international patients. This policy is currently a working draft, and it is anticipated a final draft will be shared with the Trafford Strategic Safeguarding Partnership in early 2025.

In response to our learning from Mr Heath's death, the Trust contacted the Consultant Psychiatrist at Oceanview Hospital in Gibraltar to share learning and reinforce the importance of proactive communication upon discharge. Going forward, this procedure will ensure that overseas providers understand the need to engage with the Trust prior to repatriation.

Risk of removing patients from GP practice lists due to geographical relocation

The Trust recognises the risks associated with removing patients from GP practice lists based solely on geographical factors without considering their broader care needs. We have engaged with primary care providers and local commissioners to ensure that such decisions are taken collaboratively, with an emphasis on safeguarding continuity of care for vulnerable patients.

Furthermore, there is clear guidance in the Trusts Community Mental Health Teams' Standard Operating Procedures, in respect of safe transfers between teams should a person move area or change their GP. This guidance takes in to account the individual needs of service users and includes a comprehensive handover and transfer plan. We will ensure that all our community teams are reminded of the guidance, and we will carry out an audit to ensure that staff are following this guidance by the end of March 2025.

Central repository and communication between mental health agencies

The Trust continues to prioritise effective communication and information-sharing between agencies. Our revised protocols include the integration of mental health practitioners within key control centres such as the North-West Ambulance Service (NWAS) and Greater

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Manchester Police (GMP), facilitated through the Mental Health Tactical Advice Service (MHTAS).

In addition, the new mental health option on the NHS 111 service allows callers to directly access mental health practitioners within the Trust. This improvement enhances connectivity across agencies, ensuring real-time access to accurate and relevant patient information.

Mr Murray on behalf of the Trust can I thank you again for bringing these matters of concern to the Trust's attention. I hope this response demonstrates to you and Mr Heath's family that GMMH have taken the concerns you have raised seriously. If you have any further questions in relation to the Trust's response, please do let me know.

Yours sincerely,



Chief Nurse
Greater Manchester Mental Health

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Chair: 

Chief Executive: 