

Ms Sarah Murphy
Assistant Coroner – Cheshire

Sent by email to: [REDACTED]

09 July 2025

Dear Ms Murphy

Regulation 28 Report to Prevent Future Deaths - touching on the death of Joseph David Powell

I was sorry to hear of the tragic death of Mr Powell and our condolences go to his family.

The Royal College of General Practitioners works to improve patient care by encouraging the highest possible standards in general medical practice by supporting members, setting standards, providing education and training promoting research and advocating and representing the College.

We understand that Mr Powell was diagnosed with Depression in March 2024 and did not follow up with a GP after receiving a prescription for Sertraline until the 22 August 2024. He re-presented with additional symptoms of PTSD and after a different prescription of antidepressants he failed to rebook another appointment and was found hanging on the 6 September 2024 and subsequently died.

Your matter of concern for which you have asked for comment is

‘That not all GPs book follow up appointments for patients presenting with mental health difficulties such as depression, anxiety and post-traumatic stress disorder. Instead, they request that the patient book their own follow up appointment with their GP. This can be difficult for patients who are suffering with mental health difficulties and can result in patients not receiving a follow up appointment with their GP or any further medication.’

The management of Mental Health conditions is a fundamental area of General Practice and covered by the GP Core Curriculum in the [Clinical Topic Guide for Mental Health](#). The College also supports member with continuing professional development by publishing a range of learning materials which are collated in the [mental health toolkit](#). There is a specific section on crisis, self-harm and suicide as well as an e-learning course on suicide prevention, available to all members.

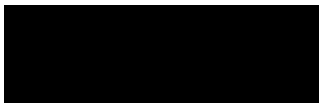
The area of follow up is an important one to be considered by the GP when understanding the risks to the patient and it is important to consider this in the consultation together with the patient and to build a safety netting approach. This is done through a personalised and shared care approach, including consideration of the individual's needs, a management plan and follow up arrangements. As part of the management plan there would often be a safety plan for those identified as at risk of suicide which would include specific follow up arrangements. These follow up arrangements could include rebooking of GP follow up using the surgery processes or through the GP booking the follow up dependant on individual circumstances.

Depression is a common condition and often also associated with other mental health conditions and recognition of suicide risk is a part of the GP consultation. The management plan would include a specific safety plan which could include support for booking appointments and further planning if patients do not attend appointments.

The RCGP actively promotes ongoing professional development for its members, and it has a Mental Health Special Interest Group (SIG). As a College our action shall be to highlight this case to the Mental Health SIG to support further promotion of safety planning in suicide prevention for people with mental health conditions and to consider GP booking of appointments where this is a part of the safety plan.

Once again, we were sorry to hear about this tragic death and offer our condolences to his family.

Yours sincerely

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Honorary Secretary