

CONFIDENTIAL

Mr Philip Spinney
HM Senior Coroner
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EX24QD

Trust Headquarters
Wonford House
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Exeter
EX2 9AF

Tel: 01392 208683

Date: 07 May 2025.

Sent via e-mail [REDACTED]

Dear Mr Spinney

Re. Mr Benjamin Robert Compton – Regulation 28 report.

I write in my capacity as Chief Nursing Officer and Allied Professions Lead at Devon Partnership NHS Trust (the Trust) in response to your regulation 28 report dated 19 March 2025.

Can I first of all pass on my condolences to Mr Compton's family and friends.

In your report you highlighted areas of concern to Devon Integrated Care Board, Director for Primary Care NHS Devon, and NHS England along with us Devon Partnership NHS Trust (DPT).

In respect to the concerns pertinent to DPT I respond as below:

MATTERS OF CONCERN are as follows:

The evidence reveals that there was a gap in the provision of care for individuals suffering with autism and in crisis, which remains the case today both in Devon and nationally. Evidence was heard that a gap exists with autistic people in distress and or dysregulation with no treatable mental health condition and there is a grey area around treatment. This is beyond the skills of social care providers. And unless the individual meets the criteria for treatment under the Mental Health Act there is very little support:

At the time of, and during the period leading up to Mr Compton's death, as you highlight the Trust and wider Devon system did not have access to a specific autism crisis team. This was, and remains, a known gap in commissioning across the country.

At the time, as described by [REDACTED] in her testimony in court, the Devon Adult Autism Intervention Team (DAAIT), had recently been commissioned to provide a countywide service for autistic adults with the aim to:

- Prevent unnecessary hospital admission
- Reduce length of stay
- Prevent placement/accommodation breakdown including within family home
- Support the individual and their team(s)/supporters to better understand where autism is impacting on the person's stability, and the barriers to interventions/treatment options and solutions, where autism is the key or contributing factor to individuals needs/concerns.

Chair: [REDACTED]

Chief Executive: [REDACTED]

As [REDACTED] also explained, DAAIT at that time were in the developmental phase and not yet operational. The team was not scheduled to become operational (become open to referrals, commence clinical work) until April 2020. This timeframe was achieved.

However, had DAAIT been operational at the time of Mr Compton's distress there still would not have been a specific dedicated autism crisis pathway that he could access. The DAAIT service operates with a duty worker system 5 days per week, staffed by team members. Because of the low demand on duty in terms of volume of queries, and DAAIT service not commissioned to provide an "urgent response", there is a time frame for response of 48hrs, predominantly this accessed via email queries. This provision is noted in the service Standard Operating Procedure. If there was a significant concern that there was an immediate threat to life then the staff member dealing with the query would contact the police via 999.

DAAIT is a very small team, and as part of its commissioning it is explicitly not able to provide:

- A care coordination function, and as a result the expectation is that DAAIT staff will work as part of the overall health and/or social care network around the person at that time. Any work, regardless of tier, will be time limited.
- An emergency or crisis response.
- Services/treatment which can be provided by mainstream services, with reasonable adjustments.

Subsequent regional developments:

Regionally the lack of specifically designed inpatient environments to best assesses/treat adults with a learning disability and/or who are autistic with co-morbid mental health issues was acknowledged by NHS England and led to a range of funding to build x2 ten bedded inpatient units for this cohort. Devon Partnership Trust has been the lead provider for one of these (The Brook), which is currently under construction in Dawlish, Devon, and is due to open summer 2025. The other unit (The Kingfisher) is being built in Bristol but is not due to open until later in 2026.

As part of the regional development a Learning Disability/Autism Outreach team has been commissioned to sit alongside each unit as part of what is being seen as regional a Learning Disability/Autism service. The LD/A outreach linked with The Brook, is due to become operational at a similar time to the unit opening.

It is important to stress that the LD/A Outreach is not commissioned to provide crisis support/intervention in the same way that mental health crisis/home treatment teams are but will be able to work closely with these teams and other services, the patients network etc providing specific autism relevant advice/guidance and interventions.

Benjamin was removed from his GP practice due to violent behaviour and allocated to the Special Allocation Scheme. This scheme was not able to meet the needs of a patient such as Benjamin with a diagnosis of autism spectrum disorder.

Devon Partnership NHS Trust are not able to comment on this specific question as it is a Primary Care/GP related one.

I trust the above responds clearly to your question.

Yours sincerely

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Chief Nursing Officer and Allied Professionals Lead