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14th April 2026

Private and confidential

Mr Richard Furniss
HM Assistant Coroner
West London Coroners Service
25 Bagleys Lane
London
SW6 2QA

Dear Sir

Management of Contraband Items: Response to the Concern Raised at the Inquest of Mr Mandrik

Background

This letter sets out the Trust's response to the concern raised by the Learned Coroner at Mr Mandrik's inquest that contraband items issued to patients are not routinely recorded as returned.

A Contraband Item Form was in use on Ellis Ward at the time of Mr Mandrik's admission; however, it was applied inconsistently and there was no clear Trust-wide policy or procedure governing the signing in and out of contraband items issued to patients. As a result, items given to patients were not reliably recorded as returned. The Trust acknowledges this gap and has taken immediate action to address it while the wider policy is updated. On behalf of South West London and St George's Mental Health NHS Trust (the "Trust"), we would like to reiterate our apology to the family of Mr Mandrik.

Summary of Actions

The Trust's response has three components: (1) a revised Contraband Item Form with a mandatory return field, to be implemented across all inpatient wards (Appendix 1);

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(2) an interim Standard Operating Procedure (SOP) to ensure immediate compliance while the wider policy is updated (Appendix 2); and (3) a formal update to the Trust's Searching of Environment, Property, Service Users and Visitors and Managing Contraband Policy through the Quality Governance Group (QGG).

1. **Revised Contraband Item Form (Appendix 1)**

The existing form has been revised to establish clear expectations of responsibility and accountability in the management of contraband items in the inpatient setting.

The revised form includes:

- a mandatory return field requiring the date and time of return and the signature of the receiving staff member, so that every issued contraband item has a documented return entry;
- a requirement that the risk assessment of the contraband is conducted by the nurse in charge;
- a clear requirement that any staff member issuing a contraband item must ensure its return, or formally hand over responsibility to a named colleague if they are unavailable; and
- completed forms to be uploaded to a shared drive by administrative staff to support monthly compliance audits.

Implementation: the revised form will be tested on all acute inpatient wards as an immediate interim measure, ahead of formal approval of the updated policy. [Lead: Head of Nursing, AUC. Target rollout: end of April.

2. **Standard Operating Procedure (Appendix 2)**

An interim SOP has been created to accompany the revised Contraband Item Form. It sets out the key guidance points, staff responsibilities and audit requirements, and serves as an interim protocol until the Trust-wide policy is updated. The SOP provides ward staff with unambiguous instructions on the issue, tracking, return and escalation of contraband items.

Implementation: the SOP will be used in conjunction with the daily contraband item form on all acute inpatient wards during the trial period. As above, the Head of Nursing, Acute and Urgent Care Service Line, will lead on this, with a target rollout date of the end of April 2026.

3. **Integration with Trust Policy**

The Trust Searching of Environment, Property, Service Users and Visitors and Managing Contraband Policy will be formally updated to incorporate the revised Contraband Item Form and the SOP. The new process will be inserted into the policy under 'Management of Contraband Items', immediately before section 16.1, with the form and SOP included as appendices.

This amendment has been discussed with the Head of Security Management Team and the Deputy Director of Nursing, who are the joint authors of the policy. The revised form and SOP will next be shared with all service lines Head of Nursing, and the updated policy will be taken through the Trust approval process via the Quality Governance Group (QGG). Completion is anticipated by the end of June 2026. This project will be led by the Deputy Director of Nursing.

4. Communication and Staff Adoption

A communication plan will ensure all inpatient staff are briefed on the revised form and SOP, the expectations on them, and the compliance requirements. Briefings will be delivered through ward handovers, ward-based meetings and clinical supervision. Staff will be required to sign a register to confirm their understanding and adoption of the new process. Ward managers will retain the register as evidence of local compliance.

5. Training

All inpatient staff receive training on the management of contraband items, including risk assessment, search processes and escalation procedures. This is embedded within the Proactive Physical Intervention (PPI) Training package, which includes guidance on identifying, managing and responding to contraband and ligature risks. Staff are required to complete the full PPI induction training and attend annual refresher updates to maintain competence. The revised form and SOP will be incorporated into the PPI refresher content at the next update cycle.

6. Assurance, Audit and Escalation

Compliance with the revised process is monitored through monthly snapshot audits of the completed Contraband Item Forms held on the shared drive. The target is 100% of issued items having a documented return entry. Audit outcomes, including both good practice and areas of concern, are shared with ward teams and reported to the Ward Quality Meeting. Performance below 95% triggers escalation to the Head of Nursing for action, with progress tracked to ensure learning and sustained improvement. Trust-wide assurance will be provided through the Quality Governance Group. A baseline audit will be undertaken at the point of rollout to establish the current position and measure subsequent improvement

7. Shared Learning

The learning from Mr Mandrik's inquest and the revised contraband management process will be shared across the inpatient wards through the Senior Nurses' Forum, ward managers' meetings and a Patient Safety bulletin, to ensure that the changes are understood and embedded Trust-wide.

Yours sincerely,

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Making Life Better Together

NHS
South West London and St George's Mental Health NHS Trust

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Chief Nurse