

Dr Sharpstone
Suffolk Coroner's Court

Date: 16th July 2026

Dear Dr Sharpstone

Regulations 28 and 29 (Coroners Investigations Regulations 2013) notification made in response to the death of Rebecca McLellan

I write to you in respect of Rebecca McLellan who sadly died on 20 November 2023. Her inquest concluded on 25 March 2026, and you subsequently raised a concern within a prevention of future deaths report, issued on 18 May 2026.

Your concern is that:

There is no documented system that I consider adequately highlights and manages planned, prolonged key care co-ordinator absence in the Youth team, nor a formal, documented process that clearly and accurately ensures that the roles and responsibilities of named key care co-ordinators are adequately covered during periods of planned leave. There is no process to ensure a dedicated, named care co-ordinator is identified to the mental health patient to provide continuity of care during prolonged periods of planned leave.

As explained in the attached letter to you dated 13 May 2026 (enclosed), there are specific processes in place both for planned and unplanned leave. I note your concern set out in the prevention of future deaths report, specifically relates to the management of planned and prolonged absence of care-coordinators in the Youth Team however.

Planned, prolonged leave may include maternity/paternity leave or planned sick leave. The process to manage prolonged, planned leave of a care-coordinator in the Youth Team is as set out below:

- At the point that a care co-ordinator's prolonged absence is planned, they will no longer have any new patients allocated to them.
- In advance of their absence, the care co-ordinator prepares a hand over of their patients which outlines their intervention level.
- In addition, at the care co-ordinator's supervisions with their line manager in the run up to their absence, there is discussion about the care co-ordinator's patients and management of the planned leave, supported by the handover document.
- At MDT meetings, each patient and their clinical need is discussed. In the context of care co-ordinator going on planned leave, these MDT discussions support the Clinical Team Manager to determine which patients require re-allocation during the planned leave and which do not.
- The decision about re-allocation is made at the most appropriate time (based on the patient's presentation at the time and known history), in the lead up to the care co-ordinator's absence. The

expectation is that a decision will be made for all patients prior to the last two planned visits by the care co-ordinator before their leave.

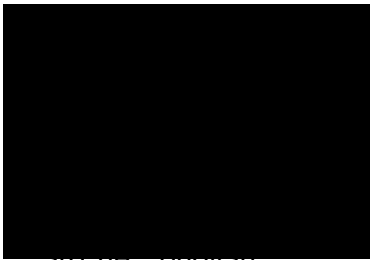
- Individual patients are notified by their care co-ordinator of the plans to manage their absence in advance. How that is done will be dependant on what is most appropriate for the patient, but when a decision is made to re-allocate a patient to a new care co-ordinator, they are notified of this at the penultimate appointment with their usual care coordinator. Then the final appointment before the care co-ordinator's leave is a joint appointment with the original and the new care coordinator to support a positive transition between staff.

To ensure the process is documented and applied consistently across all community services, the Trust has prepared and ratified a guidance note for staff (enclosed).

Rebecca's tragic death has brought about change within the Trust, as set out in the evidence provided to the Court by [REDACTED], Director of Nursing and Quality for East Suffolk, both during the inquest and subsequently. We trust that the above information addresses your concern.

Finally, I wish to join my colleagues in offering our deepest condolences to Rebecca's family and friends for their tragic loss.

Yours sincerely,



[REDACTED]
Chief Executive Officer