



Department  
of Health &  
Social Care

██████████  
Minister of State for Social Care

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████████████████████

Andrew Cox  
HM Coroner  
Cornwall and the Isles of Scilly  
Cornwall Coroner's Service, Pydar House, Pydar Street, Truro, Cornwall TR1 1XU

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14 September 2026

Dear Mr Cox,

Thank you for the Regulation 28 report dated 3 July 2026, which was sent to the Secretary of State for Health and Social Care concerning the death of Ms Bernadette Rosario. I am replying as Minister of State for Social Care.

Firstly, I would like to say how saddened I was to read about the circumstances of Ms Rosario's death. I offer my sincere condolences to her family and loved ones. The circumstances described in your report are concerning, and I am grateful to you for bringing these matters to my attention.

The report raises concerns that, when ██████████ was released from prison on 11 November 2022, there appeared to have been no pre-release planning between the prison mental health team and Carrick Community Mental Health Team (CMHT). ██████████ had been adamant that he would not return to Cornwall and had expressed an intention to go to London. The only reason he appears to have been referred to Carrick CMHT was that his GP was based there.

It was noted that he had a history of poor engagement, and his lack of identified accommodation meant that it was recognised that he was unlikely to receive consistent mental health follow-up. In fact, the assessment identified no realistic protective factors. The result was that Carrick CMHT, which at the time comprised two-thirds agency staff, had to make contact with someone who was out of area and had a history of failing to engage with mental health teams. The team eventually made telephone contact with him, but he did not want to speak to them.

A multidisciplinary team meeting was held to consider what action should be taken. However, a view appears to have been reached that there was nothing meaningful that could be done, and consequently no action was taken. A man who was presenting with a mental health disorder, had a history of non-engagement with mental health teams and addiction services, was homeless, and had a history of violence and unpredictable behaviour was released "into the wind".

Following the Calocane public inquiry, the coroner was informed that the local integrated care board (ICB) had made funding available to strengthen the assertive outreach resource. However, the coroner was also advised that this funding was insufficient to meet the needs of the cohort of patients concerned. Furthermore, it was not 'new' funding but had instead been diverted from another area of service to the obvious detriment of that service.

In preparing this response, my officials have made enquiries with NHS England and the Care Quality Commission (CQC) to ensure that we adequately address your concerns. After reviewing your report, our NHS England colleagues considered it more appropriate to reply to you directly and we have made the decision collectively that NHS England are best placed to respond. You may therefore wish to address your report to NHS England so that it can also respond to your concerns. We also contacted CQC, whose response to your concerns is set out below.

### **Care Quality Commission (CQC)**

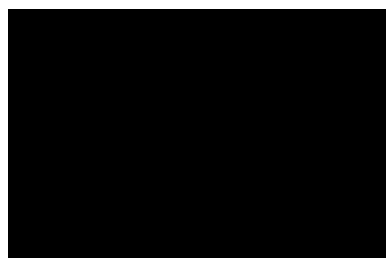
CQC inspected Cornwall Partnership NHS Foundation Trust's (CFT) community-based mental health services for adults of working age from 12 to 22 May 2026. The report is currently with the trust for factual accuracy checks. While we cannot provide a timeline for publication, we can confirm that we served a warning notice on Cornwall Partnership NHS Foundation Trust on 16 June 2026 for failing to meet the regulations related to oversight of people's physical health when they were prescribed medicines by adult community mental health services.

The trust's adult community mental health services are currently rated Requires Improvement overall, following the most recent inspection in 2022. At that time, Caring was rated Good, while all other key questions were rated Requires Improvement.

I have asked our NHS England colleagues to share their response, which I hope will thoroughly address the matters of concern set out in your report.

Thank you for bringing these concerns to my attention.

Yours sincerely,



**MINISTER OF STATE FOR SOCIAL CARE**