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13th May 2016

Senior Coroner M E Hassell
Inner North London
Poplar Coroner's Court
127 Poplar High Street
London
E14 0AE

Dear Madam

Inquest touching upon the death of Brenda Morris

This is a formal response to your Regulation 28 Report dated 19th February in which you set out your concerns relating to the care Ms Morris received from East London NHS Foundation Trust.

Your concerns related to the provision of leave for informal patients. You were specifically concerned at the lack of information provided to Ms Morris' partner in relation to her home leave and his role in facilitating that leave. You were also concerned that staff had not engaged with Ms Morris' partner on her return from leave to obtain feedback.

You also highlighted in your report that there appeared to be confusion over whether a doctor was required to authorise unplanned leave for an informal patient. This concern stemmed from the evidence given by the ward manager during the Inquest being in conflict with that detailed in the Trust's Serious Incident Review.

You also comment on the issue of substandard documentation in the nursing records, noting that this had already been identified by the Trust prior to the Inquest, noting that without improvement in the records it is not possible to determine whether and if so by whom a necessary risk assessment is undertaken immediately before leave is taken.

I can confirm that the information contained in the Trust's Serious Incident Review is correct in stating that a doctor is required to authorise unplanned leave for an informal patient. I was concerned to hear the evidence of the ward manager that a doctor is not required to authorise unplanned leave and that this is not routinely requested. Having heard the evidence of the ward manager at the Inquest I investigated this issue on my return. I was able to establish that the understanding of this particular ward manager was not in line with the general understanding of our nursing staff.

However, in light of the importance of this issue the Trust has taken the decision to implement the use of template documentation to ensure that any leave has been appropriately agreed by a doctor. A new 'Informal patient leave agreement' has been developed. This document details the agreement of leave following assessment by a doctor. The template includes a box detailing any leave conditions along with any expectations from staff, patients, relatives and carers. A separate box deals with contingency plans. The agreement is then signed by the doctor, the patient and the relative. This document is expected to be in place before a patient goes on leave.

In addition to the above an 'In-patient leave checklist for informal and detained patients' has been developed. It is also a requirement for this checklist to be completed for all leave. The checklist requires staff to assess risk prior to any period of leave, discuss with family or friends issues of risk and provide relatives/carers with a copy of an individualised contingency care plan. On return from leave staff will need to confirm that they have obtained feedback from family on the patient's return from leave. The detail of all assessments and discussions will be fully documented on RIO.

When implementing these new templates it is of the utmost important that the Trust strikes the right balance between appropriate risk assessment and ensuring that informal patients are able to exercise their right to make decisions in respect of leave and that we work in line with the views of the CQC that there should be no blanket restrictions on leave for informal patients.

Both forms are currently being piloted on one of our Mental Health Care for Older Persons wards with the aim of full introduction across all of our Older Persons wards by the end of this month. Use of the forms and the corresponding RIO entries will be the subject to quarterly audits starting from the end of July 2016 until January 2017 and will be subject to further review thereafter if necessary.

I fully anticipate that the implementation of these changes will ensure that all patients, whether formal or informal, will be subject to appropriate assessment prior to any period of leave and again on their return.

I hope that the actions taken by the Trust in response to your concerns will provide you with the appropriate reassurance.

If you require any further information please do not hesitate to contact me.

Yours faithfully



Dr Kevin Cleary
Medical Director