

Professor Sir Bruce Keogh
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Sarah Ormond-Walshe
Assistant Coroner
South London Coroner's Office,
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Davis House
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10 August 2017

Dear Ms Ormond-Walshe

Re: Regulation 28 Report – Alice Amaryllis Gibson-Watt (died 20.11.12)

I am writing in response to your prevention of future deaths report that was issued to Simon Stevens, Chief Executive of NHS England following the death of Mrs Gibson-Watt. Mr Steven's referred the matter to my office, asking that I provide a response to your Regulation 28 Report.

The circumstances surrounding this death are extremely sad, given that Mrs Gibson-Watt had recently given birth to her first child and I would like to express my deepest sympathies to her family.

The impact of mental health problems experienced by women in pregnancy and during the first year following the birth of their child can be devastating for both mother and baby, as well as their families. As part of the Five Year Forward View for Mental Health, NHS England has committed plans so that by 2020/21, support will be available for at least 30,000 more women each year to access evidence-based specialist mental health care during the perinatal period. This will include access to psychological therapies and the right range of specialist community or inpatient care so that comprehensive, high-quality services are in place across England.

As indicated in your letter, I read it that your concerns are wider than concentrating on the level of care patients who present with post-partum psychosis receive, but that they extend to identifying acutely physically unwell patients being nursed in an acute mental health setting, and the escalation of appropriate care.

I have involved colleagues from the NHS England Perinatal Mental Health team in considering how best to respond to your concerns and they have provided the responses set out below:-.

- Staff within mental health settings should have the necessary core competencies and skillset to recognise physical ill health, risk of or deterioration of physical health, perform a methodical initial assessment and initiate appropriate management. Care Quality Commission (CQC) inspections in mental health settings particularly look for evidence of employment of (or suitable arrangements to provide) medical, nursing and pharmacy staff and other healthcare professionals with the necessary skills and knowledge to oversee and deliver aspects of physical healthcare.
- Whilst NHS England does not mandate which specific job roles should deliver which elements of the physical health care agenda in mental health settings, staff should be competent with the appropriate training and ongoing CPD to meet the full needs of patients. Health Education England (HEE) encourages that all members of the mental health team are appropriately skilled and competent to perform their roles and responsibilities in addressing the physical health needs of their service users.
- Access to relevant physical health training should be provided and ongoing development should be supported through strong leadership. This could be leadership from a nurse consultant, it could also be from a GP, a physician associate or a clinical resuscitation officer. An example of a multi-disciplinary course which is freely available online and commissioned by HEE is, Recognising and Assessing Medical Problems in Psychiatric Settings (RAMMPS). This course is explicitly focusing on medical, nursing and support staff as well as other professional groups in recognising the deteriorating patient, providing good care and managing safe patient outcomes. <https://hee.nhs.uk/hee-your-area/yorkshire-humber/education-training/multi-professional-workforce/clinical-skills-simulation/recognising-assessing-medical-problems>
- The national Physical Health SMI CQUIN supports the improvement of physical healthcare to reduce premature mortality in people with serious mental illness (SMI). The CQUIN although concerned with altering cardio vascular risk for this population also mandates high quality programmes for all clinical staff caring for people with SMI. The scope of the CQUIN includes inpatient wards, early intervention in psychosis services and community mental health teams.
- In parallel, NHS England continues to support the ongoing inspection and regulation of mental health inpatient wards by the CQC. CQC require that all providers implement safe and effective systems for identifying and responding to the deteriorating patient including application and audit of compliance with the National Early Warning Score- NEWS.
- NHS England encourages researchers and clinical teams to optimise and investigate opportunities that new technologies may present to improve the physical health care of those with mental health needs. At this time the evidence base is not sufficient to specifically recommend remote vitals monitoring but we continue to encourage innovation in this area.

High quality care for all, now and for future generations

I hope this response containing details of the areas that are being focused on gives you the relevant assurances you require. If you have any further queries or concerns please do not hesitate to be in touch.

Yours sincerely,

A handwritten signature in black ink that reads "Bruce Keogh". The signature is written in a cursive style with a long horizontal stroke extending to the right.

Professor Sir Bruce Keogh KBE, MD, DSc, FRCS, FRCP
National Medical Director
NHS England

