

Executive Office Tel: 020 3214 5760

28 August 2020

Mr Chinyere Inyama Senior Coroner Fulham Coroner's Court 25 Bagleys Lane London SW6 2QA

Dear Mr Inyama,

Re: Regulation 28: Report to prevent future deaths in relation to Prince Kwabena Fosu.

I write to respond to the Regulation 28 report issued on 6th July 2020 following the inquest into the death of Mr Fosu in 2012.

Whilst Central and North West London NHS Foundation Trust (CNWL) were not the provider of healthcare at the time of Mr Fosu's death, we would very much like to extend our condolences to Mr Fosu's family and friends.

The specific concern that you have asked CNWL to address in its role as current provider of healthcare at the IRC regarded improving the recognition of when to make a referral as opposed to knowing the mechanics of making a referral once a decision has been made to refer. In your Regulation 28 report you stated: "All staff who would be expected to refer cases to healthcare need as much assistance as possible in order to discharge that responsibility effectively. It is recognised CNWL is the new healthcare provider and did not provide healthcare in 2012. It is also recognised that CNWL have improved the training on how to make a referral. However, there was knowledge on how to make a referral in 2012 and the jury have highlighted the failures that still occurred, leading to the death of Mr Fosu. My concern centres on improving the recognition of when to make a referral as opposed to knowing the mechanics of making a referral once a decision has been made to refer. By way of respectful analogy, medical practitioners referring cases to a coroner know how to make a referral but now have guidance in legislation as to when to refer. The Trust should give serious consideration to developing a guide to all staff on when to refer cases to healthcare. This should be achievable without being either over-prescriptive or over-restrictive."

Trust Headquarters, 350 Euston Road, London NW1 3AX Telephone: 020 3214 5700











The Trust has addressed these concerns in three ways:

Firstly, mental health awareness training already taking place in the Immigration Removal Centre (IRC) and already available to Care and Custody staff as well as healthcare has been adapted to include specific information detailing when a referral should be made to the Mental Health Team. Included within the training package is an overview of what mental health is, the main groups of mental disorders and slides covering depression, bipolar, anxiety, panic attacks, Post-Traumatic Stress Disorder, Personality disorders, schizophrenia, treatment and referrals. For each of these conditions, there is a summary of how the conditions present, what staff should look out for and the action that they should take. The training recommends that if staff recognise any of these conditions they should refer the patient to the mental health team. In the previous 12 months, the Mental Health Team received in excess of 2000 referrals to their services. It is anticipated that the addition of specific slides, relating to the circumstances of each condition, will increase the confidence of those in the Care and Custody and Primary Care teams in making appropriate referrals to the Mental Health Team.

Secondly, the Offender Care directorate have reviewed the role of the deputy lead nurse for Offender Care as part of a wider piece of work improving mental health awareness in our Offender Care services. A new deputy lead nurse for Offender Care has been recruited to start in August 2020 and a significant part of their portfolio is to provide mental health education across services. They will be responsible for providing robust educational pathways within Offender Care and will develop a "train the trainer" programme to enable local sites to provide mental health awareness training routinely. Whilst this will primarily be focussed on supporting the Primary Care teams, these sessions will be open to custodial and detention centre staff.

Thirdly the Offender Care directorate is drafting guidance on when a patient should be referred to the mental health team, including conditions and symptoms. This guidance will be added to the Offender Care Mental Health and Learning Disability Operating Policy. The Offender Care Mental Health and Learning Disability Operating Policy is applicable to all CNWL staff and sub-contractors in offender care settings and provides an overview of services and expectations of how these services will be delivered. The policy is also shared with commissioners, partner agencies, prisons and Immigration Removal Centre staff. Including the guidance on when to refer to the mental health team within this document ensures it is available to all relevant parties.

In addition to embedding this guidance into the Offender Care Mental Health and Learning Disability Operating Policy, we will also be circulating it as a standalone document to all CNWL staff and to all partner agencies in the IRC and across the prisons in which we provide healthcare by the end of November 2020.

I hope that this provides you with sufficient assurance that the Trust has taken action in relation to the concern that you have raised. The Trust continues to work to improve the service we provide both in the IRC Heathrow and in our wider Offender

Care Services. If you have any questions or comments on the above please do not hesitate to contact me directly.

Yours sincerely,

Chully.

Claire Murdoch

Chief Executive