

Mr. Paul Smith
HM Senior Coroner
4 Lindum Road
Lincoln
Lincolnshire
LN2 1 NN

LincsCoroner@lincolnshire.gcsx.gov.uk

14th October 2020

Dear Mr Smith

REF: Mr Toby Peter Edward Nieland, Regulation 28 Report

I am writing in response to the Regulation 28 report which Mr. Brennand sent to the South Lincolnshire Clinical Commissioning Group, Public Health Lincolnshire, Lincolnshire Partnership NHS Foundation Trust (LPFT) and to [REDACTED], Deputy Chief Executive at We Are With You (formally Addaction).

In Mr. Brennand's letter to Mr [REDACTED] (Ref 01388-2018 dated 24th August - which has been shared with us as the commissioned treatment service of substance misuse in Lincolnshire) he said that the report was designed to emphasise the need for collaborative services to meet the health and social care needs of those suffering from Dual Diagnosis. He indicated that he was anticipating a response that addressed the integrated approaches being considered involving statutory, community and voluntary sector mental health and substance misuse services, with agreed local pathways to meet wider social care needs. He said that he anticipated a response that confirmed the expectations that mental health services would be leading on, and helping with, access to other health and social care services (including primary healthcare, housing and employment as well as substance misuse services).

I can confirm that we have participated in 'Planned Dual Diagnosis Work' meetings with LPFT and our respective commissioners. And we have jointly agreed to review Dual Diagnosis pathways across the treatment system.

The report outlines a number of concerns identified through the inquest and following further submissions from LPFT and the Lincolnshire Clinical Commissioning Group. I would like to provide you with a summary of actions undertaken to improve our overall effectiveness of joint working, engagement, and care of our service users:-

- We understand that a balance regarding questioning people whilst encouraging them to continue to engage in NSP services is required. The potential risk of 'over questioning' is that service users may decide to attend alternative NSP provision where such questions will not be asked, or even stop using services. In this case specialist service providers may lose the opportunity to monitor and assertively attempt to engage those individuals into structured treatment.
- Our staff now use a 'prompt system' at each visit. These include discussions around the persons initial presentation, mental and physical health, housing needs, harm reduction, more in depth substance use and clarifying and discussing referrals into structured treatment should it be required and consented to.
- We have introduced better identification of those with complex health issues. We have implemented an enhanced standard questionnaire for our NSP service users. It incorporates questions to ascertain concerns individuals may have on their own mental health and current engagement with mental health (or any other relevant) services. The aim is to enable the key-worker to make better informed decisions of any immediate concerns / risks surrounding an individual's mental health, based on presentation and information disclosed.
- We have reviewed our staff structures and introduced specialist Dual Diagnosis roles. We have taken steps to employ staff who can lead on complex cases, including a dedicated Mental Health Nurse and a Recovery Worker who is allocated Dual Diagnosis cases. Our Clinical Lead is a registered (NMC) Mental Health Nurse and Independent Prescriber with MSc level qualifications in substance misuse, neuropsychiatry and trauma. These roles work in partnership with mental health providers to enhance the care provided service users. They also train and support the wider substance misuse team at LFPT in early identification of those individuals with complex health issues.
- We have enhanced our reciprocal training to LPFT and regularly attend interface meetings for Dual diagnosis patients and ensure we have input into community release plans. Additionally, we provide opportunities for staff from LPFT, the Police, Probation and Children's Services as well as housing providers. to spend time within our teams to further their experience of substance misuse interventions. We have commenced delivery of group work interventions within the Mental Health units in Lincoln (Discovery House and PHC) for those with a dual diagnosis.

We recognise that there is further work to do between ourselves, LPFT and the wider partnership to enhance pathways and joint care for those with complex health issues. We are committed to achieving this through working collaboratively with our relevant partners and respective commissioners for Mental Health and Substance Misuse. Should you require any further information or clarification on any of the points included in this summary please do not hesitate to contact me.

Yours Faithfully

██████████

Director of Operations

██████████

[@wearewithyou.org.uk](mailto:██████████@wearewithyou.org.uk)