



Statement from South London and Maudsley NHS Foundation Trust:

We would like to offer our deepest condolences and to the family and friends of Mr G.

The Trust has learned from the findings made in investigation and has accepted all the recommendations. We have put in place robust processes to improve the quality of our services and to improve risk management to support vulnerable people who use our services.

The steps we have taken to strengthen our services have been reviewed independently by NHS England and Improvement and monitored by our Quality Committee.

The death of Mr G is a tragic case and once again we would like to share our heartfelt sympathies to his friends and family.

Statement from South East London Clinical Commissioning Group:

South East London Clinical Commissioning Group (CCG) offer sincerest condolences to family members and friends of Mr G. We accept the recommendations made by the authors of the independent report and will monitor the associated action plan at the CCG's Serious Incident Review Panel. The CCG remains committed to working with our colleagues across South East London to address the issues that have been raised and improve the quality of mental health services.





Rec No.	Organisation	Recommendation	Actions to achieve recommendation	Implementation Lead	Implementation by when	Evidence of Completion	Monitoring & evaluation arrangements
1	SLaM	Our team recommends that a Non-Executive Director be nominated to carry specific responsibility at Trust Board level to support dissemination of learning from incidents.	A Non-Executive Director will be nominated to carry specific responsibility at Trust Board Level to support the dissemination of learning from incidents.	Director of Nursing	Completed Dec. 2020	A Non-Executive Director has been identified to carry specific responsibility for supporting the dissemination and learning from incidents.	Endorsed by the Board.
2	SLaM	A care pathway be developed by the Trust for submission to the CCG to elaborate treatment and onward referral for patients with complex mental ill health and comorbid substance misuse. The purpose would be to ensure that it is clear to all Trust staff how and to whom to refer people who fail to reach the threshold for access to CGL (or `Change, Grow, Live'), the	a) The SLaM dual diagnosis policy contains clear pathways for supporting people with substance misuse issues. These will be disseminated to all complex care services in Southwark, including updated contact details of dual diagnosis specialists. b) All teams in the complex care pathway to have at least one dual diagnosis lead (champion) who	General Manager for Complex Care and Nurse Consultant (dual diagnosis)	Completed Nov. 2020 Completed Dec 2020 Completed in January 2021	a) The Trust promotes an approach that encourages staff to ask people about their drugs and alcohol use, no matter what part of the organisation is contacted. Drug and alcohol care pathways have been circulated to complex care services, including contact details of dual diagnosis specialists. b) All teams have at least one dual	Monitoring and reviewing will occur in Complex Care Governance meeting, Directorate Serious Incident action tracking forum and the Addictions Directorate Steering Group





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		independent drugs and alcohol service for adults over 18 who live in the Borough	has/will complete the level two training and be supported to attend bimonthly leads' development forum. c) Monthly dual diagnosis clinical support sessions to be established for the complex care pathway, to be facilitated by dual diagnosis specialists and Senior Clinical Psychologist			diagnosis lead that has completed the level 2 training and attends leads' development forum. c) Monthly clinical sessions commenced in January 2021, led by dual diagnosis specialists and Senior Clinical Psychologist Additional Information: 1) In order to increase the rates of drug and alcohol assessment and intervention: i- Drugs and alcohol assessment tools are easily accessible in	arrangements
						the electronic patients' journey system ii- Admission checklists include time frames for assessing drug and alcohol use	





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						iii- Pathways for the management of drug and alcohol use are easily accessible via the Trust intranet iv- A centralised data monitoring system provides real-time feedback to teams about rates of drug and alcohol assessment & intervention	
						2) The Trust promotes an integrated treatment model whereby most service users will have both their mental health and substance misuse needs addressed at the same time, by one worker or team. In some cases however, MH and substance misuse services work collaboratively to meet service users' needs. The Trust has joint	





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						working agreements with CGL, the local addictions service.	
						3) Local mental health and addictions interface meetings have been established and take place monthly. These provide a space for workers from both services to discuss better ways of working with dual diagnosis issues.	
						4) The trust has several dedicated dual diagnosis specialist roles that work alongside staff teams and support service users to access better dual diagnosis care.	
						5) The Quality Centre in SLAM now has a programme of work aimed at improving	





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						dual diagnosis care standards in the trust. This includes improving the quality and consistency of simple psychological interventions that can be delivered by all staff and increasing prescribing of relapse prevention and harm reduction medication.	
3	SLaM	Trust to provide training for staff working with patients with complex needs and co-morbid substance misuse problems. This should be designed to ensure that those staff can themselves provide support to such patients, and/or to ensure that they know how, and to whom, to refer	a) At least 60% of staff in the complex care pathway to complete the level one dual diagnosis course b) At least two staff in each team in the complex care pathway to complete the level two training	Manager for Complex Care and Nurse Consultant (dual diagnosis)	Completed Feb 2021 Completed March 2021	a) Leaders have assessed the level of completion of the level one training within their teams and the baseline data is informing training targets. b) All teams have at least two staff that have completed the level two training.	Monitoring and reviewing will take place in the Complex Care Governance meeting, the Directorate Serious Incident action tracking forum, and the Addictions Directorate Steering Group





The Trust has a range of training and	Organisation	Rec (Recommendation	nmendation Actions to achieve recommendation	Implementation Lead	Implementation by when	Evidence of Completion	Monitoring & evaluation arrangements
development opportunities for dual diagnosis: • A level 1 e-learning course teaches basic drugs and alcohol knowledge which provides an introduction to the nature of the relationship mental health and substance use. All registered, non-medical clinical staff are required to complete this course within 6 months of joining the Trust. • A level 2 course which provides the foundations for working with people with more							of training and development opportunities for dual diagnosis: • A level 1 e-learning course teaches basic drugs and alcohol knowledge which provides an introduction to the nature of the relationship mental health and substance use. All registered, non-medical clinical staff are required to complete this course within 6 months of joining the Trust. • A level 2 course which provides the foundations for working with	





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						complex needs. For example, it teaches staff how to support people build motivation for change, how to support people to reduce the negative impacts of use if they aren't ready to stop. People with lived experienced are involved in the design and delivery of this course. • During the pandemic, several bite-size courses have been designed and are being delivered flexibly online to teams.	