

South West London and St George's Mental Health NHS Trust Statement

A spokesperson for South West London and St George's Mental Health NHS Trust said:

Our thoughts are with the family and friends of those affected by these very sad events in 2016 and our deepest condolences are with the family of Mr B.

The independent review panel made two recommendations which the Trust has already taken a number of actions to address, and monitoring is in place to ensure the learning has been embedded across the Trust. The panel concluded it was very clear that the Trust has taken practical, actionable steps to minimise the likelihood of a similar incident occurring in the future.

South West London Clinical Commissioning Group (CCG) Statement

Merton CCG now part of South West London Clinical Commissioning Group

South West London CCG was formed on 1 April 2020 through the merger of the six borough CCGs covering Croydon, Kingston, Merton, Richmond, Sutton, and Wandsworth. The CCG manages local healthcare budgets and commission a range of health services on behalf of our residents including mental health and learning disability services.

The CCG would like to offer our deepest condolences to all those who were affected by this tragedy.

As the CCG, we meet with the Trust on a regular basis, where review of progress against actions related to Homicides with or without independent investigations are discussed. The CCG gains assurance that progress is being made against the action plans and endeavours to build improvements into the system that will support our providers to deliver a good quality service to our patients. The shared risk management and re-referral system was set up launched in 2017, with any client who has been discharged can re-engage with the mental health community team with out the need for assessment by the single point of access team.

Report published: 4 April 2022

Rec No.	Organisation	Recommendation	Actions to achieve recommendation	Implementation Lead	Implementation by when	Evidence of Completion	Monitoring & evaluation arrangements
1	SWLStG	The Trust should continue with their regular monthly audits to measure whether care plans are tailored to the patient's individual risk profile.	<ol style="list-style-type: none"> Every team in the Community Service Line are required to complete 3 case notes audits per month which includes an audit of the quality of care plans and the link to a patients risk assessment and formulation. A quarterly care plan audit report with actions to address quality issues, will be sent to the service line Quality Governance Group. These reports will be cascaded into the Trustwide QGG on a monthly basis 	Head of Nursing and Quality Community Service Line.	Completed - Ongoing Business	The Trust has initiated a monthly audit of care plans which includes an assurance that any change in patient circumstances is reflected in their plan and patients care plans being holistic. During the audits physical health had been highlighted as a gap and not being recorded within care plans. This has resulted in the implementation of Physical Health Clinics, Physical Health Nurses and outreach services being introduced in the community with a requirement that all care plans having a person's physical health needs included within their care plan. The Trust has also reset the Fundamental Standards of Care (FSOC) to ensure all patients get the same consistent care and trained to high level, through awareness sessions, training and development, allocated FSOC leads and at hand information.	Quality Governance Group (meets Monthly)
2	SWLStG	The Trust should make every effort to roll out Primary Care Liaison Teams in collaboration with all of their five CCG's. If possible, the system of 'Reverse Quality Elapse' should be formally adopted in order to provide 360-degree communication and accountability for quality monitoring and improvement. <i>Note – since the drafting of this report, we are told that the Reverse Quality Elapse' has now been renamed as the "Make a Difference Alert" (MKAD) and is now a reciprocal process. This is to be commended.</i>	<ol style="list-style-type: none"> Appoint a Primary Care Liaison Manager, whose key responsibility is to improve communication between Primary care and secondary care. Quarterly Reports are to be sent to Quality Governance Group to provide assurance of actions being taken to improve primary care Liaison. 	Deputy Medical Director	<ol style="list-style-type: none"> 20/04/2020 Completed Completed - Ongoing Business 	<ol style="list-style-type: none"> Primary Care Liaison Manager in post 1.0wte starting in April 2020. Key aspects of this role is to improve communication with GP services. This covers the 5 boroughs as standard. The transformation work has commenced and will go across all boroughs with the plan of having specialist mental health professionals in GP surgeries. Evidence of Quarterly reports and details of MKAD alerts within this report and key themes and how they are addressed. Quarterly reports highlight key themes, such as Communications with practices and Referral processes. Key actions have included meetings with Clinical Directors and GP's to clarify and confirm responsibilities between primary care and the Trust and a commitment to learning a development and contributing to teaching sessions. 	Quality Governance Group (meets Monthly)