

Freedom of Information Request

Reference Number: EPUT.FOI.23.3160
Date Received: 28th of September 2023

Information Requested:

1. Please provide data on the number of unexpected deaths of your mental health service users broken down by year from 2005 until the present day.
For the period 2005 – 2017 North Essex Partnership Trust and South Essex Partnership Trust did not capture this information in an easily retrievable format. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: cost of compliance is excessive. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all health records and then extracting relevant information would take longer than the 18 hours allowed for.

For the year of 2017 – 01/06/2022 the Trust believes this information is publicly available on the <https://eput.nhs.uk/media/0wpoxb3z/eput-foi-22-2510.pdf> website and therefore is applying a Section 21 exemption of the Act (Information accessible to applicant by other means).

488 deaths, have been reported onto Datix (the Trust's Incident Management System) as occurring in the period 01/06/22 – 30/09/23 and categorised in one of the Trust's reporting categories appertaining to "unexpected deaths".

The Trust has a Learning from Deaths Policy and Procedural Guideline to meet the requirements of the *National Guidance on Learning from Deaths March 2017* that sets out the requirements relating to reporting deaths onto the Trust's Datix system.

The scope of deaths during the above period which were **mandated** for report onto Datix were as follows:

- All deaths that have occurred within Trust inpatient services (this includes mental health, community health and learning disability inpatient facilities).
- All deaths in a community setting of patients with recorded learning disabilities or autism.
- All deaths meeting the criteria for mandatory review under the Trust's Patient Safety Incident Response Framework (PSIRF) – both the nationally and locally determined categories.
- Any other deaths of patients in receipt of EPUT services not covered by the above that meet the national guidance criteria for a Stage 2 Clinical Case Note Review. These deaths will be any deaths where:
 - Family, carers or staff have raised concern about the care provided; or
 - The death was unexpected and the individual:
 - had a diagnosis of psychosis (including schizophrenia, bi-polar, episode of non-organic psychosis, personality disorder, complex and severe depression) or eating disorder during the last episode of care;
 - was an inpatient at the time of death or had been discharged from EPUT inpatient care within the last 30 days;

- was under the care of a Crisis Resolution Home Treatment Team at the time of death.
- Deaths of clients under the care of services provided by EPUT as part of the drug and alcohol services care pathway (EDAP).

Regardless of the above mandatory requirements for report onto Datix, services are also encouraged to report on Datix any other deaths that are brought to their attention as this increases the Trust's ability to review deaths and identify potential learning opportunities. These additional reported deaths are therefore also included within the above total.

The Trust publishes mortality data, to comply with the National Guidance on Learning from Deaths, on a quarterly basis as part of a dedicated mortality / learning from deaths report to the Trust Board of Directors. These reports set out the number of deaths reported on Datix and the number of deaths within the above scope of the Learning from Deaths Policy. These reports are available on the Trust's website at <https://eput.nhs.uk/about-us/board-of-directors/board-meetings/board-papers/>. The report for Q1 2023/24 is to be presented to the Board of Directors in November 2023 and for Q2 2023/24 in January 2024.

2. Please also include all deaths on record which occurred within 6 months of discharge from your services, indicating these as a separate category.
During the period 2005 to date, to establish if each patient died within six months of discharge from a mental health or learning disability service would involve a manual trawl. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: cost of compliance is excessive. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all health records and then extracting relevant information would take longer than the 18 hours allowed for.

Section 12 (Exemption where cost of compliance exceeds appropriate limit):

- (1) Section 1(1) does not oblige a public authority to comply with a request for information if the authority estimates that the cost of complying with the request would exceed the appropriate limit.
- (2) Subsection (1) does not exempt the public authority from its obligation to comply with paragraph (a) of section 1(1) unless the estimated cost of complying with that paragraph alone would exceed the appropriate limit.
- (3) In subsections (1) and (2) "the appropriate limit" means such amount as may be prescribed, and different amounts may be prescribed in relation to different cases.
- (4) The Secretary of State may by regulations provide that, in such circumstances as may be prescribed, where two or more requests for information are made to a public authority—

- (a) by one person, or
 - (b) by different persons who appear to the public authority to be acting in concert or in pursuance of a campaign, the estimated cost of complying with any of the requests is to be taken to be the estimated total cost of complying with all of them.
- (5) The Secretary of State may by regulations make provision for the purposes of this section as to the costs to be estimated and as to the manner in which they are to be estimated

Applied exemptions:

Section 21: Information accessible to applicant by other means.

(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information.

(2) For the purposes of subsection (1)—

(a) Information may be reasonably accessible to the applicant even though it is accessible only on payment, and

(b) Information is to be taken to be reasonably accessible to the applicant if it is information which the public authority or any other person is obliged by or under any enactment to communicate (otherwise than by making the information available for inspection) to members of the public on request, whether free of charge or on payment.

(3) For the purposes of subsection (1), information which is held by a public authority and does not fall within subsection (2) (b) is not to be regarded as reasonably accessible to the applicant merely because the information is available from the public authority itself on request, unless the information is made available in accordance with the authority's publication scheme and any payment required is specified in, or determined in accordance with, the scheme.

Publication Scheme:

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT's Publication Scheme is located on its Website at the following link <https://eput.nhs.uk>