Learning from a Patient Journey

NHS Somerset

Event summary

An **inquest** concluded on 9 April 2025 into the tragic death of a **24-year-old woman who sadly took her own life** following a period of **acute mental health deterioration**.

She had a complex medical history, including **spina bifida, fibromyalgia**, and **chronic pain**, alongside longstanding mental health challenges such as **anxiety, depression**, and **emotionally unstable personality disorder** (EUPD). Her care needs were significant and lifelong.

During the inquest, it was acknowledged that the patient was under the care of a **multidisciplinary team** (MDT) at her GP surgery, involving **doctors, pharmacists, nurses, and other professionals**. This **collaborative approach** reflects the **evolving nature of general practice**, where increasing demand and workforce pressures have led to more shared models of care.

However, the coroner noted that in this particular case, the **absence of a single clinician with overarching responsibility** may have contributed to missed opportunities for more coordinated support.

Key learning & improvements

The inquest highlighted the **importance of continuity of care**, especially for patients with complex physical and mental health needs.

While MDT working is essential and often beneficial, it can sometimes lead to **gaps in oversight** if no one individual is clearly accountable for the overall care plan.

In this case, the patient had **not been seen face-to-face** in the final months of her life, which may have limited the ability to assess her **wellbeing holistically**.

The coroner emphasised the need for thoughtful consideration of **how care is delivered to high-risk patients**, particularly in relation to **in-person reviews** and the monitoring of **medication** such as opioids.

The case also underscored the potential **impact of substance use** on mental health, as the patient experienced an acute psychotic episode linked to cannabis use.

Continuity of care for patients at higher risk or with complex needs was highlighted throughout the **stocktake report by Dr Fuller** (*Next steps for integrating primary care: Fuller stocktake report May 2022*) as important and in want of **increasing emphasis nationally**.

In Somerset, two Primary Care Networks are taking part in a **national NHS England pilot** designed to test **new ways of working in general practice**, based on the recommendations of the Fuller stocktake.

Coordinated by Somerset ICB, the pilot is specifically looking at **continuity and how this can be improved**, in addition to exploring more **flexible staffing models**, **process automation**, and improved **use of data** to help address the gap between **demand and capacity**.

As general practice continues to evolve, this case reminds us of the importance of **balancing team-based care with clear lines of responsibility**, especially for those patients who are most vulnerable.

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