

THE POLICE & CRIME COMMISSIONER FOR LEICESTERSHIRE

POLICE AND CRIME PANEL

Report of	POLICE AND CRIME COMMISSIONER
Date	WEDNESDAY 28 MARCH 2018 – 1:00 p.m.
Subject	MENTAL HEALTH
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Purpose of Report

1. To update the Police and Crime Panel on progress in relation to Mental Health by both the Force and the PCC.

Recommendation

2. That members note the contents of the report and make comment as appropriate.

Background and Detail

3. The Police and Crime Plan 2017-2021 sets out the PCC's commitment to working in partnership with the Force and other agencies to better support those in crisis and whose lives are impacted by mental ill health.
4. This paper sets out the broad picture around mental health (from a Leicestershire Police perspective) and then details the various initiatives and ways of working that are having a significant impact in Leicester, Leicestershire and Rutland.

Broad mental health picture

5. The total number of Mental Health (MH) incidents for 2017 is 6,404 (Source – tagged incidents on Storm, our Command and Control System within Contact Management). These were broken down as:
 - 1,520 tagged as mental health and a crime
 - 4,883 mental health tags but no crime linked on Storm – some of these are concern for safety. One hundred of these were randomly dip sampled (auto-generated sample) to try and understand their nature and appendix 1 details this deeper analysis.
6. Between April and September 2017, Leicestershire Police had 14,285 'concern for welfare' jobs reported to them. Therefore it is estimated 28,570 'concern for welfare'

jobs are created every year. From this 6 month period, we attended 67% of incidents and spent 71,782 hours on this area of business.

7. There has been an increase of 10% in 'concern for welfare' jobs comparatively against the same period last year with an average time of 1.5 hours spent at each incident. This equates to employing 46 FTE officers purely to deal with 'concern for safety' jobs.
8. Section 136 is an emergency power of the police which allows a person to be taken to a place of safety from a public place, if a police officer considers that they are suffering from mental illness and are in need of immediate care. April 2017 to December 2017 the Force issued 103 Section 136 notices. This is a major reduction from 2012 (before the introduction of the mental health triage car) where 458 notices were issued. Appendix 2 provides the panel with a case study showing how judicious use of section 136 notices can have a positive impact on vulnerable individuals.

LEICESTERSHIRE POLICE SCHEMES WHICH ARE DELIVERING AGAINST THE POLICE AND CRIME PLAN

Liaison and Diversion

9. Liaison and Diversion is an initiative from NHS England. It is now being rolled out nationally across the country. In Leicester, Leicestershire and Rutland the team provides a 7 day a week service covering all 3 custody suites from 8am till 10pm.
10. The team also covers the Magistrate's Court and Crown Court, Monday to Friday from 9am till 5pm. The aim is to provide assessments for anyone coming through the criminal justice system and to identify any mental health needs, learning disabilities or other vulnerabilities that require support from another agency, and then refer them on to that service with the aim of reducing that persons offending behaviour.
11. Within the team there are practitioners who specialise in dementia, young people, street workers and veterans. The team has the facility to take referrals directly from crisis home treatment and to admit informally to the mental health unit. The team will also provide advice and support to officers in the triage car's absence.

Triage Car

12. Leicestershire Mental Health Triage Car was established in January 2013 and is the first co-response model. Many other forces have followed suit and have come to Leicester for advice on how the service works and how they can set up their own Triage Car.
13. The car is crewed by 4 x full time officers trained in Advanced Mental Health Law, Suicide Awareness, Personality Disorders, Learning Disabilities and Hostage Negotiation, along with Band 6 Mental Health Practitioners from Leicestershire Partnership NHS Trust.
14. The triage car is able to see the bigger picture from the expertise of both professions with the background information of both organisations. They are available for professional advice and support to all Leicestershire police officers / staff between 10am and 2am, 7 days a week, for any incident involving suspected Mental Health or Learning Disabilities within LLR, which includes the option of live street triage Mental Health Assessments. These incidents may include suicidal persons, acutely mentally unwell people, those in crisis and missing persons.

15. The team of officers / practitioners regularly attend shift briefings to both promote the car and it's availability but also to give officers an opportunity to ask questions and improve their knowledge on Mental Health Law and best practice. Leicestershire officers are not expected to know everything about Mental Health and its very complicated law and procedures, but they know they can contact the triage car for advice and guidance at any time.

PAVE- Pro-Active Vulnerability Engagement Team

16. The PAVE team provides valuable case management for individuals who place a high demand on Leicestershire police and who have complex needs or present as a high risk. The two year initiative has been formed through collaboration between Leicestershire Police, Leicestershire Partnership NHS Trust and Turning Point (substance misuse service).
17. Staffed by two warranted police officers, two mental health practitioners, and part-time drug and alcohol recovery practitioners, the team works intensively with those users to ensure that the correct criminal justice, health and social care pathways are used appropriately.
18. The referrals that the team receive are from Leicestershire Police only. There are no referral criteria as such; however, there must be a demand on the police service in some way. When a referral is received this goes through a 'triage' process, where the relevant information is obtained from Leicestershire Police, Leicestershire Partnership Trust and Turning Point systems.
19. Each referral is taken to the Multi-Disciplinary Team meeting (MDT) every 2 weeks, where it is further discussed with managers including a consultant psychiatrist. The team then make a decision on whether to accept or decline a referral. Where a referral is declined, further advice is given.
20. The team aims to work with a client for between 6-8 weeks. During this time the focus is to reduce police demand and ensure appropriate pathways are in place to divert inappropriate police contact. The team seeks to promote joint working with other agencies, and where possible to work with the individual and get the most effective and appropriate outcome to reduce demand and also improve the circumstances for the client.

Operation Breakthrough

21. The Triage Car team runs a 5 day bespoke training course aimed at operational police staff. This course covers decision making, risk assessments, mental health and mental health legislation including the Capacity Act. It covers the objectives set out in the APP by the college of policing. It is delivered by a mixture of operational triage car officers, mental health practitioners who work in the team and a consultant psychiatrist. This has now been running for 2 years and has trained over 60 officers locally and regionally.

Mental health nurses within Victim First

22. The mental health nurses within Victim First provide brief support, triage and onward referral to wider mental health pathways which can otherwise be difficult to make referrals to. The nurses also provide support to Victim First Caseworkers in supporting those with lower level mental health needs.

Implications

Financial:	None
Legal:	None
Equality Impact Assessment:	None
Risks and Impact:	None
Link to Police and Crime Plan:	None

Persons to Contact

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Appendices

Appendix 1 - Dip sampling of Mental Health Tags
Appendix 2 - Case study regarding Section 136 Notices

[Appendix 1](#)**Dip sample of 100 cases that were tagged as mental health but were not tagged as a crime**

Closed as Crime	14
No criminality	68
Concerns for Safety	18
Total Sampled	100

Further break down of the dip sample:-

Closed as Crime	Appropriate for police to attend		Police acting on behalf of other services		Other agencies called to attend but did NOT to attend?	
	Yes	No	Yes	No	Yes	No
Total						
14	13	1	2	12	1	13
No criminality	Appropriate for police to attend		Police acting on behalf of other services		Other agencies called to attend but did NOT to attend?	
	Yes	No	Yes	No	Yes	No
Total						
68	47	21	12	56	8	60

Concern for safety

Police acting on behalf of other agencies: 14 no 4 yes

Other agencies called to attend but did NOT to attend? 14 no 4 yes

Some examples of the above:-

- Example – EMAS asked to attend but could not so police did
- Example – Police having to intervene due to delays in provision of mental health support
- Example – MH patient locked themselves in attic at home – police called but in fact a job for MH crisis team

Appendix 2

Use of Section 136 (Mental Health Act) in a police cell – protecting a vulnerable detainee and getting them the right help

Yesterday evening, a young man was being held in the cells at Euston Street. He'd been arrested earlier for a crime but his behaviour caused grave concerns to custody staff. Two doctors and a specialist social worker attended to conduct a mental health assessment. They determined that he needed to be sectioned, but there were no mental health beds available. The PACE clock was about to expire and in any case, PACE detention was no longer necessary under the circumstances.

On previous occasions, we would have found ourselves either tolerating unlawful detention, or releasing the subject and risking some very serious harm being caused.

However, since December 2017, powers under section 136 of the Mental Health Act have been amended. S.136 can now be used in a cell and yesterday evening that power was used to great effect. The subject was released from PACE custody and detained under s.136 in the custody suite. EMAS were called and attended promptly, and the subject was transferred to the Bradgate Unit.

He was at the Bradgate Unit until 7.30 this morning, when a bed was found and he was transferred to a mental health facility in the North of England. So had it not been for s.136 being used in the cell, a vulnerable and seriously ill man would have endured many hours of unlawful detention. Instead, he spent the night in a safe environment at the Bradgate Unit, with the appropriate care.

This use of the new mental health legislation represents a real step forward in protecting vulnerable people and I would encourage all staff to consider this option if faced with similar circumstances.