

MET OPERATIONS

Steve O'Connell AM
City Hall
The Queens Walk
London SE1 2AA

Sir Stephen House QPM Assistant Commissioner Met Operations

New Scotland Yard Victoria Embankment London SW1A 2JL Telephone: 020 7230 0341

Stephen. House@met.pnn.police .uk

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Dear Mr O'Connell,

Healthcare In Police Custody

Thank you for your letter dated 10th September 2018. The Commissioner has asked me to respond on her behalf. I am pleased to note the positive comments relating to improvement in the number of healthcare staff and improved morale. However, I appreciate concerns with regards to the rising demand for healthcare in the custody environment. I have detailed our response to the MPS recommendations below and provided supporting information to inform the recommendations that were allocated to MOPAC.

Recommendations 1 & 2

I am pleased to inform you that since the last review in 2014 we have worked hard to recruit and deploy more nurses across London custody suites. We now have almost 70 nurses and 75 FMEs working across our custody suites. As correctly identified in your letter, we do face challenges in the rising demand for healthcare across London. Between January and July 2018 we had 83,944 detainees, and analysis shows that 48% of our detainees are now examined for a number of medical reasons.

Between January and July 2018, the MPS called 3,122 Ambulances to custody, indicating that 3.4% of detainees required LAS assistance. Whilst there is clearly an impact on LAS resources from calls to police stations, we consider that the continued roll out of 24/7 nurse provision in police custody, and improved numbers of healthcare professionals has enabled the MPS to identify more serious conditions which may previously have been missed. The health and safety of our detainees is our highest priority.

In order to enhance detainee safety further, meet modern health regulatory requirements and improve clinical governance, the MPS has recently piloted a new electronic medical records

system bespoke for police custody. This will give our healthcare professionals access to detainees' GP summary care records, and will also allow us to support detainees to register with a GP.

With the imminent roll out of the electronic system across all custody suites, we will meet modern information governance regulatory standards, improve safety in custody and provide automated management and performance information for the first time. The new system (Excelicare) will meet all our healthcare IT objectives. Performance management data can be extracted routinely allowing a proactive audit of medical practice. Healthcare data on repeat detainees can be shared across custody suites and other Police Forces, through criminal justice pathways, into courts resulting in safer detention and reduced risk for detainees.

The system will provide healthcare professionals with an assessment template specific to the police custody environment linking in with Liaison and Diversion assessment and referral tools. The MPS would be very happy to facilitate a visit by any interested PCC members to one of our custody suites to show this new system in operation and the healthcare provision in custody suites.

The MPS has made improvements in dealing with vulnerable adults and children in custody. We currently work closely with NHS England in deploying Liaison & Diversion (L&D) practitioners across all our custody suites bringing specialist independent professional advice. The model is focused on custody vulnerability and identifying mental health in custody. The main purpose is to screen adults and young people and identify where mental health intervention or signposting is required. The new model has led to an increase in the total number of people being identified as having vulnerabilities and receiving follow-up support through referral to other agencies such as mental health and housing services. There is a very strong partnership formed between NHS England and the MPS with increased access to patient information systems used by mental health and other services, leading to a reduction in risk to the individuals whose vulnerability is identified.

Recommendation 3

Over the last few years, the MPS has improved mechanisms for joint training involving healthcare professionals and custody staff. At 'Professional Development Days' the medical director has delivered presentations about the risks of alcohol withdrawal, diabetes and medicine management to all custody staff. We have delivered PACE (Law/Custody) presentations to L&D staff, as well as inviting L&D presentations on mental health to all frontline custody staff. We have also welcomed service users to deliver presentations on their journey through the criminal justice system. FMEs and CNPs conduct joint immediate life support training as well and have been invited to attend joint clinical custody update days.

Recommendation 4

The MPS continues to work with London Councils to develop a pan-London agreement relating to the overnight detention of children in custody and their transfer to suitable alternative accommodation. A draft protocol has been developed and is in its final stages of preparation. The aim will ensure there is consistency, standardising the way children are dealt with in custody across London. The protocol will include additional clarity relating to escalation processes, monitoring and cost recovery. We recognise the challenges for Local

Authorities. However, the protocol expects Local Authorities to provide appropriate accommodation for our most vulnerable. We also recognise that knowledge and understanding of our custody staff is key to ensuring correct and appropriate accommodation requests are made and specific training has been delivered to all our supervisors.

Significant improvements have been seen over the last two years as children in custody have been a focus for the Met Detention Command. Every custody record relating to children charged and kept in custody is reviewed. Learning is shared with line managers so feedback can be provided to staff with outcomes of discussions/action requested and logged. Monthly data is shared with local Youth Offending Teams. We welcome the opportunity of working with London Councils and Local Authorities in developing this roadmap to provide better outcomes for young people.

The MPS would fully support a pan-London Appropriate Adult Scheme. Difficulties in securing attendance of Appropriate Adults is felt across all of our custody suites, delaying support, advice and care for those most vulnerable, with delays also impacting on our ability to effectively manage investigations. We have engaged with Local Authorities via London Councils who have agreed there is a case for change in relation to Appropriate Adult support/provision for Adults. There was a shared acceptance of the need for a new approach that improved the standard of provision, the coverage provided, reflecting the changing BCU and custody landscape. We have agreed on the principle and budget requirements. The MPS and the NHS will each contribute £240k to support a council-funded Appropriate Adult provision for adult detainees. A business-change plan will set out a schedule for a phased rollout in August 2018. We have looked at good practice across the country and how other forces operate. We have found some interesting models, especially in Portsmouth with an "in custody" set up. We will continue to review good practice to see whether such innovative schemes could work across London and will report on our findings to London Councils.

Overall, I am pleased with the significant improvements that have been made in the MPS custody healthcare provision, and we will continue to work with all partners in this crucially important area.

Yours sincerely

Sir Stephen House QPM Assistant Commissioner

Met Operations

