

**Steve O'Connell AM**

Chairman PCC  
City Hall

18 October 2018

MOPAC01102018-M2196

Dear Steve,

**Police and Crime Committee Report - Detained, not forgotten: Healthcare in police custody**

Thank you for your letter of 10 September 2018 enclosing a copy of the Police and Crime Committee's report on healthcare in police custody, *Detained, but not Forgotten: healthcare in police custody*.

I welcome the report, which considered an important area of policing business, and would like to thank the Committee for recognising the progress made since it last conducted a review of custody healthcare within the Metropolitan Police Service (MPS) in 2014.

You have made a number of recommendations, which I shall address in turn below. Firstly, I would like to provide some context to support the response. As you will be aware, the delivery of safe and effective police custody is incredibly important and the Mayor and I take the responsibility of ensuring the MPS delivers an efficient, effective and safe service very seriously. It is for this reason that there is a focus on this within the Mayor's Police and Crime Plan for London.

The number of detainees coming through MPS police custody continues to fall, but as you have indicated, those coming through custody have increasingly complex and diverse needs. As a result, it is evident that the MPS' approach to custody healthcare needs to be flexible, responsive and increasingly sophisticated.

I have set out my response to each recommendation below. In general, your recommendations are in line with our current direction of travel, so it is helpful that your work has validated our response to date. MOPAC officers have worked with the MPS for some time on reviewing police custody healthcare, particularly in preparation for the since-aborted transfer of commissioning responsibility to NHS England. Since that time, however, the MPS and MOPAC have continued to review the provision of custody healthcare and the outcome of that work has now been translated into the new target operating model for Police custody. It should also be noted that the custody environment, and indeed policing is incredibly dynamic and fast-paced, so although we have currently settled on a target operating model, it is possible that it will change and flex over time in response to the changing circumstances.

Turning now to the recommendations, I have responded to each in turn below.

**Recommendation 1** - I support this recommendation as a means to help ensure detainees receive appropriate primary healthcare to reduce the number of detainees presenting for the first time with untreated ailments in police custody. The MPS will provide a substantive response that will explain how they intend to address this through their business as usual.

**Recommendation 2** - The MPS has reviewed the ambulance call out data as part of our overarching review of police custody healthcare and will provide the data as requested as part of their response to this report.

**Recommendation 3** - I support this recommendation and the need to facilitate joint learning and development amongst custody nurse practitioners and forensic medical examiners. The MPS will address this recommendation in their response.

**Recommendation 4** - Keeping children and young people safe is a key priority for the Mayor as set out in his Police and Crime Plan. As you will know, MOPAC does not have statutory responsibility for the provision of secure and non-secure beds, which is a role for local authorities. We have made progress in this area and as a first step towards evidencing need, work has been underway with local partners through London Councils and with the MPS to develop our shared understanding of the need for secure and non-secure beds for young people in police custody in London. This will enable us to work with local authorities to develop better provision for youths detained in police custody in London. I will report back on progress by the end of 2018.

**Recommendations 5 & 6** - You will appreciate that we have no statutory functions in respect of the provision of Appropriate Adults (AAs) for either children or adults. Responsibility for the former rests with local authorities and no particular agency has a specific duty to provide services for vulnerable adults. I do recognise the issue you have raised and have considered our options in terms of developing a pan-London AA Scheme, which needs a partnership approach. I had hoped to deliver an agreed approach through our devolution deal, however, there was little appetite from local authorities to work collectively on this particular issue at the time the deal was being developed. You will appreciate that outside of the framework of the devolution model it is more difficult to galvanise support for the implementation of a pan-London service, which would require the pooling of budgets, combined commissioning arrangements and the termination of existing contracts that are not currently aligned with one another.

We have not let that be a barrier to progress and the MPS, the London Safeguarding Boards and MOPAC have continued to press on this issue and as a result of work that is already underway, a partnership protocol for the provision of AAs has been developed that brings together the MPS, NHS England and the London Safeguarding Boards. This approach preceded, but is in line with the national Partnership Agreement, which you mention in your letter. The national template agreement does not, of course, confer any powers upon Police and Crime Commissioners or MOPAC with which to compel local partners to participate in such an agreement. As such, the fact that we have reached an agreement between the MPS and NHS England to contribute financially to a partnership model, which then seeks local authority contribution, demonstrates considerable progress in what is a very complex landscape. I will report back on our progress towards implementing a partnership approach to addressing the issue of AA provision.

I am happy to promote opportunities for volunteering and to work with key partners, like Team London to do so. However, the existing market for AA services is mixed, with much of London covered by a service that deploys paid sessional workers as AAs. So it should be noted that the existing infrastructure that supports volunteering as an AA is more limited.

Yours sincerely,



Sophie Linden  
**Deputy Mayor for Policing and Crime**

Cc: Sadiq Khan, Mayor of London  
Cc: Cressida Dick, Metropolitan Police Commissioner

