

Joanne McCartney AM
Chair of the Police and Crime Committee
City Hall
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9 June 2014

MOPAC300514-14192

Dear Joanne,

Reference: Falling short: The Met's healthcare of detainees in custody

Thank you for the opportunity to respond to the Falling short: The Met's healthcare of detainees in custody. The report reinforces those areas the MPS have been concentrating on and are actively working to ensure appropriate care is provided to those with health needs who come into contact with the MPS in custody.

The report recognises some of the challenges the MPS faces in assessing and responding to those individuals arrested who may be in a state of distress, violent or vulnerable. The report clearly has implications for the MPS, however, I am keen that the learning and implementation of the Six Recommendations is shared and owned amongst wider partners.

There have been some particularly positive developments in custody:

Mental Health and Partnership Board

- Since the publication of the Independent Commission on Mental Health and Policing, a number of strategic partnership arrangements have been formed including, the London Mental Health Partnership Board (MHPB).
- The MHPB has driven action and a number of successes. For example, through focussing on section 136, there has been just one person who has come into custody under this legislation this year; a vast reduction compared to 2013 when there were 87 people.

Mental Health and Policing Report

- The MPS is working with NHS England and MOPAC to take forward recommendations in the Independent Commission on Mental Health and Policing Report, including progressive developments to Liaison and Diversion services in custody as recommended in Lord Bradley's report 2009. London was selected as one of the 10 national trial site areas. This means, mental health nurses will be stationed in police

stations in the following boroughs Camden, Islington, Haringey, Barnet, Enfield, Hackney, Tower Hamlets, Newham, Redbridge, Barking and Dagenham, Havering and Waltham Forest. There are existing schemes in all other police stations in London except Wembley and Harrow, however, NHS England (London) plans to extend coverage to all stations during 14/15.

- The latter forms part of our wider intentions to improve access to Liaison and Diversion services in police custody and court settings as well as ensuring officers who come into contact with individuals who present mental ill health in the community are effectively supported (via the expert advice of a health professional) therefore ensuring continuity of support and care. Linked to this work is The London Mental Health Triage Pilot which commenced in March 2014 covering the South London and Maudsley NHS Trust areas.

Vulnerability Assessment Framework

- The Vulnerability Assessment Framework (VAF) training will assist officers and staff to identify those that are most vulnerable and at risk when being released from custody. With the support of the Custody Team, the concept of the 'responsible person/carer' is being developed for those deemed vulnerable who do not meet the threshold of immediate mental health assessment or Section and the consideration of early notification to a responsible person, carer or where appropriate a referral to NHS partners. This work is being led by NHS England with a view to ensuring it becomes consistent practice in assessing detained persons.

Detainee Healthcare

- In preparation for the Government's plans to hand responsibility for healthcare of all detainees to the NHS, the MPS is working closely with NHS England to define the forensic healthcare requirements in order to facilitate the handover in 2015. To further support this process, a Chief Superintendent has been seconded to NHS England, London two days a week, to aid the transition.

Custody Management

- The MPS management board has recently approved the creation of a single custody management structure that will have sole responsibility for all of the Met's thirty six 24/7 custody suites and additional overflow suites. This will ensure greater consistency when managing risk and also provides an opportunity to streamline the processes for escalating custody issues identified by Independent Custody Visitors (ICVs) and the wider community. MOPAC is working with the MPS to align the governance arrangements to the new custody management structure.

I recognise, as does the Commissioner, that there is room for improvement, but I do not accept that the MPS' current healthcare arrangements have increased the risk of a death or serious harm in police custody (as quoted on page 5 of the report). It is important to emphasise (as your report references), that there has not been a death in custody since 2010 in any of the MPS custody suites and since then, more than one million detainees have passed through their care. This is a result of improved systems and custody performance, especially with regards to the treatment and care of detainees. The MPS is committed to continually improving custody performance and the health and wellbeing of people in custody is, and will remain, a key priority. MOPAC continues to hold the MPS to account on behalf of the public.

I am aware that the MPS will provide you with a separate response, so I have focused on the two recommendations which refer directly to MOPAC, namely, Recommendations 5 and 6:

Recommendation 5: A new Detention Command for custody: The Met and MOPAC should demonstrate that it has learned the lessons of the past by setting out how the new Detention Command for custody, which is set to be introduced in April 2014, will be developed, consulted on, implemented and overseen effectively.

This recommendation sits firmly within MPS Operations and is part of the wider Met Change programme. MPS Management Board has recently approved the creation of a single custody management structure that will have sole responsibility for all of the thirty-six 24/7 custody suites and additional overflow suites. This will ensure greater consistency when managing risk and investigating the reasons why the person has been arrested. There are robust reporting structures and governance processes in place for all projects under the Met Change programme. Implementation is being overseen by a dedicated project team.

The MPS are working to a detailed implementation plan that includes both external and internal communication and consultation plans. There are regular meetings with the Federation and Staff Associations, as well as diversity and Health and Safety advisers. This will drive work in individual suites to support those with protected characteristics who attend custody. This work will be shared with the ICVs. The EIA will also be used to identify any internal diversity issues.

Recommendation 6: The Independent Custody Visitor: MOPAC should set out how it intends to make better use of the information provided by ICVs to identify issues around custody provision, as well as other ways ICVs can add greater value to MOPACs oversight of custody. As a minimum, MOPAC should publish a quarterly report with analysis of visits carried out by ICVs. This should include details of any problems identified during visits and the actions being taken to address them. MOPAC should also clarify how the relationship between ICVs and SNBs will work.

MOPAC continues to provide an Independent Custody Visiting Scheme, which ensures all custody suites are visited by independent members of the community on a weekly basis. 24 hour medical support is available through either on-duty nurses, based in the custody suite, or through an on call forensic medical examiner (FME). All of whom are accredited and specially trained to support those in custody. Safer Neighbourhood Boards (SNBs) have a role in providing assurance that the independent custody visiting scheme is operating in their borough. To support this junction, reports on ICV operation are being provide to SNBs on a quarterly basis.

As you can see, the MPS is making real progress in this area and without being complacent, it is important to acknowledge the work which is currently being undertaken by colleagues on the front-line and in custody. The MPS is so often dealing with some of the most vulnerable individuals within our community, so the MPS must be committed to providing the best possible detention service and to delivering on their duty of care for detainees. I am committed to holding them to account for that and I am confident that the changes currently being implemented are making positive contributions to our wider ambitions.

Yours sincerely



Stephen Greenhalgh
Deputy Mayor for Policing and Crime