

Cynulliad Cenedlaethol Cymru
Y Pwyllgor Iechyd, Gofal Cymdeithasol
a Chwaraeon
Ymchwiliad i iechyd meddwl yng
nghyd-destun plismona a dalfa'r
heddlu
HSCS(5) MHP04
Ymateb gan Iechyd Cyhoeddus Cymru

National Assembly for Wales
Health, Social Care and Sport
Committee
Inquiry into Mental health in Policing
and Police Custody
Evidence from Public Health Wales

Public Health Wales Response to the Health, Social Care and Sport Committee Inquiry into Mental Health in policing and police custody

Public Health Wales welcomes the opportunity to contribute to the Health, Social Care and Sport Committee inquiry into mental health in policing and police custody.

1 Response to the specific areas of inquiry

1.1 Whether there are sufficient services (i.e. health and social care services) available to support police officers in Wales to divert people with mental health problems away from police custody.

Currently, the provision of mental health services for those experiencing mental health issues in the community can only be described as 'variable' across Wales.

Critically, there is no common understanding or language as to what is deemed to be a 'mental health' issue; this could range from some displaying extreme grief following a bereavement (which is clearly not mental health related) to a diagnosed or undiagnosed mental health condition.

The level of confusion about what constitutes a mental health issue/condition/disorder for young people adds an additional layer of complexity. There is a wide gulf between what clinicians and other professionals – and citizens – perceive these to be.

Unsurprisingly, there is also a distinct lack of clarity concerning what early intervention options and opportunities exist for referral within the community.

An added challenge exists in terms of where those provisions do exist within a community setting and are indeed known to staff, who is able to make a referral into those services i.e. medical professionals only or members of the police and

criminal justice system and what is the accepted 'threshold' for accepting referrals.

The provision of Criminal Justice nurses within the custody setting is again variable with some health boards carrying vacancies for many months.

Additionally, the provision of custody nurses who have been dual trained (general and mental health) and would therefore have more knowledge of early intervention opportunities is minimal.

There would be value in a Wales wide scoping or 'understanding' exercise being carried out which mirrors the understanding piece of work that was carried out concerning vulnerability in the Police Innovation Funded pilot in Maesteg that preceded the Early Action Together Programme, which is looking at Adverse Childhood Experiences (ACE) and a trauma informed approach to policing vulnerability.

This evidence-based understanding piece would allow Wales to develop a universal cross partner understanding and language. It would allow us for the first time to understand the provision of service at all levels and, as importantly, identify where our gaps and therefore opportunities to develop early intervention services are.

Thereafter, the evidence and learning which is gleaned from this understanding exercise could contribute to the development of a joint training package for police officers and partners (e.g. multi-agency custody based staff, health/social care partners) around mental health and mental health provision within the community, focussing on support and advice for the individual themselves and their family/support network.

1.2 The number of people arrested under section 136 of the Mental Health Act 1983, and the extent to which police custody is being used as a place of safety for people in mental health crisis.

Public Health Wales is not best placed to respond to this question but we would seek assurances as to the provision of a suitable place of safety for those under 18 years old as we are aware that this is also variable across wales.

1.3 Whether local authorities and health services are meeting their duties and complying fully with legislative requirements to provide appropriate places of safety to which the police may take people detained under section 136 of the Mental Health Act 1983.

[Public Health Wales has no comment in relation to this matter.](#)

1.4 Adherence to the Code of Practice to the Mental Health Act 1983 which requires that people detained under that Act should always be conveyed to hospital in the manner most likely to protect their dignity and privacy – taking account of any risks (i.e. by ambulance which should be made available in a timely way, as opposed to police transport).

Public Health Wales has no comment in relation to this matter.

1.5 How effectively police forces in Wales work with partners (such as health or social care services) to safeguard vulnerable people in police custody, and how well the police themselves identify and respond to vulnerable people detained in custody, specifically those arrested under section 136 of the Mental Health Act 1983.

Whilst Public Health Wales cannot answer this question directly, from an ACE perspective, the landscape from an early intervention perspective is unclear.

Additionally, from the Early Action Together programme perspective we are aware that there is a lack of engagement across all programme areas from health generally and adult mental health specifically.

1.6 The effectiveness of multi-agency care planning for people with mental health problems when leaving custody, specifically for those detained in police custody under section 136 of the Mental Health Act 1983 to help to prevent repeat detentions.

Public Health Wales has no comment in relation to this matter.

1.7 Whether effective joint working arrangements are in place, with a specific focus on implementation of the Mental Health Crisis Care Concordat, including whether the Welsh Government is providing sufficient oversight and leadership.

We are aware of the current governance arrangements which exist. The only comment we would make is that mental health as an ACE is so prevalent within communities that it is worthy of this having relevant staffing within Welsh Government to oversee the implementation of the concordat rather than this being a small add-on part of a wider portfolio of responsibilities on an operational level.