

Cynulliad Cenedlaethol Cymru
Y Pwyllgor Iechyd, Gofal
Cymdeithasol a Chwaraeon
Ymchwiliad i iechyd meddwl yng
nghyd-destun plismona a dalfa'r
heddlu
HSCS(5) MHP13

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

Ymateb gan Swyddfa Comisiynydd
Yr Heddlu a Throseddu Gwent

Evidence from the Office of the
Police and Crime Commissioner for
Gwent

Health, Social Care and Sport Committee

13th March 2019

National Assembly for Wales

By e-mail

Dear Sirs,

Re: Consultation - Mental Health in policing and police custody

Further to the above inquiry, please find below a response on behalf of the Office of the Police and Crime Commissioner for Gwent.

Statement: 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.

Response: In spite of improvements in recent years with the introduction of the Crisis Care Concordat and Policing and Crime Act (PACA) 2017, none go far enough to address the fundamental problem of lack of funding in mental health services and social care. The numbers of people actually ended up in a police cell may have reduced, but not the number of people needing to be detained under sec 136 in the first place. This number continues to grow. It could be argued that this is due to insufficient early intervention for people in mental health crisis. If health and/ or social care had greater resources to get ahead of the problem, fewer people may reach the point of crisis that leads to sec 136 detentions being necessary.

In Gwent, persons that are unwell and are in-patients in mental health settings are often discharged far too early to make space for new patients arriving. There does not appear to be a problem with bed occupancy in Gwent, but this is part of the reason for that. Social services provision, especially out of hours, compounds this issue. Out of hours provision consists of a maximum of two social workers covering

the whole of Gwent (one of whom will be staffing the phone line). This causes issues for social services support in cases of sec 135 warrants, severely limiting, or even preventing, this occurring. Consequently, in these cases, police are more often than not involved and which may result in (avoidable) detentions being made.

Statement: 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.

Response: Between April 2018 and the end of Jan 2019, Gwent saw 234 sec 136 detentions compared to 200 in the same period during the previous year (an increase of 12%). However the use of police custody units in the same periods has dropped from 26 to 10 (61.5%).

Statement: 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.

Response: Gwent has one Place of Safety provided by Health which currently, is sufficient for the numbers of detentions we have. However, many would argue that the facility (called *Adferiad* located at St Cadoc's hospital) is far from appropriate. There are no dedicated staff for the unit; it is staffed by nurses from an adjacent ward when a sec 136 comes in and they are more often the most inexperienced or junior staff. There are no proper waiting facilities should more than one sec 136 come in at the same time, meaning police have to remain with the detainee, sometimes for hours. The facility is a small room with a small sofa on which intoxicated detainees have to rest to sober up before assessment and the room is not particularly secure for such occurrences.

Statement: 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).

Response: Ambulances conveying sec 136 detainees to the place of safety is almost unheard of in Gwent. Out of the 234 detentions made this financial year, 209 of them were transported to the place of safety in a police vehicle, with the remaining 25 being transported in either an ambulance or the dedicated mental health vehicle that we have in Gwent. The reasons for not using an ambulance included it not being available or readily available to respond within 30 minutes, or the behaviour of the detainee deemed too risky for ambulance transport.

Statement: 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.

Response: In instances where custody units are used as a place of safety for those detained under sec 136, we are confident that they are safeguarded well. Gwent Police has dedicated custody nurses working in custody units along with Criminal Justice Liaison Teams between the hours of 9am to 5pm, Monday to Friday. In the 10 cases that were brought to custody this year, 9 of them were transferred to the Health based place of safety as soon as it was possible to do so.

What is more concerning is the lack of provision to look after vulnerable people who may have mental health problems and have been arrested for criminal matters. There have been numerous examples in Gwent where we have been unit has not been possible to get a sec 12 doctor to attend the custody unit to carry out a mental health assessment, either in a timely manner, or at all. This is partly to do with lack of sec 12 doctors and sometimes doctors who are simply unwilling and not wanting to attend custody units. Despite this being brought up with Health numerous times, the perception was that this is a problem for Gwent Police and not a Health; i.e. it was the police's responsibility to ensure there were adequate doctors available to see detainees when necessary. As a result of this problem, which is still on going, the use of sec 136 detentions in the custody unit with persons detained for criminal matters is on the rise. Many custody Sergeants feel this to be the only way that they can ensure the detainee gets a mental health assessment quickly.

Statement: 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.

Response: Currently, this appears to be highly ineffective. The Criminal Justice Liaison Team (CJLT) in Gwent has been based in the custody unit as a pilot scheme for around 7 months. Although this improves matters, it is a long way off the gold standard as envisaged by Lord Bradley in his 2009 report. The CJLT will see people in custody where there are concerns about their mental health and they may offer signposting to them prior to them being released, but the support goes no further. In England, many CJLTs offer a far more comprehensive service with direct follow up with health and social groups to ensure the person gets ongoing support to try and prevent re-offending. That does not occur in Gwent. Additionally, Gwent Police have recently opened a second custody unit and the CJLT are stating they are not able to offer a service in the second custody unit because of staffing numbers.

Statement: 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.

Response: Gwent has a robust partnership working group that oversees the Mental Health Crisis Care Concordat. This is a very proactive group with excellent working relationships. However, its ability to influence across all agencies at the levels required is limited due to a lack of consistent and cohesive partnership outcomes. Major blockages often remain unresolved; e.g. the issues around transportation, sec 12 Doctors, and CJLTs to name but a few. This could perhaps be better supported by increased and robust WG oversight or leadership in this area and increased accountability by agencies to achieve, or at least attempt to achieve the objectives and aims of the Concordat.

I trust that you will consider the responses in the context of the inquiry.

Yours faithfully,

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Policy Officer