

WILTSHIRE POLICE



# Right Care Right Person

Chief Inspector Matthew Armstrong

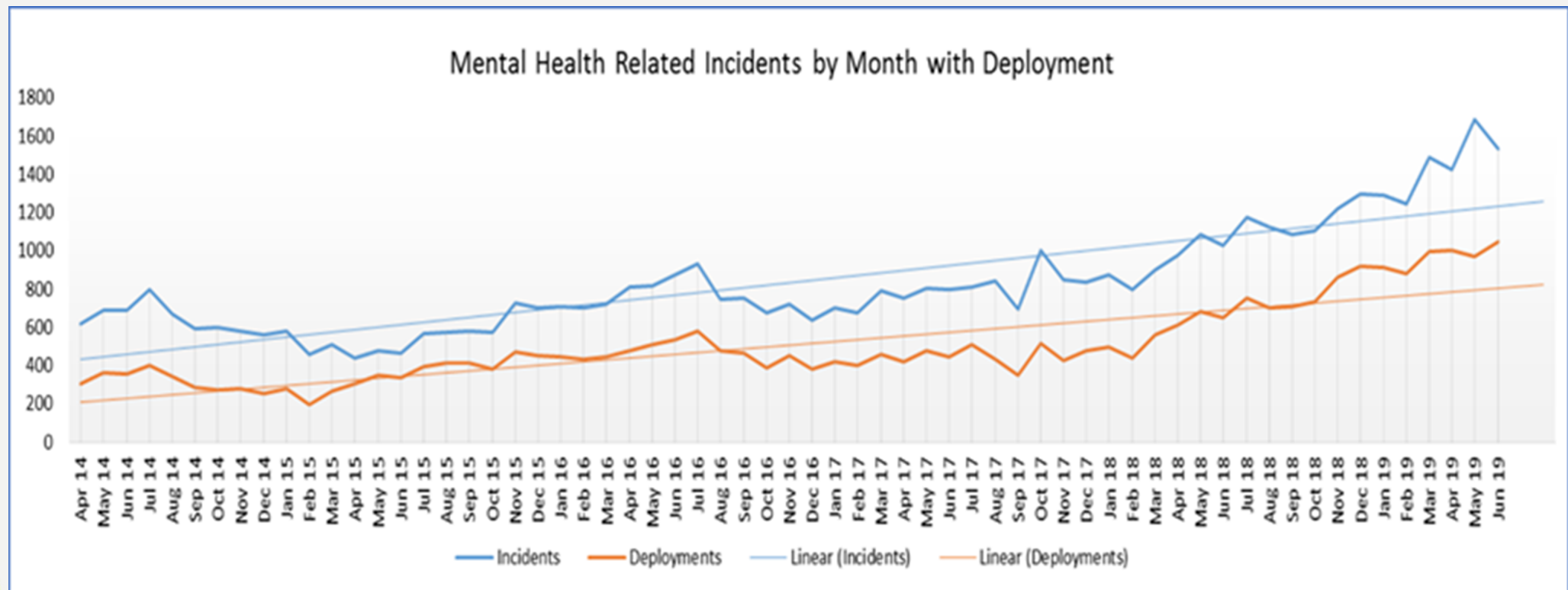


# Background

- Humberside RCRP journey started in 2019
- Demand for mental health and concern for welfare calls in Humberside had been rising exponentially.
- Concern for Welfare:
  - Over 25k calls p/a; 11% of overall demand; 25% increase over 2 years
- Mental Health:
  - Over 14k calls p/a; 35% rise over 2 years; 6% of overall demand
- Many of these calls came from partner agencies.
  - 18% of all Concern for Welfare calls came from our partners.
  - Top locations in terms of demand - 8 of the top 11 locations were NHS or care settings.

## HMICFRS report 'Picking up the Pieces' (Nov 2018)

- Mental health demand was rising exponentially with no method to reduce it.
- Welfare checks were taking up a disproportionate amount of police time and were mostly health related.
- Partner services were unable to cope with their demand and the police were filling the gaps.



# Police Productivity Review 15/02/23

## Mental Health Demand on Policing – Sir Stephen House QPM

### Key Findings



Use of the Section 136 has increased by **10%** in the last four years. Forces report spending **12 hours** with each patient.



Requests for assistance from individuals suffering from mental ill health are **increasing across all services**. End of 2021: 4.3 million referrals to NHS mental health services. (An increase from approximately 3.8 million referrals in the years 2019 and 2020)



**3,000-5,000** individuals are held in police cells each year, without any legal framework, suffering from acute mental ill health and awaiting an appropriate bed in a health care setting.



Thousands of individuals are reported every year to the police as missing from mental health settings and hospitals.



800,000 officer hours a year, for calls to mental health incidents that do not involve a crime or safety risk.



# 6 Core Principles of RCRP

1. Members of the public have the right to receive the “Right Care from the Right Agency”
2. The police should concentrate on Core Policing Duties
3. Understanding the Police’s Legal Duty to attend
4. Listening to Feedback from staff
5. Partnership working
6. Ensuring staff feel properly trained and supported to make the right decisions

# Humberside Phased Approach

Objective 1: Partners within Health and Social care should conduct their own Welfare checks rather than rely on the Police to conduct them.

Objective 2: AWOL mental health patients should not be routinely reported to the police

Objective 3: Police should not be routinely called to locate patients who leave unexpectedly from the Emergency Departments (ED) of Acute Hospitals

Objective 4: Transportation for physical and mental health patients will not be carried out by the police unless in exceptional circumstances

Objective 5: Police handovers at Mental Health Crisis Suites should take place within 1 hour

# Humberside evaluation

**540** less  
deployments  
per month



**1,441**  
officer hours  
saved per month



**55,707**  
officer hours  
saved so far (between  
June 2020 - December 2022)



Reduction in the proportion  
of RCRP incidents deployed  
to: from **78% at its peak**  
in January 2019 to **25%**  
**at its lowest in May**  
**2021**, which  
is a **53% pts**  
reduction



**8%** of demand  
taken out of the  
system: Reduction  
of **4%** in overall  
deployments  
(April - December 2022)



# Legal Responsibilities

Legal duties to act arise on the police in the following general circumstances:

- A ***real and immediate*** threat to life: Duty under Article 2 ECHR
- A ***real and immediate*** threat of really serious harm/torture/inhumane or other conduct within Article 3 ECHR.
- ***Common law*** duties of care.
- ***Specific statutory duties***. Arrest, detain, restrain.



# Article 2 ECHR

.....any threat would have to comprise all the following before a duty to act would arise:

A threat to life. A threat merely of injury was not enough.

The threat had to be against a specific and identifiable person.

That threat must be imminent, and not conditional on other acts or events.

A positive duty to protect against a risk will arise where:

**The Police know or ought to know;**

- Of a real and immediate risk to life or serious injury
- To a person or group of persons;
- Even if that person (or group of persons) is not specifically identified. The fact the person/group is/are known to exist may be enough

Osman v UK 29 EHRR 245

Öneryildiz v Turkey (2004) 41 EHRR 325, para 71

# Article 3

Article 3 ECHR has the following elements:

- Prohibition of torture, or inhumane or degrading treatment or punishment.
- The duties arising under the ECHR are not limited to risks to life. There are similar duties where there is a real and immediate risk of conduct within the terms of Article 3.
- What is set out above in relation to Article 2 applies equally to Article 3. Article 3 broadens out the circumstances in which a duty may arise, in particular where the risk is less than death.
- Interpret as *serious harm*

# Common Law

The police do not owe a private duty of care in common law towards individual members of the public to protect them from harm.

Where the police omit to act, it is unlikely that they will be held to have breached a duty of care.

In general terms, if the police do nothing they will not be breaching any common law duty of care.

Exceptions to this general position: Assumption of care

The police may assume a responsibility to care for a person. Where there is such an assumption the police will be under a duty to care for the person.

**When do the Police create or assume a duty of care and how is that duty then discharged?  
Taking a phone call? Passing on a message? Attending a call for service? Taking someone  
somewhere? Calling an ambulance?**

# When do Police assume a duty of care under Common Law?

The police may assume a responsibility to care for a person. Where there is such an assumption the police will be under a duty to care for the person.

- ***Robinson v CC of WYP***

When do the Police create or assume a duty of care and how is that duty then discharged?

- Taking a phone call?
- Passing on a message?
- Attending a call for service?
- Taking someone somewhere?
- Calling an ambulance?
  - **Sherratt v Chief Constable of Greater Manchester Police**
  - **Webley v St Georgie's Hospital NHS Trust**

# College of Policing: Risk APP

## **The police service is not responsible for all forms of risk**

The police should not assume, directly or indirectly, responsibility for all forms of risks. They may have no legal right or power to do so and could compromise their reputation by exceeding their role. Other agencies may have more appropriate skills (eg, in risk assessment), resources (eg, ability to provide long-term interventions) and legal powers.

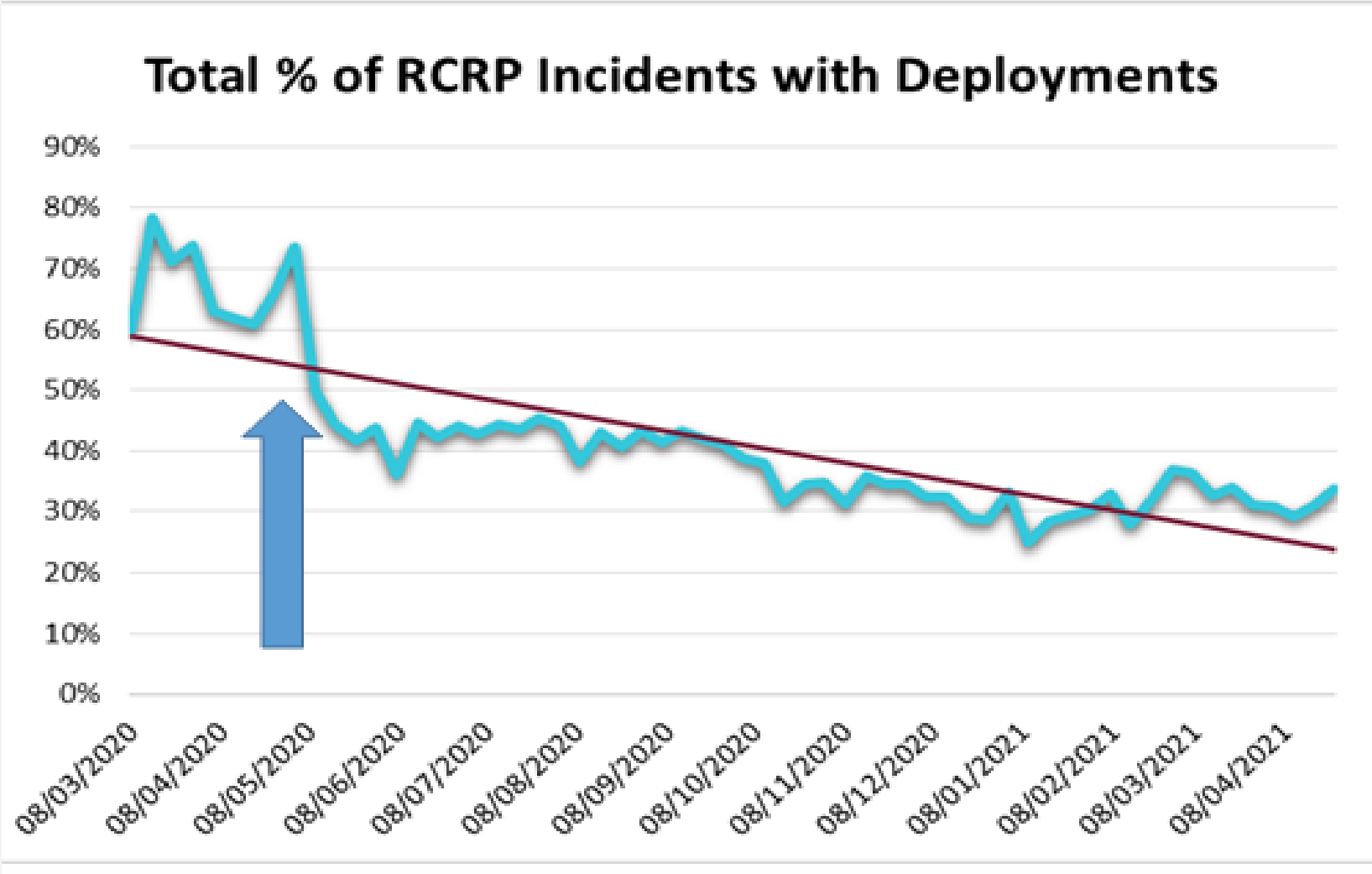
- Officers should consider whether it is appropriate for them to accept, or to continue to accept, responsibility for a risk when there are more appropriate agencies or methods of tackling the problem. They should not encourage the public to think automatically of the police the first or most appropriate port of call for every problem. The police must work with partner agencies rather than take on their responsibilities.



# College of Policing: Mental Health APP

In general, when there is no reason to suspect that a crime has been, or is likely to be committed, responses to the needs of people with mental ill health and vulnerabilities should be provided by appropriately commissioned health and social care services. The police have a duty to prevent and investigate crime, however, they also provide an emergency response to intervene and protect life and property from harm.

# Humberside experience



# Wiltshire snapshot

MH Logs

7,541

MH Logs as a % ...

6.1%

MH Logs with D...

2,229

Units Dispatche...

14,126

Officers Dispat...

18,707

MH Log Open to...

Hours : Minutes

MH Log Time at ...

Hours : Minutes

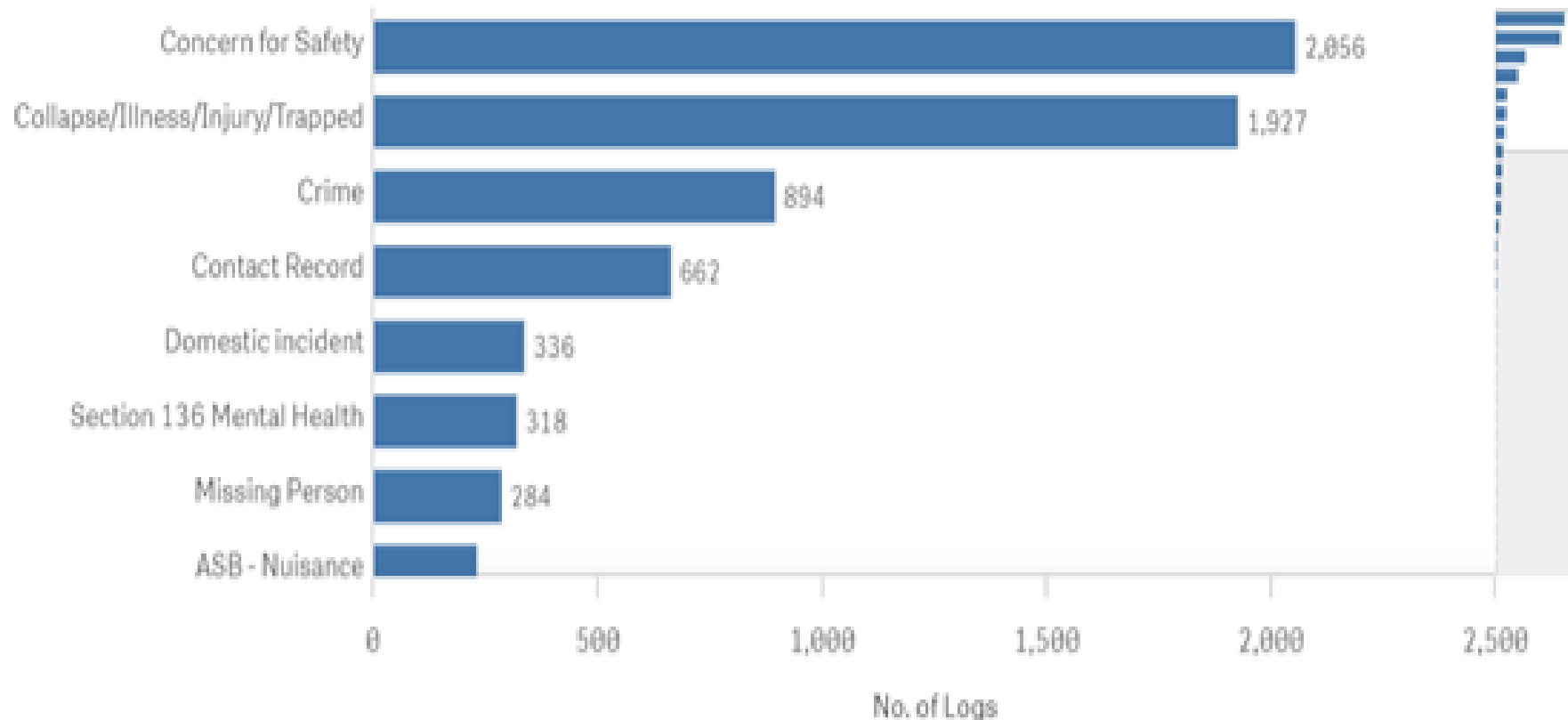
MH Log by Caller Tel No

MH Log Detail

MH Logs over Time

MH Logs by Disposal

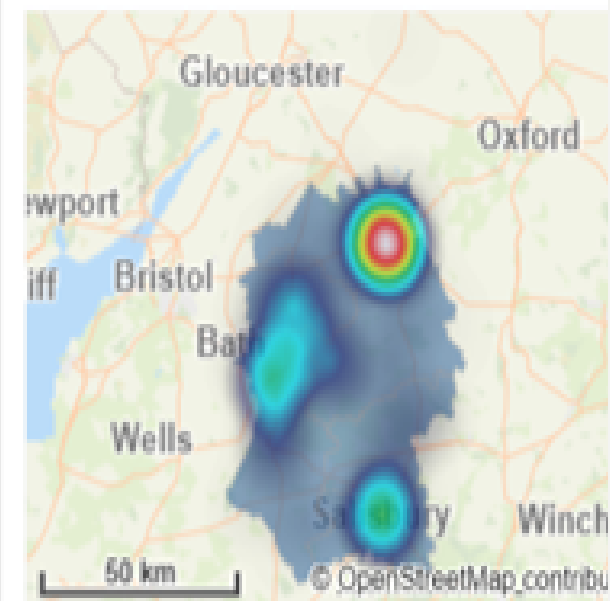
## MH Logs by Disposal



MH Logs: logs with '136 Mental Health' Disposal OR 'Mental' Tag OR 'Mental Health' Qualifier OR 'Mental' within Summary.  
Damantia Lane: line with the 'Damantia' Corridor

## MH Logs

Filter to 10,000 MH logs or less to see points on map



# Police Productivity Review 15/02/23

Mental Health Demand on Policing – Sir Stephen House QPM

## Action since the reports



£7 million capital funding for the procurement of specialised mental health ambulances



£143 million for new, or to improve existing, mental health crisis response infrastructure



The Home Office, DHSC, NHSE and the NPCC are engaging on the National Partnership Agreement with police and health partners



Right Care, Right Person & the National framework for missing adults

# Next steps.....

- College of Policing Police National Tactical Delivery Board set up
- College of Policing National guidance provided for:
  - Senior Reporting Officer role
  - Baseline and evaluation criteria
  - Communication plan considerations
- National Legal advice to Police, operational guidance and policy considerations in progress for delivery Q3/4
- National Partnership Agreement has Ministerial sign off
- Wiltshire to hold first tactical partnership meeting 19<sup>th</sup> September 2023
- Phased approach to implementation starting in the New year with Concern for Safety