



Home Office

Helping the police to support people with vulnerabilities



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Foreword

In the course of their day-to-day duties the police come into contact with a wide range of the public, in a variety of situations. For any number of reasons, individuals may, by virtue of individual characteristics or the situation they find themselves in, be particularly vulnerable and in need of specialised assistance at the point at which they come into contact with the police. While there is an expectation that the police will always seek to treat individuals with whom they come into contact fairly and professionally, it is important that they are able to identify those who may have particular needs or vulnerabilities, and that they can help address those needs.



Assisting the police to deal with individuals with mental health problems, learning disabilities and drug misuse issues is a particular priority given that it is estimated that the police spend a significant proportion of their time dealing with such individuals (an estimated 20% of police time is thought to be spent dealing with those with mental health issues alone¹).

Significant progress has been made by the Home Office and the police, in partnership with other agencies, in developing new or improved ways of ensuring that those with particular needs receive the assistance they need. This booklet highlights some of the key initiatives introduced in this field and, where relevant, provides an update on recent developments². However, there remains more to be done. Some further work is already

- 1 Findings from an Independent Commission on Mental Health and Policing in London (May 2013)
- 2 Health issues are devolved in Wales and accordingly some of the initiatives listed operate only in England. However there is close liaison with Welsh partners in the interests of sharing good practice.

in hand. We need for example to ensure that the police receive the right training. To this end, the College of Policing is reviewing the range of training available to provide officers with the right skills, and monitoring the take up of this training with a view to further refining and improving the police curriculum. Her Majesty's Inspectorate of Constabulary has been asked to investigate how vulnerable people (including, but not limited to those with mental health problems, those from black and minority ethnic backgrounds and children) are treated in police custody, while the Care Quality Commission is inspecting the quality of all places of safety. Finally, the Home Office and Department of Health are reviewing the use of sections 135 and 136 of the Mental Health Act, to explore whether there are better ways of assisting those with mental health problems than having, unnecessarily, to detain or remove them for the purposes of health assessments.

The police are not medical professionals – nor are they expected to be. However, it is frequently the case that it is the police who are called upon in the first instance to assist members of the public who, for one reason or another, may be vulnerable. I want to ensure that when this happens the police are properly equipped and supported to be able to provide individuals with the most appropriate response. The strategic guide for the police on supporting vulnerable people, which has been developed alongside this booklet, is one tool that I hope will help to inform the police and their partner agencies on ways in which working together, the needs of vulnerable people can be dealt with more effectively.

The Policing and Mental Summit on 23 October 2014 represents an opportunity for us to take stock of progress so far and to decide together how to continue to build on offering the best support possible.

A handwritten signature in black ink, appearing to read 'Theresa May', with a stylized flourish at the end.

Home Secretary, Theresa May

Mental Health Crisis Care Concordat



The Government has published the national Concordat - an agreement about the standard of response that any person experiencing a mental health crisis in England should expect.

The Home Office is one of twenty-two national signatories to this agreement. Collectively, these bodies have responsibility for addressing the full range of issues a person in crisis might face. They also represent the local organisations that deliver practical support on the ground, including mental health trusts, Local Authorities, Ambulance Trusts, the police and others.

The Concordat is clear that people with mental and physical health needs should be given assistance with the same degree of urgency, wherever in the country they may be. This can only happen where health and criminal justice agencies, local authorities and other partners work closely and collaboratively – with a common focus on the best interests of the person who needs their help.

The Concordat can be viewed at

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281242/36353_Mental_Health_Crisis_accessible.pdf.

Local areas across England are now agreeing their own local crisis care 'declarations' and action plans to show their commitment to improve how they respond. Police forces across the country should recognise the importance of their contribution. The Home Office and Department of Health share the ambition that local declarations will have been signed throughout England by the end of 2014 – you can check progress at

www.crisiscareconcordat.org.uk.

Police forces in Wales are developing a Crisis Care Concordat specifically for Wales, with the Welsh Government and others.

Mental Health Street Triage



When the police encounter a person experiencing mental health problems it is vital that they have access to the right medical care at the earliest opportunity. In almost thirty police forces in England and Wales, this is being achieved through ‘mental health street triage’ schemes.

When officers respond to calls of concern or incidents involving a person experiencing crisis, they can use triage services to access support and advice directly from health professionals. One model being tested involves NHS nurses accompanying police officers to incidents while another involves mental health professionals – based in police call centres – providing support by phone.

Nine of these schemes have been funded for one year, through a £2 million investment by the Department of Health. We are supporting these pilots by evaluating what works. This will help local partners to improve and sustain their schemes.

An excellent by-product from triage has been the shared learning between police officers and their counterparts in health and social care services. Many officers involved with triage have said that their experience has improved their confidence to handle situations and make the right decisions.

“An officer and a mental health team member visited me at home...they were helpful and friendly. They made me feel at ease.”

Service User

“Nobody has a bad word to say about it. I was sceptical at first but it’s unbelievable the amount of time it’s saved. We have to keep it.”

Response Officer, Street Triage

Liaison and Diversion



In April 2014, the Government launched a new national model of Liaison and Diversion (L&D) across twelve police forces, covering 25% of the population. These schemes operate within police custody suites and courts. When a person suspected of committing an offence is identified as being vulnerable, the police will refer them for an assessment with the L&D team. The team may then refer the individual for treatment or further support.

Relevant information may also be shared with magistrates and probation so that they can make informed decisions about case management, sentencing and disposal.

The first 10 schemes are being independently evaluated and the findings will be available from summer 2015. Around 3,000 individuals engaged with L&D practitioners in the first few months, of which 68% were identified with one or more mental health issues.

In 2015/16, the new national model will be rolled out to cover 50% of the population in England. Whilst health is devolved in Wales similar arrangements are being supported by Welsh health boards and police forces.

Further information can be obtained through NHS England's website:

<http://www.england.nhs.uk/ourwork/commissioning/health-just/liaison-and-diversion/>

Multi Agency Working



Vulnerable individuals may have multiple and complex needs requiring a multi agency approach. In July 2014 the Home Office published a Multi Agency Working and Information Sharing Project Final Report. This report sets out evidence about multi agency working drawn from a wide range of approaches, developed by hundreds of local authority areas.

One of the most common multi agency models adopted by local partners is the Multi Agency Safeguarding Hub (MASH), with a focus on safeguarding children and vulnerable adults.

Good practice can take many forms and many effective areas have devised innovative solutions to successful multi agency working. However, a common factor in successful partnerships is recognition of three principles: information sharing, joint decision making and co-ordinated intervention.

The report also identifies the key barriers to effective MASHs, and assists professionals in being able to 'join the dots'.

The report can be found here:

<https://www.gov.uk/government/publications/multi-agency-working-and-information-sharing-project>



Recovery is at the centre of the Government's commitment to tackling drug misuse and its associated problems, as set out in the cross-Government Drug Strategy which we published in 2010.

Whilst it is for leaders of local areas – including Police and Crime Commissioners working in partnership with health and wellbeing boards and supported by specialist teams in Public Health England – to decide how they address their drug misusing population, the Government has driven forward and embedded processes which look to direct drug misusing offenders into treatment.

Drug testing on arrest is one such tool. This seeks to identify drug misusing offenders and refer them into appropriate treatment at the earliest opportunity in their contact with the criminal justice system. We know that targeted investment in drug programmes and initiatives can dramatically decrease crime in local areas – thus reducing the number of victims – as well as improving the health of local people vulnerable to substance misuse.

Custody Healthcare transfer



Police custody detainees frequently have health issues, including mental health issues. Police custody healthcare services must be provided to people detained in police custody or people attending a police station voluntarily.

Custody suite healthcare professionals address immediate health concerns to ensure the person is fit to be detained in custody and, where necessary provide forensic examinations.

We have been working with police forces and NHS commissioners to transfer the commissioning responsibility for these services to NHS England. Having NHS England commission these services would ensure they are delivered in line with NHS standards and guidelines, improving the healthcare response that people receive when in custody. This will also better link to community health and mental health services.

All English police forces are now engaged in the voluntary transfer of these functions to the NHS. Whilst health is devolved in Wales similar arrangements are being considered by the Welsh Government and police forces in Wales.

Police Innovation Fund



The Home Office established the Police Innovation Fund in 2014. It enables Police and Crime Commissioners to invest in innovative approaches, with the potential to improve policing and deliver better services for the public.

The Fund has supported a wide range of projects that focus specifically on vulnerable people. In 2014/15 the Home Office invested £3.2m on projects for vulnerable people, including a selection of street triage schemes and improved access to mental health services across multiple forces, as well as a project to address the links between mental health issues and gang activity among young people in London.

The bidding for the 2015/16 Innovation fund will begin later this year. More detailed information will be available in due course and can be found by contacting: police.innovationfund@homeoffice.gsi.gov.uk.

