

<b>Committee(s):</b>	<b>Date:</b>
Police Authority Board- For information	28 <sup>th</sup> November 2019
<b>Subject:</b> Annual update on the Custody of Vulnerable Persons (Young Persons, Children and Mental Health)	<b>Public</b>
<b>Report of:</b> Commissioner of Police and the Town Clerk Pol 88-19	<b>For Information</b>
<b>Report author:</b> Superintendent Lee Presland, Uniformed Policing Directorate	

### **Summary**

It was previously agreed to provide members with an annual update on two key areas of policing; young persons and children in custody and mental health crisis in custody. City of London Police (CoLP) collects and analyses information across these areas, in response to national recommendations from Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) amongst others, and in recognition of the importance of understanding and responding to any potential issues or trends. Since the last report, CoLP have been subject to a custody inspection by HMICFRS. Whilst a lot of good practice was recognised, there was a cause of concern raised around fingerprinting of children and vulnerable detainees without the presence of an appropriate adult. This is fully outlined in the body of the report, as well as the remedial action taken to remedy the situation.

Young persons and children who are held in custody may be vulnerable for a number of reasons and the CoLP and City of London Corporation (CoL) have established processes to deal with them which are detailed in the report. The report also includes custody and mental health data reported for 2018/19 with some comparison against previous years data where it is available. The report also details developments in best practice, such as the Street Triage system for those assessed under mental health protocols.

The report presents data (Appendix 2) on a number of categories for custody including numbers of children and young persons detained, length of time detained, age, gender and ethnicity of those detained and offences for which they were detained. The report covers data on numbers detained under the Mental Health Act 1983 and numbers of mental health assessments. It explains the procedure for when a mental health crisis develops once someone is within the custody suite rather than when police are called to assist someone on the street.

A copy of this report was sent to the Lead Special Interest Area (SIA) Member for Safeguarding and Vulnerability for consultation.

### **Recommendations**

Members are asked to note the report.

# Main Report

## Young Persons and Children in Custody

### Background

1. It was previously agreed to provide members with an annual update on Custody of Vulnerable Persons (Young Persons, Children and Mental Health) in the City of London and is the third annual update. It covers the reporting period April 2018 to March 2019. Some trend/ benchmark data has been provided where it is available.
2. England, Wales, Northern Ireland and Scotland each have their own guidance for organisations to keep children safe. They all agree that a child is anyone who is under the age of 18. The Police and Criminal Evidence Act 1984 (PACE) define a young person or child to be between the ages of criminal responsibility 10yrs and have not reached the age of 18. We use the term 'child' to refer to younger children who do not have the maturity and understanding to make important decisions. We use the term 'young person' to refer to older or more experienced children.
3. Custody officers are required to make a decision about whether they should treat the individual as a juvenile or as an adult. *PACE Code C paragraph 1.5 - states Anyone who appears to be under 18, shall, in the absence of clear evidence that they are older and subject to paragraph 1.5A, be treated as a juvenile for the purposes of this Code and any other Code.*
4. The law already recognises that police cells are not a suitable place for young persons and children. The Police and Criminal Evidence Act 1984 requires the transfer of children who have been charged and denied bail (remanded in police custody) to be moved to more appropriate local authority accommodation.
5. The related duty to local authorities set out by the Children Act 1989 is to accept these requested transfers. The detention of a child in the custody of a police cell is only allowed where exceptional circumstances prevent movement or where such children are a risk to the public and themselves, or no local authority accommodation is available.
6. Young persons and children in custody legally require an appropriate adult (AA) to be appointed as soon as possible and to be present during specific stages whilst in custody. These include the booking in procedure, interview, charge and other custody processes such as custody staff taking DNA, photographs and fingerprints to the provisions of the Police and Criminal Evidence Act 1984.
7. The release of the 'Concordat on Children in Custody' by the Home Office in March 2016 set out the role of each organisation in the process of detaining a child into custody and where responsibility lies. This clarifies the legal requirements and offers guidance on how these are put into place; particularly around the transfer of children from custody to local authority accommodation.

8. The Concordat is there for the Police and Local Authorities to aid compliance with their statutory responsibilities and to bring about a decrease in the number of children held overnight in police custody. The concordat sets out seven principles to achieve these aims:
- Whenever possible, charged children will be released on bail.
  - Children denied bail will be transferred whenever practical.
  - Secure accommodation will be requested only when necessary.
  - Local authorities will always accept request for non-secure accommodation.
  - The power to detain will be transferred to the local authority.
  - Where a local authority fails to provide accommodation it will reimburse the police.
  - Police forces will collect data on transfers.
9. In May 2019, the London Protocol for the provision of local authority accommodation for children held in police custody was published. The purpose of this protocol is to supplement the Home Office Concordat on Children in Custody. The City of London Authority and police are both signatories as members of the City of London and Hackney Children’s Safeguarding Board (CHSCB). This protocol aims to facilitate an improvement in outcomes for children held in police custody – a group of children who often end up in custody because of their vulnerability and who, whilst in custody, will be at a point of crisis. It seeks to facilitate this by supporting professionals involved in the transfer of children in custody to local authority accommodation to understand both their own roles and responsibilities and those of their colleagues and thereby to facilitate joint working. It also sets out how local areas should monitor the implementation of this protocol and ensure that feedback develops and enhances local practice.

## HMICFRS<sup>1</sup> Inspections

10. CoLP, up until 2018, had not been subject to an unannounced custody inspection by HMICFRS since the publication of ‘Report on an unannounced inspection visit to police custody suites in the City of London 18–20 June 2012’ undertaken jointly by HMICFRS and HM Inspectorate of Prisons. It should be noted by Members that **all** recommendations from HMICFRS inspections are monitored and scrutinised through your quarterly Police Performance and Resource Management Committee chaired by Deputy James Thomson. A report on all recommendations is submitted and an update tracker of progress is maintained and presented to Members at that Committee.
11. Key findings from the report pertinent to children, young persons and mental health included:

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<sup>1</sup> Her Majesty’s Inspectorate of Constabulary and Fire and Rescue Service

- The treatment of detainees was appropriate and respectful, and sergeants regularly explained procedures to detainees. Children were detained for as short a time as possible.
- Care was taken to ensure that those being released were able to reach their homes safely, especially young and vulnerable people, but there was a reluctance to issue small cash sums for fares when that was likely to be helpful. There was relatively little use of handcuffs, and the reasons for use were recorded. There was no separate recording of uses of force to support monitoring and analysis in this area
- There was an effective appropriate adult (AA) scheme for juveniles and vulnerable adults. Detainees who could not speak English fluently were well supported with translated materials and the use of professional interpretation, both in person and by telephone.
- There was a good substance misuse service, which extended to juveniles and to those with alcohol-related problems. The service made suitable referrals to detainees' local services all over the UK. The mental health provision was reasonable but there was no diversion or liaison service operating from the suites, and there was insufficient clarity in the local NHS service's policy and practice on those detained under section 136 of the Mental Health Act.

12. A number of recommendations resulted from HMICFRS findings. These are documented below with action the Force has undertaken to respond:

- Appropriate adults should be available to support without undue delay juveniles aged 17 in custody, including out of hours. Response: CoLP contract an appropriate adult service through the City of London Corporation. The hours are 0800-0000. Out of hours CoLP use Hackney social services with whom the Corporation have a reciprocal agreement.
- Bus fares should be provided to bailed or released detainees who have no legitimate means of getting home. Response: petty cash is available to support this.
- A range of reading materials should be offered, including books and magazines suitable for young people and non-English speakers. Response: appropriate reading materials are now available.
- Visits should be facilitated for, in particular, vulnerable young people or detainees held for long periods. Response: this is facilitated on a case-by-case basis.
- The City of London Police should engage with the local authority to ensure the provision of safe beds for juveniles who have been charged but cannot be bailed to appear in court. Response: this has been covered effectively by the Children's Concordat.

- There should be a mental health liaison and/or diversion scheme to enable detainees with mental health problems to be identified and diverted in to appropriate mental health services as required. Response CoLP has a Liaison and Diversion (L&D) service in place. (see below for full details)

13. In November 2018, the Force was subject to a further custody inspection by HMICFRS and the report published on 26<sup>th</sup> March 2019. Overall the Force was deemed to have performed well:

*‘There was a good focus on the diversion of children and vulnerable people from custody. The Force worked well with partners in relation to detainees with mental ill-health, successfully diverting many away from custody. The Force worked with partners as part of the London-wide approach to providing alternative accommodation for children who had been charged and refused bail. Few children entered custody and only one child had been held after charge in these circumstances, but had not been provided with suitable alternative accommodation.’<sup>2</sup>*

14. A number of recommendations resulted from HMICFRS findings. These are documented below with action the Force has undertaken to respond.

15. The HMICFRS report contained one cause of concern that some children and vulnerable adults were fingerprinted, photographed and had DNA taken without having an appropriate adult present. This does not meet the requirements of paragraph 2.15 of PACE Code D. The Force was urged to take immediate action to ensure that all children and vulnerable adults have an appropriate adult present when taking fingerprints, photographs and DNA.

16. The Force has responded by:

- Creating a revised Custody Juvenile Detainees SOP which is PACE compliant has been published.
- The policy around taking fingerprints and non-intimate Samples within the Custody Suite SOP has been revised to include the requirement for an Appropriate Adult to be present to support children and vulnerable adults as part of the custody booking-in process.
- All Custody trained staff and DDOs have been briefed to ensure they comply with PACE and past practice is no longer acceptable.
- Co-ordinated activity has been taken place with L&D Custody Trainer to ensure initial Custody Course and Refresher courses reflect correct processes.
- A relevant news update (briefing) has been published on the Custody website. Regular compliance checks are being carried out as part of Custody Manager’s dip sampling process.

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<sup>2</sup> Report on an unannounced inspection visit to police custody suites in City of London by HM Inspectorate of Prisons and HM Inspectorate of Constabulary and Fire & Rescue Services 5–15 November 2018

17. Other recommendations pertinent to this report were:

- The Force should manage the health care contract effectively, with escalation to a senior level when the service falls below the standard required.

Force response: the health care provider G4S are required to attend quarterly custody management group meetings with Force custody lead (Superintendent), when performance figures will be reviewed. The current contract has been extended by one year. A new procurement process will be initiated at start of 2020 (currently Brexit is holding back companies from submitting for local authority contracts) and will incorporate relevant performance requirements.

- The Force should ensure that it consistently identifies when an appropriate adult is needed for a vulnerable adult, and that one is subsequently secured without undue delay.

Force response: Delivery of AA contract has been delayed due to one of the local authorities involved withdrawing. The intent is still to secure formal additional provision for vulnerable adults alongside that for juveniles. At current time existing process and support provided in line with existing contract.

## **Responding to Vulnerability within Custody**

18. In October 2015 the CoLP initiated Liaison and Diversion (L&D) Services within their Police Custody suites. L&D services operate to identify, assess and refer people of all ages with a wide range of mental health, learning disability, substance misuse and social vulnerabilities when they first come into contact with the youth and adult criminal justice systems on suspicion of having committed a crime. Services aim to identify individuals as early as possible after they come into contact with the police and criminal justice system. They will provide coverage at police interview and custody suites and at criminal courts. They will link up to other parts of the justice process, such as prison, probation, youth offending teams and the young people's secure estate.

19. The Liaison and Diversion service is supplied by the East London NHS Trust in partnership with NHS England the CoLP are part of Cluster of the North and East London Liaison and Diversion Hub as shown in Appendix 3.

## **Process in custody**

20. As soon as it can be ascertained that a detainee is 18 years old or younger, an assessment interview by a Liaison and Diversion nurse is requested. This is to ensure CoLP is not missing any incidents of Child Sexual Exploitation or criminal factors relating to adult coercion. The Liaison and Diversion nurses are currently available for assessments in custody during the hours of 0800 to 2100, working on an on-call basis from Bethnal Green. CoLP is working to create an embedded service between 1000 and 1800 with the period outside those hours being covered by the on call function. The NHS has provided some funding to allow this to take place and we are now working towards a pilot scheme. Outside of these

times, and if available, an interview may be conducted by a member of the CoLP Public Protection Unit.

21. The CoLP has one custody suites based at Bishopsgate with its reserve custody suite at Snow Hill now closed. A collaboration agreement (already agreed at police committee) is currently being ratified with British Transport Police to allow its Brewery Road custody facility to be used as the CoLP's temporary back-up custody facility until completion of the new police station in Fleet Street.
22. Bishopsgate custody suite has a secure Perspex room designed for use by children and vulnerable persons who have been detained for a criminal matter. This is believed a more suitable place than a cell, as both police and the detained person continue to be visible to each other and there is less chance of the detainee being further alienated or stressed by their predicament. A custody cell is used only as a last resort, dependent upon the circumstances at the time and this would be with other control measures in place to reduce stress and risk as much as possible.
23. The CoLP has a clearly articulated police process for children in custody which is in the form of a flowchart responding to a young person being charged with an offence and this is attached as Appendix 1. The City of London Corporation has also produced a similar flowchart to reflect process from a local authority perspective.
24. The Appropriate Adult service is currently commissioned by the Community and Children's Services Department (CCS) but is managed by CoLP. The service meets with CCS quarterly and statistics are provided on how often the service is used.
25. When a person under the age of 18 years enters custody, every effort is made by the Custody Sergeant and Designated Detention Officer to keep the young person from being placed within a custody cell. The booking in procedure is initiated on arrival to establish many important facts, such as name, age, address, mental wellbeing and health. During the interaction with the detained young person/child, concerted attempts are made to establish the parents or family member details to act as an Appropriate Adult (AA). In some cases there is no alternative but to use the Appropriate Adult service.
26. Police officers will submit an intelligence document, a Form PPN, which is comprehensive information to assist the Public Protection Unit (PPU) and social services and allow appropriate follow up processes to be initiated.

### **Local Authority Transfer Arrangements**

27. The CCS department within the City are called initially. If out of hours this is then referred to Hackney, who request accommodation from Tower Hamlets. If the child is not resident within the City or Tower Hamlets, police will contact the local authority within which the child or young person *lives* and request accommodation. Historically, all accommodation requested has not been provided. The requirement for children to be transferred to overnight

accommodation is only for those who have been *charged and remanded*, where bail has not been granted. Where the pre-charge investigation is on-going, the child remains in the custody suite, although every effort is made to reduce the length of time they are there. With the implementation of the pre-charge bail legislation in April 2017 there has been a vast reduction in children being released on bail, the majority being “Released under Investigation” whilst the investigation of the offence proceeds without the requirement for the child to be on bail.

28. All Custody Sergeants are fully aware of the current process both inside and outside of working hours and this has been shared with City of London Corporation (CoL) staff to ensure wider knowledge of the process. The Standard Operating Procedure (SOP) appears on the Force database. Police are mindful that juveniles should not be detained for longer than needed in accordance with paragraph 1.1 of Code C of PACE and should avoid holding young persons and children overnight in police custody cells unless absolutely necessary.
29. If there are no available spaces within the social services’ remit ‘to house the young person or child at an appropriate site’ then current arrangements to provide a cell ‘in extremis’ could potentially lead to extended periods of time for children in custody.

#### **Detention data for 2018/19**

30. This report includes data which has been collated from custody records over the period of April 2018 to March 2019 of young people and children being detained in custody.
31. The data provided within figure 1, ‘Number of children and young people including 18 year olds in custody 2018/19’ shows for the financial year 18/19, 113 young people were held in custody. Of these, 74 were under 18 and 39 were 18 years of age. This is a 7% decrease on the *total* figure compared to the previous year (121 in 2017/18). For under 18s the decrease is slightly larger and has fallen by 9% between 2017/18 and 2018/19. There doesn’t appear to be any clear patterns of seasonality but levels were highest in March this year. Most under 18s detained in custody during the 2018/19 financial year were 17 years old (25) or 16 years old (19).
32. The length of time young people and children were detained following arrest/caution is shown at figures 3 and 4. The graph covers April 2018 to March 2019. Across the period the average detention period was 08:14 hours with a maximum of 33:47 hours and a minimum of 01:21 hours. The maximum period of detention relates to a 17 year Asian male arrested for a GBH stabbing offence and remanded in custody.
33. In terms of gender, the data shows that 90% (67) of under 18s detained in custody were male.
34. During the recorded period from April 2018 to March 2019 there was one child or young person remanded in custody. In June 2018, a 17 year-old male was



charged with a section 18 assault offence after stabbing someone. To protect the public he would have required moving to secure local authority accommodation but none was available, so he remained in custody. Having been arrested late at night (22:14) investigation of the offence took just under 24 hours and he was charged and remanded the following evening to appear in court the next morning. This is similar to last year when City of London Police also requested the relevant local authority to provide accommodation for one young person who was charged and remanded in custody. Disappointingly, no accommodation was provided in either year by the relevant local authorities for either of the young people and so they remained in City Police Custody.

35. The Concordat for Children in Custody to prevent the detention of children in police stations following charge was signed off in April 2016 and part of that concordat states;

*“After a child is charged with an offence, custody officers have a duty under the Police and Criminal Evidence Act (PACE) to secure the transfer of the arrested child to local authority accommodation; local authorities have a duty to accommodate the child under the Children Act 1989.”*

36. Following a request for secure accommodation, the local authority must do everything within its power to find secure accommodation for the child in question. If the local authority fails to find any secure placements, or reach agreement with the police as to any suitable alternative, for the child then custody officers will have no choice but to retain the child in police custody for the protection of the public.

37. The police are not funded to accommodate under-18 year olds in custody. It is therefore important that local police forces are reimbursed when a transfer to local authority care does not take place, for whatever reason. This reimbursement is a long standing statutory obligation for local authorities. Section 21(3) states:

*“Where a child has been... detained under section 38 of the Police and Criminal Evidence Act 1984, and he is not being provided with accommodation by a local authority... any reasonable expenses of accommodating him shall be recoverable from the local authority in whose area he is ordinarily resident.”*

38. The level of expense for overnight detention must be determined by the police force, and should be based upon the costs of cell use, staffing, healthcare and any other provision required for a detainee. Mechanisms for the recovery of these costs must be determined at a local level and will vary depending upon any existing reimbursement arrangements between police forces and local authorities. The CoLP has commenced recovering costs from Local Authorities for the detention of children after charge when no accommodation was provided by the Local Authority in which the child resides.

## Use of Force on those Under 18

39. To set some context, this relates not specifically to use of force within the custody suite but to those brought into the custody suite where use of force (handcuffs) has already been applied on the street or at the scene. The officers dealing with each instance will have made a dynamic risk assessment in each case and assessed the use of handcuffs as both proportionate and necessary to ensure not only the safety of the individual being detained, but also the safety of the officers and/ or the public. In essence, the decisions regarding the application of force are made before the detainee steps across the threshold of the custody suite.
40. There was an overall increase of 75% in the number of use of force forms submitted between 2017/18 and 2018/19 with the 2018/19 total being 2240. 113 forms involved juvenile subjects – this is 5% of all forms. The youngest person to have force used against them was 12; the male offered active resistance and was handcuffed as well as having unarmed skills and tactical communications utilised against them in the course of an arrest. Five under 18s received an injury as a result of use of force in the 18/19 financial year- all were minor and offered medical assistance, two accepted while three declined and none were hospitalised.
41. CoLP monitors use of force at its Stop and Search and Use of Force working group that meets quarterly. Part of the remit of this group is to identify any issues and trends and address these if appropriate to do so through further training or learning.
42. Taser was used against two subjects under 18 in the 18/19 financial year but not fired. Taser was drawn<sup>3</sup> against a 15 year old male who was a passenger in a stolen vehicle that failed to stop and was pursued by officers before both occupants were arrested. The second incident involved Taser being arced<sup>4</sup> against a 17 year old male found on a stolen pedal cycle who refused to stop or provide details for police, the male offered aggressive resistance and was eventually arrested for handling stolen goods.

## Bail and referral pathways

43. With the Policing and Crime Act 2017 which received Royal Assent in January 2017 and the changes to pre-charge bail that commenced in April 2017, there is now a presumption of release without bail in almost all cases unless the necessity and proportionality test are met. As a result, there has been a clear and definite shift in the CoLP to the use of Voluntary Interviews to investigate offences where children and young persons are involved.

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<sup>3</sup> **Types of TASER use:** **Drawn:** Drawing of Taser in circumstances where any person could reasonably perceive the action as a use of force. **Aimed:** Deliberate aiming of the TASER at a targeted subject. **Red dot:** The weapon is not fired. Instead, the Taser is deliberately aimed and then partially activated so that a laser red dot is placed onto the subject. **Arcing:** Sparking of the TASER as a visible deterrent without aiming it or firing it. **Fired:** The TASER is discharged with a live cartridge installed. When the trigger is pulled, the probes are fired towards the subject with the intention of completing an electrical circuit and delivering an incapacitating effect.

<sup>4</sup> IBID

44. The CoLP has clear referral pathways to City of London Children's Social care through the Force's Public Protection Unit (PPU). Public Protection Notice (PPN) on NICHE, (the Force crime and intelligence recording system) is completed for every juvenile that comes in to custody. These are reviewed by a PPU officer within 72 hours and generally within 24 hours. All PPNs where there are safeguarding concerns, are referred to the Duty Desk at the City of London Children's Social Care via their dedicated duty team email. Additionally, the PPU will refer the report to the Children's Social Care Team within the borough where the child resides. This is documented on the PPN. Once cases have reached the appropriate social care team or referral unit in the appropriate borough, these reports are assessed as per any other referral in line with Pan London Child Protection Procedures and local thresholds.
45. There is no requirement for police to follow up on these referrals unless there is some specific involvement in relation to a S47 or S17 (Child Protection or Child in Need) investigation. This procedure is documented in the CoLP Child Protection Procedures to ensure effective multiagency working and children's safeguarding.
46. It is confirmed that none of the juveniles under 18 arrested during the reporting period 2018-19 reside in the City of London. It should be noted by Members that many of the juveniles who enter the City and are arrested for offences, travel to the City from surrounding boroughs specifically to commit crime and are therefore dealt with by social care teams within the borough in which they reside once due process has taken place in the City.

## **Mental Health Crisis in Custody**

### **Background**

47. The policy covering guidance within custody on mental health is the Police and Criminal Evidence Act 1984 (PACE) which states below:

*"It is imperative that a mentally disordered or otherwise mentally vulnerable person, detained under the Mental Health Act 1983, section 136, be assessed as soon as possible. A police station should only be used as a place of safety as a last resort but if that assessment is to take place at the police station, an approved mental health professional and a registered medical practitioner shall be called to the station as soon as possible to carry it out."*

48. The Policing and Crime Bill 2017 received Royal Assent in January 2017 with positive implications for Children and Young Persons detained under section 136 Mental Health Act (MHA) 1983 with reference to the use of Police Stations. An amendment to the MHA 1983 now includes;

#### *Section 136A Use of police stations as places of safety*

- (1) A child may not, in the exercise of a power to which this section applies, be removed to, kept at or taken to a place of safety that is a police station*  
*2) The Secretary of State may by regulations—*

*(a) provide that an adult may be removed to, kept at or taken to a place of safety that is a police station, in the exercise of a power to which this section applies, only in circumstances specified in the regulations;*

*(b) make provision about how adults removed to, kept at or taken to a police station, in the exercise of a power to which this section applies, are to be treated while at the police station, including provision for review of their detention.*

49. The Royal Assent of the Policing and Crime Bill 2017 has also;

- Reduced the maximum duration of detention from 72 hours to 24 hours for the purposes of an assessment.
- Extended police powers to act quickly to detain and remove people experiencing a mental health crisis.
- Included the requirement for police officers to consult health professionals prior to detaining someone under the Act's provisions (if practicable).

50. CoLP does not use Police Custody as a place of safety for any persons detained under section 136 of MHA 1983.

51. The Health Care provision within CoLP Custody suites is provided by G4S. CoLP's contract with G4S for health-care professionals (HCPs) is a partially on call service where G4S provide an HCP on site between 0700-1900hrs but otherwise operate on an on call basis with a call out time of one hour.

52. In May 2017 the CoLP adopted the THRIVE project definition for vulnerable persons;

*"a person is vulnerable if as a result of their situation or circumstances, they are unable to take care or protect themselves, or others, from harm or exploitation."*

53. In November 2018 HMICFRS released the report 'Policing and Mental Health: Picking up the Pieces.' To understand how effective forces are at protecting and helping those with mental health problems, they reported on how well forces:

- Identify people with mental health problems when they first contact the Force;
- Identify and record the number of cases involving people with mental health problems to provide the right support; and
- Make sure expert help is available from other organisations, in particular health professionals

54. This was achieved by undertaking the following:

- Reviewing crime files with vulnerable victims and suspects with mental health problems.

- Speaking with frontline officers, Force control room staff, supervisors and police leaders.
- Holding focus groups in each Force with mental health experts, triage staff, ambulance, fire and rescue staff, NHS staff, clinical commissioning group staff and mental health practitioners.
- Commissioning a focus group of people with lived experience of mental ill-health to understand their experiences of contact with police.
- In the strategic briefings at the start of each inspection, senior Force leaders explained how their Force deals with people with mental health problems.
- For the first time ever, a review of all Force management statements (FMSs), in which forces set out their current demand, future demand, capacity and capability in relation to mental health

55. The following recommendations were put forward by HMICFRS. (It should be noted by Members that all recommendations from HMICFRS inspections are monitored and scrutinised through your quarterly Police Performance and Resource Management Committee chaired by Deputy James Thomson. A report on all recommendations is submitted to this Committee and an update tracker of progress is maintained and presented to Members):

- By January 2019, the NPCC lead for mental health and the College of Policing should draft and agree a new national definition of mental ill-health. This should be included within the new national strategy on policing and mental health that they are developing together. All forces should then adopt this definition as soon as reasonably practicable. The definition is as follows:  
*“Any police incident thought to relate to someone’s mental health where their vulnerability is at the centre of the incident or where the police have had to do something additionally or differently because of it.”*  
Force response: CoLP have included the new definition in the updated Mental Health SOP.
- By December 2019, forces should develop a better understanding of their mental health data, and the nature and scale of their demand. All forces should carry out a 24-hour snapshot exercise, using the new national definition of mental ill-health in Recommendation 1. This would help them see where their mental health demand is concentrated and identify any gaps in their data. Force response: The 24-hour snapshot exercise is due to take place at the end of November 2019
- By August 2019, all forces should review their existing partnership mental health triage services to assess their effectiveness, and the environment they are operating in. This will help them make decisions about sustainable future services with partners to make sure mental health care needs are being met. If forces find any deficiencies in their triage services, they should take steps to address them as soon as reasonably practicable. Force response: the Force has set up a joint suicide prevention action plan with the Corporation and are part of the Suicide Prevention Strategy Group

within the Corporation. The Street Triage model (see below) is reviewed and discussed at this meeting and the Force is now working on future funding arrangements for the ongoing utilisation of this facility. Review of mental health triage within custody take place at the three-monthly custody management group meetings.

- By August 2019, all forces should review their mental health training programmes, using the College of Policing learning standards, to establish whether they are giving their officers the right tools to understand and respond to people with mental health problems. If forces find any deficiencies in their training programmes, they should take steps to address them as soon as reasonably practicable. Where forces invite outside organisations to train staff, they must make sure its content and quality are checked against College of Policing APP. Force response: The force's mental health training is constantly subject to review as part of the training section of the Force Vulnerability Action Plan.

### **Street Triage Scheme**

56. Ten police forces, including the City of London Police, have been piloting the system of 'street triage' since its inception in 2017. The scheme involves a police officer and mental health worker acting in partnership to assess people on the street and, where necessary, take them directly to a health care facility.
57. Within these schemes, mental health professionals provide on the spot advice to police officers who are dealing with people with possible mental health issues. This advice can include an opinion on a person's condition, or appropriate information sharing about a person's health history. The aim is, where possible, to help police officers make prompt and appropriate decisions, based on a clear understanding of the background to these situations and of the individuals they are dealing with. In addition to having benefits for the individuals, benefits in terms of reducing time in custody, places of safety and speeding up the end to end process of dealing with the individual are also clear. This has clear implications for increasing efficiency. However, ultimately the focus is on the welfare of the person coming into contact with the police.
58. The City of London Police now has 5 mental health professionals that deploy with Response Officers every day from 1700hrs – 0300hrs. This has now moved from the original pilot to a permanent initiative currently funded by East London Foundation Trust (NHS Homerton Hospital), City of London Corporation and the City of London Police.
59. Other pathways of care have been opened up to those in crisis and the vulnerable, the emphasis being on individual care for the person being assessed. They include crisis care team referrals, home treatment team referrals, GP referrals and alternative care plans introduced by the nurse. The figures suggest that the scheme continues to be highly successful: for the year from 1/07/18 to 30/06/19 utilisation of street triage avoided 163 S136 detentions.

### Street Triage Statistics For the period 01/07/18 - 30/06/19

Total number of 136's avoided by MHST team	163
Total number of 136's issued whilst MHST on duty	47
Number of 136's issued outside of MHST duty times	95
Total of 136's for this period	142

Total of 136's there would have for this period if there was <u>no</u> MHST	305
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Total number of MH interventions made by MHST	334
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60. All referrals and if necessary S136 detentions are followed up the next day by the nurse and each patient is updated on the NHS database.

## **Current Position**

### **Mental Health Process**

61. The City of London Police has two standard operating procedures (SOP's) that relate to mental health, these are: Dealing with Mental Health Incidents and Medical and Mental Health Issues in Custody. These policies provide a framework for dealing with aspects of managing and dealing with persons in police detention to the required standard, as set out in Code C of the Police and Criminal Evidence Act 1984, the Code of Ethics and the College of Policing Authorised Professional Practice (APP) for detention and custody. Both of these procedures are regularly reviewed and updated and are readily accessible for members of staff on the Force's intranet.

62. When a person has been arrested and it becomes apparent whilst the person is in custody they are suffering from a mental health issue, the custody officer must implement the procedure for a mental health assessment. The custody officer will request the Health Care Practitioner (HCP) for an initial assessment of the detained person and if found the detained person is displaying symptoms of a mental health crisis the HCP will request the attendance of a Liaison and Diversion nurse to conduct an assessment. (If the L&D nurse happens to be present within the Custody suite at the time the custody officer believes an assessment is required, the assessment of the HCP can be bypassed and the assessment can be directly referred to the L&D nurse). If the L&D nurse believes a further assessment is necessary they will contact an Authorised Mental Health Practitioner (AMHP) and doctor to conduct a full assessment. On their decision only and not the police, it will result in the detained person being transferred to a

designated Mental Health Trust Hospital for further evaluation or to remain in custody for continuation of the criminal process.

63. If mental health illness has been exhibited and diagnosed whilst in a public place, the City of London Police will not use custody or the police station as a place of safety. Enhanced engagement and liaison by the Communities Team has established an effective working relationship between the London Ambulance Service (LAS) and the Mental Health Trust at the Homerton Hospital. All parties have agreed to a working guide:

- LAS will attend S.136 MHA 1983 calls within half an hour. If LAS are unable to provide a priority ambulance and if there are exceptional circumstances, CoLP will convey a person to Homerton Hospital.
- Homerton Hospital will accept the S.136 within one hour of police attendance.

64. The Force has taken the initiative by using a specific point of contact within the community and partnerships team to take the lead in S.136 MHA 1983 issues, developing a liaison with the London Mental Health Trust, recording encounters, increasing links with external organisations and continuing communications with our nominated place of safety, the Homerton Hospital. This officer has developed a strong working relationship with the Deputy Borough Director of East London Foundation Trust (NHS) and has monthly meetings to assess the service delivery. The Homerton have also recruited a S.136 Mental Health Nurse dedicated to the mental health suite which significantly benefits officers as there is a dedicated point of contact for them rather than having to deal with the Senior Duty Nurse.

65. In the rare circumstances when the Homerton Hospital cannot accept and individual, officers are aware through policy and procedure to use the command and control structure to establish an alternative space at another authorised mental health hospital near to the City, such as St Thomas', The Royal London or University College Hospital (UCH).

### **Mental Health Data**

66. Police are often first to attend a report to provide reassurance, ensure public in the vicinity are safe and to provide an initial response to any person requiring assistance.

67. Incidents are recorded on a Force form, documenting whether action was taken under section 136 Mental Health Act 1983 or Section S.5- S.6 Mental Capacity Act 2005, providing a detailed account of police action and hospital interaction.

68. During the period of April 2018 - March 2019, 135 people were sectioned under S.136 MHA 1983; this is a decrease of 23 from 158 for the previous financial year. A reduction of 15%. 9% (12) of these were under the age of 18. Of the 135 people, 83 were male and 52 female. All were conveyed to a place of safety (POS), 65 by Ambulance, 68 by a police vehicle, 1 by other means and 1 by unknown means (not recorded).



Category	2017/18	2018/19	Number Change
Male	107	83	-24
Female	51	52	1
Under 18	8	12	4
Conveyed** to POS by Ambulance	94	65	-29
Conveyed** to POS by Police Vehicle	61	68	7

## Conclusion

69. This report presents information to Members of the Force's current position on two key areas prompted by a number of HMICFRS and IOPC recommendations, but also recognising that these are important areas on which Members would wish to be informed and have oversight. The data presented in this report provides a comparison to be made to the previous year and potential issues or trends highlighted where previous year's data is available. The Force continues to develop its framework for collecting data in this area in order to monitor future trends.
70. The City of London Police and City of London Corporation have processes in place to consider the welfare of children entering the custody environment and the Force has further demonstrated its commitment by signing up to the 'Welfare of Children in Custody Concordat. However, whilst only one child was remanded in custody this financial year compared to four last year, the request to the relevant local authority to provide secure accommodation yielded the same response as last year, namely none was provided.
71. Data is captured by the Custody Manager on all children and young people entering police custody and shared with senior management on a monthly basis, allowing on-going scrutiny and the identification of any potential issues.
72. The Force has standard operating procedures in place to manage mental health crises both in custody and outside on the street. CoLP does not use police cells as a place of safety for those identified as needing assistance on the street, with tried and tested processes in place under the agreement with the Homerton Hospital.

## Appendices

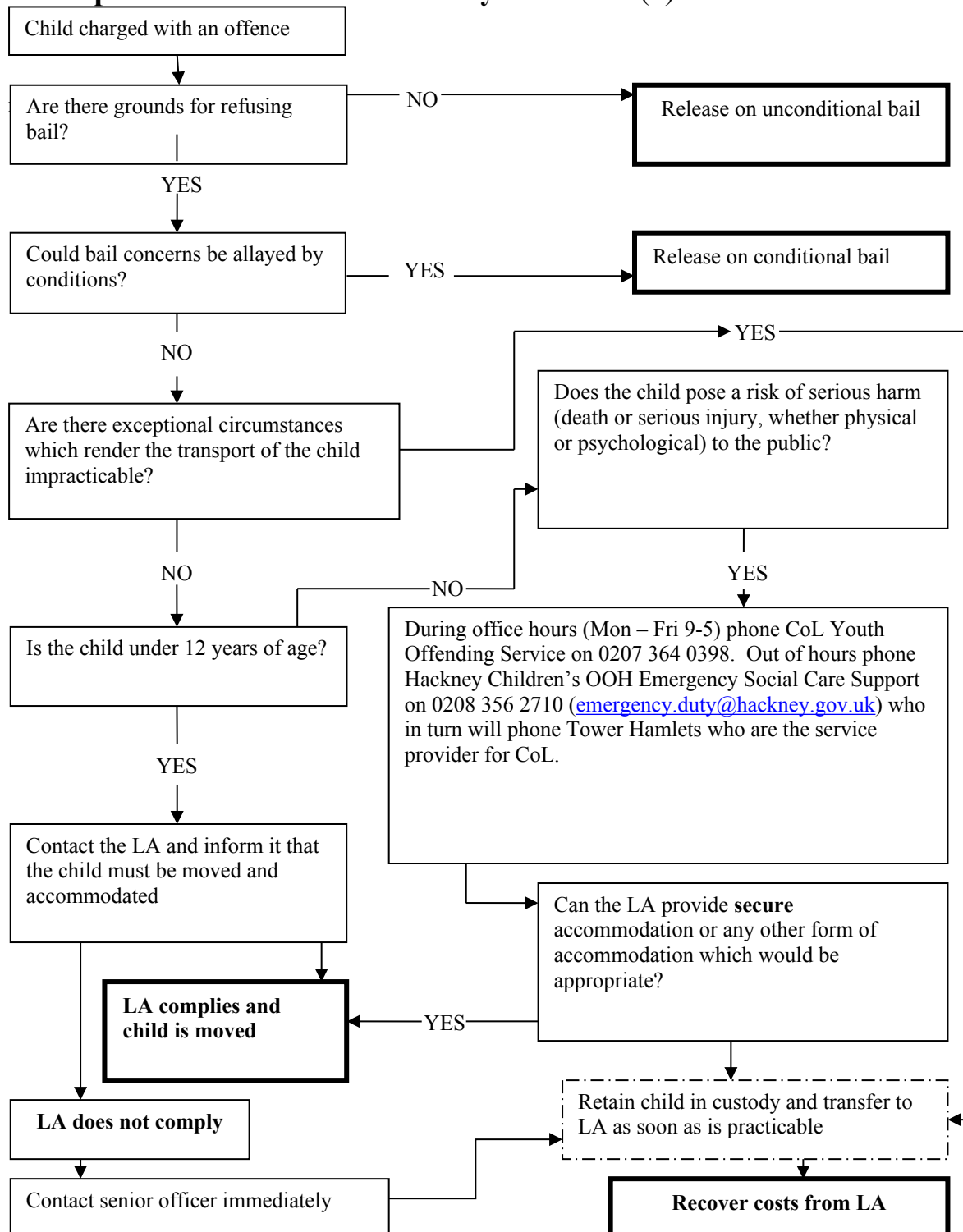
**Appendix 1**- flow chart of custody procedure for detained Young Person and Children

**Appendix 2** – Custody Data- source Niche RMS

Appendix 1- flow chart of custody procedure for detained Young Person and Children



**Police process for children in custody PACE s.38(6)**

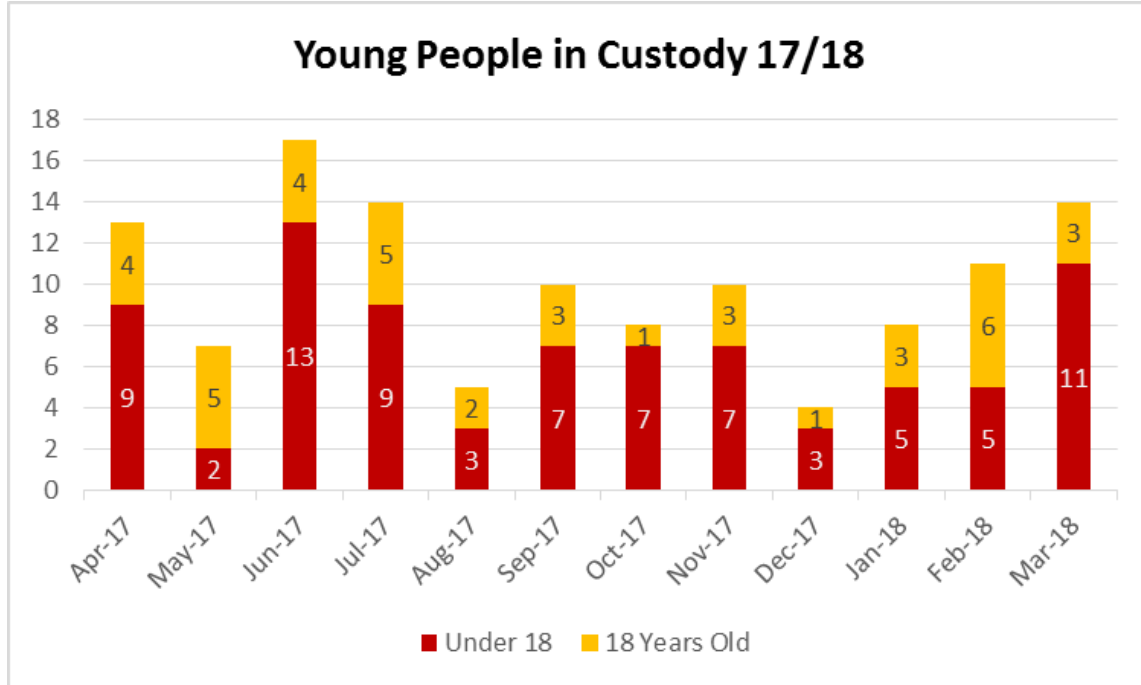


## Appendix 2 Custody Data: Children and Young Persons

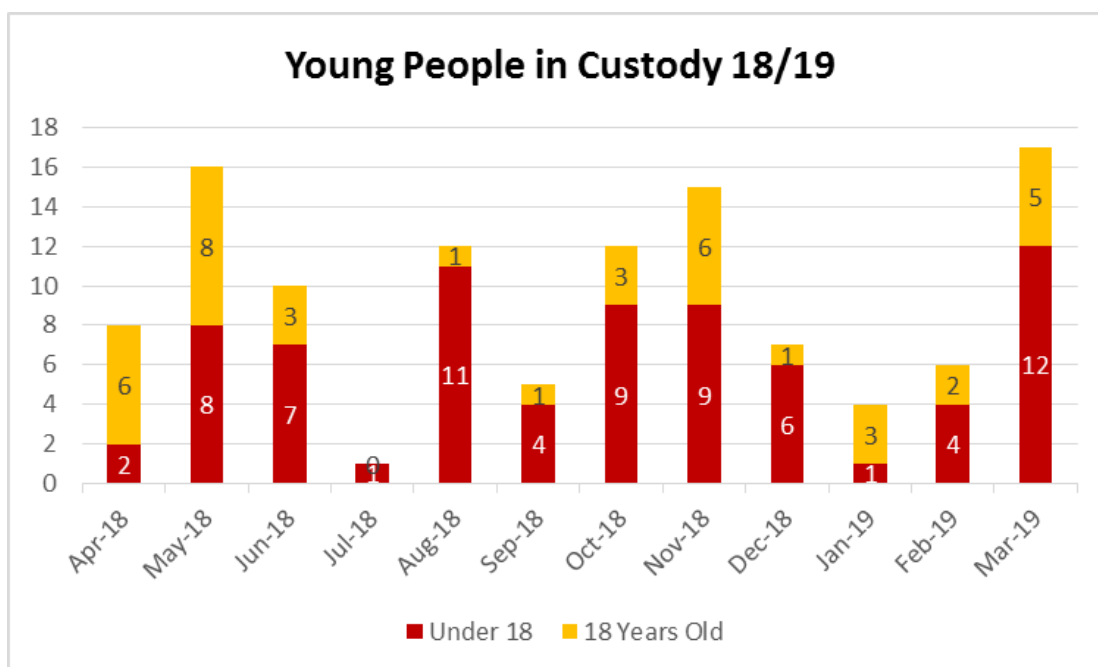
### 1: Number of children and young people (including 18 year olds) in custody

#### For the financial year 2017/2018

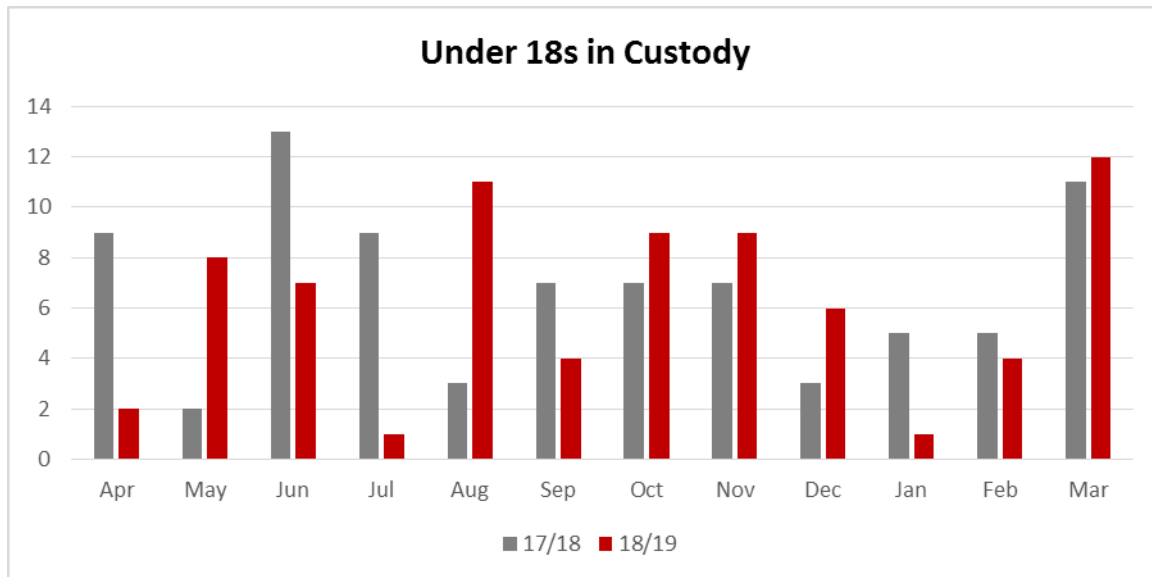
121 young people were held in custody, 81 under 18 and 40 who were 18 years of age. This is a 17% increase on the total figure compared to the previous year



**For the financial year 2018/2019** - 113 young people were held in custody, 74 under 18 and 39 who were 18 years of age. This is a 7% decrease on the total figure compared to the previous year. Please note figures are particularly low in July 2018 due to the custody suite being closed for much of the month.

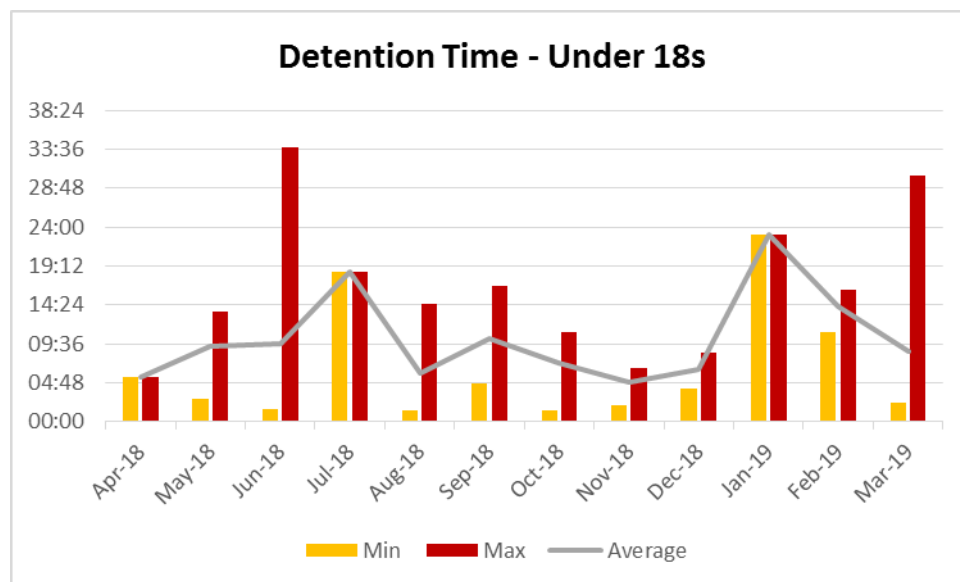


## 2: Population of children under 18 in Custody 2017/18 compared to 2018/19



For under 18s the decrease is slightly larger decreasing 9% between 2017/18 and 2018/19, there doesn't appear to be any clear patterns of seasonality but levels were similarly high in March both years. Again levels are low in July 2018 due to custody suite closure.

## 3: Length of time detained (under 18s)

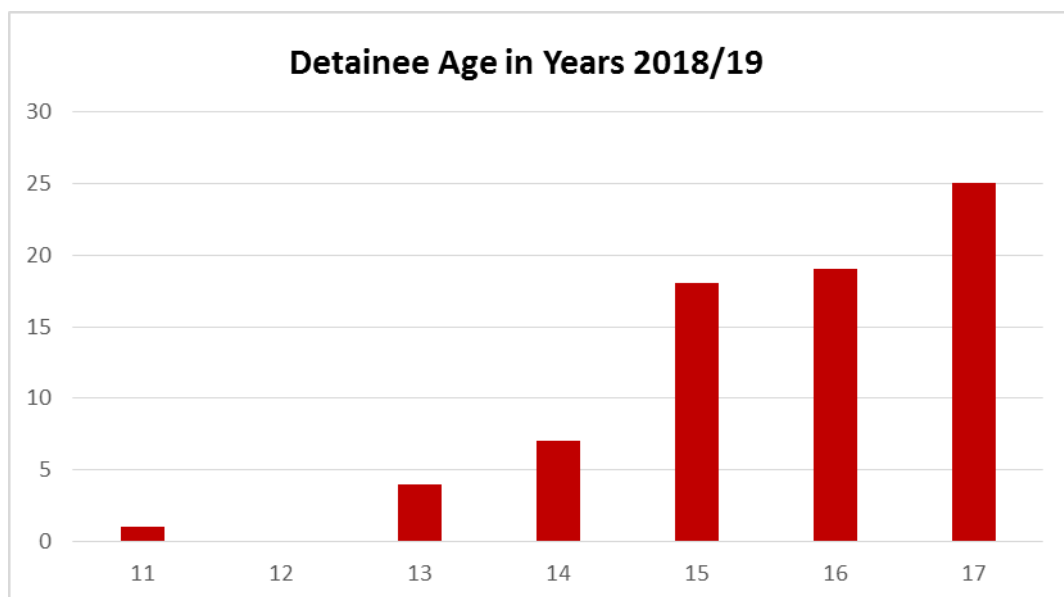


This graph shows the minimum and maximum time detained for children under 18 held in custody. The detention period covers from the time detention is authorised to release. Across the period the average detention period was 08:14 with a maximum of 33:47 and a minimum of 01:21. **The maximum period of detention relates to a 17 year old Asian male arrested for a GBH stabbing offence and remanded in custody.**

**4: Average time spent in police custody by under 18s April 2018 – March 2019 including the average detention time for children charged and remanded that remain in Police Custody as no secure accommodation was provided by the Local Authority.**

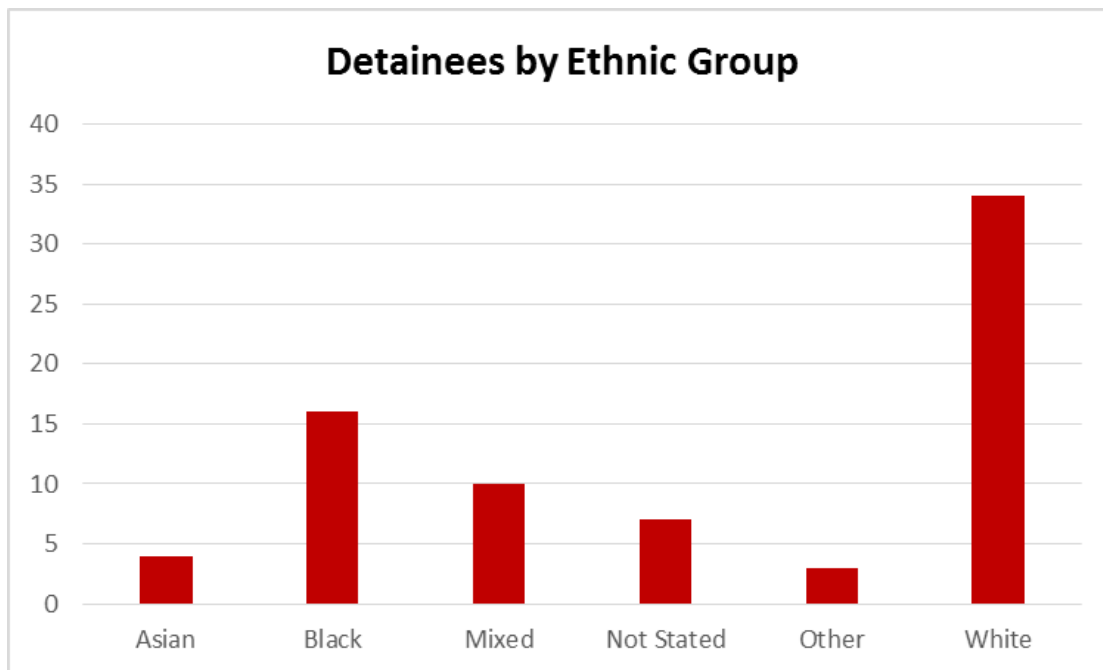
	Min	Max	Average	Count
<b>Apr-18</b>	05:29	05:30	05:30	2
<b>May-18</b>	02:50	13:30	09:21	8
<b>Jun-18</b>	01:28	33:47	09:40	7
<b>Jul-18</b>	18:27	18:27	18:27	1
<b>Aug-18</b>	01:21	14:35	05:56	11
<b>Sep-18</b>	04:38	16:48	10:17	4
<b>Oct-18</b>	01:25	11:04	07:17	9
<b>Nov-18</b>	02:00	06:38	04:46	9
<b>Dec-18</b>	03:59	08:27	06:23	6
<b>Jan-19</b>	23:01	23:01	23:01	1
<b>Feb-19</b>	10:57	16:13	14:13	4
<b>Mar-19</b>	02:23	30:24	08:40	12

**5: Children and young people in police custody by age 2018/19**



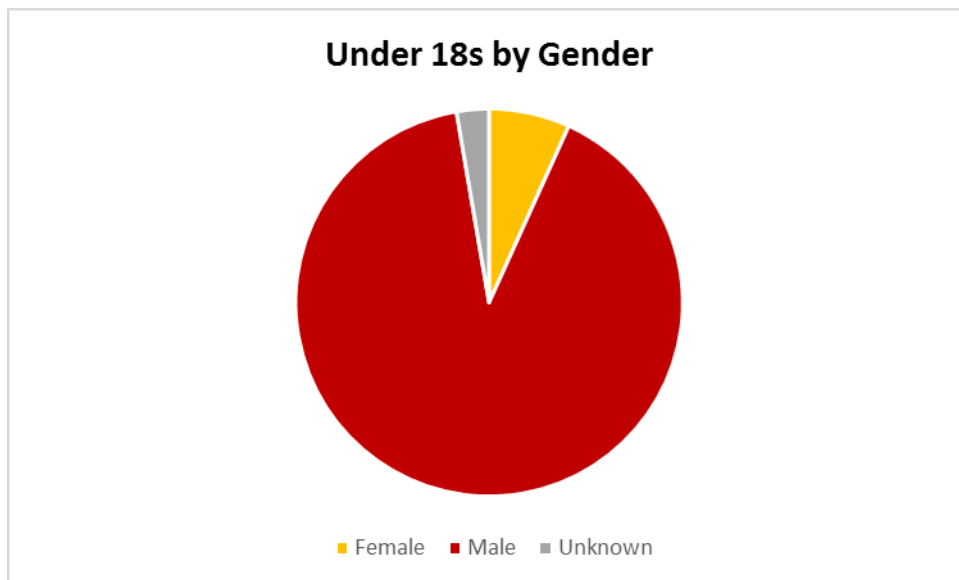
Most under 18s detained in custody during the 2018/19 financial year were 17 years old (25) or 16 years old (19).

**6: Under 18s in police custody by ethnicity 2018/19**



The majority of under 18s held in custody in 2018/19 self-defined as white (34).

**7: Under 18s in police custody by gender 2018/19**



The majority of under 18s held in custody were male (67).