

Right Care
Right Person



Right Care, Right Person

Supt Helen KENNY



Home Office
BUILDING A SAFE, JUST
AND TOLERANT SOCIETY



Department
of Health &
Social Care

NHS
England

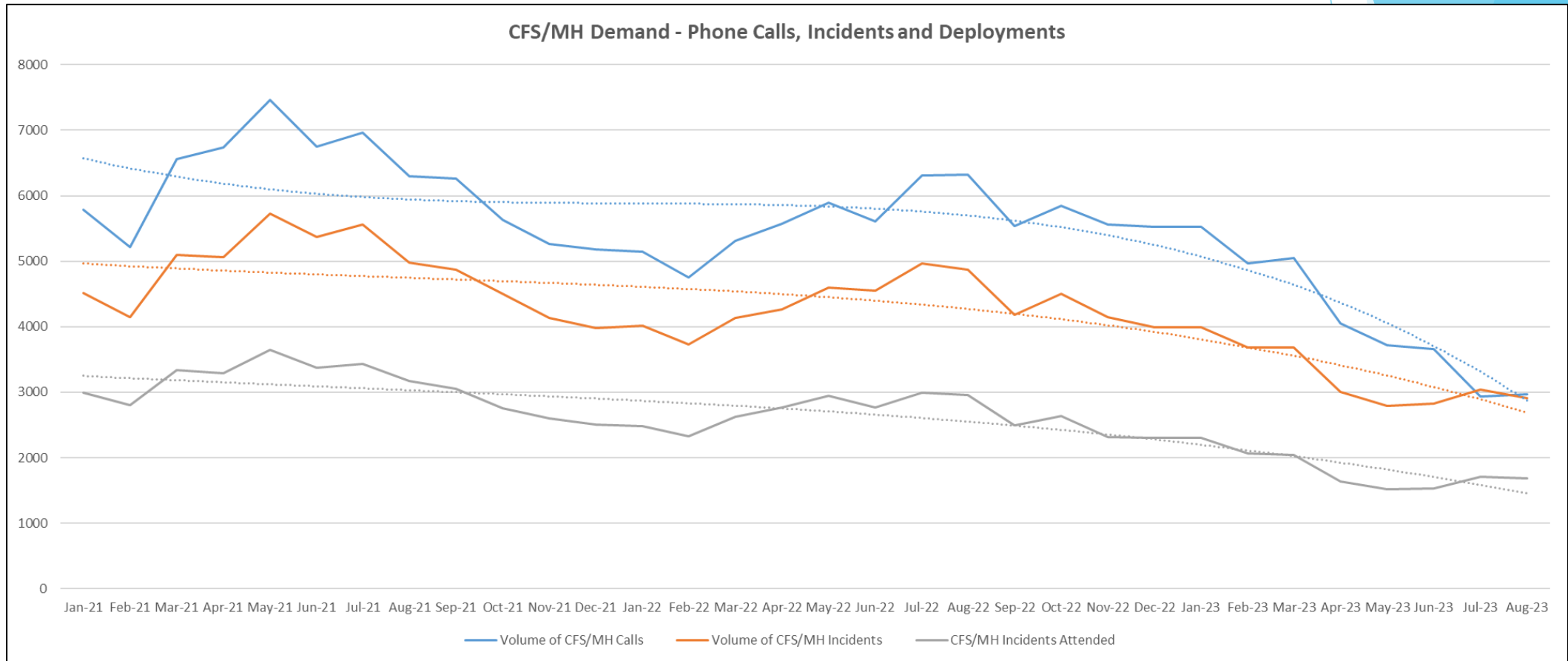


Right Care Right Person (RCRP)

The **National Partnership Agreement (NPA)** was published on 26th July 2023 and sets out a collective agreement to work to end the inappropriate and avoidable involvement of police in responding to people with mental health needs, where there is no criminality or real and immediate risk to life or risk of serious harm.

Signed by the Home Office, Department of Health & Social Care, National Police Chiefs' Council, College of Policing, Association of Police and Crime Commissioners, and NHS England, the NPA sets out the principles that local areas are encouraged to adopt to implement Right Care Right Person (RCRP) as well as other approaches aimed at improving effective local partnership working between the police, health and social care, and the experience of people requiring urgent mental health care.

Trend of Concern for safety, phone calls, incidents and deployments over time



There has been a downward trend in CFS, incident volumes, and deployments over the last year even before RCRP processes were introduced highlighting the scrutiny and pro-active direction CM has in managing these incident types.

RCRP in Thames Valley

- ▶ **Three areas of RCRP adopted:**

1. Concern for safety (welfare checks)
2. AWOL from psychiatric hospitals
3. Walk outs from healthcare settings

- ▶ **Three areas not adopted: - no start date agreed**

1. Section 136
2. Voluntary mental health patients
3. Transportation / conveyance

- ▶ **Not applicable to children U'18**

Call Handler Toolkit








CONTACT MANAGEMENT

Right Care, Right Person
& Requests for Assistance

Start

What are you dealing with?

Concern for Safety

Mental Health

Missing Person

This toolkit is to aid your decision making, it may not cover all scenarios. If you are unsure, please discuss the incident with your supervisor.

Medical Matter Start Again

(Partners)

- We should be attending if there is an Immediate threat to life, life saving opportunity immediate risk of Harm or a weapon being used or threatened
- If this is a medical risk only, then Ambulance are the most appropriate resource
 - Can they deal alone?
 - If the Police are required what is the requirement? Do the Police have a specific power to be used?
 - Consider directing the caller to redial 999 and ask for Ambulance
- Cannula Removal – If someone has left the hospital with a cannula then this should be treated as a medical matter and referred to the Ambulance Service.
- If there are warnings at an address, what are they? Who do they relate to? How old are they? Can an approach be made to confirm or preclude any threat.

Threats of Suicide

Location Unconfirmed

Mental Capacity Act

Police Required

Maybe Required

Not Required

Someone in Mental Health Crisis Start Again

(partner)

- We should be attending if there is an Immediate threat to life, life saving opportunity immediate risk of harm or a weapon being used or threatened
- If someone is in Crisis we need to ensure that this person is getting the best help from the most appropriate agency.
- Is the person in distress in their own home? If so, we have no powers under the Mental Health Act or the Mental Capacity Act
- Has the person requesting assistance sought assistance from Crisis Teams or an Approved Mental Health Professional (AMHP)?
- Callers should be directed to suitable partner agencies such as GP, Crisis Team or NHS 111

Mental Capacity Act

S.135 & Voluntary Assessments

S.136 Requests from A&E

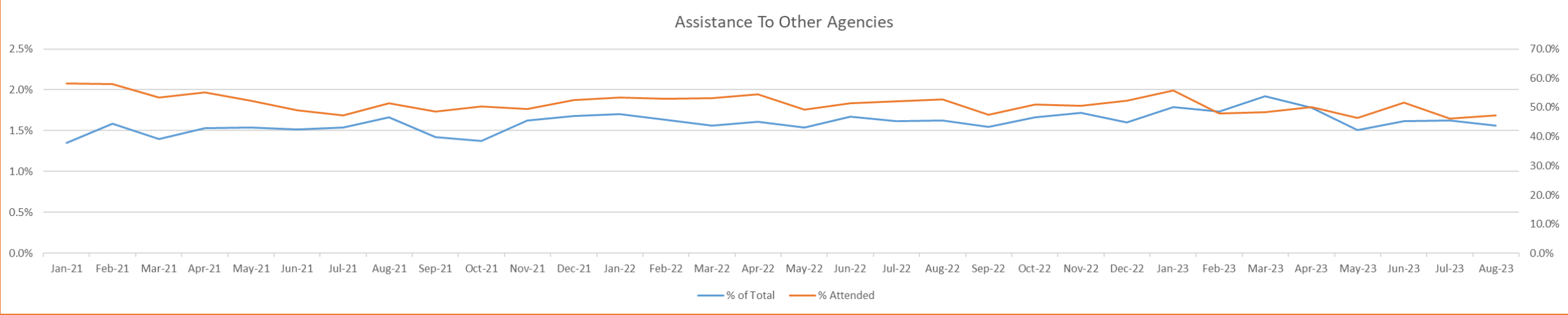
Useful Contact Details & Resources

Police Required

Maybe Required

Not Required

Assistance to other Agencies – Proportion of incident volumes compared to total incidents and proportion attended by Month since 2021



The proportion of assistance to other agencies recorded incidents follows the same trend as the last couple of years. There were 701 incidents created in August 2022, compared to 596 in August 2023 with around 50% of all incidents being attended in both consecutive periods.

RCRP in Thames Valley - Strategic engagement

- ▶ Chief Constable meeting with Mental Health Chief Executives (April 2023)
- ▶ TVP meeting with Milton Keynes executive (Health and Local Authority)
- ▶ Police and Crime Commissioner Strategic Management Board (June 2023)
- ▶ Mental Health Strategic Partnership meeting (June 2023)
- ▶ Local Authority Community Safety Managers (July 2023)
- ▶ Letter and briefing pack to all partners (July 2023)
- ▶ TVP and NHS England meeting to discuss next steps (July 2023)
- ▶ SCAS and Fire and Rescue (July 2023)
- ▶ Local Authority Chief Execs and Directors of Adult Social Care (July 2023)
- ▶ ICB Chief Execs (August 2023)
- ▶ Safeguarding independent chairs (Sept 2023)
- ▶ Independent Office of Police Complaints (IOPC)
- ▶ Thames Valley Coroners
- ▶ Local multi agency operational RCRP implementation groups setting up
- ▶ Strategic Management Group to convene from November 2023 Joint TVP & NHS England chair

Further updates since last board:

- ▶ As per the provision of trends provided in slide 3, there is a reduction in calls coming into policing post April go live date. This is positive as it hopefully is showing that people are ringing the police when there really is a policing need rather than a health need.
- ▶ Further clarification of the governance is summarised as below:

There are multi agency operational subgroups set up across Thames Valley. Oxon, Bucks, MK and Berks. All have met at least once, all have the same TOR. The Chairs of these meetings attend the Thames Valley RCRP Strategic Management Group which is chaired jointly by senior police officer and NHS England, which will monitor ongoing implementation and our progress against the expectations set within the RCRP National Partnership Agreement.
- ▶ The chair of the Berks implementation group is Teresa Wyles (NHS). West Berkshire Council are represented on this group.

Further updates since last board:

- ▶ Assessment of the impact on partner agencies is reviewed in the local implementation groups. Some new processes have been implemented by partners as a consequence. Feedback from all groups is positive and many report that their initial fears of what the impact may have been has not been the reality. BOB ICB Survey response has been shared with groups also that picks up on this impact.
- ▶ In order to understand the impact on patients, case studies tracking an individual experience are being considered at implementation group level to identify both learning and good practice. Escalation process does exist for examples where it is perceived that the wrong decision were made by police call handler on police attendance.

Updated TVP Leads:

- ▶ TVP RCRP Strategic Lead - emma.garside@thamesvalley.police.uk
- ▶ TVP Mental Health Lead - penny.jones@thamesvalley.police.uk
- ▶ Point of contact within control room to escalate concerns - mark.rowe@thamesvalley.police.uk