

Pencadlys Heddlu
Heol y Bont-faen
Penybont
CF31 3SU

Police Headquarters
Cowbridge Road
Bridgend
CF31 3SU

Mewn argyfwng ffonwch 999
tel arall, ffonwch 101
www.heddlu-de-cymru.police.uk

In an emergency dial 999
Non-emergencies dial 101
www.south-wales.police.uk

Reference: [REDACTED]

To: Mr D Regan
HM Assistant Coroner

By email to: [REDACTED]
Coroner's Officer
[REDACTED]

Dear Mr Regan,

**Re: Regulation 28 Report to Prevent Future Deaths
Inquest into the Death of Leighton Alan Dickens**

I write on behalf of the Chief Constable of South Wales Police in response to the Prevention of Future Deaths Report issued on the 29th September 2023 following the conclusion of the inquest into the death of Leighton Alan Dickens who tragically died on the 14th October 2020.

I have carefully considered the entirety of the report and wish to reiterate that as an organisation we continue to take seriously the need to meaningfully reflect on the evidence heard during Mr Dickens inquest. We are committed to ensuring the duty of care shown by our officers to the individual concerned is always paramount and welcome any findings and recommendations to ensure the highest standards of service are maintained.

This response will be focused on the points raised in section 5 of the Preventing Future Deaths Report, and I will address each concern in turn as set out below:

(1) Following the withdrawal of the mental health triage support provided to the police by mental health nurses, the medically qualified sources of urgent support available to police officers to assist them to safeguard the public are limited to the mental health crisis teams.

The previous Mental Health Triage scheme provided a contact for medically qualified advice based in the police control room on which police decision makers and front-line officers would be able to use to assist real-time urgent decisions on mental health related incidents.



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[REDACTED] Prif Gornstabl | Chief Constable

However, this advice was available during a core set of hours based on demand profiling, which was 09:00 until 01:00 hours. As such it would not have been available to the attending officers in this matter.

The scheme did not extend to providing legislative advice on the Mental Health Act or other applicable legislation such as the Mental Capacity Act.

On withdrawal of the service, discussions did take place between senior leaders in both Health service and South Wales Police to manage the arrangements for the provision of advice.

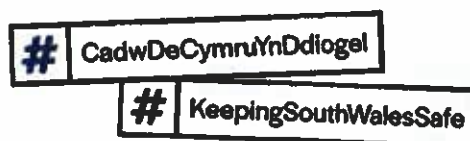
Since the withdrawal of the service, the South Wales Police 'Mental Health – Section 136' policy has been updated. The Policy defines the treatment of people by South Wales Police officers under the Mental Health Act 1983. The policy also provides guidance to officers, and staff in the management of mental health concerns, and on the partnership arrangements in responding to mental health related incidents.

Policy section 1.2 (Mental Health – Section 136) defines the specific requirement for police to seek advice from a health professional who are maintained on an agreed list, before detaining a person under s136 of the Mental Health Act. The policy outlines both the legislative and practical considerations in obtaining advice for use in decision making on s136. Within this section of the policy, it contains the contact details for each crisis team in the respective health board area should urgent advice be required.

Following the withdrawal of mental health triage support there remains a dedicated pathway for police officers and staff to obtain urgent (24-hour) medically qualified advice to inform police decision making on the use of s136. This does satisfy the requirements for advice to be obtained as outlined by the Mental Health Act Codes of Practice.

'When deciding that detention may be necessary, the police may also benefit from seeking advice before using section 136 powers in cases where they are unsure that the circumstances are sufficiently serious for using these powers. Local protocols should set out how this advice can be provided and who the police should contact, including outside of normal business hours.'

(Mental Health Act Codes of Practice 16.23)



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In response to this Regulation 28 report, extensive force communications have been published which reinforces the arrangements for seeking urgent medically qualified advice prior the use of powers under s136. These included formal communications via Weekly Orders, signposting on intranet and follow up by our Mental Health liaison Officers. This communication also highlights additional points of learning as a result of issues arising in this case.

South Wales Police employs 3 dedicated Mental Health Liaison Officers (MHLO's) and a Strategic Force Mental Health Advisor, who as part of their responsibilities engage with responding officers, educate on approved practice, identify areas for improvement and escalate concerns both internally and with partners.

(2) The crisis teams may not be readily available and deal with their own case load. Whilst I cannot provide specific comment on behalf of the Health Board on the capacity of their Crisis Teams, I can provide assurance that the concerns within the regulation 28 notice have been raised directly with [REDACTED] Director of Operations, Mental Health Clinical Board.

Formal arrangements for the provision of advice to police by crisis teams are contained within existing protocols between South Wales Police and the respective Health Boards.

As a result of the Regulation 28 Notice, the accessibility of these crisis lines is monitored daily by the force Public Protection Department to identify adverse incidents and accessibility. Information pertaining to the use of s136 powers is also scrutinised in internal strategic boards and partnership forums, such as the Mental Health Act Monitoring Group.

This monitoring is supported by governance and routes of escalation which include the Welsh Chief Officers Group on Mental Health, with Senior Responsible Officers attending from NHS Wales, WAST, Welsh Government and others. The meeting is chaired by the Assistant Chief Constable Jason Davies and provides an opportunity to escalate concerns.

The Purpose of the group as agreed in the Terms of Reference include:



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Jeremy Vaughan. Prif Gornestabl | Chief Constable

'...to provide a forum to promote effective multi-agency working for people with mental ill-health, crisis, distress and/or a learning disability coming into contact with Criminal Justice agencies'.

South Wales Police and Health have an interest in the availability of advice for decision making on the use of s136 (MHA 1983), to ensure its use is necessary and proportionate to the circumstances and a Mental Health Act Assessment (MHAA), an obligation of the crisis teams to conduct, is necessary.

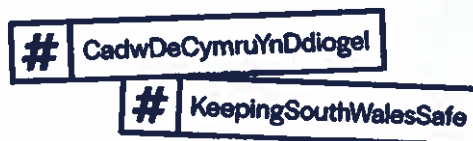
Officers should consult with Health Care Practitioners, prior to detaining someone, however, there remains the contingency if this is not practical, and the information and intelligence, risk and threat assessment known indicate it is necessary, to detain, and remove to a place of safety as defined by Section 135 (6) of the MHA 1983.

(3) The alternative support available from a mental health tactical adviser, is not provided by a clinically qualified member of staff and does not have access to the PARIS mental health records system.

Mental Health Tactical advisers are not currently deployed within South Wales Police, and it is fully accepted that Mental Health Tactical Advisers will not be clinically qualified members of staff with access to PARIS. The implementation of the provision would not replace the need to consult with a suitably qualified professional which can include, a Doctor, Nurse, or Approved Mental Health Professional (AMHP), who would have access to PARIS.

It remains the intention in the second quarter of 2024 to introduce this scheme which will be based on similar arrangements in other police forces. The notion of the scheme is to offer additional training to officers and staff in key roles, such as our Public Service Centre, on relevant mental health legislation and associated force policy. The tactical advisor's remit is to offer advice to colleagues on the direction provided by force policy.

These will not serve as substitutes for our dedicated Mental Health Liaison Officers as mentioned earlier.



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Phil Constable | Chief Constable

(4) The intended replacement of the mental health triage support was to have been by the "111 press 2" service. This has not been put in to place and there is no current timescale for it to be put into place.

The 'NHS 111 Press 2' service is now operating across Wales. It is available 24 hours a day, 7 days a week for all ages. It is a means for individuals, who have an urgent mental health concern about themselves or about someone else, to seek help and advice.

Since the concerns raised in this inquest, we have worked with NHS Wales to develop an 'NHS 111 Press 2 - Police Contact Protocol'. This provides clarity on how a range of professionals, including the police can access advice relating to urgent mental health concerns.

This protocol outlines that where a police officer is seeking advice in relation to the use of section 136 (MHA, 1983) they should continue to obtain this advice from the established crisis contact points and not NHS 111 Press 2. However, it has been agreed within the protocol that should an officer come through to NHS 111 Press 2 and it is established that they are seeking section 136 advice that they will be signposted to the appropriate crisis line by the call taker.

The Implementation of '111 Press 2' has resulted in a more consistent approach for advice, which is available 24 / 7, with the ability to escalate concerns directly with local Crisis Teams.

(5) This leaves officers with limited sources of qualified mental health advice, with access to relevant clinical records, when responding to the risks posed by those suffering from mental health crisis within the community.

When the Mental Health Triage was withdrawn from the South Wales Police force control room this was widely communicated throughout the organisation for the awareness of operational officers.

As a police force we want to be confident that procedures are known to officers, and that they have had sufficient training. The following is a summary of the mental health training



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provision for officers which exists to prepare them to respond to mental health incidents in the community.

New Recruits jointly trained with Gwent Police are provided with initial vulnerability training, with all recruits receiving a 180-minute input dedicated to mental health with defined learning outcomes.

South Wales Police officers also receive an additional 60-minute input from the Force Mental Health Advisor around jointly agreed mental health procedures. These include the considerations to be made in responding to vulnerable people and guidance on the use of legislation. This input is also provided to Special Constables, Police Community Support Officers, and newly promoted Sergeants.

In 2024 all police officers attend a newly developed public protection training day which will reinforce key learning points to consider when responding to vulnerable people in the community.

Our Mental Health Liaison Officers, who work daytime hours to facilitate communications with partners, remain based within Operational Police Stations, and are a visible and accessible source of advice.

Training for an effective mental health response is vital to ensure that our officers understand the use of s136 (Mental Health Act), and that they are aware of the need to consult with a healthcare professional prior to detaining a person (if practical). The decision to detain remains that of the police officer and not the healthcare professional providing advice.

Medically qualified advice for officers can be invaluable to a police officer when faced with a person in crisis and the sharing of information and opinion can be relevant to the formation of the officer's final judgement on the need for detention for a person's own protection. As such the force will continue to ensure that we work in partnership with NHS Wales and each of the health boards to ensure that processes are effective for officers to obtain advice at any time.



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Whilst progress has been made on several matters discussed above, I appreciate that the response to vulnerable people in our community can always be improved. On behalf of South Wales Police, I provide reassurance that the improvement work continues as a priority to ensure the organisation continues to keep people safe, and they receive the right response from the right agency.

I hope that this response addresses the concerns that you set out in your report, and I am grateful for you bringing them to my attention.

Yours Sincerely

[Redacted Signature]

[Redacted Name]

Assistant Chief Constable
Specialist Crime, Criminal Justice, and Safeguarding Command



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