



[Redacted]
Deputy Assistant Commissioner
New Scotland Yard
Victoria Embankment
London
SW1A 2JL

Professor Fiona J Wilcox
HM Senior Coroner
Westminster Coroners Court
65 Horseferry Road
London
SW1P 2ED

Correspondence by email

Friday, 30th May 2025

Dear

A handwritten signature in blue ink, appearing to read "Professor Wilcox", written over the word "Dear".

Report to Prevent Future Deaths: Mr Oladeji Adeyemi Omishore

On behalf of the Commissioner of Police of the Metropolis, I write to provide a response to the matters of concern addressed to the Metropolitan Police Service (MPS) in your Report to Prevent Future Deaths dated 25th March 2025 following the inquest into the tragic death of Mr Oladeji Adeyemi Omishore.

On behalf of the MPS, may I first of all express my sincere condolences to the family and friends of Mr Omishore and those affected by his death.

I can confirm that the matters of concern you set out within your Regulation 28 report have been carefully considered by senior leaders and practitioners within the MPS and I would now like to formally respond to as follows.

Please note that the MPS response to Matters of Concern 1, 2 5 and 6 is the same.

Matter of Concern 1

"That there is an inconsistency [sic] of approach between call handlers/first responders in the recording of information passed to them by members of the public that may represent a training issue; in this case the mental health matters reported to them".

MPS Response

The MetCC Academy is currently reviewing the relevant content for First Contact training and will be updating lesson plans to ensure where Mental Health is believed or indicated, the operator will ensure this information is included in the remarks at the earliest opportunity.

The MetCC Senior Leadership Team are reviewing whether an amendment should be considered to include this within the “golden line”. A risk assessment will be undertaken before any guidance is implemented.

The MetCC Academy will advise that the National Incident Category List (NICL) code for Mental Health can be used where concerns are raised but not yet confirmed. The changes introduced will focus on reinforcing the importance of including Mental Health indicators in both remarks and NICL codes. This will be implemented in May 2025 for the First Contact Training Course.

Matter of Concern 2

“That the call handlers/ first responders may have a training issue in relation to the importance of recording this information in manner which is likely to be passed on to responding officers by dispatchers, for example in the NICL codes and/ or “golden line”.

MPS Response

See response to Matter of Concern 1.

Matter of Concern 3

“That the above concern of potential training need is highlighted by the increased use of taser in black men and those suffering mental health issues and so the real need for this information to be recorded and passed on in the most effective form. Whilst training for first responders appears to include advice as how to communicate with persons suffering with mental health issues, it does not appear to contain any advice in relation to the importance of such information to be recorded especially in relation to black men”.

MPS Response

The mental health NICL code is sufficient and has a definition attached it, the operator records on both the Computer Aided Despatch (CAD) and Contact Handling System (CHS) along with the ethnicity of the individual as this is a normal practice by our operators, CAD is passed to despatch and forms part of the information relayed to officers.

The MetCC Academy are in the process of reviewing their Mental Health training content, additionally operators will be briefed on their Professional Development Days around the importance of the Golden line and specific questioning when dealing with Mental Health related calls and ensuring all information is captured and passed to officers.

However, please note that it is more for officers on the frontline to be appraised and aware around use of force against black men with mental health issues than communication officers, who follow a Standard Operating Procedure when dealing with calls, irrespective of race/gender.

‘In addition to this, the MPS Specialist Firearms Command collate data on Taser activations from the mandatory completion of Use of Force Forms when a Taser is drawn or discharged and therefore a person has force exerted on them. This, therefore, includes when a Taser officer does one of the following:

- Red dot
- Drawn
- Arcing
- Drive stun

- Firing
- Aimed
- Angle drive stun

The form includes details of the ethnicity of the subject, their gender and whether the subject appears to have a mental health condition. This information is reviewed and the Taser analyst and the Performance and Taser Engagement Team monitor trends which are then fed back into training.'

Matter of Concern 4

"That the limitation of 3 NICL codes makes it difficult to record mental health as a qualifier in incidents such as this where the main risk factor is the weapon".

MPS Response

The use of three NICL codes is sufficient to record Mental Health in an incident such as this, using the National Standard for Incident Recording (NSIR) Code for Mental Health (O612). This qualifier can be used to endorse an incident involving a person who has or appears to be suffering from a mental health disorder or mental impairment including learning difficulties.

The use of the qualifier above negates the need to use O625 (Believed Mental Health) in conjunction with O612 (Mental Health) as this is covered by *"appears to be suffering"*. Any additional information surrounding mental health can be added to the remarks.

Adding an additional 'Opening Code' field to the Command and Control (C&C) system is a technical piece of work involving multiple platforms. We are in contact with our C&C IT Support Unit and are scoping out the project to determine if this can be applied to our system.

The 2011 NSIR document and the new proposed NSIRA is still under review by the National Police Chiefs' Council (NPCC) and describes the qualifier for Mental Health.

Matter of Concern 5

"That call handlers/first responders may need training as to where to record such information i.e. in the "golden line" or NCIL code, as long as of course it is reported to them before the "golden line" and NICL code has gone out".

MPS Response

See response to Matter of Concern 1.

Matter of Concern 6

"That use of THRIVE usually requires time that is not available in 1 grade calls and does not mitigate the need to circulate promptly information as to mental health issues, in the format most likely to digested and passed on by dispatchers that is "golden line" or NICL codes".

MPS Response

See response to Matter of Concern 1.

Matter of Concern 7

“That the lack of NICL code “mental health believed” compounds this”.

MPS Response

The NSIR 2011 document and the new proposed NSIRA (National Standard of Incident Reporting and Assessment) document are still under review by the NPCC and describes the qualifier for Mental Health as follows:

“Mental Health qualifier – this Qualifier can be used to endorse an incident involving a person who has, appears to be suffering from a mental health disorder or mental health impairment including learning difficulties”.

The use of the qualifier negates the need to use O625 (Believed) in conjunction with O612 (Mental Health) as this is covered by “*appears to be suffering*” and any additional information/justification for using this code can be added to the ‘remarks’. There is no requirement to introduce a new code for “Mental Health Believed”.

Matter of Concern 8

“That dispatchers may require training in relation to the importance of passing on possible mental health concerns for the subject over the airwaves given the increased use of taser in black men and those suffering with mental ill health”.

MPS Response

We acknowledge the importance of despatchers being fully aware of and training in recognising and relaying possible mental health concerns. Lesson plans for the MetCC Academy Despatch Course will be updated to explicitly emphasise the importance of passing on such information over the airwaves, particularly in light of the increased use of Taser involving black men and individuals suffering from mental ill health.

This will include ensuring that despatchers are trained to pass on mental health concerns (believed or otherwise) to officers at the earliest opportunity. Training leads will be instructed to make the relevant updates to course materials, and copies of lesson plans and change logs will be provided to all parties once finalised.

MetCC Academy will work alongside our Operational Support Teams to support the development of a briefing pack to roll out to staff. This will be implemented in May 2025 which is the start of the Despatch Course.

Matter of Concern 9

“That dispatchers may require training in relation to what to pass out more generally given the confusion in the evidence about other units being assigned by CAD, which dispatchers themselves did not seem to appreciate and understand let alone pass such information out to responding officers”.

MPS Response

We recognise the need for greater clarity and understanding among despatchers regarding what information needs to be communicated more generally. Training will be enhanced to address the confusion identified in the evidence, specifically in relation to other units being assigned via Computer Aided Despatch (CAD) and the necessity for despatchers to fully understand and communicate this to responding officers. Lesson plans will be updated accordingly.

The Despatch Course Leads met in April 2025 to review and discuss the incorporation of this content into the new Academy Despatch Course. This included ensuring that despatchers are trained to pass on mental health concerns (believed or otherwise) to officers at the earliest opportunity.

We have amended our internal Despatch Policy to state that despatchers should circulate over the radio the call signs of off-Basic Command Units (BCUs) assigned to calls. This is to ensure units assigned from the BCU where the incident originated, are aware of off-BCU units having been assigned as they will have been despatched via a different radio channel.

Training leads will be instructed to make the relevant updates to course materials, and copies of lesson plans and change logs will be provided to all parties once finalised.

MetCC Academy will be working alongside Operation Support to support the development of a briefing pack for current staff, and will explore the possibility of including this within Professional Development Days. This will be implemented in May 2025 at the start of the Despatch Course.

Matter of Concern 10

“That there are apparent system failure issues in dispatcher pods if due to pressure of work, important issues such as mental health concerns for the subject are being missed and the number of units on the way are not being passed over the airwaves, given the potential importance of these matters to responding officers when applying their NDMs, and the reliance of responding officers on the information that they receive over the radio on their way to an I grade call”.

MPS Response

We note the concerns regarding the potential systemic failures within the individual pods within despatch. Training will be updated to ensure despatchers are equipped to pass on key information, including mental health concerns and the number of units en route, given the importance of this information in informing officers’ application of the National Decision Model. This will also be incorporated into revised lesson plans.

Training leads will be instructed to make the relevant updates to course materials, and copies of lesson plans and change logs will be provided to all parties once finalised.

MetCC Academy will work alongside our Operational Support Teams to support the development of a briefing pack to roll out to staff, as the start of the Despatch Course in May 2025.

Matter of Concern 11

“That training for response officers may require review in relation to tactical options used to de-escalate prior to taser deployment, in appropriate circumstances, given the increased use of taser in black men with mental health issues; and in particular, training in relation to deploying with taser drawn and pointed with accompanying commanding language where the subject may be suffering with mental ill-health”.

MPS Response

The Metropolitan Police Service acknowledges the concerns raised regarding the tactical options employed by response officers, particularly with respect to the deployment of Tasers in circumstances involving black men with mental health issues. We appreciate the opportunity

to address the matters relating to officer training and the measures taken to ensure the de-escalation of situations prior to Taser deployment.

Personal & Public Safety Training (PPST)

The foundation of all officer training begins with the Personal & Public Safety Training (PPST), which equips officers with essential skills in the use of force, their powers under the law, and de-escalation techniques. These are delivered comprehensively during an officer's initial training and are reinforced annually through mandatory refresher sessions.

Within Module 6 of the Personal Safety Manual (PSM) officers are taught possible indicators of mental ill health and strategies for de-escalation as a key element in resolving conflicts peacefully. They are taught the ICRC model (Intervention, Calm, Rapport & Control) and are assessed on their ability to apply these techniques in various scenarios.

Taser Training as an additional tactical option

The training for Taser deployment builds upon the existing framework provided through PPST. Officers are required to successfully complete the foundational training before applying and being considered to be a Specially Trained Officer (aka Taser equipped officer).

This ensures that the principles of de-escalation are firmly embedded prior to their introduction to Taser as an additional tactical option. Taser training emphasizes that Tasers are one of many tools available and not as a panacea for conflicts.

The application process to become a Taser trained officer includes being supported by first and second line managers and finally approval from their Chief Superintendent (or deputy) before they can attempt to complete the training.

Enhanced Focus on De-escalation Techniques

In recent years, significant enhancements have been made to the Taser curriculum to further emphasise de-escalation and conflict management. These efforts align with guidance outlined by the College of Policing, as detailed on their Conflict Management Skills page.

The Taser training incorporates these principles, including the mnemonic BUGEE, which encourages officers to:

- Be prepared to back off
- Use of effective cover
- Give space and time if possible
- Early negotiation
- Evacuate immediate area

Officers are thoroughly trained to apply BUGEE as part of their decision-making process, and as additional training to support and reaffirm what they are taught in their PPST

Findings from the TASERD Study

The TASERD paper, commissioned by the National Police Chiefs' Council (NPCC) in 2019 and conducted by Keele University, highlighted the importance of enhancing de-escalation training for all officers, not solely those qualified in Taser deployment. The study recommended that additional de-escalation training would be a benefit for all officers across the service and not just Taser equipped officers.

Integration of PPST and Taser Training

The suggestion to rebrand Taser training as "PPST Part 2" has been positively received by the working party examining improvements in Taser training. This approach underscores the continuity of officer education and reinforces the concept that de-escalation remains a cornerstone of all tactical decision-making.

By positioning Taser training as an extension of PPST, officers are reminded of their fundamental duty to seek peaceful resolutions wherever possible. It also highlights to external partners that Taser training is not stand-alone training; it is one part of a range of training delivered to police officers around dealing with persons with mental ill health, conflict management skills and use of forces powers.

Ongoing Curriculum Development

The College of Policing is actively pursuing a comprehensive review of the Taser curriculum. The latest iteration, Version 7, which commenced in the MPS on 31st March 2025, places additional emphasis on de-escalation techniques. Scenario-based assessments now include specific criteria for dealing with individuals in Emotional or Mental Distress (EMD) or vulnerable persons. Officers are evaluated on their ability to use BUGE and other conflict management skills to de-escalate situations effectively. This ensures that officers are not only trained but rigorously assessed in their capability to handle sensitive and challenging circumstances.

Commitment to Continuous Improvement

The Metropolitan Police Service remains committed to ensuring the highest standards in officer training. We recognize the importance of adapting to emerging challenges and societal concerns, and we are continuously refining our training programs to meet these needs. Our collaboration with the College of Policing and adherence to evidence-based research, such as the TASERD study, demonstrates our dedication to embedding de-escalation techniques in all aspects of officer training.

In 2024 the MPS launched a Taser specific Community Scrutiny Panel to allow Taser incidents and use to be viewed by a panel from the community and feed back into training. This has led towards the MPS being more transparency and accountable. The views of the panel are fed back to the officer. This is particularly powerful feedback as it informs the officer as to how a jury may perceive their actions and use, particularly when the justification has not been properly explained.

The MPS also have a comprehensive Taser use review system where a dedicated team review every Taser activation, any Taser use on under 18's, at height, subjects running away, in custody, and over 65years. In addition to this the team review all uses on the Basic Command Units (BCU) each month (meaning each BCU has all their Taser use reviewed once a year).

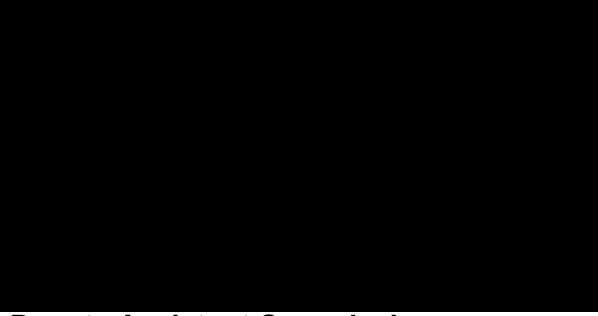
Where Taser use falls outside of training not accounted for, not justifiable or not appropriate then officers (list is not exhaustive) then the incident is flagged and can be dealt with in a range of ways from a learning debrief to referral to the DPS.

The MPS acknowledge the vital importance of ensuring that tactical decisions made by our officers prioritise safety and fairness for all individuals, particularly those from vulnerable communities or those experiencing mental health crises. By enhancing de-escalation training and embedding these principles into both PPST and Taser training, we aim to reduce the need for Taser deployment and build greater trust within the communities we serve.

I hope this correspondence addresses the concerns set out within your report and please do not hesitate to contact me should you require further information from the MPS.

In closing, please may I extend, once again, my deepest sympathies to the family and friends of Mr Omishore.

Yours sincerely,



**Deputy Assistant Commissioner
Professionalism**