



Miss Nadia Persaud  
HM Senior Coroner  
East London Coroners  
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London E17 8QP

[REDACTED]  
Deputy Assistant Commissioner  
Metropolitan Police Service  
New Scotland Yard  
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London SW1A 2JL

Friday 8<sup>th</sup> May 2026

*Correspondence By Email*

Dear Miss Persaud

### **Prevention of Future Deaths – Ms. Caroline Adeyelu**

We acknowledge receipt of your Regulation 28 report dated 5<sup>th</sup> March 2026 concerning the inquest into the death of Ms Caroline Adeyelu. We extend our sincere condolences to the family and all those affected by this tragic event.

The Metropolitan Police Service (MPS) has acknowledged and reviewed the matters of concern raised in your Regulation 28 Report and responds as follows:

#### **Matter of Concern 2 Summary**

***“Both trusts and the MPS are asked to consider a process for direct and immediate operational liaison between the police and NHS mental health staff for individuals presenting with a risk of violence compounded by mental ill health”.***

#### **MPS Response**

The Metropolitan Police Service acknowledges the Coroner’s concerns regarding the lack of effective communication systems between the MPS and NHS mental health services where individuals present with both forensic and mental health needs. We recognise that although strategic-level partnership meetings take place between the MPS and Mental Health Trusts, these do not always translate into the prompt, operational liaison required by frontline officers and clinicians who are managing urgent and complex risk.

The inquest highlighted several difficulties, including challenges establishing timely two-way communication, uncertainty around who to contact for clinical advice, and reduced clarity following the introduction of the Right Care, Right Person (RCRP) Policy<sup>1</sup>. The inquest heard evidence that on some occasions communication was not attempted due to assumptions about the availability of the relevant professional. We note the Coroner’s recommendation for

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<sup>1</sup> RCRP approach assesses if the police are the most appropriate service to respond.

establishing a more reliable system of direct and immediate liaison in situations where an individual presents both mental ill health and a risk of violence.

In response, the MPS has already undertaken a comprehensive review of existing information-sharing pathways with Mental Health Trusts. This work identified inconsistencies across London, including where current arrangements rely on informal, individual-based contact rather than clear, structured systems. The review also highlighted the absence of designated contact points that can be accessed reliably by frontline officers and clinical teams in urgent circumstances. These gaps create the potential for delays, missed opportunities for intervention, and uncertainty for those involved in managing shared risks.

As part of strengthening partnership working, the MPS has met directly with both North East London NHS Foundation Trust (NEFLT) and East London NHS Foundation Trust (ELFT) to discuss improved operational information flow between policing and mental health services. These discussions have focused on how frontline officers and clinicians can access timely, proportionate information, how points of contact can be clarified at an operational level and how escalation routes can be strengthened when immediate clinical or police input is required.

This engagement has supported a shared understanding of respective roles under RCRP and the importance of predictable, reliable communication arrangements when managing individuals who present with mental ill health and associated risk.

To address these issues, the MPS is developing a new direct liaison protocol to support immediate frontline communication between officers and Mental Health Trust clinicians when an individual presents a combination of mental ill health and risk of violence. The protocol is being developed with local partnership governance structures and aims to clearly define who should be contacted, ensure round-the-clock accessibility to the appropriate advice, and set out the respective responsibilities of both police and clinical services under RCRP. This work also includes reinforcing existing routes available to officers, such as the use of the mental health clinical advice line, which provides timely clinical guidance where appropriate and helps support informed decision making in real time situations. The protocol is being aligned with the relevant data protection and safeguarding frameworks to allow information to be shared safely and lawfully. Importantly, this work is intended to establish consistent operational expectations across all London boroughs so that frontline practitioners experience predictable and reliable routes of communication, regardless of location. It is anticipated that this work will be completed by the beginning of next year. In the interim, on 2nd April 2026, communication was issued to all Borough Commanders reminding them of the requirement to ensure that officers utilise the Mental Health Clinical Advice Line whenever they engage with or are required to make decisions concerning a person known or believed to be experiencing mental ill health. This information has also been published on the Mental Health page of the Public Protection SharePoint.

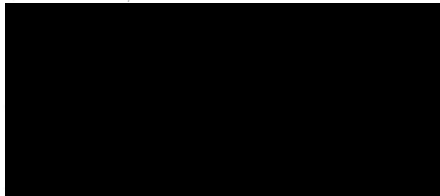
The MPS is continuing to work closely with Mental Health Trust Leads and the Joint Mental Health and Police Group (JMHPG) to refine and strengthen these arrangements. This includes agreeing escalation routes when urgent clinical input is needed, clarifying points of contact, and aligning operational processes with both clinical practice and policing risk assessment frameworks. This collaborative approach reflects our shared commitment to improving how risk is assessed and managed in real time.

The MPS remains committed to strengthening frontline information sharing and communication with Mental Health Trusts. We fully recognise the need for rapid, accessible, and dependable liaison in circumstances where a person's mental health presentation and risk of violence intersect. The actions outlined above are intended to ensure that officers and clinicians have the timely access to advice and information they need to safeguard individuals and the wider public.

We are grateful for the Coroner's observations and for the opportunity to improve the systems that support officers and clinicians responding to people in crisis. The MPS will continue working with NHS partners to prevent future deaths and ensure vulnerable individuals receive coordinated, timely and appropriate care.

Please do not hesitate to contact me should you require further information.

Yours sincerely



**Deputy Assistant Commissioner**