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To: Kent Community Safety Partnership
Subject: Mental Health & Policing: Initial thoughts
Date: 13 October 2016



Introduction:

1. In Kent, it is estimated that around a third of police time is spent dealing with cases involving mental health. The 24/7 nature of policing and ease of access via 999 or 101 invariably means that Kent Police are often the first point of contact for people with mental health issues rather than the last. Unfortunately, when partner agencies reach capacity, or only offer limited out of hour's services, there is also a tendency to rely on the police as a fall back.
2. As such, dealing with those with mental health issues, whether related to a crime or some other incident, creates great demand on officers and staff who are not experts in the many manifestations of poor mental health, and are often unable to provide the right care and support. Not only is this unsustainable, but also unfair on officers and staff who are doing their very best to support vulnerable people and keep the public safe.
3. In addition, research by the mental health charity Mind shows that members of the emergency services are more at risk of experiencing a mental health problem than the general population, but less likely to seek support.
4. As an overview of the issues surrounding mental health, including support available to officers and staff, please find attached a report titled 'Policing and Mental Health Provision' (Appendix A). The Commissioner requested this report from the Chief Constable and it was discussed in detail at the Governance Board held on 2 August 2016.

Commissioner's initial thoughts:

5. As members will be aware, the Commissioner made mental health an election campaign priority due to concerns at the amount of time Kent Police spends dealing with mental health issues, when it isn't necessarily the right response. The Commissioner was also concerned at the knock on effect in terms of police officer visibility, and availability within local communities.
6. The number of people being detained by Kent Police under Section 136 of the Mental Health Act is increasing. One in four people will experience a mental health problem each year for a number of reasons which may manifest itself in many different ways.
7. Kent Police may encounter people with mental health issues who are victims, witnesses, offenders, in crisis or been reported missing. Mental health does not discriminate and that is why the Commissioner is determined to revolutionise the way in which people with mental health issues interact with the police.
8. However, the Commissioner is also clear that it's not just about those who come into contact with the police. The stigma around mental health must be challenged so that people feel comfortable talking about it and seeking support, officers and staff must receive the appropriate training, and for their own wellbeing, they need to have access to appropriate specialist mental health support.
9. Reflecting this broad policing context, mental health is a 'golden thread' that runs through the updated Police and Crime Plan, as well as being a priority in its own right. The Commissioner is committed to:
 - Bringing relevant bodies together to conduct a full review of mental health and policing in the county, including the police, NHS, charities and others.



- Ensuring officers and staff have the support they need and training necessary to deal with incidents safely and effectively.
 - Reviewing the operation of street triage teams to see if they can be brought back in some form, enabling mental health professionals and police officers to respond to calls together.
 - Continuing to fund the presence of mental health professionals in the Force Control Room to reduce demand, and ensure callers with mental health issues receive the right support.
 - Ensuring the continued availability of occupational and mental health support for officers and staff, and working with Mind's Blue Light campaign to better understand the causes of anxiety, depression and stress and see what more the Office of the Police and Crime Commissioner (OPCC) can do to help.
10. The Commissioner will be setting up a Mental Health and Policing Board to review mental health and policing within the county and provide oversight of the Force's efforts in this area. The board will consist of representatives from the police, NHS and other agencies, with the first meeting taking place in the next couple of months.
 11. Since starting in the role, the Commissioner has heard anecdotal evidence about officers spending their entire shift in car parks, A&E departments or custody with people suffering mental health issues, because there is no safe place to take them.
 12. The Commissioner has invited officers and staff to share their views, experiences and personal opinions of mental health and policing on the frontline. Whether identifiable or anonymous, the Commissioner has requested case studies and examples of situations officers and staff have found themselves in to inform the Mental Health and Policing Board and potential developments for the future.
 13. The Commissioner wants to examine schemes that have been trialled in the county before, programmes that are currently in place, and proposals for the future that will help address the issues in the right way for the police and the public.
 14. One successful scheme trialled by Kent Police has seen counsellors from the mental health charity Mind working in the Force Control Room for two nights a week, offering support to callers with mental health issues and reducing demand on officers and staff. The Commissioner is clear that having counsellors working alongside police staff in the Force Control Room is making a difference. Vulnerable callers are getting a better service by being able to speak to a trained professional, and in some cases, patrols have been diverted from attending calls as a result of their intervention.
 15. With funding for the pilot due to run out in September 2016, the Commissioner has guaranteed further funding to allow the scheme to continue and for wider proactive opportunities to be explored.
 16. The Commissioner has written to all 17 Kent MP's highlighting the issues around mental health and outlining his commitment to ensure those with mental health issues have access to the right care at the right time. Feedback to date has been very positive, with strong backing for making mental health a priority and offers of personal support.
 17. As well as the OPCC being represented on the Mental Health Crisis Care Concordat Steering Group, the Commissioner is personally supporting the Group in compiling a bid to the Department of Health for funding to create, or free up, more health based places of safety within the county.