Adult mental health: Written submission from Police Scotland, 10 November 2023

Police Scotland participation in a roundtable evidence session on adult mental health services in Scotland

Increase in the number of police call outs relating to mental health

1. QUANTIFYING MENTAL HEALTH-RELATED DEMAND

- 1.1 The Demand & Productivity Unit (DPU), supported by Partnerships, Prevention & Community Wellbeing Division (PPCW), developed a Mental Health Dashboard (MHD) to aid understanding of the demand placed upon the service in response to mental health crisis or distress. The MHD is populated by STORM incidents and incorporates those which have the PW-13 (mental health related) disposal code and, in addition those which incorporate specific key words in the text. It should be noted that the methodology does not imply the strength or extent of the mental health association.
- 1.2 The initial purpose of the MHD was to provide a management tool for local policing and was not intended for the data to be shared externally; however, there has been increasing requests from partners seeking Police Scotland data in relation to this. The capability and functionality of the MHD was tested in three local policing divisions (North East, Greater Glasgow and Highlands & Islands) as well as a dip sampling exercise to gauge the precision of the data captured. This established that the MHD provides over 90% accuracy in respect of mental health related incidents.
- 1.3 In September 2023, approval was sought and granted, through the Local Policing Management Board, to commence national rollout of the MHD for internal use and, following verification of the data by DPU, externally if required.
- 1.4 The MHD provides information which will assist in determining:
 - Incident volume,
 - Repeat locations,
 - Times and dates of incidents,
 - Missing Persons (including Dementia related incidents).
 - Nature of the incident.

The data can be broken down by region, division, subdivision and whether a crime is involved.

1.5 The table below represents the volume of mental health-related incidents in comparison to the total number of incidents recorded on STORM, by percentage and where a crime has been recorded. This demonstrates that, whilst overall incident demand is decreasing, the number and proportion of incident demand relating to mental health is increasing, and the ratio of those incidents from which no crime is recorded, is currently over 87%.

Doto Bongo	Total	Total MH	Crime Involved	
Date Range	Incidents	Incidents	Yes	No
April 2023 – October 2023	852,880	142,691 (16.73%)	17,534 (12.29%)	125,157 (87.71%)
April 2022 –	1,335,413	221,978	26,661	195,317
March 2023		(16.62%)	(12.01%)	(87.99%)
April 2021 –	1,338,039	208,800	24,296	184,504
March 2022		(15.60%)	(11.64%)	(88.36%)
April 2020 –	1,371,877	200,778	23,633	177,145
March 2021		(14.64%)	(11.77%)	(88.23%)
April 2019 –	1,492,847	173,962	18,012	155,950
March 2020		(11.62%)	(10.35%)	(89.65%)
April 2018 –	1,527,613	160,078	16,392	143,686
March 2019		(10.48%)	(10.24%)	(89.76%)

^{*} Taken from MHD on 07/11/2023.

- 4.7 Police Scotland has reached out to partners to gauge the value they would place in such data and discussions have commenced in order to overlay Police Scotland data with that of partners, in order that early and effective prevention and support measures can be put in place, particularly in respect of high intensity users across all organisations,
- 4.8 DPU has also created an Operational Abstraction Dashboard. The dashboard provides that the average yearly abstraction rate for 'Hospital Watch Vulnerable Person' is 3,531 (based on the last 4 years). The cost of such abstraction is estimated at £586,655 per year and equates to 7,095.5 officers and 20,997 officer hours per year.

2. PROJECTS AND INITIATIVES

- 2.1 On a national basis, the Mental Health Pathways Project was introduced within Contact, Command & Control Division (C3) in August 2020 and is comprised of collaboration between Police Scotland, NHS 24 and the Scottish Ambulance Service. Its key aim is to deliver appropriate care to members of the public presenting to Police Scotland due to mental distress.
 - Phase 1 of the Project was based around a collaborative process using THRIVE methodology and clinical assessment in respect of operational policing incidents which fall out with direct referral criteria, and where mental health is believed to be a factor, to provide professional medical advice to improve outcomes and earlier access to the right care; this phase has been subject to evaluation and is still operational nationally.
 - Phase 2, the embedding of Mental Health Practitioners (MHP) within
 C3, has had limited success and evaluation did not provide evidence of

- value for money or wider impact and resilience across Scotland. Phase 2 concluded in December 2022 after a 6-month pilot.
- Phase 3 commenced in early 2023, drawing on the learning and recommendations from the evaluations of the previous two phases. This phase involves the development of a Mental Health Pathway Guidance Framework and assesses the suitability of a referral based on risk, underpinned by a THRIVE assessment. Test and Exercise has indicated an increased level of confidence in making a decision to refer, as opposed to the deployment of resources.
- 2.2 Distress Brief Intervention (DBI) is a time-limited and supportive contact with an individual in distress. It is a two-level approach:
 - Level 1 is provided by frontline staff and involves a compassionate response, signposting and offer of referral to a DBI level 2 service.
 - Level 2 is provided by commissioned and trained third sector staff who
 contact the individual within 24 hours of referral, providing
 compassionate, community-based support, wellness and distress
 management planning supported connections and signposting for a
 period of up to 14 days.
- 2.3 Police Scotland has been a core partner since its inception and is responsible for approximately 12.2% of all referrals. As of August 2023, 1,372 police officers have received the training. HMICS recommends that all frontline officers and staff receive this training; however, this has already been subject to discussions with Leadership, Training & Development.
- 2.4 Local Policing Divisions have introduced various partnership initiatives across the country, with a view to lessening impact on police resources and improving the service provided to people in mental health crisis or distress. A scoping exercise was carried out to determine what initiatives were in existence, their impact and their suitability for implementation nationally. These are currently being assessed.
- 2.5 Police Scotland works in partnership with Scottish Fire & Rescue Service (SFRS) and the Scottish Ambulance Service (SAS) in their Reform Collaboration Group (RCG). Through this group, the implementation of the Casualty Treatment process has emerged, allowing officers to contact SAS directly from the scene of an incident. Work is ongoing to explore a similar process in respect of SAS's Integrated Clinical Pathway, where officers could get direct access to mental health practitioners for assessment and advice.
- 2.6 PPCW also works closely with partners from health organisations on a regular basis and there is general agreement that Police Scotland is not, in most instances, the most appropriate organisation to respond to people who are in crisis or distress.

- 2.7 To shape the direction of Scotland's response to such individuals, as well as meeting Police Scotland's moral and legislative obligation to improve the wellbeing of people, localities and communities, a partnership workshop has been arranged to allow organisations to work together and re-design the services provided by police in respect of mental wellbeing and, in particular, unscheduled care. The workshop will take place on 22 November 2023 and will be facilitated by PPCW and the Service Design Team.
- 2.8 PPCW, the Scottish Police Authority (SPA) and Scottish Government (SG) are establishing a Short Life Working Group (SLWG) and the first meeting will take place during the last week in November 2023. This group will co-ordinate the following:
- 2.8.1 Local area partnership workshops:
 - Areas agreed as NHS Forth Valley, Lanarkshire and Highland & Islands
 - Use A&E risk assessment tool as basis for principles (currently used in Forth Valley)
 - Workshops to be scheduled for March 2024 (avoiding worst of winter pressures)
 - SG to progress comms to NHS Chief Executives
 - 2.8.2 Data sharing project with Susan McVie (University of Edinburgh):
 - Oversight through the Joint Research & Evidence Forum
 - 2.8.3 Response to HMICS recommendations:
 - PS to input on SPA and SG planned activity in response to recommendations.
 - HMICS to present the report to SPA Policing Performance Committee (PPC) on 6 December 2023.
 - Improvement plan expected at March PPC joint plan covering all actions in response to recommendations.
 - 2.9 The Scottish Prevention Hub was officially launched in August 2023. A colocated and co-directed partnership between the Edinburgh Futures Institute (EFI), Police Scotland and Public Health Scotland (PHS), it aims to prioritise a whole system approach to policing using data and evidence from across the system and support the building of capacity and capability to work more effectively across boundaries, disciplines and organisations, with an emphasis on learning and engagement.
 - 2.10 The sharing and analysis of data is critical to reducing demand on all organisations as well as improving the service provided to communities. PHS is exploring ways to overlay NHS and SAS data with Police Scotland data relating to officer time in hospitals with vulnerable persons. PS will also seek to

optimise information held on the National Negotiator Database (NND) to inform prevention policies and protocols.

3. HMICS THEMATIC INSPECTION ON POLICING MENTAL HEALTH

- 3.1 In January 2023, HMICS conducted a thematic review of policing mental health in Scotland.
- 3.2 HMICS found, during their inspection, that "Police Scotland is in a situation where the impact of mental health demand is limiting its effectiveness and efficiency in performing its traditional role". Further, the report highlights that "Police Scotland is filling gaps in the health and social care system in Scotland, and there appears to be consensus in the benefit of establishing a whole-system review of mental health in Scotland".
- 3.3 The subsequent report was published in October 2023 and contained 14 recommendations and 10 areas for development.

Police Scotland's Recommendations cover 3 themes:

Oversight	
Training	
Policy / Procedures	

Number	Description	Owner
2	Develop & Publish a Mental Health Strategy & Delivery Plan	PS
3	Establish Internal Governance Arrangements	PS
4	Develop & Report on a Performance Management Framework	PS/SPA
5	Provide clear Guidance & Training	PS
6	Re-establish Collaborative Leadership Training	PS / Partners
7	Conduct Full Training Needs Analysis	PS
8	Monitor & Report on use of Powers under MH (C&T)(S) Act 2003 on under-represented Groups	PS
9	Review Use & Recording of Place of Safety Orders	PS
10	Establish a Clear Demand Picture	PS / SPA
11	Review PEPs	PS / Partners
12	Ensure Consistency in approach in oversight of PEPs	PS
13	Provide iVPD access to BTP	PS
14	Monitor Development and Implementation of strategy, recommendations and AFDs	PS / SPA

3.3.1 Meetings are taking place twice per week in order to develop Police Scotland's Implementation Plan. A short life working group (SLWG) has been established with SPA and Scottish Government in order to plan activity in relation to shared recommendations.