

Our ref: Mr William HAFELE

Mr Martin Fleming
Assistant Coroner for Surrey
H.M. Coroner's Court
Station Approach
Woking
Surrey
GU22 7AP



[REDACTED]
Deputy Chief Constable

21 January 2015

Dear Mr Fleming,

Mr William HAFELE- Regulation 28 Report. Response on behalf of Surrey Police Force

Thank you for your letter to Chief Constable Lynne Owens dated 25th November 2014 and the accompanying copy of your report following the Inquest into Mr William Hafele's death. Surrey Police welcome the opportunity to improve the service provided to the public however it is unfortunate that this sometimes arises from such sad incidents. Our response to your report is set out below and refers to the Coroner's Concerns, listed at section 5. I have detailed both the action taken and proposed, together with the anticipated date of delivery.

Responses to the Coroner's Concerns.

1. "Training procedures in respect of the police and hospital staff on Elgar Ward in the case of reports of missing persons and lack of understanding of areas of responsibility and appropriate actions".

Response:

The Force's Missing Person Policy (MPP) is currently under review. The existing MPP, a policy jointly produced with NHS partners, is a comprehensive document setting out the way in which risk can be assessed and appropriate levels of responsibility:

- the risk assessment process to identify whether people missing from mental health and medical care establishments should be categorised as being low, medium or high risk as identified by certain criteria; and
- the responsibility for identified enquiries, into the circumstances and whereabouts of the missing person, are also clearly articulated.

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This document has been recently updated to ensure that it is compliant with the new Association of Chief Police Officers (ACPO) guidelines.

This has been shared with the Surrey Adult Safeguarding Board and feedback will be provided and discussed at the next meeting in January 2015. The Force continues to work with its partners to ensure compliance with existing policy.

Once the review of the MPP is complete, training and a familiarisation programme will be implemented for officers and mental health/medical staff (which may even include consideration for joint enterprise) to ensure that all staff understand and implement the policy and work effectively together to deliver successful outcomes for missing individuals.

The policy will be subject to regular and on-going reviews, in line with Force process for all existing policies/procedures.

2. *"Critical information required to make an informed risk assessment as to whether was missing or absent was omitted"*.

Response:

The omission of certain information that would have better informed the risk assessment, and thus whether the subject was 'Absent' or 'Missing', was a specific of this case. It was as a result of a call handler failing to pass on particular details to the Duty Inspector at the material time.

Guidance has since been circulated to all appropriate personnel to emphasise and ensure, so far as is possible, that all necessary details are provided in order for an accurate risk assessment to be made.

The risk of this happening again will also be significantly mitigated by the full introduction of Mobile Data Terminals (M.D.T's). This will ensure that officers receive the necessary documented information first hand and do not have to rely on information being verbally relayed to them.

3. *"The decision to re-classify from missing to absent was not communicated to the hospital"*.

Response:

This was an error on behalf of the operator and, therefore, case specific. The procedure includes a full list/flowchart of the process. The requirement to notify the hospital following the re-classification was ignored on this occasion; the operator did not act in accordance with procedure. The operator has been given subject to a misconduct process and given 'words of advice' as a formal sanction.

4. *"As a result no enquiries or investigations were made by any agency to ascertain Mr Hafele's whereabouts"*.

Response:

It is correct that this was the result and is a specific failing in this case.

5. *"Adequate training on the Surrey Wide Response Agreement and the Surrey Missing Person Procedure did not take place"*.
6. *"In relation to the Police, specific training with regards to risk assessments for mental health was lacking"*.

Response:

- The Force has in place a comprehensive program of training and is developing and enhancing this as an on-going matter.
- All officers and staff are required to complete the NCALT (College of Policing) e-learning package on National Decision Making Model.
- A review of the initial training provided to Probationary police officers was carried out in accordance with peer review recommendations. This is now complete and the training has been found to be fit for purpose.
- The Force's Mental Health Liaison Officers (MHLOs) are a group of 21 officers and staff from across the Force and from various roles who have opted to 'up skill' in this area and develop their knowledge.

The MHLOs are available to advise colleagues on mental health queries, including Sections 135 and 136 of the Mental Health Act 1983, the Mental Capacity Act 2005, policies and procedures and information about local mental health charities and organisations.

These individuals, where possible, also play a key part in building and maintaining relationships with local partners and voluntary organisations / charities.

The MHLOs received an initial 2 day input whereby they were briefed on topics which included legislation, the role, current policies and procedures, specialist topics e.g. children and young people, and inputs from local mental health charities and support services. The MHLOs also receive 6 monthly updates and have received their first one of these in November 2014. These updates are produced taking into account requests made by the MHLOs and any operational updates required.

The Force is aiming to increase the number of MHLOs across the force in the future; however there are no plans to recruit to this role currently.

- Mental Health Briefings to Supervisors will begin in February 2015 and will include an overview of issues and learning from recent cases; reminder of protocols; revision of relevant legislation and case law.
- Two Back to Basics e-briefing/learning packages;
 - (i) Mental Capacity Act.
 - (ii) Practical Guide to Dealing with Mental Ill Health,
 are to be rolled out Force wide at the beginning of February 2015 and priority will be given to front line officers and staff.
- The Metropolitan Police Force has recommended the Vulnerability Assessment Framework for introduction to Surrey. This model still needs to be agreed/adapted for Surrey before training can be rolled out. This will potentially form part of a Force wide training update programme on omni-competence commencing in March 2015.
- The Force has reviewed all its (internal and external) mental health policies and procedures within the last 6 months and this review will be an on-going process alongside Crisis Care Concordat partners. New policies and procedures have been drafted where a requirement was identified as a need, for example the 'Conveyance of Mental Health Patients' and 'Restraint of Mental Health Patients within a Mental Health or medical environment'.
- Other materials have been and are being produced to assist officers to properly and effectively support individuals in mental health crisis. For example, s136 information is now available on MDTs so that officers can complete appropriate s136 paperwork but also have access to relevant data and legislation to assist them. Mental health booklets are being drafted to enhance the awareness of officer and staff knowledge about mental health issues. It is proposed that this information will be made available in an interactive format, available on officers MDTs.

7. *"Surrey Police TPT briefing training did not correspond to the definition of Absent given in the Surrey Police Missing Person Procedure"*.

Response:

This was noted by the Force and the TPT briefing training will be modified to take account of this and ensure consistency in the future.

8. *"Ineffective communications between police and Elgar Ward"*

Response:

This was in the context of the communication between the Contact Centre and Elgar Ward and specifically related to the ward not being informed that the individual was being treated as 'Absent' rather than 'Missing.' This does not relate directly to mental health in the wider

context and will be addressed through the review which is taking place into the wider issues relating to missing persons.

Summary

HM Coroner does not express concern to the contrary but, nonetheless, it is worth noting that we remain of the view that our policies and procedures are fit for purpose and take into account matters referred to in current ACPO and College of Policing guidance.

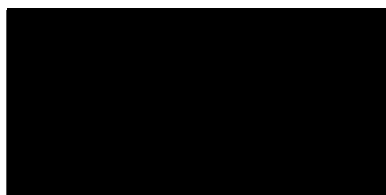
The Force will endeavour to remain vigilant in ensuring that these policies are maintained and up to date, compliant with statutory provisions and relevant guidance. The Force will continue in its endeavours to ensure staff and officers are trained appropriately in order to minimise the risk of breaches in procedure.

The Force is aware that there may be occasions where there are policy breaches and these will be dealt with under appropriate management and conduct procedures, as in this case.

The Force is committed to working with NHS and other medical partners to ensure effective channels of communication and consistent response and handling of mental ill health issues.

Should HM Coroner require further assistance or clarification of matters set out in this letter, we will be pleased to assist as necessary.

Yours sincerely,



Deputy Chief Constable