

WEST MERCIA POLICE AND CRIME COMMISSIONER Health & Wellbeing Board (HWB)

Most Appropriate Agency (MAA)

Recommendation

- 1. Members are invited to note the report.
- 2. Members are invited to consider implications of the West Mercia Police policy as part of both their own organisations and the wider system.
- 3. Members are invited to consider potential options relating to joint / co-ordinated governance activity.

Background

- 4. On the 3rd of April 2023 West Mercia Police introduced a new policy and procedure referred to as 'Most Appropriate Agency' (MAA). This is an operational police force policy. The consent of the PCC is not therefore required to implement it.
- 5. The policy is based on Humberside Police's Right Care Right Person (RCRP) policy and procedure which has now been rolled out nationally. A precis / summary of the West Mercia Police force policy can be found at Appendix A. This includes the rationale for implementation, principles of the policy, consultation activity undertaken by the force to date and existing force-led governance.
- 6. This paper provides a summary of activity undertaken by the PCC in response to the force's MAA policy, in respect of oversight, scrutiny and convening powers. This highlights ongoing concerns that are held by the Commissioner as well as potential opportunities to work with partners to ensure the force's policy is effectively implemented, ensuring the best possible outcomes for communities and mitigating the risk of avoidable harm to vulnerable people.

Summary on PCC activity relating to MAA Policy post-implementation.

7. PCC John Campion: "I believe strongly that the principle of MAA is the correct one, but its implementation comes with significant risks. Done well, as a whole system, it will undoubtedly enhance the response communities receive to a wide range of incidents and circumstances. Done incorrectly, it has the potential to create wide gaps in service provision and leave vulnerable people exposed to greater risk of harm".

- 8. The PCC has regular Assurance and Accountability meetings (A&A) with the Chief Constable. This is a key mechanism through which the PCC fulfils his statutory duty to hold the Chief Constable to account for the performance, effectiveness and efficiency of the force.
- 9. Given the potential impact of the force's MAA policy on communities and partners, the PCC has ensured that MAA has featured heavily at the A&A meetings this financial year to date. Scrutiny and oversight of MAA has also featured as part of the PCC's adhoc, virtual A&A requests to the Chief Constable. These requests are submitted via email with the Chief Constable providing a written response to the issues raised. This dynamic process has enabled the PCC to escalate any specific concerns in relation to MAA (e.g. specific incidents) outside of a formal meeting setting, ensuring a timelier response.
- 10. At the A&A meeting on the 29th June 2023, the PCC raised the following concerns around the force's MAA policy to the Acting Chief Constable (A/CC):
- 11. The PCC raised anecdotal feedback that other forces who were early adopters had taken a more phased approach to implementation, inc. more extensive consultation with partners. The A/CC confirmed that learning from other early adopters was used to inform local implementation and believed that these forces had seen similar issues to those in West Mercia. On reflection, the A/CC would change the approach to the Safeguarding Advice Team, ensuring that all members of the team had significant safeguarding training prior to the policy going live.
- 12. The PCC raised concerns regarding partnership engagement pre and post-implementation of the policy. As set out in Appendix A, the force's MAA policy was initially introduced to partners through the Vulnerability Partnership Executive Group (VPEG) in August 2022; 8 months before it was implemented. VPEG was not the only mechanism for partnership engagement, with further contact made through letters to strategic leads, a survey of partners and utilisation of the Strategic Crime & Vulnerability Forum. However, the partnership response to the survey was considerably low; limiting the ability for this consultation activity to inform implementation of the force policy and also providing little reassurance to the PCC regarding the preparedness of other partner agencies to actively support the implementation of the policy, and therefore increase the chances of its success.
- 13. The PCC felt there was potential learning for the force in relation to partner engagement. The A/CC felt initial partnership engagement was sufficient. Going forward, the force will consider how to engage with key partners post-implementation to understand concerns, as well as considering the feedback that has been shared directly with the PCC. The PCC was clear that his consent was not required to implement the force's MAA policy, however greater buy in and cooperation from the PCC could have helped the force, particularly in respect of convening partners. To further support ongoing work with partners, the force has commissioned a partnership review. The review aims to improve understanding of the partnership ecosystem and drive effectiveness.

- 14. On the 7th July 2023 the Deputy Police & Crime Commissioner on behalf of the PCC sought further reassurance from the Acting Chief Constable (A/CC) via an ad hoc A&A request.
- 15. Further assurance was sought in relation to specific incidents, mechanisms to review learning from high harm incidents, safeguarding responsibilities, referrals to the Independent Office for Police Conduct (IOPC) and the need to review the impact of the MAA policy to prevent harm as much as possible.
- 16. A request was also made for a member of the Office of the Police & Crime Commissioner (OPCC) Policy team to observe the force's governance arrangements in respect of MAA via monthly scrutiny panels. The first meeting was attended on 22nd August and attendance continues in the short-medium term to ensure appropriate OPCC oversight.
- 17. It was formally confirmed in response by the CC that a 6-month evaluation of MAA/RCRP is under way and to include an assessment of the model supported with data from April October 2023. On completion of the evaluation, the Crime and Vulnerability directorate will facilitate consultation with external partners. The PCC has requested to have oversight of this consultation and the thematic report is due for completion by the end of 2023.
- 18. Outside of the A&A process, the PCC reported on the implementation of MAA at the West Mercia Police and Crime Panel (PCP) meeting on 27 July 2023. This report provided a detailed background on MAA, its implications and concerns surrounding the partnership approach and the potential gaps MAA could highlight in partner service provision.
- 19. In response to this report from the PCC, the Chairman of the West Mercia Police and Crime Panel subsequently wrote to the leaders of the Member Authorities of the West Mercia Police and Crime Panel (Bromsgrove District Council, Herefordshire Council, Malvern Hills District Council, Redditch Borough Council, Shropshire Council, Telford and Wrekin Council, Worcester City Council, Worcestershire County Council, Wychavon District Council, Wyre Forest District Council).
- 20. This letter acknowledged the reservations about the MAA Policy, including the speed at which it has been implemented but asked each of the Councils within the West Mercia area to consider making a commitment to engage with and support the MAA policy. The letter also confirmed that the PCC would welcome their engagement and that any information required could be supported by the Office of the Police & Crime Commissioner.
- 21. In addition to established force governance arrangements set out an Appendix A, the PCC will continue to monitor the implementation of MAA using his statutory A&A framework to hold the Chief Constable to account.
- 22. The PCC is also exploring opportunities for joint governance / scrutiny activity with partners impacted by the policy. This includes engagement with the IOPC

(national oversight body for complaints and death and serious injury referrals) and partners on local Health & Wellbeing Boards.

What the PCC is seeking from Partners at the Health & Wellbeing Board

- 23. The PCC welcomes partners engagement in providing feedback on the force's MAA policy as set out at Appendix A, and the concerns set out by the PCC above.
- 24. In particular, the PCC would invite partners to consider the following areas in respect of MAA:
 - Are partners satisfied that they fully understand the implications of the policy for themselves from both a strategic and an operational perspective?
 - Do partners understand what Police are doing and do they endorse it?
 - Are partners clear on the threshold for police involvement if no crime is committed and there is no threat to safety?
 - Are partners aware of the Police's approach to welfare calls?
 - Partners assessment/concerns of resource gaps in service provision and how this gap will be filled to ensure the prevention of avoidable harm?
 - Appetite for ongoing shared / co-ordinated governance of MAA
 - Partner views on raising awareness off MAA/RCRP with the public to increase awareness and help better manage demand and improve outcomes?
 - How partners locally may learn from the approach taken in Humberside since May 2020 to inform any dedicated response and community-based mental health services
 - Any other concerns/advice we feel we should include?
- 25. The PCC also wishes to determine if partners would find it beneficial to establish a forum to facilitate partnership governance of the force's MAA policy. This could be a new multi-agency board or utilisation of existing governance boards such as local Health and Wellbeing Boards.
- 26. The PCC's office has undertaken research on the most effective forum to facilitate partnership governance of police-led MAA policies and has identified that a multiagency governance structure could be created.
- 27. Within the Right Care, Right person policy paper published by the Government on the 26th July 2023 it is advised that cross-agency partnerships could be set up in each area in conjunction with the ICBs to implement the RCRP approach for people with mental health needs. It is suggested partners work together on achieving the following:
- 28. "Agreeing a joint multi-agency governance structure for developing, implementing, and monitoring the RCRP approach locally. People with lived experience of the

urgent mental health pathway, including those from ethnic minorities, should form part of the governance structure and be actively engaged in considering how RCRP is implemented. In addition, from a health system perspective, Integrated Care Boards will play a key role in coordinating the approach to supporting the implementation of RCRP.

- 29. Reaching a shared understanding of the aims of implementing RCRP locally and the roles and responsibilities of each agency in responding to people with mental health needs. Given that 'mental health needs' covers people with a broad spectrum of needs, this should include agreeing what is the remit of health services (primary care and secondary mental health services), local authority services (including social care and substance misuse services), and voluntary, community and social enterprise organisations.
- 30. Enabling universal access to 24/7 advice, assessment, and treatment from mental health professionals for the public (via the NHS111 mental health option), as well as access to advice for multi-agency professionals, including the police, which can help to determine the appropriate response for people with mental health needs. Plans should be put in place to communicate the availability of this advice to the public and other organisations/professionals locally, who may otherwise call the police as their first point of contact".
- 31. There is no contention with the central premise of Right Care, Right Person / MAA; that people in mental health crisis require an expert healthcare response first and foremost. The PCC remains committed to working with partners to ensure a solid working relationship is in place between the police and health services to reduce inappropriate police involvement in care and support better access to mental health specialists for the public.

Financial Implications

32. None.

Legal Implications

33. See above.

Equality Implications

34. None in relation to this report.

Supporting Information

Appendix A – Summary of West Mercia Police Most Appropriate Agency Policy and Implementation.



Contact Points

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