

MENTAL HEALTH

PLACES OF SAFETY - ENGLAND

Freedom of Information Act – Responses 2019 - 2020

HEALTHWATCH AND PUBLIC INVOLVEMENT ASSOCIATION

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PLACES OF SAFETY

CHANGES TO s135 and s136 OF THE MENTAL HEALTH ACT

REVISED LEGISLATION IN FORCE FROM DECEMBER 2017

1. The term ‘Place of Safety’ is derived from the [Mental Health Act 1983](https://en.wikipedia.org/wiki/Mental_Health_Act_1983).

2. The Policing & Crime Act 2017 led to significant changes in relation to Police powers and place of safety provisions under Sections 135 and 136 Mental Health Act.

3. National Guidance has been produced, describing practical implementation of these changes, plus new Regulations placing stringent conditions on use of Police Stations as Places of Safety. <https://tinyurl.com/uou4jyz>

4. Section 135 MHA enables a Warrant to be issued by a Justice of the Peace, permitting Police, AMHP and medical practitioner to enter private premises, where there is reasonable cause to suspect that someone suffering from a mental disorder is being ill-treated/neglected or unable to care for themselves. The Police can remove the person to a Place of Safety).

5. The amendments enable the patient’s place of residence (the property specified in the Warrant) to be defined as a 'Place of Safety', providing the person to be assessed and any other occupiers agree. In this case, the AMHP and medical practitioner could remain at the property to carry out the mental health assessment, rather than putting the person through the potential distress of being taken elsewhere, e.g. to A&E or a Health Based Place of Safety. However, if the assessment finds that the person is suffering from a mental disorder as defined by the Act, transfer to A&E or a HBPoS would still take place.

6. Section 136 gives the Police power to remove a person from a public place, if that person appears to be mentally disordered and in immediate need of care and control and take the person to a Place of Safety. A public place is *' a place to which the public have access'*, but the Police have found this difficult to define.

7. The new definition removes the requirement for the person to be in a place to which there is public access, and allows the Police to use the s136 power anywhere **except** a private dwelling, i.e. *house, flat or room where the person, or any other person, is living and any yard, garden, garage or other outhouse that is used*solely*in connection with the house, flat or room*.

8. The Police can now use their s136 power (including a power to enter by force) in locations such as railway lines, hospital wards, rooftops, offices, schools and non-residential parts of residential buildings with restricted entry.

9. There is an important new requirement for Police to **consult** with an AMHP, medical practitioner, nurse, occupational therapist or paramedic before using s136 (if practicable). But the Guidance does not require the **consultation** to take any particular form – it is vague and likely to vary according to circumstances.

10. It will be up to the Police officer to decide how to consult, e.g. taking into account whether the person is likely to remain co-operative during the time taken to consult.

11. A Police constable may search a detained person if they have reasonable grounds to suspect a risk of self-harm or risk of harm to others

12. The issues which Police are expected to consider when consulting the health professional, include:

* Whether it is likely that the detained person has a mental health issue.
* Whether physical health issues may be contributing to the person's

behaviour.

* Whether the person is known to local health service providers.
* If so, whether there is an existing care plan/CmC for dealing with a

Mental Health crisis.

* Whether using the s136 power is appropriate in the circumstances.
* Identifying and facilitating access to an appropriate Place of Safety.
* If s136 is not going to be used, helping identify and implement an

alternative Care Plan.

13. The length of time for which a person can be detained in a 'place of safety'

under s135 and s136 will be 24 hours instead of 72 hours. This can be extended

by up to 12 hours by a registered medical practitioner, if it is not practicable to

carry out/complete the MHA assessment within the 24-hour window because of

the person's mental or physical condition, e.g. if the person is too intoxicated to

co-operate with the assessment.

14. A delay in attendance by an AMHP or medical practitioner will not be a valid

reason for extending detention. This is intended to ensure that MHA assessments are arranged and carried out quickly.

15. The Guidance stresses that, in practice, a Health-Based Place of Safety will

generally be the best option:

*'The expectation remains that, with limited exceptions, the person's needs will most appropriately be met by taking them to a 'Health-Based' Place of Safety (HBPoS) - a dedicated s136 suite, where they can be looked after by professionally trained and qualified mental health and other medical professionals'*.

16. A Place of Safety is now defined as any of the following:

* Residential accommodation provided by social services
* A hospital (HBPoS) and a hospital A&D department
* An independent hospital or care home for mentally disordered persons
* ‘Any other suitable place', with the agreement of a person who appears to the Police officer to be *'responsible for the management of the place*', e.g. *someone's home,* provided the person thought to be suffering from a mental disorder agrees and - if it is not their home or they live with others - another person residing there also agrees.
* A Police Station (in very limited circumstances - see section below)

17. The Mental Health Act 1983 (Places of Safety) Regulations 2017 place severe restriction on us of Police Stations as Places of Safety, e.g. there is a total ban on Police Stations being used as a Place of Safety for anyone under 18 (no exceptions).

18. Three conditions will have to be met before a Police Station can be used as a Place of Safety:

* The person's behaviour presents an imminent risk of serious injury or death to themselves or others;
* As a result, no other Place of Safety can reasonably be expected to appropriately detain them; and
* The person will - so far as is reasonably practicable - have access to a healthcare professional throughout the period in which they are detained at the Police Station.

19. If these requirements are not met, the person should be moved to another Place of Safety.

20. If a person is detained in a Police Station as a Place of Safety, their health/welfare must be checked by a healthcare professional at least every 30 minutes, and their behaviour must be reviewed by the custody officer at least once an hour (or every three hours if they are sleeping), to consider if their behaviour presents a high level of risk that other Places of Safety cannot adequately and safely manage.

Royal College of Emergency Medicine Recommendations to

Accident and Emergency Departments (A&E)

1. When a patient is brought to the ED by the Police under section 136 of the Mental Health Act; the nurse in charge and a senior clinician should review the patient together with the Police and ambulance crew to assess the patient’s medical needs and to review any risks to self or others.

2. The 24hour duration of the s136 commences on arrival at the Emergency Department, even if the patient is transferred subsequently to a s136 suite. The time of arrival should be noted and recorded.

3. Patients should be informed of their rights in the Emergency Department and kept updated of the plan for their care and assessment.

4. Referral for Mental Health Act assessment should begin on arrival in the ED or as soon as a patient is medically fit for assessment. Where possible medical treatment should occur alongside psychiatric assessment.

5. Police are initially responsible for the safety of a patient on a s136. However, once the Emergency Department takes responsibility for the patient, the Police will leave,

6. ED staff must take on this responsibility and be confident they have staff and resources to support and assess the patient and deal with the risk of the patient absconding.

**Useful Links:**

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| Mental Health Act 1983 | <https://en.wikipedia.org/wiki/Mental_Health_Act_1983>  <http://www.legislation.gov.uk/ukpga/1983/20/contents> |
| Amendments through the Policing & Crime Act 2017 | <http://www.legislation.gov.uk/ukpga/2017/3/part/4/chapter/4/enacted>  Paras 80-84 |
| Guidance on the 2017 amendments | <https://tinyurl.com/uou4jyz> |
| Public Place | <http://www.legislation.gov.uk/ukpga/1972/71/section/33> |
| Justice of the Peace | <https://en.wikipedia.org/wiki/Justice_of_the_peace> |
| Royal College of Emergency Medicine  Briefing on Places of Safety | <https://www.rcem.ac.uk/RCEM/News/News_2017/Important_Changes_to_section_136_of_the_Mental_Health_Act.aspx> |

EXECUTIVE SUMMARY AND METHODOLOGY

MENTAL HEALTH – PLACES OF SAFETY

Freedom of Information Requests - RESPONSES

QUESTIONS PUT TO MENTAL HEALTH TRUST IN ENGLAND 2019/2020

1. How many patients have been admitted to the Place of Safety since 01 January 2019?
2. How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?
3. Please supply a copy of your Policy and Protocol for providing support and care for people detained under the Mental Health Act, who are required to queue outside this Place of Safety when the Place of Safety is full.
4. What safeguards do you have in place to support people detained under the Mental Health Act, when there is no capacity in a health-based place of safety?

The FOI Trial Group - asking only the first 3 questions.

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| --- | --- | --- |
|  |  | No. of  Places of Safety |
| 1. | Sussex Partnership | 5 |
| 2. | Isle of Wight | 2 |
| 3. | Lancashire Care | 10 |
| 4. | Rotherham, Doncaster and South Humber | 3 |
| 5. | Black Country Partnership | 2 |
| 6. | Avon and Wiltshire | 4 |
| 7. | Northumberland, Tyne and Wear | 4 |
| 8. | Barnet, Enfield and Haringey | 2 |
| 9. | Essex Partnership University | 5 |
| 10 | Northamptonshire Healthcare | 2 |

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| AVON AND WILTSHIRE MENTAL HEALTH PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * Mason Unit, South Mead Hospital, Bristol ………………………… * Bluebell Unit, Green Lane Hospital, Devizes ……………………. | 843  426 |
| Q2. | We do not hold this information (patients waiting an hour or more to enter PoS). | |
| Q3. | Bluebell Unit, Green Lane: The Police use an Assessment Room inside the Unit. We offer support to the Police and Ambulance Crew, and should there be capacity pressures, we relay the urgency of the situation to the on-call Managers and Executive for support.  Mason Unit, Southmead: In circumstances where we have no capacity, then we will utilise space at the East Place of Safety or the local Emergency Departments, until a bed is available.  At present these approaches are being written into Protocol, therefore, we do not have a Policy/Protocol to share which covers this specific issue. | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions:

1. Is Protocol now available?

2. Does the reference to the “East, Place of Safety” refer to Bluebell Unit Devizes?

3. Do Police and ambulance services use the Assessment Room, at the Bluebell Unit, while they wait for handover of the patient to a clinician?

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| BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | The Case Building, St. Ann’s Hospital (now closed) ……………………………. | 496 |
| Data as at 13 November 2019  St. Ann’s Hospital no longer has a Place of Safety. The Trust provides a centralised Health Base Place of Safety in Enfield.  (Place of Safety Suite, The Chase Building Chase Farm Hospital, The Ridgeway Enfield EN2 8JL)  <http://www.beh-mht.nhs.uk/services/place-of-safety-suite.htm> | |
| Q2. | The Trust does not record data of patients who have waited for more than one hour for entry to the Place of Safety. It captures diversions to other suites when no capacity. | |
| Q3. | Operational Protocol, Section 10 and Appendix 5. - do we have this? | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions:

1. Is data available that captures diversions to other suites when there is no capacity at the

Enfield HBPoS?

2. Is the Operational Protocol available?

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| BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | As at 18 December 2019   * Oleaster Centre, Edgbaston, Birmingham …………………….. | 461 |
| Q2. | No patients have waited for more than an hour. | |
| Q3. | We do not have a Protocol currently. If required, we would divert patients to an alternative Place of Safety in A&E. | |
| Q4. | As with Question 3 above, we would divert patients to avoid a wait outside. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?

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| BIRMINGHAM WOMEN’S AND CHILDREN’S NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Since 01 January 2019  Parkview Place of Safety - Not sure that there is a place of safety. Nothing on the Website. Need to look at the response again ……….. | 50 |
| Q2. | We do not collect this information as this is a Police (Power) detention under the MHA and not an NHS Trust detention. However, this information should be available from West Midlands Police.  (How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?) | |
| Q3. | We do not collect this information as this is a Police (Power) detention under the MHA and not an NHS Trust detention.  As far as we are aware, the Police divert to another Place of Safety as it is their power and they must ensure that the patient is detained safely. | |
| Q4. | A patient will be ‘liable to be detained under the MHA’ whilst waiting an inpatient bed, and the final application to be made by an Approved Mental Health Professional.  The detention under a Section 2 or Section 3 cannot take place until a bed is found. Whilst waiting for this bed, the patient would be managed by his Responsible Clinician with the support of our Crisis Team ,if required, in the Community. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

This needs checking

Questions

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| BLACK COUNTRY PARTNERSHIP NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | From January – December 2019   * Penn Hospital, Wolverhampton ……………………………………. * Hallam Street Hospital, West Bromwich ……………….………..… | 99  111 |
| Q2. | There have been 8 of the 99 patients that waited longer than 1 hour for entry into the Place of Safety. This presumably for Penn Hospital. | |
| Q3. | Please see the attached Protocol. This is currently under review by the Trust. | |
| Date sent: 27 October 2019 | | |
| Response Received: 13 March 2020 | | |
| Contact: Information Governance Team – [bcpft.foi@nhs.net](mailto:bcpft.foi@nhs.net) – 0121 612 8017 | | |

**Questions:**

1. Is there data for delays in excess of one hour at Hallam Street PoS?

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| BRADFORD DISTRICT CARE NHS FOUNDATION TRUST (BDCFT) | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * Lynfield Mount Hospital, Heights Lane, Bradford ………………….. * Airedale Centre for Mental Health, Skipton Road, Keighley ………   . | 129  150 |
| Q2. | BDCFT does not collect this information. | |
| Q3. | Our Policy does not have any reference to responding to queues. As we have two health-based Places of Safety, if one is full, the other will be utilised. | |
| Q4. | Our Policy does not detail any such requirements. We have two options available and have not encountered the need for other contingencies. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?

What safeguards do you have in place to support people detained under the Mental Health Act, when there is no capacity in a health-based Place of Safety?

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| CAMDEN AND ISLINGTON NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * Royal Free Hospital ………………………………………….……. * The Whittington Hospital …………………………………….……. * University College London Hospital ……………………….……... | 231  407  312 |
| Q2. | We do not hold this information. This information is held by the Metropolitan Police and the British Transport Police. | |
| Q3. | We can share the working draft awaiting final approval. The copy is attached. | |
| Q4. | When there is no capacity in the C&I HBPoS, the Co-ordinator will use the  MI-capacity tool to establish the nearest available Place of Safety, including BEH PoS at Chase Farm. Local Emergency Departments may be used if no dedicated HBPoS capacity is available. | |
| Date sent: | | |
| Response Received: 03 February 2020 | | |
| Contact: Information Governance Team – [cim-tr.information-request@nhs.net](mailto:cim-tr.information-request@nhs.net)  0203 317 7100 | | |

Questions

How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?

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| --- | --- | --- | --- |
| CENTRAL AND NORTH WEST LONDON NHS FOUNDATION TRUST | | | |
| PLACE OF SAFETY | | DETAINED PATIENTS | |
| Q1. | * St. Charles Hospital …………………………….………………..… * Park Royal Centre for Mental Health ……………….………….… * Northwick Park Mental Health Unit ………………………………. * The Gordon Hospital .……………………………………………… * The Campbell Centre …………………………………….……..... * The Riverside Centre ……………………………………………….   \*The 136 Suite closed in December 2018. | S135  13  0  0  4  1  1 | S136  402  67  70  0 \*  157  337 |
| Q2. | This information is not collated. | | |
| Q3. | The copy is attached. | | |
| Q4. | Although there is nothing specific in the above Policy regarding queuing and safeguards – Page 11 of Policy highlights that “Where an individual is removed to a HBPoS by the Police, the HBPoS Co-ordinator will take the call from the Policy or AMHP to say someone has been placed on a S135(1) or S136 and either confirm that the site is able to receive the person, or if the site does not have capacity, identify and advise the Police where the alternative Place of Safety is.” | | |
| Date sent: | | | |
| Response Received: 20 January 2020 | | | |
| Contact: Nigel Sinaga-Heness – Senior Information Governance Officer  [Nigel.sinaga-heness@nhs.net](mailto:Nigel.sinaga-heness@nhs.net) – 0203 214 5852 | | | |

Questions

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| CORNWALL PARTNERSHIP NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | January 2019 – December 2019   * Longreach House, Redruth …….………………………………… | 404 |
| Q2. | The Trust does not hold this information in a reportable format. |  |
| Q3. | The Trust does not have a Policy/Protocol. If this does happen, our staff will remain in contact with the Police officers and give the detainee any information that they are requesting. Hot/cold drinks are provided, and food if needed, and toilet facilities. The Trust also alerts the on-duty Approved Mental Health Professional to start the process as the Mental Health Act Administrator. | |
| Q4. | The Police will attend the local General Hospital with the detainee and remain with them until they can be transferred to the s136 Suite. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

Rest break.

How many patients have waited for entry to this Place of Safety for more than one hour since 01 January 2019?

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| COVENTRY AND WARWICKSHIRE PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | From 01 January 2019 – 31 November 2019 ………………………… | 188 |
| Q2. | Waiting for more than 1 hours from arrival to being seen ….………… | 23 |
| Q3. | See attached. | |
| Q4. | Individuals who we are not able to be accommodated in Place of Safety, are re-directed to an A&E Department supported by Police, where the MHAA is arranged and where possible, they are moved back to the Place of Safety. | |
| Date sent: | | |
| Response Received: | | |
| Contact: Merima Hadzic, Information Governance, Safety & Quality Department  024 7636 2100 | | |

Questions

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| CUMBRIA, NORTHUMBERLAND, TYNE AND WEAR NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Tranwell Unit, Gateshead – Hopewood Park, Ryhope, Sunderland – Greentrees,  St. Nicholas Hospital, Gosforth – Alnmouth Ward, St. George’s Park, Morpeth  Patients are not ‘admitted’ to the Place of Safety. This is a clinical setting which enables a discrete, quiet and secure area for individuals who are detained under the Police Holding power of Section 136m, to be assessed under the Mental Health Act.  Upon conclusion of the assessment and identification of the most appropriate onward plan, the individual does not remain in the suite.  However, we can provide the following data, which covers the period 01 January 2019 – 30 September 2019. (Please note that we only have this data for the number of assessments undertaken, and no ‘individuals seen’, so some people may have been assessed on more than one occasion. | |
| * Tranwell (suite closed 15 April 2019 due to closure of Tranwell   Unit ….………………………………………………………………….   * Hopewood Park ……………………………………………………… * Greentrees …………………………………………………………….. * Alnmouth .…………………………………………………………….. | 6  28  65  30 |
| Q2. | No patient waited more than 1 hour for entry. | |
| Q3. | We do not have a Policy for this. Instead, we would divert to another Place of Safety within the Trust, through discussion via telephone with the Police Officers.  Of the 137 assessments required, only 10 assessments (7.3%) were diverted to an alternative Place of Safety (due to the first choice Suite being in use for another assessment).  It should be noted that Police Officers alert the local Crisis Team en-route (by telephone), when a person is detained under S136, to enable arrangements to be made to ensure that there are Crisis Team staff available to meet the Police Officers at the Place of Safety.  Therefore, if a suite is already in use, this enables this to be identified at the earliest opportunity, and the Police can travel directly to the next available Suite. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| DEVON PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Number of s136 patients admitted  January 2019 – March 2019 – prior to a centralised Place of Safety:   * The Cedars, Exeter ……….……………………………………………. * Haytor Unit, Torbay …………………………………………………….. * ECA, Barnstable ………………………………………………………..   April 2019 – December 2019 – admitted to Exeter centralised Place of Safety …………………………………………………………………………..  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Number of s135 patients admitted  January 2019 – March 2019 – prior to a centralised Place of Safety:   * The Cedars, Exeter …………………………………………………….. * Haytor Unit, Torbay .…………………………………………………… * ECA, Barnstable ……………………………………………………….   April 2019 – December 2019 – admitted to Exeter centralised Place of Safety …………………………………………………………………………. | 60  51  0  393  \_\_\_\_\_\_  13  2  1  53 |
| Q2. | The Trust does not hold this information. | |
| Q3. | Please see the attached Policy document: M18\_Place\_of\_Safety\_Jan20. | |
| Q4. | The following are interventions used if the Health Base Place of Safety is at full capacity:  When a call is received from the Police, the Nurse-in-Charge will facilitate a clear discussion regarding the patient being referred, requesting their name, date of birth, where the patient was found, nature of the concern and what had happened, and the rationale for the potential s136.  If the Place of Safety does not have capacity, the Nurse-in-Charge will discuss with the Police Officer any potential for discharges to occur that could enable an admission within a limited period of time. They will also discuss with the Police Officer, possibly taking the patient to the nearest A&E Department, and request support/treatment (if required following an overdose or self-injury), utilising the A&E Department (with agreement) as a Place of Safety.  The Police will also be supported by making contact with the Plymouth Place of Safety as a possible alternative place for the admission. If the patient is presenting with extreme aggression, or has committed a serious offence, the patient could be taken into Police Custody where a MHA assessment could be undertaken. This action would be as a very last resort, based on the patient’s forensic presentation.  All details of the referrals made are documented on the POS Log and an RMS is completed to identify any lack of capacity. Data received is also collated and shared with Senior Managers, to identify situations experienced. | |
| Date sent: | | |
| Response Received: 11 March 2020 | | |
| Contact: Chief Information Officer | | |

Questions

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| DORSET HEALTHCARE UNIVERSITY NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | January 2019 – December 2019   * St. Ann’s Hospital, Poole ..………………………………………….. | 662 |
| Q2. | No recorded information. We are not aware of any patients who have waited more than an hour. | |
| Q3. | We do not have a specific Policy regarding waiting to use the Place of Safety, when the Place of Safety is full. We now have two HBPoS, plus a further two rooms that have been risk assessed for use if needed. | |
| Q4. | As above, we have alternative accommodation. All rooms have been risk assesses and a ‘ligature management plan’ is in place for each. We conduct a risk assessment when the patient arrives with the Police and determine if the Police are required to stay and where the patient would be best managed. We conduct a physical health assessment, and the patient is on L3 (1:1) observations throughout the process.  Observations are recorded hourly. We have a dedicated HBPoS team, and have three staff per shift on duty to cover, as well as the Clinical Site Managers who cover 24/7. These staff have received training to work with patients who are awaiting assessment. As the rooms are based at the Hospital, other staff are available to rotate and cover. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| EAST LONDON NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | 01 January 2019 – 30 November 2019   * Jade Ward, Luton & Central Bedfordshire Mental Health Unit ……. * Newham Centre for Mental Health …………………………………... * City and Hackney Centre for Mental Health ………………………… * Jade Ward, Psychiatric Intensive Care Unit ………………………... * Emergency Department, Royal London Hospital ………………..…. | 293  346  304  0  144 |
| Q2. | The Trust does not routinely record waiting times for entry/admission to Places of Safety and would need to look into each patient’s Clinical Record to retrieve this information.  The cost of compliance and extracting your exact requirements would exceed the appropriate cost limit of £450 which is specified in Section 12 of the Freedom of Information Act 2000. This is based on a rate of £25 per hour, regardless of the rate of pay of any individual involved in the retrieval of requested information and equates to 18 hours work. | |
| Q3. | Safety Policy is attached. | |
| Date sent: 05 December 2019 | | |
| Response Received: 23 December 2019 | | |
| Contact: Ayomide Adediran, Information Governance Co-ordinator – 0207 655 4053 | | |

Question:

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| ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST | | | |
| PLACE OF SAFETY | | DETAINED PATIENTS | |
| Q1. | Basildon – Rochford – The Derwent Centre – The Lakes - The Linden Centre ………………………………………………………………………. | 451 | |
| Q2. | Basildon – Rochford – The Derwent Centre – The Lakes – The Linden Centre ……………………………………………………………….………… | | 224 |
| Q3. | As part of the Freedom of Information Act, all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A Publication Scheme is a guide to the information that is held by the organisation. EPUT’s Publication Scheme is located on its website at the following link: [https@//eput.nhs.uk](mailto:https@//eput.nhs.uk)  The Trust did send a copy of its Policy in pdf format. | | |
| Date sent: 27 October 2019 | | | |
| Response Received: | | | |
| Contact: | | | |

Questions

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| GLOUCESTERSHIRE HEALTH AND CARE NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | 01 April 2019 – 11 February 2020   * Maxwell Centre Place of Safety ……………………………………..   This reflects the total number of instances the s136 suite has been  used – so if a patient has been admitted to the s136 suite on multiple  occasions during this time, they will be included multiple times.  January 2019 – to date   * Detentions held in the s136 ..………………………………………. | 332  411 |
| Q2. | We do not have related to those waiting for entry to the suite, as the Police are able to let themselves in whilst waiting for Crisis, and it is not an issue raised by the Police. | |
| Q3. | There is no Policy or Protocol for queues outside the Maxwell Suite. | |
| Q4. | The Emergency Department is the multi-agency agreed Health Based Place of Safety in Gloucestershire, when the Maxwell Suite is unavailable (as per the National Guidance). | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| HUMBER TEACHING NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Since 01 January 2019 …………………………………………………. | 548 |
| Humber Teaching NHS Foundation Trust has one Place of Safety situated at Miranda House, Gladstone Street, Anlaby Road, Hull, Humberside, HU3 2R. | |
| Q2. | The Trust is unable to provide this information, as its systems do not record the information in the level of detail required. | |
| Q3. | Please see Policy – page 48. | |
| Q4. | Please see Policy – page 48. | |
| Page 48 reads: Appendix 13: Waiting Area (Agreement with Humberside Police).  Once MHRS staff are aware that the Police are en-route to Miranda House with a further detention and the s136 suite remains occupied, all action should be taken to provide support in the most appropriate environment.  A Police Waiting Room - Room 5 - has been provided on the 1st Floor of Miranda House.  The Room is situated down the corridor from the main MHRS Office. It has sofas to provide comfort for the Police and the detained s136 Service User.  If any risks have been highlighted by the referring Officers, or there are known risks which makes the waiting area unsafe, an alternative Place of Safety needs to be considered by the Humberside Police.  The Service User must be provided their rights, and the detention time starts on arrival to Miranda House. All physical health checks are required to be completed in order to ensure safety for the detained Service User. A minimum of 30-minute checks are required by health staff to ensure safety of the detained individual while remaining in the waiting area.  MHRS staff will meet the Police in the Reception and escort them to the waiting area, enquire if refreshments are required and inform the Police how to access both the toilets (opposite the Waiting Room), and the MHRS Office. As this is situated at Miranda House, access to both male and female staff is available 24/7 to help Officers from each of the inpatient wards (Avondale and PICU) and MHRS. This support is available for toilet visits and disturbances.  MHRS to ensure constant updates are provided to the Police regarding expected wait and delays.  The Room has an alarm, allowing for immediate support to be called in any instance of disturbance. The Service User is never left alone and, until complete handover, remains the responsibility of the Humberside Police within the waiting area. This is not a second s136 room. | | |
| Should a disturbance occur, and MHRS feel the waiting area is no longer safe for the Service User to remain, the Police will be asked to consider alternative Place of Safety, rationale for removal to alternative Place of Safety to be documented with Lorenzo and s136 Monitoring Form.  Disagreements associated with this action require escalation to the Service Manager in hours, and on-call Manager out-of-hours. Datix to be completed regarding any instance of disturbance within the waiting area.  Once the s136 Suite is vacant, the normal S136 process must continue. The Monitoring Form must record the original arrival time and if they were escorted to the waiting area, and when the Service User’s rights were read to the Service User. | | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| ISLE OF WIGHT NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | A&E Department, St. Mary’s Hospital – Sevenacres Mental Health Unit, St. Mary’s Hospital. | No data held |
| Q2. | The Isle of Wight NHS Trust does not hold this data. | |
| Q3. | The Trust does not have a Policy or Protocol document regarding support and care for patients who are required to wait for Place of Safety.  If the S136 Suite is unavailable at Sevenacres, patients will be accommodated elsewhere within the Sevenacres Mental Health Unit.  Please note that the Isle of Wight NHS Trust came into existence on 01 April 2012, therefore, it does not hold information prior to this date. If you require information prior to this date, please contact the Department of Health. | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions

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| LANCASHIRE AND SOUTH CUMBRIA NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Orchard – Harbour – SIPU – Chorley – Blackburn – Rigby Suite – A&E Blackpool – A&E Blackburn – A&E Preston – A&E Burnley | 1,055 |
| The Section 135 Suite, Dunlop Ward, Burnley General Hospital’s Place of Safety closed in December 2018 and was replaced by Section 136 Suite, Chorley.  Ward 8, Royal Preston Hospital, Sharoe Green Lane, now has a children’s Place of Safety at the Rigby Suite within the Hospital. We have, therefore, reported on these two sites instead. | |
| Q2. | Patients do not await entry to Lancashire and South Cumbria NHS Foundation Trust’s Places of Safety (LSCFT). If Places of Safety are full, the Police are diverted to A&E. The Police contact the Trust to establish which Place of Safety to use, prior to conveying the patient. | |
| Q3. | The Policy does not cover patients who are required to queue. However, the Policy does not cover patients are required to queue as this does not occur within the Trust. | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions

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| LEEDS AND YORK NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED  PATIENTS |
| Q1. | ………………………………………………………………………… | 536 |
| Q2. | To clarify: There is no delay for patients waiting to enter our Place of Safety. Should our Place of Safety be at full capacity, patients are directed to A&E and we shall see them there.  There may be instances whereby there is a delay outside of our control, ie: the time that it has taken the Police to arrive at our Place of Safety. However, once patients arrive, there has never been an instance of a patient waiting more than one hour for entry. | 0 |
| Q3. | No response |  |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| LIVEWELL SOUTHWEST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | 01 January 2019 – 31 December 2019   * Plym Bridge House, Plymouth ………………………………..……. * Glenbourne Unit, Plymouth ….……………………………………… | 53  257 |
| Q2. | This data is not available, as not captured. | |
| Q3. | Children and young people are taken to local Emergency Department if the child and your person’s Place of Safety is in use. Please see Policy for the adults, attached. | |
| Q4. | An adult would wait with the Police in the vehicle outside or be taken to the Emergency Department. If the person has been arrested, they would be de-arrested and taken to the Place of Safety. | |
| Date sent: 17 January 2020 | | |
| Response Received: 25 February 2020 | | |
| Contact: Geoff Baines, Director of Safety and Quality – [Geoff.baines1@nhs.net](mailto:Geoff.baines1@nhs.net)  01752 268011 | | |

Questions

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| MIDLANDS PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * St. George’s Hospital, Stafford …………………………………. * Redwoods Centre, Shrewsbury ………………………………… * George Bryan Centre, Tamworth .……………………………… | 224  343  0 |
| Please note that the George Bryan Centre has been closed and there is no Place of Safety on that site. | |
| Q2. | We do not hold any data on this. However, it is not local practice to wait for entry to the Place of Safety on these Trust sites. Please see point 4 for further information. | |
| Q3. | As per Point 2 above, it is not local practice to ‘queue’ outside the Place of Safety. Therefore, a Policy/Protocol is not available. Links to our over-arching Section 136 Policy is attached. | |
| Q4. | The Trust has a good working relationship with our acute Trust partners, who accept that their four Emergency Departments can function as Places of Safety, when there are system pressures. The Trust supports our partners where use of alternatives is unavoidable. | |
| Date sent: | | |
| Response Received: 19 December 2019 | | |
| Contact: Aled Evans, FOI Officer, Midlands Partnership Foundation Trust  [Aled.evans@mpft.nhs.uk](mailto:Aled.evans@mpft.nhs.uk) – 01785 221104 | | |

Midlands Partnership NHS Foundation Trust (MPFT) is an integrated organisation that provides physical and mental health, learning disabilities and adult social care services.

The majority of its services are delivered in Staffordshire, Stoke-on-Trent, Shropshire, Telford and Wrekin, but through inclusion, part of its specialist care group, it covers much of England.

Accommodation, sometimes referred to as a 136 Suite, is provided at St. George’s Hospital, Stafford and The Redwood Centre, Shrewsbury. The Suite at St. George’s Hospital is able to meet the needs of both adults and children, if required.

Questions

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| NAVIGO HEALTH AND SOCIAL CARE CIC | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * 2019 ………………………………………………………………..   32 of those admitted resulted in an admission to one of inpatient Lodges.  We do not record the details of service users going into the 136 Suite, just the Section information, and record their admission a Lodge. | 175 |
| Q2. | There is no waiting to enter the Place of Safety (136 Suite), once the patient, Police and staff are taken immediately to the 136 Suite. If the Suite is full, the whole site is classed as a Place of Safety and if another 136 arrives, they would be placed in one of the Lodges in the ‘relatives’ room’ to await assessment. We do not capture waiting times, as we have none. | |
| Q3. | Please see the attached document. | |
| Q4. | As mentioned above, if the 136 Suite is full, we will place further 136’s in the Lodges I the ‘relatives’ Room’, as the whole site is a Place of Safety. This enables us to have up to three 136’s.  The safeguards we have are that if we have more than one 136 on site, then the Police have to stay with all the 136’s, as we cannot possibly staff them all. Once all our 136’s are full, we then divert further 136’s to the local area, such as Scunthorpe and Hull, but this has never happened. | |
| Date sent: 16 December 2019 | | |
| Response: 17 January 2020 | | |
| Contact: Cath Davies, Performance Analyst – [cath.davies4@nhs.net](mailto:cath.davies4@nhs.net) | | |

Questions

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| NORTH EAST LONDON NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * Goodmayes Hospital, Ilford   2019 ………………………………….  2018 ………………………………….  2017 ………………………………….  2016 ………………………………….  2015 ………………………………….  2014 …………………………………. | 482  611  638  576  554  546 |
| NOTE: The apparent decline in 2019 is in pat at least due to increased numbers of patients being diverted to local A&E Departments – Queen’s Hospital, King George Hospital, Whipps Cross Hospital – which can also act as Places of Safety under S136. | |
| Q2. |  | |
| Q3. |  | |
| Q4. |  | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| NORTHAMPTONSHIRE HEALTHCARE NHS FOUNDATION TRUST | | | |
| PLACE OF SAFETY | | | DETAINED PATIENTS |
| Q1 | 01 January 2019 – 28 October 2019   * The Welland Centre, St. Mary’s Hospital ….…..……………….. * Berrywood Hospital, Dustan, Northampton ..……………….….. | 160  157 | |
| Q2 | Do not have patients ‘wait for entry’. If the 136 room is already occupied and a second s136 detainee arrives, the Police are offered an alternative room and will remain in attendance. The s136 is accepted and recorded as admitted from the point of arrival. No date kept on how long it is until the person is moved to the actual 136 room. | | |
| Q3 | Mental Health Act 1983, Section s136 Multi-Agency Policy – see page 8. | | |
| Date sent: 27 October 2019 | | | |
| Response Received: | | | |
| Contact: | | | |

Questions

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| NORTH STAFFORDSHIRE COMBINED HEALTHCARE NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * Harplands Hospital ……………………………………………………. | 180 |
| Q1. | * Harplands Hospital ……………………………………………………. | 0 |
| Q3. | The Trust does not have a Policy for providing support and care for people detained under the Mental Health Act, who are required to queue outside this Place of Safety when it is full. The reason for this is that this never happens, as there is always an alternative Health-Based Place of Safety for the detained person to be taken to. | |
| Q4. | The same answer as Question 3. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| OXLEAS NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | 01 January 2019 – 31 October 2019 ……………………………………..  This is Trust-wide data – individual sites not recorded.  We have a London-wide agreement that where a MH HBPoS is not available, we shall contact other Trusts who will accept the patient if they have the capacity. If there is no capacity within MH HBPoS, then the patient will be diverted to the nearest Emergency Department.  We do not have any records of patients waiting for more than one hour. (NB: Incidents involving s136 can and should be reported on Datix, none have been reported, but this does not mean that it has not happened.) | 328 |
| Q2. | We do not have a Policy/Protocol for this, as this should not be happening. | |
| Q3. | We have a London-wide agreement that where a MH HBPoS is not available, we shall contact other Trusts who will accept the patient if they have the capacity. If there is no capacity within MH HBPoS, then the patient will be diverted to the nearest Emergency Department.  Therefore, there should be no requirement for our staff to support people who are not in our HBPoS. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| ROTHERHAM, DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Skelbrooke Ward, Doncaster. Mulberry House, Scunthorpe  Kingfisher Ward, Sheffield   * Doncaster – 6 requested, 3 enacted ……………………………. * Rotherham – 18 requested, 18 enacted ……………………….. * North Lincolnshire – 2 requested, 2 enacted …………………. | 192  141  106 |
| Q2. | This is not information that we collate. | |
| Q3. | There is no Protocol within the Trust. | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions

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| SHEFFIELD HEALTH AND SOCIAL CARE NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | 1. January 2019 – 31 December 2019 ……………………………… | 391 |
| Q2. | Unfortunately, we do not capture this data. Patients are only recorded once they have been accepted into the Place of Safety (via S136 Monitoring Form). There is no formal method of capturing patients who have been detained by the Policy, but not yet accepted at a Place of Safety.  If the HBPoS is occupied, the process and responsibility lie with the SHSC staff to locate the nearest available HBPoS and advise/direct the Police accordingly. | |
| Q3. | We do not routinely operate a ‘waiting queue’ for access to the HBPoS, unless there is a good reason why this should occur. Where the HBPoS may be occupied, or formally closed, there is an agreed South Yorkshire escalation process this is followed. See Appendix 1 below. | |
| Q4. | If the HPBoS is occupied, the process and responsibility lie with the SHSC staff to locate the nearest available HBPoS and advise/direct the Police accordingly. Please see the attached escalation process.  We do not routinely ask the Police to hold patients within the back of a Police vehicle, unless we are awaiting the outcome of a current S136 assessment and we are confident that the Suite will be imminently available for use. | |
| Date sent: | | |
| Response Received | | |
| Contact: | | |

Appendix: Process for Escalating S136 Bed Closures within the South Yorkshire Region

136 provision by: Sheffield (SHSC); Barnsley (SWYP); Rotherham & Doncaster (RDASH); SYP; YAS

**Purpose:**

To have a standardised operational approach for managing and escalating the closure of any 136 suite (to assessment) within the South Yorkshire region. (This does not include ‘closure’ where a 136 assessment is waiting to take place).

Should the operational need mean that any 136 Suite needs to close;

1. Local procedure to be followed within the organisation for the closure of 136 beds / suite including escalation to Police, YAS, AMHP / Out of Hours Team and Trust Managers both in and out of hours.
2. Once the decision has been approved locally to close the entire 136 Suite on a site it is the responsibility of the local Trust identified lead (as per local Policy) to contact and inform the remaining Trusts within the South Yorkshire region (as above).
3. The closure of the Suite will remain under regular review (as a minimum shift by shift) until the decision can be made to re-open.
4. When the suite re-opens it is the responsibility of the local Trust identified lead (as per local Policy) to contact and inform the remaining Trusts within the South Yorkshire region along with the Police, YAS, AMHP / Out of Hours Team and Trust Managers (in and out of hours).

Questions

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| SOMERSET PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED  PATIENTS |
| Q1. | January 2019 – December 2019   * Rydon Ward Taunton ………………………………………………. * Rowan Ward, Yeovil. ……………………………………………….. | 166  205 |
| Q2. | Somerset Partnership has had no patients who have waited for more than an hour to access the Health Based Place of Safety. | |
| Q3. | Somerset Partnership has had no incidents of patients having to queue outside the Places of Safety when they are occupied. Please find attached, a copy of the Joint Agency Protocol. | |
| Q4. | As part of the Joint Agency Protocol, an escalation procedure has been developed (see Appendix 5), which provides a flow chart for staff to follow in the event that both Places of Safety are occupied. | |
| Date sent: 17 January 2020 | | |
| Response Received: 06 February 2020 | | |
| Contact: Phil Brice, Director of Governance and Corporate Development – 01278 432000 | | |

Questions

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| SOUTH LONDON AND MAUDSLEY NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | January 2019 – November 2019   * Referrals accepted to Central Place of Safety ……………………. * Diverted to Central Place of Safety ………………………………… | 775  23 |
| Q2. | Fourteen patients waited for over an hour outside the Central Place of Safety from the point of arrival to admission between January 2019 – November 2019. | |
| Q3. | Please find attached a section of the Trust Policy, indicating the provision of support and care for people detained under the Mental Health Act, who are required to queue outside our Place of Safety, when the Place of Safety is full.  The Trust Place of Safety is able to accommodate a maximum of 6 persons at any given time. In order to ensure that the Trust is able to accommodate persons requiring admission to the Place of Safety at all times, a two-stage escalation procedure is in place. See Appendix 8 and 9 for guidance. | |
| Q4. | Please see the response provided in Question 3. | |
| Date sent: 05 December 2019 | | |
| Response Received: 07 January 2020 | | |
| Contact: Vincent Okonji, Data Protection Co-ordinator – [foi@slam.nhs.uk](mailto:foi@slam.nhs.uk) | | |

Questions

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| SOUTH WEST LONDON AND ST. GEORGE’S MENTAL HEALTH NHS TRUST | | | | |
| PLACE OF SAFETY | | | | DETAINED PATIENTS |
| Q1. | There were a number of patients assessed under Section 135 – these are not technically admissions, as the HBPoS is not a Hospital Ward. 32% of the 557 were subsequently admitted to Hospital. | | | 557 |
| Q2. | We do not routinely collate data on delays prior to entry to the HBPoS, though we intend to do so as soon as systems allow and the data can be relied upon.  Before entry, the patient is under the care of the Police and/or London Ambulance Service (LAS). They collect information on the time of referral to the HBPoS and time of entry and may be able to assist you with this question. | | | |
| Q3. | | Before entry to the HBPoS, the patient is under the care of the Police and/or LAS, who provide support and care to the person they have detained under the Mental Health Act (MHA). Hospital staff informally assist the Police and LAS with this.  The relevant section of the HBPoS Operational Policy is pasted below and also attached. The Policy is currently under review and is subject to ratification by the Trust and can be made available after that has taken place. | | |
| “Clinical staff should be present to meet the individual on arrival and receive a verbal handover from the ambulance staff or the Police. Handover should include physical health findings, clear detail of mental health presenting circumstances and evolution of patient presentation over time with ambulance staff or the Police.  If the individual has been transferred from the A&E department this must include the appropriate clinical documentation. In any case, if insufficient or incomplete written documentation has been provided, this should not obstruct the patient’s care. However, the incident should be logged and fed back at the 136 Meeting for learning.  On arrival at a site the Police must remain with the detainee until the S136 staff have accepted responsibility for the individual’s custody and there has been a handover of the S136 papers (form 434) between the Police and the individual who is responsible for keeping the person safe pending the Mental Health Act assessment (this should be the s136 coordinator).  This initial handover process where the S136 staff takes responsibility for the individual (including preventing the person from absconding before the assessment can be carried out) must occur within 30 minutes of arrival, however the Police and Ambulance service should not have to wait longer than 15 minutes to gain access to the Health Based Place of Safety facility.” | | | | |
| Q4. | | | If there is no capacity at the local HBPoS, it is the responsibility of HBPoS staff to identify a suitable Place of Safety. This is done first by contacting alternative HBPoS via the MiDOS system and telephone, and then, if necessary, by contacting back-up locations such as the closest A&E departments.  If no such alternative is immediately available, HBPoS staff activate the local escalation process. During this time, HBPoS staff keep the Police and LAS staff informed of developments, so that they may inform and support the person in their custody. | |
| Date sent: | | | | |
| Response Received: 11 December 2019 | | | | |
| Contact: David Lee, Trust Secretary – [foi-requests@swlstg.nhs.uk](mailto:foi-requests@swlstg.nhs.uk) – 0203 513 6110 | | | | |

Questions

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| SOUTH WEST YORKSHIRE PARTNERNERSHIP NHS FOUNDATION TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Admissions from 01 January 2019 – 30 September 2019   * Melton ..………………………………………………………………. * Halifax ………………………………………………………………….. * Wakefield .…………………………………………………………….. | 136  170  238 |
| Q2. | South West Yorkshire NHS FT does not record this information. It has been advised that the Police may hold the information. | |
| Q3. | South West Yorkshire NHS FT has a Standard Operation Procedure stating:    ‘Police Officers with the Detainee – contact the Suite prior to attending, to  Ensure that the Suite is available and to discuss the initial referral.’  ‘If the Suite is in use or unavailable, the POS Suite Co-ordinator will advise the  Police of alternative Places of Safety within the Trust and nearby.’ | |
| Q4. | Please see answer to Question 3. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| SUSSEX PARTNERSHIP NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | Woodlands Centre, Mill View Hospital – Meadowfield Hospital Langley Green Hospital, Chalkhill, Princess Royal Hospital | Not broken down by Unit |
| Please note: We count occasions when people are brought to Places of Safety under Section 136, not the number of patients. This provided us with a more accurate view of activity. Therefore, they count multiple admissions of single patients, rather than the number of individual patients.  We can only provide data relating to Section 136 detentions. Data relating to Section 135 is not currently collated by Sussex Partnership. This information is collated and held by our local Approved Mental Health Practitioner (AMHP) teams in each Local Authority. | |
| Q2. | The Trust does not hold this information. | |
| Q3. | The Trust’s Policies are publicly available via the publication scheme. Our Assessment of Persons under Section 135 and Section 136 of the Mental Health Act Policy can be found here. | |
| Date sent: 27 October 2019 | | |
| Response Received: | | |
| Contact: | | |

Questions

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| WEST LONDON NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | * West Wing, St. Bernard’s Hospital ………………………………… * Lakeside Mental Health Unit ………………………………………. * Hammersmith Mental Health Unit ………………………………… | 118  142  12 |
| Q2. | Zero. | |
| Q3. | The Trust does not currently have a formal Policy or Protocol. | |
| Q4. | In the event of no capacity, the Trust would direct the Police to an alternative health-based location. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

Questions

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| WORCESTERSHIRE HEALTH AND CARE NHS TRUST | | |
| PLACE OF SAFETY | | DETAINED PATIENTS |
| Q1. | From 01 January 2019 ……..…………………………………………… | 367 |
| Q2. | The s136 Suite in Worcestershire is open on a 24-hour basis, and access arrangements are in place for Police Officers.  We do not collect data in relation to delays in accessing the Unit, and there is no evidence – via our multi-agency monitoring systems - of this being a problem.  Our expectations is that the Unit is available for immediate access at all times. We have three Interview Rooms, so we can accommodate three people at one time, and have an average of approximately one s136 detention per day. Furthermore, we have contingency arrangements for a Family Room to be used on an adjacent ward, for the rare occasions when the Suite is not immediately available.  Overall, although we do not collect data around this, we would anticipate any delays in accessing the s136 Suite in Worcestershire to be significantly low. | |
| Q3. | Our Protocol is a generic Policy shared across the Police Force region. We do have supplementary information contained in the Policy, with reference to some specific local issues. However, this does not cover circumstances specifically relating to patients needing to queue outside the Place of Safety. This is because, as explained above, this is not a problem we experience within our service.  We are confident that the capacity of our Place of Safety (three assessment rooms), for an average of one assessment per day, gives us a greater degree of confidence that we have sufficient capacity to meet demand appropriately.  Contained within the Policy are contingency arrangements for how we can use a Family Room on an adjacent ward, where perhaps a child is admitted and cannot be co-located o the Suite, or – in rare circumstances – where our Place of Safety is at capacity. | |
| Q4. | As indicated above, there are no specific safeguards in place, because we are confident our service has sufficient resource and capacity to meet demand, with additional capacity contingency built into the system  .  Please be aware that, although this information is accurate at the time it is provided, it may not be in the future and should not relied upon. | |
| Date sent: | | |
| Response Received: | | |
| Contact: | | |

POLICIES LIST – Alphabetical by NHS Trust

East London NHS Foundation Trust – Sections 135 and 136 Place of Safety Policy.

Camden and Islington NHS Foundation Trust – Health Base Place of Safety (HBPoS) Operational Policy – August 2019.

Central and North West London NHS Foundation Trust

East London NHS Foundation Trust

Coventry and Warwickshire Partnership NHS Trust – Operational Protocol for the Multi-Agency Management of Place of Safety under S135(1) and (2) and S136 Mental Health Act 1983 (Revised 2007). 9x2)

Midlands Partnership NHS Foundation Trust – Section 136 Policy

Shropshire / Telford and Wrekin Inter-Agency – Section 136 Policy (x2)

Somerset and Yeovil Partnership NHS Foundation Trust – Sections 135 and 136 Mental Health Act 1983 - Joint Agency Protocol

South West London and St. George’s Mental Health NHS Trust – Bed Management Policy – 23 May 2019.

South West London and St. George’s Mental Health NHS Trust – Section 126 Mental Health Act (1983) - Joint Policy and Procedure.

Staffordshire and Stoke on Trent Inter-Agency – Section 136 Policy … Final version

Worcestershire Health and Care NHS Trust – Operational Protocol for the Multi-Agency Management of Places of Safety under S135(1) and (2) and S136 Mental Health Act 1983 (Revised 2007, Revised Policing and Crime Act 2017)

Appendix 1: Leaflet intended to be given to patients detained under s136

**ADMISSION OF MENTALLY DISORDERED PERSONS FOUND IN A PUBLIC PLACE (Section 136 of the Mental Health Act 1983)**

**Patient’s name 2.**

**Name of hospital and ward**

**Why am I in hospital?**

You have been brought to this hospital by a Police officer because they are concerned that you may have a mental disorder and should be seen by a mental health professional. You are being kept here under section 136 of the Mental Health Act 1983 so that you can be assessed to see if you need treatment.

**How long will I be here?**

You can be kept here (or in another place where you will be safe) for up to 24 hours so that you can be seen by a doctor and an approved mental health professional. This can be extended to 36 hours if it is felt that it is not possible to assess you properly because of physical health concerns.

An approved mental health professional is someone who has been specially trained to help decide whether people need to be kept in hospital. If the doctor and the approved mental health professional agree that you need to remain in hospital, a second doctor may be asked to see you to confirm their decision. During this time, you must not leave unless you are told that you may. If you try to go, the staff can stop you, and if you leave you can be brought back.

If the doctors and the approved mental health professional have not seen you by the end of the 24 hours, you will be free to leave. You may decide to stay on as a voluntary patient. But if you do want to leave, please talk to a member of staff first.

**In your case the 24 hours end at:**

**Date Time**

**What happens next?**

When the doctors and an approved mental health professional have seen you, they may say that you need to stay in hospital for longer. They will tell you why and for how long this is likely to be.

You will be given another leaflet that explains what will happen. If they decide that you do not have to stay, someone will talk to you about what other help you should have.

**Can I appeal?**

No. Even if you do not agree that you need to be in hospital, you cannot appeal against the decision to keep you here under section 136. Will I be given treatment?

The hospital staff will tell you about any treatment they think you need. You have the right to refuse any treatment you do not want. Only in special circumstances, which would be explained to you, can you be given treatment you do not agree to.

**Letting your nearest relative know**

A copy of this leaflet will be given to the person the Mental Health Act says is your nearest relative. There is a list of people in the Mental Health Act who are treated as your relatives. Normally, the person who comes highest in that list is your nearest relative.

The hospital staff can give you a leaflet which explains this and what rights your nearest relative has regarding your care and treatment.

**In your case, we have been told that your nearest relative is:**

If you do not want this person to receive a copy of the leaflet, please tell your nurse or another member of staff.

**Changing your nearest relative**

If you do not think this person is suitable to be your nearest relative, you can apply to the County Court for someone else to be treated as your nearest relative instead.

The hospital staff can give you a leaflet that explains this.

**Code of Practice**

There is a Code of Practice that gives advice to the staff in the hospital about the Mental Health Act and treating people for mental disorder.

The staff must consider what the Code says when they take decisions about your care. You can ask to see a copy of the Code, if you want.

**How do I complain?**

If you want to complain about anything to do with your care and treatment in hospital, please speak to a member of staff.

* They may be able to sort the matter out.
* They can also give you information about the hospital’s complaints procedure, which you can use to try to sort out your complaint locally.
* They can also tell you about any other people who can help you make a complaint, for example an independent mental health advocate (see above).

If you do not feel that the hospital complaints procedure can help you, you can complain to an independent Commission. This is called the Care Quality Commission and it monitors how the Mental Health Act is used, to make sure it is used correctly and that patients are cared for properly while they are in hospital.

The hospital staff can give you a leaflet explaining how to contact the Commission.

**Further help and information**

If there is anything you do not understand about your care and treatment, a member of staff will try to help you.

Please ask a member of staff to explain if there is anything in this leaflet you do not understand or if you have other questions that this leaflet has not answered.

Please ask if you would like another copy of this leaflet for someone else.