



Right Care Right Person (RCRP)

Public Health & Wellbeing Scrutiny Panel

T/Chief Inspector Fergus Paterson




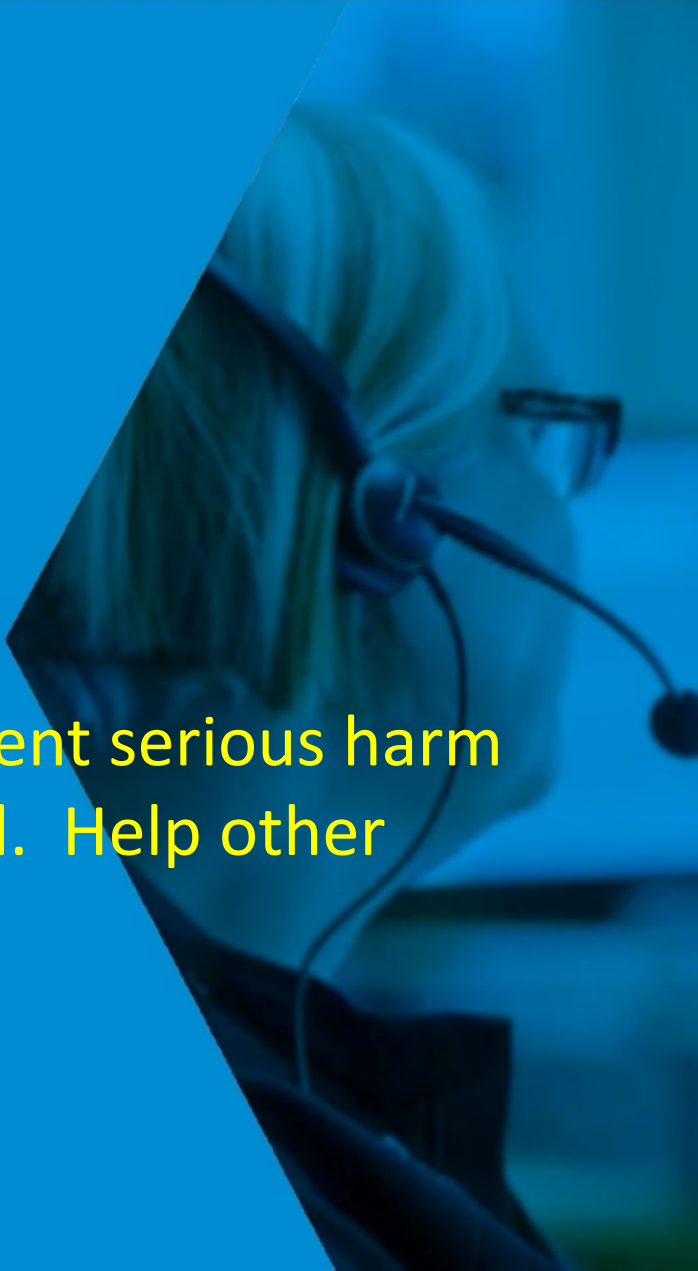


• What is Right Care Right Person

- A cross-government approach so people in need get the most appropriate care and support.
- A National Partnership Agreement (NPA) signed by police and health government departments and national professional bodies. CYP signed by chief execs.
- **Police must focus on policing duties.**



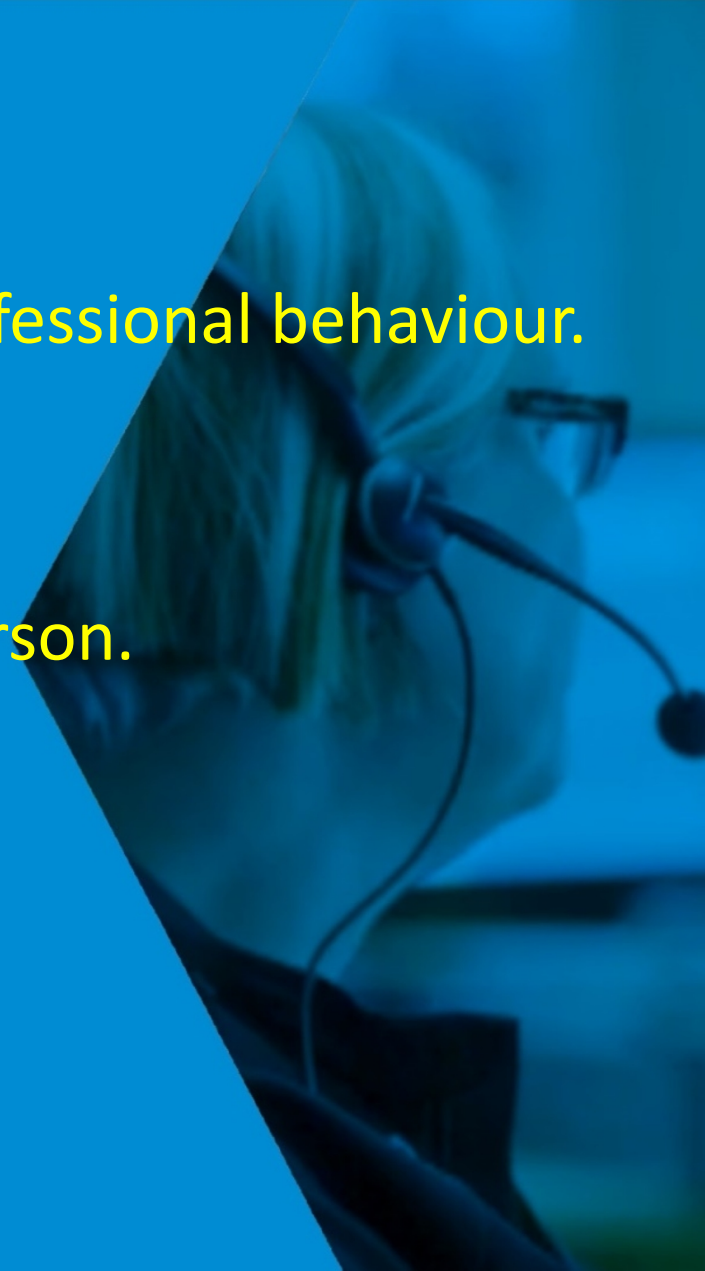
- ## Police duties

- Prevent and investigate crime
 - Keep the King's Peace
 - Save life (Section 2 Human Rights Act) and prevent serious harm and suffering (Section 3) when crime is involved. Help other agencies when needed.
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- **Police duties**

- **Police must follow guidance for ethical and professional behaviour.**
 - **Respect article:**
 - **Article 5 – right to liberty and security of person.**
 - **Article 8 – right to private and family life.**
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**From police doing this
non-crime work.....**




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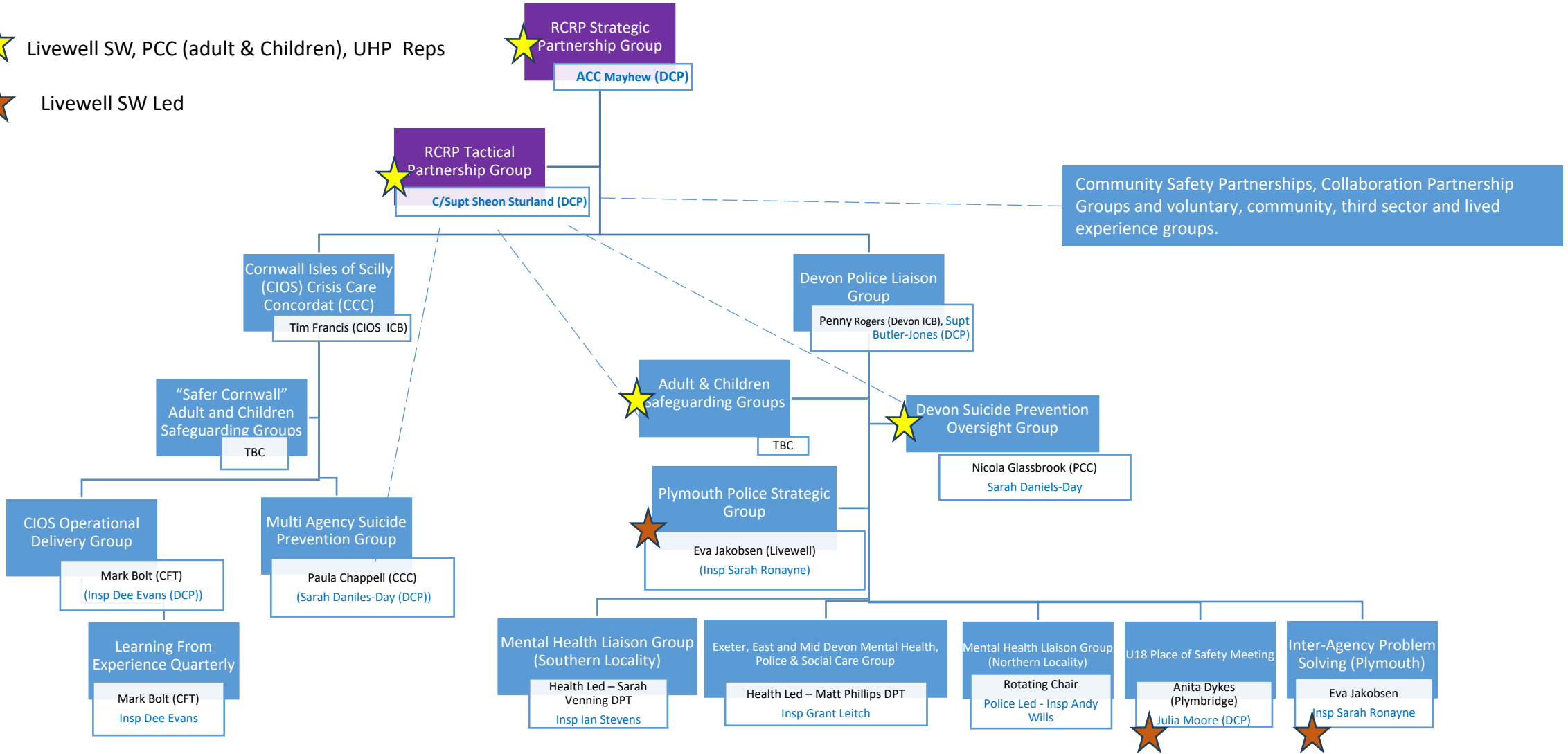
To partners with the right skills, training, expertise and experience doing this.....



Devon and Cornwall Isles of Scilly Right Care Right Person Partnership Governance and Escalation Structure

 Livewell SW, PCC (adult & Children), UHP Reps

 Livewell SW Led



Partnership engagement started March 2023. Strategic Partnership Group June established 2023.

- **Prevent and investigate crime** (including in health and social care settings and supporting victims in associated professions!)

Devon and Cornwall Police will make sure the focus on carrying our duties improves the way we respond to and deal with violence and crime against NHS Staff.



- The structured control room decision process for non-police duty incidents based on legal principles:
 - *Police may chose to accept an Article 2 and 3 duty* when a more appropriate agency (better knowledge, skills, training, equipment, legal basis) could discharge that duty.
 - *Police will “share” Article 2 and 3 duty* to save life and prevent serious harm when the more appropriate state agency is unable to.
 - Police **must** consider the circumstances carefully before agreeing to take on a “duty of care” for non-police duties.
 - A “toolkit” app has been created for call handlers to apply these principles.

When and how is this being introduced?

Phase
1

- **Concern for Welfare.** Went live mid Jan 2024. 35% fewer CFW responded to. Quicker call handling. VAWG & criminality prioritised.

Phase
2

- **“Absconders” / MHA AWOL.** Went live 3rd June. Results awaited.

Phase
3

- **Section 136 and voluntary attendees.** Planned go live end of year.

Phase
4

- **Transport of patients.** Plymouth command supports a Joint Response Police. Force vision is SWAS and MHP response. Police to support if crime or threat. Planned 2025.



Distribute through partnership structures:

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- Escalation Process
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- Scrutiny Panel
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• RCRP lessons so far!

- Language
- Is it an “emergency”
- Who can legally force entry?
- Police have previously been written into practitioners’ guidance.
- People collapsed at home is the biggest challenge. DSFRS will respond.
- Public unawareness of 111 mental health option in Plymouth. Police still taking “I didn’t know where else to call” requests for service.
- Capacity legal framework open to partners. 136 is not a route into care if incident does not meet RCRP principles.
- Open questions nationally:
 - Is 136 only for a mental health act assessment.
 - Can only an AMHP rescind a 136.

