



Devon Street Triage Pilot

.....Working in partnership with people in crisis to help keep them safe and find the support they need – whatever the circumstances

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Background:

- Devon and Cornwall Police were one of the initial four national forces selected to pilot Street Triage. There are now ten national Force Street Triage Pilot sites.
- Devon Partnership Trust in partnership with Plymouth Community Healthcare were successful in a bid to provide this pilot service to Devon and Cornwall Police.



Unique Challenges

- Large rural area/Geographic isolation
- Pockets of extreme deprivation
- Ageing demographic
- Large ex-military population
- Transient population
- Logistics



Unique Solutions

- Sharing information to inform Police decision making at the start of the process (the more we know, the earlier, the better the decision!)
- Mental Health Nurses in the Police Control Room – involved from the very first call (Street Triage example:1). Intervention before the crisis gets worse.
- Ability to influence more than just one person in crisis using information/technology (telephone)
- Still retain the ability to provide a face to face in key urban areas of Exeter and Plymouth

Unique Solutions





Unique Outcomes

- Information sharing to prevent harm and manage crisis at first point of Police contact
- Working together to divert s.136 detentions from Police custody at the earliest opportunity
- Providing continuity for service users through inter-agency/dept referrals (not just managing the immediate crisis)
- Increasing trust between partners to deliver a better service to the public

One Team Working Together





Devon Street Triage Referral Statistics

6th March- 21st April 2014:

Total Referrals Received 142

Referrals received by Devon area:

- North & West - 20
- East & Mid - 13
- Exeter - 15
- South - 19
- Torbay - 28
- Plymouth- 40

Referrals received by age:

- Under 12yrs = 1
- 12-18yrs = 9
- 18-30yrs = 44
- 30-65yrs = 76
- 65yrs+ = 5



Referrals received by gender:

56% of referrals received female

Referrals received by perceived risk:

73% of referrals received presented as a risk of harm to self

- Harm self = 104
- Unusual behaviour = 17
- Harm others = 12
- Other aggression = 2
- Intoxication = 2



Previous contact with Mental Health services:

64% of referrals related to people currently open or previously known to Mental Health Services

- Yes current = 57
- Yes less than 6 months = 22
- Yes 6 months to 1 year = 6
- Yes 1-2 years = 5
- Yes 3-5 years = 1



Referrals received by primary working diagnosis:

- Borderline Personality Disorder = 22
- Psychosis = 18
- Bipolar Affective Disorder = 7
- Depression = 6
- Other = 18

Of those referred- how many had experienced previous s.136 detentions:

- 17

Of those referred- how many detained under s.136:

- 3

Of those referred- how many s.136 detentions averted as result of Street Triage Intervention:

- 12

Street Triage Example 1:

April 2014

- Distressed female in North Devon calls 999.
- She is standing on cliffs and considering jumping off onto rocks below.
- 999 call handler recognises that this person may have mental health issues and alerts Sergeant in control room.
- Street Triage Nurse notified of incident and reviews clinical information.
- Street Triage Nurse identifies through viewing clinical records that person is well known to Mental Health Services.
- Street Triage Nurse sits with 999 call handler and whilst 999 call handler on call to female -advises call handler questions to ask female to establish risk.
- Female willing to be taken informally to Hospital for Mental Health assessment.
- Street Triage Nurse liaises with DPT Night Practitioner who agrees to assess female.
- Female transported to Hospital by ambulance and is assessed by Night Practitioner.
- Outcome- post assessment female discharged home.
- Evidence of potential s.136 aversion

Street Triage Example 2:

April 2014

- Street Triage Nurse receives urban call out to support officers with a female thought to be experiencing mental health problems and threatening to jump out of top window at supportive residential accommodation.
- Clinical record accessed by Street Triage Nurse - clinical record confirms that the female was well known to services and had experienced previous psychotic episodes- with relapse indicators identified in most recent care plan.
- Street Triage Nurse attended incident to assess female and support Police Officers. Post assessment of mental health presentation and risk - Street Triage Nurse recognised relapse indicators were present. Street Triage Nurse liaised with Home Treatment Team and female was offered and agreed to an informal admission to the psychiatric inpatient unit.
- Street Triage Nurse accompanied officers and escorted female to hospital and handed care over to inpatient staff.
- Evidence of detention aversion