

Health Screening of People in Police Custody (HELP-PC) Phase 4

Evaluation of the HELP-PC police risk assessment screen in the North of England

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Overview and Aim:

Research shows excess morbidity among detainees in police custody¹. Identification of needs is necessary for detainee safety and to break down barriers to accessing health services by facilitating assessment of needs and identification of appropriate interventions and diversion^{2,3}. Between 2009-2012, the HELP-PC study culminated in the development and piloting of a novel custody risk assessment and health screen which improved the efficacy of police screening procedures in London⁴ thus supporting officers to identify health needs. This fourth phase of HELP-PC project evaluates the effectiveness of these screening procedures, embedded in one police force in the North of England since 2016.

Methods:

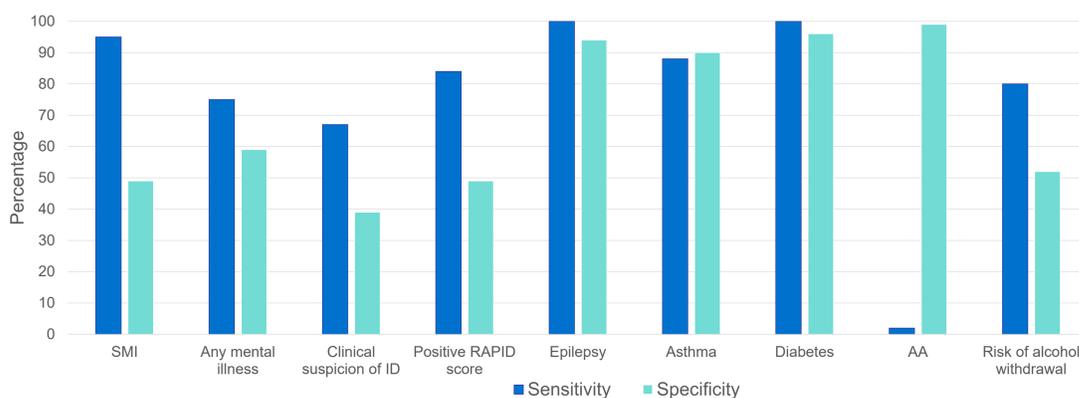
From October 2021 to July 2023, 177 detainees in custody were interviewed by research psychiatrists using clinically validated, structured interviews. Interviews assessed psychiatric (BPRS), neurodevelopmental (AQ10, ASRS, RAPID), alcohol and substance use disorders (AUDIT, SDS) & relevant physical health issues. Diagnoses were made using ICD-10 criteria. The predictive validity of the embedded HELP-PC risk assessment was assessed by comparing its ability to detect the conditions to the research interviews. Prevalence rates and predictive validity were presented using descriptive statistics using SPSS and Minitab.

Results: Analysis of 177 participants is presented:

Prevalence of health disorders

- 61% (95% CI: 53-68%) of detainees had a diagnosable mental disorder.
- 12% (8-18%) had a Severe Mental Illness (SMI).
- 47% (40-55%) hit threshold for ID (Intellectual Disability) using the RAPID tool, although there was clinical suspicion in only 16% (6-32%).
- 18% (12-24%) scored above threshold on the AQ-10 (>6).
- 29% (22-38%) scored above threshold on the ASRS (>4).
- 31% (24-38%) had an AUDIT score above threshold.
- 17% (12-24%) were at risk of alcohol withdrawal.
- 2% (1-6%) had epilepsy.
- 11% (7-17%) had a recent head injury.

Predictive validity of HELP-PC RISK Assessment Tool



- Co-morbid mental illness and a positive AQ-10 were identified by police screening in 60% of cases.
- Co-morbid ID and a positive AQ-10 were identified by police screening in 35% of cases.
- Co-morbid mental illness and a positive ASRS were identified by police screening in 62% of cases.
- Co-morbid ID and a positive AQ-10 were identified by police screening in 48% of cases.

References:

1. Samele C, et al. (2021) The prevalence of mental illness and unmet needs of police custody detainees. *Criminal Behaviour and Mental Health*, 31: 80-95
2. Bradley K. (2009) *Lord Bradley's Review of People with Mental Health Problems or Learning Disabilities in the Criminal Justice System*. Department of Health
3. Brooker C, et al. (2018) Police custody in the north of England: Findings from a health needs assessment in Durham and Darlington. *J For Legal Med* 57: 91-95
4. McKinnon I & Grubin D. (2014) Evidence-Based Risk Assessment Screening in Police Custody: The HELP-PC Study in London, UK. *Policing: Pol and Prac* 8(2):174-182

Discussion

- Results suggest the HELP-PC risk assessment continues to be effective in detecting health concerns when embedded in a police custody IT system. Compared to the 2012 pilot:
 - Prevalence of "any mental disorder" was higher (61% vs 41%) reflecting epidemiological variations between London & the N. of England;
 - Sensitivity identifying both SMI and ID remains high, suggesting the risk assessment performs well in detecting the more severely unwell and/or impaired. However, there is less certainty in the detection of more nuanced cases.
 - It is less effective in the detection of detainees with suspected ADHD or Autistic Spectrum Disorder.
- Low AA use may reflect continued uncertainty about the definition of "mental vulnerability" in the Police and Criminal Evidence Act 1984, along with ongoing problems of availability of AAs.

Conclusion

- HELP-PC continues to show the same good sensitivity identifying detainees requiring additional monitoring, assessment and referral as it did during the pilot in 2012. Police custody provides an important opportunity to identify those in need of support and improve outcomes.
- The high sensitivity of the HELP-PC screen:
 - Reduces risks of adverse outcomes by virtue of the low frequency of false negatives, allowing officers to have confidence in decision-making and allocate resources efficiently while protecting the wellbeing of detainees
 - Suggests a degree of detainee engagement and trust which is positive in the context of recent issues with police public image
- Detainees continue to be screened in relatively public areas and this may impede disclosures.
- Lower specificity suggest detainees declare mental disorders not considered important by research psychiatrists, but embedding of criminal justice liaison services means "false positives" are less problematic.
- Despite high rates of detection of SMI and neurodevelopmental disorders, AA use remains low and warrants further consideration.

Glossary:

BPRS: Brief Psychiatric Rating Scale AQ10: Autism Quotient ASRS: Adult ADHD Self-Report Scale SDS: Severity of Dependence Scale RAPID: Rapid Assessment of Potential Intellectual Disability AUDIT: Alcohol Use Disorders Identification Test