

*Right Care, Right Person*

Michael Brown OBE

# Four Phases

## The Four Phases of RCRP –

- *Welfare checks*
- *Hospital walkouts, inc AWOL patients.*
- *Conveyance*
- *Section 136 MHA – specifically, the handover period to NHS staff.*

**Not included:** s135(1) or s135(2) MHA; MCA interventions, inpatient hospital wards – but look out for mission creep!

# Six Other Ideas

Six ideas which aren't included in RCRP –

- *Mental health crisis incidents in private premises*
- *Intereventions under the Mental Capacity Act*
- *MHA assessments in private premises, inc 135(1) MHA*
- *Disorder and management problems in hospitals*
- *Crime Investigation, inc considerations of “diversion”*
- *Situations of MHA admission with “no beds available”.*

# Right Care, Right Person

The RCRP “Threshold”, National Partnership Agreement,  
Jun '23

- *to investigate a crime that has occurred or is occurring; or*
- *to protect people, when there is a real and immediate risk to the life of a person, or of a person being subject to or at risk of serious harm.*

# Ensuring the Right Care

There are conceptual difficulties in ensuring “the right care” by the “right person”.

- *The right care may not exist or may not exist now.*
- *The right person may not be obvious based on just a 999 call.*
- *RCRP addresses just some sub-topics in policing & mental health*

It is not easy to draw a line between two taxonomic systems of human behaviours – **mental health & crime** / gaps and overlaps.

# Immediate Risk to Life

## **Rabone and another v Pennine Care NHS Foundation Trust [2010] UKSC 2**

- NHS Trust argued “imminent”.
- Lord Dyson (paras 35-43) rejected imminence – “real and immediate” / “present and continuing” / “not remote or fanciful”.

**RCRP Training:** “a death which is either happening now or about to.”



**'Police won't answer mental calls ... Now my children a'**

A new approach meant to get the right help for people in crisis has had some consequences.

THE TIMES | Friday September 12 2025

**Troubled man was found dead after police refused to help**

**Fiona Hamilton Chief Reporter**

When Mark Giles rang police asking for help, he was told to wait. He waited for eight hours, but the police did not come. He was found dead in his car. The police refused to help. The police refused to help. The police refused to help.

...bounced around to different services but no one wanted to go, said Giles, who had a long history of mental health problems. ...



...in the car. The police refused to help. The police refused to help. The police refused to help.

**Police 'were warned over mental crisis'**

**Saturday September 12 2025**

**Fiona Hamilton Chief Reporter**

A whistleblower repeatedly warned six coroners have issued prevention of future death rulings flagging concerns about the policy or detailing how officers were not deployed to vulnerable people in serious crises.

Chief constables have lauded the RCRP scheme for saving up to one million police hours annually that they say will be spent investigating crime.

Brown, the former national mental health co-ordinator at the College of Policing, the standards body, said he had been over-relied upon in addressing situations involving vulnerable people who would be better served with care from mental health or medical professionals.

His concerns. He has since also warned Labour's recently departed home secretary, Yvette Cooper, of issues including heavily on call handlers assessing the right threshold for police to attend calls.

Sophie Cotton, a 24-year-old mother of two who took her own life in January, of Cotton's state of mind given a history of suicide attempts, called police four times to attend her property. Even though there was an immediate risk of harm, the threshold at which police should be involved, deployment was denied four times because of RCRP.

In a letter dated August 29, 2023, Brown wrote to Cotton's GP that the force's mental health crisis response involved "serious RCRP training" and that he did as a result, that he correctly identify call involvement. Brown WMP said that the health care profession was strengthening adding that they were people support from the when they need it.

**'My son died of overdose when police wouldn't take our calls'**

A mother wants forces to recognise that the Right Care Right Person scheme is flawed, she tells Fiona Hamilton

When Mullen went through her son Christian Parker's belongings after a fatal drug overdose in October last year, she found a note that said "I'm sorry". She was still bringing up the name of her son, who was 24, and who had been in hospital for a long time. She was still bringing up the name of her son, who was 24, and who had been in hospital for a long time.

**Service of Last Resort**

While fighting crime takes priority, the police must not ignore health emergencies

When the "Right Care, Right Person" (RCRP) reforms to policing were introduced in 2023, the problem they addressed was undoubtedly serious and pervasive. Since the days of Robert Peel, whose eponymous "Peelian principles" still define the professional ethic of the modern constabulary, police officers have been under a general duty to protect and preserve life. By 2023, however, it had become clear that meeting that worthy goal was placing police forces in England and Wales under near-intolerable strain.

Police officers should not be compelled to double up as muscular community-based mental health officials. Apart from distracting forces from other neglected priorities, such as tackling the epidemic of petty crime and shoplifting, outsourcing intervention to the police risks depriving vulnerable members of society from the appropriate specialist intervention they really need.

However, The Times has now uncovered worrying evidence that RCRP has involved an over-reliance on a unreliable system of triage that has been implicated in a series of preventable suicides and accidental deaths.

Too much responsibility is being placed on under-trained call handlers, who must now make rapid decisions in life-or-death circumstances. Such attempts to delay police intervention often prove counterproductive. Unlike other services, the police have unique powers to force entry to homes when life-threatening danger is suspected, and end up being deployed eventually to situations that escalate to the point where detainment or arrest are appropriate. Overzealous application of RCRP now means that police are not attending incidents even when a threat to life is clearly established, something that contravenes their legal duties.

At whistleblowers like the former police inspector Michael Brown attempted to point out when RCRP was first introduced in 2023, it was obvious that an indiscriminate withdrawal of police intervention to manage such risks to life would compromise public safety. What is needed now are explicit, well-balanced guidelines that clearly delineate the responsibilities of the police and other public services. One worthwhile efficiency would be to eliminate the time officers spend in pursuing "non-crime hate incidents" and censoring the free speech of public figures such as the comedian Graham Lineham.



Photo: David Smith said he was harassed by police officers. 'I was told to be quiet'.

# Twenty Inquests to Date

- **Paul Alexander** (West Yorkshire)
- **Dean Bradley** (Cleveland)
- **Claire Briggs** (Greater Manchester)
- **Sophie Cotton** (Durham)
- **Ricki Gillatt**\*\* (South Yorkshire)
- **Sebastian Oliver** (West Midlands)
- **Ryan Ouslem** (Sussex)
- **Peter Ramsden** (Humberside)
- **Charlotte Tetley** (Cheshire)
- **Colin Wiles** (Humberside)
- **Tcherno Bari** (West Midlands)
- **Michael Bray** (Suffolk)
- **Stevyn Carr**\* (Northumbria)
- **Heather Findlay** (London)
- **Michael Heath**\*\*\* (Greater Manchester)
- **Katie Overd** (Greater Manchester)
- **Christian Parker** (West Mercia)
- **Elaine Tarbuck** (Greater Manchester)
- **Martin Waite**\*\* (West Yorkshire)
- **Elizabeth Watson**\*\*\*\* (Humberside)

**12 other deaths pending inquest / inquiry**

\* RCRP not mentioned in the PFD, mentioned in the force's response to the PFD.

\*\* No PFD issued by the Coroner for reasons which are not obvious to me

\*\*\* Doesn't mention RCRP, but is obviously an example of what can go wrong

\*\*\*\* No substantive learning for RCRP to be drawn.



# Paramedics / AMHPs / MH Nurses

If I were you ...

- Report what you think needs reporting and ask for help if you need it – make the police turn you down and rationalise their decisions, preferably in **writing**.
- **Stress language from the RCRP world –**
- “I believe there is a real and immediate risk to life which is present and continuing”
- “The risk here is not trivial or fanciful – there is a risk someone may die or suffer serious harm.

**Document everything**, including names.

# Paramedics / AMHPs / MH Nurses

And also if I were you ...

- Where unhappy with a decision, **always** seek a supervisor review – ask for reasons for any continued refusal in writing, to your email and keep a copy in the incident or patient records.
- If challenged about that, it is for “professional record keeping in case of any inquiry, investigation or inquest.”

**Document everything**, including names.

# Contact Details

**email** – [michael@mhcinights.co.uk](mailto:michael@mhcinights.co.uk)

[www.mhcinights.co.uk](http://www.mhcinights.co.uk)

[www.mentalhealthcop.wordpress.com](http://www.mentalhealthcop.wordpress.com)

**@mentalhealthcop** –

**Facebook / BlueSky / LinkedIn / X / Instagram / Threads**