



Maria Leonard

Criminal Justice Liaison Lead and CPN

Forensic Community Team
Northumberland, Tyne and Wear NHS
Foundation Trust



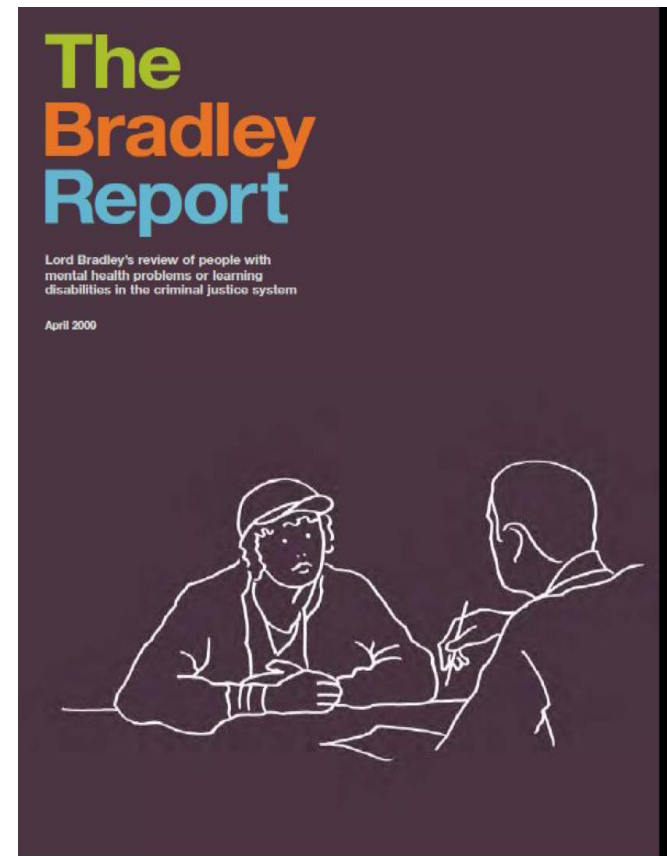
Big Diversion Project North East



The Development of the 'Northumberland Criminal Justice Liaison Service'

Presentation content

- Where we started from.
- Trust/History/Challenges.
- Initial discussions.
- Process.
- What is in place now.
- Evaluation/feedback/limitations
- What does the future hold?





Over the last 15 years diversion schemes have developed in neighbouring areas

- **Newcastle** – Newcastle Magistrates Court, Pilgrim Street
- **North Tyneside** – North Shields Magistrates Court, Albion Road, North Shields NE30 1AP
- **Gateshead** – Gateshead Police Station, High West Street Gateshead NE8 1BN
- **South Tyneside** – Millbank Station Road, South Shields, Tyne And Wear NE33 1RR
- **Northumberland and Sunderland** – no formal services



Shining a light on the future

Northumberland, Tyne and Wear



NHS Foundation Trust

- Northumberland
- Newcastle
- North Tyneside
- Gateshead
- South Tyneside
- Sunderland



50 miles / 80 kilometres



County of Northumberland

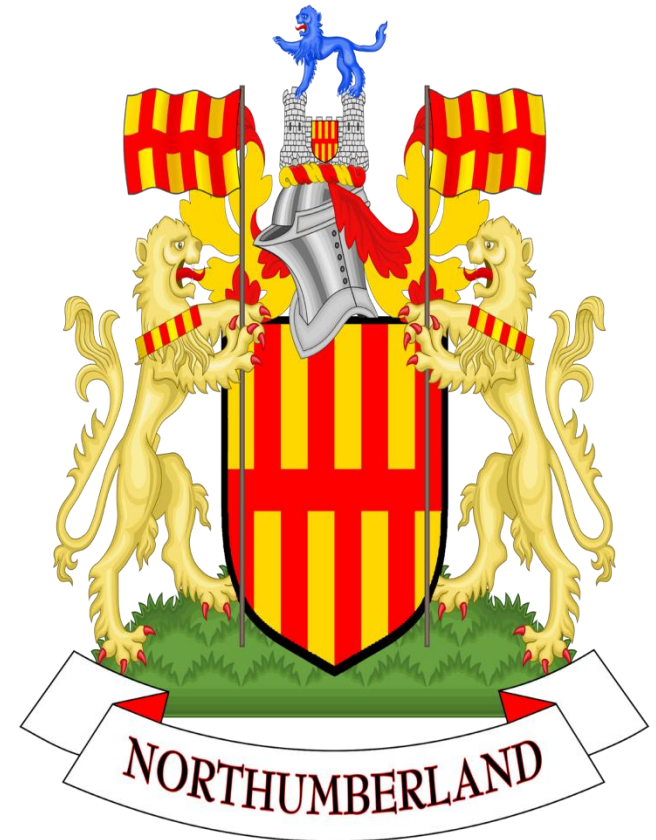
Shares its borders with Scotland in the north, Cumbria to the west, County Durham and Tyne and Wear to the south.

Population of 311,000 - Lowest population density in England only 62 people per Km²

Large geographical area, primarily rural although 'urban pockets'

Low ethnic population at 1% the population, compared to 9.1% for England.

History of heavy industry and mining, recently tourism and public services.





Initial discussions

- A number of incidents within the CJS
- Concerns were raised by agencies for the need to have mental health 'input' into the Northumberland area
- High level discussions between NTW and CJS and an agreement for a 'working group' to take this forward
- Group consisted of representatives from: -
 - Forensic mental health, local mental health and drug services
 - Police, Probation
 - Court Managers, Magistrates
 - MHCO
 - GeoAmy



Key challenges of the 'Working Group'

- An agreement of what was needed
- What the service would eventually look like.
- Where would the service be delivered?
- Timescale?
- How is it funded?
- Who would lead of the development?
- Who would provide the service - Short and long term?
- What disciplines would be involved?
- Access to relevant information and how would that information be shared



Pathway - What it looks like!

- Delivered at Bedlington Police station/ Magistrates Court?
- Delivered by the local MH crisis team and IAPT
- Staff start at 7am
- Starts at the (earliest point in CJS) police station and will follow detainees over to the Magistrates cells if needed.
- MH screening includes gathering information from Police, MH records, Probation, GeoAmy and observations.



Pathway - What it looks like!

- Interviewing the detainee to establish their needs and 'sign post' them to the appropriate care pathway.
- Information shared with current care team, prison health care, GP, drug and alcohol services and associated services.
- Verbal hand over to the custody sergeant to update the PNC
- Written handover of relevant information to the Magistrates, defence solicitor CPS and GeoAmy.
- Update mental health's electronic records and share information



Data Collection

Declined interview	06
GP referral made	06
CMHT referral made	01
Drug referral made DIP	15
Alcohol referral made ESCAPE	07
IAPT referral made	05
Advised self referral to GP	03
Advised self referral to CRHT	06
Advised self referral to DIP	06
Advised self refer to ESCAPE leaflet given	01



Data Collection

Advised to self refer to IAPT leaflet given	01
Prison healthcare informed	06
Child services informed	03
MAPPA informed	01
MARAC informed	02
Unable to interview due to not being processed by police	02
No further action	



Detainees in custody over a 24 hour period	Detainees released from custody outside of working hours of custody liaison team	Detainees available for screening by custody liaison team
14	9	5
21	13	8
51	45	6
11	4	7
19	12	7
56	53	3
9	1	8
14	10	4
23	18	5
65	53	12
26	17	9
66	57	9



What has been successful

- Shared recognition of risks
- From begin of idea to delivering service – 8 weeks??
- Shared agreement in what the service should look like and how to deliver it.
- ‘Inter agency working’ **that actually worked**
- We have received ‘Positive feedback’
- Agreed joint working protocols and procedures
- Agreed shared information and documentation
- Single point of contact between health services and the criminal justice system
- An agreed care pathway for patients outside of the working hours of the team.



What still needs to be done!

- Better interface with other diversion schemes
- Improve interface/communication between mental health teams
- Develop multi agency training packages
- Develop information sharing, access to each others? Inter agency forums
- Fill the gaps in the provision (sample figures)
- Expand timescale (minimum 9-5)
- Formally evaluate
- Learn from 'process' – link in with future developments
- **For sustainability it needs funding**



Thank You

Any Questions?

