

Case 8 Issue 41 – Call handling		LEARNING THE LESSONS
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Vulnerable caller makes repeated calls to the police

Response to a call from a woman with mental health issues, raising issues about:

- *Carrying out THRIVE risk assessments*
- *Identifying vulnerability*
- *Dealing with calls where audio is unclear*

This case is relevant to the following areas:

Call handling



Mental health



Overview of incident

The police received a report that Ms A had boarded public transport while naked. An officer detained her under the *Mental Health Act 1983* and took her to a mental health hospital.

A couple of days later Ms B, a staff nurse at the hospital, called the police and requested a welfare check be carried out on Ms A. Ms B described Ms A as a voluntary patient who had left the hospital the previous day and had not returned as planned. Ms B told Call Handler C that Ms A's "risk to herself was low at the moment."

Ms B said she had been to Ms A's house earlier that day but could not see inside the property. There was no answer when she knocked on the door. Ms B described Ms A as "vulnerable... usually under the influence of alcohol and cannabis... her risk to others is very low." Call handler C gave the incident log a 'standard' grading before transferring the incident log to dispatch.

Dispatcher D accepted the log within seconds of the transfer. They made a log entry shortly after, highlighting Ms A's warning markers as 'bipolar' and 'MARAC (Multi-Agency Risk Assessment Conferences) victim'.

There were no further entries on the log for several hours until Mental Health Liaison Worker (MHLW) E wrote an entry describing Ms A's 'risk to self and others' as 'low', 'vulnerability as moderate' and she was on the verge of a bipolar relapse. MHLW E recorded police powers were limited if Ms A did not want to return to the hospital and after speaking to hospital staff,

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they did not believe Ms A had come to harm. Therefore, the hospital ward would continue its own follow-up enquiries.

Dispatcher F wrote on the incident log there was “no requirement at this time for police to attend...” before closing the log with no deployment.

The IOPC interviewed a control room supervisor, Mr G, as part of the investigation. Mr G said that “Standard [grading] can cover a wider range of calls, it can be something of a cover-all. It is used when immediate or urgent deployment is not necessary.”

Later the same day Ms A called the police using 999. Ms A told Call Handler H she wanted to see her boyfriend but he was “missing, presumed dead”. Call Handler H asked how long he had been missing and Ms A replied “... about ten million years.” Call Handler H questioned whether it was a legitimate call. Ms A said it was and continued to engage with the call handler. Call Handler H said “Okay I’m going to get that put across to [inaudible] for you and gonna get that looked into see what we can do with helping you with that one, okay.”

Call Handler H logged the details Ms A provided and recorded she believed it was mental health related. She recorded “From previous logs, believe this is MH related, nothing ongoing. Caller was ok on the phone. No current risk”. The log was graded as ‘standard’. Call Handler H did not transfer the log and closed it with no further actions.

The force demand management policy stated call handlers should keep callers informed of any delays or changes to their original expectation. There was no evidence Call Handler H told Ms A the grading of the call, or that it would be closed with no further action.

Ms A made a second call to the police a few minutes later. Call Handler I asked Ms A twice “what’s the emergency?”. Ms A said “I’ve just drank a bottle of turpentine, actually it were white spirit... and she’s in pain.” Call Handler I replied “I’m sorry I can’t hear you very well am I on loud speaker?”. Ms A said she did not know how to take her off loud speaker. This made it very difficult for the call handler to hear Ms A.

Ms A continued talking about her missing boyfriend who she said was “everywhere”. During the conversation Ms A was coughing repeatedly. Call Handler I asked Ms A if she was ok and Ms A mentioned “white spirit” “that tasted...awful”. Call Handler I told the IOPC she did not hear Ms A talk about white spirit or turpentine. Call Handler I ended the call because she said Ms A was not engaging.

Call Handler I made entries on the same log that was previously closed by Call Handler H. She recorded Ms A “was not making sense... states she lost her boyfriend...” Call Handler I recorded she had offered to take a missing person report from Ms A but Ms A said he was not missing. Call Handler I reactivated the incident log and transferred it to dispatch.

Call Handler I told the IOPC she did not apply the THRIVE (threat, harm, risk, investigation, vulnerability, engagement) risk assessment when answering this call. She believed Ms A was under the influence of alcohol or drugs and was not aware of existing issues with mental health.

Force THRIVE policy stated that “on receipt of new/further information with regard to an existing incident the call handler should reassess and check and record that the current grading is still valid.” The College of Policing Mental Health Authorised Professional Practice (APP) on call handling states that call handlers should follow the National Decision Model (NDM) and continually review and reassess it as new information becomes available. Call Handler I’s failure

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to use the THRIVE risk assessment to continually review the call was not in line with Authorised Professional Practice (APP) or force THRIVE policy.

Ms A made a third call a couple of minutes after the second call. Call Handler J answered the call. In the call Ms A told Call Handler J “I’ve just set fire to myself with some turpentine and an oily rag.” Later during the conversation Call Handler J asked if Ms A could put the fire out. Ms A replied “it’s nowhere on my body it’s on a piece of paper in my lighter.” Call Handler J asked for Ms A’s full name but received no answer. Call Handler J repeatedly asked Ms A the same question but received no answer. She told Ms A the call would end if she did not respond. Call Handler J said “I’m clearing the line” and ended the call.

Ms A’s neighbour called the police to report that Ms A’s property was on fire around 15 minutes after the third call. Police officers and the fire and rescue service attended and discovered Ms A behind her front door with significant burns to the top half of her body. Ms A was pronounced dead at the scene.

Type of investigation

IOPC independent investigation

Outcomes for officers and staff

Call Handler I

1. Call Handler I was found to have a case to answer for misconduct in respect of the allegations she failed to identify Ms A as vulnerable and failed to deal with the call in accordance with College of Policing APP and force THRIVE policy. Call Handler I received management action.

Action taken by this police force

1. Through THRIVE and RETHRIVE training, it has been reiterated that when calls are distorted or there is a fault with the line, action needs to be taken to clearly establish the nature of the issue.
2. The move to a more up-to-date telephony system will assist these issues and allow easier access to call recordings or playbacks.
3. New headsets are being issued to all staff to improve the quality of calls.

Questions to consider

Questions for policy makers and managers

1. How does your force make sure call handlers are able to identify vulnerabilities?

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2. What training does your force provide to call handlers on the action they should take when a caller stops engaging?
3. How does your force make sure call handlers are aware of areas of APP relevant to call handling?

Questions for police officers and police staff

4. How would you approach completing a THRIVE risk assessment in a situation where you cannot hear or understand the caller, but there may be a concern for welfare?
5. What steps do you take to notify the public on what action will be taken in response to their call?