



Deputy Director General Ian Todd
Independent Office for Police Conduct

28 March 2019

Your reference: 2017/087237

Dear Ian

I am writing this response to your 28A of Schedule 3 to the Police Reform Act 2002 formal recommendation and response notice to the College of Policing dated 31 January 2019.

The notice set out the following recommendation: 'The College of Policing should seek expert advice to determine the medical implications of using incapacitant spray when a subject is suspected of having an item in their mouth (that may lead to an obstruction to their airway).

The College of Policing should then take the action it deems appropriate to deal with this expert advice.'

The College is a member of the police Self Defence and Restraint (SDAR) working group (WG) which has been working to examine the medical and other evidence that relates to the use of incapacitant sprays on people who are suspected to have items in their mouths.

The SDAR working group membership includes qualified physicians, SDAR trainers, senior managers and academics. The group found that the medical evidence relating to the impact of incapacitant spray on subjects varies. A medical opinion that exposure to such spray could cause a subject to 'gasp', causing a sharp inhaling of breath was contradicted by other medical opinion that exposure leads to coughing and spluttering with an accompanying expulsion of breath. The relevance of gasping or coughing is in respect of the potential for a subject with an item in their mouth to partially ingest it which could in turn lead to a risk of choking.

A summary of the relevant evidence was contained within a medical review of the management of detainees with suspected packages in their mouths which, inter alia, examined the issues of the use of incapacitant spray. The report was written by Dr Meng Aw-Yong the Medical director of forensic Healthcare Services MPS Detention and subjected to Peer Review by [REDACTED]

I have attached the review written by Dr Meng Aw-Yong.

Based on the medical review the SDAR WG came to the conclusion that there was no settled medical evidence that the use of incapacitant spray on subjects is likely to lead to an increased risk of inhalation. For this reason the SDAR WG decided not to advise officers that such an increased risk exists. However

the medical review did set out factors that are known to lead to an increased risk of choking and the SDAR decided to amend the previous guidance as a result of what it learned.

Advice on SDAR matters is provided to officers through the material published in the Personal Safety Manual which is an online manual of tactical options that is developed by the SDAR and published to the policing community by the College of Policing.

I had hoped to be able to share with you the revised section of the Personal Safety Manual as part of this response. However, it is not yet ready but should be completed within the next week or so. I will forward this to you as soon as it has been finalised.

I hope that this information provides you with the necessary assurance that the matter that you have raised with the College through the Section 28A notice has been properly considered and that a course of action has been taken that is consistent with the best evidence available and with the College and SDAR's commitment to provide guidance that minimises the risk of harm to subjects and officers.

Please let me know if you would like any further information.

Yours sincerely



Faculty Lead Uniformed Policing