

Our Ref: NG/RM/25278
Date: 3rd September 2025

Nicola Griffiths
Deputy Director of Governance
North Staffordshire Combined Healthcare NHS Trust
Lawton House
Bellringer Road
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ST4 8HH

Reception: 0300 123 1535

Dear

Freedom of Information Act Request

I am writing in response to your e-mail of the 6th August 2025. Your request has been processed using the Trust's procedures for the disclosure of information under the Freedom of Information Act (2000).

Requested information:

I am requesting the following information under the Freedom of Information Act:

1. Please state which police force/s serve the area covered by the Trust. **Staffordshire Police.**
2. Any reports, assessments or data – internal or published – where the Trust has monitored the implementation and impact of Right Care, Right Person by the local police force/s. **Please see Appendix 1 attached.**
3. Details of any serious incidents or patient safety incidents where Right Care, Right Person was a factor.

There has been 2 comprehensive safety reviews completed where RCRP has been a potential contributing factor, however these cases are being reviewed as part of a wider ICB review into this same concern. A thematic review of cases identified locally is being overseen as a patient safety incident investigation (PSII) under the patient safety incident reporting framework.

If you are dissatisfied with the handling of your request, you have the right to ask for an internal review of the management of your request. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Dr Buki Adeyemo, Chief Executive, North Staffordshire Combined Healthcare Trust, Trust Headquarters, Lawton House, Bellringer Road, Trentham, ST4 8HH. If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision.

The Information Commissioner can be contacted at: Information Commissioner's Office,
Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely



Nicola Griffiths
Deputy Director of Governance

Incident Number	Incident Date	Received Date	Actual Impact	Incident Type	Cause Group	Cause 1	Site	Department	Details Of Incident	Restraint ?	Seclusion ?	Total Interv. Duration	Does the duty of Candour apply to this incident ?	Division	Status Type	Restraint ?	Signature Anchors ge Point?	Signature Anchors ge Type Used	Patient Safety Inc.	Ethnic Group	Sex	Age	Intervention Physical	Intervention Medical	Intervention Device	Intervention Seclusion	Intervention Phone	Intervention Total Hold Time	Intervention Rapid Trans.	Incident Time								
82278	28/04/2025	Apr-25	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Risk To Self/others	Harplands Hospital	High Volume Users (Crisis Care Centre)	Telephone call made to 101 to request welfare call for patient. Informed the call handler that last face to face contact with services was 16/04/2025 and last telephone contact 21/04/2025. Informed that he had an arranged appointment with the alcohol team on 24/04/2025 however when they arrived at the property they received no response. Informed further telephone contact has been made by myself on 20/04/2025 which went straight to voicemail. Alcohol team have also attempted further telephone contact over the weekend however calls have gone to voicemail. Further 3 telephone calls made by me today all of which gone to voicemail. Cold call completed by me today again which was ineffective. Informed that both hospital system and GP system have been accessed, and patient has not been in contact with his GP, A&E or both the alcohol services patient is open to. Contacted made with ex-partner, documented as NOK however phone number not in use. Contacted made with patient's mother by CHAT and mum has stated she has not seen him or heard from him. Mum has reported she is worried as patient usually texts her every day. Police advised that at the current time they would not be able to complete a safe and well check as it does not sit with them as patient is not at immediate risk of harm and his needs are medical and not police related. Advised to contact ambulance service to request they complete a call to the property and if they are unsuccessful then they will contact the police for support. Further call made to 111, call handler advised me to contact 999 or 112. Contacted 999 and explained that the police had advised me to contact the ambulance service as they would not go to the property before patient is seen by paramedics. Call handler advised that they would not be able to send an ambulance as patient may not necessarily be in the property. They informed me they would only attend if we had an exact location for patient and that I would need to call police again and report him as a missing person. Further call made to 999 to speak to the police. I explained all the information to the call handler and now 101 had advised me to call 111 who then told me to contact ambulance through 999 and ambulance had told me to contact the police back. Call handler advised me that she would file a missing person report and asked me for further information about patient's presentation the last time I saw him and about his risks and vulnerabilities. Once submitted she informed me that officers were on the way to patient's property to check if he was there. She provided me with a reference number and advised me to call back and provide the reference number for any updates. She also took HVT duty telephone number and advised that they may contact me back if they require any further information. Call was then ended mutually.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	41	N	N	N	N	N	N	N	00:00	N	N	N	00:00	N	N	13:45
88761	01/11/2024	Nov-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Inappropriate Conveyance	Harplands Hospital	Crisis Resolution Home Treatment Team	Telephone call from police officer who was patient at Newcastle Council Offices. Having had previous knowledge of the patient I asked if the patient was intoxicated with alcohol. I was advised by the Officer that he was not under the influence of alcohol and would 'wait to be seen' at the CCC.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	52	N	N	N	N	N	00:00	N	N	16:40						
									On arrival at the CCC the patient was heavily intoxicated, demanding and had an open can of cider which he continued to drink in the reception area and had several other cans in a shopping bag. Police left the CCC before a discussion could be taken for further handover. Patient did not appear to understand that he had been brought to the CCC or the reason for this. He was agitated when it was advised that he could not continue to stay on the premises. He was derogatory regarding mental health services and left the CCC without an assessment.																													
88318	07/10/2024	Oct-24	#####	3 - Moderate	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Communication Issues	Harplands Hospital	Crisis Resolution Home Treatment Team	Crisis caseload informed by AMHS practitioner that family had attended the property of a patient who crisis caseload had an ineffective contact previously in the day. Family had contacted the police with concerns for the patients welfare, however police refused to complete a welfare check not in line with RCRP partnership agreement. Patient was later found unresponsive by family following having taken an overdose. The following day patient died in A&E at 10:24.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	F	68	N	N	N	N	N	00:00	N	N	Y	16:52					
82507	03/06/2025	Jun-25	#####	2 - Minor	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - AWOL	Royal Stoke Hospital	Mental Health Liaison Team	Referral by Ambulatory 13:35ref, information as follows: Took OD of pregabalin 300mg tablets and ingested 20 worth of heroin this morning with intent to end life. Patient appears drowsy, quiet and not making eye contact but able to hold a conversation. States feels like he can't cope anymore, has been feeling low in mood for the last three months. Attempted to cut throat with sharp piece of plastic last night, no wound noted in throat. States he feels like hanging himself would be the quickest option. Patient wishes to 'seek help'. Referral screening completed by M< and patient agreed to remain in the department for full assessment. Patient left the A&E department before assessment. 101 called to report due to concerns. Patient is NFA, phone switched off and NOK not answering. 101 declined to facilitate a welfare check under RCRP. Flow chart followed and all actions that could be taken were prior to police being called.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	37	N	N	N	N	N	00:00	N	N	N	00:00	N	N	17:30		
80518	03/02/2025	Feb-25	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - AWOL	Harplands Hospital	Crisis Resolution Home Treatment Team	MHAH called due to concerns around patient's safety and thoughts to end life. Patient attempted to leave CCC, found by practitioners and patient agreed to return to reception whilst practitioners gained an update from doctors about imbalances. Whilst returning to make this call, patient left CCC again. Police contacted on 999. Call noted to be minutes 34 long due to police stating that patient was free to leave if he is not detained. Advised that there were immediate concerns for patients safety at present. Put on hold several times as case was discussed with Sergeant. Advised that they would contact back if they would accept due to 'Right care, right person'. Advised contact for update.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	0	N	N	N	N	N	00:00	N	N	N	17:00					
88483	19/10/2024	Oct-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Communication Issues	Harplands Hospital	Crisis Resolution Home Treatment Team	Decision made by person 1 following discussion with person 1 to contact the police on 999 due to concerns for victim. The team had attempted to contact victim multiple times by phone, 2 ineffective cold calls at his home address and had DNA appointment with RSLH. No contact with GP since September. Person 1 spoke to the police and the last known contact was by his social worker on 10 Oct 2024. Police have reviewed the case and the outcome was that using the Right person right care model victim did not meet the threshold for a welfare check by the police. The response from the call handler was that 'Victim was a little bit like a drink and did not want to engage with services' he also said 'It is his right to privacy and the call has been logged today' Police log number - 19/11/391 Discussion with site manager who advised this was not appropriate rationale for police non-attendance and to call an ambulance. Ambulance contacted via 999, no current ambulance to attend but has been logged and when an ambulance is free they will attend the property. Log number 3330	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	66	N	N	N	N	N	00:00	N	N	N	00:00	N	N	18:15		
80380	27/01/2025	Jan-25	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Other	Lyme Brook Centre	Lymebrook CMHT	Patient was brought to the LBC this morning by police officers. Patient was advised that she was closed to LBC and no apt was planned. Police were advised to take patient to A and E or CCC (if there was a mental health need). Staff noted at 15:00 that patient was sat on a bench near the LBC site (outside of Bradwell Hospital), she was sat bent over, inappropriate clothes for the weather (hoody, small socks and sliders). Myself and NA approached patient, she appeared unkempt, wearing trackie bottoms, hospital socks, sliders and a hoody. Patient was in possession of what looked like a hospital property bag, patient reported that she had her belongings stolen and all that she had left was in the bag. Patient was offered to come in to the LBC to get a hot drink, she declined stating that she needed a cigarette. Patient then became hostile in her manner stating that no one is helping her, she reported that the Police had 'let her down' this morning and she has nowhere to go (NFA). Patient shouted 'I'll walk down the motorway', whilst pointing at the A&A, she stated this on 2 occasions. We again suggested patient come into the centre to get warm and have a drink, however she started to gesture at us and her demeanour became more hostile, we therefore walked away. We were then approached by a Bradwell hospital member of staff who advised that they had contacted the Police, whose advice was 'move her on', and they declined to attend.	N	N	00:00	N	NSCHT Community	Completed By Managers	N	N	N	N	White - British	F	45	N	N	N	N	N	N	00:00	N	N	N	00:00	N	N	15:00	
81181	12/03/2025	Mar-25	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - AWOL	Summers View	Summers View	Staff member 1 located AWOL patient in the community and made efforts to return patient to unit voluntarily. Patient declined to return and presented as agitated during the conversation and walked off towards nearby town centre. Staff member alerted the police via telephone of patients presentation and whereabouts. Police call handler advised it was the duty of the care team to return the patient to the unit, under right person, right care and could not see the need for police assistance. Staff member advised of the patients current risk profile and the need for police assistance. Police call handler advised that they would update the missing persons record.	N	N	00:00	N	Specialist Services	Completed By Managers	N	N	N	N	White - British	M	30	N	N	N	N	N	00:00	N	N	N	00:00	N	N	10:48		
89562	07/12/2024	Dec-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Risk To Self/others	Harplands Hospital	Crisis Resolution Home Treatment Team	Concerns that WMAS were deployed to job on 7/12/2024 rather than Police in the first incident. I have raised an incident from a call that I took while on response duty on 07/12/2024 regarding RCRP. Call came through from WMAS. WMAS were sent out to the premises in in Stoke following a distress call from above's 14 year old son. After discussion with the team, we are concerned that while WMAS would normally have been the most appropriate service, however, the initial 999 call was made by above's 14 year old child, reporting that his father was voicing thoughts to end his life. Both were in a hotel room, in an unfamiliar location with no real intent or purpose to be there. While both were not known to services locally, the 14 year old is open to Birmingham social services, and therefore we feel that in this case, from a safeguarding point of view, the police would have been the most appropriate service to respond in the first instance.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	0	N	N	N	N	N	00:00	N	N	N	00:00	N	N	15:30		
81140	11/03/2025	Mar-25	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - AWOL	Summers View	Summers View	Patient failed to return from leave. Left unit at 10am and no contact has been made. Police called and family notified. Family did make contact however patient left. Police not responding as stating that unit have not done enough to find the patient ourselves. Police called back to state they would initiate missing persons. Site management notified.	N	N	00:00	N	Specialist Services	Completed By Managers	N	N	N	N	White - British	M	30	N	N	N	N	N	00:00	N	N	N	12:30					
89400	01/12/2024	Dec-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Risk To Self/others	Harplands Hospital	Site Managers (Crisis Care Centre)	Patient detained on section 136. MHAH completed 30.11.24. Outcome of assessment requested physical examination to rule out physical cause for presentation. Ambulance called- arrived 11.22.24 08:00. Tric from SM to police requesting support to transfer patient to A&E. Police declined quoting RCRP- escalated to supervisor, who further declined. Concerns for safety expressed to police by SM due to ongoing bizarre presentation, unpredictability and active risk of absconding. However, this did not change their decision. Subsequently, 2 female paramedics and 2 CCC HCSW transported in Amb to A&E.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	Black African - Black Or Black British	M	22	N	N	N	N	N	00:00	N	N	N	00:00	N	N	08:30		
86640	10/07/2024	Jul-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - AWOL	Harplands Hospital	Ward 2	Following patient being reported as AWOL. Ward staff contacted police as per M&SPA policy due to patient's high risk when in the community. Police stated they would not be actively looking for patient under the right care, right person act. Ward staff raised concerns about this due to patients complex risk profile and patient also being under probation.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	31	N	N	N	N	N	00:00	N	N	N	00:10					
82659	18/05/2023	May-23	#####	2 - Minor	Clinical Incident	Right Care Right Person (RCRP)	Lack Of Police Response - Communication Issues	Harplands Hospital	Crisis Resolution Home Treatment Team	Call from Staffordshire police at approx 22:00 hours referring X following a call to them from a MOP reporting that they were concerned about him as he was the other side or a bridge. They said that he was presenting as suicidal and psychotic however had full capacity and was willing to attend the CCC voluntarily. Police arrived during handover, and were advised to wait until handover was finished. Police were witnessed trying to convince X to exit the police car, who was in handcuffs at this stage. Police did manage to get him out and hand cuffs were removed. Police escorted X into reception who appeared unable to stand and left him slumped in a chair. Police did not come to handover to staff and drove off. X is known to services and has a diagnosis of Depression with drug induced psychosis. He was unable to explain why he was there. His speech was incoherent and not spontaneous, and he was drowsy and unable to walk without help. He was abrupt when asked if he has taken substances and kept referring to the death of a family member. He denied taking substances and refused to give a urine sample. He also refused to have his vital observations taken. Shortly after talking to him, X to himself on the ground and refused to get up. He did eventually get up with our help of staff and went to sleep.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	M	0	N	N	N	N	N	N	00:00	N	N	N	00:00	N	Y	20:49	
88825	09/11/2024	Nov-24	#####	1 - No Harm	Clinical Incident	Right Care Right Person (RCRP)	Inappropriate Conveyance	Harplands Hospital	Crisis Resolution Home Treatment Team	Patient 1 had been high risk missing person police incident number 562 08/11/24, telephone call from police officer at 13:28 informing that Patient 1 had been found and was consenting for an assessment at CCC. Staff were waiting for Patient 1's partner to join her and the officer and attend CCC for an assessment. No update or attendance. IPortal checked and no A&E attendance, call from M< at roughly 17:00pm informing that police had dropped Patient 1 off outside A&E department, she had not checked in, she had made her way round to the renal department in a distressed state. M< attended to support, due to presentation unable to transfer to CCC and is currently in need of MHA assessment due to presentation. M< now supporting. No contact or update from police advising of this, and no indication of any need to attend A&E.	N	N	00:00	N	Acute Services And Urgent Care	Completed By Managers	N	N	N	N	White - British	F	0	N	N	N	N	N	00:00	N	N	N	00:00	N	N	13:30		

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