

Item No. 13

Meeting Date Wednesday 16th April 2025

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

Report By:	Karen Lockhart, Interim Assistant Chief Officer, Adult Services	
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	onstabulary Scotland (HMICS) & Healthcare Improvement Scotland loint Inspection of Police Custody Healthcare Services	
Purpose of Report:	This report provides an overview of the joint HMICS / HIS inspection of police custody suites and healthcare service delivery in Greater Glasgow & Clyde.	
Background/Engage	Within Police Scotland and Police Custody Healthcare joint HMICS/HIS custody inspections focus on the delivery of custody services by Police Scotland and associated healthcare provision by NHS boards and Health and Social Care Partnerships across Scotland. These are underpinned by the joint HIS and HMICS Framework to inspect that ensures a consistent, objective and human rights-based approach to the collaborative work. A national framework for inspections was developed following publication of a report in January 2023 outlining findings and recommendations of a baseline review by	
	HMICS and HIS of the provision of healthcare services to police custody centres across Scotland. The inspections in Glasgow in 2024 were the first inspections under this new framework for the service.	
Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development.	

HSCP Senior Management Team ☐ Council Corporate Management Team ☐

Council Committee

Health Board Corporate Management Team $\ \square$

OFFICIAL Update requested by IJB □ Other Not Applicable ⊠ Recommendations: The IJB Finance, Audit and Scrutiny Committee is asked a) Note the contents of this report; and b) Note the improvement actions taken by Police Custody Health Care Services. Relevance to Integration Joint Board Strategic Plan: Applicable to partnership priorities 1) Prevention, early intervention and well-being; and 2) Supporting greater self-determination and informed choice. Implications for Health and Social Care Partnership: Reference to National Health & People who use health and social care services have **Wellbeing Outcome:** positive experiences of those services, and have their dignity respected. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services Health and social care services contribute to reducing health inequalities. Personnel: N/A N/A Carers: **Provider Organisations:** N/A **Equalities:** N/A **Fairer Scotland Compliance:** N/A Financial: N/A Legal: N/A **Economic Impact:** N/A N/A Sustainability: **Sustainable Procurement and** N/A Article 19: N/A **Risk Implications:**

N/A

Implications for Glasgow City

Council:

Implications for NHS Greater Glasgow & Clyde:	NHSGG&C will wish to be assured that the actions taken following the recommendations continue to improve the
	health of the population served in Police Custody Healthcare

1. Purpose

- 1.1. This report provides an overview of the joint HMICS / HIS inspection of police custody suites and healthcare service delivery in Greater Glasgow & Clyde.
- 1.2. The reports cover an Inspection in April 2024 at Clydebank Police Custody suite and in September 2024 in Govan, London Road and Cathcart Police Custody suites.

2. Background

- 2.1. NHS Greater Glasgow and Clyde (NHSGGC) aims, through a partnership approach with Police Scotland, to provide a trauma informed, person centred, safe and clinically effective healthcare service for people brought to Police Offices and healthcare facilities within the NHSGGC area in support of Police Scotland Criminal Justice Services Division.
- 2.2. Glasgow City HSCP hosts the Police Custody Healthcare (PCHC) service on behalf of GG&C. The service is Board-wide and has bases in London Road, Govan, Greenock and Clydebank police stations. Occasionally, Police Scotland have the option to open additional custody space in Cathcart Police Station which also has to be supported by PCHC staff. Although half of the Police Scotland custody estate sits outwith Glasgow city boundaries, Glasgow City HSCP has full responsibility for the operational and clinical service delivery in these locations.
- 2.3. The service was developed in 2014 in line with a Memorandum of Understanding between the NHS and Police Scotland.
- 2.4. It was a partnership agreement for Custody Healthcare and Forensic Medical Services whereby the responsibility for healthcare and Forensic Medical service in police custody transferred from police forces to being a function of health boards in Scotland.
- 2.5. The service has a total budget of £2,859,200, and is a nurse led service supported by an on call Forensic Physician service 24/7, with the higher percentage of care and assessment provided by the nursing team.
- 2.6. The nurse staffing profile includes general and mental health trained nurses and has 21.5 WTE nurses and 1 WTE admin.
- 2.7. The Forensic Medical Service is provided through a contract for service by Custody Offenders Medical Service (COMS) who provide 1 doctor 24/7, 365 days per annum to deliver the forensic medical requirements supporting the judiciary process and general health assessment if required.

- 2.8. The contract for the service also supports out-of-hours input to the Scottish Prison Service on a telephone advice basis.
- 2.9. The service delivery model is peripatetic covering all police Custody suites in GG&C.
- 2.10. Clydebank Police Custody Suite was inspected in April 2024 and Govan, London Road and Cathcart police custody suites were inspected in September 2024.
- 2.11. The order of inspections is based on the police division as opposed to the board delivery of healthcare. Consequently 2 inspections in 1 year in GG&C were due to Clydebank being covered by a different police division to Govan, London Road and Cathcart.

3. General Inspections Findings

- 3.1. The outcome of both reports was extremely positive for PCHC.
- 3.2. It noted the PCHC team for all suites consisted of a peripatetic nursing and medical service. Custody nursing staff were available 24/7 and are on duty over a 24 hour period. The nursing team had a combination of Adult Health Nurses and Registered Mental Health Nurses.
- 3.3. It was noted healthcare was well managed, with the HSCP providing a clear management structure, as well as monitoring and oversight through its clinical and care governance processes.
- 3.4. Regular governance meetings and multiagency meetings took place between NHS staff and Police Scotland.
- 3.5. Healthcare staff spoken to describe the management team as visible and supportive.
- 3.6. There was information displayed in all custody centres about how detainees could make a complaint or give feedback.
- 3.7. At the time of inspection, there had been no complaints received in the past 12 months. The DATIX risk management information system was used appropriately to report incidents. There was evidence that staff were confident to report incidents, a practice that was embedded within practice.
- 3.8. Treatment rooms in all centres were visibly clean and in a good state of repair, with hand wash basins and personal protective equipment available for use.
- 3.9. There was an identified infection prevention and control (IPC) lead for all the custody centres and a programme was in place to complete monthly IPC audits.
- 3.10. Data recorded showed a range of harm reduction information and interventions were available to detainees at the custody centres with good uptake. Blood Borne Virus (BBV4) testing was available to detainees accessing healthcare in custody. All healthcare professionals had access to Naloxone and were trained to administer it.

- 3.11. The service had a range of policies and standard operating procedures to support staff with the safe supply, storage, dispensing and safe destruction of medicines. There was also a pharmacist with responsibility for supporting the governance of medicines management in all the custody centres.
- 3.12. In respect of mental health, a standardised risk assessment tool was available for healthcare staff to identify people at risk of self-harm or suicide. This is completed for patients receiving mental health assessments, where patients are referred to community mental health services, and where patients require admission to specialist mental health units.

4. Inspection Specific Findings

- 4.1 Clydebank Police Custody Suite
- 4.1.1 The following areas were identified as good practice:
 - Management of controlled drugs with evidence of stock and balance checks being completed and a range of medicine management audits completed.
 - It noted Registered Mental Health Nurses generally responded to referrals
 for patients requiring mental health assessments. Registered General
 Nurses also saw patients at the centre with training opportunities being
 available to ensure staff competencies including access to mental health
 first aid, skills training in self-harm, suicide intervention and prevention.
- 4.1.2 Fifteen recommendations were made within the report of which only one was in reference to a joint recommendation for Police Scotland, supported by PCHC:
 - Police Scotland, supported by Glasgow City HSCP, should ensure that used sharps bins awaiting uplift are stored in line with current guidance.
- 4.1.3 An action plan has been completed confirming the actions undertaken and concluded by Police Scotland to address the recommendation and for PCHC staff to be aware of the process in place for Police Scotland.
- 4.2 Govan, Cathcart, London Road Police Custody Suites
- 4.2.1 The following areas were identified as good practice:
 - The nursing team had a combination of Adult Health Nurses (RGN) and Registered Mental Health Nurses (RMN), who were trained to support the physical health, mental health and drug and alcohol support requirements for all detainees referred to the service. Patients would therefore receive care responsive to their individual needs.
 - Detainees with learning disabilities could be identified from the vulnerability questionnaire and through screening the vulnerable persons database. Systems were in place to involve an appropriate adult service if required. Healthcare have delivered training to Criminal Justice Police Custody Support Officers on a variety of topics, including learning

- disabilities, mental health, neurodiversity and physical health, which we consider good practice.
- Verbal feedback from the inspectors on conclusion of the visit noted PCHC has a very good service, the best the inspectors have seen across the country.
- 4.2.2 Six recommendations were made in the report of which two were in reference to PCHC:
 - Glasgow City HSCP should ensure that expiry dates on all equipment at the custody centres are checked to ensure that equipment is within date and ready for use.
 - Glasgow City HSCP should provide custody and healthcare staff with clarity on its position and practice expectations regarding the assessment of detainees with not officially accused status.
- 4.2.3 An action plan is being completed confirming actions undertaken to address the recommendations including:
 - An additional step in the current Standard Operating Procedure for room checks requiring any equipment within 2 weeks of expiry to be removed. This will be audited through the services Combined Care Assurance Audit Tool (CCAAT) Audit process.
 - Confirmation emails shared with Inspectors and Sergeants confirming all individuals held in Police Custody referred to PCHC will be reviewed regardless of the officially accused status.

5. Continued Monitoring and Progress

- 5.1 The improvement actions noted will remain under planned review and monitored through clinical governance processes.
- Ongoing collaboration and meetings with Police Scotland will support the Clydebank recommendation for maintaining sharps management and effective communication in support of all individuals being referred to PCHC having an appropriate regardless of officially accused status.
- 5.3 CCAAT audit cycles will provide assurance of appropriate expiry dates on all equipment.

6. Recommendations

- 6.1 The IJB Finance, Audit and Scrutiny is asked to:
 - a) Note the contents of this report; and
 - b) Note the improvement actions and continued monitoring of service delivery by Police Custody Healthcare Services.