



Right Care, Right Person

Position statement

Introduction

Since the national launch of the Right Care Right Person (RCRP) initiative in 2023, policing stakeholders have asked for the IOPC's opinion on it.

The IOPC recognises the application of RCRP will differ across forces and we are alive to the challenges this may present. There is no one size fits all approach to RCRP and we will continue to adapt our position as the framework is rolled out nationally. In our position statement, we aim to offer transparency about the IOPC's stance on RCRP and provide clarity on how Professional Standards Departments (PSDs) should apply the mandatory death and serious injury (DSI) referral criteria for incidents involving RCRP.

The IOPC will continue to monitor the national roll out of RCRP and will review our position as and when required.

Our position

We agree with the principles of the Right Care, Right Person (RCRP) initiative, which are focused on ensuring that vulnerable people receive the most appropriate service from the most appropriate agency.

It is essential that forces work with local healthcare partners to ensure that vulnerable people receive a service that meets their needs, at the right time and by the most appropriate agency, wherever they live in England and Wales.

We will continue to work closely with the National Police Chiefs' Council lead for RCRP as the framework is embedded in forces across England and Wales. We welcome the College of Policing's review of the Mental Health Authorised Professional Practice (APP), which will look to include RCRP principles and guidance.

Our annual report on [Deaths during or following police contact](#) highlights the high number of mental health concerns, as well as drug and alcohol use in those cases, and our support for people receiving the right care when they need it.

We encourage police leaders and those in health and justice systems to work together to improve arrangements for frontline healthcare and mental health support.

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Forces should continue to respond to incidents in accordance with their policing duties and responsibilities. They must also develop robust local policies, operational guidance and escalation policies, in line with the national principles of RCRP.

By law, forces are required to refer to us matters that meet the definition of a DSI, and we are required to decide whether the matter needs to be investigated and, if so, by the IOPC or the force. The definition includes circumstances where a person had contact (of whatever kind, and whether direct or indirect) with a person serving with the police who was acting in the execution of their duties; and there is an indication that the contact may have caused (whether directly or indirectly) or contributed to the death or serious injury.

Medical and healthcare agencies have the primary duty to respond to health-related calls. However, as explained in the College of Policing's Legal overview for RCRP, the police may have a duty of care where they have assumed responsibility for a person's care or have created (directly or indirectly) the risk of harm. Officers may also have duties under the *Human Rights Act 1998* to protect individuals from a real and immediate risk to life or serious harm.

A decision not to deploy police resources in a 'health only' case where the police had a duty of care and/or a duty to protect the person concerned under the *Human Rights Act 1998*, who then suffered death or serious injury, could meet the criteria for a DSI referral.

Where there is no legal duty of care, or it is reasonably believed a health care agency has taken responsibility for a call, then a decision by the police not to deploy would not have caused or contributed to any subsequent death or serious injury. However, where a change in circumstances of the person at risk or the operational ability for the healthcare agency to attend has been communicated to the police, that may re-engage a duty of care or duty to protect, and in the event of death or serious injury, a DSI referral would be required.

If an IOPC investigation or review did take place, as with any matter, the actions or inaction of any individual would always be considered in the context of relevant legislation, local force policy, Authorised Professional Practice and any other national guidance or standards - including those on Right Care Right Person. It would be unlikely to result in a disciplinary investigation or proceedings where decisions on deployment were made in accordance with policy.

We frequently issue learning recommendations where we consider that an organisational matter such as a process, policy, or training needs to be addressed, rather than an individual's conduct.

Contact us

If you would like to contact us about this statement, please email: policyandengagementteam@policeconduct.gov.uk

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Published March 2024

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