



Ministry  
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## Independent Advisory Panel on Deaths in Custody

### Minutes of the Independent Advisory Panel meeting Tuesday 8 December 2015 102 Petty France, London

**Attendees:** Kate Lampard (KL) - Chair,  
Dinesh Maganty (DM)  
Matilda MacAttram (MM)  
Dr Meng Aw-Yong (M-AY)  
Professor Graham Towl (GT)  
George Barrow (GB), Secretariat  
Kishwar Hyde (KH), Secretariat  
Angie Hinksman, Secretariat

**Apologies:** Stephen Cragg QC (SC)

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#### 1. Welcome and Minutes from last meeting

1.1 KL welcomed everyone to the meeting. Minutes of the previous meeting were agreed. KL wanted it noted that she had been a member of the expert independent investigations Advisory Group on the Serious Incidents Framework but had relinquished her position so that there would be no conflict of interest with her role in the IAP.

#### 2. Update on actions

2.1 Actions were either complete or underway. GB noted the following actions which were still ongoing:

**Scoping paper on DoLS (Stephen Cragg):** this would be rolled over to the next meeting in March.

#### 3. IAP Appointments update

3.1 GB updated the panel that the advertisement for a permanent chair had not yet been issued as it was still awaiting Secretary of State approval. It was hoped that the new chair would be identified by (or before) April 2016, otherwise there would be a gap between Kate's departure and his/her arrival.

3.2 There would not be a recruitment campaign to replace panel members (three stepped down in September) until after the stock take when it would be known what range of skills was needed. This was likely to be after the new Chair was in place and he/she would be involved in their recruitment. KL asked for the current panel members' input on what the skill gaps might be.

#### **4. Non contact vital sign monitoring technology**

*IAP Paper 08 12 15 – 4 Non Contact vital sign monitoring technology*

4.1 This was brought to the attention of the panel, via a previous panel member who was contacted by Dr Kevin Murray, a Consultant Forensic Psychiatrist at Broadmoor Hospital. The makers of the product had been in touch.

4.2 KL stated that the panel would not be able to make an endorsement that could be seen as a commercial conflict, although the panel may want to better understand the technology. It was agreed that GB would write back to the producers to thank them and advising them that the panel does not endorse or advertise products.

**Action 1: GB to write to Oxehealth to thank them for raising panel awareness.**

4.3 DM and M-AY both recorded their interest in seeing the technology in action. DM stated that this type of remote monitoring of vital signs might be the next step and the panel should therefore look at it as a matter of principle, perhaps with a view to taking it on as a workstream. DM and M-AY would view the product and present a paper to the next panel meeting highlighting the issues, benefits and their views. MA-Y asked for secretariat help in research – he would email his request on what help was required.

**Action 2: DM and MA-Y to write a paper on remote monitoring of vital signs for the next panel meeting.**

#### **5. Annual Statistical report**

5.1 The previous digest of Death in Custody statistics had been published in February 2015, covering the period 2000-2013. For the current set (2000-2014), the Panel were using Manchester Metropolitan University for the first time and had produced a near final draft which had been circulated to the panel. GT was leading the panel on this work stream.

5.2 GT discussed the draft report in which he had spotted some errors but had reported these back. GB pointed out that one of the issues with the latest report was that there were no population statistics; GT suggested that the University could use the ones from last year as the overall populations had changed very little. KL suggested that if it was possible (being mindful of the report publication date) then the Panel should try to obtain them.

5.3 DM raised some concerns about the drop in numbers for deaths of detained patients which did not ring true, and that the figures did not tally with the National Confidential Inquiry figures. GT thought that some of the drop could be explained by the change in definitions of death. Following further discussion it was agreed that the Panel should try to get the population figures; if this was not possible then GT would comment in the narrative and foreword to explain and set it in context. DM would email a set of questions to GB to forward to the CQC about his concerns.

5.4 MA-Y suggested including self-inflicted incidents in the general population as a comparator. The Ministerial Board was keen to look at the prevalence of suicides; it would therefore be useful to have figures to present to the Board so a commentary on trends in suicide would be included in the report.

5.5 Natural cause deaths had increased substantially; this could be explained partially by the aging population although it was not always “old” people who were dying. Some deaths could be explained by the rise in the use of New Psychoactive

Substances which were not detectable by toxicology. There was no firm evidence of a link and there would only be an allusion to this in the report.

**Action 3: GT would try to obtain population figures where possible, figures on the increase in incidents of suicide in the general population.**

5.6 If time allowed, GT would share the report with the Panel before publication.

## **6. IAP stock take**

6.1 Two papers had been circulated before the panel:

*IAP Paper 08 12 15 – 6.1 Stock take report*

*IAP Paper 08 12 15 – 6.2 Stock take letter*

6.2 KL acknowledged that the Harris Review had dominated the attention of the panel but it was now a return to business as usual. She was reluctant to begin new strands of work based on her little experience of the work of the panel and the short period of her incumbency.

6.3 GB had been conducting formal interviews for the stocktake with panel members and discussed it with the co-sponsors; the latter will be holding a meeting in January for an in-depth look at the stocktake, what the panel should be doing and the gaps in work and skills. KL would be meeting the Secretary of State in the near future and hoped to have some clarity on the way forward by the next meeting.

6.4 Discussions took place on:

- The panel need for greater alignment - each member would attach to a co-sponsor to look at what the custodial sector required and what could be achieved;
- There was a need for a strategic overview of each of the component parts, the functions, what worked well and what could be better;
- What does independence mean?
- IAP did not need to have its own agenda; reducing the number of deaths in custody was its over-arching aim. There needed to be greater alignment between what ministers were prepared to do and what advice the panel could give;
- There should be greater liaison between the panel and Health as most of the deaths occurred in health settings;

**Action 4: Secretariat to set up meetings between panel members and co-sponsors**

**Action 5: panel members to feedback to GB/ Secretariat from their meetings with co-sponsors.**

6.5 There would be further discussion at the IAP meeting in March when it was hoped there would also be input into the new workplans.

6.6 GB had been tasked by the co-sponsors to include the letter from Lord Harris into the stocktake document, draw up the terms of reference and take forward actions from their meeting.

## **7. AOB**

7.1 MA-Y reported that, following the conference on 7 November on Acute Behavioural Disorder (ABD), there was now a multi-stakeholder group dedicated to it. They were drawing up a best-practice guidance (available in draft form next month). He

asked whether the guidance should be branded as an IAP document – he would forward the paper for members to see.

**Action 6: MA-Y to distribute guidance on ABD to panel.**

7.2 He had also invited the College of Policing to the stakeholder group as they were re-writing the Approved Professional Practice and the panel should have an input.

**Action 7: MA-Y to write to College of Policing to inform them that the Panel would like to contribute to the revised APP.**

7.3 DM advised that NHSE were due to take over healthcare in police stations from 2016. The service specifications would cover all incidents from street to station. The IAP should have some influence on the specifications and DM asked other panel members to look at, and comment on, the draft specification which would be available in mid-Jan. GB would collate the common response.

**Action 8: DM to circulate the specification to panel members in January to share and comment.**

7.4 MM asked the panel to consider how they could influence the National Preventative Mechanism and if the panel should have a place on it.

#### **8. Date, Time and Venue of Future Meetings:**

- **Wednesday 9 March 2016 at 10.30am - 12.30pm**
- **Wednesday 8 June 2016 at 10.30am - 12.30pm**
- **Wednesday 7 September 2016 at 10.30am - 12.30pm**
- **Wednesday 7 December 2016 at 10.30am - 12.30pm**