



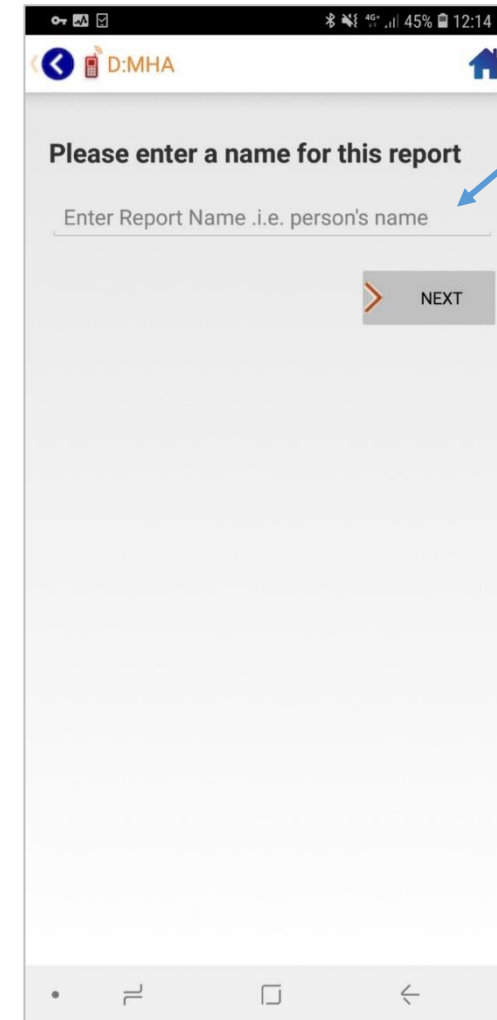
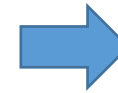
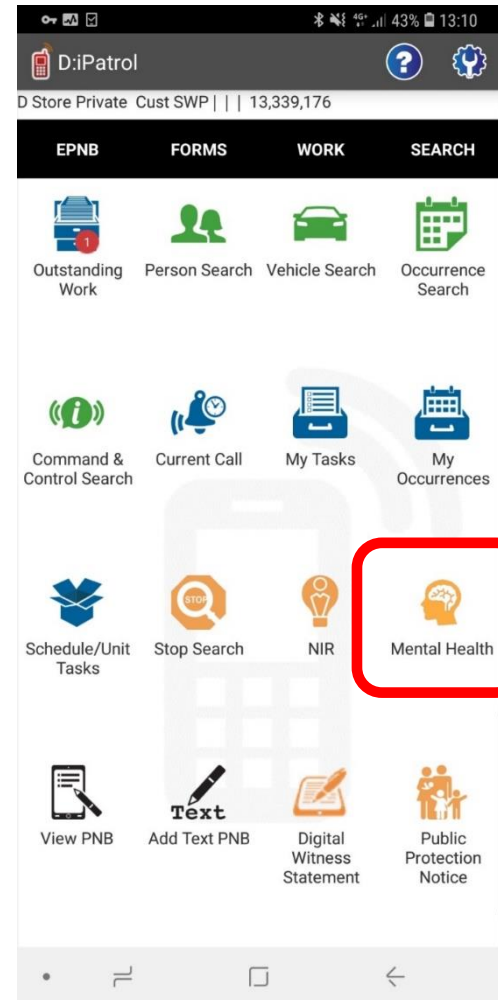
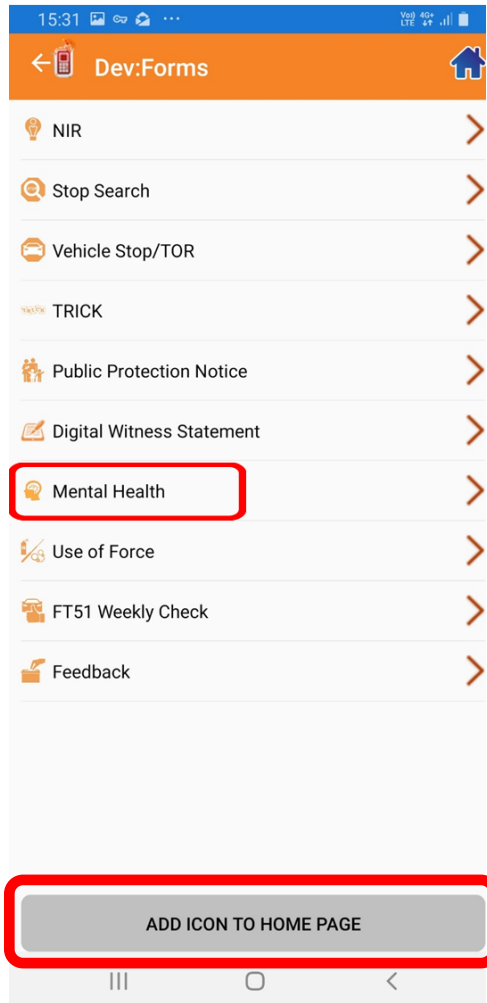
MENTAL HEALTH APP USER GUIDE

SOUTH WALES POLICE

Version 1, June 2020

Locate the Mental Health Application on iPatrol

On iPatrol, click on Forms and the Mental Health app will be there. Use add icon to home page, to see it permanently on the iPatrol Home Screen.

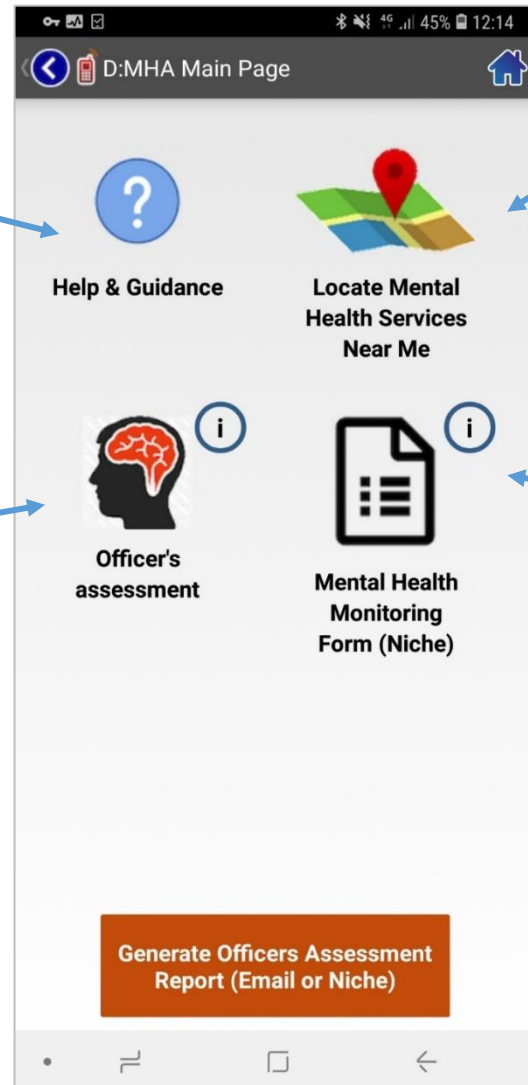


Enter a name for the report for your reference.

Mental Health Application Home Page

Links to the Mental Health Team Intranet Page

- **Should be used in every mental health incident**
- Records evidence based, real-time actions and observations
- Clinical Guidance questions and prompts to help establish the correct information as your risk assessment
- Can be attached as a PDF to the Niche Occurrence
- Automatically emails a report to mental health triage



Fast access to locate Mental Health Services near you

- Locates crisis services around you
 - Primary** – GP Surgery, Primary Mental Health Teams
 - Secondary** – Crisis Teams, Community Mental Health Teams
 - Tertiary** – MIND Cymru, Hafal, Journeys, Recovery Cymru
 - Emergency Units (A&E).**
- Provides venue information such as address, opening hours, telephone numbers
- Opens Google Maps for Satnav directions
- **Must be completed for every mental health incident where powers are used, or voluntary procedures are conducted (e.g. transporting)**
- A single form that
 - Integrates to Niche
 - Automatically enters persons involved
 - Actions taken are time stamped
 - Contains details of search (s.32 PACE)
 - Methods of transport
 - Place of Safety
 - Notification to complete Use of Force and PPN
- Health Board Integration
 - Submits to local health board inbox for assessment

About the Officer's Assessment

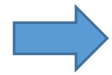


- **Should be used in every mental health incident**
- Records evidence based, real-time actions and observations
- Clinical Guidance questions and prompts to help establish the correct information
 - use the ⓘ icon to help you
- Can be attached as a PDF to the Niche Occurrence
- Automatically emails a report to mental health triage
- Automatically created an EPNB entry for future reference
- Can be emailed to other health care professionals

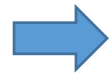
Officer's Assessment Overview

Once the Officers assessment is complete, a copy is automatically entered into you EPNB, and sent to the Mental Health Triage. Attach a copy to Niche using the orange icon

Complete all questions on the assessment

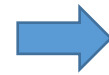


The app will ask you to call the triage using their direct extension number (the switchboard no is saved in your phone) The assessment will remain in your outstanding work to return to following the call.



If you speak to the triage, note their response and continue as advised.

If you cannot speak to the triage, select no, and continue with your rationale for further assessment



The app will return to the mental health home screen, use the orange icon to attach to Niche. You can also use this icon to email your assessment to a health care professional

Generate Officers Assessment Report (Email or Niche)



If further medical attention is needed, or you are transporting the person you must now complete the Mental Health Monitoring Form

The following slides show screenshots of all screens, followed by the next essential form ([pg 15](#))

Officer's Assessment Screen 1

The diagram illustrates the 'Officer's Assessment Screen 1' interface, which is a mobile application for recording incident information. The central screen is titled 'D:OFFICER'S ASSESSMENT' and features a progress indicator with six dots, the first of which is green. The main section is 'POPULATE INFORMATION ABOUT INCIDENT'. Below this, there are several input fields and checkboxes, each with a red dashed arrow pointing to a corresponding callout box on the left or right. The callout boxes are titled with the questions they represent. The central screen also has a 'BACK' button and a 'NEXT' button at the bottom.

Central Screen: D:OFFICER'S ASSESSMENT

POPULATE INFORMATION ABOUT INCIDENT

PERSON'S NAME/PERSON REFERENCE:
ENTER VALUE

DOB: Pick Date X

IS THE PERSON AGED 16 YEARS OR MORE?
SAFEGUARDING

CHECK FOR PHYSICAL INJURIES
PHYSICAL INJURIES OBSERVED

CHECK FOR OVERDOSE
OVERDOSE SUSPECT/DISCLOSED

IS/WAS THE PERSON UNMANAGEABLY VIOLENT?
IS PERSON UNMANAGEABLY VIOLENT?

IS/WAS THE PERSON EXPERIENCING ALCOHOL AND/OR DRUG WITHDRAWAL SYMPTOMS?
EXPERIENCING WITHDRAWAL SYMPTOMS

Callout Boxes:

- Is the person unmanageably violent?**
 - No
 - Yes - Arrest or Detain and remove to custody
 - Yes - Take to A&E
 - Cancel
- Alcohol and/or drug withdrawal?**
 - None
 - Yes - Ambulance required
 - Cancel
- SafeGuarding**
 - No
 - Unknown
 - Yes
 - Cancel
- Physical Injuries Observed**
 - No
 - Yes - Ambulance Not Required
 - Yes - Ambulance Required
 - Cancel
- Overdose Suspects/Disclosed**
 - No
 - Yes - Ambulance Required
 - Cancel

Buttons: BACK, NEXT

Officer's Assessment Screen 2

The diagram illustrates the 'Officer's Assessment Screen 2' interface, which is a mobile application for assessing officer concerns. The central screen is titled 'D:OFFICER'S ASSESSMENT' and features a progress indicator with five dots, the first of which is green. The screen is divided into several sections, each with a red dashed arrow pointing to a corresponding callout box:

- IDENTIFY OFFICER'S CAUSE FOR CONCERN**
 - ARE THERE ANY CONCERNS ABOUT THE PERSON BEING VULNERABLE?
 - SELECT VULNERABILITY** (points to 'Concerns: Vulnerability' callout)
 - REMARKS
 - ENTER REMARKS** (points to 'REMARKS' callout)
 - CONCERNS ABOUT THE IMMEDIATE ENVIRONMENT
 - SELECT IMMEDIATE ENVIRONMENT** (points to 'Concerns: Immediate Environment' callout)
 - PERSON HAS DISCLOSED A MENTAL ILLNESS
 - DISCLOSED MENTAL ILLNESS** (points to 'Disclosed Mental Illness' callout)
 - IS THE PERSON EXPERIENCING PHYSICAL SYMPTOMS OF MENTAL ILLNESS?
 - PHYSICAL SYMPTOMS** (points to 'Physical Symptoms: Mental Illness' callout)

The callout boxes contain the following lists of concerns and symptoms:

- Concerns: Vulnerability**
 - ☐ Mental Health
 - ☐ Looked After Children (LAC)
 - ☐ Domestic Violence
 - ☐ Elderly Person
 - ☐ Learning Disability
 - ☐ Person Reported Missing
 - ☐ Physical Disability
 - ☐ Sensory Impairment
 - ☐ Unknown
 - ☐ None
- Concerns: Immediate Environment**
 - ☐ Alcohol
 - ☐ Illicit Substances / paraphernalia
 - ☐ Inappropriately Dressed
 - ☐ No Utilities
 - ☐ Pets
 - ☐ Prescription Drugs
 - ☐ Stockpiling Medication
 - ☐ Unsanitary Conditions
 - ☐ Weapons
 - ☐ Unknown
 - ☐ None
- Disclosed Mental Illness**
 - ☐ Schizophrenia
 - ☐ Anxiety / Panic Disorder
 - ☐ Obsessive Compulsive Disorder (OCD)
 - ☐ Bipolar
 - ☐ Depressive Illness
 - ☐ Attention Deficit Hyperactivity Disorder (ADHD)
 - ☐ Personality Disorder
 - ☐ Other
 - ☐ Unknown
 - ☐ None
- Physical Symptoms: Mental Illness**
 - ☐ Sweating
 - ☐ Laboured or Rapid Breathing
 - ☐ Muscle Stiffness / Immobility
 - ☐ Chest Pains
 - ☐ Feeling that they are 'Dying'
 - ☐ Absent or Vacant Expression
 - ☐ Other
 - ☐ Unknown
 - ☐ None

The central screen also includes a 'BACK' button and a 'NEXT' button at the bottom.

Officer's Assessment Screen 3

Risk to Life

- ☐ Threat to self harm with implement / substance
- ☐ Threat to jump from height
- ☐ Walking into traffic
- ☐ Person is a risk to their own or someone else's life
- ☐ On railway tracks / platform edge
- ☐ Hanging
- ☐ Other
- ☐ Unknown
- ☐ None

Disclosed Taking a Substance

- ☐ Ecstasy
- ☐ Alcohol
- ☐ Amphetamine
- ☐ Cocaine
- ☐ Legal High
- ☐ Benzodiazepines
- ☐ Khat
- ☐ Opiates / Methadone
- ☐ Synthetic Cannaboids
- ☐ Crack Cocaine
- ☐ Cannabis
- ☐ Other
- ☐ Unknown
- ☐ None

Experiencing: Low Mood/Depression

- ☐ Not Showing Any Emotions
- ☐ No Plans for the Future
- ☐ Preoccupied with thoughts of Suicide
- ☐ Active Plans for Suicide
- ☐ Agitated
- ☐ Other
- ☐ Unknown
- ☐ None

Voicing Strange Ideas

- ☐ Paranoid Ideas
- ☐ Fixed beliefs that remain despite conflicting evidence
- ☐ Long delays in responding to questions
- ☐ Hallucinations
- ☐ Unable to follow a train of thought
- ☐ Belief they are dead or 'not here'
- ☐ Other
- ☐ Unknown
- ☐ None

Officer's Assessment Screen 3

IDENTIFY OFFICER'S CAUSE FOR CONCERN

DOES THE PERSON APPEAR TO BE EXPERIENCING SEVERE LOW MOOD/DEPRESSION?

EXPERIENCING: LOW MOOD/DEPRESSION

PERSON IS VOICING STRANGE IDEAS ABOUT THEMSELVES OR OTHERS

VOICING STRANGE IDEAS

PERSON IS A RISK TO THEIR OWN OR SOMEONE ELSE'S LIFE IN THE IMMEDIATE SITUATION

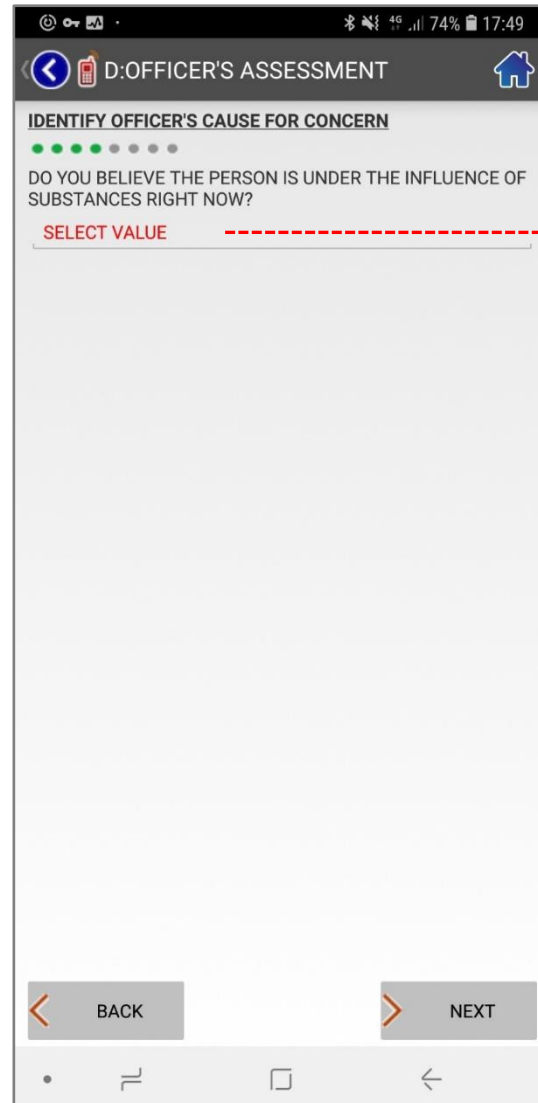
RISK TO LIFE

HAS THE PERSON DISCLOSED TAKING A SUBSTANCE?

DISCLOSED TAKING A SUBSTANCE

BACK **NEXT**

Officer's Assessment Screen 4



The image shows a mobile application interface for an 'Officer's Assessment'. At the top, there's a status bar with icons for battery, signal, and time (17:49). Below that is a header bar with a back arrow, a home icon, and the title 'D:OFFICER'S ASSESSMENT'. The main content area has a section titled 'IDENTIFY OFFICER'S CAUSE FOR CONCERN' with a progress indicator (5 dots, 3 are green). Below this is the question 'DO YOU BELIEVE THE PERSON IS UNDER THE INFLUENCE OF SUBSTANCES RIGHT NOW?'. A red dashed arrow points from the 'SELECT VALUE' text to a list of options on the right. At the bottom, there are 'BACK' and 'NEXT' buttons.

DO YOU BELIEVE THE PERSON IS UNDER THE INFLUENCE OF SUBSTANCES RIGHT NOW?

SELECT VALUE

Under Influence of Substances Now

- ☐ Dilated Pupils
- ☐ Shaking / Muscle Spasms
- ☐ Drowsy
- ☐ Sweating
- ☐ Slurred Speech
- ☐ Poor Motor Control
- ☐ Loss of Consciousness
- ☐ None

Officer's Assessment Screen 5 – Triage is called

This is a direct number to the triage, use the switchboard number saved in your phone contacts, followed by the extension 49040.

Contact a PSC Mental Health Triage Practitioner (MHTP)

Police Officers, where practicable, have a responsibility to consult certain professionals before making a decision to detain someone under Section 136 of the Mental Health Act.

The MHTP's are **available between 9am to 1am** each day.

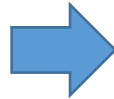
The MHTP's direct line contact in the PSC is extension **49040**.

The group email address for MHTP's is **mhtriage@south-wales.pnn.police.uk**. A copy of your assessment will be submitted once you press 'OK'.

The MHTP can also **speak directly** to members of the public if they consider it appropriate.

It is strongly advised that you consult with a MHTP before progressing any further.

OK



MENTAL HEALTH TRIAGE TEAM PSC

DID YOU CONSULT WITH A MEMBER OF THE MENTAL HEALTH TRIAGE TEAM:

YES

IF SO, WHAT WAS THE DATE/TIME OF THE PHONE CONVERSATION:

03/12/2019 X 17:00 X

WHAT WAS THE OUTCOME OF YOUR DISCUSSION WITH THE MENTAL HEALTH TRIAGE TEAM:

Test entry

BACK NEXT



Assessment Complete

Please follow the guidance as instructed by the MHTP.

If you have been directed to convey to a **place of safety** remember you can use the '**Locate Mental Health Services Near Me Now**' from the home screen of the MHA.

It is important you carefully document this interaction and **transport to a Place of Safety** using the '**Niche Mental Health Monitoring Form**' from the homescreen of the MHA.

OK

Pressing OK sends a copy of the Officers Assessment to the MHTP inbox



Officer's Assessment Screen 5 – Triage not called

4

D:OFFICER'S ASSESSMENT

MENTAL HEALTH TRIAGE TEAM PSC

● ● ● ● ● ● ● ● ● ●

DID YOU CONSULT WITH A MEMBER OF THE MENTAL HEALTH TRIAGE TEAM:

NO

IF NO, WHAT WAS THE REASON FOR NOT SPEAKING TO THE MENTAL HEALTH TRIAGE TEAM:

Out of hours

Consider contacting a crisis team for advice and support for the individual.

BACK NEXT

D:OFFICER'S ASSESSMENT

● ● ● ● ● ● ● ● ● ●

CONCERNS SUMMARY SCREEN

POPULATE INFORMATION ABOUT INCIDENT

IS THE PERSON AGED 16 YEARS OR MORE?

Yes

CHECK FOR PHYSICAL INJURIES

No

CHECK FOR OVERDOSE

No

IS/WAS THE PERSON UNMANAGEABLY VIOLENT?

No

IS/WAS THE PERSON EXPERIENCING ALCOHOL AND/OR DRUG WITHDRAWAL SYMPTOMS?

None

IDENTIFY OFFICER'S CAUSE FOR CONCERN

ARE THERE ANY CONCERNS ABOUT THE PERSON BEING VULNERABLE?

Mental Health

CONCERNS ABOUT THE IMMEDIATE ENVIRONMENT

Prescription Drugs

PERSON HAS DISCLOSED A MENTAL ILLNESS

Schizophrenia

IS THE PERSON EXPERIENCING PHYSICAL SYMPTOMS OF MENTAL ILLNESS?

Sweating

BACK NEXT

D:OFFICER'S ASSESSMENT

● ● ● ● ● ● ● ● ● ●

CONCERNS SUMMARY SCREEN

BASED ON THE INFORMATION YOU HAVE COLLECTED, DO YOU THINK THIS PERSON NEEDS AN ASSESSMENT BY A MENTAL HEALTH PROFESSIONAL?

SELECT VALUE

Does the person need an assessment by a Mental Health Professional?

No

Yes

Cancel

BACK NEXT

Officer's Assessment Screen 5 – Triage not called

17:52 73%

D:OFFICER'S ASSESSMENT

CONCERNS SUMMARY SCREEN

BASED ON THE INFORMATION YOU HAVE COLLECTED, DO YOU THINK THIS PERSON NEEDS AN ASSESSMENT BY A MENTAL HEALTH PROFESSIONAL?

SELECT VALUE

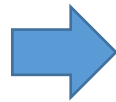
Does the person need an assessment by a Mental Health Professional?

No

Yes

Cancel

BACK NEXT



17:52 73%

D:OFFICER'S ASSESSMENT

CONCERNS SUMMARY SCREEN

BASED ON THE INFORMATION YOU HAVE COLLECTED, DO YOU THINK THIS PERSON NEEDS AN ASSESSMENT BY A MENTAL HEALTH PROFESSIONAL?

No

Shared Decision Making Screen

Discuss with the person and agree on the appropriate course of action for their safe wellbeing.

TICK ALL OPTIONS THAT APPLY:

- ☐ a) Will the person consent to their carer/loved one being contacted?
- ☐ b) Will the person attend their GP?
- ☐ c) Will the person attend a sanctuary?
- ☐ d) Will the person attend their local CMHT?
- ☐ e) Would the person speak to someone on the phone about their crisis?

Pressing SUBMIT sends a copy of the Officers Assessment to the MHTP inbox

BACK SUBMIT



Officer's Assessment Screen 5 – Triage not called

73% 17:52

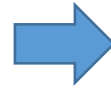
D:OFFICER'S ASSESSMENT

CONCERNS SUMMARY SCREEN

BASED ON THE INFORMATION YOU HAVE COLLECTED, DO YOU THINK THIS PERSON NEEDS AN ASSESSMENT BY A MENTAL HEALTH PROFESSIONAL?

Yes

BACK NEXT



NO Option

73% 17:52

D:OFFICER'S ASSESSMENT

Shared Decision Making Screen

IS THE PERSON WILLING TO ATTEND ASSESSMENT VOLUNTARILY?

No

Consider detaining under s135/136

- Telephone the crisis team/mental health triage team for advice and support for the individual.
- If the person is still unwilling to attend voluntarily consider powers under s136 (public place) or The Mental Capacity Act 2005 (applies public and private places).
- If s136 is utilised complete the Niche Mental Health Monitoring Form to the dedicated health email inbox.
- Where a person is in a private house and neither of the powers detailed above apply consider requesting the assessing team to attend the address to conduct an emergency assessment.

BACK SUBMIT

Pressing SUBMIT sends the Officers Assessment to the MHTP inbox

YES Option

73% 17:52

D:OFFICER'S ASSESSMENT

Shared Decision Making Screen

IS THE PERSON WILLING TO ATTEND ASSESSMENT VOLUNTARILY?

Yes

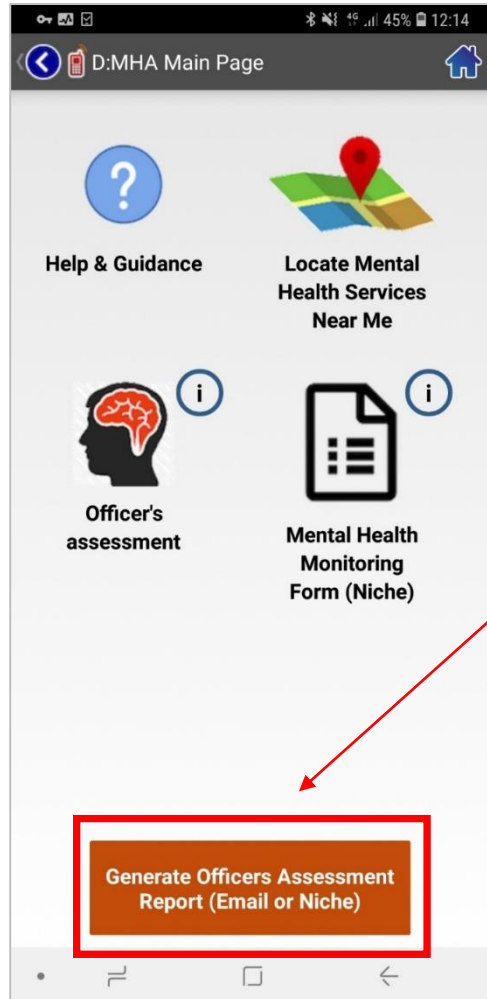
Voluntary Assessment

- Telephone the crisis team/mental health triage team for advice and support for a compliant individual.
- Where a person is known to mental health services convey to a health based place of safety(HBPOS).
- Where a person is not known to mental health services and this is confirmed by the crisis team, convey the person to the persons GP/out of hours GP or the liaison psychiatry team (if available) at A&E in the first instance where they can be seen by a suitably qualified person who can then if appropriate refer to the crisis service via the usual route. The police officer must remain with the person unless discharged by the health care professional.
- At the HPOS support from the police is to be reviewed every 30 minutes from the time of arrival at the HPOS and at intervals of 20 minutes thereafter.

BACK SUBMIT

Pressing SUBMIT sends the Officers Assessment to the MHTP inbox

Officer's Assessment Completed



On completion of the Officer's assessment an EPNB entry is automatically created, and the triage are sent a copy of the assessment.

You will return to the mental health home screen

1. **Use the Orange icon to attach the report to Niche**
2. You can also use this icon to email your assessment to health care professionals

The officers assessment remains in your outstanding work. If no further action is taking place, and you have attached it to Niche, press and hold and press delete.

If further action such as voluntary assessment or powers are being used, continue to complete the Mental Health Monitoring form.

Niche Mental Health Monitoring Form



- **Must be completed for every mental health incident where powers are used, or voluntary procedures are conducted** (e.g. transporting)
- Niche Integration :
Submits into Niche Occurrence, completing the Niche mental health module for you
- Health Board Integration :
Submits to local health board inbox for assessment as 'All Wales Monitoring Form'
- Ability to email the form to a health care professional at any point – eliminating the need to complete hospital paperwork
- Ability to handover the form via iPatrol to a colleague if you are relieved

Niche Mental Health Monitoring Form Overview

The form is continuously saved in your outstanding work, should you need to stop and go back to it.

To be used in every incident where powers are used or voluntary action is taken



Complete all sections of the form

If a Use of force form or PPN is required, it will put a task in your iPatrol tasks to remind you to complete it

Once submitted

- ✓ The Niche module is also completed
- ✓ A PDF is also attached to Niche
- ✓ The mental health forms will remove from your Outstanding work
- ✗ Remember to complete your use of force form
- ✗ Remember to complete your PPN

The following slides show screenshots of all screens, followed by how to email or handover the form at any point ([pg 22](#))

Mental Health Monitoring Form – Screen 1

D:MHEF NICHE

INCIDENT DETAILS

OFFICER ENCOUNTER WITH PATIENT:
SELECT

OCC. NUMBER: **LINK OCCURRENCE**

ENTERED TIME: **Pick Date...** **Pick Time**

TIME OF ARRIVAL AT INCIDENT: **Pick Date** **Pick Time**

TIME OF DETENTION: **Pick Date...** **Pick Time**

ANY OTHER DETAILS DISCLOSED:
Submitted via mobile device

BACK **NEXT**



D:MHEF NICHE

Select Person from Occurrence

Aggrieved
TEST, NOMINAL [VI;BB;G3]
07/03/1983

Escapée
FUSION, DAN [G1] [DECEASED]
01/01/1990

Aggrieved; Carer; Subject
TESTER, JOHN WILLIAM HENRY [G3]
02/01/1943

Aggrieved; Subject
FUSION, STEVE [G4V]
21/11/1988

Suspect
MOUSE, MICKEY [G4V]
21/11/1995

Other
MOUSE, MINNIE [G4V]
21/11/1991

Absconder
TEST, NO
07/03/19

Consultant
FUSION,
17/02/19

BACK **NEXT**

If there are multiple persons linked to the Occurrence, the app will show a list of the persons from which you can make a selection.

If there is only one person linked to the occurrence the app will automatically select that person

D:MHEF NICHE

INCIDENT DETAILS

PERSON:
Male: TEST NOMINAL
07/03/1983

TRANSLATOR REQUIRED: **SELECT**

ETHNICITY: **SELECT**

SDE: **SELECT**

A. INCIDENT ADDRESS: Set address from occurrence

Add Location **+**

B. IN WHAT CIRCUMSTANCES DID THE PERSON COME TO THE ATTENTION OF THE POLICE?
SELECT

C. WHAT WERE THE BEHAVIOURAL ISSUES THAT TRIGGERED CONCERN?
SELECT

D. IS THE PERSON SUFFERING FROM THE EFFECTS OF ALCOHOL OR DRUGS?
SELECT

BACK **NEXT**

Press the + icon to add a different person if the selected person is incorrect

If the app has not selected an incident address from the occurrence, press the + icon to add a location

Mental Health Monitoring Form – Screen 2

SEARCH

NOTE: S.136 GUIDANCE. THE DETAINED PERSON MUST BE SEARCHED UNDER S.32 PACE PRIOR TO TRANSPORT AND ANYTHING THAT MAY CAUSE HARM TO SELF, OR OTHERS, MUST BE REMOVED, THIS INCLUDES SEARCHING A PERSON'S MOUTH. ANY ITEMS TAKEN MUST BE RECORDED IN THE OFFICER'S EPNB AND A RECORD HANDED TO ANY ASSESSING TEAM STAFF AT PLACE OF SAFETY (POS) WHO MUST COUNTERSIGN IN THE OFFICER'S EPNB. A RECORD OF THE SEARCH AND COUNTER SIGNATURE WILL BE REQUIRED AT THE POS.

HAVE YOU SEARCHED THE DETAINED PERSON?

Items found and recorded in the form are automatically entered in your EPNB

BACK NEXT

ACTION TAKEN

WHAT MENTAL HEALTH PROFESSIONAL DID YOU CONSULT WITH?

NAME OF MENTAL HEALTH PROFESSIONAL:

A. DID YOU REQUEST ADVICE FROM A MENTAL HEALTH PROFESSIONAL?

WAS ADVICE REQUESTED AS A PART OF A MENTAL HEALTH TRIAGE SCHEME?

IS THE PERSON KNOWN TO MENTAL HEALTH SERVICES?

IF A MENTAL HEALTH PROFESSIONAL HAS NOT BEEN CONSULTED, PLEASE GIVE THE REASON WHY:

B. WAS THE PERSON TAKEN TO A&E FOR ILLNESS OR INJURY?

C. WHAT ACTION WAS TAKEN BY THE POLICE?

D. HAS THE PERSON BEEN DETAINED UNDER S136 PREVIOUSLY?

E. HAS A PPN SAFE GUARDING RISK ASSESSMENT BEEN COMPLETED?

BACK NEXT

METHOD OF TRANSPORT / PLACE OF SAFETY

TRANSPORT/PLACE OF SAFETY

Press the + icon to add the first method of transport/place of safety

BACK NEXT

If a PPN has not been submitted a TASK is sent to you reminding you to complete one.

Mental Health Monitoring Form – Screen 3

D:TRANSPORT

METHOD OF TRANSPORT AND PLACE OF SAFETY
Transport/POS form 1 of 1

A. TRANSPORT
WAS AN AMBULANCE CALLED? ☐ NO ☐ YES

METHOD OF CONVEYANCE TO THE PLACE OF SAFETY:

IF A POLICE VEHICLE WAS USED, WHAT WAS THE REASON WHY?

BACK **NEXT**

D:TRANSPORT

METHOD OF TRANSPORT AND PLACE OF SAFETY
Transport/POS form 1 of 1

A. TRANSPORT
WAS AN AMBULANCE CALLED? ☐ NO ☒ YES

TIME AMBULANCE CALLED:

TIME OFFICER REQUESTED AMBULANCE (IF DIFFERENT):

TIME AMBULANCE ARRIVED:

DID THE POLICE ESCORT THE AMBULANCE? ☐ NO ☐ YES

METHOD OF CONVEYANCE TO THE PLACE OF SAFETY:

IF A POLICE VEHICLE WAS USED, WHAT WAS THE REASON WHY?

BACK **NEXT**

D:TRANSPORT

METHOD OF TRANSPORT AND PLACE OF SAFETY
Transport/POS form 1 of 1

B. PLACE OF SAFETY
NOTE: HEALTH BASED PLACE OF SAFETY (HBPOS) SHOULD BE USED IN ALL BUT THE MOST EXCEPTION CIRCUMSTANCES

TYPE OF PLACE OF SAFETY:

TIME OF ARRIVAL AT PLACE OF SAFETY:

TIME OFFICERS LEAVE PLACE OF SAFETY:

REASON FOR TRANSFER TO **First** PLACE OF SAFETY:

BACK **NEXT**

Mental Health Monitoring Form – Screen 4

D:TRANSPORT

METHOD OF TRANSPORT AND PLACE OF SAFETY
Transport/POS form 1 of 1

B. PLACE OF SAFETY
NOTE: HEALTH BASED PLACE OF SAFETY (HBPOS) SHOULD BE USED IN ALL BUT THE MOST EXCEPTION CIRCUMSTANCES

TYPE OF PLACE OF SAFETY:
SELECT VALUE

TIME OF ARRIVAL AT PLACE OF SAFETY:
Pick Date... Pick Time

TIME OFFICERS LEAVE PLACE OF SAFETY:
Pick Date... Pick Time

REASON FOR TRANSFER TO First PLACE OF SAFETY:
SELECT

BACK **NEXT**

D:TRANSPORT

RESTRAINT
Transport/POS form 1 of 1

CONSIDER WHETHER USE OF FORCE FORM/MODULE ALSO NEEDS TO BE COMPLETED.

WAS FORCE USED AT ALL DURING THE ENCOUNTER?
Yes

WAS PHYSICAL RESTRAINT USED DURING THE INITIAL ENCOUNTER?
SELECT

WAS PHYSICAL RESTRAINT USED DURING TRANSPORT?
SELECT

WAS PHYSICAL RESTRAINT USED AT THE PLACE OF SAFETY?
SELECT

ANY OTHER DETAILS:
ENTER TEXT

BACK **FINISH**

D:MHEF NICHE

METHOD OF TRANSPORT / PLACE OF SAFETY

TRANSPORT/PLACE OF SAFETY

1ST PLACE OF SAFETY:
HBPOS

+

BACK **NEXT**

If force was used a Task is sent to you reminding you to complete a Use of Force form

A maximum of 3 methods of transport/place of safety can be added to the report. Press the + icon to add additional places of safety

Mental Health Monitoring Form – Screen 5

ANY ADDITIONAL INFORMATION

ANY ADDITIONAL INFORMATION:

ENTER TEXT

BACK NEXT



SUBMISSION TO HEALTH BOARD & NICHE

MENTAL HEALTH SUBMISSION UNIT BCU AREA: SELECT

HEALTH BOARD TO BE EMAILED 'ALL WALES MONITORING FORM': SELECT

ADDITIONAL EMAIL ADDRESSES

ENTER EMAIL(s)
(separated by semicolon)

BACK SUBMIT

①

A task is sent to the relevant BCU Health Unit

②

The information recorded in the Mental Health Monitoring Form can be emailed to the appropriate regional Health Board (as an 'All WALES MONITORING FORM').

③

Add in the email address of the health care professional you are handing over the person to, instead of filling out the hospital forms. The information recorded in the Mental Health Monitoring Form can also be emailed to other interested parties if required. (as an 'All WALES MONITORING FORM').

④

Pressing SUBMIT attaches the Mental Health Monitoring Form to the Niche Occurrence. The form is also attached to the person.

A copy of the 'ALL WALES MONITORING FORM ' is also attached to the Reports tab as a pdf.





Sending the Mental Health Monitoring Form

- At any point you can email the mental health monitoring form to a health care professional.
- You should always continue completing the form and submit once all parts are completed.
- You can also send the mental health monitoring form to another colleague's iPatrol if you are being relieved.

How to email the Mental Health Monitoring Form

15:23 Dev:MHEF NICHE

INCIDENT DETAILS

PERSON:

Male: NOMINAL TEST
07/03/2010

TRANSLATOR REQUIRED: No

ETHNICITY: 1. White - North European

SDE: SELECT

A. INCIDENT ADDRESS: SET ADDRESS FROM OCCURRENCE

SOUTH WALES POLICE HEADQUARTERS
COWBRIDGE ROAD BRIDGEND UK CF31 3SU

B. IN WHAT CIRCUMSTANCES DID THE PERSON COME TO THE ATTENTION OF THE POLICE?

Missing person

C. WHAT WERE THE BEHAVIOURAL ISSUES THAT TRIGGERED CONCERN?

Harm to self

D. IS THE PERSON SUFFERING FROM THE EFFECTS OF ALCOHOL OR DRUGS?

Not known

BACK NEXT

15:23 Dev:MHEF NICHE

INCIDENT DETAILS

PERSON:

Male: NOMINAL TEST
07/03/2010

TRANSLATOR REQUIRED: No

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Not known

BACK NEXT

Send by Email

15:23 Dev:MHEF NICHE

INCIDENT DETAILS

PERSON:

Male: NOMINAL TEST

ENTER EMAIL:

ENTER EMAIL

Important

A part complete Mental Health Monitoring form will be sent by email.

Please remember to re-submit the form when all fields have been populated.

SEND EMAIL CANCEL

BACK NEXT

Enter the email address of the Health Care Professional/Unit you wish to email the part completed Mental Health Monitoring Form to

Details currently entered on the form will be emailed to address entered above. The Mental Health Monitoring Form will still be held in Outstanding Work, awaiting final submission.

How to transfer the Mental Health Monitoring Form

Complete these steps to send the form from your phone to a colleague ...

15:23

Dev:FORMS REVIEW

1 : Incomplete 0 : Queued ☐ Show Queued

MHA TEST Continue

Going into Outstanding Work, and selecting a Mental Health Form currently in progress will now give you the option to transfer it to another colleagues iPatrol, to allow them to complete and submit, should you not be able to yourself



15:23

Dev:FORMS REVIEW

1 : Incomplete 0 : Queued ☐ Show Queued

MHA TEST Continue

iPatrol

Continue

Delete

Send to another device



15:24

Dev:SEND MHMF

To transfer the MHMF to a new device: Open the app, go to 'Outstanding Work', in top menu select 'Get MHMF from another device' and center the camera on the barcode.



1 of 1

PREV. NEXT

Enter the confirmation code from the receiving device.

###

A QR Code will be generated, which can be scanned by your colleague. The scanned QR Code will then transfer all details previously entered by yourself for this form, on to your colleagues for them to continue on to final submission.

Depending on the size of the form being transferred, sometimes two QR Codes are required to copy it across. In these cases, simply press the 'Next' button after the first QR has been scanned by your colleague to reveal the second which can then also be scanned.

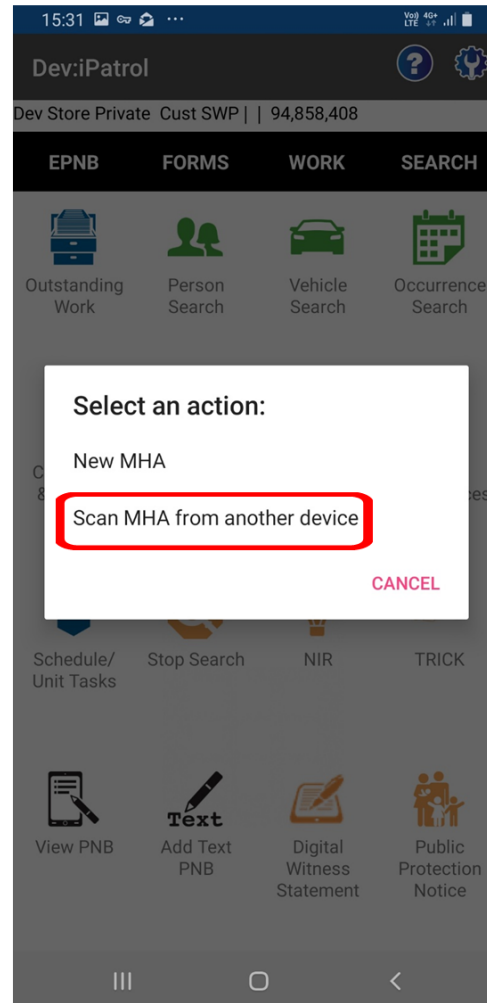
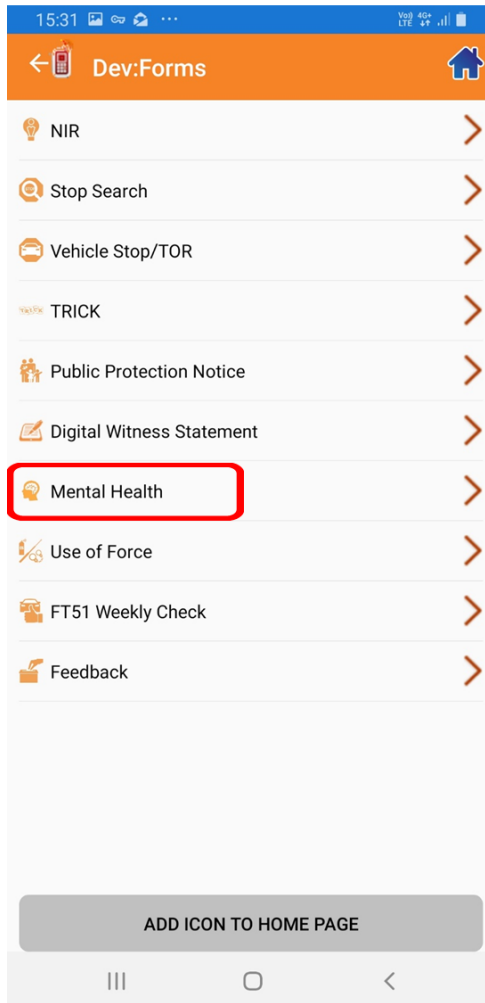
Once all QR Codes have been scanned on to your colleagues phone, a three digit code will be generated for them. Enter this code here, and the Mental Health Form will be deleted from your device, as it has now been transferred for your colleague to complete and submit.



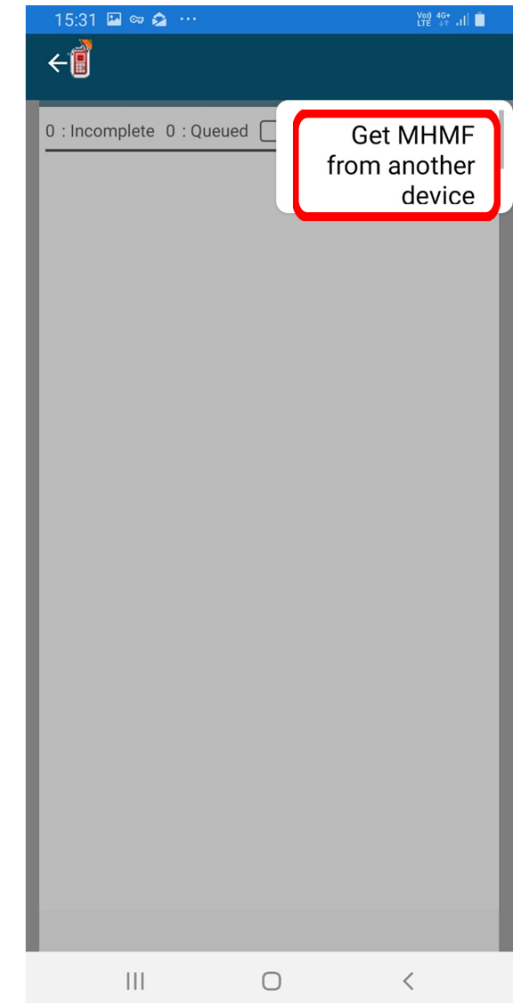
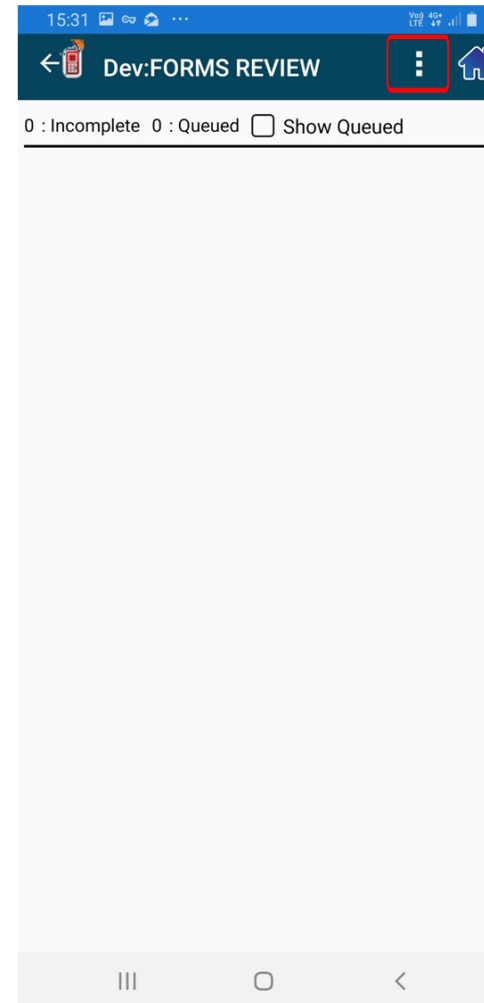
How to transfer the Mental Health Monitoring Form

To receive the form from a colleague, complete these steps on your own phone

①

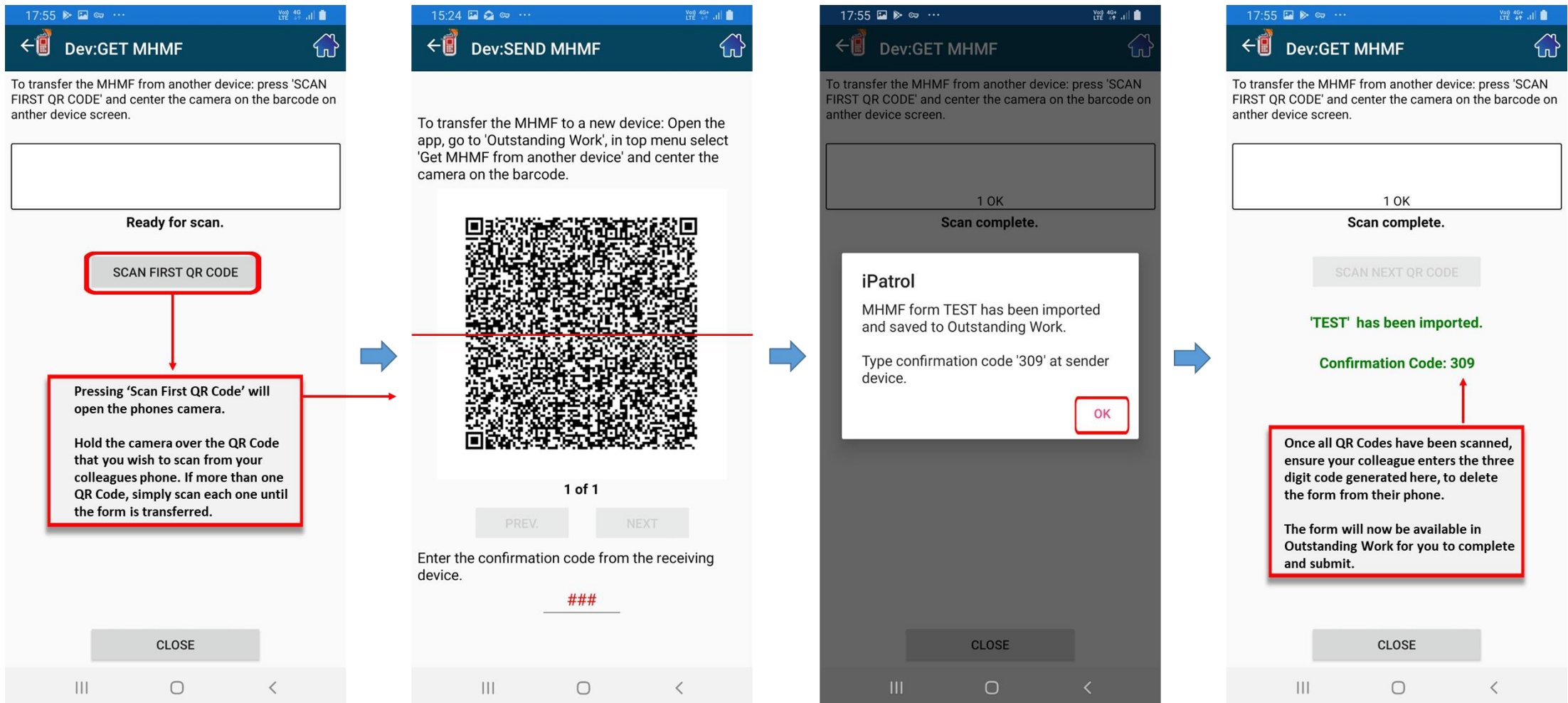


②



How to transfer the Mental Health Monitoring Form

To receive the form from a colleague, complete these steps on your own phone





Help and Support

For further support please contact the Digital Services Division

South Wales Police

Call: 102

Training Support email: DSDTrainers@south-wales.pnn.police.uk

Technical Support email: digitalservicesdivision@south-wales.pnn.police.uk

Videos: BOB > Departments > Digital Services Division > Training Hub