



All-Stages Diversion: a model for the future

Sainsbury Centre for Mental Health sees diversion as the process to ensure that people with mental health problems who enter (or are at risk of entering) the criminal justice system are identified and provided with appropriate mental health services, treatment and any other support they need. It also embraces opportunities to prevent entry through identifying and meeting needs earlier, thus avoiding the risk of an escalation of destructive and self-destructive behaviour. People can be diverted at ANY stage of their route through the criminal justice system.

Diversion has become a central focus of the Department of Health and the Ministry of Justice in recent months, in large part due to the Independent Review by Lord Bradley on criminal justice and mental health.

The All-Stages Diversion model shows an overview of the criminal justice pathway. It pulls together evidence and learning from our work on diversion.

Our aim is to make it a helpful tool that can be used by those in the field. It should also illustrate how the mental health and criminal justice systems and social care and the voluntary sector interact and where the opportunities for diversion exist along the pathway.

The model is divided into three broad sections, with a total of seven stages:

Early intervention:

1. prevention
2. pre-arrest
3. point of arrest

Criminal justice decision-making:

4. arrest / pre-court
5. bail, remand and sentencing

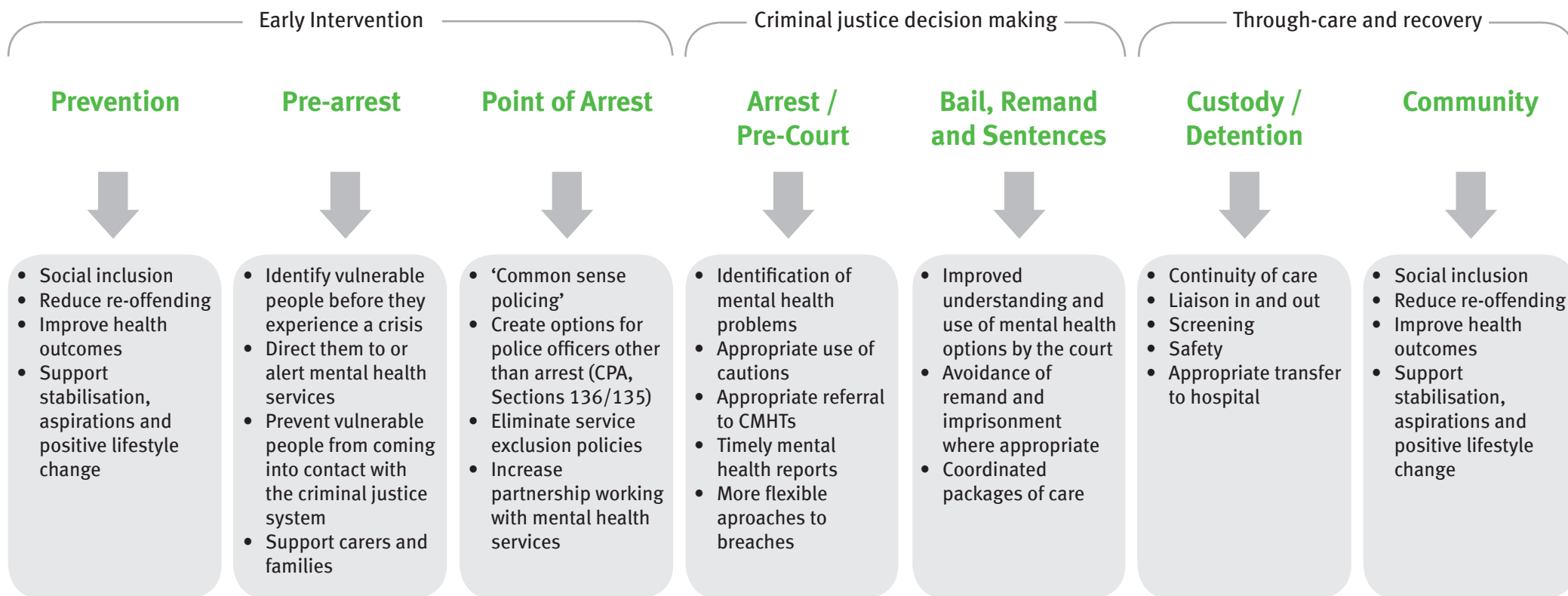
Through-care and recovery:

6. custody or detention
7. release and resettlement

For each stage, we highlight the critical partners who should be involved, how diversion is achieved, and the aims and outcomes of diversion at this stage.

All-Stages Diversion: a model for the future

People can be diverted at ANY stage of their route through the criminal justice system. This is what you can achieve at each stage:



	Early Intervention			Criminal justice decision making		Through-care and recovery	
	Prevention	Pre-arrest	Point of Arrest	Arrest / Pre-Court	Bail, Remand and Sentences	Custody / Detention	Community
Who should be involved?	<ul style="list-style-type: none"> Social services Faith and community support Community Safety Schemes Substance misuse Primary Care Families/Carers 	<ul style="list-style-type: none"> Neighbourhood policing Community Support Officers CMHTs Families / Carers Faith and community support 	<ul style="list-style-type: none"> Social Care Police CMHTs CJLD schemes Appropriate adults Families / Carers 	<ul style="list-style-type: none"> CJLD schemes CPS Custody Sergeant Forensic Medical Examiners CPNs Psychiatrists Appropriate adults Families / Carers Police custody health teams 	<ul style="list-style-type: none"> Sentencers CJLD worker Court staff Bail support workers Social Care 	<ul style="list-style-type: none"> Prison inreach and health care Substance misuse Secure care workers Safer custody officers Forensic services Psychology Chaplaincy 	<ul style="list-style-type: none"> Housing department and tenancy support Employers Substance misuse Primary Care Probation Families / Carers Faith and community support
How is diversion achieved?	<ul style="list-style-type: none"> Benefit advice Housing advice One Stop Shops Employment opportunities Education/training courses Advocacy and support Leisure activities 	<ul style="list-style-type: none"> Multi-agency Preventative Panels Proactive and skilled primary mental health care Training Sections 136/135 	<ul style="list-style-type: none"> Training and mental health awareness Crisis Intervention Teams Sections 136/135 Triage 	<ul style="list-style-type: none"> Training Assessment / Referral CJLD scheme presence Information sharing 	<ul style="list-style-type: none"> CJLD triage report Psychiatric report Mental health options (MHTRs, Guardianship Orders, Hospital Orders, voluntary hospitalisation) 	<ul style="list-style-type: none"> Multi-disciplinary referral meetings MAPPA / MAPPPs Parole process Section 117 / CPA Brief interventions Treatment programmes Assessment for transfer to hospital 	<ul style="list-style-type: none"> CPA / Section 117 / Licence conditions Benefit advice Housing advice Employment opportunities Education / training courses MAPPA / MAPPPs Advocacy and support Leisure activities
Aims and Outcomes	<ul style="list-style-type: none"> Social inclusion Reduce re-offending Improve health outcomes Support stabilisation, aspirations and positive lifestyle change 	<ul style="list-style-type: none"> Identify vulnerable people before they experience a crisis Direct them to or alert mental health services Prevent vulnerable people from coming into contact with the cj system Support carers and families 	<ul style="list-style-type: none"> 'Common sense policing' Create options for police officers other than arrest (CPA, Sections 136/135) Eliminate service exclusion policies Increase partnership working with mental health services 	<ul style="list-style-type: none"> Identification of mental health problems Appropriate use of cautions Appropriate referral to CMHTs Timely mental health reports More flexible approaches to breaches 	<ul style="list-style-type: none"> Improved understanding and use of mental health options by the court Avoidance of remand and imprisonment where appropriate Coordinated packages of care 	<ul style="list-style-type: none"> Continuity of care Liaison in and out Screening Safety Appropriate transfer to hospital 	<ul style="list-style-type: none"> Social inclusion Reduce re-offending Improve health outcomes Support stabilisation, aspirations and positive lifestyle change

Definitions and terms used

CJLD - Criminal Justice Liaison and Diversion teams

CMHT - Community Mental Health Team

CPA - Care Programme Approach

CPA is process of how mental health services assess a person's needs, plan ways to meet them and check that they are being met. It is developed between the services and the service user and is agreed by both parties.

CPN - Community Psychiatric Nurse

CPS - Crown Prosecution Service

The Crown Prosecution Service is the government agency that advises the police on cases for prosecution, reviews cases and determines charges and prepares cases for and presents them at court.

CTO - Community Treatment Order (of Mental Health Act 2007)

A Community Treatment Order requires that people comply with certain conditions, including taking their medication. It can only be imposed on patients following a period of compulsory detention for treatment in hospital.

Forensic Medical Examiners

FMEs conduct health care for people in police custody. They are responsible for assessing whether a detainee is fit for questioning.

Inreach

A specialist mental health team within a prison.

MAPPA - Multi-agency Public Protection Arrangement

The MAPPA places a duty on the police and the National Probation Service to assess and manage risks posed by offenders in the community.

MAPPP - Multi-agency Public Protection Panel

The highest MAPPA level, which is reserved for offenders assessed as posing the highest possible level of risk to the public.

MHTR - Mental Health Treatment Requirement

The Community Order is a community sentence that comes with a choice of twelve different requirements including for mental health treatment (the MHTR).

Section 117 of the Mental Health Act 1983

Section 117 imposes a duty on health and social services to provide aftercare services to certain patients who have been detained in hospital under the Act.

Section 135 of the Mental Health Act 1983

Section 135 enables an Approved Social Worker to seek a warrant to allow a police officer to enter premises (by force if necessary) to search for someone with mental health problems and take them to a Place of Safety.

Section 136 of the Mental Health Act 1983

Section 136 enables a police officer to remove someone from a public place and take them to a Place of Safety for the making of any necessary arrangements for treatment or care.