

Consultation with Martin Graves

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In relation to the chronology I think PC Walker had drawn his spray and had his baton out before PC Short was down. I would describe this as a hard challenge. They think that they are dealing with someone with a knife. In relation to terrorist threat I produced this from the current level.

The officers were potentially lured to the area. Walker said that he thought of running him over in a car. I would have come out with the hard stuff.

I don't think that talking down was an option as the time for this was past. There was a lack of communication and a high tolerance to pain.

In this situation there were significant signs of ABD. The question is if they had recognised what could they have done differently. Textbook suggests standoff, attempt to contain and communicate. That is the ideal. In relation to containing even if they employed the 'floating bubble' he could have run and attacked someone.

There was a short period of time between their arrival and the attack on the officer. I have dealt with situations where there was up to 7 minutes before they engaged.

What causes the issue is the level of activity that the person is at. This will depend on the level of exertion, drugs etc. I have seen a video from America of someone struggling on the pavement. He suddenly died and the officers were only stopping him from banging his head. There was no restraint and the heart stops.

In ABD we have the effects of the drugs but also the requirement of the body to breathe. This can happen when sitting or bending over. If there is a struggle then the need for oxygen will be heightened.

But you have to get them under control because then you can lessen the need for oxygen. You will get differing medical opinions on positional asphyxiation. I was part of the expert panel on the death on an aeroplane of Mubenga.

Here the person is not totally prone. Every change in position is significant. The significance would be if you were unable to escape that position. The body position pictures only show snapshots. They are not over time.

In respect of Paton using pinning on arm-this is in our manual but not the Scottish manual.

I am asked what the position would be if we took the police evidence away. For the civilians their account is what it looks like-passing bus. It looks over the top but it is designed to produce an outcome.

I have seen footage of 10 officers restraining and violent behaviour before this where officers cannot restrain on the floor. There were bruises on this person.

In death cases there are different options-to get secure and put in an ambulance and treat as a medical emergency. In relation to tasers I believe in them. In England we have specially trained officers showing massive benefits in conflict management. The benefit of tasers is that they are not dependent on pain threshold. The police are trained to use in these types of circumstance. In this type of situation in England I would be surprised if a taser didn't arrive in the first few vehicles. It is an option that would be considered and its use would be a good tactical decision. The use of a taser would give the least injurious effect. There has never been a death attributable to taser. In this sort of situation you would have the ability to engage at a distance and overcome the effects of drugs. There can be situations where taser doesn't work-explained due to deployment where charge cannot be delivered. Taser is a great tactical option. When we expanded its deployment-it is now the norm.

If you take out the police evidence then you see Mr Nelson who for 15-20 seconds when he is going outside cannot see what is happening. He is seeing them trying to get control. It's a fluid situation where he is probably on his front for a time. The use of the knee on the back and on the side could be part of the training.

In relation to the civilian evidence, there is nothing in the civilian evidence that causes me concern. I would say that the four who arrived are getting on with the restraint. It always looks dirty and over

the top but cannot be successfully completed with less than 3. 4 is the ideal number and 5 is best practice. Placed at arms, legs and head and straps applied. That is safest option for person on the floor.

In relation to the use of the baton if this was during the struggle I wouldn't have an issue. You have to look at the location and reasons-the arms and legs are fine to take out resistance.

Alpha PVP is not really on my radar.

I have given evidence both here and in Scotland. There has not been any difficulty with admissibility. In Scotland I gave evidence in a death in custody. I have given evidence for police for professional standards. In a death in custody in Kent I wasn't called by the prosecution. I was also a post incident manager.

I would say that Scotland sits a bit behind everyone-the terminology is dated. It needs an overhaul.

In relation to the officer leaving his baton behind I would say that is silly. Elsewhere in the UK he would be up for discipline.

In my report at p31.The period of resistance here of 4 minutes is not excessive in view of the strength and resistance put up. Strikes would not concern me. If a metal baton was used I would say it would leave a long straight mark. With that level of resistance it would not surprise me if batons were used but it would surprise me if their use hadn't been recorded. The accounts and use of force should have been part of the PIM process. Here you didn't have the initial accounts-they have been given too late. There has been a month's worth of other media.

Baton strikes on a living person radiate-here there is a bruise on the arm. If you lever with a baton that will cause a bruise to that part of the body.

At p33 para V-this doesn't jump out at me as a positional asphyxiation. Here there wasn't a massive exertion and there was not a police chase.

P34-public safety must take precedence. Others are around. In relation to my comments on shouting it is unusual not to shout out. It is not mentioned by officers-Mr Graves made comment about PIM procedures.

Talking down was not an option. The restraint is not unreasonable in the circumstances.

A person is not under control until limbs are restrained-able to say I am in charge of you. Until a person is fully secured they are not under control.

Overall for PSoS there are issues for PIM procedures, training which needs updated and better access to Tasers.

The PIM processes could impact on civil liability for officers-where post traumatic stress and consequences of investigation.