Thursday, 3 October 2024. 2 (10.00 am)3 LORD BRACADALE: Ms Grahame. MARTIN GRAVES (continued) 4 5 Examination-in-chief by MS GRAHAME MS GRAHAME: Thank you. Good morning, Mr Graves. 6 7 Α. Good morning. Q. Yesterday we had been looking through your report, which 8 9 is SBPI 00667, and we had got to section 4, which was page 12, so page 12, section 4, and we've moved on to 10 start talking about some specific points that had been 11 12 raised with you by the Inquiry. 13 Yes. Α. 14 And you will recall that I read out the questions which Q. 15 had been asked and they were from (a) to (h) and, as was very kindly pointed out to me yesterday, my arithmetic 16 17 was wrong, I said that was seven and it was actually eight? 18 19 Yes. Α. 20 And we had started the process of going through those Q. 21 questions and looking at your views on those and I think 22 we were still on (a), which was, who was in charge, and we will see that at page 13 of your report. And you'll 23 24 remember yesterday we had been looking at the position in 2015. 25

1 And then if we can move onto page 14, I would like to move onto the 2022 position and I think yesterday you 2 3 explained that you had been sent papers from 2022, which 4 were the most up-to-date papers, on the basis that 5 further training in Police Scotland continues to evolve 6 and it hasn't stopped then, but the papers that you had 7 were up to that date? 8 Α. Yes. So I would like to look at what is paragraph 6 on this 9 Q. 10 page and in relation to the up-to-date position, if I can call it that, 2022, you said you were unable to find 11 12 any specific documents showing current training or input 13 on this matter and this is the first matter that you 14 were asked about; who's in charge? 15 Α. Yes. There is a new section in the 2022 OST Manual, 16 Q. 17 "Additional training around response to knife-related incidents". So you were able to talk about a new 18 19 section, but hadn't found any specific documents even at 20 that stage --21 Α. Yes. 22 -- which showed specific training which covered question Q. (a), which was, who was in charge in relation to a 23 response team attending a knife incident? 24 That's correct, yes. 25 Α.

Q. Now, we have also a statement available for the Chair 1 2 from Inspector David Bradley, which is SBPI 00408. And 3 if we could have that on the screen. If we could look 4 at paragraph 45, and we've heard evidence from 5 Inspector Bradley, but this is his Inquiry statement, paragraph 45, and this relates to training in relation 6 to knife incidents and he said: 7 "I have been asked whether there is any training for 8 9 probationers or in recertification training in relation 10 to who's in charge when a response team are sent to a knife incident. I can't speak to the specific training 11 12 given to probationary officers as to who is in charge at 13 a knife incident. It's not an area covered in 14 operational safety training recertification which 15 focuses on the operational techniques to mitigate edged-weapon threat." 16 17 Α. Yes. 18 It would appear that, certainly from Inspector Bradley's Q. 19 statement and from your own researches, there's no 20 specific training on that particular question? 21 Α. Certainly not within the operational safety training programme and, as I said earlier, possibly within other 22 training delivered certainly to probationary officers 23 around major critical incident response et cetera or 24

command structures.

- Q. And thinking about officer safety training, would you say any merit in introducing training in relation to the
- 3 question to who was in charge?
- 4 A. I don't see any harm in it being an issue that would be
- 5 raised during the discussion and delivery of the lessons
- in relation to what would happen if, you know, you
- 7 decided to declare this as a major incident or a
- 8 critical incident, what would happen, who would take
- 9 charge, et cetera.
- 10 Q. Right. And we've heard from other witnesses who have
- 11 talked about how training can be reinforced. There may
- be training in one area, but the same messages could be
- reinforced in other areas?
- 14 A. That's correct, yes. An example of that may be during a
- 15 restraint lesson talking about medical implications and
- then linking that to the requirement for first aid, CPR,
- 17 recovery position, et cetera, just refreshing the links
- 18 to take you from one bit of training to the other.
- 19 Q. And is there benefit to people being trained if they
- 20 receive the same message more than once in say restraint
- 21 training and SPELS training and other areas of training?
- 22 A. I would have to say yes, yes.
- 23 Q. How does that help people being trained?
- 24 A. It reinforces the message and it allows them to swap
- 25 from one bit of training to another where something else

- 1 might take over due to changes in the situation.
- 2 Q. Does this help people understand the applicability of
- 3 these principles in a number of different areas?
- 4 A. It can do, yes.
- 5 Q. Right. And then you were asked by the Inquiry team if
- 6 the training was fit for purpose. Now, you have
- 7 explained in -- there's no OST training and I think you
- 8 said a review set against College of Policing document
- 9 mentioned may be advisable to confirm the position?
- 10 A. Yes.
- 11 Q. And I wondered if you could explain to the Chair what
- 12 you mean by "recommending a review set against College
- of Policing training"?
- 14 A. As I say, because of the differences between
- 15 Police Scotland training and the training being
- delivered and resources being used across the rest of
- 17 the UK, I think it would be an advisable solution to
- just make that comparison. It may well be other
- 19 training programmes outside of OST that are being used
- 20 to support and get that message across, just to make
- 21 sure that Police Scotland are mirroring that or have
- 22 those other training programmes in place for officers
- outside of the OST programme.
- 24 Q. Considering a review on the matter to -- yesterday you
- 25 spoke about you can't simply add something in at the

end, you've got to look at how it impacts the whole?

2 Α. Yes. If I can summarise it in that way. And is that 3 Q. 4 something you would recommend with this question of 5 who's in charge? I think it would be a valid and useful exercise to 6 Α. 7 conduct, yes. Thank you. Can we go back to your report, please. And 8 Q. 9 if we can go back to the page we were on, which I think 10 was page 14, and we've just finished looking at number 7. Let's look at question 8. This relates to 11 12 the hypothetical reasonable officer that we looked at 13 yesterday? Yes. 14 Α. 15 And if a hypothetical reasonable officer had received Q. what is not -- there's no training in OST, so it's very 16 17 much dependent on other areas or perhaps experience, how 18 would their actions potentially have differed in respect 19 of a comparison with Police Scotland training in 2015? 20 What you said in answer 8 is: 21 "Firstly, I believe the risks would have been 22 highlighted immediately by the ACR staff. Now, I believe more specific quidance would have been provided by ACR 23 to the officers attending in relation to how they risk 24 assess the incident and options available and it would 25

1		have included immediately updating ACR if subject was
2		spotted. A hypothetical officer may give consideration
3		as to observe and report rather than contact, subject
4		questions of public safety. The ACR Inspector may give
5		consideration to the deployment of an ARV or whether to
6		assign an ARV. If an ARV was assigned, it would be kept
7		running to the locus until cancelled by the officers at
8		the scene. A local supervisor would have been assigned
9		to take command of the incident from the ACR
10		supervisor."
11		But thinking about training and how that has or has
12		not changed between 2015 and 2020, from reading your
13		report, is it the case that really there has been very
14		little change in the OST training since then?
15	Α.	Specifically in relation to this subject matter, yes,
16		there has been very little update in relation to this,
17		yes.
18	Q.	But you can see merit in having a review of that
19		position?
20	Α.	I think so, yes. Other training packages have come in
21		across the country, more training has been given to ACR
22		staff and changes around risk assessment and bulletpoint
23		reminders for to give to staff deployed to these
24		types of goals. The deployment guidelines for ARVs
25		being assigned to knife-related incidents has been

updated. So I think, yes, just bringing that 1 2 information into OST as a mention in relation to 3 specifically around knife incidents would be a benefit, 4 yes. 5 And can you advise the Chair what's happening now in Q. College of Policing in relation to this question? 6 7 Very similar. It's with certainly the bang-up-to-date Α. changes that are taking place currently across the rest 8 9 of the UK, they're rolling out a new scenario-based PSST 10 programme, personal safety training, and that's very much scenario based and within those scenarios mention 11 12 of these, you know, ancillary training requirements, 13 these other bits of information, are being fitted in and 14 that's an opportunity to discuss the "what would you do 15 next?" or "what would you do then?" rather than just focusing on the standard techniques, et cetera from the 16 OST programme. 17 18 And if there was to be any review of the training in Q. 19 this area, would you anticipate that they would take --20 have regard to the College of Policing up-to-date 21 personal safety training initiative or changes? 22 As I say, I think it would be a good place to start. Α. The new process being rolled out is receiving very, very 23 favourable feedback. It's being well received by 24

officers on the ground, and it's changing the

- 1 methodology of how we try to get officers to look at
- 2 their de-escalation communication skills and taking that
- 3 emphasis away from the reliability on equipment to
- 4 resolve the problem.
- 5 Q. And what is it that's changing?
- 6 A. Really the whole training programme has changed. It's
- 7 now very much scenario based. There's more emphasis on
- 8 debriefing officers and getting officers to explain
- 9 their decision-making process and justify their actions
- 10 within those scenarios and it's giving them an
- 11 opportunity to practise in representative safety, but in
- 12 a realistic format what they might do in similar
- 13 situations.
- 14 Q. And is that because scenario-based training is viewed as
- being particularly helpful to people being trained?
- 16 A. Certainly from the College of Policing standpoint across
- 17 the rest of the UK that has been the findings from a
- sort of a three year plus review, you know, looking at
- 19 not just what officers think about officer safety, but
- 20 speaking to trainers and strategic managers as well and
- 21 this new programme is the result of that work over the
- last sort of three to four years.
- Q. Thank you. And let me just be clear it's PPST, is it?
- A. Yes, personal and protection safety training.
- 25 Q. Personal protection, right. And I think you make

1 reference to this in on page 27 of your report -- we 2 don't need to have this on the screen --3 Α. Yes. 4 -- at the final paragraph (h)? Q. 5 Yes, with my recommendation, yes, at the end. Α. We'll come on to that later. Thank you. So if I may, 6 Q. 7 I would like to move on to the second question, which was (b), and you'll see that on page 14 of your report, 8 which we can see at the bottom of the screen, if we 9 10 could bring that up, and it's "Officers' communications with ACR, including requirement for feedback when 11 12 attending a grade 1 call?" 13 So this is focused on how officers communicate with 14 the area control room and the requirement of providing 15 feedback and information to the ACR. And you looked, first of all, at the 2015 position --16 17 A. Yes. 18 Q. -- in Police Scotland? And this is an area where you 19 describe it there as: 20 "There is nothing of note in the 2013 OST Manual to 21 advise officers on this." 22 Α. No. There is the CUTT principles and we have heard evidence 23 Q. 24 in the Inquiry from officers about CUTT? Hm-hmm. 25 Α.

- 2 on best practice and part of CUTT, one of the Ts, is
- 3 transmit?
- 4 A. That's correct, yes.
- 5 Q. So I think the first "T" is transmit and that is a
- 6 signal to communicate with ACR, the control room?
- 7 A. ACR, other officers attending, et cetera to spread the
- 8 message, yes.
- 9 Q. And we also heard evidence, as you say, that if an
- officer is using their radio, other officers en route
- will be able to hear or any other officer tuned into
- 12 that frequency?
- 13 A. That's correct, yes.
- Q. And you've said there:
- This includes the transmit requirements to inform
- others that a subject is in possession of a knife."
- 17 A. Yes.
- 18 Q. That is a mechanism, a means, whereby officers who see a
- 19 subject with a knife can share that information widely
- 20 with their colleagues and the ACR?
- 21 A. Yes, it's a two-pronged thing; one, it allows other
- 22 officers safety-wise to understand that there's a knife
- 23 involved in the situation, but also then transmits for
- support to come to the officers who are dealing with
- 25 that incident.

1	Q.	Right. And probationer training in the use of radios
2		was in place. So this is training that probationers
3		receive at Tulliallan?
4	Α.	Yes, that's correct.
5	Q.	So they can come out of Tulliallan with a familiarity
6		with radios and how to use them?
7	Α.	Yes.
8	Q.	And the various things they can do with them, because we
9		have heard evidence at an early stage of the Inquiry
10		that it's not just simply a radio, it's got an emergency
11		button and there's other ways of communicating. And
12		then this is mentioned by Sergeant Andrew Park in his
13		statement:
14		"Along with a reference to the CUTT mnemonic, no
15		other training appears to have been in place
16		specifically on this subject."
17		Is it fair to say that in relation to the CUTT
18		technique that's taught to officers that there's no
19		other specific guidance in the OST training which trains
20		officers in communications with the ACR and giving
21		feedback to and from ACR?
22	Α.	Not specifically within the OST programme. It would be
23		a matter of a learnt procedure or a learnt practice that
24		you would report your arrival on scene and you would

provide updates when available and when practicable to

- 1 actually assist other officers attending.
- 2 Q. Is that about experience and years of service, rather
- 3 than specific training?
- 4 A. It could be or, as I've said before, with the ACR
- I would expect, you know, a relevantly experienced ACR
- 6 member of staff to possibly provide those prompts to the
- 7 officer when they assign them to the call, something
- 8 along the lines of, you know "please report your
- 9 arrival" or, "please be aware of whatever" and giving
- 10 them pointers and guidance on the call.
- 11 Q. Now, we have heard evidence of something called --
- 12 I believe from recollection it was called the Stay Safe
- message, and officers gave their evidence to the Chair
- 14 about that was essentially a prompt to remind officers
- 15 to stay safe, and we've also heard that it was expected
- in ACR that there would be feedback provided by officers
- 17 at the scene?
- 18 A. Yes.
- 19 Q. Because I think they were eyes on the ground. And in
- 20 the absence of any CCTV, the ACR are very much dependent
- on the eyes on the ground --
- 22 A. Yes.
- 23 Q. -- the officers at the scene? And we've also heard
- 24 evidence from a number of other officers that they may
- 25 be did not provide feedback to ACR. Many of them said

things happened very quickly and they didn't provide

feedback. But I wonder on your views about the fact

that there's no specific training given on this and

whether, given the circumstances we've heard about, you

think there might be merit in having some specific

training incorporated into OST training about

communicating with ACR?

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- Whether it's part of officer safety or it may sit 8 Α. 9 outside of the actually remit, I think there's merit in 10 officers being reminded of the requirements for that, whether that comes via a prompt from ACR as part of 11 12 their training to officers, or whether it's a mention 13 within OST, I certainly see the merit for that, for them 14 to understand the importance of that "T" for transmit in 15 such incidents.
 - Q. And again, given what you said earlier today, can you see benefit in even if it does exist as training in other areas that there's benefit in reinforcing that?
 - A. There's certainly no harm in it and it wouldn't be an onerous task to add to certain scenarios or within sort of the feedback to officers.
- Q. And I was just about to ask that. In scenario training
 where an incident is taking place and officers are
 perhaps practising in a safe environment a particularly
 difficult incident, would there be benefit in raising

- issues of feedback to the ACR?
- 2 A. It certainly would be a valid point to raise if the
- 3 scenario was a knife-based one, what would be the
- 4 options in the tactical availability to the officers in
- 5 relation to support, what type of support could they
- 6 call on, the realities and practicalities of its arrival
- 7 to assist you with that situation.
- 8 Q. Is that the type of thing that could be a learning
- 9 outcome for one of the trainers to identify, is the
- officer, the trainee, probationers, aware of the
- importance of feeding back to ACR?
- 12 A. Yes, it could be something as simple as: discuss the
- merits of communicating with ACR or discuss the merits
- of the transmit from the CUTT mnemonic.
- 15 Q. And is feeding back to the ACR really is it something
- about safety, keeping the police safe, the public and
- 17 others?
- 18 A. Yes, it's very much geared around a safe approach to
- 19 that situation, yes.
- Q. Right. And obviously the CUTT principles or the CUTT
- 21 mnemonic is something that many of the officers were
- 22 aware of, is that something that's taught regularly at
- 23 either probationer training or refreshed training?
- 24 A. Yes, it forms part of edge-weapon inputs across the
- country, yes.

Q. Let's look at question 2, which we see on the screen: 1 "With such a call, best practice would be to keep 2 3 ACR and other officers attending updated on any 4 safety-related issues. This would include initial 5 contact with the subject, location, et cetera." What do you mean when you say "initial contact with 6 7 the subject"? So when you actually identify the subject and, you know, 8 Α. 9 locate them, you want to the pass that location on as 10 quickly as you can, so if other officers are attending, they can come to your location. 11 12 Q. And then the final line there: 13 "As I have been unable to find any specific 14 reference to this being a priority within the training, 15 it would appear it may have come down to experiential learning from others." 16 17 Α. Yes. 18 Really is this the importance of feedback, the reasons Q. 19 for feedback, the significance of that is really left to 20 experience? 21 Α. Yes, learning on the job basically. 22 Learning on the job. And presumably that learning on Q. the job expects or anticipates that people will be 23 perhaps responding to incidents rather than sitting at a 24 desk-based job. So what for officers, for example, if 25

1 they have may be been in a more desk-based job or 2 working in the community, if they are then sent out 3 to -- as part of a response team or to deal with an 4 incident and they don't have that experiential learning, 5 they haven't learned on the job, would that cause you to have concerns? 6 7 Α. It could, but they all get the same basic input regardless of where they're working in relation to the 8 9 OST package, but, yes, if they had been off the streets 10 for some time, or maybe hadn't, you know, are new to that particular role, there may be some learning for 11 12 them to take place, yes. 13 Q. Right. And you said: 14 "That said, this should have been part of training 15 input and/or an SOP. As it is not, then I would suggest this was insufficient and left officers to decide when 16 17 and what to communicate, leaving them vulnerable and 18 increasing risk to them and their colleagues." 19 Yes. Α. 20 And presumably also increasing risk to the public? Q. 21 Α. Yes, possibly. And to the subjects potentially. Everyone could be at 22 Q. increased risk? 23 24 Α. Yes.

Thank you. Can we consider what the position in 2015

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Q.

1 was for College of Policing, so at paragraph 3, and you 2 say here: 3 "The College of Policing position statement provides 4 a response to [you mention the points and the page 5 numbers]. I am aware that within airwave radio training, probationary training and OST there were 6 7 various links to the importance of communication during incidents. Most ACR staff had drop-down lists of 8 9 questions and points to ask officers attending that 10 would appear on grade 1 calls. Within OST and the NPCC Manual similar quidance was given around best 11 12 practice on knife incidents using the CUTT mnemonic." 13 Now, leaving aside for the moment the ACR staff, 14 because I understand that ACR staff in Scotland have 15 drop-down lists and such like to prompt them? 16 Α. Yes. And there is this Stay Safe message which is recognised 17 Q. and given by ACR, but thinking about the training that 18 was provided in the College of Policing, you mentioned 19 20 here the CUTT mnemonic and edged weapons for the College 21 of Policing, was there any more expansive training given by the College of Policing? 22 A. Not specifically, no. 23 The NPCC Manual on edged weapons was that very similar 24 Q. really? 25

1 A. Very similar, yes, a little bit more in-depth and there was a whole section on edged weapons, but the 2 3 information around the CUTT mnemonic is very similar and 4 just emphasises the importance of that transmit once you 5 have got yourself in a safe position. Was the position in Police Scotland in 2015 and College 6 Q. 7 of Policing reasonably similar? Yes, it was. 8 Α. Right. And can we look at College of Policing? Well, 9 Q. 10 let's look at both the manual and another item, WIT 00115, so this is College of Policing, 11 12 documentation, so this is module 13, Association of Chief Police Officers, and this is a College of Policing 13 14 document that we see on the screen? 15 A. That's correct. Q. And if we can look at page 10, we should see something 16 to do with CUTT and transmit. Page 10 that looked ... 17 sorry, I don't see the page numbers here. Stop there, 18 19 because I can see CUTT, "create distance, use cover, 20 transmit", so it may be that we're inadvertently on the 21 right page. There are a number of redactions in this document, which may make it slightly difficult to 22 navigate on the screen. 23 It talks there about CUTT and let's see if we can 24 find the transmit section? 25

- 1 A. Should be the next page down.
- 2 Q. It is maybe the next page, I think, yes, if we can
- just -- that's it. There we are. Yes, there it is at
- 4 the bottom of that page:
- 5 "Transmit or call for assistance in the conventional
- 6 sense is the use of a personal radio to alert a control
- 7 room to the current situation. This would be followed
- 8 by the dispatch of suitable and appropriate resources as
- 9 back up to the officer. Transmit can also mean a verbal
- 10 warning to the colleagues or members of the public."
- 11 A. Yes, shouting "knife".
- 12 Q. Yes. So there's some information about transmit and
- making it clear it's not just to the ACR or otherwise,
- 14 but no extensive detailed explanation of that?
- 15 A. No, during the actual training discussion would probably
- be with that around the use of the emergency button to
- open the transmit facility and still allowing your hands
- 18 free to deal with the individual, should you need to
- 19 defend yourself.
- 20 Q. We have heard evidence that effectively turns into some
- 21 sort of microphone?
- 22 A. It does. It opens the channel and gives priority to
- that particular radio for about 15 seconds.
- Q. Thank you. And then if we could look at College of
- 25 Policing COP0003. Again, this is College of Policing

training, and this was, if we can go down slightly so we

can see the title, and this is "Investigation PIP level 2 3 1"; what's PIP? 4 Α. It's PIP, it's the investigation sort of side of police 5 training. Right. And this was about responding to an incident? 6 Q. 7 Α. Yes. Q. And if we could move -- this is from, as I understand 8 9 it, 2024? 10 Α. Yes. Just the version 2, 2024, sorry 2014? 11 Q. 12 Α. '14, yes, it's an older one. 13 Yes, so this is round about the same time as the 2015 --Q. 14 Yes. Α. 15 Q. -- 2013 Police Scotland training. And if we could look at initial action on page 7, please and paragraph 2.2 16 17 "Responding to incidents". Page 7, 2.2, "Initial action at the scene of the incident" and we see APC down at the 18 19 bottom: 20 "The acronym APC is a simple way to remember the 21 fundamental steps for managing any crime scene in three 22 distinct phases: 23 "1. Assessing the scene of the incident. "2. Protecting people and the scene of the 24 incident, 25

"3. Communicating details of the incident to 1 control room staff." 2 Yes. As I said, you know, this thread sits amongst 3 Α. other training within the police world and it's a sort 4 5 of a standard practice to keeping the communication open and ACR informed of the development of the incident. 6 7 Q. And then if we look at the next page, there's another paragraph. No, I don't see where it is, sorry. But 8 9 I understand that there is some further details during this document talking about trainees should keep the 10 force control centre updated? 11 12 Α. Yes, it's a bit further down. It's under "Protecting the scene". It's the next sort of input section. 13 14 Thank you. I'm glad you know these documents and it Q. 15 begins "communicating with others", talks about effective communication being "crucial" and "you must 16 17 keep the force control centre" which would be the 18 equivalent of ACR --19 Α. Yes. "... updated with details of the situation, who will 20 Q. 21 arrange for any assistance you may require to be sent to 22 the scene. Other agencies will also require information about the incident to enable them to operate as 23 efficiently as possible. They will need to know the 24 location, your contact details, what has occurred to 25

date, details of casualties and an estimate of how the situation may develop."

And is there benefit in explaining to people who are being trained that it's not just them, if they keep the equivalent of ACR involved, other people who can support them and protect them can be involved and attend the scene?

- A. It is, I mean it has to be linked with the practicalities of actually being able to transmit in the situation that they're in. A fast-moving dynamic situation may delay that update, but as soon as it's practicable to do so, officers are encouraged to keep everybody updated of what's actually going on for their safety as well as the public and the subjects concerned.
- Q. Thank you. And so for the Chair considering the training that was in place at the time in 2015 and the lack of sort of distinct training in Police Scotland, if we've heard evidence that officers did not transmit or did not feel they had time to transmit and share feedback with ACR, so ACR did not have the information they were looking for from the officers on the ground, do you have concerns about delays that would be built in because of that lack of feedback to ACR?
- A. It certainly increases the risk and the danger to have the officers who have made contact with an individual

armed with a knife. The decision to send support and 1 the time delay in that support arriving would again 2 3 increase that risk. And I think purely, you know, as an 4 officer responding to something like that, I would want 5 everybody to know what was going on for them to be able to get to me if I needed them, if nothing else the exact 6 7 location of where I am, so that they can get to me as quickly as possible. 8 And let's go back to your report, please, page 14. Or 9 10 if we move on to page 15 actually and look at paragraph 5 on page 15. And I think what you say here 11 12 is: "It's my opinion that a hypothetical officer would 13 14 have provided an exact location for other officers 15 attending and they may also have informed them and others listening of their intention to engage the 16 17 subject." 18 So you're talking about a situation in 2015, even 19 with the training as it was then in 2015 in 20 Police Scotland and in similar training in the College 21 of Policing, you still consider that a hypothetical 22 reasonable officer would still have provided feedback to 23 ACR? Yes, I mean looking at the CUTT mnemonic, not just the 24 Α. "transmit", the mnemonic talks about creating distance 25

- 1 and using cover so that intimates to an officer that the 2 further away you are from an individual armed with a 3 knife, the less risk there is to you. So if you make 4 that conscious decision or because of circumstances you 5 end up in close proximity with that individual, the risks are greatly increased, therefore the requirement 6 7 for back up possibly to be with you as soon as possible 8 is paramount. And that would have been the position even on the 2015 9 Q. 10 training? 11 Α. Yes. 12 Q. And let's move on to 2022 to a sort of more up-to-date 13 understanding of training and I think at paragraph 6 you 14 have said from the training related documents that 15 you've reviewed, you have been unable to find any additional inputs specifically in relation to this 16 matter, the feedback with the ACR --17
- 18 A. Yes.
- Q. -- currently being delivered by Police Scotland? So you weren't able to see any real material change?
- A. There doesn't appear to be any update or any increase in that particular requirement, yes.
- Q. And we've heard from -- we have a statement from

 Inspector Bradley, unfortunately he has -- I won't put

 it on the screen -- but he has said -- he has talked

- about the up-to-date position to us in oral evidence as

 well, but he said he couldn't speak to specifics of

 probationer training on airwave syllabus as that was

 outwith his area of expertise and he wasn't able to help

 us with any additional information about up-to-date

 training on that. So it looks like the position is

 reasonably similar to what it was in 2015?
- 8 A. It would appear to be, yes.

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- 9 Q. Thank you. And in the College of Policing what's the position there? Has that changed?
- 11 A. There has been some updates and there are, as I said,

 12 some other training programmes in place now across the

 13 rest of the UK, certainly in relation to operational and

 14 tactical command, so understanding who's -- go back to

 15 question A -- who's responsible for what and what those

 16 important things are that need to take place at initial

 17 arrival at a scene.
 - Q. In relation to this issue, question (b), which is, just to remind us all, "officers' communications with ACR including the requirement for feedback when attending a grade 1 knife call", is this an area where you have any views on whether further improvements could be made by Police Scotland?
- A. Again, as I say, I think as a thread including that within scenarios or within feedback to officers in

1		relation to their options just highlighting the
2		importance and the benefits of it would be a good thing,
3		yes.
4	Q.	Thank you. And then could we turn now to question (e).
5		You'll remember when I spoke to you yesterday I said
6		that there were three areas where you found no training
7		or nothing of note and I was going to deal with those
8		first, so we will come back to (c) and (d), but if we
9		could look at (e) first of all.
10		Now, this is let's go back to section 4, which I
11		think is on page 14, just so we can see page 12.
12		Let's just see where we are. So let's look at we see
13		it there. So issue question (e), "Tactical options
14		for approaching an individual reported to be onto public
15		road to carrying a knife."
16		So we were looking at and there were four
17		tactical options that were addressed in evidence when
18		you came and spoke to us before. And in areas where you
19		didn't find any or little training of note, you identify
20		(i) the rendezvous point, and (ii), observe, wait,
21		feedback, and (iv) verbal dominance.
22		Let's start with the tactical option (i) rendezvous
23		point, and if we could look at page 18 of your report,
24		and we should see on page 18(e) "Tactical options: (i)
25		rendezvous point." It's towards the bottom of page 18.

1		There we are.
2		Let's begin with the training available in
3		Police Scotland in 2015 on this issue and you've
4		mentioned:
5		"Rendezvous point, RVPs, are normally associated
6		with major or critical incidents, but that can be used
7		as a tactical option to assist officers in dealing with
8		situations. I have been unable to find any reference to
9		RVPs in the training materials for normal frontline
10		officers within the OST programme or any of the relevant
11		documentation reviewed."
12	A.	That's correct, yes.
13	Q.	So you weren't able to find any reference whatsoever?
14	A.	No.
15	Q.	And you've then gone on to say:
16		"I would have expected RVPs to form part of the
17		discussion around tactical options, most likely under
18		observe and wait for support when an officer might have
19		assessed the risk as being too high to engage or go
20		direct to a scene without support. But as I'm unable to
21		find any reference to this, I would say the training was
22		lacking in this area. Officers may find the option of
23		using an RVP useful when additional units or specially
24		trained officers have been called to assist. The
25		decision to set up an RVP can be made by the first

1		officers on scene by a supervisor or the ACR."
2		So if we could look at that paragraph, please. You
3		have been unable to find any reference at all and so you
4		feel the training was lacking. And was there anything
5		in the documentation that you looked at that maybe
6		didn't mention the words "rendezvous point" or RVP, but
7		sounded like something similar to a rendezvous point?
8	Α.	As I mentioned around the create distance, the second
9		point, second question point, obviously the "C" in the
10		CUTT mnemonic is "create distance". As part of that
11		input, discussion would be around observing an
12		individual from a safe distance, so that might link
13		across to that second question, but nothing in relation
14		to having a set position where you would basically
15		corral resources and officers for deployment from that
16		RVP, nothing I could find specifically on that.
17	Q.	Nothing specific and would that require or rely on a
18		particular trainer to maybe allow the probationers or
19		the refreshing officers to make the connection between
20		the creating distance and an RVP?
21	Α.	Yes, if it wasn't brought up as part of the lesson, it
22		wouldn't be immediately evident from the training
23		materials.
24	Q.	We have also heard evidence that perhaps this is
25		something that at least one of the officers was aware of

1		from their own experience, so perhaps if they had
2		experience in a number of your service they may have
3		come across the use of an RVP?
4	Α.	Yes, certainly any call where an ARV, an armed unit, is
5		being sent or responding to it, standard practice would
6		be for them to request an RVP where to meet local
7		officers. They very rarely, unless safety matters are
8		apparent, would go directly to the scene of an incident.
9		They would normally want to meet up somewhere to be
10		briefed and then deployed to the situation.
11	Q.	If any officer as part of a response team or in other
12		circumstances had been involved in an incident where an
13		armed response vehicle was being called and attended,
14		they may have been part of that RVP scenario?
15	Α.	Yes.
16	Q.	And there is some evidence available to the Chair from a
17		statement of Graham Patience, and I think if we can find
18		that, that's SBPI 00385, and I'll come on to that in a
19		moment, but I think that we have heard some evidence
20		from one of the officers who talked about RVPs maybe
21		being a possibility and maybe being a possibility in the
22		nearby public house in the car park there. So the Chair
23		will be aware that at least one of the officers knew of
24		the concept of RVP.
25		Excellent, we have this statement from

1 Graham Patience. Now, we have a statement --2 Graham Patience has given a statement to the Chair which 3 says he was one of the trainers, instructors, in around 4 2015. If we could look at paragraph 138, he was asked 5 if the following tactical options were taught during the recertification training in 2014/2015 as it related to 6 7 attending knife incidents. And he said: "Firstly, I am asked if remote rendezvous point was 8 9 taught. Yes, an RVP, it's a commonly used tactic 10 basically for officers to group prior to engaging with somebody. Again, depending on the threat, it's not 11 12 always the best option for everybody to go straight to the incident. It's a way for officers to kind of hot 13 14 brief, and have a quick discussion about resources, 15 about who may do what, and what tactics or what action they might take when they get there. So it's a meeting 16 17 point prior to attending an incident. It's an often used tactic." 18 19 And since we're here, I'll read the next passage 20 which we'll come on to slightly later: 21 "Secondly, I'm asked if observe, wait and feedback 22 was taught. I would say so, yes. It's not something that would specifically be taught in OST or anything. 23 It's not really applicable to the OST programme. Along 24 25 with RVP, it's not something that we would teach, but

again it's basic teaching techniques I would say." 1 2 And then at 140: 3 "I am asked if it is not applicable to OST, where would it be taught? That's a good question. Not 4 something that I would be able to put my finger on. 5 It's more of an instruction really. Certainly things 6 7 like meeting at an RVP of staying back and giving feedback, it would be something that would probably be 8 9 instructed over the radio at the time by a supervisor or something like that. It's not really something that 10 would be instinctive I would say." 11 12 Α. Yes. Q. We have a statement from Graham Patience. When he's 13 14 asked a specific question at paragraph 138 about whether 15 the following tactical options were taught during recertification and he specifically deals with the issue 16 17 of RVP, he says "Yes, an RVP it's a commonly used tactic", but he doesn't really explain I think in that 18 19 what the teaching was? 20 A. I think he also contradicts himself at 140, where he 21 says it doesn't form part of the training. I certainly 22 couldn't find it in any of the lesson plans and it's not a specific mention or anything similar to that within 23 the manual and the other resources. 24 Q. Yes. I completely agree with what you're saying, 25

- Mr Graves. So there's that evidence that the Chair can consider as part of it. So it may be something that an individual instructor has mentioned, it may not, but in terms of the materials provided, there's nothing in the OST Manual and there was nothing in any of the lesson plans or PowerPoints or anything at all that you were able to find regarding RVPs?
- No, I think the comment he makes in relation to it "it's 8 Α. 9 a general police tactic," again, it's a part of this 10 experiential learnt process. A supervisor may recommend it, the control room may suggest it, especially if they 11 12 have got an ARV running, they may ask for it, RVP to be set up or to be nominated so, yes, it's a general thing 13 14 that would come up, but it's not specifically mentioned 15 within any of the packages or programme.

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- Q. And do you think it would be useful for officers who are -- it's particularly officers who are maybe going to be part of a response team dealing with incidents to have RVPs and their benefits and the reasons for their use to be part of or mentioned as part of the OST training?
 - A. It's certainly something that needs -- I think needs to be discussed and form part of a lesson. Whether that sits specifically within officer safety or some other training programme, it's difficult to say without

- 1 knowing the full range of training being provided.
- 2 Q. But you could see that there would be benefits in all
- 3 officers knowing about RVPs and when they should be used
- 4 and why?
- 5 A. Yes, definitely, yes.
- Q. Let's look at your report again, please. And go back to
- 7 a -- if we could go back to page 19, so at the top,
- 8 please, and I would like to look at paragraph 3 there,
- 9 and this is where you talk about the training in 2015
- that was available at College of Policing. Can you tell
- 11 us what the position in 2015 was down in College of
- 12 Policing?
- 13 A. Again, looking at RVPs, there would be an initial input
- 14 on dealing with critical incidents or major incidents,
- all officers would have got that as part of their
- 16 probationary training. As part of that, RVPs would be
- discussed as an initial action for requirement for
- 18 emergency services, et cetera. So it wouldn't be
- 19 something within officer safety, but it would certainly
- 20 be within probationary training under that aspect of
- 21 critical incidents.
- Q. For probationers there would be something mentioned
- about RVPs so there was an awareness?
- 24 A. Yes.
- 25 Q. But for refresher training would the College of Policing

1	and	the	forces	down	there	be	relying	on	experience	and
2	lear	ning	from	on the	e job?					

- A. Yes, it doesn't form part of officer safety training and wouldn't have appeared in a refresher on that programme.
- 5 Q. So in 2015 was the position in Scotland very similar to 6 that in England.
- A. Yes, although then, as I say, I know there was specific probationary training on critical incidents and I would imagine a similar, although I have not seen it, a similar programme would be in place within Police Scotland.
- Q. Thank you. And if we can then move on to look at question -- let's look at question 7 and 8 at the bottom of that page. Can you tell me in 2022, had the position changed in Police Scotland?

A. No additional mention of RVPs arrive in the 2022 manual, so I can't see any major change in the approach or the consideration of an RVP, but in this incident, I think with officers searching for an individual they would have probably with that experiential learning and lessons learnt over the years, I think they would have approached it slightly differently and they would have located the individual, transmitted that information and then considered other, you know, where other support might have need to come to possibly contain that

- 1 individual in the locus that he was in.
- 2 Q. Thank you. And looking again at the College of Policing
- in and up-to-date position, you have said you have been
- 4 unable to find any specific input on RVPs within the OST
- 5 or initial officer training?
- 6 A. Yes, other than what I mentioned earlier.
- 7 Q. What you mentioned earlier. So really the position
- 8 hasn't changed in the College of Policing either?
- 9 A. No, other than, as I say, there's quite an input now on
- 10 critical incidents, so RVPs would appear within that.
- 11 Q. Right. Could we look at COP 00020. So this is
- "Emergency procedures initial response and operational
- and tactical command national policing curriculum" and
- this is from January 2024 actually?
- 15 A. Yes, this is the latest updated version from College of
- Policing.
- Q. Update. And could we look at pages 8 and 9, please. So
- this is "Emergency procedures initial responder" and it
- says "Learning outcomes" on the left, starting with "(1)
- 20 What constitutes a major or critical incident and
- 21 explain the initial response?" Is that the type of
- 22 learning outcome that the person attending the course is
- expected to be able to answer?
- 24 A. Yes, they're going to be the first responders, so it's
- 25 their initial actions at the scene, yes, and how that

- 1 would develop.
- 2 Q. Then when it says "Minimum content coverage", what do we
- 3 see under this column?
- 4 A. Basically what the definition is of a critical or a
- 5 major incident and then the command structure, who
- 6 would be in charge of it, et cetera.
- 7 Q. Would there be a trainer in College of Policing with
- 8 this document in front of them?
- 9 A. Yes.
- 10 Q. And be checking that the student is able to establish,
- 11 according to the learning outcomes, the answers to the
- 12 questions in the column left?
- 13 A. Yes, that's correct.
- Q. And the answers that one would expect to receive from
- the student would be on the right?
- 16 A. Yes.
- 17 Q. Right.
- 18 A. But that's basically the content would be and they would
- 19 have to give answers to those particular questions.
- 20 Q. And the answers presumably are very much in line with
- 21 the training that's been given --
- 22 A. Yes.
- 23 Q. -- in the course? Could we look on page 9, please, at
- 3.2. So question 3 is "Explain the meaning of
- 25 interoperability and how it is achieved through

- 1 effective communication and coordination?"
- 2 A. Yes, how we communicate with other emergency services
- 3 and other organisations.
- 4 Q. "Interoperability" is about the police communicating
- 5 with third parties?
- A. Yes, that's correct.
- 7 Q. 3.2, this is one of the answers that would be expected
- 8 from the student which is in line with the training
- 9 that's given --
- 10 A. Yes.
- 11 Q. -- at College of Policing? "Principles of co-location
- and coordination", what does that mean?
- 13 A. Basically just where -- thinking about where they'll
- 14 actually put it, was it a suitable location, is it large
- enough to take what is going to arrive? You know, it's
- no good having a small street if we're going to have
- 17 large fire engines and things like that coming down.
- Does it have facilities nearby may sound silly. Does it
- 19 have water? Does it have power? Does it have lighting.
- 20 So it is about the selection, not just the location, but
- 21 the suitability of that particular location as to what
- we need -- needed to take.
- 23 Q. So all the specialist resources can function effectively
- and efficiently?
- 25 A. That's correct, yes.

- 1 Q. And bulletpoint (2) there is "Functions of a rendezvous
- 2 point and considerations for the location of a
- 3 forward-command post"
- 4 A. Yes.
- 5 Q. And so the student would be expected to be able to
- 6 answer question 3 by explaining the functions of an RVP
- 7 and considerations of the location of a forward-command
- 8 post?
- 9 A. Yes.
- 10 Q. And is the forward-command post linked to the RVP?
- 11 A. It can be or it may be slightly apart, depending on the
- type of incident. A forward-command post may be away
- from the RVP so they have got view of the incident or
- for other reasons.
- 15 Q. At the very least, a student attending this training
- would be expected to have knowledge about RVPs?
- 17 A. Yes, certainly within this critical incident training,
- 18 yes.
- 19 Q. And this is critical incident training for someone who
- is going to be part of a team responding, a response
- 21 team?
- 22 A. It's an input for all officers, for new officers, yes.
- 23 Q. Oh, it's an input for all officers on the assumption
- they will have to respond to an incident at some point?
- 25 A. Yes.

1 Q. So they are taught about RVPs. Thank you. Could we maybe go back to your report, please, on 2 3 page 19. SBPI 00667, page 19. So we're still on 4 question "e", "Tactical options", and towards the bottom 5 of page 19 we see "(ii) observe, wait, feedback" and this is one of the tactical options that you were asked 6 7 to consider. I think you have looked at the 2015 Police Scotland training? 8 Α. Yes. 9 10 Q. And you have said here at number 1: "The 2013 OST Manual does not appear to have any 11 12 specific guidance on this as a tactical option." 13 No, other than, as I say, the "C" from the CUTT mnemonic Α. 14 being create distance, but that's more around safety 15 aspect of facing a knife so. The word "creating distance" or the words creating 16 Q. 17 distance are part of CUTT? 18 Α. Yes. 19 But that would very much be subject to individual Q. 20 trainers maybe making the link observe, wait, feedback? 21 Α. It would be, yes. All right. And then at paragraph 2 you say: 22 Q. "Standing back or observing should always be a 23 considered option, especially in situations where the 24 risks are high or intervention might inflame the 25

1 situation. As such, I am surprised not to see this shown as an option for officers under the right 2 3 circumstances. The lack of this option could require 4 officers to engage in all situations, regardless of the risks." 5 6 I'm interested in what you say here that you're 7 surprised it's not mentioned in the OST training? As I said, lesson plan on this particular subject 8 Α. 9 I would expect that to be part of the trainer guidance 10 to actually raise the benefits of standing back when it's safe to do so, obviously always bearing in mind the 11 12 risk to the public. But in certain circumstances a 13 person can be observed from a distance, resources can be 14 sent to different locations to try and contain that 15 individual, if they're in an open space, to cover escape routes, et cetera before that engagement take place. So 16 17 there are benefits of observing individuals, not just in a knife situation, but in a lot of policing situations. 18 And as I understand "observe, wait, feedback", this is 19 Q. 20 about protecting the safety of officers and perhaps 21 members of the public and the subject himself? 22

A. It can be, but it's also a tool to gather additional evidence and additional information. Think back to the NDM, we are looking at gathering as much information as we can, so observing an individual, their demeanour,

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1 their behaviour, whether or not we actually see the 2 weapon in this situation could change our assessment of 3 that situation and change how we decide to approach or 4 if we decide to approach. So it is a very viable 5 tactical option. And it's about giving time for people to gather in that 6 Q. 7 information and observe what's happening? 8 Α. Yes, it is, yes. And presumably, would you agree, the more information 9 Q. 10 you have about a situation, the better able and better equipped you are to deal with that? 11 12 Α. Yes, the more information you can get is always going to 13 improve your assessment of the situation. 14 Thank you. But as you've noted at paragraph 1 there, Q. 15 there was nothing at all in the 2013 Manual about "observe, wait, feedback" as an option? 16 No, not particularly within that manual, no. 17 Α. And I think when we looked at statement of 18 Q. 19 Graham Patience, and we can go back to that briefly, 20 SBPI 00385, and I read out paragraph 139 and, again, at 21 that paragraph he does say: "I'm asked if 'observe, wait, feedback' was taught. 22 I would say so, yes. It's not something that would 23 specifically be taught in OST or anything. It's not 24 really applicable to the OST programme." 25

I would to some degree disagree with that. I think it's 1 2 a tactical option so it would be or should be discussed 3 as an option under that subject matter when you're 4 looking at managing conflict or conflict management. 5 Observing is a viable tactical option to gather more evidence, therefore, it should appear in a list or a 6 7 suggested option for officers to deploy. Would there be any reason not to have it in OST? 8 Q. 9 Not under those circumstances. As I say, it sits very Α. much within an option for officers to use. 10 Thank you. And then if we can go back to your report, 11 Q. 12 page 19, and if we can move down the page to the bottom, 13 "Observe, wait, feedback", and if we can look at 3. 14 Let's think about 2015 again, but what the College of 15 Policing were doing at the time. And I think at paragraph 3 you say: 16 "Stand back and observe was part of the tactical 17 options discussed during College of Policing OST 18 19 training." 20 And you give a reference to that and perhaps we 21 could PS 00071 on page 12. This forms appendix D to 22 your report? 23 Α. Yes. You provided these documents to us. Here we are. 24 Q. Appendix D, item 1, this is College of Policing training 25

materials called "Conflict management". This is page 1. 1 It is the introduction, but I think it's page 12 you 2 3 refer to and that is page 12, which will be above, yes. 4 If we can move up the way actually, because it's the actual page 12 of the document, rather than the PDF 5 page. So that's 13 that we see now? 6 7 Α. Yes, next one. And this is page 12 of the document. And this has your 8 Q. 9 "Reasonable officer response options" and "Identify 10 options and contingencies", and you've highlighted that standing back and observing is one of the areas that's 11 12 covered in this aspect of College of Policing training. 13 Can you identify the section on the page? 14 Where it says about officer presence there at the Α. 15 bottom, it says: "An officer may also decide, when appropriate, to 16 17 tactically withdraw their presence from the situation [so that's moving away] and this includes the way the 18 19 officer is approaching the scene, their manner, 20 appearance and professionalism." 21 And the officer's ability to basically observe from 22 a distance is included within this sort of list. Q. It's highlighted on the left-hand side "reasonable 23 officer response options"? 24

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Α.

Yes.

- 1 Q. And specifically states that "tactically withdrawing is
- 2 a reasonable officer response"?
- 3 A. Yes, yes, I mean safety being the paramount decision,
- 4 being able to withdraw from a situation is always a
- 5 viable option.
- Q. And it's indicated under "Officer's presence and notes"
- 7 that that can be done?
- 8 A. Yes.
- 9 Q. Thank you. And this is all about and we see on the left
- this is all about module 2 "conflict management"?
- 11 A. That's correct, yes.
- 12 Q. Thank you. And can we also, yes. So comparing the
- Police Scotland 2015 training and what we see here in
- 14 College of Policing training at that time, of similar
- times, can you express any view on where you think there
- were issues or areas of concern with the Police Scotland
- 17 training?
- 18 A. As I said, I haven't seen withdraw or observe as a
- 19 tactical option within the 2013 Scottish manual. As I
- 20 say, I'm aware that it formed part of the training as a
- 21 tactical option across the rest of the UK, so I'm
- 22 surprised those options weren't included as for
- 23 discussion with officers during training.
- Q. What are your concerns about the impact of that on a
- 25 probationer or a refresher who was being trained?

the fact that they have to go and rush in and deal with

- A. It could quite possibly sort of push an officer into

 believing that they don't have that option or it's not a

 viable option that's expected. As I say, tactically

 withdrawing or running away from something is always an

 option, if it's unsafe to deal with it, whether you're a

 police officer or not. Obviously bearing in mind duty

 of care from officers to the public, you know, it's not
- Q. Right. And thinking now about the current position, if
 I can summarise it that way, you've said at paragraph 6
 in relation to this that in Police Scotland they now do
 include this as a tactical option in module 2 of what is
 the 2022 Police Scotland OST Manual?
- 15 A. That's correct. It has been included now as part of the tactical options, yes.
- 17 Q. That's specifically now part of that, and could we look
 18 at PS18537, please. I believe it's page 26 of the PDF,
 19 so this is module 2 of the current manual, "Conflict
 20 management", and I think it's page 26 of the --
- A. So there you have "Observe, contain".

everything.

- Q. And we see that on the right-hand side that there's a specific section called "Observe, contain". So that would be akin to "observe, wait, feedback"?
- 25 A. Yes, in the --

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1 Q. And it say: 2 "Remember the generic tactical options that may be 3 considered by armed officers that were discussed earlier." 4 So it sounds like this is following on and 5 6 reinforcing some earlier training? 7 Α. Yes. "Two of these options, observation and containment, may 8 Q. 9 be available for use by unarmed officers and staff. 10 Keeping the subject under observation, either overtly or covertly, will assist with the gathering of intelligence 11 12 and the subsequent deployment of armed officers." 13 Α. Yes. 14 And I think that's what you have been talking about? Q. 15 That's correct, yes. Α. "Containment is an option when the subject is known or 16 Q. 17 believed to be in a particular location, the intention being to isolate the subject or place limits on their 18 permitted movement. Where the subject is in possession 19 20 of a firearm, it is less likely that their movement can 21 be constrained safely by unarmed officers or staff. 22 Where viable, containment may be either static or in some circumstances may move with the subject. It may 23 also allow time for more detailed planning of a police 24 response. When considering this option, consult with 25

2 Who's the TFC? I'm not sure in relation to this particular thing. 3 Α. Right. But it seems that in relation to "observe and 4 Q. 5 contain", as it's called here, there is now apparently a specific section providing training in the manual that 6 7 appears to follow on from earlier training about the same subject and that is talking about the benefits of 8 9 observing and also the possibility of containment? 10 Α. Yes, that's correct. That's a change, an up-to-date amendment now? 11 Q. 12 Α. Yes. 13 And without really going to this there's also a module Q. 14 18 on edged weapons? 15 Α. Yes, that's correct. And you mention that it's not directly listed as a 16 Q. 17 tactical option, but, again, on page 3 of that module the CUTT mnemonic appears, the principle appears, I 18 should say, and it specifically says: 19 20 "Officers and staff should tactically withdraw to a 21 position outside the range of the subject's delivery 22 system and try to observe and contain this subject." 23 Α. Yes. Again, specific reference to tactical withdrawal as an 24 Q. option and, again, it appears to be linking back to what 25

the TFC as soon as practical."

- 1 we see on this page in module 2?
- 2 A. That's correct, yes.
- Q. And if we go back to your report, which is page 20, page
- 4 20, and if we can go down to 7, we see it on the screen,
- 5 sorry, and you now say that looking at the current
- 6 Police Scotland training, you think that is now fit
- 7 for purpose?
- 8 A. Yes, I believe it is.
- 9 Q. These additional instructions and opportunities for
- 10 training, being as specific as they are now, rendered it
- fit for purpose?
- 12 A. Yes.
- Q. Yes, thank you. And then you've also gone on to
- 14 consider recent developments in the College of Policing
- and in current times and I am interested could you tell
- the Chair what the current thinking is down south?
- 17 A. Obviously, there has been a lot of emphasis on
- 18 counterterrorism training and we have the run, hide,
- 19 tell advice which is for members of the public, but
- 20 bears for police officers as well and this all really
- 21 pushes that safety element of police officers observing
- 22 subjects or situations to gather the best information
- 23 and intelligence that they can and always considering
- that safety element of their positioning in relation to
- a subject or a situation.

- Q. Is it fair to say that the College of Policing is also now considering counterterrorism and further advice that can be given in relation to that?
- 4 A. That's correct, yes.
- Q. Is it fair to say this whole area is continuing to evolve and training is improving in this regard?
- 7 A. Yes, across the board in relation to officer safety, yes.
- Thank you. Could we go back to page 21, so actually move 9 Q. on from where we currently are and look at "verbal 10 dominance". So again looking at the different tactical 11 12 options and the final one of these is (iv) and it's 13 called "verbal dominance" also known as a "hard stop" 14 and identifying the most appropriate option to adopt in 15 any given circumstances. It's recognised this term has associations with armed policing. However, this term 16 17 has been used in evidence before the Inquiry to describe 18 a tactical approach of using dominance and strong verbal 19 commands by unarmed response officers and the term will 20 be used in that context only.
 - So we're using this in the context of the evidence that we've heard in the Inquiry and we'll call it "verbal dominance", if we can, but you'll understand the background to that?
- 25 A. Yes.

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- 1 Q. And if we look at number 1, you say:
- 2 "I have been unable to find any actual input or
- 3 information on specific tactical option in the documents
- 4 reviewed. However, during physical elements of the
- 5 training the drawing of a piece of equipment and the
- 6 threat of using it on a subject, such as a baton or
- 7 spray, before any actual physical force is used would be
- 8 taught with strong verbal commands."
- 9 A. Yes.
- 10 Q. So although there's nothing that you've found on any of
- 11 the training materials from Police Scotland in 2015,
- you're aware that officers would have been encouraged
- and instructed to give strong verbal commands, to be
- 14 clear, to be perhaps loud and direct those commands
- 15 towards a subject.
- 16 A. That's correct, yes.
- 17 Q. That is part of their general OST training experience
- that they would have to get used to?
- 19 A. Yes, it's combining the verbal commands for compliance
- with a physical act, so trying to get the two to get the
- 21 message across to the person that you're dealing with.
- 22 Q. And the Chair has heard evidence that not only involved
- 23 shouting or a loud voice, but the tone of voice, but
- 24 also the language used and also their body?
- 25 A. Yes.

- 1 Q. Physical commands?
- 2 A. Yes, it's trying to send the message in as many
- different ways as you can, so verbally, nonverbally by
- 4 your stance, by the drawing of equipment, verbally
- 5 support so the message is the same. You want them to do
- 6 something and you want them to do it straightaway.
- 7 Q. And that is part of OST training?
- 8 A. It is, yes.
- 9 Q. We have the statement from Graham Patience, one of the
- 10 instructors at around about that time. If we could look
- 11 at SBPI 00385 again. If we can look at paragraph 141
- 12 this time:
- "I am asked if verbal dominance or a hard stop
- 14 approach was taught. Again, it's not something that
- 15 would be applicable to the OST programme, but that would
- 16 potentially fall into your sort of tactical
- 17 communication side of things to gain compliance, that
- would certainly be part of that. On first engagement
- 19 with a subject, your first attempt would be to try and
- get verbal compliance. If it's somebody with a knife,
- 21 you would hope that that would be enough to get them to
- 22 put the knife down and comply and gain control after
- 23 that. So, yes that would definitely be part of it."
- 24 So Graham Patience was asked if it was part of the
- 25 training in 2015 in Police Scotland and he said it was

- taught and he's talking about the use of voice and
 commands as you have been describing?
- A. I mean an example of that that he's given there would be

 "drop the knife, drop the knife" shouting that at the

 individual, being assertive with your voice. If you

 wanted them to get on the floor, "get down, get on the

 floor", but that loud verbal command looking for the

 compliance of the subject.

- Q. Do you have any thoughts on the comment that he made that it's not something that would be applicable to the OST programme to talk about or teach the verbal dominance or hard stop approach?
- A. He's raised the fact of tactical communication. I would
 suggest that it could be -- it does form part of
 tactical communication, because it's a methodology that
 can be used to try and gain control of a subject.

 Various sort of elements of it link into that, but that
 particular sort of hard stop or verbal dominance isn't
 specifically highlighted within that section.
 - Q. I'm interested in this tactical option of what we're calling the "verbal dominance". In the absence of any specific training or documentation or materials at that time, I'm wondering your views on how officers could identify the limitations of that technique and that tactical option, because what the Chair has heard is the

evidence from officers who talked about wanting control of the situation in 2015.

We've heard evidence on Day 20 of the hearing from an officer who said the situation was so pressing to get control and the situation needed to be taken control of, firmly taken control of. And so they clearly were aware of the idea of gaining control and gaining compliance, but in the absence of any specific training materials, how could they identify the limitations?

- A. Well, quite simply, it might work or it might not work and if it doesn't work, it's very difficult to then lower the form of communication or soften the form of communication once you have gone to that level. We always teach officers during communication skills the fact it's easy to escalate from a rapport or a quieter methodology of talking somebody, to escalate that up to a more dominant and assertive manner, but it's very difficulty to bring it back down again and have a response, a suitable response from a subject.
- Q. If there was more specific training about this as a tactical option in a safe environment in the training room, do you think that those limitations could be more clearly explained to officers?
- A. Yes, it has its place within the options for officers to use and there are times when I have used it and had to

- use it in different circumstances but, yes, a training
 scenario built around nonresponsive subjects when that
- 3 tactic is used would be a viable option, yes.
- Q. And do you think there would be benefit in having training for probationers and refresher training in relation to this tactical option?
- 7 Α. Yes, as I say, it's an option that's used quite a lot. You've only got to watch any of the police programmes on 8 TV and you see them going through a front door and the 9 10 first thing you hear is officers shouting commands and shouting orders at people, so it's a well-used tactic 11 12 across the policing environment, so I think recognising 13 that and giving officers guidelines in relation to how it works, when it works and when it might not work would 14 15 be beneficial, yes.
- And of course as well as their own experience, which may 16 Q. be very varied, whether probationers or officers with 17 18 your service, they're bombarded with police dramas, 19 detective dramas where officers are shouting and pulling 20 their guns and all sorts of equipment, and do you think 21 training would have a place in explaining the benefits 22 of tactical communication at maybe a quieter more communicative level? 23
- A. Yes, the tactical communication input now is far greater than it used to be, but I still think there's space at

1		the end of that for we talk about crisis
2		communication or verbal dominance. It really just needs
3		to be explained a little bit more and certainly the
4		pitfalls of using it inappropriately or in the wrong set
5		of circumstances, the fact it's not a one-size-fits-all.
6		If you apply that to everything, it won't always work.
7	Q.	Thank you. And if he can go back to your report please,
8		and we're looking at verbal dominance, which is page 21
9		and I would like to look at the final paragraph on that
10		page, and you say:
11		"As the training did not specifically mention this
12		tactical option within OST, then I would have to say,
13		no."
14		And this is where you're asked the question of
15		whether the training for Police Scotland in 2015 was fit
16		for purpose. So your view on that is that it was not
17		fit for purpose, because you simply couldn't find any
18		actual training on this as a tactical option?
19	Α.	Yes.
20	Q.	And you say:
21		"However, across the UK this was a well-used
22		tactical option which under the right circumstances can
23		be very effective. Where the level of risk or threat is
24		considered high, then officers may decide to deploy
25		tactics designed to verbally overpower and control a

1 subject and this might include shouting or making threats with equipment drawn and this is designed to 2 3 mentally overwhelm the subject and cause them to 4 hesitate, basically scare them into submission and, 5 hopefully, comply with the directions being given and 6 this is used as an alternative to actually physical 7 force and should be seen as a less intrusive option than say strikes or the use of an irritant spray." 8 9 Α. Yes. 10 Q. You're not wanting to suggest for at any moment that this would not remain a tactical option for officers? 11 12 Α. No, definitely not. It's a very viable option. I just 13 think guidance -- well, firstly acceptance that it is a 14 tactical option is important, but then also guidance on 15 the best way to -- the best way in the circumstances that it might be applicable to. 16 And perhaps an understanding of where it sits within the 17 Q. 18 range of tactical options --19 Α. Yes. -- from the communication right up until the most 20 Q. 21 serious type of --22 Α. Yes. Q. -- tactical options? 23 24 Α. Yes, if you look at situation as we are at the moment,

if you put it in with tactical communication, it would

1 be at the very early stages. However, the use of that 2 may be when the level of resistance is higher or the 3 threat perception from the officer is much higher and 4 that's where that verbal dominance would probably come 5 in. Q. Thank you very much. Could you give me a moment. 6 7 I wonder if that would be an appropriate time? LORD BRACADALE: We'll stop for 20 minutes. 8 (11.31 am) 9 10 (A short break) (11.55 am)11 12 LORD BRACADALE: Ms Grahame. 13 MS GRAHAME: Thank you. Before the break, Mr Graves, we 14 were talking about question (E) and (iv) which was all 15 about verbal dominance and we had discussed issues regarding the 2015 training and I wonder if we could 16 17 also -- training in Police Scotland, and I wonder if we can now look at College of Policing training on the 18 19 matter. If we look at paragraph 3 of your report, so 20 this is we're on page 22 I think. 21 Α. Yes. 22 And if we look at paragraph 3, which is towards the top Q. of the page, and you say: 23 24 "The training across the rest of the UK in relation to this was only discussed during taser, public order 25

- and firearms training, which not all officers received.
- 2 It did not form part of the initial OST input. The only
- 3 mention of this type of tactical option is on pages of
- 4 module 6 'Communication' in the NPCC OST Manual under
- 5 'crisis communication'."
- 6 And I wonder if we can perhaps look at that, so
- 7 COP 00031, and you talk about pages 44 and 45?
- 8 A. Yes, right at the end of the section.
- 9 Q. Well, I think there may be some issue. I wonder if we
- 10 could look at PS 000789. That might be an alternative
- if that's, no. There it is. So this is module 6, which
- I think is the communication module?
- 13 A. Yes.
- 14 Q. And this is an excerpt from your -- the appendix D which
- you provided to the Inquiry?
- 16 A. Originally, yes.
- Q. And it's item 9, so it will be part of a larger module?
- 18 A. Yes.
- 19 Q. But would this contain the pages that --
- 20 A. It should do. If you go to the end of that document, it
- 21 should be some of the last pages in that document.
- 22 Q. Thank you. Let's do that, so that may be -- if we go
- right to the end. That's 47 is the final page.
- 24 A. Go up to 44, 45.
- 25 Q. Do you want to look at 44, 45?

- 1 A. There we are. Go up a bit.
- Q. I don't -- sorry, I didn't see the page number of that
- 3 so?
- 4 A. It's just slightly -- next page up, sorry, rather than
- 5 down. It starts on the next page, I believe.
- 6 Q. 45 is the next page?
- 7 A. That's it.
- Q. Do you want to look at 44 first?
- 9 A. Yes, if you go over to 44, it starts right at the bottom
- 10 of 44.
- 11 Q. "Crisis communication. Occasionally officers may need
- to use loud, repetitive verbal commands as a means of
- 13 controlling an individual."
- 14 A. Yes.
- 15 Q. That's what we've been talking about. Let's look at the
- next page. I think we see a photograph with the body
- language that displays a command?
- 18 A. Yes.
- 19 Q. "It's important to realise that simple language with
- short phrases should be used as a determined individual
- or a non-English speaking individual may fail to
- 22 understand complicated messages. Similarly, the officer
- 23 may not be able to physiologically mouth complicated
- 24 words due to the stress of a situation."
- 25 A. Yes, keep it simple basically.

1 Q. Keep it simple and short. And then: 2 "Whilst crisis communication may be naturally heard 3 by subjects, it also assists in alerting colleagues, 4 enabling witnesses to corroborate what an officer is 5 saying, breaking through auditory barriers a subject may have [that means if they're slightly deaf perhaps], 6 7 increasing the justification for use of force by the officers, gaining control if commands are not complied 8 9 with." 10 And then there's a box talking about before physical 11 engagement: 12 "So before there's any contact or use of force, 13 "stop, get back, stay back", and there may be similar 14 derivatives that officers personally use." 15 Α. Yes. And they may be included within that as well? 16 Q. 17 Α. Yes. 18 Q. Does this really sum up the type of communication 19 training that was given by College of Policing at the 20 time? 21 Α. This is the last part of the communication module and it 22 said it looks specifically at dealing with those high stress situations where you need to limit the 23 communication style and simplify it so that individuals 24 25 can have an opportunity to comply.

- Q. And so if this is at the end of what the College of Policing were training at the time, what was at the
- 3 beginning?
- 4 A. Starts about -- it looks at de-escalation techniques,
- 5 different forms of communication, verbal, nonverbal
- 6 communication, looking at verbal cues in relation to
- 7 signs of aggression, looking at different types of
- 8 influences on communication, things that can change a
- 9 person, barriers to communication, et cetera. So it
- 10 looks really much at the communication as a skill and
- 11 then goes on to the more simplistic methodologies of
- 12 communication in high stress situations.
- 13 Q. Is it fair to say from what you're describing, obviously
- 14 this is simply an excerpt, that considerable time is
- spent on a number of pages covering communication --
- 16 A. Well --
- 17 Q. -- before getting to the verbal dominance element?
- 18 A. As you can see there, it's 45, 46 pages on
- 19 communication.
- Q. And it's only at the end that they get to verbal
- 21 dominance?
- 22 A. Yes.
- 23 Q. Thank you. And can you tell us, do you have any
- thoughts on the approach that was being taken in 2015 or
- 25 around about that time by College of Policing compared

- 1 to the approach being taken at that same time by
- Police Scotland?
- 3 A. I think there was a recognition that there are
- 4 situations where officers have to use that type of
- 5 forceful or assertive language, an acknowledgment that
- 6 it is a widely used tactical option in certain
- 7 circumstances, so I think that acknowledges that
- 8 particular part of the policing training.
- 9 Q. And in terms of the fact that College of Policing had
- 10 40-odd pages on training on tactical communications,
- 11 compared to the position in Scotland, do you have any
- reflections on that?
- 13 A. I have always seen it as the primary control skill in
- any situation. It's a very important skill for officers
- 15 to be able to master. You only -- you got to practise
- it to get better at it so, yes, it has always formed
- 17 part of the delivery of OST across the UK and is a
- 18 primary tactical option.
- 19 Q. Right. So although I think in your report you say
- 20 there's no specific training within OST as part of
- 21 College of Policing, that is the area that you've
- 22 noticed there is some specific?
- 23 A. Yes, that's -- that was what would align itself to that
- hard assertive forceful communication style.
- 25 Q. Thank you, and then looking at more up-to-date training

1 that's available. I think in paragraph 6, if we go back 2 to your report, page 22, you say: 3 "I still don't see any specific mention of it 4 [that's a verbal dominance tactical option] in the 5 current manual being used within Police Scotland or any of the lesson plans related to OST." 6 7 So would your position on that again be subject to other training that's perhaps available in 8 Police Scotland, you could find nothing specific about 9 10 verbal dominance as a tactical option, even up to the most recent materials you have looked at? 11 12 Α. Not specifically in the 2022 manual, which was the one I reviewed, yes. 13 And although it may be mentioned elsewhere in other 14 Q. 15 training, do you see a place for it being mentioned in OST training for new officers? 16 As I have said previously, it is a tactical option that 17 Α. 18 can be used, it is widely used by officers across the 19 country, I think acknowledging that and giving officers 20 guidance on when it's -- when it might be suitable and 21 when it might not be suitable to use and the 22 implications of using it is a beneficial input, yes. Q. And so let's look at what is said about tone of voice 23 and such like in the 2022 OST Manual. And we'll look at 24 module 3 on tactical communications. The number I have 25

is PS 18538. It may be that it's -- that's -- and 037 1 is module 2 and I have 38 for module 3. 2 3 While we wait for that, I think I can read out on 4 page 3 that there is some training about communication 5 is an interaction between two or more people, with all participants having an active role in the process and 6 7 there are three main components and one of those that's mentioned is vocal? 8 9 Α. Yes. 10 Q. Tone, volume, intonation, pitch and pace make up 38 per 11 cent of the total message? 12 It's a communication model specifically looking at Α. 13 communication during conflict situations, looking at the 14 majority of the message being nonverbal, so it's how you 15 standing, how you're looking, 38 per cent of it being the vocal, how you deliver it, not what you say, but how 16 17 you say it, and then only 7 per cent of the message 18 getting across is actually the words being spoken. 19 And actually I see that the number is completely Q. 20 different to the one I had in my papers but, nevertheless, module 3 "tactical communications" is now 21 22 on the screen. This is the 2022 Manual? 23 Α. Yes. And if we could look at page 3, I think we see "Giving 24 Q. 25 out", and I have just read a section from that. It's

page 3 "Components of communication" and the vocal 1 section is what I just read out? 2 3 Α. Yes. 4 Q. And there's also a "Taking in" section: 5 "Just like the subject, information is taken in through your eyes and ears. Whilst tactical 6 7 communication is improved by training and knowledge, the subject's abilities to give out and take in information 8 are more likely to be affected by drink, drugs, mental 9 10 state, behavioural patterns (some learned and some instinctive) and disabilities that impact on these 11 12 skills and these elements are classified as impact 13 warning, signs and danger signs." A. Yes, I would say they're barriers to communications and 14 15 we discuss that through at the training in relation to what can affect how the message is received or how that 16 other person can then communicate back. 17 18 There can be a number of barriers to the subject taking Q. 19 in what's being said or communicated or shouted? Yes, not just taking it in, but also processing that 20 Α. 21 message in the way that you've intended it to go across, 22 so the possibility of misunderstanding or getting the wrong message is heightened as well through those 23 barriers. 24

Not just hearing, but comprehending?

25

Q.

1 A. Yes.

- Q. Thank you. And looking at that training as it exists
 now in 2022, both in relation to what we've seen here,
 which is operational safety training module 3, but in
 relation to Police Scotland training in relation to
 communicating and also the verbal dominance element of
 that, do you think there's merit in improving the
 training in that area?
- A. The section is greatly improved on in the 2015 Manual.

 What I couldn't establish from the programme was how

 much emphasis is placed on this particular subject. It

 would have been nice to be able to find sort of how much

 time, certainly from the refresher, how much time is

 denoted -- is given to it in relation to delivery,

 because it is such an important part of the toolbox.
 - Q. And in your opinion, how much time should be spent on tactical communications, which would include verbal dominance, but to the perhaps lower level of tactical communication?
 - A. I mean, if you think of the new processes of scenario-based training, it's a woven thread throughout all of them you have to be able to communicate with the individual within the scenario, so the manner and the format of your communication is tested on every single scenario. The suitability of the tone, intonation and

- 1 the words used can be challenged or can be rewarded, so
- 2 it's far a better format to be able to actually look at
- 3 officers and how they communicate with subjects.
- 4 Q. Although you've set out your views in relation to this
- 5 aspect, the one area where you were not able to gain as
- 6 much information as you would have liked was the actual
- 7 time that is spent on this?
- 8 A. Yes, I mean obviously the manual reflects to new
- 9 officers, so new officers would be getting an input
- 10 based on this section. What I wasn't able to establish
- 11 was how much time was actually being allocated to that
- during refresher training or whether it was something
- that was just being linked into the training, which may
- 14 be specialising or focusing on the specific skills
- 15 again.
- Q. Thank you. I would like to move on now. We could
- perhaps go back to your report, please. And I would
- 18 like to return to question (c) and this is on page 15
- and you'll remember that the initial focus of my
- 20 questioning, Mr Graves, has been in relation to the
- 21 areas where you found no training materials or there
- 22 was, as you put it, little of note, and that was (a),
- 23 (b) and (e) and in (i), (ii) and (iv). I would like to
- 24 move on to areas where you have been able to identify
- 25 training in Police Scotland.

1 So if we could start by looking at (c) on page 15 2 which is, "Carrying out a dynamic risk assessment;" do 3 you have that? 4 Α. Yes. 5 And we're looking at this aspect. We have heard Q. 6 evidence about a dynamic risk assessment. Looking at 7 this aspect, you were able to identify training that was given by Police Scotland in 2015? 8 That's correct, yes. 9 Α. 10 Q. And you say in paragraph 1: "This was held within the 2013 Manual, module 1, 11 12 section 5. This is brief and should be linked to impact 13 factors and more information under person, object, 14 place. I have previously criticised the definition of 15 'conflict' shown on page 9 on page 5 of my report." And I think you gave evidence about that yesterday? 16 Yes, you just need to go to the bottom of the page 17 Α. 18 that's currently being shown. "And I would suggests that confrontational 19 Q. 20 considerations is not part of this process and should be 21 shown elsewhere in the manual." 22 Sorry, if we could look at (c) on the screen on page 15 at the bottom. There we are. Sorry, I didn't 23 realise that wasn't displayed. So you've talked here 24 25 about what is in the 2013 Manual about dynamic risk

1 assessment and maybe we could look at that briefly. So it's PS 10938, and we're looking at module 1, section 5, 2 3 and we looked at module 1 yesterday. That's the officer 4 safety training module? 5 Α. Yes. And section 5 of that. You specifically mention 6 Q. 7 "person, object, place", which is on page 10. We will need to keep going, please. If we look at page --8 Top of that page 10. 9 Α. 10 Q. Top of this page, please. So this is page 10, module 1 section 5 and we see "Definition": 11 12 "Threat assessment means accurately assessing." 13 And POP is there, person, objects, places? Yes. 14 Α. 15 And you say you would criticise the definition of Q. "conflict" and you gave us evidence about that 16 17 yesterday. So can you talk us through any concerns you have with this training that existed at the time, so the 18 19 dynamic risk assessment training? A. Certainly the content within this original module is 20 21 very disjointed. The initial information on conducting 22 a risk assessment is very brief, just a couple of paragraphs from memory, and is then disjointed from 23 information like this and then information later on in 24 25 the section in relation to warning signs or danger

1 signs. 2 What I would have expected is, again, going back to 3 what I said yesterday, a logical approach to that 4 particular element of the NDM. So again, we haven't 5 seen the NDM yet, because it's at the end of the section, but if you put the NDM up and were looking at 6 7 that assessing threat and risk, it the how do I do it and what do I need to look at and what elements do I 8 9 need to consider to conduct that assessment. 10 So at the moment, based on the manual as it was in 2013, that isn't clear with the information that's being 11 12 provided. And when you look at lesson plans, again, it 13 doesn't follow a logical approach. It talks about --14 basically follows exactly the format as it is in the 15 manual. So I find it very disjointed, brief in places not giving full descriptions and advice on the wheres 16 17 and the hows. So again, it could have been much better laid out and following the NDM as the thing to hang it 18 on basically, the methodology. 19 20 And you talked about the NBM yesterday and we find that Q. 21 at page 18 of module 1? 22 Α. Yes. Q. And let's just have that on the screen for a moment just 23 to refresh everyone's memory here. That's page 18 of 24

the manual so that's page 13?

- 1 A. That's what I was talking about the dangers, the danger
 2 cues, that's on page 13.
- Q. And here we are National Decision-Making Model and we see the first stage is "gather information", which we talked about. The second stage is "assess threat and risk and develop a working strategy" and you talked about that yesterday.

Then I think if we look at page 9 of the module 1.

That is 17 and if we could go back to 9. We do see the

start of section 5. It's page 15. There we are.

Module 1, section 5 is about threat assessment, but this

comes before you even see the NDM image?

- 13 A. Yes.
- 14 Q. And there's talk of confrontational considerations?
- 15 Yes, and I don't consider that part of the threat Α. assessment process. It's a preparation model that is 16 17 used. It's called Cooper's colour codes. It's 18 something that's discussed as part of preparing for 19 policing or preparing for duty. It doesn't really form 20 part of the threat assessment process. It has a 21 bearing, but I don't think it's the fundamental opening 22 statement that you want to be looking at. You want to be looking at what is the threat, what is risk, how do I 23 identify it, how do I assess it, and that really 24 25 doesn't -- doesn't basically fit in that particular

1 section. So in terms of communicating effectively the NDM process 2 Q. 3 to people, students, that isn't where you would start? 4 Α. No. 5 And it says specifically "Preparation for policing" at Q. the bottom of the page on the left-hand column just 6 7 under the "confrontational consideration". If you keep going, we'll see -- so it does identify preparation --8 9 Yes. Α. 10 Q. -- rather than actually carrying out a threat 11 assessment. 12 And then the right-hand side you'll see a section 13 that says "Threat assessment. Conflict in general". 14 There we are. And then the next page, page 10, which 15 you specifically addressed earlier, gives the definition "person, objects, places"? 16 17 Yes. Α. 18 Q. And risk colours. No other sort of details on that 19 page --20 Α. No. -- regarding that aspect of the NDM; is that what you 21 Q. 22 are saying? Yes. So what I would have expected there is you have 23 Α. 24 explained person, object, place, but what you haven't gone into is any detail in relation to each of those 25

1 subject matters. So if I'm delivering that, I'm looking at person, so then what in relation to the person do I 2 3 need to be looking at, not just their actions and 4 demeanour. I want to be looking at things like size, 5 numbers, abilities, things like what am seeing, what do I know about this individual? They're all factors that 6 7 will affect my assessment of the level of risk that this individual poses to me and my colleagues or the public. 8 9 "Objects", again, examples of different types of 10 object, what sort of risks they can -- so not just talking about weapons. Are they in a vehicle, do they 11 12 have a dog on a lead, have they got a pushbike with 13 them? All of these things can cause problems. 14 Then the "place", the environment, looking at, you 15 know, is it confined space, am I up a flight of stairs, looking at all these different aspects of the location 16 17 in which I have decided or I end up having to deal with this individual. 18 19 So there's lots of information in that person, 20 object, place, but none of it is held in there. It's 21 just basically thrown out as a mnemonic and then not 22 really followed up with the supporting information. Q. Of course we're looking at the 2013 Manual, which is the 23 core document? 24 Yes. 25 Α.

1	Q.	But other materials that you've looked at in relation to
2		training at the time, so was there anything more
3		detail provided in lesson plans or other areas?
4	Α.	Nothing within the lesson plans that I have seen, but
5		there was some additional information included in some
6		of the PowerPoint presentations. There was one from
7		that time, but the other presentation that I was given
8		was dated post this event, so that was better, but it
9		was post the 2015 period that we're looking at.
10	Q.	All right. Thank you. And then we have a statement
11		from Inspector Young, SBPI 00153, and I would like to
12		look at paragraphs 52 to 55. So he was asked about risk
13		assessment and training provided to officers by way of a
14		dynamic risk assessment in 2014/2015. He said:
15		"I couldn't tell you how many minutes or hours were
16		spent on this, but this was an input on threat
17		assessment and what we call 'risk categories' during
18		their three-hour OST theory input. Now, what you'll see
19		in the manual is a reference to threat assessment. We
20		talk about what's known as 'confrontation
21		considerations', ie what will have or what could have a
22		direct effect on an officer falling victim of an
23		assault. So that's the officer's mindset or the mindset
24		of the individual, their own tactics, their own skills.
25		The main thing is that we talk about risk assessment

primarily around about officer safety considerations and 1 that threat assessment and the risk is posed by persons 2 3 during a conflict situation, as opposed to a threat 4 assessment, a risk assessment about traveling on a road 5 or going into a house." Then he goes on to say: 6 7 "We did cover it in module 1, section 5..." Which we've just been looking at? 8 Α. 9 Yes. 10 Q. And he discusses the threat assessment. At 54 he talks about: 11 12 "OST differs significantly from what is taught in 13 threat and risk assessment in, for instance, firearms 14 and public order." 15 So I think in that area if there's an officer trained in firearms or public order, the training is 16 17 quite different he appears to be saying? 18 Α. Yes. 19 Q. And then at 55: 20 "To assist with that assessment of threat and risk, 21 we taught officers to actively assess what we called the ICI or the identity, capability and intent of the 22 subject." 23 24 And he talks about that and I think there was reference to that in module 1, section 5 that we had on 25

2 Α. Yes. If we go back to your report for the moment and, again, 3 Q. we're looking at section 2. It starts at the bottom of 4 5 page 15. At the bottom of page 15 and it says: "In my opinion it is lacking in clarity." 6 7 This is the 2015 Police Scotland training? 8 Α. Yes. "... lacking in clarity and operational examples to aid 9 10 officers in its application. This may lead to hesitation by officers in stressful situations. The 11 12 process should follow the natural cognitive process of 13 decision-making. I do not believe that how this is laid 14 out in the manual provides this." 15 Α. Yes. And that's a reference back to your concerns about the 16 Q. 17 National Decision-Making Model appearing on page 18 at the end? 18 19 Yes. Α. But if we can look at beginning of paragraph 2, you talk 20 Q. 21 about "lacking in clarity and operational examples". What type of detail of or operating examples would you 22 have expected to be in the manual? 23 A. So talking through the NDM as an example for them to 24 look at, what I would have expected or I would see 25

the screen a moment ago?

within the lesson plans is an example of possibly running an officer through a particular scenario so that further information or further risks become evident during a situation, how does that impact on their -- on their assessment of the risk?

A simple analogy or a simple exercise could be the fact of noncompliance from a subject. So you know, you give a description of an individual, you turn up and the description is incorrect. The person is larger build, there are three of them there. How would that impact on your initial assessment of the risk? And going back to the statement, the difference between a dynamic risk assessment and what could be classed as a risk assessment under health and safety, the process is the same, it's just done in much quicker time and you haven't got the luxury of taking in as much or considering as much information.

So you're looking at simplistic ways of officers to be able to look at the person, the objects available, et cetera and in the vicinity and where they're dealing with this individual. So giving them practical examples of how that can change and how that -- how that would then impact the assessment is an important tool to be able to give them to be able to do that in quick time within a situation.

- Q. Right. Thank you. And is that something that could be developed in scenario-based training?
- A. Yes, it can form part of the actual just a delivery of
 the -- we discussed about the three-hour knowledge input
 or the three-hour theory input, as part of that giving
 them examples and possibly showing them bits of video,
 you know, and getting them to assess an individual, a
 photograph, et cetera.
- 9 Q. It would be open to an individual trainer to give specific examples themselves?
- When it's not dictated within a lesson plan or within a 11 Α. 12 learning outcome then, yes, it would be down to how the 13 individual trainer decided to put that across. Also, 14 what I wasn't able to find was whether or not that still 15 formed part of the refresher training, because, again, 16 the refresher training seemed to be heavily favoured towards the physical skills and not a repeat of the 17 18 theory element, such as communication, risk assessment, 19 application of the NDM through that refresher.
 - Q. Thank you. And then if we move on to paragraph 3, this is where you talk about the difference with the -- well, what was being done with College of Policing at that time in around 2015 and can you explain to the Chair what was happening down in England?
- 25 A. Well, as I say, the conflict management section,

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1 certainly within the 2012 Manual within the rest of the 2 UK, had been laid out to incorporate and follow the NDM. 3 So when we got to that section in relation to threat 4 assessment, all of the relevant information that 5 officers may require to conduct that assessment is held 6 in a logical format. So we talk about person, object, 7 place, we talk about the warning signs and the comparisons that officers may need to take into 8 9 consideration. 10 They're also presented in a nice simple one-page sort of aide memoire, shall we say, for them to be able 11 12 to reflect on and look at to be able to conduct those 13 assessments. So the way it was laid out was far, far 14 more -- far clearer and far more user-friendly from 15 that -- from that period. Q. And I think in paragraph 3 you also note the volume that 16 17 there's three extensive pages, very extensive pages, of 18 conflict management in module 2 of the College of 19 Policing materials --20 Α. Yes. 21 -- compared to what we've look at in relation to Q. Police Scotland? 22 23 A. Yes. Q. And --24

A. And as I said about the conflict, the confrontational

considerations, that's not -- that doesn't form part of 1 2 conflict management within the NPC manual. It's 3 actually in what we call the personal management, 4 because it's about an officer's preparation and their 5 mindset in relation to policing, so it's not part of confrontation handling. 6 7 Right. And do you see a benefit in the type of training Q. that College of Policing were providing in 2015, 8 9 compared to Police Scotland? 10 Α. I think considering that this -- that that training at that time had undergone a massive review and the manual 11 12 itself had taken nearly three years to revamp and 13 review, I think it has the benefit of that review 14 process having been taken place so was therefore far 15 better fit for purpose or equipped to assist officers. Thank you. And then if you can move on to 2022, can you 16 Q. 17 bring us up to date with Police Scotland's training in relation to the dynamic risk assessment? 18 Yes. As I have said, now it's much better explained in 19 Α. 20 the 2022 Manual. It has actually now been fully 21 incorporated. The NDM takes sort of primacy at the beginning of that section. The additional information 22 is laid out in a far more methodical way and it actually 23 follows the NDM process and, as I said, it's much better 24 25 than the old section within the 2013 Manual.

- 1 Q. And I think you said the NDM now takes centre stage?
- 2 A. Yes, that's correct.
- 3 Q. And I think that the Chair has a statement from
- 4 Inspector Bradley, and I won't put that on the screen at
- 5 the moment, but he has also in SBPI 00408 at
- 6 paragraphs 83 onwards given the Chair considerable
- 7 information about the detailed training that's now
- 8 available --
- 9 A. Yes.
- 10 Q. -- to Police Scotland? And a number of documents appear
- 11 to cover the issue of dynamic risk assessment?
- 12 A. That's correct, yes.
- Q. So you say at paragraph 7 that you believe that it's --
- 14 this is the current situation:
- "... is far more in keeping with current good
- 16 practice and training in the NDM/dynamic risk assessment
- 17 across the rest of the UK."
- 18 A. Yes, I would.
- 19 Q. Do you think it's in a much better position now than it
- 20 was?
- 21 A. Yes. Yes, putting the NDM as the centre requirement and
- 22 then hanging the rest of the information off that is
- 23 exactly how it should be presented.
- Q. And you provided the Chair with appendices D, E and F,
- 25 which you've attached to your report which show the

current position for the College of Policing? 1 Yes, their current documents in relation to conflict 2 Α. 3 resolution in relation to dynamic risk assessment and 4 the application of the NDM. 5 Excellent. And I think you've also in one of the Q. 6 documents, and I won't go to that at this stage, but you 7 say there's a -- it states: "There is a growing recognition that using force and 8 restraining people who are in mental health crisis, 9 10 experiencing acute behaviour disturbance or suffering from drug or substance-induced psychosis can pose a 11 12 life-threatening risk and officers and staff may need to 13 adjust how they interact with people with communication 14 difficulties and consider how people may perceive and 15 respond to their presence, attitudes and demeanour of the police." 16 17 Α. Yes. 18 So is there a growing recognition -- certainly that Q. 19 seems to be what's stated in College of Policing 20 materials -- that officers need to be more aware of 21 communicating with people with mental health issues? 22 Yes, it's become more prominent in policing. As I say, Α. go back as far as 2007/2009 it's been an ongoing thread 23 that has increased as our knowledge has improved, as 24 25 recommendations and cases, unfortunately, have become

- apparent. It's allowed us to develop that training and improve that awareness across the force.
- Q. And it would appear from the College of Policing

 materials that you've provided to us that mental health

 crisis may be someone experiencing ABD or they may be

 someone experiencing drug-induced psychosis or some sort

 of substance-induced psychosis?
- A. Yes, it's not so much what is the problem, it's just identifying that there is the problem and treating it accordingly.
- 11 Q. We've heard evidence in the Inquiry that the police say
 12 they're not doctors?
- 13 A. No.
- Q. And they're not in a position to diagnose the cause of
 any symptoms or unusual behaviour in someone and
 presumably you would accept that?
- 17 A. Yes, recognise the behaviour, not the cause for the behaviour.
- Q. And is the training now very much focused on recognising
 the behaviour and how best the police should
 communicate?
- A. Yes, it's looking at the signs, the signs of the risks, understanding the risk factors incorporated and looking at different methodologies of dealing and controlling that risk.

1 Q. And so in effect it doesn't really matter whether it was 2 drugs or alcohol or mental health, it's about how the police can best communicate with the person? 3 4 Α. Yes, it shouldn't matter what the cause is. It's about 5 identifying the fact that an individual is in crisis of some description and then looking at the alternative 6 7 solutions. It still doesn't mean that the officers may not have to intervene, depending on the safety of the 8 individual and others, but it does give them that 9 10 underlying knowledge of the risks of that interaction and how they can best limit those risks. 11 12 Q. And I think that leads nicely into question (d), which 13 is if we look back at section 4, that might be useful to 14 have that on the screen. That's page 12 and you will 15 see that the fourth question (d) is: "Identification of subjects who are 16 intoxicated/experiencing mental health crisis/suffering 17 from ABD or ED, and actions then to be taken." 18 19 Yes. Α. And so the Inquiry team asked you specifically to 20 Q. 21 identify the training that was provided, first of all, 22 in 2015 in relation to this topic and I think if we move on to page 16 of your report, we can see what you said 23 about that and that's towards the end of that page, 24 there we are, and we'll see if paragraph 1 there that

1 you said: 2 "Within the training materials relevant in 2015 3 [which is the 2013 Manual] this area is given minimal input and some of the information is dated. The 4 5 communication module mentions alcohol and drugs, but only has one paragraph and little in the way of advice. 6 7 There does not appear to be a section on communicating with someone in a mental health crisis or overcoming 8 9 these barriers to communication." 10 So did you have concerns when you looked at training materials that were available? 11 12 A. Yes, I did. And I think in paragraph 2 you say your view is that it 13 Q. was not fit for purpose? 14 15 Α. No, I don't think it was. 16 Q. And you said: 17 "Without evidence of substantial additional input, the training appears to provide officers with almost no 18 coping strategies or advice on how to, firstly, identify 19 20 someone under the influence or suffering from a mental 21 health crisis, ABD or ED and then how to attempt communication and control of such subjects. This would 22 leave officers to utilise their personal skills when 23 dealing with incidents involving these issues." 24 25 Α. That's correct, yes.

- 1 Q. Now, do you think that this type of issue does properly 2 sit within OST training?
- I think it does. I think it's a relevant area that 3 Α. 4 should have a great deal of importance placed upon it 5 because of the risk factors of injury and possible death. The emphasis certainly across the rest of the UK 6 7 has -- has increased massively over the last sort of ten years and I think there are a lot of good bits of work 8 9 that have been going on -- I'm aware of some work that 10 actually went on in Scotland about three or four years ago -- which are looking and trying to improve officer's 11 12 knowledge and understanding of this particular subject.
- But certainly from your view of 2015 and the areas that 13 Q. 14 you've look at and it would not just be the manual, 15 there would be the instructor's manual, the -- there will be lesson plans perhaps or -- that may mention 16 17 alcohol or drugs, there may have been PowerPoint 18 presentations that you've look at, but having looked at 19 all of that, do you think this really did not provide 20 adequate skills to a student who had to face identifying 21 a subject who was subject to these --

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A. As I say, the training materials are minimal. There's mention of them, but there's no supporting information in relation to the how do I deal with this if I believe the person is under the influence or is suffering a

crisis? As I say, going back to work elsewhere, you mentioned yesterday the DVD that the Met police produced specifically around mental health. That goes back to 2007. We have the inputs and the sections within the NPCC manual from 2012 which greatly increased the awareness and knowledge signs and symptoms of ABD and also the coping strategies for officers to consider. So there's a lot more information, a lot more emphasis on it within the manual and I think that should be replicated within the Police Scotland resources.

- Q. Now, it may be suggested that in Scotland many adults will have witnessed people who are intoxicated for one reason or another, drink or drugs, substances of some kind or that may be suffering from mental health problems, and the police would be in no worse position than anyone else to be able to identify that. They would be equally good as a layperson, a citizen going about their business, and certainly a civilian would be able to identify someone who was drunk in the street as well as anyone else. Civilians wouldn't need special training for that, but do you think police are in a different position?
- A. I think first of all to understand that not everybody
 who is intoxicated or has taken drugs or is having a
 mental health crisis is susceptible to the possibility

- 1 of ABD. The definition, as it stands, it's about that bizarreness or that unusual behaviour that is outside of 2 3 the norm that may indicate that that individual is 4 suffering that type of situation. But in relation to 5 police officers, they have a duty of care to that individual and also a duty to protect the public, so 6 7 they have a duty to interact and try to resolve the problem, whilst looking at the safety of the individual 8 9 and the subject themselves. So there is an increased 10 requirement for officers to have a better awareness, to have a better understanding of what is happening and 11 12 also how to best try and manage the risk, because there 13 is a risk regardless of how we look at it, how to limit 14 and control that risk to the best of their abilities, if 15 they do have to interact with this individual. So an average citizen could across the road and walk Q.
- 16 17 away?
- 18 Α. Basically, yes.
- 19 But it may be required for a police officer to Q. 20 communicate and engage with that individual?
- 21 Α. That's correct, yes.
- Further training for an officer may be of benefit? 22 Q.
- Yes, it would be, yes. 23 Α.
- And you talked earlier about regardless of whether the 24 Q. 25 cause is drink or drugs or some substance or mental

- 1 health, you mentioned a medical emergency, and is that 2 really what the training is designed to help the police do, to identify --3
- 4 Α. That is one of the crux messages certainly from the 5 College of Policing training is it's quite a simple mnemonic "ABD equals A&E". That is what we tell 6 7 officers. If we suspect that somebody is suffering from ABD, they go to A&E because it's a medical emergency, 8 9 the likelihood of them needing a medical intervention is 10 quite high. So we talk about that and we talk about the methodologies of then getting them to the A&E. Do we go 11 12 in police transport? Do we go in ambulance transport? 13 If we go in ambulance transport, do the police go with them? If we go in police transport, does the ambulance 14 15 crew come with you to provide medical assistance? So there's all those things that are ways of reducing or 16 17 try to reduce the risk of that individual suffering 18 cardiac arrest or going into.
- 19 And in terms of the training in Police Scotland in 2015, Q. 20 was there clarity about police officers should if they spot the signs of ABD or, as it was known then, ED --
- 22 Excited delirium, yes. Α.

- That that was a medical emergency and should be treated Q. 23 as such? 24
- Nothing specific that I found and certainly they don't 25

use that mnemonic or that sort of correlation, but there 1 2 is comment that it could become a medical emergency. 3 But I think it's identifying the fact that it could be a 4 medical emergency at the very early stage and getting 5 that information, you know, into the officer's psyche which would allow for medical intervention at an earlier 6 7 stage or as early as possible. Q. So but no reference to the mnemonic that you have given 8 9 us, ABD equals A&E? 10 Α. No. Could we look at page 24 of the module 1 "Officer safety 11 Q. 12 training", which is PS 10938. So this is the 13 2013 Manual and page 24 of the actual manual is about excited delirium. It's section 12, page 24, thank you. 14 15 So this is module 1 of the 2013 Manual, section 12, and it's specifically about excited delirium and what it is 16 17 and if we look at the bottom of the page on the 18 right-hand side: "So actions to reduce the risk of death in 19 20 restrained subject exhibiting excited delirium." 21 So it was recognised that death could occur --22 Α. Yes. Q. -- if someone is suffering from this and at the bottom 23 24 it does say: "Any subject exhibiting symptoms of excited delirium 25

- should be treated as a medical emergency and be assessed immediately at a hospital."
- Yes, if we look at the earlier paragraphs, it very much 3 Α. looks at individuals who are being restrained or 4 5 indicates to officers that this is something that will happen whilst -- whilst being restrained. Whilst that 6 7 increases the risk, what it doesn't identify -- if we go up the page a little bit, please. If we look at the how 8 9 to identify it, "How do officers identify a subject in a 10 state of excited delirium?" the main thing here is what I said before. It's about the bizarre behaviour and the 11 12 demeanour of the individual rather than things that 13 would only become apparent while an officer is using 14 force or restraining that individual. I don't know if 15 they're strong until I actually try to get hold of them and do something to them. I don't know if they have got 16 17 a high tolerance to pain unless I try pain compliance techniques upon them. I don't know if they're not going 18 to not respond to incapacitant spray, unless I use it on 19 20 them.

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So none of that indicates to me early recognition of somebody with ABD or excited delirium is paramount. So this section very much to me looks like if you have gone to restrain an individual, this is what you might find. By that it's a bit late by then, because you want that

- 1 early identification to be able to say this person is in crisis, this person may be suffering ABD, therefore, I 2 3 need medical assistance, I need to consider my options, 4 am I going to go hanging on, if I am going to go hands 5 on, how can I reduce the risk of this getting worse? So it seems to be an afterthought in relation to the actual 6 7 comments, rather than a very stringent, let's identify this early, let's understand what we're seeing and what 8 9 we're dealing with and try and put things in place 10 before we go hands on, rather than looking for the ticks in the boxes once we have gone hands on. 11
- Q. And so, again, superficially in relation to the order, identifying a medical emergency should be the first step?
- 15 A. Yes.
- Q. Before any use of force at all?
- As I say, understanding that that person is -- their 17 Α. behaviour is bizarre or unusual and, as such, linked 18 19 with the other information that we've got. You know, it 20 could be things, you know, indications are things like 21 body is hot to the touch, skin is hot to the touch. 22 Again, I wouldn't know that until I actually took hold of the person, but if the person is running around in 23 the middle of winter with no shirt on, that's a sign 24 that they may be hot, not the fact that their skin is 25

- hot to the touch. So it's just about the emphasis and how the information is put across doesn't really lend itself to early identification of excited delirium.
- Q. There are early opportunities for officers, but you

 would suggest from what you're saying that the training

 should be designed to help officers find out what those

 early opportunities are and it may be someone is running

 around without a jacket or a shirt allow them to

 identify a medical emergency before they even lay hands

 on the person?
- 11 A. Yes, hopefully, that's what you're looking for. It
 12 doesn't always happen that way but, yes, that's what
 13 you're hoping can occur.
- Q. And that's not something that we see in relation to this?

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- A. Not in relation to how this information -- this one page of information is presented, no.
- 18 Thank you. And you then in your report go on to compare Q. 19 what College of Policing were doing in 2015. I'm very 20 interested in going back to your report at this stage, 21 if we may, and I think that's really towards the bottom 22 of page 16, and on to page 17, and you have given a lot of details. Could you perhaps explain to the Chair --23 and if you go on to page 17, you'll see a lot of the 24 detail that you provided. Could you help the Chair 25

1 understand what College of Policing were doing in 2015? Yes, as I have stated there, there was a -- going back 2 Α. 3 to communication that we look at earlier, there were 4 specific tips in relation to how to overcome barriers 5 within the communication section so we looked specifically at persons who were suffering mental health 6 7 so tips were given in relation to things like making sure your radio was turned down, only one person to 8 9 communicate directly with the individual, things like 10 take your hat off, make it more personal, simple little tips that officers could follow to try and assist that 11 12 communication process with somebody who was in a mental 13 health crisis. And you have mentioned the video that was prepared, 14 Q. 15 which we see here "Considerations for safer restraint -Pukka Films 2006." 16 17 So was that a training video that was available from 18 then? 19 Yes, it was, as I say, it was produced by the Met, I was Α. 20 one of the coproducers and editors of it. It looked 21 specifically -- it looked at ABD but wanted to 22 specifically heighten officer's awareness of how to deal with people in mental health crisis. The video also had 23 very kind interviews with two mental health service 24 25 users, so two people who were suffering with mental

- 1 health issues, and they were giving their personal interpretations of how their interactions with police 2 3 officers had gone in the past and also what they would 4 like to see being on the receiving end, shall we say, of 5 police actions what they would like to see happen so it was a very good sort of educational process but it also 6 7 looked at basically a reenactment of a person in the street suffering a mental health crisis, being 8 9 approached by two officers and how those officers 10 communicate and try to calm that individual so that they 11 can take them away.
 - Q. And from your experience as a trainer, what benefits were there for students to watching the video, because we have also heard some evidence about the benefits of videos and film as a mechanism --
- 16 A. Yes.

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- 17 Q. -- for sharing and training which perhaps aids
 18 comprehension?
- A. Yes, it does and it also standardises the input so
 you're not then relying upon different trainers having a
 methodology of putting that message across. By having a
 particular training video on restraint or on this type
 of subject matter, it allows officers, all officers, to
 be made aware of those situations. Another good part of
 that particular video, not sort of bragging about it,

- 1 but officers who had dealt with an ABD and unfortunately that ABD had ended in a death, the officers who were 2 3 actually involved give their interpretations and their 4 views on how -- how it happened, why it happened, but 5 also just how it had affected them in relation to they weren't expecting it, they didn't understand it, they 6 7 weren't aware of what it was, and again that was to assist officers maybe to having to deal with or were 8 going to deal with similar incidents. 9
- 10 Q. So from a wellbeing perspective --
- 11 A. Yes.
- 12 Q. -- as well was that useful?
- 13 A. Yes.
- Q. And we talked yesterday very briefly about realism and
 the importance of realism in training for officers and
 scenario-based training. Did the video aid training in
 that respect to show maybe something that's more
 realistic than your colleagues pretending?
- 19 A. Yes, we did it out in the public, in the public domain,
 20 it was in front of some shops so it was to try to make
 21 it look as realistic as possible. The two officers
 22 involved were police officers, they were trainers. The
 23 person who was being the person in mental health crisis
 24 was an actor. So we showed it this is a good way of
 25 dealing with it; this is possibly not such a good way of

- 1 dealing with it; and showed the pluses and minuses of both sort of approaches but also covered then, as I said 2 3 earlier, the issue about getting the ambulance running 4 nice and early and then if restraint is required then 5 how do we transport that individual to the hospital, do we go in the ambulance, et cetera, et cetera, and things 6 7 to look for and things to consider during that process. Q. So a mechanism really a way of demonstrating a good way 8 9 of handling a situation where someone has been suffering
- 11 A. Yes.

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Q. -- with the use of actors. And is this the video that
you mentioned yesterday that was provided to Strathclyde
at Legacy Force?

from a mental health crisis demonstrated by trainers --

- 15 A. Yes, I mean it was disseminated, it was offered out
 16 through the National Network, through the National
 17 Committee. I have personal recollection of Strathclyde
 18 taking a copy of it to assist in their training and a
 19 number of other forces up and down the country using it
 20 as well.
- Q. And I would like to play a section of this video
 obviously subject to there may be some redactions
 because of personal data but the full video takes
 framework in the section of the time?
- 25 A. Yes.

MS GRAHAME: I wonder if the Chair might permit us to maybe 1 rise slightly early? 2 LORD BRACADALE: Yes, we'll stop for lunch now and sit at 3 2 o'clock. 4 5 (12.57 pm)6 (Luncheon adjournment) 7 (2.05 pm)LORD BRACADALE: Ms Grahame. 8 MS GRAHAME: Thank you. Mr Graves, before lunch, we were 9 10 talking about the fourth question, question (d), which was identification of subjects who are intoxicated or 11 12 experiencing mental health crisis, suffering from ABD or 13 ED and actions then to be taken by officers and we had 14 started by looking at the training that was available in 15 Police Scotland in around up to the time of 2015, and we had moved on to look at College of Policing training 16 17 that was available at that time. And I think we were on 18 page 17 of your report and we were on paragraph 4 just 19 before lunch. 20 Now, I said at that time I would like to play a 21 video and we'll maybe get that organised. That's WIT 00133 and it's a video called "Considerations for 22 safer restraint" and we've very kindly been granted 23 permission to display this video within the Inquiry by 24 the Met and that permission has been given, but they 25

1 have asked that we state at the outset a caveat that 2 this video is not reflective of the current curriculum taught? 3 That's correct. I mean I produced it and mentioned it 4 Α. 5 in relation to identify work that was being conducted across the rest of the UK in relation to ABD and 6 7 communication in those circumstances dating back to the date of this film, which was 2006. Subsequent to that, 8 9 there have been a number of other videos and other 10 training resources released by both College of Policing and the NPCC in relation to excited delirium and ABD. 11 12 Q. Thank you. And so things haven't stood still down at 13 the College of Policing? No, not in relation to this subject matter, definitely 14 Α. 15 not, no. And but it is reflective of the training that was 16 Q. available from 2006 when the video was produced? 17 18 Certainly, yes, it goes back that far, yes. Α. 19 And up to the time of 2015? Q. 20 Α. Yes. 21 And you've explained that that was a video that was Q. 22 shared quite widely --23 A. Yes.

Q. -- with other forces? Now, before we watch the video --

it's about 19 minutes long -- there are redactions to

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- 1 the video. You mentioned before lunch that there were
- 2 people who had suffered mental health crises --
- 3 A. Yes.
- Q. -- who spoke frankly on the video, but those were
- 5 individuals who had actually lived real life experience
- of coming into contact with the police?
- 7 A. That's correct.
- 8 Q. And those individuals have been redacted?
- 9 A. Yes, no problem.
- 10 Q. Both video and audio and the footage of the original
- initial incident that had given rise to this video being
- 12 prepared?
- 13 A. Yes, I can give an explanation as to what arose from
- that video, if necessary.
- Q. Well, we'll play the video first in its entirety and
- then we can maybe come back and we could get some of
- 17 your comments on it. The only other thing that I would
- 18 wish to point out is that this is being fed and streamed
- through our own system, so very observant people may
- 20 notice a very slight time lag between the audio and the
- 21 video, but I have watched it myself and I don't believe
- it should cause any difficulty.
- 23 A. Okay.
- Q. Perhaps we could play this video.
- 25 (Video played)

- We found it invaluable as a training tool to get out to 8 Α. 9 such a large amount of officers. I mean, at the time 10 the Metropolitan Police was in excess of 30,000 officers, so that went out and every officer saw that, 11 12 you know, which gets that message out. It was then 13 supported by emphasis within the refresher training on 14 the physical skills that were displayed in the video. 15 So, again, that reinforced the techniques and tactics that were shown so we found it invaluable in getting 16 that message across. 17
- Q. That was shown to not just probationers but to existing staff?
- 20 A. Yes, that was rolled out -- I mentioned on the video
 21 about our 12 hour refresher process, that went out
 22 across that annual refresher so every officer saw it.
- Q. Within one year?
- 24 A. Yes.
- Q. And how many officers was that?

- 1 A. That was every operational officer up to and including 2 the rank of chief inspector.
- Q. Thank you. And from all the materials you reviewed in
 Police Scotland at that time which related to this
 topic, was there any equivalent within Police Scotland
 that you saw?
- A. Not at that time I couldn't see anything. As I say,

 I am aware of other videos that were circulating and

 were being viewed. I haven't found them in the bundle

 and I'm not aware as whether or not Police Scotland were

 actually utilising those resources.
 - Q. Right. Can we talk about the content of the video, please. Obviously, it started as a result of a violent incident. I think someone on the video said it was from 2003?
- 16 A. It was, yes.

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- Q. And a man had died, and then the Met took steps to see
 what better training could be provided; is that correct?
- A. That's correct, yes, Mr Patrick(?) actually mentions
 about the review that took place just before the video.

 The video was a recommendation from that review that we
 looked at creating a video that could be shown not only
 to officers, but also shown to outside agencies to sort
 of better advise them on police tactics and why we do
 what we do. So it wasn't just shown within police

- forums, it was shown within a lot of other mental health
 forums and other interested groups.
- 3 Q. And would outside agencies include ambulance services or 4 not?
- A. Yes, as I say, the ambulance service were involved in

 part of the review, as were NHS staff, to look at the

 protocols in relation to taking people in restraint to

 hospitals and a memorandum of understanding between the

 NHS trusts in London with the police so that they

 understood why we were bringing them in and how they

 would appear when they were being brought to A&E.
 - Q. So there wasn't just the video being created internally, it was reaching out to other organisations as well?
- A. Yes, and there was also additional policy and standard operating procedures that supported the training and the video.
- Q. And you mentioned before lunch it was an actor who was used and two trainers who demonstrated how to deal with the man who was having a mental health crisis?
- 20 A. That's correct, yes.
- 21 Q. That was the man in the denim shirt?
- 22 A. Yes.

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Q. And there were two examples that seemed to me on the video, there was one where he was eventually escorted to the van and then there was a second one where he had to

- 1 be restrained?
- 2 A. Yes.

- Q. And he was lifted to the van and an ambulance was called at that time. Can you talk about the distinctions and
- 5 why those two examples were chosen?
- We wanted to show the fact that communication being a 6 Α. 7 key factor of the handling and the dealing with such situations in that on occasion that can work, but also 8 that on occasions it won't work and the reason, 9 10 particularly on that one, is the fact that he approaches 11 and starts physical intervention or physical interaction 12 with a female passerby so police have to step it for the safety of that individual and restrain him. So it was 13 to show both sides of the options that might take place 14 15 in such a situation, but then if restraint is considered, that it's done in the right way, it's 16 minimised time wise to the least amount of time on the 17 18 floor in the prone position and then also the additional 19 bits about having medical assistance en route and the 20 fact that the medical -- the paramedic actually escorts 21 in the van with the officer. The other option would 22 have been to go -- to have the discussion do we go in the ambulance and the police go in the back of the 23 24 ambulance with the subject.
 - Q. And with the second example that was demonstrated,

1 I mean the difference there was a member of the public arrived and was approached and contact wasn't made 2 between her and the man suffering --3 4 Α. That's correct. 5 -- from the mental health crisis, and would that change Q. the situation? 6 7 Α. Well, it then increases the risk to that individual, because we don't know what that individual is going to 8 9 do to the member of the public, so interaction, 10 intervention has to be taken at that time, because there is a heightened risk. So it was to identify that change 11 12 in the threat assessment or the dynamic assessment of 13 the situation and that at some point there is a likelihood, as I said on the video, there is a 14 15 likelihood that at some point physical intervention by police officers is likely to have to take place. 16 And I think you mention that on the video itself? 17 Q. 18 Α. Yes. 19 And does this go back to the National Decision-Making Q. 20 Model where we see phase 1 is intelligence gathering, 21 information gathering? 22 Yes, even pre that there was a mention on there about Α. the office safety model. The officer safety model is 23 another version of the conflict management model 24 predates the NDM, but the process is exactly the same, 25

- 1 it's just a slightly simplified version. The NDM was 2 brought in 2012 so it postdates this video.
- Q. Right. But when the new information was available for the lady coming up the stairs and being approached by the subject, that is new information and then a decision has to be taken at that point?
- A. Yes, something has happened. Your reaction to that is
 reassessing the risk or the threat. The threat level
 has been increased to this individual, therefore what is
 now my tactical option? My tactical option has to be
 intervention so the officers intervene and take hold of
 the individual to prevent them causing injury to that
 female.

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- Q. So the officers no longer simply rely on communication skills, they then have to intervene and that's when the restraint takes place?
- A. Yes, but the important bit as well with that is just to show that communication is important throughout the whole process, don't stop talking, don't just I have now ruled that out, I'm going to move on to something else, the communication is part of that process throughout the whole of the restraint period.
- Q. And during that restraint on the video did we see people telling the person they had to be calm and they were trying to help?

- 1 A. Yes, trying that constant communication hoping that at
- 2 some point something will get through and something will
- 3 trigger that cooperation from them.
- Q. Right. So that doesn't stop even during the restraint?
- 5 A. No, definitely not.
- Q. And we also saw one of the officers who was involved in
- 7 the restraint using his radio and saying he was going to
- 8 call an ambulance. Can you talk through that?
- 9 A. Again, as I said earlier about this "ABD equals A&E",
- it's understanding that this person is in crisis of some
- of description, we're not sure of the cause of the
- 12 crisis, but the fact that that early identification, the
- person is acting bizarrely, a communication style is
- 14 erratic, they're not really making a lot of sense, so
- 15 those early identifications, before any physical
- 16 activity has taken place, that early identification
- makes the officer understand that this person may at
- some point need to be restrained and, therefore, may
- 19 need medical intervention of some description. So
- 20 getting that medical assistance to them as soon as
- 21 possible, knowing what delays can be with getting
- 22 ambulance crews, et cetera, getting that running as
- early as possible.
- Q. And then I think towards the end of that we saw oxygen
- 25 being given to the person who was --

- 1 A. Yes, so you heard the officer basically say that the 2 person is breathing heavily through the exertion and 3 Dr Sheppard explains that on the video, so it was about 4 the use of the medical intervention having the 5 paramedics there and hoping that they can give medical assistance more so than what police officers can with 6 7 basic first aid, you have got that much higher level of medical intervention available to you, should the person 8
 - Q. Thank you. And as well as that you mentioned earlier there's also a wellbeing aspect to this?
- 12 A. Yes.

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need it.

- Q. That officers who have been involved in a situation such as this we saw some officers talking about the experience that they had had regarding the 2003 incident and is that something else that is important that can be shared through the video?
- 18 Yes, I think making valid points in relation to you don't understand until you have actually been involved 19 in a situation like that just how strong and how 20 21 difficult that type of situation and restraint can be 22 and why we use multiple officers to try and control the situation and individuals in that position. As I say 23 there's -- it just tries to heighten their awareness in 24 25 relation to should they come into contact with an

- individual, not only do they know what's happened, but
- 2 they know what to possibly expect if they do have to
- 3 physically restrain.
- Q. And as a training tool, how effective is it for other
- 5 probationers or students to hear the firsthand
- 6 experience from their colleagues?
- 7 A. I think that's very important. As I said, I think also
- 8 the redacted sections were extremely beneficial, because
- 9 it gave the service-user, as we would call them,
- somebody who has been through the system who has had
- interactions with the police when in a crisis being able
- to tell the police officers through the video this is
- how I felt, this is how I perceived what you were trying
- 14 to do to me or what you were trying to say to me and
- then being able to match that against what we advise in
- 16 relation to best practice in such situations.
- Q. So although we couldn't observe ourselves on the video
- 18 today individual users who have experienced mental
- 19 health crises, as part of the training video officers
- 20 were shown footage from people who have experienced it
- 21 and how --
- 22 A. Yes, it was --
- 23 Q. -- they felt during --
- 24 A. It was live interviews of them telling about their
- 25 experiences of being dealt with by police officers.

- 1 Q. For actual students, probationers, officers who were
- 2 watching this video in real life, they would have had
- 3 access to all of that information as well?
- 4 A. Yes.
- 5 Q. Let's think about the hypothetical reasonable officer.
- If that officer had watched this video up to that period
- 7 in 2015, what difference do you think that would have
- 8 made to them in handling an incident where someone is
- 9 suffering either from intoxication or a mental health
- 10 crisis?
- 11 A. I think it would have assisted with early
- 12 identification, recognising that bizarre behaviour,
- 13 recognising that that initial contact in viewing of the
- individual and it would have also, hopefully, triggered
- that thought process in relation to this behaviour is
- out of the ordinary, it's bizarre, it's unusual,
- 17 therefore looking at triggering that thought process
- 18 around excited delirium or ABD, with that in mind and
- then obviously that would then kick into place things
- like getting an ambulance running early on, requiring
- 21 that medical assistance or that medical intervention.
- 22 Q. It could have made some significant difference to their
- 23 actions?
- 24 A. I believe it could have.
- 25 Q. And can we move on then, please, and look at the

1 up-to-date position and I think you have already 2 explained that College of Policing and the Met have 3 explained in relation to this video that that's reflects 4 their previous training, not their current training? 5 Α. Yes. 6 But if we could maybe go back to your report and if we Q. 7 could look at page 18 and look at paragraph 6 on page 18 of your report, and you comment here about -- sorry, 8 9 page 18 paragraph 6, there we are -- and you comment 10 here about the 2017 OST Manual --11 Α. Yes. 12 Q. -- which reflects the more up-to-date position in 13 module 3 and you describe this as greatly improved, the 14 section on communication? 15 Α. Yes. And you say that section 9 deals with alcohol and drugs, 16 Q. 17 but you say it does not however appear to mention mental ill-health and then you comment on a communication 18 19 PowerPoint which was another training tool you looked 20 at? 21 Α. Yes. 22 And you say that has extensive input on this matter? Q. Yes, it has a lot more information and more in-depth 23 Α.

information than the manual has.

All right. And so if it was used -- if training was

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Q.

- given both with the manual and the PowerPoint that would
- provide a much greater coverage?
- 3 A. Yes, it would, yes.
- 4 Q. And you then said:
- 5 "Pages 22 to 34 cover communication with subjects
- 6 with alcohol, drug, mental health crisis and other
- 7 issues that can impact their ability to communicate."
- 8 And that could be a disability of some description?
- 9 A. It could be, yes.
- 10 Q. A language barrier?
- 11 A. Yes, it could be language barrier, it could be hearing
- impairment or sight impairment.
- 13 Q. And the mental health PowerPoint also provides some very
- 14 good information and strategies for dealing with these
- 15 situations, so as well as the communication PowerPoint
- there is now a mental health PowerPoint?
- 17 A. Yes, and supporting documentation, standard operating
- procedures, et cetera, specifically in relation to
- mental health.
- Q. When you -- it does sound like you say this has greatly
- 21 improved the training and that the position now is much
- 22 better --
- 23 A. Yes.
- Q. -- then it was then?
- 25 A. Yes, the only thing I wasn't able to establish, as I

1	say, is what resources were on top of that, such as
2	videos, were being used to support the message.
3 Q.	All right. And could we have a very brief look at a
4	statement by Inspector Bradley SBPI 004008 and
5	Inspector Bradley has given evidence to the Inquiry, but
6	also this is his statement which I'll show you and if we

can look at 127, and perhaps if we can look at 126,

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we'll see that this whole section deals with ABD. So he 8 9 is talking about various training materials, PowerPoint

and such like. If we look at 127 again, he says:

"We should however again recognise that in isolation a large list of causes may be considered ideal, but in the operational environment when faced with an individual perhaps suffering from ABD, we should be realistic in what our expectations are around the amount officers will recall, depending on how long since they were last trained and the impact of the operational environment they are working in. So whilst we provide the best information we can, we have to temper our expectations around officer performance in respect of this. I think we would be challenged to find an officer who was perhaps say six months from the recertification training who could give you a list of seven causes or 13 signs and symptoms of ABD. So whilst we continue to reinforce key training messages like these, again we are

we

- realistic in our expectations of officer performance,

 given two training days a year are allocated to

 operational safety training and the associated

 operational first aid programme."

 Now, I should say that the current position, as I

 understand it, is now that officers in Scotland have two

 days of training --
- 8 A. Yes.

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- -- not the one that they had in 2015? I'm interested in 9 Q. 10 this really a reservation, I suppose, that's being expressed by Inspector Bradley about officers' ability 11 12 to recall say for example they're given much detail and 13 long lists of symptoms and signs and, in fact, your own 14 report provides a very detailed list on page 17 of signs 15 and symptoms and such like and he's expressing reservations that officers might not be able to retain 16 17 all of that information. Do you have any thoughts on 18 that?
 - A. I would agree. In context, what the message he's trying to put across it's one of many things that officers have to take on board through their training. I said earlier I think one of the big things is it's not about the causes, that's not irrelevant, but it's not important for the officers to know the causes, so maybe less emphasis on that, but the signs and symptoms are the

important thing to trigger officers down that path so emphasis on that rather than the cause.

Also the fact that it really depends on how much emphasis is placed upon that particular subject in balance against some of the other ones and I have sort of touched on that as I have given my evidence is the fact that emphasis on things like communication, this, and other relevant areas of officer safety may be more impactive in relation to the public and police safety than say, you know, application of a set of handcuffs. I'm not saying that's not something that officers don't need to know, they do need to know, but the time and emphasis that is placed on that within their training, possibly the balance needs to be looked at and addressed.

- Q. Something you touched on yesterday about -- and today about the time that's spent on individual topics?
- 18 A. Yes.

- Q. You said yesterday that if they identify maybe areas
 where further training is required through data and
 information that they have from complaints are going up
 or issues, injuries are occurring, is that the sort of
 area where further refinements could be done on a
 year-to-year basis?
- 25 A. Yes, I mean, as I say, that constant review of the

- 1 syllabus and the emphasis needs to be constantly looked 2 at and I'm aware that a process is in place, but to 3 address that comment, if we have evidence or 4 intelligence that it is becoming something that officers 5 can't recall or can't fully list, then that would indicate to me that that's an area that we need to focus 6 7 on going forward to make sure that officers do have that information and that understanding of the process. 8
- Thank you. And if we can stay on page 18 of your 9 Q. 10 report, and if we look at paragraph 7, so we'll move away from Inspector Bradley's statement. Paragraph 7 on 11 12 page 18 effectively says, you consider the training currently provided by Police Scotland in communication 13 14 and specifically dealing with the issues that we've been 15 looking at this afternoon and you describe that as "good", so the current training system is good? 16
- 17 A. Yes.
- 18 Q. Thank you. And it stands up well against what other
 19 areas in the UK are training?
- A. It does, yes. As I said, my caveat on that was I think
 there should be some link between the communication side
 of it and the effects of ABD and those causes and
 triggers are just to make that link between the two, the
 two stand-alone inputs really.
- 25 Q. So ensure that any references to dealing with ABD aligns

- or comments about doesn't really matter that it's drugs
- 2 intoxication, alcohol intoxication or mental health
- 3 symptoms?
- 4 A. Yes.
- 5 Q. And that that is consistent across the board on all the
- 6 materials?
- 7 A. Yes, because that's not going to be known until some
- 8 sort of investigation is carried out at the hospital,
- 9 blood tests, et cetera or getting the medical history of
- 10 the individual. It's just understanding the signs and
- 11 symptoms, that bizarre behaviour, that unusual possibly
- 12 violent behaviour, why is that occurring, is it out of
- the ordinary, then triggering an officer's thought
- 14 process down that ABD route.
- 15 Q. Thank you. And then moving on to another aspect of
- question (e) and we've looked at this to some extent if
- we turn to page 20. Question (e) "tactical options for
- approaching an individual reported to be on a public
- 19 road carrying a knife" and (iii) is de-escalation. Now,
- I have taken a number of comments from you regarding
- 21 tactical communications and I think there's evidence
- 22 before the Chair that the old term for that was -- the
- new term for that is de-escalation?
- 24 A. Yes.
- Q. That would be correct. And I think at section 1 you

refer to the 2013 Manual in looking at the training that 1 2 was available in or around 2015 with Police Scotland and 3 you comment that: 4 "It has three pages which provides basic information, but little in the way of practical advice. 5 It mentions 'empathy' on page 7 under 'active 6 7 listening', but there's no advice as to how to do this and it does not appear to have been a priority in the 8 9 syllabus which focused on the physical skills of the programme." 10 11 Α. Yes. 12 Q. And I think that's consistent with what you have been 13 saying earlier? 14 Yes. Α. 15 And so in this respect at paragraph 2 you say: Q. "I would not say that this was ." 16 17 And the question had been was it fit for purpose? 18 Α. Yes. So you don't think at that time on 2013 Manual, on the 19 Q. 20 basis of that and the materials you have seen, that it 21 was fit for purpose? Yes, there didn't appear to be a great deal of advice or 22 Α. guidance to officers. From the video you have just 23 watched you saw the Met model of intervention, calm, 24 report control. That was included into the rewrite of 25

- 1 the manual in 2012, so it was available as across the whole of the UK. A lot of other forces before that had 2 3 their own models and their own sort of de-escalation or 4 conflict confrontation handling models and methodologies that used. 5 And in paragraph 2 you say the second sentence: 6 Q. 7 "The lack of impetus on the important tactical option of de-escalation linked to a good grounding in 8 9 communication skills would mean that officers are 10 lacking one of the their most valuable tools." Yes, as I said earlier, I still believe that it's one of 11 Α. 12 the most important tools that an officer can have. 13 And you do recognise that this can be something that can Q. 14 be learnt over time and with experience, but officers 15 who do not fully understand or are unable to utilise these skills are much more likely to revert to use of 16 force to achieve their goals? 17 18 That's correct, yes. Α.
- 20 So if they are unable to use correctly the communication skills, if maybe their skills are poor, if perhaps the training is not adequate, then that means they are more likely to use force?
- A. Yes, it could also be a behavioural or an inbuilt

 psyche within the officer, they have a certain way of

 communicating which can escalate rather than deescalate.

1 Q. And if we can look at a statement of Inspector Young, SBPI 00153, and if we can look at paragraph 42, so 2 Inspector Young was asked about training on 3 de-escalation round about the 2013 Manual 2015 and he 4 5 was asked about what was taught as part of their probationer training about de-escalation and he says: 6 7 "The term de-escalation wasn't used. It wasn't a concept that was taught back then. However, the 8 9 2013 Manual did have a section on what was called 10 'tactical communications' [which we've looked at]." 11 Α. Yes. 12 Q. "... which is the older term for de-escalation. A lot 13 of the principles of tactical communications are similar 14 to what we term now as de-escalation. We covered 15 tactical communications in part of the OST theory, so that three-hour input that the officers would get on day 16 17 one of their initial course would include discussions on tactical communications. Tactical communications is 18 19 basically that two-way process of speaking and listening 20 to gain a tactical advantage. We didn't use the term 21 de-escalation. It was more about using tactical 22 communications to obtain compliance back then. So we

informed officers about the best ways to communicate, ie

listening, how to use your words, active listening. The

model of tactical communications is what we called a

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'five step positive style'." 1 And there's reference to that in the manual: 2 3 "We would train officers to try and talk to persons 4 who were perhaps breaking the law or committing a crime and we broke that down into five steps." 5 Reading that can, you comment on that approach? 6 7 I appreciate de-escalation may not have been the term Α. that was used, but my interpretation "tactical 8 9 communication" is a tactical option that you can use. 10 Within that, there is -- that is a tool that assists with managing conflict or managing confrontation so 11 12 there are other things. I mean there's no mention in 13 there about body language, about how you stand, how you 14 portray yourself, whether you have a threatening 15 demeanour or you have a relaxed calming demeanour. There's lots of other things and lots of other tips 16 17 which don't fall directly within -- wouldn't fall directly within tactical communication. 18 19 We mentioned on the video, you know, simple things 20 like turning the radio down, taking your hat off. They 21 wouldn't directly sit under tactical communication, but 22 I would expect them to sit under an input on conflict management and as part of that conflict management, the 23 skills to de-escalate or calm down a situation, rather 24 than escalate a situation. 25

1	Q.	Thank you. Can I also look at another statement that
2		the Chair has from David Agnew. Mr Agnew was one of the
3		trainers at around 2014, 2015, and his statement is
4		SBPI 00109, and I'm interested in paragraphs 17. Now,
5		we have heard evidence in the Inquiry that David Agnew
6		was the instructor who trained PC Kayleigh Good and she
7		was a probationer?
8	A.	Yes.
9	Q.	And he carried out a training course with here which she
LO		attended in February 2015, so a matter months before the
11		incident?
12	Α.	Yes.
13	Q.	And that training course was based and used the
L 4		2013 Manual. We've also heard evidence that David Agnew
L5		trained PC Alan Smith to become a trainer and he used
16		the he had the manual.
L7		So looking at paragraph 17, he says:
L8		"I'm asked what training officers were given in '14,
L9		'15 in relation to de-escalation. The officers were
20		trained to de-escalate when control has been achieved."
21		I will just repeat that:
22		"The officers were trained to de-escalate when
23		control has been achieved."
24		"So de-escalate as and when is appropriate would
25		probably be the message but de-escalation must follow

1 compliance immediately. Again, it's situation 2 dependent. If anything is above level one of the 3 profiled offender, then the officer may not be able to de-escalate. Level 2 is verbal and gestures so if 4 5 they're shouting, swearing and in my face, then at that stage I may not be able to de-escalate. But once 6 7 compliance has been achieved and that may be physical or verbal or a combination of the two, then de-escalation 8 9 should immediately follow, because there is no requirement for further uses of force if the officer or 10 officers have deemed this situation to be controlled and 11 12 compliant." 13 I wonder if you can reflect on what's said there and 14 tell us if you have any concerns about that? 15 Α. I do, you know, from the very sort of second sentence. The idea of de-escalation is to prevent escalation or 16 17 the requirement for officers to use force. That statement or the number of statements that are below 18 19 that you would never consider it on anything above a 20 level one, ie compliance, so the person is doing exactly 21 what you ask them to do, in that circumstances there is no reason for de-escalation, because you're at the 22 lowest level, you're getting the compliance that you 23 24 require. The idea of de-escalation skills is for dealing with 25

- 1 somebody above that level to get them back down to that 2 level, so it's an idea of being able to pull that person 3 back down by using your verbal skills and your 4 positioning and your demeanour and your behaviour to try 5 and get them to match you and come down, back down to that level 1. To say that it's not a viable option or 6 7 it's not something that was encouraged within the training of anything above a level 1, I find quite --8 9 quite difficult to believe.
 - Q. If someone had been attending a course where this was taught, as described by David Agnew, would you have concerns about what impact that would have on them when they go out into operational areas and respond to incidents?

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- 15 I think if that was the message that was being given by Α. the trainer, it would indicate to an officer being 16 17 trained by them that they -- de-escalation was a tool that they wouldn't use on anything other than a 18 19 compliant person and, as I said, if the person is 20 compliant, there's no need to de-escalate them because 21 they're at that bottom level where you want them to be, 22 you want them compliant. So if you have already got that, de-escalation is a useless tool, you don't need 23 24 it.
 - Q. And so presumably whether the person who's being trained

1 as a probationer, that's a concern, but also if the trainer is being trained on how to be a trainer, would 2 3 you have a concern about that message being shared more 4 widely? I think it would certainly lead officers to the fact 5 Α. that it's not to be considered when dealing with anybody 6 7 who is offering any form of resistance, whether that be verbal, physical, not to be something that can assist in 8 the dealing with that subject. 9 10 Q. And so in relation to this aspect, you've expressed the view in paragraph 2 of this part of your report that 11 12 officers are really lacking one of their most valuable 13 tools? 14 Yes. Α. 15 Thank you. Would you give me a moment, please. Would Q. that be an appropriate time? 16 17 LORD BRACADALE: Take a 15-minute break. (3.01 pm)18 19 (A short break) 20 (3.21 pm)21 LORD BRACADALE: Ms Grahame. 22 MS GRAHAME: Thank you. Mr Graves, I think a couple of things I want to just clarify from before the break. 23 24 The ACC in London at the time, am I right in saying, that's Brian Paddock. 25

- 1 A. Yes.
- 2 Q. Not Patrick?
- 3 A. No, Mr Paddock.
- 4 Q. And the doctor that we saw on the video was that a
- 5 doctor -- that appeared to be a Dr Hugh Montgomery; is
- 6 that correct?
- 7 A. Yes, he's one of the experts that actually sat on the
- 8 IMSAP panel and he's done quite a bit on death related
- 9 with restraint.
- 10 Q. Thank you. And there was mention of a Dr Shepherd was
- 11 that someone --
- 12 A. Yes, he was another medical adviser that was advising
- the Metropolitan Police at the time.
- Q. Thank you. So he wasn't actually on the video, but he
- 15 was --
- 16 A. No, but he was one of the advisers for the video
- 17 content, yes.
- 18 Q. Thank you very much. So we have been talking about
- 19 de-escalation and we have been looking at page 20 of
- 20 your report and I would like to move on to the current
- 21 position that we have in Police Scotland and I think
- 22 what you say at section 6, which is actually moving on
- 23 to page 20 --
- 24 A. 21.
- 25 Q. Sorry 21:

"The communication section in the 2017 OST Manual

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has been greatly improved." 2 3 And so you've reflected on the 2017 manual, the 4 up-to-date position, and you see a great improvement --5 Α. Yes. 6 -- in that? But you do say: Q. 7 "It is still only one page that contains practical tips for de-escalation." 8 9 Yes. Α. 10 Q. Although it's not covering numerous pages, you commend 11 it on the practical tips which are now provided? 12 Α. Yes. 13 I wonder if you could help the Chair understand what you Q. mean by "practical tips"? 14 15 Α. Some of the tips I was talking about earlier in relation 16 to things like body position, stance, taking a hat off, 17 introducing yourself, giving your name, little tips like that, which are used to be able to build that rapport 18 and that connection with an individual and therefore 19 20 give you a better opportunity to be able to correctly 21 communicate with them. Things that the student can do in practice when they're 22 Q. out responding to an incident that may assist with 23 24 communication? That's correct, yes. 25 Α.

- Q. And they may not even be words or conversation, but it can be body language and things that they're doing?
- A. Yes. As I say, things like the stance and the way that
 you present yourself. You know, men have a tendency to
 stand tall, push their shoulders back, that in others
 can be seen as an aggressive stance, so simple things
 like softening your shoulders, softening your knees,
 just making your stance look a lot softer and a lot less
- 9 threatening can be used to communicate a message in 10 relation to de-escalation.
- Q. And you also comment on a PowerPoint that's now
 available or has been available in relation to
 operational safety training and first aid and you say
 that that has input that covers a number of strategies
 and tactics that can be used for de-escalation?
- 16 A. That's correct, yes.
- Q. So the combination of the up-to-date manual, plus other
 materials such as the PowerPoints, can be used to
 improve and have improved the de-escalation training
 that's provided?
- 21 A. I would say yes, yes.
- Q. And I think you say at 7 that -- and this was in

 connection with a question about is that training fit

 for purpose. You say:
- 25 "In essence, this skill should be the cornerstone of

1 the training from which all the other tactical options emanate." 2 3 Α. Yes. 4 Q. And you describe de-escalation as a core competency? 5 Α. Yes. Yes. And then at 8 you talk about the training today 6 Q. being "far better" than that provided nine years ago, 7 "far better"? 8 Yes. 9 Α. 10 Q. And you've also provided us with some information regarding the current College of Policing training and 11 12 we've described before you've talked about the conflict 13 management guidelines and you have given us appendices D 14 to F which are attached to your report and contain 15 excerpts of parts of the guidelines in conflict management by the College of Policing? 16 Yes, they are some specific guidance documents assisting 17 Α. with conflict management. 18 And the Chair can obviously consider those in due 19 Q. 20 course. At section 10 here you say: 21 "These are all contained within the new PPST 22 programme currently being delivered across all forces in England and Wales." 23

I think I asked you about that earlier?

A. Yes, that's the public and police safety training.

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- Q. Can you tell the Chair a little more about this new programme that's being rolled out?
- It's been rolled out over the last sort of 18 months to Α. two years across the rest of the UK. At the moment, I believe there are only three -- I may be slightly off on that -- the last time I checked there were three force areas that had not signed up to the new process. Police Scotland are one of them, as far as I'm aware, British transport police are another and there is one other within the UK who are still putting in place what is required.

It's very much a scenario-based and performance-based refreshers' course. The trainers that are delivering it have gone centrally to the College of Policing and been given additional skills and additional input on how to run safe and effective scenarios and guidance on what the content of those scenarios should be. There are various forces that have published articles on LinkedIn in relation to their officers going through the new programme. It is receiving very, very favourable feedback from officers undertaking the training. The trainers are finding it far more beneficial in relation to being able to get the message across to staff.

So I say, at the moment, you know, we've known about

- 1 scenario training for a long, long time and that it is
- the best way forward. Yes, it is labour intensive.
- 3 Yes, it is resource and can be financially a larger
- 4 burden, but the benefits must greatly outweigh those
- 5 concerns.
- Q. And you say here that it's currently being delivered
- 7 across all forces in England and Wales?
- 8 A. As far as I'm aware with my last investigation, as I
- 9 say, all bar three forces across England and Wales
- 10 and -- apart from Scotland, all bar three forces have
- 11 taken it on board.
- 12 Q. And you may not know the answer to this, but is this a
- matter of time before Police Scotland sign up to this
- 14 course or are there maybe reasons why they're not
- signing up?
- A. As I say, obviously, it's their decision. Whether or
- not they've decided, I would recommend inclusion of that
- 18 particular style of training across the whole of the
- 19 country. As I said, the benefits are obvious and the
- take up has been tremendous, so I would highly recommend
- 21 that Police Scotland at least consider looking at the
- 22 process and signing up for the licence for the trainers
- 23 going through College of Policing.
- 24 Q. And you have described that as scenario based and
- 25 performance based?

- 1 A. Yes.
- Q. And is the view now that that is one of the most effective ways of delivering training to officers?
- 4 A. It's always been seen as probably the most effective way
- of getting -- getting certainly behavioural training in
- 6 relation to physical skills and applying that testing,
- 7 that knowledge in a live situation. As I say, it is
- 8 labour intensive and it is resource intensive, so it has
- 9 been something that I think forces have shied away from
- 10 in relation to cost and abstraction time, but it is
- 11 certainly something now that I think, with the work and
- 12 the evidence that's been gathered, some of which I have
- produced for the Chair in my attachments, the research
- that's gone into it over the last sort of four years,
- I think, you know, evidences the requirement for change.
- Q. And if the Chair wants to look into this new PPST
- 17 programme, what would be the best place to look?
- 18 A. I'm sure the College of Policing would be happy to
- 19 provide an overview of the programme. There's a short
- 20 precis that I have included in my documentation. The
- 21 full programme would have to be taken from the College
- of Policing.
- 23 Q. Thank you. And I think appendix P for papa of your
- 24 report says "ACPO PST Manual 2007 conflict management
- 25 model", but I don't think it's that --

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Α.

No.

-- that is linked, but there is J? 2 Q. "J" public and personal -- personal safety training APP. 3 Α. 4 That's the approved professional practice in relation to 5 content and what forces would have to follow to reflect 6 it. 7 Q. Lovely. So it's appendix J that would be the best one to look at for further detail? 8 It would, yes. It doesn't give the full programme in 9 Α. 10 relation to what it contains, but that would have to be provided by College of Policing. 11 12 Q. Thank you very much. Can we move on now to question 13 (f), and if we look at page 22 of your report: 14 "The principles of preclusion, justification and 15 necessity in relation to use of force." 16 Α. Yes. The Inquiry team have asked you to comment on this 17 Q. 18 specific issues and what trainings was available and is 19 available now. And you have pointed out at section 1 20 that in relation to -- well, really any point: 21 "The legal standpoint of preclusion is unique to Scotland as the main point when justifying any use of 22 force. In England and Wales the approach is one of 23 reasonable in the circumstances, with focus on the 24 25 necessity of its use. So the question is did the officer

1		need to use force, was that force reasonable in the
2		circumstances, and then we can look to see if a less
3		intrusive option was available."
4		So is it fair to say that in England and Wales they
5		do still consider whether a less intrusive or less
6		forceful option was available?
7	A.	Yes, that is correct.
8	Q.	That is part of consideration of use of force in England
9		and Wales?
10	A.	Yes, that's correct.
11	Q.	But the term "preclusion" is used uniquely in Scotland?
12	Α.	It is, yes.
13	Q.	Thank you. You've identified that preclusion is
14		mentioned in the 2013 Manual and you give that at the
15		latter part of your answer 1, page 5 and you talk about
16		there being a few small paragraphs on this and the very
17		last sentence mentions the NDM and it should be
18		considered at all times:
19		"The accompanying lesson plans appear to give the
20		trainer some minimal guidance on delivery and
21		contextualisation in addition to this, but do not hold
22		any manual references."
23		So having considered the paperwork, and looked
24		forward this concept of preclusion, what was your view
25		about the content in 2015 that was available in

1 Police Scotland?

A. It doesn't provide a great deal of explanation into how preclusion sits within a justifiable use of force. It really sort of I think rather than justifying what has been done, with preclusion, it actually sort of steers or guides an officer into explaining why they didn't do something, hence the terminology "preclusion", rather than concentrating on explaining what they actually did and why they did it and then, as a secondary requirement, explaining why they may not have chosen a less improve option.

An example based on the way the UK officers are -officers in England are trained, an officer may use a
baton strike, so I would look for the explanation from
the officer and the justification for that baton strike
and then that would be followed by a question of, well,
did you consider using an incapacitant? Did you
consider using a restraint hold? And then the answer
being "yes" or "no" and if it was, "no", why didn't you
consider it? If you did consider it, why did you rule
it out? So the preclusion comes after the justification
and explanation of why the force that was used was used
in those circumstances and then the preclusion comes
afterwards.

The emphasis within the use of force section within

- 1 the Scottish manual very much looks at that preclusion
- 2 as the first element and then the justification or the
- 3 reasonableness of the actions afterwards.
- 4 Q. Thank you. And what would you have expected to see in
- 5 the 2013 Manual about preclusion which you didn't see?
- A. I think some simple terminology, some simple questions.
- 7 I think a bit further on I explain this in section 3 in
- 8 relation to simple terminology. As I have just said,
- 9 what did you do, why did you do it, what was your
- 10 rationale, what were the impact factors you considered
- 11 to justify that action? Simple questions that an
- officer can relate to, rather than trying to get their
- head around a legality issue and understanding a term of
- 14 law.
- 15 Q. In section 3, which is on page 23, this is where you
- 16 talk about the training that's available from College of
- 17 Policing?
- 18 A. Yes, and also the emphasis that's placed upon it.
- 19 Q. And the emphasis as well as the content and this is
- 20 where we see the examples of the questions --
- 21 A. Yes.
- 22 Q. -- that you would expect an officer presumably to be
- able to respond to and that would be the type of thing
- 24 you would have thought would be in the 2013 Manual?
- 25 A. Yes, I would say if we were running scenario training,

1 even back then when scenarios, they would be the 2 questions that we would be asking the officer as part of 3 the debriefing process that have dealt with the 4 situation. We would have ended it and those are the 5 sorts of questions I would be asking, why did you do 6 what you did, did you consider, why did you rule it out? 7 If one was being trained by the College of Policing at Q. that time, you talk about the terminology that was 8 9 sometimes used being what was least intrusive or you 10 shouldn't use a sledgehammer to crack a nut? 11 Yes, it's very much part of the training around human Α. 12 rights application which looks at that particular area. And using simple questions, simple words, simple phrases 13 Q. 14 that people can understand? 15 Α. Yes. 16 Thank you. And you've looked at the training available Q. at that time and I think in section 2, which is back on 17 page 22 at the bottom, you say you were asked to express 18 19 a view on whether that training was fit for purpose, and 20 you said: 21 "In my opinion, no, it was not. Firstly, the NDM was not covered until page 18 of this module." 22 We've covered that with you? 23 24 Α. Yes. You talk about the module one of the 2013 Manual, 25 Q.

1 halfway down that paragraph:

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"... did not provide any practical examples or stated cases to assist officers in rationalising this information. It used outdated models and terminology which had been removed in the NPCC OST Manual and discontinued elsewhere in the UK."

And one aspect there, do you think that using practical examples or case scenarios is actually a useful way of sharing information with trainees?

Α. I think it is, certainly around use of force, not that everyone is slightly different, but it does give a baseline to officers in relation to what might be accepted in what and reasons why, you know, things might be deemed as necessary and, as I say, that missing -- as I testified yesterday, that missing element of the circumstances in which the officers find themselves is a very important and relevant context for others sitting outside to understand why an officer might have done something or why they might have gone down a certain route, a certain tactical option, because the circumstances to them may have appeared different to as they actually were or may have changed or been found not to be true, but the belief and the understanding of the officer at that time is one of the important elements that needs to be considered when officers are trying to

- justify use of force.
- 2 Q. So in your experience do real life scenarios, whether
- 3 it's hearing from individual officers who have been
- 4 through an incident or seen a video of that or real life
- 5 scenarios from cases and other inquests and other
- 6 reviews in different jurisdictions, does that have a
- 7 greater resonance with people who are training to become
- 8 police officers or who are police officers?
- 9 A. I think it does, yes. As I said, there are some stated
- 10 cases held within the NPCC manual, there have been some
- 11 updated ones recently, which just look at those
- 12 different elements of justification or use of force,
- looking at reasonableness, necessity and the
- 14 circumstances where officers have made mistakes on an
- 15 honest-held belief. So there is, you know, merit in
- using those, but with a caveat and a caution that that's
- not the black and white answer that the officer may be
- looking for, that we are looking at an area that is
- subjective and is dependent upon the review of a third
- 20 party, such as an inquest or a court.
- 21 Q. It is something that we commonly hear that you can learn
- 22 more from your mistakes than from things that you do
- 23 well?
- A. I would concur with that, yes.
- 25 Q. Can we move on to the next page. I would like to

1 continue with paragraph 2. You say: 2 "I do not believe that officers would be able to 3 fully grasp the concept of this important subject and, 4 as such, may struggle to apply this knowledge in an 5 operational context. I think they would struggle to later attempt to justify any action taken based on this 6 7 minimal information." And what you're saying here in relation to not just 8 9 being trained and being given knowledge and information, but applying that in an operational context, I'm 10 interested in that section? 11 12 As I say, I think using scenarios or using, you know, Α. 13 examples, real examples of how officers may justify 14 actions or choose certain tactical options based on the 15 information, that's imperative for them to get a fuller grasp of, rather than just this is -- it very much 16 17 appears in that section that it's you have power to do this, from this, and then there's nothing else to sort 18 of explain how that might apply to a live situation or 19 20 to an incident that they may be dealing with. 21 And so maybe knowing about the legal position may have Q. limitations for someone who struggles to understand how 22 it can be applied in an operational setting? 23 Yes, I think it's the practical application of that 24 Α. which is missing and it's an imperative area that 25

1		officers need to understand, otherwise they are going to
2		either shy away from using force when it is appropriate
3		or they're going to use force and then struggle to
4		understand and explain their rationale for using that
5		particular tactic or technique in that situation.
6	Q.	Thank you. Moving on to 2022 or the current position,
7		I think it's Section 6 of your response here:
8		"Current Police Scotland training is covered in the
9		2022 OST Manual and this now includes a more substantial
10		model, module 1, which is now specific to use of force
11		as well as a new module 17 looking at tactical report
12		writing in more detail and specifically around
13		justification."
14	Α.	Yes.
15	Q.	Can you tell us a little more about the current position
16		in Police Scotland?
17	A.	Yes. As I have mentioned there, the second section is
18		something that was included in the 2012 NPCC manual
19		where it gave practical guidance in relation to
20		justifying and using the NDM as a model to assist in
21		justification and writing their notes or their accounts
22		of a situation, understanding the important things to
23		include, the different areas of legality that need to be
24		hit when you are explaining or giving an account, that
25		practicality of just those simple things to include in

your notes is a very, very good learning tool and it 1 2 gives an aide memoire to officers who are sitting down 3 and then trying to explain or document their thought 4 processes. Thank you. And then I think at section 7 which we can 5 Q. see on the screen, you say: 6 7 "I believe the current training is fit for purpose in this area." 8 Yes, I do, yes. 9 Α. 10 Q. So those improvements have now resulted in the training being fit for purpose? 11 12 Α. Yes. 13 Thank you. And can we then move on to question (g), Q. which we see at the bottom of on page, is it, 23, and 14 15 this is the question that related to training on profile defender behaviour and reasonable officer response. 16 17 "This should include, but is not necessarily exclusive to circumstances in which the following are a 18 19 reasonable officer response. The drawing of CS or Pava 20 spray; the use of CS spray and use Pava spray, if 21 different; the use of batons; restraint; the use of handcuffs; the use of leg restraints." 22 And I think we've touched on some aspects of this 23 already --24 25 Α. Yes.

1 Q. -- in your evidence? I think in section 1, you talk about the 2013 Manual and the sections that cover 2 3 this -- these aspects of the training. You have said 4 this is only two pages. And then: "Whilst the information in this section is not in 5 itself incorrect, it appears that the NDM has just been 6 7 added to the old content at the end of the section." 8 Α. Yes. We've covered that. 9 Q. 10 "...and no effort has been made to integrate it or fully understand that it was designed to replace other 11 12 models which are still referred to in this section." So we've talked about this yesterday and today and 13 14 this again feeds into some of the issues and concerns 15 you have regarding this aspect of training as well. You talk about the manual not following a logical pattern, 16 17 and you say it does not flow, and I think you mentioned that yesterday? 18 19 Yes. Α. Now, with College of Policing in 2015, you have 20 Q. 21 discussed this at section 3, and you talk about the 2012 NPCC OST Manual? 22 23 Α. Yes. And by this time with College of Policing by 2012, they 24 Q.

had completely removed the levels for profiled subject

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1		behaviour and reasonable officer response?
2	Α.	Yes, the they were still there, but they weren't
3		numbered in a sort of a what might appear to be an
4		escalating ladder or a de-escalating ladder. The actual
5		subject matter or the headings were still there, but
6		there was more crossover whereby certain tactical
7		options could be considered earlier on or later on in
8		the system, so there was a lot of duplication in the
9		options that were available to officers across those
10		various subject profile behaviour.
11	Q.	I think we discussed this yesterday about the possible
12		confusing that could arise and so that had been
13		addressed by the College of Policing by simply removing
14		those references and that sort of ladder?
15	Α.	Yes, going more to the fact of officers being able to
16		better understand and better account for and justify
17		their actions.
18	Q.	Thank you. And then looking at the current training
19		delivered by Police Scotland, I think you address this
20		at 6?
21	Α.	Yes.
22	Q.	And you talk about the current OST Manual. You say:
23		"It fully incorporates the NDM and uses it as the
24		fundamental process to apply to assessing situations and
25		there are still some materials used elsewhere from the

NPCC Manual that would assist officers in fully 1 2 understanding and applying these principles that include 3 an aide memoire, accountability graphics in their 4 conflict management section." 5 That's the College of Policing documents? Yes, they're held within that section within the manual 6 Α. 7 and it could quite easily just be lifted across to assist an officer. 8 So there may be some useful graphics that could be 9 Q. shared --10 11 Α. Yes. 12 -- at the College of Policing, but essentially at 7, Q. 13 which we see right at the bottom, you now consider that 14 the Police Scotland training in this specific area is 15 fit for purpose? 16 I do, yes. Α. And that's not to say that further evolutions won't take 17 Q. 18 place, but as at the materials you looked at they're fit 19 for purpose? Yes. And as I say, we've had two years, I'm sure there 20 Α. 21 has been some development in that time as well. 22 And you've said College of Policing are continuing to Q. develop and support the documentation that they use and 23 to improve their own training? 24

A. Yes, and as I mention there about the new approved

professional practice which I mentioned for the PPST 1 2 programme, that's only just been released. So that is, 3 again, further development from 2022 from the College of 4 Policing. Thank you. And then if we can look at (h) which is the 5 Q. final question that was specifically asked of you and 6 7 this relates to and perhaps we can look back at section 4 to refresh -- actually maybe just look at page 25, 8 I think it is, yes, page 25, look at (h) and it's at the 9 10 top, and the Inquiry team asked: "Restraint insofar as it relates to the application 11 12 of weight and/or pressure applied to the subject during restraint; number of officers involved; length of 13 14 restraint; the use of a safety officer/officer to 15 monitor breathing of the subject; any risk to life caused by restraint." 16 17 So these -- this topic was asking you to comment on the training that was given by Police Scotland in 18 19 relation to restraint and matters involving restraint? 20 Yes. Α. 21 Q. And at (1) you say: "The 2013 OST Manual covers these topics in relation 22 to positional asphyxia" 23 24 Which we've talked about today? A. Yes. 25

1	Q.	"It highlights the increased risk of placing pressure
2		onto a prone subject. As previously mentioned, the
3		information was outdated and did not fully reflect that
4		being provided across the rest of the UK."
5		And we've talked about that earlier today. You talk
6		about the manual that's available with NPCC Manual on
7		medical implications and guidance that's given. You've
8		said that with Police Scotland you could find no
9		specific mention of the role of safety officer within
10		the 2013 Manual?
11	Α.	No.
12	Q.	And the you've looked at lesson plans, you have
13		looked at other materials, you couldn't find any
14		reference, specific reference, to the safety officer?
15	Α.	No, I couldn't, not that particular situation, no.
16	Q.	No. You said:
17		"The length of time a restraint can take to
18		successfully be achieved can vary massively depending on
19		a number of factors."
20		And you list those in bulletpoints there and they
21		can include the size and weight comparison between the
22		subject and officers:
23		"Officers are taught or were taught that any prone
24		restraint should be kept to a minimum and no more than
25		was absolutely necessary to achieve full restraint of a

subject, but no specific time limit was placed on that."

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2 That's correct, yes. Α. Q. And we've heard evidence that there is no time limit 3 that could be considered safe. So one could not tell 4 5 officers if you only restrained for a certain period of time that will be safe, because that's just not the 6 situation in real life? 7 No, you know, taking those bulletpoints ahead, every 8 Α. 9 situation and every subject is different. 10 Q. Right. And you said: "That was the same within the Police Scotland 11 12 materials and the NPCC training." 13 And finally you were unable to establish if during 14 training the option to disengage was discussed. 15 Α. Yes. So there wasn't any specific mention of the option of 16 Q. 17 simply disengaging and moving away from the subject. Now, we've heard evidence that one option would be to 18 19 say this restraint isn't working, the subject is too 20 vigorous, too violent, struggling to such an extreme 21 level that we cannot get this person restrained without taking too long and involving too much force so an 22 option for officers is to walk away. 23 Could you find any reference to that as an option in 24 the training materials for Police Scotland? 25

I couldn't find any reference in the training material. 1 2 As I said, it may be something that's been discussed by 3 trainers. It would certainly be something from the NPCC 4 training that we would certainly discuss with them, that 5 option of if you can't complete the restraint, and you're losing control or struggling to control them, 6 7 consider that withdrawal and that disengagement. But that would be very much dependent on the individual 8 Q. 9 trainer? 10 Α. Yes. And you were asked at section 2 if you thought the 11 Q. 12 training in relation to if I can call it restraint in 13 the broadest terms was fit for purpose and you said, no, 14 you didn't think it was? 15 Α. No. "It did not mention such factors as the subject's 16 Q. 17 requirement for oxygen or explanation of the breathing mechanism and how handcuffing or securing the arms and 18 shoulders could also increase the risk of asphyxiation." 19 20 Now, that was something, the subject's requirement 21 for oxygen, that I think Dr Montgomery on the video spoke about specifically? 22 23 A. Yes. But you couldn't find any reference to that in the 24 Q. Police Scotland materials? 25

- 1 A. Not within the positional asphyxial guidance, no.
- Q. "And whilst it raised awareness, it is my opinion that
- 3 insufficient time or importance was given to this
- 4 subject considering the work that was being carried out
- 5 in other forces to highlight these risks."
- 6 A. Yes.
- 7 Q. And part of that is, for example, the work that you've
- 8 described College of Policing doing which resulted in
- 9 the video of 2006?
- 10 A. Yes.
- 11 Q. "It would not make officers fully aware of the risk
- 12 factors and actions that could be taken to minimise
- 13 these risks."
- 14 So what was your concern about an officer who had
- received this training with Police Scotland when they
- were out on operational duties, given you've raised
- 17 these concerns about them not being fully aware of the
- 18 risk factors and actions that could be taken to minimise
- those risks?
- 20 A. I think one important bit of information, and it was
- 21 actually used as a tool on the video, the fact that
- 22 somebody is talking to you does not necessarily mean
- that they are not asphyxiating, they're not struggling,
- 24 and it's that understanding that it's about the ability
- 25 to take oxygen in, but also to exhale carbon dioxide to

- 1 remove that acidosis and that toxicity from the body. 2 So a person may be able to talk, may be able to respond 3 verbally, but that does not mean they are not struggling 4 to breathe or to exhale that carbon dioxide at that time 5 and that's very much -- I hear it quite a lot from 6 different cases that I have been involved in that, well, 7 the person was saying "I'm okay" or "get off me", therefore they were breathing. Yes, they were, but were 8 9 they breathing to such an extent that allowed them to 10 take in the oxygen that they required or to exhale and get rid of the toxins that they need to survive? 11 12 Q. And the message that was being delivered by 13 Dr Montgomery in the 2006 video, do you see that as an 14 important message that should be shared with officers? 15 Α. Yes, I think without that sort of caveat of being be 16 able to disengage an unsuccessful or prolonged 17 restraint, as he -- you know, he touched on that fact of that the person struggles more violently, therefore, 18 more restraint is used or heavier restraint is used and 19 20 the person is struggling because they need to breathe
- Q. And I think that's what Dr Montgomery described it as?

being used against more resistance.

24 A. Yes.

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Q. And then you've also pointed out that in relation to the

and it's that vicious circle of relation to more force

1 number of officers involved in a restraint you could 2 find no specific reference to a minimum or maximum and that reflected other training across the UK? 3 4 Yes, as I said, normally the limbs, legs, arms and head Α. 5 would normally be to a minimum of four officers, sometimes five or possibly even more, depending on the 6 7 circumstances. Thank you, and in section 3, which is towards the bottom 8 Q. 9 of the page, you talk about the training that was 10 delivered at that time by College of Policing and we've looked at the video already and you also say that -- can 11 12 we just see there's a section -- yes: 13 "The mention of a safety officer has been part of 14 OST training in relation to prone restraint, ABD and 15 positional asphyxia since around 2009." Now, I notice that it was mentioned in the 2006 16 video but you think that's been part of OST training 17 since 2009 --18 19 It went into the National Manual in 2009. Α. Right, so it was part of the video earlier, three years 20 Q. 21 before that? 22 Α. Yes. And then it was put into the actual National Manual 23 Q. 24 three years later? 25 Yes, it was guidance or advice that had been given to

- the Met in relation to that particular review, that
 review and that evidence was then taken to the national
 level by myself and was eventually incorporated into the
 - Q. Right. And as was said on the video, it's not a rank-specific role, so all the officers are taught because at any stage any one of them could be asked to take on that role?

next rewrite of the manual, which from memory was 2009.

- A. Yes, any officer could -- depending on how they arrive, could end up with the head in what we say is that's the best position to be so the person at the head is the best person to control and monitor that situation.
- Q. And I think a point that's made by you earlier today and on the video that it's recognised that the person controlling the head of the subject is probably in the best position to monitor and communicate with the subject.
- 18 A. Yes, definitely.

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- Q. So it's not just monitoring; there is an element of communication also.
- A. Yes, it's trying to use the de-escalation tools,

 communicate with that individual, advise them trying to

 get them to comply with -- stop resisting.
- Q. And that communication process doesn't stop even once the restraint starts?

And if we can look on the next page 5, and you say here:

- A. No, because part of that role is also communicating with
 the other officers so telling the other officers what
 needs to happen and making sure that they're not doing
 things that are contrary to what the other officers are
 doing so it's about a controlling situation as well as
 communicating and monitoring the subject.
- "Having taken the decision to restrain the subject, 8 9 officers would still have to control and assure the 10 subject however, I believe with the increased knowledge around this subject provided elsewhere at that time, the 11 12 hypothetical officers' awareness of monitoring and the 13 increased risk factors (exertion length of control and restraint period, likelihood of drink/drugs) would most 14 15 likely have been at the forefront of their minds."
 - A. Yes.

Q.

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- Q. So if an officer that we observed in the video or was available in the College of Policing at that stage you think that would have had an impact on behaviour if we look at the hypothetical reasonable officer?
- A. I would hope that it would have raised their concerns
 and made them look at the other options that were
 available to them, including disengagement.
- Q. Thank you. And then you've looked at the current position and moved on, the 2022 position, and considered

1 that, and you've said that it's now fit for purpose. 2 Yes, as I said, the only thing I wasn't able to fully Α. 3 rationalise was the fact of how much time was actually 4 given within that refresher period to the particular 5 subject. So that element of the refresher training and the amount 6 Q. 7 of time spent has not been information that you have been able to glean from the materials? 8 9 Α. No. 10 Q. But subject to that one reservation, you believe the current training now is fit for purpose? 11 12 Α. Yes, definitely. 13 So there has been a change since 2015? Q. 14 Α. Yes. 15 Thank you. And again looking at the current position Q. with College of Policing, we have already heard from the 16 17 Met in relation to that video that that reflects a much older set of training but you have said here: 18 "Understanding and training on this has continued to 19 20 be developed across the UK and Police Scotland have had 21 access to this information." 22 And again you have told us about College of Policing and the substantial inroads they have made in this area. 23 Yes, and I have produced some documentation that 24 Α.

specifically looks at ABD guidance from the College of

- Policing and also a lesson notes et cetera from 2015
- 2 input that was given to trainers.
- 3 Q. Thank you. And we'll find that in the appendices at the
- 4 rear of your report.
- 5 A. You will, yes.
- Q. You have provided those documents to the Inquiry.
- 7 I would like to move on to page 26, please. This is
- 8 where you provide us with a summary of your conclusions
- 9 and paragraph (a) you refer again to the reviews --
- 10 A. Yes.
- 11 Q. -- that we looked at -- yes -- well, you discussed
- 12 yesterday. They were 2010 and 2015 and you talk about
- both identifying similar problems and issues with OST
- 14 and its delivery and you said:
- 15 "Little or no work had been introduced between the
- first and second report and if anything, that situation
- may have worsened as the management appears to have been
- lost as there is no evidence of strategic oversight or
- 19 national leadership in relation to OST from the 2015
- 20 report."
- 21 A. Yes.
- 22 Q. And you indicate that this would have had a significant
- 23 impact on both the content, quality and emphasis placed
- on this important area of police training?
- 25 A. Yes.

1	Q.	And you've identified at (b), a number of the problems
2		and you say:
3		"These could have been addressed earlier, if a
4		workstream had been put in place by Police Scotland to
5		coordinate the amalgamation of the Scottish forces which
6		took place in 2013."
7	Α.	Yes.
8	Q.	And so your view is that those issues could have been
9		addressed at an earlier stage?
10	Α.	I believe with the two reports, certainly the 2010, I
11		would have expected that to be incorporated in the
12		rationale and strategic overview of the formation of
13		Police Scotland and then, you know, to see the same
14		very, very similar report being produced five years
15		later with similar recommendations is a surprise.
16	Q.	And you describe that as "a massive opportunity being
17		missed to create a robust system of OST delivery and
18		oversight by the new service"?
19	Α.	Yes.
20	Q.	And at (c) on the next page you also highlight a point
21		here that you mentioned yesterday that:
22		"It doesn't really matter what documents were
23		applicable at the time or have been produced for the
24		Inquiry. Due to the fragmented and unmonitored way that
25		OST was delivered across the force area at that time we

1 have no way of knowing whether the officers concerned 2 received what was expected or required. Even the SOPs in place to support this training were also lacking in 3 4 detail, in some instances contradictory and they offered 5 minimal strategic guidance to staff." 6 So not just the content is the issue but the actual 7 delivery --8 Α. Yes. -- is the issue. And you have said from the 2015 9 Q. 10 report, that was Inspector Young's. 11 Α. Yes. 12 "... it was clear there were large discrepancies in Q. 13 content and how it was being delivered across the force 14 area with no identified process for monitoring training 15 delivery at the local level. No method of 16 standardisation was in place even to check trainers were delivering what was expected." 17 18 That's correct, yes. Α. 19 Q. So had the training been provided in a way that was 20 consistent and monitored, would you have expected that 21 the officers would have better training prior to the 22 2015? A. Subject to my earlier comments, yes, I think, you know, 23 24 that ability to prove that at least a standard was being

achieved and was being followed would allow us to

1 understand exactly what they were being taught and then better identify where those spaces or lacking areas 2 3 were. 4 Q. Thank you. And then at (d) you say: "Information being provided was dated and not in 5 line with that being provided across the rest of the 6 7 country." Yes. 8 Α. Q. And overall at (e): 9 10 "It's [your] opinion in 2015 the lack of oversight is likely to have allowed variations in techniques and 11 12 the supporting information being provided to officers and as such strategic control had been lost, leaving 13 officers exposed to being taught incorrect skills or 14 15 misleading information." Is that correct? 16 17 And but you have said in (f) that: "There are marked improvements in the content and 18 manner in which OST is being delivered and this includes 19 20 the recertification programme for the trainers 21 themselves." 22 A. Yes. Q. So is it fair to say that generally overall, although 23 there are some areas where you have said there continue 24 to be issues that in some areas there have been 25

1	significant improvements?
2	A. Yes, I think the most important part of that is the fact
3	that there is now a process in place not only for the
4	reviewer and monitoring of the trainers and the training
5	but also the content and that constant improvement and
6	development of the product of the programme is now
7	in place and with that system there it can only improve
8	and continue to get better.
9	Q. Thank you. Could you allow me one moment, please,
10	Mr Graves?
11	MS GRAHAME: I appreciate that we're slightly early but I'm
12	about to move on to a completely different subject and I
13	wondered if we could be allowed to rise early?
14	LORD BRACADALE: Yes, in these circumstances we'll rise now
15	and continue with your evidence tomorrow morning at
16	10 o'clock.
17	THE WITNESS: Yes, sir.
18	COURT: Now we'll adjourn.
19	(4.09 pm)
20	(The hearing was adjourned to 10 am on Friday, 4 October
21	2024)
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2	MARTIN GRAVES (continued)
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4	Examination-in-chief by MS GRAHAME2
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