

RESTRICTED

Use of CS Spray
Within
Accident and Emergency Department
Victoria Hospital
Kirkcaldy
18 October 2014



1. Executive Summary

On Saturday 18 October 2014, officers from Police Scotland accompanied a get gears, to Victoria Hospital, Kirkcaldy, after had collapsed earlier that morning within a police vehicle following detention. While within the hospital became violent, attacking the officers and causing disruption in the Accident and Emergency Department. As a result, one of the officers discharged CS Spray in an effort to control

Under the Police and Fire Reform (Scotland) Act 2012, all incidences of Police Scotland use of firearms, including CS spray, must be referred to the Police Investigations & Review Commissioner (PIRC) for independent assessment.

Following investigation, the PIRC concluded that:

- The deployment by police of CS Spray was ultimately justified given the level of violence was exhibiting and the potential threat was posing to members of the public, NHS staff and police officers. However, the police should have taken more account of the known threat posed and should have exercised greater control of at an earlier stage.
- Police Scotland's operating procedures do not describe how to manage exposure to CS Spray within a hospital environment.
- The operating procedures provide too little guidance to officers working in Fife Division on the issue, use and storage of CS Spray.

The PIRC recommends that Police Scotland:

- Ensures that its procedure on managing exposure to CS spray in a hospital setting is clear and includes adequate guidance for NHS staff on what steps they should take following a CS discharge within NHS premises. This will involve liaison with all Health Boards to ensure a standardised national approach.¹
- Provides fuller guidance to officers in Fife Division in relation to the issue, use and storage of CS Spray and standardises these procedures throughout Scotland.

The PIRC is aware that Police Scotland is in the process of phasing out CS Incapacitant Spray with the introduction of PAVA Spray. This should be completed within 18-24 months. This will lessen cross contamination issues.





2. Background

Events leading to discharge of CS spray		



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Events following Discharge of CS Spray

The 'Major Unit' of the Victoria Hospital, Accident and Emergency Department remained closed for the morning of the 18 October 2014, after which it reopened with the exception of three cubicles, two of which were out of commission for 24 hours with the third finally re-opening on Monday 20 October 2014.

3. Methodology of Investigation

Under the Police & Fire Reform (Scotland) Act 2012, all incidences of Police Scotland use of firearms, including CS Spray, must be referred to the Police Investigations & Review Commissioner (PIRC) for independent investigations.

During the investigation PIRC investigators visited the scene and reviewed the following documents and articles: relevant law, CS Spray discharge Report, airwave transmissions, police reports, entries from the Scottish Intelligence Database, criminal history records, standard operating procedures, training records, operational statements submitted by police officers and witness statements obtained by Police Scotland. In addition PIRC Investigators re-interviewed a number of NHS staff and police officers. There is no CCTV for the incident as the CCTV within the Victoria Hospital was being replaced at the time of this incident. Police Scotland did not retain the CCTV from the vehicle used to transport following initial detention.

4. Investigation Findings

PIRC investigated events leading up to the discharge of the CS spray and also the events that followed its discharge.

Events leading up to discharge of the CS spray

While the use of CS Spray within a clinical environ	ment carries a risk, there is clear evidence that
behaviour escalated to a point where	posed a significant danger to police officers in attendance,
hospital staff and patients.	



Events following Discharge of the CS Spray
Personal contamination Immediately following the discharge, Police Sergeant attended at the hospital, primarily to provide welfare advice to Police Constable Whilst there also provided advice to NHS staff who were or duty on what they should do if they felt affected by the CS Spray.
Environmental contamination Nursing staff also sought guidance from Sergeant on what steps they should take to make the unit itself safe for use. Sergeant advised them to ventilate the room but this proved difficult as the Accident and Emergency Department had no external windows or doors. Staff turned up ventilation fans and the air conditioning system but this had a minimal effect. (It should be noted that approach may cause contamination of other areas within the hospital. The consequence of such an approach is covered within the document "Management of Exposure to CS Incapacitant Spray within a medical environment" which is referred to later in this report).
Nursing staff washed the area down but, unfortunately, this had the effect of reactivating the irritant and making its presence more pronounced.
Subsequently the 'Major Unit' was closed after discussion with the hospital's health and safety manager. This had an immediate impact on the A&E's operational capacity, by removing the nine beds in that Unit from use.
On Monday 20 October 2014, the south sought further guidance from Police Scotland via the 101 number and, in response; a police constable attended the unit and provided with an information sheet entitled:
'Police Service of Scotland Information to Owners/Occupiers of Premises where CS Aerosol Incapacitant Spray has been used'.
It provides advice on decontamination, including the following: -



"If the effects have not dissipated within one hour you should seek further advice from the Police"

The advised that staff, on their own initiative, had already taken the actions outlined in the information sheet and asked for further advice. reports that the constable (not named) was unable to provide any further information.

PIRC enquiries have identified that, following an earlier discharge of a CS Spray within the Southern General Hospital in 2012; Strathclyde Police developed a guidance document entitled "Management of Exposure to CS Incapacitant Spray within a Medical Environment'. This led to Police Scotland entering into Memoranda of Understanding (MOU) in May 2013, with NHS Greater Glasgow & Clyde, NHS Ayrshire & Arran and NHS Lanarkshire. A briefing paper for ACC Mawson, dated 30 April 2013, notes that, following the signing of the MoUs, copies of these would be forwarded to Police Scotland's National Reform Team to allow it to consider if similar MoUs should be drafted for other NHS Boards within Scotland. Police Scotland has not been able to clarify what steps, if any, were taken to progress this.

Recommendation

Police Scotland should ensure that procedure on managing exposure to CS spray in a hospital setting is clear and includes adequate guidance for NHS staff on what steps they should take following a CS discharge within NHS premises. This will involve liaison with all Health Boards to ensure a standardised national approach.

Management of CS spray in Fife Division

During the course of the investigation, the PIRC also found that Police Scotland's procedures in relation to the issue, use and and storage of CS Spray did not contain sufficient guidance for officers in Fife Division.

Appendix 'C' of the 'Use of Force' Standard Operating Procedure Version 1.03 merely states that:

"The former Fife Constabulary utilises the following forms to audit CS Incapacitant sprays: its

- Station CS Canister log
- Daily Control Sheet
- Temporary Storage log
- Information Sheet for persons Sprayed with CS Incapacitant
- Information to Owners/Occupiers of Premises where CS Aerosol Incapacitant Spray has been used
- Information Sheet for Custody Officers "

The investigation found that Kirkcaldy Police Office was not following this limited guidance. For example, the last completed daily control sheet for the issuing/return of CS Spray canisters was 07 October 2014.

The PIRC's enquiries also identified that an e-mail was circulated in Fife Division on 10 January 2014 by Inspector instructing that, when an officer deployed their CS spray, the canister should be





double-bagged, a label securely attached to the outer packaging, and then securely stored within the CS cabinet at the relevant station for uplifting the following day. This guidance was not followed in this instance. When interviewed by the PIRC's investigators, the officer with responsibility for the purchase, issue and collection of all CS Spray canisters within Fife Division (Police Constable Buttercase) confirmed that, on 13 November, when attending at Kirkcaldy office in relation to another matter, she found the canister deployed by Police Constable still lying sealed within a plastic bag with a production label attached at the bottom of the CS cabinet. Until that point she had not been made aware that there had been a discharge involving this CS Spray canister.

Recommendation

Police Scotland should ensure that it provides fuller guidance to officers in Fife Division in relation to the issue, use and storage of CS Spray and standardises these procedures throughout Scotland.