Origins

Founded by Sir Robert Peel in 1829, the Metropolitan Police Service (MPS) is one of the oldest police services in the world. The original Metropolitan Police District (MPD) covered a seven mile radius from Charing Cross containing a population of less than two million. This was policed by 1,000 officers.

Today, the MPS is made up of more than 50,000 officers and staff, which includes over 5,000 volunteer police officers from the Metropolitan Special Constabulary (MSC) and its Employer Supported Policing (ESP) programme.

The current MPD includes the whole of the Greater London Area, covering 620 square miles and over 8.3 million people. Since April 2000, the boundaries of the MPD have mirrored the 32 London boroughs as shown below.
Organisation

The Metropolitan Police Service (MPS) now employs over 50,000 people in a wide variety of jobs from uniformed police officers patrolling London’s streets to support staff providing essential support services. The Service also includes over 5,000 Special Constable Volunteers.

From the beginning, the purpose of the MPS has been to serve and protect the people of London by providing a professional police service; this remains our purpose.

The Commissioner of Police for the Metropolis is appointed by the Queen, in consultation with the Home Secretary. The Mayor’s Office for Policing and Crime (MOPAC) supervises the police service and publishes an annual policing plan, including performance targets. It reports back to the Mayor, the London Assembly and the community and has a role in the appointment, and if necessary, discipline and removal of senior police officers.

The MPS has an annual net budget of £3.6 billion – more than 25% of the total police budget for England and Wales. It is one of the largest employers in London and South East of England.

The Commissioner has outlined his vision of Total Policing with a total war on crime, total care for victims and total professionalism from our staff at its core. We are committed to delivering excellent policing from tackling anti-social behaviour and other crime in neighbourhoods, through to dealing with terrorists and the most serious criminals often ‘behind the scenes’. We rely on the work of warranted officers, police community support officers (PCSOs), special constables and police staff to tackle the range of policing challenges facing London.
The following chart shows how the MPS is structured.
MPS Values, Mission and Priorities

Our success depends on us all working towards the same goals. Our strategy, led by the Police Commissioner, Bernard Hogan-Howe, is called Total Policing. It consists of a set of priorities, set out below, supported by key values. Total Policing ensures that we are on the front foot in tackling criminality in all its forms. Where new techniques or new technology can help in that war, we will maximise use of it. Total Policing also means Total Care for victims – preventing people from becoming victims in the first place where possible but, where we have victims, ensuring that the MPS gives the best possible support. And we will do that with Total Professionalism, so that the MPS continues to foster the support and trust of law-abiding Londoners, while ensuring that it is an organisation that all criminals fear. All of this will be underpinned by our values of Courage, Compassion, Integrity and Professionalism.

Total War on Crime

We are crime fighters. This is a vital part of policing. Tackling crime, arresting criminals and bringing them before a court is the core of what we do, doing whatever we can to arrest criminals and stop crime as long as it is legal and ethical.

Total Victim Care

It is important that when a victim reports a crime that we tell them how that crime is being progressed and that they have confidence in those dealing with their case. We also need to ensure we are sensitive to the victim’s needs, understanding what is unique about them and how we tailor our service to meet their needs. We must always remember that we have a duty of care to our victims.

Total Professionalism

How we will achieve Total Policing as a whole is through Total Professionalism. Whatever we do, even where we have to be assertive, we do it professionally, courteously and, most importantly, we do it effectively. Setting standards and maintaining these standards across the organisation day in day out. We expect the highest standards from staff across the MPS and rightly so, the work of police is closely scrutinised. Likewise when officers and staff do an outstanding job they should know how much it is valued by the rest of the MPS, and no doubt the Londoners we serve. To make the MPS the best police service, everyone has an important role to play.
Our commitment to transform - ‘Met Change’

In October 2012 the Mayor’s Office for Policing and Crime (MOPAC) developed and prioritised the 20/20/20 vision for the MPS.

This requires the MPS to:

• Reduce key crimes by 20% - by providing 24/7 flexible specialist resource to address existing and emerging crime trends
• Improve public confidence by 20% - by improving the availability, efficiency and visibility of specialist support
• Cut costs by 20% - equivalent to a £500m budget reduction

To deliver on both the MPS’s vision and the challenges set by the Mayor, the MPS has developed a One Met Model which has at its centre a single corporate HQ. The Met Change programme is designing the future structure of the MPS to realise this transformation.

The One Met Model is made up of five areas of work - Neighbourhood Policing, Pan-London Services, Control Infrastructure, Met HQ and Support Services. These areas are not structures or business groups but describe how we will deliver our services differently. They will bring together key MPS functions which were formerly fragmented across the operational business groups, and enhance their capabilities. Under each area, work is taking place to design processes and structures that will deliver the services required by a modern Met and achieve the savings needed.

Within the Met HQ a new Commercial and Finance Directorate has been created in order to help meet the goal of delivering against the MPS’s vision. This Directorate will initially combine the Finance, Procurement and Property functions, and Shared Support Services, but has the potential to include additional functions once confirmation and approvals have been given.

Met Change and Total Professionalism are working together with co-ordinated engagement, messages and direction. Total Professionalism will support Met Change by preparing the organisation for the changes and challenges ahead by motivating staff and creating momentum and enthusiasm for the future of the MPS.

For further information on the Met Change model and the improvements we are making please visit our website on http://content.met.police.uk/Site/changingmet
WHAT IS A FORENSIC MEDICAL EXAMINER (FME)?

A Forensic Medical Examiner (FME) also known as a Forensic Physician (FP) or Forensic Medical Officer (FMO) in Northern Ireland provides medical service for police forces. FMEs have previously also been described as a divisional surgeon or police surgeon and have been part of the police service for over a hundred years. The Metropolitan Police Surgeons Association, now morphed into another organisation (more later) representing Police surgeons was formed in 1888. We hope that this will inform and entice you into working as a FME.

WHAT IS FORENSIC MEDICINE?

Forensic medicine covers doctors working in three related disciplines: forensic medical practitioners (forensic physicians, forensic pathologists, child and adult sexual assault examiners); medico-legal advisers; and medically qualified coroners.

WHO ARE YOUR PATIENTS?

The majority of your work will cover three groups of patients: detainees (adults or juveniles) who have been arrested on suspicion of committing a criminal offence, victims (of assaults) and police officers or staff. In some areas of the country sexual assault victims are examined in specialised sexual assault centres (SARCS or HAVENS) by sexual offence examiners (SOEs). This is the case in the MPS so if you are interested in adult or child sexual offence examinations the work is based in the HAVENS at St Mary’s, Kings College and the London Hospitals. General forensic work provides useful background experience for sexual offence work.

WHO ARE YOU WORKING WITH?

You will be working with custody sergeants, police officers, dedicated detention officers, interpreters, liaising with solicitors and supporting custody nurse practitioners (CNPs). There is a roll out of CNPs who are based at a custody suite. You may be requested to review detainees with complex medical problems, prescribe medication or provide an opinion in support of the CNPs. It is therefore essential that you have good communication and multidisciplinary team working skills.
WHAT IS A FORENSIC MEDICAL EXAMINER (FME)?

WHY DO WE NEED A SPECIALISED ROLE?

This role is specialised and cannot be simply abrogated to doctors without training as it requires knowledge of medical jurisprudence i.e. of the Police and Criminal Evidence Act (PACE) which applies in custody, detailed knowledge of consent and confidentiality, Data Protection Act 1988 as it applies in the criminal justice setting, the ability to acknowledge legal elements in an examination and to record them in a forensic manner. You will also be expected to provide high quality statements and be able to produce live evidence in court or to a coroner.

All consultations by FMEs have a potential forensic element; so all doctors need to be properly trained and forensically aware. A good knowledge of psychiatry is important as you will also inevitably perform a large number of mental health assessments as many who are psychotic and violent are still being brought to custody on s136 due to their behaviour.

Although traditionally most FMEs are general practitioners who undertake forensic work on a part-time basis, there are an increasing number who work as specialists in clinical forensic medicine. There is a Faculty of Forensic & Legal Medicine which sets the membership examination and work is underway to achieve speciality status. The art of clinical forensic medicine is based on knowledge and experience. It is essential that, within the ethos of best value, we do not lose sight of the importance of having appropriately trained and supported doctors in the criminal justice system.

WHAT DO YOU NEED TO DO TO BECOME A FME?

The following are our current entry requirements:

• Clean driving licence
• No previous bankruptcy or criminal record
• GMC licence/revalidated
• Medical Defence Organisation indemnity
• Successful completion of a Faculty of Forensic & Legal Medicine approved Introductory forensic course
• Successful completion of 6 work based assessments (WBAs)
• A life support course of minimum Immediate Life Support (ILS) level
• You will require your own vehicle and mobile phone, as you will be providing cover to several police stations in an area.
WHO EMPLOYS ME?

You will be classified as a self-employed contractor in the MPS. This means that you can choose when and where you wish to work (if available). This flexibility suits many doctors who are already employed.

SHIFT TIMES?

00:30 – 06:30
06:30 – 12:30
12:30 – 18:30
18:30 – 00:30

Shifts will be allocated in a MPS defined area where available. A maximum of two sessions (12 hours) can be worked in a rolling 24-hour period.

WHAT IS A FORENSIC MEDICAL EXAMINER (FME)?
WHERE WILL I BE WORKING?

In the MPS, there are 12 FME areas. You will be covering the custodies (police stations with detention cells), hospital drink drives and sudden deaths within an area.
Job title: Forensic Medical Examiner

Location: Throughout the MPS

Responsible to: Medical Director and the Forensic Healthcare Services (FHS) Manager

AIM

To provide an effective forensic healthcare service to custody suites within the MPS. The services to be provided by a FME include:

• Conducting clinical assessments of detained persons, particularly those with drug or alcohol problems, identifying appropriate interventions, health and safety risks, making recommendations regarding care regimes or referral to external health providers and determining whether or not an individual is fit to be detained, interviewed, charged, transferred or released from custody

• Conducting clinical assessments of victims or police officers/staff as required recording injuries in a recognised forensic manner

• Attending the scene of sudden deaths and raising concerns if there are suspicious circumstances

• Taking forensic samples relating to matters as determined by the Police and Criminal Evidence Act 1984, Codes of Practice

• Assessing a person’s ability to drive a motor vehicle under the Road Traffic Act Section 4 and taking forensic samples under the Road Traffic Act Section 4 as required

• Completing statements and attending court when required

• Providing advice and guidance to a variety of police personnel, such as Custody Sergeants, investigating officers and individual staff on a range of issues e.g. the health and welfare of detained persons, dealing with ad hoc queries to protect the health, safety and welfare of those within the police environment

• Undertaking Mental Health Act assessments, if suitably qualified under the Mental Health Act 1983 and referring to the local Psychiatric team if admission is required. If not section 12 approved, referring to Court Liaison/Local Psychiatric team.
Additional services to be provided by FMEs if qualified may include:

- Examining where required alleged child victims of: neglect, physical or sexual abuse, including joint examinations with Paediatricians. Additionally the provision of reports on these cases to solicitors, social workers and CICA may be required.
- Conducting examinations of adults complaining of serious sexual assault and alleged perpetrators.

This list is not exhaustive.

**CRITERIA FOR FORENSIC MEDICAL EXAMINERS**

Forensic Medical Examiners in the MPS are required to demonstrate that they have maintained the criteria set which are:

- An annual return of 6 WBAs
- Safeguarding and diversity training
- A valid ILS certificate
- A minimum of 20 hours’ forensic related CPD
- Youth supervision clearance and security clearance (papers will be sent to you during the recruitment process).
ELIGIBILITY CRITERIA

The MPS is committed to safeguarding the welfare of children and vulnerable adults. As part of these safeguards, the MPS adopts a consistent and thorough process of safe recruitment in order to ensure that all MPS staff and volunteers are suitable. Posts that involve a high level of contact with children and vulnerable adults will additionally require a Criminal Record Bureau (CRB) check.
MAKING AN APPLICATION

• Your application will be assessed against the role criteria.

• If successful at this stage we will contact you regarding an informal discussion date. You will receive a minimum of seven days’ notice. If you are unsuccessful at this stage we will also write to you and advise you of this.

• The formal discussion will be a competency-based interview and questions will be posed around the criteria for the role in question, as set out in the advert and information pack.

• If successful at the formal discussion we will send you an initial offer of a contract for services which sets out what happens next.

• If unsuccessful we will also advise you in writing but will be unable to offer feedback.
WHAT TO DO NEXT

Please e-mail your completed application to the preferred option: TPHQMailbox-.ForensicHealthcareServices@met.pnn.police.uk

If you do not have access to a computer, please send your application to:

Forensic Healthcare Services
15th Floor,
Empress State Building,
Lillie Road,
London,
SW6 1TR

Please do not e-mail and send an application by post as this can cause duplication. The above e-mail address should not be used for general enquiries, please visit www.metpolicecareers.co.uk, which includes an ‘Answering Your Questions’ section.

• The recruitment process is thorough and consequently can be quite lengthy.
• Shortlisting and a formal discussion will be based on the criteria listed.
• All completed applications received will be acknowledged in writing. Until an offer of appointment is confirmed in writing, you should not assume your application has been successful.