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Father Seeks Reform After Son Dies During Police Restraint

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A father is calling for urgent reform in the way mental health incidents are handled by law enforcement after his son, Kaine Fletcher, died following a police-led welfare check in Nottingham. The 26-year-old was suffering from a psychiatric episode when a situation meant to ensure his safety spiralled into a fatal restraint, raising questions about protocol, preparedness, and accountability. In the early hours of July 3, 2022, officers responded to a call at a young person's housing unit run by the YMCA, where concerns had been raised about Fletcher's mental state. Initially cooperative, he later became distressed and no longer believed the officers were genuine. He was then detained under the Mental Health Act, a legal provision allowing for involuntary treatment during psychiatric crises.

During the incident, Fletcher was handcuffed, placed in three sets of leg restraints, fitted with a spit hood, and subjected to physical force, including baton strikes and punches that officers described as "distraction tactics" intended to prevent self-harm. The prolonged use of force lasted around 30 minutes. Fletcher was transported to Queen's Medical Centre in Nottingham, where he died a few hours later. The medical cause of death cited the physical strain of restraint, compounded by the effects of cocaine and other substances.

Following a four-week inquest at Nottingham Coroner's Court, the jury concluded that there were "gross failings" in the handling of Fletcher's case, and that the combined force used by officers was "uncontrolled." While the level of restraint was deemed "appropriate" in principle, how it was carried out contributed significantly to his death.

Nathaniel Ameyaw, Fletcher's father, criticised the actions of the officers and broader system failures. "I am disgusted, and I am convinced that had not done what they did for that length of time, Kaine would still be here now," Ameyaw told the **BBC**. He emphasised that his son needed medical care, not physical confrontation. "He wasn't a threat; he hadn't lashed out at anybody. He needed help."

The Independent Office for Police Conduct (IOPC), which investigates police conduct, found no evidence of criminal wrongdoing or grounds for disciplinary proceedings against the officers involved. However, the inquest revealed that both Nottinghamshire Police and East Midlands Ambulance Service (EMAS) breached a joint operational policy by failing to call for an ambulance after detaining Fletcher, a step that could have altered the outcome. The assistant coroner has since issued a Prevention of Future Deaths report to both organisations, citing a "lack of understanding" of the existing procedures.

Fletcher's family had previously sought urgent mental health support. He had been referred to local services earlier in the year but was discharged without receiving any treatment. Relatives described repeatedly pleading with providers for inpatient care, only to be told that no beds were available. His condition reportedly deteriorated in the weeks leading up to the incident. Ameyaw believes the system failed his son on multiple levels, stating that people in crisis should not be treated as criminals. "What we want to see change is that other people are treated differently when they're in a mental health crisis, not with a heavy-handed approach," he said.

In a statement, Assistant Chief Constable Suk Verma of Nottinghamshire Police described the incident as a "challenging and fast-moving medical situation," and affirmed the department's commitment to reviewing the findings. Ifti Majid, Chief Executive of Nottinghamshire Healthcare, acknowledged the jury's conclusions and issued an apology, admitting that some elements of Fletcher's care fell short of expected standards.

As the public debate around mental health response continues, the case has become a stark example of how systemic shortcomings and procedural gaps can lead to irreversible consequences. Fletcher's family remains hopeful that future interventions will prioritise care over force, ensuring those in distress receive the help they urgently need.