

# Mental health training for police officers: A randomised controlled trial

The aim of this RCT is to see if the specially designed training package delivered face to face can improve outcomes for individuals who have mental ill health and for police handling of their situations.

## Key details

<b>Status</b>	Complete
<b>Lead institution</b>	<a href="#">University of York</a>
<b>Principal researcher(s)</b>	Alison Booth <a href="mailto:alison.booth@york.ac.uk">alison.booth@york.ac.uk</a>
<b>Police region</b>	Yorkshire
<b>Level of research</b>	Professional/work based
<b>Project start date</b>	September 2015
<b>Date completed</b>	March 2017

## Hypothesis

The mental health training intervention for frontline police officers aims to reduce demand on police resources through improving officers' knowledge, awareness and understanding of mental ill health and vulnerability, referral pathways (including knowing who to call and when), and the skills necessary to work both with people in mental health distress and with colleagues in partner agencies. It will enhance knowledge around how staff can:

- Identify mental vulnerability
- Record relevant information using available systems

- Respond using appropriate internal and external resources
- Refer vulnerable people into services to provide longer-term assistance
- Review incidents to make sure that risks have been effectively managed

Introducing additional training imposes a burden on police time and other resources and therefore needs to be carefully evaluated to ensure it achieves the desired impact.

The aim of this RCT is to see if the specially designed training package delivered face to face can improve outcomes for individuals who have mental ill health and for police handling of their situations.

This RCT is part of a larger research project entitled "Connect Project".

## Geographical area

North Yorkshire.

## Target sample size

After randomisation: there will be 328 officers in the stations eligible to receive the training intervention and 394 officers in the control stations.

## Participants - inclusion criteria

Police stations will be recruited and randomised to two groups. Response and safer neighborhood team officers within the ranks PCSOs, Police Constables, Inspectors and Sergeants will be included in the trial. The police officers from the stations in one group will be given new mental health training and the other group will receive any planned routine training and be a 'business as usual' control group.

## Interventions

Following the training, we would expect officers to:

- Have a greater awareness and knowledge of a range of mental health conditions and be better equipped to identify mental health vulnerabilities; and communicate with people with mental ill health;

- Understand the importance of and mechanisms for recording incidents involving people with mental ill health;
- Understand of the types of services and organisations that exist locally, and ways to refer people experiencing mental health difficulties;
- Be aware of the various roles and organisations who may be involved with a person in mental health crisis (ambulance crew, approved mental health professionals, doctors, social workers, A&E staff, care home staff, etc.), their responsibilities and the restrictions facing each;
- Gain some insight into the real-world experiences of people with different mental health conditions.

## Study design

This is a pragmatic, cluster randomised controlled trial.

## Outcome measures

The primary outcome will be the total number of calls made to the police control room that have 'warning markers' or 'tags' indicating that an individual with mental ill health and/or vulnerability is involved. Data will be collected pre-intervention (April 2016) and 6 months after the delivery of the intervention. A random sample of 10% of included calls will be audited independently to verify relevance of flagging and tagging.

Secondary outcomes include: frequency of calls made out of hours vs. office hours, number of frequent callers and use of 136 of the Mental Health Act. (TBC)

Pre and post intervention questionnaires will explore:

- attitudes to mental ill health;
- communication with people in mental health distress;
- responses to scenarios in questions;
- referral routes and multi-agency working relating to people with mental ill health.

## Summary of findings

The final reports are available on the [Connect Project website](#).