

Situation	Main research aims	Inputs	Outputs		Outcomes (need to be measurable)		Impact
			Activities		Short	Medium/Long	
<p>The need:</p> <p>1. A consistent, evidence based approach across the service is needed to deal with issues around managing individuals with mental vulnerability (IMV).</p> <p>2. Currently there is a lack of understanding of mental vulnerability, and difficulties in identifying, recording, response, referral and review.</p>	<p>1. Inform the development, testing and implementation of new ways of police (and partnership) working to identify, record, respond, refer and review IMVs.</p> <p>2. Evaluate training packages (outcome and process evaluations)</p> <p>3. Evaluate the extent to which better cooperation has the potential to reduce costs</p> <p>4. Professional development in research utilisation and knowledge transfer/exchange to enhance understanding and use of 'research evidence' in policing, and its translation in to practice</p> <p>5. Explore the efficiencies of current partnership working and enhance partnership working</p> <p>6. Increase awareness/knowledge of mental health issues in police</p> <p>7. Police personnel to study for Masters' degree</p> <p>8. To work with service users to enhance project impact</p>	<p>What we invest:</p> <ul style="list-style-type: none"> Personnel Partners Collaborators Services Service users Funding (£.9m) Contributions in kind (£.12m) Equipment (e.g. computers, measures) Time Facilities (e.g. meeting rooms) Technology (e.g. conference calls, data analysis software) 	<p>What we do:</p> <ul style="list-style-type: none"> Develop programme of works, refine work-streams, produce Theory of Change RCT: mental health training package Research training Survey (N=approx 3000 police) beginning and end of entire project Understand partnerships Dissemination – publications, conferences, social media Multi-agency research cafés and partnership days, to include service users Systematic reviews Deliver/attend Masters programme in Public Administration Co-production with/inclusion of service users 	<p>Who we reach/involve:</p> <ul style="list-style-type: none"> Police NYP College of Policing British Transport Police Ambulance services Accident and emergency services Mental Health Trust Voluntary and charitable organisations Public Service users Policy makers Local commissioners Local authority Academia 	<p>Short term results:</p> <p>Police/partners:</p> <ul style="list-style-type: none"> Mental health awareness Knowledge Attitudes Opinions Aspirations Motivations Use of evidence Improved identification and recording, and referral Increased partnership working <p>Public/recipients of new service/s:</p> <ul style="list-style-type: none"> Improved/more consistent police response Improved access to support and advice 	<p>Medium term results:</p> <ul style="list-style-type: none"> Increased police awareness of mental health issues Improved response, referral and review Reduced costs (e.g., in custody time for IMVs) Improved partnership working with other services <p>Long-term results:</p> <ul style="list-style-type: none"> Embed evidenced interventions/practices Reduced incidences of mortality related to self-harm Reduced costs on health/social services. Increase in evidence informed and innovative services Use of NY approach nationally 	<p>1. Police are more confident and informed in dealing with individuals with mental vulnerability</p> <p>2. Individuals with mental vulnerability should be confident that they will receive the best service from the police and partners, which should lead to less potential distress in times of need</p>

ASSUMPTIONS: Collaborative and efficient partnership working with key stakeholders, particularly between police, university, health. Police officers' willingness to participate/learn and be motivated to change behaviour

EXTERNAL FACTORS: Time constraints, Align with Concordat Action Plan