## The need:
1. A consistent, evidence-based approach across the service is needed to deal with issues around managing individuals with mental vulnerability (IMV).
2. Currently there is a lack of understanding of mental vulnerability, and difficulties in identifying, recording, response, referral and review.

### Main research aims
1. Inform the development, testing and implementation of new ways of police (and partnership) working to identify, record, respond, refer and review IMVs.
2. Evaluate training packages (outcome and process evaluations)
3. Evaluate the extent to which better cooperation has the potential to reduce costs.
4. Professional development in research utilisation and knowledge transfer/exchange to enhance understanding and use of ‘research evidence’ in policing, and its translation into practice.
5. Explore the efficiencies of current partnership working and enhance partnership working.
6. Increase awareness/knowledge of mental health issues in police.
7. Police personnel to study for Masters’ degree.
8. To work with service users to enhance project impact.

### Inputs
1. **What we invest:**
   - 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)

2. **What we do:**
   - Develop programme of works, refine workstreams, 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

3. **Who we reach/involve:**
   - 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

### Outputs
1. Inform the development, testing and implementation of new ways of police (and partnership) working to identify, record, respond, refer and review IMVs.
2. Evaluate training packages (outcome and process evaluations)
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4. Professional development in research utilisation and knowledge transfer/exchange to enhance understanding and use of ‘research evidence’ in policing, and its translation into practice.
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### Outcomes (need to be measurable)
- **Short term results:**
  - 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.
- **Long term results:**
  - 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.

### Situation
- **ASSESSMENT:** 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.

### Evaluation
- **EXTERNAL FACTORS:** Time constraints, Align with Concordat Action Plan.