

THE STATE HOSPITALS BOARD FOR SCOTLAND

**ANNUAL REPORT**

***Research Committee and Research Funding Committee***

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## 1 Core Purpose of Committee

Within the NHS, it has been shown that research not only furthers knowledge but improves staff morale, recruitment and retention, and patient care. Research is therefore core to the business of The State Hospital and to our pursuit of evidence based practice. The skills obtained by those engaged in research are directly transferable to other areas of health care such as service planning, teaching and management. The State Hospital has shown a considerable commitment to research and has a proven track record.

The research committee aims to support the use of data and research evidence as part of an evidence based culture aimed at improving both patient care and the patient experience of care, though a focus on continuously improving practice. The ongoing development of an evidence based culture will be achieved through a focus on training, developing staff competencies in transferable research skills and increasing research capacity.

## 2 Current Resource Commitment

<b>Allocation per Financial plan</b>	<b>2023/24</b>	<b>2024/25</b>
<b>Recurring Funding</b>	<b>95,000</b>	<b>95,000</b>
<b>Research Grants Committed</b>	<b>2023/24</b>	<b>2024/25</b>
<b>TRACE Study</b>	<b>5,141.00</b>	
<b>Research Fellow Post</b>	<b>53,073.99</b>	<b>59,370.16</b>
<b>Research Assistant Post</b>	<b>21,303.19</b>	<b>22,537.04</b>
<b>Clinical Model Evaluation</b>	<b>32,573.16</b>	<b>32,707.28</b>
<b>TOTAL</b>	<b>112,091.34</b>	<b>114,614.48</b>
<b>Funds remaining to be allocated</b>	<b>-17,091.34</b>	<b>-19,614.48</b>
<b>Research Grants Spent - to date</b>	<b>2023/24</b>	
<b>TRACE Study</b>	<b>4,182.00</b>	
<b>Research Fellow Post*</b>	<b>53,073.99</b>	
<b>Research Assistant Post*</b>	<b>21,303.19</b>	
<b>Clinical Model Evaluation*</b>	<b>32,573.16</b>	
<b>TOTAL</b>	<b>111,132.34</b>	
<b>Funds available less spend: Under / (over spend)</b>	<b>-16,132.34</b>	

\*It should be noted that majority of spend on these studies and roles is based on accrual due to ongoing problems with the University of Edinburgh finance system and overdue invoices.

## 3 Summary of Core Activity for the last year (05/04/2023 – 04/04/2024)

### 3.1 Forensic Network Research Special Interest Group Conference 2023

The Forensic Network Research Special Interest group (FNRSIG) held its tenth national Forensic Network Research Conference on the 2<sup>nd</sup> of November 2023. As was the case in 2021 and 2022 the conference was provided using a remote online format through MS Teams.

The day was chaired by Dr Daniel Bennett, current chair of the FNRSIG, and featured keynote presentations by **Professor Brian McKenna** (Auckland University of Technology) on Equity, Diversity & Inclusion in Research: *Challenges, Solutions & Successes* and **Dr Rhoda MacRae** Reader (University of the West of Scotland) on We're Trying To Do The Best We Can: *Caring for People Living with Dementia in Prison*.

This national conference included significant contribution from State Hospital staff displaying work conducted within the hospital including:

Social contagion and other environmental predictors of increased violence within a high security forensic hospital. Jake Easto

Mind the Gap: The paradoxical experiences of patients, carers and staff in the management of violence and aggression. Lindsay Tulloch

All cause and avoidable deaths across the Scottish Forensic estate. Cheryl Rees

More alike than different? Identifying the salient personal, clinical and forensic factors discriminating high, medium, and low secure patients using the Forensic Network forensic inpatient census. Dr Lindsey Gilling McIntosh

The conference received excellent feedback from delegates in relation to both content and the online format that made the conference possible. The 2023 FNRSIG Research Conference plans to resume to an in person event and is scheduled to take place on the 7<sup>th</sup> of November 2024 in Stirling Court Hotel.

### 3.2 Priority Research Themes

This section provides details of the priority areas for research identified within the Research Portfolio Workshop, which took place on the 29<sup>th</sup> of April 2021. The priority areas for research as identified below will feed into the process of developing a new updated Research Strategy for 2024-2027.

**Table 3.1: Priority Research Themes**

<b>Priority Research Themes as identified in Research Portfolio Workshop 2021</b>
Staff Wellbeing
Intellectual Disability
Neuro Developmental Disorder
Impact of Research on Clinical Practice
Links to Realistic Medicine
Impact of Covid-19 on service provision and patient and staff wellbeing
CAMHS

### 3.3 Research into Practice

The Research Committee are committed to ensuring that research and evaluation have a positive impact on clinical and non-clinical practice, and support the improvement of services and the experience of those who utilise those services. In August 2021, a full time Research Fellow post was approved by the research committee to support the aims of the Research Committee. The ongoing work of the Research Fellow is highlighted overleaf.

### **Postdoctoral Research Fellowship in Forensic Psychiatry**

The 2020 TSH Research Portfolio Review set out plans to support the development of a high-quality national research programme in forensic mental health. This programme would include undertaking research and analysis on the Scottish forensic mental health population, an examination of pathways of care through forensic services, and exploration of patient and service-level outcomes. A number of actions were set out to achieve this new vision. To assist in progressing these actions, the State Hospital Research Committee committed to funding a four-year postdoctoral research fellowship hosted at the University of Edinburgh. The purpose of this role is to:

1. Lead research across four primary workstreams: existing national datasets, routine patient outcome monitoring, mapping service pathways, and evidence-based practice and clinical decision-making.
2. Support the development of additional forensic mental health research capacity in forensic mental health by securing external competitive funding, and by developing opportunities for student research projects across various postgraduate programmes.
3. Strengthen interdisciplinary academic research links between State Hospital and Forensic Network researchers and clinician-researchers to researchers within the University of Edinburgh (including clinical psychology, law) and other higher education institutions both in the United Kingdom and internationally.

In August 2021, Dr Lindsey Gilling McIntosh was appointed to this role following her completion of a PhD in Psychiatry funded by Forensic Network and the State Hospital. Dr Gilling McIntosh is a member of the State Hospital Research Committee and provides regular reports to the Research Committee on how progress in the role contributes to the objectives of the State Hospital Research Portfolio as well as wider research and evaluation aims. In 2023/2024 the following accomplishments have been achieved through this postdoctoral research fellowship role:

#### Primary research

Completed re-analysis of the inpatient census data (multi-nominal logistic regression) with additional variables relating to index offence.

Quantitative analysis of TSH referrals for transfer data on study 'Pathways of Progression through Scottish Forensic Mental Health Services'.

Research and write up of 'International Perspectives and Practice Differences' (Book chapter) in Oxford Textbook of Correctional Psychiatry (2<sup>nd</sup> edition) with L Thomson.

Developed review protocol, undertook search and sift for study 'Involving forensic inpatients in decision making about their care and treatment'.

#### Research planning

Proposal development of research programme examining clinical decision-making process in forensic mental health

- Welcome Trust Early Career Award Application (<60 months) - October 2024 submission
- Chief Scientist Office Response Mode Applications (<36 months) - June 2024 submission

Strengthening of academic research links to the emerging interdisciplinary Edinburgh Mental Health Network through membership on the Network's steering committee, as well as with the International Association of Forensic Mental Health Service by service on the conference scientific committee and IAFMHS newsletter editorial team.

Contribution to postgraduate teaching for clinical psychology practitioners, including the delivery of teaching on the forensic module for second and third year Doctorate in Clinical Psychology trainees, and on psychological science and research methods in the MSc Psychology of Mental Health (Conversion), which is a popular academic route to the Doctorate in Clinical Psychology degree.

One specific example of research findings being used to support improvements in practice comes from the study: **‘An evaluation of the impact of an educational programme on dementia care in secure settings’**. The study was completed in 2022, final report delivered in 2023, and a group of staff were followed up after 2 years to explore the ongoing impact on clinical practice.

#### **‘An evaluation of the impact of an educational programme on dementia care in secure settings’**

The original research evaluation demonstrated knowledge gain following attendance at the training. A representative from the School of Forensic Mental Health was invited - as an objective reviewer - to capture staff perspective of the longer term impact of this educational initiative two years on. In Spring 2024 1:3 staff who completed the original training programme were interviewed. A summary of feedback provided is outlined below.

The initial educational programme and positive research findings seem to have acted as a catalyst for change. All staff interviewed found the initial bespoke half day training programme beneficial, specifically because it was tailored to the needs of an individual they were caring for at the time. Without exception they have all used the knowledge and skills gained at training on a daily basis, now with four patients with different presentations. There was a general consensus - accompanied by a sense of pride - that the ward is now viewed as having a team who have the expertise to effectively manage patients with dementia.

All staff expressed the view that their confidence has improved.

*“we feel more confident to do the right thing and understand why patients behave in the way they do”.*

Staff have found themselves more able and capable of managing situations, given the techniques and strategies they learnt both at the course and with follow up 1:1 support from clinicians from various professional backgrounds. The initial and on-going follow up training has enabled greater recognition of different features of varied types of dementia. Members of the wider multi-disciplinary team have provided additional information, as required, which has resulted in the implementation of improved approaches to caring for people with dementia. The multi-disciplinary learning approach has strengthened work relationships and improved team cohesion.

Staff often now find themselves in the position of advising others - who are either students or new to the ward - in these helpful techniques and strategies, thus increasing awareness across the wider organisation.

Professional leads of this initiative have been shortlisted as finalists in the Nursing in Mental Health category - for the second year in a row- at The Nursing Times awards.

#### **4. Performance against Key Performance Indicators**

Number of study proposal reviews:	14
Number of study progress reports:	24
Number of study final reports:	4
Number of studies approved:	6
Number of peer reviewed publications:	15
Number of ongoing studies:	16

The figures given above comprise the key performance indicators as required within the Clinical Governance annual report. These indicators give an indication of the level of research activity monitored by the Research Committee, but are not measured against any specific target. Appendix 1 provides further details on the range of studies completed and the way in which the TSH research activity has been disseminated on a local, national and international basis.

**Table 4.1: Annual KPI Performance**

KPI	2021/22	2022/23	2023/24
Number of study proposal reviews	12	17	14
Number of study progress reports	10	16	24
Number of studies approved	8	6	6
Number of peer reviewed publications (Total number of publications)	12 (14)	11 (14)	15 (16)

**Table 4.2: Research by Professional group 2023/24\*.**

Profession	Completed studies	Ongoing Studies	Total
Psychiatry	1	5	6
Psychology	3	4	7
Nursing	2	6	8
SW	0	0	0
AHP	1	0	1
Other	0	1	1

*\*Figures are affected by the Multi-disciplinary nature of some study teams.*

## 5. Quality Assurance Activity

The Research Committee undertakes a series of Quality Assurance activities for every Research Study or Service Evaluation to be undertaken within the hospital. This starts with the in depth review that every proposed study undergoes prior to approval. Advice can be sought from the Committee via an outline proposal if preferred prior to commencing the full process. Study leads must submit a full study proposal using the template provided, and this proposal is reviewed using a standardised process by 2 members of the Research Committee. This review is discussed within the Research Committee and the study lead is then asked to address areas where further information, clarification or amendment are required, prior to resubmitting an amended proposal. Only once the research committee are satisfied that the study proposal represents a coherent piece of work, that is achievable given either the data availability or that proposed participant recruitment targets are possible, will the study receive research committee approval. A TSH supervisor must be in place.

Prior to the study being given the go ahead, the Associate Medical Director is asked to sign off Management Approval for the study to commence, based on the presence of Research Committee approval, a signed off DPIA, and evidence of NHS REC review where appropriate. Once a study is ongoing the research committee maintains a degree of QA through the requirement for all studies to provide 6 monthly updates on progress against the studies proposed timeframe, and then conducts a further standardised review of all study final reports, prior to agreeing dissemination of study findings to relevant groups within the hospital.

## 6. Quality Improvement Activity: Embedding of Research Assistant role

Since early 2022 the State Hospital Research committee has used some of its budget to fund the provision of a 0.4 wte non-study specific research assistant. This role was initially introduced given the majority of researchers within the organisation do not have dedicated research time and studies are conducted on top of busy clinical or non-clinical roles. Having a Research Assistant who is not tied down to any one specific study has allowed the RA to support a number of different studies. To date this position has been provided through the University of Edinburgh and funded by the research committee, but work is ongoing to develop this as a State Hospital role.

## **7. Stakeholder Experience**

The Research Committee is committed to the development and delivery of studies focused on the patient perspective of the programmes and initiatives that they are asked to participate in. The feedback that is received from patients is extremely valuable in informing the ongoing development of treatment programmes and other initiatives designed to support patients.

Involving Forensic in-patients in all aspects of research has traditionally been seen as a difficult thing to do. However the importance and value of including patients at every possible stage, and taking an inclusive co-productive approach is now well documented, and this approach is entirely supported by the Research Committee. The Patient Partnership Group provides an important role in these discussions.

The range of studies currently seeking patient perspective and experience include:

### **Can physiological monitoring identify imminent violence in mentally ill offenders?**

This study using wristbands to monitor physiological data from patients to support the development of algorithms which may in future support clinical staff in the identification of imminent violence has been positively received. Patients understand the aims of the study and have to date been positive about participation.

### **How is Therapeutic Alliance Developed in the context of individual psychotherapy in a high secure hospital? Patients' and Therapists' perspectives.**

This study employs patient interviews with the aim of establishing how therapeutic alliance (the collaborative relationship between patients and therapists that supports therapeutic work) develops in individual psychotherapy sessions in a high-secure hospital.

### **Recovery and risk: an Interpretative Phenomenological Analysis of staff and patient experiences in a high secure forensic intellectual disability service.**

This research aims to explore the experiences and understanding of patients residing within the I.D. service in the State Hospital (TSH), as well as the experiences and understanding of professional staff working alongside them. The results of this study will add to the limited research available examining the experiences of individuals with I.D. residing in forensic settings and set pointers for future research regarding recovery within the population being explored, and aid potential service development.

### **Evaluation of the implementation and utility of the new State Hospital Clinical Model.**

The development and implementation of the new clinical model across the hospital is the largest single piece of work being undertaken within the organisation. Subsequently it is crucial that a rigorous evaluation of these considerable changes has been designed and put in place to run for 3 years. The study will evaluate both the changes and the stakeholder perspective of the impact of these changes, over a sufficient period of time to allow changes to bed in, and the full impact of these changes to all stakeholders to become clear. The study will utilise semi-structured interviews with patients linked to a participatory action research model, as was very successfully conducted as part of the previous study Recovery Research into Action.

### **Comparing models of care in forensic mental health systems: an international realist evaluation**

While some observers have speculated about what models of care may be most effective in a forensic mental health setting, there has been no proper evaluation to date. This is a barrier to the implementation of models that best provide efficient, people-centred, integrated, culturally responsive, and safe services. The present project seeks to fill this gap by answering two questions: (1) What is it about different models of care in forensic mental health systems that



work, for whom, and in what circumstances? (2) What are the key components of an efficient, patient-centred, integrated, and safe forensic mental health system? This international study across four countries (Scotland, New Zealand, Canada and Italy) seeks to understand which features and contextual factors are critical in the implementation and continuous improvement of a forensic mental health system. Semi-structured interviews with patients are being conducted as part of this project.

## **8. Planned Quality Assurance/Quality Improvement for the next year**

### **Research Strategy Update**

As noted under section 3.2, the development of an updated State Hospital Research Strategy has been delayed due to the capacity of the Research and Development Manager. This will form a key component of the Research Committee QI activity over 2024/25. The development of the strategy, which will reflect both the priority areas for research as identified by the State Hospital research portfolio review and the implications of the outcomes of the Scottish Government review of the Barron report recommendations, will be a key quality improvement activity for the work of the research committee. The review of the previous strategies workplan against the recorded activity which has taken place over the life of the strategy; will provide an opportunity for the revised strategy to identify and mitigate against any barriers to research activity or the implementation of research findings into practice.

## **9. Next review date: August 2025**

## Appendix 1: Governance Arrangement for Committee

### 1 Committee Membership

#### Research Committee

##### Membership:

Professor Lindsay Thomson	Chair, Medical Director and Professor of Forensic Psychiatry, University of Edinburgh
Mrs Josie Clarke	Lead Professional Nurse Advisor
Mrs Monique Crothall	Lead Occupational Therapist
Dr Lindsey Gilling Macintosh	Research Fellow
Mrs Karen Mowbray	Health Records Manager
Dr Suzanne O'Rourke	Consultant Forensic Clinical Neuropsychologist, Lecturer in Forensic Clinical Psychology, University of Edinburgh
Ms Diane Mullen	Specialist Dietician – <b><i>joined the Committee in June 2024</i></b>
Mr Jamie Pitcairn	Research and Development Manager
Cheryl Rees	Research Assistant - <b><i>joined the Committee in March 2024</i></b>
Ms Lindsay Tulloch	Clinical Research Nurse, Lead Nurse
Dr Helen Walker	Head of School, Forensic Network
Ms Jacqueline McDade	Committee Secretary

There were a number of changes to membership of the Committee throughout the year, with some members having to withdraw due to competing work commitments or having left the organisation. The above is the current membership.

### 2 Role of the Committee

#### Research Committee

The role of the Research Committee is to support, encourage and promote research, and to ensure the quality and dissemination of research projects associated with the State Hospital. It seeks to ensure that the Board can have confidence in the quality of research with high scientific and ethical standards, with transparent decision making, and clear monitoring arrangements. The committee also plays a key role in the statutory Research Governance responsibilities of The State Hospitals Board for Scotland, and conducts this role in line with the Research Governance framework of the Chief Scientist Office. The Research Committee also manages the Research Budget, with monthly review of the budget, commitments and funds remaining to be allocated within the current financial year.

The members of this committee also provide a resource for staff undertaking research by providing support, advice and education on research matters. Additionally the committee can assist the hospital through the appraisal and development of evidence or research findings generated through research external to TSH, and promote the practise of evidence based medicine.

### 3 Aims and objectives

The aims and objectives of the Research Committee, as outlined below mirror those within The State Hospital Research Strategy 2016-2021. The aims and progress made against them will be reviewed as part of developing the new updated Research Strategy.

1. Support the use of data and research evidence as part of an evidence based culture aimed at improving both patient care and the patient experience of care, though a focus on continuously improving practice.

2. Place the research conducted in TSH within the context of the national strategic approach to research in health and the governance required as part of this process.
3. Identify research needs and priorities; and to commission research accordingly.
4. Improve research infrastructure, capacity and management systems.
5. Support evidence based culture through focus on training, developing staff competencies in transferable research skills and increasing research capacity.

#### **4 Meeting frequency and dates met**

The research committee meets monthly on the first Thursday of every month (except January). It considers new research proposals, timetabled project reviews, final report reviews and any other research related issues. A series of forms have been developed for the initial research proposal, full research proposal and proposal and final report reviews. All ongoing research projects are reviewed six-monthly and a standardised progress report form is completed. The Research Funding Committee convenes on an ad hoc basis as and when required to review a research related funding request that has been supported by the Research Committee.

#### **5 Research Committee Strategy and Work plan**

The current State Hospital Research Strategy covers the period 2016-2021. Work will commence alongside the Research Portfolio review to develop a new updated Research Strategy 2024-2027 for the hospital.

The research committee work plan provides a month by month outline of the priority items of work throughout the year, and shows how actions related to these are structured to meet the deadlines associated with each. The work plan is included below.

<b>Month</b>	<b>Activity</b>
<b>January</b>	No committee meeting
<b>February</b>	Research Committee
<b>March</b>	Research Committee Call for all Research Activity to be recorded within Research Committee annual report
<b>April</b>	Research Committee Completion of RC Annual Report
<b>May</b>	Research Committee
<b>June</b>	Research Committee
<b>July</b>	Research Committee
<b>August</b>	Research Committee Presentation of Research Committee Annual report to the Clinical Governance Committee
<b>September</b>	Research Committee Specific focus on the prioritisation of the uncommitted funds remaining within the Research budget for following financial period.
<b>October</b>	Research Committee Research Committee review of all Open Access Journal article submissions for funding, and decision on successful candidate
<b>November</b>	Research Committee Forensic Network Research Conference
<b>December</b>	Research Committee Specific focus on the end of financial year budgetary management.

## Appendix 2: Research Activity

### 1. Completed Studies

**Dr Donal Campbell**, Suzanne O'Rourke, M. Cohen & Prof Gary Macpherson. Assessing the Longitudinal Properties of the HCR-20.

**Dr Donal Campbell**, Suzanne O'Rourke, G. Ross & Prof Gary Macpherson. Investigating Trajectories of Treatment response at a High-Secure Forensic Hospital.

**Monique Crothall**. An Exploration of the Barriers and Facilitators of Engagement in Physical Activity for Patients within a High Secure Forensic Setting (a quantitative study).

**Laura McCafferty**. An evaluation of the impact of an educational programme on dementia care in secure settings.

**Professor Lindsay Thomson**, Dr Helen Walker, Dr Rhoda MacRae, Dr Tom Russ, Dr James Taylor. Improving the health and well-being of people with dementia and cognitive frailty in prison.

**Dr Helen Walker**, Dr Hamish Fulford, Rebecca Carr, Dr Lindsey Gilling McIntosh, Professor Lindsay Thomson, Jamie Pitcairn. Provision of Mental Health Scrutiny and Assurance Evidence Review – tender for Scottish Government Health and Social Care.

**Veroniki Zouharova**. How is Therapeutic Alliance Developed in the context of individual psychotherapy in a high secure hospital? Patients' and Therapists' perspectives.

### 2. Journal Articles

Asherson, P.J., Johansson, L., Holland, R., Bedding, H., Forrester, A., Giannulli, L., Ginsberg, Y., Howitt, S., Kretschmar, I., Lawrie, S.M., Marsh, C., Kelly, C., Mansfield, M., McCafferty, C., Khan, K., Müller-Sedgwick, U., Strang, J., Williamson, G., Wilson, L., Young, S., Landau, S. and **Thomson, L.D.G.** (2023) Randomised controlled trial of the short-term effects of osmotic-release oral system methylphenidate on symptoms and behavioural outcomes in young male prisoners with attention deficit hyperactivity disorder: CIAO-II study *Br J Psychiatry*. 2023 Jan; 222(1): 7–17. doi: 10.1192/bjp.2022.77

Darjee, R., **Judge, J.** & Kirkland, J. (2024). Multi Agency Public Protection Arrangements (MAPPA). In J. Marshall & J. Kirkland (Eds.). *Innovative Practice in Forensic Settings: A Cognitive Analytic Approach to Effective Relational Work*. Pavilion, West Sussex, UK.

Darjee, R., **Judge, J.** & Kirkland, J. (2024). The importance of relationships in multi-agency working. In J. Marshall & J. Kirkland (Eds.). *Innovative Practice in Forensic Settings: A Cognitive Analytic Approach to Effective Relational Work*. Pavilion, West Sussex, UK.

Doyle, M., Singh, M., McNulty, P., Slavin, S., Smith, M., **Walker, H.**, Khan, W., and Smith, B.P. (2024) Developing a web-based app for non-mental health nurses to support children and young people with mental health problems. *Nursing children and young people*. <https://doi.org/10.7748/ncyp.2024>.

**Gilling McIntosh, L., Rees, C., Kelly, C., Howitt, S., & Thomson, L.D. G.** (2023). Understanding the mental health needs of Scotland's prison population: A health needs assessment. *Frontiers in Psychiatry*, 14. doi: 10.3389/fpsy.2023.1119228

Hutton, P., Kelly, J., Taylor, C. D. J., Williams, B., Emsley, R., Alexander, C. H., Vikram, A., Saddington, D., McCann, A., Burke, J., Eliasson, E., Harper, S., Karatzias, T., Taylor, P. J.,

Watson, A., Dougall, N., Stavert, J., **O'Rourke, S.**, Glasgow, A., Murphy, R., & 6 others, Dec 2023, Accelerating the development of a psychological intervention to restore treatment decision-making capacity in patients with schizophrenia-spectrum disorder: A study protocol for a multi-site, assessor-blinded, pilot Umbrella trial (the DEC:IDES trial) In: Pilot and Feasibility Studies. 9, 1, 117.

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Janes, S., **Gilling McIntosh, L.**, **O'Rourke, S.**, & Schwannauer, M. (2024). Examining the cognitive contributors to violence risk in forensic samples: A systematic review and meta-analysis. *Aggression and Violent Behavior*, 74, 101887.

MacRae, R., Tolson, D., Taylor, J., Anderson, K., Russ, T. and **Thomson, L.D.G.** (2024). The health and social care of people living with diagnosed or suspected dementia in prison: current provision, lived experiences and recommendation. Final report, Dunhill Medical Trust, UWS and Alzheimer Scotland

**Polnay, A.**, Pugh, R., Barker, V., Bell, D., Beveridge, A., Burley, A., Lumsden, A., Mizen, C. S. & Wilson, L. (2023) Cambridge Guide to Psychodynamic Psychotherapy. Cambridge University Press.

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Steel, C. M. S., Newman, E., **O'Rourke, S.** & Quayle, E. (2023) Technical profiles of child sexual exploitation material offenders (E-pub ahead of print) *Psychiatry, Psychology and Law*. p. 1-14 14.

Steel, C. M. S., Newman, E., **O'Rourke, S.** & Quayle, E., 1 Jan (2023) Lawless space theory for online child sexual exploitation material offending. *Aggression and Violent Behavior*. 68, 101809.

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**Thomson, L.D.G. and Rees, C.** (2023) The recovery approach for patients within a high secure setting: a 20 year follow up. *Frontiers* 2022-0812088-2

**Thomson, L.D.G.** (in press) Community Forensic Psychiatry including Liaison with Health, Criminal Justice and Public Protection Agencies. In *Seminars in Forensic Psychiatry*, Chapter 8. Editors: Kennedy H. and Davoren, M. Pubs: Royal College of Psychiatrists.

**Tulloch, L., Walker, H.** and Ions, R. (in press) What influences the use of seclusion? A cross-sectional study of forensic mental health nurses in a UK high secure hospital. *International Journal of Forensic Practice*, <https://doi.org/>

**Walker, H., Fulford, H. Carr, R., Thomson, L.D.G., Gilling McIntosh, L. and Pitcairn, J.** (in press) Provision of Mental Health Scrutiny and Assurance Evidence Review. Scottish Government.

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Wu, Y., Levis, B., Daray, F. M., Ioannidis, J. P. A., Patten, S. B., Cuijpers, P., Ziegelstein, R. C., Gilbody, S., Fischer, F. H., Fan, S., Sun, Y., He, C., Krishnan, A., Neupane, D., Bhandari, P. M., Negeri, Z., Riehm, K. E., Rice, D. B., Azar, M., Yan, X. W., & 78 others incl **O'Rourke, S.**, Feb (2023) Comparison of the accuracy of the 7-item HADS Depression subscale and 14-item total HADS for screening for major depression: A systematic review and individual participant data meta-analysis. *Psychological assessment*. 35, 2, p. 95-114 20.

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### 3. Presentations

April 2023 - **Gilling McIntosh, L.**, Rees, C., Kelly, C., Howitt, S., & Thomson, L.D.G. Understanding the mental health needs of Scotland's prison population: A national health needs analysis. Poster presentation at the Edinburgh Mental Health Network Conference. Edinburgh, 20-22 June 2023 - **Gilling McIntosh, L.** (Chair), **Thomson, L.D.G.**, **Rees, C.** Understanding the mental health needs of Scotland's prison population: A national health needs analysis.

Symposium at the 22<sup>nd</sup> Annual International Association of Forensic Mental Health Services

Conference. Sydney, Australia.

20-22 June 2023 – **Rees, C.** Pathways through inpatient services: Examination of a Scottish Cohort presented at International Association of Forensic Mental Health Services (IAFMHS).

20-22 June 2023 - **Rees, C.** How to 'Get On and Get Out': High secure patients peer support plan for recovery presented at International Association of Forensic Mental Health Services (IAFMHS).

20–22 June 2023 – **Thomson, L.D.G.** IAFMHS conference, Sydney

Randomised controlled trial of the short-term effects of OROS-methylphenidate on ADHD symptoms and behavioural outcomes in young male prisoners with attention deficit hyperactivity disorder (CIAO-II).

20-22 June 2023 – **Tulloch, L.** & Walker, H. IAFMHS conference, Sydney

Patient, Carer and Staff perspectives on the management of significant violence and aggression.

September 2023 - **Rees, C.** Understanding the mental health needs of the Scottish Prison population: A health needs assessment presented at The State Hospital Seminar Series.

27<sup>th</sup> October 2023 – **Polnay, A.** Keynote speech at RCPsych in Scotland Medical Psychotherapy Conference, Dundee. Long-term work in forensic settings – the need for continuing (re)discovery of the basics.

November 2023 - **Gilling McIntosh, Mann, H., Pitcairn, J. & Thomson, L.D.G.** More alike than different? Identifying the salient personal, clinical and forensic factors discriminating high, medium, and low secure patients using the Forensic Network forensic inpatient census. Paper presented at the Forensic Network Research Special Interest Group Annual Conference. Polmont, UK.

9<sup>th</sup> November 2023 – **Polnay, A.** Poster presentation at Clinical Educator Conference, Edinburgh Medical School. Cultivating Reflective Practice in Scotland. Polnay A, Patrick J, Russell K, Walker H, Gallacher C, Zouharova V. Poster also Presented 14.12.24 at the Forensic Network 50<sup>th</sup> anniversary conference.

24th November 2023 – **Thomson, L.D.G.** Scottish Sentencing Council inaugural research seminar – Sentencing and Mental Health.

November 2023 - **Rees, C.** All cause and avoidable deaths across the Scottish forensic estate Presented at Forensic Network Research Special Interest Group (FNRSIG).

14th December 2023 - **Thomson, L.D.G.** Twenty Years of the Forensic Network – our Fundamental Purpose.

December 2023 – **Rees, C.** Exploration of recovery among patients experiencing high secure care: A 20 year follow up presented at 20 Years of the Forensic Network event.

December 2023 - **Rees, C.** How to 'Get On and Get Out': High secure patients peer support plan for recovery [poster] presented at 20 Years of the Forensic Network event.

30<sup>th</sup> January 2024 – **Polnay, A.** Invited speaker at conference, 'Evidence-based psychological care for all' – Advanced Research Centre, Glasgow Uni. Presented paper on: 'Developing a measure to assess clinician's ability to reflect on key staff-patient interactions'.

23rd February 2024 – **Thomson, L.D.G.** Forensic lead nurses conference, Stirling Court Hotel – keynote on Pathways to Care, Outcomes and Improvement.

23<sup>rd</sup> February 2024 – **Tulloch, L.** Forensic Lead Nurses conference, Stirling Court – presentation on 'Understanding what Factors Contribute to the use of Restrictive Practices'.

23<sup>rd</sup> February 2024 – **Dr Hamish Fulford** Forensic Lead Nurses conference, Stirling Court – presentation on ‘Design of a self management app’.

#### **4. Ongoing Research Studies**

**Graham Alexander.** Staff wellbeing survey

**Josie Clark.** A mixed-methods study exploring mental health nurses’ views of the risk assessment process and how the outcomes of risk assessment influence nursing practice within forensic mental healthcare

**Rebecca Dalgetty.** Barriers to the Assessment and Diagnosis of Fetal Alcohol Spectrum Disorder in NHS Forensic Services: A Thematic Analysis Study

**Serena Duff.** Exploring staff and patient interactions: impact on wellbeing and work

**Frances Graham.** Yvonne Murray, UWS. PD Diagnosis Study

**Kirsty Haig.** Recovery and risk: an Interpretative Phenomenological Analysis of staff and patient experiences in a high secure forensic intellectual disability service.

**Marichelle Leclair and Professor Lindsay Thomson.** Comparing models of care in forensic mental health systems: an international realist evaluation

**Samantha Munoz** and Dr Helen Walker. Registered practitioners’ perspectives on trauma-informed care within a high secure hospital Scotland; a qualitative study

**Craig Smith,** Alisdair Graham, Frances Waddell, Alison Eadie and Dr Helen Walker. Evaluation of the effectiveness of a 12-week Football Fans in Training (FFIT) course on the aerobic fitness and well-being of patients within a high secure forensic inpatient hospital

**Dr Suzanne O’Rourke.** Can physiological monitoring identify imminent violence in mentally ill offenders

**Professor Lindsay Thomson, Jamie Pitcairn.** Understanding Needs, Securing Public Safety: The Forensic Network Census and Database – annual

**Professor Lindsay Thomson, Daniel Bennett.** Outcomes of Appeals Against Excessive Security in High and Medium Security

**Professor Lindsay Thomson, Cheryl Rees.** Progression through services: data linkage and analysis of transitions and overall pathway of the 2013 Scottish forensic inpatient population

**Professor Lindsay Thomson, Cheryl Rees, Dr Sheila Howitt, Dr Lindsey McIntosh, Sheila Smith, Monica Merson.** Evaluation of the implementation and utility of the new State Hospital Clinical Model.

**Dr Helen Walker, Dr Adam Polnay, Chris Gallacher.** Examining the effectiveness of Reflective Practice Groups using The Relational Aspect of CarE scale (TRACE).

**Dr Helen Walker, Dr Hamish Fulford, Patricia Coia.** Staff experience from a clinical student to newly qualified practitioner in a high secure forensic mental health service and any impact of CV-19 educational arrangements on final year preparation for practice.