

TUESDAY OCTOBER 22

8:30-10:00

PLENARY SESSION P2

DIMENSIONS OF WELLBEING IN LAW ENFORCEMENT AND PUBLIC HEALTH

Room: Pentland Auditorium

Co-Chairs: **Gary Ritchie**, Assistant Chief Constable, Police Scotland

Gerald McLaughlin, Chief Executive, NHS Health Scotland

Speakers:

- **Mark Collins**, Chief Constable Dyfed-Powys Police; National Police Chiefs' Council Lead for Mental Health and Policing, Wales

Mental health: next steps in policing

- **Andy Rhodes QPM**, Chief Constable of Lancashire Constabulary, England

UK policing approach to wellbeing: rhetoric to reality

- **John Middleton**, President, Association of Schools of Public Health in the European Region

Public health problems are multidisciplinary: why do we train for them apart?

- **Gary Ritchie**, Assistant Chief Constable, Police Scotland

Police Scotland's approach to the law enforcement and public health collaboration

8.30 – 3.00

POSTERS

See Monday at 10.30 for a list of poster presentations

10:00-10:45

LEPH ORATION

Location: Pentland Auditorium

PROFESSOR SIR HARRY BURNS

Professor of Global Public Health

University of Strathclyde, Scotland

Wellbeing: what is it and how does society create it?

10.45 – 11.15

MORNING TEA

11:15 - 12:45

MAJOR SESSIONS

M5. Leave your ego at the door

Room: Tinto Room, Lomond Suite

Convener: **Linda Hindle**, Public Health England

Chair: **Liz Aston**, Scottish Institute for Policing Research and Edinburgh Napier University

Presenters:

Linda Hindle, Public Health England

Leave your ego at the door

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Duncan Selbie, Chief Executive, Public Health England

Why collaborative leadership at national and place level is essential to improve outcomes for individuals, communities and populations

Andy Rhodes QPM, Chief Constable Lancashire Constabulary, England

Compassionate leadership, the national police and health consensus: what has worked and what more needs to happen

Karyn McCluskey, Chief Executive, Community Justice Scotland

Driving systems leadership to reduce health inequalities and maintaining a focus on the people at the receiving end of services

M6. Models and mechanisms supporting LE/MH partnerships to improve response to individuals with behavioural health conditions

Room: Pentland Auditorium

Convener and Chair: **Amy Watson**, University of Illinois at Chicago, USA

Presenters:

Amy Watson, University of Illinois at Chicago & **Michael Compton**, Columbia University College of Physicians and Surgeons, USA

Review of research on models of LE/MH response to individuals with mental illnesses and intellectual and developmental disabilities

Stuart Thomas, RMIT University, Australia

Policing complexity: police involvement with people with intellectual disability

Melissa Morabito, University of Massachusetts Lowell & **Jenna Savage**, Office of Research and Development, Boston Police Department, USA

Dedicated: evaluating Boston's response to people with mental illnesses

Daniel Pearson Hirdes, McMaster University, Canada

Mental health call trends in Canada: a review of police response to mental health calls in 18 communities

Ron Hoffman, Nipissing University, Canada

The use of a brief mental health screener to enhance police response to mental health crisis and reduce impact on police and health resources

M7. Early Action Together Programme: moving from understanding to operationalising trauma-informed policing in Wales.

Room: Moorfoot Room, Lomond Suite

Convener: **Dusty Kennedy**, Public Health Wales

Chair: **Nadine Dougall**, Edinburgh Napier University, Scotland

Presenters:

Emma Barton, Early Action Together Programme, Public Health Wales

Understanding the police landscape across Wales in responding to vulnerability

Emma Barton, Early Action Together Programme Public Health Wales

Effectiveness of the ACE TIME training (part of the EAT programme) on the police workforce in increasing awareness of ACE related trauma and impact across the life course; in enabling individuals to competently and confidently respond to vulnerability using ACE informed approach and supporting a whole systems approach between police & partners in preventing and mitigating ACEs

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Helen Douglas, North Wales Police, National Early Action Together Programme, Public Health Wales, and **Vicky Jones**, North Wales Local Partnership, Early Action Together Programme, Public Health Wales

The Reality – ‘Early Action Together’: operationalising the recommendations from research

M8. Learning from Canada's accelerating journey toward collaborative Community Safety and Well-Being (CSWB)

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Norman E. Taylor**, Journal of Community Safety and Well-Being, Canada

Presenters:

Norman E Taylor, Journal of Community Safety and Well-Being, Canada

Human Security: the fundamental promise of any democratic society

Brent Kalinowski and **Lisa Taylor**, Global Network for Community Safety, Canada

A decade of Canada-wide mobilizing for collaborative CSWB

Matthew Torigian, Munk Centre for Global Affairs and Public Policy, Canada

Ontario's path to a legislated mandate for collaborative CSWB planning

Current case studies in locally-led and collaborative CSWB planning and action

Case Study #1: Halton Region CSWB Plan

Susan Biggs, Halton Regional Police Service, Canada

Case Study #2: British Columbia's accelerating uptake of collaborative CSWB models

Shannon Tucker, Office of Crime Reduction and Gang Outreach, BC

Ministry of Public Safety and Solicitor General, Canada

All Presenters: Interactive panel and Town Hall sub-session:

Lessons learned and lessons yet to learn

12.45 – 2.00

LUNCH

1.00 – 1.40

LUNCHTIME SESSION

L4: Emma McAllister, Scotland

Don't just do something, stand here: an autoethnographic account of police involvement in mental health

Chair: **Stuart Thomas**, RMIT University, Australia

Room: Tinto Room, Lomond Suite

L5: Iain Smith, Keegan Smith Defence Lawyers, Scotland

Cutting crime with compassion: a curious defence lawyer's story

Chair: **Leah Pope**, Vera Institute for Justice, USA

Room: Moorfoot Room, Lomond Suite

L6: Meet the Editor - writing for the special LEPH journal issues

An introduction to the Journal of Psychiatric and Mental Health Nursing

Lawrie Elliott, Editor and Chief, Glasgow Caledonian University, Scotland

Chair: **Inga Heyman**, Edinburgh Napier University

Room: Kilsyth Room, Lomond Suite

C11: Health and health needs of people involved with criminal justice

Room: Ochil Room, Galloway Suite

Chair: **Éamonn O'Moore**, Public Health England

Presenters:

Joan Papp, MetroHealth, USA

Expanding access to medication assisted treatment in Cuyahoga County Corrections Center (CCCC)

Nasrul Ismail, University of West England

Rolling back the prison estate: the pervasive impact of macroeconomic austerity on prison health in England, from the perspective of national policymakers

Amanda Butler, Simon Fraser University, Canada

Co-occurring disorders in the provincial correctional system in British Columbia

Stuart Kinner, University of Melbourne, Australia

Health and health service outcomes associated with re-incarceration after release from prison: a prospective data linkage study

Debbie Sigerson, NHS Health, Scotland

Smoke free prisons: co-production of a service specification supporting people in our care and improving health outcomes

Fiona Kumari Campbell, University of Dundee, Scotland

A new vision for social care of disabled people in prison

C12: Harm Reduction in different countries I

Room: Harris Room, Galloway Suite

Chair: **Auke van Dijk**, Police of The Netherlands

Presenters:

Lanying Huang, National Taipei University, Taiwan

Protection or punishment? Developing a multi-agency model for adolescent substance users in Taiwan

Bajram Nuhui, Kosovo Police.

Activities of the Kosovo Police in framework of the National Drug Strategy on prevention and combating drugs.

Kateryna Denysova, UNDP Ukraine

Strengthening the HIV/AIDS response in Ukraine through capacity building of the law enforcement representatives: UNDP Ukraine experience

Jane Buxton, University of British Columbia, Canada

Exploring reasons people use drugs alone: more than stigma or concerns about police

Hai Thanh Luong, RMIT University, Australia

Harm reduction for drug control: a review of one decade changes in Vietnam

C13: Sex work

Room: Tinto Room, Lomond Suite

Chair: **Melissa Jardine**, Centre for Law Enforcement and Public Health, Australia

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Presenters:

Susan Sherman, Johns Hopkins University, USA

Police as 'clients' of sex workers in Baltimore, MD, USA: health risks and abuses of power

Lucy Platt, London School of Hygiene and Tropical Medicine, England

The health impacts of sex work criminalisation: a review of the evidence

Donna Evans, RMIT University, Australia

The policing of sex work in South Africa: introducing the Positive Policing Partnership

Jocelyn Elmes, London School of Hygiene and Tropical Medicine, England

High levels of police contact and violence among a diverse sample of sex workers in East London: baseline results from an epidemiological cohort study (East London project, component B)

Pippa Grenfell, London School of Hygiene and Tropical Medicine, England & **Rachel Stuart**, University of Kent, England

Safety, health and social (in)justice: a participatory qualitative study exploring sex workers' experience of enforcement, violence and access to healthcare, support and justice in East London (East London Project, component A)

C14: Trauma and Adverse Childhood Experiences I

Room: Moorfoot Room, Lomond Suite

Chair: **Nadine Dougall**, Edinburgh Napier University

Presenters:

Sharon Lambert, University College Cork, Ireland

Trauma-informed policing in Ireland

Claire Warrington, University of Brighton, England

Policing the aftermath of ACEs: public health approaches to reduce high frequency repeat detention under Section 136 of the Mental Health Act

Sarah Anderson, University of West Scotland

Rethinking trauma and adverse childhood experiences

Joseph Schafer, St. Louis University, USA

Exposure to violence and public health: lessons and implications from the St. Louis, Missouri Police-Prosecutor Partnership Initiative

C15: The role of prosecutors in achieving public health goals

Room: Kilsyth Room, Lomond Suite

Convener and Chair: **Lucy Lang**, John Jay College, USA

Panellists:

David Harvie, Crown Agent, Scotland

Larry Krasner, City of Philadelphia's 26th District Attorney, USA

Iain Smith, Keegan Smith Defence Lawyers, Scotland

2.00 – 3.30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

Marketplace of Ideas: 7 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

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7.1. Elaine Tomlinson, Police Scotland

Mental health, police and other first responders.

John Mitchell, Mental Health Directorate, Scottish Government

Distress Brief Intervention (DBI): working beyond frontline boundaries to build connected, compassionate support for people presenting in distress.

& joined by **designated members of the DBI programme from Emergency Services and 3rd party sector agency.**

Distress Brief Intervention (DBI) supports adults with emotional pain. It provides services with the ability to provide a caring and compassionate response for those in distress. The need to improve the response for people in distress was strongly advocated by people with lived experience, frontline services and research. In response the Scottish Government established the DBI programme in November 2016. This is a national and regional distress collaboration between Health and Social Care, Primary Care, Police Scotland, Scottish Ambulance Service, NHS Emergency Departments and 3rd sector agencies.

Community Triage is for persons who come into contact with the police in the community and are suffering from mental health crisis. Community Triage is available in 9 out of 13 local policing divisions in Scotland. Police Officers can request the assistance of Mental Health professionals to provide advice.

The panel will share their experience in relation to the initiatives and outline the intentions, learning and future direction of their work. Panellists will then be open to questions from the audience.

7.2. Neil Wilson, Police Scotland and Jess Davidson, NHS Lothian, Scotland

Operation Threshold: assertive outreach

Operation Threshold was conceived and initiated in Edinburgh to identify, engage and support drug users at the greatest risk of harm whilst robustly targeting those seeking to exploit vulnerable users through enforcement activity. The proposed discussion group will explore the assertive outreach strand of the approach that involved a police led intelligence cell retrospectively reviewing incidents and information systems to identify those who had suffered instances of public space non-fatal overdose. Once identified, the individual's circumstances were triaged by a single point of contact within NHS Lothian who evaluated their health needs, reviewed recent contact with support and treatment services and generated an anticipatory care plan. Subsequently, the engagement team, comprised of police officers and peer mentors with lived experience of addiction, traced the individual and provided the necessary support or signposting/onward referral as appropriate. The session will include presentations from police and health representatives supported by case studies to probe the effectiveness of the approach, and will incorporate time for discussion and an overview of planned future work to further enhance interagency information sharing.

Marketplace of Ideas: 8 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

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8.1. Jan Fox, Edmonton Police Service & Dale McFee, Edmonton City Chief of Police, Canada

Collaborations, systems change and community safety: the 24/7 Crisis Diversion Initiative

24/7 Crisis Diversion is a first-rate example of collaborative leadership. Edmonton police officers spend a disproportionate amount of time responding to 'social disorder' calls each year. This represents thousands of events, many of which do not require police intervention and could be better addressed with community supports. 24/7 Crisis Diversion Teams respond to calls directly from emergency services, as well as public dispatch via the '211' line, for citizens experiencing non-emergency crises. Teams address the crisis at hand and follow a 'warm handoff' protocol to connect the person with supports they need 24 hours per day, 365 days a year. The 24/7 Crisis Diversion team responded to 14,412 events in 2018 alone and is seen as an essential service to the City of Edmonton. Robust social media campaigns have reached hundreds of thousands of citizens, providing a non-emergency resource to call when they see a vulnerable person needing help. In this session we will show videos from multiple perspectives of the collaborative, offer an interactive simulation of our real-time information system and engage in frank discussion of the challenges and barriers to the success of the initiative. We will also personalize the work by showcasing client journey maps of vulnerable Edmontonians who have engaged with our services.

8.2. Carlyn Muir, Monash University Accident Research Centre, Australia

Bringing policing for road safety out of the shadows

Road trauma continues to be a global public health problem with between 20 and 50 million people disabled and 1.35 million people killed annually - 90% of the deaths occurring in low and middle-income countries (LMICs). While a decrease in deaths has occurred in many high-income countries, this is not the case in LMICs, where deaths are projected to increase by 80% over the next 20 years to become the second leading cause in the global burden of disease ranking. While road safety is an intersectoral issue police have a unique opportunity to achieve road-user behaviour change (and resulting public health benefits) through intensive and strategic enforcement. Police are a lead agency for road safety across government in many LMICs. However currently, prioritisation, institutional support and capacity for road policing in many LMICs is low. In 2017, Monash University (MUARC), WHO and Victoria Police hosted a Workshop on Safe Systems and Police Enforcement for Road Safety, which was attended by Chiefs of Police in selected Pacific Island countries. The focus of this session is to present a case example of the development and implementation of a police capacity building program suitable for LMICs and to bring together operational police, researchers and related agencies to share experiences, challenges and future opportunities for traffic policing in LMICs.

Marketplace of Ideas: 9 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

9.1. Madeleine Smith, REACH Edmonton Council for Safe Communities, Canada &

Dan Jones, University of Huddersfield, England

Collaborating to provide trauma informed training to frontline workers and law enforcement members

REACH Edmonton Council for Safe Communities is a backbone organization that works to mobilize and coordinate organizations, community groups and Edmontonians to find innovative solutions to community safety and prevention. For the last 5 years REACH has supported the Trauma Informed Edmonton Committee (TIE) - a network of leading social service agencies and the Edmonton Police Services. The committee acknowledges that personal and intergenerational trauma is one of the most salient contributing factors resulting in people's involvement in the justice and correctional system. The over-arching goal is to ensure services engaging with vulnerable populations are trauma-informed. This initiative is based on a collaborative

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and innovative approach to delivering trauma informed training, research and networking in Edmonton. TIE's approach has resulted in front line workers and support staff creating better service outcomes for clients, which in turn contributes to harm reduction and safer communities. A short Power Point presentation will highlight a recent environmental scan of clients, perspectives on staff knowledge, and trauma informed capacity and a video of the most recent training that speaks to this effective approach to training via interviews with training participants, facilitators, and Indigenous Elders.

9.2. Helen Douglas, North Wales Police & Vicky Jones, North Wales Police and Early Action Together Program

Improving community and individual resilience through social navigation: an early help pathway to address vulnerability

Whilst Police demand for public welfare and safety is increasing, efforts to address vulnerability often result in 'no further action' (NFA), with many individuals unable to receive intervention to address their needs. To address the lack of early intervention and preventative activity the Early Action Together Program was developed, a collaboration between Public Health Wales and the four Wales Police Forces and Police and Crime Commissioners, in partnership with Criminal Justice, Youth Justice and third sector organisations. The programme aims to facilitate the start of a transformation of policing and criminal justice in Wales to take a multi-agency, public health ACE and trauma informed approach to vulnerability. Each force are required to develop localised early help referral pathways to address vulnerability at the earliest opportunity and where possible, before statutory intervention is required. North Wales Police are testing Social Navigation models within a policing context, a multi-agency approach which draws on local partners to find a community resolution to address presenting needs or vulnerabilities that do not meet statutory thresholds.

The session will present this model and early findings from evaluation and research video clips and animations, a case study and attendees will have the opportunity to ask questions, feedback on outcomes and share good practice.

3.30 – 4.00

AFTERNOON TEA

4.00 – 5.30

CONCURRENT SESSIONS

C16: Effective police responses to mental health related calls

Room: Ochil Room, Galloway Suite

Chair: **Stuart Thomas**, RMIT University, Australia

Presenters:

Jennifer Wood, Temple University, USA

What "counts" as good police work during mental health related encounters

Ian Cummins, University of Salford, England

Policing and mental illness: exploring the problems of definition

Jill Stavert, Edinburgh Napier University, Scotland

Supporting equal and non-discriminatory enjoyment of rights by persons with mental disabilities in crisis situations: the role of advance planning

Jeremy Tumoana, University of Otago, New Zealand

Citizen stories of police encounters while experiencing mental distress in Aotearoa

Jonas Hansson, Umea University, Sweden

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The use of conducted energy weapons by the Swedish police in relation to vulnerable populations

Jolene Geh, Melbourne Health, Australia

When two worlds collide: Enhanced Critical Response Program

C17: LEPH education and training

Room: Harris Room, Galloway Suite

Chair: **Andrew Wooff**, Edinburgh Napier University

Presenters:

Matthew Green, Touro University California, USA

Thinking about justice: student and alumni feedback on the development of a new MPH concentration in health equity and criminal justice

Daliah Heller, City University of New York, USA

Building a criminal justice pedagogy in public health: workforce development for change

Larissa Engelmänn, Edinburgh Napier University, Scotland

Policing in Scotland: the role of higher education in supporting police officer development and partnership work

Noorhan Abbas, University of Cumbria, England

Technology training: an effective tool to enhance inter-organisational information sharing

Yasmeen Krameddine, University of Alberta, Canada

Evidence-informed strategies for de-escalation and non-escalation between law enforcement and those in distress: current research for safe interactions

C18: Police well-being III - mental health

Room: Tinto Room, Lomond Suite

Chair: **Ian de Terte**, Massey University, New Zealand

Presenters:

Lynda Crowley-Cyr, University of Southern Queensland, Australia

Australian law enforcement and mental health: the dire need for action

Adam Vaughan, Texas State University, USA

Relationship between mental health training and mental health knowledge, stigma and resilience in a sample of Canadian public safety personnel

Serina Fuller, London South Bank University, England

'We are not mental health experts': distinctiveness in negotiating and protecting the police identity

Ronald Camp II, University of Regina, Canada

Leadership and psychological safety: evidence from a study with the Calgary Police Service

Shane Doyle, Central Queensland University, Australia

Stress and leadership development: what impact does eustress, distress and catastrophic stress have on the development of senior police leaders

C19: Trauma and Adverse Childhood Experiences II

Room: Moorfoot Room, Lomond Suite

Chair: **James Clover**, Edmonton Police Service, Canada

Presenters:

Daniel Jones, University of Huddersfield, England

Women, incarceration, victimisation, offending and trauma: the overlap and the impact

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Rebecca Phythian, University of Central Lancashire, England & **Justin Srivastava**, Lancashire Police, England

Safer communities in Lancashire

Kate Thomson, Glasgow Caledonian University, Scotland

Understanding and responding to child sexual exploitation in Scotland

Alan Mulholland, Police Scotland

Police Scotland: corporate parenting - joining the dots on our parenting journey

Suzanne O'Rourke, University of Edinburgh, Scotland & **Graeme Buchan**, Police Scotland

Edinburgh VOW Project: a successful collaboration between police officers and mentors with lived experience

C20: Neurocognitive disorders and law enforcement

Room: Kilsyth Room, Lomond Suite

Chair: **Richard Bent**, Simon Fraser University, Canada

Presenters:

Ron Hoffman, Nipissing University, Canada

Enhancing police officer identification of persons with intellectual disabilities

Katie Gambier-Ross, University of Edinburgh, Scotland

Staying safe 'Going Out': the experience of being missing for people with dementia

Danielle Wallace, Arizona State University, USA

Individuals with Spectrum Disorders: concerns from law enforcement officers and parents

Thijs Fassaert, Public Health Service, Amsterdam, Netherlands

Screening for brain injury in a population of frequent violent offenders

Tony Bowman, Sold Network, ARC Scotland

Neurocognitive disorders: 'Hidden in plain sight' (e.g. epilepsy, fetal alcohol spectrum disorder, acquired/traumatic brain injury)

4.00- 5.30

MARKETPLACE OF IDEAS

PRACTITIONER SESSIONS AND FACILITATED WORKSHOPS

Marketplace of Ideas sessions will be longer, in smaller groups and should be highly interactive.

Marketplace of Ideas: 10 (2 x 45 minute sessions)

Room: Carrick Room 1, Galloway Suite

10.1. Janet Whitley, Workforce Scotland & **Dot McLaughlin**, Scottish Government

Collective leadership for Scotland

There is a growing recognition of the need for shared responsibility in leadership and action across public services in Scotland. There is a growing understanding of the need to work differently to achieve better outcomes and tackle inequalities. There is also an increasing understanding of the complex, systemic and interrelated nature of many issues that we are trying to address. With this comes the recognition that no single organisation, group or agency can tackle these alone, and that effective collaboration in support of transformed outcomes is difficult to achieve. *Collective Leadership* is an innovative programme of leadership development which works with multi-partner groups of leaders at whatever level they are in the system, seeking to tackle a societal or place-based issue for which they have day to day responsibility, actively drawing on theories and learning relevant to the issue and to leadership. *Collective Leadership for Scotland* seeks to

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reach beyond the boundaries of traditional hierarchies and public institutions tackling issues like mental health and policing or the links between health and justice. Session participants will be involved in activities that will focus on their own complex issues and have an opportunity to reflect on their skills in practice.

10.2. Martin Gallagher, Fil Capaldi & Nathan Claderwood, all Police Scotland, **Iain Keith**, NHS Scotland, **Colin Atkinson**, University of West Scotland
Policing Paisley in partnership

This session will examine systemic issues in police and NHS incident management; the effect of a new substance (Etizolam) on the local violence profile; measures taken to improve NHS and Police partnerships; measures taken to mitigate rise in violence. Two complimentary but discreet projects will be presented: Joint Police and NHS SLWG formed (Acute Interface Meeting), protocols revisited, local drug scene information shared, Police undertook NHS staff briefing program. Operation Winter Shield focused on violence reduction through targeted intelligence led stop and search, licensed premises' interventions, focus on street level Etizolam supply. The Panel has been heavily personally invested in the matters above, are forward thinking individuals who will take questions and comments from the audience during the panel rather than this being an information download, ensuring audience participation.

Marketplace of Ideas: 11 (2 x 45 minute sessions)

Room: Carrick Room 2, Galloway Suite

11.1. Claire Coleman & Emma Croft, Police Scotland

Supporting police: understanding CAM and its foundations in the THRIVE Model

Police Scotland is rolling out the Contact Assessment Model (CAM) Project, to transform the way that Police Scotland assesses and responds to vulnerability. In addition to adopting the THRIVE assessment (THRIVE - Threat, Harm, Risk, Investigation, Vulnerability, Engagement) methodology the CAM Project will also seek to introduce a range of alternate resolution options, designed around meeting the needs of the caller. One such leading option at initial point of contact will be Mental Health Pathways (MHP).

In advance of the implementation of CAM and the MHP, the only resolution option currently available to Police Scotland Control Room / Service Centre staff dealing with distressed adult callers/people with apparent mental health issues is to arrange for police officer attendance. Whilst calls of this nature typically generate a high priority police response, police officers receive very limited training in relation to mental health. This will be an informal session where participants will understand what CAM actually means, how it is based on the THRIVE model and what the scale/scope of it is, as well as how we have implemented it – and how it is being received. We see this as an opportunity to get other policing partners to interact with us and will look for their advice, guidance and some ideas as well.

11.2. Rachel Staniforth, South Yorkshire Violence Reduction Unit, England & **Melanie Palin**, South Yorkshire Police, England

Fortifying our relationships

Serious and organised crime in Sheffield is rising and it is necessary to explore alternative ways of disrupting serious and organised crime. A co-located team was operationally led by a Partnership Lead (Sheffield City Council), Public Health Lead (Health Education England), and a Detective Inspector (South Yorkshire Police). This team actively shares intelligence to disrupt serious and organised crime. The public health leadership fellow is engaged as public health lead for Operation Fortify and is based within a police building and provides a public health perspective and completes the circle of prevent, prepare, protect and pursue by linking in other organisations from the wider system and bringing attention to the causes of serious and organised crime. This session will be a knowledge exchange. We have a couple of options for making the session interactive and dynamic including role and group analyses of the challenges faced.

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Marketplace of Ideas: 12 (2 x 45 minute sessions)

Room: Carrick Room 3, Galloway Suite

12.1. Ian Thomson & Clare Craig, Police Scotland

Your wellbeing matters: Police Scotland's approach to wellbeing and resilience

Working within the emergency services involves exposure to stress including violent and traumatic events which can generate an increased risk of developing mental health problems including depression, anxiety disorder and post-traumatic stress disorder. Police Scotland have created the 'Your Wellbeing Matters' programme, to ensure that our officers and staff feel informed, valued and supported - physically, psychologically, socially and financially. The program offers EAP services available 24 hrs a day and TRiM, a trauma focussed peer support system. Furthermore a national network of more than 200 Wellbeing Champions has been established, all receiving NHS accredited Scottish Mental Health First Aid Training. The programme is embedding a culture where the promotion of wellbeing is integrated into all aspects of the organisation. This is creating a safe, positive and healthy working environment for all officers and staff whilst ensuring that managers are equipped with effective and practical information, policies and guidance to support the wellbeing of their teams. This session will include input from a serving Police Superintendent, who with 25 years police experience has lived with the challenge of suffering poor mental health throughout a large part of his service.

12.2. Caitlin Britten, Rose McNabb, Julie Reiger & Ashlee Lierich, Maryborough Educational Centre, Australia

A story of hope: a whole community's response to disadvantage

Maryborough is a pretty post-gold rush town in Central Victoria, Australia where disadvantage is manifested in avoidable death, low birth-weight babies, mental health problems, family violence, unemployment and complex high risk health compromising behaviours. Many students are affected by adverse childhood experiences. Attendance and low self-belief remain challenges for the school. However, this story is not a tragedy but of love and hope. A raft of interventions was initiated by educators to help students enjoy the present and cultivate belief in the future. This tale will include a baby-animal sanctuary, trauma-informed practice, two dogs, a 'Nurture Group', a Doctor of Philosophy (PhD) and a wellbeing farm. It will talk of students who left town to study, returning as a new generation of educators and mentors to champion their school and determined to break the cycle of poverty and disadvantage. This session will be led by two secondary school students from Maryborough Education Centre.

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