

TABLES FOR JRIFE ARTICLE

Table 1: Demographic description of sample (n=44)

Professional mix	<i>MHS services</i>	<i>CJS services</i>	<i>Non response</i>
	Court Staff, Police, Probation, Crown Prosecution Services, Judiciary, Magistrate services.	Substance Misuse Services, Community Mental Health Teams; Crisis and Home Treatment Teams; Liaison and diversion schemes; Forensic Medical Examiners and Police Custody Nurses; Assertive outreach teams, Learning Disability Services, Appropriate adult services.	
	52.3%	45.5%	2.2%
Sector	<i>Public sector</i>	<i>Not public sector</i>	
	88.6%	11.4%	0.0%
Managerial role	<i>Managerial</i>	<i>Non managerial</i>	
	40.9%	45.5%	13.6%
County of origin	<i>County H</i>	<i>County D</i>	
	45.5%	29.5%	25.0%
Age	<i>18-40 years</i>	<i>41-60years</i>	

	72.8%	27.2%	0%
Gender	<i>Female</i>	<i>Male</i>	
	68.2%	31.8%	0%

Table 2: The three underlying scales of the Readiness for Interprofessional Learning Survey

<p>Attitudes towards shared learning to develop collaborative Participants' openness to working and learning together and influence this has on enhanced team working and patient/client care.</p> <p>Cronbach $\alpha=0.88$,</p>	<ol style="list-style-type: none"> 1.Learning with professionals from other services will help me become a more effective member of a team 2. Mentally ill offenders will ultimately benefit if professionals from different services work together to solve offenders' problems 3. Shared learning with professionals from other services will increase my ability to understand mentally ill offenders' problems 4.Learning together with professionals from other services will improve relationships in practice 5.Learning communication skills is best achieved alongside professionals from other services 6.Shared learning will help me think positively about professionals in other services 7.For group learning to work, participants must trust and respect each other 8.Team working skills are essential for professionals from all services to learn 9.Shared learning will help me to understand my own limitations 13. Shared learning with professionals from other services will help me to communicate better with offenders with mental health issues 14. I would welcome the opportunity to work on small group projects with 	<p>Mean: 17.81; n=43 (Possible range 28/-28)</p>
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	<p>professional from other services</p> <p>15.Shared learning would help to clarify the nature of the offender’s mental health problems</p> <p>16. Shared learning during their training would help professionals become better team workers</p> <p>30.Shared learning with professionals from other services will help me to communicate better with other professionals</p>	
<p>Perceived uniqueness of their own profession/insularity.</p> <p>Participants’ perceptions of uniqueness of their own profession. Some of these items have been described as illustrating a form of negative professional identity. These to a degree measure a professionals’ lack of readiness for learning with professionals from other agencies.</p> <p>Cronbach $\alpha=0.69$</p>	<p>12. Problem solving skills should only be learned with professionals from my own service</p> <p>17. The function of mental health professionals working with mentally ill offenders is to provide support for those professionals working in the criminal justice system</p> <p>19.My profession has to acquire much more knowledge and skills than professionals in other services</p> <p>20.There is little overlap between my professional role and that of professionals in other services</p> <p>21. I would feel uncomfortable if a professional from another service knew more about a topic than I did.</p>	<p>Mean: -4.03; n=44;</p> <p>Possible range 10/-10</p>
<p><i>Person centredness</i></p> <p>Professional's focus on patient/client and desire to</p>	<p>25.I like to understand the mentally ill offender’s side of the problem</p> <p>26. Establishing trust with the offender is important to me</p> <p>27. I try to communicate with compassion to the mentally ill offender</p> <p>28.Thinking about the mentally ill offender as a person is important in getting</p>	<p>Mean: 6.07; n=43;</p> <p>Possible range 10/-10</p>

<p>empathise, understand or build relationships with them. Cronbach $\alpha=0.86$</p>	<p>treatment/disposal right 29. In my profession, one needs skills in interacting and cooperating with offenders with mental health issues</p>	
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Table 3: Median and mode score have most highly rated items in each RIPLS subscale

Item no.	Item	Median	Mode	Percentage of respondents in modal category
Attitudes towards shared learning to develop collaborative and team working skills				
2.	Mentally ill offenders will ultimately benefit if professionals from different services work together to solve offenders' problems	Strongly agree	Strongly agree	75.0
4.	Learning together with professionals from other services will improve relationships in practice	Strongly agree	Strongly agree	61.4
3.	Shared learning with professionals from other services will increase my ability to understand mentally ill offenders' problems	Strongly agree	Strongly agree	56.8
Perceived uniqueness of their own profession/insularity				
12	Problem solving skills should only be learned with professionals from my own service	Strongly disagree	Strongly disagree	59.1
	There is little overlap between my professional role and that of professionals in other services	Disagree	Disagree	59.1
	I would feel uncomfortable if a professional from another service knew more about a topic than I did	Disagree	Disagree	47.7
	Person centredness			
	Thinking about the mentally ill offender as a person is important in getting treatment/disposal right	Strongly agree	Strongly agree	61.4

	In my profession, one needs skills in interacting and cooperating with offenders with mental health issues	Strongly agree	Strongly agree	45.5
	I like to understand the mentally ill offender's side of the problem	Agree	Agree	59.1

Table 4: Expectations of an interagency workshop and perceived obstacles to interagency working between the mental health and criminal justice systems.

Expectations of an interagency workshop	Perceived obstacles to interagency working
<p>An opportunity to:</p> <ul style="list-style-type: none"> Network and build relationships Increase knowledge that included: <ul style="list-style-type: none"> an enhanced understanding of the perspectives of another agency the role/ processes etc. of other agencies Learning how to deal with a mentally ill offender more effectively Improve practice through Improving interagency working Share good practice. 	<ul style="list-style-type: none"> Problems with communication between MHS and CJS systems; Lack of understanding of each others' roles; Problems with sharing information/confidentiality; Getting hold of the right person / service; Different targets / timings/ delays in response; Different priorities and values within the MHS and CJS– care vs. control; Difference of opinion about who is responsible (accountability); Negative attitudes from other agencies.