evaluation period the job roles were solely clinical nurse specialists, taking a snapshot of the group between September 2020 and January 2022. The group met monthly for one hour virtually, led by Dr Arends, a specialist registrar in psychiatry with appropriate training in Balint leadership. The format in sessions was in keeping with the Balint method, as per The Balint Society, emphasising confidentiality. Data were gathered via survey tool, adapted from the literature using Likert scales and white space questions to identify barriers and facilitators.

Results. Participants scored the group highly across the board in terms of acceptability, clinical impact, and fidelity measures. Notably 60% strongly agreed and 40% agreed the group was a safe place to express and process anxieties and frustrations about their work. All participants either agreed or strongly agreed the group had changed the way they think and practice, and that they felt able to consider their clinical encounters in a new light.

Conclusion. Facilitators identified were of increased team working through cohesion and notably of increased appreciation for the functional and symbolic elements of the symptoms their patients presented with, suggesting that the value of the group existed in its providing of space to metabolise the often intense demands of Forensic patients, together and as a team. The main theme within barriers to the group processes were external in terms of other clinical demands requiring prioritisation.

Attention Deficit Hyperactivity Disorder in a Male Medium Secure Unit

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Aims. The worldwide prevalence of Attention Deficit and Hyperactivity Disorder (ADHD) in the adult population is estimated to be 2.5%. Prevalence studies have shown rates to be consistently around ten times higher in the prison population, but there is less known about secure psychiatric hospital populations. ADHD has relevance as a predictor for offending, for challenging behaviours when incarcerated, for lower quality of life and high costs for both the NHS and prison systems. This service evaluation aimed to establish estimated prevalence of ADHD within one male medium secure unit.

Methods. A cross sectional review of computerised medical records for all service users on the male medium secure forensic unit took place, to identify those who met inclusion criteria. Service users who were too acutely unwell or had an established or pending diagnosis of ADHD were excluded.

The Brief Barkley Adult ADHD Rating Scale (B-BAARS), a 5 minute screening questionnaire, was given to service users to complete. Anonymised responses were converted to electronic format and the compiled results analysed.

Results. There were 125 service users at the time of information gathering, with 112 eligible according to inclusion and exclusion criteria. 2 of the excluded service users already had an ADHD diagnosis. 70 service users out of those approached, agreed to take part in the screening (62.5%). 2 out of 70 (2.9%) service users met criteria for a possible diagnosis of ADHD.

Conclusion. Using the B-BAARS, 2.9% of service users on the male medium secure forensic unit reported clinically significant symptoms suggestive of a diagnosis of ADHD. This estimate is significantly lower than other studies in prison settings. When combined with the figure for service users with a pre-existing diagnosis, however, the figure is still higher than in the general population (5.5% compared to 2.5%), and illustrates that screening tools can have a useful function in forensic settings.

There may have been methodological issues with this evaluation, including the self-reported nature of symptoms, the comparatively high level of functioning required to complete the questionnaire and the low response rate amongst the service users.

This evaluation serves to increase awareness about ADHD in the forensic population in general. It also highlights the value of this simple screening tool, or one similar, to clinical teams on the forensic wards. The screening tool could be further utilised in low secure and women's services to establish if results are similar amongst these populations.

An Investigation Into the Impact of Dementia Knowledge and Attitudes on Individuals' Confidence in Practice: A Survey of Non-Healthcare Staff Inside the Prison Estate in England and Wales

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Aims. Whilst the majority of age groups are seeing a decline in numbers in prison custody, the older male population continues to rise year on year. This unexpected trend has led researchers to investigate the needs of this particular cohort in more detail and start to question if the prison estate is able to care for the specific needs of the ageing population. This primary research specifically, looks to investigate what relationship, if any knowledge and attitudes to dementia have on how the confidence in practice levels of non-healthcare prison staff

Methods. This research, in a specific, applied context considers the relationship between attitudes toward the prison estate alongside knowledge and attitudes toward dementia in general and the potential relationship these may have on confidence levels. To do this, the research scored individuals' responses against the dementia knowledge assessment scale, attitudes to the prison estate and general attitudes toward dementia. These three independent variables were measured both overall and individually against individual confidence in practices scores. 50 individuals participated with differing roles and length of service in the prison estate

Results. The results of the study found that the overall model was significant. Of the three independent variables, it was found that positive attitudes to dementia were the most influential predictor of confidence. Knowledge of the condition and attitudes to the prison estate, the second and third independent variable however were not significant predictors of confidence in practice levels. Overall, the results indicate that there is a relationship between knowledge, attitudes, and confidence in delivery of dementia care in the prison estate as an overall model.

Conclusion. The main objective of this study was to determine the knowledge and attitudes to dementia of non-healthcare prison staff and if that knowledge and those attitudes had an impact on confidence in practice levels. It could be argued that this research has fulfilled its primary aim, reporting that knowledge about and attitudes toward dementia scores are a significant predictor of knowledge of the condition in non-healthcare-based staff.

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