

Institution: University of Kent		
Unit of Assessment: 4 – Psychology, Psychiatry and Neuroscience		
Title of case study: Delivering the First Dedicated Treatment Programme for Firesetting Internationally and Helping Offenders Move Forwards		
Period when the underpinning research was undertaken: 2011 to date		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Prof. Theresa Gannon	Professor	2005 to date
Dr Emma Alleyne	Senior Lecturer	2013 to date
Dr Caoilte Ó Ciardha	Senior Lecturer	2013 to date
Period when the claimed impact occurred: 1/8/2013 to 31/12/2020		
Is this case study continued from a case study submitted in 2014? Yes		
1. Summary of the impact (indicative maximum 100 words)		
<p>A theoretical model of firesetting developed by Professor Theresa Gannon and colleagues at Kent led to the creation and implementation of novel assessment and treatment protocols for firesetters. This has been used internationally from August 2013 onwards across a range of contexts, including high-security psychiatric settings such as Broadmoor Hospital. Users report that the programme is ‘incredibly helpful for enabling patients to move forward in their care pathway’ [b], as well as in discharge [c] and security-level decision-making [d]. Approximately 500 professionals working in hospitals, prisons, fire rescue services, and probation are now fully trained in the protocol across 13 countries, including the UK, USA, Australia, Germany, and Japan.</p>		
2. Underpinning research (indicative maximum 500 words)		
<p>With the aid of a major grant awarded by the ESRC (2011-14) [G1], Professor Theresa Gannon and colleagues from the University of Kent generated ground-breaking advances in understanding firesetting: a devastating and intractable crime that costs the UK over £50 million each week. Their controlled study on clinical treatment needs demonstrated that firesetters have unique psychological characteristics compared to other types of offenders and pointed to fire-specific and general psychological factors that should be targeted in order to reduce firesetting behaviour [R6]. From this research programme, the team developed the <i>Multi-Trajectory Theory of Adult Firesetting</i> (M-TTAF). The M-TTAF proposes five causal pathways to offending, characterised by either excessive interest in fires, antisocial cognition, grievance, the need for recognition/expression of emotion, or a combination of both excessive interest in fire and antisocial cognition [R5].</p> <p>The M-TTAF provides professionals with a new way of conceptualising the cluster of motivations and risk factors associated with firesetting and forms the basis of the first-ever dedicated assessment and treatment protocols for practitioners working in correctional, probation, or mental health settings. The two programmes, <i>Firesetting Intervention Programme for Mentally Disordered Offenders</i> (FIP-MO) [R1, R4] and <i>Firesetting Intervention Programme for Prisoners</i> (FIPP) [R2], were developed by Professor Gannon between 2011 and 2014. The Four Factor Fire Scale assessment protocol that also informs the programme was developed by Dr Caoilte Ó Ciardha and colleagues at Kent [R3]. It provides practitioners with an assessment of fire-related constructs, which is easy to administer and score. It also provides practitioners with data norms for male prisoners, male young offenders, and male and female mentally disordered offenders, which enables the practitioner to evaluate accurately whether their client holds, for example, problematic fire interest or fire safety views that require intervention.</p> <p>This research project was hosted by the Centre for Research and Education in Forensic Psychology (CORE-FP). The team also includes Dr Caoilte Ó Ciardha and Dr Emma Alleyne, plus</p>		

past and present Kent research staff and PhD students, including Dr Magali Barnoux, Dr Helen Butler, Dr Nichola Tyler, Dr Katarina Mozova, and Katie Sambrooks, as well as a team of NHS collaborators headed by Dr Lona Lockerbie (Service Director, KMPT, UK). The underpinning research and its impact beyond academia to date have led to Gannon and colleagues being nominated for, and winning, multiple awards. These include a team nomination for the international Grawemeyer 'Best Idea in Psychology' Award in **2019** and receiving the ESRC Outstanding Impact in Society Award in **2016** [G2].

3. References to the research (indicative maximum of six references)

[R1] Tyler, N., Gannon, T. A., Lockerbie, L., & Ó Ciardha, C. (2018). An evaluation of a specialist firesetting treatment program for male and female mentally disordered offenders. *Clinical Psychology and Psychotherapy*, 25, 388-400. doi: 10.1002/cpp.2172 [An Evaluation of a Specialist Firesetting Treatment Programme for Male and Female Mentally Disordered Offenders \(The FIP-MO\) - Kent Academic Repository](#)

[R2] Gannon, T. A., Alleyne, E., Butler, H., Danby, H., Kapoor, A., Lovell, T. ... & Ó Ciardha, C. (2015). Specialist group therapy for psychological factors associated with firesetting: Evidence of a treatment effect from a non-randomised trial with prisoners. *Behaviour Research and Therapy*, 73(1), 42-51. doi: 10.1016/j.brat.2015.07.007 [Specialist group therapy for psychological factors associated with firesetting: Evidence of a treatment effect from a non-randomized trial with male prisoners - Kent Academic Repository](#)

[R3] Ó Ciardha, C., Tyler, N. F., & Gannon, T. A. (2015). A practical guide to assessing adult firesetters' fire-specific treatment needs using the four factor fire scales. *Psychiatry: Interpersonal and Biological Processes*, 78, 293-304. doi: 10.1080/00332747.2015.1061310 [A practical guide to assessing adult firesetters' fire-specific treatment needs using the Four Factor Fire Scales - Kent Academic Repository](#)

[R4] Tyler, N. F., Gannon, T. A., Dickens, G. L., & Lockerbie, L. (2015). Characteristics that predict firesetting in male and female mentally disordered offenders. *Psychology, Crime and Law*, 21(8), 776-797. doi: 10.1080/1068316X.2015.1054382 [Characteristics that predict firesetting in male and female mentally disordered offenders - Kent Academic Repository](#)

[R5] Gannon, T. A., Ó Ciardha, C., Doley, R. M., & Alleyne, E. K. A. (2012). The multi-trajectory theory of adult firesetting. *Aggression and Violent Behavior*, 17, 107-121. doi: 10.1016/j.avb.2011.08.001 [The Multi-Trajectory Theory of Adult Firesetting \(M-TTAF\) - Kent Academic Repository](#)

[R6] Tyler, N., Gannon, T.A., & Sambrooks, K. (2019). Arson assessment and treatment: The need for an evidence-based approach. *The Lancet Psychiatry*, 6(10), 808-809. doi:10.1016/S2215-0366(19)30341-4 [Arson assessment and treatment: the need for an evidence-based approach - Kent Academic Repository](#)

Grant and Awards

[G1] Gannon, T. A.; ESRC; The development and evaluation of a treatment programme for firesetters. (RES-062-23-2522); 31 Jan. 2011 – 1 Feb. 2014; Award made: £513,270.

[G2] Awards:

2016: Winner: ESRC Outstanding Impact in Society Prize (team)

2017: Shortlisted: Outstanding Individual, Criminal Justice Alliance Awards (Gannon)

2019: Lifetime Significant Achievement Award, Division of Forensic Psychology, British Psychological Society (Gannon)

2019: Shortlisted: Best Idea in Psychology, Grawemeyer (team)

4. Details of the impact (indicative maximum 750 words)

As the first evidence-based and dedicated treatment and assessment programmes for firesetters, the *Firesetting Intervention Programme for Mentally Disordered Offenders* (FIP-MO) [a] and *Firesetting Intervention Programme for Prisoners* (FIPP) [b] have been implemented internationally across a range of settings since **August 2013**, including within high-security institutions. Firesetting is a type of criminal activity that often results in offenders becoming stuck in custodial settings for extended periods because of the high risks associated with release. Access to effective assessment and treatment protocols allows practitioners to help participants progress along care or rehabilitation pathways. This case study evidences the following between **August 2013** and **December 2020**:

- The reach of the FIP-MO and FIPP programmes, as evidenced by the number of professionals participating in the commercial training programme worldwide;
- The significance of implementing the FIP-MO or FIPP for organisations involved in assessing and treating firesetters, as evidenced by statements from selected institutions.

International Reach of FIP-MO and FIPP

In brief, training on how to use the two programmes has been delivered commercially to around 500 practitioners in the REF2021 period (despite being halted in March 2020 because of COVID-19) and includes the following [f]:

- All three high-security NHS psychiatric hospitals in the UK (i.e. Broadmoor Hospital, Rampton Hospital, Ashworth Hospital)
- 50 medium-secure UK hospitals
- 15 UK prisons

Fully trained practitioners now include clinical psychologists, psychiatrists, occupational therapists, nurses, social workers, and fire service professionals. A total of 31 English, Welsh, and Scottish fire and rescue services also commissioned specialist training on how to approach the assessment and treatment of adults. This included a dedicated session for London Fire Chiefs in **March 2019** [f].

Professionals in 12 other countries, including the USA, Australia, New Zealand, Japan, Portugal, Germany, Belgium, Denmark, Ireland, the Netherlands, and Singapore, have also participated since **August 2013**, with the treatment manuals translated into Portuguese and Japanese [f].

Significance of FIP-MO and FIPP in Assessing and Treating Firesetting

As statements from some of the trained practitioners demonstrate, implementing the programme has helped aid decisions regarding leave, security levels, as well as discharge or release for those exhibiting high-risk firesetting behaviours.

A cohort of staff from Broadmoor Hospital attended FIP-MO training as participants in the original research phase (early 2013) and have since adopted FIP-MO as their standard treatment for firesetting. As Broadmoor's Head of Psychological Services stated in October 2020, implementing FIP-MO over the intervening seven years has proved an important development in addressing this dangerous and intractable form of offending:

'Having an evidence-based treatment model for patients at our service has been incredibly helpful for enabling patients to move forward in their care pathway. The treatment model is one of the only evidence-based treatment models available in forensic mental health services internationally (see Mallion, Tyler, & Miles, 2020). It is for this reason that Broadmoor Hospital has adopted the FIP-MO treatment model as the treatment of choice for use with patients who have set deliberate fires' [c].

A statement from Secure Services at the NHS Essex Partnership University Foundation Trust (which adopted the programme after receiving training in **2017**) illustrated the benefits of the programme in psychiatric settings:

'The FIP-MO treatment is particularly useful when we are seeking to discharge people to the community. This is because we can demonstrate that these people have engaged in a structured intervention for firesetting, that teaches them the skills to cope with life in a more positive way rather than using firesetting. Previously, trying to find accommodation for discharged individuals with a firesetting offence in their background was almost impossible. However, using the FIP-MO provides both us and accommodation placements with evidence-based and safer decision-making in this regard' [d].

A further statement from the CPD Board Chair of the Psychological Services team at HM Prison and Probation Service, which trained 36 staff to deliver the programme on either **20/3/2017** or **25/10/2018**, confirmed similar successful outcomes in prison settings. These are described in the collated feedback by training participants, which includes a selection of specific case studies:

'An adult male serving a life sentence. The index offence involved starting a house fire in his local neighbourhood, which led to the death of one of the inhabitants. In addition to the index offence, there was a history of 2 fires started with prison [...]. The flexibility of the FIPP enabled the firesetting to be explored alongside the other risk taking behaviours that he had engaged in. During the programme he decided to engage in methadone withdrawal, at the beginning of the programme he had been stable on the prescription he received and had not felt that he could achieve withdrawal while in custody [...]. At the end of the programme, the formulation and recommendations for future risk management were shared with professionals supporting the client in future, and were reported as valuable additional information [...]. He was able to describe how fire and other risk taking behaviours had served a particular function for him, and to acknowledge that not setting fires in future (which he was resolved to do) would be a loss for him. This enabled replacement activities to be discussed which might provide reward for him' [e – Response 7, case 2].

'[...] the service user made significant progress. This included increasing his insight into how his difficulties with coping and interest in fire had contributed to a range of firesetting offences. [...] since completion of FIPP, he has progressed to lower secure conditions and has been referred to a therapeutic environment to support him further' [e – Response 9].

One US-based licensed psychologist at FirePsych Inc. confirmed that he has conducted 50 assessments since completing the training in **January 2019**, which have facilitated 'safe placement transitions and the delivery of needed supports and services' [g]. He further reported that the State of Connecticut's Department of Mental Health and Substance Abuse Services 'initiated a two-year plan to develop assessment and treatment capacity at their two largest state inpatient hospitals. Team members have begun completing assessments and delivering treatments to inpatient adults, some of whom have remained hospitalized for firesetting events occurring decades earlier' [g].

A psychologist from Forensicare, a community forensic mental health service in Melbourne, Australia, reported:

'As (FIP-MO) is the only validated treatment program available in Australia, it has been a useful tool for ensuring that the relevant risk/needs areas are covered, while allowing flexibility to treat some of the other needs we typically see in our treatment cohort (i.e. personality disorder or complex comorbidities). When training new staff on firesetting, I direct them both to the treatment program and the M-TTAF as a starting point for developing skills in this area' [h].

In **2018**, the training programme was judged by the British Psychological Society to meet the professional standards required for publication in their approved CPD catalogue [i]. It also won the ESRC Outstanding Impact on Society Award in **2016** and was shortlisted for the Criminal Justice Alliance Award in **2017** [G2].

5. Sources to corroborate the impact (indicative maximum of 10 references)

- [a]** *Firesetting Intervention Programme for Mentally Disordered Offenders* (FIP-MO) treatment manual.
- [b]** *Firesetting Intervention Programme for Mentally Disordered Offenders Prisoners* (FIPP) treatment manual.
- [c]** Statement from Head of Psychological Services, Broadmoor Hospital (21/10/2020), detailing impact since 2014 of FIP-MO since Broadmoor staff trained in 2013.
- [d]** Statement from Secure Services at the NHS Essex Partnership University Foundation Trust detailing impact of FIP-MO since staff trained in 2017 (4/10/20).
- [e]** Statement from Psychological Services Group, HMPPS (2/11/2020).
- [f]** University of Kent log of FIP-MO/FIPP training events and participants (1/8/2013 to date).
- [g]** Statement from Psychologist, Fire Psych, US (21/9/2020), detailing impact in US of FIP-MO and FIPP.
- [h]** Centre for Forensic Behavioural Science: collated feedback from Forensicare training participants, Australia, 2017 (received 24/9/2020).
- [i]** British Psychological Society Accreditation: [Approved CPD Directory - July 2020.pdf \(bps.org.uk\)](#)
- [j]** Criminal Justice Alliance Award shortlist in 2017: <http://criminaljusticealliance.org/wp-content/uploads/2017/11/What-Good-Looks-Like-2017.pdf>