Objectives
1. Evaluate if the EPS Reintegration Program Facilitator Training course meets the desired learning goals set out by the instructors.
2. Explore changes in knowledge, skills, attitudes and learning within individual sub-groups of PSPs attending the course.
3. Identify areas of strengths and improvement within the EPSRP Facilitator training course.

Methods
This prepost mixed methods cohort study including participants consisting of PSP (e.g., RCMP, police, EMS, fire, border patrol, sheriffs, etc.) and clinicians who work with PSP (n=58) based in Edmonton and Calgary who voluntarily attended the 5-day EPSRP facilitator training. Questionnaires administered pre- and post-training captured descriptive data, information about participant knowledge, mental health literacy, work reintegration, mental health stigma, and workplace attitudes. These outcome measures included the 12-item Mental Health Knowledge Survey (MAKS; Evans-Lacklo et al., 2010), and the 23-item Open Minds Survey of Workplace Attitudes (OMSWA; Szeto, Luong, & Dobson, 2013). Paired sample t-tests were utilized for quantitative data analysis.

Results
For sample demographics, refer to tables 2 and 3. Results of the paired-sample t-test analyses revealed statistically significant changes in pre-to-post-intervention scores: MAKS pre-intervention (Mean = 48.70, SD = 3.688) and post-intervention (Mean = 50.70, SD = 3.452) t(55) = -3.373, p = 0.001, and OMSWA pre-intervention (Mean = 38.01, SD = 9.850) and post-intervention (Mean = 33.18, SD = 3.639), t(55) = -4.011, p = 0.001. Mental health knowledge, literacy, and workplace attitudes towards mental health improved while mental health stigma decreased (figure 3).

Discussion
The current study addressed the second research question regarding changes in knowledge, skills, attitudes and learning of EPSRP Facilitator Training participants. Significant changes in the MAKS and OMSWA scores demonstrate that the 5-day EPSRP Facilitator Training was effective at increasing mental health literacy and reducing stigma amongst the PSP participants. The World Cafe revealed themes regarding more education throughout career trajectories, increasing accountability and trust, trained and credible individuals championing peer-support initiatives, and engagement at all levels of organizations. Additionally, mixed-methods analysis of data, which includes daily surveys, EPSRP specific pre/post questionnaires, and pre/post changes in specific subgroups (e.g., gender, professions, time in career, etc.) will take place in 2019. Further research will address EPSRP Facilitator Training in locations outside of Edmonton including Niagara Falls, ON, Wellington, New Zealand, and London, ON.

Conclusion
The EPSRP is designed to assist PSP in workplace reintegration after a critical incident or long-term absence from the workplace due to mental health conditions. Evidence-based, curriculum driven training within programs such as EPSRP may increase return to work success in PSP. Improved workplace mental health knowledge, and literacy within a positive workplace culture may reduced stigma and increased workplace productivity, morale, safety, and satisfaction. If research outcomes of the EPSRP and the Facilitator Training continue to be promising, widespread implementation may impact and benefit beyond the workplace and into PSP families, communities, and entire organizations.

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References

Figure 1: Demographic information by profession (n=50)

Figure 2: Demographic information by gender (n=49)

Figure 3: Pre/post outcome measure means for EPSRP Facilitator Training