

**POLICE AND CRIME PANEL – 10 DECEMBER 2020**

**HEALTH AND WELLBEING UPDATE**

**REPORT BY THE POLICE AND CRIME COMMISSIONER**

**PURPOSE OF THE REPORT**

*To present members with an update on Dorset Police's approach to officer and staff health and wellbeing, to include an overview of the impact of COVID-19 on employee absence.*

**1. BACKGROUND**

- 1.1 Approximately two years ago, the Police and Crime Commissioner (PCC) made available a £250,000 health and wellbeing fund from his annual commissioning budget, in order that extra steps could be provided to support officers and staff.
- 1.2 This decision was prompted by the Chief Constable's aspiration to improve the health and wellbeing of his workforce, as well as what the PCC described as a 'perfect storm', in which the work required of Dorset Police had become ever more challenging, but the resources available had, regrettably, shrunk. The PCC was aware that the health and wellbeing of Force personnel was beginning to suffer as a consequence.
- 1.3 Since that announcement, and as was detailed to the Police and Crime Panel in September 2019, a considerable amount of work has been undertaken by Dorset Police to implement a wide range of initiatives designed to improve health and wellbeing for those charged with protecting the public. These initiatives are detailed further at Appendix A.
- 1.4 It is also true, of course, that the operating context has changed significantly.
- 1.5 First, the Prime Minister made a commitment to uplift the number of police officers for all forces across England and Wales. In September 2019, the PCC had expressed concern that the number of police officers in Dorset were at their lowest since the 1980s – the Force is now on target to have an additional 50 constables by the end of the financial year.
- 1.6 Second, the emergence of the COVID-19 pandemic has brought about unforeseen and increased risks to the health of officers and staff, especially those who are unable to maintain social distancing during the course of their duties.
- 1.7 This paper will provide an update on the new wellbeing strategy, as well as an update on performance data and the measures to protect the workforce from COVID-19. Naturally, the information herein needs to be understood within the context of the pandemic which has, in many respects, made it challenging to draw comparison with previous years.

## **2. HEALTH AND WELLBEING STRATEGY 2020-22**

- 2.1. In July 2018, the Home Office set a 'common goal for police wellbeing'. This requires that by 2021:
- Every officer and staff member feels confident that their welfare and wellbeing is actively supported by their police force throughout their career;
  - That a culture supporting this is embedded in every force;
  - That individuals have access to appropriate support when they need it.
- 2.2. In response, the Force approved an evidenced-based wellbeing strategy that promoted physical activity, good nutrition and sleep quality, addressed the stigma of mental ill health and implemented a variety of support measures, including the peer support network, personal resilience support and focus on the need to take adequate meal and rest breaks.
- 2.3. In the years since this Alliance wellbeing strategy had been agreed several key developments have taken place. These include Uplift and COVID-19, as mentioned at sections 1.5 and 1.6 respectively, but also that HMICFRS now include wellbeing in the annual PEEL inspections and the establishment of the National Police Wellbeing Service (NPWS) in 2019.
- 2.4. NPWS offer eight live services to Forces to assist with the promotion of wellbeing. These include developing a peer support network, introduction of psychological screening, peripatetic wellbeing sessions and the delivery of emotional resilience sessions – all things already established across the Alliance and a mark of the progress that has been made in Dorset.
- 2.5. In September 2020, the Alliance People Portfolio developed a new Health and Wellbeing Strategy covering the period 2020-22. The new strategy identifies five Strategic Actions:
1. Every person will be a health and wellbeing champion;
  2. Commit to the creation of a healthy psychological work environment;
  3. Respond to and anticipate the health and wellbeing needs related to COVID-19;
  4. Recognise the wider scope of wellbeing e.g. interaction with climate change, community wellbeing / Public Health and the synergy arising from collaboration with partner agencies;
  5. Demonstration of value-driven behaviours facilitating recruitment and retention of our people.

## **3. PROGRESS**

- 3.1. There continues to be significant progress made in respect of promoting wellbeing across the Force. As previously reported to this Panel, the HMICFRS reviewed 'Wellbeing' as part of the Peel Inspection process in 2017 and commented that the Force had good understanding and governance, recognised the issue as a priority, but was not investing as much as Devon & Cornwall Police in this area of activity.
- 3.2. Since that time, the PCC's funding for wellbeing activity has enabled the Force to take forward a range of new initiatives as detailed at Appendix A. The Force requested £234,565 of the £250,000 budget to deliver new initiatives. Some were one-off purchases, whilst others could be considered for permanent funding if successful. Of these initiatives:
- 11 have already evidenced a benefit and have subsequently been approved for continuous funding;
  - Two were one off purchases/initiatives;

- One has received funding from the National Police Wellbeing Service;
- Five have not yet been considered for mainstream funding;
- One has been concluded;
- An additional benefit that has come from this funding is the additional funding that has now been made available to the Force Welfare Department to continue with these initiatives.

3.3. The latest 2019 Peel assessment recognised this investment, summarised performance as ‘good’ and reported that: ‘there is a caring culture in the force’; staff ‘felt their welfare was a priority’; line managers ‘know how to access wellbeing services’; and ‘equal importance is given to both physical and mental ill-health’.

3.4. The Force has now committed to a regular budget for wellbeing and agreed to a new structure for the wellbeing team which means that there is a permanent full-time wellbeing practitioner based in Dorset. An additional welfare officer has also been agreed by the Force for a year and the post-holder started in March 2020. The welfare administrator post has been increased from 18.5 hours a week to a full-time post and a new post-holder will be starting shortly. This will increase the resilience in the welfare department enabling the support of more individuals and to enable more proactive work to be completed.

3.5. Of particular note, is the provision of a dedicated Psychological Support Programme. Over 350 officers and staff who are working in posts that carry high psychological risk benefit from involvement in this programme. This has been recognised as ‘good practice’ by Devon & Cornwall Police, who took the decision to invest in a similar scheme for their ‘high risk’ roles.

#### **4. COVID-19**

4.1. The challenges of the COVID-19 pandemic have affected every area of the Force and the work in support of health and wellbeing is no exception. The Panel has previously been updated on the work undertaken by the Force and OPCC to ensure a COVID-19 Secure workplace, as well as information regarding the supply of PPE.

4.2. Through this period, it has also been necessary to consider changes to business as usual policies and processes to ensure that as much as possible is being done to provide health and wellbeing support to officers and staff. This has, for example, included work to look at how recruitment processes can be streamlined, and kept safe, to ensure the uplift of new officers continues.

4.3. During the early stages of the pandemic, health and wellbeing personnel sought to contact all officers and staff who were shielding, providing them with bespoke advice and support, as well as signposting to other services as required. In addition, the wellbeing team have been providing regular health and wellbeing communication updates to all Force employees. This includes a recently established external portal, so staff who are unable to attend work can easily keep up-to-date with key information.

4.4. Following the first national lockdown, a COVID Welfare Recovery Plan was developed. This covers four pillars of activity, aligned with the Health and Wellbeing Strategy, but nevertheless focusing on issues that are particular to the current crisis. These are:

- Financial Wellbeing – addressing, for example, the possibility that household finances have been affected by job loss and furlough;
- Physical and nutritional wellbeing – addressing, for example, the impact of gym closures and reduced exercise caused by adherence to national regulations
- Psychological wellbeing – addressing, for example, stress caused directly or indirectly by the pandemic, as well as loneliness

- Caring Responsibilities & Working Arrangements – addressing, for example, difficulties caused by school closures or bereavement support.

4.5. These pillars were the subject of a dedicated month of communications activity in the late summer and have further been supported by a virtual interactive festival of wellbeing, WellFest 2020, which ran across the Alliance in October 2020.

## 5. PERFORMANCE AND DATA

5.1. The Wellbeing Strategy is monitored via a dedicated performance pack that provides a mechanism for the Force and OPCC to review progress against the strategy. This pack includes data analysis, ongoing environmental scanning, a detailed risk register, policy review and activity against the annual delivery plan.

5.2. Wellbeing data is collected on a quarterly basis and reviewed at the Strategic People Board. Most recent data (Q2) includes the following tables:

5.3. Average working days lost:

	Rolling year ending Q2 20/21	2019/20 End of Year	Average days lost Q2	Average days lost Q2 last year
Police officers	10.62	10.39	2.32	2.36
Police Staff	9.88	9.82	1.83	2.48
PCSO	8.96	7.15	3.19	1.61

5.4. Top three reasons for sickness absence (note – data is a snapshot representation as it was recorded on the system at that time):

	Top 3 reasons	12 months combined total days lost	% of total days (12 months combined)
<b>Officer</b>	Mental Health	5226.	38.97%
	Muscular / Skeletal	2324	17.33%
	Covid	1610	12.01%
<b>Staff</b>	Mental Health	3697	28.28%
	Covid	2555	19.54%
	Muscular / Skeletal	1574	12.04%
<b>PCSO</b>	Mental Health	333	29.18%
	Muscular / Skeletal	207	18.15%
	Respiratory	174	15.30%

5.5. In terms of overall impact from wellbeing activity, the national drive is to focus on support rather than attendance. As previously explained, this has resulted in absence data all but disappearing from the HMICFRS value for money dashboard, making national comparison extremely difficult. The current HMICFRS dashboard only highlights police officer long-term sickness and shows that Dorset has long term sickness absence rates at 0.9% against a national average of 2%.

5.6. The success of forces in term of wellbeing is measured against the Home Office goal of ensuring staff and officers feel supported and have access to support when it is required. This is reflected fully in the force wellbeing strategy and the results of the dedicated

'Wellbeing Pulse Survey'. This was completed in 2019 to provide baseline and was repeated in February 2020. On this occasion the survey received 759 responses (compared to 347 in 2019).

5.7. Headlines from the 2020 survey include:

- 74% of respondents believe Dorset Police is a good place to work up (2019 = 64%);
- 57% carry out the recommended minimum amount of physical activity every/most weeks (2019 = 56%);
- 3 out of 5 agree that their line manager is interested in their wellbeing
- 80% of staff view their relationship with their manager as positive (2019 = 81%);
- 90% feel their relationship with work colleagues is positive (2019 = 92%);
- When accessing support, staff are overwhelmingly positive about the benefits of private medical interventions, the EAP, physiotherapy, counselling and occupational health (84% - 75% compared to 85% - 70%);
- 55% of respondents said they have experienced significant stress or mental health issues in the last year (2019 = 57%);
- 56% have attended work when they should have been off for sickness (2019 = 60%);
- Only 38% of staff regularly get at least 7 hours sleep (2019 = 38%);
- 24% of staff believe they do not have a good work/life balance (2019 = 32%).

## **6. FUTURE DEVELOPMENTS**

6.1. Over the next six months, the focus will be on embedding the new Health and Wellbeing Strategy across both forces, as well as delivering the detailed plans that support the five Strategic Actions.

6.2. This will be supported by a refresh of the ActivAte 2020 brand used to communicate health and wellbeing across the Alliance.

6.3. Naturally, the Force will continue to undertake formal environment scanning to ensure they, and the OPCC, remain aware of all the latest developments in this specialist area – in particular those related to response to and recovery from COVID-19.

6.4. The OPCC is also working with Health and Wellbeing colleagues to consider the utilisation of the underspend from the PCC's fund.

## **7. CONCLUSION & RECOMMENDATION**

7.1. As before, this report offers a high-level overview into the work being carried out by the Force in relation to health and wellbeing, key data on sickness absences, and ongoing developments. Updated information is also provided regarding COVID-19 and the specific initiatives that have been funded by the PCC.

7.2. It is recognised that the data shows a small increase in sickness absences in some key areas, albeit not at the rate that might have been expected because of the COVID-19 pandemic. There has been a modest improvement observed in several areas covered by the 2020 Wellbeing Pulse Survey and further signs that the PCC's investments have had a positive impact – most notably, that muscular-skeletal issues have seen a considerable decline. Of course, further analysis will be required – most likely at a national level –

before it will be possible to draw firm conclusions about the affects of COVID-19 on general health and wellbeing trends.

- 7.3. The OPCC will continue to work with the Force to evaluate the success of the new Health and Wellbeing Strategy and scrutinise the delivery of the associated action plans.
- 7.4. Members are asked to note the report.

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Appendices

Appendix A – Health and Wellbeing Initiatives