

Meeting	Authority Meeting
Date	25 November 2020
Location	Video Conference
Title of Paper	Wellbeing Report Quarter 2 2020
Presented by	Jude Helliker, Director of People and Development
Recommendation to Members	For Discussion
Appendix Attached	No

PURPOSE

The purpose of this paper is to provide an update on Q2 Wellbeing activities and proposes next steps to continue to mainstream the wellbeing agenda.

Members are invited to discuss the content of this paper.

1. BACKGROUND

- 1.1 The People Strategy enables the delivery of the Organisational Strategy and Annual Delivery Plan with one of the strategic outcomes being the creation of a 'Positive Working Environment'. The wellbeing of our people underpins all of the activities in the People Strategy.
- 1.2 The COVID-19 pandemic has changed the world we live in, with much of it out with our control. Police Scotland recognises that the wellbeing of our people throughout this challenging time is critical.
- 1.3 In addition to the wellbeing activities within the Annual Delivery Plan we have introduced a number of preventative/early intervention mechanisms in an attempt to reduce issues coming to fruition. This update aims to provide an overview of these activities.

2. MAIN REPORT

2.1 Quarter 2 Activity | Core Wellbeing Services

2.1.1 Employee Assistance Programme

2.1.1.1 EAP contacts in Q2 have risen 23% compared to Q1 this year and in comparison to Q2 2019/2020 are just 13% lower. This would indicate that officers and staff are now engaging with the EAP to seek counselling support and not just seeking generalist information on COVID-19 from the NHS site.

Employee Assistance Programme

	2018/19	2019/20	2020/21	Variance
Quarter 1	335	701	415	-41%
Quarter 2	386	588	511	-13%
Quarter 3	328	549		
Quarter 4	338	611		
Total	1407	2449		

2.1.1.2 Contacts to the EAP in Q2 are predominantly due to personal issues as follows: 68% personal; 32% work.

2.1.1.3 The top 3 Personal Issues are:

- Mental Health

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- Personal Relationships
- Bereavement

2.1.1.4 The top 3 Work Issues are:

- Work Related Stress
- Trauma at Work
- Shift Working

2.1.1.5 Usage - Top 4 Divisions

For reasons of confidentiality, the information is spilt by division but no further.

The figures for a rolling year October 2019 – September 2020 are

1. Central Division 11.9%
2. Edinburgh Division 11.1%
3. Tayside Division 7.2%
4. The Lothians and Scottish Borders Division 6.6%

Numbers of contacts per Division – Top 4

	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21
SCD	24	24		
OSD	23	24		
Glasgow	23	46		
Edinburgh	20	35		

2.1.2 Occupational Health

2.1.2.1 COVID-19 continues to have an impact on OH demand and the provision of service delivery. Tele-consultations have continued as normal. Face to face consultations are not being carried out in line with government guidelines.

2.1.2.2 Management Referrals

Q2 saw a significant reduction in management referrals compared to Q2 last year. This reduction has allowed Optima Health to prioritise specialist medicals that had to be suspended Q1.

Management Referrals

	2018/19	2019/20	2020/21	Variance
Quarter 1	850	975	575	-41%
Quarter 2	824	986	694	-30%
Quarter 3	968	949		
Quarter 4	1085	806		
Total	3727	3716		

2.1.2.3 Physiotherapy Referrals

Q2 referrals to physiotherapy increased by 66% on those submitted Q1.

The increase is a result of the lockdown restrictions being lifted. Officers are back to attending calls and with the reopening of gyms muscular skeletal injuries are increasing.

Physiotherapy Referrals

	2018/19	2019/20	2020/21	Variance
Quarter 1	254	189	65	124(-66%)
Quarter 2	244	176	108	68 (-39%)
Quarter 3	184	166		
Quarter 4	233	134		
Total	915	665		

2.1.2.4 Specialist Medicals

During Q1 there were no driver's medicals undertaken so a backlog has built up. The courses resumed in August and Optima Health provided dedicated days to specialist medicals.

Drivers Medicals

	2018/19	2019/20	2020/21	Variance
Quarter 1	369	317	2	315(-99%)
Quarter 2	321	316	531	215(+68%)
Quarter 3	362	296		
Quarter 4	400	318		
Total	1452	1247		

2.1.2.5 Armed Policing Medicals

Armed Policing were the first specialist medicals to resume. There is no longer a backlog.

Armed Policing Medicals

	2018/19	2019/20	2020/21	Variance
Quarter 1	212	160	189	29(+18%)
Quarter 2	196	156	145	11(-7%)
Quarter 3	211	189		
Quarter 4	201	181		
Total	820	686		

2.1.2.6 Recruitment Medicals

These are led by demand to keep Police Constable numbers constant.

The average deferral rate for Q2 was 38%.

Reasons for deferral were:

- BMI
- Psychological
- Musculoskeletal
- Colour Vision

Recruitment Medicals

	2018/19	2019/20	2020/21	Variance
Quarter 1	114	298	104	194(-65%)
Quarter 2	234	362	165	197(-54%)
Quarter 3	196	294		
Quarter 4	390	391		
Total	934	1345		

2.2 Prevention and Early Intervention

2.2.1 As reported in previous Committee meetings, prevention continues to be an area of focus in response to the prevalence of psychological absence among our people.

2.2.2 Your Wellbeing Assessment

2.2.2.1 These are now available across the organisation however it is not currently being promoted. During Q3 2019/2020 Optima Health advised a review of the questions and process.

2.2.2.2 This review is now complete and a relaunch and advertising campaign is our priority for December 2020.

2.2.3 Flu Jab Scheme

- 2.2.3.1 Prior to this year, the process for officers and staff getting the flu jab provided by the organisation was to email the Health and Wellbeing department to request a voucher that they used to pay for their vaccine at their local Boots or Lloyds chemist. However, this year the Wellbeing and Inclusion department have changed how they are providing officers and staff with the offer of the vaccine to provide added flexibility and increase accessibility.
- 2.2.3.2 Staff and officers who wish to receive the jab from September 2020, should make an appointment at their local or most suitable pharmacy and pay for their vaccine themselves in the first instance, requesting a receipt for the payment. After they have had their vaccine and receipt for its purchase, they can then claim for reimbursement through SCoPE expenses. We expect most providers to charge around £8 - £10 for administering the vaccine, however, we will reimburse up to £10 against the receipted cost. If the flu jab costs more than £10 then individuals should cover the extra charges themselves. However, where officers and staff cannot reasonably access a provider which offers the jab within that cost, for example in remote areas, additional support will be considered. The scheme will run from 14 September until the 31 December 2020.
- 2.2.3.3 The NHS advises it is even more important this year to stay as healthy as possible, in order to keep our immune defences up against COVID-19. The flu vaccine is one of the most effective interventions we have to reduce pressure on the health and social care system this winter. We are currently seeing the impact of COVID-19 on the NHS and social care, and this coming winter we may be faced with the co-circulation of COVID-19 and flu.

2.3 Short Life Working Group (Wellbeing Investment)

- 2.3.1 The Short Life Working Group made a series of recommendations which were approved by Police Scotland Senior Leadership Board. A procurement tender was undertaken and the provider is in the process of being appointed.
- 2.3.2 There will be an extensive development programme which will be completed by 31 March 2021. This wellbeing programme will initially be focused upon four Divisions: Greater Glasgow, Fife, Operational Support Division and Corporate Services.

- 2.3.3 Starting with the Force Executive, there will be launch awareness training. This will then be followed up with two further development interventions which will focus upon the Force Executive being role models and achieving the commitments made by the Chief Constable on mental health.
- 2.3.4 Specific training will then follow for People Managers (Sergeants to Chief Superintendents and staff equivalents) on building psychological safety and resilience. An example of the commitment to this programme will be that each People Manager in the four divisions will have 6 separate training modules covering a total of fourteen hours. Every PC and staff equivalent will also attend a module on building psychological safety.
- 2.3.5 Successful delivery of this wellbeing programme will require a multi-layered approach, with clear interaction between each specified deliverable. The provider will employ a number of key delivery principles, which will underpin the methods in which we will break down mental barriers, train pioneers, stimulate conversations and build psychological resilience across the workforce
- 2.3.6 In addition, the following will be rolled out across Police Scotland/Scottish Police Authority:
- Wellbeing assessments to be re-launched with robust promotional campaign to encourage participation.
 - Wellbeing MOTs/webinars supported through our partnership with Police Mutual on key issues facing our people 'Your Health Matters'
 - Back clinics and sleep clinics, run in locations across the country.

2.4 SPA Wellbeing Audit

- 2.4.1 The Staff Wellbeing Internal Audit was presented as Agenda Item 3 at the SPA Audit, Risk and Assurance Committee on 15 September 2020 by Gary Devlin, Partner, Scott-Moncrieff. The full copy of the report is available from this meeting. In summary, the key recommendations were as follows
1. The Wellbeing Framework that is included in the People Strategy will be circulated to all key stakeholders and feedback sought. A review of this engagement and analysis of feedback will be carried out and key findings and recommendations will be reported to P&D SMT, PPMB and SPA Resources Committee.

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If required, any appropriate amendments will be made to the Strategy.

2. The four wellbeing pillars will remain our approach to wellbeing – psychological, physical, social and financial, with initiatives communicated to staff through the ‘Your Wellbeing Matters’ Campaign. Additional resources will be allocated to the wellbeing team to ensure that all wellbeing documents clearly align with key priorities and deliverables. There will be a review undertaken to ensure that the approach to wellbeing is consistent with the approved People Strategy and the People and Development Annual Delivery Plan.
3. The Wellbeing Team will develop a clear plan which will be aligned to the People Strategy and the People and Development Annual Delivery Plan. The plans that are developed will take account of team resources available to deliver these objectives and the key activities of the wellbeing function. In addition the wellbeing plans will clearly outline the responsibilities, key deliverables, measures of success and timescales for each year of the plan that will be required to mainstream wellbeing across the organisation
4. The development of a wellbeing training plan will be clearly articulated that will set out the training that has to be prioritised and delivered. The plan will also confirm the roles and responsibilities associated with the delivery of training. This will also have clear evidence of evaluation of the training that has been delivered.
5. It is acknowledged that a further review will be undertaken to identify arrangements for reviewing risk assessments; higher risk roles and roles which have identified support needs.
6. There is a review being undertaken on ‘Your Wellbeing Assessment’ which is being carried out in partnership with our Occupational Health provider. The intent of these psychological assessments is that all officers and staff will have access to a voluntary and confidential process. The outcomes of these wellbeing assessments will be reviewed by the Head of Wellbeing and Inclusion. The success of the introduction of Your Wellbeing Matters in 2017 was the partnership and engagement working with key partners, stakeholders and providers. We will develop a plan for the roll out of Your Wellbeing Assessment for 2020/21 which will include a similar engagement process.

7. The wellbeing function receive weekly, monthly and quarterly updates through our EAP and OH Providers. Our partnership working with our providers ensures we are fully aware of any concerning trends or patterns. In addition, we receive monthly updates with Staff Associations and Unions, ensuring that we are up to date with current wellbeing issues. A review of key information gathered from wellbeing feedback; trends/performance will be carried out and analysed in relation to the effectiveness and efficiency of the service provided. We will consider the recommendation with specific regard to removing barriers that may occur with accessing and getting support.
 8. People and Development produce a monthly dashboard of key indicators of the health of the organisation. It includes the indicators referenced in this document and is reviewed internally at governance boards and at a strategic level by the Force Executive and scrutinised by the Scottish Police Authority. In quarterly meetings with our EAP and Occupational Health Providers we also undertake benchmarking with both private, public and 'blue light' organisations. An analysis of existing indicators will be carried out with key governance groups to ensure requirements are being met on wellbeing information.
 9. The Engagement and Wellbeing survey is a key piece of evidence for our organisation that will provide us with information about the opinions of our workforce on a wide range of aspects of Police Scotland.
- 2.4.2 The Chief Constable continues to be supportive and will drive the launch of the new Engagement and Wellbeing survey proposed in February 2021.
 - 2.4.3 A review of the progress of the SLWG will be carried out which will identify resource requirements to deliver the review and a clear plan will be developed for priority actions and delivery will be presented to P&D SMT for consideration/approval.
 - 2.4.4 An action plan for each of the aforementioned items has been agreed with the Police Scotland Audit and Assurance Team.

2.5 Scottish Mental Health at Work (SAMH) Audit

- 2.5.1 Following the creation of a Short Life Working Group (SLWG) to explore how to embed wellbeing and mental health at work into

everyday culture at Police Scotland, SAMH were asked to undertake a review of the current support available and provide some recommendations based on their experience as a specialist Mental Health organisation.

- 2.5.2 The first observation made by SAMH was to acknowledge and applaud the hard work, effort and commitment which has already gone in to supporting the workforce within Police Scotland/SPA to stay psychologically well. The range and depth of support tools on offer and our commitment was commended. However, SAMH has noted, there remains challenges to embedding this as a wholesale shift in culture. Predominantly, the challenges seem to relate to absence rates, perception and a low level of engagement with support mechanisms.
- 2.5.3 SAMH have made a number of recommendations which they believe will assist Police Scotland in achieving a mentally healthy workplace culture. These recommendations are aligned with those identified in the Scott-Moncrieff Audit and will be incorporated into this Action Plan.

2.6 Response to COVID-19

2.6.1 Wellbeing Hub

2.6.1.1 A key objective of the response to the COVID-19 pandemic was to ensure that our people's wellbeing was a focus of all operational decisions and that they have access to relevant information on support available regardless of their working situation. A Wellbeing Hub, which brings together all relevant information, has been developed and launched and can be accessed both in work and at home from personal devices.

2.6.1.2 Within the Hub, support services and resources have been aligned to our four wellbeing strands; Psychological, Physical, Financial and Social, to ensure our people can access the support they need. The Hub also contains resources from external organisations such as NHS, SAMH and Oscar Kilo, and is updated regularly to respond to recurring themes and trends. Two themes are updated each week.

2.7 Measures

2.7.1 To fully understand the impact of the wellbeing activity a robust set of measures continues to be refined. The analysis of the data,

trends and learning will be incorporated throughout future updates.

- 2.7.2 All upskilling will be fully evaluated to measure increased knowledge and capability. Feedback will also be used to refine and improve the approach and content of all upskilling/development activity.

2.8 Insights

- 2.8.1 There is a consistent trend across the core TRIM wellbeing service of a sustained increase in utilisation. The data tells us that officers and staff are engaging directly with the support services available to them without the need to seek signposting through the Wellbeing Champions. This increase also suggests that the ongoing promotion and education around this is of continued significant value.
- 2.8.2 Psychological issues continue to be the most common reasons for engaging with these support services however there is a rise in the number of requests for financial support and support for people with longer term medical conditions.
- 2.8.3 To reverse the trend in psychological absence figures, further investment through the SLWG with a focus on preventative activities is in progress. Increasing the knowledge, awareness and accountability of line managers in relation to their role in creating positive environments, along with accessing the right support is vital.

2.9 Next Steps

- 2.9.1 Following the wellbeing champion survey, work is ongoing to merge the TRIM team and wellbeing champion's to form one wellbeing network across the service.
- 2.9.2 Once an action plan from the short life working group has been agreed further work will need to be carried out on an implementation plan for progression and evaluation of activity. This is likely to focus on two parts; core wellbeing systems and any new preventative measures/approaches.
- 2.9.3 Work continues with Optima to ensure that the most up to date information is available in accordance with future updates.

3. FINANCIAL IMPLICATIONS

3.1 There are financial implications with associated with this paper in that there is a requirement for significant investment required for personnel and activity to further integrate and mainstream wellbeing across the organisation in a meaningful way.

4. PERSONNEL IMPLICATION

4.1 There are no current personnel implications.

5. LEGAL IMPLICATIONS

5.1 There are legal implications associated with this paper in that Police Scotland requires to be compliant with the Health & Safety at Work Act 1974. There is direct correlation between an individual's wellbeing and their working environment. We must do everything reasonably practical to provide a safe and healthy workplace for our people.

6. REPUTATIONAL IMPLICATIONS

6.1 There are reputational implications associated with this paper in that Police Scotland do not continue to prioritise the wellbeing of our people then staff morale and public perception may be negatively impacted.

7. SOCIAL IMPLICATIONS

7.1 There are no current implications for social impact.

8. COMMUNITY IMPACT

8.1 There are no current implications for community impact.

9. EQUALITIES IMPLICATIONS

9.1 There are no current implications for equalities impact.

10. ENVIRONMENT IMPLICATIONS

10.1 There are no current implications for environmental impact.

RECOMMENDATIONS

Members are invited to discuss the content of this paper.