

Agenda Item 2.1

| Meeting | People Committee | | | | |
|----------------------------------|-----------------------------------|--|--|--|--|
| Date | 25 February 2025 | | | | |
| Location | Online | | | | |
| Title of Paper | Q3 Wellbeing Report & Action Plan | | | | |
| Presented By | Katy Miller, Director of People & | | | | |
| _ | Development | | | | |
| Recommendation to Members | For Discussion | | | | |
| Appendix Attached | Appendix A - Health & Wellbeing | | | | |
| | Action Plan | | | | |
| | | | | | |

PURPOSE

The purpose of this paper is to provide an update against the new Health & Wellbeing (HWB) Plan for Quarter 3.

The paper is submitted for discussion.

1. BACKGROUND

1.1 This paper presents an update against the Health and Wellbeing (HWB) action plan (Appendix 1) as approved by the People Committee in November 2024.

Health and Wellbeing Programme Approach

1.2 The HWB action plan takes a proactive, preventative and person-centred approach towards the health and wellbeing of our workforce. The approach intends to understand and consider the needs of our people, ensuring that we don't only engage with our people in reaction to a wellbeing issue (undo), but that we make an impact in terms of prevention and mitigation of factors.

Dependencies & Achievability

- 1.3 We continue to recognise that there are several dependencies that we need to consider ensuring that the plan is both realistic and achievable. We continue to work with colleagues across People & Development and the wider organisation to consider and plan accordingly. Dependencies include:
 - A People and Development restructure; the consultation concluded in December 2024 and counter proposals and feedback is now being considered.
 - Force-wide and senior leadership support and engagement with the programme.
 - Force-wide engagement with and delivery of plan.
 - HWB team resources and expertise in place to undertake the plan.
 - Specific financial support if it is felt external expertise is needed to progress i.e. recent independent review of health and wellbeing conducted by external organisation, Thrivewise.

2. HEALTH AND WELLBEING ACTION PLAN UPDATES

2.1 A brief overview of some of the most prominent action within each 'Health and Wellbeing Goal' at present is provided below.

HEALTH AND WELLBEING GOAL - IMPROVE WORKFORCE MENTAL HEALTH AND REDUCE SUICIDE

Lifelines Scotland Facilitators

2.2 The Lifelines Scotland Facilitators programme continues to be rolled out and currently has a reach of c.2000 people with c.100 active trained facilitators in the organisation. As of November 2024, completion of the training is now recognised within our staff and officer SCOPE records.

Since the September 2024 probationer intake, all probationers receive the Lifelines Scotland input, to coincide with becoming operationally live. This is delivered in-house by our probationary training facilitators.

Lifelines Scotland have recently published an evaluation report (2019-2024) which provides insights into the programme delivery and impact over the 5-year period. The snapshot taken from the report below highlights the engagement of our officers and staff with the programme. The report does explore impact further and we have also previously conducted our own internal evaluation of the programme which enabled us to shape the way forward. We are currently in negotiation with Lifelines Scotland around the update of our current memo of understanding for 2025-2026.



Wellbeing Champions

2.3 The number of HWB champions is still at circa 240 across the organisation. The aim of the Wellbeing Champions network is to

support colleagues' health and wellbeing. Champions can offer a confidential listening service, and they can also help by signposting people to relevant support.

The wellbeing champions activity tracker has been developed and implemented and has allowed us to undertake a review after 9 months of the refreshed network.

Whilst this is demonstrating high level trends, the overall engagement levels from champions in attendance at CPD events and tracker completion has been mixed to low. An action plan to understand why and what works to increase engagement has been developed for this Quarter, Jan – March 2025, with a further review date set for the end of the financial year.

Health and Wellbeing Communications

2.4 The Health and Wellbeing intranet site has been reviewed and is now a reliable source of information. As requested through user insights the landing page provides urgent care and support information and links to pages with more detail on specific services. Continuous improvements are being made, for example the occupational health pages now contain instructional videos for the new portal and advice on what makes a good referral.

HEALTH AND WELLBEING GOAL - SET STRATEGIC DIRECTION FOR HEALTH AND WELLBEING WHICH IS EQUITABLE, EVIDENCE INFORMED AND EVALUATED

The National Police Wellbeing Service (Oscar Kilo) Collaboration

2.5 The National Police Wellbeing Service (Oscar Kilo) collaboration memo of understanding is under development. The Information Assurance and Security protocols we are establishing through this MoU process will allow us to work together effectively. For example, with regards to benchmarking, utilising the recommended benchmarking tool provided by Oscar Kilo's National Police Wellbeing Service.

People Strategic Plans

2.6 People strategic plans have been developed in collaboration with our People Partners. They contain specific wellbeing measures for local leaders to commit to and be held accountable for. These plans are

currently out for consultation. It is anticipated these will be implemented in April 2025.

Health and Wellbeing Governance Board

2.7 A review of the purpose and impact of the Health and Wellbeing Governance Board has taken place and it has been decided that moving forward health and wellbeing will report into the recently convened People Board with health and wellbeing to become a standing item on the Boards agenda. This change was implemented in January 2025.

Your Voice Matters

2.8 The Your Voice Matters (YVM) staff survey was conducted during summer 2024. In the last few weeks, the headline results have been made available. Health and Wellbeing team contributed to the design of the survey and question bank to develop understanding of workforce perspectives to health and wellbeing. The WHO-5 index questions were incorporated in a bid to establish a benchmark score as a subjective measure of the wellbeing of our workforce. HWB are currently working with the YVM project team to scrutinise the results for further insights which we will report upon during Q4 2024-25.

HEALTH AND WELLBEING GOAL - CONTINUOUS IMPROVEMENT OF THE DELIVERY AND EFFECTIVENESS OF WELLBEING SERVICES AND CORPORATE FUNCTIONS

Occupational Health (OH) and Employee Assistance Programme (EAP)

2.9 Health and wellbeing continue to work with our delivery partners, OH – Optima Health and EAP – Vivup, on the monitoring and performance of the service provided. Some headlines are summarised below:

Occupational Health (OH)

- The introduction of the My OH Portal at the beginning of September 2024 has changed how we host all occupational health related activity and provides us with easily accessible levels of data and insights through Power BI.
- An overview of the services delivered since the introduction of My OH Portal in September 2024 is provided below. As can be

seen there have been 3501 Occupational Health service requests made during this time.

| Overall – Since 1 st September 2024 | Volume | % |
|--|--------|-------|
| Performance & Attendance Management (OH | 1,947 | 55.6% |
| advice to support the management of absence, | | |
| attendance at work or understand an | | |
| employee's capability to work) | | |
| Fitness For Task (i.e. medicals) | 653 | 18.7% |
| Pre-Placement (required for a new employee or | 510 | 14.6% |
| an existing employee in a new role) | | |
| Specialist Services (i.e. physiotherapy) | 333 | 9.5% |
| Pensions (i.e. IHR/IOD) | 58 | 1.7% |
| Total | 3501 | |

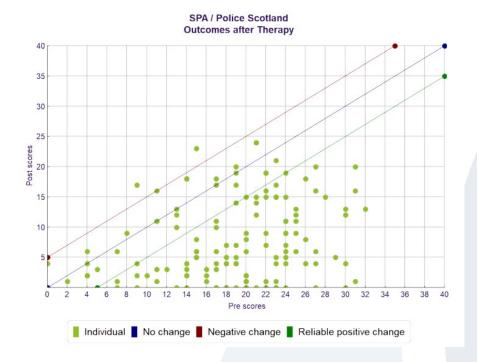
 The portal allows us to scrutinise each service area, example for the Performance and Attendance Management referrals provided below. This enables us to monitor the service delivery and performance of the contract, identifying areas that may require attention.

| Performance & Attendance Management | | | | | | |
|---|-------|-------|--|--|--|--|
| Closed - all interventions complete | 1,585 | 81.4% | | | | |
| Closed - Cancelled | 86 | 4.4% | | | | |
| Closed - Withdrawn | 72 | 3.7% | | | | |
| In progress - appointment booked | 44 | 2.3% | | | | |
| In Progress | 39 | 2.0% | | | | |
| Withdrawn | 36 | 1.8% | | | | |
| Draft | 23 | 1.2% | | | | |
| In progress - pending appointment booking | 21 | 1.1% | | | | |
| In progress - escalation to manager | 18 | 0.9% | | | | |
| FME - Request Open | 15 | 0.8% | | | | |
| FME Report Pending | 8 | 0.4% | | | | |
| Total | 1,947 | | | | | |

Employee Assistance Programme (EAP)

- Since 1 April 2024 we have had 1,287 officer and staff contacts with the EAP service.
- 3,529 sessions of support have been delivered, these vary from in-the-moment support via telephone, to virtual and face to face.
- This support also includes more specialist support in the form of Pure Cognitive Behavioural Therapy (CBT) and Eye Movement

- Desensitisation and Reprocessing therapy (EMDR) with over 160 sessions delivered to officers and staff.
- The graphic below displays outcomes after therapy, and as can be seen most clients are experiencing positive outcomes after therapy.



Referring into our EAP & OH services

2.10 Currently colleagues can self-refer into our Employee Assistance Programme. At the last People Committee members asked for Police Scotland to explore the possibility of extending this to our Occupational Health Service (action PC-20241127-001 refers). The possibility of this will be explored as part of our HWB plan goals - 'Continuous improvement of the delivery and effectiveness of wellbeing services and corporate functions'.

Health and Wellbeing partner forum

2.11 Our partners are key in assisting us in how we support our officers and staff; not only as key allies in support of the health and wellbeing work, we do, but also in their own roles, providing support mechanisms and vital networks for our people.

It is essential that we have strong, positive links with these partners and maintain open communication channels to allow both sides to contribute to supporting the wellbeing of our people and to ensure joined up, collaborative relationships. It will also allow Health and Wellbeing to continue to improve engagement with officers and

staff, as part of our action following on from the HMICS Frontline Focus- Wellbeing Report (April 2024).

The Health and Wellbeing partner forum held its first meeting in November 2024. The first meeting was a positive and productive beginning to this community, with attendees agreeing to the draft common purpose: Working together to improve the health and wellbeing of everyone in PS and SPA.

The terms of reference (ToR) and ways of working were agreed. In January, the focus was on culture, and follow-up meeting agreed on this topic for February.

HEALTH AND WELLBEING GOAL - DEVELOP A WORKFORCE WHO PRIORITISE WELLBEING

- 2.12 Work is being undertaken to develop a common thread of health and wellbeing content in all learning content throughout the organisation. A summary of some of the ongoing activity is provided below:
 - Staff induction HWB content has been updated.
 - Health and wellbeing content in probationer training and unit 5 (health and wellbeing) has been reviewed and new content planned for January 2025. Revised learning outcomes will require approval by SQA.
 - For Managers, the eLearning HWB related content for the Sergeants Diploma has been reviewed and requires SQA approval to make major changes.
 - New HWB content earmarked for the newly promoted Chief Supt and Supt learning programme was piloted with c. 40 civilian investigators in early January 2025. Plans for evaluation are being developed with Leadership and Talent colleagues.
 - Senior Investigating Officers (SIO) course review is also underway.

3. FINANCIAL IMPLICATIONS

3.1 There are financial implications associated with this paper, as more investment is needed which allows for the development of the various projects and the further integration and mainstreaming of wellbeing across the organisation in a meaningful way.

4. PERSONNEL IMPLICATIONS

4.1 As mentioned at 1.3 health and wellbeing resources and expertise will be required to achieve the plan and this is something we will

approach in more detail as we enter into the imminent People and Development restructure consultation.

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 if Police Scotland/SPA do not continue to prioritise the wellbeing of our people, then staff morale and public perception may be negatively affected.

7. SOCIAL IMPLICATIONS

7.1 There are no social implications associated with this paper.

8. COMMUNITY IMPACT

8.1 There are no community impacts associated with this paper.

9. EQUALITIES IMPLICATIONS

9.1 We will continue to work closely with our ED&I colleagues within the department to ensure all equalities are considered throughout our work, and when required we will complete the necessary EQHRIA process.

10. ENVIRONMENT IMPLICATIONS

10.1 There are no environmental implications associated with this paper.

RECOMMENDATIONS

Members are requested to discuss the information contained within this report.

Appendix A – Health & Wellbeing Plan:

| HWB Goal | HWB Objective | Evidence / Measures | Time scales | HWB Action | HMICS Recom |
|---|---|---|-------------|---|----------------|
| Improve workforce Mental Health and reduce suicide | informed W workforce au Li fa | WHO 5 wellbeing score. Workforce mental health and suicide prevention action plan production. Lifelines Scotland active facilitators and attendee numbers. Lifelines Scotland pre and | Q2 - 2025 | Develop and implement an overarching workforce mental health and suicide prevention action plan. The plan would drive this agenda and aim to connect work in this space throughout the organisations i.e. PPCW, LTD, L&T. | HMICS 1 & 7 |
| Impact statement: Our people are valued, and we have reduced the stigma of mental | | post session evaluation. Annual Lifelines Scotland Level 3 evaluation. Wellbeing champions activity tracker completion and thematic analysis. | On going | Develop and deliver the Lifelines Scotland Facilitators programme to expand the reach of the project, target to reach the whole workforce with crucial resilience, self-care, supporting colleagues and post trauma support training through a Police Scotland/SPA and peer support lens. | HMICS 6 |
| ill health Measure: WHO 5 wellbeing score | | anatysis. | On going | Deliver an effective and evaluated HWB Champions network. Build on the existing Wellbeing Champions Network to foster a supportive, connected work environment, where 2-way communication is valued. | HMICS 2 |
| improves, Benchmarking Framework Output. | Reduce the impact of exposure to trauma | Trauma tracker in place and used by Line manager. % of referrals to EAP post trauma exposure. TRiM referral volumes, active assessors and | Q4 - 2026 | Scope out and develop a systematic approach to managing wellbeing to ensure that following injury, assault or exposure to trauma in the workplace, people are given appropriate and timely professional support. Approaches to consider include the development of trauma tracker, using PTEC ((Police Traumatic Events Checklist from PCUK), to enable line managers to monitor and act. | HMICS 2 |

| | | coordinators. Pre and post TRiM intervention outcomes. | Q2 - 2025 and then ongoing | Deliver effective and evaluated Trauma Risk Management service building on the existing programme. | |
|--|---|--|--------------------------------|--|----------------|
| | Develop understanding of impact of operational pressures | WHO 5 wellbeing score. Uptake of wellbeing and resilience assessment. Outcome pre and post assessment. | Q3 - 2025 | Develop innovative approach to wellbeing and resilience assessments, Approach to be informed by a full review and evaluation of the existing measures in place. Approaches to consider the National Police Wellbeing Service's (NPWS) approach of using bespoke psychological questionnaires and structured interviews for screening individuals in high-risk policing roles as a commendable practice | HMICS 2 |
| | | | Q2 - 2025 and then on going | Collaborate with Health & Safety to develop understanding and utilise the data and insights and connect agendas particularly in relation to the impact on wellbeing of "undesirable circumstances". Key aspect is to develop a pathway for highlighting issues. | HMICS 2 |
| | Reduce mental health stigma | Production of the communications strategy. Production of lived experience series. Engagement with | Q3 - 2025 and then on going | Work to ensure can access the right help at the right time, through the development of a cohesive communication and engagement strategy for health and wellbeing. LINKS to F15 | |
| | | communications through Google analytics data. | Q3 - 2025 and then on going | Produce a series of lived experience pieces with clear signposting and call to action | |
| Set strategic direction for health and wellbeing which is equitable, | Set strategic, evidence informed direction for WB nationally, to be | WHO 5 wellbeing score. Annual benchmarking report. Production of HMICS improvement plan, HWB action plan | Q1 - 2025 and then on going | Conduct scoping exercise and implement bench marking framework of ongoing reflection and iterative improvement via Oscar Kilo and the blue light Wellbeing framework | HMICS 1 & 2 |

| evidence informed and evaluated | delivered locally | and corporate people plans. Accountability at local commander and | Q1 - 2025 | Adopt and implement 'theory of change' methodology for individual streams of work with a focus on prevention which is informed by the people plan. | HMICS 1 |
|--|--|---|-----------|---|---------|
| Impact statement: Our people receive evidence informed, consistent service | | management level i.e. reporting on corporate people plans. | Q1 - 2025 | Work closely with our People Partners on the development of the health and wellbeing aspect of the national corporate people plans. Providing Divisions and Departments with clarity on national health and wellbeing priorities and activities to be delivered and reported upon locally. Leaders are held to account through the governance structure in place to support the plan. | HMICS 1 |
| Measure: Benchmarking Framework Output. | | | Q4 - 2025 | Review health and wellbeing governance boards structures and reporting of wellbeing actions to ensure equitable programme is delivered and leaders are held to account. | HMICS 1 |
| | Messaging on wellbeing is consistent and clear | Production of the communications strategy. Engagement with communications through Google analytics data. Engagement of health and wellbeing network i.e. Wellbeing Champions, Lifelines Facilitators and TRiM team. | Q3 - 2025 | Work to ensure people can access the right help at the right time, through the development of a cohesive communication and engagement strategy for health and wellbeing. To include the continued development of health and wellbeing intranet page, planning and delivering an annual health and wellbeing campaign calendar, promoting wellbeing through various initiatives such as Wellbeing Champions Network, roadshows, town hall events, world cafes, unconferences and other participatory methods for engagement and dialogue. | HMICS 7 |
| | | | Q1 - 2025 | Develop and implement a quality assurance procedure and process within HWB for all communications and messaging. | HMICS 7 |

| | | | Q1 - 2025 | Proactively manage organisational engagement opportunities, developing generic messaging for delivery by our advocates i.e. Wellbeing Champions, Lifelines Facilitators and TRiM team. | |
|--|---|---|-----------|--|-------------|
| | | valuate WHO 5 wellbeing score is used and understood Health and wellbeing department to set | Q3 - 2025 | Work with Corp Communications on monitoring the reach and impact of health and wellbeing communications | |
| | Evaluate initiatives to understand what works and | | Q2 - 2025 | Use Kirkpatrick model of evaluation of learning to demonstrate effectiveness in changing behaviour across all aspects of the health and wellbeing programme. | |
| | implemented and approa equitably health and | and approach for all health and wellbeing activity i.e. joined up | Q2 - 2025 | Upskill HWB team on evaluation planning and delivery | HMICS 2 |
| | | | Q2 - 2025 | Develop pulse survey to check subjective wellbeing | HMICS 2 & 7 |
| Continuous improvement of | Deliver efficient and effective | Performance management driven by | Ongoing | Develop and implement the My OH portal | |
| effectiveness of | effectiveness of include: | KPI's and SLA's, to include: Number of referrals. | Q3 - 2025 | Improve operational delivery and uptake wellbeing and resilience assessments | |
| wellbeing services and corporate functions | | Assessment booking times. Report completion times. | Q2 - 2025 | Develop person centred, sustainable, equitable and preventative neurodiversity offering | |
| Impact statement: Our | | Case closed/completed. | Ongoing | Continuous review and development of the IHR/IOD processes to include a deep dive in conjunction with SPA. | |

| service is effective and good quality; we get the right help to the right people at the right time Measures: we monitor and act | | | Ongoing | Develop management information KPIs for performance management of OH supplier, implement feedback loop | |
|--|---|--|-----------|---|---------|
| | Deliver efficient and effective EAP service | Performance management driven by KPI's and SLA's, to include: Number of contacts. | Ongoing | Develop and implement the Employee Assistance Programme particularly the new stepped care model of support. | |
| on feedback from | | New clinical usage. | Ongoing | Define and promote line management EAP referral pathway | |
| our service users | | Support (and type) delivered. Outcomes after therapy. | Ongoing | Develop management information KPIs for performance management of EAP supplier, implement feedback loop | |
| | governed and safe service extern formed Wellber impler policies | WHO 5 wellbeing score Risk review completed; external partners forum formed. Wellbeing mitigation implemented to new policies and considered at board paper stage. | Q2 - 2025 | Conduct annual Business Continuity Plan review | |
| | | | Ongoing | Manage, monitor and report on HWB risk with a clear/defined process for raising/reporting risks. | |
| | | | Q2 - 2025 | Review wellbeing investigation / grievance process and guidance | |
| | | | Q2 - 2025 | Consider potential to the development of a Workforce Wellbeing Network to include the TRIM team, Wellbeing Champs, Wellbeing SPOCs, Lifelines facilitators, H&S colleagues. | HMICS 2 |
| | | | Ongoing | Manage external stakeholders and partners via an external partners wellbeing group/forum inc MoUs & delivery plans. | |

| | | | Q1 - 2025 | Impact on wellbeing is considered and included in board papers | HMICS 5 |
|---|--|---|-----------|--|----------------|
| | Police Scotland learning products contain | WHO 5 wellbeing score Development and roll out of new content. PMDP, PLDP and YLM | Q1 - 2025 | Work with Leadership & Talent (L&T) and Learning, Training and Development (LTD) to ensure that Police Scotland/ SPA's approach to managerial development in health and wellbeing is both effective and tailored | HMICS 6 |
| Develop a workforce who | consistent wellbeing messages | evaluation to include wellbeing. | Ongoing | Influence HWB content in leadership and line manager programmes to include PMDP, PLDP and YLM. | HMICS 6 |
| prioritise wellbeing | | | Ongoing | Influence HWB content in probationer training and build on the latest introduction of Lifelines Scotland to the training. | HMICS 6 |
| Impact statement: Our | | | Ongoing | Influence HWB content in learning programmes such as tutor cops, detective training, roads policing etc | HMICS 6 |
| people's wellbeing is protected by systems, culture and conditions which are designed to help people to thrive. Measure: WHO 5 scores increase | Collaborate across silos to improve wellbeing | cross silos to Access to organisational (H&S, RDU, Estates) data | Q2 - 2025 | Work with Health & Safety and Your Safety Matters colleagues to take a data led approach to wellbeing and early intervention | HMICS 2 |
| | | | Ongoing | Work with RDU and Estates, identified as organisational stressors, to drive wellbeing as a priority within the strategic plans and delivery. RDU and Estates to lead on HMICS recommendations. | HMICS 3 & 4 |
| | | | Q1 - 2025 | Work in partnership with the Policy team to mitigate wellbeing impact, implement a wellbeing aspect to board papers | HMICS 5 |
| Scores iliciease | | | Q1 - 2025 | Work with leadership and talent My Career colleagues to host and evidence wellbeing conversation. Consideration within My Career Phase 2. | HMICS 7 |