

NPCC WELLBEING OF INVESTIGATORS SUBGROUP

END OF PROGRAMME REPORT – March 2021

STRAND 4 - Wellbeing of SIO's

"The task is greater than the title". (Declan Donnelly 2019)

Remit of the strand

Identify and understand issues specific to senior investigating officers and provide reliable evidence-based solutions to form part of the national toolkit

Methodology employed

There is currently no academic or other bespoke research on the welfare of SIO's. We have taken this as a finding and have put actions into place for this to happen.

The project team consists of a group of very active SIO's from all around England and Northern Ireland. They brought a wealth of experience and practical advice with them. The SIO wellbeing strand has obtained a lot of interest and advice from a number of experienced SIOs from all around the country working in diverse fields of Major crime, Homicide, training, CT, Safeguarding and PIP4 oversight. It is fair to say a lot of the SIO's that have been involved in the project have done so for personal reasons and to improve the wellbeing of present and future SIOs. They have put in a great deal of personal time and effort to establish the future work proposals.

There has been fortnightly meetings to discuss these issues and task out work. This work has included researching online, virtual interviews with SIO's, psychologists, PIP 4s, training departments in many police forces and includes; ROCU's, military policing, College of Policing, National Counter Terrorist Policing and advice from international forces too.

The project has been split into a number of sub sections

- 1) Is being an SIO a 'High Risk' occupation?
- 2) Obtaining evidence based research regarding SIOs
- 3) Not reviewed yet. Selection of SIOs and PIP 4's
- 4) Training of SIOs (Pip 3 and Pip 4)
- 5) Prevention of MH issues. Where to go for help in forces, testing 'Inner Armour'.
- 6) Proposal of support by a SIO Support officer Peer and professional support during traumatic times in your professional life.
- 7) Not reviewed yet. 'On call and on duty'

8) Not reviewed yet. Adverse media support and guidance.

Key findings

1) Is being an SIO a high risk occupation?

Whilst there is no bespoke research on SIOs as a unit, the Group had a lot of experience in the immense feeling of personal and mental stress within themselves and their SIO colleagues. This has culminated in serious mental breakdowns, diagnosed PTSD, cardiac and other physical sickness. It has been a contributory factor in relationship breakdowns. There is a unanimous feeling that SIOs need to be treated as a 'high risk'

The Group believes by doing this, there will be

- An acknowledgement by Senior Leaders of the importance but stress of the role when looking at shifts, amount of cases given to each SIO and 'on call'/duty hours.
- A review of how SIOs are selected and trained/CPD in the PIP 3 and 4 process.
- Annual OH/Psychological access.

Some forces and ROCUs already are doing this. This includes Essex who get psychologically assessed on an annual basis and this has been welcomed by all the SIOs within the county. The company they use is Tehrani associates https://noreentehrani.com/ they provide the online screening questionnaires and individual evaluation reports which is computer generated.

One of two things will happen as a result of that evaluation: -

- **A).** The officer receives a report from Tehrani Associates detailing the analysis of the personal questionnaire and if there are no concerns the evaluation of the questionnaire will be added to the individuals confidential health file. The cost of the evaluation of the questionnaire is £35 each.
- **B).** The SIO may be asked to come and see one of the Wellbeing/Counselling team, to explore issues that may have been raised by the questionnaire. This is discussed when they are seen. There may be occasions when we might outsource this part to an external therapist. They may just need to clarify a few points raised by the questionnaire and it does

not necessarily indicate that the individual is unwell or in need of help. If they perare in need of help/support, however, we will ensure that appropriate interventions are put into place.

There may be a requirement to involve management, and when this is the case we will discuss this with the individual with the usual boundaries of confidentiality applying. If there are issues relating to the Psychological impact of the role on the individual then management would seek to involve either the Occupational Health advisors or the FMA they will be able to advise on possible Recuperative duties or Medical redeployment.

There are some excellent examples of wellbeing support for investigators across the NW Region. There is clear evidence of very well established strategies and processes designed to promote and

support the wellbeing of those working in investigations. There are many creative and innovative initiatives, involving partners and lots of examples of the sharing of good practice.

One example of where the support specifically references the SIO role.

This was contained within the National Welfare and Wellbeing Standard Operating Procedure for Under Cover On-Line (UCOL) Investigations. This was shared by the NW ROCU, and is a very comprehensive document with referral templates and links to other sources of information, for example the Oskar Kilo website.

- i) The nature of the work is recognised as 'high risk' and qualifies for 6 monthly mandatory assessments with a psychologist. The SIO and the D/SIO are also mandated to have these meetings.
- ii) The SIO and D/SIO meetings will also include a discussion about the wider team and any emerging themes or concerns held by the psychologist.
- iii) It is clear from speaking with staff that the psychologist is very well regarded because of her extensive experience of specialist police work and that she has built up trust with individuals in the teams concerned.
- iv) The sessions with the psychologist work out at £125.

2) Obtaining evidence based research regarding SIO's.

There has been a lot of research carried out over the past few years on the wellbeing of police officers. This research has been captured by Strand One and covers a wide range of topics. There has been no bespoke research on SIOs.

Initially the group felt that because this would not be ready during the timescales of the first phase of the project then we would pend this idea. Then, fortuitously, one of our Strand members was approached by a PhD student, Liam Curran, from Huddersfield University who is focussing his doctorate around SIO wellbeing. The study will initially be an online questionnaire for PIP 3 and PIP 4 SIOs to complete. It will then be followed by a smaller number of 1-2-1 interviews. Liam has completed the introduction for his research and the questions he is going to be asking. These have been agreed by DAC Stuart Cundy (Homicide Working Group Chair), ACC Kerrin Wilson (Lead for NPCC PIP) and Gary Tomlinson (College of Policing). The final version is going through the 'Ethics' process at the university and should be out very shortly. I attach some documents about it below.

4.) PIP 3 and 4 Training/CPD/PIP Renewal examples of SIOs. We are fortunate on our project group to have Gary Tomlinson, SIO Registrar from the CoP and Mark Lawson, Head of SIO training in the Metropolitan Police. Both are very keen to incorporate more wellbeing into their programmes. The issue appears to be how busy their timetables already are. Wellbeing has traditionally been focused around SIO's looking after their teams rather than looking after themselves. The Project Team would very much like to see SIO's wellbeing and peer to peer support being implemented. This needs to come in the PIP 3, PIP4 and CPD training.

There is a lot of examples cited to the groups where PIP 4's either do not speak to PIP 3's about their wellbeing or find it difficult to do so. There are examples of PIP 4's physically walking the other way than dealing with an SIO in crisis. The group do not think for a minute that this is due to lack of care by any officer but more that the situation is very difficult to confront and not one that there is training for in policing.

The recommendation is for awareness training on the PIP 3 course and lessons on how to speak to SIOs on the PIP 4 course. This needs to be supported by CPD refresher training and evidenced in the PIP renewal examples.

DCS Martin Brunning has been very supportive of this and has spoken to Jo Taylor from the CoP to see how this can be implemented. Gary has completed a report which is attached to this report.

5) Prevention of physical and mental illness – where to do to for help.

It is often difficult and unrealistic to expect officers, and perhaps particularly Senior Investigating Officers to come forward formally to say they are struggling when they may not recognise this themselves or may believe this will have a negative impact on career or reputation.

Perhaps in many cases it is difficult for an individual to spot the early signs of beginning to struggle – and even if there is an inkling that there may be a problem – where do you go to deal with it or get early help without making it a career limiting issue. No one wants "stress" on their sickness record and indeed some can be said to be obsessed with never taking a day off sick.

The proposal is for the development of a self-use app that can be downloaded onto a work or personal mobile phone. The app is for personal use only and is not connected to the Force or organisation in any way — no information is shared or stored — it is for self-assessment only to promote self-awareness where there may be a problem and to sign post to helpful next steps as appropriate.

The app asks "am I ok?" and then takes the person through a user friendly and relatively short process of Q & A or scaled answers of 1-5 or 1-10.

At the end a score is produced and a relatable set of advice and guidance from – "no problem" green, to "you may want to think about getting some early help" Amber to "you are advised to get help without delay" Red.

This would allow the user to have access to an objective tool that would be likely to inform and prompt them into early action – rather than wait until it is perhaps too late. The whole premise is early identification leading to early intervention and prevention – before people are facing breakdown, long term treatment or prescribed drugs and extended periods of sickness.

This is not inventing the wheel - there has been much good work in this area already.

- 1 Surrey and Sussex Police have the back-up buddy app already (other Forces may well also have versions similar to this). This can be downloaded on to a device and is a modern and user friendly app dedicated to the issue of mental wellbeing although the functionality described in this paper is not currently in the app.
- 2 New South Wales Police (Australia) have a developed app along these proposed lines which gives a good outline of what is proposed the app is called Equipt screenshots in appendix.
- 3 The UK has a nationwide police wellbeing service with Oscar Kilo.
- 4 Inner Armour are currently producing an APP which appears to encompass all of this and more. It looks like it will be at trial stage by May this year.

A fuller report on this is attached.

The gold standard for our project team would be preventing any SIO getting to this stag

DCI Richard Haycock reviewed a company called Inner Armour to review their resilience training and peer to peer support. Richard has previously used them a few years ago to assist him through a difficult time when he was diagnosed with work related PTSD.

The ethos and intention of Inner Armour is to provide psychological defence training and peer support strategies into the Police, Fire, Ambulance and Military to, as far as possible prevent significant mental health issues developing further into a career.

Inner Armour has developed significantly since we met in 2019. The headline update for the SIO group is that Inner Armour are now in advanced development of an app that brings their peer support positive psychology approach to the next level.

The Inner Armour process will then be able to be delivered online, on personal devices via those signed up to the app and will allow groups, peers and connections to be made within the app for peer support. Accredited coaches (from the police workforce) will be signed up to the app and be able to deliver the Inner Armour 28 question approach to colleagues in need. So, for example, SIO's trained and signed up to app could be in a group offering peer support to other SIO's.

The aim is for a person to be able to access support within 3 clicks and within 3 hours of seeking help.

There is also benefit for those trained on the 2 day Inner Armour course as accredited coaches as their assistance to peers and colleagues is logged within the app and is recorded as accredited CPD coaching time.

This is an exciting development and opportunity for the SIO group as this aligns very well with the original idea of an app to allow self-assessment of "how am I doing" – this functionality is built into the Inner Armour app.

Inner Armour have worked and are working with Hampshire Police – Hampshire are the first UK Force seeking to embed the Inner Armour approach on a whole Force basis. They plan to begin by rolling out this training and practice to new recruits. The second priority group for Hampshire is the "middle aged man" cohort – perhaps the cohort least likely to seek more formal help through the NHS and OHU.

Inner Armour are working with the UK Royal Marines to provide psychological defence training into their Human Performance Group.

Inner Armour are working with the North Carolina Police in the US with a view to providing the training and practice across the 100 counties in the State.

Inner Armour are working with the NSW Police, Fire and Ambulance service in Australia to explore rolling out the approach there.

The Inner Armour approach has been reviewed academically and reports can be supplied to demonstrate this.

There is an opportunity, particularly with the development of the Inner Armour app to engage the SIO cadre nationally – SIO's could begin to provide peer psychological support for each other across Forces.

The project group are hoping to have a virtual meeting with Chief Inspector Dave Humphries from Hampshire Police on the 26th March to see how Inner Armour have assisted them.

6. Proposal of support by a SIO Support officer – Peer and professional support during traumatic times in your professional life.

There are times when Officers and Staff operating as Senior Investigating Officers, may be subjected to additional scrutiny internally or externally, or become involved in reviews by external agencies in to the quality of investigative work. The very nature of the work carried out by SIOs mean it is often subject to high profile scrutiny and speculation. This could also be in relation to the service of notices under Police Regulations; undoubtedly this type of scrutiny will cause tension, anxiety and stress over and above the already demanding role of the SIO. It should be anticipated that this situation will require individualised welfare arrangements specific to those PIP3 officers involved in the investigation. There will be different levels of risk and need which could result in an SIO Support Officer being assigned to them. In all cases the Heads of Crime and Major Crime should be considered as a start point for SMT intervention and support.

The circumstances in which SMT may appoint a SIO Support Officer includes:

- Investigations involving an allegation of misconduct or gross misconduct against an SIO, which may or may not include criminal charges.
- Unsatisfactory Performance Process (UPP)
- During an investigation following a public complaint from a victim, witness, complainant or a representative of the same.

- Grievances, particularly those involving allegations of harassment or bullying
- Witnessing or being involved in difficult, complex or traumatic events
- Difficult personal situations such as long term sickness, caring responsibilities, divorce or bereavement
- Investigations into Death or Serious Injury (DSI) where the individual is a Key Police Witness (KPW)
- Where officers/staff are required to give evidence at an inquest or during a challenging court case
- Where the Independent Office for Police Conduct (IOPC) is investigating an incident
- Cases involving high levels of media interest linked to an individual's involvement

Any other circumstance where a line manager or member of the SMT consider that welfare support is appropriate.

A proposal document has been put together with recommendations around SIO support officers which is attached.

Key Products / Interventions identified

- To obtain support from the NPCC to make the role of SIO a 'High Risk' occupation
- To bring in annual psychological assessments and support
- To alter PIP 3 and 4 training to spend time looking at SIO for SIOs including CPD sessions
- To carry out academic research to establish a fuller picture of wellbeing issues for SIOs.
- To promote the use of SIO support officers during times of work related issues.
- To look into Inner Armour's support training package and App and see if it is suitable for SIOs

Ongoing work

- Hours worked by SIOs on duty and on call.
- Support during adverse media
- Information and support required when officers are considering a career as a SIO.
- The formation of a SIO support network either held by the CoP Knowledge hub or on another National database where SIOs can be matched up for support. This is in the very early stages at the moment and looking at SIO's on other teams such as Crime Review or training etc providing mentoring and support.