

# Research and Policy Support Report R101/2018

# PFEW Demand, Capacity and Welfare Survey 2018 Headline Statistics December 2018

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# **Executive summary**

## Sample and respondents

- Over 18,000 members took part in the 2018 Demand, Capacity and Welfare Survey between August and September 2018; resulting in a final response rate of 15% of all federated rank officers in England and Wales after data cleansing.
- The sample of respondents was broadly representative of federated ranks in England and Wales and was large enough that the percentages quoted in this report can be considered accurate within the normal bounds of academic rigour.

# **Roles and working arrangements**

- The most common shift pattern (48.2%) was 'Rotating shift pattern including nights,' while nine hours was the most common shift duration (29.9%).
- On average (median)<sup>1</sup> officers reported working a total of 2.5 hours of overtime (paid and unpaid) per week.
- The most frequently reported reasons for working overtime over the prior 12 months were 'There weren't enough officers on shift in my team/unit,' (31.8%) followed by 'There weren't enough officers on shift in another team/unit' (21.2%).
- 76.1% of respondents from relevant frontline roles (Neighbourhood, Response, Roads Policing, Operational Support, Investigations, and other) indicated that they are *often* or *always* single-crewed; almost three percentage points higher than in the 2016 iteration of this survey (73.3%).

# Annual leave, breaks, and rest days

• 30.7% said that they had been unable to take all of the annual leave that they were entitled to over the previous 12 months.

The **mean** is the numeric average calculated by adding all the data points together, and dividing by the number of data point points. *Examples* 

#### Examples

The **median** is calculated by setting out the numbers in ascending order, and finding the number that separates the top half, from the bottom half

#### Examples

The median is a more appropriate measure than the mean when there are extreme outliers. It is often used in salary or pay / conditions analysis for that reason.

 $<sup>^{\</sup>mbox{\scriptsize 1}}$  "Average" can refer to one of three statistics:

a) 10+10+10+10+20+30 / 6 = 15 - the mean is 15.

b) 10+20+30=60, then 60 /4 =15.

The  ${\bf mode}$  is whatever data point is most often found within the data set

a) 10, 10, 10, 10, 20, 30 - the mode is 10.

b) 10, 20, 30 – there is no mode.

a) 10, 10, 10, 10, 20, 30, the median is 10.

b) 10, 20, 30 the median is 20.

- 52.3% of respondents reported that they were *never* or *rarely* able to take their full rest break entitlement.
- 66.8% of officers reported having had *two or more* rest days cancelled in the previous 12-month period, with at least 56,981 cancelled rest days in total.

### Staffing levels and workload

- The proportion of respondents indicating that their team/unit has a minimum officer staffing level (69.0%) has reduced by almost four percentage points since the 2016 iteration of this survey (72.6%); whilst the proportion of respondents reporting that these minimal levels are *never* or *rarely* achieved has increased by over six percentage points from 21.3% in 2016, to 27.6% in this year's iteration of the survey. These results suggest a potentially worrying trend where even though there are fewer staffing thresholds than in 2016, those that remain are breached more frequently.
- 89.8% of respondents indicated that they generally don't have enough officers to manage the demands faced by their team or unit; a larger proportion than in the 2016 Demand, Capacity and Welfare Survey (84.5%).
- 72.4% of officers reported that their workload was *too high*; over six percentage points higher than that reported in the 2016 (65.9%), and much higher than found in the Armed Forces population. This stark comparison highlights that high workloads are much more prevalent in the policing population than other comparator groups and is continuing to increase.

### Accidents, injuries and exposure to hazards

- Violence towards officers is still common place; with 66.6% respondents reporting to have been the recipient of an unarmed physical attack at least once in the last 12 months (e.g., struggling to get free, wrestling, hitting, kicking), and 31.3% respondents reporting experiencing this on a monthly basis.
- Over 6,000 officers indicated that they had been the victim of a spitting assault (i.e. being deliberately spat upon) in the last 12 months.
- The proportion of respondents that suffered *one or more* injuries requiring medical attention as a consequence of work-related **violence** has increased by almost 2 percentage points since 2016 from 20.2% to 21.9%
- 14.9% of respondents reported suffering from *one or more* injuries requiring medical attention as a consequence of work-related **accidents** in the preceding 12-month period; a much smaller proportion than in 2016 (28.7%).
- Exposure to potentially traumatic incidents was assessed via a bespoke scale developed for the 2018 Demand, Capacity and Welfare Survey. Results showed that

- almost all officers (99.6%) reported experiencing one or more of these types of incidents at some point during their service, whilst 61.7% indicated that they had experienced at least one of these types of incidents within the last 12 months.
- In addition, 14.8% of all respondents to the survey had sought help for mental health and wellbeing difficulties associated with, or due to, any of the incidents listed in the previous 12 months.

# Health, sickness and absence

- 76.5% of respondents reported their overall physical health to be *good* or *very good*; a larger proportion than in the 2016 iteration of the survey (64.7%).
- However, 31.9% of respondents indicated that *at least one day* of their sickness absence was attributable to stress, depression, or anxiety; an increase of almost three percentage points when compared to the 2016 results (29.1%).
- 78.7% of respondents reported one or more episodes of presenteeism associated with their physical health, and 70.3% of respondents reported one or more episodes of presenteeism associated with their psychological health within the previous 12month period.
- 64.4% of respondents indicated that they had found it difficult to carry out certain duties and tasks at work because they have been too fatigued, and 75.1% reported that fatigue had interfered with their family or social life.
- 67.8% of respondents agreed with the statement 'Current levels of fatigue amongst my colleagues pose a significant risk to officer safety,' and 57.9% of respondents were dissatisfied with their current sleep pattern.

## Mental health and wellbeing

- A broad overview of overall life satisfaction was established by asking respondents to indicate how satisfied they are with their life on a scale from 0 to 10. The average (mean) rating was 5.6, a lower proportion than found in the Armed Forces Continuous Attitude Survey (6.0), and the general population (7.7).
- The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) was used to
  calculate a metric score that indicated participants overall mental wellbeing. The
  average (mean) metric score for the 2018 Demand, Capacity and Welfare Survey was
  20.2. Although this is a slightly higher score than in the 2016 Demand, Capacity and
  Welfare Survey (19.2), it is still poorer than the scores found within the general
  population.
- 79.3% of respondents acknowledged having experienced feelings of stress, low mood, anxiety, or other difficulties with their mental health and wellbeing within the

- previous 12 months; with the vast majority (94.2%) of these respondents indicating that these difficulties had been caused or made worse by work.
- When asked to indicate why their psychological difficulties had been caused or made worse by work; the most frequently reported reason was that their workload was too high (18.2%), followed by having a poor work/life balance (14.7%).
- 43.9% of respondents reported a non-diagnostic<sup>2</sup> case of work-related stress (on the basis that they viewed their job as *very* or *extremely stressful*). This is a larger proportion than reported in the results from the 2016 Demand, Capacity and Welfare Survey (38.6%) and almost three times that found in the general population by the HSE in 2010 (15.0%), and that found by the Scottish Health Survey in 2017 (16%).

# Managerial mental health and wellbeing support

- 70.1% of respondents who had sought professional help had disclosed this information to their line manager, a larger proportion than in the 2016 Demand, Capacity and Welfare Survey (63.4%).
- Whilst 34.4% of respondents reported that they were *poorly* or *very poorly* supported by the police service, this is more than seven percentage points lower than in the 2016 iteration of the survey (41.7%). Although this may indicate a positive step forward, and that officers who have experienced difficulties with their mental health and wellbeing are being provided with better support by the police service than in 2016, it is important to acknowledge that the possibility of a 'healthy worker effect' cannot be discounted.<sup>3</sup>
- 21.8% of line managers reported being given training on supporting individuals who are experiencing mental health and wellbeing difficulties; a similar proportion to that in the 2016 iteration of this survey (20.9%).
- Nonetheless, in a more positive finding, 87.7% of line managers felt *somewhat* or *very confident* in their ability to support someone they line managed if they disclosed that they were experiencing problems with their mental health and wellbeing.

# Organisational mental health and wellbeing support

• 45.1% of respondents *agreed* or *strongly agreed* that the police service encourages its staff to openly talk about mental health and wellbeing; a much larger proportion than in the 2016 iteration of this survey (22.0%).

<sup>&</sup>lt;sup>2</sup> Please note; these questions are not clinical tools and thus cannot be used to diagnose psychological conditions.

<sup>&</sup>lt;sup>3</sup> A healthy worker effect may have arisen if officers who had experienced intolerable mental health and wellbeing support were more likely to leave their job or be on be on sick leave at the time of the study in 2018 than in 2016, resulting in a misleading (positive) trend.

- 38.6% of respondents indicated that they would feel confident disclosing any difficulties with mental health and wellbeing to their line managers, over ten percentage points higher than in the 2016 Demand, Capacity and Welfare Survey (27.8%).
- 66.5% of respondents indicated that they were aware of mental health and wellbeing support services offered by their force, over six percentage points higher than in the 2016 Demand, Capacity and Welfare Survey (60.0%).

# **Organisational change**

• The majority of respondents to the 2018 Demand, Capacity and Welfare Survey consistently disagreed that change was managed well within the police service, no matter the organisational level.

# Introduction

The Police Federation of England and Wales' Demand, Capacity and Welfare Survey 2018 opened on 21<sup>st</sup> August 2018, and closed on 9<sup>th</sup> October 2018. 18,306 officers submitted responses during this period, this was reduced to 18,100 responses after data cleansing.<sup>4</sup>

The response rate for Demand, Capacity and Welfare Survey 2018 was approximately 15% of all federated rank officers in England and Wales.<sup>5</sup>

Statistically, the sample size was large enough that the percentages quoted in this report can be considered to be accurate within the normal bounds of academic rigour.<sup>6</sup> In addition, this is a slightly larger response rate than received in the 2016 iteration of this survey.<sup>7</sup>

The following are some key headline findings.

Data are still being analysed for the Full Report, which will include comparisons of groups such as by rank and role; as well as more complex analyses to determine the factors that best predict officers' wellbeing.

Please be aware, however, that the total number of responses for each item may vary slightly as not all items were answered by all respondents, in addition the actual differences between groups may be quite small and these details should be considered when interpreting the data.

DC&W Survey 2018

**Headline Statistics** 

<sup>&</sup>lt;sup>4</sup> Data were removed where the respondent gave implausible answers: e.g. Length of time in role exceeded length of service etc.

<sup>&</sup>lt;sup>5</sup> Based on the Home Office Police Workforce numbers (Home Office, 2018).

 $<sup>^{\</sup>rm 6}$  Margin of error of ±1% with a 99% confidence level.

<sup>&</sup>lt;sup>7</sup> Houdmont & Elliott-Davies (2016).

# **Overall findings**

# **Demographics**

Comparison of survey respondents against the police service as a whole in terms of characteristics including rank, role, gender, ethnicity and region (based on Home Office Police Workforce Statistics March 2018)<sup>8</sup> indicated that the survey sample was broadly representative of federated ranks in England and Wales.

Respondents' average length of service was 16 years, and their average (mean) age was 42 years of age. 4.0% indicated that they were an Authorised Firearms Officer (AFO), and 18.0% indicated that they were an Authorised Taser Officer (ATO).

# **Roles and working arrangements**

Respondents were invited to indicate which (broad) shift pattern they typically work and, to the nearest hour, how long their shifts are supposed to last.

The most common shift pattern was 'Rotating shift pattern including nights,' (48.2%) while nine hours was the most common shift duration (29.9%), followed closely by eight hours (29.4%).

This is comparable to the 2016 results where the most common shift pattern was also a rotating shift pattern including nights (53.0%) and nine hours were also the most commonly reported shift duration (32.3%).

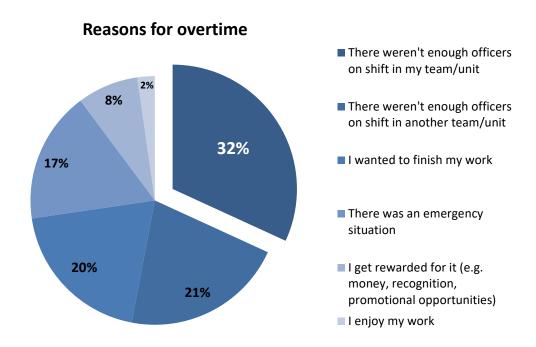
93.6% of respondents reported working full-time, and on average (median) officers reported working 2.5 hours of overtime per week (paid and unpaid). This can be compared to the 2016 results, where the average number of overtime hours was also 2.5.

The most frequently reported reasons for working overtime over the prior 12 months were 'There weren't enough officers on shift in my team/unit,' (31.8%) followed by 'There weren't enough officers on shift in another team/unit' (21.2%).

Interestingly, these proportions are very similar to those reported in the 2016 iteration of the survey, where the most frequently reported reason for working overtime over the prior 12 months were; 'There weren't enough officers on shift in my team/unit,' (30.8%), and 'There weren't enough officers on shift in another team/unit,' (20.0%).

8	Home	Office	(2018).
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The average (median) one-way commute to work was 30 minutes, remaining unchanged since the 2016 survey.

In 2016, we asked officers who worked in relevant frontline roles (i.e. 'Neighbourhood', 'Response', 'Roads Policing', 'Operational Support', 'Investigations', and 'Other') how often they were single-crewed; with 73.3% of respondents reporting that they were often or always single-crewed over the previous 12-month period. In this year's survey, the proportion of respondents from these frontline roles reporting that they were often or always single-crewed has increased to 76.1%.

However, as working policies and practices change over time, single crewing is becoming relevant to a wider variety of roles, and as such, this question was posed to all respondents in this year's Demand, Capacity and Welfare Survey. When opening this question to all respondents, the proportion that reported being *often* or *always* single-crewed fell to 74.9%.

In the last 12 months how frequently have you been single-crewed?	2016	2018	2018
	Relevant frontline	Relevant frontline	All
	roles only	roles only	respondents
% of respondents reporting that they are 'often' or 'always' single-crewed	73.3%	76.1%	74.9%

<sup>&</sup>lt;sup>9</sup> Respondents still had the option to indicate that single-crewing was not applicable to them and their role.

Finally, the Demand, Capacity and Welfare Survey asked respondents to rate how satisfied they were, overall, with their jobs on a scale from 0 to 10 (Where 0 is 'not at all satisfied' and 10 is 'completely satisfied'). The average rating (mean) rating was 4.2 out of 10, with 3.8% of respondents reporting a very high satisfaction rating of 9 or 10. Only 1.0% reported being completely satisfied, whilst 9.1% reported being not at all satisfied.

This can be compared with the results from the 2016 Understanding Society, the UK Household Longitudinal Study, funded by the Economic Social and Research Council and shared by the Office of National Statistics as part of their project 'Measuring national well-being.' This survey asks thousands of households from the general population a range of questions covering a variety of topics. However, in relation to overall job satisfaction, they found that 18.7% of their respondents were *completely satisfied*; a much higher proportion than in this survey. <sup>10</sup>

# Annual leave, breaks, and rest days

The vast majority of officers (72.3%) reported that they had been refused annual leave on *more than 1 occasion*, whilst 30.7% said that they had been unable to take all of the annual leave that they were entitled to over the previous 12 months.

Overall, 52.3% of respondents reported that they were *never* or *rarely* able to take their full rest break entitlement, whilst only 4.1% said they were *always* able to take their full rest break entitlement. Moreover, 66.8% of officers reported having had *two or more* rest days cancelled in the previous 12-month period, with at least 56,981 cancelled rest days in total.

# Staffing levels and workload

69.0% of respondents indicated that their team/unit had a minimum officer staffing level. Of those respondents, over a quarter (27.6%) indicated that this level was *never* or *rarely* achieved. This can be compared to 2016, where 72.6% of respondents indicated that their team/unit had a minimum officer staffing level, and only 21.3% of those respondents indicated that this level was *never* or *rarely* achieved.

75.0% of respondents *disagreed* or *strongly disagreed* that the way officer staffing levels are determined seems to be effective, just over four percentage points higher than in 2016 (70.6%). Together, these results suggest a potentially worrying trend where even though there is less effective planning and fewer staffing thresholds than in 2016, those minimum thresholds that remain are breached more frequently. Moreover, it may not be entirely

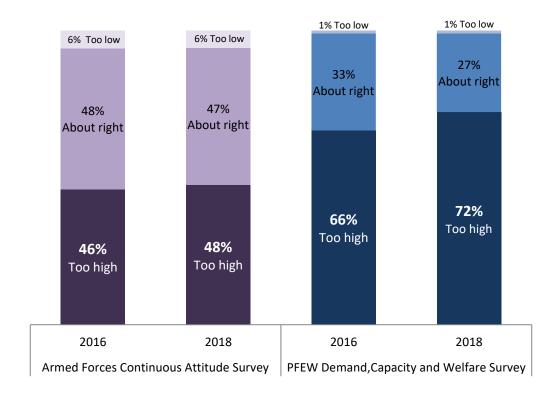
<sup>&</sup>lt;sup>10</sup> Office of National Statistics (2018a).

unreasonable to suppose that individual teams/units are removing minimum staffing thresholds as a way to manage the increasing challenge of meeting them.

89.8% of respondents indicated that they generally don't have enough officers to manage the demands faced by their team or unit, whilst 83.2% felt that they did not have enough officers to do their job properly. This can be compared to the 2016 Demand, Capacity and Welfare Survey, where the vast majority of respondents felt that they did not have enough officers to manage the demands faced by their team or unit (84.5%), nor to do their job properly (78.1%).

There is still a widespread perception of high demand among survey respondents; evidenced by 72.4% of officers reporting that their workload was *too high*; over six percentage points higher than that reported in the 2016 (65.9%). By way of comparison, the graph below shows that the proportion of UK Armed Forces personnel reporting their workload as *too high* is much smaller across both 2016 and 2018 (46% and 48% respectively).<sup>11</sup>

#### How would you rate your workload over the last 12 months?



<sup>&</sup>lt;sup>11</sup> Armed Forces Continuous Attitudinal Survey (2018).

Additional contrasts can be made with the results from the Workplace Wellbeing Index (2017/18) created by mental health charity, Mind. 12 They found, amongst a sample of over 43,000 employees from 74 organisations, that only 21% of respondents felt that their workload was unmanageable. Although these measures are not directly comparable, it could be argued that Workplace Wellbeing Index measurement could be broadly analogous to those respondents that rated their workload as much too high (23.2%) in the Demand, Capacity and Welfare Survey.

Four questions concerning job demands drawn from the UK Health and Safety Executive's Management Standards Indicator Tool (MSIT), <sup>13</sup> the results of which consistently demonstrated similar perceptions of increasing demands since 2016:

- 37.8% of respondents felt they often or always had unachievable deadlines; a larger proportion than was reported in 2016 (when it was 29.3%).
- 53.6% had to often or always neglect tasks because of having too much to do; a larger proportion than was reported in 2016 (43.4%).
- 29.2% were often or always pressured to work long hours; a larger proportion than was reported in 2016 (26.3%).
- 40.1% often or always had unrealistic time pressures; also a larger proportion than was reported in 2016 (34.9%).

Five items were developed for the 2016 Demand, Capacity and Welfare Survey to assess aspects of job demands concerned with amount and pace of work. As such, they provided a baseline against which to measure this year's results (please note, due to the way that the results are presented, higher percentages are more concerning).

% of respondents that <i>disagree</i> with the below statements	2016	2018
I am able to meet all the conflicting demands on my time at work	67.3%	74.0%
We have time to engage in proactive policing in my team/unit	70.4%	74.2%
I have enough time to do my job to a standard that I can be proud of	58.2%	64.9%
We often work in crisis mode trying to do too much too quickly	18.2%	17.1%
Whenever the pressure builds up we are expected to work faster, even if it means taking shortcuts	20.5%	20.0%

# **Exposure to hazards**

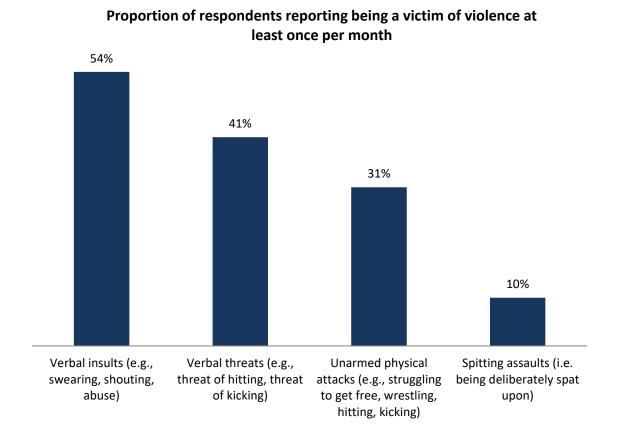
Violence towards officers is common place; with 9,460 (66.6%) respondents reporting having been the recipient of an unarmed physical attack in the last 12 months (e.g.

<sup>&</sup>lt;sup>12</sup> Mind (2018).

<sup>&</sup>lt;sup>13</sup> Health and Safety Executive. (n.d).

struggling to get free, wrestling, hitting, kicking), whilst 4,440 (31.3%) respondents reported that this happened at least once a month.

A new item was added to the 2018 version of the Demand, Capacity and Welfare Survey relating to spitting assaults (i.e. being deliberately spat upon). 6,556 (45.9%) respondents reported having been the recipient of a spitting assault in the previous 12 months, whilst 1,359 (9.5%) indicated that this happened once a month or more.



4,284 respondents (30.0%) reported having been attacked with a weapon (e.g. stick, bottle, axe, firearm) at least once in the last year, with 502 respondents (3.5%) reporting that this happened on a monthly basis.

21.9% of respondents suffered *one or more* injuries requiring medical attention as a consequence of work-related **violence** in the preceding 12-month period, a similar proportion to the 2016 results (20.2%).

14.9% of respondents reported suffering from *one or more* injuries requiring medical attention as a consequence of work-related **accidents** in the preceding 12-month period a smaller proportional than in 2016 (28.7%).

Exposure to potentially traumatic incidents was assessed via a bespoke scale developed for the 2018 Demand, Capacity and Welfare Survey. The scale consists of 20 incidents that could be considered extremely stressful, upsetting, or dangerous. <sup>14</sup>

Results showed that almost all officers (99.6%) reported experiencing *one or more* of these types of incidents in the line of duty at some point during their service, and 61.7% indicated that they had experienced *at least one* of these types of incidents within the last 12 months.

In addition, 29.9% of respondents indicated that they had sought help for mental health and wellbeing difficulties associated with, or due to, a potentially traumatic incident that they experienced in the line of duty; 49.5% of whom had sought this help in the last 12 months.

In essence, this means that 14.8% of all respondents to the survey had, in the previous 12 months, sought help for mental health and wellbeing difficulties associated with, or due to, a potentially traumatic incident that they experienced in the line of duty.

Moreover, respondents were asked to indicate *how many times* they had experienced each type of incident presented in the scale. The most frequently experienced of these incidents were 'Attended to the victim(s) of a serious physical assault,' (97.0%) followed by 'Seeing the body of a person who has died a violent or unnatural death, including accident, suicide or homicide' (95.9%). For the full list of incidents and their corresponding results, please see the table below.

Proportion of respondents reporting that they have experienced the following incidents			
in the line of duty at least once during their service			
Attended to the victim(s) of a serious physical assault	97.0%		
Seen the body of a person who has died a violent or unnatural death, including accident, suicide or homicide	95.9%		
Attended to the victim(s) of serious sexual assault	92.8%		
Attended to the victim(s) of a serious road traffic accident	84.8%		
Witnessed a serious physical assault	76.5%		
Witnessed a violent or unnatural death, including accident, suicide or homicide	66.0%		
Witnessed a serious road traffic accident	60.3%		
Been the subject of a serious physical assault	50.0%		

<sup>&</sup>lt;sup>14</sup> Please note, individuals that had provided conflicting answers to the trauma related questions were excluded from all trauma analysis (n = 183). For example, respondents that indicated experiencing at least one of incidents listed in the scale, but also indicated in later questions that they had never experienced any of the incidents listed in the scale.

Proportion of respondents reporting that they have experienced the following incidents in the line of duty at least once during their service			
Had to discharge a Taser to protect yourself, a member of the public, or your colleagues (Authorised Taser Officers only) <sup>15</sup>	44.3%		
Witnessed or attended the scene of a natural disaster during or after the event (e.g. flooding or storms)	42.9%		
Been involved in a serious road traffic accident	39.0%		
Witnessed or attended the scene of an incident that resulted in multiple fatalities after the threat has ended	35.3%		
Had to view large volumes of child sexual abuse imagery	32.6%		
Been present at an incident that resulted in multiple fatalities	30.5%		
Witnessed or attended the scene of a serious act of terrorism after the threat has ended	21.9%		
Been exposed to a toxic substance	21.2%		
Been present during a serious act of terrorism	9.0%		
Witnessed a serious sexual assault	8.3%		
Had to discharge a Firearm to protect yourself, a member of the public, or your colleagues (Authorised Firearms Officers only) <sup>16</sup>	6.1%		
Been the subject of a serious sexual assault	3.0%		

# Health, sickness and absence behaviours

76.5% of respondents reported their overall physical health to be *good* or *very good*, a larger proportion than in the 2016 survey (64.7%).

The survey asked respondents to indicate the total number of days of sick leave taken in the preceding 12-month period. Just over half of respondents reported *one or more* days of sickness absence (55.9%); a slightly smaller proportion than reported in the 2016 survey (57.8%).

In addition, 31.9% of respondents indicated that at least one day of their sickness absence was attributable to stress, depression, or anxiety. This can be compared to 29.1%, in the 2016 Demand, Capacity and Welfare Survey.

Though not directly comparable, the upward trend in this figure is fairly consistent with Labour Force Survey data which indicated that the proportion of lost working days due to stress, depression, or anxiety has been slowly rising over the last few years. Their current estimations indicate that between 2017 and 2018, approximately 57.3% of lost working days

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 $<sup>^{15}</sup>$  Any respondent who did not previously indicate that they were an Authorised Taser Officer were also removed from the analysis of this item.

<sup>&</sup>lt;sup>16</sup> Any respondent who did not previously indicate that they were an Authorised Firearms Officer were also removed from the analysis of this item.

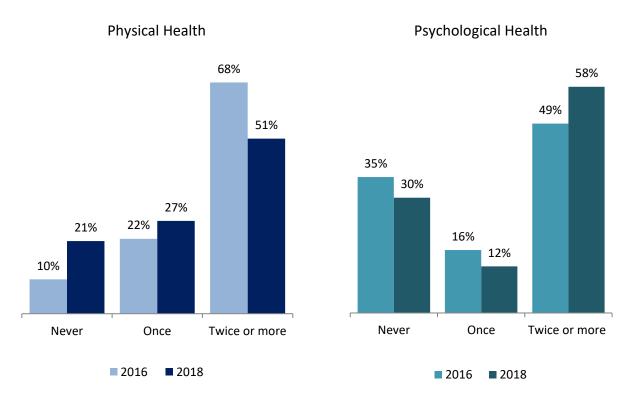
were due to work-related stress, depression, or anxiety; over 12 percentage points higher than between 2015-16 (45.0%).

However, it should be noted that officers who were on long- term sick leave at the time of survey administration are unlikely to have responded. As such, the level of sickness absence reported here might offer an under-representation.

Presenteeism is the act of attending for work while ill, and has been shown to be associated with subsequent health decline (particularly in relation to burnout),<sup>17</sup> negative job attitudes, withdrawal from work,<sup>18</sup> and can lead to elevated absenteeism.<sup>19</sup>

As in the 2016 Demand, Capacity and Welfare Survey, presenteeism associated with both physical and mental health was measured. 78.7% of respondents reported *one or more* episodes of presenteeism associated with their physical health, and 70.3% of respondents reported *one or more* episodes of presenteeism associated with their psychological health within the previous 12-month period.

Proportion of respondents indicating whether, over the last 12 months, they had ever gone to work despite feeling that they really should have taken sick leave due to their:



<sup>&</sup>lt;sup>17</sup> Demerouti, Le Blanc, Bakker, Schaufeli & Hox (2009).

<sup>&</sup>lt;sup>18</sup> Lu, Lin & Cooper (2013).

<sup>&</sup>lt;sup>19</sup> Gustafsson & Marklund (2011).

Leaveism is a recently coined term to describe hidden sickness absence and work undertaken during rest periods and encompasses the following three types of behaviour:<sup>20</sup>

- 1. Utilising allocated time off such as annual leave entitlements, banked flexi hours, rerostered rest days and so on, to take time off when they are in fact unwell;
- 2. Taking work home that cannot be completed in normal hours, and;
- 3. Working while on leave or holiday to catch up.

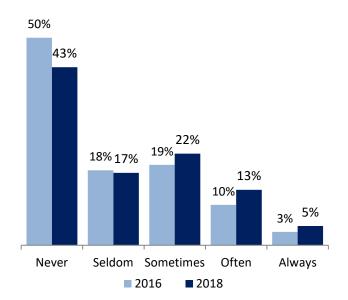
Over a third of respondents (39.8%) have used annual leave or rest days to take time off due to the state of their physical health, and just over two fifths (42.3%) have used annual leave or rest days to take time off due to psychological health. This can be compared with the 2016 results where 58.8% of respondents reported having used annual leave or rest days to take time off due to the state of their physical health, and 41.8% having used annual leave or rest days to take time off due to psychological health.

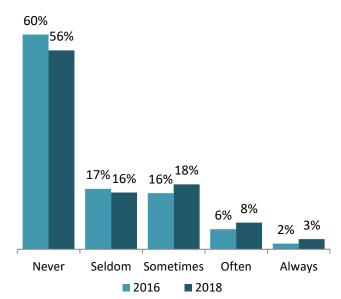
In addition, 57.3% of the respondents reported that they have taken work home that cannot be completed in normal working hours and 44.3% have worked while on annual leave in order to catch up with work.

#### Proportion of respondents indicating how frequently, over the last 12 months, they had:

Taken work home with them that could not be completed in their normal working hours...

Worked whilst on annual leave in order to catch up with their work...





<sup>&</sup>lt;sup>20</sup> Hesketh & Cooper (2014).

In regards to fatigue, the majority of respondents indicated that, in the previous 12 months, they had found it difficult to carry out certain duties and tasks at work because they have been too fatigued (64.4%), and reported that fatigue had interfered with their family or social life (75.1%); over two and four percentage points lower than the 2016 Demand Capacity and Welfare Survey respectively (66.7%; 79.3%).

Due to increasing concern regarding officer fatigue, this year's Demand, Capacity and Welfare Survey also asked respondents whether they felt the current levels of fatigue amongst officers posed a significant risk to officer safety, how satisfied they were with their current sleep pattern, how much sleep respondents got (on average) before their shifts, and how much sleep they personally need to wake up feeling rested.

57.9% of respondents were *dissatisfied* with their current sleep pattern, and 67.8% of respondents agreed with the statement *'Current levels of fatigue amongst my colleagues pose a significant risk to officer safety.'* 

63.9% of officers indicated that to wake up feeling refreshed and alert, they need *eight or more hours of sleep*. However, only 5.9% reported receiving *eight hours or more* sleep before their shifts in the previous month (on average); and over a third indicated that on average, they got *less than six hours sleep* before their shifts over the previous month (36.1%).

Perhaps unsurprisingly then, more than nine out of ten respondents indicated that, over the previous month, on average, they got less sleep before their shifts than they need per night to wake up feeling refreshed and alert (91.6%).

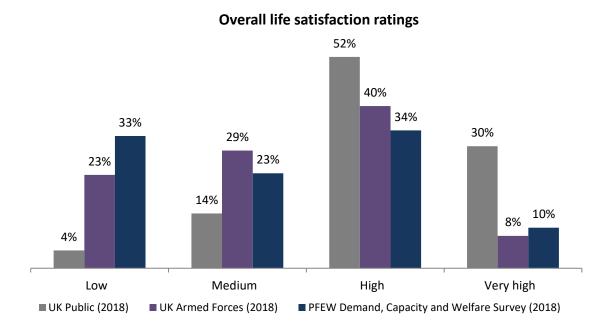
# Mental health and wellbeing

A broad overview of overall life satisfaction was established by asking respondents to indicate how satisfied they are with their life on a scale from 0 to 10 (Where 0 is 'not at all satisfied' and 10 is 'completely satisfied'). The average (mean) rating was 5.6 out of 10, with 10% of respondents reporting a very high satisfaction rating of 9 or 10. This item can also be compared to the Armed Forces Continuous Attitude Survey from 2018 where the average (mean) rating was 6.0, but only 8% of respondents reporting a very high satisfaction rating of 9 or 10.<sup>21</sup>

This measure is also one of four key questions that are included in the UK's Office of National Statistics Annual Population Survey (ONS APS), which asks approximately 150,000 people across the UK about their wellbeing. The most recent ONS findings (March 2018),

<sup>&</sup>lt;sup>21</sup> Armed Forces Continuous Attitude Survey (2018).

reported an average (mean) rating for this item as 7.7 out of 10, with 30% of people aged 16 and over reporting a *very high satisfaction rating of 9 or 10*.<sup>22</sup>



The mental wellbeing of police officers was measured using the Short Warwick-Edinburgh Mental Wellbeing Scale.<sup>23</sup> This scale asks individuals to rate their experience during the last two weeks for seven positively framed items. The graph on the next page shows the proportion of respondents indicating they experienced each aspect of wellbeing 'rarely' or 'none of the time' within the previous two weeks, compared with the results from the 2016 iteration of the Demand, Capacity and Welfare Survey, and the 2016 Health Survey for England.<sup>24</sup>

Using the participants' responses to the SWEMWBS items, it is also possible to calculate a metric score that indicates participants' overall wellbeing. The higher the score is, the better their overall wellbeing is thought to be. The 2018 Demand, Capacity and Welfare Survey indicates that the mean metric score was 20.2, and although this a slightly higher score than in the 2016 Demand, Capacity and Welfare Survey (19.2), it is still lower than the scores within the general population in 2016 (25.2),<sup>25</sup> indicating poorer mental wellbeing than the general population.

<sup>&</sup>lt;sup>22</sup> Office of National Statistics (2018b).

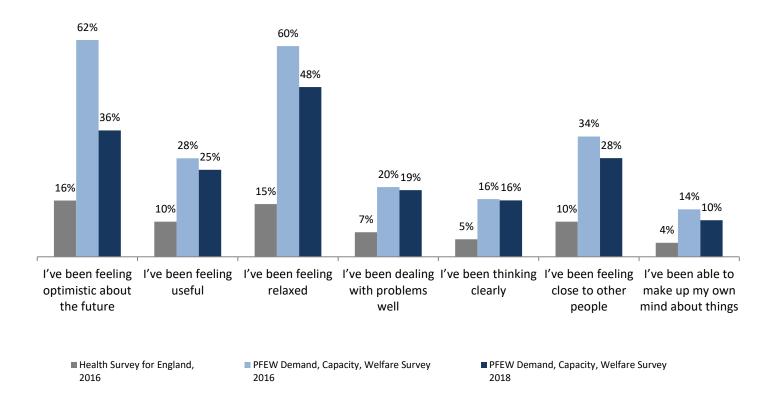
<sup>&</sup>lt;sup>23</sup> Stewart-Brown et al (2009).

<sup>&</sup>lt;sup>24</sup> NatCen Social Research, University College London, Department of Epidemiology and Public Health (2018).

<sup>&</sup>lt;sup>25</sup> Office of National Statistics (2018a)

#### Mental Wellbeing: The Short Warwick-Edinburgh Mental Wellbeing Scale:

Proportion of respondents who answered 'rarely' or 'none of the time'



A top-level broad overview of mental health was established by using a single item that asked participants to indicate whether they had experienced feelings of stress, low mood, anxiety, or other difficulties with their mental health and wellbeing over the previous 12 months. 79.3% of respondents acknowledged having experienced these feelings, with the vast majority (94.2%) of these respondents indicating that their psychological difficulties had been caused or made worse by work.

This can be compared to the 2016 Demand, Capacity and Welfare Survey where 79.6% of respondents reported experiencing feelings of stress, low mood, anxiety, or other difficulties with their mental health and wellbeing over the previous 12 months, and nine out of ten of these respondents indicating that their psychological difficulties had been caused or made worse by work (91.7%).

Interestingly, when looking at data from the wider population, a much lower proportion indicate their work as a core reason for experiencing poor mental health and wellbeing. For example, the Workplace Wellbeing Index (2016/17) created by mental health charity, Mind, found that 26% of respondents who indicated that they were experiencing poor or very poor mental health and wellbeing said that this was due to problems at work.<sup>26</sup>

When asked to indicate why their psychological difficulties had been caused or made worse by work the most frequently reported reason was that their *workload was too high* (18.2%), followed by having a *poor work/life balance* (14.7%). This is similar to previous findings from the Health and Safety Executive and Mind on work-related causes of stress which also indicated that workloads were the most frequent cause of work-related stress. <sup>27, 28</sup> The table below shows the ten most cited reasons from the list provided.

Top ten reasons why the respondents psychological difficulties had been caused or made worse by work	Proportion of total citations
My workload was too high	18.2%
I had a poor work/life balance	14.7%
I was working shifts	10.8%
Uncertainty regarding my future role or career	9.8%
There was too much change in our team/unit	8.6%
I couldn't take leave when I wanted/needed to	8.2%
For reasons other than those listed	7.0%
Attending traumatic and/or distressing incidents	6.3%
I had a poor relationship with my line manager	5.4%
My rest days kept being cancelled	4.8%

The survey also assessed work-place stress with the question: 'In general, how do you find your job?' 43.9% of respondents reported a non-diagnostic<sup>29</sup> case of work-related stress (on the basis that they viewed their job as *very* or extremely *stressful*). This is a larger proportion than reported in the results from the 2016 Demand, Capacity and Welfare Survey (38.6%); and is over twice that found in the general population by the Health and Safety Executive's (HSE) 2010 Psychosocial Working Conditions Survey (15.0%),<sup>30</sup> and a more recent study from the Scottish Health Survey in 2017 (16%).<sup>31</sup>

<sup>&</sup>lt;sup>26</sup> Mind (2017).

<sup>&</sup>lt;sup>27</sup> Health and Safety Executive (2018).

<sup>&</sup>lt;sup>28</sup> Mind (2017)

<sup>&</sup>lt;sup>29</sup> Please note; these questions are not clinical tools and thus cannot be used to diagnose psychological conditions.

<sup>&</sup>lt;sup>30</sup> Health and Safety Executive (2012).

<sup>&</sup>lt;sup>31</sup> Scottish Health Survey (2018).

However, criticism is sometimes directed at this single-item measure, as it cannot identify individuals whose work-related stress may merely be a consequence of acute stress in their personal lives. To mitigate this influence, the Demand, Capacity and Welfare Survey also asked respondents about their experience of stress outside of work; with only 11.4% presenting with a case of non-work related stress. Similarly to the results from the 2016 Demand, Capacity and Welfare Survey, after removing these individuals from the analysis, the prevalence of respondents reporting a case of work-related stress fell by less than two percentage points to 42.3%.

Finally, respondents were asked if they had ever **sought help** for feelings of stress, low mood, anxiety or any other difficulties with their mental health and wellbeing. 43.2% of respondents indicated that they had sought help for mental health and wellbeing difficulties at some point in their life, with over half having sought help within the last year (53.0%).

In essence, this means that 23.0% of all respondents had sought help for feelings of stress, low mood, anxiety or any other difficulties with their mental health and wellbeing within the last 12 months, an increase of over three percentage points from 2016 (19.3%).

# Managerial mental health and wellbeing support

Respondents who had reported seeking professional help regarding their mental health and wellbeing were presented with additional questions concerning disclosure and support. 70.1% of respondents who had sought professional help had informed their line manager, a larger proportion than in the 2016 Demand, Capacity and Welfare Survey (63.4%).

Whilst 34.4% of respondents reported that they were *poorly* or *very poorly* supported by the police service, this is more than seven percentage points lower than in the 2016 survey (41.7%), indicating an improvement over time on this measure. Six additional items about participants' experiences of disclosure were asked. The table below describes the findings, all of which show larger proportions of respondents reporting positive experiences than in 2016.

Proportion of respondents that agree with the statements below:	2016	2018
I was treated with dignity and respect	61.2%	66.6%
Our discussion was treated with confidentiality	67.6%	70.7%
I was treated differently (negatively) after I discussed my mental health and wellbeing with my line manager	21.0%	18.8%
I was treated with empathy	53.6%	58.8%
I was given enough support	43.2%	47.8%
I was given the right support	39.1%	43.7%

Of those respondents who indicated that they had decided **not to disclose** seeking help for mental health and wellbeing difficulties to their line manager, the most frequently cited reason for non-disclosure was that *it is a personal matter* (20.0%), followed by *not wanting to be treated differently (in a negative way)* (12.7%).

A screening question was applied to identify respondents with line management responsibility. These respondents were presented with a set of questions concerning training received to support those with mental health and wellbeing difficulties, and their confidence in supporting such individuals.

Although only 21.8% could remember being given any training, the vast majority (87.7%) felt *somewhat* or *very confident* in their ability to support someone they line managed if they disclosed that they were experiencing problems with their mental health and wellbeing.

These results echo those from the 2016 survey where only 20.9% could remember being given training, but 86.9% felt somewhat or very confident in their ability to support someone they line managed if they disclosed having difficulties with their mental health or wellbeing.

This can be compared to respondents to Mind's Workplace Wellbeing Index (2017/18) where, similarly, the majority of line managers (71%) reported that they would feel comfortable supporting a colleague experiencing poor mental health at work. Unlike the results from this survey however, in the 2016/17 iteration of Mind's survey, it was found that over half of the organisations in the sample had provided training for their line managers to spot signs of poor mental health in their team members.

# Organisational mental health and wellbeing support

A range of questions were asked to all participants in relation to attitudes towards mental health and wellbeing within the police service.

45.1% of respondents indicated that they thought the police service encourages staff to talk openly about mental health and wellbeing, a much higher proportion than found in the 2016 survey (22.0%). Although not directly comparable, it is broadly similar to the response Mind's Workplace Wellbeing Index (2017/18) where 44% said that the culture in their organisation makes it possible to speak openly about mental health.<sup>32</sup>

32 (2242)		
<sup>32</sup> Mind (2018).		

38.6% of respondents indicated that they would feel confident disclosing any difficulties with mental health and wellbeing to their line managers, over ten percentage points higher than in the 2016 Demand, Capacity and Welfare Survey (27.8%).

In relation to support services, 66.5% of respondents indicated that they were aware of mental health and wellbeing support services offered by their force, over six percentage points higher than in the 2016 Demand, Capacity and Welfare Survey 60.0%.

Participants were also asked if they had heard about a number of third party and charitable wellbeing support programmes before. The most recognised of these was the Blue Light Project by Mind with 55.3% of officers indicating that they had previously heard of this support program, followed by Police Mutual's Wellbeing Zone (21.5%), and the Welfare Support Program provided by PFEW and the Police Firearms Officers Association (21.4%).

# **Organisational change**

Due to the evidence linking change management with worker health outcomes,<sup>33</sup> respondents were asked a series of questions on how well change is managed within the police service.

The graphs below and on the next page show results for change management compared to those achieved by the 2018 Armed Forces Continuous Attitude Survey.<sup>34</sup>

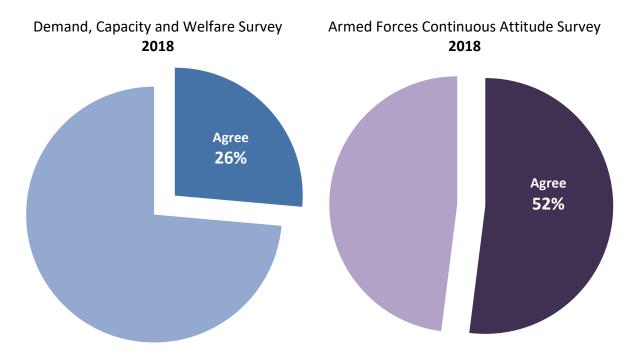
This highlights a consistently higher level of disagreement for federated police officers than seen in the Armed Forces Continuous Attitude Survey; with the majority of respondents to the PFEW Demand, Capacity and Welfare Survey consistently disagreeing that change was managed well, no matter the organisational level.

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<sup>&</sup>lt;sup>33</sup> Bordia, Hobman, Jones, Gallois & Callan (2004).

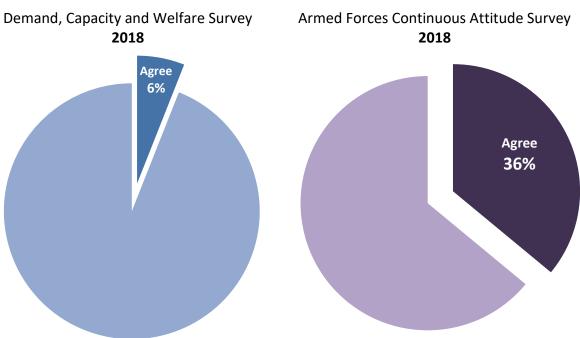
<sup>&</sup>lt;sup>34</sup> Armed Forces Continuous Attitude Survey (2018).

# Change is managed well in my immediate working team



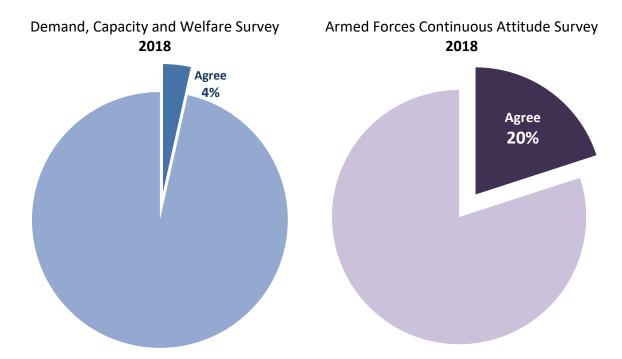
# Change is managed well in my Force

# Unit/Establishment



Change is managed well in my

# Change is managed well in the Service



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