

# SIO WELLBEING GROUP UPDATE

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[Investigator Wellbeing Toolkit](#)



# SIO WELLBEING

RECRUITMENT, RETENTION & WELLBEING  
OF INVESTIGATORS

# SIO Wellbeing Group Introduction

- Who are we?
- SIO Group Updates
- Academic Research
- Practical Hints and Tips

# SIO Wellbeing Group

## WHO ARE WE?

Chaired by D/Supt Paul Joyce, West Midlands Police, the SIO Wellbeing Group consist of volunteer SIOs from 15 forces along with academics and stakeholders including the College of Policing and NCA. The group has 3 key aims:

- **Strategic Engagement** to influence national strategy and policy by highlighting the issues affecting SIOs and how they can be addressed, led by recommendations from academic colleagues.
- **Tactical Interventions** the development of evidence led wellbeing interventions to improve SIO wellbeing that can be adapted and adopted by local forces.
- **Supportive Collaboration** engaging colleagues and stakeholders as a group, providing opportunities for support, networking and signposting that can help improve SIO wellbeing.

# HMICFRS NATIONAL CRISIS

HMIC 2016 PEEL Efficiency inspection noted a severe shortage of qualified investigators that constituted a national crisis.

Subsequent data review finds 22% fewer PIP 2 investigators than it needed.

Investigators found to have lowest levels of job satisfaction and higher risk of adverse mental health than other roles.



SIO Wellbeing Group  
**GOVERNANCE**



**Recruitment  
Retention & Wellbeing  
of Investigators**

**CC Jason Hogg**

**Sarah-Jayne Bray (TVP)**  
Programme Manager

**Recruitment**

**DCS Suzanne Baker (Glos)**  
Review of PC to DC Pathways  
Explore Direct Entry options  
Collaboration with ROCU/CT

**Retention**

**DCS Mark Edgington (A&S)**  
Review of PIP2 baseline data  
Reward & Recognition  
Targeted Variable Payments

**Wellbeing**

**ACC Martin Brunning**  
Focus High Risk Roles & SIOs  
Enhance Partnership links  
Creation of Investigator Wellbeing Toolkit



# Wellbeing of Investigators

# NATIONAL THEMATICS

## Academic Reference Group

- Review existing and ongoing research into investigator wellbeing
- Identify common minimum standards across research recommendations
- Highlight gaps and opportunities in existing research
- Steer interventions in areas for maximum impact
- Development of the Life Cycle Approach

## Senior Investigating Officer (SIOs)

- Review existing and emerging research to identify key themes and interventions.
- Share best practice and recommendations with the network
- Engage strategic stakeholders to raise awareness of the issues affecting SIOs nationally
- Improve access to wellbeing support for SIOs.

## Secondary Investigators & Analysts (SIAs)

- Support ongoing research into the impact of distressing content on SIAs
- Develop supportive interventions to minimise the risk of adverse mental health
- Develop targeted training for SIAs and supervisors, to help broaden understanding of key issues affecting them and how they can be better supported
- Embed regular outreach mechanisms to engage SIAs nationally

## Data and Innovation

- Develop a national overview of investigator absence based on latest data reporting
- Utilise existing data to identify trends, themes and arising issues
- Identify opportunities to improve use of data to better support investigator wellbeing
- Explore innovative use of emerging technology and share best practice

## Interventions & Positive Practice

- Engage collaborative forces to explore developing interventions
- Provide support to forces in understanding how to impact assess interventions and align wellbeing to organisational risk
- Utilise information from Academic Reference Group and Data & Innovation Group to highlight gaps in intervention and explore opportunities to develop bespoke initiatives



# PRIORITISING PREVENTION

‘There comes a point where we need to stop pulling people out of the river. We need to go upstream and find out why they’re falling in.

Desmond Tutu





# SIO WELLBEING PHASE 1 2020/2023

- Recommendation that SIO role should be **High Risk**
- Commissioned further academic research to understand **stressors**
- Wellbeing included as part of **PIP3/4 training**
- Start of a **SIO Wellbeing Network**;
- Contributed to the Oscar Kilo Wellbeing of Investigators Toolkit and the Week of Action



SIO WELLBEING

# PHASE 2 2024/2026

- Enhance Wellbeing input at PIP 3 / 4 training
- Further academic research into **causation** and **interventions**
- Development of a **Peer support network** / buddy system
- Explore **Reward and Recognition** opportunities for SIOs
- Support for **pre and post** SIO role
- Share **Wellbeing/Welfare strategies** for investigations
- Share **positive practice** and evidence led interventions



SIO Wellbeing  
**RESEARCH**





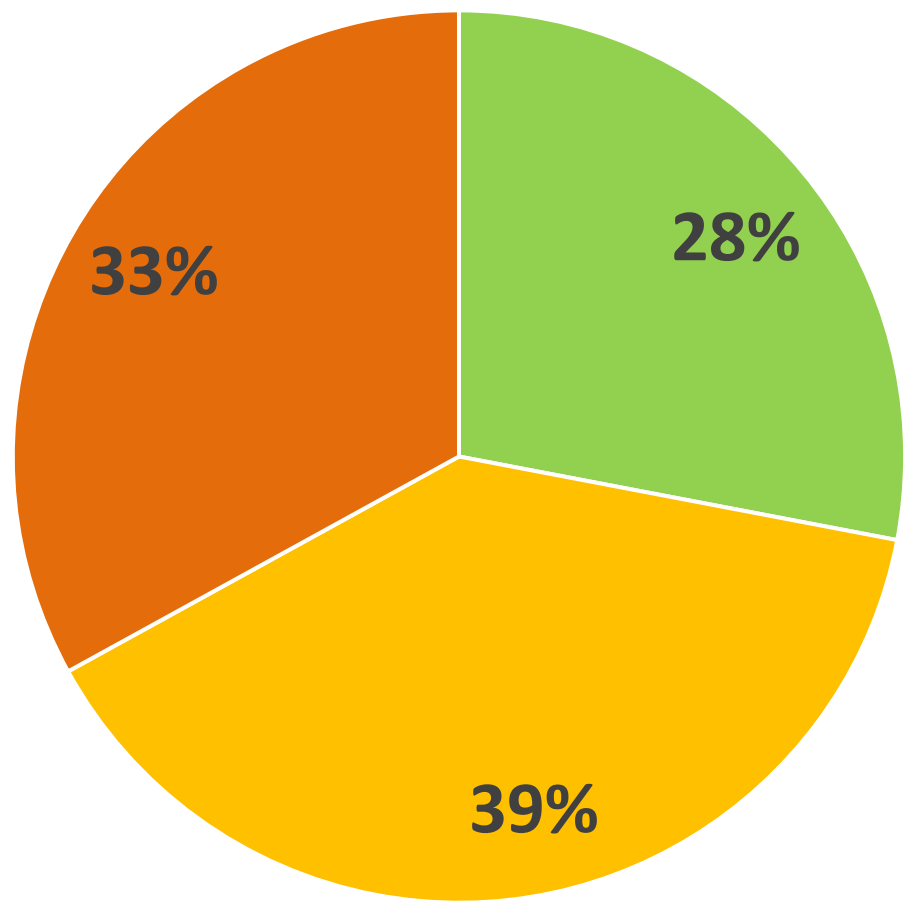
# SIO Research – Dr Liam Curran

- 350 respondents and 18 interviews;
- **81%** experienced at least 1 traumatic event;
- **8.4%** PTSD or CPTSD;
- **Positives** include **team work**; good results and **justice** for the family; mutual **respect** amongst peers, having **autonomy** and “being left to get on with the job”;
- **Negatives** include **high demand**, lack of **resources**, being on **duty 24/7** or the work will not get done, SIO being a **lonely place** and **interference** from senior management;
- The importance of the role of the PIP4 as a **critical friend** and reduce the burden



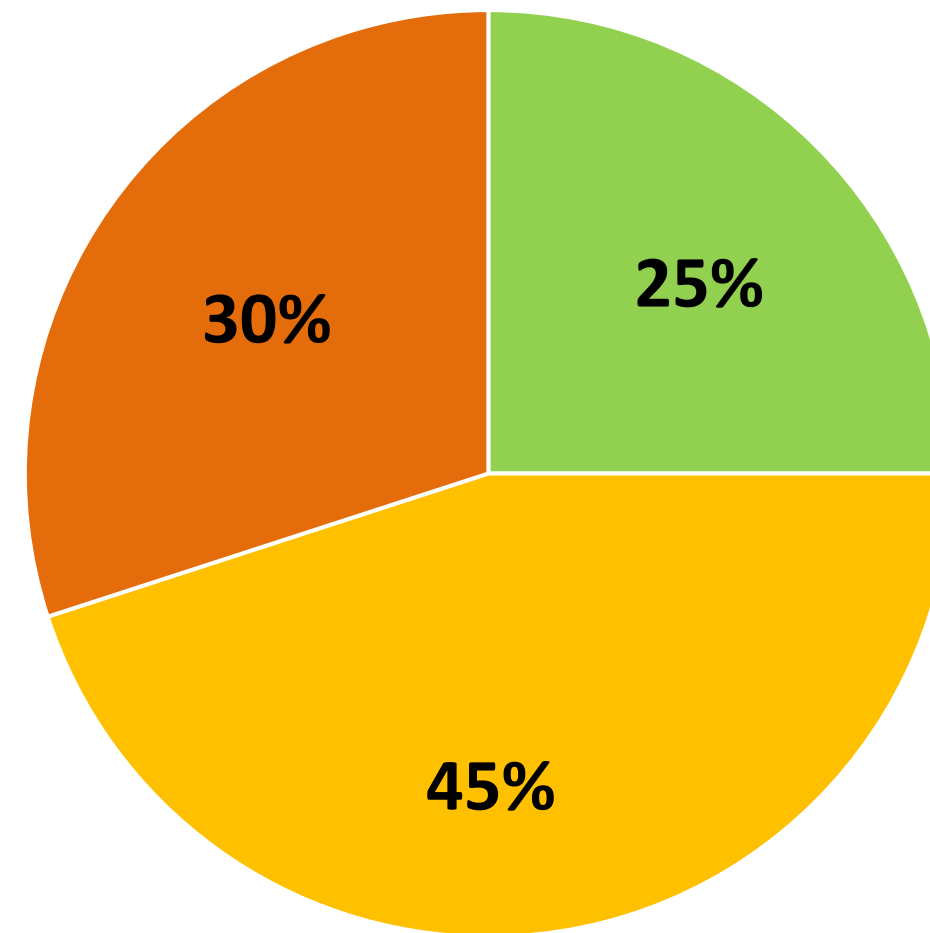
# SIO Research – Dr Liam Curran

Organisational Stressors Severity



■ Low ■ Moderate ■ High ■

Operational Stressors Severity



■ Low ■ Moderate ■ High ■

# SIO Research – Dr Liam Curran

A key finding is that investigating Child Homicide is related to increased in all three symptom clusters for PTSD, but other investigation types (on average) aren't:

- Re-experiencing (flashbacks, vivid dreams)
- Avoidance (avoidance of triggering events)
- Sense of Current Threat (hypervigilance etc)

The findings suggest that these increases may be even stronger for SIOs with children, and many SIOs put forward the idea that your views and perspectives can change once you do have children.

Often dependent on how a SIO personalises victims, and crosses over that emotional barrier into real life. So a common coping strategy is avoidance, and psychological detachment in order to proceed with the investigation.

Findings suggest that resilience quickly develops over a lifetime of policing, but there is a common pattern emerging of a significant event, or incident involving children, that can be a significant trigger.

# SIO WELLBEING

# SIO STRESSORS

The research aims to understand:

- What are the stressors experienced by SIOs?
- What is the mechanism in which stressors influence the workplace well-being of SIOs?
- What are the boundary conditions for the influence of stressors on the workplace well-being of SIOs?

The initial primary research study include discussions with small group of academic and strategic SIO stakeholders, in order to develop understanding of personal workplace stressors and how such stressors are reacted to

The second study will test these stressor perceptions via questionnaires to explore how SIO workplace well-being is impacted by personal factors including passion for work and ability to recover from the demands of duty.

The final study will seek to engage a small group of second study participants in short interviews aimed at exploring in more depth key themes emerging from the second study.






# SIO WELLBEING KEY ISSUES

1. **Stigma**– concerns around speaking out about mental ill-health due to perception of vulnerability or impact it will have on future career development
2. **Demand** – volume of demand and high workloads adding increasing pressure to investigators
3. **Time** – Lack of downtime to enable investigators to recover, decompress or reflect on how they actually feel.
4. **Awareness** – lack of understanding of wellbeing and resilience, recognising the symptoms or how to build healthy coping mechanisms
5. **Trauma** – repeat exposure to trauma at all levels which has an accumulative effect on investigators as time goes on.



# SIO WELLBEING WORKPLACE TRIGGERS

- Long hours & impact of shift working
  - Unsupportive management & culture
  - Unmanageable workloads
  - Negative relationships/poor communication
  - high-pressure environments
  - job insecurity & poor change management
  - high-risk roles
  - lone working
- 

# SIO WELLBEING KEY ISSUES

- 1. Supervisory Training** – targeted wellbeing training for investigator supervisors to enable them to support their teams and to empower them to manage demand
- 2. Personal Resilience Training** – providing training to investigators to recognise signs of burnout in themselves and others
- 3. Supervisory 1-2-1s** – meaningful and regular engagement with supervisors to discuss wellbeing, not just workload and performance
- 4. Improved OH Support** – mandatory referrals for roles beyond traditional high risk roles
- 5. Time** – ensure investigators have time away from the role and that time is given for wellbeing initiatives



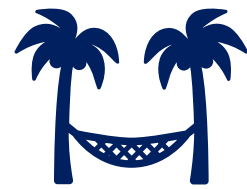


SIO WELLBEING

# ACADEMIC GAME CHANGERS



Manage and Prioritise **Demand**



Enable **time away** from the job



Embed meaningful **1-2-1s** with supervisors



Invest in CPD and **peer support**



Reward and **Recognise** commitment

# Practical Hints and Tips



# My Approach/Ideas

- Start small.... normalising Conversations.
- Understand your organisations wellbeing provision.....honest conversations.
- Don't over promise and underdeliver
- Consider an SIO Wellbeing event
- Promoting National Events and Oscar Kilo
- CPD Commitment
- Focus on PIP4 Influence
- Wellbeing Strategies



# SIO WELLBEING

# SECONDARY TRAUMA

## Re-experience symptoms:

- Unable to **switch off** from the work
- **Upsetting** dreams or flashbacks
- **Overreactions** to work related issues
- Victimised feelings of **hopelessness** and **helplessness**

## Negative symptoms:

- **Negative self beliefs** such as 'I'm incompetent, 'the world is bad', 'no one can be trusted'
- **Lack of interest** in things that used to be enjoyable
- **Negative outlook** on life leading to unreasonable fears, beliefs & attitudes
- Feelings of **isolation** from family and friends
- Emotional **numbing** and difficulty in showing sensitivity or positive emotions

## Arousal symptoms:

- **Putting off** doing work or dealing with demanding cases
- Not **looking too deeply**
- Avoiding questions that might lead to **upsetting responses**
- Blocking out or **forgetting** the most distressing areas
- Using **alcohol** to block out feelings

## Avoidance symptoms:

- Unreasonable **anger or irritability** focussed at family, colleagues or situations
- **Self destructive** behaviour such as driving too fast, having an affair
- Jumpy or an **inability to sleep** or relax
- **Inability to concentrate**, leading to increased numbers of accidents or errors
- Sensitivity to **noise** and **bright lights**

# SIO WELLBEING

# SIGNS OF BURNOUT

## Emotional Exhaustion Symptoms:

- Tired all the time even after a good nights sleep
- Unwilling to take on a new project or anything that would involve extra effort
- Avoiding offering support to others

## Depersonalisation symptoms:

- Developing unfeeling and impersonal responses towards victims and colleagues
- Feeling isolated and cut off from partner and family
- Finding it difficult to respond to happy or sad events

## Loss of sense of personal achievement:

- Feeling incompetent at work and loss of self esteem
- Talking about being a failure or self disparaging comments
- A loss of belief in a positive future

# SIO WELLBEING

# PROTECTING YOUR WELLBEING

## Before Work

- Ensure you have adequate **rest**
- Prepare your **nutrition** and **hydration** for the day
- Set an **intention** for the day
- **Journal** your thoughts
- Prepare the mind with **Meditation/Mindfulness**
- **Move** your body

## At work

- Optimise your **work space**
- Take **frequent breaks**
- Reach out to **social supports**
- Use the **employee support** available to you
- **Self assess** regularly throughout the day
- **Mitigate** in times of stress
- Create a **Wellness Action Plan**

## After Work

- Find a **transition ritual** that works
- Take time to reflect and focus on **positives/gratitude**
- Do something that **brings you joy**
- Focus on friends and **family**
- Go **outdoors**
- Get a good nights **sleep**



# SIO WELLBEING

# PROTECTING YOUR WELLBEING

## Physical

- Increase physical movement
- Healthy Snacks
- Take regular breaks

## Mental/Cognitive

- Practice mindfulness/meditation
- Deep breathing
- Scan your body for stress & stretch

## Behavioural

- Write or talk about what is worrying you
- Distract your mind with puzzles
- Read a book out-loud that you are not familiar with

## Emotional

- Adapt - acknowledge the stressor and address elements that are within your control
- Reframe – change your perspective on the situation

# SIO WELLBEING SUPERVISORY CONSIDERATIONS

## Change:

- What **specific changes** have you seen? e.g. behaviour, attitude, performance, engagement mood.
- How **severe** is the change e.g. overnight/ rapid, over a period of time?
- How **constant** is it? E.g. persistent throughout the day or just in the morning etc.
- When did this **start** and how long has it been going on for?

## Circumstances

- What do you know about the person's **life circumstances**?
- What do you know about the person's **physical health**?
- How specifically is this change impacting on **performance**?
- Have you ever noticed this **change in the person before**?
- What has changed since the last **PDR** or one to one meeting?

## Context

- What else is going on within the **workplace**?
- Have they completed all their **mandatory training**?
- Is there an appropriate and up to date **risk assessment** and does it highlight stressors in the role?
- Are they in a role assessed as at **high risk** of exposure to adverse psychological impact?
- Have they attended **mandatory psychological debriefing** if applicable to role?

# PROACTIVE SUPERVISION



Know Yourself

Know your Staff

Know your Stuff

- Schedule regular, non-negotiable **1-2-1s**
- Be inquisitive
- Engage in honest conversations
- Consider Wellness Action Plans
- Modelling behaviours
- Signpost to internal and external **support**



# NATIONAL SUPPORT FOR LOCAL ISSUES

## Leadership

- Ensure Investigator Wellbeing is included in **force Wellbeing strategy**, the [National vulnerability action plan](#) can assist in developing a robust strategy that compliments existing policy, [Essex and Kent Investigator Wellbeing Strategy](#) is also useful for those seeking to develop greater support in force.
- Introduce **mandatory Supervisory Training** developed in house or accessing available OK provision such as [Supervisor wellbeing training](#)
- [Pause Point](#) is a **staged review process** that can greatly improve wellbeing and support supervisors in managing team resilience.

## Recognition

- Consider implementation of [Targeted Variable Payments](#) and promoting other benefits that can address the issue of **Pay Parity**.
- Develop a **Reward and Recognition Programme** for Investigators, the [Reward and Recognition Toolkit](#) shares tips and tricks as well as best practice.
- Review **Force Awards** and Commendation processes to ensure investigators are represented
- **Communicate success** widely within the organisation, via intranet, targeted communication channels.

## Preparedness

- Ensure oversight of **accreditation** across PIP roles, as outlined within the College of Policing [PIP Programme](#)
- Review and **embed** the College of Policing **CPD Toolkit**: [Taking responsibility for your professional development](#)
- Implement a staged review process for **new investigators** to discuss resilience and wellbeing, such as [Pause Point \(WoA Video\)](#)
- Share the **Week of Action** Playlists [2022](#) and [2023](#) to encourage CPD.
- Consider delivering **regular events** on key issues affecting investigator resilience, such as:
  - [Mental health masterclass](#)
  - [Wellbeing and resilience event](#)
  - [Work life balance for investigators](#)

## Access to Support

- Create a **one stop shop** for signposting as per [Essex and Kent Investigator Wellbeing Strategy](#)
- Develop a [Wellbeing toolkit](#) highlighting **localised support**
- Embed **regular wellbeing sessions** that encourage engagement, reducing stigma and increase peer support such as the [Wellness café](#)
- Understand the **needs of your team**, using [Wellbeing support plans](#) and [Workplace adjustments resources](#)
- Implement a **Peer Support Programme**. such as a [Buddy Scheme](#), or a more structured approach as in the following examples
  - [Mental health first aid training](#)
  - [Peer support programme](#)
  - [Peer support network](#)

## Mental Health

- Embed [Psychological and trauma risk management strategies](#), ensuring they are accessible and have impact.
- Place emphasis on **breaking stigma** by engaging in national awareness days such as [Time to Talk](#) and [Mental Health Awareness Week](#)
- Develop a dedicated [Mental Health Toolkit](#) that **signposts** to local support and highlights signs of burnout
- Encourage the use of other **resilience building tools** such as [mindfulness](#), [breathwork](#) and [stress support](#)
- Implement the [Mental Health for Employers Toolkit](#)

# CONTACT US



If you wish to improve your local Investigator Wellbeing Provision, or wish to learn more about the NPCC Recruitment, Retention and Wellbeing of Investigators then please get in touch. We have all 43 forces engaged in the group and are able to support you with any issues regarding the capacity and capability of investigators. Whether it's the completion of the HMICFRS Investigator Resilience Plan, issues around attraction or general queries around how to improve localised provision, we are happy to help.



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[Investigator Wellbeing Toolkit](#)



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