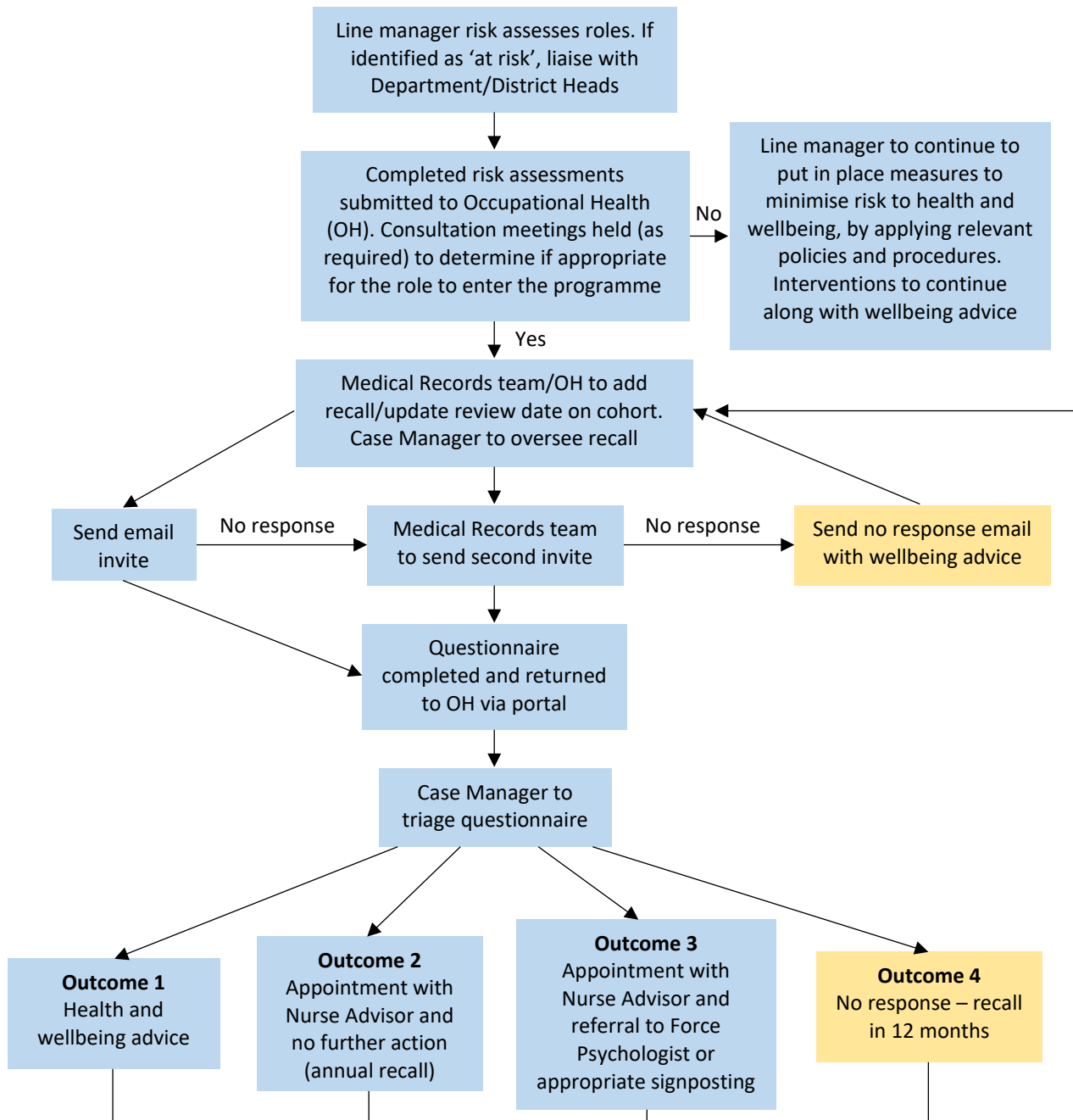


Trauma and Psychological Assessments for At Risk Roles

Contents

Flowchart (excluding scenarios designated as a Post Incident Procedure)	2
Policy Statement	3
Principles.....	3
Responsibilities	4
Access to Psychological Services for 'At Risk' Groups.....	6
Additional Information.....	7

Flowchart (excluding scenarios designated as a Post Incident Procedure)



Policy Statement

Summary

West Yorkshire Police (WYP) understands that the work of many of its employees involves being involved with situations that can, on occasions, be traumatic and overwhelming. These can include major incidents, but also situations encountered in an individual's day-to-day role, both as a one-off incident, or a cumulative effect of attending a number of incidents.

This policy outlines the psychological services available to 'at risk' groups (roles dealing with potentially traumatic incidents), providing detail on what the 'at risk' groups are, which roles are obliged to visit the Force Psychologist and how peer mentoring and support schemes work for 'at risk' groups.

Scope

This policy applies to all police officers, police staff and volunteer posts who are in roles deemed at risk, **excluding scenarios that have been designated as a TRiM procedure.**

Principles

General

- The purpose of this policy is to provide support and guidance for regular screening of individuals who deal with potentially traumatic or emotionally demanding work. The screening offers the opportunity to declare any symptoms affecting mental health. It is aimed at identifying anyone experiencing early symptoms of psychological trauma/distress in relation to trauma, to provide signposting to help or escalating through the process and offering support.
- The aim is to identify and educate individuals experiencing unwanted symptoms associated with exposure to work-related trauma, encourage self-care and prevent deterioration in individuals.
- All information will be dealt with in the strictest of confidence.
- Where a situation has been deemed a traumatic incident, the TRiM procedure must be utilised in the first instance.
- This is a periodic screening process. If support is required in the interim period, support can still be explored through the management referral process.
- As part of the consent process, individuals will be made aware that if they are referred for any treatment and it is determined that the costs of this is a benefit in kind (as per current HMRC rules), the individual's name, employee number, date of birth and value of treatment will be shared by Occupational Health (OH) with the Force Pay Section and any tax liabilities will be deducted accordingly. (Further details in relation to taxable benefits can be obtained from Pay Section.)

Responsibilities

Individuals	<p>If an individual agrees to consent to this process, they will be responsible for:</p> <ul style="list-style-type: none"> • Engaging in the process; and • Declaring any work related events to their line manager.
Line managers	<p>Line managers are responsible for:</p> <ul style="list-style-type: none"> • Ensuring new members of staff are aware of this process and are encouraged to engage with the process; • Providing protected time for individuals to engage with the process; • Notifying Occupational Health (OH) of any new starters to, and/or leavers of, the department for inclusion in, or exiting out of, the programme; • Providing care and support to individual members of their team; • Putting in place measures to minimise the risks to the health and wellbeing of their team, by applying relevant policies and procedures; • Monitoring the balance of work and workloads within the team, the welfare of team members and the quality of their work; • Providing adequate opportunities for one-to-one support, operational debriefings, team meetings and external supervision, where appropriate; • Ensuring individuals are aware of OH services, and routinely reminding and encouraging team members to engage in the Psychological Assessment process once the role has been deemed 'at risk'; • Preparing new members of the team through a full induction for the 'at risk' role they are about to undertake; • Where appropriate, and in conjunction with senior leadership teams (SLT), facilitating familiarisation and wellbeing sessions and, where possible, promote good health and lifestyle habits; • Where appropriate, and in conjunction with SLTs, facilitating ongoing professional development and training courses to ensure individuals are able to meet any operational competency required of the role; • Conducting regular environmental scanning to identify any revised or new national guidance which relates to wellbeing or psychological support for the 'at risk' group, referring to SLTs where appropriate to capture organisational learning and ensure consistency; • Closely monitoring team members in order to identify any significant changes in behaviour that may indicate signs of difficulty and raising these with a view to referring to OH under the management referral process; and • Undertaking risk assessments to identify a role is at risk. If a role is identified as being at risk, line managers must liaise with department/district heads with a view to requesting entry to the Psychological Assessment programme.

Occupational Health (OH) Case Manager

The Case Manager is responsible for:

- Supporting individuals and line managers with their queries;
 - Overseeing the recall process;
 - Undertaking initial triage of relevant screening questionnaires, referring to the relevant care/treatment pathway and/or escalating to the OH nursing team and, where appropriate, providing interim advice/care plan in relation to improving wellbeing;
 - Ensuring that engagement is monitored and producing and presenting health monitoring management data;
 - Being involved in and contributing to the decision-making process for roles entering and exiting the process;
 - Arranging and delivering education to line managers and individuals on the process to encourage engagement; and
 - Keeping up to date with support and resources to signpost to.
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Occupational Health (OH) Medical Records Team

The Medical Records Team are responsible for:

- Updating the system and generating questionnaires and recalls within the recommended timescales; and
 - Working with the Case Manager with the cohort processes.
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Occupational Health Nurse Advisor (OHNA)

The Occupational Health Nurse Advisor (OHNA) is responsible for:

- Undertaking Psychological Assessments with clients;
 - Ensuring appropriate signposting or referral as per clinical assessment;
 - Providing clinical support and advice to the Case Manager as required;
 - Supporting the Case Manager with any queries, and line managers in providing care to their teams; and
 - Discussing any complex cases as required with the Senior OHNA/Force Medical Advisor.
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Senior Occupational Health Nurse Advisor (SOHNA)

The Senior Occupational Health Nurse Advisor (SOHNA) is responsible for:

- Providing clinical support to the OHNA and Case Manager as required; and
 - Supporting line managers in providing care to their teams.
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Occupational Health (OH) Force Medical Advisor

The Force Medical Advisor (FMA) is responsible for:

- Being involved in and contributing to the decision-making process for roles entering and exiting the process;
- Providing clinical support to the SOHNA, OHNA and Case Manager as required; and
- Supporting line managers in providing care to their teams.

Access to Psychological Services for 'At Risk' Groups

Principles

- The Force must balance available resources against needs and perceived risk.
 - The list of roles which are currently defined as 'at risk' is reviewed periodically by OH and the relevant department on a risk assessment basis, in accordance with up-to-date evidence based research, latest guidelines and resource availability.
 - The most up-to-date list of roles can be viewed on the OH intranet page.
 - Individuals in 'at risk' groups are strongly encouraged to engage in the Psychological Assessment programme, complete the screening questionnaire and follow advice/attend any appointments offered.
 - Case Managers will triage the screening questionnaires and refer, signpost, or escalate to an OHNA as appropriate.
 - A SOHNA or OHNA will assess the individual and, if deemed appropriate, refer to the Psychologist for assessment and/or treatment, or refer to the Employee Assistance Programme (EAP). Individuals can also self-refer to EAP.
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Requests for new roles to be determined as 'at risk'

- Requests for new roles to be determined as 'at risk', and therefore be eligible to partake in periodic screening and assessment, must:
 - Have support from the relevant District or Departmental Head;
 - Detail the reasons that psychological support is requested, including supporting evidence (such as an assessment of the risk), the role(s) affected, the numbers in the role(s).
 - Completed risk assessments must be submitted to OH. A multi-disciplinary panel including, but not exhaustive of, the Force Medical Advisor/and or SOHNA, Case Manager, Head of Department/District who is requesting, and member of the People Directorate could also be invited to attend as a panel member. Evidence and available resource will be considered as part of the request.
 - The panel results will be communicated in writing to the Head of Department/District within 10 working days.
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Exiting the programme

- Where an individual is exiting the organisation or moving to a role that does not require Psychological Assessment due to low exposure to trauma, once made aware, OH will send an exit questionnaire along with details of how to access support via primary care, EAP (within three months of leaving) or OH if they are still employed.
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Additional Information

Compliance

This policy complies with the following legislation, policy, and guidance:

- Health and Safety at Work Act (1974)
 - Data Protection Act 2018
 - TRiM policy
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**Supporting
information**

The supporting information for this policy can be accessed online.

**Further
information**

Further guidance in relation to this policy can be sought from:

- People Services
 - Occupational Health
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