Leadership, wellbeing, professional development and innovation for the police front line: an evidence review

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Acknowledgements

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Executive Summary

- This literature review assesses the main academic and 'grey' literature sources that relate to the four areas of the Front Line Review of Policing: Wellbeing, Professional Development, Change and Innovation, and Leadership. It focuses on 'what works' to improve these areas, but also summarises the views of the frontline workforce on these topics. The report seeks to complement the other evidential strands of the FLR.[1]

- The academic evidence base for 'what works' to improve the areas covered by the FLR is, while appearing to be increasing, still generally under-developed. There are relatively few robust studies, with most interventions involving small numbers of participants. Most of the international studies reflected here were undertaken in the US. And the views of the policing frontline are generally captured through staff association surveys which may not always fully reflect the views of the totality of the front line.

Cross cutting observations

- Two factors appear to be critical in fostering positive responses for wellbeing, professional development and innovation:

  - **Allowing sufficient space and time within work for these to be addressed** – for instance, managing wellbeing by allowing time for 'decompression', so the workforce can share experiences with each other. Meanwhile a culture of innovation can be supported by the space to allow testing of new ideas for long term enhancements.

  - **Leadership style** – the role of line managers in particular appears to have a strong impact on encouraging professional development, supporting positive wellbeing, and instilling a culture of innovation. The behaviours which the frontline workforce value in line managers include being supportive, fair, available and visible.

Wellbeing

- The front line of policing generally feel their wellbeing is not adequately supported by forces, although the extent of poor wellbeing amongst the front line varies.

- Five main factors appear to have the potential to impact frontline wellbeing: remuneration and workload, internal demand, team support, physical health, and the experience of trauma.

- A range of programmes and policies have been found to be effective at preventing poor wellbeing of the frontline workforce. These include procedural justice approaches, compressed hours for shift workers, and educational programmes to improve diet and physical health. However, the breadth of the evidence base on interventions that aim to prevent poor wellbeing is limited.

- Mindfulness training and other programmes that aim to treat, or build resilience to, poor wellbeing have been shown to be effective in non-police occupations. A less developed but still positive evidence base exists in the police context.

- A major challenge to building resilience against poor wellbeing is in successfully

encouraging the uptake of potentially beneficial interventions. The stigma of discussing poor mental health, and low uptake of diet and exercise regimes, continues to hinder potentially effective programmes from being successfully implemented.

Professional Development

- The views of the front line are generally negative on the approach to professional development within forces, particularly the way Professional Development Reviews (PDRs) are used.

- This report covers the evidence on formal training programmes, continuous professional development, and the wider environment that encourages learning within the policing front line. Although the evidence base is generally sparse, a few studies do investigate the impacts of training programmes on organisational outcomes robustly.

- Training appears to be most effective when it is delivered through a variety of mechanisms – such as seminars and role play – and more generally, closely integrated into everyday operational practice.

- So-called 'informal' professional development activities – such as coaching and mentoring – have been found to be beneficial in achieving learning outcomes outside of 'formal' training.

- Studies indicate that beyond these mechanisms, applying learning in the workplace is helped by having leaders that are receptive to incorporating new practices.

- Reinforcing the application of new skills is best maintained by using multiple methods, such as reminders and peer led discussions.

Change and Innovation

- This report covers the evidence on both the use of 'top-down' change programmes and the encouragement of a culture of innovation generated within the workforce. Of all the pillars of the FLR, the evidence base around change and innovation is particularly thin.

- A handful of studies suggest a culture of innovation can be encouraged by leaders who place a value on continuous professional development and reflect this by making time and resources available. The effect of other factors such as the role of messaging from senior leaders is very limited.

- Several evaluations suggest that successful implementation of change programmes can be aided by seeking input from the front line into their design and delivery – for example through surveys or consultations.

Leadership

- Although there isn't a generally accepted definition of leadership, this report covers the behaviours of those who directly lead others.

- Staff association-led surveys in England and Wales typically find that the front line are more critical of their senior leaders than their immediate supervisors.

- The behaviours that frontline officers generally believe leaders should demonstrate include acting ethically, having frontline experience, communication skills and 'big-picture' thinking.

- The rank of a subordinate officer effects what leadership behaviours are desired from

immediate line managers. For example, more junior ranks typically value stronger operational behaviours in their line managers, compared to more senior ranks who feel they benefit from big picture thinking.

- Multiple studies indicate the importance of the direct line manager's style of leadership in influencing individual officers' behaviour and thinking, although there is also likely a 'trickle down' effect from senior managers. There is a strong evidence base for the potential positive effects that leadership training programmes can have on operational outcomes. Likely drivers of positive outcomes include making the training mandatory, spacing training sessions out, having a face-to-face trainer, and including feedback as part of the course.

1   Introduction

The Home Secretary announced The Front Line Review of Policing (FLR) on 23rd May 2018. The FLR's aims are to provide frontline police officers and staff throughout England and Wales "with the opportunity to share their ideas for change and improvement" for policing. The 'front line' includes those "in everyday contact with the public and who directly intervene to keep people safe and enforce the law" – around 78% of the police workforce nationally.[2] The terms of reference for the FLR include four 'pillars', although there is overlap between each:

- Wellbeing

- Professional Development

- Change and Innovation

- Leadership

Several strands of evidence were sought for the FLR:

- 28 workshops with a broad sample of the frontline workforce were run for the FLR independently by the Office for National Statistics

- in-person and digital engagement with the frontline workforce, led by a mixed team of seconded members of the frontline workforce and Home Office officials

- contributions from academics who sit on the FLR steering group (Dr Laura Knight and Dr Les Graham)

- this report

This report complements these other strands by seeking to answer two questions:

- what are the views of the frontline workforce according to existing evidence sources?

- what is the evidence on 'what works' for improving each of the strands?

'What works' literature is interested in understanding what types of intervention work, on who, under what circumstances, why, and what the moderating factors are. A preliminary version of this report was presented at a FLR steering group meeting in November 2018.

1.1   Report limitations

We found the following limitations of the literature affected the extent to which we were able to answer the research questions of frontline views and academic evidence on 'what works' for the pillars of the review.

- In general, the 'what works' literature on the four pillars of the FLR appears to still be in its infancy.

- There was very little academic evidence found that used objectively measured outcomes,

strong evaluative or methodological approaches, or looked at longer-term impacts. The literature within the policing context does not yet appear to generally be in a position where different types of intervention have been compared against one another to establish what works best for different individuals and different circumstances.

- The evidence found for this review generally focused on police officers, rather than other parts of the frontline workforce such as police staff and PCSOs.

  This is likely in part due to much of the evidence coming from older UK sources or other countries, where organisational structures may not be the same as in England and Wales.

  However, even within the recent England and Wales literature there appears to be a general lack of evidence on frontline roles beyond police officers.

- Specifically looking at the evidence on the views of the front line of policing, most evidence found comes from staff association surveys.[3]

  These are typically methodologically weaker as they are not independent of the police themselves, do not use a randomly selected sample, and/or have relatively low response rates; which all limit the extent that they can represent the totality of the policing front line (see Annex A).

1.2 Methodology

The information is taken from published, English-language literature, based on primary research or systematic reviews of the literature that were based in the UK or other 'western' countries. Academic literature and 'grey' literature sources were gathered in the following ways:

- A literature search conducted for the Home Office Analysis and Insight (HOAI) by the National Policing Library (NPL) in Autumn 2018. The request was for any key academic articles held within the NPL, covering the key documents in their archive that related to each of the four pillars of the FLR.

- An existing literature search conducted for HOAI by Nottingham University Wellbeing Library in Winter 2017, covering the police and broader wellbeing context.

- A targeted search of the grey and academic literature conducted by HOAI between Autumn 2018 and Spring 2019. This was primarily on police stakeholder websites, including Her Majesty's Inspectorate of Constabulary (HMICFRS), College of Policing, Police Federation, Police Dependants Trust, Superintendents Association, and using Google Scholar and the National Policing Library.

- To complement these sources, HOAI conducted a thematic analysis of HMICFRS Legitimacy Inspection Reports (LIRs).[4] This was done to capture the national level findings as they directly answered questions of relevance to the FLR, including:

  - Feedback mechanisms between frontline and senior members of the workforce

  - Talent management schemes and professional development

  - Wellbeing provision

  - Welfare provision

  - Frontline staff views on these

The quality of evidence gathered from this exercise was mixed. Every report included some information consistently (e.g. a figure for the number of grievances received per 1,000 workforce) which means a national, quantified picture could be derived. However, most topics were not covered in exactly the same way and therefore only indicate the *range* of activity carried out, not the total extent of activity within any given force. Other topics are not mentioned in every LIR so these are only mentioned in this report when very limited other evidence was found to help 'triangulate' findings from other sources (see if multiple sources all have similar findings).

2 Wellbeing – frontline views and the evidence on what works

In this section we look at the evidence on 'what works' for improving the wellbeing of the police front line. Wellbeing is a very wide-ranging concept with various definitions. Most typically focus on aspects of mental and physical health, which form the basis of what is covered in this section.[5] From our review of the more wide-ranging wellbeing literature, we have highlighted five groups of overlapping factors that appear to be relevant to the police: organisation factors; experience of trauma; team support; physical health, diet and fitness; and remuneration and workload. Other frameworks for wellbeing cover similar areas, but give different factors more or less prominence.[6]

Organisation factors: internal organisational factors relate to paperwork and bureaucracy, and the wider environment that hinders the more operational aspects of a role such as hierarchical structures, a perceived absence of input into decision making, and shift patterns.[7] Academic research points to this group of organisational factors being perceived by the police as more stressful than operational aspects of the role.[8] There is a large evidence base on so-called 'stressors' within the policing context, and this is covered in an accompanying appendix to the FLR.[9]

Experience of trauma: The wider evidence base has linked long-term experience of 'low-level' stressors, as well as physical and mental health issues with 'burnout' and associated conditions such as compassion fatigue.[10] The risk of burnout can be reduced even in intense environments by active participation in decision making and strong social support networks.[11]

More acute traumatic events can lead to mental health conditions such as Post-Traumatic Stress Disorder (PTSD). These can involve involuntary re-experiencing of traumatic events and difficulty with regulation of emotions and threat perception.[12]

Team support: The role line-managers play in supporting wellbeing is often highlighted in academic studies and sector-led research. This can include managers giving structure to their workers' daily work or shift pattern, supporting their workers' professional development, and recognising, and acting on, early signs of poor wellbeing.[13] Personal factors such as emotional intelligence, and team level factors such as feelings of social connectedness and support, have also been shown to impact wellbeing, although these individual and social factors are likely to interact and overlap.[14]

Physical health, diet and fitness: Good physical health includes the prevention of, or recovery from, injury and sickness, encouraging a balanced diet and engaging in regular exercise. Physical health is both a constituent part of wellbeing, and a contributing factor to good mental health.

Remuneration and workload: Evidence from a range of occupations suggests there is a relationship between an individual's earnings and their overall job satisfaction.[15] Surveys from the Police Federation show low levels of satisfaction with pay, although the survey does not cover all of the front line. The Police Remuneration Review Body (2017) concluded that while pay is often quoted to be the key factor in falling morale across police forces, evidence on the

relationship is limited and interwoven with many other factors.[16] And while *some* demands on the workforce can be viewed as positive, routine high workload can be associated with symptoms such as psychological distress and emotional exhaustion, as well as restricting the ability to participate in other activities that could enhance mental health.[17] Remuneration and operational workload are out of scope of the FLR, so are not considered further in this report.

2.1   Views on wellbeing and how it is supported within forces

No research or sector-led studies were found that quantified the variation in the experience of different roles within policing as a whole or within the front line. However, a US study examined the individual tasks that the police undertake and found the strongest negative effects on mental health were caused by witnessing traumatic events and responding to domestic abuse calls.[18] Frontline roles will typically be exposed to these types of events during their routine duties. HR data from a number of police forces suggests that in recent years, frontline roles have the highest rates of absence – for any reason – of any professional role within the police, although over three-quarters of the police workforce is in a frontline role.[19] Specialist roles, such as sexual abuse investigators, negotiation and mediation roles, and firearms officers are routinely highlighted as presenting particular pressures that can negatively impact mental health.[20]

While staff association surveys suggest that the police front line believe their wellbeing could be better supported, the extent of this sentiment varies from survey to survey. Recent examples ranged between 24% and 80% of respondents reporting wellbeing issues, using a range of different measures.[21] The differences in these findings will in part reflect differences in study design and coverage. However, HMICFRS Legitimacy inspections found generally the front line felt supported by forces' approaches to wellbeing, or felt it was a priority for their force.[22]

Various sector-led studies have found the frontline workforce critical of occupational health (OH) service provision in forces. One study found two-fifths of those who had received professional help for a wellbeing or mental health issue felt they had been poorly supported.[23] The 2017 HMICFRS Legitimacy inspection programme found OH services typically having a 15 day wait time, although this varies widely between forces, with some having wait times in excess of 40 days.[24] The Police Dependants Trust survey (2016) found officers would mostly prefer to use a GP compared to OH services for work-related wellbeing issues.[25] This is likely in part to do with the continuing stigma of discussing poor mental health within the police service rather than necessarily failures of police OH.[26]

HMICFRS Legitimacy inspections in 2017 found almost all forces had training for a range of leadership roles on wellbeing related issues. However, there may be a question of whether this is extending into middle management and supervisory roles. For example, one staff association survey found only a fifth of line-managers from federated ranks claimed to have received training on wellbeing. Weaknesses in wellbeing training for line managers have also been found in other professions.

The following section will cover the available academic evidence on interventions that aim to:

- **prevent** those factors that negatively impact wellbeing by changing organisational systems;

- **build resilience** in the workforce by equipping them to deal with these factors, if they arise;

- **treat** the effects of poor wellbeing.

2.2 What is the evidence on 'what works' for improving wellbeing in the police?

Although in recent years there has been an increase in research on wellbeing interventions, there is still not a well-established evidence base on this topic within UK frontline policing. Few studies were identified which describe what components of wellbeing (e.g. organisational, leadership) the intervention was trying to address. And given that there are many possible types of intervention and choices of outcome measure, these few methodologically strong studies only cover a small part of the wellbeing universe. Many evaluations of programmes have small sample sizes and/ or a short follow up period, making impact hard to measure. Individual studies typically look at a narrow range of processes or elements of wellbeing and rarely look more holistically. The terminology to describe key conditions – mainly commonly used terms such as 'stress', but also specific clinical terminology such as 'PTSD' – is rarely consistent across studies.[27] Few studies were carried out in the England and Wales policing context, with those few available tending to be based in the US. And where academic studies do exist, these tend to be focused on police officers rather than others who make up the front line.

Finally, as with other areas of police effectiveness, even when promising interventions have been identified, the risk of implementation failure appears high. For example, a recent, large RCT in Australia across 23 police forces over several years, which sought to study a range of different mental health-related interventions failed to find any significant impacts.[28] The evaluation suggested that this was largely down to a failure of implementation, for example, when more than half of officers allocated to a training programme did not attend it.

2.2.2 Interventions that aim to reduce the risk of poor wellbeing

The evidence in this area is generally sparse. A 2014 systematic review by Patterson et al sought to identify stress-reducing programmes within policing and found very few robust studies.[29] They found no studies that aimed to reduce bureaucracy or internal demand, although this may be related to the difficulty of changing internal processes under experimental conditions. However, casting the net wider there appears to be some useful evidence around the influence that 'organisational justice' and targeted physical health interventions can have on improving wellbeing of the frontline workforce.

There is a growing interest in so-called 'organisational justice' approaches as a route to improving wellbeing. These approaches typically involve increasing open, honest, timely and respectful communication between different ranks, and greater employee involvement in the decision-making process.[30] These approaches generally appear to be effective, but it's relatively uncommon for organisational justice studies to rely on direct measures of wellbeing as their primary outcome measure. [31] Typically, they focus on other measures such as complaint levels or levels of public trust, or tangential measures such as workforce intended leaving rates. A systematic review of the international evidence did find evidence of positive effects on the wellbeing of officers, although the studies that directly-measured wellbeing outcomes in this review were frequently taken from non-Western studies which may limit their applicability to the UK context. [32] Nevertheless, a more recent, qualitative study in the UK found parallel findings on the effectiveness of these approaches.[33]

A range of physical health interventions have been found to improve various aspects of bodily health and diet. A US study involved weekly sessions over three months for small teams of police officers, using a peer-led, scripted format, focussing on teaching and giving practical advice on how to improve lifestyle. After a long follow up period (two years) diet and smoking/ drinking habits were still better for those who received the intervention compared to a control group, although no long-term improvements were seen for weight gain or symptoms of

depression. Similar programmes in the fire and rescue services also show positive effects on weight gain. A US study looked at improving nutrition and physical activity and used two different methods: group sessions and 1-2-1 counselling. Both had statistically significant effects on diet and weight gain over a year after receiving the intervention. Overall, the evidence on the potential effectiveness of such programmes is positive. A recent systematic review on health promotion interventions in police forces finds the effects of these programmes on healthy eating habits and broader fitness tend to be statistically significant, although the size of the effects are relatively small.[34] Another recent systematic review, focussing on shift workers more generally, found programmes promoting healthier food or physical activity habits appear to have the largest and most sustained benefits when they include a specific motivational component alongside lifestyle-changing elements.[35]

A commonly reported challenge in delivering interventions that aim to improve physical health is that those who are likely to benefit the most are often less likely to participate. For example, one intervention offered free, personally tailored and confidential physical and mental health coaching over a number of weeks to all emergency dispatchers within a police department but take-up was very low. The reasons people gave for not volunteering included concerns of using a gym and finding exercise difficult.[36]

The link between work patterns and wellbeing has also been examined. A systematic review on the impact of compressed working week interventions on shift workers found a "cautiously optimistic" overall effect on wellbeing, without unwanted negative impacts on organisational or health outcomes.[37] However, the authors note the evidence is not generally methodologically strong.[38] An older summary of the research evidence points to provision of catering areas, supervision, and recreational activities improving the experience of shift work – although specific interventions were not referenced.[39]

Outside of policing, best practice guidelines highlight various factors play a role in preventing burnout (Figure 1).

From PHE, 2016. Adapted by Home Office Analysis and Insight.

Figure 1 – Organisational factors that relate to burnout

2.2.3   Protective interventions

Mindfulness-based strategies aim to increase a person's awareness of their current emotions and environment, often through some form of reflective practice or meditation.[40] Looking more broadly across the range of blue-light services and other occupations, mindfulness approaches appear to be effective.[41] A US study trialled a mindfulness-based programme on police officers which, though small, showed statistically significant improvements in the mental health for those receiving the intervention.[42]

Other less methodologically strong studies suggest the potential of other programmes that aim to increase an individual's resilience in the workplace, but here too the police-specific evidence is limited. [43] Patterson's review did not find significant effects in interventions that sought to increase resilience overall. However, Patterson's review noted that, within individual studies, interventions did reveal improvements to some *physiological* measures such as blood pressure, and *behavioural* measures such as signs of alcohol abuse. Measures that sought to capture *psychological* effects such as feelings of anxiety had smaller effect sizes. This is in keeping with the authors' suggestion that programmes used to treat or build resilience are only successful in ameliorating poor wellbeing, not eliminating it.

More qualitative evidence suggests the effectiveness of 'decompression' – that is, dedicated time and space soon after a potentially traumatic experience – that utilise peer support networks of others in similar roles. Among specific, high risk roles such as those involved in negotiations with potential suicide incidents, there is evidence that informal peer-support networks exist and are perceived as helpful.[44]

Even relatively low levels of physical exercise have been linked to improved recovery from injury.[45] However, we found no studies that looked at the implementation of physical fitness programmes as a means of building resilience in case of physical injury, or in treating physical injury.

HMICFRS inspections found various activities in forces to support wellbeing. These included promotion of workforce wellbeing through peer groups or staff away days, seeking to understand workforce wellbeing, and proving access to facilities and resources. However, the police specific evaluation of these appears rather limited.

2.2.4   Treatment interventions

This final section looks at programmes that seek to specifically treat extant poor mental health. The best evidence on interventions aimed at returning people temporarily or permanently off work due to common mental health conditions back to work comes from a systematic review conducted in 2012 in Canada. [46] This identified studies which typically looked at depression or anxiety and drew upon research across a range of occupations including policing. There was moderately strong evidence to suggest interventions that (a) tried to help workers to access clinical treatment outside of the workplace, or (b) gave access to workplace-based psychological interventions, improved work functioning and *quality of life* and *economic* outcomes. Moderately strong evidence was also found to support the effectiveness of interventions that focus on supporting workers through disability management systems in place at their *workplace* for reducing the amount of time spent off work.

The current evidence on treating common mental health conditions is limited, and studies that do exist give mixed findings. A UK trial of a stress recovery programme that taught a variety of recovery techniques to people from a range of professions found significant changes to participants' perceived stress and sleep quality three weeks later compared to a control.[47] In contrast, a study on police officers and other emergency response professionals found no statistically significant difference in interventions delivered in face-to-face and online format compared with a control group not receiving an intervention.[48] The authors suggest that for some types of poor mental health, the passage of time produces indistinguishable effects compared to treatment.

One difficulty in delivering interventions that seek to treat mental health conditions caused through exposure to trauma is the potential stigma of having, or being seen to have, a condition effecting mental health.[49] Trauma Risk Management (TRiM) is one intervention already used within many UK police forces, involving training police officers to deliver a triage function in the event of a potentially traumatising incident.[50] The theory of change here is that, as it is delivered by members of the police, it is a less stigmatised route to seeking professional help. However, the ethical issues of assigning participants to interventions or controls after traumatic experiences make it a practically challenging area to study. A systematic review suggests that TRiM is likely to not be harmful or have specifically negative outcomes, although individual studies repeatedly demonstrate issues of high non-response of participants in the studies reviewed (around two-thirds of officers contacted).[51]

Looking beyond studies in the policing context, a meta-ethnography of studies that examined programmes trying to tackle the effects of trauma[52] highlighted a few overarching factors that mediate the successful delivery of such interventions: making the intervention appropriate for the target population and organisational norms; the intervention being actively supported by the organisation, perhaps attendance made mandatory to help reduce perceived stigma; and making the intervention harness existing social support and peer processes within a team.

Implementing effective treatment regimes is another issue. Simply getting the frontline

workforce to attend occupational health services (OH) provided by forces is challenging. In the academic literature this is commonly related to concerns that internal OH services are not confidential and accessing them may have negative repercussions (e.g. reducing chances of promotion). No studies were found that addressed this issue specifically. Other programmes to increase the uptake of mental health counselling by using non-OH pathways is being trialled, but have yet to produce published findings.[53]

While there are a number of police treatment centres, no studies were found that looked at programmes treating physical injuries specifically in the police context, although this is likely to be in part due to physical injuries being treated by OH professionals or external medical practitioners.[54]

The Blue Light Wellbeing Framework, developed by CoP, is a self-assessment tool that forces can use to help identify existing good practice for supporting wellbeing.[55]

3 Professional Development – frontline views and evidence on what works

In this section we consider the evidence around the professional development of officers and staff. Understanding and improving the way police forces support career development and skill acquisition of the policing front line was a primary aim of the FLR. There is no universally agreed definition of professional development in the police. For the purposes of this review, we include training or learning, of any format, aimed at improving, developing or refreshing skills and knowledge, of operational purposes, personal growth or lateral movement. It also includes the broader environment that promotes training, learning, and continuous professional and personal development.

There is evidence that frontline officers perceive aspects of professional development could be stronger. The Police Federation Survey of Detectives (2017) found over half (55%) of respondents were dissatisfied with training and Continuous Professional Development (CPD) opportunities.[56] Particular issues are known to exist around the under-use of Performance Development Reviews (PDRs), which are a major vehicle for identifying and supporting an individual's professional development. In accordance with Police Regulation 2003, all police officers and staff must have a PDR. However, completion of PDRs within forces is low. In 2017 HMICFRS found that only ten forces have completion rates above 80%, with the average figure being much lower. According to the 2017 Police Federation survey just over a quarter of participants did not have a PDR meeting in the most recent year. Around one in six HMICFRS force-level Legitimacy inspection reports (5 of 36 where mentioned) assessed that, in those forces, the front line did not value their local professional development processes. As part of these Legitimacy inspections, members of the police front line were asked about the PDR process. Factors perceived to weaken their effectiveness included unclear links to career progression and promotion, and managers inconsistently applying PDR policies.

This section will cover:

- the evidence on the effectiveness of the broader factors of supervisors and organisational tone have on professional development

- the effectiveness of different types of training

- evidence on training durability

Beyond questions on the effectiveness of professional development activity itself are issues related to identifying the development needs of an organisation and individual members of the workforce, although these issues are not considered in this literature review.

3.1 Creating a positive environment for professional development

It is helpful to review the evidence on the wider learning environment beyond 'formal training'. There are three general observations that can be made from the evidence found for this review on the wider learning environment. These cover:

- the role of line managers and organisational culture in promoting professional development

- embedding mechanisms to support professional development into routine practice

- the importance of informal training mechanisms

Several studies of police training have observed the important roles that both line managers, and organisational tone, have in changing and embedding attitudes and behaviour.[57] Owens et al (2018) studied US training to encourage 'procedurally just' encounters between the police and public. When line managers coached participant's behaviour, they found statistically significant changes to officer behaviour in interactions with the public.[58] Smaller, qualitative studies of police training outside the UK suggest a link between organisations that encourage training and development opportunities and achieving investigative outcomes.[59] Methodologically stronger studies from outside policing that measured the impact of training also find that factors beyond the training itself, such as organisational support for change, a commitment to implementing training, and individual-level factors such as participants' confidence in learning, are more strongly associated with changes in behaviour than test scores soon after training.[60] As such, these factors perhaps form some of the preconditions for training to be most effective.

In addition to the managers' and organisational attitudes to learning, other evidence points to best practice in embedding new behaviour into everyday working. A systematic review carried out in 2010 identified a number of discrete practices for changing behaviour, including guidelines and educational materials, reminders, audit/feedback, and conferences among others. Strong evidence, from the education and health sectors particularly, suggests that a mix of these approaches is likely to be the most effective strategy for securing behavioural change. This is especially the case when "active" approaches, such as peer to peer discussions, are used in conjunction.[61] Looking at different approaches individually:

- outreach visits from experts have been shown to work

- there is mixed but generally positive evidence on the use of reminders and separately, peer-led, small group education approaches

- there is strong evidence that passive dissemination such as a leaflet or poster campaign used as a stand-alone strategy is not effective.

Mechanisms for so called 'informal' professional development are generally considered to cover the wide range of activity outside formal training courses, including coaching, mentoring, feedback and reflective learning. Few studies have robustly assessed the effectiveness of 'informal' professional development within the police. A systematic review looking at the evidence on mentoring and coaching for social workers found both generally have positive effects on participant outcomes such as increased knowledge and self-confidence. However, the evidence base on organisational outcomes was not as developed.[62]

There is some evidence that these approaches are promising in enhancing development. One quantitative study of the Dutch police found positive associations between some informal learning practices and achieving learning outcomes. Mechanisms which have been found to be associated with the perception of achieving learning outcomes were: the opportunity for reflection and receiving feedback; having the opportunity to access information (such as audits or inspections, attending lectures, and participating in work groups); and coaching.[63] Other, less strong evidence suggests mentoring and coaching schemes assist in improving knowledge transfer and operational effectiveness.[64]

3.2   The organisational and behavioural impact of formal training programmes

Most of the robust evidence on professional development focuses narrowly on the effectiveness of individual training programmes. Kirkpatrick's commonly used typology of training interventions categorises four different 'levels' of evaluation outcomes. These range from evaluating an attendee's immediate reactions to training to longer term evaluation of organisational impact. Here we mainly concentrate on studies which demonstrate more engrained change. This includes 'level 3' evaluations which look at whether the new knowledge or skill translates into real world behaviour change, and 'level 4' evaluations that examine whether the behaviours or skills learned lead to a measurable change in organisational outcomes or efficiency. For example, fewer stop and searches following training leading to higher levels of public trust. [65]

In recent years, there appears to have been an increase, from a small base, in the number of robustly designed studies which have sought to detect behavioural and organisational change from police training. The majority of these evaluations are on 'in-service' training for officers when they are already in post.[66] Five robust studies were found that sought to measure the impact of formal police training on real-world behaviour or organisational outcomes. These studies cover a range of training mechanisms, but most are focused around police procedural justice (see Table 1). However, the diversity of training interventions and settings makes it hard to make simple generalisations. A further issue for accurately interpreting this evidence is studies are often measuring on multiple measures of which only some will show statistically significant effects. Of these five studies:

- Several found statistically significant effects in either observed behaviour or organisational outcomes (e.g. public satisfaction)

- The three studies on procedural justice found generally positive effects: two on organisational outcomes and the other on behaviour change[67]

- One study on stop and search and another on dealing with mental health crises – did not find evidence of any effect

More work is ongoing in this area, and a number of experimental studies (principally Randomised Control Trials) on the effects of police training are due to report soon.[68]

Table 1 – Summary of recent RCTs found measuring impact of training on real-world behaviour change or organisational outcomes.

Authors, year, location	Focus of training	Sample size	Impact on real-world behaviour	Impact on organisational outcomes	Summary of research
Antrobus *et al.,* 2019, Australia	**Procedural justice** (training intervention)	28 trainee officers receiving intervention	Significant improvement on behaviour (towards suspects only)	N/A	They found that trainee officers on average displayed high levels of procedurally-just behaviour (as assessed by their mentors) regardless of whether they had received extra training or not. Despite this, the training intervention significantly improved how procedurally-just conversations were held with suspects of crimes.

Authors, year, location	Focus of training	Sample size	Impact on real-world behaviour	Impact on organisational outcomes	Summary of research
Owens *et al.*, 2018, US	**Procedural justice** (supervisor intervention)	221 officers receiving the intervention	N/A	Significant improvement on outcomes	A study in the US looked at the effect that procedurally-just face-to-face conversations between supervisors and officers had on those officers interactions with the public. Supervisors encouraged officers to reflect and change habitual practices when dealing with the public using semi-structured, pre-scripted conversations. Officers in the six weeks following one of these conversations were significantly less likely to be involved with use-force incidents during an interaction or to resolve it with an arrest. There was no significant effect on the number of interactions an officer had with members of the public or changes in the number of allegations received. However, this is likely due to the high rarity of such events.

Authors, year, location	Focus of training	Sample size	Impact on real-world behaviour	Impact on organisational outcomes	Summary of research
Scantlebury *et al.,* 2017, UK	Contact with people with mental health problems (training intervention)	249 officers receiving the intervention	No significant change found	No significant change found	Compared to basic training, the study found no change in demand coming from mental health referrals in the three-month follow-up period.
Miller and Alexandrou, 2016, UK	Promote non-discriminatory use of stop and search (training intervention)	662 receiving intervention	No significant change found	No significant change found	Findings showed there was no demonstrable impact on the number or type of stop and searches conducted by attendees once back into normal service, despite attendees showing increases in knowledge immediately after training (with some increases enduring until the three-month follow-up period) (Miller & Alexandrou, 2016). The authors suggest that future training could engage line managers more to try and entrench learning outcomes, as well as benefit from specific improvements on the training package such as unambiguous statements on the purpose of

Authors, year, location	Focus of training	Sample size	Impact on real-world behaviour	Impact on organisational outcomes	Summary of research
					the training.
Wheller *et al*, 2013, UK	**Procedural justice** (training intervention)	360 allocated to intervention (276 received intervention)	N/A	Some significant improvement on outcomes	Using an existing victim satisfaction survey, the analysis showed some promising effects on overall victim satisfaction in the three to nine months following training for those receiving the intervention.

3.2   Mode of training

Few studies were identified that have specifically examined different training formats in policing. Wheller et al (2013) for example, examined a variety of classroom teaching and scenario-based skills training. However, statistical comparison of the effectiveness of the different approaches relative to each other was not possible. One study that looked at police recruits at a US state training academy found those learning through role play as well as practice interviews were better able to demonstrate appropriate behaviours than those who underwent lectures only. However, there was no measurable difference in knowledge or opinions between the two methods of teaching.[69] This mirrors evidence from outside policing.

A systematic review looking at evidence from a range of settings from 2010 found strong evidence that training that is "integrated into routine practice" is more effective than classroom teaching alone at changing attitudes and behaviour.[70] This approach involves learning new skills through using real-world examples within the work setting, which are then followed up by practice and discussions.

The same review found strong evidence for the effectiveness of "collaborative continuous professional development". This is a set of processes involving bringing in external expertise, encouraging reflection, and an emphasis on peer support and processes that sustain learning over time.

A study that assessed knowledge in scenario testing at the end of training (rather than through real-world behaviour change) found that a combination of lectures and other mechanisms such as videos supported changes in attitudes more effectively than classroom-based teaching alone.[71]

In the field of surgical training, systematic reviews have found that training spread out over a longer period of time rather than in a single block led to participants retaining knowledge and skills for longer once training has finished. [72] However, evidence on what duration or variation worked best for different types of training was not found.

3.3   Durability of training

Most of the evidence on training interventions does not measure the extent to which training influences long term behaviours. One study that looked at the durability of training techniques for serious crime investigations found skills were still better than pre-training levels after six months, but these were not fully maintained when measured at ten months.[73] A systematic review of studies that focused on skill perishability specifically on training officers in the use of force highlighted broadly the same factors as an older, Canadian systematic review looking at a broader range of skills in a military context.[74] These found that 'skills decay' – the rate that specialist knowledge or skills are forgotten – varies. This highlights the potential benefit of refresher courses, activities to maintain skill sets, and embedding lessons learned from training in practice (see above).[75]

Both systematic reviews also found that skills that involve thinking, skills that require speed, or are continuous like tracking and problem solving are generally retained for longer than tasks with multiple, individual steps.

A number of promising mechanisms were identified that can reduce or mitigate skills decay from both literature reviews. These include:

- teaching over and above what is needed to be competent – "overlearning";

- making sure training is based in the work context or as similar a context as possible, using diverse examples and/ or simulations of real life situations;

- teaching the learner how to prevent, notice and act on skill loss

- providing feedback and coaching to participants during training.

The rate of skill decay for more procedural tasks can be reduced by organising them in a way that builds-in cues and feedback to indicate whether the step was done at the right time in the sequence. The authors of the Canadian military review also developed a mathematical tool that aims to quantify how often refresher training is needed, although it is unclear how accurate this tool has been in practice.

3.4 Example: the evidence on training for officers dealing with those suffering a mental health crisis

One relatively well-studied group of police training programmes are those aimed at increasing the knowledge and skills in dealing with members of the public with mental health crises. While different training interventions have widely different aims, they typically include encouraging the police to divert individuals to other service providers, reduce the numbers incarcerated, encourage better communication with other agencies, and / or reduce the overall demand on police services.

In the UK context, only one recent robust quantitative study was identified for this review (Scantlebury et al, 2017, as described in Table 1). Looking at the equivalent international evidence – principally from the US – most studies look at specialist training for the crisis intervention team (CIT) model. This typically involves around 40 hours of training delivered by health professionals to officers to develop their engagement skills with people in distress, as well as building links between police and dedicated health facilities and triage. Several less methodologically robust studies suggest CIT training may result in changes to the behaviour of officers[76] and improves links across organisations.[77] However, a meta-analysis of longer term organisational outcomes failed to find statistically significant effects on, for example, arrest rates.[78]

As with other evidence, evaluations of training programmes in different national contexts may not always be transferrable to the UK.[79] A recent systematic review of the evidence on mental health diversion interventions conducted for the College of Policing concludes that there is "limited theoretical or empirical analysis of *why* or *how* they work".[80]

4   Change and Innovation – frontline views and the evidence on what works

In this section we review the evidence on what works for encouraging change and innovation within police forces. A primary aim of the FLR was to ensure policing practice is informed using innovative ideas from the front line, and that change continues to drive progress across the policing sector. There are not generally standard definitions of 'change' and 'innovation' in the academic literature. For the purposes of this report we distinguish between change and innovation as follows, although there are overlaps between the two:

- **Changes** are 'top-down' alterations implemented from senior ranks to the substance or method of an organisational process, or the management, implementation and adoption of these alterations.

- **Innovation** refers to the 'bottom-up' processes of individuals on the front line identifying and acting to solve issues or challenges. This might involve developing or trialling an innovation at a local level which changes an existing process or technology.

Both "change" and "innovation" refer to the related evaluation and dissemination of good practice, and the broader environment that promotes and supports them. [81] Table 2 summarises these definitions.[82]

Table 2 – summary of levels and stages of change and innovation

Direction		Level		
		Front line	**Leaders**	**Organisational/ macro factors**
Innovation 'Bottom-up'	Activity	• Identifying issues or challenges • Generating new ideas	• Selection, testing and scaling of an innovation • Encouragement of innovative practice	• Organisation disseminates what works to others
	Positive outcomes driven by	• Organisational factors • Individual factors • Leadership style	• Use of appropriate process and procedure	• Contacting or building networks to other police forces
Change 'Top-down'	Activity	• Using new technology, following new process • Restructuring	• Implementation of an innovation • Evaluation and monitoring	• Organisation external factors impacts on their ability to take on changes
	Positive outcomes driven by	• Frontline perception of need for change • Frontline perception of being consulted	• Police leaders ensuring the change fits with the organisation	• Funding

There is evidence that frontline officers have generally negative perceptions of the way police forces manage change. Mind's Blue Light Scoping Survey (2015) found that police officers most frequently cited organisational upheaval as having the biggest impact on their mental health. In the Police Federation Pay and Morale survey (2017), eight out of ten respondents indicated that how change is managed in the police has a negative impact on their morale. The surveys both suggest that the reasons respondents felt change is not managed well may be linked to a lack of communication about why a change is happening, and feelings of not being adequately consulted. A survey of police staff carried out by Unison for the FLR found that over 70% of respondents felt their views were not taken into account when their force was proposing operational changes (with around 10% saying they felt the opposite, and the remainder – just under 20% – not knowing).[83]

Views on the impact of workforce-led innovations are less commonly captured. HMICFRS LIRs suggest that most forces use some form of staff survey to gather frontline views, while at least one in five have used "100 little things" or similar initiatives to gather ideas from the front line. HMICFRS and Police and Crime Commissioner (PCC) reports highlight that issues and ideas raised through these forums do result in some action.[84] Whether the methods used are effective is also poorly captured in the available evidence.

The chapter will look at factors that appear to influence the adoption of top-down change and bottom-up innovation within the police, looking specifically at:

- Frontline factors

- Leadership factors

- Macro-level factors

4.1 Understanding the change and innovation literature

There are several barriers to drawing firm conclusions from the academic literature on change and innovation in policing. One of these is simply the very limited volume of research that examines the *process* of innovation in the police, or the extent to which wider organisational change is successfully delivered. The evidence from within the UK policing context is particularly sparse. Where appropriate we have sought to draw upon the wider evidence from similar public-sector professions such as health service providers.

While processes and policies to support the development of an idea have been studied, the spontaneous or organic nature of an idea occurring to an individual makes this aspect of innovation particularly difficult to study. As such, academic evaluations tend to focus on the implementation of a specific change from initial idea through development and implementation.[85]

Questions on the effectiveness of the implementation of wider organisational change have in some instances been captured through process evaluations. However, very few studies considered the effects on objectively measured outcomes (impact evaluations). For example, organisational outcomes such as workforce wellbeing or how the front line perceive the implementation are rarely collected. While these are often not looked at for practical reasons, it makes it difficult to draw firm conclusions from these studies. Where possible we have drawn from these evaluations,[86] but further evidence could at some point be drawn from a more rigorous review of these studies.

4.2 Frontline workforce factors

4.2.1 Facilitating the generation of ideas from the front line

The international research literature that has been identified suggests that there are a few individual-level factors that influence the generation of ideas from the public-sector workforce. A commonly observed trait of those who promote innovation is simply acting proactively and taking ownership of innovation.[87] A US study of a third sector organisation explored which workforce factors most encouraged employees to voice their ideas. They found that those with more proactive personalities – the extent to which an individual wants to continually improve processes – and access to resources – such as equipment, space, facilities, time or funding – and more senior employees in the organisation, felt more responsible for innovation.

Proactive behaviour by individuals can be encouraged – it's not necessarily a fixed characteristic. A study that looked at a range of European countries and organisation types suggests that employees that feel more supported and engaged by their organisation also have higher levels of proactive behaviour (see below).[88]

Support from more senior workers (normally line-managers) has also been found to be important in encouraging innovation. A wide-ranging study on nurses across multiple hospitals in the US looked at the way they handled situations where something hinders or obstructs their ability to complete a task. The study found that rather than find longer-term innovative solutions,

nurses would generally use one-time 'work-arounds'.[89] The authors suggest that one reason for this was that health sector employees were expected to resolve crises without managerial assistance. This, coupled with high workloads, discouraged individuals investing time in finding longer-term solutions.

From this rather limited evidence base it can be inferred that encouraging innovation in the workforce *can* take place *if* the necessary resources and space are provided, and if staff are encouraged to generate and voice their ideas.

4.2.2   Seeking workforce views and managing expectations of change

Within the policing field, evaluations of top-down change programmes have found that failure to actively consult and seek the frontline's views of the process is a feature of successful implementations. Actively consulting with the workforce can build buy-in from the front line and appears to increase the chances of success. A wide-ranging review on the implementation of technology in US police forces found that in some areas, police officers were not 'sold' the benefits of a change. In these forces the police officers therefore didn't embrace the change, which contributed to it not having its intended impact.[90] A Norwegian study showed a similar picture: when the police tried implementing an 'Evidence-Based Policing' model, some frontline officers perceived the move to indicate mistrust in their judgement which proved a barrier to change.[91] Using regular consultation to establish a dialogue with the front line is one way of building a feedback loop, and allows initiatives to be improved.[92] A study of organisational change in Scotland found police officers felt the changes were implemented too quickly and without considering the consequences for those on the front line. And although some understood the need for change, they felt unable to implement elements of the reform due to having limited staffing levels.[93]

No studies were found from within the policing context that sought to examine which factors encourage workforce engagement with suggestion schemes. A systematic review of literature from beyond policing suggest that those motivated by job satisfaction or interest in a role, are more likely to engage with suggestion schemes than those motivated by 'extrinsic' factors such as seeking prestige, job security or pay.[94]

4.3 Leadership factors

This section looks at the ways in which different leadership styles can engender a pro-innovation culture. Leadership style is generally considered a key element to help foster and encourage innovation, although only a handful of studies have attempted to measure it empirically. The academic literature uses a variety of ways to assess leadership style. Two frequently used in the literature on innovative behaviour are 'transformational' and 'transactional' styles. Transformational leadership is a style that typically encourages employees to rise above their self-interest and perform better. Transactional leadership styles focus more on in-role performance than stimulation of novel activities. The two styles of leadership are often contrasted against each other, although they are not mutually exclusive and leaders can demonstrate both styles in different situations.[95]

4.3.1   Encouraging a culture of innovation

The limited evidence identified suggests that transformational leadership styles can be better at supporting innovative behaviour. A Dutch study of government agency employees found the presence of transformational leadership traits in line managers was more likely to foster innovative behaviour in their staff, but only for those who felt confident in doing their job.[96] A

transformational leader is one who, for example, is perceived to articulate a compelling vision for the future or spend time investing in teaching staff. In contrast, even 'empowered employees' were less innovative the more they perceived their leaders to demonstrate transactional leadership styles. Employees who did not feel empowered were found not to be influenced by leadership style.

4.3.2   Managing change

Senior leaders clearly can impact the way in which top down change embeds within an organisation. However, the effect of leadership is hard to assess due to the wide variety of factors at play when a top down change is introduced. The small number of studies that have looked at this area tend to find that the impact of senior leaders on the implementation of change is mixed.

A mixed methods study of policing in New Zealand looked at factors associated with the either a very strong or very weak uptake of Intelligence-Led policing in local areas.[97] Those areas that had a weak uptake had much lower levels of perceived transformational leadership at both the senior and/ or middle-management ranks.

Strong communication of vision has been identified as a central part of transformational leadership approaches. And while senior leaders giving clear messages about change is important, research evidence suggests that this is a condition rather than a guarantee of successful change. A US study looked at a set of new organisational processes across three police forces -including better use of data, more accountable leadership, and clear messages from senior leaders. This found that, paradoxically, the organisation with clearest objectives set by senior leaders had lowest support from frontline officers.[98] Although an unexpected finding, the authors suggest that this was due to a perceived shift away from more delegated decision making already used within the force, not the clarity of the message itself. Taken together, these two studies suggest the importance of clear and consistent messaging within a transformational leadership style.

4.4   Macro factors

US studies on community policing particularly have examined factors at the national or organisational level that may influence the adoption of a 'top down' change. Factors that have been examined include the extent to which a force learns from others' best practice,[99] the demographic make-up of the force and the local area,[100] the wider political context,[101] and the effect of targeted financial support for adopting new practices.[102] However, this research does not appear methodologically strong for a range of reasons, such as being unable to test or account for the large number of likely relevant factors.

5   Leadership – frontline views and the evidence on what works

In this section we consider the evidence on leadership of police officers, staff and PCSOs. While there are a broad range of definitions of leadership, we use one similar to that generally used in the academic evidence from within policing which focuses on the behaviours and attributes of those who formally lead others. This can be both senior leaders, and 'first' line managers. Quantitative findings from a methodologically strong set of studies on the effectiveness and impact of different leadership styles are covered in an accompanying FLR annex.[103]

There is evidence that frontline officers and staff perceive aspects of leadership could be stronger. The Police Federation Pay and Morale survey (2017) found that while around two-thirds of respondents were satisfied with their treatment by their line manager, one third were satisfied with their treatment by 'senior' managers.[104] These findings vary by rank and by length in service,[105] with constables less satisfied on average than sergeants or inspectors, and those with less than six years' service generally less satisfied than officers who had been with the police for longer. Other evidence sources also show senior leaders are generally viewed as out of touch with street level policing by members of the federated ranks, although a minority of these ranks feel senior officers are generally supportive.[106] A survey of police staff carried out by Unison for the FLR found that over 70% of respondents felt their line manager or supervisor supported their wellbeing, with a similar proportion saying they would contact their line manager in the event of a wellbeing problem at work.[107]

This section will cover

- What characteristics the frontline view as making good police leaders and how this varies by officer rank;

- the evidence on 'what works' in leadership development programmes and how they are viewed by the front line

- The role that leaders directly have in professional development, wellbeing, and change and innovation, are covered in previous sections

5.1   Characteristics of effective leaders and line-managers

There is a general consensus that first line managers – a leader directly responsible for allocating work responsibilities to an officer or staff member – have a strong, direct influence on the experience their subordinates have of work.[108] There is also evidence that leaders directly above first line managers in the organisational hierarchy have an impact on officers through a 'trickle down' effect through first line managers.[109]

Looking across all ranks, there are some characteristics that are considered important for leaders to have. A systematic review of police leadership studies summarises these as seven characteristics that are regularly attributed to effective leaders, summarised in Table 3. These include being, and being seen to be, trustworthy, a role model, and a good decision maker.[110]

While these general characteristics apply to all ranks to some degree, several studies suggest that different ranks perceive good leadership differently. At lower ranks, desirable leadership characteristics focus more on leaders having an operational focus – e.g. leaders being able to assign specific tasks. For officers in chief inspector and superintendent ranks ('middle management ranks') characteristics around being able to manage change and encourage creativity and innovation are more frequently described as desirable.

Table 3 – Characteristics of effective leadership

Effective leadership characteristic	Description
Being **ethical**	Demonstrating honesty and integrity
Being **trustworthy**	Generating a sense of trust within the police organisation and between the organisation and the public
Being **legitimate**	Having legitimacy in the eyes of their staff – police officers want senior leaders to be 'good coppers'
Acting as a **role model**	Leading by example
Communication	Effective communication with subordinates, and across and beyond the organisation
Being **decision makers**	Decisions being made (in a way that incorporates the views of subordinates) that lead to police work getting done
Having developed **thinking ability**	Leaders having critical, strategic and creative thinking modes

Adapted from Pearson-Goff and Herrington, 2013

Beyond qualitative questions of which characteristics are thought of as desirable are quantitative questions on which of these characteristics drive measurable improvements to organisational outcomes. These questions are generally not answered in the published literature. This is most likely because of practical difficulties in measuring and evaluating the impact of leadership styles in any organisational setting, with multiple compounding factors needing to be controlled for over a long period of time.

Despite these difficulties, there are some studies that have looked at measuring leadership styles of line managers in the police by statistically examining the relationship between their behaviour and organisational outcomes – such as officer wellbeing and team performance.[111] While small, these studies suggest a range of characteristics which may promote positive organisational outcomes. These include a line manager's perceived fairness, honesty, and charisma; giving the workforce feelings of empowerment; and appropriate deployment of transactional and transformational leadership techniques in achieving positive organisational outcomes.

5.2   Leadership and management development programmes

This section covers the evidence on What Works in leadership programmes for the police front line. The evidence from across the four pillars of the FLR indicate the crucial importance of

leaders, particularly first line managers, in improving outcomes of frontline wellbeing, supporting effective professional development and encouraging an environment of change and innovation. It can be inferred from this that developing and training leaders is potentially important.

There are a range of national leadership development programmes (LDPs):

- Police Now, a two-year university graduate scheme

- Fast Track, a two-year scheme that gives accelerated promotion for existing constables

- Direct Entry, a route for non-police candidates to join at a rank higher than constable

- The Strategic Command Course, available to officers and staff at superintending ranks or equivalent, this course is mandatory for those seeking promotion to chief constable ranks

As well as these and other national schemes,[112] forces run LDPs in-house.[113] HMICFRS inspections found that these schemes are varied, and can include elements such as psychometric testing, coaching, mentoring, or dedicated time for self-directed study.

There is some evidence that frontline officers generally felt participants coming through the Direct Entry scheme would not have enough experience of being in the police to make appropriate decisions, or to garner the respect of lower ranks.[114] It is not clear if these officers had any direct experience of graduates of the scheme, but this perception is in keeping with the broader evidence on frontline officers wanting operational experience from their leaders. HMICFRS Legitimacy inspections asked officers and staff for their views of force-run LDPs. Negative views expressed included the narrow focus that some schemes had, such as a focus on promotion, rather than broader development needs. There was also a perception that entry was limited e.g. because of unclear advertising or apparent favouritism from line managers. Positive views on force-run LDPS were also mentioned by some inspection reports. These included professional development support given – in the form of CPD, study leave, mock interviews – and that the schemes were easily available to police staff and officers.

An evaluation of the Police Now scheme (the only LDP evaluated) sought the views of those participating in the scheme. Participants generally felt the training was good, although also felt it could improve by being less intensive as well as including more practical experience on policing skills.[115] Some participants also felt there was some stigma against those on the scheme from existing police officers, as it was felt they believed the scheme led to participants being rapidly promoted to positions away from the front line. At the time of writing, an evaluation of the Direct Entry scheme is expected to be published later in 2019.

The best evidence on what works for LDPs we found comes from a systematic review and meta-analysis of leadership training programmes which looks across evidence from multiple occupations, rather than the policing context specifically.[116] A number of factors were shown to positively influence the potential effectiveness of LDPs, including:

- conducting a 'needs analysis' – the process of identifying training needs and tailoring the LDP accordingly – as well as getting course content evaluated by academics and practitioners

- spacing training sessions out rather than delivery in a single block

- training delivered in person rather than online

- including feedback from either trainers or subordinates as part of the LDP

In contrast to older evidence, they found no difference in outcomes between LDPs aimed at

leaders at different points in the hierarchy of an organisation.

An older, policing-focussed systematic review by the NPIA[117] found LDPs appear to work best when they:

- are embedded within normal ways of working

- bring together a range of learning methods, include self-reflection, '360 feedback', and learning from peers

6   Concluding remarks

It is encouraging that both the quantity and quality of studies in scope of the FLR appears to have increased in recent years. Although the evidence base is still slim in some areas and gaps remain, there is a picture starting to emerge of the types of interventions that are most effective in improving the wellbeing and experience of those on the front line. In particular; studies on professional development are increasingly examining the long-term outcomes that interventions can have. Looking at studies outside of the policing context also indicates there are valuable lessons to be learnt from experience in other sectors. While there are broad lessons we can learn from the research base, there also appear to be areas where the evidence is less developed. For example:

- Understanding the views and contributions to the work of frontline policing of PCSOs and police staff

- How to target refresher training on knowledge and skills for the front line

- How to best engage and effectively treat officers and staff following a potentially traumatising experience

- How to best encourage long lasting effective innovation

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Annex A Summary of research methodologies of staff association and charity surveys

Survey	Response size	Response rate	Author independent of police?	Representative sample?	Wide survey distribution?	Overall assessment
Police Superintendents Association – Personal Resilience Survey 2016*	908	75%	✔ (but responses used for lobbying)	✔	✔ (email to all)	Good (but survey limited to superintendents)
Mind – Blue Light Scoping Survey 2015	1,194 (police officers and staff) 3,627 (all emergency services)	N/K	✔	✘	✘	OK
Police Federation – Demand, Capacity and Welfare 2016	16,841	17%	✘	✘	✘	Poor
Police Federation – Pay and Morale Survey 2017**	30,557	25%	✘	✘	✘	Poor
Police Federation – National Detectives Survey 2017***	7,803	N/K (no official no. of detectives)	✘	N/K	✔	OK

| Survey	Response size	Response rate	Author independent of police?	Representative sample?	Wide survey distribution?	Overall assessment
Unison – Frontline Review Survey of Unison Police Staff Members 2019	4,500	7%	✓	✗	✗	Poor

*   Donaldson-Feilder and Godfree, 2017.

**   Boag-Munroe, 2017a.

***   Boag-Munroe, 2017b.

Annex B Comparing the wellbeing of the front line of policing with other professions using national measures

National surveys allow comparison of aspects of wellbeing between the police frontline and other professions. While these surveys have limitations – for example, they don't capture all aspects of wellbeing and only use quite broad categories of employment – they are still helpful in understanding the extent and scale of issues faced in policing.

From surveys that measure self-reported experience of wellbeing, on average the police front line has similar rates of stress, depression and anxiety when compared to other occupations. For example, one survey found anxiety in police officers to be lower than the average of other professions, while PCSOs and police staff are similar to the average of other professions (Figure B1). The feelings the police front line have of doing worthwhile things with their life are also similar to other professions.

mean of all professions: 2.9
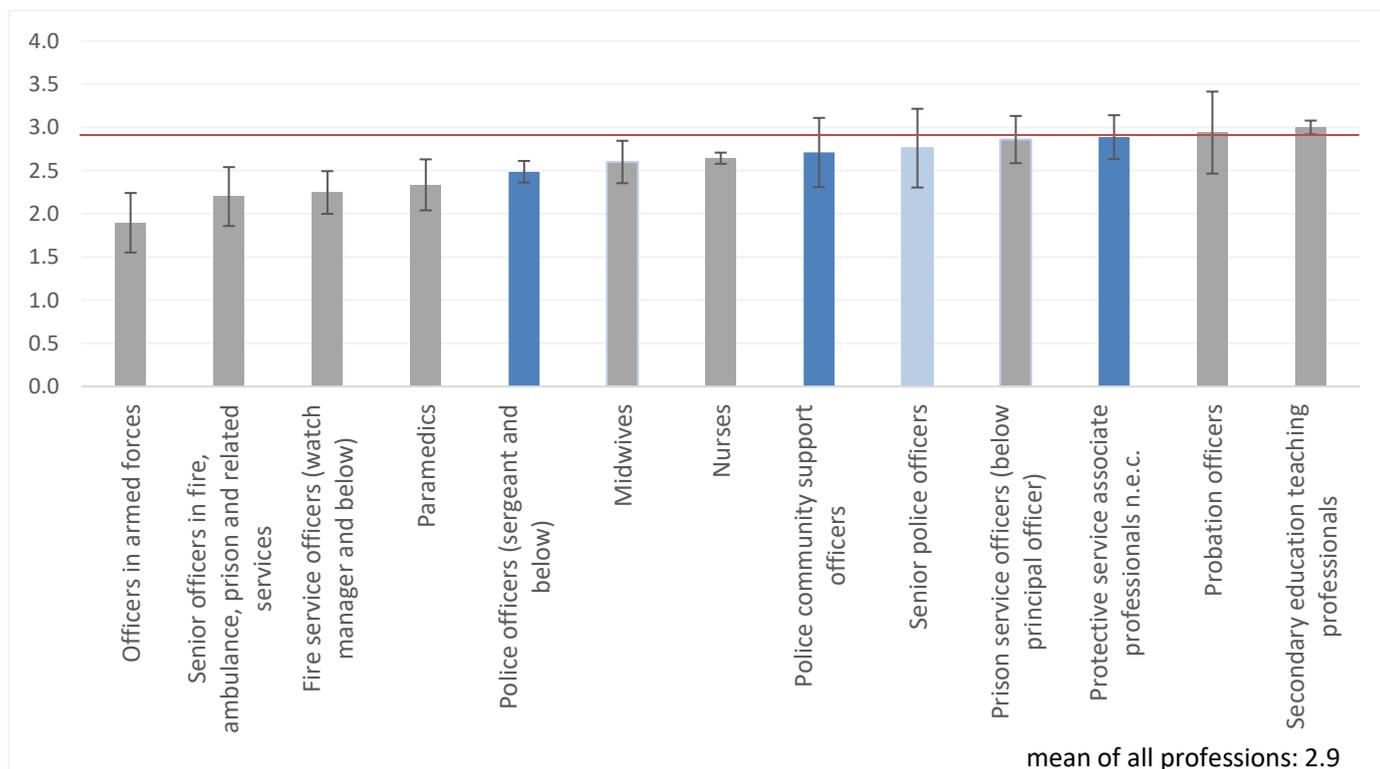
Figure B1 – Average response to "How anxious did you feel yesterday?" (0 =not at all anxious). Selected professions, 2012–2015, UK.

ONS Annual Population Survey. Original analysis from the Wellbeing What Works Centre.

Police staff are not categorised in a single way within the Standard Occupational classification. "Protective service associate professionals n.e.c." category includes police staff in frontline roles, but also a variety of other support and civilian functions such as custom control officers at airports. Police service administrative functions are also recorded under SOC code "Local Government Administrative Occupations", but it is likely these less well reflect those police staff on the front line.

In contrast, self-reported physical assaults at work for protective services (which includes the police front line, but also members of the armed forces) are higher than other occupations (Figure B2).


mean of all occupations: 1.2
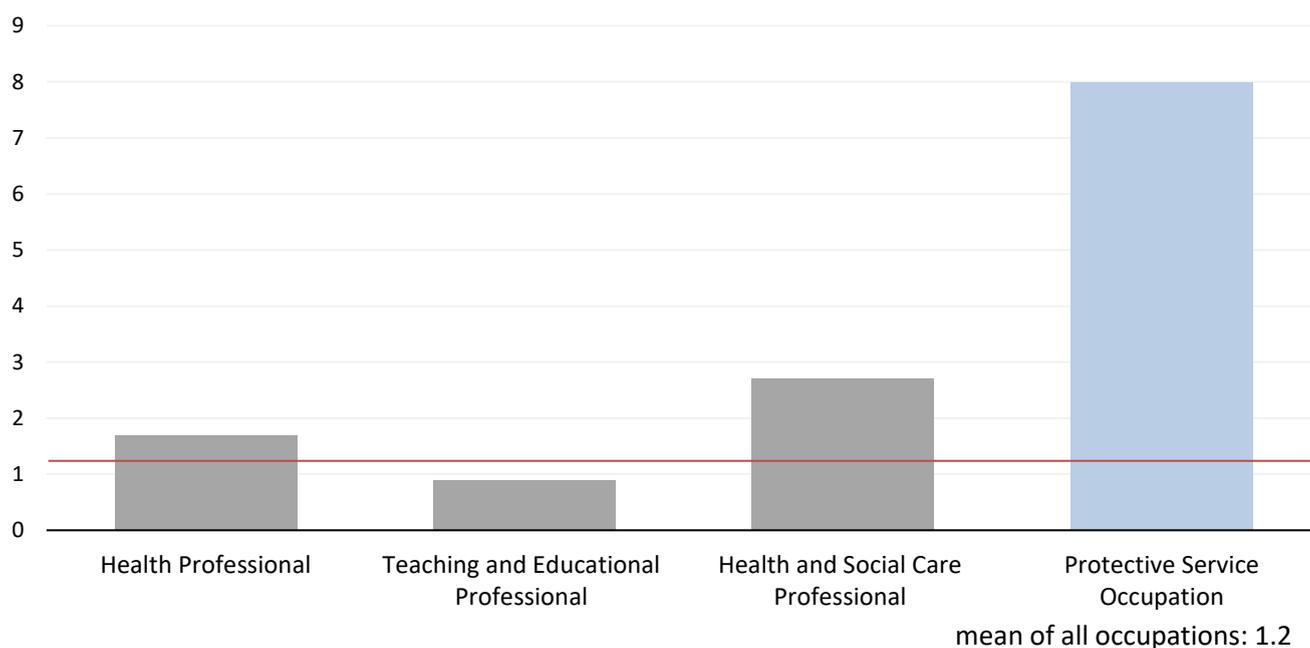
Figure B2 – Percentages of adults in working age employment at risk of assault, (% a victim once or more). Selected occupations, years ending March 2015 and 2016, UK.

ONS CSEW. Original analysis from the Health and Safety Executive. Confidence intervals could not be calculated from published data sources.

Protective Service Occupations could not be disaggregated further. This group of occupations also includes less senior ranks in the army (around half of employees in this group), fire and rescue service officers. In total, Sergeants, Constables, PCSOs, and frontline police staff constitute around a quarter of this group.

Measures that objectively capture aspects of wellbeing (days lost to sickness, medical/ ill-health retirement, suicide rates) show the police workforce in general are less at risk than some other public-sector professions (such as paramedics and secondary school teachers), but in line with somewhat similar professions (such as Fire and Rescue officers). For example, the likelihood of suicide for currently-employed, male members of the police front line is not obviously different to the national average of others in employment (Figure B3). While these measures allow for comparison across different professions, they do not capture the entirety of the wellbeing experience (e.g. suicide rates do not capture those who have retired; days lost to sickness do not account for the practices of presenteeism and/or leaveism.[118]
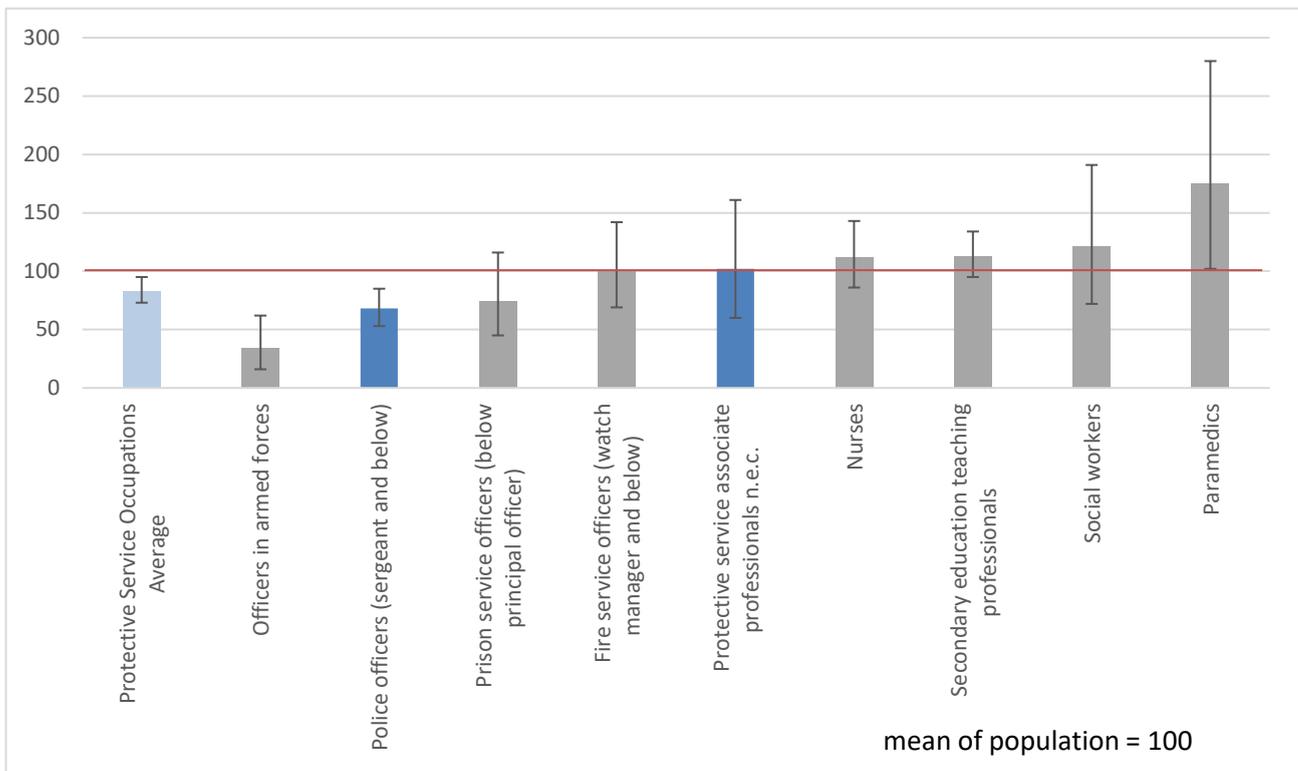
Figure B3 – Standardised mortality ratio of suicide, by occupation. Selected professions, 2011–2015, England.

ONS. The Standardised Mortality Ratio compares the risk of suicide in a given occupation to the risk of suicide in the broader population of England. If the confidence intervals do not overlap 100, then we can state with 95% certainty that the profession has higher/ lower SMR than the entire male England population.

The low volume of suicides in some profession groups (including the group that covers police

Comparisons between those in employment and the general population are made more complicated by the "healthy worker" effect, but comparisons to other professions are helpful.

1 ONS, 2019; HO, 2019; Graham et al., 2019; Knight, 2019

2 HMIC, 2011.

3 These include the Police Federation of England and Wales, the Police Dependants' Trust, UNISON, etc

4 This means that the reports were reviewed for key themes (or 'codes') and then the content of each report was recorded.

5 The police wellbeing goal 2021; CoP Blue Light Wellbeing Framework. Other definitions of wellbeing are wide-ranging and include, variously, aspects of environment, education, organisation governance, skills, family life, pay and economy. For examples, see ONS Measures of Wellbeing, What Works Centre for Wellbeing.

6 For example, CoP 2017.

7 Randall and Buys, 2013; Stinchcombe, 2004.

8 Houdmont et al, 2012.

9 Graham et al, 2019. See also, Abdollahi, 2002.

10 Turgoose et al, 2017. 'Burnout' has been defined as a disruption of the normal "cognitive-emotional-environmental" balance (Melunsky, 2016).

11 Public Health England, 2016.

12 Houdmont and Randall, 2016; Miller et al, 2017. Further, an individual's capacity to recover may also be affected by PTSD. While no UK-based studies were found, a US study of police officers found those in roles perceived as relatively more stressful tend to resort to less effective coping strategies - such as substance abuse - rather than adopting approaches such as seeking counselling (Seigfried-Spellar, 2018).

13 Taylor, 2017.

14 Brunetto et al, 2012; Melunsky, 2016; Hansson et al, 2017.

15 De Jonge et al, 2000; Bryson et al, 2014; ONS, 2015.

16 PRRB, 2017.

17 HMICFRS, 2017; Journal of Organisational Effectiveness: People and Performance, Unpublished; Houdmont and Randall, 2016; Taylor, 2017.

18 Korre et al, 2014.

19 Hesketh, 2015. https://www.justiceinspectorates.gov.uk/hmicfrs/police-forces/

20 Research was not found that statistically identifies which factors drive a role being 'stressful' across the entire policing workforce. See Hurrell, 2018, Spence and Millott, 2016.

21 Donaldson-Feilder and Godfree, 2017; Police Federation, 2016

22 Unless specifically stated otherwise, references to findings from HMICFRS Legitimacy inspection reports are based on the thematic analysis on individual force-level reports conducted by HOAI (see methodology section for details).

23 Police Federation, 2016.

24 HMICFRS legitimacy inspection national report, 2017.

25 Police Dependents Trust survey, 2016.

26 Spence and Millott, 2016.

27 Randall and Buys, 2013.

28 LaMontagne, 2017.

29 Patterson et al, 2014. The study only looked at studies that were robust, finding 12 robust studies of interventions between 1984 and 2008. None of these looked at organisational programmes to reduce stress. Patterson et al is similar in scope to an older systematic review, Peñalba et al, 2008.

30 Quinton et al, 2015; Roberts and Herrington, 2013.

31 Mazzerolle et al, 2013.

32 Roberts and Herrington, 2013. A large Australian study found that factors including job demands, job control and social support may explain almost all of the variation between the wellbeing of different officers, including the use of organisational justice by immediate line managers and senior managers within their model (Noblet et al, 2009). However, organisational justice as defined in this report includes elements of social support and job control, so these findings may not be entirely applicable.

33 Porter et al, 2015.

34 MacMillan et al, 2017.

35 Lassen et al, 2018.

36 Anshel and Umsheid, 2013. No evidence was found on trying to prevent or reduce physical injury from occurring in the first instance by, for example, giving more de-escalation technique training. Physical injury will likely always - of necessity – be a risk for those in frontline roles.

37 Bambra et al, 2008.

38 Level two or three on the Maryland Scale.

39 Harrington, 2001.

40 Chiesa and Serretti, 2009.

41 For examples, Shapiro et al, 2005; Querstret et al, 2017.

42 Christopher et al, 2016.

43 Hesketh and Cooper, 2018.

44 Spence and Millot, 2016.

45 Guo and DiPietro, 2010.

46 Pomaki et al, 2011.

47 Hahn et al, 2011.

48 Wild, 2016.

49 Spence and Millott, 2016.

50 Walsh et al, 2012.

51 Whybrow, 2015.

52 Richins et al, 2019.

53 For example Van der Meer (2017) trials a mobile app that has the potential to diagnose officers for PTSD symptoms and recommend the pursuit of follow up professional treatment in a confidential way.

54 There have been recent calls for the NHS to develop specialised pathways for dealing with the specific needs of the police frontline workforce, mirroring existing work for those in the army.

55 College of Policing, 2017.

56 Boag-Munroe, 2017.

57 see Cronin et al, 2017, Ingram, 2013.

58 Owens et al, 2018.

59 For example, Lone et al, 2017.

60 Warr et al, 1999. See also Doornbos et al, 2008.

61 Wheller and Morris, 2010.

62 HSCB, 2014.

63 Janssens et al, 2017.

64 Tyler and Mckenzie, 2011; Jones, 2018.

65 Tamkin et al, 2002. Robust evidence on professional development would involve the use of a comparison group, evaluation to level 3 or 4 of Kirkpatrick's 1959 typology as described above, and the recording and controlling for organisational and individual factors, following up several times at intervals between intervention and recording. There is mixed evidence on the association between these levels of evaluation (Warr et al, 1999; Salas and Cannon-Bowers, 2001; Lacerenza et al, 2017). This means that we can't conclude that e.g. organisational outcomes will necessarily follow from increased knowledge following a training course.

Several studies were found that look at a specific training programmes/ intervention (level 2 of the Kirkpatrick's typology above). For example, Patterson (2004) studied a training programme for improving attitudes and skills with interviewing victims of child abuse using a RCT. They found that the training had a significant, although relatively modest impact on the knowledge of officers. Other studies found were typically methodologically quite weak and therefore have little generalisable content for this review (for example, Cederborg et al, 2013). Attempts to look systematically or comparatively between evaluations at level 2 were not found.

One study was found that looked comparatively at police trainee views of different training programmes (or level 1 of Kirkpatrick's typology) (Traut et al, 2000). This study also controlled for some officer and organisational characteristics, although only training programmes provided by a state training academy were analysed, which may be systemically different to force-led training. The most significant predictor of officer approval was the size of the agency they worked for, which implies this study has limited applicability to the UK context (where forces are generally quite similar in size).

66 Only one study (Orr et al, 2016) was found that compared training programmes on police recruits. At the time of writing The Job, The Life collaboration are looking at the effectiveness of wellbeing training on new recruits over a long follow-up period.

67 Owens et al, 2018, Antrobus et al, 2019, Wheller et al, 2013.

68 CoP research map can be found here. One methodological challenge for robust evaluations is, typically, the relatively small numbers of participants involved in studies. The statistical power or any evaluation is likely to be constrained by the relatively small number of participants.

69 Lonsway et al, 2001.

70 Kodz and Campbell, 2011, (carried out for the Neyroud review of police leadership and training, Neyroud, 2013)

71 Lonsway et al, 2001. Hansson and Markstrom (2014) found similar findings about the relative effectiveness of lectures only, compared to lectures and other methods; however, their study only measured the attitudes of police recruits 6 months on from the intervention, rather than actual behaviours. See also, Fielding 2018.

72 Cecilio-Fernandes et al, 2018.

73 Griffiths, 2008.

74 Angel et al, 2012. Bryant and Angel, 2000.

75 Bond (2007) and Bond et al (2008) both suggest accreditation (a combination of training and experience) strongly predicts achieving positive organisational outcomes (e.g. accredited crime scene examiners are more proficient at getting viable DNA samples than those not accredited); however, these studies do not control for any other factors, or give wider details. The wider evidence on accreditation is covered in more detail in CoP plans for the PEQF.

76 For example Hanafi et al, 2008.

77 Shapiro et al, 2015.

78 Taheri, 2016.

79 Vigurs and Quy, 2017.

80 Schucan Bird et al, 2017.

81 King, 2000.

82 Wolfe, 1994; Meijer, 2010. For examples, Tucker and Edmondson, 2003; Fuller et al, 2006; Nederveen Pieterse et al, 2009; Burrass and Giblin, 2010; Koper et al, 2014; Willis et al, 2007; Helms and Gutierrez, 2007.

83 Unison, 2019.

84 For example, Police and Crime Panel Durham, 2018; Office of the Police and Crime Commissioner, Gloucestershire, 2018.

85 Crossan and Apaydin, 2010; Wolf, 1994.

86 For example: Giacomantonio et al, 2016; Koper et al, 2014; Yesberg et al, 2016.

87 Fuller et al, 2006.

88 Salanova and Schaufeli, 2008; Ohly and Fritz, 2010.

89 Tucker and Edmondson, 2003.

90 Koper et al, 2014.

91 Gundhus, 2013.

92 See wider literature, e.g. Gagne et al, 2000; Lynch et al, 2005.

93 Hail, 2016.

94 Lasrado et al, 2016; Dave et al, 2011.

95 Nederveen Pieterse et al, 2009.

96 Ibid.

97 Darroch and Mazerolle, 2012.

98 Willis et al, 2007.

99 Burras and Giblin, 2014. Other, less methodologically strong research failed to find an effect between contacts between forces and the uptake of innovative ideas consistently across a variety of types of innovation (Roberts, 2009).

100 Morabito, 2008; Burrass and Giblin, 2014. Work on other types of innovation would strengthen this link. Helms and Gutierrez, 2007.

101 Morabito, 2008.

102 Zhao, Scheider and Thurman, 2002; Helms and Gutierrez, 2007; Burrass and Giblin, 2010.

103 Graham et al, 2019.

104 Boag-Munroe, 2017a, available here. The survey does not qualify which ranks constitute senior managers or ranks.

105 The survey is not broken down by gender, sexuality or ethnic background.

106 Hoggett et al, 2018. There was little evidence found on the views of the frontline on middle management ranks (i.e. superintending ranks). Chief Inspectors who responded to the Police Federation pay and morale survey (2017) showed a similar level of satisfaction with their immediate line manager to other ranks and their line manager. But this does not provide good evidence on the views of the majority of the frontline on middle management within policing, given that the number of ranks between leader and reports may have an impact on the views held.

107 Unison, 2019.

108 Porter and Presnzler (CoP), 2015.

109 Park and Hassan, 2018.

110 Pearson-Goff and Herrington, 2013.

111 Can et al, 2017; Schaveling et al, 2017; Russell, 2014.

112 College of Policing "Leadership Development Choices" website

113 HMICFRS, 2017, available here.

114 Hoggett et al, 2018.

115 Yesberg et al, 2016.

116 Lacerenza et al, 2017.

117 Kodz and Campbell, 2010.

118 Hesketh, 2015.

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