

# **THE NEEDS OF EMERGENCY SERVICE PERSONNEL AND THEIR FAMILIES**

Angela Kail, Sally Bagwell

---

2014

# CONTENTS

---

## 1

Survey profile 04

---

## 2

Needs information 08

---

## 3

Prioritisation and provision 10

---

## 4

Feedback about distribution 17

---

# INTRODUCTION



In the Autumn Statement (5 December 2013), the Chancellor announced additional support for the care of emergency services personnel and their dependents who are injured, suffering ill-health, or bereaved, as a result of active service for the public. This further support is extended to police, fire, ambulance, and search and rescue and lifeboat service personnel and also includes volunteers serving in the emergency services.

To help ensure that the money is invested fairly, equitably and sustainably, Cabinet Office engaged New Philanthropy Capital (NPC) to help them draw in views and evidence to determine the best use of the money.

An initial stakeholder day generated a consultation document, [Needs of emergency service personnel and their families](#).

A subsequent online call for evidence open for five weeks, from 17/04/2014 to 23/05/2014. The call for evidence comprised an online survey asking about the accuracy of the Needs document and an invitation to submit additional documents eg, research reports. The call for evidence was circulated through networks of emergency service personnel, supporting organisations, government departments, and social media.

The survey received 981 responses, of which 579 could be included in analysis.\* This document summarises the findings of the call for evidence.

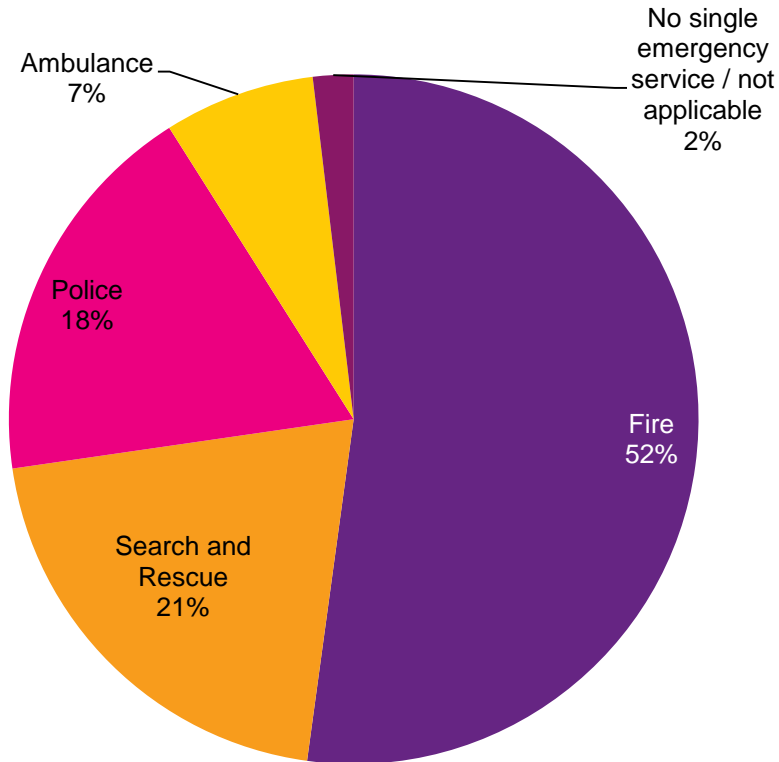
---

\*Responses were excluded if organisations were not based in England, or had not completed questions about prioritisation of needs.

# PROFILE OF RESPONDENTS

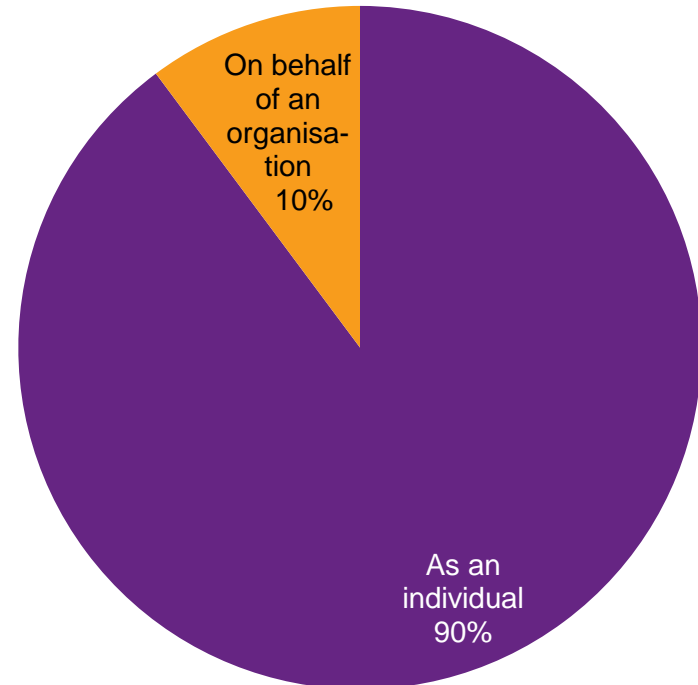
Representation from all services, majority individuals

Which emergency service do you represent? (Q1)



n= 579

Are you answering as an individual or on behalf of an organisation? (Q2)

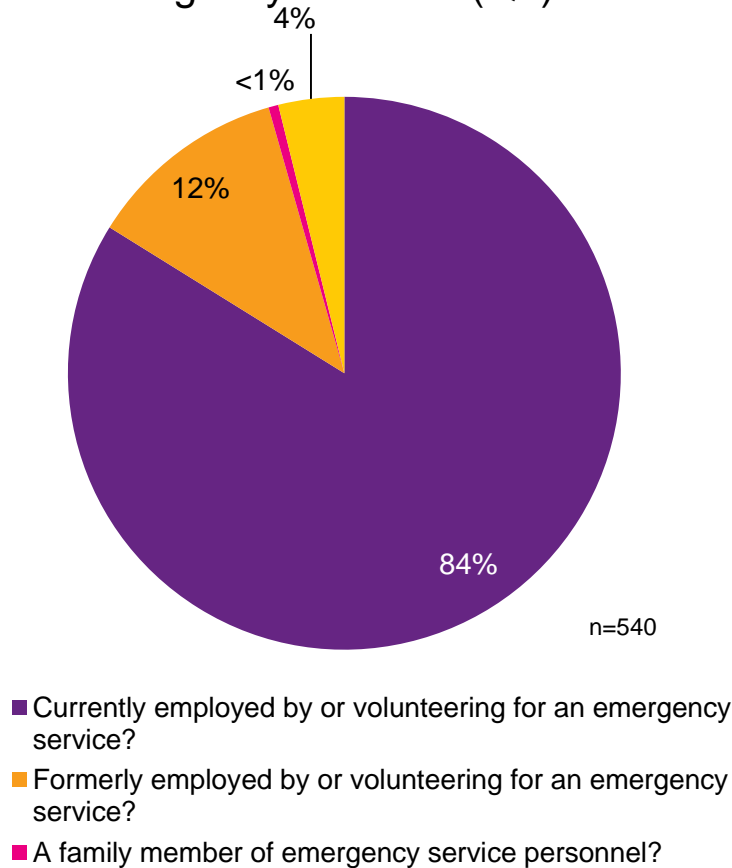


n= 579

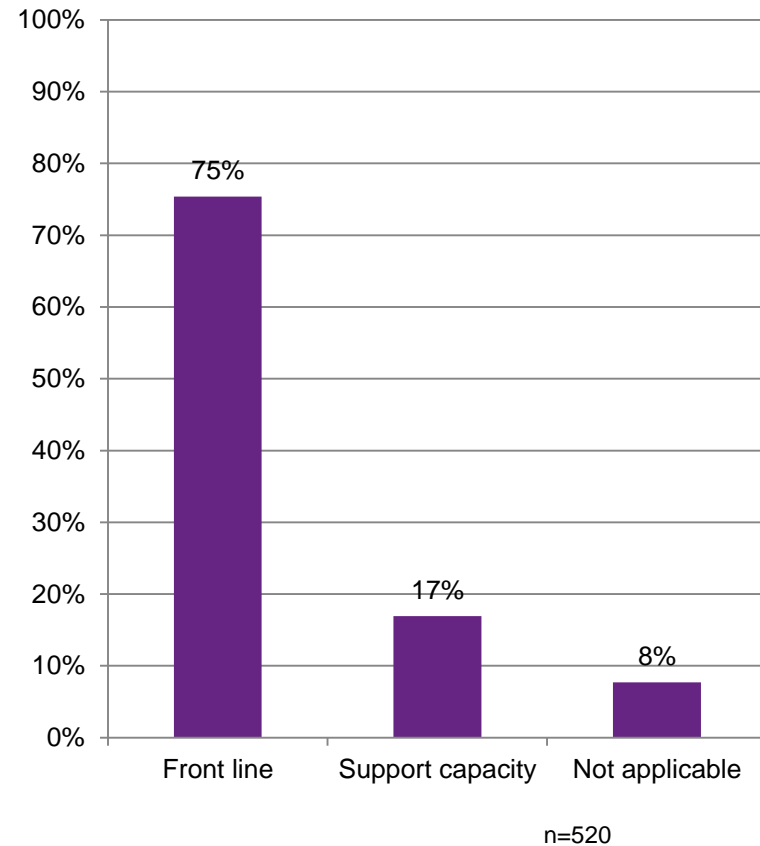
# TYPES OF RESPONDENT

Majority of responses are from frontline, currently active

Are you or a family member currently or formerly employed by an emergency service? (Q3)



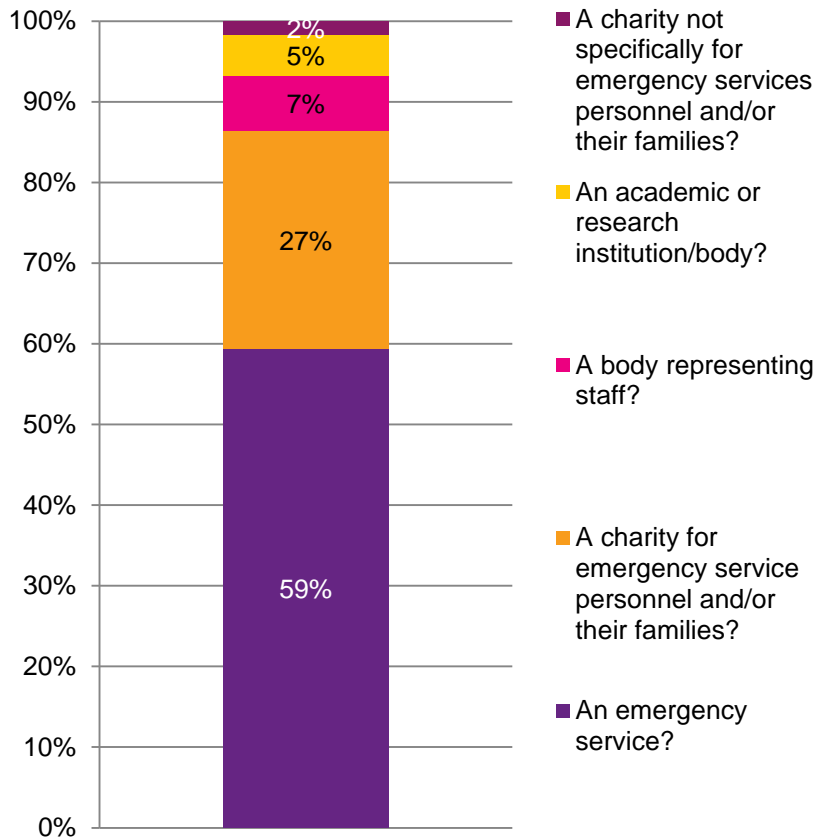
Are or were you employed by an emergency service in a frontline or support capacity? (Q4)



# ORGANISATION TYPE

Primarily frontline organisations

Type of organisation (Q7)



# ORGANISATIONS COMPLETING THE SURVEY



Spread of organisations from across the services (Q5)

East of England Ambulance Service (AS)  
North West AS  
South East Coast AS NHS Foundation Trust  
South Western AS NHS Foundation Trust  
West Midlands AS NHS Foundation Trust  
West Midlands AS Benevolent Fund

## **Fire Fighters Charity (10)**

Cheshire Fire & Rescue Service (F&RS)  
East Sussex F&RS  
Gloucestershire F&RS, Hampshire F&RS  
Lancashire Fire and Rescue Service  
LFRS, London Fire Brigade  
North Yorkshire F&RS, Staffordshire F&RS  
Tyne & Wear F&RS, Warwickshire F&RS

Cambridgeshire Constabulary, Care of Police Survivors, Cleveland Police, Devon and Cornwall Police, Metropolitan Police, PC David Rathband's Blue Lamp Foundation, Police Federation of England & Wales, Police Section, ALAMA, The Police Treatment Centres, West Midlands Police Federation

Bay Search and Rescue, British Cave Rescue Council, Duddon Inshore rescue, Gloucestershire Cave Rescue Group, Gosport and Fareham Inshore Rescue Service (GAFIRS), HM Coastguard, Midland cave rescue org, Mountain & Cave Rescue Benevolent Fund, Mountain Rescue England & Wales, RNLI, Ryde Inshore Rescue, Sandown & Shanklin Independent lifeboat, Southport Offshore Rescue Trust, The Derbyshire Cave Rescue Organisation, The Royal Life Saving Society UK

Centre for Anxiety Disorders and Trauma, South London and Maudsley NHS Foundation Trust  
King's College London  
University of Oxford

# ADDITIONAL NEEDS INFORMATION (1)

## Additional information on needs (Q9, Q13, Q14)

- The majority of people (70%) thought that the [Needs Document](#) accurately summarised the needs of emergency service personnel.
- Of c150 responses who thought there were needs that had not been included or adequately discussed in the Needs Document, approximately a third emphasised needs identified in the initial consultation document.
- Around half of these reference mental health needs including:
  - Preventative work: building resilience and emotional intelligence
  - Addressing stigma: ensuring people feel comfortable to access help without fear of how this will be perceived by others.
  - Supporting families, and involving families in supporting personnel
  - Impact of shift patterns and working practices
  - Exacerbated effects in high profile or politicised cases
  - Support needed to cope with stress of internal investigations
  - Supplementing NHS provision due to lack of resources to address all mental health needs.
  - Adjusting to medical retirement
  - Stress of on-call work, especially as a volunteer



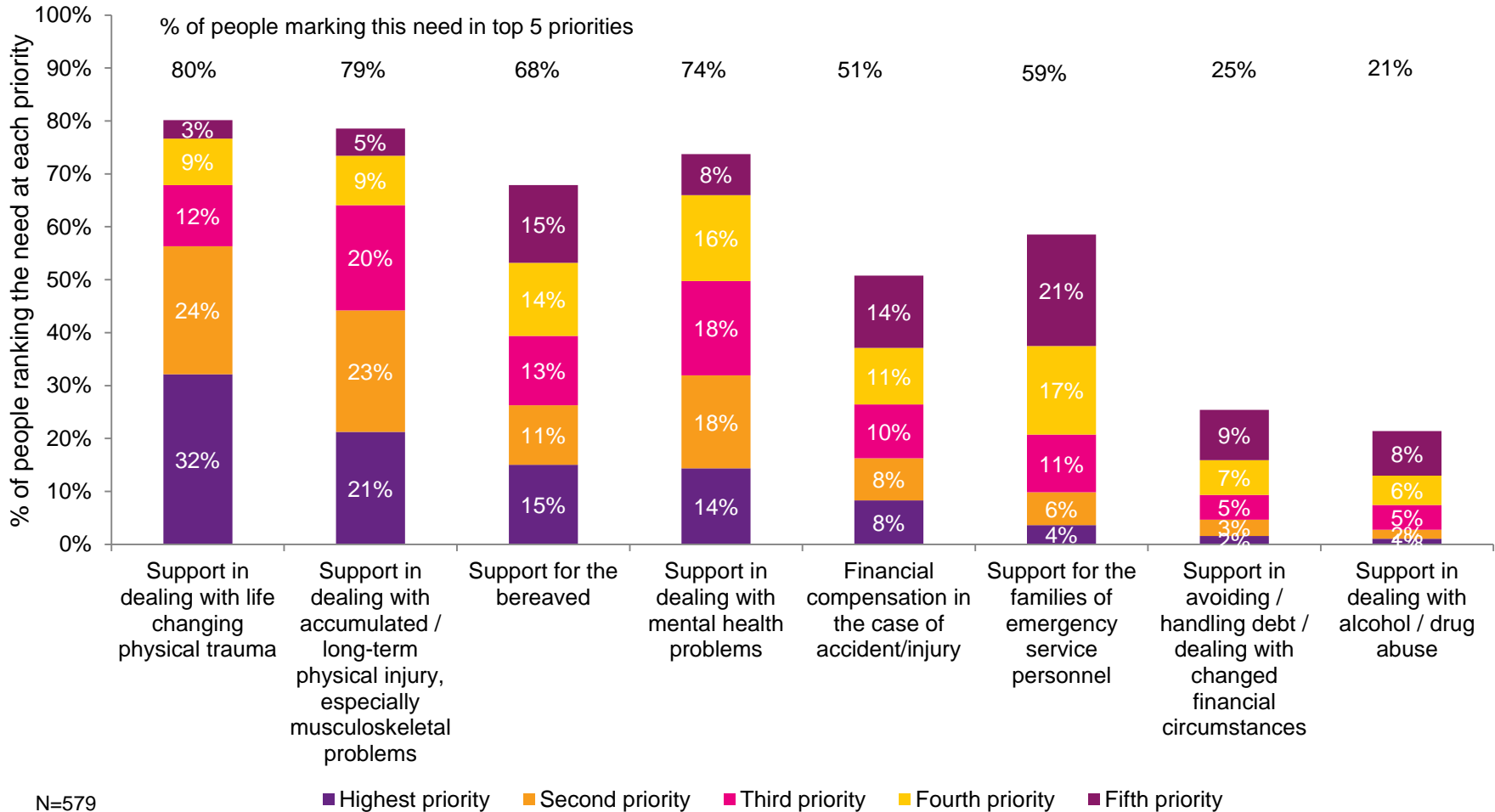
## ADDITIONAL NEEDS INFORMATION (2)

Additional information on needs (Q9, Q13, Q14)

- A number of further themes emerged as important:
  - Volunteers: specific needs (expenses, balancing volunteer role with other employment, effect on family life, impact of injuries on employment)
  - Volunteers: lack of welfare provision in small, volunteer-led organisations.
  - Ageing workforce has implications for fitness
  - Need for sustained, long term provision recognising needs may change over time
  - Physical health: many comments reference impact on people's lives
- Some specific points from the consultation were emphasised:
  - Support for those who have been medically retired
  - Support to families
  - Difficulty speaking out about need for help

# SCALE OF IMPACT: NUMBERS (1)

Please indicate which needs you think should be prioritised based on the number of people experiencing these needs.



N=579

# SCALE OF IMPACT: NUMBERS (2)

## Analysis of differences between the services

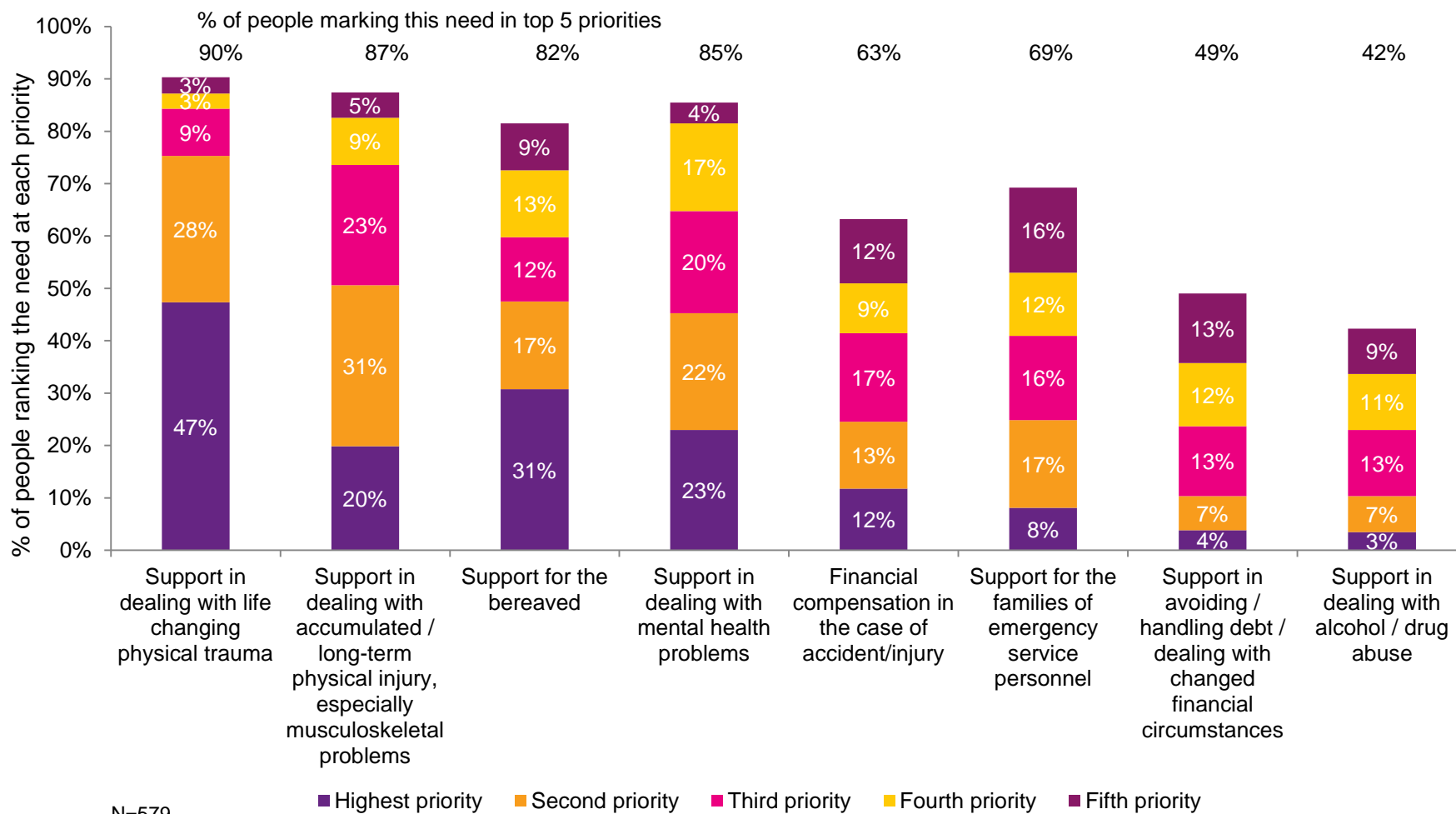
- Based on this data we calculated an **average priority score** from across the survey sample. This allows us to easily compare how respondents ranked the needs relative to each other.
- To examine the relative impact of different needs between the services, we repeated the calculation using responses from **each of the services separately**. Where the priority of a service differs substantially from the average priority score, this has been shown in **bold**.

	Life changing physical	Accumulated physical	Mental health	Bereaved	Financial compensation	Support to families	Debt	Drug and alcohol
<b>Average priority score</b>	3.1 (1 <sup>st</sup> priority)	2.8 (2 <sup>nd</sup> priority)	2.4 (3 <sup>rd</sup> priority)	2.0 (4 <sup>th</sup> priority)	1.4 (5 <sup>th</sup> priority)	1.3 (6 <sup>th</sup> priority)	0.6 (7 <sup>th</sup> priority)	0.5 (8 <sup>th</sup> priority)
<b>Fire</b>	3.3	2.9	2.5	2.3	1.0	1.4	0.5	0.5
<b>Ambulance</b>	2.3	<b>3.3</b>	2.7	<b>1.2</b>	1.3	1.5	0.8	0.6
<b>Police</b>	3.1	2.7	2.6	1.9	1.4	1.1	0.6	0.5
<b>Search and rescue</b>	3.1	2.6	1.7	1.8	<b>2.5</b>	1.3	0.6	0.3

N=579

# SCALE OF IMPACT: DEPTH (1)

Please indicate how you would prioritise needs based on depth of impact for people experiencing these needs.



# SCALE OF IMPACT: DEPTH (2)

## Analysis of differences between the services

- Based on this data we repeated the calculations completed for Scale of impact: numbers
- The **average priority score** ranking is almost unchanged (apart from Financial compensation and Support to families swapping place for 5<sup>th</sup> and 6<sup>th</sup> priority).
- The **services separately** showed some differences in priority, shown in **bold**.

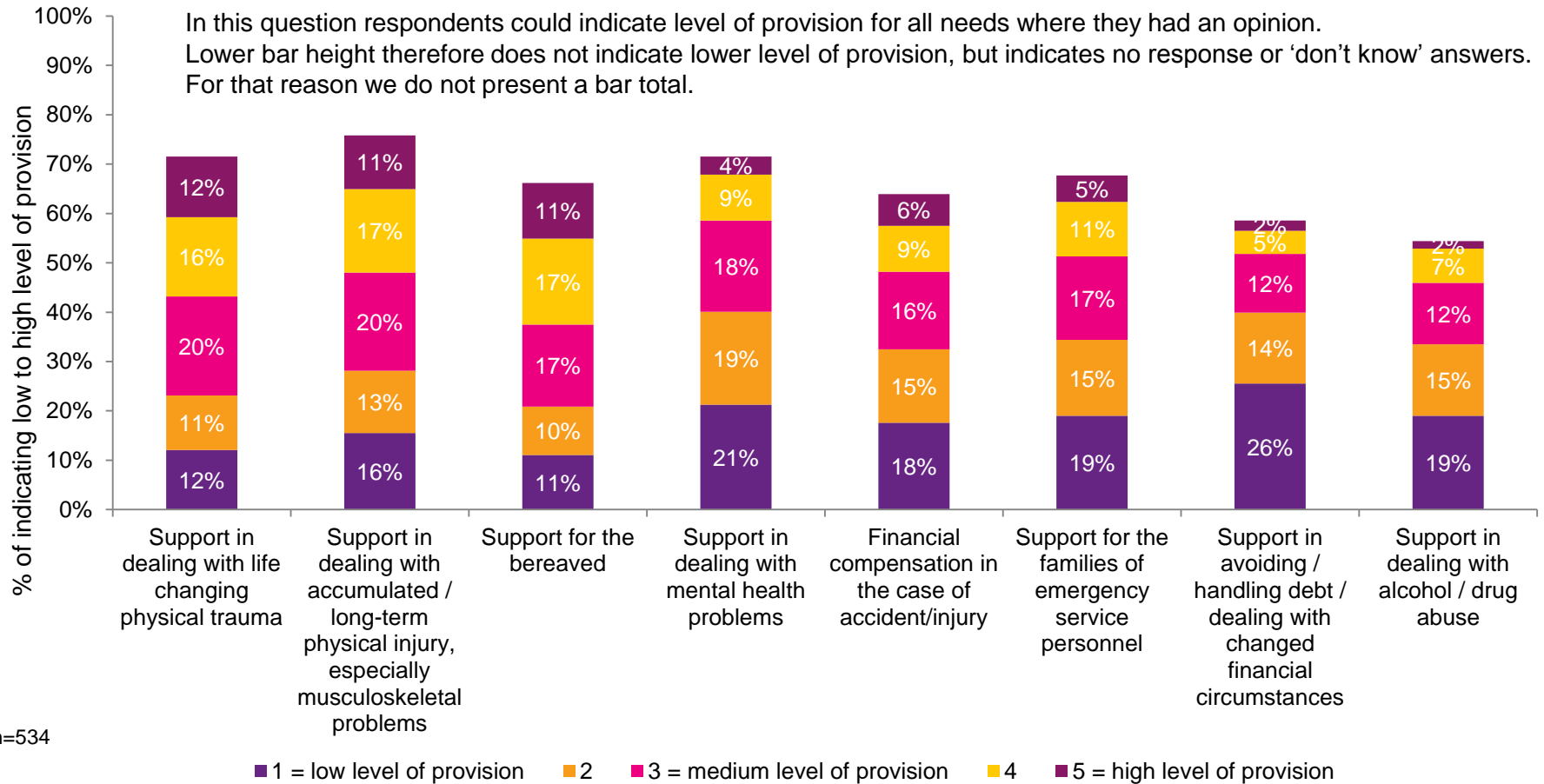
	Life changing physical	Accumulated physical	Mental health	Bereaved	Support to families	Financial compensation	Debt	Drug and alcohol
<b>Average priority score</b>	3.8 (1 <sup>st</sup> priority)	3.1 (2 <sup>nd</sup> priority)	3.0 (3 <sup>rd</sup> priority)	2.9 (4 <sup>th</sup> priority)	2.0 (5 <sup>th</sup> priority)	1.9 (6 <sup>th</sup> priority)	1.2 (7 <sup>th</sup> priority)	1.1 (8 <sup>th</sup> priority)
<b>Fire</b>	4.0	3.3	3.2	3.0	2.1	1.6	1.2	1.2
<b>Ambulance</b>	3.3	3.5	<b>3.5</b>	2.5	<b>2.6</b>	2.1	1.6	1.6
<b>Police</b>	3.9	3.2	3.1	3.0	1.8	2.2	1.3	1.2
<b>Search and rescue</b>	3.7	<b>2.7</b>	2.2	2.9	1.7	2.5	1.1	0.4

N=579

# CURRENT LEVEL OF PROVISION

Please indicate how much support is currently provided for these needs

In this question respondents could indicate level of provision for all needs where they had an opinion. Lower bar height therefore does not indicate lower level of provision, but indicates no response or 'don't know' answers. For that reason we do not present a bar total.



n=534

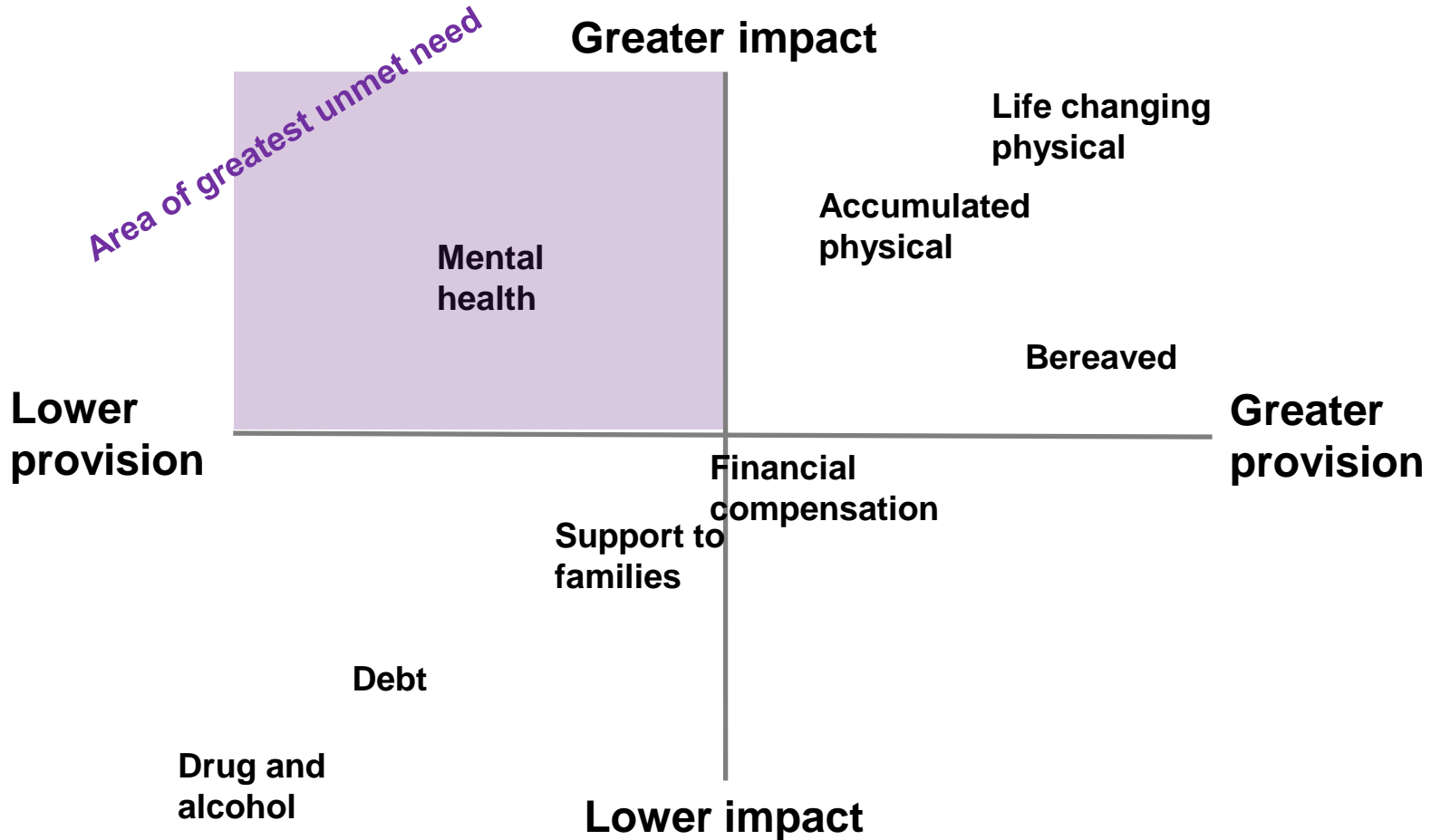
<b>Average</b>	<b>3.1</b>	<b>2.9</b>	<b>3.1</b>	<b>2.4</b>	<b>2.6</b>	<b>2.5</b>	<b>2.0</b>	<b>2.2</b>
----------------	------------	------------	------------	------------	------------	------------	------------	------------

Low average score = low level of provision

# SCALE OF IMPACT AND LEVEL OF PROVISION



Of the high impact issues, mental health has lowest provision



# PROVISION BY CHARITIES

To inform our picture of the provision within the sector, we asked those respondents that came from a charity providing support to emergency service personnel what services they offer.

Please tell us if your charity provides the following (Q8)

Type of support	Number of charities offering this service
Support for bereaved families of emergency service personnel	14
Physical rehabilitation services	13
Support for families of current emergency service personnel	13
Mental health services	12
Grants for individuals	11
Debt/financial advice	9
Other support	6
Support with alcohol problems	5
Support to find another job	2

n=16



# HOW FUNDING SHOULD BE DISTRIBUTED

## Suggestions from respondents

- Divided opinion:
  - To each service equally, based on number of people affected, or based on level of need.
  - Local control to ensure responsiveness to needs, or central coordination to ensure standardisation.
  - Allowing services to set priorities, or standardising arrangements across services
- Recurring themes:
  - The different needs identified are interlinked, need for holistic solutions
  - Work needs to be sustainable
  - Funding allocation should be evidence based
  - Coordinated working: sharing of best practice and knowledge to make best use of existing resources
  - Calls for greater sharing of services, and support for capacity to work collaboratively (particular challenge for volunteer led services).

# THANK YOU

If you have any questions please email [ocs.info@cabinet-office.gsi.gov.uk](mailto:ocs.info@cabinet-office.gsi.gov.uk).

---