The WELL trauma tracker

The welfare evaluation with a logistical ledger (WELL) trauma tracker automatically records police exposure to traumatic incidents if required.

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Key details

Does it work?	Untested – new or innovative
Focus	Organisational
Topic	Leadership, development and learning Operational policing Organisation including workforce
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Region	South West
Partners	Police Health services
Stage of practice	The practice is implemented.
Start date	October 2024

Key details

Scale of initiative	Local
Target group	Workforce

Aim

The WELL trauma exposure tracker was developed to improve welfare support in policing by providing a consistent, automated record of an individual's exposure to potentially traumatic incidents and investigations.

Its primary aim is to highlight trauma exposure that may otherwise go unnoticed, especially in environments where roles and supervisors frequently change. Rather than diagnosing or replacing professional health interventions, the system acts as a conversation starter. It's a tool to prompt early, informed welfare discussions between staff and supervisors.

By offering a shared reference point, it encourages timely support, mental health awareness, and proactive engagement, helping ensure that trauma exposure is acknowledged and addressed appropriately.

Intended outcome

- More timely intervention – the tracker intends to help identify officers at risk of trauma-related mental health issues, allowing supervisors and wellbeing teams to offer early support.
- Increase in data-driven decision-making – supervisors can make informed decisions about workload management, duty allocations, and team wellbeing strategies. Senior leaders can have a clear overview of officers, teams, departments and geographical areas which highlight via the tracker as having a higher exposure to potential traumatic incidents and investigations.
- Reduced stigma – by normalising conversations around trauma exposure and mental health, the WELL tracker aims to reduce the stigma that often prevents officers from seeking help. The force hopes that this will be particularly helpful in reaching teams/departments who historically have statistically been less inclined to ask for support or speak about their mental wellbeing.
- Improved resilience – by better understanding their trauma exposure, police officers and police staff can become more empowered to seek support and build resilience against the emotional

impact of their work.

Description

Implementation of the WELL trauma tracker

An inspector observed the emotional strain on officers and staff without any formal tracking of their exposure to potentially traumatic events. They recognised the necessity for a proactive tool to track trauma exposure and support officer wellbeing. This vision resulted in the concept of the WELL Trauma Tracker. By automating this process, the WELL Trauma Tracker aims to provide timely, real-time insights into the levels of trauma exposure among officers and staff, ultimately helping to improve their mental health and wellbeing. This innovative system marks a significant advancement in police welfare, believed to be the first known system of its kind in both public and private sectors globally to automatically collate data related to police officers' and staff members' exposure to potentially traumatic incidents and investigations, without requiring any manual input from the user.

Concept and development

With the support of the chief constable, the concept was taken forward. The force's Qlik Sense Hub IT team helped to bring the idea to life. The goal was to create a system that:

- automatically collates trauma exposure data
- requires no manual input
- provides real-time insights
- supports early intervention and wellbeing conversations

The WELL trauma tracker was developed in 2024, and a trial involving nearly 300 users began in June 2025.

Resources required

- IT infrastructure – integration with existing systems, Niche (crime recording) and WebStorm (command and control), was essential
- development team – a small team from the Qlik Sense Hub built the dashboard and logic for trauma point allocation

- operational lead – the project lead inspector defined trauma criteria, liaised with developers, and oversaw implementation
- senior leadership buy-in – endorsement from the chief constable and senior leaders was vital to secure resources and drive cultural acceptance
- pilot group – a trial group of 300 users tested functionality, usability, and impact

Costs

While exact costs may vary, the initiative was largely resource-efficient:

- internal staff time for development and testing
- existing software (Qlik Sense) was leveraged, avoiding major new licensing costs
- minimal additional hardware/software due to integration with systems already in use

Implementation process

- identify the need – welfare gaps were highlighted by the project lead inspector through operational experience and officer feedback
- secure leadership support – the chief constable endorsed the initiative, enabling prioritisation and resource allocation
- define trauma criteria – a working group established what types of incidents would be considered potentially traumatic
- develop the tracker – the Qlik Sense Hub team built the system to pull data from Niche and WebStorm, applying trauma "points" to individuals based on incident involvement
- pilot the system – a trial with 300 users tested functionality, usability, and impact
- refine based on feedback – adjustments were made to improve accuracy, user experience, and supervisor access

How it works

- automated data collation – the system pulls data from Niche and WebStorm, assigning trauma points to individuals based on incident type and involvement
- no manual input – officers and staff do not need to enter any data
- individual dashboards – each user can view their trauma exposure history over the past five years
- supervisor access - supervisors can view team exposure levels to support welfare conversations

- opt-out option - users can choose not to participate if preferred

Support and integration

The WELL tracker complements existing support services:

- Police Care UK – trauma-informed counselling and mental health support
- Oscar Kilo – national wellbeing resources and outreach
- Occupational Health – work-related wellbeing support
- Roll Out and Promote – the system was introduced force-wide with guidance for individuals and supervisors on how to use it effectively

Replicating the initiative

To implement a similar system, another force would need:

- access to incident and investigation data systems (equivalent to Niche and WebStorm)
- a data analytics platform (for example, Qlik Sense or Power BI)
- a project lead with operational and welfare insight (ideally someone with frontline experience)
- IT developers familiar with dashboard creation and data integration
- senior leadership endorsement to drive cultural change and adoption
- clear trauma criteria and privacy safeguards, including opt-out options

Overall impact

Feedback is collated through user surveys and wider assessment from the force trauma steering group. Feedback from the trialists has been positive.

An example of one such feedback is below:

As a trial user of the WELL Trauma Exposure Tracker, I have found the tracker to be extremely useful in understanding and visualising my exposure to trauma throughout my brief career. It has provided me with reassurance that the traumatic cases I have been exposed to are being tracked with the tracker and logged and also provide my supervisor with an overview of these to help inform our 1-1 chats and discussions particularly surrounding my wellbeing which, in Bluestone, is an area which requires

careful attention.

Learning

What went well

- Leveraging internal expertise – Avon and Somerset Police were able to utilise existing skills and systems to develop the WELL Trauma Tracker internally. This approach minimised costs and enabled swift development through to the trial phase.
- Flexibility in development – because the system was built in-house, amendments could be made quickly. This included adjusting data collection parameters and refining operational elements based on feedback.
- Consultation with trauma steering group – an established in-force Trauma Steering Group was engaged throughout the process, from concept to development and trial implementation, providing valuable feedback and guidance.
- Positive user feedback – trial users reported benefits.
- Interest from other forces – following a presentation to Oscar Kilo (national police wellbeing service), interest in the WELL Trauma Tracker increased significantly, with other forces exploring adoption.

Challenges and barriers

- While the initial concept phase and development of a functioning programme were rapid, the transition to trial phase (approximately six months) took longer than anticipated. This delay was primarily due to internal governance processes.

Planned improvements

- introduce a weighted scoring system to better reflect the severity of exposure
- extend the data collection period to capture longer-term trends
- develop an automatic notification system to alert supervisors when staff are exposed to traumatic incidents
- create an intervention alert that combines key indicators such as trauma exposure, cancelled rest days, workload, sickness absence, and length of service

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