



PUBLIC MEETING - PEOPLE COMMITTEE

THURSDAY 2 DECEMBER 2021 @ 1300 HRS

BY CONFERENCE FACILITIES

AGENDA

- 1 CHAIR'S WELCOME**
- 2 APOLOGIES FOR ABSENCE**
- 3 CONSIDERATION OF AND DECISION ON ANY ITEMS TO BE TAKEN IN PRIVATE**
- 4 DECLARATION OF INTERESTS**
Members should declare any financial and non-financial interest they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.
- 5 MINUTES OF PREVIOUS MEETING: 9 SEPTEMBER 2021 (attached)** *M Wylie*
The Committee is asked to approve the minutes of this meeting.
- 6 ACTION LOG (attached)** *A Cameron*
The Committee is asked to note the updated Action Log and approve the closed actions.
- 7 PERFORMANCE AND RISK REPORT QUARTER 2 2021/22**
 - 7.1 People and Organisational Development (attached)** *L Gaja*
 - *Executive Summary*
 - *Health and Wellbeing Referral Data*
 - *Mental Health Referrals*
 - *Assurance Data*
 - 7.2 Training, Safety and Assurance (attached)** *K Barbour/
J Holden*
The Committee is asked to scrutinise these reports

Please note that the public meeting will be recorded and published on the SFRS Website.

OFFICIAL

- 8 INDEPENDENT AUDIT/INSPECTION ACTION PLAN UPDATE** *(attached)* K Barbour
- Training of RDS Personnel

The Committee is asked to scrutinise this report
- 9 WORKFORCE DATA UPDATE** *(attached)* J Sharp

The Committee is asked to scrutinise this report
- 10 PARTNERSHIP WORKING**
10.1 Overview - Employee Partnership Forum *(verbal)* S Barron
10.2 Overview - Partnership Advisory Group *(verbal)* L Barnes

The Committee is asked to note verbal updates.
- 11 COMMITTEE ALIGNED DIRECTORATE RISKS** *(attached)* L Barnes

The Committee is asked to scrutinise this report
- 12 FORWARD PLANNING**
12.1 POD Policy Review Schedule Update *(attached)* M Corry
12.2 Health and Safety Policy and Management Arrangements *(attached)* J Holden
12.3 Committee Forward Plan Review *(attached)* M Wylie
12.4 Items for Consideration at Future IGF, Board and Strategy Day meetings M Wylie
- 13 REVIEW OF ACTIONS** *(verbal)* A Cameron
- 14 DATE OF NEXT MEETING**
Thursday 3 March 2022

PRIVATE SESSION

- 15 MINUTES OF PREVIOUS PRIVATE MEETING: 9 SEPTEMBER 2021** M Wylie
(attached)

The Committee is asked to approve the minutes of this meeting.
- 16 REMUNERATION, APPOINTMENTS AND NOMINATIONS SUB COMMITTEE UPDATE**
16.1 Draft Minutes of last meeting – 9 September 2021 *(attached)* F Thorburn
16.2 Update of last meeting – 2 December 2021 *(verbal)* F Thorburn

The Committee is asked to note the draft minutes and verbal report.

Please note that the public meeting will be recorded and published on the SFRS Website.

OFFICIAL

17 PARTNERSHIP WORKING

17.1 Update from Employee Partnership Forum (*verbal*)

S Barron

17.2 Update from Partnership Advisory Group (*verbal*)

L Barnes

The Committee is asked to note verbal updates.

18 EMPLOYEE VOICE (*attached*)

L Barnes

The Committee is asked to scrutinise the report.

19 KEY CASE UPDATES 2021/22 – Q2 (*attached*)

L Barnes

The Committee is asked to scrutinise this report

Please note that the public meeting will be recorded and published on the SFRS Website.



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

PUBLIC MEETING – PEOPLE COMMITTEE

THURSDAY 9 SEPTEMBER 2021 @ 1300 HOURS

BY CONFERENCE FACILITIES

PRESENT:

Mhairi Wylie (Chair) (MW)
Malcolm Payton (MP)
Paul Stollard (PSt)

Steve Barron (Deputy Chair) (SBa)
Fiona Thorburn (FT)

IN ATTENDANCE:

Liz Barnes (LB)	Director of People and Organisational Development
John Dickie (JD)	Assistant Chief Officer, Director of Training, Safety and Assurance
Stuart Stevens (SSt)	Assistant Chief Officer, Director of Service Delivery
Scott Semple (SSe)	Head of People and Organisational Development
Jim Holden (JH)	Deputy Head of Safety and Assurance
Kenneth Barbour (KB)	Head of Training Delivery and Performance
Ceri Dodd (CD)	Deputy Head of People and Organisational Development
Jason Sharp (JS)	Area Commander Workforce, Planning and Resourcing
Linda MacKenzie (LMack)	People and Organisational Development Manager (Item 9.1 only)
Mary Corry (MC)	Safety and Wellbeing Business Manager (Item 14.1 only)
Geri Thomson (GT)	Deputy Head of People and Organisational Development
Kirsty Darwent (KD)	Chair of SFRS Board
Alasdair Cameron (AC)	Group Commander, Board Support
Debbie Haddow (DH)	Board Support /Minutes

OBSERVERS:

None

1 WELCOME

- 1.1 In her new role as Committee Chair, MW opened the meeting and welcomed those present, in particular Steve Barron, Fiona Thorburn and Paul Stollard to their first meeting.
- 1.2 The Committee were reminded to raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question.
- 1.3 On request, direct public access to observe meetings was now available, however, meetings would continue be recorded and published on the public website.

2 APOLOGIES

- 2.1 Karen Lockhart, Head of Safety and Assurance
Paul King, Head of Training and Employee Development
Julie Harkins, Acting Head of Safety and Assurance

3 CONSIDERATION OF AND DECISION ON ANY ITEMS TO BE TAKEN IN PRIVATE

3.1 The Committee discussed and agreed that the Key Case Update verbal report would be heard in private session due to the small number of individuals involved and confidentiality in line with Standing Orders (Item 9F). The draft minutes/verbal update of the Remuneration, Appointments and Nominations Sub Committee would also be taken in private due to the confidential nature of business taken to this meeting.

3.2 No further items were identified.

4 DECLARATION OF INTERESTS

4.1 None.

5 MINUTES OF PREVIOUS MEETING: 2 JUNE 2021

5.1 One minor typographical error was noted and amended.

5.2 **Subject to the above amendment, the minutes of the meeting held on 2 June 2021 were approved as a true record of the meeting.**

5.3 Matters Arising

5.3.1 LBA provided clarity on the services provided by MidlandsHR and ongoing discussions regarding an extension to the existing contract.

6 ACTION LOG

6.1 There were no outstanding actions.

7 PERFORMANCE AND RISK REPORT QUARTER 1 2021/22

7.1 People and Organisational Development (POD)

7.1.1 SSe presented the Committee with the POD Progress and Performance Report Quarter 1 2021/22. The following key areas were highlighted:

- Format and content of report revised to align with the 8 performance indicators within the Performance Management Framework.
- Section 1 Strategic Resource Planning:
 - Target Operating Model (TOM) continues to be affected by Covid, However, the number of trainees undertaking the foundation training course was increasing. Potential to further increase trainee intake was being investigated by POD, Training and Service Delivery.
 - Retained and Volunteer Duty System (RVDS) vacancies remain high. The National Retained Volunteer Leadership Forum were focused on enhancing RVDS recruitment and selection processes.
 - Continued focus to improve the recruitment and selection practices to ensure that the entire process was as streamlined as possible.
- Within Section 2 Developing diverse workforce and inclusive culture:
 - Total number of grievances and discipline cases concluded within 6 weeks.
- Within Section 3 Strengthen our employee health, wellbeing and fitness arrangements:
 - Reporting an overall reduction in staff absences, due to a reduction in Operations Control (OC) absence levels. Absence rates within other staffing groups have increased.

7.1.2 The Committee requested clarification on how grievances/disciplinary cases connect with supporting a diverse workforce. LBA noted within grievance/disciplinary cases, issues of diversity may manifest themselves. Wider analysis, monitoring and reporting of equality and diversity measures were reported separately through various reports produced.

7.1.3 The Committee queried how the ongoing Covid restrictions were impacting on recruitment. In order to support recovery, SSe reminded the Committee that a significant number of additional posts were being recruited over and above normal practice. A working group has

been stood up to review the management and co-ordination of the recruitment processes. SSe outlined the potential challenges and additional vacancies that may arise from recruiting internally to these additional posts. SSe noted the potential challenges with external recruitment due to the current marketplace and advised that the Service was using recruitment frameworks where possible.

- 7.1.4 In regard to the OC staff absences, the Committee were reminded of the work undertaken to identify any trends/themes and, with the assistance of Lifelines Scotland, the Service had identified improvements within the support offered to this staffing group.
- 7.1.5 In line with the current restrictions on physical distance, the Committee were informed that the current projections for future trainee course intakes were 48 trainees per quarter.
- 7.1.6 In regard to Brexit, the Committee were informed that the Service had supported all individuals affected and there were no significant issues. SSe noted that following the launch of the new Agile Working Framework, potential recruitment from outwith the UK was being explored.
- 7.1.7 **The Committee scrutinised the report.**

7.2 Training, Safety and Assurance

- 7.2.1 KB and JH jointly presented Training, Safety and Assurance Progress and Performance Quarter 1 Report 2021/22. KB highlighted the following key areas within the Training Function:
- Key successes include 32 RVDS trainees completing their initial training course (Task and Task Management), 51 RVDS trainees have completed their Breathing Apparatus and Fire Behaviour training, 34 Wholetime (WT) trainees completed and a further 47 WT trainees commenced (June 2021) the Foundation Training Programme.
 - Successful delivery of modular Incident Command Level 1 (ICL1) course on the islands.
 - Successful delivery of specialist rescue training in preparation for the Conference of Parties (COP) 26.
 - Risk levels remain stable.
 - Spotlight Report on ICL1 (acquisition) training. Due to restrictions, all courses have a reduced capacity which has led to the introduction of innovative methods of delivery. The benefits of the modularised ICL1 courses were noted.
 - Operational Core Competence continues to be managed between Training and Service Delivery. Due to Covid, some innovative solutions have been sought. Work continues to support and manage RVDS personnel through their maintenance programme.
 - Overall Incident Command Competence levels remain high and innovative solutions are in place to address the underreporting within the Flexi Duty Officer staffing group. This refresher training can now be fully delivered and assessed remotely.
- 7.2.2 The Committee welcomed the innovation and measures taken to ensure the continuation of training being delivered. With more training being delivered remotely, the Committee queried whether there were any short/medium term implications on the existing training centres. KB informed the Committee that the future delivery of training would be via a blended approach and this would increase the overall capacity to deliver training, ensure consistency in delivery and ultimately enhance Firefighter safety. JD reminded the Committee that the national training sites were primarily for the acquisition of training and as such they would always be required. JD further noted that the blended approach to training was the way forward and further work was ongoing to identify other innovative delivery methods.
- 7.2.3 The Committee commented on the potential risk to building strong relationships and loss of positive local ethos/culture due to training courses being delivered remotely. JD noted that the training element was only one part of the SFRS family culture and relationships were built across the Service daily. National training sites would continue to be used, as appropriate, particularly for acquisition of training, specialist training, etc. JD reminded the Committee

that the ability to deliver training remotely would benefit both the RVDS personnel and communities living on the islands.

7.2.4 JH highlighted the following key areas within the Safety and Assurance Function:

- Completion of 5 new management arrangements and supporting LCMS modules. Further 2 existing management arrangements reviewed.
- Continued refinement of arrangements in relation to Covid with a view to assisting end users.
- Continued influence and input into the Operation Document Conversion Project.
- Improvement Plan 2021/22 agreed with all Directorates.
- Improvement plan report providing comparison with the previous Q1 data and trend analysis over the last 3 years.
- Improvement plan contains 89 actions with 21 specifically allocated within Quarter 1. Of these 21 actions, 10 actions had been completed and the remaining 11 were progressing well.
- All key performance indicators were showing a downward trend, except for Acts of Violence.
- Covid figures were now shown separately, with a positive downward trend as a result of the control measures put in place.
- Reduction in Operational and Non-Operational Incident Injuries.
- Developing Service Delivery Areas (SDA) and Training Handbooks to review generic risk assessments and safe systems of work for routine station/training activities.
- Increased accidents/injuries within the North and East SDA and a notable reduction in the West SDA.
- Common causation of accidents/injuries included manual handling/body movement, slips, trips and falls and hot/cold injuries.
- Reduction in Near Miss reporting over the last 3 years. Health and Safety Briefing was being developed to raise awareness. Positive ratio increases of near miss reporting against RIDDOR reportable incidents.
- Increased Acts of Violence incidents over the last 3 years. Good practices identified within some Local Senior Officers areas would be presented to the Safety and Assurance Sub Group with the proposal for dissemination throughout the Service.
- Reduced Vehicle Accidents with the main causation being slow speed manoeuvres. Working Group has been convened to review and develop interactive case study/training.

7.2.5 The Committee commended the positive progress being made and the fullness of the report being presented. In regard to RIDDOR Reportable Injuries, the Committee noted that the infographic and narrative were not consistent.

7.2.6 The Committee noted that manual handling/body movement remained a common causation of accidents/injuries and enquired on the work being undertaken to address this. JH informed the Committee that the current manual handling training had been reviewed and would be rolled out across the Service. JH further noted that manual handling assessments would be considered during the procurement of new equipment and the Service Delivery Handbook would include an element of safe systems of work/training requirements. JD informed the Committee that the Musculoskeletal Group had been stood up to review and identify trends and mitigating actions.

7.2.7 In regard to Vehicle Accidents, the Committee asked for clarification on the current procedures/training, in particular the use of driving assistants. JD reminded the Committee that this was a long-standing issue, noted the various approaches adopted and that all accidents were investigated to identify cause/areas for improvement. JD and PS to discuss further outwith the meeting.

7.2.8 The Committee commended the report, however, noted that it was difficult to focus on key points due to the volume of information/ analysis being presented. JD offered to discuss the format, etc of the report further outwith the meeting with PSt due to his previous work in the health and safety arena.

7.2.9 The Committee thanked all those involved in the production of this report. The Committee acknowledged and appreciated the efforts and adaptations made during the challenging 18 months to ensure the Service continued to deliver services, training and safeguard personnel.

7.2.10 **The Committee scrutinised the report and thanked all those involved in its production.**

(L MacKenzie joined the meeting at 1400 hrs)

8 WORKPLACE CULTURE

8.1 Building the Future Together (BTF)

8.1.1 CD offered to deliver the concept overview of the BTF programme presentation to the new Committee members, which had been delivered to the previous members, at a separate session outwith this meeting. This Committee accepted this offer.

ACTION: BST

8.1.2 CD provided a brief overview of BTF programme concept noting the broad aims were focused on values, behaviours, skills and leadership as the Service continues to mature and to ensure the changing needs of the Service and local communities of Scotland are met.

8.1.3 **The Committee noted the verbal update and looked forward to the future information session being scheduled.**

9 EMPLOYEE RELATIONS

9.1 Covid-19 Recognition Scheme Review

9.1.1 LMack presented a report to the Committee providing an update on the review, and subsequent actions, of the Covid-19 Recognition Scheme in preparation for the launch of the main recognition scheme. The key points in relation to the recommendations were:

- Development of the communication strategy in partnership with Comms & engagement colleagues.
- Development of targeted comms to help address the imbalance of nominations between staffing groups.
- Develop supporting guidance for nominators.
- Consideration to be given to the frequency of scheme, ie bi-annual.
- Identification of key nomination themes etc ahead of the launch.

9.1.2 LMack advised the Committee that the People Board approved the recommendation and this would now be progressed.

9.1.3 **The Committee noted the report and commented on the importance of recognising the positive work undertaken by staff.**

9.2 Attendance Management Policy, Procedure and Management Handbook

9.2.1 The Attendance Management Policy, Procedure and Management Handbook report was presented to the Committee for information.

9.2.2 The Committee noted the revised Policy document and queried whether it had been necessary for the procedure and handbook to be presented to the Committee. LBa noted the comment.

9.2.3 The Committee requested clarification and assurance on how managers would progress individual cases through the absence capability process in the absence of a "single formula". LBa advised the Committee that circumstances differed from case to case and individual

managers would be aware of the specific case details as well as knowledge of the individual involved. Throughout the process individual managers would be supported and work alongside HR managers who would provide advice and ensure consistency was applied.

9.2.4 The Committee noted the report.

10 LEARNING AND DEVELOPMENT

10.1 Learning Needs Analysis 2021-22

10.1.1 CD provided the Committee with a verbal update on the progress made since the previous meeting on the Service-wide Learning Needs Analysis (LNA) process for 2021-22. The following key points were noted:

- Proposals to realign annual and ongoing LNA process across the Service.
- Engaging with Heads of Functions to realign LNA to the business planning arrangements to work towards the ability to zero base budget for learning and development needs.
- Establishing learning partner arrangement to support and improve working relationships across the Service.
- Move towards a more responsive learning and development service delivery model to meet the changing needs of the Service.
- Early launch of LNA to prepare for early implementation in 2022/23.

10.1.2 The Committee noted the verbal update.

10.2 Leadership for Change Programme etc

10.2.1 CD presented a report to inform the Committee of the approved proposal to recommence the implementation of Leadership for Change Programme (LfCP) aligned to an updated virtual delivery plan. CD noted that the virtual roll out was scheduled for November 2021, however due to the recent rise in Covid levels and the precedence of maintaining an operational response, the implementation timescale would remain under review and adjusted if necessary.

10.2.2 The Committee commented on the 23-week programme timeline and queried whether this would benefit from being condensed. CD noted that the virtual delivery timescale had been developed to ensure flexibility, access and non-detrimental impact on operational response.

10.2.3 The Committee suggested that the inclusion of inspirational talks from guest speakers, from outwith the fire and rescue service, would enhance the programme. CD noted that a suite of inspirational leadership talks was available and that this programme formed part of the wider ongoing Middle Management Programme.

10.2.4 The Committee noted the report.

11 INDEPENDENT AUDIT/INSPECTION ACTION PLAN UPDATE

11.1 KB provided an update on the action plan to the Committee which has been developed in response to the report published by Her Majesty's Fire Service Inspectorate (HMFSI), relating to the Training of the Retained Duty System (RDS) Personnel. The following key points were highlighted:

- Action plan contains 31 actions: 10 were currently being progressed, 5 deferred and 16 completed. Overall 79% completion.
- Two action due dates have been revised to October 2021, due to capacity/concurrency of events.

11.2 The Committee scrutinised the report and welcomed the progress being made.

12 UPDATE: WORKING TOGETHER FRAMEWORK

12.1 Update from Employee Partnership Forum (EPF)

12.1.1 LB advised that no further EPF meeting had taken place.

12.1.2 **The Committee noted the verbal update.**

12.2 Update from Partnership Advisory Group (PAG)

12.2.1 LD advised that no further PAG meeting had taken place.

12.2.2 **The Committee noted the verbal update.**

13 STRATEGIC RISK REGISTER

13.1 The Strategic Risk Register was presented to the Committee.

13.2 **The Committee noted the report.**

14 FORWARD PLANNING

14.1 POD Policy Review Schedule Update

14.1.1 The POD Policy Review Schedule Update report was presented to the Committee for information. During Q1, three policies were published and a further two policies were issued for consultation during Q1. Additional information on Agile Working had been published on the iHub and drop in information sessions were scheduled. During Q2, six policies were issued for consultation and a further two policies were deferred to the next quarter. Several RDS policies have been prepared for consultation, however, these were subject to the outcomes of the Terms and Conditions ballot.

14.1.2 **The Committee noted the report.**

14.2 Committee Forward Plan Review

14.2.1 The Committee noted the Forward Plan.

14.3 Items for Consideration at Future IGF, Board and Strategy Meetings

14.3.1 There were no items identified.

14.3.2 The Committee requested that consideration be given for the undernoted items to be brought to a future Strategy Day, Committee meeting or development/orientation workshop. MW agreed to consider and identify the appropriate forum:

- RVDS Recruitment and Retention
- Identifying a strategy for creating a more Representative Workforce
- Graduate Recruitment Scheme

ACTION: MW/AC

15 REVIEW OF ACTIONS

15.1 AC confirmed there were 2 formal actions raised during the meeting.

16 DATE OF NEXT MEETING

16.1 The next meeting is scheduled to take place on Thursday 2 December 2021 at 1300 hrs.

16.2 There being no further matters to discuss, the public meeting closed at 1440 hrs.

PRIVATE SESSION

17 MINUTES OF PREVIOUS PRIVATE MEETING: 2 JUNE 2021

17.1 The minutes of the private meeting held on 2 June 2021 were approved as a true record of the meeting.

18 REMUNERATION, APPOINTMENTS AND NOMINATIONS SUB COMMITTEE (RANSc) UPDATE

18.1 The draft minutes of the RANSc meeting on 2 June 2021 had been circulated to the Committee. The Committee noted the key issues discussed at the meeting of RANSc that was held earlier today (9 September 2021).

19 KEY CASE UPDATE 2021/22 – QUARTER 1

- 19.1 LBa provided a verbal update to the Committee on the Discipline, Grievance, Bullying and Harassment Statistics for Quarter 1 2021/22 and ongoing Employment Tribunals.

DRAFT

PEOPLE COMMITTEE – ROLLING ACTION LOG



Background and Purpose

A rolling action log is maintained of all actions arising or pending from each of the previous meetings of the Committee. No actions will be removed from the log or the completion dates extended until approval has been sought from the Committee.

The status of actions are categorised as follows:

- Task completed – to be removed from listing
- No identified risk, on target for completion date
- Target completion date extended to allow flexibility
- Target completion date unattainable, further explanation provided.

Actions/recommendations

Currently the rolling action log contains 2 actions. A total of 2 of these actions have been completed.

The Committee is therefore asked to approve the removal of the 2 actions noted as completed (Blue status). There are no actions categorised as Green status and no actions categorised as Yellow status on the action log.

OFFICIAL

Minute Ref	Action	Lead	Due Date	RAG Status	Completion Date	Position Statement
Meeting Date: 9 September 2021						
Item 8.1.1	Building the Future Together (BTF): Arrange further input relating to Workplace Culture 'Building the Future' for the Committee, into a future planned development session.	BST	December 2021		September 2021	Completed (02/12/21): Further input to be delivered at the Committee Development Workshop on 19 October 2021.
Item 14.3.2	Items for Consideration at Future IGF, Board and Strategy Meetings: MW agreed to consider and identify the appropriate forum: <ul style="list-style-type: none"> • RVDS Recruitment and Retention • Identifying a strategy for creating a more Representative Workforce • Graduate Recruitment Scheme 	MW/AC	December 2021		October 2021	Completed (02/12/21): RVDS and Representative Workforce will be considered at the December meeting. The Graduate Recruitment Scheme will be brought to a future meeting for information/scrutiny as appropriate in the new calendar year (Forward Plan updated).



**POD DIRECTORATE
SIX MONTHLY REPORT**

APRIL – SEPTEMBER 2021

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Introduction

The performance of the Scottish Fire and Rescue Service is set out against the priorities established by Scottish Government in the Fire and Rescue Framework for Scotland 2016, which states “***The SFRS should aim to be an employer of choice – maximising the effectiveness of its approach to Workforce Planning; promoting the safety, health and wellbeing of all staff; and being a learning organisation with opportunities for all. The SFRS should also seek to be an organisation that is more representative of the people and communities that it serves.***” In turn these priorities have been identified in the SFRS Strategic Plan as “***We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services.***”

The People and Organisational Development (POD) Directorate performance is monitored and reported through the quarterly POD Performance Report and scrutinised by the People Committee as well as within the SFRS Annual Report.

We also recognise the importance of providing internal stakeholders with information on how we are performing, where we can make improvements and how we can best utilise our resources to meet our stakeholders’ needs.

This report provides a range of management information on areas monitored by our teams; contains analysis of the information presented and provides narrative on actions that will be taken to make improvements where required. This six-monthly report also provides an update on progress on all POD Directorate objectives.

1. Progress on POD Directorate Objectives

1.1 Develop and implement a Strategic Resourcing Plan aligned with current and future workforce requirements

Despite challenges presented by the pandemic, resourcing activity has been maintained. This has been achieved via ongoing engagement with and the support of stakeholders who attend the established Resourcing Recovery Group, where the focus will now move to actions required to support the transition from COVID to recovery, reset and renew.

The Strategic Resourcing Plan for 2022 is being updated to reflect workforce requirements aligned to the leavers profile, operational availability and crewing levels.

POD continues to support the National Retained Volunteer Leadership Forum actions; to review, streamline and seek local solutions to RVDS resourcing. The Project Plan for 2022 adds flexibility and aims to support regular and increased intakes. The review of the RVDS R&S Process continues and this will be further informed by the outcomes of the Task & Finish Project Report recommendations when available.

Linked to BCTAG business cases and BAU activity, POD Resourcing are prioritising a review of support staff onboarding arrangements to bring about efficiencies in our approach and workstreams have been set up to progress this.

The suite of workforce data reports published monthly for key stakeholders, highlighting vacancies, performance against budget, wholetime retirement profiles, watch balances, RBC crewing levels/absences and Wholetime appliance availability continue to evolve and are more frequently playing a key role in operational meetings and decision making.

1.2 Review, revise and implement Pay and Reward Frameworks which ensure SFRS pay, terms and conditions are fair, transparent and attractive and remain fit for purpose

Following successful conclusion of negotiations regarding harmonisation of terms and conditions for employees within the national and local training Instructor pools, revised terms were implemented on 1st July 2021. These new terms will offer further flexibility and mobility amongst our Instructional Staff, which will directly benefit all our Wholetime and

Retained/Volunteer employees, particularly RVDS staff who can often experience difficulties in attending daytime training due to their primary employment commitments.

Work continues to seek conclusion to the harmonisation of Retained Duty System (RDS) terms and conditions, following further discussions with the Fire Brigades Union (FBU) and the subsequent issue of an improved offer. A further issue was raised in relation to the improved SFRS offer by the FBU during Quarter 2, with an SFRS position being provided in response. SFRS is currently awaiting a further response from the FBU which will inform next steps. This further unexpected delay has impacted on proposed implementation dates.

Negotiations are underway with Unison and Unite in relation to their joint Support Staff pay claim for 2021/22 which provides an opportunity for us to consider several aspects of the Support Staff Pay and Reward Framework.

As part of our regular review of policies and procedures, an options review identifying a range of approaches to review the existing Job Evaluation process was presented to the Strategic Leadership team in 2019. Due to the Covid pandemic and the potential long-term impact on ways of working, it was agreed that this project would initially be limited to a review of the existing processes used, with an aim of improving timescales and supporting managers with structure and post reviews, with a more in-depth review to follow.

Following a review of the existing processes, and consultation with stakeholders, it was identified that opportunities existed to strengthen the collection and recording of information and make improvements on consistent application of criteria. Job Analysts are also being employed to support the review. These process improvements are currently underway, as is the planning of their introduction, and the associated familiarisation of managers with the revised processes. This work has already resulted in a significant reduction in the time taken to carry out the evaluation of posts submitted and has supported the recruitment process of posts created through the Business Case processes being expedited.

Following a legal ruling in the English and Welsh High Courts, the definition of pensionable pay within the terms of the Firefighter Pension Schemes was redefined. A review of the allowances paid by SFRS identified a number of allowances paid to Wholetime employees that met this revised definition. In addition, it was recognised that a large number of hourly payments made to Retained and Volunteer employees that also met the definition of pensionable pay had not been recognised as pensionable on the introduction of the 2015 Firefighters' Pension Scheme. Following consultation with the Scottish Public Pensions

Agency and Scottish Government, these specific allowances and payments were redefined as pensionable as of 1st July 2021, with all employees concerned being formally notified. Consultations with the SPPA, Scottish Government and the representative bodies are underway concerning the possibility of awarding this recognition retrospectively and to agree the terms of any such retrospection.

A review was also undertaken to assess the potential impact of an increased tax liability on pensionable benefits arising due to increases in income. As the increases in income primarily arose due to promotion, concerns were raised over the impact on attraction for promotion and in SFRS gaining maximum advantage from its existing talent pool. The review demonstrated that some promotions could lead to employees facing an additional tax liability, although the potential for this and the scale of the increased tax liability was dependant on the individual circumstances. It was also established that employees would always still benefit financially from the salary increase, and that in the case of the Annual Allowance, the additional Tax Liability would only last for the year in which the promotion took place. A review of promotion trends over a period also demonstrated no evidence that the increased Tax Liability acted as a detriment to seeking career advancement. It was therefore concluded that the Tax Relief Thresholds did not constitute a threat to SFRS's Talent Management and succession planning.

1.3 Strengthen and promote the SFRS Total Reward package including recognition and benefits frameworks which are fair, attractive, inclusive and recognise our employees' contribution

A review of our one-off Covid-19 Recognition Scheme, undertaken in 2020/21, is now complete and will assist in informing the introduction of the main SFRS Recognition Scheme which will launch in April 2022. An implementation plan has been developed and work is currently underway to engage with stakeholders around developing relevant themes for recognition awards. The launch of the main recognition scheme will help ensure we continue to recognise the commitment and dedication of those who work with us.

1.4 Support, promote and monitor the development of a diverse workforce and inclusive culture, aligned with SFRS values

1.4.1 Positive Action Events

SFRS has continued to deliver positive action engagement sessions to the under-represented groups of women in operational roles, ethnic minority and LGBT communities across all roles. These sessions are facilitated by senior managers and colleagues from across the organisation and have been well attended and well received by delegates. A renewed and enhanced programme of positive action initiatives is in development for delivery from 2022 onwards.

1.4.2 Youth Employment Initiatives

Participation in the Career Ready Scheme has been extended to involve an annual intake of disadvantaged young people. We have successfully recruited 8 volunteer mentors for matching with participating young people for a two-year programme commencing in November 2021.

SFRS is a new participant in the Kickstart Scheme which provides six-month work placements to young people aged between 16 and 24 who are in receipt of Universal Credit. SFRS is in the process of appointing 2 participants to the scheme with the option of additional participants over the coming six months

1.4.3 Vocational and Apprenticeship Qualifications

The SFRS have continued to support Apprenticeships across our functional areas, with 643 Modern Apprentices (MAs). Of these, we have 632 Firefighter MAs, and eleven working across other MA frameworks in partnership with external providers. The non-firefighter apprenticeships include Business Administration, Motor Vehicle Engineering, Cyber Security, Web Development and Network Communication. A recently qualified SFRS ICT apprentice has secured a permanent post within the Service as an Assistant Communications Engineer and four new ICT MA placements commenced in September.

To complement the existing MA programme, we have developed additional support structures including the move to virtual engagement events and MA drop-in sessions as well as initiating the further development of an Apprenticeship Mentoring Pilot Programme (AMPP).

1.4.4 Agile Working Framework

During the first half of 2021/22 we have developed our Agile Working framework, building on the different ways of working which have been achieved during the pandemic to ensure that we continue to be a flexible, innovative and agile employer for the future. This is aimed at providing our employees with the tools, information and resources to find the most productive way to do their job and optimise their performance, whilst being able to look after their wellbeing, balance family and personal needs and improve their employee experience. The framework was launched in August and engagement sessions to support this were well attended and generated positive feedback and discussion on how this might be adopted across the Service.

1.4.5 The Building the Future Together Programme

Building the Future Together Programme Pillar 1 'Our Commitment' activity has commenced, including 'Trickle' employee engagement pilot. Workstream leads have been identified, draft Programme guidance has been developed and early workstream scoping commenced for programme workstreams 2, 3, 4 and Performance Monitoring. Development of the programme continues albeit, at a reduced pace due to concurrent Service priorities.

1.5 Strengthen SFRS approach to Talent Management and Development which identifies and develops capacity and capability at all levels

1.5.1 Learning Needs Analysis

The Learning Needs Analysis has been revised and aligned to organisational planning processes. The revised Learning Needs Analysis (LNA) process for 2022/23 has been deployed. Nominated Learning Partners from each function have been identified and will meet in Quarter 3 to continue to enable the prioritised implementation of the 2021/22 LNA arrangements.

1.5.2 Leadership for Change Programme

The Leadership for Change Programme (LFCP) has been redeveloped and transitioned to a virtual programme. Implementation of the revised and flexible delivery plan has commenced and will initially continue at a reduced pace from in response to the pandemic and concurrent priorities.

1.5.3 Succession Planning and Leadership Development

Leadership Development Centres (LDCs) are aligned to the Strategic Workforce Plan and Supervisory level LDCs have been prioritised and commenced aligned to organisational need establishing a front-loaded talent pipeline. The Supervisory Leadership Development Centres (LDCs) launched in June with over 100 successful applicants and initial pilot cohort have commenced on their Supervisory Leadership Development Programme. The wider rolling programme is currently paused and will be kept under review in line with staff availability and concurrent priorities.

1.6 Review the Working Together Framework and supporting arrangements to ensure that it continues to foster positive partnership working arrangements and harmonious employee relations

The first consultation process has been concluded and feedback is being analysed. A negotiation meeting with all Representative Bodies will be arranged to conclude the review of the Framework before the final consultation period takes place.

1.7 Strengthen health, wellbeing and fitness arrangements to enable staff to safely and effectively undertake their roles.

8 actions remain outstanding on the Clinical Governance Action Plan from a total of 76 for years 1-3 of the Clinical Governance Action Plan. Three have been completed in this period which were the completion of the Fitness Competency Booklet, Drivers Health Assessment Policy and the Management of Health Conditions Policy.

38 actions are outstanding from a total of 68 in the current year 4. Conflicting priorities have impacted on the ability to deliver outstanding actions but should be noted that some progress has been made with many other actions during this period. It is likely that other more critical priorities will impact on the overall timescales for completion of the plan.

The COHORT System upgrade went live in Quarter 1 allowing the management referral module (MRM) to become live together with the scanning and indexing module. A series of e-forms were developed in Quarter 2 to support HW process improvements. This preparatory work for the pilot roll out of the MRM, planned for Quarter 2, delayed the launch and this is now scheduled for Quarter 3. A programme of systems training was agreed with

COHORT and began in Quarter 1 and will continue throughout 2021/22. This will be critical in enabling HW to develop system generated reports for the collation of the HW PIs.

In Quarter 1 a review of HW admin function was completed. In Quarter 2 data collection commenced to develop a task analysis that will inform a review of the entire HW structure. A proposed structure model was developed and engagement with stakeholders and HW staff began in Quarter 2. Due to the volume and complexity of this, the structure will be developed and implemented on a phased basis. Proposals are designed around three teams; Fitness, Occupational Health and HW Development. It is proposed that the model will be implemented on a phased basis due to the work required and other interdependences that will influence our needs.

In Quarter 1, the Strategic Leadership Team (SLT) supported research proposals to inform the SFRS fireground fitness assessment project. Phase one of the project was completed within this period, enabling the production of a representative task simulation that will become the role-based fitness assessment. Engagement with Service Delivery colleagues took place in Quarter 1 to identify employees who would participate in research and data collection. In Quarter 2, this phase was completed, and a draft report was received detailing the recommended assessment protocol, performance standard and recommendations for how this should be implemented by the Service. This report will be finalised in Quarter 3 allowing engagement to begin with stakeholders on implementation and review of the Firefighter Fitness Standards and Assessment Methods Procedure (policy

Draft proposals for the implementation of strength assessments aligned to core skills assessments were completed in Quarter 1 together with a supporting management arrangement. Engagement with Training, Safety and Assurance and Service Delivery took place in Quarter 2 and the content approved. A supporting LCMS package was developed ensuring staff are provided with the information needed to train effectively for these assessments.

The MSK Injury Reduction Group was re-established and has secured representation from all Directorates. The Terms of Reference (TOR) will be reviewed during Quarter 3 and will be submitted to the NSAB in Quarter 4. The MSK Action Plan was reviewed and updated to reflect Service needs. The process of engagement with TSA/HS and HROD commenced in Quarter 1 to discuss ways to improve performance reporting and, in Quarter 2 improved processes have been introduced connected to HW physio referrals that enable more timeous reporting to HS and a closer scrutiny of the correlation with absence data. Quarter 1

performance management information relating to MSK activity was presented and, well received by the National Safety and Assurance Board (NSAB).

A station audit of fitness training equipment was completed, including the creation of an inventory of existing equipment. This work forms part of the development of a proposal for the future provision/standardisation of fitness training equipment across all SFRS stations. A gap analysis has been carried out and a summary of standardised equipment has been collated. Engagement with procurement was completed in Quarter 2 and a cost/benefit analysis is in progress around leasing versus the purchase of equipment. Progress is likely to be delayed in Quarter 3 due to other more critical priorities within the team.

A review of the existing referral physiotherapy and rehabilitation process has been completed and process improvements introduced in Quarter 2 that have resulted in standardisation across the SDAs and improved performance reporting. In Quarter 1 a benchmarking exercise was completed that identified alternative models of service delivery. An options appraisal paper is being prepared that will provide a recommendation for a preferred model of delivery. It is anticipated that this will be presented through the governance process in Quarter 3.

Regular collaboration with other emergency services and partners continues. The Lifelines Advisory Group continues to meet regularly as does the Tri-Services Wellbeing Group with a focus on the roll out of Lifelines Training and future funding. Information and knowledge exchange with partners across the services, including The Royal Foundation, continued throughout this reporting period.

In Quarter 1 engagement with Health, Safety and Assurance and Legal took place. A health and safety risk assessment, in relation to health/medical surveillance, was undertaken to identify areas of risk connected to non-compliance with aspects of medical surveillance; in particular asbestos surveillance. In this reporting period, delivery methods were explored that would ensure compliance with statutory health and medical surveillance. A draft options appraisal and cost/benefit paper is now being produced and governance will commence in Quarter 3.

In this reporting period HW continued to support 28 days of pre-placement medicals for whole-time recruitment. Good progress has been made throughout the period with overdue routine HW assessments as a result of COVID. There has been a suspension of the 3-yearly routine assessment plan to prioritise the most overdue stations. 6 new temporary HW

technicians commenced in Quarter 2 in order to increase the HW assessment compliance rate and are now fully inducted and competent. Progress against milestones will continue to be monitored. By the end of Quarter 3 the projected compliance is 87% for OH assessments and 96% for fitness assessments. The target completion date for all HW assessments is Quarter 2 2022.

In Quarter 1 the vaccination programme was paused to allow focus on reducing appointment waiting times for referrals. A triage process was implemented in Quarter 1 to improve waiting times for appointments and is being monitored on a weekly basis. In this period, protected appointments have been introduced to allow HW to be more responsive to critical cases or review any injuries reported through TASS events. In Quarter 2, improvements were made to data collection around the vaccination programme allowing all outstanding vaccinations to be planned with full compliance expected by the end of Quarter 3.

All HW contracts are managed through monthly contract management meetings. Issues identified in Quarter 1 with the current Occupational Health Physician (OHP) Services contract continued to be managed through an escalation process. In Quarter 2 the process of renewal of 6 HW contracts commenced, including the provision of OHP services.

In Quarter 2 HW supported the rollout of Prostate Cancer awareness sessions across the Service. A promotional video is being developed in partnership with Prostate Cancer UK and is expected to be introduced across the Service during Quarter 4. The Dying to Work Charter as part of the revised Attendance Management Policy will be implemented in Quarter 3 and a signing off ceremony with the STUC is being planned in for 2022. In Quarter 2 SFRS supported the Steptembear charity event run by the Family Support Trust and the POD team were the leaders in accomplishing the highest number of miles covered. In Quarter 2 a HW team engagement session with the Fire Fighters Charity took place to improve awareness of signposting and knowledge of services. The Charity commenced a series of virtual induction talks for new support staff in Quarter 2, to raise awareness of the role of the charity and the benefits available to staff.

1.8 Implement the Mental Health Strategy to promote and mainstream positive mental health

In Quarter 1 the model of delivery of the Mental Health Action Plan, through thematic sub groups, was presented at the Mental Health and Wellbeing Group (MH&WG) and was well received. The Policy and Process Review Sub-Group was established in Quarter 2 with an agreed ToR approved by the MH&WG. The creation of a Training Sub Group was agreed, with a view to progressing with the scope and agreeing a ToR in Quarter 3. Discussion with P&P colleagues to take forward a Community Sub Group were initiated in Quarter 2. Engagement has taken place to develop the Wellbeing Champion programme sub group. A Wellbeing and Inclusion sub group is also planned for Quarter 3. Further development of the model will also continue in Quarter 3.

Following a successful pilot in Quarter 1 of 3 Lifelines mental wellbeing training modules, the Lifelines trainer has delivered virtual sessions to 388 staff to the end of Quarter 2; 240 staff attended Staying Well and Understanding Resilience, 140 attended Supporting Your Colleagues/Team and 8 attended Post Trauma Support. A full programme of dates has been communicated within the staff weekly brief with routine reminder Communications sent out regularly. Quality Assurance and feedback processes are being collated for evaluation purposes in Quarter 3. In Quarter 2 engagement was carried out on financial projections and requirements to enable the Lifelines programme to continue into 2022/23.

In Quarter 1 the following campaigns from the annual wellbeing and inclusion calendar were supported: Stress Awareness Month, Mental Health Awareness Week, National Hydration Day, Men's Health Awareness Week, and a joint CPD event with P&P focussing on dementia. In Quarter 2 the launch of the suicide prevention plan took place on World Suicide Prevention Day. During this reporting period, development took place across digital platforms, to improve access and user engagement with HW materials.

1.9 Review the processes used to support the provision of pre-placement health and wellbeing assessments to improve attraction and recruitment of Retained and Volunteer Duty System Firefighters

In this reporting period a pilot, across Dumfries and Galloway and Western Islands, Orkney and Shetland of HW pre-employment engagement programme sessions (PEEPS) took place

to help improve RVDS candidate attraction and prepare candidates for participation in fitness assessments and practical selection tests. The success of this pilot was reviewed in Quarter 2 and it has been agreed that this will be extended across the Service from Quarter 3. A supporting suite of guidance videos is planned for Quarter 3 to further support attraction and prospective applicants.

In Quarter 1 a protocol was developed to support remote health screening of RVDS candidates to enable participation in on station engagement programmes. Further engagement took place in Quarter 2 with local recruiting managers to agree a framework to outline how this can be deployed in LSOs and a pilot, supported by HW, was completed.

Work was completed by HW in this reporting period to develop a process that would permit LSOs to identify appropriate local facilities and third-party service providers to support localisation of RVDS recruitment. A practitioner forum was established in Quarter 2 to help support the implementation of local arrangements.

1.10 Design and implement improved practices to reduce the risk from exposure of contaminants

HW are responsible for the delivery of two actions on the Contaminants Action Plan; Health Screening and Pregnancy and Fertility. In Quarter 1 2 actions were closed around the cycle of health screening and lung function screening and three actions closed around risk assessment arrangements for pregnant firefighters and their re-assignment to non-operational duties. In Quarter 2 work has progressed to raise awareness, through health promotion, of the possible impact of exposure to contaminants on health and wellbeing. A series of resources are now available on the HW LCMS platform and on the Platforms Application concerned with fertility awareness, hydration and cancer support. In Quarter 2 a health surveillance risk assessment was completed that will inform future policy and procedures within the department. In Quarter 3 work will begin on the development of guidance around the long-term effects of exposure to fire effluents and a protocol developed in relation to the process following exposure.

1.11 Deliver an integrated People and Training Systems to meet SFRS's current and future needs for recording and managing relevant personal information

People, Payroll and Finance Project Brief has approved by Programme Board and presented to the Change Committee for scrutiny. Moore Insight have now been onboarded and are implementing their approach to delivering Statement of Requirements and Business Case – they are completing their processes to develop a Target Operating Model, Target Equalities Model and Process Classification Framework Documents which will inform the Statement of Requirements and Business Case. These two documents are in turn required for procurement process that will follow. The procurement is expected to begin March-April 2022 and is anticipated to take 12 months followed by contract award and then implementation.

There will be an increasing focus on data once these documents are produced. We will have a significant task to understand our current data in terms of quality, completeness, location, content etc. This work is essential so that future systems are correctly populated with the data we need.

1.12 Strengthen and improve the SFRS approach to providing Accessible Communications for service users and employees who have a disability, other condition restricting communication/understanding or those for whom English is not a first language

The SFRS participate on the newly formed BSL Justice Advisory group which was established under commitment 61 of the BSL National Plan 2017–2023. Although the SFRS does not sit under the justice area, the principles around accessible communication are potentially still relevant to SFRS.

The SFRS continue to discuss potential areas of working with Police Scotland and the Scottish Ambulance Service. This includes considering a communication aide that can be used at an incident if individuals are non-verbal.

Consultation has taken place at a national level via Ofcom. Ofcom are now requiring telephone and broadband companies to offer a free, 24/7 video relay service for BSL users to contact the emergency services, via a dedicated mobile app and website. The SFRS will monitor progress around this and how it will relate to SFRS.

1.13 Deliver PVG Scheme project to ensure all relevant employees have this in place by March 2021

The PVG Project was initiated in May 2019 with the objective of ensuring compliance with the Protection of Vulnerable Groups Act 2007 to address the risk of legal non-compliance, and of employees presenting a risk to vulnerable people whilst carrying out activities on behalf of SFRS. Due to delays caused by COVID and capacity to support, the projected completion timescale was extended to October 2021. However, this was completed in July 2021 and the closing report was approved by SMB.

The project identified that all Operational employees in the roles of Firefighter to Head of Function (Operational) came within the scope of the Act, and were therefore required to gain PVG Scheme membership to carry out core aspects of their role. Between May 2019 and July 2021, all in-scope operational employees (circa 6,200) submitted applications for PVG scheme membership, were assessed by Disclosure Scotland, and awarded PVG Scheme membership.

SFRS's Employment and Criminal Convictions policy was also revised to reflect the enhanced PVG scheme membership requirements, and SFRS's processes for storing and transmitting information supplied as part of the PVG membership processes.

Corporate standards were additionally developed to ensure that pre-employment checks of prospective employees were sufficient to protect SFRS, but also met both the terms and the spirit of the Rehabilitation of Offenders Act (Scotland) 2019.

1.14 Implement robust sustainable arrangements for the mainstreaming of equality, diversity, inclusion and human rights

SFRS services are accessible and appropriate to the needs of Scotland's diverse communities. Scotland will be a safer and fairer place as a result of our collaborative work with other organisations. SFRS is an inclusive employer with a workplace which reflects the diversity of Scottish society. SFRS staff feel valued and have the opportunity to achieve their full potential. SFRS employees are supported on mental health and wellbeing in line with policies and initiatives. SFRS will support Scotland's young people reach their full potential

Our Equality Outcomes and Mainstreaming Report was published in April and will now be an annual report on progress made to mainstream equality and further the aims of the public-sector equality duty.

2. Management Information

This section focuses on data in relation to the following objective:

Strengthen and continually review our approach to Strategic Resourcing Planning, ensuring that SFRS current and future workforce requirements are understood and planned for:

2.1 Actual Full Time Equivalent (FTE) staff against Target Operating Model by employee group including actual headcount

EMPLOYEE GROUP	Wholetime (WDS)					Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS				
Target Operating Model (FTE)	3021	363	256	-	3640	54	3309	384	170	818	8375
Initiatives, Projects and Capital Funded	-	23	25	-	48	-	-	-	13	51	112
Actual (FTE)	2913	349	279	49	3590	53	2412	289	174	793	7311
Actual (Headcount)	2914	350	279	49	3592	53	2790	289	180	854	7758

The Office of National Statistics reported that in July vacancies in the UK reached their highest level since records began in 2001. The SFRS is experiencing challenges to recruiting backfills in our Support Staff cadre. Our working theory is this may be due to the rising opportunities for the public.

As at 30th September 2021, SFRS employed 7230 people, equating to a headcount of 7788. The variance between the number of employees and actual headcount is reflective of where staff hold more than one role (dual contract). In addition to the figures in the above table 11 employees are on Secondment and 19 on Career Breaks.

The graph below illustrates the actual FTE against the budgeted TOM for each employee group for Quarter 2 2020/21 to Quarter 2 2021/22. Despite challenges presented by the pandemic, resourcing activity has been maintained.

To address TOM deficiencies, a Resourcing Recovery Group established during COVID continues to serve as a forum for ongoing engagement with stakeholders and ensure a focus

is maintained on supporting resourcing activity and taking action to meet SFRS Strategic Recovery Priorities.

We are increasing the intakes of Wholetime and Retained Firefighters in line with COVID impacts and future workforce projections, including the risk of deferred wholetime leavers who may opt to retire in Quarter 1 / Quarter 2 2022 due to the pensions remedy has been acted upon.

The Business Case Tactical Action Group (BCTAG) and BCTAG Subgroup established to co-ordinate the progression of over 200 additional posts (135 Business Cases and resultant backfill) to support COVID recovery continues to be pivotal to ensuring the realisation of these posts. The recruitment to these posts explains the variance between Support Staff TOM and Actual Headcount.

2.2 Number of staff vacancies by FTE

EMPLOYEE GROUP	Wholetime (WDS)					Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS				
Vacancy (FTE)	59	37	2	-	98	1	897	95	9	76	1176

We recognise that our RVDS establishment methodology is based on legacy approaches and is not illustrative of the actual requirement of our on-call stations. The National Retained and Volunteer Leadership Forum (NRVLF) has commissioned a project to fully review this. Following which our Workforce Planning information will add more value.

48 Wholetime Firefighter trainees commenced their Foundation Training Course in September 2021. We will be increasing intakes for 2022, for both Wholetime Firefighter and RDS Firefighter, aligned to workforce planning projections.

POD continue to support the NRVLF to scope and deliver improvements to the RVDS R&S process. We are already seeing the benefits of initial revisions to process that have been implemented. The Project Plan developed for 2022 adds flexibility and aims to support regular and increased intakes.

The RVDS Local Solutions Task & Finish Group have rolled out the Pre-Employment Engagement Programme (PEEP) nationally. Service Delivery colleagues are encouraging candidate participation in these sessions with ongoing engagement.

The review of the RVDS R&S Process continues and this will be further informed by the outcomes of the Task & Finish Project Report recommendations when available.

2.3 Percentage Staff vacancies

EMPLOYEE GROUP	Wholetime (WDS)					Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS				
Vacancy Rate (FTE as % of TOM)	2.0%	9.6%	0.7%	-	2.7%	1.9%	27.1%	24.7%	4.9%	8.7%	13.9%

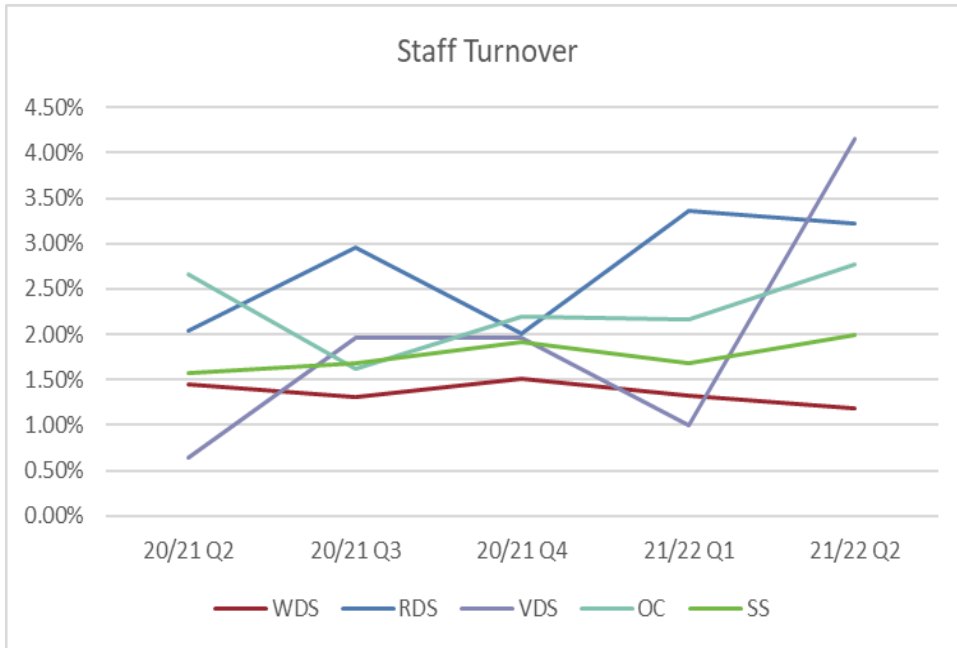
POD seeks continual improvement of recruitment processes. The management of promotion and transfer transactions has been reviewed to facilitate a more agile response and optimise availability of resource aligned to operational needs and this will continue to develop organically as we continue to assess our needs.

Linked to the BCTAG business cases and BAU activity, we are prioritising a review of support staff onboarding arrangements to bring about efficiencies in our approach and workstreams have been set up to progress this.

To support safe resourcing practice, our Generic Risk Assessment and Safe Systems of Work are under constant review to address COVID-19 resourcing challenges.

2.4 Percentage Staff turnover by employee group

EMPLOYEE GROUP	Wholetime (WDS)					Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS				
Turnover Rate	1.9%	5.1%	4.6%	-	2.5%	1.9%	6.6%	4.2%	5.0%	3.6%	4.2%



The graph above reflects staff turnover rates in the last 5 quarters.

The impacts of the pandemic can be observed throughout the illustrated turnover rates.

While the staff turnover rate for the 6-month period is 4.2%, it is significant to note we are observing an increase in resignations during the pandemic.

POD will continue to monitor this trend in relation to current market conditions, where we are seeing a slight downturn in the volume of applications being received for jobs; illustrative of current labour market shortages, to anticipate where we may experience difficulty in attracting candidates to some roles in the Service.

This section focuses on data in relation to the following objective:

Support, promote and monitor the development of a diverse workforce and inclusive culture, aligned with SFRS values:

3.1 Number of bullying and harassment cases broken down by staff group

There were three cases of bullying and harassment under investigation and being considered in accordance with SFRS policies. Due to the number of cases being less than 5, in terms of GDPR we are unable to provide any further analysis as this may identify individuals.

3.2 Total number of grievance cases concluded in six weeks

RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
1	1	1	3	2	-	-	1	6

There were 6 new grievances raised and concluded within this quarter. The main reasons for the grievances were breaches of SFRS Policy and Dignity and Integrity at work. 2 grievances were rejected, 3 were partially upheld and 1 was upheld.

3.3 Total number of discipline cases concluded within six weeks

RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
4	-	-	4	-	-	-	-	4

There were 4 new cases within this period. Due to the number of cases being less than 5, in terms of GDPR we are unable to provide any further analysis as this may identify individuals.

3.4 Number of new discipline cases arising

RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
12	-	1	13	3	-	-	-	16

There were 16 new cases within this period. Breach of the Code of Conduct continues to be the main reason for disciplinary matters. Work continues with Managers to ensure cases are concluded as timeously as possible or re-allocated to Managers who are available to conclude the cases.

3.5 Number of leavers questionnaires returned

The leavers process enables the collation and analysis of individual reasons for leaving the Service through an exit questionnaire and (optional) interview process. The exit interview outcomes are addressed with appropriate managers and work progressed this period to analyse the collective reasons which are detailed below. Where appropriate, this information is also considered within the Bullying and Harassment Project for further scrutiny and action.

	WDS	RDS	VDS	OC	SS	TOTAL
Leavers	89	185	15	9	31	329
No. of returned questionnaires	18	8	-	4	7	37

The figures in the table above reflect the number of questionnaires received for employees who left SFRS between 1st April and 30th September 2021. Of the 329 employees who left during this period (refer to chart 3.6 below), 37 employees (11%) completed an exit questionnaire. This is a 2% increase from the same period in 2020/21 where 237 employees left SFRS, with 22 employees (9%) completing an exit questionnaire.

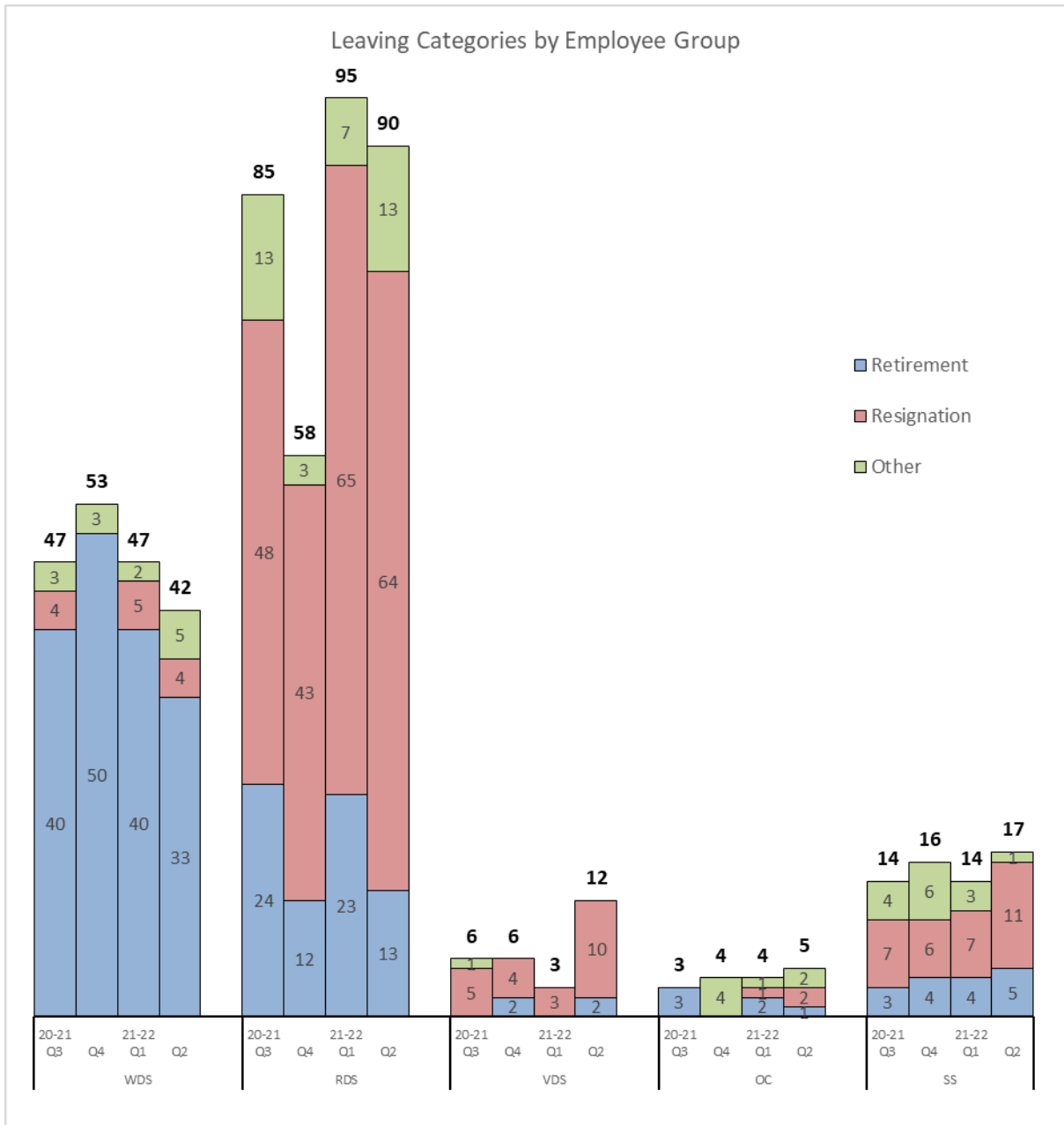
From the 37 questionnaires received, 49% (18) were from staff who resigned and 51% (19) from staff who retired. 89% (16) of the staff who resigned, overall had a good experience within the Service, with 11%, (2) saying they had not. Of the staff who retired 100%, (19) overall had a good experience with the service.

Of those 37 employees who completed a questionnaire, 6 said they had personally witnessed or experienced discrimination at work, with 6 stating they had personally or witnessed or experienced bullying or harassment at work and 3 preferring not to say.

A number of reasons were cited from those who resigned from the Service. From the list of 17 potential reasons, the main reasons are detailed below:

- Job opportunities 6 (33%)
- Work related issues 7 (39%)
- Location 1 (5%)
- Caring responsibilities 1 (5%)

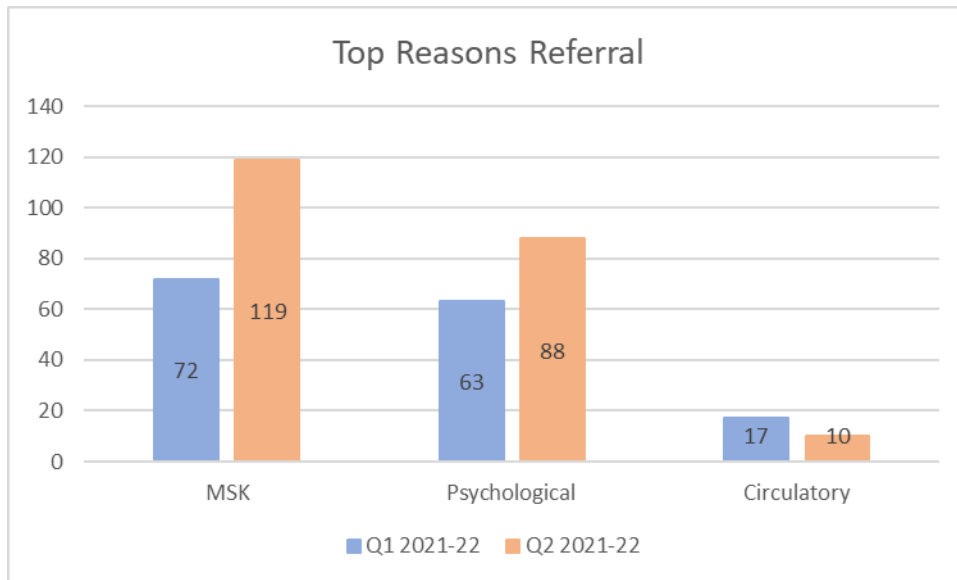
3.6 Top three Leaver reasons by staff group



This section focuses on data in relation to the following objective:

Strengthen health, wellbeing and fitness arrangements to enable staff to safely and effectively undertake their roles:

4.1 Top three reasons for management referrals



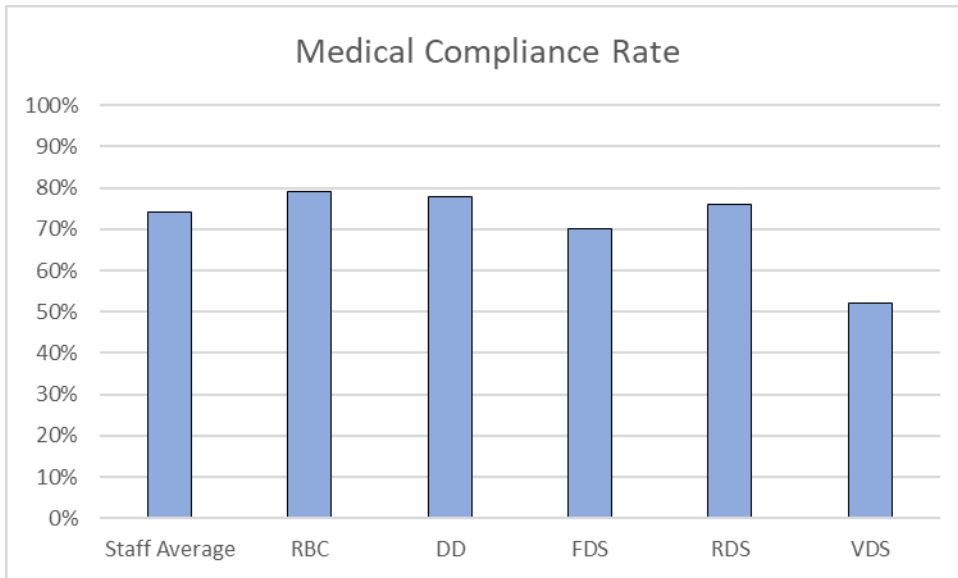
The top 3 reporting reasons for referral for the 6-month reporting period are as follows;

- Musculoskeletal (191)
- Psychological (151)
- Circulatory (21)

The top 2 reasons for referral continue to be MSK Injury and Psychological as reported in previous reports. The Psychological referrals are broken down into 2 further reasons of stress (112) and mental health (39) and are reported quarterly to the Mental Health Group.

This shows a typical rate of top referral reasons for MSK and Psychological conditions with a noted increase of 27 psychological referrals which may be explained by the various impacts Covid has had on the population. The 3rd top referral reason has changed from respiratory to circulatory. This could be explained due to the upsurge in Covid cases in the previous 6 months and the more serious impact of the virus prior to vaccinations being rolled out. The 3rd most common reason is always far fewer than the top 2 reasons and this remains the case in this reporting period.

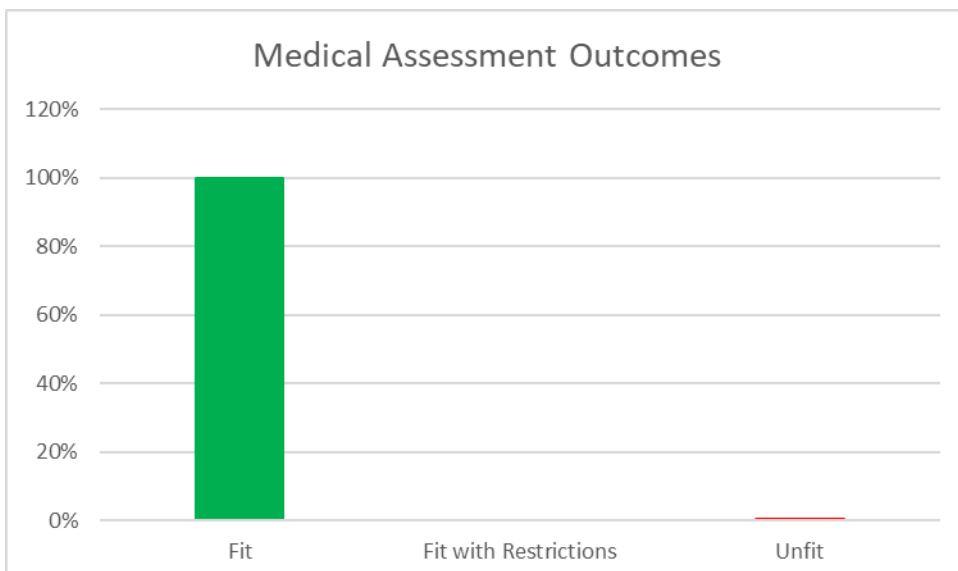
4.2 Percentage medical compliance



Medical Compliance refers to the percentage of staff who have completed a medical assessment within the past 3 years. The graph shows the current medical compliance rate at the end of this 6-month reporting period.

A recent onboarding of technicians will allow much needed support in ensuring that all outstanding medicals are captured, bringing our compliance back to pre-pandemic numbers.

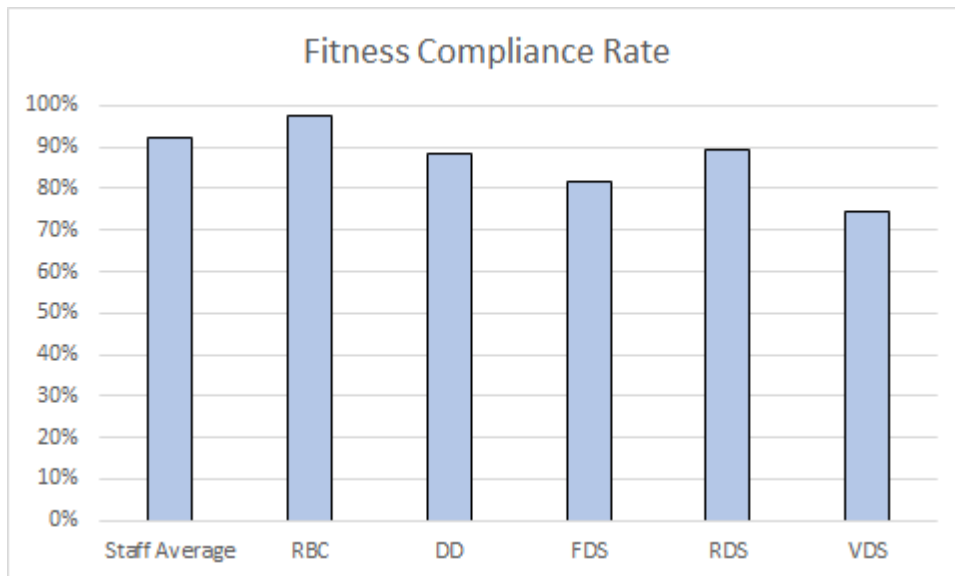
4.3 Percentage staff fit, fit with restrictions, unfit



When considering the fitness for role following medical, only 1 operational employee was deemed unfit in the 6-month reporting period and no staff were declared fit with restrictions. Therefore, those who were assessed and passed their medical was 99.8%. This does not

consider those who are absent or are on restricted duties due to health reasons through the management referral process.

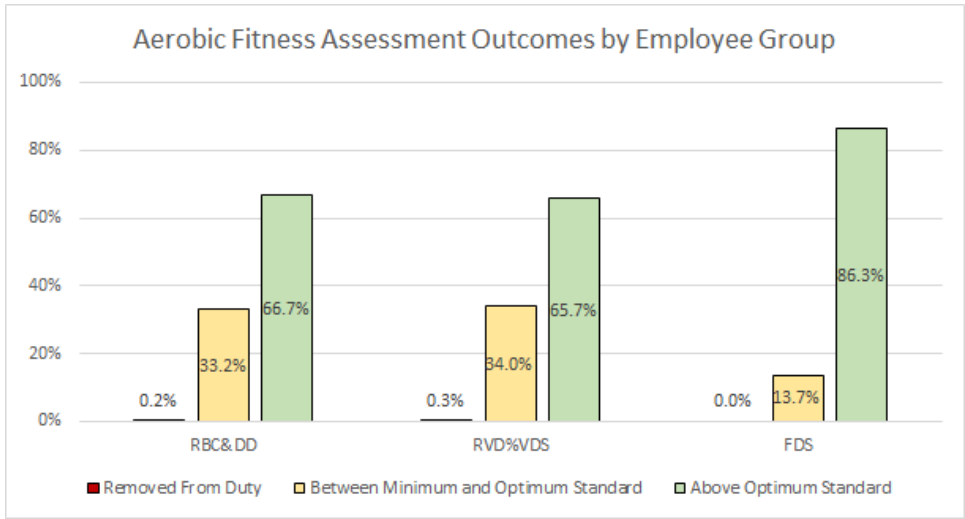
4.4 Percentage fitness compliance



The chart above shows the current fitness assessment compliance rate at the end of the 6-month reporting period. Since this PI was last reported in Quarter 4 2020/21 there has been a 5% increase in the fitness compliance rate across all staff groups. It is estimated that 100% compliance will be regained in Quarter 1 2022/23.

4.5 Aerobic fitness outcomes FF – WC

The percentage of RBC and DD, RVDS and FDS employees attaining above the optimum fitness standard for their role, between the minimum and optimum and below the minimum fitness standard for their role is shown in the chart below.



66.7% of RBC and DD staff and 65.7% of RVDS staff achieved the optimum standard for their role. In comparison to data reported in Quarter 4 2020-21 this represents decrease of 10.4% for RBC and DD staff and 1.7% for RVDS staff however the percentage of staff removed from duty has remained consistent. Due to this it is believed these figures are most likely a result of changing assessment practices as a result of COVID-19 rather than changing fitness levels within the workforce. However, HW will look to monitor this more closely over the coming months.

4.6 Aerobic fitness outcomes Senior Officers

86.3% of FDS staff attained the optimum standard for their role, this is a 2.2% decrease in comparison the Quarter 4 2020/21. It should be noted that the operational fitness standards for FDS staff are lower than for staff in Firefighter, Crew and Watch Commander roles which explains the higher rate of FDS staff attaining the optimum standard for their role.

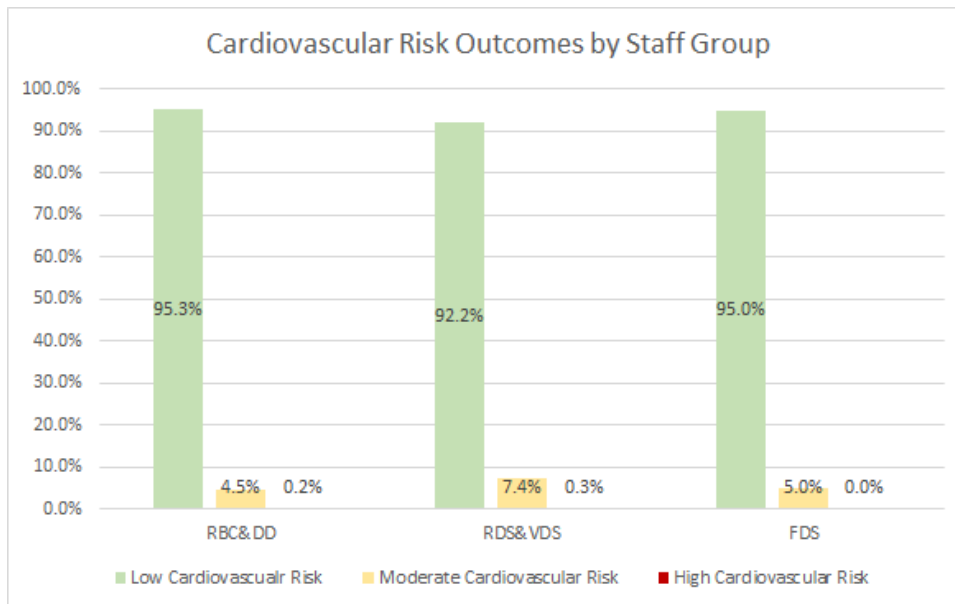
4.7 All staff removed from operational duty

12 staff are currently removed from Duty due to attaining below the minimum fitness standard for their role. This includes 5 RBC & DD staff and 7 RVDS staff. No FDS staff have failed to attain the minimum standard for their role.

4.8 Cardiovascular risk

The percentage of RBC and DD, RVDS and FDS employees identified as being at low, moderate or high cardiovascular risk is shown in the chart below.

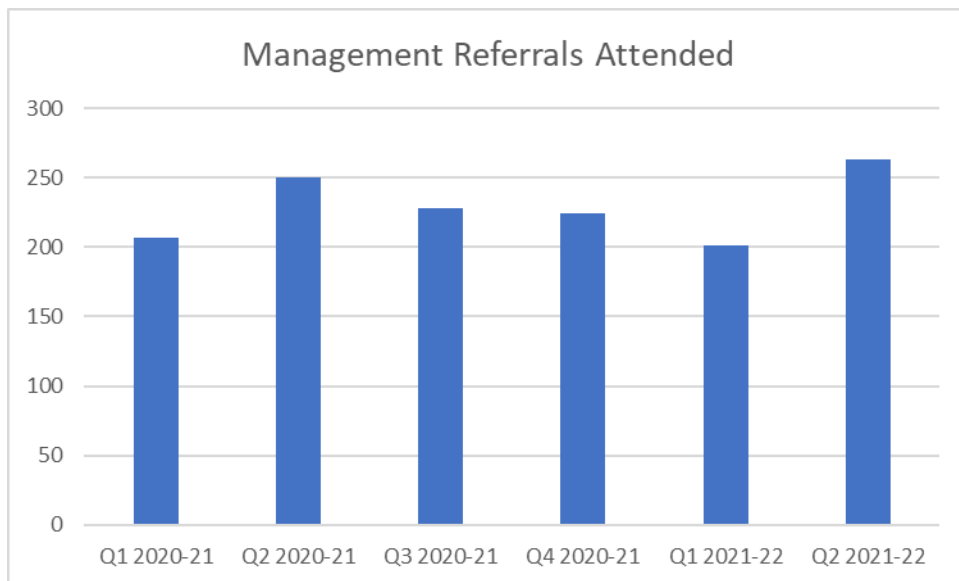
In comparison to Quarter 4 2020/21 there has been a reduction in the number of staff being identified as at low cardiovascular risk across all staff groups with RBC & DD staff group decreasing by 2.7%, RVDS & VDS by 3.4% and FDS by 4.5%.



Coupled with the data on aerobic fitness this highlights a concern that there has been a decline in staff health and fitness.

A possible contributory factor may be that this is a result of changes to lifestyles as a result of COVID-19. This may only be coming to light now, as routine fitness assessments were resumed early in 2021. HW will look to analyse this trend more closely to better understand potential reasons for this and if required identify further interventions that may support staff health and fitness.

4.9 Number of management referrals

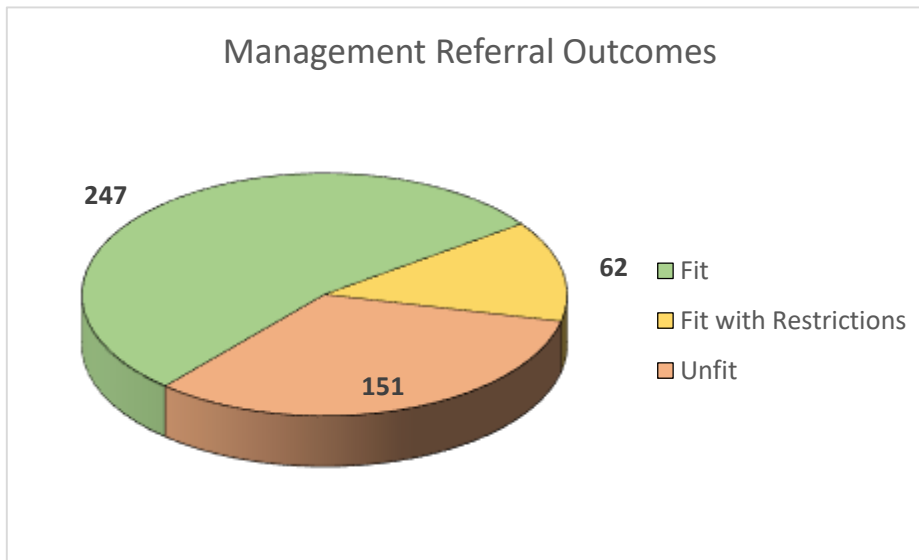


There were 527 New management referrals in the 6-month period. This represents 223 referrals in Quarter 1 and 304 in Quarter 2 of the 6-month period. Of the 527 referrals, 461 attended, 25 cancelled and 41 employees' DNA their appointment

This was an increase of 7 referrals compared with the previous 6-month period (Quarter 3 and Quarter 4 2020) and increase of 2 referrals who attended Health and Wellbeing when comparing to the same reporting period the previous year.

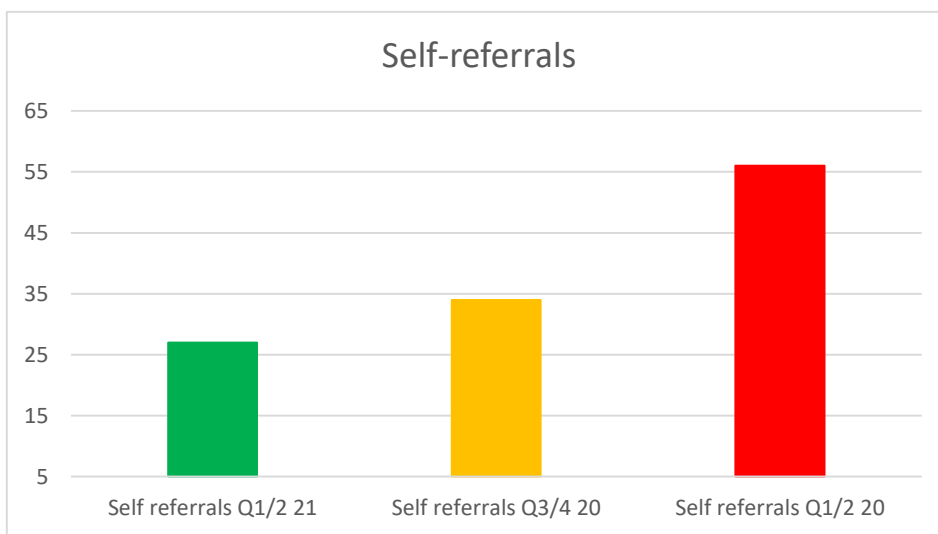
Although there was an increase of 38 referrals compared to the previous 6 monthly reporting period the numbers of staff attending their Management referral appointments were stable, with very little change and this was similar to the numbers attending appointment in the same reporting period of the previous year.

4.10 Management referral outcomes



This graph illustrates the fitness outcomes of the 460 New management referral cases in the categories of fitness for work at time of referral appointment.

4.11 Number of self-referrals



Of the 30 self-referrals made to Health and Wellbeing in the 6-month period, 27 appointments were attended, and this was a reduction from the previous 6-month period (34 self-referrals). There was a notable difference of self-referrals in the same reporting period of the previous year where there were 56 referrals, and this would possibly be as a result of the earlier stages of the Covid pandemic which was a challenging time for many employees.

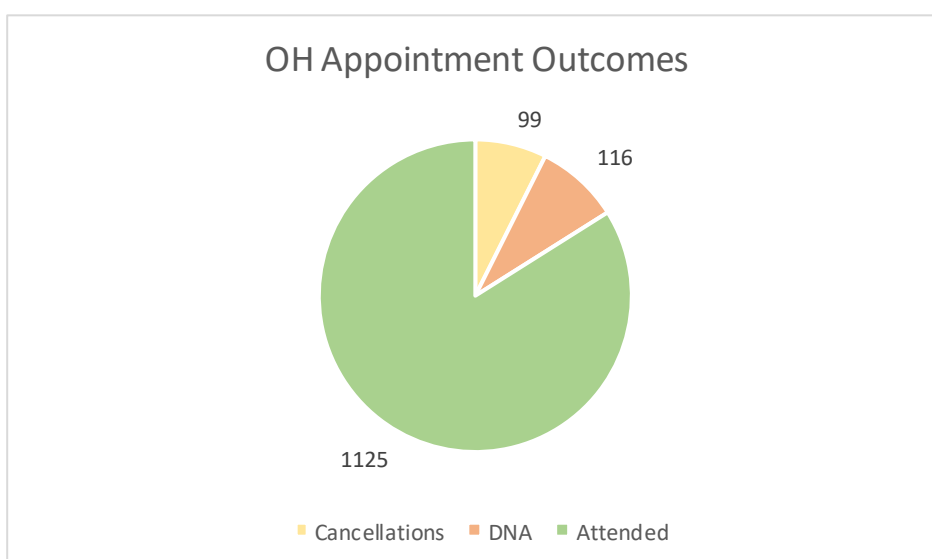
4.12 Top three reasons for self-referrals



The information in the graph highlights the top 3 reasons for self-referral. Self-referrals are generally low in number and are typically mostly for stress or MSK conditions. The 3rd tends to vary but with very low numbers.

The low self-referral numbers may reflect the high number of management referrals which would be a positive indication that managers have an awareness of staff health issues, leading to discussion and referral, in particular for stress cases.

4.13 Number of appointments cancelled or not attended



The graph above illustrates the total number of appointments which are allocated through Health and Wellbeing and the number of those appointments which were cancelled or DNA. These appointments are for New Management Referrals, management referral reviews and self-referrals. Appointments are arranged via telephone call and this has been positive in managing appointment allocation and choice of appointment times to staff. There has, however been a decrease from 96% to 91% compliance from the previous reporting periods. To combat the falling compliance, Health and Wellbeing staff will continue to populate mobile numbers into the text reminder service as employees are seen at point of contact. Further analysis of activity around non-attendance at appointments will be undertaken in Quarter 3/4 with a view to engagement at a local level to improve appointment uptake.

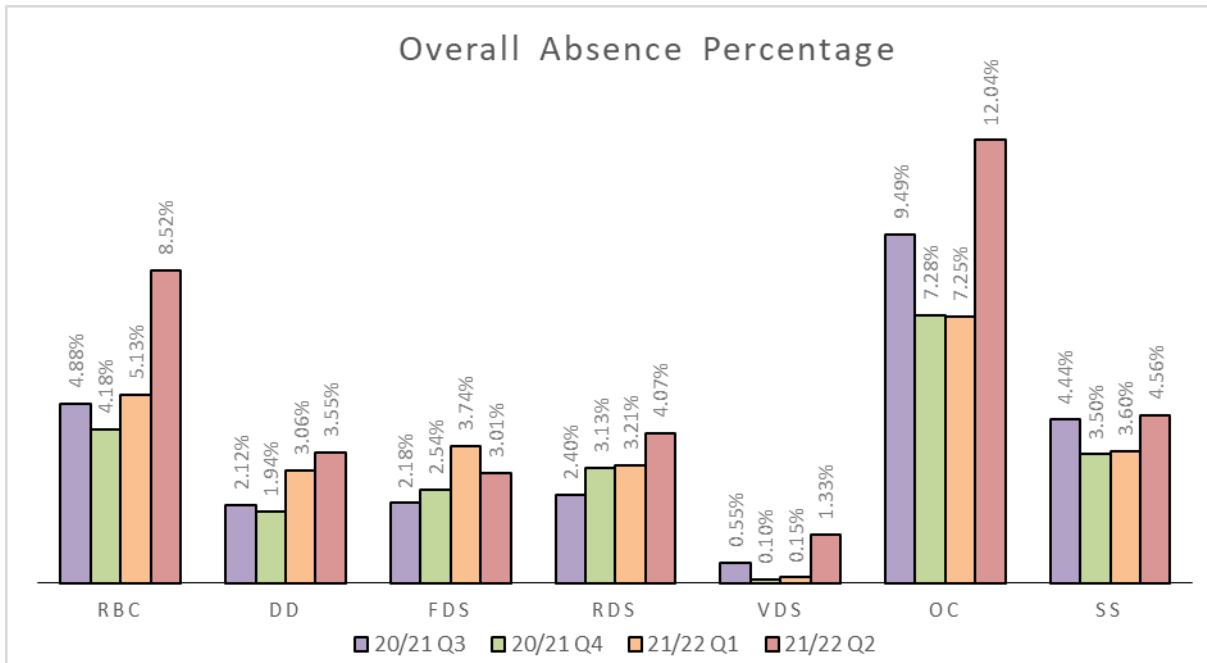
This chart illustrates the DNA numbers in the 6-month reporting period and includes all appointment types as highlighted above. DNA numbers have increased from 7% to 10% of all appointments when comparing to the previous reporting period. This may be attributed to the longer holiday periods in the spring/summer months, however there was a similar comparative from the same reporting period from the previous year where it was reported as 7% also. In this quarter there have been systems issues with the text reminder service that may have impacted the attendance figures. This issue has now been resolved and will be monitored in the next reporting period.

4.14 No. of staff on modified duties

RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
19	1	-	20	32	-	-	-	52

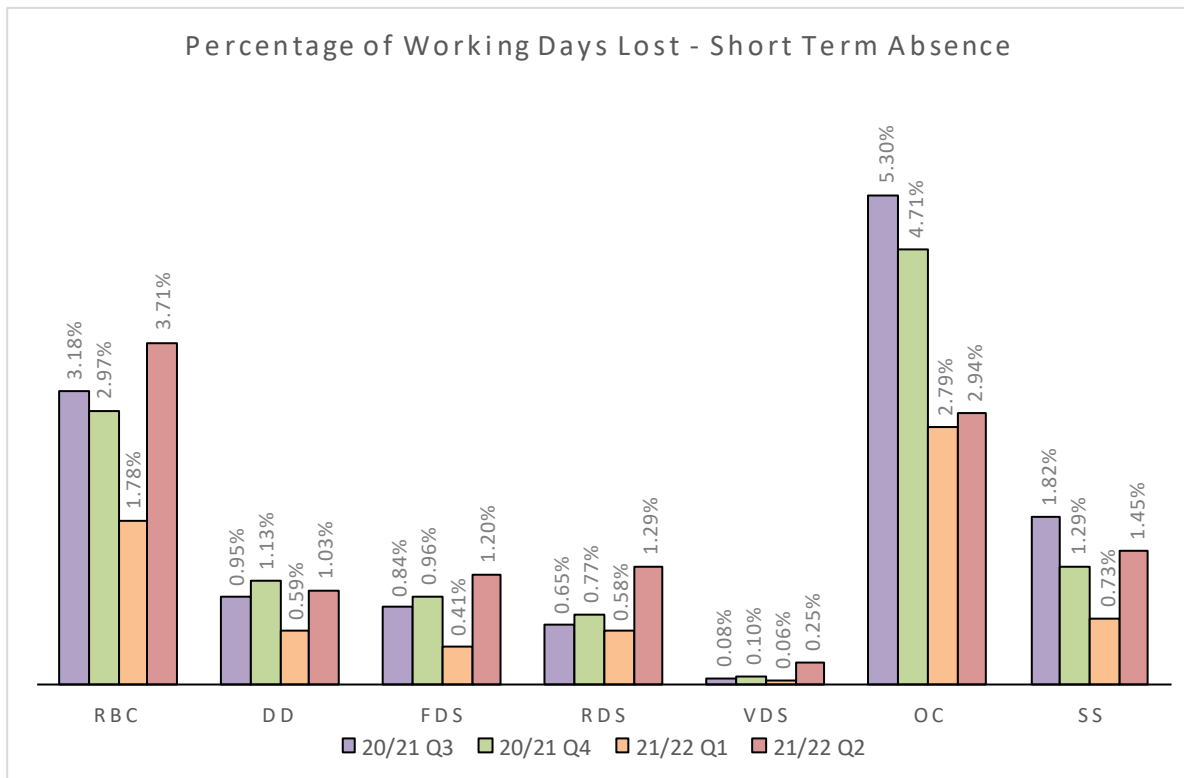
The above table shows the total number of employees who have been undertaking alternative duties, on a temporary basis, until they become fit for operational duty in this quarter. This includes those who have been on long-term absence and have been able to return to the workplace on alternative duties as part of supporting their return to work, but also as a result of other factors for example those removed from operational duties due to attaining below the minimum fitness standard for their role

4.15 Overall absence percentage



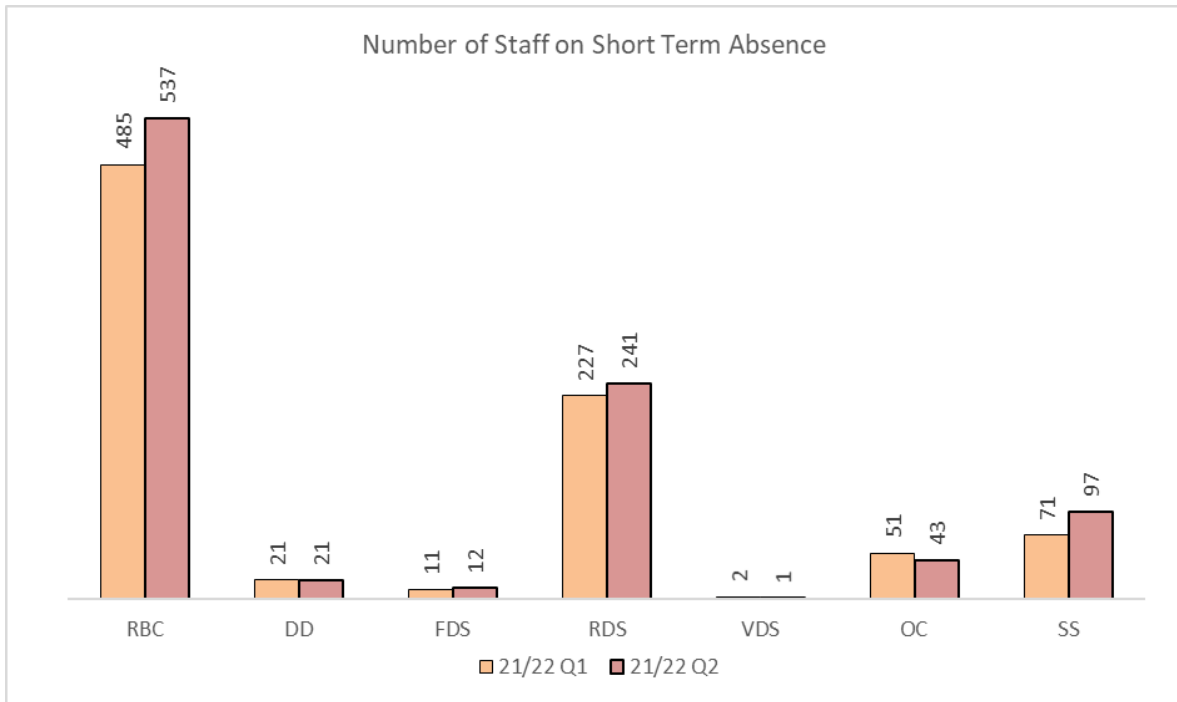
The average overall absence percentage for all SFRS working days lost in Quarter 2 is 5.2% which is an increase of 1.6% compared to the previous quarter. Whilst absence has increased across all employee groups, this figure includes COVID-19 related absence which is likely to account for a proportion of this increase where the levels of COVID absence increased in Quarter 2.

4.16 Percentage of working days lost against days available – Short-term absence



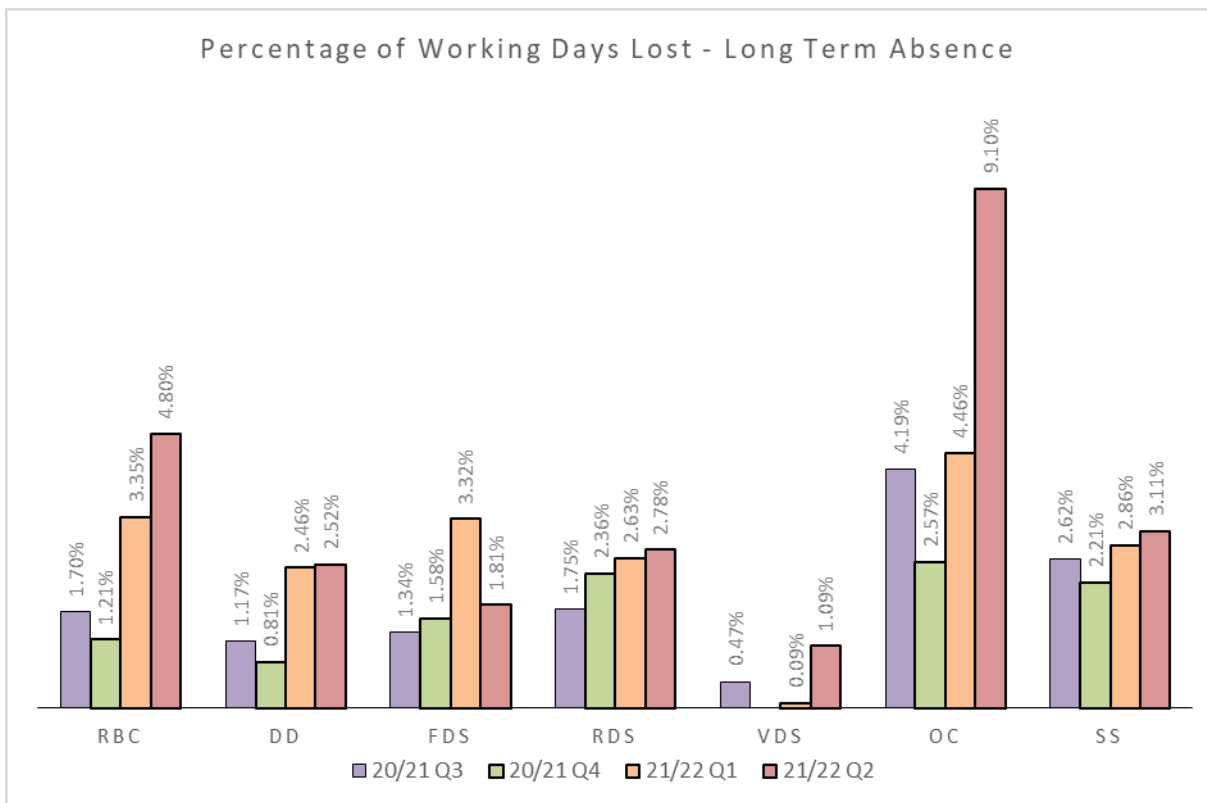
This chart shows the percentage of work-days lost due to short term absence as a percentage of work-days available within the previous quarters. In line with the overall increase in the absence rate, it can be seen that there has been an increase in short term absence across all employee groups in this quarter.

4.17 Number of Staff on Short-term absence



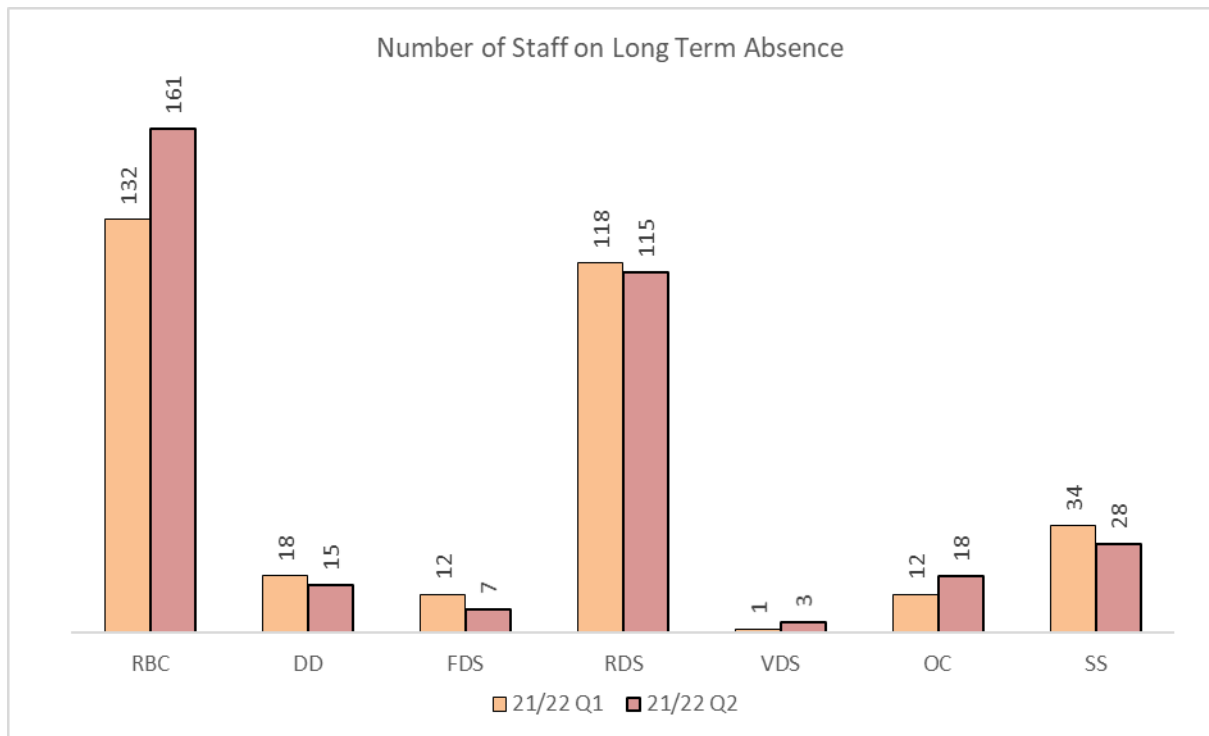
This new chart shows the number of employees absent in the previous 2 quarters and is reflective of the analysis shown above.

4.18 Percentage of working days lost against days available – Long-term absence



This chart shows the percentage of work-days lost due to long term absence as a percentage of work-days available within the previous quarters. In line with the overall increase in the absence rate, it can be seen that there has been an increase in long term absence across all employee groups, with the exception of FDS.

4.19 Number of Staff on Long-term absence



This new chart shows the number of employees absent in the previous 2 quarters and is reflective of the analysis above.

4.20 Short-term absence by top three absence reasons

Short Term Sick - Top 3 Reasons	Musculoskeletal	Stomach / Bowel	Respiratory	Other	TOTAL
RBC	1087.5	359	300.5	573	2320
DD	84.5	7	9	14	114.5
FDS	5	8	3	46	62
RDS	1024.5	157	154.5	430	1766
VDS	12	-	-	-	12
OC	30	20	40.5	70.5	161
SS	114.5	79	66.5	165.5	425.5
Total Working Days Lost	2358	630	574	1299	4861
Number of Absences	413	226	182	289	1110
Number of Employees	375	205	141	231	952

4.21 Long-term absence by top three absence reasons

Long Term Sick - Top 3 Reasons	Musculoskeletal	Psychological	Surgical	Other	TOTAL
RBC	2669.5	590	530	909.5	4699
DD	80	128	189	89	486
FDS	27	228	27	-	282
RDS	4115	1109	484	1277.5	6985.5
VDS	135	-	-	92	227
OC	208	131	44	254	637
SS	366	498	50	198	1112
Total Working Days Lost	7600.5	2684	1324	2820	14428.5
Number of Absences	183	69	39	83	374
Number of Employees	169	66	39	73	347

The tables above at 4.20 and 4.21 show the main reasons for employee absence in terms of working days lost, for both short and long-term absence, and the total number of employees absent within these categories in this quarter.

Musculoskeletal (MSK) issues continue to be the main reason for both short and long-term absence. Quarter 2 shows an increase of 1648.3 working days lost due to long-term absence due to an MSK issue and a decrease of 101 employees in comparison to Quarter 1. The short-term absence category shows an increase in this quarter of 695 working days lost and an increase of 105 more employees absent for this reason. This is due to the working days available within the reporting period for the individual staffing categories working patterns.

When comparing absence reasons, it is noted that psychological conditions is not present in the short-term table above, as the data returned was not high enough to make the top 3 reasons and this was the same for Quarter 1. There has been an increase of 39 employees in long-term absence in comparison to Quarter 1.

The MSK Injury Reduction Group have initiated a review of MSK injury related data collected by Safety and Assurance, HW and HROD. There is a shared vision to integrate reporting and improve collaborative working across each function to ensure compliance with event reporting and managing attendance policies and better understand what the data is telling us. A key area of focus is to improve understanding of the types of injury and causes of injury that lead to staff absence.

4.22 COVID-19 Absence

CURRENT QUARTER

Days lost to Sickness	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Displaying Symptoms (Duty Days)	1724.5	278	124	1772.5	120	69	372	4460
No. of Absences	359	27	16	210	7	16	36	671
No. of Employees	286	23	14	159	5	11	31	529

Days lost to Special Leave	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Isolation/Quarantine (Total Days)	6156	151	271	3413	30	145	328	10494
No. of Absences	1185	31	21	574	7	44	51	1913
No. of Employees	951	28	19	477	5	38	41	1559

PREVIOUS QUARTER

Days lost to Sickness	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Displaying Symptoms (Duty Days)	398.5	27	8	139.5	-	14	134	721
No. of Absences	77	6	2	28	-	2	12	127
No. of Employees	67	6	2	27	-	1	9	112

Days lost to Special Leave	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Isolation/Quarantine (Total Days)	1985	65	130	997	23	84	138	3422
No. of Absences	367	9	11	138	3	21	30	579
No. of Employees	347	9	11	125	3	17	29	541

There has been a substantial increase in the number of COVID-19 related absences compared to the previous quarter and this is reflective in the overall increase in absences of 1.6%. In comparison to Quarter 1, the combined increase from days lost due to both sickness and special leave is 10,811 days and 1435 employees. This was anticipated as restrictions eased and is reflective of Scottish Governments figures.

We continue to provide a range of support interventions aimed at supporting staff affected and these are reviewed on a regular basis as the pandemic progresses.

Appendix 1 – Data Analysis

Where data reported involves less than five employees, further analysis is not being included to ensure that individuals cannot be identified. This would breach the principles of DPA 2018 and GDPR as defined below.

“Personal Data” is defined in Section 3(b) of the DPA 2018 as any information relating to an identified or identifiable living individual, who can be identified, directly or indirectly where one or more one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of the individual. Article 4 of the GDPR, ‘profiling’ means any form of automated processing of personal data consisting of the use of personal data to evaluate certain person aspects relating to a natural person, in particular to analyse or predict aspects concerning that natural person’s performance at work, economic situation, health, personal preferences, interests, reliability, behaviour, location or movements.

Personal Data is exempt from disclosure if disclosure would contravene any of the data protection principles in Article 5(1) of the GDPR.

Appendix 2

AMPP	Apprenticeship Mentoring Pilot Programme
BAU	Business as Usual
BCTAG	Business Case Tactical Action Group
BFT	Building the Future Together Programme
BSL	British Sign Language
DNA	Did Not Attend
DPA	Data Protection Act
FBU	Fire Brigade Union
FDS	Flexi Duty System
FTE	Full Time Equivalent
GDPR	General Data Protection Regulations
HROD	Human Resources and Organisational Development
H&S	Health and Safety
HW	Health and Wellbeing
LCMS	Learning Content Management System
LDC	Leadership Development Centre
LFCP	Leadership for Change Programme
LGBT	Lesbian Gay BI Trans
LNA	Learning Needs Analysis
LSO	Local Senior Officer
MA	Modern Apprentice
MRM	Management Referral Module
MSK	Musculoskeletal
OC	Operations Control
OHP	Occupational Health Physician
PEEP	Pre-Employment Engagement Programme
PI	Performance Indicator
POD	People and Organisational Development
PVG	Protection of Vulnerable Groups

R&S	Recruitment and Selection
RBC	Resourced Based Crewing
RDS	Retained Duty System
RVDS	Retained Volunteer Duty System
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SLT	Senior Leadership Team
SMB	Senior Management Board
TASS	Think Act Stay Safe (Health & Safety electronic management system)
TOM	Target Operating Model
TOR	Terms of Reference
TSA	Training Safety and Assurance
VDS	Volunteer Duty System

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**Report No: C/PC/30-21
Agenda Item 7.2**



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

**TRAINING, SAFETY AND ASSURANCE DIRECTORATE
PROGRESS AND PERFORMANCE REPORT
QUARTER 2 2021-22**

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5.3 Health and Safety Key Performance Indicators.	

Introduction

This report outlines the performance measures collated by the Training, Safety and Assurance (TSA) Directorate against the Priorities set out by Scottish Government in the Fire and Rescue Framework for Scotland 2016 which states “***The SFRS should aim to be an employer of choice – maximising the effectiveness of its approach to Workforce Planning; promoting the safety, health and wellbeing of all staff; and being a learning organisation with opportunities for all. The SFRS should also seek to be an organisation that is more representative of the people and communities that it serves.***” In turn these priorities have been identified in the SFRS Strategic Plan as “***We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services.***”

For ease of reference, the report has two distinct sections; one for Training and the other for Safety & Assurance, with each section reporting on key metrics, risk performance and analysis.

The COVID-19 Pandemic has remained the main challenge for the Directorate and continues to have a significant impact during this period with resources being allocated to support employees, whilst addressing emerging Directorate, Organisational and National issues. The impact of COVID-19 is highlighted within the relevant sections of this report. However, the key challenge is the significant reduction in the quantity of student places that can be accommodated on courses due to social distancing restrictions restricting numbers by up to fifty percent in most cases.

Key successes for the Training Function within this quarter include:

- 48 new Retained and Volunteer Duty System (RVDS) Trainee Firefighters placed at training venues throughout the Service area completed their Task and Task Management course;
- 50 RVDS Trainee Firefighters completed their Breathing Apparatus and Fire Behaviour training;
- 36 Wholetime Trainee Firefighters completed their Foundation Training programme at the National Training Centre, and a further 11 Wholetime Trainee Firefighters commenced at Newbridge Training Centre;
- Online delivery of Incident Command Level (ICL) 2 & 3 course delivery which were previously delivered in person at the National Training Centre (NTC) Incident Command Suite are now being delivered to all Flexi Duty Officers (FDO's) virtually;

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- Ongoing implementation of the modular ICL1 course as an alternative to the traditional 5-day delivery model;
- Marauding Terrorist Attack response training provided in preparation for Conference of the Parties (COP26) event (*see Section 3. Spotlight Report for further details*); and
- A review of the Training for Operational Competence Framework (TfOC) has been undertaken and proposed improvements are now undergoing consultation with Service Delivery Areas and Directorates.

Key success for the Safety and Assurance Function this quarter include:





- Completion of 2 new Management Arrangements and supporting Learning Content Management System (LCMS) modules and a review of 4 existing modules;
- Refining of COVID-19 arrangements to assist end user and the recommencement of some SFRS activities;
- Working closely with Operations to develop various risk assessments and safe systems of work in support of COP26; and
- Development and agreement on a new format of Periodic Inspection and Testing for Operational Equipment.

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1. Risk Movement

Directorate objective	Update on significant successes/challenges	Action taken to mitigate/reduce risk	Link to Risk Register (risk movement)	Progress from last quarter
<p>Ensure there is sufficient staff capacity and resources available to meet Service training demand.</p>	<p>There has been an increased focus on risk critical training.</p> <p>Skills refresher training undertaken for “day duty” staff in preparation for front line operational redeployment if required.</p> <p>Training pathways for re-engagement of former staff have been developed.</p>	<p>A “State of the Nation” Gap analysis has been undertaken and draft proposals for a Training Recovery Plan have been devised in liaison with Service Delivery business partners. This will be integrated into the Reset, Renew and Recovery planning via the People & Leadership work stream.</p> <p>National Training Instructors are supporting Service Delivery Area (SDA) Instructors to ensure sufficient capacity to deliver specialist training courses in local areas (e.g. Rope Rescue and Water Rescue Courses).</p> <p>Additional managers and instructors are joining the Training Function to support the Training Function Continuous Improvement Programme and support the implementation of the Training Review recommendations.</p>	<p>SR5</p> <p style="text-align: center;"></p>	<p style="text-align: center;"></p>

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<p>Availability of our facilities' capacity to host training due to the restricted numbers allowed whilst observing social distancing restrictions.</p>	<p>There has been an increased focus on risk critical training with minimal courses being facilitated at National Training Centres and with training being facilitated locally wherever possible.</p>	<p>COVID-19 Risk Assessments undertaken at each Training Centre site to revise capacity and ensure social distancing measures can be observed. Joining Instructions revised to incorporate COVID-19 prevention guidance.</p> <p>Full review conducted of Business Continuity Plans for the Function and each of our Training Centres.</p> <p>Quality Assurance support visits facilitated by National Training Instructors and Officers to assist SDA Instructors delivering local training events (e.g. Red, Amber and Green Phase Assessments for Firefighters in Development).</p>	<p>SR9</p> <p style="text-align: center;"></p>	<p style="text-align: center;"></p>
<p>Develop and facilitate implementation of an in-house Health and Safety Management Information System (HSMIS).</p>	<p>2 modules from Phase 1 complete with 1 module live, Work commenced on development of a further 2 modules. Delay in going live due to refining of the management reporting functionality within each module.</p>	<p>Enhanced liaison with ICT in place.</p>	<p>TSA5/SR4</p> <p style="text-align: center;"></p>	<p style="text-align: center;"></p>

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Develop and facilitate SFRRS, SDA/Directorate Health & Safety (HS) Improvement Plans.	Engagement with SDA/Directorates on going to progress HS improvement plans. The impact of COVID-19 has reduced resources to progress some aspects of the plan.	HS Dept. has deferred some lower risk actions to 2021-22 to accommodate impact of COVID-19. Improvement in the completion of actions compared to compared to previous year is noted.	TSA5/SR4 	
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Table 1: Risk Movement

Link to Risk Register

-  Risk has not changed since previous quarter
-  Risk has decreased since previous quarter
-  Risk has increased from previous quarter

Progress from last Quarter

-  Actions taken has improved progress against objective
-  Actions taken/lack of actions taken with no progress made against objective
-  Actions taken/lack of actions resulting in slippage of objective

2. Spotlight Report –Marauding Terrorist Attack Response Training

Across the United Kingdom, there have been an increasing number of tragic incidents which would meet the definition of a Marauding Terrorist Attack (MTA) type event. These attacks range from small scale single actor attacks, to significant, pre-planned and coordinated events.

What many of these attacks share in common, is the fact that fire and rescue service personnel have been at the forefront of the dynamic operational stage of these events. This has seldom been through deliberate mobilisations to a terrorist event, but to more business-as-usual and innocuous incidents, such as attending an automatic fire alarm or minor road traffic collision. On arrival to these incidents, crews have subsequently been faced with an entirely different scenario from that which they envisaged; one which placed them in greater uncontrolled risk from what they would normally encounter. It is reasonably foreseeable that Scottish Fire and Rescue Service (SFRS) personnel could be exposed to such risks in the future, and as such, the Service must take appropriate steps to mitigate and control this risk, as far as is reasonably practicable.

COP26 will place Scotland on the world stage and, regrettably, this increases the threat to Scotland of such an attack, not only during the event itself, but also in the lead up to the event and indeed during the months which follow. It is, therefore, important that SFRS has a specialist responder capability in place for dealing with this type of incident.

Throughout Q2 2021-22, MTA Response Training has been delivered to staff who have volunteered to undertake this specialist training. Volunteer staff have included Flexi Duty Officer's (FDO) and station based staff from Govan, Stirling and North Anderson Drive Community Fire Stations (CFS).

A training package consisting of the elements below has been developed through a tri-service approach;

- 1 Day MTA Technical Input;
- 2 Day MTA Trauma Training; and
- 1 Day MTA Warm Zone Operator Training.

This training has been delivered through a combination of Training Function Instructors and National Inter-Agency Liaison Officers (NILO), with delivery taking place across a range of locations, including the National Training Centre, Newbridge and Portlethen Training Centres, and also at Govan, Stirling and North Anderson Drive CFS.. Table 2 (below) identifies the number staff who have received MTA training during Q2.

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Training type	Flexi Duty Officers (FDO)	Station Based Staff	Totals
MTA Technical Input	184	76	260
MTA Trauma Training	100	76	176
MTA Warm Zone Operator Training	38	9	47

Table 2: Number of staff receiving MTA training courses during Q2 2021-22

Delivery of the 1-day MTA Warm Zone Operator training has been carried out in partnership with staff from Special Operations Response Team (SORT) from Scottish Ambulance Service (SAS), wherever their resources permitted. Working together in training and exercising enhances the learning experience and is invaluable in helping ensure that, when an incident does occur, we are able to respond collaboratively and effectively.

The delivery of MTA training has demonstrated the ability of the Training Function to adapt and to the changing needs and priorities of the Service, and to ensuring that our staff are trained to respond safely and effectively. This has been achieved through adopting a flexible approach and through the dedication and professionalism of the Training Instructors, NILO's and SORT staff. This work continues in Q3.

4 Training Analysis

4.1 Operational Readiness: Training for Operational Competence

Operational readiness is measured across competence in Core Skills, Incident Command, Specialist Skills and Maintenance Phase Development Modules (MPDM). These indicators are set internally as part of the SFRS Performance Management Framework and are aligned under Strategic Outcome 3: We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services. As per the table below, performance indicators O3.7 – O3.10 are reported upon quarterly and all have a target of 95% compliance.

Outcome 3 - We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services.							
Ref	Indicators	Frequency	Target /Direction of Travel	Reported to			
				Board	SDC	SGC	ARAC
O3.1	Actual Full Time Equivalent (FTE) staff against Target Operating Model by staff group	Quarterly	Monitor			✓	
O3.2	Actual headcount	Quarterly	Monitor			✓	
O3.3	Number of staff vacancies by FTE	Quarterly	Reduce based on moving 3-year average			✓	
O3.4	% Staff vacancies	Quarterly	Monitor			✓	
O3.5	% Staff turnover	Quarterly	Monitor			✓	
O3.6	Number of vacancy applications	Quarterly	Monitor			✓	
O3.7	% of staff deemed competent against requirement for Operational Core Competence	Quarterly	95%			✓	
O3.8	% of staff deemed competent against requirement for Incident Command Competence	Quarterly	95%			✓	
O3.9	% of staff deemed competent against requirement for Specialist Rescue Competence	Quarterly	95%			✓	
O3.10	% of staff deemed competent against requirement for Mandatory Maintenance Phase Training for both Standard and Advanced Modules	Quarterly	95%			✓	
O3.11	Number of incidents in which there was a verbal or physical attack on a firefighter	Annual	Reduce based on moving 3-year average			✓	
O3.12	Number of staff who suffered RIDDOR reportable injuries at work	Quarterly	Reduce based on moving 3-year average	✓		✓	
O3.13	Number of accidents and injuries	Quarterly	Reduce based on moving 3-year average			✓	
O3.14	Number of near miss events	Quarterly	Monitor			✓	
O3.15	Number of vehicle accidents	Quarterly	Reduce based on moving 3-year average			✓	

Table 3: Outcome 3

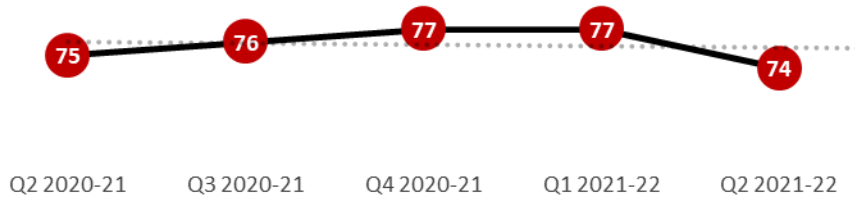
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4.2 Operational Core Competence (% of Staff deemed competent against requirement)

Resource Based Crewing (RBC)



Retained Duty System (RDS)



Volunteer Duty System (VDS)



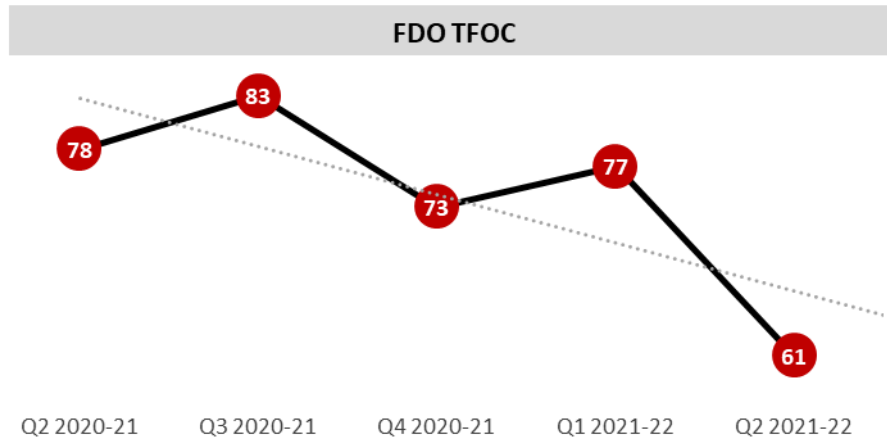


Figure 2: Operational Core Competence

The Q2 figures for Core skills of Incident Command, Breathing Apparatus, Fire Behaviour, Tactical Ventilation and Emergency Response Driver Training reflect a slight increase for Resource Based Crewing (RBC) and Volunteer Duty System (VDS) compared with the previous quarter. The Retained Duty System (RDS) staff group reflect a slight decrease across the reporting period.

The Flexi Duty Officer (FDO) Training for Operational Competence (TfOC) shows a decrease in performance when compared with previous Quarters. There are factors which have contributed to this, including; the impact of MTA training in preparation for COP26; the wider impact in terms of workload that have arisen from COP26 preparations. The impact of Covid-19 continues to be monitored collaboratively between Training and Service Delivery. In addition, there have been a significant number of staff changes within the FDO staffing group through retirements and promotions, particularly within the Station Commander (SC) cadre, where, following the most recent SC promotion process, a number of FDO's have taken up position for the first time.

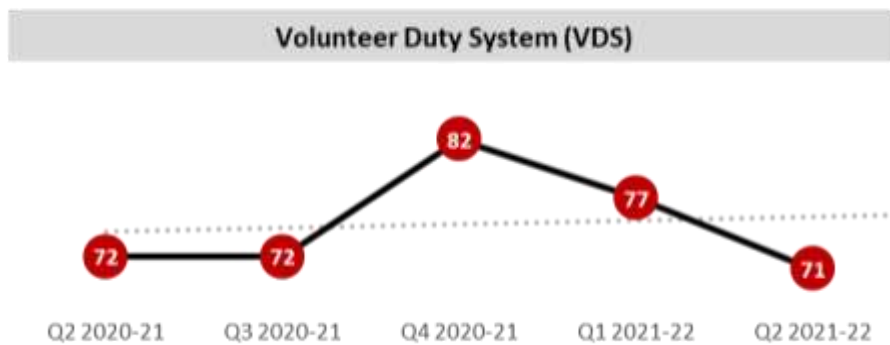
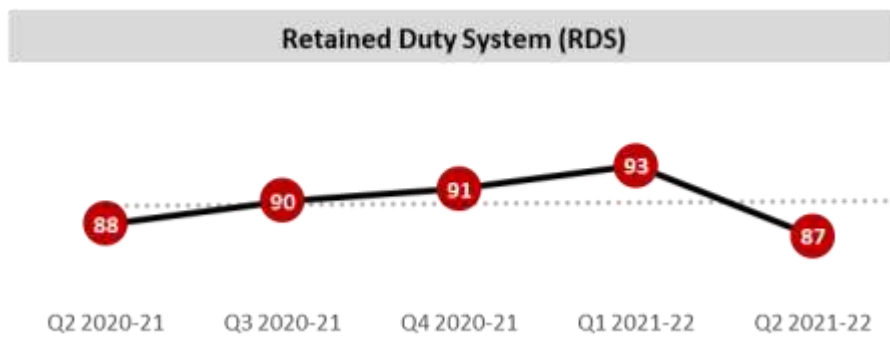
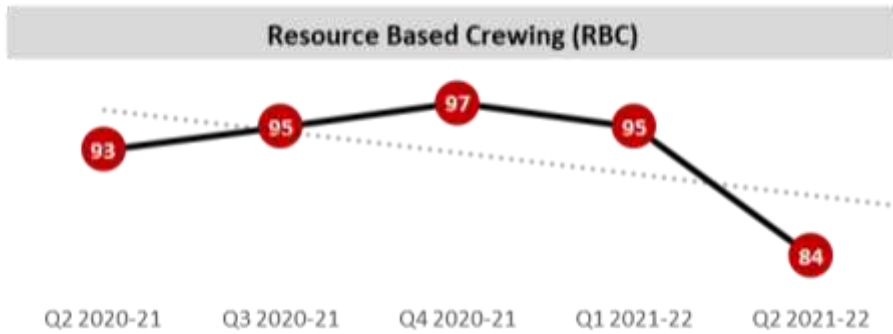
Throughout Q2, COVID-19 restrictions on RDS and Volunteer drill nights have been in place ensuring the Service is aligned with the Scottish Government Tier system during the pandemic. The additional support for distance training of our learning content accessible on a range of platforms has continued throughout the quarter to ensure maintenance of core skill competency.

The on-going focus of maintaining key risk critical skills has continued in Q3 2021-22 and has assisted in mitigating the impact of restrictions on course numbers and the restricted training capacity.

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A review of the Training for Operational Competence Framework (TfOC) has been undertaken and proposed improvements are now undergoing consultation with Service Delivery Areas and Directorates.

4.3 Incident Command Competence (% of Staff deemed competent against requirement)



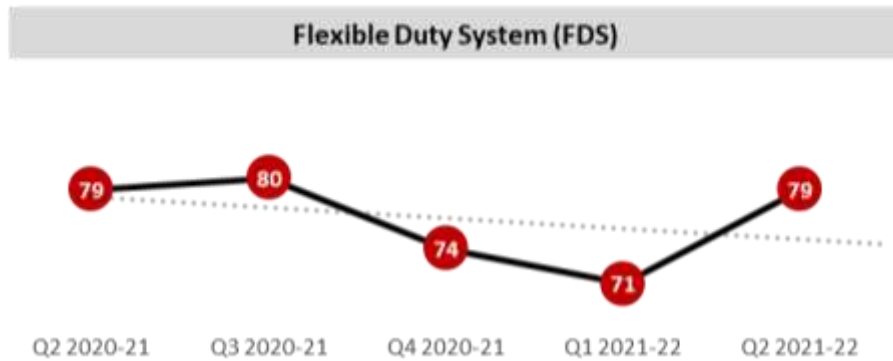


Figure 3: Incident Command Competence

Incident Command Competence across Resource Based Crewing (RBC), Retained Duty System (RDS) and Volunteer Duty System (VDS) staffing groups shows a decrease in performance. Training resources have been realigned throughout the Q2 period to meet the priorities of the Service, including preparations for COP26 and MTA training, training for the roll out of Powered Rescue Equipment (PRE), and the Assessment of Initial Command Competence (AICC) in support of the recent Crew Commander promotion process. These areas of work have necessitated a flexible approach which have involved significant resources, learning and development across the organisation.

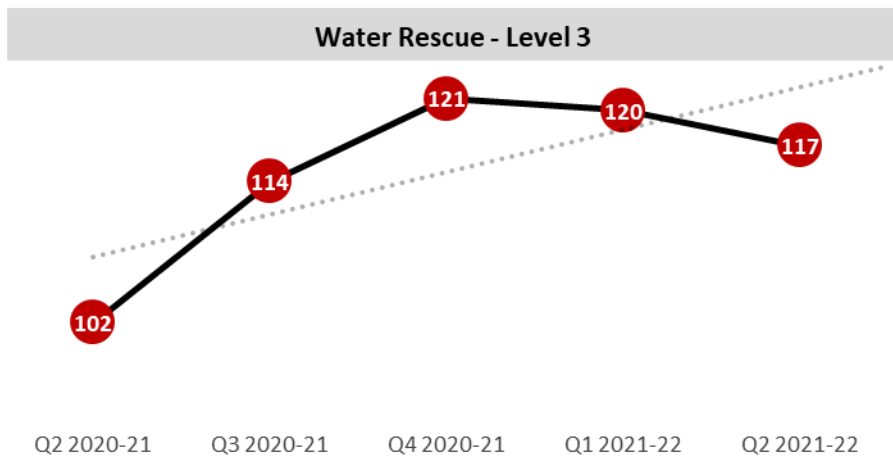
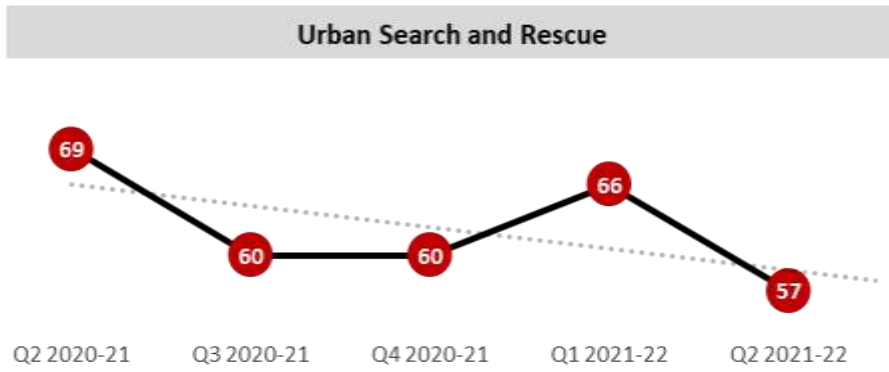
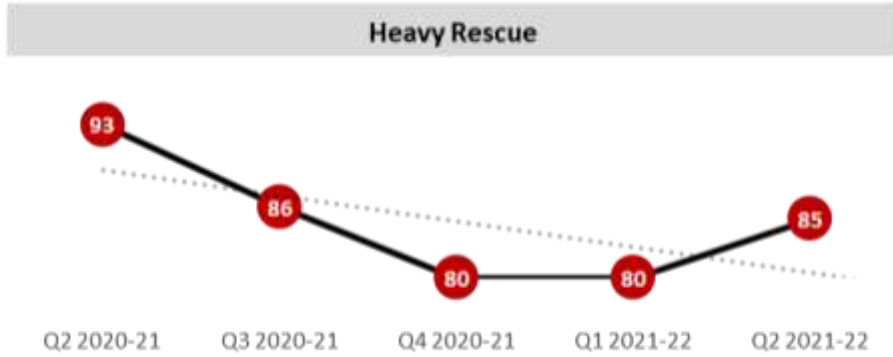
National Incident Command Team have recently introduced a revised delivery model for ICL courses to address the impact from the pandemic restrictions. This incorporates distant/ remote learning and assessment for development and refresher courses, with only the ICL1 course requiring the practical assessment interaction. This is in the early stages of implementation and will continue to be rolled out to areas throughout Q3. The Incident Command Team within the Training Function has recently been expanded, with additional instructors introduced which will enable support for the delivery of ICL1 Courses.

The future implementation of a supporting framework for the re-accreditation of incident command competency utilising Operational Assurance has been developed, which is currently going through consultation, will assist in the mid to long-term to further improve performance.

The Flexi Duty System (FDS) figure shows an increase in performance following the introduction of the online ICL 2 and 3 refresher courses.

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4.4 Specialist Rescue Competence (% of Staff deemed competent against requirement)



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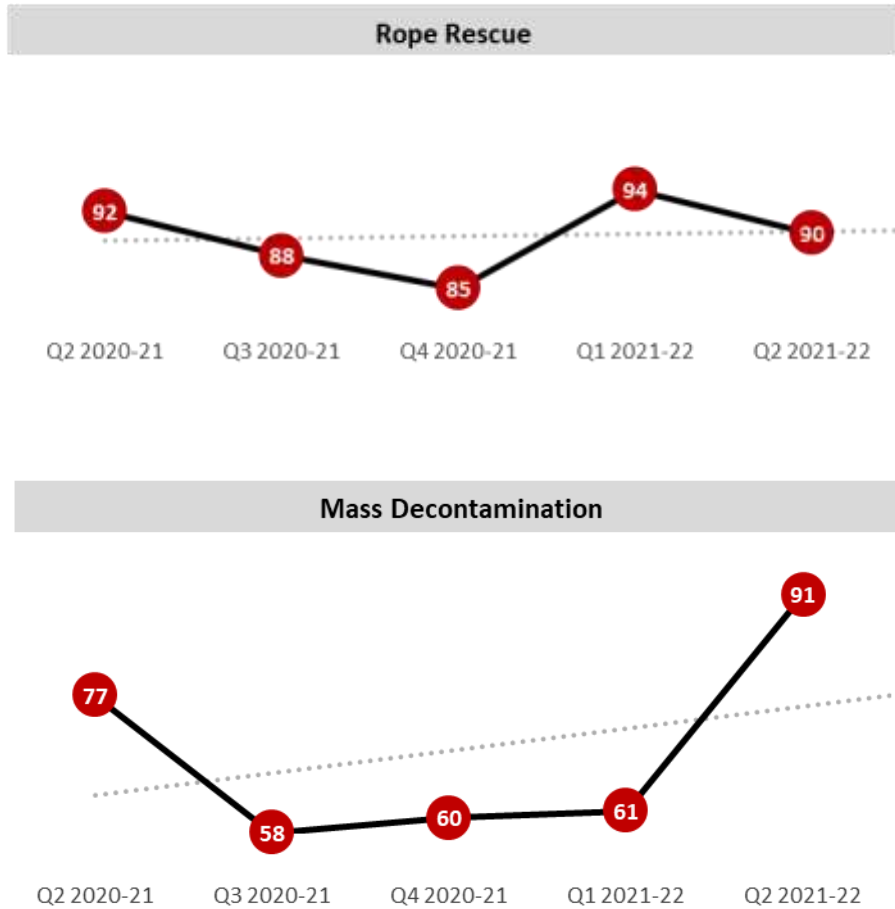


Figure 4: Specialist Rescue Competence

The programme of acquisition training for Specialist Rescue has remained a challenge, with the restriction on course numbers and reduced training capacity due to the implications of the pandemic. Training delivery across the Specialist Rescue disciplines continues into Q3 as we support the preparations for COP26.

As part of our preparations in readiness for COP26, there has been a focus on Mass Decontamination and Heavy Rescue training. A newly created Heavy Rescue 1-day Continued Professional Development (CPD) course has been successfully developed and delivered and this is reflected in the increased performance. A slight decrease can be seen in Urban Search and Rescue training performance, with cancellations for re-accreditation courses occurring due to Covid-19 related issues.

4.5 Compliance with Mandatory Maintenance Phase Training (% of Staff against requirement)

There are currently 12 Standard and 24 Advanced MPDP modules. Completion of these 36 MPDP modules is planned at Local Senior Officer (LSO) Area level.

Standard Modules

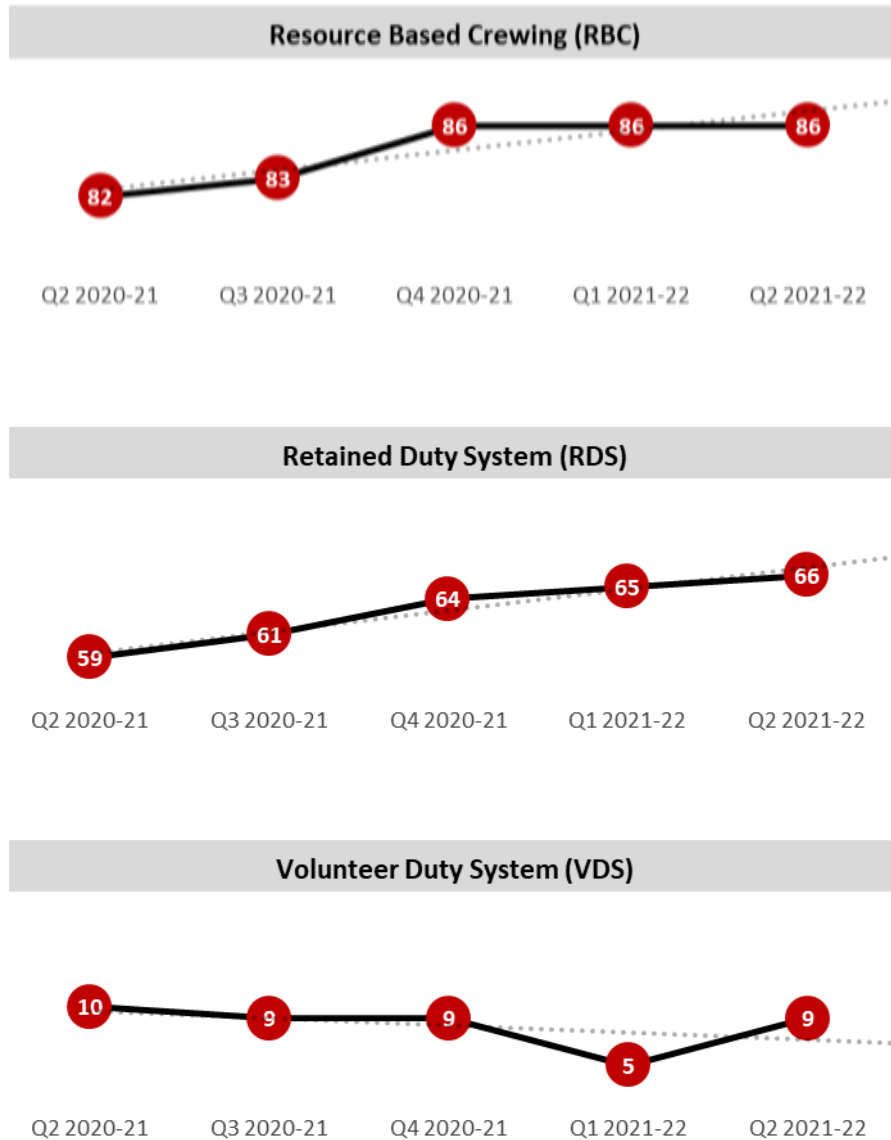


Figure 5: Standard Modules

The Q2 figures for RBC and RDS demonstrate a consistent performance and VDS show an increase in performance when compared with the previous quarter. The ongoing pandemic

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restrictions introduced as part of the tier system continue to be a challenge for personnel to fully undertake and record training within the prescribed timeframes.

The ongoing support provided from the Learning and E-Development Team; assisting learners with remote options to access content, has contributed to the continued improvement in the RBC, RVDS duty systems and is reflected in the performance data. Ongoing liaison with SDA partners continues to support personnel.

Advanced Modules

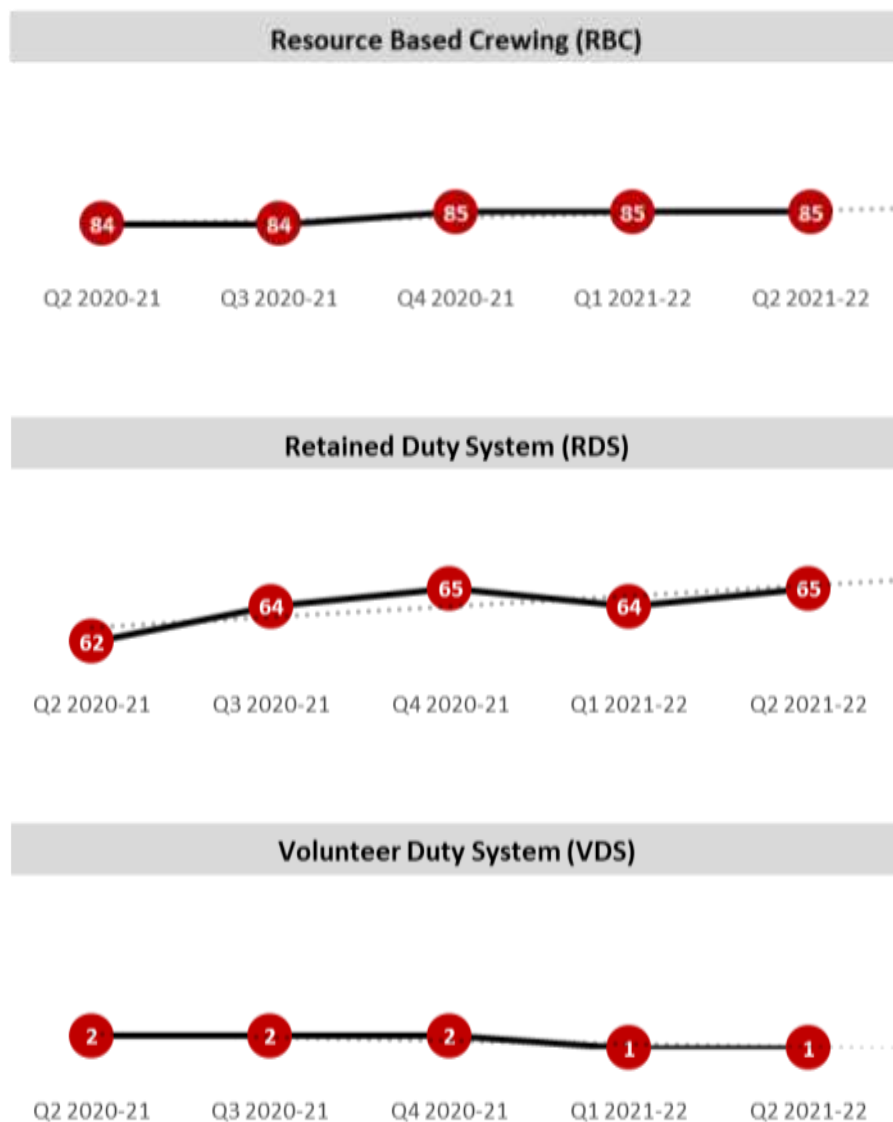


Figure 6: Advanced Modules

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Advanced modules are undertaken by all Wholetime Duty Staff / RBC and on a historic risk-profiling basis for RVDS Staff.

As we have moved into Q2, with the on-going impact of the COVID-19 restrictions, training has continued to be strategically aimed on key core skills and the 12 Standard modules. The achievement of all CFS attaining COVID-19 Secure status has assisted staff in completing the practical elements of these modules through following the previously developed Guidance for the Maintenance of Skills and Competence. Collectively from this there has been minimal undue impact from COVID-19 with performance remaining consistent with pre-pandemic figures.








With regards to RVDS Staff, the implementation of the Training Review recommendations focused on a robust risk-profiling exercise concentrating upon known training requirements on a station-by-station basis. When coupled with other positive elements proposed within the Training Review implementation plan, such as reducing training time requirements and improved efficiency, this will further focus training capacity towards improving performance across the Service.

5. Health and Safety Analysis





5.1 Annual Improvement Plan

To support legislative compliance, there is one overarching SFRS Health and Safety Improvement Plan supported by ten bespoke plans, one for each Directorate. The SFRS table below indicates the current completion status at the end of Q2 2021-22.

There are 89 allocated actions within the SFRS Health and Safety Improvement Plan. These actions are spread throughout the financial year and across the Service Delivery Areas and Directorates, based on their risk profile.

HEALTH AND SAFETY IMPROVEMENT PLAN PROGRESS REPORT								
QUARTER 2 2021-22								
				Outstanding Actions Q2 2021-22				
	Total No of Actions Year to Date (YTD)	% Progress Towards Completion YTD	Progress Against Overall Plan	Complete	0-20% Complete	21-40% Complete	41-70% Complete	71-99% Complete
Scottish Fire and Rescue Service	43	60%		26	2	0	3	12
North SDA (NSDA)	7	100%		7	0	0	0	0
East SDA (ESDA)	8	75%		6	0	0	1	1
West SDA (WSDA)	10	80%		8	2	0	0	0
Finance and Contractual Services (FCS)	15	80%		12	1	0	2	0
People and Organisational Development (POD)	13	69%		9	3	0	1	0
Prevention and Protection (P&P)	14	57%		8	0	3	3	0

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Operations (OP)	11	73%		8	3	0	0	0
Strategic Planning, Performance and Communications (SPPC)	12	92%		11	0	0	0	1
Training, Safety and Assurance (TSA)	39	85%		33	3	1	0	2
Service Development (SD)	16	100%		16	0	0	0	0




Key	Progress from last quarter
	Completion of actions as a percentage of total actions within the improvement plan has improved since last quarter
	Less than 20% slippage
	More than 20% slippage

Table 2: Health and Safety Improvement Plan Progress Quarter 2 2021-22

Overall completion of Q2 actions is presenting as 60% (26 of 43) complete. When comparing the percentage completion within the same period in the previous reporting year, a 15% increase is noted. Significant progress is noted in four of the ten plans in place, with TSA and SPPC completing over 85% and NSDA and SD completing 100% of their actions for 2021-22.

Of the 17 outstanding actions, analysis shows 71% (12 of 17) are over 70% complete.

2.2 Health and Safety Events

2.2.1 Key Performance Indicator (KPI) Totals with Two-Year Average Trend Comparisons 2021-22

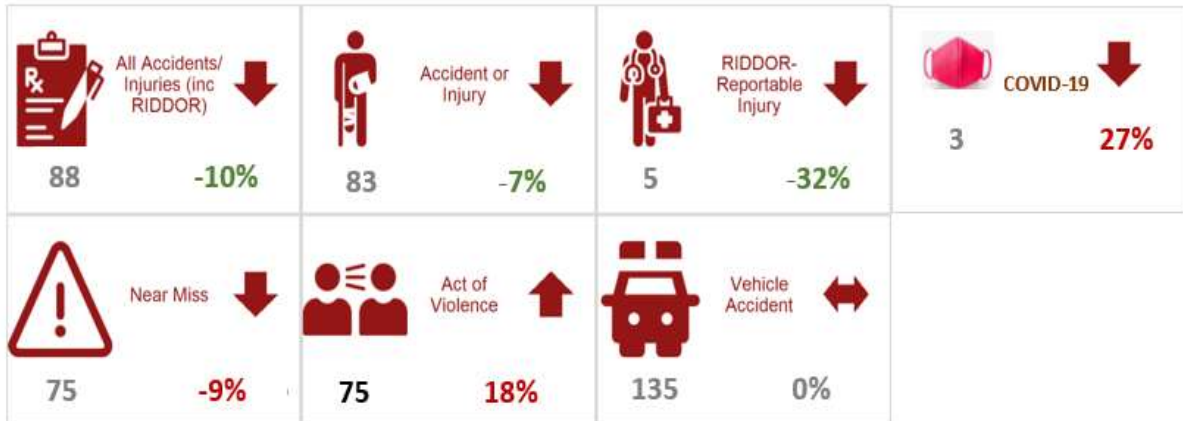


Figure 1: Trend Comparisons Year-To-Date

Note – A deviation of +/- 5% falls within the expected variance and is therefore represented as no change.

Note- The dashboard cannot reflect trends for COVID 19 as 3 years of data is required to calculate the 2-year trend.

The table below shows year-to-date totals to the end of Q2 each year from 2018-19 onwards.

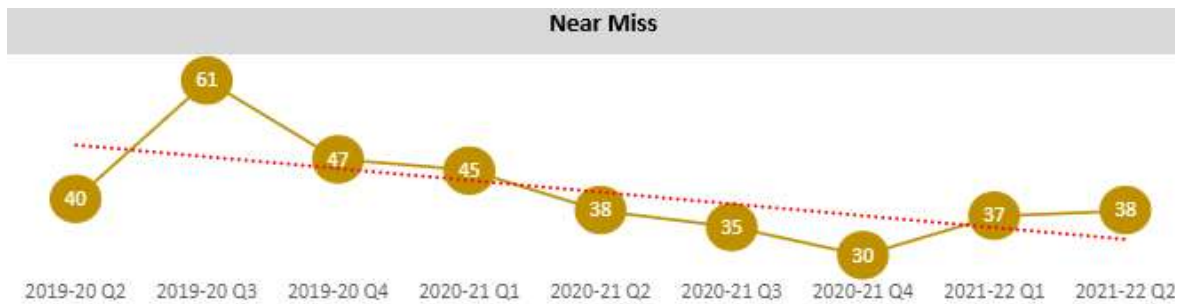
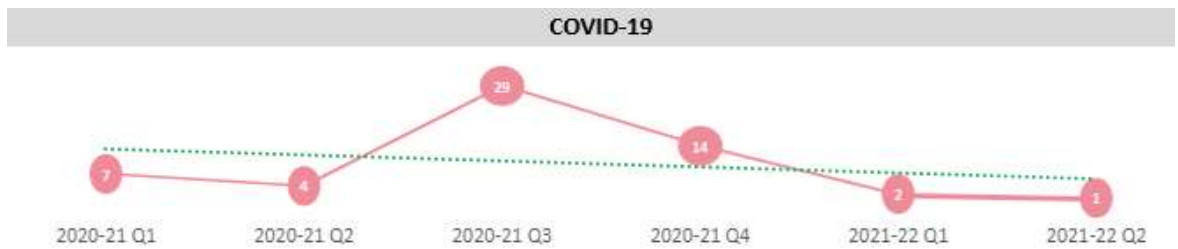
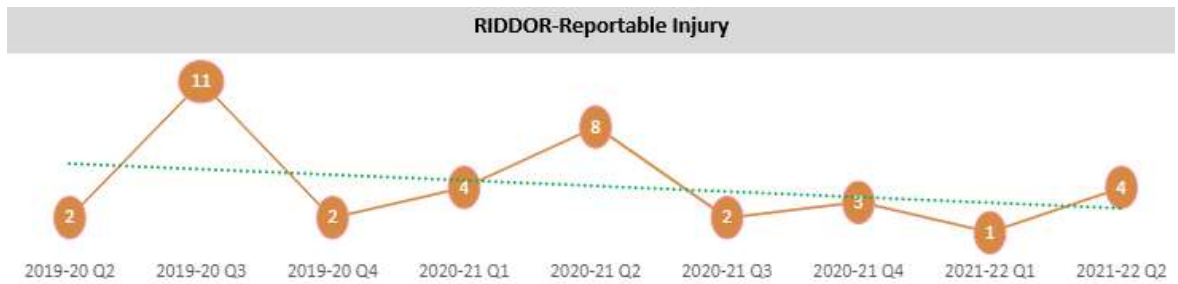
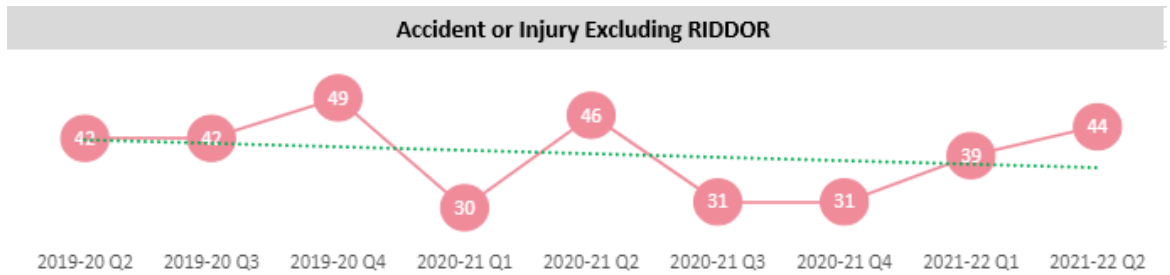
Event Type	2019-20	2020-21	2021-22
Injury (excluding (RIDDOR)	95	76	83
RIDDOR-Reportable Injury	13	12	5
COVID-19	-	11	3
Near Miss	90	83	75
Act of Violence	22	23	30
Vehicle Accident	134	116	135
Total	354	321	331

Table 3: Trend Comparisons Year-To-Date

Further detail on each event type and causation is contained within the relevant sections of this report.

2.3 Health and Safety Key Performance Indicators – Q2 2019-20 to Q1 2021-22

The panel charts below show the overall quarterly totals from Q2 2019-20 to Q2 2021-22. The dotted line on each panel gives an indication of overall trends. In some cases, these may differ from the trend arrows on the summary infographic, with the exception of COVID-19, as these are based on comparisons of cumulative totals averaged over two-year periods.



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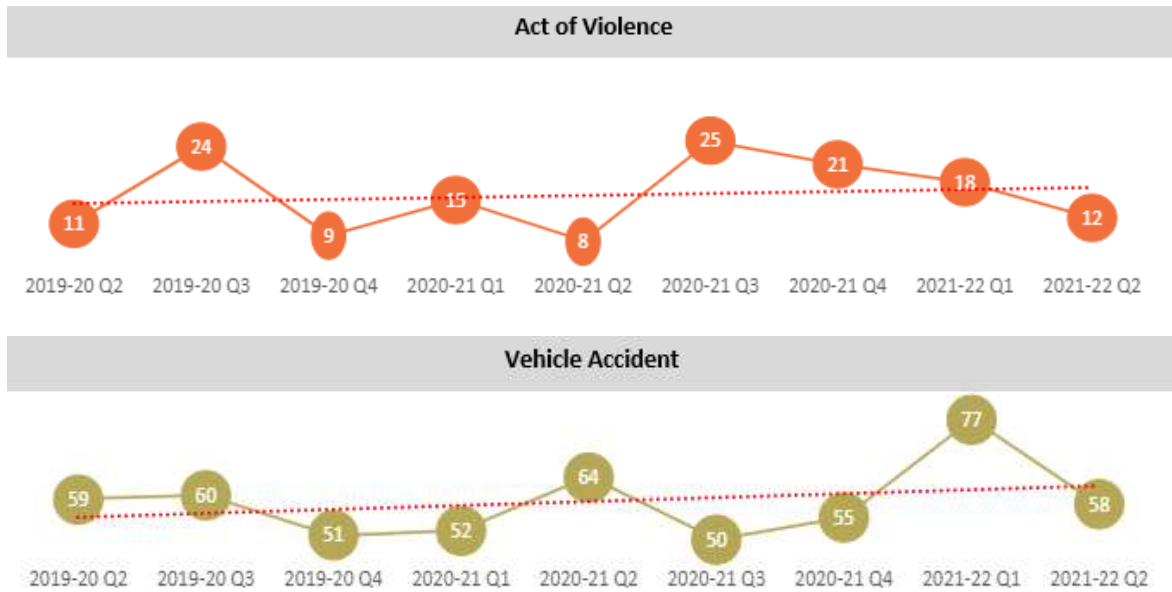


Figure 2: Quarterly KPI Totals Q2 2019-20 to Q2 2021-22

The trend for Injuries and RIDDOR Reportable Injuries are positive over a three-year period. Acts of Violence (AOVs) and Vehicle Accidents (VAs) show a steady increase over a three-year period. Near Misses (NM) shows a decrease over a three-year period. COVID-19 shows a positive trend over the six-quarter period. Further analysis of all key performance indicators can be found in the related sections of this report.

2.3.1 Directorate Accident/Injuries (excluding RIDDOR) – Q2 2019-20 to Q2 2021-22

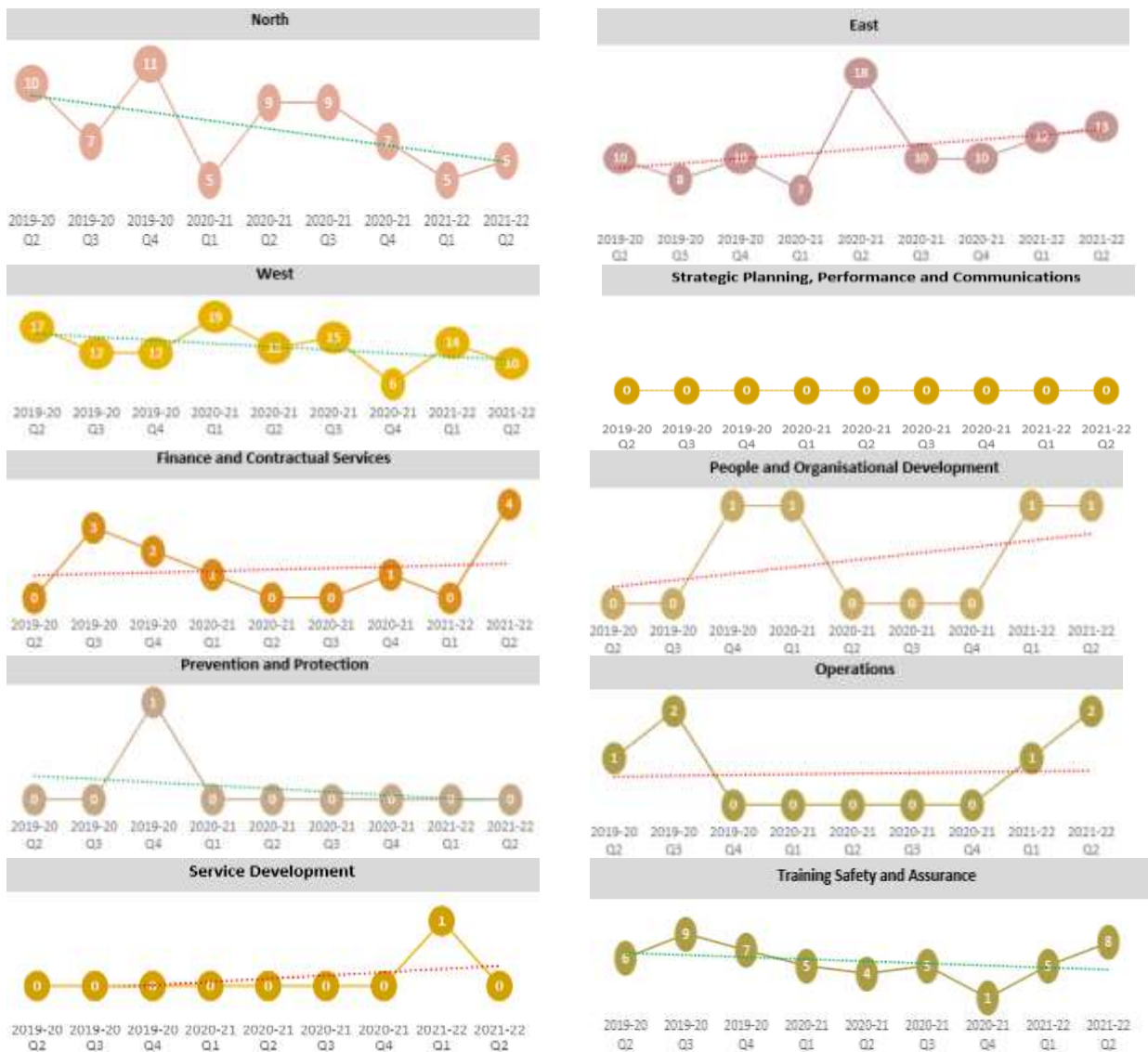


Figure 3: Directorate Accident/Injuries (excluding RIDDOR) – Q2 2019-20 to Q2 2021-22

Improvement over the 3-year period is seen in the North and West SDAs and the TSA, and P&P Directorates where there has been a reduction of all AIs (excluding RIDDOR) recorded.

When considering Q2 data with the same quarter previous reporting year, the North SDA saw a 33% (9 to 6) decrease, the East SDA saw a 28% (18 to 13) decrease, the West SDA saw a 47% (19 to 1) decrease, TSA saw a 50% decrease (8 to 4) and FCS saw an 100% increase (0 to 4) in AIs (excluding RIDDOR).

The most notable LSO Area of improvement, City of Edinburgh shows an 87% (8 to 1) decrease when comparing to the same quarter previous reporting year.

2.3.2 RIDDOR Reportable Accident/Injuries – Q2 2019-2020 to Q2 2021-22

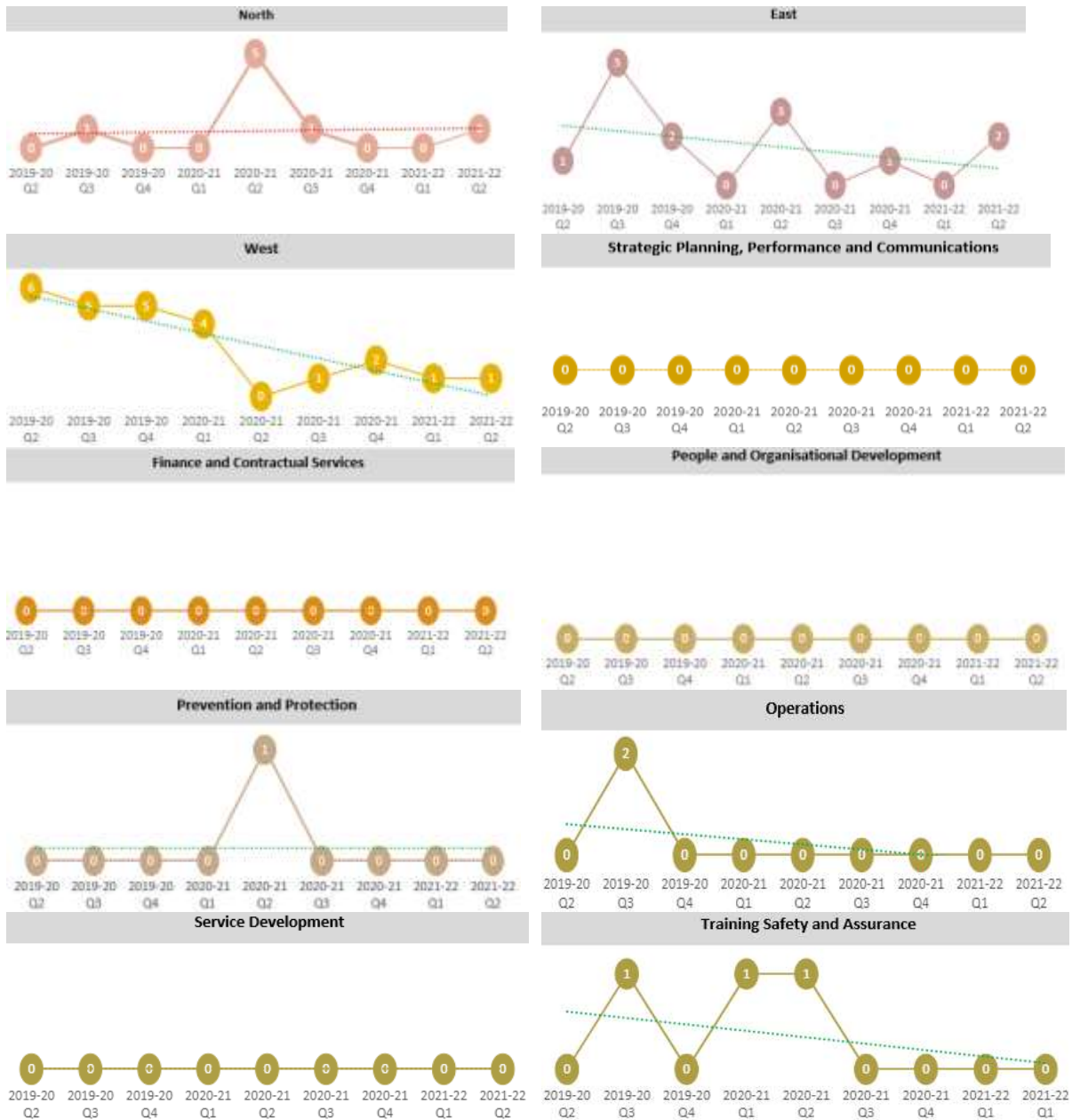


Figure 4: RIDDOR Reportable Injuries – Q2 2019-20 to Q2 2021-22

Improvement over the 3-year period is seen in the East and West SDAs and the TSA, P&P, and Operations Directorates where there has been a reduction of all RIDDOR reportable accident/injuries.

In Q2 there were 4 RIDDOR reportable accident/injuries, compared to 8 during the same quarter previous reporting year. 50% (2 of 4) of these events were over 7-day absence, the remaining 2 events were broken bones occurring on the incident ground due to incorrect use of equipment and a trip over an obscured obstacle.

RIDDOR REPORTING COVID-19 – Q2 2020-2021 to Q2 2021-22



Figure 5: SFRS COVID-19 RIDDOR Reportable Q2 2020-21 to Q2 2021-22

In Q2 there was 1 COVID-19 event that was deemed to be attributable to work related transmission and therefore reportable to the HSE compared to 4 during the same quarter previous reporting year. This event occurred whilst taking part in a water rescue training.

The recording dates are reflective of the management determination if there is reasonable evidence of workplace transmission and not indicative of the date of the positive COVID -19 case occurring.

2.3.3 Accident/Injuries by Activity – Q2 2019-20 to Q2 2021-22 (Including RIDDOR)

Activity	2019-20	2020-21	2021-22
Operational	20	26	23
Non-Operational	12	11	14
Training	12	17	11
Total	44	54	48

Table 4: Accident/Injuries by Activity Q1 2019-20 to Q1 2021-22

Further detail on each event type and causation is contained within the relevant sections of this report.

Operational Accident/Injuries Q2 2019-20 to Q2 2021-22 (Including RIDDOR)

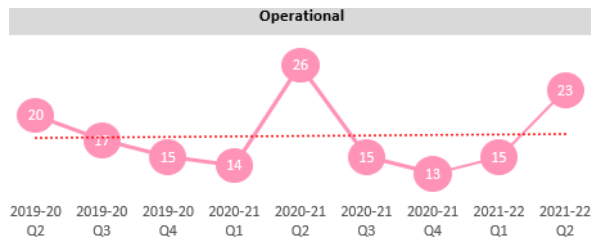


Figure 6: Operational Accident/Injuries Q2 2019-20 to Q2 2021-22

The Operational AI trend is gradually increasing over the three-year period.

During Q2 2021-22 57% (13 of 23) of operational AIs were recorded as primary fires compared to 23% (6 of 26) in the same quarter previous reporting year. The significant increase can be attributed to an increase in the number of events occurring in the closing and developing phases of the operational incident (0 to 3) and (4 to 8) when compared to the same reporting period last year.

21% (5 of 23) occurred at false alarms compared to 8% (2 of 26) when comparing to same quarter previous reporting year. This can be attributed to an increase in the number of events occurring in the closing phase of the operational incident (0 to 2) when compared to the same reporting period last year.

13 (3 of 23) occurred at secondary fires, there were no AIs recorded at secondary fires incidents in the same quarter previous reporting year. All occurred during the initial phase of the operational incident.

The remaining 13% (3 of 23) occurred during special service incidents a significant decrease of 51% and a numerical decrease of 13 when comparing to the same quarter previous reporting year.

Non-Operational Accident/Injuries – Q2 2019-20 to Q2 2021-22 (Including RIDDOR)

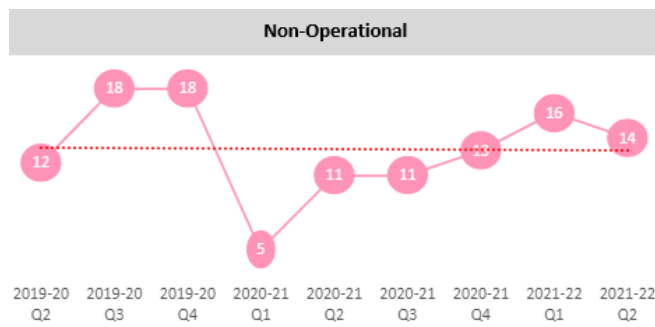


Figure 7: Non-Operational Injuries Q2 2019-20 to Q2 2021-22

The Non-Operational AI trend is gradually decreasing over the three-year period.

Data for Q2 2021-22 shows 57% (8 of 14) of injuries reported during Q2 2021-22 involved uniformed staff, representing a 43% decrease and a numerical decrease of 3 in this category when comparing to the same quarter previous reporting year. The remaining 43% (6 of 14) involved support staff, representing a 100% (0 to 6) increase in this category when comparing to same quarter previous reporting year. Two of these events resulted in musculoskeletal injuries due to manual handling activities.

50% (7 of 14) occurred within the station premises e.g. carrying out cleaning duties, routine checks, and dismounting appliance, representing a 32% decrease and a numerical decrease of 4 in this category when comparing to the same quarter previous reporting year.

Training Accident/Injuries – Q2 2019-20 to Q2 2021-22 (Including RIDDOR)



Figure 8: Training Injuries Q2 2019-20 to Q2 2021-22

There is a significant improvement in training related accident/injuries over the three-year period.

When considering Q2 data, 45% (5 of 11) of training related injuries occurred during refresher training, representing a 49% decrease, and a numerical decrease of 10 for the same quarter previous reporting year.

40% (2 of 5) occurred during SDA led training representing a decrease of 31% in this category when comparing to the same quarter previous reporting year numerically a decrease of 10. Both events involved musculoskeletal injuries.

The remaining 55% (6 of 11) are categorised as initial training. Three events involved injuries due to exposure to heat during Breathing Apparatus Tactical Ventilation Compartment Fire Behaviour Training (BA Tac Vent CFBT), and three involved damage to finger digits due to use of hammers.

The National Training data shows a 23% decrease, however numerically remains the same (8) in training injuries when comparing to the same quarter previous reporting year.

With consideration to SDA led training, the West SDA shows a 100% (2 to 0) decrease when comparing to the same quarter previous reporting year. The North SDA shows a 75% decrease (4 to 1) in SDA led training when comparing to the same quarter previous reporting year which occurred during a BA exercise. The East SDA shows a 71% decrease (7 to 2) in SDA led training when comparing to the same quarter previous reporting year.

2.3.4 Working Days Lost Due to Health and Safety Events by Directorate – Q2 2019-20 to Q2 2021-22

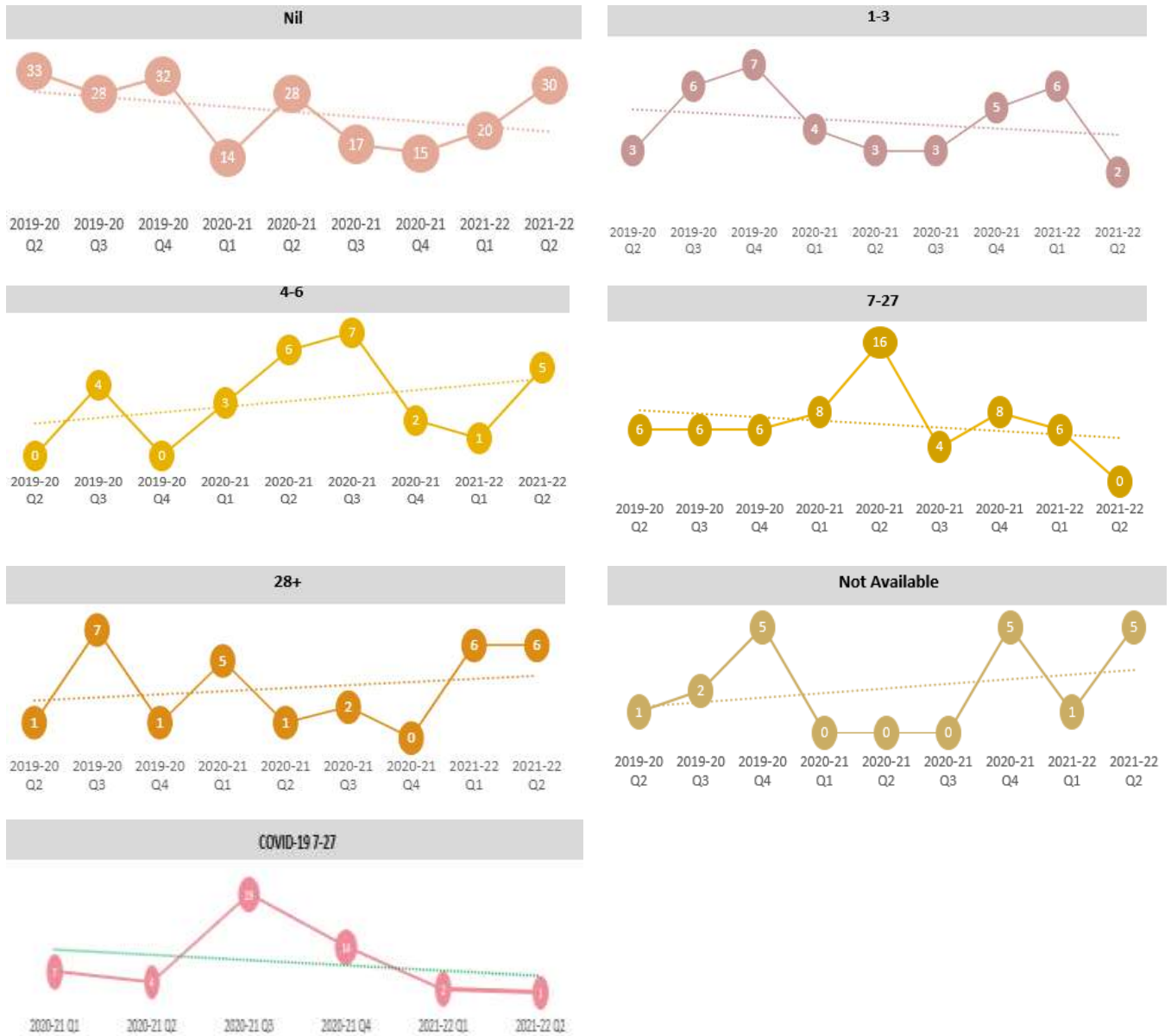


Figure 9: Working Days Lost Q2 2019-20 to Q2 2021-22

When considering the Q2 data, the 4-6 day and 1-3-day absence patterns indicate that 75% (4 of 6) of these events are linked to MSK injuries, 2 occurred at operational incidents and 1 event each at non-operational and training activities.

There were no injuries aligned to the 7-27-day absence pattern, representing a 100% decrease (11 to 0) when comparing to the same quarter previous reporting year. When considering the Q2 COVID-19 work related absences data there was 1 absence recorded in the 7-27 category.

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12% (6 of 48) of injuries during Q2 2021-22 were categorised in the 28+ days absence pattern, representing a 10% increase (1 to 6) in this category for the same quarter previous reporting year. Four were due to MSK injuries, one accident/injury resulted in a burn injury and the remaining 1 accident/injury resulted in a laceration to the hand.

There continues to be a significant increase in the number of Health and Safety events with no information available. Therefore, the trend line indicated in the other absence categories above may not be wholly reflective of actual performance.

2.3.5 Three Most Common Accident/Injuries by Causation – Q2 2020-21 to Q2 2021-22

Q2 2020-21		Q2 2021-22	
Manual Handling/Body Movement	14	Manual Handling/Body Movement	11
Impact (moving object)	6	Impact (moving object)	8
Impact (vehicle – exterior)	6	Hot / Cold	8

Table 5: Three Most Common Accidents/Injuries by Causation Q2 2020-21 to Q2 2021-22

The most common cause of accident/injuries during the reporting period was manual handling/body movement, accounting for 23% (11 of 48) of the total reported. This represents a decrease of 15% in this category when comparing to the same quarter previous reporting year, numerically a reduction of 3. 45% (5 of 11) of manual handling/body movement injuries occurred whilst attending operational incidents, with only 1 event occurring due to hazard within the incident ground that is moving a casualty within a tight space. All remaining events on the incident ground occurred due lack of situational awareness. 45% (5 of 11) of manual handling/body movement injuries occurred whilst undertaking non-operational activities, relating to moving pieces of equipment, 60 % (3 of 5) within Fleet/Equipment Workshops and 20% (1 of 5) within a station. The remaining non-operational event related to a fitness activity and was under the supervision of Health and Wellbeing staff.

Impact with a moving object accounted for 17% (8 of 48) of all AIs reported during Q2, representing an increase of 6% in this category when comparing to the same quarter previous reporting year, and a numerical increase of 2. 50% (4 of 8) occurred whilst attending operational incidents. 1 event occurred due to a ceiling collapse at an operational incident, the remainder occurred due to retrieving equipment from appliances or faulty appliance bay doors when responding.

There has been a 12% (2 to 8) increase in the hot/cold injury category when comparing to the same quarter previous reporting year. 38% (3 of 8) occurred whilst attending operational

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incidents, 2 resulted in heat stress and 1 a burn to the face. 50% (4 of 8) occurred whilst undertaken training activities, 3 resulted in burns, 2 on hands and 1 on the knee. The remaining injury occurred whilst undertaking non-operational activities within the Community Fire Station kitchen.

2.3.6 Near Misses by Directorate – Q2 2019-20 to Q2 2021-22

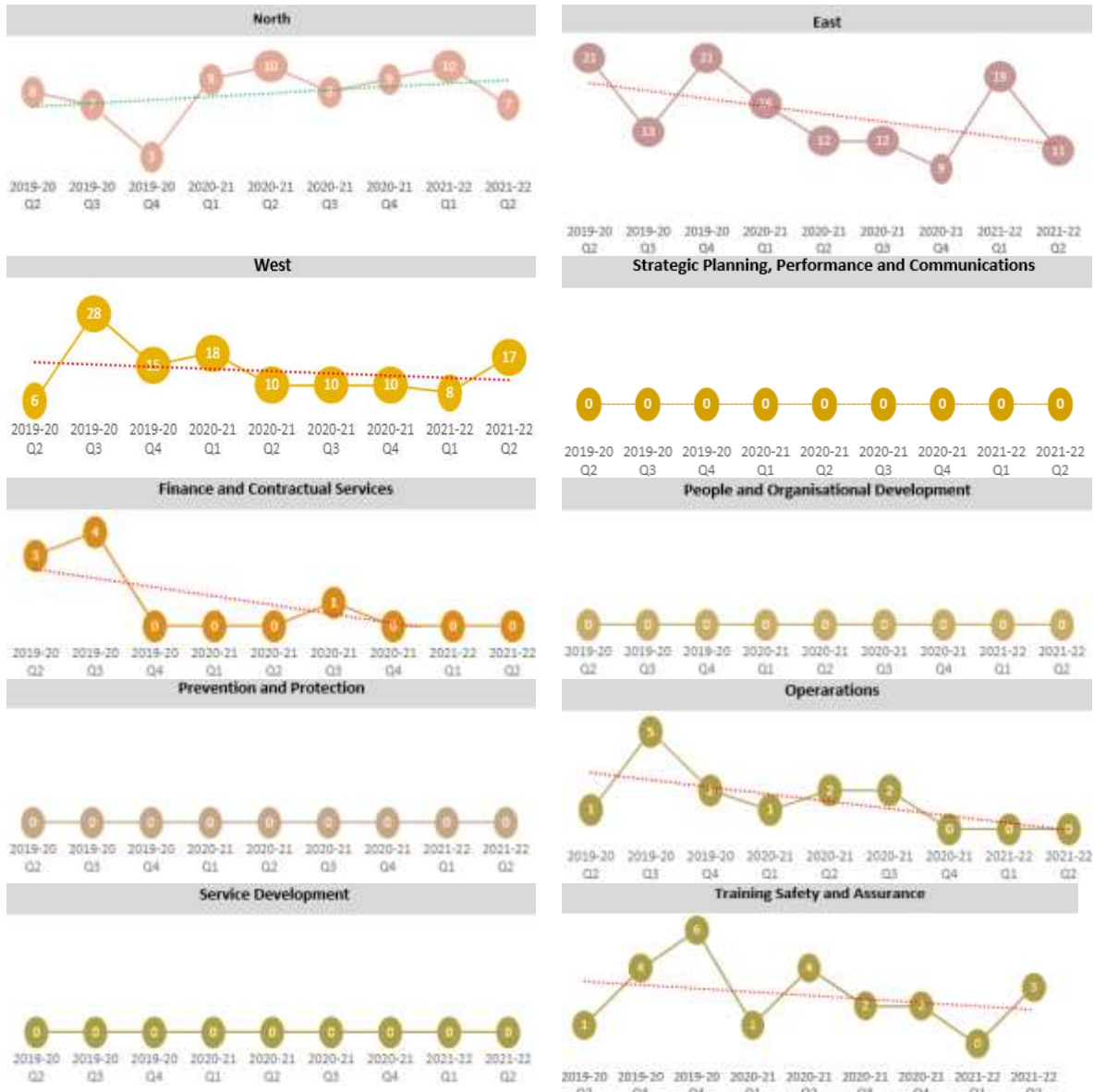


Figure 10: Near Misses by Directorate Q2 2019-20 to Q2 2021-22

When considering the number of near misses in relation to the number of RIDDOR reportable events (excluding Covid-19), we see a ratio of 9:1 which is an improvement in frequency compared to 3:1 when comparing the same quarter previous reporting year.

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The North, West SDAs, FCS, Operations and TSA show a steady decrease in the reporting of near misses over the three-year period. With cognisance of near miss reporting to accident injuries including RIDDOR the West SDA and TSA show that this decrease in near miss reporting is not aligned to a reduction in accident /injuries including RIDDOR. With regard this quarter it should be noted that FCS and Operations have not reported any near misses, however their accident/injuries have increased (0 to 4) and (0 to 2) respectively when comparing to the same quarter previous reporting year.

Operational near misses accounted for 38% (15 of 38) of the total reported, representing a 6% decrease and a numerical decrease of 1 when comparing to the same quarter previous reporting year. A further 38% (15 of 38) occurred during non-operational activities, representing a 13% increase in this category when comparing to the same quarter previous reporting year and a numerical increase of 6. Finally, 22% (8 of 38) of all near misses reported during Q2 were associated with training activities, a decrease of 9% in this category and a numerical decrease of 3 when comparing to the same quarter previous reporting year.

2.3.7 Acts of Violence(AOV) by Directorate – Q2 2019-20 to Q2 2021-22

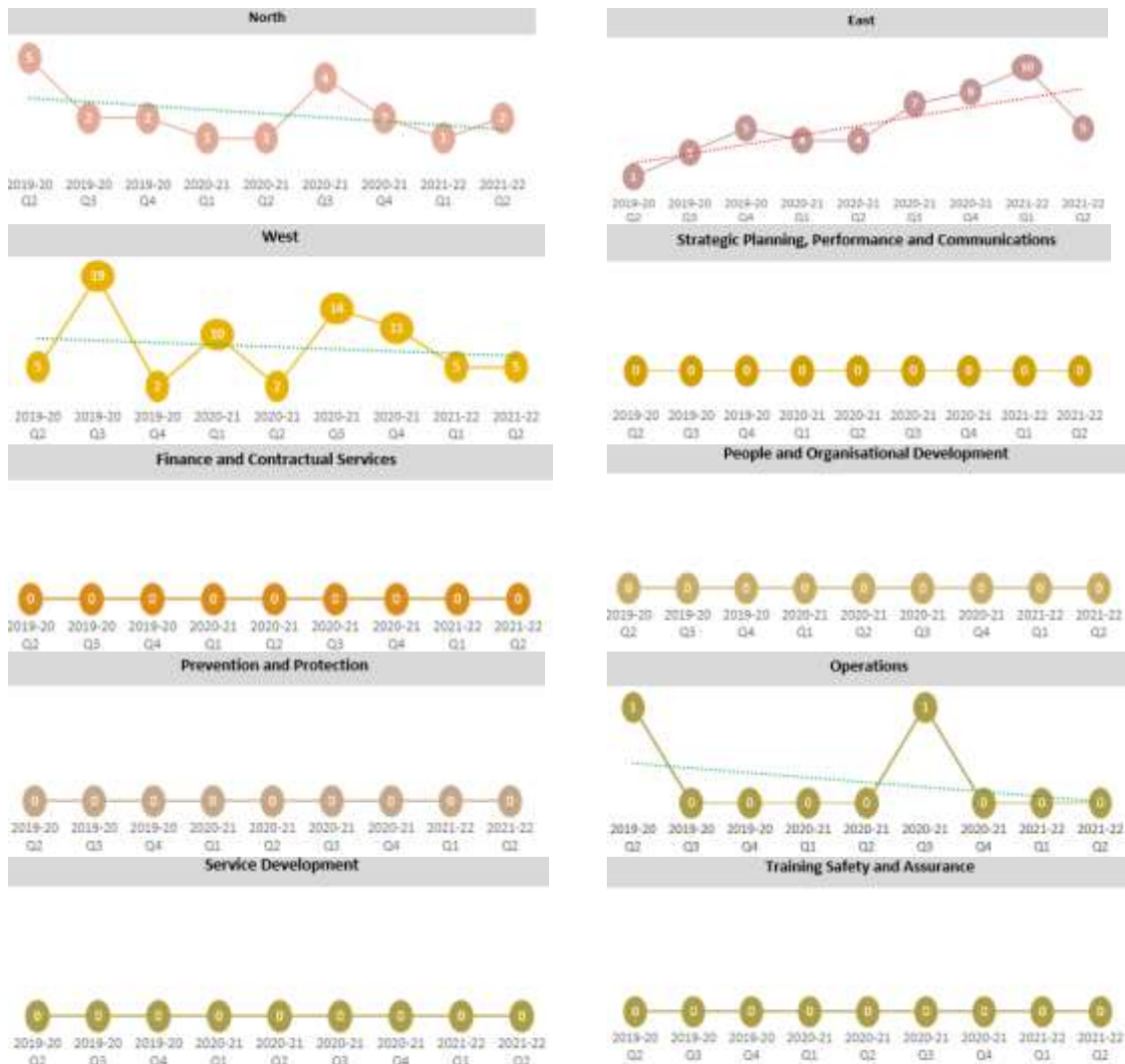


Figure 11: AOV by Directorate Q2 2019-20 to Q2 2021-22

There has been a steady increasing trend of AOVs reported over a three-year period within the SFRS, primarily associated with the East SDA. This increasing national trend is attributed to quarter 4 of the previous reporting year (9 to 21). When comparing to the same quarter previous reporting year, a 50% increase (8 to 12) is noted within SFRS. The North SDA shows a 50% decrease (4 to 2) when comparing to the same quarter previous reporting year. The East SDA shows an increase 20% (4 to 5) when comparing to the same quarter previous reporting year. 80% (4 of 5) of AOVs occurred within the City of Edinburgh LSO, a numerical increase of 4 when comparing to the same quarter previous reporting year. The West SDA shows a significant increase of 150% (2 to 5) in AOVs when comparing to the same quarter previous reporting year, albeit the numbers are low. 60% (3 of 5) occurred within Glasgow City, numerical increase of 2 when comparing to the same quarter previous reporting year.

92% (11 of 12) of AOVs occurred at operational incidents. 75% (9 of 12) of AOVs requested Police attendance and 33% (4 of 12) are considered as Reportable under the Emergency Workers (Scotland) Act 2005.

There were no injuries reported in Q2 relating to AOVs.

2.3.8 Vehicle Accidents(VA) by Directorate – Q1 2019-20 to Q1 2021-22



Figure 12: Vehicle Accidents by Directorate Q2 2019-20 to Q2 2021-22

There has been a steady increasing trend of vehicle accidents reported over a three-year period.

55% (32 of 58) of all vehicle accidents reported during Q2 were attributed to operational incidents, representing an 8% decrease in this category from the same quarter previous reporting year, and a numerical increase of 6. A further 36% (21 of 58) were attributed to non-operational activities, representing an 4% increase in this category from the same quarter previous reporting year, numerically remaining consistent. Finally, 9% (5 of 58) were accidents attributed to training, representing a 4% increase in this category from the same quarter previous reporting year, and a numerical increase of 2.

55% (32 of 58) were as a result of slow speed manoeuvres, a 3% decrease in this category from the same quarter previous reporting year, and a numerical decrease of 6. 40% (13 of 32) of slow speed manoeuvres occurred within appliance bays/station yard, a 14% increase from the same quarter previous reporting year, and a numerical increase of 4. 22% (13 of 58) occurred under blue light conditions, remaining consistent in this category when comparing to the same quarter previous reporting year, with a numerical decrease of 1. All occurred during the mobilising stage of the operational incident, representing an increase of 7% in this category, however, numerical remaining consistent from the same quarter previous reporting year. 17% (10 of 58) occurred during normal road speeds representing a

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3% decrease in this category from the same quarter previous reporting year, and a numerical decrease of 3.

91% (53 of 58) occurred while the vehicle was moving forward, a 11% increase from the same quarter previous reporting year, and a numerical increase of 2. 7% (4 of 58) occurred while the vehicle was reversing, an 8% decrease from same quarter previous reporting year, and a numerical decrease of 6. 2% (1 of 58) had insufficient information.

12% (7 of 58) of vehicle accidents involving the use of Driving Assistants, a 3% decrease from the same quarter previous reporting year, and a numerical decrease of 3. Another 33% (19 of 58) of vehicle accidents required Driving Assistants to be in position, however they were not used, this represents a 1% decrease from the same quarter previous reporting year, and a numerical increase of 3.

71% (41 of 58) hit something fixed or stationery e.g. street furniture, parked cars, a 13% decrease in this category from the same quarter previous reporting year, with a numerical decrease of 13.



Report No: C/PC/31-21

Agenda Item: 8

Report to:	PEOPLE COMMITTEE						
Meeting Date:	2 DECEMBER 2021						
Report Title:	INDEPENDENT AUDIT / INSPECTION ACTION PLAN UPDATE						
Report Classification:	For Scrutiny	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this paper is to present members of the People Committee (PC) with an update on the action plan, which has been developed in response to the report published by Her Majesty's Fire Service Inspectorate (HMFSI), relating to the Training of the Retained Duty System (RDS) Personnel.						
2	Background						
2.1	HMFSI inspects and reports on the SFRS with the purpose of assuring the public and Scottish Ministers that we are working in an efficient and effective way, and to promote improvement in the Service.						
2.2	Each year, HMFSI sets out its intended programme of thematic and local area inspections. Additional reviews may also be carried out at any time at the request of Scottish Ministers.						
2.3	Following the publication of reports, an action plan is prepared to address the issues or recommendations that are highlighted within the report.						
2.4	In line with the new thematic process agreed in May 2020, once approved certain action plans will be presented to PC on a quarterly basis to scrutinise progress.						
3	Main Report/Detail						
3.1	The PC is presented with the current overview dashboard, attached as Appendix A for noting. This provides high level details of all action plans. A summarised update on the Training of the Retained Duty System (RDS) Personnel update is provided below:						
3.2	Training of RDS Personnel The HMFSI report on the Training of RDS Personnel was published in March 2020. The action plan contains a total of 37 actions to address the 22 recommendations raised.						
3.3	Of those 22 recommendations it is noted that no action was identified for 6 of these actions. This is because a response to the recommendation is captured within another recommendation. The action plan is attached as Appendix B .						
3.4	This update indicates that delivery of this action plan and the work being undertaken to conclude the remaining 8 actions are progressing steadily with all 8 actions at green.						
3.5	There are 2 actions within the plan that have now been completed within this reporting period.						

3.6	The overall RAG rating for this action plan remains green and is noted as 81% complete (percentage completions for individual actions are an estimate provided by the action owner leading to the overall average percentage).
4	Recommendation
4.1	PC is invited to: <ul style="list-style-type: none"> Note the progress of all action plans as presented in the audit and inspection dashboard, attached as Appendix A. Scrutinise the Training of RDS Personnel action plan, attached as Appendix B, and raise any concerns with the update provided.
5	Key Strategic Implications
5.1	Risk
5.1.1	There are no risks associated with the recommendations of this report.
5.2	Financial
5.2.1	There are no financial implications associated with the recommendations of this report.
5.3	Environmental & Sustainability
5.3.1	There are no environmental implications associated with the recommendations of this report.
5.4	Workforce
5.4.1	There are no workforce implications associated with the recommendations of this report.
5.5	Health & Safety
5.5.1	There are no health and safety implications associated with the recommendations of this report.
5.6	Training
5.6.1	There are no training implications associated with the recommendations of this report.
5.7	Timing
5.7.1	This HMFSI Action Plan will be reported to the PC on a quarterly cycle until completion.
5.8	Performance
5.8.1	This process supports robust challenge and scrutiny of our performance against HMSFI recommended improvements.
5.9	Communications & Engagement
5.9.1	There is no implication associated with the recommendations of this report.
5.10	Legal
5.10.1	The arrangements for independent inquiries into the state and efficiency of the SFRS are a statutory requirement as laid out in section 43 of the Fire Scotland Act 2005.
5.11	Information Governance
5.11.1	A DPIA is not required for this report.
5.12	Equalities
5.12.1	An Equality Impact Assessment is not required for this this report.
5.13	Service Delivery
5.13.1	The content of this update report does not have any impact upon Service Delivery.

6	Core Brief	
6.1	Not applicable	
7	Appendices/Further Reading	
7.1	Appendix A – Audit and Inspection Dashboard	
7.2	Appendix B – Training of RDS Personnel Action Plan Update	
Prepared by:	Kirsty Jamieson, Planning and Performance Officer	
Sponsored by:	Kenneth Barbour, Training Delivery and Performance	
Presented by:	Kenneth Barbour, Training Delivery and Performance	
Links to Strategy and Corporate Values		
Our audit and inspection process contributes to Strategic Outcome 4: We are fully accountable and maximise our public value by delivering a high quality, sustainable fire and rescue service for Scotland.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Senior Management Board</i>	<i>17 November 2021</i>	<i>Agreed for release to PC</i>
<i>People Committee</i>	<i>2 December 2021</i>	<i>For Scrutiny</i>

Audit and Inspection Overview Dashboard

APPENDIX A

Audit Scotland Reports Progress Dashboard

Published	Title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Updated	Next Update	Not Started	In Progress	Deferred	Complete	Transferred	Cancelled	Moved to BAU	Void	% complete	RAG
May-18	Scottish Fire and Rescue Service Update	ARAC	Dec-21	Nov-21	36	Nov-21	Feb-22	0	1	0	33	0	0	0	2	90%	

HMFSI Thematic Reports Progress Dashboard

Published	Title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Updated	Next Update	Not Started	In Progress	Deferred	Complete	Transferred	Cancelled	Moved to BAU	Void	% complete	RAG
Apr-15	Performance Management Systems	SDC	Jul-20		32	May-20	N/A	0	0	0	26	2	4			100%	Closed
Jul-2017	Operations Control Dundee and Highlands and Islands Support	SDC	Dec-20		24	May-20	N/A	0	0	0	24	0	0			100%	Closed
Jan-2018	Fire Safety Enforcement	SDC	Mar-20	Dec-21	21	Sep-21	Dec-21	0	1	2	17	0	0	0	0	85%	
Feb-2019	Provision of Operational Risk Information	SDC	Mar-22		25	Nov-21	Feb-22	0	5	0	20	0	0	0	0	90%	
May-2019	Management of Fleet and Equipment	SDC	Mar-22		38	Nov-21	Feb-22	0	0	0	32	0	6	0	0	100%	
Mar-2020	Training of RDS Personnel	SGC	Mar-23		31	Nov-21	Feb-22	0	8	5	18	0	0	0	0	81%	
Dec-2020	Planning and Preparedness for COVID Review	SDC	May-26		16	Nov-21	Feb-22	0	8	0	8	0	0	0	0	80%	
Aug-2020	Command and Control: Aspects of Incident Command	SDC	Mar-22	Dec-23	25	Nov-21	Feb-22	0	8	0	17	0	0	0	0	90%	
Mar-2021	Assessing the Effectiveness of Inspection Activity	ARAC	-		0	-	-	-	-	-	-	-	-	-	-	-	

HMFSI Local Area Inspection Reports Progress Dashboard

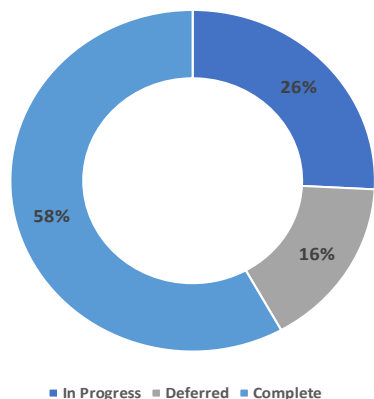
Published	Title	Relevant Committee	Due Date	Revised Due Date	Total Actions	Last Update	Next Update	Not Started	In Progress	Deferred	Complete	Transferred	Cancelled	Moved to BAU	Void	% complete	RAG
N/A	Local Area Inspection National Recommendations	SDC	N/A	N/A	7	Sep-21	Dec-21	0	2	0	8	0	0	0	0	85%	
Feb-20	Dumfries and Galloway	N/A	Jun-21		12	Sep-21	Dec-21	0	4	0	7	1	0	0	0	100%	
Jun-20	Edinburgh City	N/A	Apr-21		11	Sep-21	Dec-21	0	5	0	0	6	0	0	0	100%	
May-21	Midlothian	N/A	Mar-22		7	Sep-21	Dec-21	0	3	0	4	0	0	0	0	75%	

HMFSI Training of RDS Personnel - Action Plan Progress

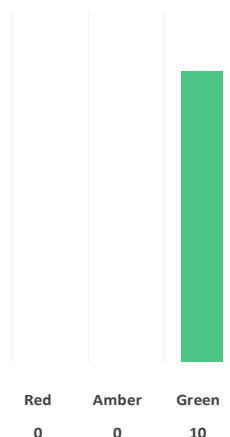
Updated	Next Update
Nov-21	Feb-22

Status	Count
Not Started	0
In Progress	8
Deferred	5
Complete	18
Transferred	0
Cancelled	0
Moved to BAU	0
Void	0

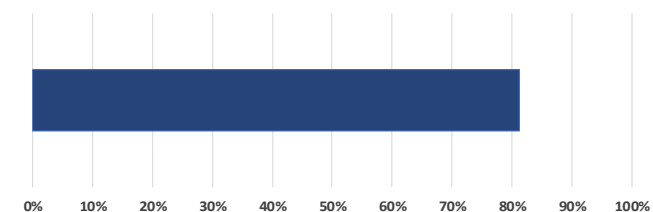
Recommendations where no action identified	6
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In Progress RAG Rating



Overall Progress 81%



HMFI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	RAG	Evidence
4. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the involvement of RDS firefighters in course design.	4.2	Implementation of a de-centralised business partnering model for training delivery.	AC Richie Hall	Mar-23		In Progress	11 August 21: Progress is being made with the de-centralised business partnering model for training. Recent advances include the capability to deliver Breathing Apparatus training at additional rural training sites and the agreement of Instructors Terms and Conditions which now includes more availability for delivering courses at weekends. The action is on-track and remains green. 17 November 2021: Additional Training sites across Scotland have now been issued with the required equipment to enable Breathing Apparatus acquisition courses to be delivered in remote areas. This reduces the impact on RDS Trainees with regard to travel and accomodation arrangements. The action is on track and remains green.	50%		Green	
6. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the extent that all training centres teach to the national policy and procedures (but recognising the need for variations, due to the availability of differing equipment).	6.2	NTS to be reviewed and new electronic format introduced.	GC William Pollard	Mar-22		In Progress	11 August 21: This review is still ongoing, reviewed National Training Standards have been quality checked and are due to be sent to the subject matter experts by the end of July 2021 in line with the agreed guidelines. The action is on-track and remains green. 17 November 2021: National Training Standards (NTS) have now been sent to Subject Matter Experts with a return requested for the start of October, agreed completion date still remains acheivable. Due to other competing organisational priorities and COP26 the requested return from the Subject Matter Experts has been extended, this will not change the completion date which still remains viable. This action remains green.	50%		Green	

6. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the extent that all training centres teach to the national policy and procedures (but recognising the need for variations, due to the availability of differing equipment).	6.3	Training notes to support NTS to be created where appropriate.	GC Mark Gallacher	Mar-23		In Progress	11 August 21: Due to continued work on the recovery phase of training there has been no further progress on this action, the timescales remain achievable and the action remains green. 17 November 2021: The continued recovery phase of training delivery means that there has been no further progress on this action, however, the timescales still remain achievable. There has been no further progress at this time due to competing organisational priorities and COP26. The action remains green and the timescales are remain viable.	40%		Green	
7. Maintenance of Skills - the SFRS should consider the content and relevance of RDS TFOC packages, and amend accordingly.	7.1	Combination of appropriate sets of modules.	GC Jamie Thrower	Mar-21	Mar-22	In Progress	11 August 21: A series of workshop meetings have been conducted to progress the action initially with two main aims: 1. to produce an options paper proposing amendments to the structure of the Training for Operational Competence (TFOC) primarily by streamlining and merging similar modules. 2. to prioritise a hierarchy of which modules will have a new 'Lite'/Maintenance version produced first and develop a programme to complete all relevant modules. Workshop meetings held 15/06/21 & 22/06/21, next meeting 21/07/2021. This action remains at amber due to the slip in original timescales. 17 November 2021: Training for Operational Competence (TFOC) review proposal was presented to the Continuous Improvement Board on 20 August 2021, and informal consultation process has now begun. The design and build of Core Maintenance modules has begun with a proposed "go live" date of April 2022. This action remains at amber due to the slip in original timescales.	25%		Green	
7. Maintenance of Skills - the SFRS should consider the content and relevance of RDS TFOC packages, and amend accordingly.	7.2	Creation of "LITE" modules for maintenance phase use.	Andy Scott	Mar-23		In Progress	11 August 21: A review of the RDS Training for Operational Competence has now begun. A working group has been established and changes to the RDS Training for Operational Competence are now being progressed which will include the move towards lite modules. This action remains green. 17 November 2021: The revised proposal was presented at the Continuous Improvement Board on 20 August 2021 at which point it was agreed that there will be further engagement sessions with Local Senior Officers. A draft Framework has been developed which will deliver a "maintenance" version of the Training for Operational Competence Framework (TFOC). Work has commenced to scope out the learning content which will be contained within this framework. This action is progressing and remains at green.	20%		Green	

9. Maintenance of Skills - the SFRS should consider the availability and suitability of IT resources at RDS stations to support training;	9.2	Explore options for interlinking through the Finance, People & Training Systems Group	Andy Scott	Apr-24		In Progress	<p>11 August 21: 1-2-1 supplier sessions have been held. Early indication to positively support the interlinking of systems discussed with suppliers. Full specification will be scoped out during the Training requirements gathering phase of the People Training Finance and Assets programme. The next User Intelligence Group will be held on 27/7/21. This action is progressing and remains at green.</p> <p>17 November 2021: This is an ongoing programme, the next User Intelligence Group (UIG) meeting is scheduled for 23 September 2021, at which point further discussion will be had regarding the specifications for the training function, there will also be further engagement with the IT systems analyst. It has been agreed with the programme lead that we will meet on a fortnightly basis.</p> <p>Further sessions of the User Intelligence Group (UIG) have continued over the last quarter. System "Discovery" sessions were held on the 8 October 21 to commence the scoping out of system processes. These sessions will commence throughout the next quarter. This action is progressing and remains at green.</p>	60%		Green
9. Maintenance of Skills - the SFRS should consider the availability and suitability of IT resources at RDS stations to support training;	9.3	Seek to improve broadband capacity at RDS stations in the new Wide Area Network (WAN) contract	Greg Aitken	May-21	Dec-21	In Progress	<p>11 August 21: Project now progressing well and as per revised timeline, although the scale of project is considerable and it is anticipated a 31 December 21 completion date will be challenging and will be kept under review. This action has moved from amber to green.</p> <p>17 November 2021: The WAN rollout is progressing as planned as per the revised timeline, however, this will be kept under review as the project continues. This action is progressing and remains at green.</p>	35%		Green
10. Maintenance of Skills - the SFRS should consider reviewing the method for assessing competence;	10.2	Review methods of assessing technical competence so as not to rely solely upon electronic assessments and establish options for any identified improvements.	Nicole Mulvey	Mar-21	Jul-21	Complete	<p>11 August 21: The assessment options paper is underway, this work will be carried out in conjunction with SFRS recognised principles of assessment and existing quality standards. This action remains at amber as it was expected that this work would be completed in July 21.</p> <p>17 November 2021: The review is now complete and will progress through Training governance structures for approval.</p>	100%		Green
11. Maintenance of skills - the SFRS should consider the delivery of more practical training for RDS staff with a reduction in theory content.	11.2	Take elements from MOI course to create learning modules accessible to all (including RVDS).	Nicole Mulvey	Mar-21	Jul-21	Complete	<p>11 August 21: Further work to complete the online version of MOI has been undertaken and is due for launch this quarter. This action remains at amber due to original time slippage but it is expected to be completed by the next reporting period.</p> <p>17 November 2021: MOI Learning modules have been created and will now be made available on the LCMS system.</p>	100%		Green

21. Other Observations - The SFRS should consider introducing optional RDS manager seminars to enhance the opportunities for networking, practical training and learning.	21.1	SDMP (RVDS Project) members to consider cost benefit analysis of a wider introduction of seminars across the Service.	Gavin Hammond	Mar-23		In Progress	11 August 21: The RVDS Project Dossier is currently going through a refresh aligned with an overarching RVDS Strategy being developed. Since the introduction of MS Teams, Service Delivery Areas have been exploring ways of engaging directly with their local RVDS Station management teams as well as wider training delivery virtually. As above, these will be reviewed and feed in to 'good practice and lessons learnt' for outward communication in liaison with Training, Safety and Assurance representatives on the National Retained & Volunteer Forum (NRVLF). This action remains green. 17 November 2021: The RVDS Strategy and dossier refresh has been completed and is now going through governance. It has been agreed through the Strategic Leadership Team to establish an RVDS Improvement Programme Board, this programme will identify individual projects, each with a specific dossier for development and improvement. This action is on track and remains green.	35%		Green	
6. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the extent that all training centres teach to the national policy and procedures (but recognising the need for variations, due to the availability of differing equipment).	6.1	Agree process with LSOs on the allocation of training modules for each station should be aligned to the station risk profile, vehicle and equipment available.	AC Rab Middlemiss	Mar-21	Mar-22	Deferred	This element forms part of the scoping of the Service Delivery Model Programme (SDMP). This action is deferred until the identification of station profiling is complete. It is proposed the Training Function will work with LSOs in identifying the requirements of each station. Phase 2 of the SDMP was originally due to complete in March 2021, however due to the impact of COVID the due date for this has now moved to September 2021. A further update will be provided at the next reporting period.				
12. Driver Training - The SFRS should consider providing LGV driving courses in remote and Island locations to minimise the personal impact to RDS staff.	12.1	No further action can be taken at this time pending review of course structure to accommodate new statutory obligations and dependant on Island impact assessment.				Deferred	Whenever possible, the option to deliver the course locally is considered. However, this is not always possible due to the negative impact on the limited capacity available within the small pool of driver trainers. This will also be impacted by pending legislative changes to the Road Safety Act 2006 (Regulation 19) which dictates a minimum course duration of two weeks with a 2:1 student / driver ratio. A further update will be provided at the next reporting period.				
12. Driver Training - The SFRS should consider providing LGV driving courses in remote and Island locations to minimise the personal impact to RDS staff.	12.2	De-centralisation of business partnering model.	GC Stephen McCurry	Mar-20		Deferred	See information within 12.1. 2 x additional Driver Trainers are now within the North SDA (1 x Aberdeen and 1 x Stornoway) 3rd additional post allocated to North SDA was not filled and has been reallocated to the West SDA. A further update will be provided at the next reporting period..				
15. High Reach Appliance Training - The SFRS should ensure RDS firefighters are able to maintain both their core skills and high reach operational competence.	15.1	No action proposed at present as this is the same training standards required for all High Reach Appliance Operators and the balance of this is being monitored within LSO Areas. This will also form part of the Station Appliance Review work being progressed, which will also consider the current High Reach Appliance Strategy and ROSE Project progress prior to implementation of any related recommendations.				Deferred	Information on High Reach Appliance Training to be considered as a Training for Operational Competence (TFOC) Light Module Package. A further update will be provided at the next reporting period.				

3. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the course content and methods of delivery.	3.1	No action required. Response to this recommendation is captured within recommendation 1.								
4. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the involvement of RDS firefighters in course design.	4.1	Create the opportunity for Retained and Volunteer Duty System (RVDS) staff to be involved within the course creation / review process, including Training for Operational Competence (TFOC) modules.	GC Lorna Yuill	Sep-20	Complete		100%	May-21	✓	This action is now complete The RVDS Support Group is being created to support the National Retained & Volunteer Leadership Forum (NRVLF) which includes Rural Full Time Post Watch Commanders RFT WCs and this will assist with improving RVDS representation within decision making forums relating to recruitment and training. The TFOC aspect of this action will continue in action 7.2.
5. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the time taken in some locations to complete the remainder of the RTC operators' course where relevant.	5.1	Agree process with LSOs for ensuring that expectations for completing development pathway training are understood and agreed prior to employment and are suitably managed thereafter.	AC Rab Middlemiss	Mar-21	Complete		100%		✓	Strategic Business Partner Forum monthly meetings in place to allow LSOs and their teams to feedback and into the process.
5. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the time taken in some locations to complete the remainder of the RTC operators' course where relevant.	5.2	Review RVDS Contract of Employment to ensure that expectations for completing development pathway training are understood and agreed prior to employment.	Geri Thomson	Mar-21	Complete		100%	May-21	✓	This action is now complete as RVDS contracts of employment now state: <ul style="list-style-type: none"> • The successful completion of the initial Task and Task Management training course • The successful completion of an initial Breathing Apparatus course, normally within 12 weeks of start date (or in exceptional circumstances a maximum of 24 weeks from start date), as part of the criteria for progression to the Firefighter (Development) status and rate of pay
6. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review the extent that all training centres teach to the national policy and procedures (but recognising the need for variations, due to the availability of differing equipment).	6.4	A Training Quality Assurance process and audit programme to be devised and introduced with good practice shared across the Service.	GC Graeme Hay	Mar-20	Complete		100%		✓	Training Delivery Assurance Policy and Procedure in place.
8. Maintenance of Skills - the SFRS should consider engagement with RDS staff when developing TFOC packages in the future.	8.1	No action required. Response to this recommendation is captured within recommendation 4.								

17. Incident Command Training - The SFRS should provide initial ICL1 command courses for RDS staff with IC responsibilities.	17.1	Modularised version of the ICL1 course to be reviewed by Training Function and LSO Areas with implementation based on findings.	GC Stuart Watson	Mar-21	May-21	Complete	19 May 21: Course content has now been completed and is currently being uploaded to the Learning Content Management System (LCMS). A pilot has been arranged to take place within Western Isles, Orkney and Shetland Local Senior Officer Area in May 2021. Feedback received from this pilot will assist in any identified amendments required to course content. The due date has been reflected to complete this action. Due to time slippage, this action remains amber. 11 August 21: Following the recent successful pilot course that was delivered in Western Isles, Orkney and Shetland, this recommendation and subsequent action is deemed to be 100% complete. It should be noted, however, that further Local Senior Officer Areas will be identified and asked to facilitate more courses based upon local requirements which will allow for future local adjustments and recommended changes to the course. This action remains green.	100%	Aug-21		
18. Incident Command Training - The SFRS should provide alternative venues and delivery methods for the initial ICL1 command course.	18.1	No action required. Response to this recommendation is captured within recommendation 17.									
19. Incident Command Training - The SFRS should develop a quality assurance process for the delivery of ICA and ICL1 courses.	19.1	Extend Quality Assurance process to incorporate ICA Course training delivery.	GC Stephen McCurry	Mar-21		Complete		100%	Aug-20	✓	Training Delivery Assurance Policy and Procedure in place.
20. Other Observations - The SFRS should review the current	20.1	A Training Quality Assurance process and audit programme to be devised and introduced with good	GC Graeme Hay	Mar-21		Complete		100%	Aug-20	✓	Training Delivery Assurance Policy and Procedure in place.
22. Other Observations - The SFRS should utilise the exit interview	22.1	Analysis of the collective reasons for leaving the SFRS and the production of a supporting action plan.	Mary Corry	Mar-21		Complete		100%	Aug-20	✓	Exit Interviews Policy and Procedure in place.
22. Other Observations - The SFRS should utilise the exit interview	22.2	Implementation of Action Plan to deliver identified improvements.	Mary Corry	Mar-22		Complete		100%	Aug-20	✓	Training Delivery Assurance Policy and Procedure in place.

SCOTTISH FIRE AND RESCUE SERVICE
People Committee



WORKFORCE DATA UPDATE

1. Target Operating Model (TOM) as at 30 September 2021

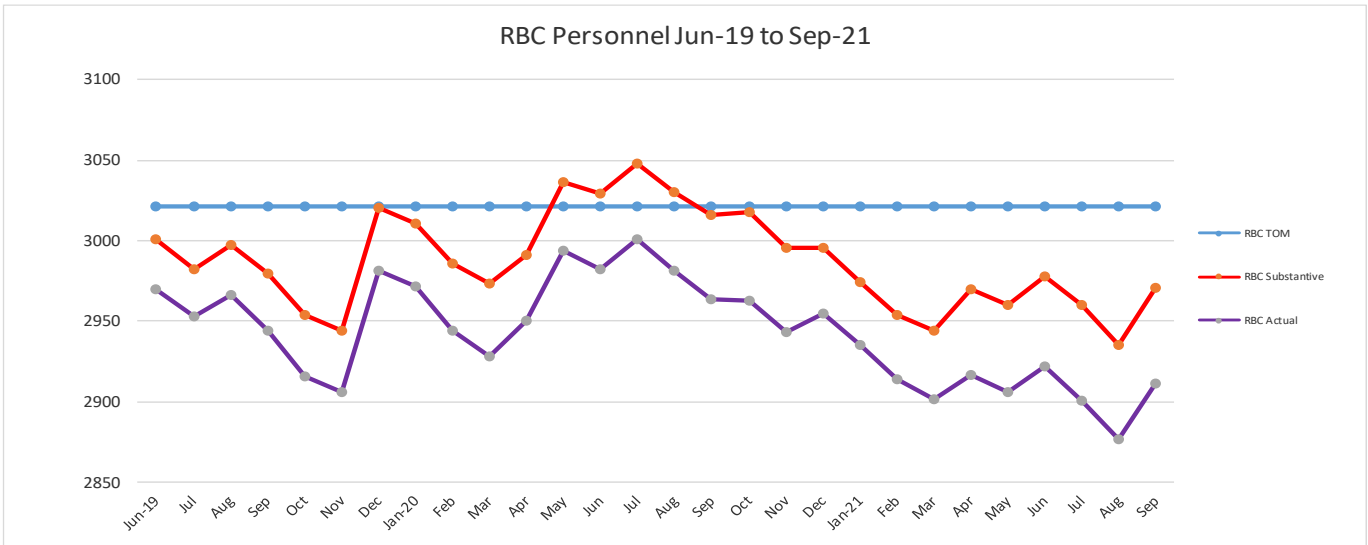
a. Resource Based Crewing (RBC)

Previous Reporting Month August 2021

Current Reporting Month September 2021

	SFRS	West	East	North	SFRS	West	East	North
TOM	3021	1531	925	565	3021	1531	925	565
Substantive	2935 (-86)	1492 (-39)	881 (-44)	562 (-3)	2971 (-50)	1508 (-23)	895 (-30)	568 (+3)
Actual Headcount	2877 (-144)	1452 (-79)	870 (-55)	555 (-10)	2910 (-111)	1465 (-66)	883 (-42)	562 (-3)

Substantive figures highlight where personnel are contracted to; Actual reflects who is currently in post. Variances in monthly figures are caused by leavers from the organisation and personnel moves to and from day, flexi and project positions.



Employee Type	TOM*	Substantive	Actual in Post		Secondments (Incl Rep Bodies), Projects, Initiatives and Temporary Positions		Business Cases
			Headcount	FTE	Substantive	FTE	FTE
FDO	255	235	251		4	29	3
Off Station	417	386	384		2	27	1
Control	170		165	161 (-9)	5	15	
RDS	3309		2789	2411 (-898)			
Volunteer	384		291	291 (-93)			
Support	854		783	739 (-115)		26	27

*Figure correct as at budget setting for the financial year. Any changes made throughout the year is not reflected.

2. SFRS Wholetime Requirements

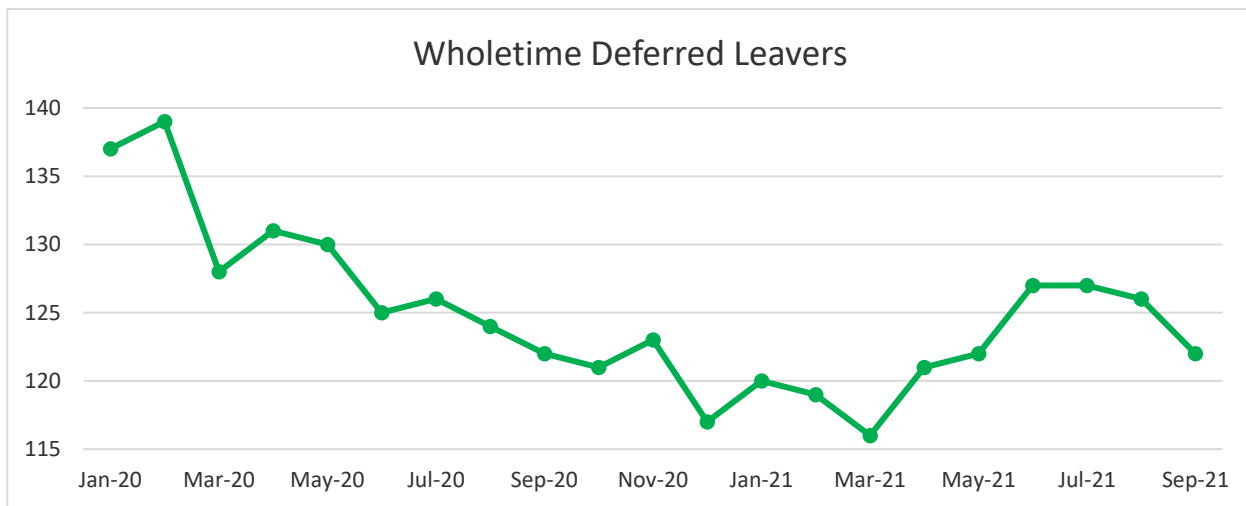
a. Current vacancies **106** + Forecasted leavers Sep/Oct **27**, Nov **18**, Dec **20**, less 48 Trainees = **123**

	Deferred Leavers	*Current Requirements by Role	Projected Additional Requirements				
			2021	2022	2023	2024	2025
Area Commander+		2	2	4	4	5	2
Group Commander	1	18		9	11		
Station Commander	8	21	5	18	14	2	
Watch Commander	40	53	19	45	40	7	
Crew Commander	17	158	14	36	16	1	1
Firefighter	56	106	23	63	68	8	4
Projected Leavers			2	24	24	24	24
Total External Candidates Required	122	106	65	199	177	47	31

*Inclusive of backfill requirements

Note; WC, CC and FF requirements are totals combining RBC and Off Station roles.

b. Risks and issues



Deferred leavers had an upward trend earlier this year but have been decreasing over the last few months; these staff can leave SFRS with four weeks' notice. The pensions remedy may see our retirement profile change; affecting resourcing, TOM and competence levels.

3. Wholetime Firefighter (WTFF) Campaign

Training have provided schedule of events to January 2023; Course duration shown with maximum capacity of National Training Centre (NTC) 36 and Newbridge 12. However, following a review of intake sizes, the January 2022 course will increase to NTC 48 and Newbridge 16.

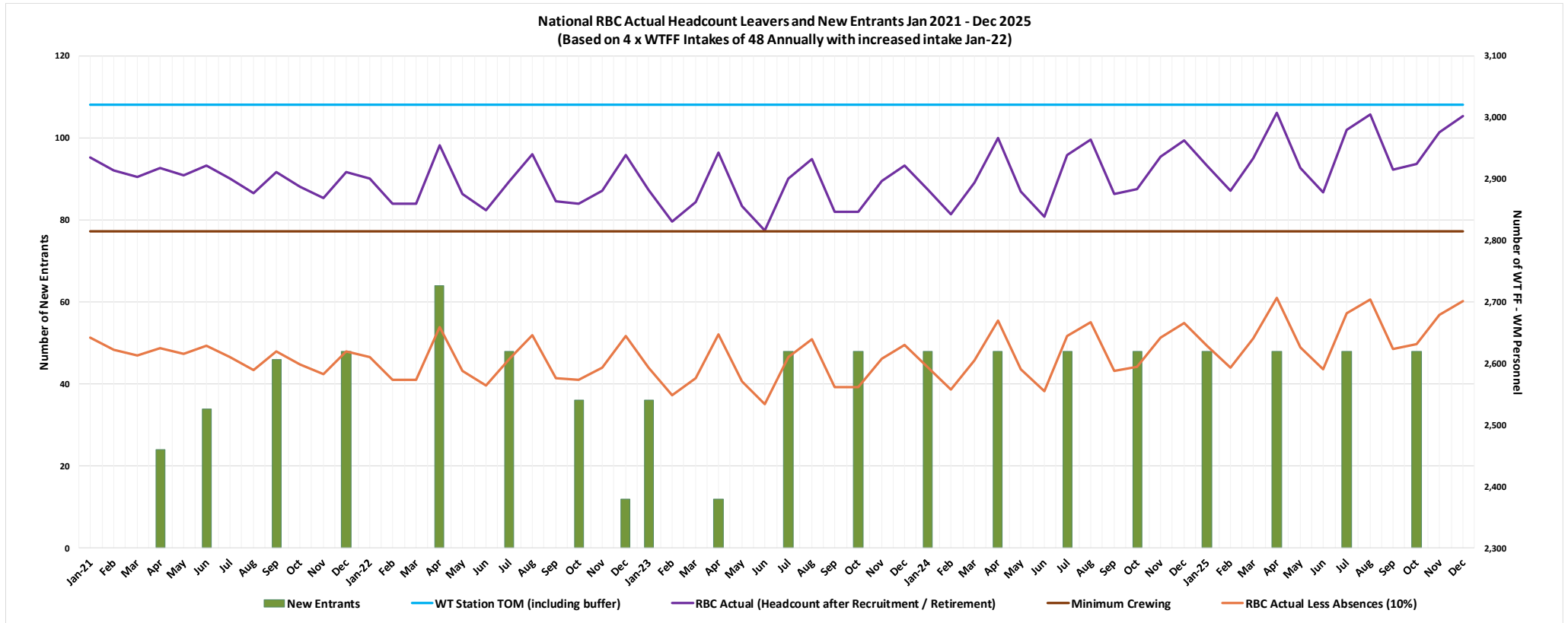
Vacancies as at 30 Sep 2021 = **106** + 337 forecasted leavers between Sep-21 and Apr-23 = **443**

Course Dates	Course Duration	Course Capacity/Intake	Requirements after Trainee Course
06 Sep – 03 Dec 21 20 Sep – 17 Dec 21	13Wk	48	N 17, E 47, W 59 = 123
10 Jan – 15 Apr 22	14Wk	64	N 23, E 48, W 61 = 132
11 Apr – 15 Jul 22 25 Apr – 29 Jul 22	14Wk	48	N 28, E 42, W 59 = 159
11 Jul – 14 Oct 22	14Wk	36	N 28, E 51, W 66 = 145
05 Sep – 09 Dec 22	14Wk	12	N 35, E 50, W 77 = 162
10 Oct – 13 Jan 23 (end date TBC)	14Wk	36	N 31, E 46, W 66 = 143
09 Jan 23 – 14 Apr 23	14Wk	12	N 38, E 64, W 85 = 187
		256	

With current intake sizes it can be observed we are steadily increasing our vacancy levels, link this to deferred leavers and pension remedy the Resourcing Recovery Group has prioritised a review on intake sizes beyond January 2022 course.

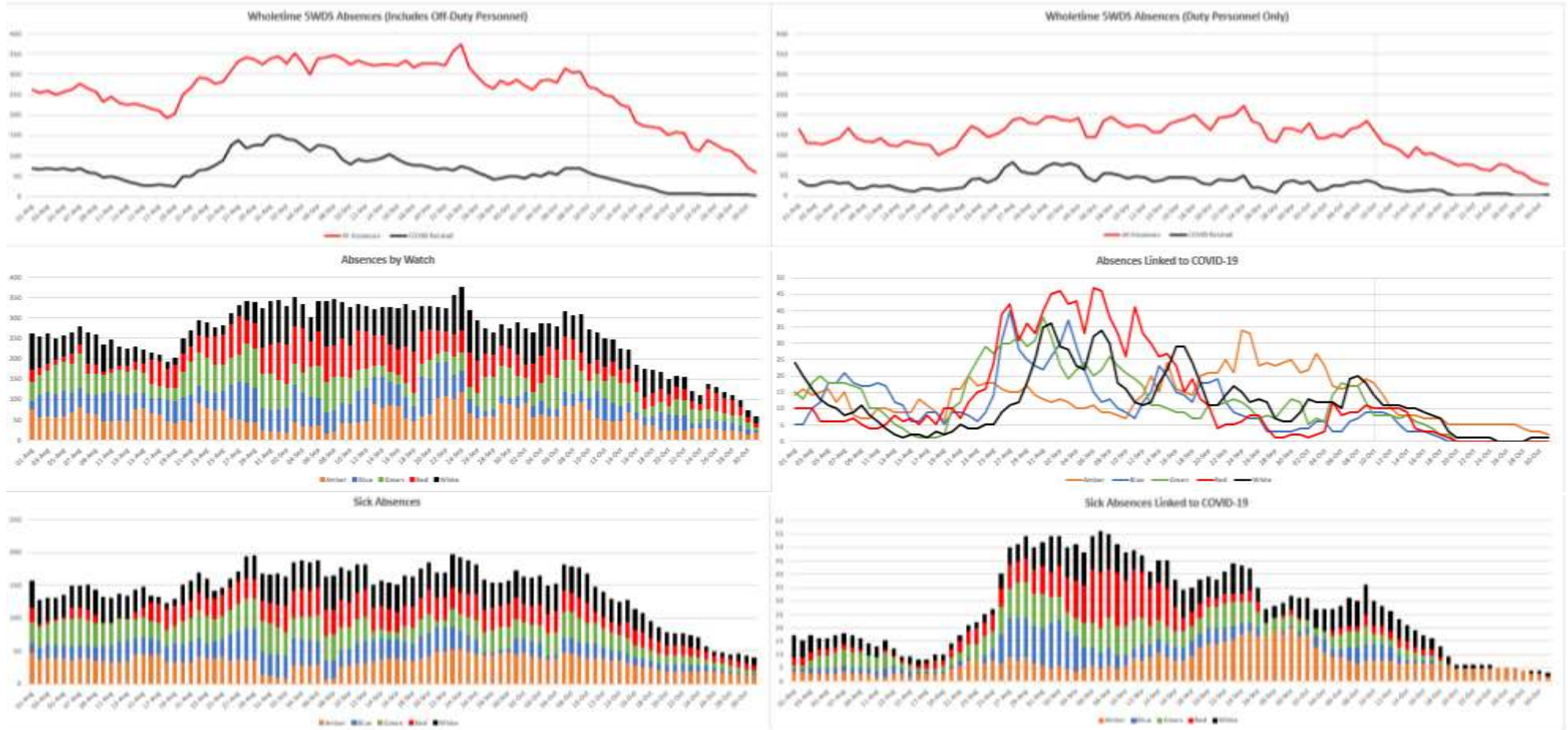
4. Long Term Forecast

An illustration of a five-year forecast based on 100% RBC TOM is provided below.

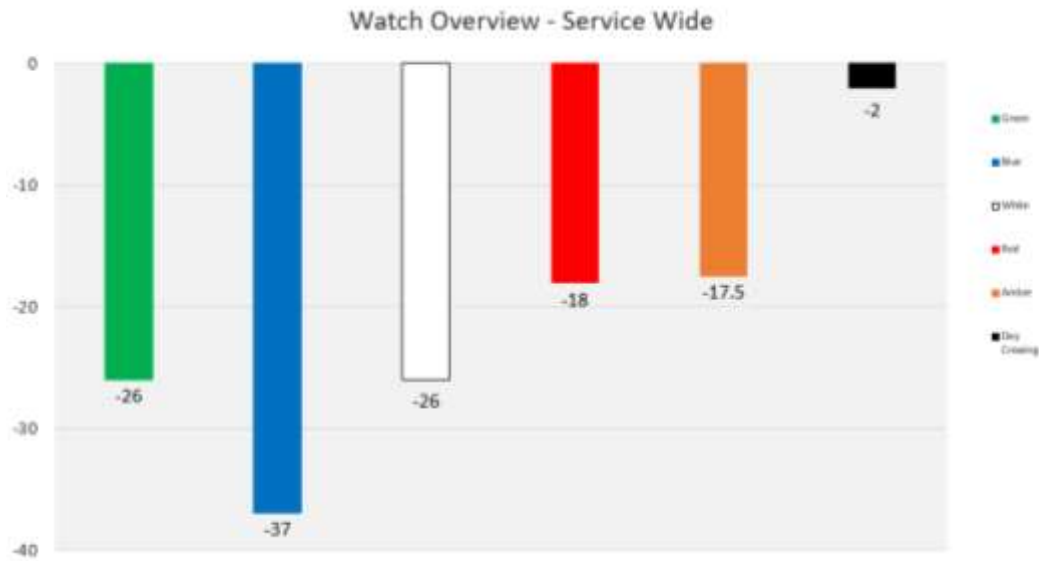


5. Absence

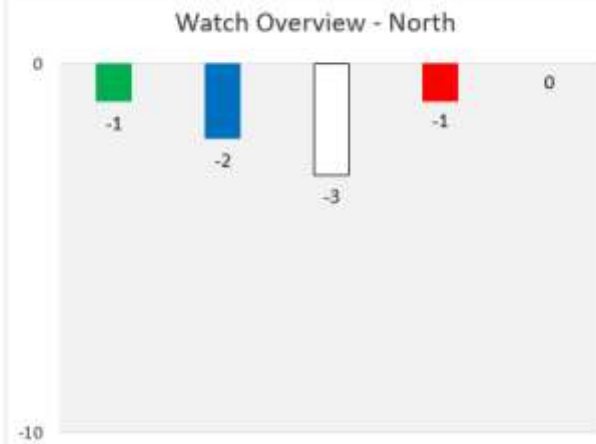
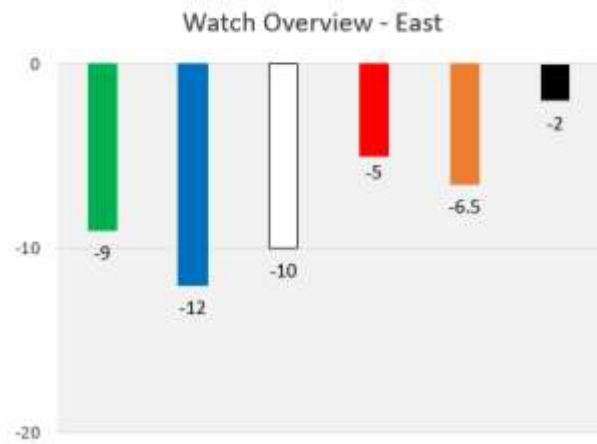
NATIONAL OVERVIEWS (AUGUST - OCTOBER)



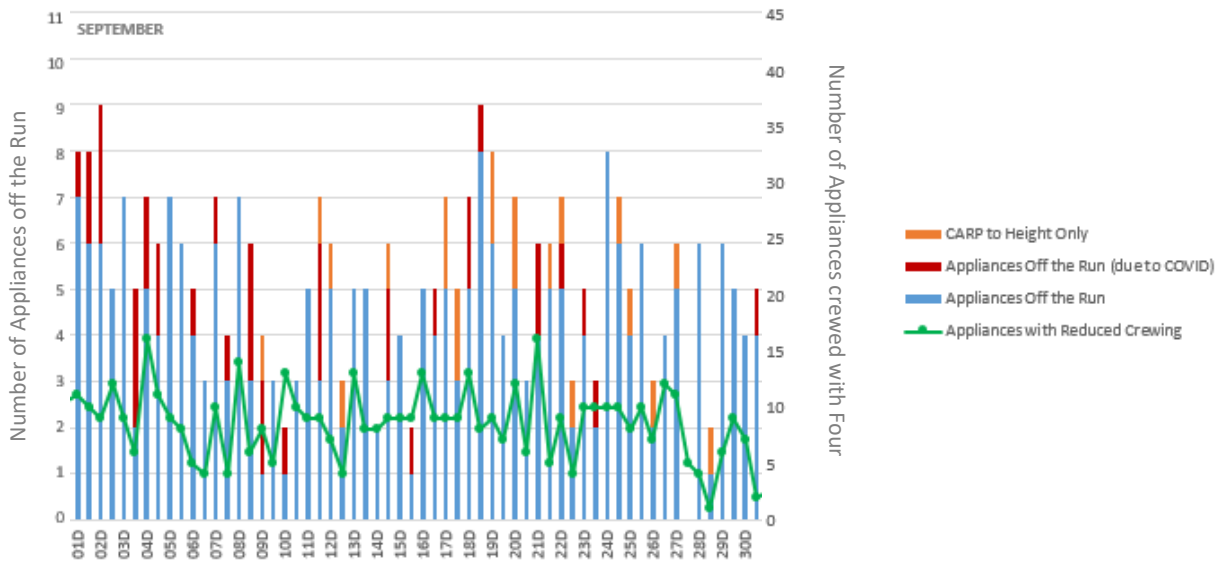
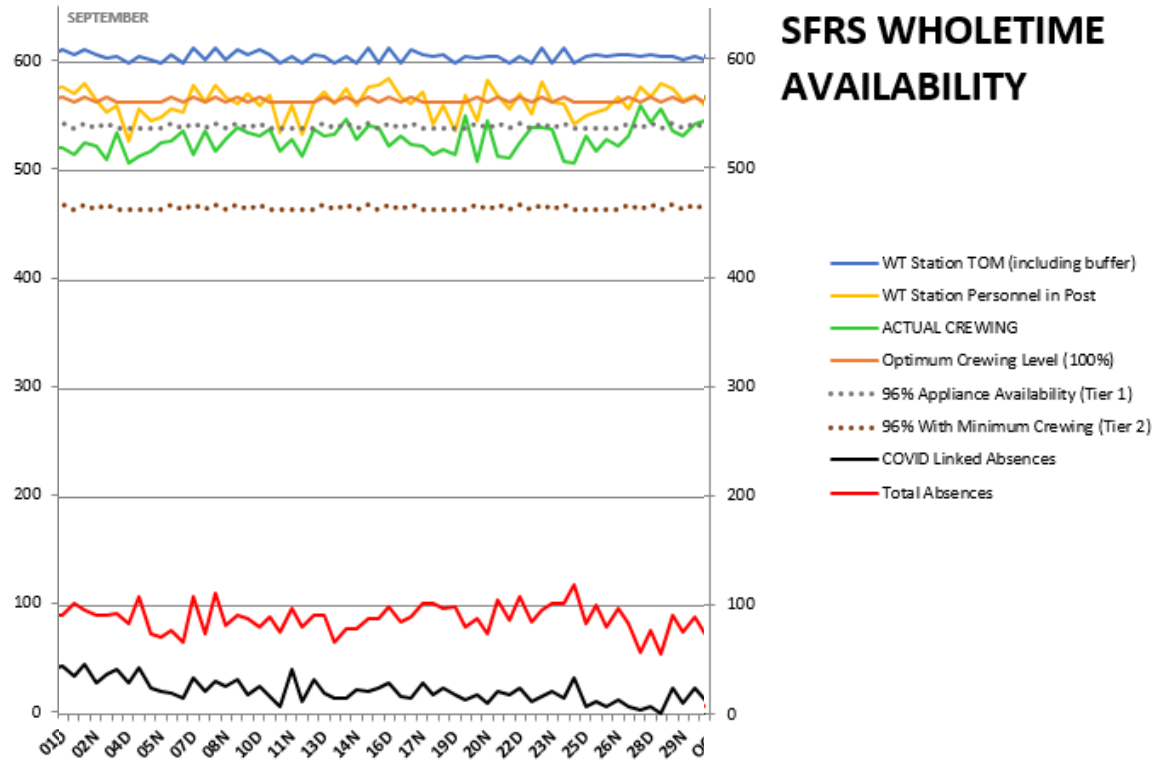
6. Watch Overview



Graphs show actual in position as at 30-Sep-21; less those on long term sick, maternity leave or alternative duties where a temporary replacement is in place



7. RBC Availability



8. RVDS Vacancies

a. RDS Vacancies by SDA - Currently **898*** (FTE) vacancies:

	TOM*	Actual	Current Vacancies	Projected Leavers**	
				2021	Annually
East	563	432	-131	10	48
North	1933	1338	-595	28	129
West	813	641	-172	19	73
TOTALS	3309	2411	-898	57	250

*Current TOM under review

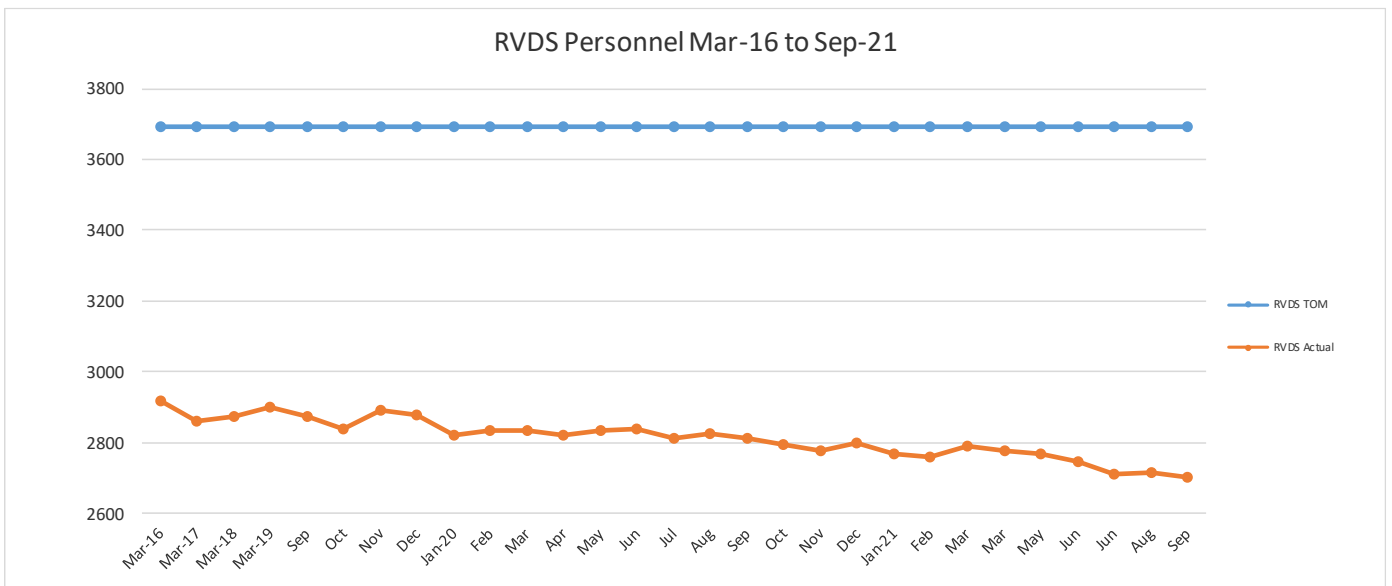
**Based on 5-year average 01-Sep-16 to 31-Aug-21

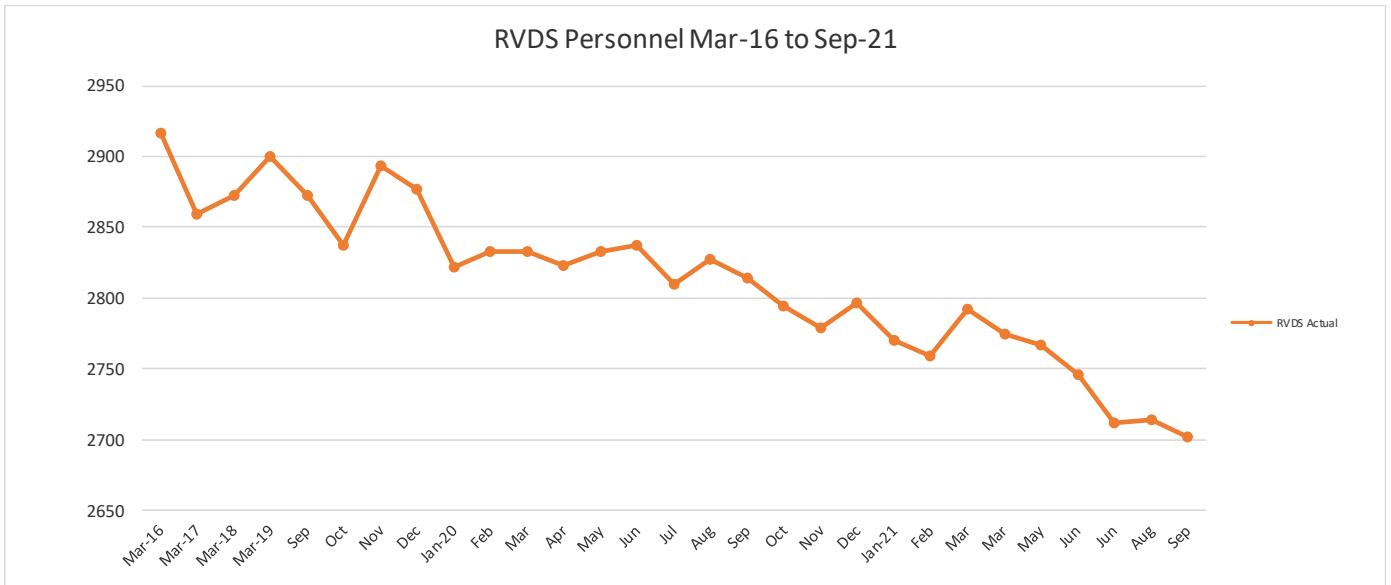
b. Volunteer Vacancies by SDA - Currently **93*** vacancies:

	TOM*	Actual	Current Vacancies	Projected Leavers**	
				2021	Annually
West	284	220	-64	3	22
North	100	71	-29	3	11
TOTALS	384	291	-93	6	33

*Current TOM under review

**Based on 5-year average 01-Sep-16 to 31-Aug-21





9. RVDS Recruitment

The 2022 RVDS Recruitment Project Plan has been agreed.

2022 Intakes	Course Capacity
January/February	43
March	38
May	35
June	30
August	16
September	55
November	45
December	12
	274

Based on a 5-year average from 01-Sep-16 to 31-Aug-21, there are approximately 287 RVDS leavers from SFRS per year.



Report No: C/PC/33-21

Agenda Item: 11

Report to:	PEOPLE COMMITTEE						
Meeting Date:	2 DECEMBER 2021						
Report Title:	COMMITTEE ALIGNED DIRECTORATE RISK UPDATE						
Report Classification:	For Scrutiny	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee (PC) with a risk report identifying Directorate risks and controls pertinent to the business of the Committee.						
2	Background						
2.1	The purpose of the risk register is to inform decision making through Scrutiny and Assurance processes, providing additional awareness of the risks faced and the actions required to minimise these risks.						
2.2	The Audit & Risk Assurance Committee (ARAC) is responsible for advising the Board and the Accountable Officer on the adequacy and effectiveness of the Service's arrangements for risk management and has oversight of the Strategic Risk Register.						
2.3	All Committees, and Executive Boards, will be responsible for scrutinising the adequacy of management's response to risks identified through risk registers, pertinent to the business of the Committee.						
2.4	The Strategic Leadership Team (SLT) has responsibility for the identification and management of strategic risk and will ensure that the Strategic Risk Register (SRR) presents a fair and reasonable reflection of the most significant risks impacting upon the organisation.						
2.5	Strategic risks are prepared in consultation with the Board and SLT and are managed collectively by the SLT, with each Directorate Risk allocated to an identified Head of Function. These Responsible Officers provide information on the current controls in place and identify additional actions still required.						
3	Main Report/Detail						
3.1	The risk register is a management tool that provides assurance to the Service and its scrutiny bodies that the significant risks to the organisation have been identified and managed and are subject to ongoing monitoring and review.						
3.2	The development of a revised risk template and associated report has focused on providing specific, measurable, achievable, realistic and timely actions. Working with Directorates all associated risk actions are being reassessed in line with these SMART objectives and will continue to be revised over the forthcoming quarterly reports.						

<p>3.3</p>	<p>Appendix 1 to this report provides the People Board with the current risk report, outlining:</p> <ul style="list-style-type: none"> • Strategic Risk Summary – Appendix 1a • Aligned Directorate Risk Summary – Appendix 1b • Directorate Risk Control summary – Appendix 1c • Directorate Closed Control Summary – Appendix 1d • Directorate Closed Risk Summary – Appendix 1e • Directorate Risk Rating Change summary – Appendix 1f • New Directorate Risks – Appendix 1g • New Directorate Control Summary – Appendix 1h
<p>3.4</p>	<p>The People Committee are asked to scrutinise the information provided and use the risk register to identify future risk spotlights.</p>
<p>4</p>	<p>Recommendation</p>
<p>4.1</p>	<p>The People Committee is asked to:</p> <ul style="list-style-type: none"> • Scrutinise the People Committee Risk Report. • Identify future risk spotlights to be provided to the Committee.
<p>5</p>	<p>Key Strategic Implications</p>
<p>5.1</p>	<p>Risk</p>
<p>5.1.1</p>	<p>The risk register forms a core part of the SFRS governance, risk management and assurance arrangements.</p>
<p>5.2</p>	<p>Financial</p>
<p>5.2.1</p>	<p>There are no direct financial implications associated with this report.</p>
<p>5.3</p>	<p>Environmental & Sustainability</p>
<p>5.3.1</p>	<p>There are no direct environmental or sustainability issues.</p>
<p>5.4</p>	<p>Workforce</p>
<p>5.4.1</p>	<p>There are no direct Workforce issues associated with this report.</p>
<p>5.5</p>	<p>Health & Safety</p>
<p>5.5.1</p>	<p>There are no direct Health & Safety implications associated with this report.</p>
<p>5.6</p>	<p>Training</p>
<p>5.6.1</p>	<p>The development of a revised in-house risk register and report requires additional engagement and training of responsible staff.</p>
<p>5.7</p>	<p>Timing</p>
<p>5.7.1</p>	<p>There are no significant timing implications associated with this report.</p>
<p>5.8</p>	<p>Performance</p>
<p>5.8.1</p>	<p>The risk management framework forms part of the Services wider governance arrangements which collectively ensure performance is managed and improved where possible.</p>
<p>5.9</p>	<p>Communications & Engagement</p>
<p>5.9.1</p>	<p>Direct communication and engagement with the Board, SLT and Directorates ensures awareness and ownership of risk is effectively managed.</p>

5.10 5.10.1	Legal There are no direct legal implications arising from this report	
5.11 5.11.1	Information Governance There are no direct information governance implications associated with this report.	
5.12 5.12.1	Equalities An Equality Impact Assessment has been undertaken in relation to the Risk Management Policy. There are no additional equality implications associated with this report.	
5.13 5.13.1	Service Delivery There is no direct implication to Service Delivery arising from this report.	
6	Core Brief	
6.1	Not applicable.	
7	Appendices/Further Reading	
7.1	Appendix 1 – People Committee Risk Report	
Prepared by:	Tracy Shankland, Risk and Insurance Support Assistant	
Sponsored by:	David Johnston, Risk and Audit Manager	
Presented by:	Liz Barnes, Director of People and Organisational Development	
Links to Strategy and Corporate Values		
<p>The Risk Management Framework forms part of the Services Governance arrangements and links back to Outcome 4 of the 2019-22 Strategic Plan, specifically Objective 4.2</p> <ul style="list-style-type: none"> • Outcome 4: We are fully accountable and maximise our public value by delivering a high quality, sustainable fire and rescue service for Scotland. • Objectives 4.2: We will minimise the risks we face through effective business management and high levels of compliance with all our responsibilities. 		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>2 December 2021</i>	<i>For Scrutiny</i>



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

People Committee Risk Report

September 2021 – Quarter 2 Update

Contents:

- Strategic Risk Summary – Appendix 1a
- Aligned Directorate Risk Summary – Appendix 1b
- Directorate Risk Control summary – Appendix 1c
- Directorate Closed Control Summary – Appendix 1d
- Directorate Closed Risk Summary – Appendix 1e
- Directorate Risk Rating Change summary – Appendix 1f
- New Directorate Risks – Appendix 1g
- New Directorate Control Summary – Appendix 1h

Strategic Risk Summary

Appendix 1a

Strategic Risk	Description	SLT Risk Owner	Risk Rating
1	Ability to improve the safety and well-being of people throughout Scotland through the delivery of our services	Director of Service Delivery	16
2	Ability to reduce the number of unwanted fire alarm signals and associated occupational road risk	Director of Service Delivery	15
3	Ability to collaborate effectively with partners and communities, to enhance service delivery and best value	Deputy Chief Officer	12
4	Ability to ensure legal and regulatory compliance	Director of Strategic Planning, Performance and Communications	12
5	Ability to have in place a suitably skilled, trained and motivated workforce that is well supported both physically and mentally	Director of People & Organisational Development & Director of Training, Safety and Assurance	16
6	Ability to have in operational use the necessary assets, equipment, supplies and services to enable the smooth running of the organisation, that exploit available technologies and deliver public value	Acting Director of Asset Management	20
7	Ability to deliver a high quality, sustainable service within the funding envelope	Acting Director of Finance and Procurement	12
8	Ability to anticipate and adapt to a changing environment through innovation and improved performance	Director of Service Development	12
9	While Covid-19 remains a threat to health, the ability of SFRS to protect staff, partners and the public while meeting service delivery demands	Deputy Chief Officer	16

Aligned Directorate Risk Summary

Appendix 1b

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
4	Legal and regulatory compliance	TSA005	Health and Safety Legislation	There is a risk of SFRS not fulfilling its health and safety legislative requirements due to not completing the annual health and safety Improvement plans. This could affect the safety of our staff and communities, external scrutiny resulting in criminal or civil litigation and adverse publicity.	Head of Health and Safety and Assurance	9 (3 x 3)	PC	NSAB
5	Skilled, trained and motivated staff	FCS001	Sufficient Capacity	There is a risk that FCS doesn't have sufficient capacity to undertake required workload due to increasing Covid-19 and other commitments. This can result in reduced capacity to manage business as usual activities and other requirements placed upon the Directorate.	Director of Finance and Contractual Services	16 (4 x 4)	PC	PB
5	Skilled, trained and motivated staff	SD006	Statutory Duties	There is a risk that Service Delivery is unable to maintain an effective level of capacity and resource within the Directorate because of challenges relating to the recruitment, promotion and retention of staff. This could result in Service Delivery not meeting its statutory duties under <ul style="list-style-type: none"> - The Fire (Scotland) Act 2005, - The Fire and Rescue Framework for Scotland 2016, - The Fire (Additional Function) (Scotland) Order 2005, - Regulation 11 of the Building (Procedure) (Scotland) Act 2004 	Director of Service Delivery	16 (4 x 4)	PC	PB

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Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
5	Skilled, trained and motivated staff	TSA001	Training Resources	There is a risk of there being insufficient staff capacity and resources available to meet Service demand due to the high levels of training demand and the impact on delivery from Covid-19 pandemic control measures or the impacts of EU Exit. This could result in political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and adversely impact upon the development pathway for staff.	Head of Training	16 (4 x 4)	PC	PB
5	Skilled, trained and motivated staff	POD008	Medical Restrictions	Risk the Health and Wellbeing Team are restricted in the way they can undertake recruitment medicals and fitness assessments meaning the existing backlog of routine medicals and fitness assessments is not addressed and results in reduced availability and increased health risks to operational staff.	Head of People and Organisational Development	15 (3 x 5)	PC	PB
5	Skilled, trained and motivated staff	POD009	Employment Tribunals	Reputational and financial risk aligned to volume of employment tribunal claims and potential penalties aligned to equality and diversity implications cited in claims, resulting in SFRS having a poor employer brand.	Head of People and Organisational Development	15 (3 x 5)	PC	PB
5	Skilled, trained and motivated staff	POD011	Pay Awards	Risk of delay to pay and competence awards due to ineffective WTFF Development Programme Policy and process implementation leading to employee discontent and resulting in employee grievances.	Head of People and Organisational Development	15 (3 x 5)	PC	PB

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Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
5	Skilled, trained and motivated staff	POD004	Staff Recruitment	The risk of being unable to support recruitment of staff across the SFRS, in a timely manner and aligned with workforce planning requirements and 2021 approved Business Cases due to prolonged recruitment processes or delayed/unplanned recruitment scheduling resulting in a rise in vacant posts and an inability of SFRS to deliver core services.	Head of People and Organisational Development	12 (3 x 4)	PC	PB
5	Skilled, trained and motivated staff	POD006	Staff Wellbeing	The risk that the physical and mental wellbeing of POD staff is affected as a result of the challenges presented by the pandemic.	Head of People and Organisational Development	12 (3 x 4)	PC	PB
5	Skilled, trained and motivated staff	TSA007	Staff/Resources Impact of COVID-19	There is a risk of there being insufficient staff capacity and resources available to meet Service demand with regard improvement plans and HSMS due to the significant impact of COVID -19 workstreams on HS staff. This could result in criminal /civil litigation and associated financial and reputational costs adverse scrutiny whether internal or external, impact on the well-being of staff.	Head of Health and Safety and Assurance	12 (4 x 3)	PC	NSAB
5	Skilled, trained and motivated staff	POD007	Staff Capacity	The risk that key staff within the POD directorate become unavailable or are absent resulting in increased work load for others and reduced levels of knowledge, capacity and expertise.	Head of People and Organisational Development	8 (2 x 4)	PC	PB

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Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
5	Skilled, trained and motivated staff	POD005	Employee Wellbeing	The risk of not developing and providing wellbeing support to all SFRS employees, (both mental and physical health) resulting from a lack of resources, planning and co-ordination of wellbeing activity and support which results in higher levels of employee absence and lower levels of engagement.	Head of People and Organisational Development	6 (2 x 3)	PC	PB
8	Improve performance	TSA008	Training Resources	There is a risk of there being insufficient facilities available to deliver training to staff due to the impact of the enactment of Section 19 Road Safety Act. This could result in the failure to utilise a local delivery model at point of need, increased pressure on centralised delivery, reputational and financial risk to the Function, Directorate and Service.	Head of Training	16 (4 x 4)	PC	PB
8	Improve performance	TSA003	Lessons Learnt	There is a risk of SFRS not learning lessons from experience, notable practice, innovation, investigations and case law because of not sharing lessons in a manner which encourages communication, engagement and securing ownership by risk owners. This could affect the safety of our staff and communities, resulting in adverse impact on reputation and external scrutiny	Head of Health and Safety and Assurance	12 (3 x 4)	PC	NSAB

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Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (Pxl)	Committee	Executive Board
9	Protect Staff Covid-19	TSA002	Staff Training	There is a risk of there being insufficient staff capacity and resources available to deliver training to staff due to the ability for our facilities to accommodate the previous numbers of students due to the need to observe social distancing protocols. This could result in the failure to deliver on the Training Needs Analysis (TNA), political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and the development pathway for staff.	Head of Training	20 (5 x 4)	PC	PB

Directorate Risk Control Summary

Appendix 1c

SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
4	TSA005	Health and Safety Legislation	Function Plan - Implementation of audit programme to ensure robust implementation by risk owner.	Head of Health and Safety and Assurance	31/03/2022	Amber - 50%	Workplace rapid reviews continues and currently trying to secure staff for auditing roles.	9	9	PC	NSAB
5	TSA001	Training Resources	Work-packages and associated milestones to be agreed for the Projects within the Training Continuous Improvement Programme.	Head of Training	31/03/2022	Green - 50%	Programme Manager appointed November 2020. Review of current status complete. Review of recommendations are underway. Business case has been submitted for a Programme Support resource. Additional resource now appointed for a number of posts, vacancies still exist.	16	12	PC	PB
5	TSA001	Training Resources	Decentralisation of business partnering model (Year 1 of 3yr strategy)	Head of Training	31/03/2022	Amber - 30%	Harmonised Instructor Terms and Conditions Implementation due 1st July 2021. Recruitment Practical Selection Tests and Task & Task Management Courses being delivered locally.	16	12	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
							Breathing Apparatus Instructor (BAI) Re-Accreditation Programme has been developed and will be re-instigated as COVID restrictions ease. Review of Specialist Instructor Skills underway. Continue review of Training Delivery Models utilising distance learning and assessment where appropriate.				
5	FCS001	Sufficient Capacity	Realign processes and establish a dedicated team across Directorates to manage the ongoing impact of Covid.	Head of Asset Management	31/03/2022	Green - 60%	Monthly reporting to SLT to monitor performance - increasing infection rates resulting in staff absence and interruption to service delivery agreement to review BAU to manage workloads	16	8	PC	PB
5	FCS001	Sufficient Capacity	Recruitment of additional temporary resources as agreed within business cases to complete recovery activity	Head of Finance and Procurement	31/12/2021	Green - 40%	Through BCTAG activity to prioritise recruitment, activity to recruit is progressing and job descriptions now being evaluated with some post now filled (Verification Assistants in post).	16	8	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	SD006	Statutory Duties	Undertake a strategic review of prevention and protection structures and delivery to ensure they remain sustainable and meet legislative requirements.	Head of Community Safety Engagement	31/03/2022	Amber - 25%	Planning for a strategic review of Prevention and Protection has been initiated with the scope and timeline agreed. A programme of engagement is planned for Q1 and Q2 with a final report due at the end of Q3.	16	12	PC	PB
5	SD006	Statutory Duties	Recruitment of additional Auditing Officers and Community Safety Advocates following approval of business case	Head of Community Safety Engagement	31/03/2022	Green - 75%	Recruitment will be initiated once there is capacity within the SFRS recruitment process. This is being progressed by the BCTAG. Selection process now at interview stage	16	12	PC	PB
5	SD006	Statutory Duties	Complete structure review of LSO management teams across all SDA's.	Head of Service Delivery North	31/03/2022	Green - 50%	Analysis of resource and capacity within LSO management teams across the Service Options Report to be submitted to Service Delivery DMT with proposals	16	12	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	SD006	Statutory Duties	Operational Availability Group to monitor availability throughout the year and implement further controls as required.	Head of Service Delivery East	31/03/2022	Green - 50%	Ongoing Monthly Meetings. Refresh of RBC Version 11 (v.11) is now complete. 5 WDS rostering system (KRONOS) updated to reflect refreshed RBC v.11 and management arrangements put in place to ensure skills remain accurate. Refreshed RBC v.11 provided to Training Function to inform 2022 Training Needs Analysis. Work is ongoing to include operationally competent off-station personnel within the 5 WDS rostering system.	16	12	PC	PB
5	TSA001	Training Resources	Increase instructor numbers to aid with Training Recovery Plan and training delivery.	Head of Training	31/03/2022	Amber - 50%	Business cases submitted for the additional instructors necessary to support the Training Recovery Plan. Re-accreditation of local instructors (BAI and specialist) implemented.	16	12	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	POD008	Medical Restrictions	Project team to be recruited in full.	Head of People and Organisational Development	31/03/2022	Green - 70%	Positive progress has been made in terms of recruiting to the additional posts that will reduce the backlog. Recruitment will continue until all posts are filled.	15	5	PC	PB
5	POD009	Employment Tribunals	Collaborative CPD programme to be developed between POD and Legal teams to build insight and share learning form ET.	Head of People and Organisational Development	31/03/2022	Green - 10%	Initial meeting to develop the programmes design have taken place and are scheduled to continue.	15	8	PC	PB
5	POD011	Pay Awards	Policy review group to be established with representation from across POD and Trade unions	Head of People and Organisational Development	31/03/2022	Green - 10%	Group still to be established.	15	8	PC	PB
5	TSA007	Staff/Resources Impact of COVID-19	Monitoring of capacity able to meet Service demand	Head of Health and Safety and Assurance	31/03/2022	Green - 90%	Additional resource freed from managing SFRS Covid response but additional BAU activity still to be completed. Additional resource agreed through BCTAG with posts now subject to recruitment. Ongoing action throughout 2021/22.	12	4	PC	NSAB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	POD004	Staff Recruitment	Review of RVDS Firefighter Recruitment Process	Head of People and Organisational Development	31/03/2022	Red - 10%	The risk of POD not being able to support the organisation's recruitment processes remains high due to COVID-19 restrictions. However, the Directorate has been successful in supporting FF recruitment campaigns and other vacancy processes within Support Staff Directorates. RDS recruitment process now being considered within the national RVDS leadership forum.	12	8	PC	PB
5	POD004	Staff Recruitment	Implementing 21/22 agreed resource plan, accounting for additional activity resulting from Business Cases and business as usual recruitment	Head of People and Organisational Development	31/03/2022	Green - 35%	BCTAG now established and lead by POD. Sub group also to coordinate all recruitment activity required within the 20/21 business cases.	12	8	PC	PB
5	POD006	Staff Wellbeing	Review of Directorate communication channels, forums and meetings to develop employee connection with the Directorate and wider SFRS.	Head of People and Organisational Development	31/03/2022	Green - 60%	The frequency of team and 1:1 meetings has increased to ensure regular contact and maintain a close eye on Directorate priorities.	12	6	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	POD006	Staff Wellbeing	Agile working framework launched and rolled out. 95% complete.	Head of People and Organisational Development	31/03/2022	Green - 95%	The agile working framework has been launched and employee drop in sessions are underway to develop awareness and understanding of what agile working is, how it works and how it can benefit employees.	12	6	PC	PB
5	POD006	Staff Wellbeing	Undertake the required recruitment to appoint resources to support critical priorities.	Head of People and Organisational Development	31/03/2022	Green - 50%	A number of offers have been made and start dates agreed, however recruitment continues for posts not yet filled.	12	6	PC	PB
5	POD007	Staff Capacity	Monitoring of staff availability	Head of People and Organisational Development	31/03/2022	Green - 50%	This is being tracked on a monthly basis as BAU.	8	8	PC	PB
5	POD005	Employee Wellbeing	Strengthen Health and fitness arrangements	Head of People and Organisational Development	31/03/2022	Amber - 50%	H&W Team are progressing recruitment of additional staff following approval of business case which will address the backlog of medical and fitness assessments. A text messaging reminder service has been introduced to help reduce	6	4	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
							appointment cancellations and DNA's. The research project to establish a role-based fitness assessment will progress having been approved by the SGB.				
5	POD005	Employee Wellbeing	Review of HW model and structure	Head of People and Organisational Development	31/03/2022	Green - 20%	Initial proposals have been developed and currently being discussed with Director of POD.	6	4	PC	PB
5	POD005	Employee Wellbeing	Reduce risk from Contaminants	Head of People and Organisational Development	31/03/2022	Amber - 50%	Contaminants group and Sub-Group established. Sub-Group currently working on a LCMS hydration module and upgrading of stations to make them more contaminants friendly, i.e. laundry facilities, substance storage. Health surveillance policy proceeding through governance route which includes skin testing. Recommendations identified through UCLan report on Contaminants being progressed through sub-Group.	6	4	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
5	POD005	Employee Wellbeing	Implement agreed action plan milestones for 2021/22 aligned to Mental Health Strategy	Head of People and Organisational Development	31/03/2022	Green - 30%	<p>Mental Health Board is leading on the implementation of the Mental Health Strategy. Current focus on Suicide Prevention, Training and Policy Review.</p> <p>Mental Health Action Plan identified for implementation over next 3 to 5 years with governance undertaken through Mental Health Board.</p>	6	4	PC	PB
8	TSA008	Training Resources	Analysis of a revision to the TNA to produce a gap analysis and thereafter to develop a training delivery proposal	Head of Training	01/04/2022	Amber - 30%	<p>Engagement with Department of Transport in relation to "Derogation" clause within Road Safety Act and this being applied to Driver Training on Scottish Islands.</p> <p>SFRS Aligned now with Police Scotland and in continued discussion with the Scottish Government looking at a range of solutions, one of these being the option to make</p>	16	4	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
							the minimum standard for ERD a devolved matter. Leads from Driver Training from SFRS / Police Scotland / Scottish Ambulance Service are holding scheduled meetings to further discuss a joint strategy taking into account further information received from Department of Transport and Scottish Government.				
8	TSA003	Lessons Learnt	Completion of LCMS module targeted at learning lessons from significant events or identified accident trends.	Head of Health, Safety & Assurance	31/10/2021	Green - 75%	The interactive module for Albert Drive has been subject to consultation and final changes being made.	12	6	PC	NSAB
9	TSA002	Staff Training	Decentralisation of business partnering model utilising local delivery (Year 1 of 3yr strategy)	Head of Training	31/03/2022	Amber - 30%	Harmonised Instructor Terms and Conditions now agreed, two monthly review now scheduled. Breathing Apparatus Instructor (BAI) Re-Accreditation Programme has been developed and will be re-instigated as	20	12	PC	PB

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SR ID	Risk ID	Risk	Action Description	Owner	Estimated Completion Date	Status	Control Comments	Risk Rating	Target Rating	Committee	Executive Board
							COVID restrictions ease. Review of Specialist Instructor Skills is now complete. Scheduling of courses to re-accredit are now underway.				
9	TSA002	Staff Training	Scope out options to utilise temporary structures to increase venue capacity (Q4 2020)	Head of Training	31/03/2022	Green - 95%	Initial options appraisal undertaken and liaison with Property now commenced in order to ascertain feasibility and costs. Awaiting information from Property to complete.	20	12	PC	PB

Directorate Closed Control Summary

Appendix 1d

Control Description	Risk ID	Risk Name	Risk Description	Control Owner	Control Comments	Committee	Executive Board
Review of Consultation and Negotiation Policy	POD003	Employee Relations	The risk of being unable to maintain a positive and productive employee relations climate across SFRS as a result of ineffective and no collaborate relationships with trade union colleagues that creates a hostile and fractious employee relations climate with employee discontent.	Head of People and Organisational Development	POD reviewing policy planner for 2021/22. Action carried forward from previous year and included within a policy tracker now identified within POD. Policy now out for consultation and progressing through Governance.	PC	PB
Additional engagement with Trade Unions established in relation to key business areas, i.e. Covid and BCTAG	POD003	Employee Relations	The risk of being unable to maintain a positive and productive employee relations climate across SFRS as a result of ineffective and no collaborate relationships with trade union colleagues that creates a hostile and fractious employee relations climate with employee discontent.	Head of People and Organisational Development	Meetings held three weekly for Covid which will be ongoing with additional BCTAG meetings to be scheduled throughout the year.	PC	PB
Review of WTF	POD003	Employee Relations	The risk of being unable to maintain a positive and productive employee relations climate across SFRS as a result of ineffective and no collaborate relationships with trade union colleagues that creates a hostile and fractious employee relations climate with employee discontent.	Head of People and Organisational Development	Review of the WTF underway and out for consultation in quarter 2 21/22. Being progressed as business as usual.	PC	PB

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Control Description	Risk ID	Risk Name	Risk Description	Control Owner	Control Comments	Committee	Executive Board
Develop management arrangements to ensure robust processes are in place for the identification and evaluation of risk information from internal and external sources	TSA003	Lessons Learnt	There is a risk of SFRS not learning lessons from experience, notable practice, innovation, investigations and case law because of not sharing lessons in a manner which encourages communication, engagement and securing ownership by risk owners. This could affect the safety of our staff and communities, resulting in adverse impact on reputation and external scrutiny	Head of Health and Safety and Assurance	MA on organisational learning is complete.	PC	NSAB
AOP -S03 Action 9: Provide end of year performance report, for 2019/20, to Staff Governance Committee, Strategic leadership Team and The National Safety and Assurance Board	TSA005	Health and Safety Legislation	There is a risk of SFRS not fulfilling its health and safety legislative requirements due to not completing the annual health and safety Improvement plans. This could affect the safety of our staff and communities, external scrutiny resulting in criminal or civil litigation and adverse publicity.	Head of Health and Safety and Assurance	Final version for last financial year been to National Safety Board, SLT and People Committee.	PC	NSAB
Asset Management reviewing and readjusting workloads within current capacity with focus on achieving full recovery by end of financial year	FCS001	Sufficient Capacity	There is a risk that FCS doesn't have sufficient capacity to undertake required workload due to increasing Covid-19 and other commitments. This can result in reduced capacity to manage business as usual activities and other requirements placed upon the Directorate.	Head of Asset Management	Initial review stage undertaken and subject to monitoring.	PC	PB

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Control Description	Risk ID	Risk Name	Risk Description	Control Owner	Control Comments	Committee	Executive Board
Implementation of Positive action strategy, engagement events and outreach activity	POD001	Working Culture	The risk that a positive and transparent working culture cannot be achieved and aligned with SFRS Values because of a lack of inclusion initiatives, role modelling by senior leaders or consistency of message that results in low levels of employee engagement and performance.	Head of People and Organisational Development	POD Manager for Positive Action now appointed with strategy to be progressed as business as usual.	PC	PB
Development of Modern Apprenticeships across SFRS Roll out of Career Ready Pilot	POD001	Working Culture	The risk that a positive and transparent working culture cannot be achieved and aligned with SFRS Values because of a lack of inclusion initiatives, role modelling by senior leaders or consistency of message that results in low levels of employee engagement and performance.	Head of People and Organisational Development	Fire Fighter modern apprenticeship programme established and rolling implementation plan aligned with workforce plan.	PC	PB
Leadership' and 'People' themes emerging as a work packages from the SFRS Reset and Renew Route Map	POD001	Working Culture	The risk that a positive and transparent working culture cannot be achieved and aligned with SFRS Values because of a lack of inclusion initiatives, role modelling by senior leaders or consistency of message that results in low levels of employee engagement and performance.	Head of People and Organisational Development	Actions required to develop leadership capability and key milestones currently being developed and to be progressed as business as usual.	PC	PB

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Control Description	Risk ID	Risk Name	Risk Description	Control Owner	Control Comments	Committee	Executive Board
Revision to the Training Needs Analysis (TNA) to produce a gap analysis and thereafter to develop a training delivery proposal	TSA001	Training Resources	There is a risk of there being insufficient staff capacity and resources available to meet Service demand due to the high levels of training demand and the impact on delivery from Covid-19 pandemic control measures or the impacts of EU Exit. This could result in political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and adversely impact upon the development pathway for staff.	Head of Training	TNA and gap analysis produced. Training Recovery Plan agreed as part of People workstream under Recover, Reset and Renew. Training delivery plan now being developed and actioned. This plan will continue to be reviewed due to the on-going COVID-19 restriction. This will become business as usual.	PC	PB
Explore the use of distance learning / digital material within training delivery models.	TSA002	Staff Training	There is a risk of there being insufficient staff capacity and resources available to deliver training to staff due to the ability for our facilities to accommodate the previous numbers of students due to the need to observe social distancing protocols. This could result in the failure to deliver on the Training Needs Analysis (TNA), political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny	Head of Training	Wherever possible, course technical input is delivered via e-learning prior to physical attendance thus reducing student time and numbers on site. Incident Command courses can now be delivered and assessed remotely. Continue review of Training Delivery Models utilising distance learning and assessment where appropriate. This will become business as usual.	PC	PB

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Control Description	Risk ID	Risk Name	Risk Description	Control Owner	Control Comments	Committee	Executive Board
			whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and the development pathway for staff.				
Analysis of a revision to the TNA to produce a gap analysis and thereafter to develop a training delivery proposal	TSA002	Staff Training	There is a risk of there being insufficient staff capacity and resources available to deliver training to staff due to the ability for our facilities to accommodate the previous numbers of students due to the need to observe social distancing protocols. This could result in the failure to deliver on the Training Needs Analysis (TNA), political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and the development pathway for staff.	Head of Training	Updated position statement TNA and gap analysis produced. Training recovery plan agreed as part of People workstream under Recover, Reset and Renew. Training delivery plan now being actioned this is being undertaken on a risk based profile.	PC	PB

Directorate Closed Risk Summary

Appendix 1e

Risk ID	Risk Name	Risk Description	Parent Risk Name	Closure Reason	Risk Owner	Committee	Executive Board
POD003	Employee Relations	The risk of being unable to maintain a positive and productive employee relations climate across SFRS as a result of ineffective and no collaborate relationships with trade union colleagues that creates a hostile and fractious employee relations climate with employee discontent.	Improve Safety and Wellbeing of Communities	This risk has been closed because of the positive relationships between SFRS and our trade union colleagues. POD will continue to monitor this closely as BAU.	Head of People and Organisational Development	PC	PB
POD001	Working Culture	The risk that a positive and transparent working culture cannot be achieved and aligned with SFRS Values because of a lack of inclusion initiatives, role modelling by senior leaders or consistency of message that results in low levels of employee engagement and performance.	Skilled, trained and motivated staff	This risk has been closed because there is a range of measures and actions in place to support SFRS in being an inclusive employer and a great place to work, along with the introduction of the Building the Future Together programme which will lead the development of a positive SFRS workplace culture. The outstanding actions have been allocated and incorporated into the BAU activity of the Directorate.	Head of People and Organisational Development	PC	PB

Directorate Risk Rating Change Summary

Appendix 1f

Parent Risk ID	Parent Risk	Risk ID	Risk Name	Summary	Risk Owner	Comment on Change	Revised Rating (PxI)	Initial Risk Rating (PxI)	Committee	Executive Board
4	Legal and regulatory compliance	TSA005	Health and Safety Legislation	There is a risk of SFRS not fulfilling its health and safety legislative requirements due to not completing the annual health and safety Improvement plans. This could affect the safety of our staff and communities, external scrutiny resulting in criminal or civil litigation and adverse publicity.	Head of Health and Safety and Assurance	The reduction in the risk rating reflects the increasing percentage completion of improvement plans aligned with increased levels of awareness and engagements within Directorates (probability reduced from 4 to 3)	9 (3 x 3)	12 (4 x 3)	PC	NSAB
5	Skilled, trained and motivated staff	FCS001	Sufficient Capacity	There is a risk that FCS doesn't have sufficient capacity to undertake required workload due to increasing Covid-19 and other commitments. This can result in reduced capacity to manage business as usual activities and other requirements placed upon the Directorate.	Director of Finance and Contractual Services	Increase in probability rating reflects continuing and increasing challenges impacting upon the organisation and difficulties in recruiting staff	16 (4 x 4)	12 (3 x 4)	PC	PB

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Parent Risk ID	Parent Risk	Risk ID	Risk Name	Summary	Risk Owner	Comment on Change	Revised Rating (Pxl)	Initial Risk Rating (Pxl)	Committee	Executive Board
5	Skilled, trained and motivated staff	TSA001	Training Resources	There is a risk of there being insufficient staff capacity and resources available to meet Service demand due to the high levels of training demand and the impact on delivery from Covid-19 pandemic control measures or the impacts of EU Exit. This could result in political /reputational or financial risk to the Function, Directorate and Service, adverse scrutiny whether internal or external, reduced delivery of our critical skills training programme to accommodate other training needs and adversely impact upon the development pathway for staff.	Head of Training	Risk rating lowered. The current control measures in place reduce the probability rating.	16 (4 x 4)	20 (5 x 4)	PC	PB

New Directorate Risks

Appendix 1g

Risk ID	Risk Name	Risk Description	SR ID	Strategic Risk (SR) Name	Risk Owner	Committee	Executive Board	Target Date	Current Risk Rating	Target Risk Rating
POD008	Medical Restrictions	Risk the Health and Wellbeing Team are restricted in the way they can undertake recruitment medicals and fitness assessments meaning the existing backlog of routine medicals and fitness assessments is not addressed and results in reduced availability and increased health risks to operational staff.	5	Skilled, trained and motivated staff	Head of People and Organisational Development	PC	PB	31/03/2022	15	5
POD009	Employment Tribunals	Reputational and financial risk aligned to volume of employment tribunal claims and potential penalties aligned to equality and diversity implications cited in claims, resulting in SFRS having a poor employer brand.	5	Skilled, trained and motivated staff	Head of People and Organisational Development	PC	PB	31/03/2022	15	8
POD011	Pay Awards	Risk of delay to pay and competence awards due to ineffective WFFF Development Programme Policy and process implementation leading to employee discontent and resulting in employee grievances.	5	Skilled, trained and motivated staff	Head of People and Organisational Development	PC	PB	31/03/2022	15	8

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Risk ID	Risk Name	Risk Description	SR ID	Strategic Risk (SR) Name	Risk Owner	Committee	Executive Board	Target Date	Current Risk Rating	Target Risk Rating
POD006	Staff Wellbeing	The risk that the physical and mental wellbeing of POD staff is affected as a result of the challenges presented by the pandemic.	5	Skilled, trained and motivated staff	Head of People and Organisational Development	PC	PB	31/03/2022	12	6
POD007	Staff Capacity	The risk that key staff within the POD directorate become unavailable or are absent resulting in increased work load for others and reduced levels of knowledge, capacity and expertise.	5	Skilled, trained and motivated staff	Head of People and Organisational Development	PC	PB	31/03/2022	8	8
TSA008	Training Resources	There is a risk of there being insufficient facilities available to deliver training to staff due to the impact of the enactment of Section 19 Road Safety Act. This could result in the failure to utilise a local delivery model at point of need, increased pressure on centralised delivery, reputational and financial risk to the Function, Directorate and Service.	8	Improve performance	Head of Training	PC	PB	31/03/2022	16	4

New Directorate Controls Summary

Appendix 1h

Risk ID	Control Description	Risk Description	Committee	Executive Board	Control Owner	Control Due Date	Performance	Control Comments
FCS001	Realign processes and establish a dedicated team across Directorates to manage the ongoing impact of Covid.	There is a risk that FCS doesn't have sufficient capacity to undertake required workload due to increasing Covid-19 and other commitments. This can result in reduced capacity to manage business as usual activities and other requirements placed upon the Directorate.	PC	PB	Head of Asset Management	31/03/2022	Green 60%	<p>Monthly reporting to SLT to monitor performance - increasing infection rates resulting in staff absence and interruption to service delivery</p> <p>Agreement to review BAU to manage workloads</p>
POD005	Review of HW model and structure	The risk of not developing and providing wellbeing support to all SFRS employees, (both mental and physical health) resulting from a lack of resources, planning and co-ordination of wellbeing activity and support which results in higher levels of employee absence and lower levels of engagement.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 20%	Initial proposals have been developed and currently being discussed with Director of POD.
POD006	Review of Directorate communication channels, forums and meetings to develop employee connection with the Directorate and wider SFRS.	The risk that the physical and mental wellbeing of POD staff is affected as a result of the challenges presented by the pandemic.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 60%	The frequency of team and 1:1 meetings has increased to ensure regular contact and maintain a close eye on Directorate priorities.

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Risk ID	Control Description	Risk Description	Committee	Executive Board	Control Owner	Control Due Date	Performance	Control Comments
POD006	Agile working framework launched and rolled out. 95% complete.	The risk that the physical and mental wellbeing of POD staff is affected as a result of the challenges presented by the pandemic.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 95%	The agile working framework has been launched and employee drop in sessions are underway to develop awareness and understanding of what agile working is, how it works and how it can benefit employees.
POD006	Undertake the required recruitment to appoint resources to support critical priorities.	The risk that the physical and mental wellbeing of POD staff is affected as a result of the challenges presented by the pandemic.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 50%	A number of offers have been made and start dates agreed, however recruitment continues for posts not yet filled.
POD007	Monitoring of staff availability	The risk that key staff within the POD directorate become unavailable or are absent resulting in increased work load for others and reduced levels of knowledge, capacity and expertise.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 50%	This is being tracked on a monthly basis as BAU.
POD008	Project team to be recruited in full.	Risk the Health and Wellbeing Team are restricted in the way they can undertake recruitment medicals and fitness assessments meaning the existing backlog of routine medicals and fitness assessments is not addressed and results in reduced availability and increased health risks to operational staff.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 70%	Positive progress has been made in terms of recruiting to the additional posts that will reduce the backlog. Recruitment will continue until all posts are filled.

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Risk ID	Control Description	Risk Description	Committee	Executive Board	Control Owner	Control Due Date	Performance	Control Comments
POD009	Collaborative CPD programme to be developed between POD and Legal teams to build insight and share learning form ET.	Reputational and financial risk aligned to volume of employment tribunal claims and potential penalties aligned to equality and diversity implications cited in claims, resulting in SFRS having a poor employer brand.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 10%	Initial meeting to develop the programmes design have taken place and are scheduled to continue.
POD011	Policy review group to be established with representation from across POD and Trade unions	Risk of delay to pay and competence awards due to ineffective WTFF Development Programme Policy and process implementation leading to employee discontent and resulting in employee grievances.	PC	PB	Head of People and Organisational Development	31/03/2022	Green 10%	Group still to be established.
TSA008	Analysis of a revision to the TNA to produce a gap analysis and thereafter to develop a training delivery proposal	There is a risk of there being insufficient facilities available to deliver training to staff due to the impact of the enactment of Section 19 Road Safety Act. This could result in the failure to utilise a local delivery model at point of need, increased pressure on centralised delivery, reputational and financial risk to the Function, Directorate and Service.	PC	PB	Head of Training	01/04/2022	Green 30%	Engagement with Department of Transport in relation to “Derogation” clause within Road Safety Act and this being applied to Driver Training on Scottish Islands. SFRS Aligned now with Police Scotland and in continued discussion with the Scottish Government looking at a range of solutions, one of these being the option to make the minimum standard for ERD a

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Risk ID	Control Description	Risk Description	Committee	Executive Board	Control Owner	Control Due Date	Performance	Control Comments
								devolved matter. Leads from Driver Training from SFRS / Police Scotland / Scottish Ambulance Service are holding scheduled meetings to further discuss a joint strategy taking into account further information received from Department of Transport and Scottish Government.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



Report No: C/PC/34-21

Agenda Item: 12.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	2 DECEMBER 2021						
Report Title:	PEOPLE AND ORGANISATIONAL DEVELOPMENT POLICY REVIEW SCHEDULE UPDATE						
Report Classification:	For Information	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee (PC) with an update regarding ongoing work in relation to People and Organisation Development (POD) policies and procedures.						
2	Background						
2.1	The POD directorate is responsible for the development, implementation, review and quality assurance of a wide range of people policies and procedures for the Scottish Fire and Rescue Service (SFRS). The report is the next in a series of regular updates in this regard.						
3	Main Report/Detail						
3.1	Following the latest review of the rolling policy programme of work to reflect current and anticipated priorities and timescales the format of the POD Policy Review Schedule format was updated. The POD Policy Review Schedule remains under regular review due to work on the standardisation of uniformed terms and conditions of employment and for any revised priority work arising from transformation or legislative changes. The POD Policy Review Schedule, as at 30 September 2021, is attached as Appendix A. The schedule has been reviewed taking into account the Directorate Plan and priorities for 2021, with a focus on essential policies and the stakeholder engagement required moving forward.						
3.2	During quarter 2, the following policies were published: <ul style="list-style-type: none"> • Management of Health Conditions Policy • Wholtime Uniformed Instructor Employees – Working Hours and Leave Policy • Drivers Health Assessment Policy • Flexible Working Policy • Home Working Policy • Attendance Management Policy, Procedure and Manager Handbook • Purchase of Additional Annual Leave 						
3.3	During this quarter, the following polices were issued for consultation: <ul style="list-style-type: none"> • Pre-Placement Policy • Re-Employment Policy • Working Together Framework and associated policies 						

3.4	The Agile Working Framework was also launched, with 9 drop- in sessions attended by 188 employees delivered during this period. Moving forward, HR Business Partners will deliver this presentation to their respective Management Teams and gather views across SFRS.
3.5	Looking ahead to quarter 3, work will begin on the following: <ul style="list-style-type: none"> • Health and Wellbeing Policy • Vaccinations Policy • Case Management Policy • Clinical Audit Policy • Health and Wellbeing Records Management Policy
3.6	During this period, the following polices will also be issued for first consultation <ul style="list-style-type: none"> • Whistleblowing • Family Leave Policy • Managing Employee Performance Policy (formerly Capability Policy)
3.7	With regard to the Secondary Employment Policy (includes in-scope driving), as with other policy consultation exercises, workshops will commence with trade union representatives following feedback from the Task and Finish Group. This feedback will be taken into account and considered prior to progressing through POD Directorate Management Team and People Board.
3.8	In order to support the work of the Mental Health and Wellbeing Group, a subgroup has been established to identify and review all SFRS policies, procedures and activities which may impact on mental health and wellbeing. One of the objectives is to identify and agree the strategies, frameworks, policies and procedures which may have an impact on mental health and wellbeing and review those existing arrangements as required.
3.9	With this in mind, POD have identified those policies due for review in 2022 as well as those processes and activities which have a particular have an impact on mental health and wellbeing. This proposal will be presented to the POD Managers meeting in October for further discussion. The findings and outcomes of this discussion will be reflected in the future POD Policy Review Schedule presented to POD Directorate Management Team, People Board and People Committee.
3.10	A similar exercise is being carried out by all members of the subgroup with quarterly updates provide to the Mental Health and Wellbeing Group.
4	Recommendation
4.1	People Committee are asked to note the information included in this paper
5	Key Strategic Implications
5.1	Risk
5.1.1	There are no implications that require to be noted.
5.2	Financial
5.2.1	Where a policy has financial implications for the SFRS, financial information is collated and presented to all relevant parties prior to approval and implementation. This will also be detailed within the SFRS Business Case process.
5.3	Environmental & Sustainability
5.3.1	There are no implications that require to be noted.

5.4	Workforce
5.4.1	Employee implications are detailed within each separate policy.
5.5	Health & Safety
5.5.1	Where applicable, matters relating to health and safety are clearly outlined within each separate policy.
5.6	Training
5.6.1	Briefing sessions take place with Managers and HR Business Partners where required.
5.7	Timing
5.7.1	All policies follow a review schedule in line with the HROD Quality Management System and once approval is reached, the policies are live on the SFRS iHub.
5.8	Performance
5.8.1	All policies partake in a quality assurance process to ensure compliance. Where applicable, SFRS performance relating to matters of policy will be measured and reported.
5.9	Communications & Engagement
5.9.1	POD has a governance process in place, which involves consultation with the relevant Trade Unions, Service Delivery Area colleagues and POD practitioners during the review process.
5.10	Legal
5.10.1	All policies comply with employment legislation, are responsive to case law and aim to follow best practice.
5.11	Information Governance
5.11.1	A DPIA is not required. In relation to GDPR, all policies and procedures which involve personal data, will have a Privacy Risk Assessment (PIA) completed and these will be available on the SFRS iHub.
5.12	Equalities
5.12.1	An EIA is not required. Each policy has its' own Equality Impact Assessment and these are available on the SFRS iHub.
5.13	Service Delivery
5.13.1	The benefits and impact on employees across the Service, from all the policies detailed within the attached schedule, are contained within each supporting paper, as each policy progresses through the SFRS Governance process.
6	Core Brief
6.1	Not Applicable
7	Appendices/Further Reading
7.1	Appendix A – POD Policy Review Schedule
Prepared by:	Mary Corry POD Business Manager
Sponsored by:	Fiona Munro, Deputy Head of POD
Presented by:	Mary Corry POD Business Manager
Links to Strategy and Corporate Values	
Strategic Plan 2019-22 Outcome 3: People	

Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>POD DMT</i>	<i>19 October 2021</i>	<i>For Decision</i>
<i>Employee Partnership Forum</i>	<i>18 November 2021</i>	<i>For Information Only</i>
<i>People Board</i>	<i>11 November 2021</i>	<i>For Information Only</i>
<i>People Committee</i>	<i>02 December 2021</i>	<i>For Information Only</i>

POD POLICY REVIEW SCHEDULE

KEY:

POLICY OUT FOR PEER REVIEW
POLICY WITH POD DMT
POLICY OUT FOR FIRST CONSULTATION
POLICY OUT FOR FINAL CONSULTATION
POLICY AWAITING FINAL ISSUE
POLICY ISSUED

POD POLICY	NEW OR REVISED	DATE POLICY TO BE ISSUED FOR CONSULTATION	APPROX TIMESCALE FOR IMPLEMENTATION	NEXT REVIEW DATE
Employee Recognition Scheme	New	Aug-19	2021 TBC	2026
Health Surveillance Policy (linked to Contaminants Policy below)	New	Feb-21	TBC Await HSE Guidance	2026
Dignity and Integrity at Work Policy and Handbook (Bullying and Harassment)	Revised	Jun-21	Oct-21	2026
Pre Placement Policy	New	Jul-21	Nov-21	2026
Working Together Framework	Revised	July 21	Dec-21	2027
Consultation and Negotiation	Revised	July 21	Dec-21	2027
Re-Employment Policy	Revised	Aug 21	Nov-21	2026
Whistleblowing	Revised	Oct 21	Jan 22	2026
Managing Employee Performance(Capability)	Revised	Oct-21	Jan-22	2026
Family (Maternity, Paternity, Adoption, Parental, Shared Parental & Carers) Leave	Revised	Oct-21	Jan-22	2026
Uniformed Managers In-Development to Competent	Revised	Nov-20	Jan-22	2026
Case Management Policy	New	Nov-21	Mar-22	2027
Clinical Audit Policy	New	Dec-21	Mar-22	2027
Health and Wellbeing Records Management Policy	New	Dec-21	Mar-22	2027
Health and Wellbeing Policy	New	Jan 22	Apr-22	2027
Vaccinations Policy	New	Jan-22	Apr-22	2027
Secondary Employment (includes inscope driving)	New	Jan 22	Mar-22	2026
Trainee Firefighter Development to Competent	Revised	TBC	TBC	2026
Working Hours (Day Duty) Policy	New	TBC	TBC	2026
Clinical Supervision Policy	New	TBC	TBC	2027
Appraisal Policy and Procedures	Revised	TBC	TBC	2026
Contaminants Health Assessment Policy(linked to Health Surveillance Policy above)	New	TBC	TBC	2027
RDS Dual Contracts	New	2021 TBC - To be scoped once agreement reached on standardisation offer	–	2026
RDS Annual Leave and Public Holiday Policy	New	2021 TBC - To be scoped once agreement reached on standardisation offer	–	2026
RDS Payment for Work Activities	New	2021 TBC - To be scoped once agreement reached on standardisation offer	–	2026
Recognition of Prior Learning	New	–	–	2021
Relocation	Revised	–	–	2022

NOT PROTECTIVELY MARKED / PROTECT

POD POLICY	NEW OR REVISED	DATE POLICY TO BE ISSUED FOR CONSULTATION	APPROX TIMESCALE FOR IMPLEMENTATION	NEXT REVIEW DATE
Market Allowance Policy	Revised	-	-	2022
Recruitment and Selection	Revised	-	-	2022
Reservists	Revised	-	-	2022
Redeployment	Revised	-	-	2022
No Smoking	Revised	-	-	2022
Pay Protection (Support Staff)	Revised	-	-	2022
Career Break	Revised	-	-	2022
Death in Service	Revised	-	-	2022
Grievance	Revised	-	-	2022
Flexi-Time Scheme (Support Staff)	Revised	-	-	2022
Attendance During Adverse Weather and Disruptive Conditions	Revised	-	-	2022
Temporary Promotions Procedure	Revised	-	-	2022
Further/Higher Education (Qualification) Policy	Revised	-	-	2022
Job Evaluation	Revised	-	-	2022
ID Cards Policy and Procedure	Revised	-	-	2022
Physiotherapy Policy	New	-	-	2022
Exit Interviews Policy and Procedure	Revised	-	-	2022
Substance Misuse Policy	New	-	-	2022
Detached Duty Policy	Revised	-	-	2023
ARA Policy	Revised	-	-	2023
Code of Conduct	Revised	-	-	2023
Transfer Request Policy	Revised	-	-	2023
Firefighter Fitness Standards and Assessments Policy/Procedure	Revised	-	-	2023
Induction Process	Revised	-	-	2024
TOIL (Uniformed) Policy	Revised	-	-	2024
Transfer of Uniformed Employees Policy	Revised	-	-	2024
Support Staff Handbook	Revised	-	-	As required
Post Incident/Trauma Support Services	Revised	-	-	2024
Time off for Trade Union Duties	Revised	-	-	2025
Employment and Criminal Convictions	Revised	-	-	2025
Volunteer Policy	Revised	-	-	2025
Discretionary Policy - LGPS	Revised	-	-	2025
Reimbursement of Dental/Optical Costs	Revised	-	-	2025
Secondment	Revised	-	-	2025
Disciplinary Policy & Procedure	Revised	-	-	2025
Recall to Duty	Revised	-	-	2025
Leadership Development Centres	Revised	-	-	2025
Special Leave	New	-	-	2025
Political Restrictions Policy	New	-	-	2025
Business Travel/Reimbursement of Expenses Policy	Revised	-	-	2026

NOT PROTECTIVELY MARKED / PROTECT

POD POLICY	NEW OR REVISED	DATE POLICY TO BE ISSUED FOR CONSULTATION	APPROX TIMESCALE FOR IMPLEMENTATION	NEXT REVIEW DATE
Management of Health conditions Policy	New	-	-	2026
Wholetime Uniformed Instructor Employees - Working Hours and Leave Policy	New	-	-	2026
Flexible Working	Revised	-	-	2026
Homeworking Policy	New	-	-	2026
Drivers Health Assessment Policy	New	-	-	2026
Attendance Management Policy, Procedure and Manager Handbook	Revised	-	-	2026
Purchase of Additional Annual Leave	Revised	-	-	2026



Report No: C/PC/35-21

Agenda Item: 12.2

Report to:	PEOPLE COMMITTEE						
Meeting Date:	2 DECEMBER 2021						
Report Title:	HEALTH AND SAFETY POLICY AND MANAGEMENT ARRANGEMENTS FORWARD PLANNING SCHEDULE						
Report Classification:	For Information only	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee with an update regarding ongoing work in relation to the development and review of the Scottish Fire and Rescue Service's Health and Safety (HS) Policy and associated management arrangements (MA's).						
2	Background						
2.1	The Safety and Assurance Function are responsible for developing and reviewing the SFRS HS Policy, as well as a series of health and safety management arrangements to support the implementation of the commitment and responsibilities outlined within the policy.						
3	Main Report/Detail						
3.1	This report shows progress made against the 2019-2024 forward planning schedule up to and including 2021-2022. Due to COP26 we have delayed the publication and consultation of a number of Management Arrangements.						
3.2	The impact of COVID -19 has also resulted in the review of a few MA's not programmed into this year's schedule.						
3.3	Appendix A provides an account of the current position.						
3.4	Event Reporting and Investigation and Significant Event Investigation MA's will be issued for familiarisation post COP26 following approval at national Safety and Assurance Board on 7 October 2021.						
3.5	The Manual Handling MA review will be issued after COP26.						
3.6	A new COVID-19 MA has been developed and the COVID-19 Workplace Risk Assessment MA reviewed and updated. Both will be subject to consultation through Senior Management Board.						

3.7	Two other MA out with the scheduled programme have also been reviewed to reflect the impact of COVID -19. These are Organised Events MA and Premises Inspection MA.
3.8	The final draft of the Radiation MA is complete and will progress through consultation in due course.
3.9	The Plant and Equipment MA is in the final stages of development.
4	Recommendation
4.1	The report is provided for information only.
5	Key Strategic Implications
5.1	Risk
5.1.1	If health and safety arrangements are not fully implemented, there is a risk that the SFRS may not be compliant with its civil and criminal legislative responsibilities.
5.2	Financial
5.2.1	There are no implications that require to be noted at this time. However, any financial implications identified during development of policy or associated management arrangements will be considered by the relevant risk owner.
5.3	Environmental & Sustainability
5.3.1	There are no implications that require to be noted at this time. However, any environmental & sustainability implications identified during development of policy or associated arrangements will be considered by the relevant risk owner.
5.4	Workforce
5.4.1	Robust health and safety management arrangements has the potential to impact positively on the workforce. Specific action relating to workforce will be considered by the risk owners and progressed via the appropriate governance route.
5.5	Health & Safety
5.5.1	Health and safety requirements will be outlined within the HS Policy and associated management arrangements.
5.6	Training
5.6.1	Each management arrangement outlines the training requirements required to promote effective implementation.
5.7	Timing
5.7.1	Appendix A outlines the timescales. Implementation will be agreed with each risk owner through their annual health and safety improvement plan.
5.8	Performance
5.8.1	It is anticipated that the introduction of the health and safety management arrangements will enhance health and safety performance across the SFRS.
5.9	Communications & Engagement
5.9.1	The implementation of management arrangements is undertaken in partnership with business partners through the SFRS annual health and safety improvement plan.
5.10	Legal
5.10.1	If health and safety arrangements are not fully implemented, there is a risk that the SFRS may not be compliant with its legislative responsibilities.

5.11 5.11.1	Information Governance A Data Protection Impact Assessment (DPIA) has not been completed for this overview paper, however where applicable a DPIA will be completed for the policy and associated arrangements outlined with this paper.	
5.12 5.12.1	Equalities An Equality Impact Assessment has been completed for the HS Policy and all associated management arrangements. This assessment will be reviewed as the HS Policy and associated management arrangements are developed or reviewed.	
5.13 5.13.1	Service Delivery The implementation of management arrangements will be facilitated through the Safety and Assurance Improvement Groups.	
6	Core Brief	
6.1	Not Applicable	
7	Appendices/Further Reading	
7.1	Appendix A – Health and Safety Policy and Management Arrangements Forward Planning Schedule.	
Prepared by:	Jim Holden – Acting Deputy Head of Safety and Assurance	
Sponsored by:	John Dickie – Director of Training, Safety and Assurance	
Presented by:	Jim Holden – Acting Deputy Head of Safety and Assurance	
Links to Strategy and Corporate Values		
<p>Strategic Plan 2019-2022: Outcome 3 - We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services. Objectives 3.3 - We will care for our people through progressive health, safety and wellbeing arrangements.</p> <p>Safety Value: Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.</p>		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>National Safety and Assurance Board</i>	<i>2 December 2021</i>	<i>For information only</i>
<i>People Committee</i>	<i>2 December 2021</i>	<i>For information only</i>

Health, Safety and Wellbeing Policy and Management Arrangements Forward Planning Schedule 2019-2022

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
Dynamic Risk Assessment (DRA) and Analytical Risk Assessment (ARA) Management Guidance V1.0 and DRA and ARA Procedure V1.0	New	2019-20					21/01/2021	
Storage Management Arrangement	New	2019-20					22/07/2021	
Health and Safety Policy	Review	2019-20					09/07/2021	
Health and Safety Policy Statement	Review	2019-20					09/07/2021	
Containers/Demounts Management Arrangement	New	2020-21			N/A	N/A	11/08/2021	
Management of Plant and Equipment Management Arrangement	New	2020-21						Final Draft being completed for consultation

OFFICIAL

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
Lift Trucks Management Arrangement	New	2020-21					05/08/2020	
Generators Management Arrangement	New	2020-21			N/A	N/A		Decision to include in Equipment GRA and SSOW
Event Reporting and Investigation Management Arrangement	New	2020-21						To be issued for familiarisation post COP26
Significant Investigation Management Arrangement	New	2020-21						To be issued for familiarisation post COP26
Organised Events Management Arrangement	New	2020-21						To be issued for familiarisation post COP26
COVID-19 Workplace MA	Review	2020-21						
Pressure Systems Management Arrangement	New	2021-22					22/07/2021	

OFFICIAL

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
Confined Space Management Arrangement	New	2021-22					29/03/21	Live 29/03/21
Radiation Management Arrangement	New	2021-22						Final draft complete. Due for consultation after COP26
New and Expectant Mothers Management Arrangement	New	2021-22					29/09/21	
Manual Handling Arrangement	Review	2021-22						To be issued for familiarisation post COP26
Stress Management Arrangement	Review	2021-22					13/01/21	
Management Self-Audit V1.0	New	2021-22					22/07/21	
Legionella MA	Review	2022-23					01/09/21	Updated to harmonise Property Services Arrangements

White	Not Started
Blue	Complete
Green	On Target
Amber	Overdue by one month
Red	Overdue by more than one month

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

Agenda Item 12.3

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
3 March 2022	<ul style="list-style-type: none"> • Chair’s Welcome • Apologies For Absence • Consideration Of And Decision On Any Items To Be Taken In Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Performance & Risk Report (POD & TSA) • Partnership Working Update • Strategic Risk Register • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: POD Policy Forward Planning Schedule Update, H&S Policy Mgt Arrangements, Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting 	<ul style="list-style-type: none"> • Leadership for Change (CD to confirm) • Working Together Framework Review of Associated Policies (GC) • Building the Future Together • Learning Needs Analysis 2021-22 • Training Cont. Improvement Plan Update • Graduate Recruitment Scheme (TBC) • Asbestos at Work Update • Bullying, Harassment and Discrimination project update/policy review (RM) • Working Together Framework Review • 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update • Safety and Assurance Strategy 		

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
2 June 2022	<ul style="list-style-type: none"> • Chair’s Welcome • Apologies For Absence • Consideration Of And Decision On Any Items To Be Taken In Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Performance & Risk Report (POD & TSA) • Partnership Working Update • Strategic Risk Register • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: POD Policy Forward Planning Schedule Update, H&S Policy Mgt Arrangements, Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting 	<ul style="list-style-type: none"> • Learning Needs Analysis 2022-23? 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update • HS Policy and Policy Statement • Health & Safety Annual Report 2020/21 	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Value Added Statement

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
15 September 2022	<ul style="list-style-type: none"> • Chair’s Welcome • Apologies For Absence • Consideration Of And Decision On Any Items To Be Taken In Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Performance & Risk Report (POD & TSA) • Partnership Working Update • Strategic Risk Register • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: POD Policy Forward Planning Schedule Update, H&S Policy Mgt Arrangements, Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting 	<ul style="list-style-type: none"> • Learning Needs Analysis 2022-23 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update 		

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
8 December 2022	<ul style="list-style-type: none"> • Chair’s Welcome • Apologies For Absence • Consideration Of And Decision On Any Items To Be Taken In Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Performance & Risk Report (POD & TSA) • Partnership Working Update • Strategic Risk Register • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: POD Policy Forward Planning Schedule Update, H&S Policy Mgt Arrangements, Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting 	<ul style="list-style-type: none"> • Learning Needs Analysis 2022-23 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update 		

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
2 March 2023	<ul style="list-style-type: none"> • Chair’s Welcome • Apologies For Absence • Consideration Of And Decision On Any Items To Be Taken In Private • Declaration of Interests • Minutes of Previous Meeting • Action Log • Performance & Risk Report (POD & TSA) • Partnership Working Update • Strategic Risk Register • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: POD Policy Forward Planning Schedule Update, H&S Policy Mgt Arrangements, Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days • Review of Actions • Date of Next Meeting 	<ul style="list-style-type: none"> • Learning Needs Analysis 2022-23 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update 		