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FIRE AND RESCUE SERVICE

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PUBLIC MEETING - PEOPLE COMMITTEE

TUESDAY 21 JUNE 2022 @ 1000 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: 3 MARCH 2022 (attached)** *M Wylie*
The Committee is asked to approve the minutes of this meeting.
- 6 **ACTION LOG (attached)** *Board Support*
The Committee is asked to note the updated Action Log and approve the closed actions.
- 7 **VALUE ADDED STATEMENT (attached)** *M Wylie*
The Committee is asked to approve the report.
- 8 **EMPLOYEE PARTNERSHIP FORUM REVISED TERMS OF REFERENCE (attached)** *S Barron*
The Committee is asked to recommend the report.

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

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9 PERFORMANCE AND RISK REPORT QUARTER 4 2021/22

- 9.1 People and Organisational Development (*attached*) L Gaja
 9.2 Training, Safety and Assurance (*attached*) A Watt/J Holden
 B Farquharson
 9.3 Staffing Tactical Action Group Update (*verbal*) A Watt/L Gaja

The Committee is asked to scrutinise these reports/updates.

10 INDEPENDENT AUDIT/INSPECTION ACTION PLAN UPDATE (*attached*)

- Training of RDS Personnel

B Farquharson

The Committee is asked to scrutinise this report

11 HEALTH AND SAFETY ANNUAL REPORT 2020/21 (*attached*)

A Watt

The Committee is asked to scrutinise this report

12 MENTAL HEALTH STRATEGY/MENTAL WELLBEING CHAMPION UPDATE (*attached*)

S Haig

The Committee is asked to scrutinise this report

13 PEOPLE COMMITTEE RISK REGISTER

- 13.1 Committee Aligned Directorate Risks (*attached*) L Gaja
 13.2 Risk Spotlight: SD006 On Call Retained/Volunteer Duty System
 People Specific and around Recruitment/Training (*attached*) S Stevens

The Committee is asked to scrutinise this report

14 PARTNERSHIP WORKING

- 14.1 Employee Partnership Forum (*verbal*) S Barron
 14.2 Partnership Advisory Group (*verbal*) L Gaja

The Committee is asked to note verbal updates.

15 REPORTS FOR INFORMATION ONLY:

The Committee is asked to note the following reports:

- 15.1 **Leadership for Change Programme Update** (*attached*) R Kelling
 15.2 **Graduate Recruitment Scheme** (*attached*) C Horsburgh
 15.3 **Bullying, Harassment and Discrimination Project Update/Policy Review** (*attached*) R Munro
 15.4 **Statutory Health and Medical Surveillance** (*attached*) J Smithson

16 FORWARD PLANNING

- 16.1 POD Policy Review Schedule Update (*attached*) M Corry
 16.2 Health and Safety Policy Management Arrangements Forward Planning Schedule (*attached*) A Watt

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- 16.3 Committee Forward Plan Review (*attached*) *M Wylie*
 16.4 Items for Consideration at Future IGF, Board and Strategy Day meetings *M Wylie*
- 17 **REVIEW OF ACTIONS** (*verbal*) *Board Support*
- 18 **DATE OF NEXT MEETING**
 Thursday 15 September 2022

PRIVATE SESSION

- 19 **MINUTES OF PREVIOUS PRIVATE MEETING: 3 MARCH 2022** *M Wylie*
 (*attached*)
The Committee is asked to approve the minutes of this meeting.
- 20 **REMUNERATION, APPOINTMENTS AND NOMINATIONS**
SUB COMMITTEE UPDATE
- 20.1 Approved Minutes of last meeting – 3 March 2022 (*attached*) *F Thorburn*
 20.2 Update of last meeting – 31 May 2022 (*verbal*) *F Thorburn*
The Committee is asked to note the draft minutes and verbal report.
- 21 **PARTNERSHIP WORKING**
- 21.1 Employee Partnership Forum (*verbal*) *S Barron*
 21.2 Partnership Advisory Group (*verbal*) *L Gaja*
The Committee is asked to note verbal updates.
- 22 **KEY CASE UPDATES 2021/22 – Q4** (*attached*) *L Gaja*
The Committee is asked to scrutinise this report

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SCOTTISH
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Agenda
Item 5

PUBLIC MEETING – PEOPLE COMMITTEE

THURSDAY 3 MARCH 2022 @ 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 (LBa)	Director of People and Organisational Development
John Dickie (JD)	Assistant Chief Officer, Director of Training, Safety and Assurance
Stuart Stevens (SS)	Assistant Chief Officer, Director of Service Delivery
Bruce Farquharson (BF)	Head of Training
Scott Semple (SSe)	Head of People and Organisational Development
Lyndsey Gaja (LG)	Head of People and Organisational Development
Julie Harkins (JHa)	Acting Head of Safety and Assurance
Jim Holden (JHo)	Deputy Head of Safety and Assurance
Ceri Dodd (CD)	Deputy Head of Human Resources and Organisational Development
Kenneth Barbour (KB)	Area Commander, Training Delivery
Mary Corry (MC)	People and Organisational Development Business Manager
Desmond Donnelly (DD)	Group Commander, Chief Officer Business Support
Richie Hall (RH)	Continuous Improvement Project Manager
Anne Gordon (AG)	Leadership and Skills Development Manager
Kirsty Darwent (KD)	Chair of the Board
Nick Barr (NB)	Board Member
Alasdair Cameron (AC)	Group Commander, Board Support
Marion Lang (ML)	Corporate Business and Admin Manager
Pamela Nicol (PN)	Corporate Admin Assistant Team Leader / Minutes

1 CHAIR'S WELCOME

- 1.1 The Committee Chair opened the meeting, welcomed those present and wished to publicly acknowledge that the People Committee were meeting for the first time since the outbreak of the conflict in Ukraine and hoped for an early and peaceful resolution to the situation, our thoughts were with the people of Ukraine and added that anyone within the Service affected by the conflict should seek help and support within the Service itself and to come forward without hesitation.
- 1.2 The Committee were reminded to keep their microphones on mute unless speaking and raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question.

2 APOLOGIES FOR ABSENCE

2.1 No formal apologies were received.

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

3.1 The Committee discussed and agreed that the Key Case Updates 2021/22 Q3 would be heard in private session due to the small number of individuals involved and confidentiality in line with Standing Orders (Item 9D). The draft minutes/verbal update of the Remuneration, Appointments and Nominations Sub Committee and the verbal update on the Employee Partnership Forum and Partnership Advisory Group would also be taken in private due to the confidential nature of business taken to these meetings.

3.2 No further items were identified.

4 DECLARATIONS OF INTERESTS

4.1 None.

5 MINUTES OF PREVIOUS MEETING: THURSDAY 2 DECEMBER 2021

5.1 The minutes of the meeting held on 2 December 2021 were approved as a true record of the meeting subject to the undernoted 4 points being amended as follows:

- 7.2.1 paragraph should read 'Training, Safety and Assurance Progress and Performance Quarter 2 Report 2021/22'.
- 7.2.1 bullet point 2 should read '50 Retained Volunteer Duty System (RVDS) Trainee Firefighters completed their Breathing Apparatus and Fire Behaviour training'.
- 7.2.1 bullet point 3 should read '11 Wholetime Trainee Firefighters commenced training at Newbridge Training Centre'.
- 7.2.1 bullet point 7 requires removal of acronym (TfOC) as recorded twice.

5.2 Matters Arising

5.2.1 None

6 ACTION LOG

6.1 The Committee considered the Action Log and noted the updates.

6.2 The Committee approved the removal of 2 actions noted as complete.

7 PERFORMANCE AND RISK REPORT QUARTER 3 2021/22

7.1 People and Organisational Development (POD)

7.1.1 SSe presented the POD Progress and Performance Report Quarter 3 2021/22 to the Committee. The following key areas were highlighted:

- Q3 saw an increase in absence levels primarily due to significant increase in COVID19 sickness absences, this being the highest level of COVID19 sickness absence of any quarter since the pandemic began due to highly transmissible Omicron variant
- Significant work was required to review and allocate resources within the Service as needed
- The COVID19 absence rate has subsequently been declining since the turn of the year and has now stabilised, this will be reflected in the next quarterly report
- The buoyant and competitive UK employment market is creating challenges in attraction and retention, particularly in support staff roles
- Overall vacancy rate of 14% is driven by RVDS vacancies (which forms part of the RVDS Improvement Programme scope)
- Support staff vacancy rate is 9% and Support staff turnover has also increased from 1.4% in Q1 to 2.6% in Q3
- Work is in hand to review how and where we recruit, as well as how we position our total reward offering to prospective and existing colleagues

- Operations Control (OC) continues to experience a high and increasing absence rate (16.5% in Q3), influenced by the additional demands of COP26, bonfire night, the Command and Control Futures (CCF) Project and staff shortages
- OC recruitment and training is progressing to address staffing levels and cross functional work is underway to identify ways to support OC staff more effectively and improve colleague experience

7.1.2 The content of the report has been reviewed with the Business Intelligence (BI) team to improve the presentation of the report and a new streamlined version was introduced and shared. The Committee welcomed the executive summary.

7.1.3 The Committee asked whether future reports would show live data coming from a single source as they would like to view this in real time. SSe explained that they are working on getting information as up to date as possible without any time lag.

7.1.4 The Committee asked about comparable ratios with regards to musculoskeletal and psychological absences for Resource Based Crewing (RBC), Retained Duty System (RDS) and Detached Duty (DD). SSe explained that these areas are currently being explored and questioned at the National Safety Assurance Board to ensure that all staff and employee groups are being fully supported by most suited interventions and initiatives.

7.1.5 The Committee commended the service on keeping operational performance levels high despite working with 44% more sick days lost to COVID19 in Q3 and acknowledged the challenges faced along with the high vacancy rate. They enquired as to what impact this has had on staff morale, especially in Operations Control where absence rates are at 16.5%. SSe explained that SFRS are being more careful with their commitments at present and are acutely aware of morale in terms of not overstretching respective teams. POD have met to discuss how best to support OC in its unique environment and a comprehensive action plan is in place.

7.1.6 The Committee asked how the Service is trying to encourage recruitment and for details on the staff turnover rate of 2.5%. SSe explained that this is affected by competition in external markets and we are seeking to appeal to these markets. The Service continues to look at how best to improve practices and POD are trialling a quicker recruitment process from advert to interview through to start date, adding that we are competitive on salaries and conditions and are highlighting the SFRS brand.

7.1.7 The Committee indicated previously that they are keen to receive a spotlight update on RVDS in terms of recruitment and training and wish to seek assurances regarding this, also keeping an eye on talent attraction and retention issues across all sectors. They are keen to hear how this develops within SFRS going forward.

7.1.8 **The Committee scrutinised the report.**

7.2 Training, Safety and Assurance

7.2.1 BF presented the Training, Safety and Assurance Progress and Performance Q3 Report 2021/22 and highlighted the following key areas within Training relating to Risk Movement:

- Online delivery of Incident Command Level (ICL) 1, 2 and 3 courses (which were previously delivered in person at National Training Centre (NTC) Incident command suite) now being effectively delivered to Flexi Duty Officers (FDO's) virtually reducing the backlog and allows for flexibility in the future.
- A full Review of the Training for Operational Competence (TfOC) process has been undertaken and proposed improvements are now undergoing consultation within Service Delivery Areas (SDA's) and Directorates allowing for the harmonisation of training across the country

- Trainee Course pilot is currently underway at National Training Centre with two Trainee Firefighter Foundation Programmes (TFFFP) running concurrently for a fourteen-week period. This is highlighted as a key success as this is the first time that the TFFFP has operated continuously for seven days per week within SFRS or previously within any of the eight legacy Services
- Specialist Rescue Competence statistics were discussed and clarified. KB added a more detailed explanation for the benefit of the Committee

7.2.2 The Committee welcomed bespoke online training available to Firefighters and asked if we are addressing the needs of the learner by ensuring they are both IT confident and competent. BF advised that delivery of these courses is tailored accordingly.

7.2.3 The Committee thanked BF and KB for the detailed report.

7.2.4 JHa presented the Training, Safety and Assurance Progress and Performance Q3 Report 2021/22 and highlighted the following key areas within Safety and Assurance:

- Increase in Risk Movement with regards to development of in house Health and Safety Management system due to resourcing issues within ICT however following discussions this is now being addressed.
- Health and Safety Improvement Plan has seen a 1% increase in absence levels during Q3, however, to have only achieved a 1% increase during these very challenging times was worthy of note.
- Key Performance Indicators (KPI) have shown a positive trend in all areas with the exception of COVID19 and Health and Safety Executive (HSE) targets in relation to RIDDOR.
- In Q3 there was one RIDDOR Reportable Accident / Injury compared to two during the same quarter in the previous reporting year. The RIDDOR Reportable Event was an over seven-day absence, which occurred during Refresher Training.
- In Q3 there were three COVID19 events that were deemed to be attributable to work related transmission and therefore reportable to the HSE.
- Steady increase in Acts of Violence (AOV), SFRS are engaging with other Blue Light responders to sign a pledge which focuses on tackling violence towards emergency services and will continue to work with local areas who are seeing an upward trend. JHa added that this increase may be due to the pandemic and hopes that as society returns to near normal levels, we will start to notice a decrease in these levels.

7.2.5. The Committee thanked JHa for the detailed report, acknowledging the hard work required to keep RIDDOR levels as low in an organisation of this size by the very nature of the job itself.

7.2.6 The Committee questioned if the rise in vehicle accidents had resulted in injury to persons. JHa explained that vehicle accidents normally comprise of clipped mirrors, bumps and avoidable incidents on station premises, noting trends in vehicle accidents are mainly relating to low speed manoeuvres, with the caveat of sending a large vehicle on less than suitable roads.

7.2.7 In relation to the Health and Safety Improvement Plan progress report, the Committee questioned the position at Q3. JHa advised of the requirement to catch-up although some actions may need to be deferred until next year. JD added that the report is fluid and fluctuations occur, examples given were the staffing situation and COP26. In response, the Committee noted that the challenges were understood.

7.2.8 The Committee asked for comment as there continues to be a significant number of events with no information available. JHa advised that this is followed up with business partners ensuring information is added to Think, Act, Stay Safe (TASS) and they are engaging with HR to discuss sourcing information by other means.

7.2.9 The Committee questioned the number of Vehicle Accidents (VA), highlighting the report figures of 51% of VA required Driving Assistants to be in position, however 55% were not used. In response JHa explained that this is promoted regularly through the National Safety and Assurance Board and in liaising with Training, we will be publishing a Low Speed Manoeuvre interactive module in the next quarter to be delivered within the station. Content will now include real life prosecution cases.

7.2.10 The Committee scrutinised the report.

8 INDEPENDENT AUDIT / INSPECTION ACTION PLAN UPDATE

8.1 Training of RDS Personnel

8.1.1 KB presented the HMFSI Report relating to the Training of RDS Personnel and gave an overview into the independent audit.

8.1.2 KB highlighted Appendix A of the report which gives an overview of the dashboard detailing the live plan of 37 actions and 22 recommendations. He highlighted that all actions are progressing steadily to timescale and one of these actions is drawing to completion one year ahead of schedule, commending the team for their hard work.

8.1.3 Work to rollout Broadband in all RVDS stations is nearing completion which will significantly help in the training of Firefighters.

8.1.4 KB asked the Committee to note the progress of all action plans as presented in the audit and inspection dashboard in Appendix A and to scrutinise the Training of RDS Personnel action plan in Appendix B.

8.1.5 The Committee praised the team for managing to complete an action one year ahead of schedule especially during the current climate.

8.1.6 The Committee questioned if items noted as deferred will be reviewed. KB explained that items have been deferred for varying different reasons, some with lengthy rationale and these will be revisited although some may continue to be deferred for a significant amount of time.

8.1.7 JD explained that some pieces of work are being captured elsewhere, for example within the Continuous Improvement Programme. Action plans will be reviewed through the Training, Safety and Assurance audit process ensuring that anything which has been deferred is still valid, either to remain deferred or to be brought forward in the future for further scrutiny by the Committee.

8.1.8 Committee thanked KB for delivering an excellent piece of work.

8.1.9 The Committee scrutinised the report.

9 SAFETY AND ASSURANCE STRATEGY

9.1 JHa presented the report which provides an overview of and seeks support for the progression to publication and implementation of the Scottish Fire and Rescue Service Safety and Assurance Strategy.

9.2 JHa acknowledged that there is no legal duty to develop a Safety and Assurance Strategy however, the strategy reinforces our commitment to safety and sets out key areas of focus over the next four years. This is designed to support SFRS values and our Strategic Plan through the progression of five key themes, identified as Compliance, Culture, Control, Communication and Engagement and Continuous Improvement.

9.3 By achieving these objectives SFRS will be in a strong position to meet the requirements of ISO 45001 – Health and Safety Management Systems accreditation.

9.4 The Committee thanked JD, JHa and JHo for their reports. The Committee endorsed and supported the report.

9.5 JD welcomed the endorsement, thanking the Committee for prior scrutiny of the report and valued input.

9.6 **The Committee scrutinised the report.**

10 COMMITTEE ALIGNED DIRECTORATE RISKS

10.1 LBa presented a report on the Committee Aligned Directorate Risks and highlighted the progress being made against planned mitigations, referring to Appendix 1C of the report. LBa also highlighted the challenges faced around RVDS recruitment but added that this is being targeted by every Directorate and the Improvement Group is now achieving positive movement.

10.2 The Committee asked about our processes and contingencies in place in relation to working with other agencies in the event of a contamination risk. LBa confirmed that the contaminants group runs pilots across different stations to review station behaviours and practical facilities to identify appropriate actions to reduce risk. The subgroup also considers behaviour at scene, decontaminating at scene and transportation of kit, all of which is backed by solid research which the Fire Brigades Union commissioned.

10.3 The Committee questioned if the target date of April 2023 on Risk ID TSA009 is correct in relation to SFRS not being able to demonstrate legislative compliance due to ongoing delays with the development of the SFRS bespoke Health and Safety Management System (HSMS), Think, Act, Stay Safe. JHa advised this is a phased approach, phase two has now concluded however reporting functionality issues have occurred, limiting the volume of information that can be drawn down from the system. ICT have appointed an external contactor to address this which will enable a staggered release of modules.

10.4 The Committee agreed that following the positive movements highlighted in the report, spotlight should be on RVDS recruitment which gives the Committee the opportunity to seek more clarity around the issues and to ensure that work is progressing successfully.

10.5 **The Committee scrutinised the report.**

11 PARTNERSHIP WORKING

11.1 Overview - Employee Partnership Forum (EPF)

11.1.1 SBa gave an update on the EPF forum which met on 17 February 2022 and took the form of a workshop rather than a formal meeting with the aim of inviting people to share their aspirations for collaborative working. Key areas of discussion were as follows-

- Equality, Diversity and Inclusion
- Wellbeing
- Skills retention
- Diversity in recruitment

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

11.2 Overview - Partnership Advisory Group (PAG)

11.2.1 LBa explained that one Trade Union (Unison) attended the PAG meeting on 2 March 2022. Derek Jackson was complimentary about EPF meeting discussions. He highlighted a concern regarding a lapse in communication in relation to Policy emails being issued without giving advance notice to the Trade Union. LBa has noted this feedback.

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

12 BUILDING THE FUTURE TOGETHER

12.1 CD presented the report for information and highlighted two key points for the Committee's attention.

- Significant progress has been made in commencing Senior Management Leadership Climate and Reflection exercise.
- Progress has also been made in Leadership Development Services Framework tender.

12.2 The Committee commended this great work.

12.3 The Committee noted the report.**13 LEARNING NEEDS ANALYSIS (LNA) 2021-2022**

13.1 AG presented the report for information and highlighted two key points for the Committee's attention:

- Moving forward in working with learning partners to prioritise and deliver against training which has been identified as priority in the last quarter of the financial year.
- Successful meetings have taken place in terms of new approach on how LNA is taken forward in 2022-23 taking LNA from static document to a live document which guides and influences.

13.2 The Committee asked about difficulties faced during the pandemic. AG advised that the pandemic has affected the Service's ability to release staff and there is a requirement for flexibility within the plans.

13.3 The Committee asked to reconcile the statement detailing the Key Strategic Implications in relation to risk which states the centralised learning and development budget may not be able to support all Learning and Development activities required to support and enable Service 2021-22 priorities. AG explained that the initial LNA often exceeds the budget in the first quarter but through close working we have managed to deliver critical and priority development needs within budget.

13.4 The Committee noted the report.**14 LEARNING AGREEMENT**

14.1 AG presented the report for information and informed the Committee of the Collective Learning Partnership (CLP) approach which looks to formalise and develop strong foundations of partnership working to support lifelong learning.

14.2 The Committee asked if the agreement covered Volunteer Duty System (VDS) staff. LG advised that VDS staff are classed as employees and are therefore included.

14.3 The Committee noted the report.**15 TRAINING CONTINUOUS IMPROVEMENT PLAN UPDATE**

15.1 RH presented the report for information and advised of progress to date. The Training function has undertaken a full review of Training delivery and development within SFRS. The review generated 56 recommendations, 11 of which are complete, 33 are currently in progress and 12 have been deferred. Overall progress for the programme sits at 52%.

15.2 The Committee was asked to note the progress that has been made within the Training CIP and imminent major improvements to the Training for Operational Competence (TfOC) Framework as described in the report.

15.3 The Committee asked how long the review of recommendations will take considering the current climate and if the outcomes will be delivered back to Committee. RH advised all recommendations are contained within the action log, highlighting that a number of these

have been delivered through the pandemic as 'business as usual.' JD added that the review will follow normal governance routes and be delivered back for scrutiny.

15.4 The Committee noted the report.

16 MEASUREMENT OF ASBESTOS FIBRES DURING LIVE BURN

16.1 JHa presented the report for information. The purpose of the report is to ensure that arrangements in place were sufficient for Firefighters safety and to provide information on the level of risk which Firefighters may face if they attended an incident where asbestos containing material (ACM) was present. In summary ACM was banned in the UK in 1999 therefore, we still have a significant number of buildings with this material. The effects of inhalation of ACM are widely known and the Service was fortunate to engage world-renowned expert in the field, Professor Roger Willey and the University of Edinburgh. The findings of live burns and decontamination exercises showed that procedures are more than robust at this point in time.

16.2 The Committee highly praised this report, describing it as an excellent piece of work, worthy of publication in Edinburgh University's academic journal and being added to their formal scientific process.

16.3 JD added that the report is being sent to the National Fire Chiefs Council (NFCC) Health and Safety Group for consideration as an agenda item.

16.4 The Committee commended the report as a superb piece of work.

16.5 The Committee noted the report.

17 FORWARD PLANNING

17.1 POD Policy Review Schedule Update

17.1.1 The POD Policy Review Schedule Update report was presented to the Committee for information.

17.1.2 The Committee noted the report.

17.2 Health and Safety Policy and Management Arrangements

17.2.1 The Health and Safety Policy and Management Arrangements was presented to the Committee for information.

17.2.2 The Committee noted the report.

17.3 Committee Forward Plan Review

17.3.1 The Committee noted the Forward Plan and the proposed RVDS risk spotlight for the next meeting (June 2022).

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

17.4.1 The Committee suggested the report on Measurement of Asbestos Fibres During Live Burn be considered at a future Board meeting given the significance of it.

17.4.2 The Committee suggested the update provided on the Employee Partnership Forum (EPF) be shared with the wider Board for their information.

18 REVIEW OF ACTIONS

18.1 AC confirmed there were no formal actions raised during the meeting.

19 DATE OF NEXT MEETING

- 19.1 TBC - The next meeting is scheduled to take place on Thursday 2 June 2022. The Committee will seek an alternative date due to this being a public holiday to mark the Queen's Platinum Jubilee.
- 19.2 The Committee Chair conveyed her very best wishes to JD and JHa on their imminent retirement and thanked them for their service, adding that we are losing a wealth of experience from their departure
- 19.3 There being no further matters to discuss, the public meeting closed at 1504 hours.

PRIVATE SESSION**20 MINUTES OF PREVIOUS PRIVATE MEETING: 2 DECEMBER 2021**

- 20.1 The minutes of the private meeting held on 2 December 2021 were approved as a true record of the meeting.

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

- 21.1 The draft minutes of the RANSc meeting on 2 December 2021 had been circulated to the Committee. The Committee noted the key issues discussed at the meeting of RANSc that was held earlier today (3 March 2022).
- 21.2 **The Committee noted the draft minutes and verbal update.**

22 PARTNERSHIP WORKING**22.1 Update from Employee Partnership Forum**

- 22.1.1 Update provided within the public session.

22.2 Update from Partnership Advisory Group

- 22.2.1 Update provided within the public session.

23 KEY CASE UPDATES 2021/22 – QUARTER 3

- 23.1 LBa presented the report to the Committee providing an overview on employee relations cases which have resulted in claims to the Employment Tribunal.
- 23.2 **The Committee noted the report.**

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 4 actions. A total of 3 of these actions have been completed.

The Committee is therefore asked to approve the removal of the 3 actions noted as completed (Blue status). There is one action categorised as Green status and no actions categorised as Yellow status on the action log.

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Minute Ref	Action	Lead	Due Date	RAG Status	Completion Date	Position Statement
Meeting Date: 2 December 2021						
Item 7.1.2	Performance and Risk Report Quarter 2 2021/22 (POD): The Committee asked for further detail on the Mental Health Strategy Thematic Subgroups and their role and impact. GT provided further detail on these groups and the role of mental health champions. A further summary on the work of these groups would be included within the report to the next meeting.	LG	March 2022		June 2022	Update (03/03/2022): Further summary included in papers for March Committee meeting, in line with agreed action. Groups at early stage of being formed, developing terms of references and agreeing actions. Report will be provided for June meeting. Complete (21/06/2022): On agenda for June meeting, paper submitted.
Item 7.1.7	Performance and Risk Report Quarter 2 2021/22 (POD): The Committee to agree what is being asked of the Executive colleagues around performance reporting and level of detail and asked that they be consulted to ensure the changes and the reporting format meet its needs, this would be considered for discussion at the Annual Governance Review workshop in February 2022	MW/LB	March 2022		June 2022	Update (03/03/2022): This will be discussed at the Annual Governance workshop in February 2022. Further update (LB): There's going to be a workshop around the performance reporting more widely, however, in the meantime the relevant Directorates have agreed to provide a brief exec summary of the report to highlight any notable data. The Committee will meet for an informal initial discussion in April and then take that forward for a fuller consideration and discussion as appropriate with the Director's and their teams in May/June. Complete (21/06/2022): Workshop held on 2 May to discuss the type, level and frequency of performance reporting the Committee would like to see going forward. Key themes have been summarised, with further discussion scheduled to agree requirements and timescales.

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Item 7.2.19	Performance and Risk Report Quarter 2 2021/22 (TSA): The Committee suggested they could meet and discuss in more detail using the expertise of the Committee members to further develop the report. This will be arranged by the end of February.	AW (prev JD)	June 2022 (Org March 2022)		Update (03/03/2022): Meeting with Paul Stollard has occurred. Awaiting outcome of SPPC led workstream considering all aspects of performance reporting to the Board The Committee will discuss at their informal meeting in April and then take that forward for a fuller consideration and discussion as appropriate with the Director's and their teams in May/June. Update (21/06/2022): Following the earlier March update and recent appointment of ACO Andy Watt as Director of TSA, a meeting has been scheduled with the PC Chair to discuss Performance and Risk Reporting in more detail and in order to continue to take this work forward. A further update will follow in due course.
Item 11.6	Committee Aligned Directorate Risks: Further consideration around future spotlights on Risks with a possibility of focusing on RVDS (people specific and around recruitment) at a future meeting. however further discussion can be held as part of the forward planning meeting already scheduled to confirm and give Executive colleagues sufficient notice of any People Committee requests.	SS	March 2022		Update (03/03/2022): Risk Spotlight to be identified. The Committee will meet for an informal initial discussion in April and then take that forward for a fuller consideration and discussion as appropriate with the Director's and their teams in May/June. Completed (21/06/2022): On agenda for 21 June 2022 meeting.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/16-22

Agenda Item: 7

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2021						
Report Title:	ANNUAL VALUE ADDED STATEMENT 2021/22						
Report Classification:	For Decision	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 present the People Committee (PC) and Remuneration, Appointments and Nominations Sub-Committee (RANSC) Annual Value Added Statement 2021/22, outlining evidence of how the Committee supports the effective functioning of the Board.						
2	Background						
2.1	The Annual Value Added Statement was introduced to support the Board's overall approach to reviewing the effectiveness of its Committee operating structure and further to this feeds into the Annual Governance Statement which will be presented to the Board as part of the Annual Report and Audited Accounts for 2021/22.						
3	Main Report/Detail						
3.1	A paper outlining the arrangements for reviewing the effectiveness of the Board and its Committees was approved at its meeting on 24 June 2021. The Annual Value Added Statement of this Committee will be appended to the subsequent paper which reports to the Board on these arrangements as supporting evidence.						
4	Recommendation						
4.1	The Committee is requested to approve the contents of the Annual Value Added Statement 2021/22 as set out in Appendix A and provide feedback as necessary.						
5	Core Brief						
5.1	Not applicable						
6	Appendices/Further Reading						
6.1	Appendix A – PC / RANSC Annual Value Added Statement 2021/22						
7	Key Strategic Implications						
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)						Yes/

Prepared by:	Mhairi Wylie, Chair of the SFRS People Committee & Heather Greig, Board Support Executive Officer	
Sponsored by:	Mhairi Wylie, Chair of the SFRS People Committee & Fiona Thorburn, Chair of the Remuneration, Appointments and Nominations Sub-Committee	
Presented by:	Mhairi Wylie, Chair of the SFRS People Committee	
Links to Strategy and Corporate Values		
This links to SFRS Strategic Plan 2019-22 and contributes to Outcome 3 - We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Remuneration, Appointments and Nominations Sub-Committee</i>	<i>31 May 2022</i>	<i>For Information</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Decision</i>



**People Committee
&
Remuneration, Appointments and Nominations Sub-Committee**

Annual Value Added Statement

2021/22

1 Purpose

The purpose of this statement is to give an overview of the added value of the People Committee and Remuneration, Appointments and Nominations Sub-Committee over the period April 2021 – March 2022, in its role as a Committee supporting the work of the SFRS Board. The statement forms part of the annual review of effectiveness of the Board and its Committees, and is incorporated into the Service's Annual Governance Statement.

2 Background

The overall purpose of the PC and RANSC is to provide strategic advice and direction on matters affecting employees and to ensure that arrangements support the strategic aims and ethos of the SFRS.

3 Summary of the Committee's Work During 2021/22

Throughout the reporting period, the Committee has been keen to ensure that it focusses discussion and analysis around key aspects of work as detailed below.

Highlights of the work during the review period 2021/22 included:

- The continued monitoring of People and Organisational Development (POD) and Training, Safety and Assurance (TSA) performance and development through scrutiny, consideration and challenge of the reports and indicators provided.
- Integrated and inducted new Committee members, including a new Chair and Deputy Chair to both the People Committee and RANSC, including various orientation discussions and two workshops to review the Terms of Reference (TOR) and Committee purpose.
- We continued to monitor and take assurance from the Service managing staffing levels, diverse and changing working environments and needs throughout the pandemic.
- The progress and development of training provision, adapting to meet the needs during the pandemic and how that learning is strengthening delivery into the future.
- The continued work to strengthen leadership development pathways within the staff team across SFRS and the broader Building the Future Together Programme despite challenges presented during the pandemic.

- Innovative work with the University of Edinburgh in relation to the exposure of asbestos fibres during live burns, in order to better understand the risks and seek assurance about current safety measures.
- RANSC continued to lead negotiations on behalf of the employer for the harmonisation of RDS personnel terms and conditions and in respect of uniformed and support staff pay claims.
- Re-energising the Employee Partnership Forum and introducing a new Chair, Steve Barron.

The Committee reviewed its TOR in February 2022 to ensure its focus and responsibilities remained current and relevant. The proposed amendments to the TOR were subsequently agreed by the Board in April 2022.

4 Future Work Priorities of the Committee

The business which comes before the PC does not vary significantly from year to year and is primarily intended to obtain assurances on behalf of the Board, who are the statutory employer of all SFRS staff, regarding matters affecting employees. The RANSC formally report to the PC after each meeting. The business of the PC is set out in the TOR. These will be kept under review as necessary throughout 2022/23.

Reviews of the POD and TSA Quarterly Performance Reports and Committee Forward Plan feature regularly on the PC agenda and these enable future work priorities to be set. Work will continue in 2022/23 to support a review of the assurance reporting, accounting for the development of a new performance framework as a new SFRS Strategic Plan 2022-25 is agreed in response to the revised Fire and Rescue Framework produced by Scottish Government.

Work will continue to progress and achieve the six themes of “Our Commitment” (previously known as the Staff Governance Charter) as part of the Building the Future Together Programme (Organisational Effectiveness and Cultural Framework).

Ongoing monitoring of the people, training, finance and assets systems review and taking assurance that the lessons from the pandemic have been considered and, where appropriate, have strengthened our approaches.

Continued development of the Working Together Framework and the development and growth of the Employee Partnership Forum participation and input.

Further enhancement of Talent Management and Development, particularly considering how we meet the ongoing skills and developmental needs of the organisation and the strengths deriving from a diverse and representative workforce.

5 Actions to Improve the Committee’s Governance Arrangements

A workshop to discuss the purpose and effectiveness of the Committee was held in February 2022 to obtain the Committee members views and to identify potential ways of making the Committee more effective. Its outcomes were captured as part of the annual review to ensure continuous improvement in how the PC functions with the overall conclusion that the PC had the right skills and experience, was well led and well supported by POD and TSA colleagues, met with appropriate frequency, and provided good assurance to the Board.

The success of any organisation is critically related to the commitment and skill of its employees, and to its adherence to the culture and values it espouses. These in turn are underpinned by the policies and procedures it has in place, the arrangements and

opportunities for learning, training and development of staff so they may attain their full potential, and the quality of engagement and relations between the organisation and its representative bodies. The work of the PC and its RANSC seeks to assist the Chief Officer, the SLT, POD Director and TSA Director and their teams to plan and deliver effective policies and actions in this regard and to provide appropriate assurance to the Board accordingly. It is recommended that the PC and RANSC continue to operate in this capacity and as felt necessary report matters to the Integrated Governance Forum for discussion amongst other Committee Chairs.

Mhairi Wylie
Chair of the People Committee

Fiona Thorburn
**Chair of the Remuneration, Appointments and
Nominations Sub Committee**

May 2022

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/25-22

Agenda Item: 8

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	EMPLOYEE PARTNERSHIP FORUM REVISED TERMS OF REFERENCE						
Report Classification :	For Recommendation	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	To present a revised Employee Partnership Forum (EPF) Terms of Reference (ToR) to the People Committee (PC) as part of an annual review and for recommendation prior to submission for approval by the Scottish Fire and Rescue Service Board, thereby ensuring the continued effectiveness of the governance arrangements and for positive employee partnership working within the SFRS.						
2	Background						
2.1	To ensure our continuous improvement and effectiveness of employee partnership working.						
3	Main Report/Detail						
3.1	Following discussion at the EPF workshop meeting on the 17 February 2022 and formal EPF meeting on 19 May 2022, where this was tabled for scrutiny.						
3.2	<p>The Employee Partnership Forum is committed to working in accordance with the principles laid out in the Working Together Framework. As part of the annual general review of the EPF ToR please see below a summary of the key proposed amendments (Note Appendix A details the complete EPF ToR) for consideration:</p> <p>General:-</p> <ul style="list-style-type: none"> Update throughout the ToR, any reference to the 'Staff Governance Committee' amending to state 'People Committee'. Update throughout the ToR to state 'Representative Bodies' as opposed to referencing 'Trade Unions' this aligns with our revised Working Together Framework. <p>Section 2 Membership:-</p> <ul style="list-style-type: none"> Update to state the Chair and now Deputy Chair will be Board Members who sit on the People Committee negating the need to rotate every two years with Representative Body. Agreed this would be trialled for a period of 12 months and reviewed as part of the Annual Governance Review April 2023. <p>Section 4 Responsibilities:-</p> <ul style="list-style-type: none"> 1st bullet point - added detail to state that meetings will be based on forward planning and in relation to employee partnership matters for clarity. 						

	<ul style="list-style-type: none"> • 4th bullet point – added detail to state that the forum could address issues that have not been resolved but only after exhausting the Local Partnership arrangements. • 7th bullet – revised wording to ensure engagement is constructive and focuses on joint problem solving techniques to implement positive change with the SFRS. • 10th bullet point – added the words ‘to aid continuous improvement’, when monitoring and reviewing performance criteria against employee matters. <p>Section 5 Rights:-</p> <ul style="list-style-type: none"> • 4th bullet – ‘added in agreement with the Chair’ when asking for any other official or representative body to assist with discussion on a particular matter. • 5th bullet – added ‘The Chair will ask’ anyone attending, but who are not Members to facilitate open, honest and frank discussion. • 6th bullet – added ‘open to freedom of information requests’. <p>Section 6 Access:-</p> <ul style="list-style-type: none"> • Members of the Forum, as required, will have free and confidential access to the Chair of the Forum. <p>Section 7 Meetings:-</p> <ul style="list-style-type: none"> • 7.2 – in absence of both the Chair and Deputy Chair it has been added that ‘the Chair will seek an alternative temporary chair from the Board and brief them in advance accordingly. • 7.3 - detail added around use of MS Teams to join future meetings and arrangements to inform the Chair in advance. • 7.4 - align for governance purposes with the Standing Orders. • 7.5 - added the option for the Chair and/or the Deputy Chair to meet with the Director of POD ahead of each forum meeting to review agenda and attendees needed. • 7.7 - added the provision of an updated forward plan and specific reference to the provision of an update from the Director of POD or suitable representative. <p>Section 8 Information Requirements: -</p> <p>Updated Committee to state ‘Forum.</p> <p>Inserted an Appendix 1 – clearly detailing standing forum membership.</p> <ul style="list-style-type: none"> • 2 Board Members • Director of People and Organisational Development • Head(s) of People and Organisational Development • Fire Brigades Union • Fire Officers Association • Fire and Rescue Service Association • Unite • Unison; • Other representation, as appropriate and by invitation,
4	Recommendation
4.1	It is recommended that the revised EPF ToR is agreed as suitable for submission to the SFRS Board for decision on 30 June 2022.
5	Core Brief
5.1	Not Applicable

6	Appendices/Further Reading	
6.1	Appendix A – Draft EPF ToR	
7.2	Further Reading: Equality Impact Assessment– contained within Annual Governance Review of Board and Committee related Matters presented at April 2022 Board.	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Group Commander Alasdair Cameron, Board Support Manager	
Sponsored by:	Richard Whetton, Head of Governance, Strategy and Performance	
Presented by:	Steve Barron, Board Member – Chair of Employee Partnership Forum	
Links to Strategy and Corporate Values		
This links to the desired outcomes within the SFRS Strategic Plan 2019-22, our SFRS values and the Working Together Framework		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Employee Partnership Forum</i>	<i>19 May 2022</i>	<i>For Scrutiny</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Recommendation</i>
<i>SFRS Board</i>	<i>30 June 2022</i>	<i>For Decision</i>

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SCOTTISH FIRE AND RESCUE SERVICE BOARD

CORPORATE GOVERNANCE

TERMS OF REFERENCE FOR THE EMPLOYEE PARTNERSHIP FORUM

Original Author/Role	Fiona McOmish,
Date of Risk Assessment (if applicable)	N/A
Date of Equality Impact Assessment	March 2022
Date of Data Protection Impact Assessment (if applicable)	N/A
Quality Control (name and date)	Richard Whetton Head Of Function Governance, Strategy and Performance May 2022
Authorised (name and date)	Liz Barnes Director of People and Organisational Development
Last reviewed/amended (name and date)	Group Commander Alasdair Cameron May 2022
Date for Next Review	May 2023



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CORPORATE GOVERNANCE

TERMS OF REFERENCE FOR THE EMPLOYEE PARTNERSHIP FORUM

1. [INTRODUCTION](#)

2. [MEMBERSHIP](#)

3. [REPORTING](#)

4. [RESPONSIBILITIES](#)

5. [RIGHTS](#)

6. [ACCESS](#)

7. [MEETINGS](#)

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[APPENDIX 1 – STANDING FORUM MEMBERSHIP](#)

[APPENDIX 2 – EXAMPLE OF ANTICIPATED ATTENDEES AT MEETINGS](#)

1. INTRODUCTION

The Board of the Scottish Fire and Rescue Service, its managers, and recognised Representative Bodies, are committed to working together to create a model of employee relations that is based on mutual respect and trust. In recognition of this commitment, a Working Together Framework, which outlines the principles of working in partnership, has been developed.

The Board and the Chief Officer has established an Employee Partnership Forum to support them in their responsibilities under the terms of the Working Together Framework.

The purpose therefore of the Employee Partnership Forum is for SFRS, Representative Bodies to identify areas of discussion which require resolution and matters of mutual interest in the spirit of the working together framework.

2. MEMBERSHIP

- 2.1 The Forum consists of the Chair of the People Committee, one other Board Member from the People Committee, senior Representative Body representatives, and senior members of SFRS staff as appropriate to the agenda.
- 2.2 Representatives invited to attend are in accordance with the Working Together Framework, section 4.1.
- 2.3 The Chair and Deputy Chair of the Forum will be any Board Member that sits on the People Committee. (Note; this will be trialled over a period of 12 months and reviewed as part of the Annual Governance Review – April '23)

Detail of the Standing Membership can be found within Appendix 1.

A further example of the regular attendees anticipated at local and national meetings, in accordance with the Working Together Framework, is provided in Appendix 2.

3. REPORTING

The Forum will provide a copy of the agreed minutes and action log from the meeting to all members. A verbal update will also be reported at the People Committee and the Partnership Advisory Group.

Reports and or updates from the Forum may also be presented to the Board as required through the People Committee.

4. RESPONSIBILITIES

The Employee Partnership Forum is committed to working in accordance with the principles laid out in the Working Together Framework. In addition to these the Forum will provide a platform to discuss and review matters affecting our employees and to ensure that overall staffing arrangements support the strategic aims and ethos of the SFRS.

The Forum has no specific authority but will offer opinions, guidance, support and recommendations on matters affecting employees to the People Committee, Partnership Advisory Group and other appropriate forums.

The Employee Partnership Forum will specifically:

- Discuss matters relating to the employment of SFRS staff.
- Meet based on forward planning and need to discuss and review proposed and on-going developments relating to the SFRS employee partnership matters.
- Ensure that the work of the Forum is communicated appropriately to all employees and key stakeholders.
- Ensure that any necessary resources and facilities are in place to support the partnership arrangements; and seek appropriate opportunities to build capacity within the relevant forums.
- Address any issues that have not been resolved after exhausting the local partnership arrangements.
- Recommend and offer opinions on the progression of defined areas of work.
- Identify areas of 'good practice' to assist the partnership arrangements.

- Ensure engagement is constructive and focuses on joint problem-solving techniques to implement positive change within the SFRS.
- Consider and keep under review SFRS policies and procedures as they affect terms and conditions, working practices, equal opportunities, training and development and any other related policies as may be required.
- Monitor and review performance criteria against employment matters to aid continuous improvement.

5. RIGHTS

The Forum may:

- Co-opt additional members for a period to provide specialist skills, knowledge and experience. Where there is associated expense, this must have prior approval from the Chair of the Board and Chief Officer (Accountable Officer);
- Seek additional information from the Strategic Leadership Team, Directorates and Representative Bodies;
- Seek guidance and, where appropriate, escalate matters to the Partnership Advisory Group.
- In agreement with the Chair ask any other officials of the organisation or representative bodies to attend to assist it with its discussions on any particular matter.
- The Chair will ask any or all of those who attend, but who are not Members, to facilitate open, honest and frank discussion.
- The Forum will be held in private but members should note that Forum updates can be publicly accessed via People Committee and SFRS Board governance routes and open to Freedom of Information requests.

6. ACCESS

- 6.1 Members of the Forum, as required, will have free and confidential access to the Chair of the Forum.

7. MEETINGS

- 7.1 The Forum will normally meet at least four times a year in SFRS Headquarters, Cambuslang or an agreed alternative.
- 7.2 In the absence of the Chair, the Deputy Chair will assume the role for the duration of the meeting. In both their absence, the Chair will seek an alternative temporary chair from the Board and brief them in advance accordingly.
- 7.3 Members are permitted to attend the meeting via Video Conferencing (VC) or Teams. Members who wish to use this option should arrange this with the Forum administrator and inform the Chair.
- 7.4 The Forum administrator is responsible for the timeous collation and distribution of agendas, minutes and papers and align for governance purposes with the Standing Orders.
- 7.5 The Chair and/or Deputy Chair together with the Director of POD will meet ahead of each Forum to review agenda items and ensure appropriate attendees.
- 7.6 Where a declaration of interest has been declared, consideration will be given to the nature of the conflict of interest to determine the most appropriate course of action. This may include the temporary removal of the individual(s) whilst the specific agenda item is being considered. In circumstances where a conflict of interest has been declared by the Chair, the Deputy Chair of the Forum will temporarily assume the role of Chair for the specific agenda item(s).
- 7.7 For each meeting the Forum will be provided with:
- A minute of the previous meeting
 - An updated Action Log
 - An updated Forward Plan
 - An update from the Director of POD or representative

As and when appropriate the Forum will also be provided with:

- An update on relevant SFRS Performance Reporting
- Proposals for key strategies, policies and frameworks (affecting employees)
- Workforce planning reports
- Updates on employment and equalities legislation
- Results of employee surveys
- Equality, Diversity and 'Balancing the Workforce Profile'

8. INFORMATION REQUIREMENTS

- 8.1 All relevant documentation for the Forum must be provided as per the schedule for meetings.

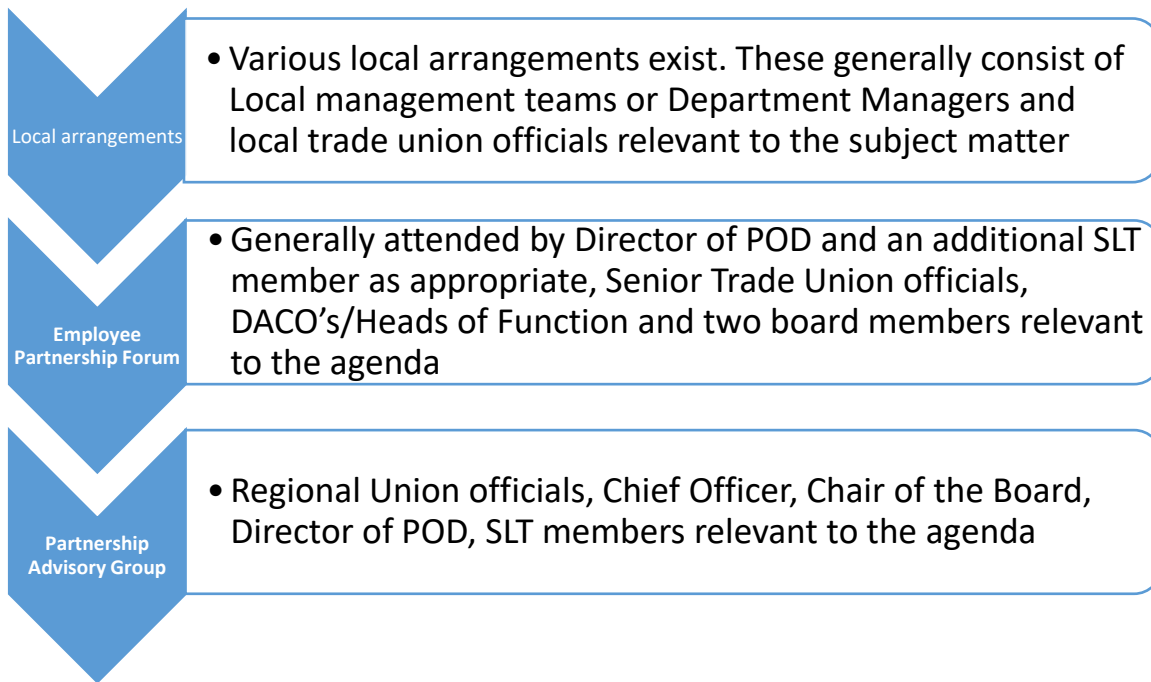
APPENDIX 1 – STANDING FORUM MEMBERSHIP

- 2 Board Members
- Director of People and Organisational Development
- Head(s) of People and Organisational Development
- Fire Brigades Union
- Fire Officers Association
- Fire and Rescue Service Association
- Unite
- Unison;

- Other representation, as appropriate and by invitation.

APPENDIX 2

Example of anticipated attendees at meetings (in accordance with the Working Together Framework)





Report No: C/PC/17-22

Agenda Item: 9.1

**POD Quarterly Management
Information Report
Quarter 4 2021 / 22**

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Appendix 1 – Glossary of terms

Introduction

The performance of the Scottish Fire and Rescue Service (SFRS) is set out against the priorities established by Scottish Government in the Fire and Rescue Framework for Scotland 2022, 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.***”

Our 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.

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

This report provides a range of management information on areas monitored by our teams; containing analysis of the information presented and provides narrative on actions that will be taken to make improvements where required.

A number of other areas will be monitored and analysed at a local level and used to inform progress against objectives.

Executive Summary

Attention is drawn to the following key points, with further detail in the main body of the report:

- Recent changes to Firefighter pension arrangements mean that FFs who are over 50 years old and have more than 25 years' service have the option of retiring earlier than previous workforce planning assumptions indicated. This has the potential to significantly alter the Service's retirement profile, impacting headcount, operational availability and skills profile. A Staffing Tactical Action Group has been stood up, supported by a Staffing Solutions Team, to identify and implement mechanisms to mitigate the impact of increased retirements. Options being progressed include on-call to wholetime migration, inter-service transfers, re-employment, and increased recruitment into wholetime and on-call roles.
- Recruitment continues to be a challenge in a highly competitive labour market. The number of vacancies is up by 47 versus quarter 3, a 3.8% increase. The vacancy rate in Operations Control has increased from 2.3% in quarter 3 to 6.6% in quarter 4, due to a combination of early retirements and colleagues seeking alternative employment. This is being addressed through recruitment campaigns, promotion of flexible working options and succession planning. Fifteen new trainees will join Operations Control in quarter 1 2022/23.
- The overall absence rate increased from 5.56% in quarter 3 to 6.57% in quarter 4, made up of an increase in short-term absence (2.39% to 3.6%) and a decrease in long-term absence (3.17% to 2.98%). The short-term absence rate is driven by Covid-19 cases, where the number of days lost to sickness (displaying Covid-19 symptoms) more than doubled to 14,025, compared to 6,405 the previous quarter. The number of days lost to self-isolation remained broadly similar to quarter 3. These figures are broadly in line with increasing case numbers in wider society following the lifting of many Covid-19 control measures and is the highest number of Covid-19 sickness absence days lost recorded by the Service since the start of the pandemic. Early indications are that absence levels are returning to pre-pandemic levels following the end of government regulations around testing and self-isolation at the start of May.

Section 1

1.1 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

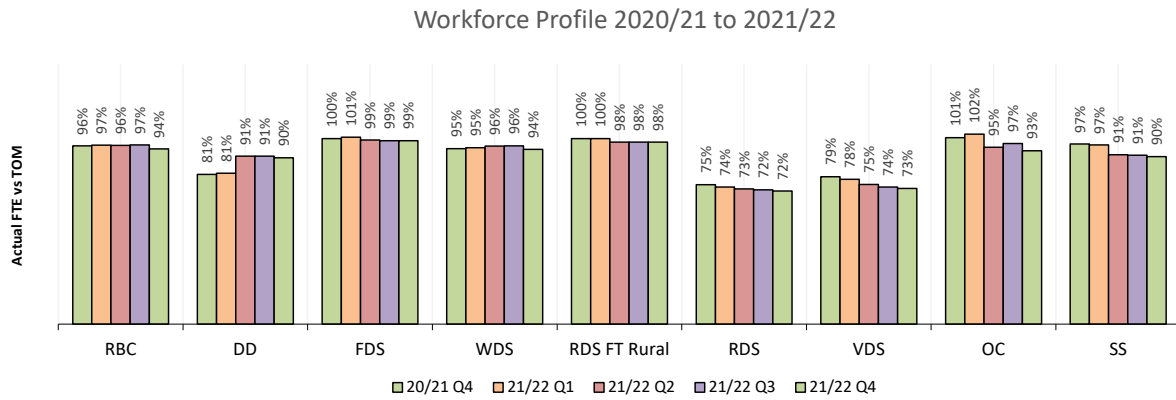
1.1.1 Actual Full Time Equivalent (FTE) staff against Target Operating Model by employee group including actual headcount

EMPLOYEE GROUP	Wholetime (WDS)					Retained					
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS	VDS	OC	SS	TOTAL (ALL)
Target Operating Model (FTE)	3021	363	256		3640	54	3309	384	170	820	8377
Initiatives, Projects and Capital Funded		19	18		37				13	130	180
Actual (FTE)	2853	342	271	65	3531	53	2376	281	171	859	7271
Actual (Headcount)	2854	343	271	65	3533	53	2760	281	174	916	7717

As of 31 March 2022, SFRS employed 7184 people, equating to a headcount of 7747. 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; 10 employees are on Secondment, 17 on Career Breaks and three who are externally funded.

Our ongoing staffing recovery from COVID has been further impacted by recent changes to wholetime pensions, resulting in an increase to our unpredicted leavers from the 5WDS and FDO staff groups. This has mostly impacted in the Firefighters and FDO cadre, which is creating further pressure on our operational resilience, with further impacts predicted over the next 18 months when the full pensions remedy and deferred choice underpin is known.

A Staffing TAG supported by a Staffing Solutions Team (SST) has been established to focus the organisation on how to mitigate the impact of planned and unplanned leavers and inform further actions to resource to our TOM. As such, POD are actively monitoring and assessing the impacts, and are developing a detailed recovery resourcing plan to support delivery of our statutory responsibilities.



On conclusion of the current recruitment campaign, the OC establishment will be bolstered by the onboarding of 15 new Firefighter Control Trainees due to start in quarter 1 2022/23 on conclusion of the current recruitment campaign.

A range of actions are being progressed to support Service Delivery within the On-Call Improvement Programme and Staffing TAG. Including working with stakeholders to develop and implement revised project plans to increase Wholetime and On-Call Firefighter intakes over 2022 and into 2023, aligned to workforce planning projections and ongoing social distancing restrictions.

POD is progressing improvements to On-Call attraction and recruitment aligned to the On-Call Improvement Programme. Following significant engagement with stakeholders, a revised Recruitment and Selection process has been developed and will be progressed for implementation by the end of quarter 3 2022/23.

Challenges in recruiting Support Staff continue in what is unprecedented market conditions. Work is ongoing to ensure we are effectively promoting roles, flexible working arrangements and that we build a flexible and adaptable approach into our resourcing methods.

1.1.2 Number of staff vacancies by FTE

EMPLOYEE GROUP	Wholetime (WDS)				Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS				
Vacancy (FTE)	103*	40	3	146	1	933	103	12	91	1286

*Actual vacancies =168 less 65 Trainees currently on Foundation Course

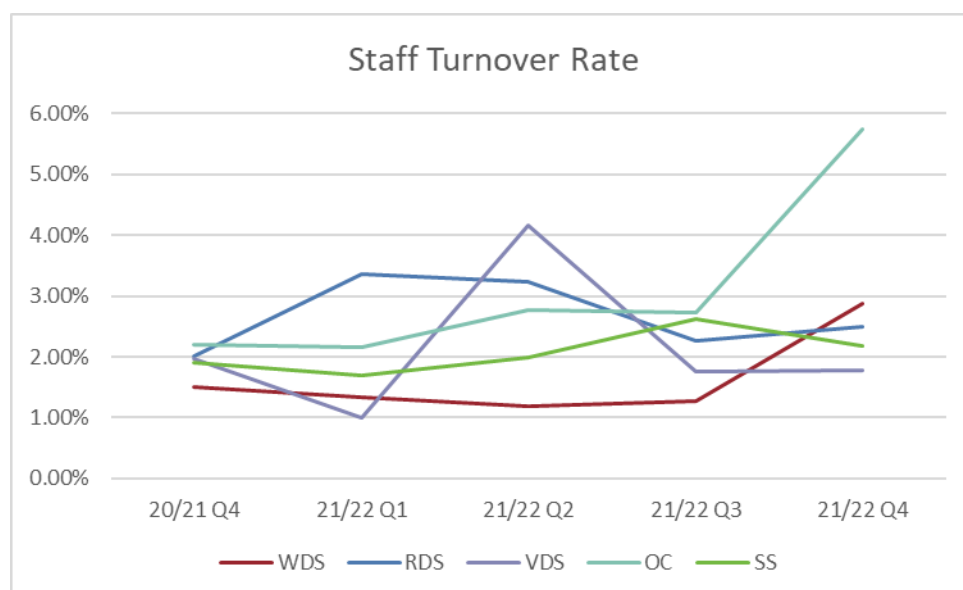
Work on reviewing the Strategic Resourcing Plan has slowed to enable detailed analysis to be carried out on the impact of pension change to the wholetime leavers profile. Actions from the Staffing TAG, supported by a SST, will be prioritised to mitigate the effect to our TOM and competence levels.

1.1.3 Percentage Staff vacancies

EMPLOYEE GROUP	Wholetime (WDS)				Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS				
Vacancy (%)	3.4%	11%	1.1%	4%	1.9%	28.2%	26.8%	6.6%	9.6%	15%

1.1.4 Percentage Staff turnover by employee group

EMPLOYEE GROUP	Wholetime (WDS)				Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS				
Turnover Rate (%)	2.4%	5.8%	4.1%	2.9%	0.0%	2.5%	1.8%	5.7%	2.2%	2.6%



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

The overall turnover rate has increased from 1.9% in the previous quarter to 2.6%, this is reflective of the pension changes which has resulted in an upturn in the number of leavers within uniformed roles, with further impacts likely over the next two years.

OC has shown an upturn of leavers, this has largely been due to combination of staff accessing their pension early as well as trainees and competent staff seeking alternative employment. The OC management team are prioritising a succession and business continuity plan including flexible working arrangements to combat this.

Section 2

2.1 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

2.1.1 Total number of grievance cases concluded within six weeks

There were three grievance cases concluded within this quarter. It is noted that over the reporting cycle for 2021/22, the number of new grievance cases commencing in each quarter, averaged at five per quarter. This is a small increase from 2020/21, where the average number of new grievances raised each quarter was four. There has been no change in the main reason for employees raising a grievance for perceptions of a breach of contract. The majority of grievances raised in this reporting cycle were found to be not upheld. Due to the number of cases being less than five, in terms of GDPR we are unable to provide any further analysis as this may identify individuals.

2.1.2 Total number of discipline cases concluded within six weeks

There were three disciplinary cases completed within six weeks within this quarter. It is noted that over the reporting cycle for 2021/22, the number of new investigations commencing in each quarter, averaged at 15 per quarter with the exception of quarter 4, which had 20 new cases. This is a small decrease from 2020/21, where the average number of new investigations was 19 each quarter. There have been no change in the nature of disciplinary cases arising and the reasons remain being for breaches of the Code of Conduct, in particular, criminal convictions. During 2021/22, the HROD Business Partners commenced the delivery of the mandatory Disciplinary Training course which may have had an impact on the average new cases decreasing in this reporting cycle. Due to the number of cases being less than five, in terms of GDPR we are unable to provide any further analysis as this may identify individuals.

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

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

Section 3

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

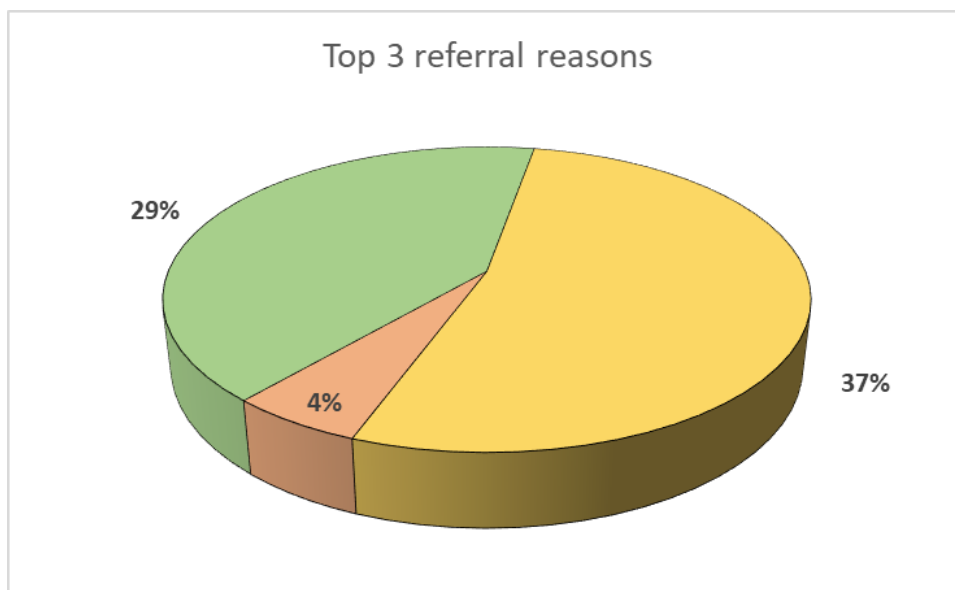
Strengthen health, wellbeing and fitness arrangements to enable staff to safely and effectively undertake their roles

3.1.1 Top three reasons for management referrals

In the reporting period there were a total of 688 HW appointments attended, of which 278 were New Management Referrals (NMR). The top three reasons for New Management referrals were;

1. Psychological – Stress and Mental Health – 103 (37%)
2. Musculoskeletal (MSK) – 82 (29%)
3. Circulatory – 12 (4%)

All Other reasons for referral accounted for the remaining 81 (30%).

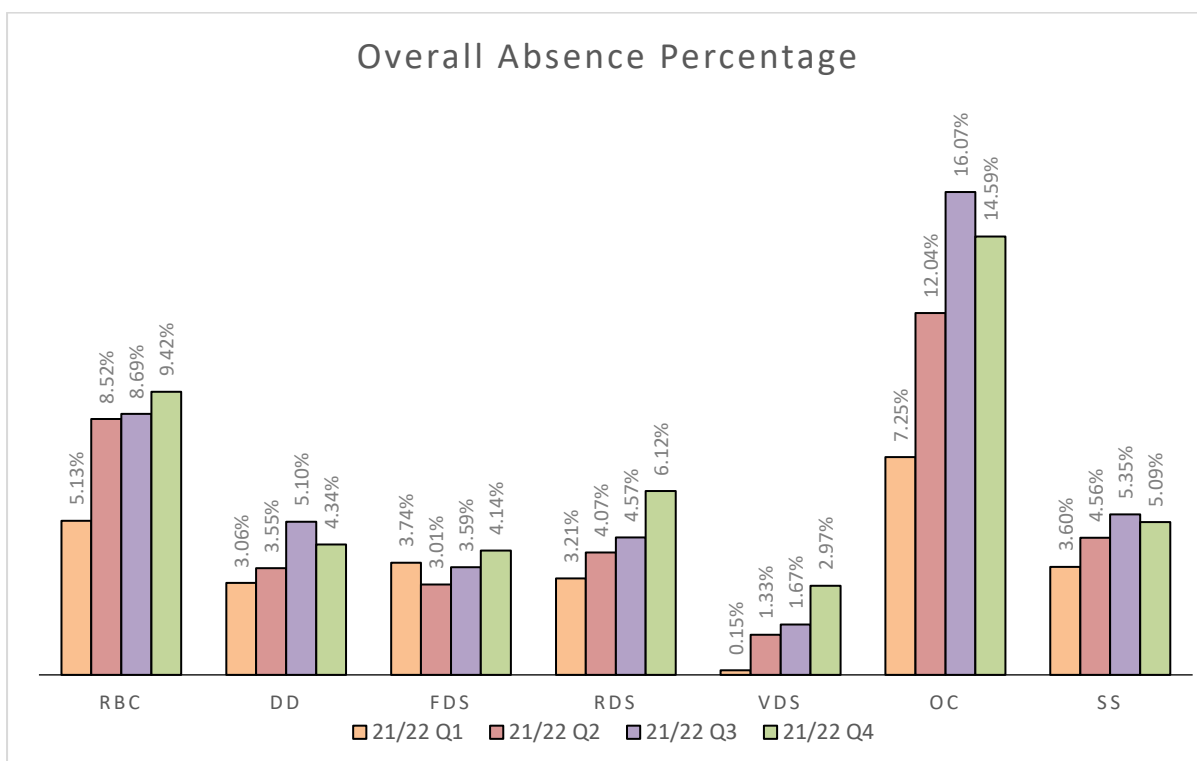


The top two reasons for management referral in quarter 4 remain unchanged from the previous reporting period and is typical of preceding data. There was a 42% increase (196 to 278) in NMR appointments attended in quarter 4 compared to the previous reporting period. This increase in referrals reflects similar numbers in the same reporting period of the previous year and is likely associated with winter illness and respiratory type conditions as well as COVID-19. There was also an increase in Practitioner resource around this time which would account for the upturn in referrals seen also. Psychological referrals were the top reason for referral to OH in quarter 4, with a 31% (75 to 103) increase when comparing to the previous reporting period and MSK referrals increased by 9% (73 to 82). There was a

new third top referral reason in quarter 4, which was for circulatory reasons and accounted for only 4% of all NMRs. Circulatory reasons are very low in number; however, this may be associated with the previous quarters which reported respiratory reasons (both symptoms can relate to COVID-19) which could be related or may be due to lifestyle or hereditary factors. The numbers were too low to make any type of probable relation to COVID currently. Further analysis will be undertaken across future reporting periods to identify any trends or unexpected results in this category.

3.1.2 Overall absence percentage

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Overall Absence (workdays lost versus work days available)	9.42%	4.34%	4.14%	7.96%	6.12%	2.97%	14.59%	5.09%	6.57%



The average overall absence percentage for all SFRS working days lost in quarter 4 is 6.57% which is an increase of 1% compared to the previous quarter. Whilst absence has increased across all employee groups, for both short and long-term, as shown below, this figure includes COVID-19 related absence which directly accounts for a proportion of this increase where the levels of COVID-19 absence increased in quarter 4. In addition, it can be noted that the increase in the overall absence percentage lies within the short-term

absence category. Where increases have been identified, the HROD Business Partners are working closely with their Management Teams to support them in their case work to minimise further absences.

3.1.3 Percentage of working days lost against days available – short-term absence

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Short-Term Absence (work days lost versus work days available)	5.93%	2.05%	1.63%	4.79%	3.34%	0.84%	6.14%	2.13%	3.60%

This table shows the percentage of work-days lost due to short-term absence as a percentage of work-days available. In line with the overall increase in the absence rate, there has been an increase in short-term absence across all employee groups of 1.2% in this quarter.

3.1.4 Percentage of working days lost against days available – long-term absence

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Long-Term Absence (work days lost versus work days available)	3.49%	2.29%	2.51%	3.17%	2.77%	2.13%	8.45%	2.95%	2.98%

This table shows the percentage of work-days lost due to long-term absence as a percentage of work-days available. There has been a decrease in the number of long-term absence across all employee groups, with the exception of VDS, which has increased by 0.85%.

3.1.5 Short-term absence by top three absence reasons

Short-term Sick – Top 3 Reasons	Musculoskeletal	Respiratory	Stomach or Bowel	Other	TOTAL
RBC	871	425	294	491	2080
DD	50	39	17	76	182
FDS	38	34	-	56	128
RDS	671	267	138	519	1595

VDS	4	21	-	26	51
OC	5	52	31	101	189
SS	88	119	50	168	423
Total Working Days Lost	1726	956	529	1436	4646
Number of Employees	273	259	201	266	999

3.1.6 Long-term absence by top three absence reasons

Long-term Sick – Top 3 Reasons	Musculoskeletal	Psychological	Soft Tissue	Other	TOTAL
RBC	1658	464	197	1039	3358
DD	130	100	65	39	334
FDS	66	197	123	43	429
RDS	3153	1548	478	1051	6229
VDS	345	-	90	100	535
OC	67	144	72	377	660
SS	248	538	79	387	1251
Total Working Days Lost	5666	2990	1104	3036	12796
Number of Employees	144	76	26	86	332

The tables above 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. Within the OC, it is noted that there has been a decrease in the number of long-term psychological cases, compared to the previous quarter. This decrease may be attributed to the additional analysis work and employee support provided by managers and the HRBP's.

Musculoskeletal (MSK) issues continue to be the main reason for long-term absence, however, the number of absences related to this have decreased in this quarter for both long

and short-term absences. For long-term psychological absences, this has remained unchanged in this quarter.

When comparing absence reasons, it is noted that psychological conditions is not present in the short-term table above, as it is not one of the top three reasons and this was the same for quarter 3.

3.17 COVID-19 Absence

Current Period

Work Days lost to Sickness	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Displaying Symptoms	4860	601	155	7196	160	291	762	14025
No. of Employees	967	65	25	775	20	63	104	2019

Work Days lost to Special Leave	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Isolation/Quarantine (Duty Days)	3452	110	123	3978	5	60	159	7886
No. of Employees	685	15	12	371	1	16	27	1127

Previous Period

Work Days lost to Sickness	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Displaying Symptoms	2634	481	81	2540	96	172	402	6405
No. of Employees	577	43	11	292	7	38	44	1012

Work Days lost to Special Leave	RBC	DD	FDS	RDS	VDS	OC	SS	TOTAL
Isolation/Quarantine (Duty Days)	3364	146	210	3446	50	89	225	7529
No. of Employees	1036	30	16	583	6	31	41	1743

As anticipated, there has been an increase in the number of COVID-19 related absences compared to the previous quarter, by 7620 days and 1007 employees. For special leave, there was a small increase in this quarter by 357 days, however, the number of employees reduced, due to the broader range of working patterns included in this period which is affected by the working days available and this resulted in 616 less employees on special leave.

The number of employees absent due to COVID-19 was 2019 and this is the highest number of COVID-19 related absences since first recorded in quarter 4 2019/20 and is likely to be due to the removal of some of the socialisation restrictions. This has had a direct impact on both our long and short-term absences, as shown above.

The increase in the number of COVID-19 related absences is reflective within the overall increase in short-term sickness of 1.2% outlined in 3.1.3 above.

We continue to maintain a range of support interventions aimed at supporting staff affected and these are reviewed on a regular basis as the virus becomes part of our normal living conditions.

Appendix 1 – Glossary of Terms

5WDS	Five Watch Duty System
DD	Day Duty
FDO	Flexi Duty Officer
DPA	Data Protection Act
FDS	Flexi Duty System
FF	Firefighter
FTE	Full Time Equivalent
GDPR	General Data Protection Regulations
HRA	Human Resource Advisor
HRBP	Human Resources Business Partner
HROD	Human Resources / Organisational Development
HW	Health and Wellbeing
MSK	Musculoskeletal
NMR	New Management Referral
OC	Operations Control
OH	Occupational Health
On-Call	Retained and Volunteer Duty System
POD	People and Organisational Development
RBC	Resource Based Crewing
RDS	Retained Duty System
RDS FT	Retained Duty System Full Time
SFRS	Scottish Fire and Rescue Service
SST	Staffing Solutions Team
Staffing TAG	Staffing Tactical Action Group
TOM	Target Operating Model
SS	Support Staff
VDS	Volunteer Duty System
WDS	Watch Duty System

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Report No: C/PC/18-22

Agenda Item: 9.2



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

TRAINING, SAFETY AND ASSURANCE DIRECTORATE
PROGRESS AND PERFORMANCE REPORT
QUARTER 4 2021-22

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NOT PROTECTIVELY MARKED**1. 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:

- 52 new Retained and Volunteer Duty System (RVDS) Trainee Firefighters placed at training venues throughout the Service area completed their Task and Task Management course;
- 55 RVDS Trainee Firefighters completed their Breathing Apparatus and Fire Behaviour training;
- 63 Wholetime Trainee Firefighters completed the new Foundation Training programme delivery model at the National Training Centre;
- The Incident Command (IC) Competence Review procedure established, utilising Operational Assurance process to review IC competence on the incident ground to reaccredit IC currencies;
- Ongoing delivery of the modular ICL1 course as an alternative to the traditional 5-day delivery model;



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- Following a review of the Training for Operational Competence Framework (TfOC), the new TfOC went live on 4th April and
- Management of Incident Command Assessment Centre for Principal Officer Role.





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

- Completion of 2021-22 Management Arrangement development and review schedule;
- Developed and gained approval for a suite of employee fact sheets to be published;
- Working closely with Operations to progress the Document Conversion Project; and
- Developed and agreed with business partners the Safety and Assurance improvement plan for 2022-23.

NOT PROTECTIVELY MARKED**2. 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 have joined the Training Function to support the Training Function Continuous Improvement Programme and support the implementation of the Training Review recommendations.</p>	<p>SR5</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>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.</p> <p>Work commenced on development of a further 4 modules.</p> <p>Delay in going live due to refining of the management reporting functionality within each module.</p>	<p>Enhanced liaison with ICT senior management in place.</p> <p>ICT have engaged the services of an external consultant to rectify on going issues. It is anticipated this risk will reduce in Q1.</p>	<p>TSA5/SR4</p> 	

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Develop and facilitate SFRS, 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 2022-23 to accommodate impact of COVID-19. Improvement in the completion of actions compared to compared to previous year continues to be 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

NOT PROTECTIVELY MARKED**3. Spotlight Report – Revised delivery model for the Trainee Firefighter Foundation Programme Update**

Following the introduction of the pilot of the revised delivery model of the Trainee Firefighter Foundation Programme (TFFFP), which was introduced to support the organisational recovery from the impact of the Covid-19 pandemic, 63 Wholetime Trainee Firefighters have now successfully graduated and will move on to their operational postings.

The four on - four off delivery model was identified as the safest way to deliver all candidates in the TFFFP at one site, and to enhance our training capacity.

This model takes cognisance of current workplace risk assessments and Safe Systems of Work (SSoW) in place to manage the pandemic and to protect the safety of our staff. A further benefit to this model is that it provides flexibility to allow enhanced numbers of Trainees to attend this course without compromising the safety of any students or Instructional Staff. It has the added benefit of freeing up capacity within other training sites to support the Training Recovery Plans.

Throughout the pilot TFFFP, a robust Quality Assurance (QA) process was adopted to assess and monitor the approach to measure consistency with Training Standards across both TFFFP courses.

A structured de-brief process was conducted in the final week of the course to gather feedback from Instructional Staff, candidates and relevant stakeholders with the aim of learning lessons to inform and improve future courses.

The de-briefs covered the ten modules which make up the TFFFP and results were captured in an overall report with recommendations and actions for future improvements. An action log has been collated and, where improvements have been identified, these have been allocated appropriately for further action.

Overall, the course has been very well received by Instructional Staff and candidates alike, and this delivery model demonstrates the strength and flexibility of the harmonised Instructors Terms and Conditions to deliver TFFFP courses simultaneously. This approach will help ensure we continue to meet the increasing demands for Trainee Firefighter development and we look forward to welcoming a further 72 trainees' during Quarter 1 2022/23.

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NOT PROTECTIVELY MARKED**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.

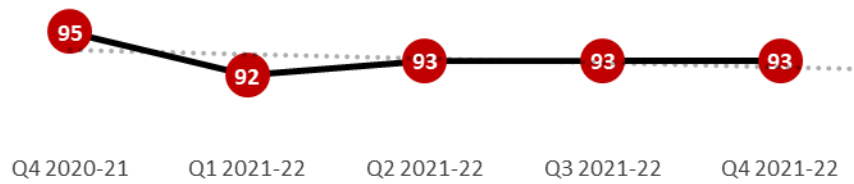
Outcome 3 - We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services.							
Ref	Indicators	Frequency	Target /Direction of Travel	Reported to			
				Board	SDC	PC	ARAC
O3.1	Actual Full Time Equivalent (FTE) staff against Target Operating 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

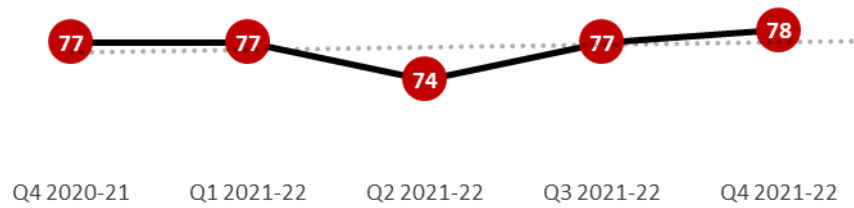
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4.2 Operational Core Competence (% of Staff deemed competent against requirement)

Resource Based Crewing (RBC)



Retained Duty System (RDS)



Volunteer Duty System (VDS)



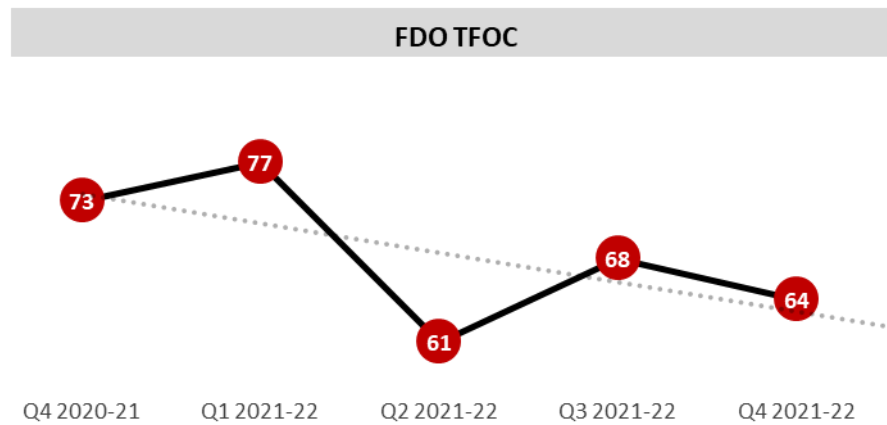
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Figure 2: Operational Core Competence

The Q4 figures for Core skills of Incident Command, Breathing Apparatus, Fire Behaviour, Tactical Ventilation and Emergency Response Driver Training remain broadly consistent when compared with the previous quarters.

We continue to experience a challenge with the Flexi Duty Officer (FDO) Training for Operational Competence (TfOC) performance due to the significant number of staff changes within this staffing group through retirements and promotions, particularly in respect of those new FDO's taking up positions, and we continue to monitor this.

Throughout Q4, COVID-19 restrictions on Retained Duty System (RDS) and Volunteer Duty System (VDS) drill nights have still been in place ensuring the Service is aligned with the Scottish Government guidance 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 Q4 2021-22 and has assisted in mitigating the impact of restrictions on course numbers and the restricted training capacity.

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

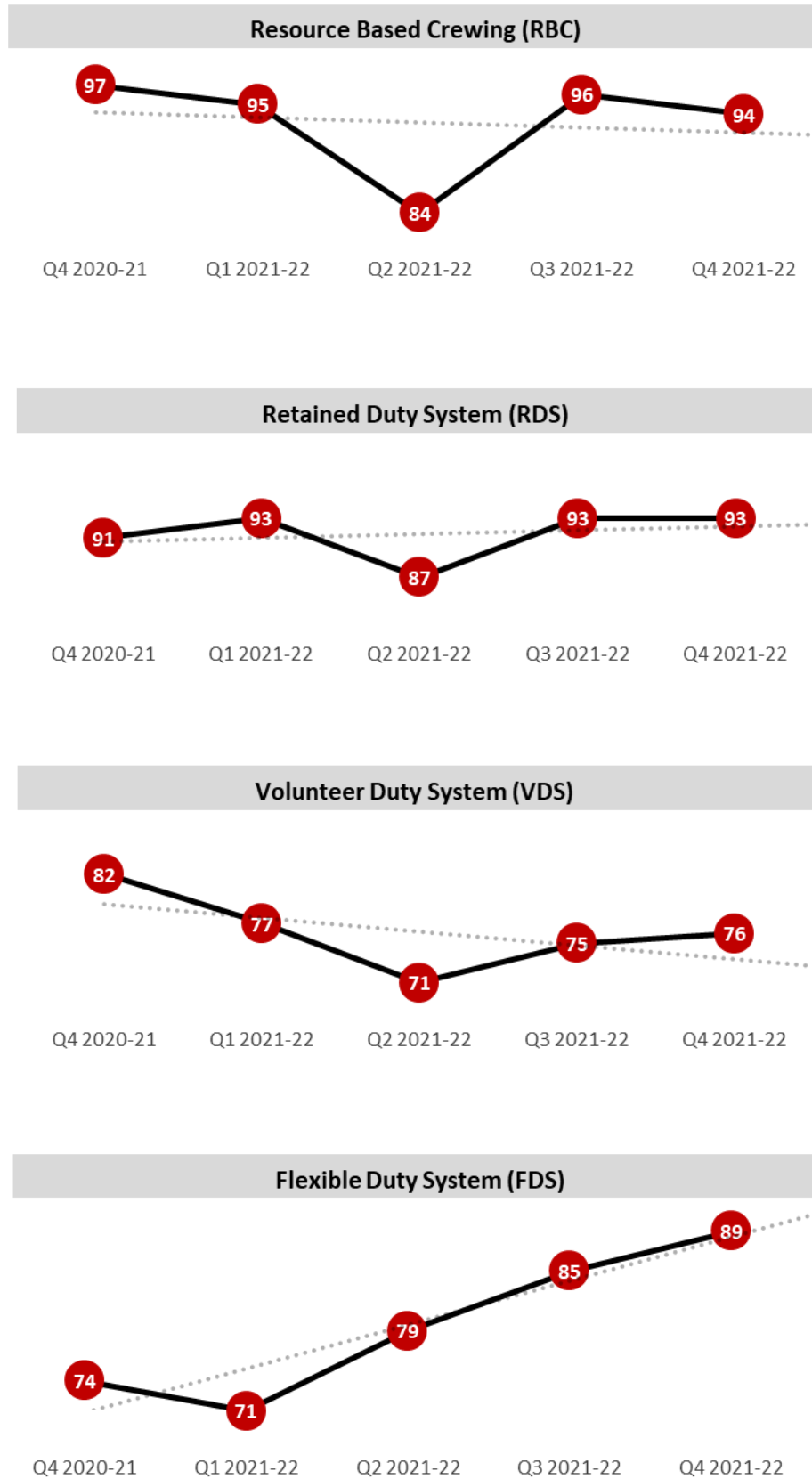


Figure 3: Incident Command Competence

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Incident Command Competence across all staffing groups continues to show consistent performance.

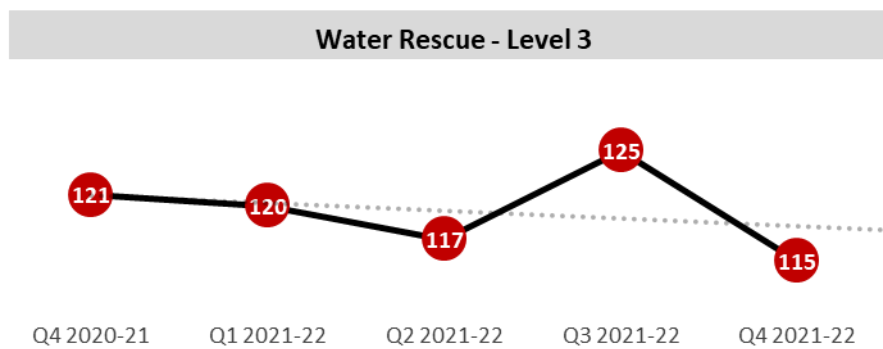
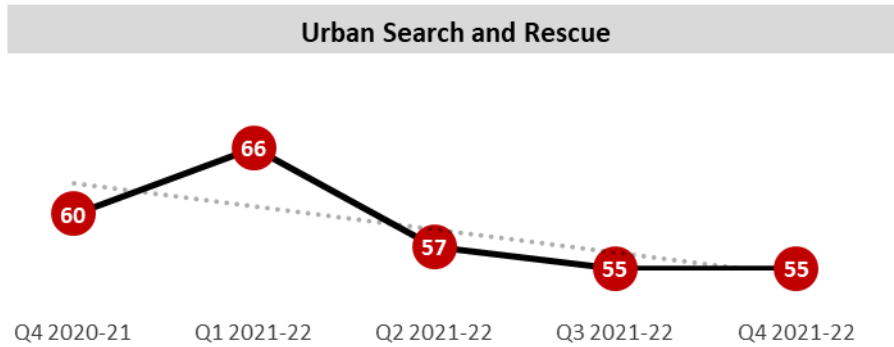
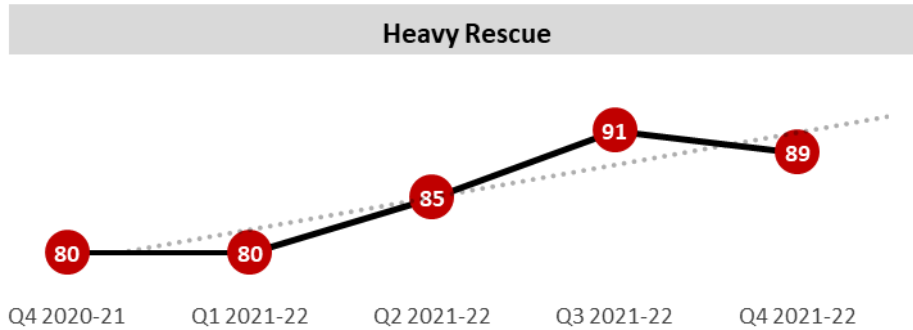
The National Incident Command Team have recently introduced a revised delivery model for Incident Command Level (ICL) courses to address the impact from the pandemic restrictions. This incorporates distant/ remote learning and assessment for development and refresher courses, with only the ICL1 course requiring the practical assessment interaction. The implementation of this approach continues to be rolled out to other areas. The National Incident Command Team within the Training Function has recently been expanded, with additional instructors introduced which will enable further 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, following a period of consultation, will assist in the mid to long-term to further improve Incident Command performance.

The Flexi Duty System (FDS) figure continues to show an increase in performance following the successful 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)



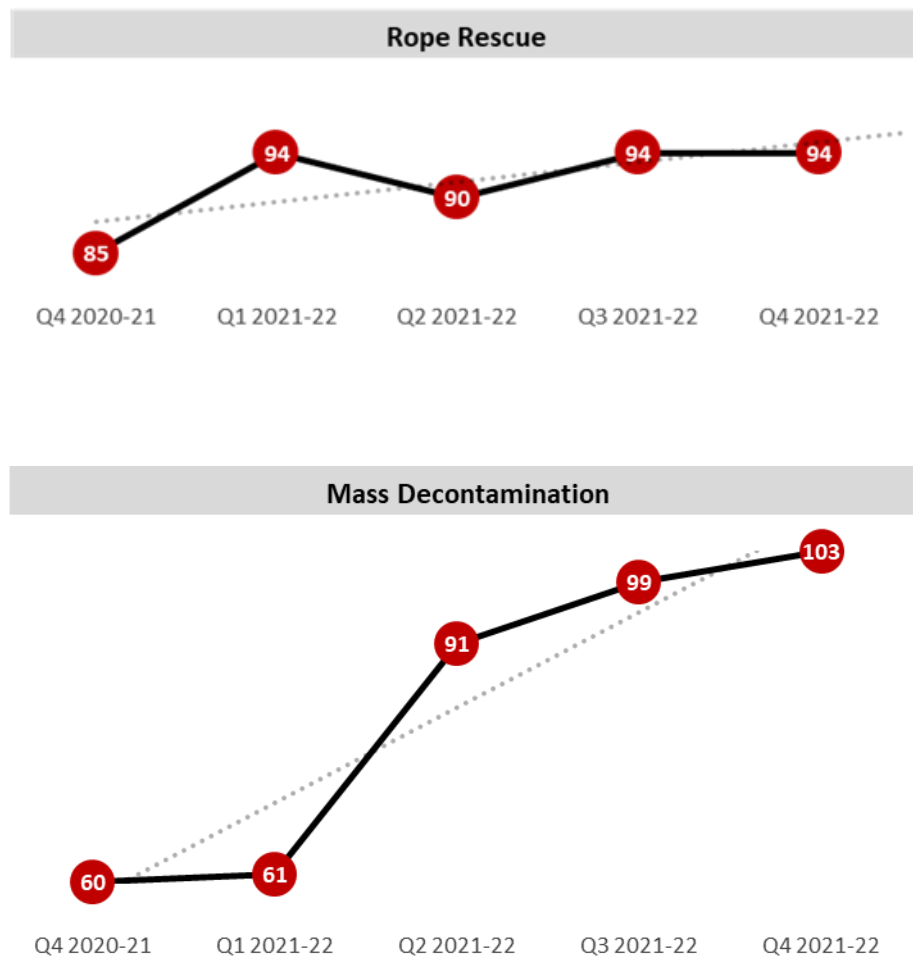
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Figure 4: Specialist Rescue Competence

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 across Specialist Rescue disciplines continues to show a consistent performance following on from the intensive training carried out as part of our COP26 preparations, where there was a focus on Mass Decontamination and Heavy Rescue training.

A slight decrease can be seen in Water Rescue Level 3; however, overall competence remains above target.

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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

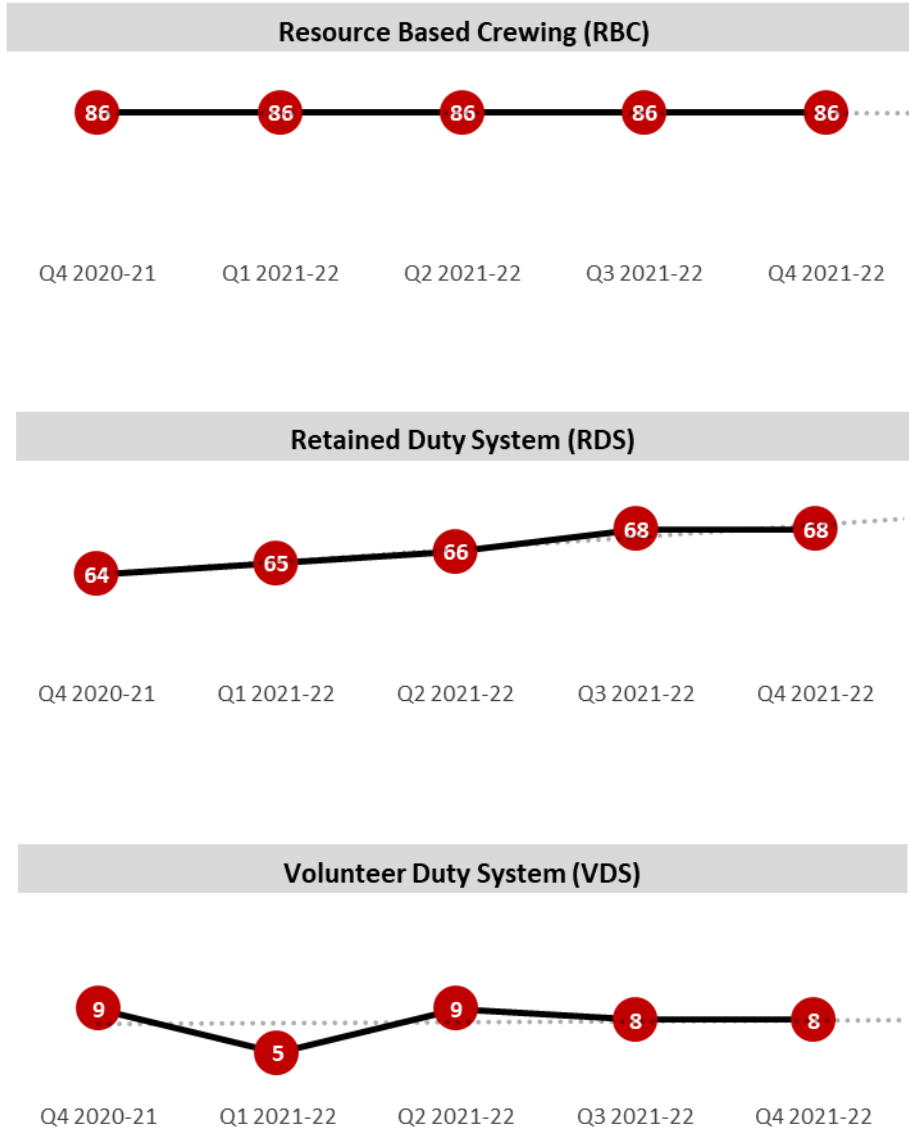


Figure 5: Standard Modules

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The Q4 figures for Resource Based Crewing (RBC), RDS and VDS demonstrate a consistent performance when compared with previous quarters. The ongoing pandemic 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, RDS and VDS duty systems and is reflected in the performance data. Ongoing liaison with Service Delivery Area (SDA) partners continues to support personnel.

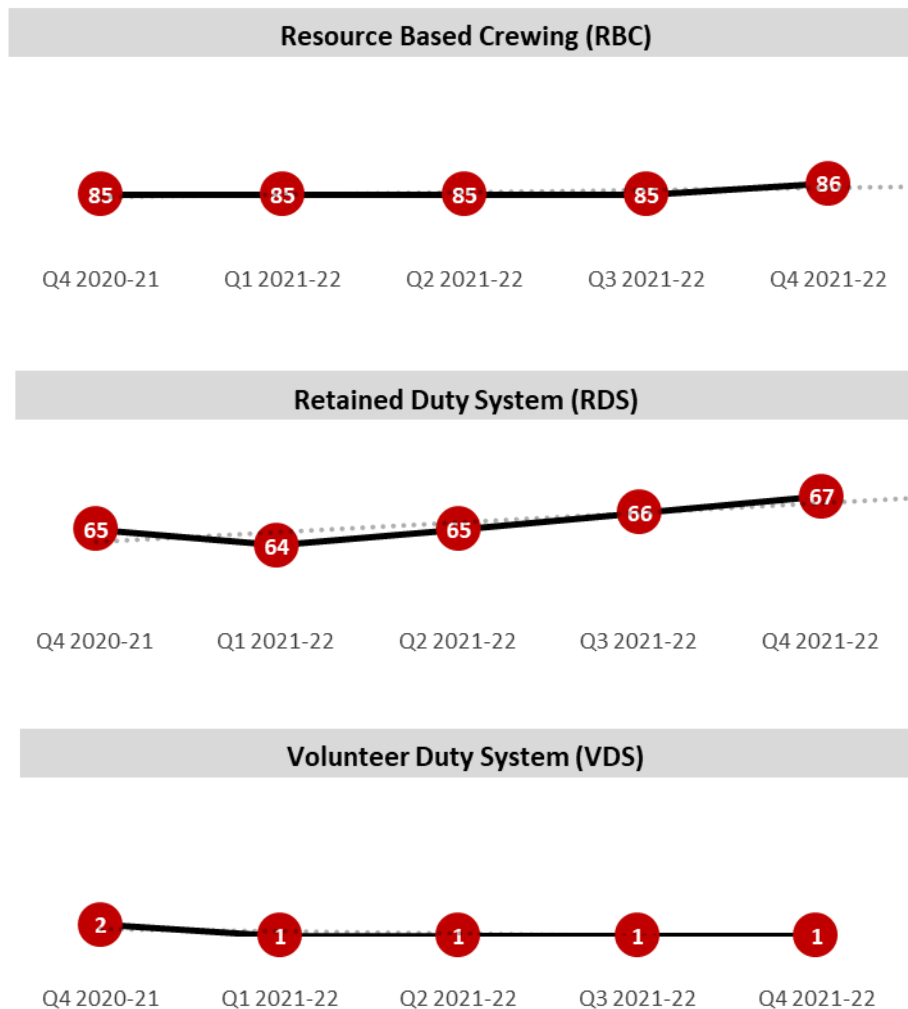
Advanced Modules

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 RDS and VDS Staff.

As we have moved into Q4, 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 Community Fire Stations 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 RDS and VDS 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.

NOT PROTECTIVELY MARKED**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 Q4 2021-22.

HEALTH AND SAFETY IMPROVEMENT PLAN PROGRESS REPORT								
QUARTER 4 2021-22								
				Outstanding Actions Q4 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	85	71%		60	3	1	9	12
Service Delivery Areas (SDA)/Directorates								
North SDA (NSDA)	22	73%		16	5	0	0	1
East SDA (ESDA)	23	65%		15	5	1	1	1
West SDA (WSDA)	25	68%		17	6	2	0	0
Finance and Contractual Services (FCS)	35	94%		33	1	0	0	1
People and Organisational Development (POD)	24	100%		24	0	0	0	0
Prevention and Protection (P&P)	33	76%		25	4	0	2	2
Operations (OP)	27	74%		20	7	0	0	0
Strategic Planning, Performance and Communications (SPPC)	24	100%		24	0	0	0	0

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Training, Safety and Assurance (TSA)	76	96%		73	2	0	0	1
Service Development (SD)	32	100%		32	0	0	0	0

Table 2: Health and Safety Improvement Plan Progress Quarter 4 2021-22

Overall completion of Q4 actions is presenting as 71% (60 of 85) complete. When








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

comparing the percentage completion within the same period in the previous reporting year, a 12% increase is noted. Significant progress is noted in five of the ten plans in place, with POD, SPPC and SD completing 100% and TSA completing 96%, and FCS completing 94% of their overall actions for 2021-22.

Of the 25 outstanding actions, analysis shows 48% (12 of 25) are over 70% complete.

5.2 Health and Safety Events

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

 <p>All Accidents/Injuries (inc RIDDOR) ↓</p> <p>147 -18%</p>	 <p>Accident or Injury ↓</p> <p>138 -15%</p>	 <p>RIDDOR-Reportable Injury ↓</p> <p>9 -40%</p>	 <p>COVID-19 ↑</p> <p>28 52%</p>
 <p>Near Miss ↓</p> <p>152 -14%</p>	 <p>Act of Violence ↓</p> <p>76 -4%</p>	 <p>Vehicle Accident ↑</p> <p>275 6%</p>	

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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 Q4 each year from 2019-20 onwards.

Event Type	2019-20	2020-21	2021-22
Injury (excluding RIDDOR and COVID - 19)	186	139	138
RIDDOR-Reportable Injury	26	17	9
COVID-19	-	54	28
Near Miss	199	148	152
Act of Violence	56	69	76
Vehicle Accident	249	221	275
Total	716	648	678

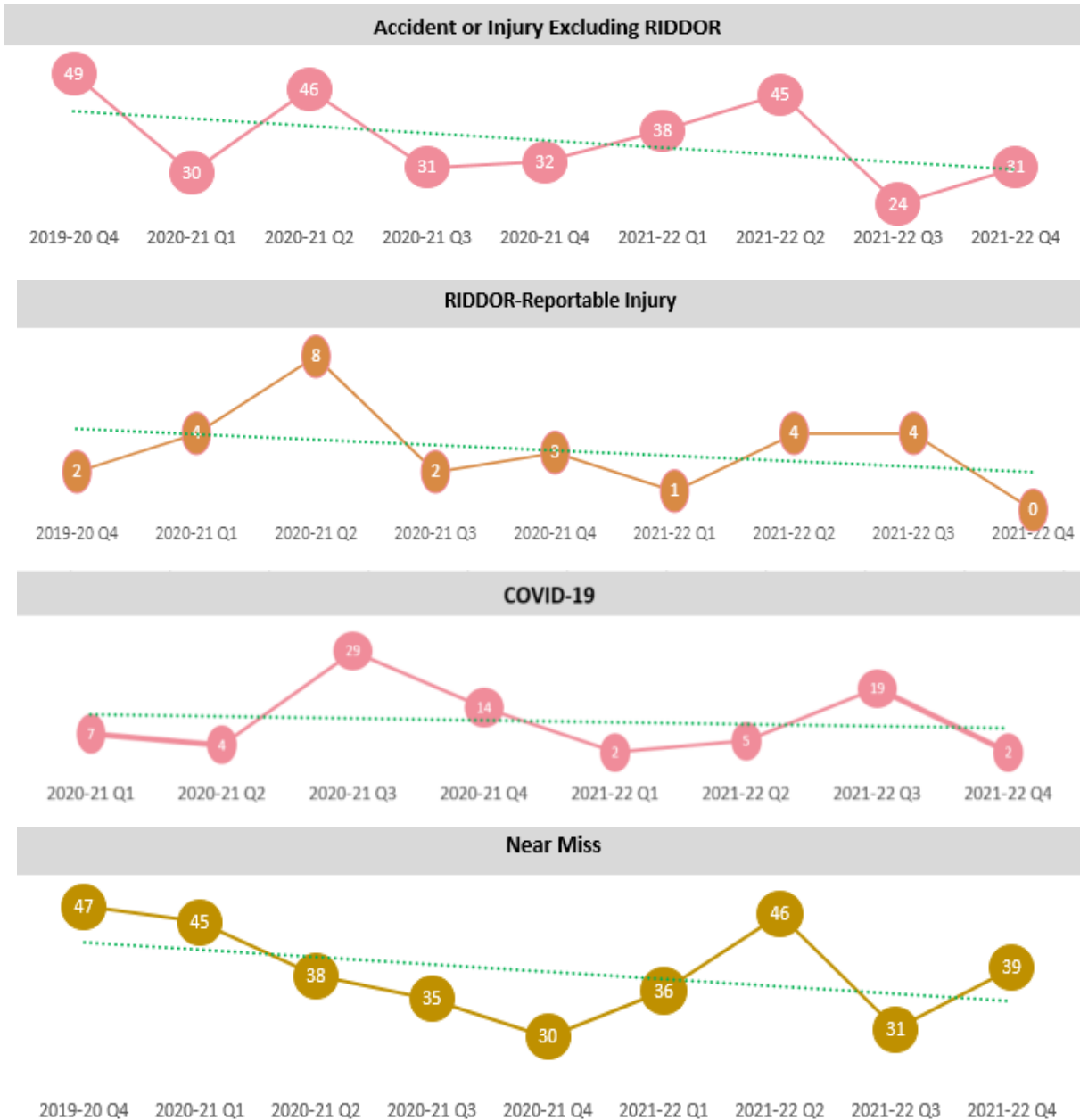
Table 3: Trend Comparisons Year-To-Date

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

5.3 Health and Safety Key Performance Indicators – Q4 2019-20 to Q4 2021-22

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The panel charts below show the overall quarterly totals from Q4 2019-20 to Q4 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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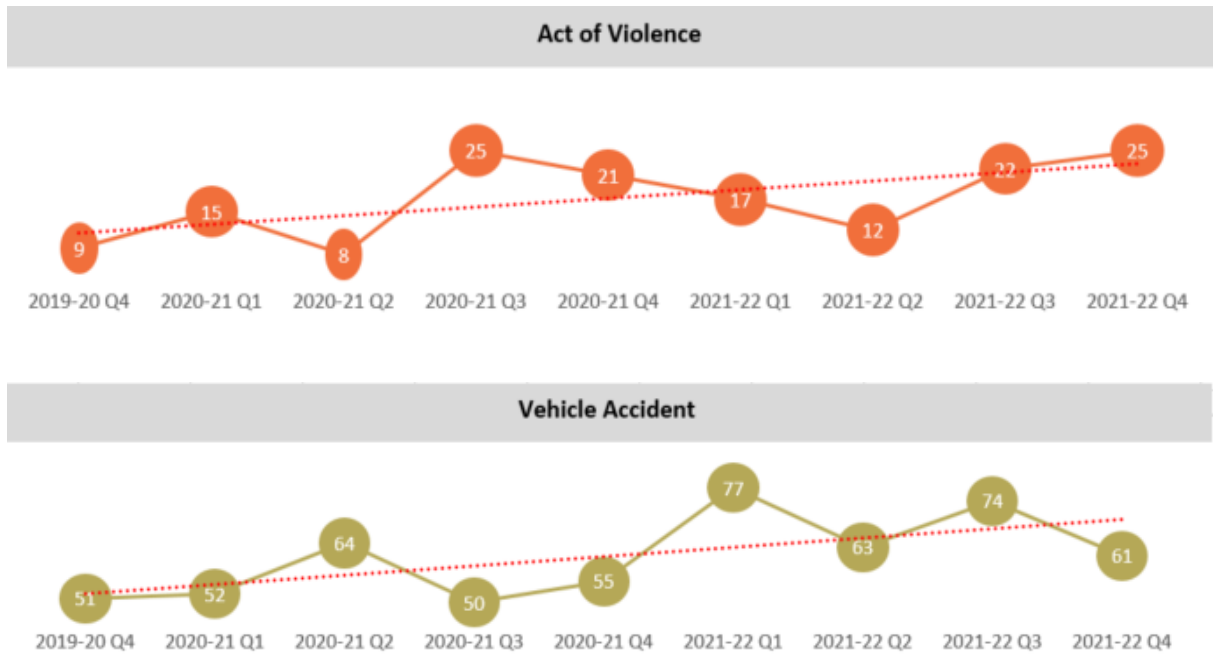
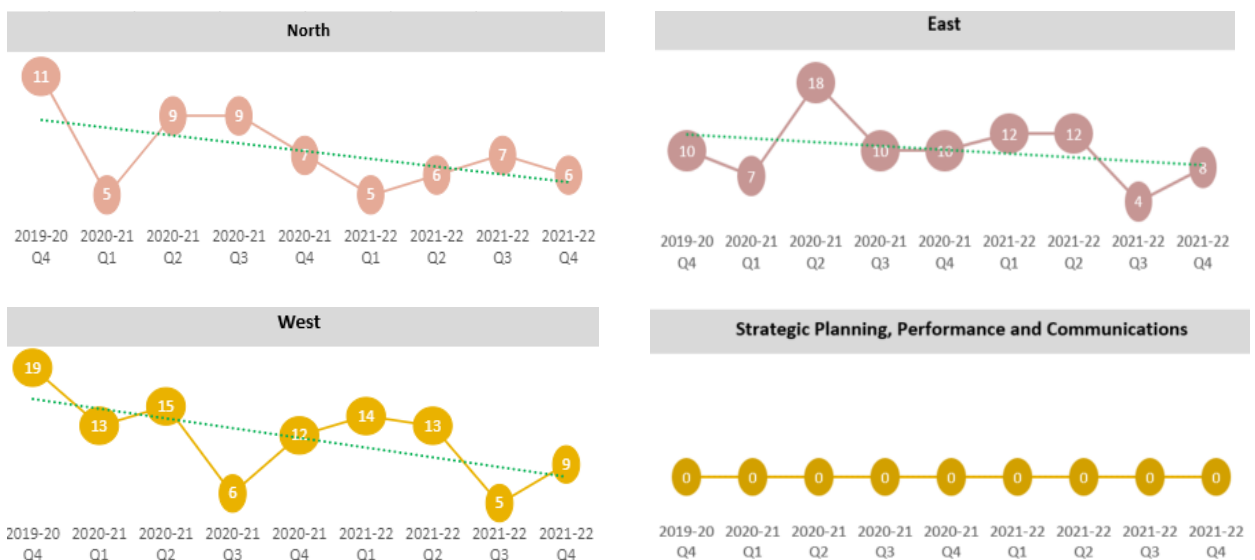


Figure 2: Quarterly KPI Totals Q4 2019-20 to Q4 2021-22

The trend for Accident/Injuries and RIDDOR Reportable Injures 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, however this is deemed positive as a similar trend is noted in accidents/injuries and RIDDOR reportable events. COVID-19 shows a positive trend over the eight-quarter period. Further analysis of all key performance indicators can be found in the related sections of this report.

5.3.1 Directorate Accident/Injuries (excluding RIDDOR) – Q4 2019-20 to Q4 2021-22



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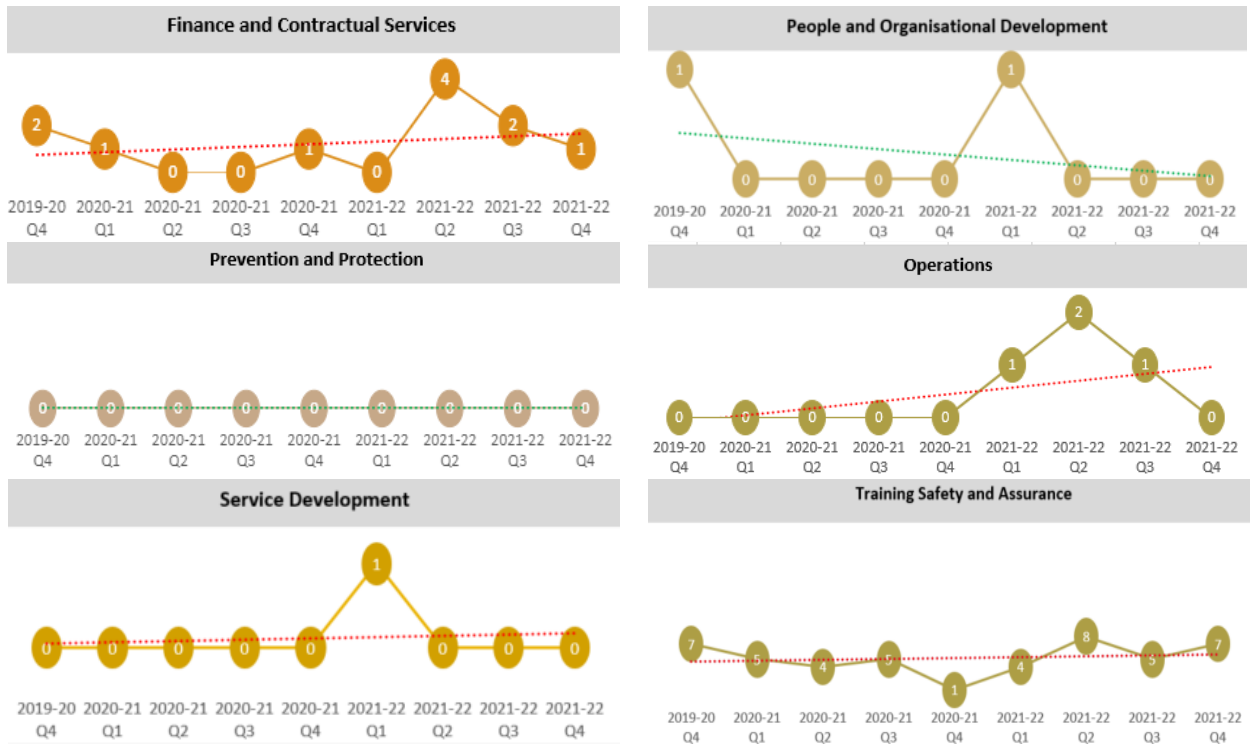


Figure 3: Directorate Accident/Injuries (excluding RIDDOR) – Q4 2019-20 to Q 4 2021-22

Improvement over the 3-year period is seen in all SDAs and the POD Directorate where there has been a reduction of all Accident/Injuries (AI's) (excluding RIDDOR) recorded. When considering Q4 data with the same quarter previous reporting year, the North SDA saw a 14% (7 to 6) decrease, the East SDA saw a 20% (10 to 8) decrease, the West SDA saw a 25% (12 to 9) decrease, and TSA saw a 600% increase (1 to 7). This increase may be attributed to the amendments made to training delivery last year to accommodate COVID-19 control measures.

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5.3.2 RIDDOR Reportable Accident/Injuries – Q4 2019-2020 to Q4 2021-22

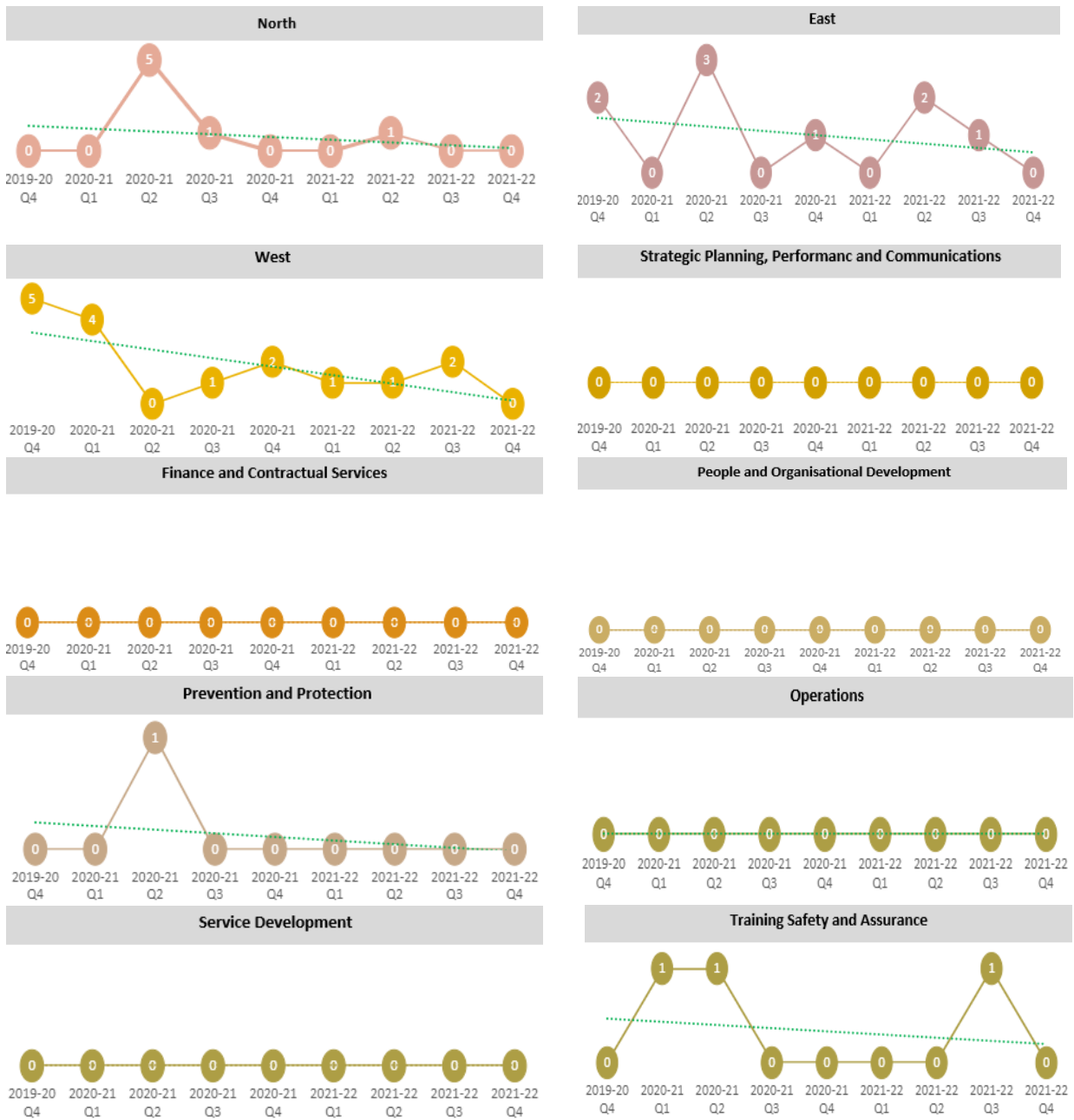


Figure 4: RIDDOR Reportable Injuries – Q4 2019-20 to Q4 2021-22

Improvement over the 3-year period is seen in the North, East and West SDAs, the TSA Directorate and P&P Function where there has been a reduction of all RIDDOR reportable accident/injuries. In Q4 there were no RIDDOR reportable accident/injuries compared to 3 during the same quarter previous reporting year.

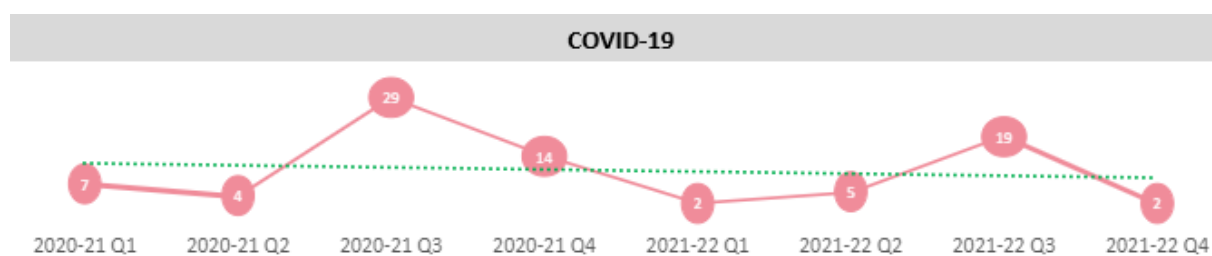
NOT PROTECTIVELY MARKED**RIDDOR REPORTING COVID-19 – Q4 2020-2021 to Q4 2021-22**

Figure 5: SFRS COVID-19 RIDDOR Reportable Q4 2020-21 to Q4 2021-22

In Q4 there were 2 COVID-19 events that were deemed to be attributable to work related transmission and therefore reportable to the HSE compared to 14 during the same quarter previous reporting year.

5.3.3 Accident/Injuries by Activity – Q4 2019-20 to Q4 2021-22 (Including RIDDOR)

Activity	2019-20	2020-21	2021-22
Operational	81	68	61
Non-Operational	62	40	47
Training	69	48	39
Total	212	156	147

Table 4: Accident/Injuries by Activity Q4 2019-20 to Q4 2021-22

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

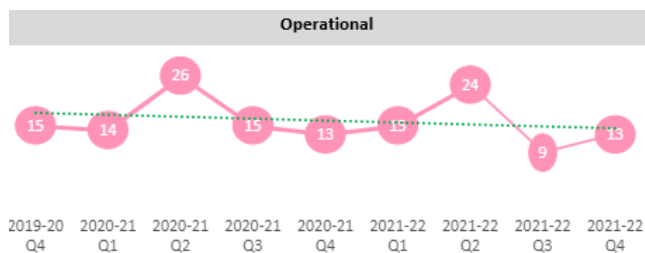
NOT PROTECTIVELY MARKED**Operational Accident/Injuries Q4 2019-20 to Q4 2021-22 (Including RIDDOR)**

Figure 6: Operational Accident/Injuries Q4 2019-20 to Q4 2021-22

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

During Q4 2021-22 54% (7 of 13) of operational AIs were recorded as primary fires compared to 36% (5 of 14) in the same quarter previous reporting year. The increase can be attributed to an increase in the number of events occurring in the initial (0 to 3) and developing phases (3 to 4) of the operational incident when compared to the same reporting period last year. The increase in the initial phase all occurred at “persons reported” incidents.

23% (3 of 13) occurred during special service incidents, a decrease of 50%, with a numerical decrease of 3 when comparing to same quarter previous reporting year. All were associated with manual handling/body movement injuries. 15% (2 of 13) occurred at secondary fires, numerically remaining the same when comparing to the same quarter previous reporting year.

8% (1 of 13) occurred at false alarms, a decrease of 1% when comparing to same quarter previous reporting year, however this remains numerically consistent when compared to same quarter previous reporting year.

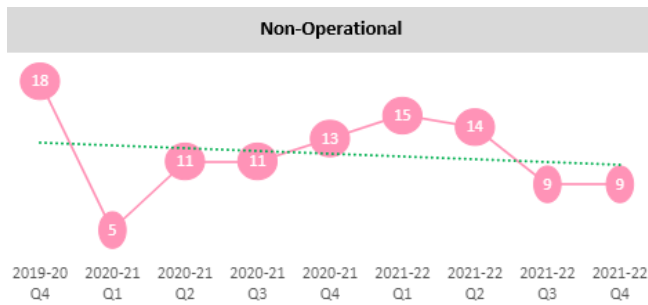
NOT PROTECTIVELY MARKED**Non-Operational Accident/Injuries – Q4 2019-20 to Q4 2021-22 (Including RIDDOR)**

Figure 7: Non-Operational Injuries Q4 2019-20 to Q4 2021-22

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

Data for Q4 2021-22 shows 55% (5 of 9) of injuries reported during Q4 2021-22 involved uniformed staff, representing a 40% decrease, and a numerical decrease of 6 in this category when compared to the same quarter previous reporting year. The remaining 44% (4 of 9) involved support staff, representing a 29% increase in this category, and a numerical increase of 2 when compared to same quarter previous reporting year. 2 of the 4 events were associated with a faulty gate. The remaining events were associated with poor situational awareness.

89% (8 of 9) occurred within the station premises e.g. carrying out kitchen duties, dismantling appliance, representing a 11% decrease, with a numerical decrease of 4 in this category when comparing to the same quarter previous reporting year.

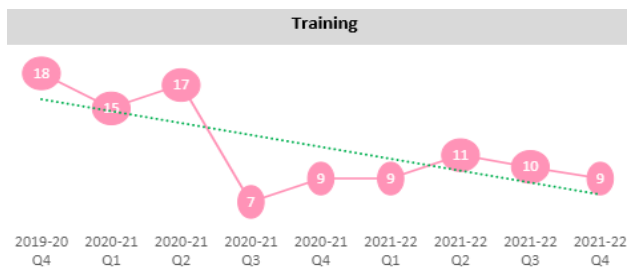
NOT PROTECTIVELY MARKED**Training Accident/Injuries – Q4 2019-20 to Q4 2021-22 (Including RIDDOR)**

Figure 8: Training Injuries Q4 2019-20 to Q4 2021-22

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

During Q4 89% (8 of 9) students incurred injuries whilst carrying out training activities, representing a 11% decrease when comparing to the same quarter previous reporting year, numerically a decrease of 1.

The remaining 11% (1 of 9) related to an instructor being injured, representing a 100% increase and a numerical increase of 1 when comparing to the same quarter previous reporting year. When considering Q4 data, 67% (6 of 9) of training related injuries occurred during refresher training, remaining consistent when comparing to the same quarter previous reporting year. The remaining 33% (3 of 9) are categorised as initial training.

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The National Training data shows a 500% (1 to 7) increase in training injuries, albeit a high percentage but numerically low, when comparing to the same quarter previous reporting year. During Q4 100% (6) students incurred injuries whilst undertaking training activities, remaining consistent when comparing to the same quarter previous reporting year, however a numerical increase of 5 is noted. This increase may be attributed to the amendments made to training delivery last year to accommodate COVID-19 control measures including a reduction in the number of students attending each course in the same quarter previous reporting year.

Two of the injuries occurred during Breathing Apparatus Tactical Ventilation Compartment Fire Behaviour Training (BA Tac Vent CFBT), whilst carrying out exercises within the attack box. 1 resulted in burns to a thumb and the other complained of the effects of heat stress. The remaining 4 events resulted in musculoskeletal (MSK) injuries, 2 occurring during ladder drills, 1 whilst undertaking swimming during water rescue training, and the remaining injury occurred during Urban Search and Rescue (USAR) Training and involved the IP's wrist being injured as a result of a drill jerking whilst breaching concrete.

With consideration to SDA led training, West SDA shows a 75% (4 to 1) decrease when comparing to the same quarter previous reporting year. This event occurred during ladder drills, resulting in a shoulder injury. The East SDA shows a 67% (3 to 1) decrease when comparing to the same quarter previous reporting year and involved the Instructor sustaining an eye infection as a result of crawling through the sewer pipe training facility. The North SDA (1) numerically remained the same when comparing to the same quarter previous reporting year. The event occurred during RTC training and resulted in an injury to the left hand.

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5.3.4 Working Days Lost Due to Health and Safety Events by Directorate

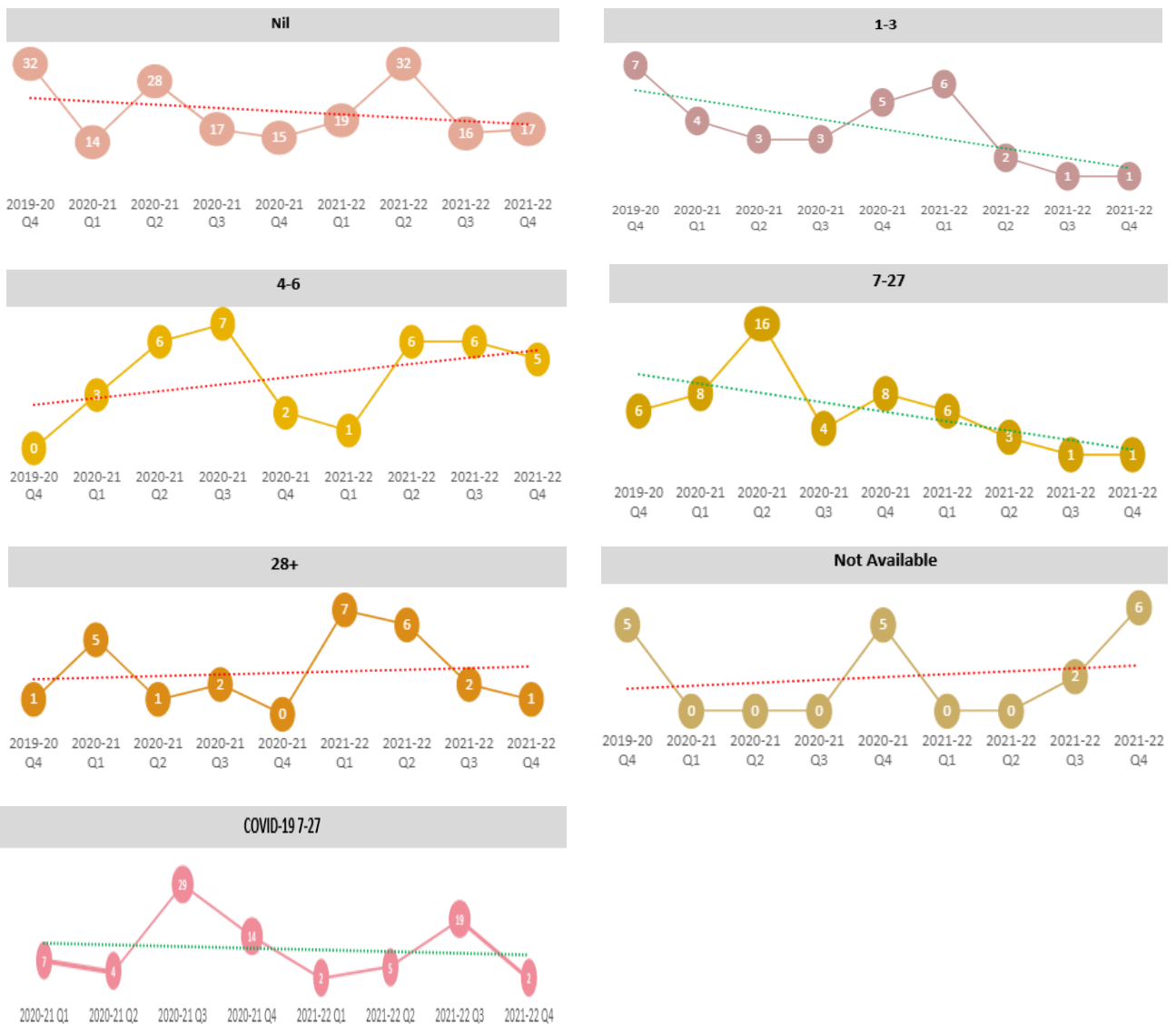


Figure 9: Working Days Lost Q4 2019-20 to Q4 2021-22

When considering the Q4 data, the 4-6 day and 1-3-day absence patterns indicate that 50% (3 of 6) of these events are linked to musculoskeletal (MSK) injuries. 2 occurred at an operational incident and included a back injury and a wrist injury and the remaining 1 occurred during a training activity which resulted in a forearm injury.

There was 1 accident/injury aligned to the 7-27-day absence pattern, representing an 87% decrease (8 to 1) when comparing to the same quarter previous reporting year, involving a fall from an appliance which resulted in a fracture to the wrist. When considering the Q4 COVID-19 work related absences data, there were 2 absences recorded in the 7-27 category.

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3% (1 of 31) of accidents/injuries during Q4 2021-22 were categorised in the 28+ days absence pattern. This event was due to a MSK knee injury.

There continues to be an 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.

5.3.5 Three Most Common Accident/Injuries by Causation – Q4 2020-21 to Q4 2021-22

Q4 2020/21		Q4 2021/22	
Slips and trips and falls	12	Impact (moving object)	9
Manual Handling/Body Movement	11	Manual Handling/Body Movement)	8
Impact (stationary object)	3	Slips and trips and falls	4

Table 5: Three Most Common Accidents/Injuries by Causation Q4 2020-21 to Q4 2021-22

The most common cause of accidents/injuries during the reporting period was impact with a moving object, accounting for 29% (9 of 31) of all AIs reported during Q4, representing an increase of 23% in this category, however a numerical increase of 7 when comparing to the same quarter previous reporting year.

22% (2 of 9) of accidents/injuries occurred at operational incidents. 1 involved incorrect storing of a BA set on the appliance, resulting in an injury to the face, and the other involved a blade snapping on a set of E-Draulic Cutters resulting in an injury to a forearm.

67% (6 of 9) of accidents/injuries occurred during non-operational activities, of these 3 involved contact with faulty gates or doors resulting in a minor head and facial injuries, 1 involved dismounting an appliance, and the remaining 2 events involved using small tools, resulting in minor cuts. The final 11% (1 of 9) involved USAR training, resulting in a wrist MSK injury. All can be attributed to lack of situational awareness.

Manual handling/body movement, accounted for 26% (8 of 31) of all AIs reported during Q4, representing an increase of 4% in this category, however a numerical decrease of 1 is noted when comparing to the same quarter previous reporting year.

50% (4 of 8) of accidents/injuries occurred whilst attending operational incidents, of these 1 involved tripping over equipment resulting in an ankle injury, 1 involved using an enforcer tool to gain entry, resulting in a shoulder injury, 1 involved supporting a barrier resulting in a foot injury, and the remaining event involved casualty rescue, resulting in a back injury.

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50% (4 of 8) of accidents/injuries occurred whilst undertaking training, all of which resulted in MSK injuries with 3 events involving ladder drills and the remaining event involved Water Rescue training, resulting in a shoulder injury.

Slips, trips and falls (STF) accounted for 13% (4 of 31) of all accidents/injuries reported during Q4, representing a 23% decrease in this category when comparing to the same quarter previous reporting year and a numerical decrease of 8. 75% (3 of 4) of accidents/injuries occurred whilst attending operational incidents. All of these involved tripping over hoses and resulted in MSK injuries.

The remaining accident/injury occurred whilst undertaking non-operational fitness activities and resulted in a knee injury.

5.3.6 Near Misses (NM) by Directorate – Q4 2019-20 to Q4 2021-22

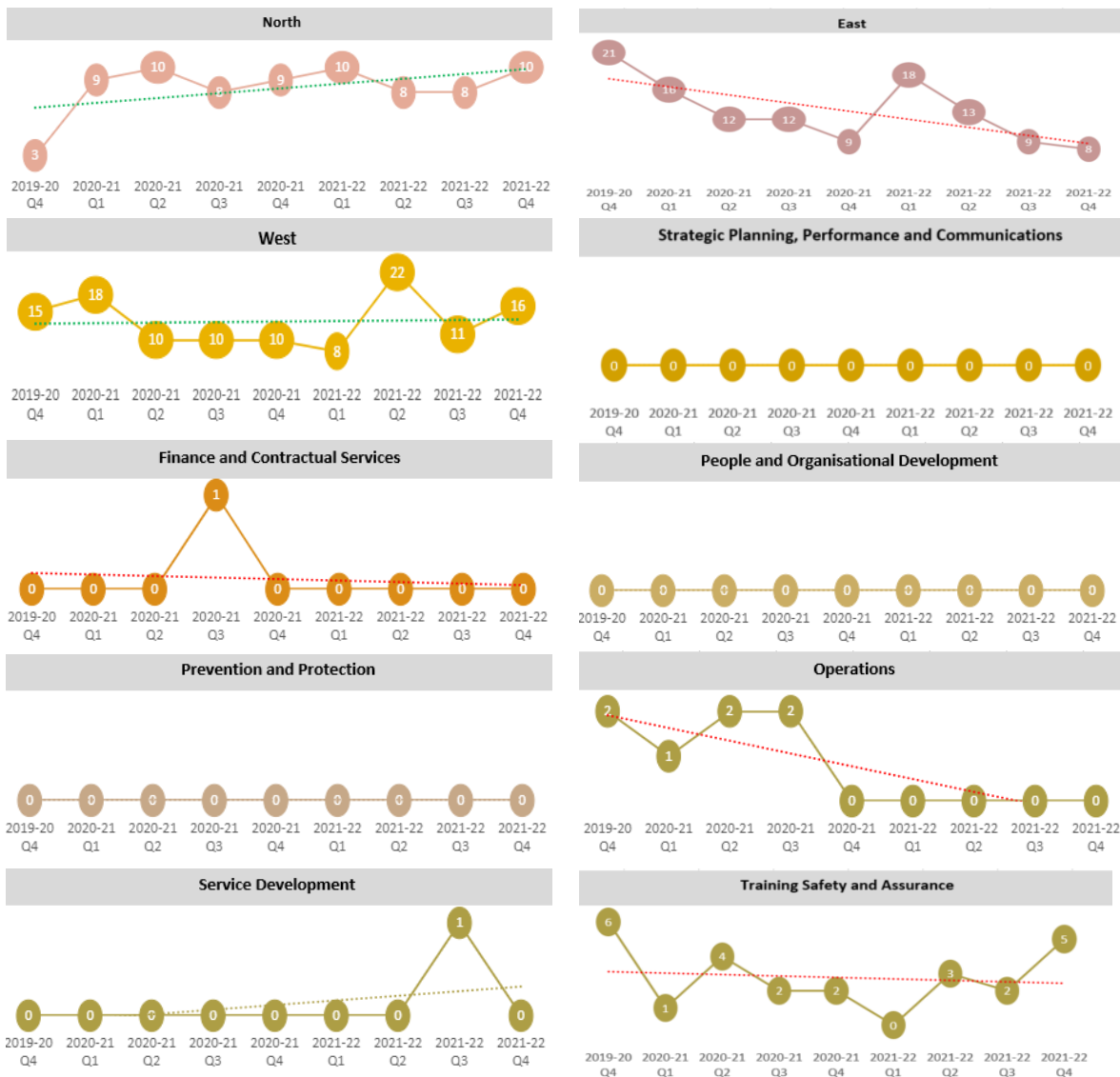


Figure 10: Near Misses by Directorate Q4 2019-20 to Q4 2021-22

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When considering the number of near misses in relation to the number of RIDDOR reportable events (excluding COVID-19), we see a ratio of 0.79:1 which is a significant improvement in frequency compared to 1.8:1 when comparing the same quarter previous reporting year.

The East SDA, FCS, TSA and Operations show a steady decrease in the reporting of near misses over the three-year period. With cognisance of the number of near miss reporting to the number of accident injuries including RIDDOR, the East SDA and TSA show that this decrease in near miss reporting is not aligned to a reduction in accidents/injuries including RIDDOR.

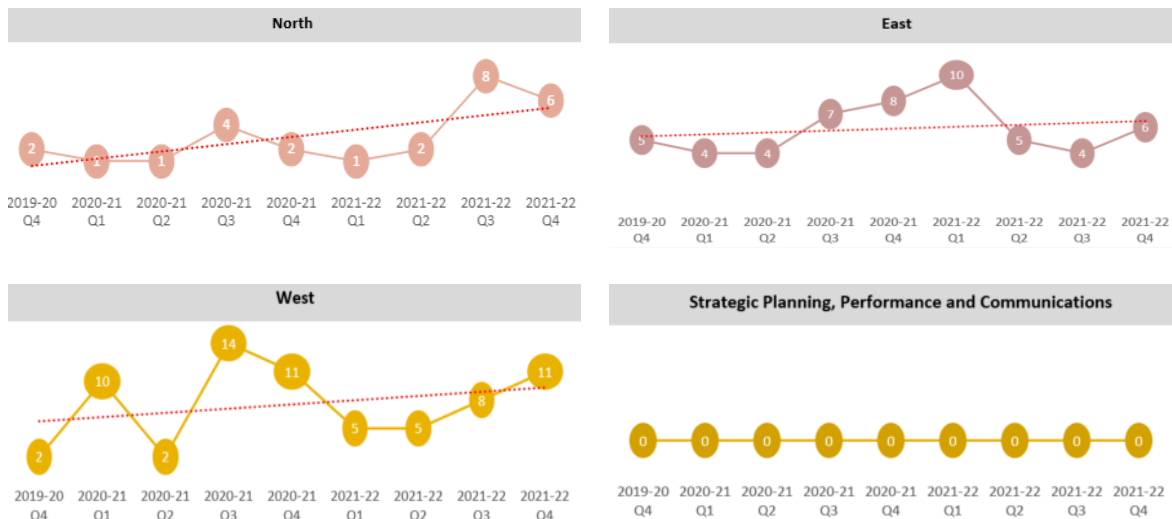
Operational near misses accounted for 23% (9 of 39) of the total reported, representing a 7% decrease from the same quarter previous reporting year, however numerically remains consistent.

A further 33% (13 of 39) occurred during non-operational activities, representing a 14% increase in this category when comparing to the same quarter previous reporting year and a numerical increase of 1.

Finally, 44% (17 of 39) of all near misses reported during Q4 were associated with training activities, an increase of 21% in this category and a numerical increase of 10 when comparing to the same quarter previous reporting year.

A trend has been identified with regard to leaks associated with Breathing Apparatus (BA) sets within the operational and training environment (8 of 21 events). As such a working group has been established to review this trend and identify any required remedial actions.

5.3.7 Acts of Violence (AOV) by Directorate – Q4 2019-20 to Q4 2021-22



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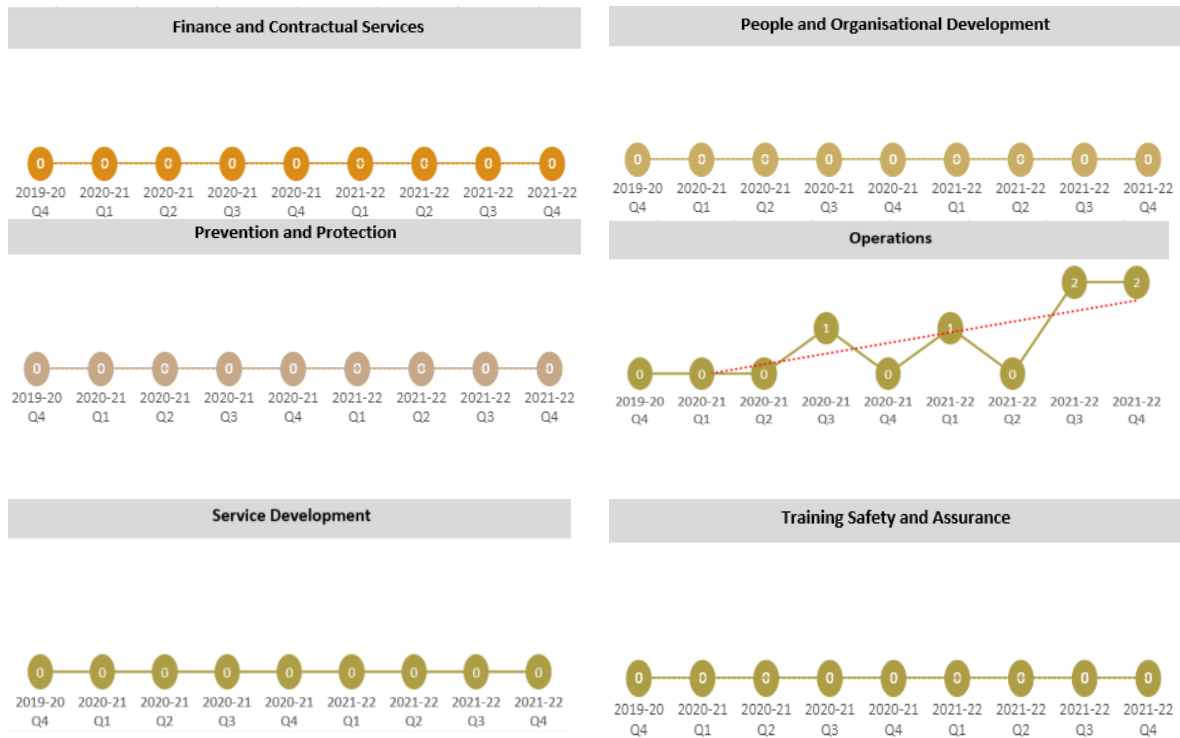


Figure 11: AOV by Directorate Q4 2019-20 to Q4 2021-22

There has been a steady increasing trend of AOVs reported over a three-year period with all the SDAs and Operations showing an increasing trend over the three-year period. When comparing to the same quarter previous reporting year, an 79% increase (14 to 25) is noted within SFRS. The North SDA shows a 200% increase (2 to 6) when comparing to the same quarter previous reporting year. 50% (3 of 6) occurred within Aberdeen City, Aberdeenshire and Moray LSO. The East SDA shows a decrease 25% (8 to 6) when comparing to the same quarter previous reporting year. 67% (4 of 6) of AOVs occurred within the City of Edinburgh LSO. The West SDA remains consistent in AOVs when comparing to the same quarter previous reporting year.

84% (21 of 25) of AOVs occurred at operational incidents. 76% (19 of 25) of AOVs requested Police attendance. 8% (2 of 25) were reported under the Emergency Workers (Scotland) Act 2005.

There were 0 injuries reported in Q4 relating to AOVs.

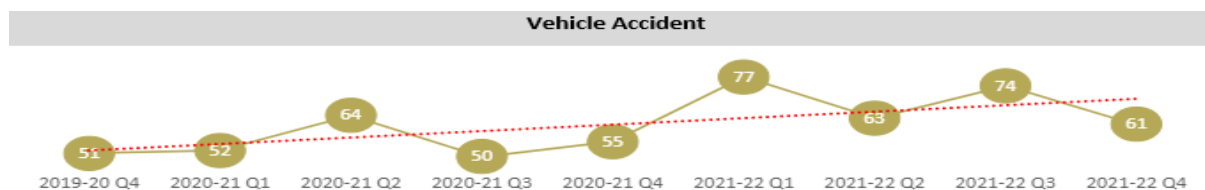
NOT PROTECTIVELY MARKED**5.3.8 Vehicle Accidents (VA) by Directorate – Q4 2019-20 to Q4 2021-22**

Figure 12: Vehicle Accidents by Directorate Q4 2019-20 to Q4 2021-22

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

61% (37 of 61) of all vehicle accidents reported during Q4 were attributed to operational incidents, representing a 17% reduction in this category from the same quarter previous reporting year and a numerical decrease of 6. A further 31% (19 of 61) were attributed to non-operational activities, representing an 11% increase in this category from the same quarter previous reporting year and a numerical increase of 8. Finally, 8% (5 of 61) were accidents attributed to training, representing a 6% increase in this category from the same quarter previous reporting year, and a numerical increase of 4.

Of note is that 3% (2 of 61) involved the use of boats and 2% (1 of 61) involved the transportation of boats.

49% (30 of 61) were as a result of low speed manoeuvres, a 2% decrease in this category from the same quarter previous reporting year, and a numerical decrease of 4. 33% (10 of 30) of low speed manoeuvres occurred within appliance bays/station yard, a 4% increase from the same quarter previous reporting year, and numerically remaining consistent when comparing to same quarter previous reporting year. 25% (15 of 61) occurred under blue light conditions, a 1% increase in this category when comparing to the same quarter previous reporting year, with a numerical increase of 2. 30% (18 of 61) occurred during the mobilising phase of the operational incident, representing a decrease of 6% in this category from the same quarter previous reporting year, with a numerical decrease of 2. 18% (11 of 61) occurred during normal road speeds, representing a 4% increase in this category from the same quarter previous reporting year, and a numerical increase of 7. 3% (2 of 61) had insufficient information.

75% (46 of 61) occurred while the vehicle was moving forward, a 4% decrease from the same quarter previous reporting year, and a numerical increase of 7. 15% (9 of 61) occurred

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while the vehicle was reversing, a 9% decrease from same quarter previous reporting year, and a numerical decrease of 4.

20% (12 of 61) of vehicle accidents involved the use of Driving Assistants, a 7% decrease from the same quarter previous reporting year and a numerical decrease of 1. 48% (29 of 61) of vehicle accidents required Driving Assistants to be in position, however 59% (17 of 29) were not used. This represents a 4% increase from the same quarter previous reporting year and a numerical increase of 1.

64% (39 of 61) hit something fixed or stationery, an 10% decrease in this category from the same quarter previous reporting year, with a numerical decrease of 2. 33% (20 of 61) involved street furniture e.g. fences, gates, bollards, walls, poles, pillars, bushes, trees, cones and verges, an 28% decrease from the same quarter previous reporting year, with a numerical decrease of 5. 11% (7 of 61) involved appliance bay doors, a 1% increase in this category when comparing to the same quarter previous reporting year, and a numerical increase of 3.

NOT PROTECTIVELY MARKED**6. GLOSSARY OF TERMS**

Accident/Injury Rate	The total number of reported accident/injuries divided by total number of employees multiplied by 100 to give the accident injury rate per employee
AOV	Acts of Violence
COVID-19	Coronavirus Pandemic
DD	Detached Duties
ESDA	East Service Delivery Area
FCS	Finance and Contractual Services Directorate
FF	Firefighter
FTE	Full-time Equivalent
HSE	Health and Safety Executive
ICL	Incident Command Level
ICT	Information Communications Technology
IP	Injured Person
Kronos	The Wholtime ICT availability system
LDP	Leadership Development Programme
LfCP	Leadership for Change Programme
LNA	Learning Needs Analysis
LSO	Local Senior Officer
MORR	Management of Occupational Road Risk
MPD	Maintenance Phase Development
MSK	Musculoskeletal
NSDA	North Service Delivery Area
NWR	Non - Work Related
OHCA	Out of Hospital Cardiac Arrest
POD	People and Organisational Development Directorate
Q1	Period 1 April – 30 June
Q2	Period 1 July – 30 September
Q3	Period 1 October – 31 December
Q4	Period 1 January – 31 March
RBC	Resource Based Crewing

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RDS	Retained Duty System
RDS/VDS	Retained Duty System/Volunteer Duty System
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
R&R	Response & Resilience Directorate
RTC	Road Traffic Collision
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SLT	Strategic Leadership Team
TNA	Training Needs Analysis
TOM	Target Operating Model
TFF	Trainee Firefighter
TU	Trade Union
UK FRS	UK Fire & Rescue Services
USAR	Urban Search and Rescue
VDS	Volunteer Duty System
WFPR	Workforce Planning & Resourcing
WSDA	West Service Delivery Area
WR	Work Related

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



Report No: C/PC/15-22

Agenda Item: 10

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
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 Scottish Fire and Rescue Service (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						
3.2.1	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.						
3.2.2	Of those 22 recommendations it is noted that no action was identified for six of these actions. This is because a response to the recommendation is captured within another recommendation. The action plan is attached as Appendix B .						
3.2.3	This update indicates that delivery of this action plan and the work being undertaken to conclude the remaining 8 actions is progressing steadily with these actions all green.						

3.2.4	The overall RAG rating for this action plan remains green and is noted as 92% complete (percentage completions for individual actions are an estimate provided by the action owner leading to the overall average percentage).	
3.2.5	Member of the PC are asked to consider the following: - <ul style="list-style-type: none"> • a revised due date of May 2022 has been proposed at action 9.3 in order to finalise progress and obtain 100% completion. • a revised status has been proposed at action 21.1 regarding the consideration of the cost benefit analysis of a wider introduction of seminars across the Service. • Members are asked to consider this action be moved to business as usual. Due to the pandemic and necessary alternative ways of working and our digital first policy, this approach for networking, engaging, training etc of our On Call staff has become part of business as usual. 	
3.2.6	The above update has been marked on Appendix B in red for ease.	
4	Recommendation	
4.1	Members of the PC are 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	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
7.1	Appendix A – Audit and Inspection Dashboard	
7.2	Appendix B – Training of RDS Personnel Action Plan Update	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Kirsty Jamieson, Planning and Performance Officer	
Sponsored by:	Kenneth Barbour, Head of Training Delivery and Performance	
Presented by:	Kenneth Barbour, Head of 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>18 May 2022</i>	<i>For recommendation (agreed for release to PC)</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For scrutiny</i>

Audit and Inspection Overview Dashboard

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	May-22	Aug-22	0	1	0	33	0	0	0	2	95%	

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	May-22	Aug-22	0	2	0	18	0	0	0	0	91%	
Feb-2019	Provision of Operational Risk Information	SDC	Mar-22		25	May-22	Aug-22	0	5	0	20	0	0	0	0	91%	
May-2019	Management of Fleet and Equipment	SDC	Mar-22		38	May-22	Aug-22	0	0	0	32	0	6	0	0	100%	
Mar-2020	Training of RDS Personnel	SGC	Mar-23		31	May-22	Aug-22	0	7	5	19	0	0	0	0	92%	
Dec-2020	Planning and Preparedness for COVID Review	SDC	May-26		16	May-22	Aug-22	0	7	0	9	0	0	0	0	92%	
Aug-2020	Command and Control: Aspects of Incident Command	SDC	Mar-22	Dec-23	25	May-22	Aug-22	0	0	0	25	0	0	0	0	100%	
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	10	Mar-22	Jun-22	0	1	0	9	0	0	0	0	92%	
Feb-20	Dumfries and Galloway	N/A	Jun-21		12	Mar-22	Jun-22	0	4	0	7	1	0	0	0	100%	
Jun-20	Edinburgh City	N/A	Apr-21		11	Mar-22	Jun-22	0	5	0	0	6	0	0	0	100%	
May-21	Midlothian	N/A	Mar-22	Mar-23	7	Mar-22	Jun-22	0	1	0	6	0	0	0	0	85%	

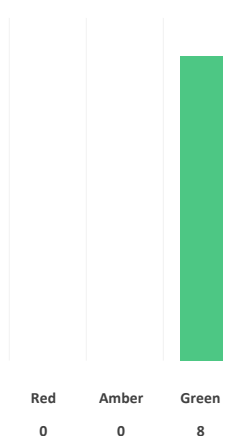
HMFSI Training of RDS Personnel - Action Plan Progress

Updated	Next Update
May-22	Aug-22

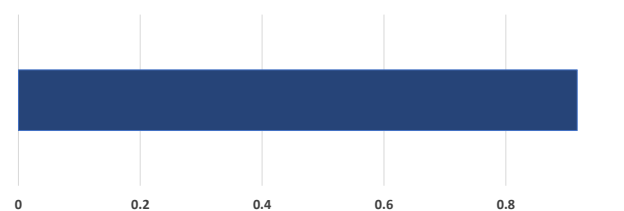
Status	Count
Not Started	0
In Progress	6
Deferred	5
Complete	19
Transferred	0
Cancelled	0
Moved to BAU	1
Void	0

Recommendations where no action identified	6
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In Progress RAG Rating



Overall Progress 92%



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	16 February 2022: With the introduction of the new Training Instructors Terms and Conditions which includes a new work shift pattern, new instructor clusters are being created to assist in ensuring that there is harmonisation between Local Senior Officer area instructors and the National Instructor Pool. Once these new systems of work settle down, further progress will be made on the de-centralised business model. This action remains green and on track. 18 May 2022: Work on the instructor clusters and harmonising working agreements between Directorate and Local Senior Officer Training teams continues. This action remains green and on track.	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. Moved to GC Todd 03/01/22	Mar-22		In Progress	16 February 2022: Several National Training Standards have been reviewed by Subject Matter Experts and are progressing through Training, Safety & Assurance Governance routes. This action remains green and on track. 18 May 2022: Documents have been reviewed and are being passed through Governance. Marine & Extrication presented to Functional Management Team on 6 April 2022. The next two documents will be presented on 4 May 2022. This action remains green and on track.	70%		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	16 February 2022: 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 remain viable. 18 May 2022: The continued recovery phase of training delivery means that there has been no further progress on this action, however, the timescales still remain achievable. This action remains green and the timescales 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	16 February 2022: The Training for Operational Competence (TFOC) framework has been re-designed and is scheduled to be implemented on the 1 April 2022. This new model of the TFOC will greatly improve RDS maintenance of skills training with RDS staff being involved in the creation of the new maintenance modules. This includes the combination of modules e.g. Acetylene & Hazardous Materials, in an effort to streamline and focus maintenance of skills. This action has moved from amber to green and is now on track. 18 May 2022: The new SFRS Training for Operational Competence Framework delivers up to date risk based modules and also allows local management teams to remove or add modules due to the risk profile of the station area. This item remains green and has now been completed.	100%		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		Complete	16 February 2022: The re-developed Training for Operational Competence (TFOC) Framework is scheduled to go live on the 1 April 2022. This new TFOC will deliver maintenance modules (lite) for both Wholetime and RDS staff. This action is progressing and remains at green. 18 May 2022: The new SFRS Training for Operational Competence delivers maintenance modules and went live on the 4th April 2022. This action remains green and has now been completed.	100%		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	16 February 2022: This is an ongoing programme with the latest User Intelligence Group (UIG) meeting held on 20 January 2022. There have been a number of 1-2-1 supplier engagement sessions of which the Training Function have attended. Further dedicated sessions are planned for this quarter which will focus specifically on Training requirements. A session with Police Scotland is also being planned for this quarter to benchmark against their training systems. This action is progressing and remains at green. 18 May 2022: Sessions with the People, Training, Finance and Assets System team continue with the focus being on the scope of requirements from the Training Function. Following this phase, the Function will them begin to document their functional requirements. This action is progressing and remains at green.	65%		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	May-22	In Progress	16 February 2022: Rollout is progressing at an excellent rate and on schedule for completion by end of March 22 as planned. This action is progressing and remains at green. 18 May 2022: Although progress has been very good, the action was not completed by the end of March 2022, however we are now aiming to reach 100% by mid-May. This action remains green. A revised due date of May 2022 has been proposed.	90%		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		Moved to BAU	16 February 2022: The RVDS Watch Command Support Officer roles have now been embedded nationally with a cohort of 54. Main focus of the roles are supporting RVDS station clusters which supports networking at an Local Senior Officer and Service Delivery Area level. A proposal has been agreed where by the RVDS Support Team will provide a centrally coordinated support, development and best practice sharing platform to the Watch Command Support Officers nationally; providing enhanced national networking. Due to the impact of the pandemic and the need to enhance our ability to lead, manage, train and support our RVDS personnel remotely/virtually this has resulted in a continued increase in virtual RVDS management seminars and training sessions in all LSO areas. This action is on track and remains green. 18 May 2022: Local Senior Officer areas continue to engage regularly, dictated locally, with their On Call stations, clusters and management teams utilising the Services "Digital First" approach to reduce the impact and burden on time. The increased utilisation of Sharepoint and MS Teams channels has further enabled On Call personnel to be directly engaged as key stakeholders across various Service wide projects and programmes. Learning & skills development team are also creating recognised development pathways for On Call staff from Firefighter to Watch Commander. This action remains green and on track. Members are asked to consider this action be moved to business as usual. Due to the pandemic and necessary alternative ways of working and our digital first policy, this approach for networking, engaging, training etc of our On Call staff has become part of business as usual.	70%		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.				
16. High Reach Appliance Training - consider crewing the high reach appliance with members of staff using different crewing model.	16.1	SDMP's Station and Appliances Review Project and the associated Demand Based Duty Systems Project to consider options crewing the high reach appliance with members of staff using a different crewing model within the scope of their respective projects.	DACO John MacDonald	Mar-23		Deferred	The location, availability, crewing and duty system for special appliances will be considered as part of the wider SDMP Station and Appliance Review and Demand Based Duty Systems projects. These projects will also link with the Operational Strategy review being undertaken by the Response and Resilience function. Phase 2 of the SDMP was originally due to complete in March 2021, however due to the impact of COVID the end date stop for this has now moved to September 2021. The impact of this on Training to be looked at once further guidance is given by SDMP Station and Appliance Review Product.				

1. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review alternative venues to deliver the training.	1.1	Review Task and Task Management (TTM) Course to consider modularisation and local delivery options.	GC Lorna Yuill	Sep-20	Nov-20	Complete	100%	✓	Delivery can be facilitated in a flexible format for the full course content. Engagement with RVDS candidates will be established via recruiting managers to cite them on the rolling scheduled of national course dates to assist candidates with forward planning and securing leave from primary employment to attend. Where attendance at a national course cannot be met, the ability to deliver locally and flexibly can now be facilitated.
1. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review alternative venues to deliver the training.	1.2	Review local delivery options for the Breathing Apparatus (BA) elements of Red, Amber and Green (RAG) Assessments.	GC Lorna Yuill	Sep-20	Mar-21	Complete	100%	✓	This action is now complete. Delivery site options have been explored as far as practicable, however, COVID has undoubtedly impacted any potential additional access to sites out with the SFRS portfolio. Assessments are scheduled and delivered locally by local Training Instructors as near to point of candidate need as practicable.
1. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review alternative venues to deliver the training.	1.3	Review BA Initial Course to consider modularisation and local delivery options.	GC William Pollard	Sep-20		Complete	100%	✓	The review of the BA Initial Course is now complete. The course can be delivered at a variety of venues with a view of providing the nearest suitable venue to the candidates to reduce travel. This has been supported by the completion of a pilot BA Initial Course on Western Isles, Orkney and Shetland (WIOS) Local Senior Officer area.
1. Initial training - The SFRS should consider the personal impact on new-entrant RDS firefighters attending their initial TTM and BA training courses and review alternative venues to deliver the training.	1.4	Compile and submit requests to Asset Management for any remaining BA equipment needed.	GC William Pollard	Jul-20		Complete	100%	✓	Request for BA equipment submitted via ACO. Dickie on 3 November 2020. This includes 18 x Thermal Imaging Cameras, 3 x Portable CFBT Aids (known as 'Dolls Houses'), 2 x Entry Control Boards along other miscellaneous BA equipment.
2. 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 current timescales allocated for the training.	2.1	No action required. Response to this recommendation is captured within recommendation 1.							
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%	✓	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%	✓	This action is now complete as RVDS contracts of employment now state: • 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.							
9. Maintenance of Skills - the SFRS should consider the availability and suitability of IT resources at RDS stations to support training;	9.1	Engage with ICT to explore Single Sign-on functionality	Andy Scott	Jan-21		Complete	100%	✓	Scoping exercise is now complete. Single Sign-on functionality is not available currently. However, this will be included as a functional specification via the People, Training, Finance & Assets (PTFA) Project.
10. Maintenance of Skills - the SFRS should consider reviewing the method for assessing competence;	10.1	Explore the potential for the completion of e-learning assessment to automatically update pdrPRO account and establish options for any identified improvements.	Andy Scott	Mar-21		Complete	100%	✓	This action has been explored and the functionality to update assessment attempts for the Flexi Duty Officer cadre of staff has been achieved, this cannot be extended to all uniformed personnel on the pdrPro system at the moment. However, this will be considered as part of the functional specification for Training systems within the PTFAS project. The People, Training, Finance and Assets System (PTFAS) Project is now fully underway with relevant People & Training Systems Sub-Group and User Intelligence Group process and supplier engagement for the People & Finance Systems elements. The completion for this work is April 2024.
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	100%	✓	11 August 21: The assessment options paper is underway, this will 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. 17 November 2021: The review is now complete and will progress through Training governance structures for approval.
11. Maintenance of skills - the SFRS should consider the delivery of more practical training for RDS staff with a reduction in theory content.	11.1	Guidance to be introduced which outlines the expected use of training packages and re-directs focus upon practical application training.	GC Jamie Thrower	Mar-21	May-21	Complete	100%	✓	19 May 21: Guidance Note developed and is under going consultation prior to being uploaded on the Learning Content Management System site. It is anticipated that this will be completed by the end of May. The due date has been reflected to complete this. Due to the slip in timescales, this action has moved from green to amber. 11 August 21: The guidance note has been changed to the Awareness Briefing format and published within the document library of iHub, with a notification added to 'What's New this Month' section of homepage (30-day file). See link in Evidence. A flash message notification also added to PDRPro accounts of RDS personnel . The RVDS Support Team also emailed an Awareness Briefing to all RVDS personnel. This action is now complete and has moved from amber to green. https://ihub.firescotland.gov.uk/download.cfm?doc=docm93jijm4n17963

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	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. 17 November 2021: MOI Learning modules have been created and will now be made available on the LCMS system.	100%	Nov-22	✓	
13. Driver Training - The SFRS should consider using third party providers to deliver LGV training.	13.1	No action required. Response to this recommendation is captured within recommendation 12.									
14. Driver Training - The SFRS should consider delivering EFAD training courses on remote islands to reflect topography and risk.	14.1	No action required. Response to this recommendation is captured within recommendation 12.									
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 practice shared across	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



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/26-22

Agenda Item: 11

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	HEALTH AND SAFETY ANNUAL REPORT 2020 - 2021						
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>					
		A	B	C	D	E	F
1	Purpose						
1.1	The purpose of the report is to present the Health and Safety (HS) Annual Report 2020 – 2021 to the People Committee (PC).						
2	Background						
2.1	The Scottish Fire and Rescue Service (SFRS) produces an Annual Health and Safety report which provides analysis of the key areas of performance during the reporting year and details the intended risk reduction approaches on key themes.						
2.2	The data detailed in this report is presented to enable a direct comparison between the previous reporting years and any notable trends evident are identified, where relevant.						
3	Main Report/Detail						
3.1	The COVID-19 pandemic has presented the SFRS with new and significant challenges. Many of our existing health and safety arrangements had to be reviewed and updated to ensure that appropriate control measures were in place to manage this new hazard. This has influenced the way our staff work and how we responded to operational incidents. These changes were necessary to ensure the continued safety of our staff and the general public whilst maintaining a high standard of emergency response. Although difficult to determine the exact effect, the COVID-19 pandemic has had an impact on the SFRS HS performance during this reporting year. For the purposes of analysis, we have reported on COVID-19 separately.						
3.2	59% of 2020-21 health and safety improvement plans actions were closed during the reporting year, representing an 12% increase when comparing to the previous reporting year.						
3.3	The total number of accidents/injuries for the reporting year was 156 which is a 26% decrease when comparing this to the previous reporting year. When considering those events reported to the Health and Safety Executive (HSE) under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) excluding COVID -19, we note that 11% (17 of 156) of all SFRS accidents/injuries are reported to the HSE. This is a 1% decrease when comparing to the previous reporting year.						
3.4	SFRS continues to carry out benchmarking of HS performance against other UK Fire and Rescue Services (FRS) where data is available. For this reporting period, usable data was received from 6 of the other 50 UK FRS.						

	Body movement/manual handling was the most common cause of accident/injury (including RIDDOR) during the reporting year followed by slips, trips and falls and then impact with a moving object.
3.5	The percentage of body movement/manual handling accident/injuries shows a 5% decrease compared to the previous reporting year. Data shows that a manual handling/body movement accident/injury is sustained every 6,583 operational incidents attended compared with 1 every 3,054 in the previous reporting year.
3.6	Slips, trips and falls saw a 11% increase, from 24 to 34 and were primarily associated with inclement weather, compared to the previous year.
3.7	Impact with a moving object saw a 2% increase, however a numerical decrease of 1 is noted, from 20 to 19, compared to the previous year. All involved uniform personnel, and were associated with, for example incorrect storage of equipment.
3.8	Numerically the number of events at operational incidents (8) remained the same compared to the previous year.
3.9	We will continue to implement risk reduction measures such as Health and Wellbeing led Musculoskeletal Risk Reduction Group, promotion of gritting regime within workplace development of non-operational activities risk assessments.
3.10	With regard our RIDDOR injuries, excluding COVID -19, there were no specified injuries during the reporting year compared to 3 the previous reporting year. All RIDDORs (17) were over 7-day accidents/injuries events representing a 12% increase when comparing to the previous reporting year.
3.11	29% of over 7-day accident/injuries reported to the HSE were associated with slips, trips and falls, 18% of over 7-day accidents/injuries were as a result of manual handling and /or body movement. There was no notable trend with the remainder RIDDOR cases.
3.12	59% (10 of 17) resulted in musculoskeletal injuries.
3.13	23% related to one operational incident as a result of actions undertaken by a partner agency.
3.14	On 23 March 2020 the UK went into lockdown as a result of the Coronavirus COVID-19 pandemic. Throughout the pandemic SFRS maintained its front line and essential services whilst developing and introducing workplace COVID controls. During the reporting year SFRS staff recorded 352 confirmed cases of COVID-19, of these 15% (54 of 352) were deemed as having reasonable evidence to be determined as workplace transmission and subsequently reported to the HSE under RIDDOR.
3.15	When considering the number of NM in relation to the number of RIDDOR reportable events (excluding COVID -19) we see a ratio of 9:1 which is an improvement on the 8:1 ratio reporting for previous reporting year. 47% of near misses were associated with operational activities, an increase of 11%, 44% with property issues, an increase of 30% and 24% with training activities, a 9% decrease when comparing to previous reporting year.
3.16	Analysis of our accident /injuries by activity indicate a 16% decrease in events occurring at operational incidents this year compared to last year with a Firefighter injured every 1,258 operational incidents attended compared with 1,130 in 2019/20.
3.17	When considering operational accidents/injuries by the stage of the incident the data shows that 16% occurred during mobilisation, 19% occurred during the initial stage ,50% occurred during the developing stage with the remaining 15% occurring during the closing stage of

	the incident.	
3.18	With regard non-operational accident/injuries 83% occurred within station premises and associated with routine tasks e.g. kitchen duties, equipment inspections etc.	
3.19	30% of accident injuries occurred whilst undertaking training of which 73% occurred during SDA led training activities and 27% occurred during national training activities.	
3.20	During 2020/21, a Firefighter was subjected to an act of violence every 1,358 operational incidents attended, compared with 1 every 1,636 in 2019/20.	
3.21	We will continue to work with business partners to promote SFRS's zero tolerance approach to AOVs and continue to share historical information to minimise the likelihood of acts of violence.	
3.22	During 2020/21 SFRS, vehicle accidents saw a 11% decrease, from 249 to 221 when compared to the previous reporting year.	
3.23	The most common cause of vehicle accidents reported remains hitting something fixed or stationary, accounting for 81% of the total reported a decrease of 20%, from 198 to 180 when compared to the last reporting year.	
3.24	A vehicle accident is reported every 590 operational incidents attended representing a 10% decrease, from 654 to 590 when comparing to the previous reporting year. Operational related vehicle accidents remain the most common accounting for 65% of the total reported during 2020/21, 32% attributed to other duties and 3% occurred during Training.	
3.25	Driver assistants were being used in 28% of the vehicle accidents attributed to operational incidents, representing an increase of 6% when comparing to the previous reporting year.	
3.26	We will continue to promote the driver handbook and the role of the Officer in Charge. The health and safety team will continue to work with our business partners to improve safety standards through analysis of health and safety events and the co-ordination of health and safety improvement plans and specific working groups.	
4	Recommendation	
4.1	The People Committee is invited to note the content of the HS Annual Report 2020 – 2021.	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix A - Health and Safety Annual Report 2020 – 2021.	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Owen Hanratty, Health and Safety Adviser	
Sponsored by:	Jim Holden, Head of Safety and Assurance	
Presented by:	Andy Watt, Assistant Chief Officer, Director of Training, 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>10 February 2022</i>	<i>For Decision</i>
<i>Strategic Leadership Team</i>	<i>26 April 2022</i>	<i>For Decision</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Scrutiny</i>
<i>SFRS Board</i>	<i>30 June 2022</i>	<i>For Information Only</i>



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

Health and Safety Annual Report 2020/21

**Working together
for a safer Scotland**



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1. INTRODUCTION BY DEPUTY CHIEF OFFICER AND CHAIR OF THE SCOTTISH FIRE AND RESCUE SERVICE BOARD



KIRSTY DARWENT

Chair
Scottish Fire and Rescue Service Board



ROSS HAGGART

Deputy Chief Officer
Scottish Fire and Rescue Service

Welcome to the Scottish Fire and Rescue Service's Health and Safety Annual Report for 2020/21. This report provides an account of our overall health and safety performance during the reporting year and highlights key areas of work which have contributed to improving this performance.

It is pleasing to note the positive progress that the Scottish Fire and Rescue Service (SFRS) continues to make in relation to Health and Safety (HS) performance. Overall the number of Accidents/Injuries, Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), Reportable incidents (excluding those associated with COVID-19) and Vehicle Accidents (VA) have all reduced during this reporting year.

The continued strengthening of relationships between the Safety and Assurance Function and Business Partners within Directorates and Service Delivery Areas (SDA) has been a key element of managing our HS performance. The bespoke objectives set within each Health and Safety Improvement Plan (HSIP) and the work carried out by the Safety and Assurance Improvement Groups (SAIG) have contributed significantly.

One performance indicator which has seen an unwelcome increase however, is the number of Acts of Violence (AoV) against our staff. This is a totally unacceptable position and efforts will be made to address this and, where necessary, we will make use of the Emergency Workers (Scotland) Act 2005 to bring those responsible to justice.

To provide a benchmark, ensure transparency and to share best practice we continue to assess our performance against other United Kingdom Fire and Rescue Services. Data provided from the other Services who provided a response, demonstrates that our HS performance remains strong in the UK context.

The COVID-19 pandemic has presented us with new and additional challenges which necessitated a review and update of our operating model resulting in the creation of new Risk Assessments and Safe Systems of Work (SSoW) to ensure the safety of staff and the public whilst maintaining our high standard of service delivery.

This work has supported safe delivery of uninterrupted services during the pandemic. Throughout this period of change in our lives we continued to promote our mental health and suicide prevention strategies ensuring they remained at the fore. This proved invaluable for many during these unprecedented and often difficult times.

Looking forward, it is important that we maintain our focus so that we can continue to build on the positive progress that we are reporting. Key areas such as manual handling, slips trips and falls and impact with moving objects, as well as low speed VA will receive additional scrutiny to further drive the instances of these type of events down.

It is important to acknowledge that our improved HS performance has only been made possible due to the continued commitment, efforts and contributions of all our staff. This is especially pleasing considering the additional challenges they were presented with during the reporting year.

We hope that you find this report informative and valuable.

2. EXECUTIVE SUMMARY

This Annual Report for the reporting year 2020/21 provides an opportunity for the SFRS to provide an update of HS performance for the reporting year and the comparison of data from the last four years where relevant data is available. The Report will also focus on any identified trends which have been highlighted.

During the reporting year, the HS Department has continued to build on existing strong relationships with our Business Partners in Directorates and SDA, developing new and reviewing existing Generic Risk Assessment (GRA) and SSoW.

This year saw the launch of our new Health and Safety Management System called Think, Act, Stay Safe (TASS) which went live on 1 October 2020. The primary module, the event reporting module is now embedded across the SFRS with several other modules nearing completion. In addition to this, seven new Management Arrangements were developed and issued.

The COVID-19 pandemic has presented the SFRS with new and significant challenges. New Risk Assessments and SSoW had to be developed and implemented as well as the revision of existing GRA and SSoW. This ensured that appropriate and proportionate control measures were in place to manage this new risk. These changes were necessary to ensure the continued safety of our staff and the general public whilst maintaining an uninterrupted high standard of service delivery. Although difficult to determine the exact effect, the COVID-19 pandemic has had an impact on the SFRS HS performance during this reporting year. It is noted that 85,581 operational incidents were attended this year compared to 92,070 in 2019/20 and 92,748 in 2018/19. It is also noted that the total number of candidates who attended Training Courses during 2020/21 was 5,366 compared to 5,712 in 2019/20. 19,998 Home Fire Safety Visits were carried out in 2020/21 compared with 69,139 in 2019/20.

Overall, the total number of Accidents/Injuries (including RIDDOR) reduced by 26% (212 to 156) when compared to the previous reporting year. The number of recorded Accidents/Injuries (excluding RIDDOR) also decreased by 25% (186 to 139).

This improvement may be attributed in part to the impact of the COVID-19 pandemic on our activities and the embedding of enhanced mitigating controls. These include, but not limited to, the completion and embedding of various technical assessment, such as Provision and Use of Work Equipment Assessments to

further inform the procurement of equipment, a review of the Operational Dynamic and Analytical Risk Assessment process, the development of a training matrix to inform training requirements per job role and our strengthening engagement with Business Partners in the completion of annual HSIP and the management of emerging local risk.

The number of Accidents/Injuries which were reported to the Health and Safety Executive (HSE) as a requirement of RIDDOR decreased by 35% (26 to 17). In addition to this, 54 RIDDOR events were reported to the HSE due to workplace transmission of COVID-19 however, these have been recorded separately for the purposes of this report and analysis.

When considering the data as an Accident/Injury Rate, we see a 25% decrease (26.7 to 19.9 per 1000 staff) compared to 2019/20.

31% (48 of 156) of Accidents/Injuries reported during 2020/21 occurred whilst undertaking training related activities, this is a 2% decrease in this category when comparing to the previous reporting year and a numerical decrease of 21. It should be noted however, that as a result of COVID-19 there was a reduction in the number of Training Courses during this reporting year. Training delivery methods were also revised, including a reduction in the numbers of students attending each course.

This reporting year saw a 26% decrease (199 to 148) in the number of Near Misses (NM) reported when compared with the previous reporting year. Whilst the reporting of NM events continues to be encouraged this reduction in NM is also reflected in a comparable reduction in our Accident/Injury and RIDDOR (excluding COVID-19) events.

Our AoV have increased by 23% increase (56 to 69) from the previous reporting year. 91% (63 of 69) of AoV reported occurred at operational incidents which is a 4% decrease. 9% (6 of 69) occurred during non-operational activities, an increase of 4% from the previous reporting year.

A welcome reduction of 11% (249 to 221) in VA was noted for the reporting year, this is against the backdrop of reduced vehicle movement due to COVID-19.











Work will continue during the next reporting year to identify and address emerging trends with the aim of further improvements in HS performance, particularly around AoV.

3. HEALTH AND SAFETY FUNCTIONAL PLAN 2020/21

Our 2020/21 HS Functional Plan sets out our commitment to further enhance our HS provision. Our focus continues to be on people, processes and systems with the overall objective of continuing to improve staff safety. The COVID-19 pandemic was a significant challenge with resources being redistributed to address emerging Directorate and Organisational risk. This had a direct impact on progress against objectives set in 2020/21. Our achievements against our 2020/21 objectives are detailed below:

Objective Progress: ● Achieved ● Partially Achieved ● Not Achieved

Objective	RAG	Progress
Develop and implement an in-house HS Management Information System	●	Task: Develop a suite of Management Arrangements and where required Learning Competent Management System modules which provide managers with the tools to support legal compliance
	●	• Management Arrangement for Confined Space has been published;
	●	• Management Arrangement for Lift Trucks has been published;
	●	• Management Arrangement for Road Traffic Collision Investigation has been published;
	●	• Management Arrangement for Safety and Assurance Engagement and Governance has been published;
	●	• Management Arrangement for Operational Dynamic and Analytical Risk Assessment has been published;
	●	• Management Arrangement for Display Screen Equipment Homeworking has been published;
	●	• Management Arrangement for COVID-19 Workplace has been published;
	●	• Management Arrangement for Event Reporting Systems has been drafted and following consultation will be implemented in 2021/22;
	●	• Management Arrangement for Pressure Systems has been drafted and following consultation will be implemented in 2021/22;
	●	• Management Arrangement for Organised Events has been drafted and following consultation will be implemented in 2021/22; and
●	• Management Arrangement for Self-Audits has been drafted and following consultation will be implemented in 2021/22.	

Objective	RAG	Progress
	    	<p>Task: Develop modules for inclusion in the Electronic HS Management System known as Think, Act, Stay Safe</p> <ul style="list-style-type: none"> • Event Reporting module live; • Display Screen Equipment module development complete - launch due 2021/22; • Premise Inspection module - development commenced, scheduled for completion 2021/22; and • Risk Assessment module - development commenced, scheduled for completion 2021/22.
<p>Deliver a rolling programme of SFRS HSIP across the organisation</p>	    	<p>Task: Prepare Annual Improvement Plans and advise all SDA and Directorates on implementation</p> <ul style="list-style-type: none"> • Plans agreed with all SDA/Directorates; • Meeting regime between SDA/Directorates and HS staff in place; • Quarterly progress reports developed; and • 59% of the SFRS plan complete. SDA/Directorate performance is as follows: <ul style="list-style-type: none"> • North SDA (NSDA) 92%; • East SDA (ESDA) 79%; • West SDA (WSDA) 75%; • Finance and Contractual Services (FCS) 75%; • Prevention and Protection Function (P&P) 89%; • Strategic Planning, Performance and Communications (SPPC) 100%; • People and Organisational Development (POD) 92%; • Operations Function (Operations) 64%; • Training, Safety and Assurance (TSA) 93%; and • Service Development (SD) 93%.

Objective	RAG	Progress
	● ●	<p>Task: Facilitate completion of the Management of Risk at Operational Incidents Framework</p> <ul style="list-style-type: none"> Limited progress was achieved in 2020/21 due to realigning resources as a result of the COVID-19 pandemic. Work will commence in 2021/22.
Develop a culture of compliance	● ● ●	<p>Task: Manage the completion of Noise and Hand Arm Vibration measurements</p> <ul style="list-style-type: none"> All identified assessments complete; and Outcome reports prepared.
	● ● ●	<p>Task: Develop a suite of Employee Fact Sheets</p> <ul style="list-style-type: none"> Development of programme and format; and Implementation delayed due to COVID-19. Work will commence in 2021/22.
	● ● ● ● ●	<p>Task: Develop Employee Handbooks to capture Risk Assessments and SSoW (excluding operational activities)</p> <ul style="list-style-type: none"> Office Handbook updated to reflect COVID-19; Prevention and Protection Handbook complete; Asset Management Handbook complete; Training Handbook - development commenced, scheduled for completion 2021/22; and Service Delivery Handbook development on going and will be complete in 2021/22.
To promote competence in HS management and knowledge	● ● ●	<p>Task: Develop and review a training matrix for all SDA/Directorates in relation to HS training requirements (excluding Training for Operational Competence)</p> <ul style="list-style-type: none"> Training matrix completed for previous year and a more user-friendly version of training matrix in development; and HS Induction checklist prepared.
Document Conversion Project	● ● ●	<p>Task: To liaise with Operations to review and agree a new format of GRA, Standard Operating Procedures (SOP), Technical Information Notes and Periodic Inspection and Testing Sheets</p> <ul style="list-style-type: none"> New document formats developed in conjunction with Operations; and Conversion of documents to new GRA and SOP formats has commenced.

4. ADDITIONAL ACTIVITIES UNDERTAKEN IN SUPPORT OF SFRS BUSINESS PARTNER OBJECTIVES/INITIATIVES

The following additional activities were undertaken by HS during 2020/21 to support SFRS Business Partner objectives and initiatives.

- Production of quarterly reports to the SFRS National Safety and Assurance Board (NSAB) to provide progress on HSIP and HS events;
- Establishment of a bespoke team within the HS Department to develop and advise on a suite of COVID-19 control measures including:
 - Development of a COVID-19 Workplace Management Arrangement and Workplace plan;
 - Completion of support reviews to assist Business Partners in the achievement of a COVID-19 Secure workplace;
 - Development and implementation of a COVID-19 RIDDOR determination process;
 - Participating in the development of a suite of SFRS and partner agency Risk Assessments and SSoW; and
 - Development of a Display Screen Equipment (DSE) Homeworking Management Arrangement.
- Advised on the implementation of Face Fit Testing across SFRS;
- Assisted in the completion of a various technical assessments and SOP for operational staff;
- Participated in 9 User Intelligence Groups to ensure the consideration of HS in the procurement of equipment and services;
- Development and implementation of pilot to embed lessons learnt from significant events;
- Undertook a review of water rescue HS events and facilitated the completion of the associated action plan;
- Advised on the format and content of the Operational Document Conversion Project;
- Enhanced the Accident Reporting and Investigation course by developing additional technical elements such as gathering of evidence, analysis tools and report writing. This is supported by the introduction of realistic scenarios to consolidate the learning;
- Managed the investigation of 3 significant HS events; and
- Worked in conjunction with Human Resources and Organisational Development (HROD) in supporting the development of individual SSoW arrangements to allow staff with known medical or physical conditions to return to work in a safe manner.

5. DIRECTORATE/SERVICE DELIVERY UPDATE

Finance and Procurement

During 2020/21 F&P continued to engage with HS through the SAIG meetings and attendance by the Head of Function at the NSAB. HS is a standing agenda item at the Finance & Procurement Management Team meeting, ensuring focus is maintained and progress updates monitored and reviewed. The HSIP is used as a management tool to inform discussion and monitor activity, directing resource as required.

To assist the monitoring activity, F&P continue to utilise a formal HS tracker with active monitoring against required Learning Content Management System (LCMS) modules and other HS activities.

Required activity in relation to the 2020/21 HSIP was completed, including engagement with staff on Fire Evacuation, Traffic Management and general awareness of HS requirements. In addition to this however, significant levels of engagement were undertaken to ensure the health, safety and wellbeing of staff whilst working at home.

The DSE Homeworking Assessments identified the necessary equipment to ensure work activity could continue in a safe and controlled manner. Through direct engagement across the Function we also ensured the wellbeing of staff was considered and where appropriate alternative arrangements identified to manage the need of individuals. Section meetings, competitions, coffee mornings and other activities helped to maintain an awareness of the challenges presented throughout COVID-19.

Asset Management

Throughout 2020/21 Asset Management have been involved in various workstreams with HS at the forefront of all activities. Good partnership working with HS and Asset Management, saw a full time HS Adviser being embedded into the Asset Management structure for a period of 18 months. This has led to the enhanced completion rate of the HSIP and HS workstreams, benefiting all areas of the business.

The enhancement of HS within Asset Management has also resulted in a reduction in Accidents/Injuries and NM and has identified additional staff training needs. A refocus on training has resulted in technical

specification requirements being included in procurement contracts to ensure training is provided for the use and maintenance of equipment.

Excellent cross Directorate partnership working has resulted in the completion of backlogged Personal Protective Equipment (PPE) assessments, the introduction of structural fire PPE posters, an enhanced Pre-Delivery Inspection (PDI) procedure, the production of a Client Brief for construction works projects and a Noise Reduction Vehicle Modification Programme.

With a focus on HS, we have procured new water rescue equipment, are piloting an electronic vehicle inventory checklist, and are carrying out a programme to replace Hydraulic Rescue Equipment (HRE) with Powered Rescue Equipment (PRE). In addition to this we have decommissioned 52 fuel sites and published the Drivers Handbook and an associated Dashcam Policy. The Assets Resource Centres (ARC) have developed and implemented their ARC HS Handbook throughout all stores along with a suite of SSoW and toolbox talks.

Looking ahead, we will continue to focus on improving HS arrangements within our Function and work towards the completion of the HSIP. We will continue to work in partnership with our Business Partners and strive to promote HS.

People and Organisational Development

Throughout 2020/21, the POD Directorate continued to work in partnership with HS to enhance standards of HS within POD. As a result, when comparing the percentage completion of the POD HSIP to the previous year, an 8% increase is noted from 84% to 92%.

Our 2020/21 HSIP focused on ensuring the provision of robust Risk Assessments and supporting arrangements, such as Manual Handling Assessments, Control of Substances Hazardous to Health (COSHH) Assessments, DSE Assessments, Stress Assessments, and briefing for POD employees on site specific HS arrangements (e.g. Traffic Management Plan, Emergency Fire Evacuation Plan and First Aid). We carried out Risk Assessments and developed SSoW to support SFRS critical activities whilst focusing on safety of staff and others in response to COVID-19, including the move to safe home working. This proactive work contributed to zero HS events being reported for POD across 2020/21, noting that

the vast majority of POD staff were working from home throughout 2020/21 in response to the pandemic.

During 2020/21 the HSIP remained as a standing item at POD Directorate Management Team meetings and the POD Management Team meetings. In support of the existing POD HS Coordinator and Liaison roles, a POD HS Liaison role was established for each SFRS premises with a POD presence. This wider POD HS Group continue to meet regularly, typically 6-weekly to ensure regular progress updates are communicated to all functional managers and POD staff. This has enhanced promotion of and responsibility for health, safety and wellbeing at all levels within the Directorate and across all locations.

Looking ahead to 2021/22, the POD SAIG will continue to enhance directorate and functional HS arrangements. POD as a directorate will also continue to support the Service wide response to and recovery from the pandemic including the mental health and wellbeing strategic priority. We will continue to work with our Business Partners through established forums including the SFRS Musculoskeletal (MSK) Injury Reduction Group and Contaminants Group as well as wider programme of work including the continued development of the HS training matrix. This will be supported by appropriate implementation arrangements to promote and enable the positive health, safety and wellbeing culture across the Service.

Prevention and Protection

During the reporting year 2020/21, the P&P SAIG has continued to evolve which has assisted with working towards the completion of the objectives of our HSIP.

All HS objectives and progress are discussed with P&P Functional Managers and Head of Function. These discussions are also reflected at the functional managers team meetings, thus ensuring and maintaining robust governance arrangements which promotes a positive HS culture within P&P.

Working closely with the HS team, effective progress has been achieved by working towards the completion of the objectives contained within the 2020/21 HSIP, this includes:

- Overall, 89% of all P&P actions have been completed, a 4% improvement from 2019/20. This includes ongoing actions relating to PPE, COSHH, the Provision and Use of Work Equipment Regulations and Dangerous Substances and Explosive Atmospheres Regulations (DSEAR);
- Two objectives have been deferred and two are currently outstanding which require input from other Directorates before they can be completed. P&P managers are actively engaging with these Directorates to progress these actions; Objectives that have not been completed or require input from other Directorates have been carried forward to the 2021/22 HSIP. Revised completion dates have been agreed where ongoing monitoring continues;
- The Heritage HS Handbook is currently under review prior to HS approval and publishing. Further reviews may be required due to the heritage stores relocation and the impact of the COVID-19 pandemic on the Museum of Scottish Fire Heritage redevelopment timescales; and
- The new SFRS Stress Management Arrangement has been well received and a programme of workplace stress identification forms have been developed and implemented to support staff health and wellbeing.

In addition to the above, P&P worked closely with other Functions to align the response to the COVID-19 pandemic. COVID-19 Task cards and SSoW were produced and published in the Protections Level Framework providing considerations and guidance to staff when undertaking P&P activities.

Operations

Operations has now been fully integrated into the wider Service Delivery Directorate adopting a strong partnership approach in achieving outcomes within the HSIP and significant event action plans.

Operational has played a pivotal role in the SFRS response to COVID-19 ensuring risk mitigation information and guidance was developed and delivered to frontline staff.

Progression of the HSIP through the SAIG continues in partnership with the HS Department. Key projects to enhance staff safety have commenced and include the Document Conversion Project to align all operational

information for end users in a simple to navigate format, ensuring risk critical information is available at point of need underpinned by robust Risk Assessments. To compliment this piece of work a review of all technical documentation including testing information, in conjunction with HS and Asset Management has commenced with support being provided from subject matter experts across all SDA.

An Operational Strategy Framework has also been produced to drive forward safety and innovation on the incident ground. The strategy which will be launched next year will deliver across several key areas including:

- Appliances and Equipment;
- Operational Communications;
- Firefighting;
- National Fire Resilience;
- Wildfire; and
- Height.

All these workstreams have a strong focus on enhancing staff safety, through the provision of appropriate equipment aligned to clear policy and Risk Assessments.

Strategic Planning Performance and Communications

The SPPC Directorate has continued to develop its management and tracking of HS activities during 2020/21. This is supported through regular meetings of our now well established, Directorate SAIG. The Directorate have kept the HSIP under continual review and reported quarterly performance at Directorate Management Team meetings along with any key areas of HS focus.

The Directorate wide SharePoint Site, which provides relevant HS information, links to training requirements and our HSIP, together with a dedicated HS tracker for recording quarterly performance. This is kept up to date, under review, and enhanced where possible. Collectively, these measures taken at Directorate level appear to have made a marked improvement in performance over this period. Importantly, this work has increased Directorate staffs HS awareness. It has also helped to make it clear the key roles that individuals and teams play in relation to HS within our workplace, regardless of role.

Training, Safety and Assurance

Throughout the year the TSA Directorate has continued to embed the management of HS into our Directorate and address any emerging issues timeously to promote the safety of SFRS staff.

TSA has made good progress with the implementation of the HSIP, completing 93% (51 of 55) of actions. The effective embedding of completed actions and resultant increase in our standards of safety has been witnessed through a continued reduction in our work-related accidents for the third consecutive year.

This year has seen the completion of a SFRS Noise and Hand Arm Vibration Assessment Programme, a significant review of the Operational Dynamic and Analytical Risk Assessment Management Arrangement, the development of a process to promote the embedding of identified lessons within the SFRS, and the continued development of the Training Function Electronic HS Handbook.

Significant progress has occurred across the TSA Directorate despite the challenges presented by the COVID-19 pandemic. The pandemic presented new hazards for the Directorate which were effectively managed in conjunction with Business Partners, thereby ensuring the continued provision of critical activities such as training delivery.

Looking ahead to 2021/22 there will be a continued focus on the completion of the HSIP and our ongoing cross Directorate work such as the Document Conversion Project, and the Noise and Vibration Reduction Programme both of which will continue to improve staff safety across SFRS.

Service Development

During 2020/21, SD undertook a review of its internal HS processes and implemented a new integrated management process, drawing existing functional leads together into the Directorate SAIG, led by the Directorate Single Point of Contact.

HS monitoring, compliance and reporting is a continuous focus for the Directorate and is reflected as a standing agenda item at all Directorate Management Team meetings. The Directorate through the

orchestration of the SAIG continues to partner closely with HS regarding performance standards, including accurate and timely reporting of key measures.

As a result of establishing the Directorate SAIG there has been a positive trend in terms of HS performance. Additionally, there was a focus on the completion of the HSIP which this year primarily involved the review and update of a number of processes, Risk Assessments, and SSoW.

During the reporting year, ICT had to significantly adapt and continually evolve the way in which we deliver our service to the rest of SFRS to support the move to safe home working, whilst continuing to ensure provision of a robust ICT service.

In 2021/22 Service Development will continue to review, develop, and evolve our working practices to ensure we fully support the changing needs of SFRS HS.

North Service Delivery Area

The management of HS continues to be a high priority in the NSDA. The NSDA SAIG has representation from all Local Senior Officer (LSO) areas as well as Operations Control, Fleet and Equipment Workshops, and TSA representatives, which ensures that a strong culture of HS exists and encompasses all areas of work in the SDA. The HSIP is the foundation of all the work carried out and for 2020/21 the NSDA completed 92% of the actions it was allocated, the remaining 8% were unable to be progressed as they relied upon other Directorate workstreams which had not been completed due to the impact of the pandemic, and have been carried forward into the 2021/22 HSIP for completion.

The NSDA continues to focus on low speed manoeuvre VA reduction and has created a task and finish working group made up of Station staff. The group are developing a range of ideas with a view to reducing these preventable accidents. We have seen a decrease in the number of Accidents/Injuries which unfortunately hasn't been reflected in RIDDOR Reportable Accidents which has shown an increase from 2 to 6. AoV continue a slow but steady decrease, and although one instance of this type of event is unacceptable the reduction made is welcomed.

Over the 2021/22 period the NSDA SAIG will continue to focus on the reduction of low speed manoeuvre VA, and to encourage NM reporting by all staff. The momentum created by the work on the HSIP will be maintained with a view to replicating last year's performance and completing all of the locally achievable actions.

The NSDA Management Team continue to actively support the NSDA SAIG and maintain a strong focus of ensuring that the health, safety and wellbeing of all staff is a priority.

East Service Delivery Area

The new governance arrangements creating the SAIG have been successfully implemented in the ESDA with continued support from all Directorates, LSO Areas and Representative Bodies ensuring that a positive HS culture is promoted across the Area. The HSIP drives the business of the SAIG and at the end of the reporting year 79% of actions were completed. All outstanding actions are being progressed through the appropriate Directorates and have been carried forward into the 2021/22 plan.

Priorities throughout the year included highlighting behavioural safety to reduce Accidents/Injuries and VA. This focus has maintained a relatively stable trend in the number of reported Accidents/Injuries and an 11% reduction in VA. The number of VA in the ESDA has seen a reduction for the third year in a row and will continue to be a priority in the coming year through the proactive promotion of VA prevention to supplement event analysis in conjunction with SFRS Driver Safety Group at a national level along with all LSO Areas.

The ESDA is focused on ensuring the improvements that have been made in previous years are built upon, and that we continue to ensure the ESDA is placing the health, safety and wellbeing of all staff at the forefront of everything we do.

West Service Delivery Area

The WSDA SAIG has focused on achieving the objectives contained within the 2020/21 HSIP. This year's plan held a total of 27 overarching objectives, of which 75% were completed; with several additional local actions being distributed to specific LSO Areas throughout the associating period.

Revised governance arrangements were introduced during the previous year to support the management of HS activities across the WSDA. This, along with the contents of the HSIP, Significant Event Action Plans and accompanying local management arrangements, has enabled Safety and Assurance Liaison Officers (SALO) to analyse events at West SAIG meetings and to agree actions that promote a positive HS culture across all LSO Areas, Directorates and Functions.

Current performance management information indicates that both VA and AoV continue to be areas

of concern for the West SAIG; with low speed vehicle manoeuvre accidents continuing to be one of the highest categories of vehicle events across the WSDA.

Areas of good practice have been identified for both concerns and a series of actions are being implemented to raise an awareness of these issues and to reiterate the steps required to reduce future events; with one example being a multi-agency AoV pledge scheduled to be trialed during 2021/22.

Outcomes from Operational Assurance activities continue to provide valuable lessons for operational managers to focus on. These processes, along with the establishment of added Command Group communication channels, will be used to raise an awareness of key learning onto operational staff across the organisation.

Further emphasis will be placed on completing all HSIP objectives and Significant Event Actions within the allocated quarterly milestones moving forward.

6. KEY PERFORMANCE INDICATORS

Historically there have been six key performance indicators detailed within this report:

- Improvement Plans;
- Accidents/Injuries;
- RIDDOR Reportable Injuries;
- Near Misses;
- Acts of Violence; and
- Vehicle Accidents.

However, as a result of the pandemic, this reports now includes a seventh performance indicator, RIDDOR Reportable COVID-19 Events.

7. HEALTH AND SAFETY IMPROVEMENT PLANS

To support legislative compliance, there is one overarching SFRS HSIP supported by ten bespoke plans, one for each SDA and Directorate. The SFRS table below indicates the current completion status at the end of 2020/21.

Year	Number of Identified Actions	Number of Actions Completed	Completion Percentage (%)	RAG
2016/17	122	40	33	-
2017/18	66	9	14	
2018/19	63	14	22	
2019/20	68	32	47	
2020/21	61	36	59	

Table 1: Improvement Plan Progress 2020/21

Overall completion of the 2020/21 HISP is 59% (36 of 61) representing a 12% increase when comparing to the previous reporting year.

Significant progress is noted in six of the ten plans in place, with TSA, POD, P&P, SD and NSDA completing over 80% and SPPC completing 100% of their actions for 2020/21. Of the 25 outstanding actions, analysis shows 48% (12 of 25) are over 70% complete.



8. PERFORMANCE DASHBOARD

About the statistics in the performance dashboard

The statistics quoted in this dashboard are internal management information published in the interests of transparency and openness. They are provisional in nature and subject to change as a result of ongoing quality assurance and review.

As all statistics quoted are provisional there may be differences in the period totals quoted in successive reports after original publication, which result from revisions or additions to the data on our systems.

Statistical reporting will be based on the date the event occurred. This means that all reports will include information on exceptions, i.e. events that were reported late and out with the previous reporting year.

Spark lines which show the breakdown of events by year over a four-year period and the underlying trend for that period. Anomalies will be reported by exception.

The dashboard utilised all reported HS events over a four-year period from 2017/18 to 2020/21. This provides Key Performance Indicator (KPI) Totals average trend comparison over a four-year period from 2017/18 to 2020/21.

KPI Trend Comparison Dashboard

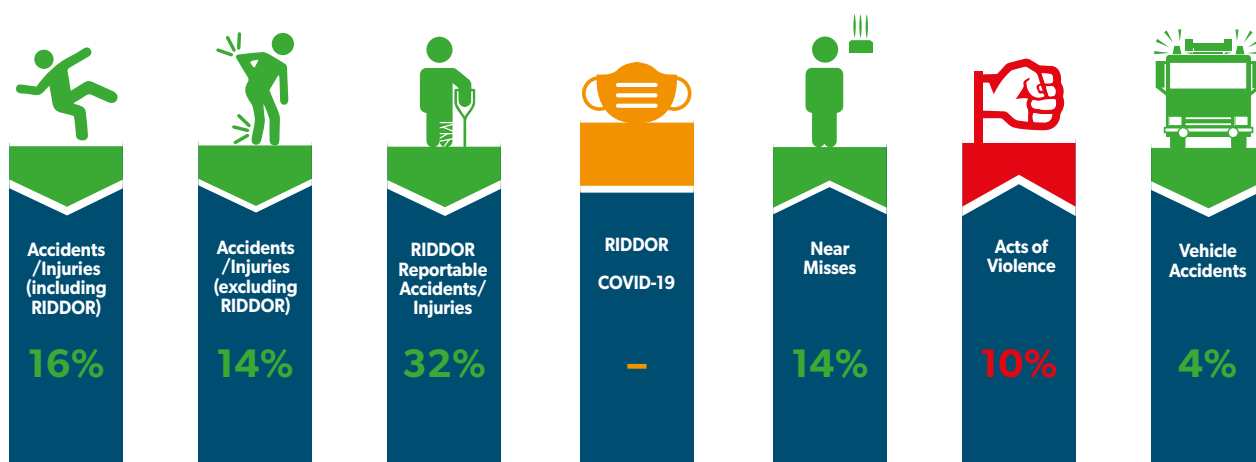


Figure 1: Trend Comparisons 2020/21

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

The table below shows year-to-date totals to the end of each year from 2017/18 onwards. The trend change matches those shown in the infographic above.

Event	2017/18	2018/19	2019/20	2020/21	RAG	4 Year Trend % Change
Accidents/Injuries (including RIDDOR)	258	227	212	156	Green	-16%
Accidents/Injuries (excluding RIDDOR)	223	190	186	139	Green	-14%
RIDDOR Reportable Accidents/Injuries	35	37	26	17	Green	-32%
RIDDOR COVID-19	0	0	0	54	Orange	-
Near Misses	168	203	199	148	Green	-14%
Acts of Violence	61	83	56	69	Red	-10%
Vehicle Accidents	230	241	249	221	Green	-4%
Total	717	754	716	594	Green	-12%

Table 2: Total Events by Year

It is noted that whilst the number of NM has reduced this is reported in a positive trend due to a similar or greater reduction in Accidents/Injuries and RIDDOR.

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

The HS performance during this reporting year may have been influenced by the effects of the COVID-19 pandemic.

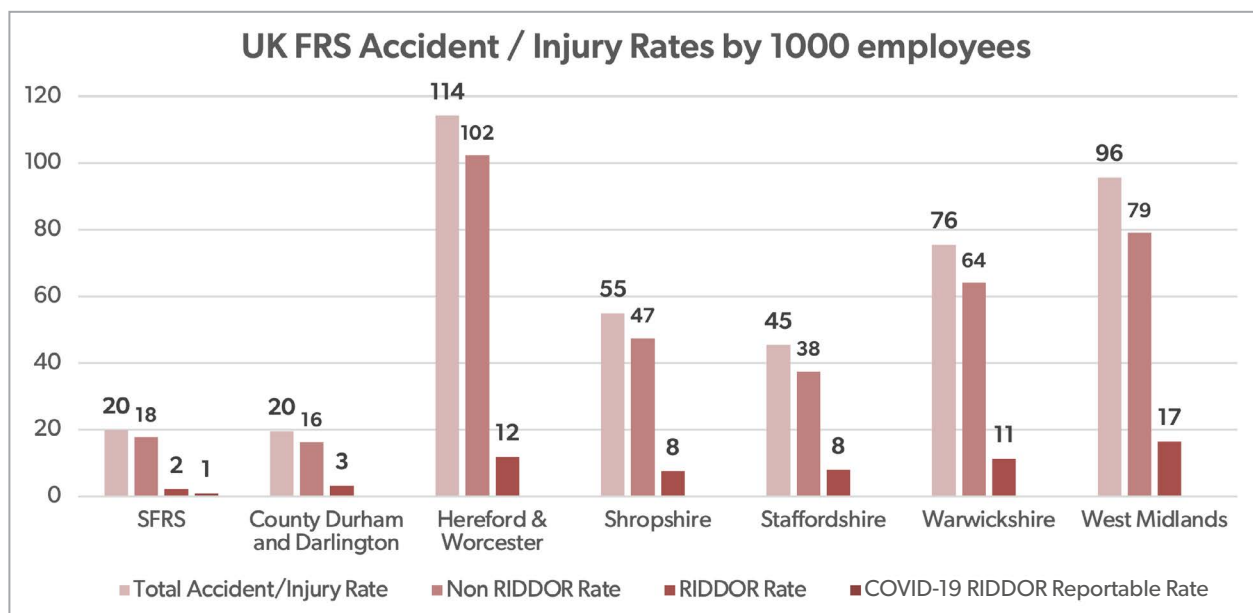
On the 23rd of March 2020 the UK went into lockdown because of the Coronavirus COVID-19 pandemic.

The development and subsequent implementation of control measures to reduce the risk of workplace transmission required SFRS to act promptly whilst maintaining an emergency response.

Our emergency response operating model and the way in which our staff work had to be reviewed and revised to protect staff and the public. This resulted in a reduction in operational incidents, training events, Home Fire Safety Visits and changes to the way our staff carry out their roles.

9. UK FIRE AND RESCUE SERVICE COMPARISON

SFRS continues to carry out benchmarking of HS performance against other UK Fire and Rescue Services (FRS) where data is available. For this reporting year data was received from 6 of the other 50 UK FRS.



Graph 1: UK FRS Accident/Injury Rates

In comparison with the 6 other FRS that provided usable data, we can see that the SFRS HS performance remains strong in the UK context. This reporting year, the total SFRS Accident/Injury Rate was 20 per 1000 employees, the non RIDDOR Injury Rate was 18 per 1000 employees and the RIDDOR Injury Rate was 2 per 1000 employees. These rates are comparable to only one other UK FRS, County Durham and Darlington, with all other reporting significantly higher rate.

It was not possible to provide a comparison of RIDDOR reportable Reportable COVID-19 cases due to the limited information received from other FRS.

We will continue to liaise and engage with other UK FRS through the National Fire Chiefs Council (NFCC) HS Committee. This will allow areas of best practice to be shared, with the aim of enhancing Firefighter safety UK wide.

10. PERFORMANCE OVERVIEW

The spark lines below show the trend over a 4-year period from 2017/18 to 2020/21. The dotted line on each panel gives an indication of overall trends. There is no spark line for COVID-19 as there is no previous comparative data.

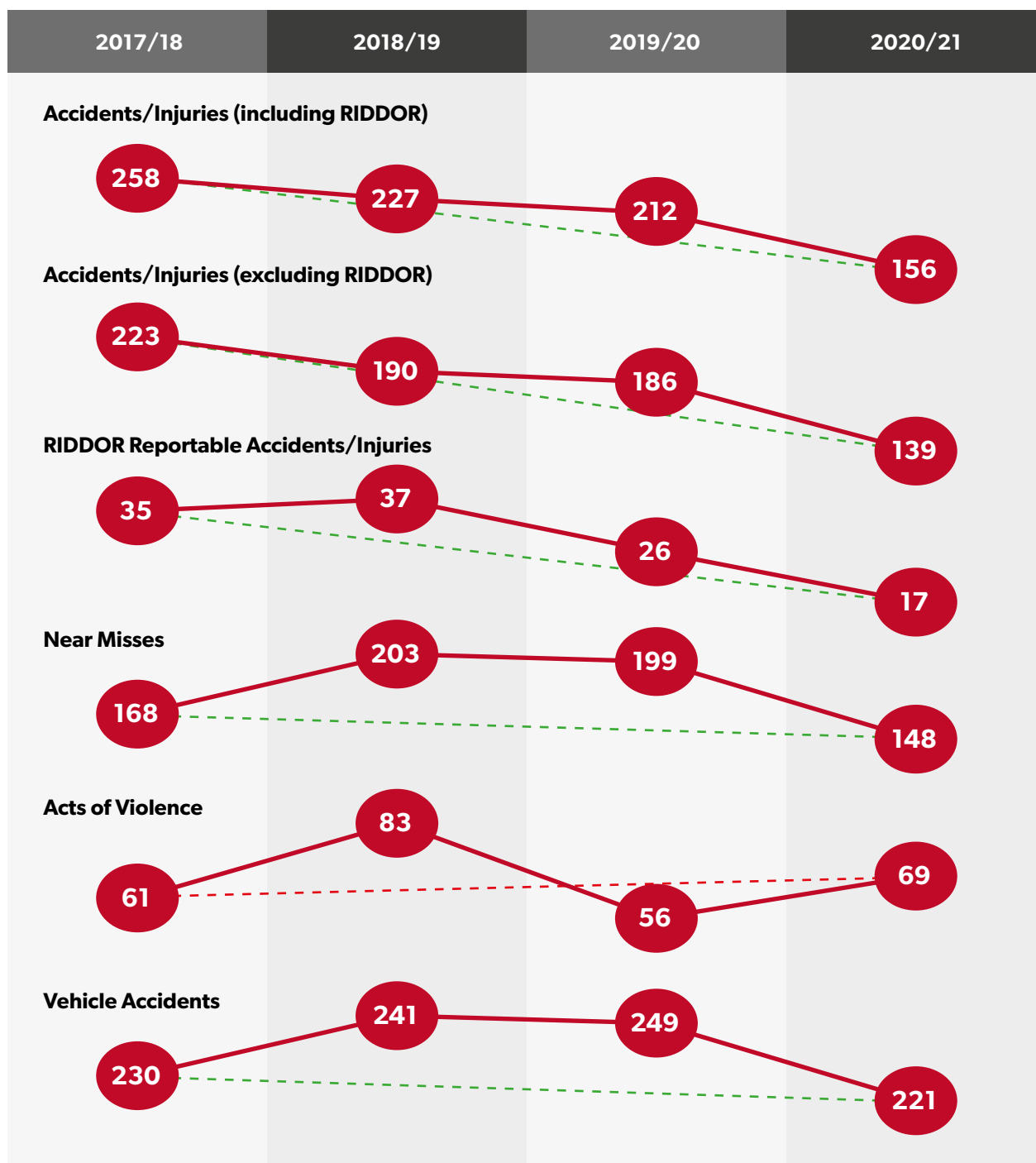


Figure 2: Event KPI Totals from 2017/18 to 2020/21

The trend is positive for Accidents/Injuries (including RIDDOR), Accidents/Injuries (excluding RIDDOR), RIDDOR Reportable Accident/Injuries, NM and VA, however AoV show a relatively static trend. Further analysis of all key performance indicators can be found in the related sections of this report.



ACCIDENTS/INJURIES (INCLUDING RIDDOR)

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	53	42	41	36		-12%
East	92	68	54	48		-11%
West	49	69	68	53		-22%
Strategic Planning, Performance and Communications	3	0	0	0		0%
Finance and Contractual Services	10	9	6	3		-50%
People and Organisational Development	1	2	2	0		-100%
Prevention and Protection	1	1	1	0		-100%
Operations	5	3	6	1		-83%
Service Development	0	0	0	0		0%
Training, Safety and Assurance	44	33	34	15		-56%
Total	258	227	212	156		-26%

Table 3: Accidents/Injuries (including RIDDOR) but excluding COVID-19 Annual Totals

The total number of Accidents/Injuries (including RIDDOR) shows a 26% (212 to 156) decrease when comparing to the previous reporting year. Improvements are noted within all three SDA as well as TSA, Operations, FCS, and POD Directorates.

When considering the data as an Accident/Injury rate 1000 employee, we see a 25% decrease (26.7 to 19.9) in our Accident/Injury rate compared to 2019/20, a 30% decrease (28.3 to 19.9) when compared to 2018/19, and a 47% decrease when compared to 2017/18.

Accidents/Injuries (including RIDDOR)

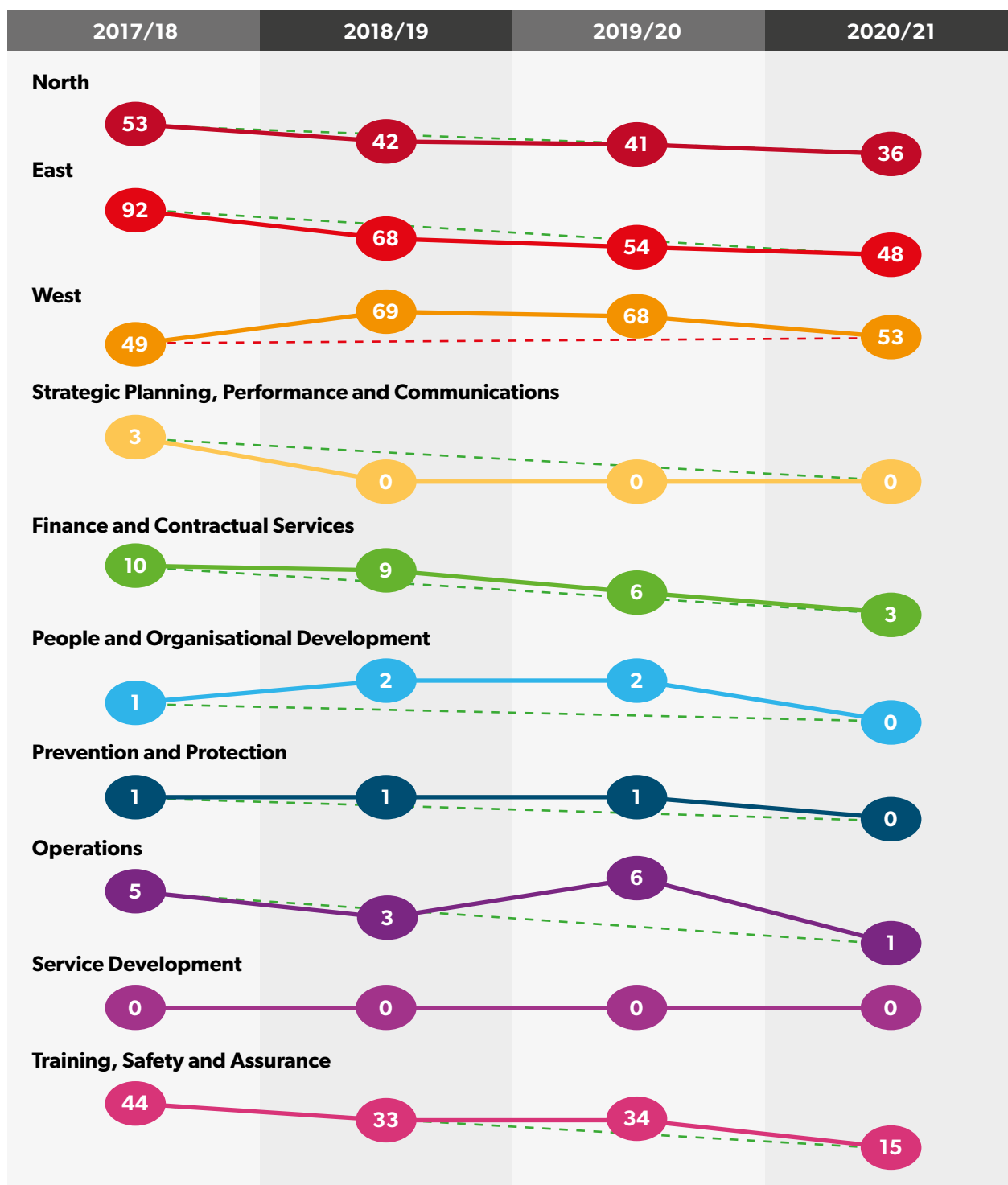


Figure 3: Accidents/Injuries (including RIDDOR) but excluding COVID-19 Totals from 2017/18 to 2020/21

It is noted that Service Development is a new Directorate with P&P and Operations being new Functions. However, to allow comparison to previous years, analysis of each Function has been provided.

Overall SFRS Accidents/Injuries (including RIDDOR) show an improving trend over the four-year period. A positive trend is seen across 2 of the 3 SDA and all Directorates. A negative trend is noted within the WSDA over the four-year period, however a 22% decrease is seen from the previous reporting year. The most notable improvement is seen within the ESDA.



ACCIDENTS/INJURIES (EXCLUDING RIDDOR)

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	47	38	39	30	Green	-23%
East	81	56	41	45	Red	10%
West	41	53	60	46	Green	-23%
Strategic Planning, Performance and Communications	3	0	0	0		
Finance and Contractual Services	8	9	6	3	Green	-50%
People and Organisational Development	1	2	2	0	Green	-100%
Prevention and Protection	1	1	1	0	Green	-100%
Operations	5	3	4	0	Green	-100%
Service Development	0	0	0	0		
Training, Safety and Assurance	36	28	33	15	Green	-55%
Total	223	190	186	139	Green	-25%

Table 4: Accidents/Injuries (excluding RIDDOR) Annual Totals

The total number of Accidents/Injuries (excluding RIDDOR) shows a 25% (186 to 139) decrease when comparing to the previous reporting year. Improvements are shown in 2 of the 3 SDA and in all other Directorates.

Accidents/Injuries (excluding RIDDOR)

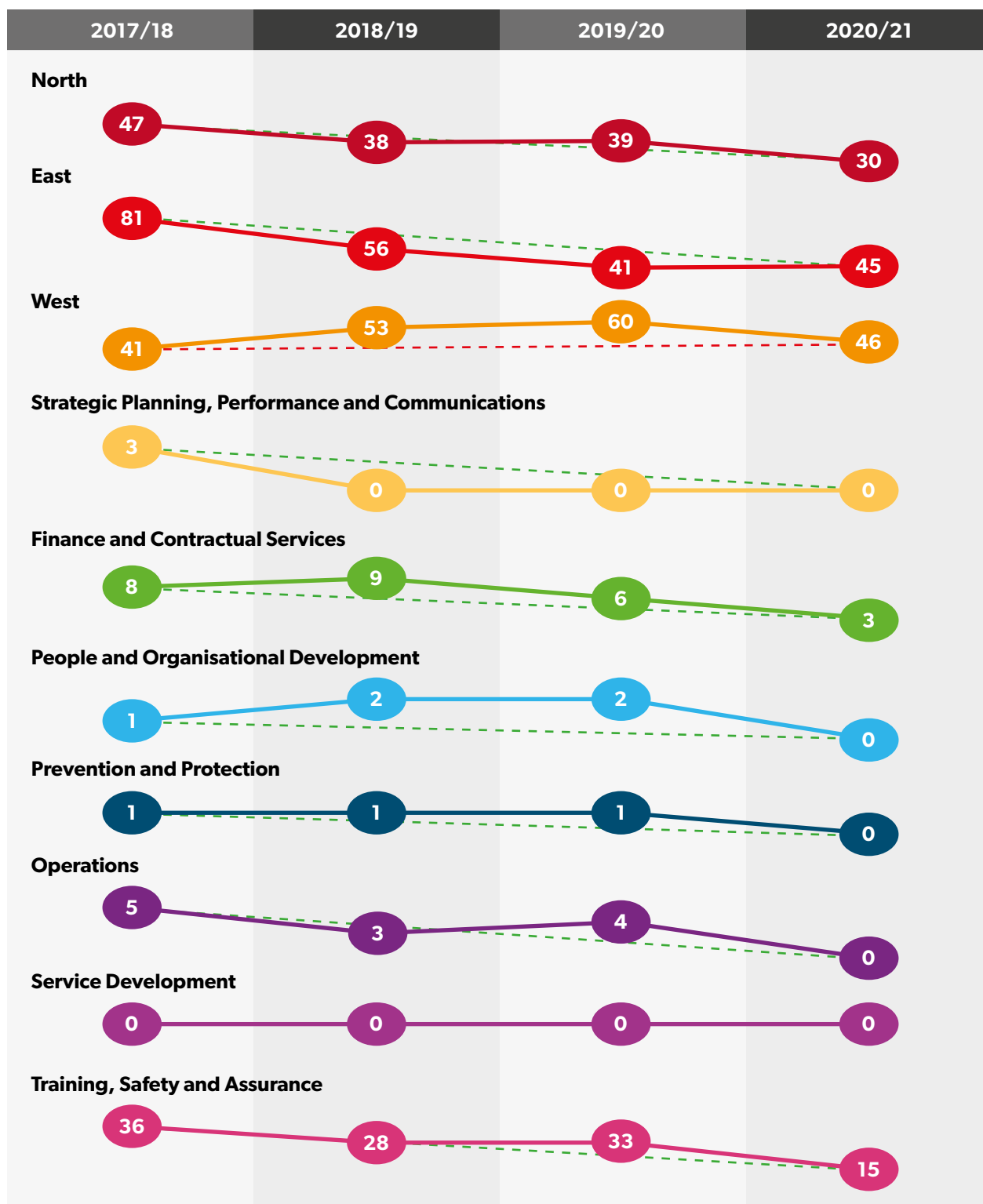


Figure 4: Accidents/Injuries (excluding RIDDOR) Totals from 2017/18 to 2020/21

Overall SFRS Accidents/Injuries (excluding RIDDOR) show an improving trend over the four-year period. The most notable improvement is seen within the ESDA. Conversely, the WSDA shows a rising trend over the four-year period, however a 23% decrease is noted when comparing to the previous year.



RIDDOR REPORTABLE ACCIDENTS/INJURIES

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	6	4	2	6		200%
East	11	12	13	3		-77%
West	8	16	8	7		-13%
Strategic Planning, Performance and Communications	0	0	0	0		0%
Finance and Contractual Services	2	0	0	0		0%
People and Organisational Development	0	0	0	0		0%
Prevention and Protection	0	0	0	0		0%
Operations	0	0	2	1		-50%
Service Development	0	0	0	0		0%
Training, Safety and Assurance	0	5	1	0		-100%
Total	27	37	26	17		-35%

Table 5: RIDDOR Reportable Accidents/Injuries (Excluding COVID-19) Annual Totals

The total number of Accidents/Injuries reported to the HSE under RIDDOR shows a 35% (26 to 17) decrease when comparing to the previous reporting year. The most notable improvement is seen within the ESDA, with this improvement attributed to a reduction in operational activity related RIDDOR Reportable events (7 to 2) and (5 to 1) in SDA led training. Whilst numerically the values are low, improvements are also recorded within the WSDA, as well as TSA and Operations Directorates. The NSDA shows a 200% (2 to 6) increase in RIDDOR Reportable Accidents/Injuries when comparing to the previous reporting year, however it should be noted that 4 Reportable Accidents/Injuries occurred at the same operational incident.

RIDDOR Reportable Accidents/Injuries

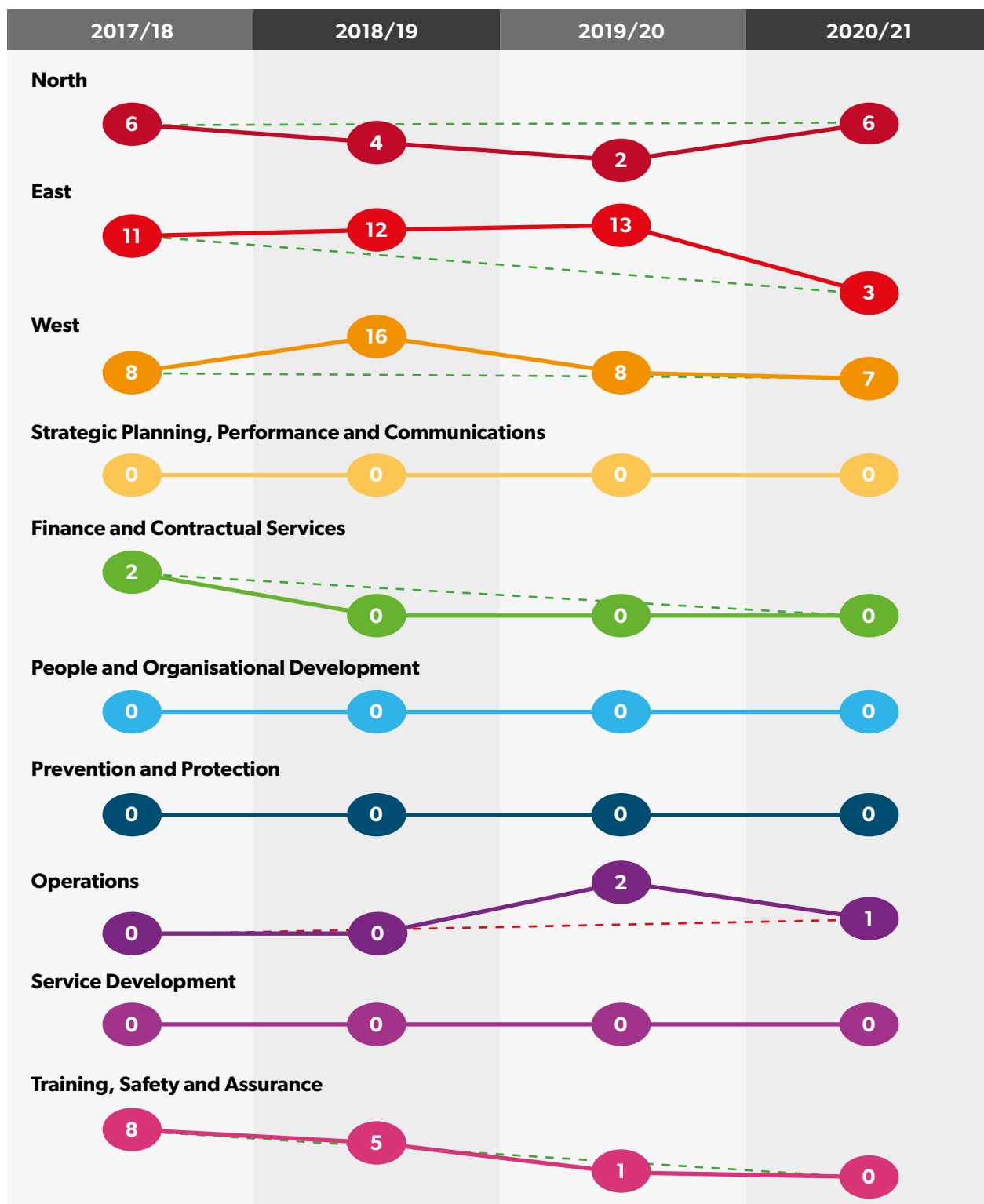


Figure 5: Total RIDDOR Reportable Accidents/Injuries 2017/18 to 2020/21

All SDA and Directorates show an improving trend over the 4-year period, with the most notable improvement recorded within the ESDA. TSA has shown a year on year improvement.



RIDDOR ANALYSIS 2020/21

There were no specified injuries during this reporting year compared to 3 the previous reporting year.

All RIDDORs (17) were over 7-day Accidents/Injuries events representing a 12% increase in this category when comparing to the previous reporting year, however, numerically a decrease of 6 is noted.

29% (5 of 17) of over 7-day Accidents/Injuries reported to the HSE were associated with Slips, Trips and Falls (STF) representing a 6% increase in this category when comparing to the previous reporting year. 60% (3 of 5) of these events occurred during non-operational activities and related to slipping on ice within SFRS car parks. It should be noted however, that numerically there was 1 less STF Accident/Injury reported to the HSE (6 to 5) compared to the previous reporting year.

24% (4 of 17) related to the Stonehaven train derailment operational incident which involved SFRS staff being hit by a third-party runaway vehicle. There is no comparative data of this type from the previous reporting year to compare.

18% (3 of 17) of over 7-day Accidents/Injuries reported to the HSE were as a result of manual handling and/or body movement representing a 13% decrease in this category when comparing to the previous reporting year, and numerically a decrease of 5.

The remaining 29% (5 of 17) events have no identifiable associated trend.

71% (12 of 17) of over 7-day Accidents/Injuries occurred at operational incidents, representing an 21% increase in this category when comparing to the previous reporting year, however it should be noted that numerically there was 1 less operational RIDDOR Reportable Accident/Injury reported to the HSE. 92% (11 of 12) of the operational Accidents/Injuries reported to the HSE occurred during the developing stage of the incident representing a 38% increase when comparing to the previous reporting year, numerically an increase of 4.

Finally, 12% (2 of 17) of Accidents/Injuries reported to the HSE were attributed to training activities, representing a 23% decrease in this category when comparing to the previous reporting year. Both events were SDA led training and occurred during swift water rescue refresher training and ladder drills.

We will:

- Seek continuous improvement by participating in and supporting the work of SAIG;
- Where necessary, develop/review Risk Assessments, Manual Handling Assessments and SSoW;
- Continue to support the SFRS MSK Injury Reduction Group and Business Partners to reduce MSK injuries; and
- Continue to promote the gritting regimes detailed in individual Premises Traffic Management Plans during inclement weather.



RIDDOR COVID-19

On the 23rd of March 2020, the UK went into lockdown because of the Coronavirus COVID-19 pandemic. Throughout the pandemic SFRS maintained its front line and essential services whilst developing and introducing a variety of workplace COVID-19 controls.

SDA/Directorate	2020/21
North	3
East	9
West	40
Strategic Planning, Performance and Communications	0
Finance and Contractual Services	0
People and Organisational Development	0
Prevention and Protection	0
Operations	0
Service Development	0
Training, Safety and Assurance	2
Total	54

Table 6: RIDDOR COVID-19 2020/21

RIDDOR COVID-19

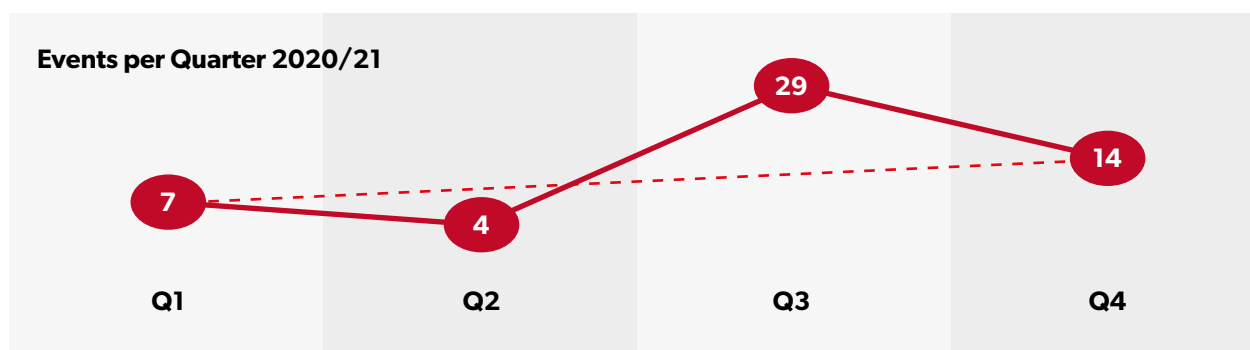


Figure 6: Total RIDDOR COVID-19 per Quarter 2020/21

During the reporting year SFRS staff reported 352 confirmed cases of COVID-19, of these 15% (54 of 352) were deemed as having reasonable evidence to be determined as a workplace transmission and subsequently reported to the HSE under RIDDOR.

Of the 54 workplace transmissions, 74% (40 of 54) occurred in the WSDA, 17% (9 of 54) in the ESDA, 6% (3 of 54) in the NSDA, and 4% (2 of 54) during training activities delivered by TSA.

54% (29 of 54) RIDDOR Reportable workplace transmissions occurred during Quarter 3 at the height of the second wave of the pandemic, of these 45% (13 of 29) occurred during outbreak clusters within two stations in the WSDA.

We will:

- Continue to monitor the guidance provided by the UK and Scottish Governments;
- Continue to support all Business Partners to maintain front line and essential services;
- Develop and update all SFRS COVID-19 controls as appropriate; and
- Continue to carry out support visits and desk top reviews where required.



OPERATIONAL Accidents/Injuries

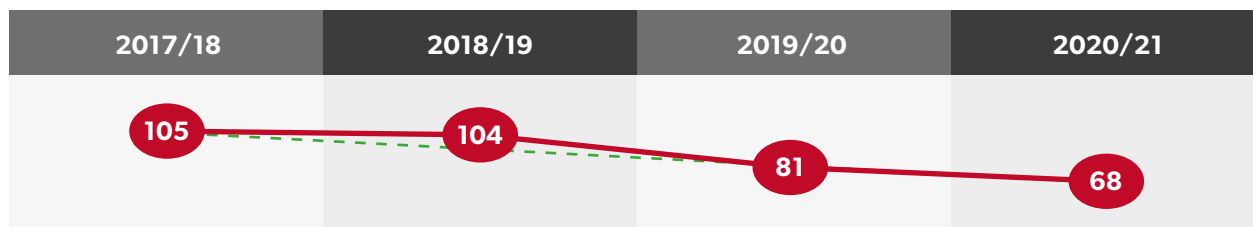


Figure 7: Operational Accidents/Injuries 2017/18 to 2020/21

There is a notable improvement in the trend for operational Accidents/Injuries over the four-year period. However, a 16% decrease is noted this year when comparing to the previous reporting year.

It is further noted that there is also a 7% decrease in the trend for operational incidents attended over the four-year period. The figures are: 2017/18 – 91901, 2018/19 – 92748, 2019/20 – 92070 and 2020/21 85581.

When considering the data in the context of operational incidents attended, a Firefighter was injured every 1,258 operational incidents attended during 2020/21 compared to every 1,130 in 2019/20, 885 in 2018/19 and every 857 in 2017/18, representing a year on year improvement.

40% (27 of 68) operational related Accidents/Injuries reported during 2020/21 occurred at Special Services representing an increase of 18% in this category when comparing to the previous reporting year. Numerically this equates to 9 additional Accidents/Injuries at Special Services. This increase is attributed to water rescue related incidents (2 to 8) and one event resulting in 4 injuries at the same operational incidents due to a third-party runaway vehicle.

A further 35% (24 of 68) of operational related Accidents/Injuries reported occurred whilst attending primary fires representing a decrease of 14% in this category when comparing to the previous reporting year, numerically this equates to 16 less Accidents/Injuries. 16% (11 of 68) occurred at secondary fires, representing a 2% increase in this category when comparing to the previous reporting year, however numerically the number remains the same. Finally, 9% (6 of 68) occurred at false alarm type incidents, representing a 5% decrease in this category when comparing to the previous reporting year, numerically this equates to 5 less Accidents/Injuries.

Operational Accidents/Injuries by Phase of the Incident

SDA	Mobilising	Initial	Developing	Closing	Returning	Total
North	4	3	11	3	0	21
East	3	5	12	3	0	23
West	4	5	11	4	0	24
Total	11	13	34	10	0	68

Table 7: 2020/21 Totals by Phase of Operational Incident

When we consider operational Accidents/Injuries by the stage of the incident, the data shows that 50%, (34 of 68) occurred during the developing stage of the incident, representing a 6% increase in this category, however numerically a decrease of 10 when comparing to the previous reporting year. These events are attributed to slips and trips on uneven/wet ground, being struck by objects, and manual handling/body movement injuries.

A further 19% (13 of 68) occurred during the initial stage of the incident, representing a decrease of 6% in this category and numerically a decrease of 7 when comparing to the previous reporting year. These are attributed to slipping on uneven ground, forcing entry, falling objects, and burns.

16% (11 of 68) occurred during mobilisation, representing an 8% increase in this category and numerically an increase of 3 when comparing to the previous reporting year. These events are attributed to lack of situational awareness e.g. slipping on uneven ground.

Finally, the remaining 15% (10 of 68) occurred during the closing stage of the incident, representing a 5% decrease in this category, numerically a decrease of 5 when comparing to the previous reporting year. These events are attributed to slipping on uneven ground, falling objects, animals, and manual handling/body movement injuries.

We will:

- Promote awareness of slips and trips on the incident ground through engagement with Service Delivery SAIG;
- Engage with Business Partners to identify behavioural issues and where existing control measures and/or SSoW are not being implemented; and
- Review water rescue arrangements and identify any areas of improvement.

Non-Operational Accidents/Injuries

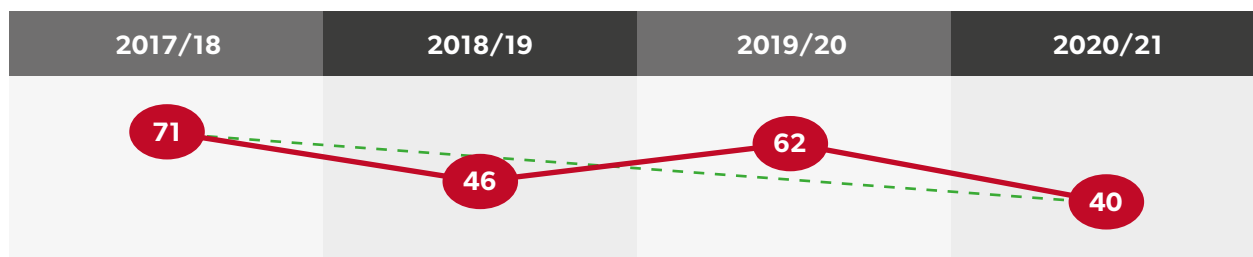


Figure 8: Non-Operational Accidents/Injuries 2017/18 to 2020/21

The four-year trend shows a continuing improvement in relation to non-operational Accidents/Injuries.

83% (33 of 40) of all non-operational Accidents/Injuries occurred within station premises, of which 28% (11 of 40) involved slipping on ice within SFRS car parks. A further 55% (22 of 40) occurred whilst carrying out cleaning duties, kitchen duties, routine checks, dismantling appliance, taking part in physical exercise and exiting car in car park. All can be attributed to lack of situational awareness.

We will:

- Continue to promote the gritting regimes detailed in individual Premises Traffic Management Plans during inclement weather;
- Develop a suite of GRA and SSoW for activities undertaken within the station environment; and
- Re-emphasise the need to comply with existing control measures e.g. the procedure for mounting and dismantling appliances/vehicles.

Training Accidents/Injuries

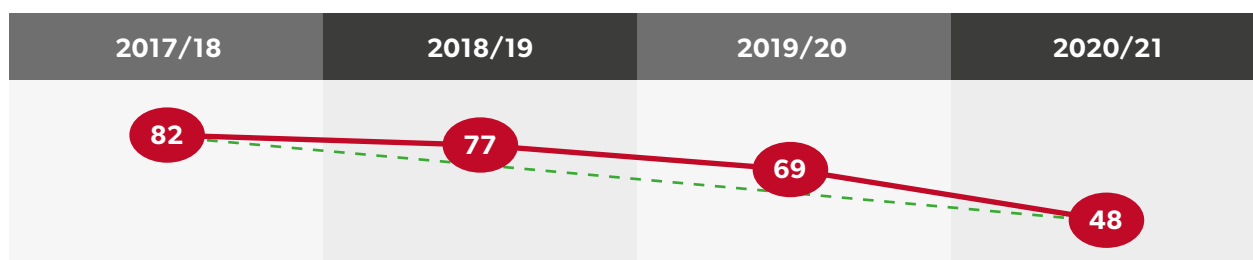


Figure 9: Training Accidents/Injuries 2017/18 to 2020/21

There is a year on year improvement noted in the four-year trend for training related Accidents/Injuries with a 42% improvement recorded when comparing 2017/18 with 2020/21. However, a 30% decrease is noted this year when comparing to the previous reporting year.

Whilst any improvement is welcomed the data must be considered in the context of reduced training activity in 2020/21 due to COVID-19.

31% (48 of 156) of all Accidents/Injuries reported during 2020/21 occurred during training related activities representing a 2% decrease in this category when comparing to the previous reporting year and a numerical decrease of 21.

73% (35 of 48) of all training related Accidents/Injuries occurred during SDA led training activities representing a 19% increase in this category, however numerically a decrease of 2 is noted when comparing to the previous reporting year. A further 27% (13 of 48) occurred during National Training activities representing a 19% decrease in this category and a numerical decrease of 19 when comparing to previous reporting year.

The majority, 73% (35 of 48), of all training related Accidents/Injuries reported occurred during refresher training, representing a 6% increase in this category and a numerical decrease of 11. Further analysis shows 37% (13 of 35) occurred during Core Skills training such as ladder drills and pump drills representing a 13% increase in this category and a numerical increase of 2. A further 23% (8 of 35) occurred during Breathing Apparatus (BA) training, representing an 14% decrease in this category and a numerical decrease of 9. Finally, 17% (6 of 35) occurred during swift water rescue training representing a 2% increase when comparing to the previous reporting year and a numerical decrease of 1.

During this reporting year 46 students and 2 instructors incurred Accidents/Injuries. There is no comparative data for previous reporting years.

We will:

- Undertake a review of training standards made available for the undertaking of SDA led training;
- Undertake a review of HS arrangements in place for core skills and swift water rescue training activities; and
- Identify and implement any additional control measures which may be required.

All Accidents/Injuries (including RIDDOR) to Uniformed Staff

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	50	41	38	36		-5%
East	89	66	53	47		-11%
West	47	67	67	52		-22%
Strategic Planning, Performance and Communications	0	0	0	0		0%
Finance and Contractual Services	0	0	0	1		-
People and Organisational Development	1	1	0	0		0%
Prevention and Protection	1	1	1	0		-100%
Operations	5	2	4	1		-75%
Service Development	0	0	0	0		0%
Training, Safety and Assurance	42	33	32	14		-56%
Total	235	211	195	151		-23%

Table 8: Accidents/Injuries (including RIDDOR) to Uniformed Staff Annual Totals

It is noted that 45% (68 of 151) of all Accidents/Injuries to uniformed staff occurred whilst attending operational incidents representing an 3% increase in this category and numerically a decrease of 13 when comparing to the previous reporting year. A further 30% (45 of 151) occurred during training, representing a 5% decrease in this category and a numerical decrease of 24 when comparing to the previous reporting year.

When considering the type of incident being attended data shows 38% (26 of 68) of uniformed staff Accidents/Injuries occurred at Special Services representing a 16% increase in this category, numerically this is an increase of 8 when comparing to the previous reporting year. 31% (8 of 26) related to operational water rescue incidents a 6% increase in this category and a numerical increase of 3. A further 37% (25 of 68) occurred whilst attending primary fires representing a 12% decrease in this category and numerically 15 less Accidents/Injuries when comparing to the previous reporting year. 16% (11 of 68) occurred at secondary fires an increase of 2% in this category, although numerically the number of events reported remains the same when comparing to the previous reporting year. Finally, 9% (6 of 68) of the injuries occurred as a result of attending False Alarm incidents representing a 5% decrease and numerically 5 fewer Accidents/Injuries when comparing to the previous reporting year.

50% (34 of 68) of the total operational related Accidents/Injuries occurred during the developing stage of the operational incident, representing a 6% increase in this category, however, numerically a decrease of 2 is noted when comparing to the previous reporting year. A further 19% (13 of 68) occurred during the initial stage of the operational incident, representing a 6% decrease and numerically a decrease of 7 from the previous reporting year.

31% (47 of 151) of all Accidents/Injuries to uniformed staff occurred during training, representing a decrease of 4% in this category and a numerical decrease of 22 when comparing to the previous reporting year. Further analysis shows 28% (13 of 47) were attributed to Core Skill training representing a 11% increase in this category however numerically the number of events reported remains the same when comparing to the previous reporting year. A further 26% (12 of 47) related to BA training Search and Rescue and Carbonaceous training representing a 9% decrease in this category and a numerical decrease of 12 when comparing to the previous reporting year. Finally, 13% (6 of 47) were attributed to Swift Water Rescue training, this figure is comparable to 2019/20 however a numerical decrease of 3 event is noted. The majority, 72% (34 of 47), of training related uniformed staff Accidents/Injuries occurred during SDA led training representing a 18% increase in this category, however numerically a decrease of 3 is noted when comparing to the previous reporting year.

24% (36 of 151) occurring during non-operational activities representing a 1% increase in this category and a numerical decrease of 9 when comparing to the previous reporting year. 92% (33 of 36) of those reported were attributed to a lack of situational awareness with no identifiable trend e.g. slipping on ice, working in kitchens, dismounting appliance, open gates, equipment poorly stowed, and walking into objects.

We will:

- Continue to work with and support our Business Partners via SAIG to identify root causes and implement appropriate control measures; and
- We will work with SDA to update/create a suite of risk assessments and SSoW for non-operational activities.

All Accidents/Injuries (including RIDDOR) to Non-Uniformed Staff

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	3	1	3	0		-100%
East	3	2	1	1		0%
West	2	2	1	1		0%
Strategic Planning, Performance and Communications	3	0	0	0		-
Finance and Contractual Services	10	9	6	2		-67%
People and Organisational Development	0	1	2	0		-100%
Prevention and Protection	0	0	0	0		-
Operations	0	1	2	0		-100%
Training, Safety and Assurance	2	0	2	1		-50%
Total	23	16	17	5		-71%

Table 9: Accidents/Injuries (including RIDDOR) to non-uniformed staff Annual Totals

Of the total non-uniformed Accidents/Injuries reported, 80% (4 of 5) were attributed to a lack of situational awareness e.g. moving tools, siting of equipment, and walking into signs, representing a 2% decrease and a numerical decrease of 10 when comparing to the previous reporting year.

40% (2 of 5) of all Accidents/Injuries to non-uniformed staff occurred within Fleet Workshops, representing a 16% increase in this category, however numerically a decrease of 2 is noted when comparing to the previous reporting year.

We will:

- Undertake a review of workplace inspections carried out within ARCs; and
- We will look at initiatives to promote/increase situational awareness.

Working Days Lost Due to Accidents/Injuries

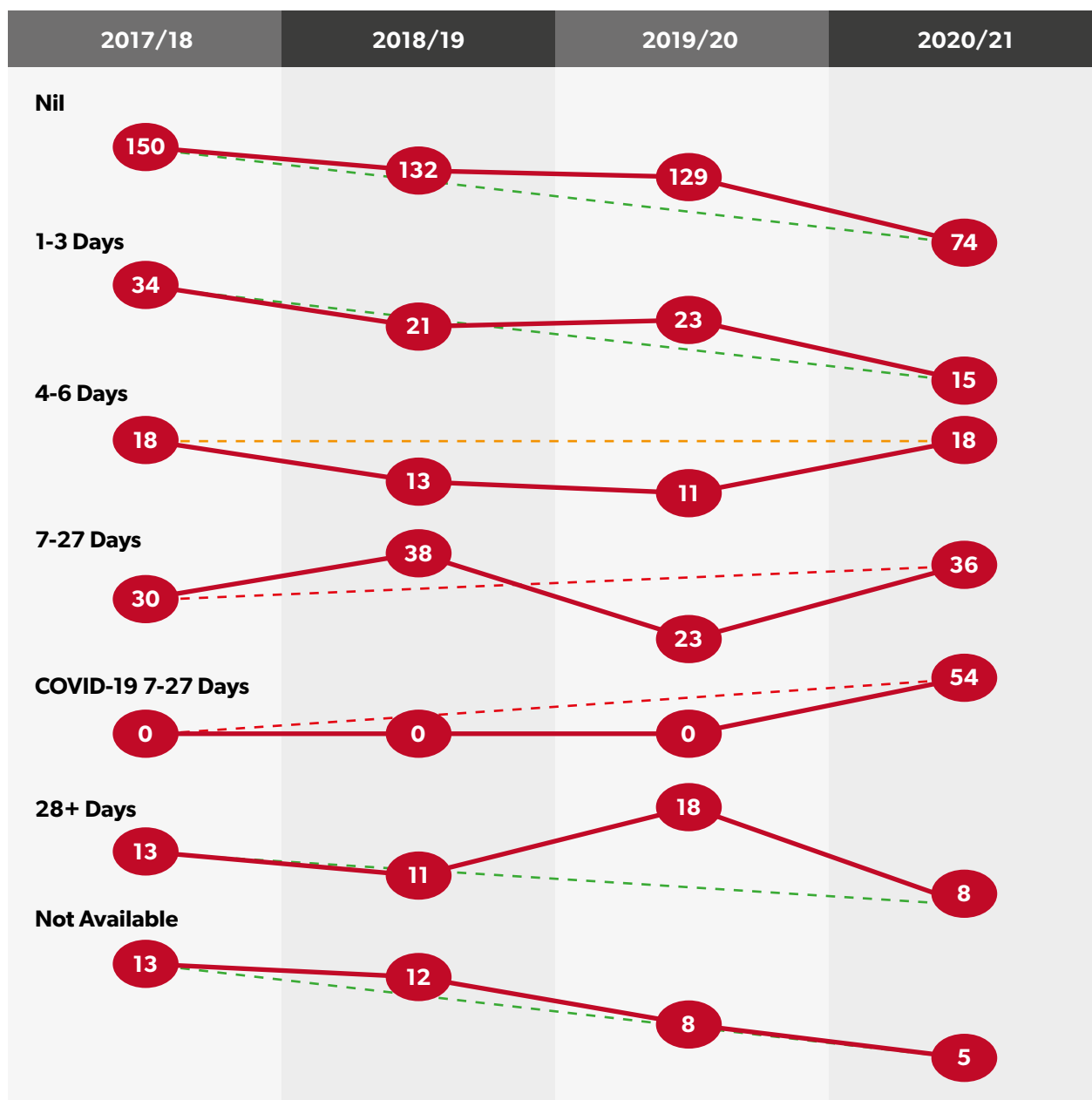


Figure 10: Working Day Lost Due to Accidents/Injuries 2017/18 to 2020/21

With the exception of the 7–27 days category and the newly added COVID–19 category all categories are showing a positive trend. Significant improvements have been made in gathering information resulting in a year on year improvement in the “not available” category.

We will:

- Continue to work with our colleagues in POD to review information in relation to absence and determine any necessary actions that may reduce absence;
- Continue to ensure that complete and accurate information relating to lost working time is being recorded; and
- Undertake support reviews to assist with compliance with COVID-19 workplace arrangements and task cards.

Three Most Common Accidents/Injuries by Causation

2017/18		2018/19		2019/20		2020/21	
Manual Handling/ Body Movement	55	Manual Handling/ Body Movement	81	Manual Handling/ Body Movement	77	Manual Handling / Body Movement	49
Slips, Trips & Falls	57	Slips, Trips & Falls	36	Slips, Trips & Falls	24	Slips, Trips & Falls	34
Hot / Cold	29	Hot / Cold	20	Hot / Cold	24	Impact (moving object)	19

Table 10: Three Most Common Accidents/Injuries by Causation

The most common cause of Accidents/Injuries across the SFRS remains manual handling/body movements accounting for 31% (49 of 156) of the total reported, although there has been a welcomed decrease of 5% in this category and a numerical decrease of 28 when comparing to the previous reporting year.

Further analysis shows 57% (28 of 49) occurring whilst undertaking training representing an increase of 19% in this category, however a numerical decrease of 1 is noted when comparing to the previous reporting year. A further 27% (13 of 49) occurred during operational incidents representing a decrease of 12% in this category and a numerical decrease of 17 when comparing to the previous reporting year. Finally, 16% (8 of 49) occurred whilst undertaking non-operational duties, representing a decrease of 8% in this category and a numerical decrease of 10 when comparing to the previous reporting year.

20% (10 of 49) of all manual handling/body movement injuries occurred whilst using ladders, with 60% (6 of 10) happening whilst undertaking training. A further 18% (9 of 49) occurred whilst using hose and 10% (5 of 49) whilst using BA sets.

Significant improvements are noted in operational related manual handling/body movement Accidents/Injuries with 1 Accident/Injury sustained every 6,583 operational incidents attended compared with 1 every 3,054 in the previous reporting year.

STF are the second most common cause of Accidents/Injuries within SFRS accounting for 22% (34 of 156) of the total Accidents/Injuries reported during 2020/21.

This represents an increase of 11% in this category and a numerical increase of 10 when comparing to the previous reporting year.

41% (14 of 34) of the total STF reported occurred at operational incidents representing a 1% decrease, however a numerical increase of 4 is noted when comparing to the previous reporting year. A further 35% (12 of 34) occurred whilst undertaking non-operational duties representing an increase of 2% and a numerical increase of 4 when comparing to the previous reporting year. 83% (10 of 12) of non-operational STF occurred within SFRS car parks or appliance bays, representing an 8% increase in this category and a numerical increase of 4 when comparing to the previous reporting year. 70% (7 of 10) of STF which occurred in SFRS car parks reported occurred due to slipping on ice.

Finally, 24% of STF (8 of 34) occurred whilst undertaking training, representing a decrease of 1% and a numerical increase of 2 when comparing to the previous reporting year. 63% (5 of 8) occurred during SDA led training, all occurred during refresher training representing a 4% decrease in this category and a numerical increase of 1 when comparing to the previous reporting year.

In an operational context a slip, trip and fall Accident/Injury occurred every 6,113 operational incidents attended compared with 1 in every 9,161 in the previous reporting year.

The third most common cause of Accidents/Injuries reported during 2020/21 is impact (moving object) accounting for 12% (19 of 156) of all Accidents/Injuries reported, representing a 2% increase in this category

and a numerical decrease of 1 when comparing to the previous reporting year. 42% (8 of 19) of the total reported occurred at operational incidents representing an increase of 4%, however numerically the number of events reported remains the same when comparing to the previous reporting year. A further 32% (6 of 19) of Accidents/Injuries involving impact (moving object) occurred whilst undertaking training, representing an increase of 13% and a numerical increase of 2 when comparing to the previous reporting year. 83% (5 of 6) occurred during SDA led training.

Finally, 26% (5 of 19) occurred whilst undertaking non-operational duties within SFRS premises, representing a 16% decrease in this category and a numerical decrease of 4 when comparing to the previous reporting year.

An Accident/Injury involving impact with a moving object occurred every 10,697 operational incidents attended compared with 1 in every 11,508 in the previous reporting year.

We will:

- Continue to support the work of SAIG;
- Ensure that the causes of all Accidents/Injuries sustained as a result of STF are fully scrutinised so

that preventative measures can be identified and implemented;

- Liaise with SDA via SAIG to ensure:
 - All equipment is stored securely in appliance lockers;
 - The correct PPE is worn at all stages on an incident; and
 - So far as is reasonably practicable, a visual inspection of structures used to pitch ladders.
- Ensure that training standards are reviewed to ensure sufficient information on manual handling and body movement is included;
- Continue to support the SFRS MSK Injury Reduction Group and Business Partners to reduce MSK injuries;
- Support the MSK Injury Reduction Group in undertaking a review of manual handling training provision and warm up methods;
- Continue to promote the gritting regimes detailed in individual Premises Traffic Management Plans during inclement weather; and
- Ensure that existing procedures for reporting property defects are being adhered to.



NEAR MISSES

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	62	48	32	36	Green	13%
East	51	74	76	49	Red	-36%
West	33	51	59	48	Red	-19%
Strategic Planning, Performance and Communications	0	0	0	0	White	-
Finance and Contractual Services	2	7	8	1	Green	-88%
People and Organisational Development	0	2	0	0	White	-
Prevention and Protection	1	0	0	0	White	-
Operations	4	3	8	5	Red	-38%
Service Development	0	0	0	0	White	-
Training, Safety and Assurance	15	18	16	9	Green	-44%
Total	168	203	199	148	Green	-26%

Table 11: NM Annual Totals

When considering the number of NM in relation to the number of RIDDOR Reportable events (excluding COVID-19) we see a ratio of 9:1 which is an improvement on the 8:1 ratio recorded for previous reporting year.

Operational NM accounted for 47% (70 of 148) of the total reported, representing an 11% increase in this category and a numerical increase of 1 when comparing to the previous reporting year. Given the corresponding reduction, 9% in operational related Accidents/Injuries and RIDDOR, this increase is considered a positive trend.

29% (43 of 148) of NM events occurred during non-operational activities, representing a 1% decrease in this category and a numerical reduction of 16 from the previous reporting year. 44% (19 of 43) related to property issues e.g. appliance bay doors, station locker doors, electrical faults and water related issues, representing a 30% increase in this type of NM and a numerical increase of 11 when comparing to the previous reporting year.

There were no other notable trends.

24% (35 of 148) of all NM reported were associated with training activities, representing a 9% decrease in this category and a numerical decrease of 34 when comparing to the previous reporting year. 74% (26 of 35) of all training related NM occurred during SDA led training representing a decrease of 7% in this category and a numerical decrease of 30 on the previous reporting year. All training related NM occurred during refresher training, an increase of 12% in this category, however a numerical decrease of 23 is noted when comparing to the previous reporting year.

The most common type of training being undertaken when a NM event occurred was during BA related training accounting for 37% (13 of 35) of the total training NM reported. The most common causes involved free flow incidents which account for 31% (3 of 13), 15% (2 of 13) involved BA Cylinders, 15% (2 of 13) involved Emergency Air Supply Equipment (EASE) kits and 15% (2 of 13) involved extension cables.

Near Misses

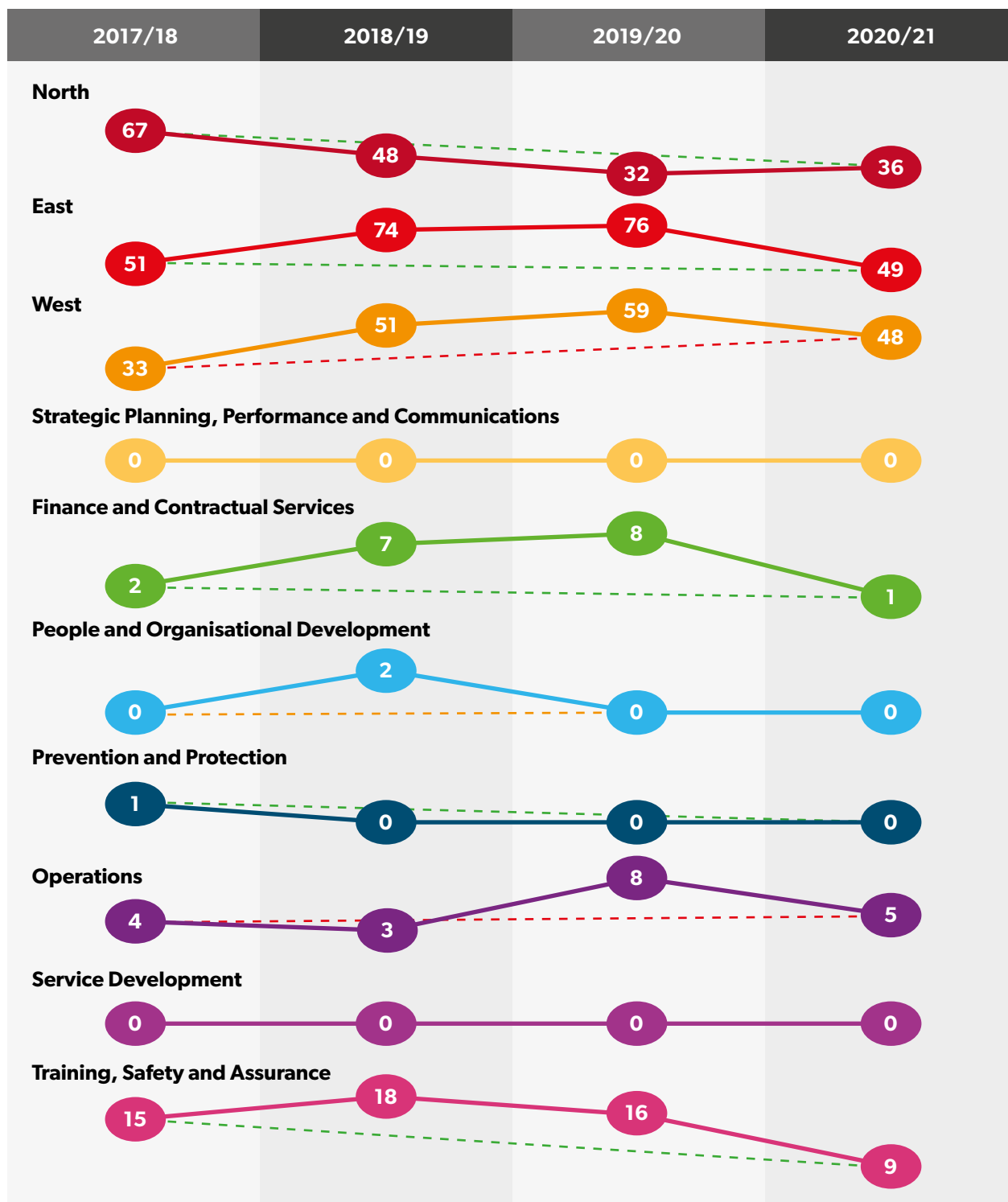


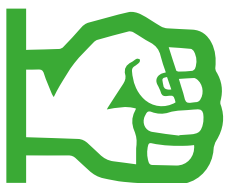
Figure 11: NM 2017/18 to 2020/21

To accurately interpret the NM reporting trend, data must be considered alongside Accidents/Injuries including RIDDOR Reportable event. By doing this, the preventative value and contribution to improving safety can be determined. When considering the number of NM in relation to the number of Accidents/Injuries (excluding COVID-19), we see a ratio of 1:1 in the NSDA, an improvement in frequency compared to 1:0.7 when compared to the previous reporting year. The ESDA shows a ratio of 1:0.9 a decrease in frequency compared to 1:1.4 when compared to the previous reporting year. The WSDA shows a ratio of 1: 0.9 a decrease in frequency compared to 1:0.8 when compared to the previous reporting year. TSA shows a ratio of 1:0.6 an

improvement in frequency compared to 1: 0.4 when compared to the previous reporting year.

We will:

- Utilise the SAIG to continue to promote the need and the benefits of reporting NM;
- Support the Training Function in identifying the causes of NM during carbonaceous fire behaviour Training Courses and implementing suitable control measures; and
- Consult with Property Services to review inspection regimes to ensure that they are still fit for purpose and where appropriate update regimes as required.



ACTS OF VIOLENCE

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	6	10	9	8		-11%
East	15	26	15	23		53%
West	40	47	31	37		19%
Strategic Planning, Performance and Communications	0	0	0	0		-
Finance and Contractual Services	0	0	0	0		-
People and Organisational Development	0	0	0	0		-
Prevention and Protection	0	0	0	0		-
Operations	0	0	1	1		0%
Service Development	0	0	0	0		-
Training, Safety and Assurance	0	0	0	0		-
Total	61	83	56	69		23%

Table 12: AoV Annual Totals

The total number AoV reported this year shows an increase of 23% (56 to 69) when comparing to the previous reporting year. This increase is attributed to a 53% (15 to 23) increase within the ESDA and 19% increase (31 to 37) in the WSDA.

With consideration to the number of incidents attended, a Firefighter was subjected to an AoV every 1,358 operational incidents attended, compared with 1 every 1,636 in 2019/20, 1 every 1,117 in 2018/19, and 1 every 1,698 in 2017/18.

91% (63 of 69) of AoV reported occurred at operational incidents, representing an 4% decrease in this category, however, a numerical increase of 10 is noted when comparing to the previous reporting year. Of the AoV which occurred at operational incidents 68% (43 of 63)

occurred at secondary fires, representing an increase of 2% and a numerical increase of 9 when comparing to the previous reporting year. 14% (9 of 63) occurred when responding to primary fires, representing a 1% decrease, and a numerical increase of 1 is noted when comparing to the previous reporting year.

51% (35 of 69) of the total AoV reported involved missiles or thrown objects, representing a 10% decrease in this category, however, numerically an increase of 1 is noted when comparing to the previous reporting year. 28% (19 of 69) involved bricks/bottles being thrown and 16% (11 of 69) involved fireworks being thrown.

43% (30 of 69) were attributed to verbal abuse to crews, representing a 25% increase in this category and a numerical decrease of 20 when comparing to

the previous reporting year. 6% (4 of 69) were physical assault by a person, representing a 12% decrease in this category and a numerical decrease of 6 when comparing to the previous reporting year. Of the physical AoV reported, 1 resulted in a Firefighter sustaining a leg injury after being struck by a member of the public.

Police assistance was requested in 81% (56 of 69) of AoV with 20% (11 of 56) considered as reportable under the Emergency Workers (Scotland) Act 2005. However, there have been no associated prosecutions.

Acts of Violence

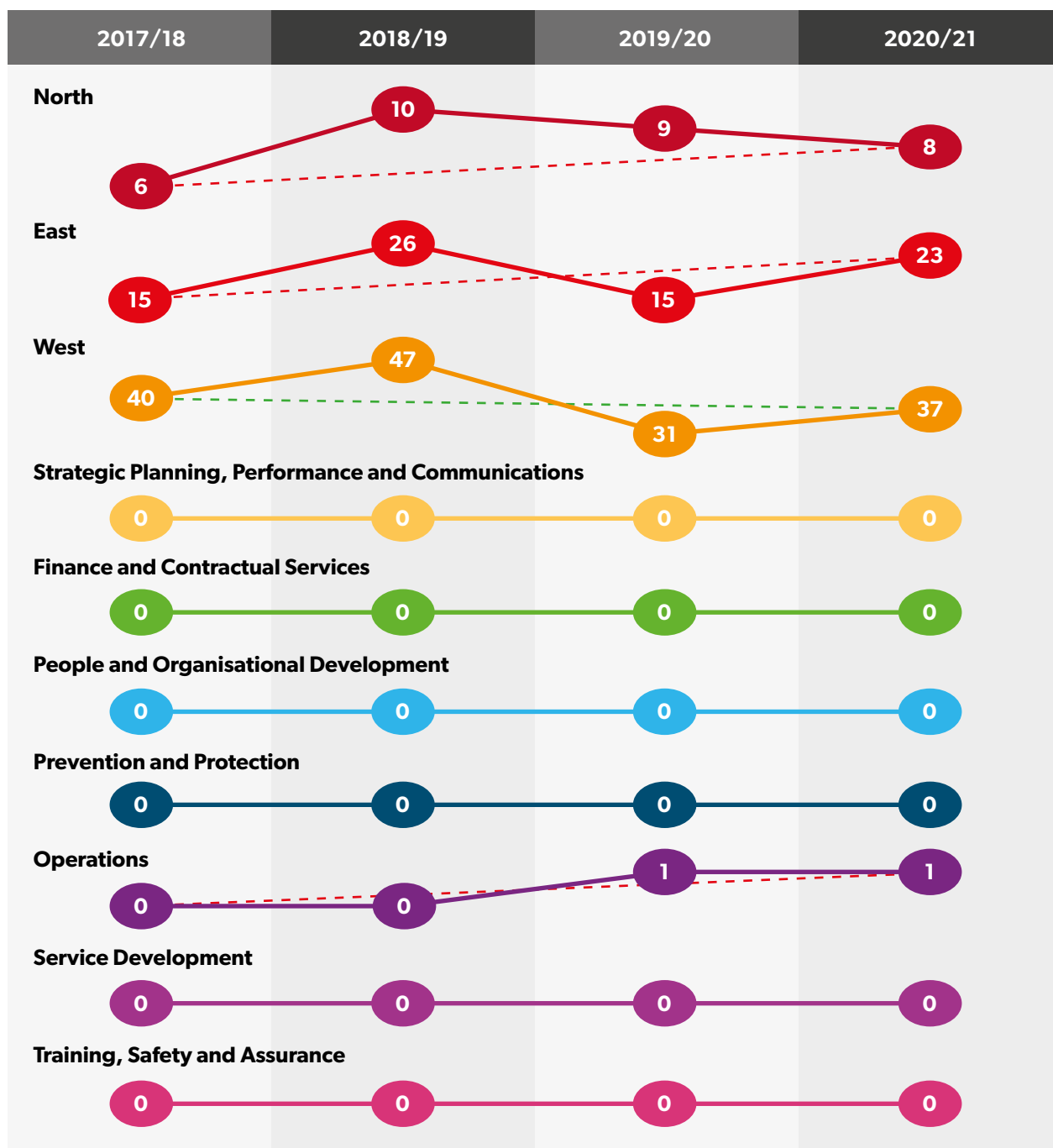


Figure 12: Annual Totals for AoV 2017/18 to 2020/21

There has been a steady underlying increasing trend of AoV reported over the four-year period, except for the WSDA.

When analysing AoV by season we see 17% (12) occurring during spring, 26% (18) during summer, 31% (22) during Autumn, and 25% (17) during winter. The period surrounding Bonfire night (01/11 – 09/11) accounted for 20% (14 of 69) of AoV, this shows an increase of 2 % and a numerical increase of 4 when comparing to the previous reporting year.

We will:

- Support SDA in engaging with partner agencies to further develop and enhance current arrangements to support the reduction of AoV, particularly at peak times e.g. bonfire night;
- Support the ESDA and WSDA in identifying geographical hotspots where AoV have taken place so that community engagement activities can be tailored and targeted;
- Ensure that crews are reminded of the need to use the following messages when under attack or under the threat of attack:
 - 'Immediate Police assistance required, crews under attack' or 'Police assistance required, crews under threat of attack'. This is outlined within SFRS SOP and SFRS Awareness Briefing – Request for Police Scotland Assistance at Operational Incidents' (6/12/2016); and
- Ensure that staff are made aware of the importance and benefits of reporting relevant incidents under the Emergency Workers (Scotland) Act 2005.



VEHICLE ACCIDENTS

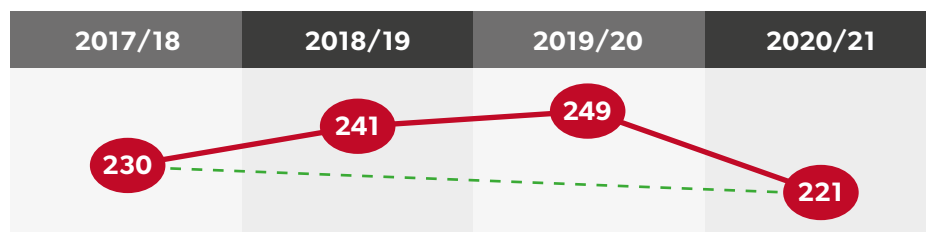


Figure 13: Vehicle Accidents 2017-18 to 2020-21

Over the four-year period, the overall number of VA are showing a downward trend. Across SFRS there were 221 VA, a 11% (249 to 221) decrease when comparing to the previous reporting year.

Analysis shows operational related VA accounted for 66% (145 of 221) of the total, a 10% increase

and a numerical increase of 5 when comparing to the previous reporting year. 32% (70 of 221) were attributed to non-operational activities, a 1% decrease and a numerical decrease of 13 when comparing to the previous reporting year. Finally, 3% (6 of 221) were attributed to training, representing an 8% decrease in this category and a numerical decrease of 20.

Vehicle Accidents

SDA/Directorate	2017/18	2018/19	2019/20	2020/21	RAG	% Change from Previous Reporting Year
North	59	52	42	43		2%
East	58	74	72	64		-11%
West	99	94	116	96		-17%
Strategic Planning, Performance and Communications	0	0	1	0		-100%
Finance and Contractual Services	5	6	8	11		38%
People and Organisational Development	0	1	0	0		-
Prevention and Protection	2	1	1	0		-100%
Operations	1	2	3	3		0%
Service Development	0	0	0	0		-
Training, Safety and Assurance	6	11	6	4		-33%
Total	230	241	249	221		-11%

Table 13: Vehicle Accidents Annual Totals

Vehicle Accidents by Activity

SDA/Directorate	Operational	Non-Operational	Training	Total
North	31	12	0	43
East	46	15	3	64
West	67	28	1	96
Strategic Planning, Performance and Communications	0	0	0	0
Finance and Contractual Services	0	11	0	11
People and Organisational Development	0	0	0	0
Prevention and Protection	0	0	0	0
Operations	1	2	0	3
Service Development	0	0	0	0
Training, Safety and Assurance	0	2	2	4
Total	145	70	6	221

Table 14: Activity Undertaken Annual Totals

Operational related VA remain the most common VA with a VA reported every 590 operational incidents attended, compared to 1 in every 654 the previous reporting year indicating a negative trend in this category.

Further analysis shows a VA occurred every 604 operational incidents attended in the NSDA, compared to 1 in every 677 in the previous reporting year. In the ESDA a VA occurred every 614 operational incidents, compared to 1 in every 673 in the previous reporting year. Finally, in the WSDA a VA occurred every 663 operational incidents attended, compared with 1 in every 639 the previous reporting year.



Figure 14: Phases of Operational Incidents Annual Totals

46% (67 of 145) of operational related VA were attributed to mobilising representing a 2% increase in this category, although numerically the number of VA reported remains the same when comparing to the previous reporting year. The initial phase decreased by 2%, whilst during the developing phase VA increased by 4%. The closing and returning phases remained the same when compared to the previous reporting year.

Of the VA attributed to operational incidents, 58% (84 of 145) occurred at low speed, representing an increase in this category and numerical increase of 10 when comparing to the previous reporting year. 69% (58 of 84) of low speed VA occurred whilst moving forward, a decrease of 8% in this category, however numerically an increase of 1 is noted when comparing to the previous reporting year. 43% (36 of 84) of low speed manoeuvres occurred during the returning phase of the incident with 81% (29 of 36) of these as a result of hitting something fixed or stationary e.g. parked cars and street furniture.

A further 26% (37 of 145) of operational related VA occurred whilst driving under blue light conditions, representing a decrease of 8% in this category and a numerical decrease of 10 when comparing to the previous reporting year.

34% (50 of 145) of the operation VA occurred on urban roads, representing a 9% increase in this category and a numerical increase of 15 when comparing to the previous reporting year. 19% (28 of 145) occurred on A Class roads, representing a decrease of 7% in this category and a numerical decrease of 8 when comparing to the previous reporting year. 19% (28 of 145) occurred on B Class roads, representing a 4% increase in this category and a numerical increase of 7 when comparing to the previous reporting year. A further 8% (12 of 145) occurred off road, representing a decrease of 5% and a numerical decrease of 5.

12% (17 of 145) occurred in appliance bays, representing an increase of 1% in this category and a numerical increase of 1.

Driver assistants were used in 28% (41 of 145) of the VA reported, representing an increase of 6% and a numerical increase of 10 when comparing to the previous reporting year.

32% (70 of 221) of VA reported were attributed to non-operational activities, representing a 1% decrease and a numerical decrease of 13 with the previous reporting year. 59% (41 of 70) of the non-operational VA involved the use of Fire Appliances, representing a decrease of 10% in this category and a numerical decrease of 16 when comparing to the previous reporting year.

36% (25 of 70) involved the use of SFRS White Fleet, representing an increase of 5% in this category and a numerical increase of 8 when comparing to the previous reporting year. 4% (3 of 70) involved private cars, representing a decrease of 5% in this category, however numerically remaining the same when comparing to the previous reporting year. The remaining 1% (1 of 70) involved a forklift.

There is no comparative data for the previous reporting year.

Finally, Training related VA accounted for 3% (6 of 221) of VA, representing a 7% decrease and a numerical decrease of 20 for the previous reporting year. 83% (5 of 6) were attributed to attending refresher training, representing an increase of 18% and a numerical decrease of 12 is noted in this category when comparing to the previous reporting year. 60% (3 of 5) occurred whilst attending Swift Water Rescue training, representing an increase of 19%, however, a numerical decrease of 4 is noted in this category when comparing to the previous reporting year.

Vehicle Accidents by Cause

SDA/Directorate	Hit Something Fixed or Stationery	Hit or Hit by a Moving Vehicle	Other	Total
North	35	2	6	43
East	51	4	9	64
West	80	6	10	96
Strategic Planning, Performance and Communications	0	0	0	0
Finance and Contractual Services	8	2	1	11
People and Organisational Development	0	0	0	0
Prevention and Protection	0	0	0	0
Operations	2	0	1	3
Service Development	0	0	0	0
Training, Safety and Assurance	4	0	0	4
Total	180	14	27	221

Table 15: Vehicle Accidents Cause Annual Totals

Examples of "Others" includes charging cable not being released and vehicle slides due to icy conditions.

The most common cause of VA across the SFRS continues to be 'hit something fixed or stationary, accounting for 81% (180 of 221) of the total reported, representing an increase of 20% and numerically an increase of 18 when compared to the previous reporting year.

44% (80 of 180) occurred in the WSDA, representing a decrease of 10% in this category and numerically a decrease of 6 when compared to the previous reporting year. 28% (51 of 180) occurred in the ESDA, a 4% increase in this category and numerically an increase of 14 when compared to the previous year. 19% (35 of 180) occurred in the NSDA, a 4% increase in this category and numerically an increase of 9 when compared to the previous year.

Vehicle Accidents by Speed Type

SDA/Directorate	Low Speed	ERD (Blue Light)	Normal Road Use	Water Related Events	Total
North	30	11	2	0	43
East	36	18	3	4	61
West	67	19	9	0	95
Strategic Planning, Performance and Communications	0	0	0	0	0
Finance and Contractual Services	7	0	4	0	11
People and Organisational Development	0	0	0	0	0
Prevention and Protection	0	0	0	0	0
Operations	1	0	1	0	2
Training, Safety and Assurance	3	1	0	0	4
Total	144	49	19	4	216

Table 16: Vehicle Accidents Speed Type Annual Totals

65% (144 of 221) of VA across the SFRS occurred at low speed, representing a 5% decrease and numerically decrease of 5 when compared to the previous reporting year.

The difference in overall totals (221 to 216) is due to Third Party at fault events.

Vehicle Accidents by Direction of Travel

SDA/Directorate	Forward	Reverse	Total
North	32	11	43
East	47	14	61
West	75	18	95
Strategic Planning, Performance and Communications	0	0	0
Finance and Contractual Services	5	6	11
People and Organisational Development	0	0	0
Prevention and Protection	0	0	0
Operations	1	1	2
Training, Safety and Assurance	3	1	4
Total	164	51	221

Table 17: Vehicle Accidents Speed Type Annual Totals

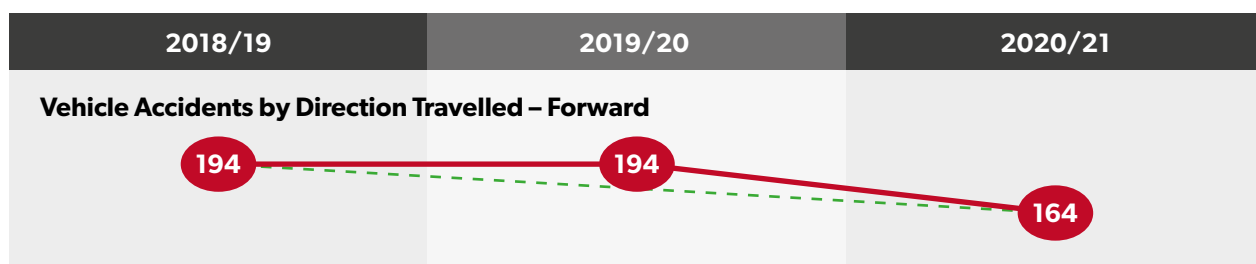


Figure 15: Vehicle Accidents by Travel – Forward Annual Totals

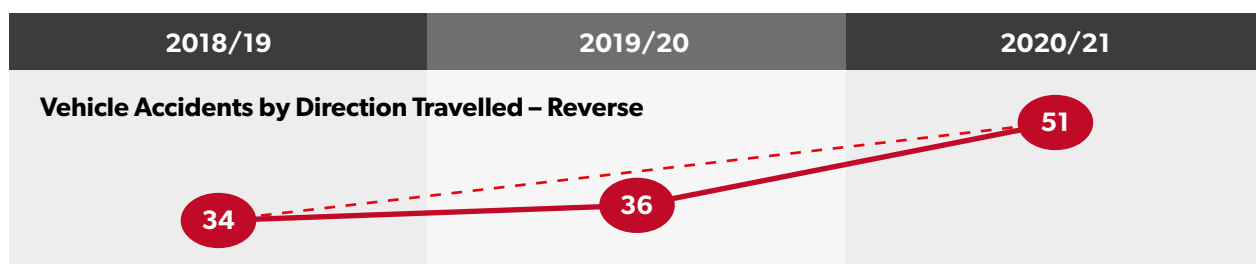


Figure 16: Vehicle Accidents by Travel – Reverse Annual Totals

There was no comparative data available in these categories of VA which occurred whilst the vehicle was moving forward for 2017/18.

74% (164 of 221) of VA across the SFRS occurred whilst the vehicle was moving forward representing, a 4% decrease and numerically decrease of 30 when compared to the previous reporting year. 23% (51 of 221) of VA across the SFRS occurred whilst the vehicle was reversing, representing a 9% increase and numerically increase of 15 when compared to the previous reporting year.

22% (48 of 221) of VA involved the use of Driving Assistants, an increase of 3% and a numerical increase of 1 when comparing to the previous reporting year. Another 26% (57 of 221) of VA required Driving Assistants to be in position, however they were not used. This represents an increase of 7% and a numerical increase of 10 when comparing to the previous reporting year.

We will:

- Engage with SDA SAIG to:
 - Ensure Officers in Charge (OiC) and drivers are made aware of the need and importance of utilising Driving Assistants at all times as detailed in the SFRS Driver's Handbook;
 - Ensure Driving Assistants are used when entering and leaving appliance bays;
 - Ensure that OiC monitor Driving Assistants to ensure the role is being properly carried out;
 - Ensure the position and statements from Driving Assistants are included in all event reports;
 - Ensure that OiC and drivers are reminded of the importance of ensuring charging cables have been disconnected before driving off;
 - Ensure that OiC and drivers are reminded of the importance of ensuring checks are made to confirm appliance locker doors are properly open before driving off;
- Undertake a review of Water Rescue to determine any areas of good practice and improvement; and
- Continue to promote the gritting regimes detailed in individual Premises Traffic Management Plans during inclement weather.

11. LOOKING FORWARD 2021/22

Health and Safety Functional Plan 2021/22

During 2021/22, HS will work towards fulfilling the following objectives, with a view to increasing the overall effectiveness of HS management:

Deliver rolling programme of SFRS HSIP across the organisation

- Develop the SFRS Annual HSIP and bespoke SDA/Directorate Improvement Plans; and
- Facilitate the completion of Plans through robust engagement and advice to Business Partners.

Develop and implement the following suite of Management Arrangements and LCMS modules to provide managers with the tools to support legal compliance

- Radiation;
- Management of Plant and Equipment;
- New and Expectant Mothers;
- Self-Audits; and
- Audits.

Develop and implement business processes that promote efficiency and compliance with General Data Protection Regulation (GDPR)

- Develop and implement HS Department internal business protocols handbook.

Develop and implement ICT solutions to enhance HS

- Continue to develop modules and liaise with ICT in relation to the SFRS bespoke Electronic HS Management System – Think, Act, Stay Safe.

Develop and facilitate implementation of various risk reduction strategies

- Advise on the outcomes of hand-arm vibration and noise measurements;
- Advise on the Operational Document Conversion Project;
- Support the work of the SFRS Contaminants Group by coordinating the development of practices to mitigate the risk of exposure;
- Develop and advise on various measures to reduce the work-related transmission of COVID-19;
- Develop and implement practices to enhance the embedding of identified lessons within the SFRS following significant events; and
- Facilitate the completion of Directorate Employee Handbooks.

12. GLOSSARY OF TERMS

The following glossary is an alphabetical list of terms and/or abbreviations contained within the report with their corresponding meanings or explanations.

Terms and/or abbreviations	Definitions and/or meanings
Accident/Injury Rate	The total number of reported Accidents/Injuries divided by total number of employees multiplied by 1,000 to give the accident injury rate per employee
AoV	Acts of Violence
BA	Breathing Apparatus
GRA	Generic Risk Assessment
HS	Health and Safety
HSE	Health and Safety Executive
HSIP	Health and Safety Improvement Plan
LSO	Local Senior Officer
MSK	Musculoskeletal
Musculoskeletal	Referring to the musculoskeletal system including bones, ligaments, muscles, tendons, nerves and other connective tissues
NM	Near Miss
Operational Accident/Injury Rate	Total number of reported Accidents/Injuries divided by total number of incidents multiplied by 100 to give the accident injury rate per incident attended
P&P	Prevention and Protection
POD	People and Organisational Development
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
SAIG	Safety and Assurance Improvement Group

Terms and/or abbreviations	Definitions and/or meanings
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SOP	Standard Operating Procedure
SSoW	Safe System of Work
VA	Vehicle Accident
White Fleet	White Fleet is anything falling below 7,000 kgs whether blue lighted or not



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People Committee



Report No: C/PC/19-22

Agenda Item: 12

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	MENTAL HEALTH STRATEGY / WELLBEING CHAMPION 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>					
		A	B	C	D	E	F
1	Purpose						
1.1	The purpose of this report is to provide the People Committee with an update on progress on the Mental Health and Wellbeing Action Plan and implementation of the Mental Wellbeing Champion model.						
2	Background						
2.1	It is a key strategic priority for the Scottish Fire and Rescue (SFRS) to prioritise the safety and wellbeing of staff through a vision which creates a more preventative approach and embeds a supportive culture which removes stigma, promotes the need to look after both physical and psychological health and provides early access to support and professional assistance. In response of this, the SFRS Mental Health Strategy was launched in June 2020.						
2.2	Responsibility for delivery of the Strategy and associated Action Plan sits with the Mental Health and Wellbeing Group, chaired by the Director of People and Organisational Development (POD) with the action plan led by the POD Health and Wellbeing (HW) Team.						
2.3	Research by MIND concluded that 87% of emergency service workers and volunteers have experienced stress or mental ill health at work (MIND survey 2015). In addition to this, since the Pandemic 69% of emergency responders have said their mental health has deteriorated and only 16% sought support (MIND behind the mask 2021).						
2.4	SFRS data continues to show a high level of absence associated with mental ill health. In 2019 / 2020 471 employees were absent resulting in 13,487 days lost due to psychological absence. In 2020/21, 373 employees were absent resulting in 10,080 days being lost. If this cost were based on the current wholetime firefighter's salary this equates to circa £2million and excludes any additional costs arising from the need to maintain service delivery such as overtime or detached duty.						
2.5	Whilst the data shows a slight decrease in absence, research shows that emergency responders are more likely to stay at work and not seek support when affected by mental ill health which is more likely to affect their health in the longer term. As well as SFRS commitment to be an employer of choice and to improving our employees' wellbeing, there are other business benefits as considering the example above, every 1% reduction in psychological absence would equate to circa £20k per year in savings.						

2.6	Current systems and processes do not allow a direct comparison between absence and OH referrals however data shows that the number of referrals is lower than the level of absence at 327 and 324 respectively. There is also evidence that demands for HW support are changing and that HW are now receiving a much higher number of referrals for people in crisis. Whilst it would be an aim to reduce the level and cost of absence in the longer term, it is likely that the proactive approach to encouraging staff to seek support may result in an increase before interventions support a longer-term decrease.
3	Main Report/Detail
3.1	The work SFRS has carried out to date on the Mental Health Strategy has been acknowledged within the UK emergency services and through the Duke of Cambridge's Royal Foundation. Whilst the SFRS Action Plan focusses on the 13 commitments included in our strategy, we are also now aligned to the UK's Blue Light Together "Mental Health at Work Commitment" signed by the senior leaders of the emergency service bodies in the UK, by adopting its six commitments and integrating them into our action plan. This will allow SFRS to measure its success, report on impact of what is delivered, be accountable to stakeholders, be able to compare with other Services and enable transparency through reporting. To deliver this, subject to financial resources becoming available, we plan to implement a model and structure within HW with the correct level of resources, systems and processes in place.
3.2	<p>The key areas of work included in the action plan are:</p> <ul style="list-style-type: none"> • Leading the development and implementation of the Wellbeing Champion Model support network • Tackling work related causes of poor mental health and support a culture that promotes wellbeing • Reviewing the impact of SFRS reward frameworks, policies and procedures on wellbeing and implement a programme of work to address changes • Integrating and embedding mental health and wellbeing into all training and leadership development programmes • Monitoring and reporting on the effect of mental health and wellbeing on the workforce • Conducting research and benchmarking to collate and analyse data to identify trends; participate and engage in opportunities for joint initiatives with other emergency responders; further develop relationships with charities and professional associations. • Improving and extending support provided to include retirees, volunteers and the families of our employees. • Evaluating initiatives and resources delivered to ensure they effectively support the mental health of current and retired SFRS staff and their families. • Implementing support and resources to help prevent suicide. • Establishing and implementing an annual Wellbeing, Leadership Development and Inclusion calendar, and associated ongoing promotional campaigns.
3.3	<p>A number of thematic sub-groups have been created to support delivery of the actions and others are likely to be established as the action plan progresses. These sub-groups include representation from internal stakeholders and partner organisations to ensure effective engagement and enhance capability and understanding of local needs.</p> <p>Current sub- groups established and their terms of reference are as follows:</p> <ul style="list-style-type: none"> • Document and Process Review: identify and review all SFRS policies, procedures and activities which may impact on mental health and wellbeing; utilising an impact assessment and assurance process to remove / mitigate their impact and focus on inclusion. • Training, Learning and Development: consider how to integrate and embed mental health and wellbeing into all training and leadership development programmes across the Service. • Wellbeing Champion: support the implementation and sustainability of the Mental Wellbeing Champion (MWC) Programme throughout SFRS.

	<ul style="list-style-type: none"> • Suicide Prevention: Implement the Suicide Prevention Action Plan; contribute to external Suicide Prevention Reviews and support the creation of national Suicide Prevention Policy. • Wellbeing and Inclusion: identify and create an annual wellbeing and inclusion calendar that promotes key initiatives which will support the mental health and wellbeing of our employees. 		
3.4	A key element of the Mental Wellbeing Action plan is the development and delivery of the SFRS Mental Wellbeing Champion programme, which has been informed by the Blue Light Programme created by the charity MIND; initially funded by The Royal Foundation, and benchmarked against various UK emergency services and organisation. The ambition of the SFRS programme was to appoint across up to 100 champions in 2022, gradually increasing to 450 in 2023 and 1200 by 2028, representing all staff groups and SFRS workplaces. Following a campaign launch in December 2021, this attracted 203 notes of interest for the Champion role and 51 for the Lead Champion role from across SFRS far exceeding initial expectations.		
3.5	To ensure all those who expressed an interest in the role have the resilience and the capacity to fulfil it, a short informal discussion with the HW team as part of the pre-induction phase has been incorporated. A MWC Core Training Matrix has been developed with guidance for the Lead Champions and Champions to support them to access their core training. Once the Lead Champions, and the Champions, have successfully completed their Core Training Record they will be competent to support employees as an SFRS MWC. To support this high number of MWCs, training will be progressed through a number of Cohorts and will continue whilst they are in role to ensure that Champions are kept updated on latest developments including support from external stakeholders and charities.		
3.6	To date 141 Champions have completed informal discussions and in the first Cohort and have been issued with their training matrix. A formal induction programme is also being developed and it is anticipated that the first Cohort of Champions will go live in Summer 2022.		
3.7	For this programme to achieve its aims and become fully embedded as part of the culture of SFRS, it is important for the volunteers to feel valued and supported. This will be achieved by providing them with a toolkit to support them in their role and establishing regular mentoring meetings with Health and Wellbeing to ensure they are maintaining resilience while carrying out the role.		
4	Recommendation		
4.1	The committee is asked to note the content of this report and progress being made in the Mental Health and Wellbeing Action Plan.		
5	Core Brief		
5.1	Not applicable		
6	Appendices/Further Reading		
6.1	None		
7	Key Strategic Implications		
7.1	<table border="1"> <tr> <td>Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)</td> <td>Yes</td> </tr> </table>	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes		

Prepared by:	Geri Thomson, Deputy Head of People and Organisational Development	
Sponsored by:	Liz Barnes, Director of POD	
Presented by:	Sandra Haig, HROD Manager (Health and Wellbeing)	
Links to Strategy and Corporate Values		
Strategic Plan 2019-22 Outcome 3.3: We will care for our people through progressive health, safety and wellbeing arrangements.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>21 June 2022</i>	<i>For scrutiny</i>

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/24-22

Agenda Item: 13.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	PEOPLE COMMITTEE 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 Board.						
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 and 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.						

3.3	Appendix 1 to this report provides the People Board with the current risk report, outlining:	
	<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 	
3.4	The People Committee are asked to scrutinise the information provided and use the risk register to identify future risk spotlights.	
4	Recommendation	
4.1	The People Committee is asked to: <ul style="list-style-type: none"> • Scrutinise the People Committee Risk Report. • Identify future risk spotlights to be provided to the Board. 	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix 1 – People Committee Risk Report	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Tracy Shankland, Risk & Insurance Officer	
Sponsored by:	David Johnston, Risk and Audit Manager	
Presented by:	Liz Barnes, Director of People and Organisational Development	
Links to Strategy and Corporate Values		
The Internal Audit Plan forms part of the Services Governance arrangements and links back to Outcome 4 of the 2019-22 Strategic Plan, specifically Objective 4.2.		
<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>21 June 2022</i>	<i>For Scrutiny</i>

People Committee Risk Report 2022-23 Q1



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- Aligned Directorate Risk Summary – Appendix 1b
- Directorate Risk Control Summary – Appendix 1c
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- Directorate Risk Rating Change Summary – Appendix 1f
- New Directorate Risks – Appendix 1g
- New Directorate Control Summary – Appendix 1h

Strategic Risk Summary

Appendix 1a

Risk Reference	Description	SLT Risk Owner	Risk Rating (PxI)
1	Ability to improve the safety and well-being of people throughout Scotland through the delivery of our services	Head of Operations	16 (4 x 4)
2	Ability to reduce the number of unwanted fire alarm signals and associated occupational road risk	Director of Service Delivery	15 (5 x 3)
3	Ability to collaborate effectively with partners and communities, to enhance service delivery and best value	Deputy Chief Officer	12 (3 x 4)
4	Ability to ensure legal and regulatory compliance	Director of Strategic Planning, Performance and Communications	12 (3 x 4)
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 (4 x 4)
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	Director of Finance and Contractual Services	20 (4 x 5)
7	Ability to deliver a high quality, sustainable service within the funding envelope	Director of Finance and Contractual Services	16 (4 x 4)
8	Ability to anticipate and adapt to a changing environment through innovation and improved performance	Director of Service Development	16 (4 x 4)
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 (4 x 4)

Aligned Directorate Risk Summary

Appendix 1b

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (Pxl)	Committee	Executive Board
5	Skilled, trained and motivated staff	SD006	Statutory Duties	<p>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</p> <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	20 (5 x 4)	PC	PB
5	Skilled, trained and motivated staff	POD004	Staff Recruitment	<p>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.</p>	Head of People and Organisational Development	16 (4 x 4)	PC	PB

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
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
5	Skilled, trained and motivated staff	POD011	Pay Awards	Risk of delay to pay and competence awards due to ineffective FF Development Programme Policy/Uniformed Managers Development to Competent Policy and processes implementation leading to employee discontent and resulting in employee grievances.	Head of People and Organisational Development	15 (3 x 5)	PC	PB
4	Legal and regulatory compliance	TSA009	Health and Safety Legislation	There is a risk of SFRS not being able to demonstrate legislative compliance due to ongoing delay with the development of the SFRS bespoke health and safety management system (HSMS), Think, Act, Stay safe (TASS). 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	15 (5 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	12 (3 x 4)	PC	PB

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
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	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	12 (3 x 4)	PC	PB
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	12 (4 x 3)	PC	PB

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
5	Skilled, trained and motivated staff	TSA010	Staff Resources	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 impact of pension changes within uniformed staff, retirement and the current job market and loss of continued funding for HS staff. This could result in criminal /civil litigation and associated financial and reputational costs adverse scrutiny whether internal or external, impact on the wellbeing of staff	Head of Safety and Assurance	12 (4 x 3)	PC	NSAB
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	10 (2 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	9 (3 x 3)	PC	PB
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

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	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	6 (3 x 2)	PC	NSAB

Directorate Risk Control Summary

Appendix 1c

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (PxI)	Target Rating (PxI)	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.	AC Pryde, Head of Community Safety Engagement	Mar-22	Green - 90%	A programme of engagement is complete with a final report being written. Progress to date includes one to one interviews and data gathering to support the development of themes has been completed. Focus groups activity have been completed and will feed into the final report. Await final report.	20 (5 x 4)	12 (3 x 4)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	SD006	Statutory Duties	Operational Availability Group to monitor availability throughout the year and implement further controls as required.	Head of Function Nicholson, Head of Service Delivery East	Mar-23	Green - 20%	With the introduction of the Staffing TAG and Staffing Solutions Team the role of the Operational Availability Group is to monitor and manage short terms Operational Availability. The Staffing Solutions Team have been tasked with managing and progressing mid to long term actions that will assist in mitigating and managing current staffing challenges within the service. Both the Operational Availability Group and Staffing Solutions Team report into the Staffing TAG on a weekly basis.	20 (5 x 4)	12 (3 x 4)	PC	PB
5	POD004	Staff Recruitment	Review of RVDS Firefighter Recruitment Process	AC Sharp, Area Commander, Human Resources Org Development	Oct-22	Red - 20%	The RVDS Improvement Programme has now established a working group that will focus on improving the attraction and recruitment of RVDS staff. This sub group through the National Retained and Leadership Forum will report into the RVDS Improvement Board	16 (4 x 4)	8 (2 x 4)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	POD004	Staff Recruitment	Implementing 21/22 agreed resource plan, accounting for additional activity resulting from Business Cases and business as usual recruitment	AC Sharp, Area Commander, Human Resources Org Development	Jul-22	Green - 80%	Whilst COVID-19 restrictions have eased the recent Pensions Remedy has increased the requirement for SFRS to recruit fire fighters in numbers not anticipated as well as undertake a number of promotion campaigns. No change to the risk profile at this time. The wording of the risk will be reviewed in Q2.	16 (4 x 4)	8 (2 x 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	Apr-23	Amber - 60%	Training Plans now scheduled for 2022/23 to deliver the requirements of the TNA. Options paper produced to fill vacancies in Driver Training structure. Driver Training Public Consultation for Section 19 of the Road Safety Act was due to take place and be published January / February 2022, this has been delayed until possibly September. A number of scoping meetings have been held with SFRS Legal regarding plan of action once the result of the Public Consultation for Section 19 of the Road Safety Act is published.	16 (4 x 4)	4 (2 x 2)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	POD011	Pay Awards	Policy review group to be established with representation from across POD and Trade unions	Ceri Dodd, Deputy Head of Human Resources and Organisational Development, Strategic	Mar-23	Green - 10%	<p>Prioritise tasks associated with completing policy reviews, process reviews and implementation.</p> <p>Control Action Progress: Uniformed Mgr. Dev to Comp Policy development considerations progressing following first consultation, further engagement required with stakeholders to progress. FF Trainee, Dev to Comp Policy base working group established; policy review and development progressing in preparation for peer review and onward consultation. Working group lead will rotate to Training Function to progress the process review and onward implementation requirements.</p>	15 (3 x 5)	8 (2 x 4)	PC	PB
4	TSA009	Health and Safety Legislation	Health and Safety Department enhancing Directorate SharePoint sites and TASS Library	Head of Health and Safety and Assurance	Apr-23	Amber - 75%	Enhancement of TASS library ongoing	15 (5 x 3)	6 (3 x 2)	PC	NSAB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
4	TSA009	Health and Safety Legislation	Realigning TASS development programme to reflect progress	Head of Health and Safety and Assurance	Apr-23	Red - 40%	Programme has been realigned to reflect current delay status. Monthly reviews are scheduled to remain appraised of progress. Engagement with ICT has resumed and awaiting appointment of a project manager.	15 (5 x 3)	6 (3 x 2)	PC	NSAB
4	TSA009	Health and Safety Legislation	Consideration of securing budget for 2022-23 to procure an "off the shelf" system	Head of Health and Safety and Assurance	Apr-23	Amber - 0%	ICT have indicated that an ongoing development issue may be resolved in May 22. The outcome of this will inform risk level consideration and the need to consider alternatives	15 (5 x 3)	6 (3 x 2)	PC	NSAB
5	TSA010	Staff Resources	Liaising with HR as part of the POD led Job Evaluation exercise. Collating evidence to support progression of Market allowance	Head of Health and Safety and Assurance	Dec-22	Green - 5%	Work commenced.	12 (4 x 3)	4 (2 x 2)	PC	NSAB
5	FCS001	Sufficient Capacity	Recruitment of additional temporary resources as agreed within business cases to complete recovery activity	Head of Finance and Procurement	Sep-22	Green - 75%	Recruitment of additional posts nearing completion within F&P with only Procurement remaining to recruit.	12 (3 x 4)	8 (2 x 4)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	FCS001	Sufficient Capacity	Realign processes and establish a dedicated team across Directorates to manage the ongoing impact of Covid.	Head of Asset Management	Sep-22	Green - 95%	Monthly reporting to SLT to monitor performance. Agreement to continue to review BAU to manage workloads	12 (3 x 4)	8 (2 x 4)	PC	PB
5	POD006	Staff Wellbeing	Review of Directorate communication channels, forums and meetings to develop employee connection with the Directorate and wider SFRS.	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Oct-22	Green - 80%	Wider Directorate engagement has commenced with the introduction of all staff quarterly meetings and spotlight sessions.	12 (3 x 4)	6 (2 x 3)	PC	PB
5	POD006	Staff Wellbeing	Undertake the required recruitment to appoint resources to support critical priorities.	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Oct-22	Green - 50%	A number of offers have been made and start dates agreed, however recruitment continues for posts not yet filled.	12 (3 x 4)	6 (2 x 3)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	TSA001	Training Resources	Work-packages and associated milestones to be agreed for the Projects within the Training Continuous Improvement Programme.	Head of Training	Jul-22	Green - 80%	A complete review of the CIP has been undertaken. The remaining CIP recommendations will now be delivered as BAU. A number of additional instructor post created by the CIP still remain vacant this action will be transferred to the Staffing Solutions Team (SST). Training Plan established to deliver the requirements of the Training Needs Analysis (TNA) for 2022/23 at both a Local and National level.	12 (3 x 4)	12 (4 x 3)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	TSA001	Training Resources	Decentralisation of business partnering model (Year 1 of 3yr strategy)	Head of Training	Mar-24	Green - 70%	Instructor T&C now fully implemented. Weekend course delivery scheduled in each SDA / LSO Area. Training Plans scheduled for 2022/23 to deliver the requirements of the TNA both at Local and National level. Increased course delivery utilising both NIP / LSO instructors where applicable and possible. Decentralised business model used for all courses that local facilities allow. Continued engagement with Asset Management and Property around the replacement, refurbishment or addition of equipment and facilities. Continued review and amendment of Training capacity in line with any ease in SFRS COVID protocols.	12 (3 x 4)	12 (4 x 3)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	TSA001	Training Resources	Increase instructor numbers to aid with Training Recovery Plan and training delivery.	Head of Training	Mar-23	Green - 70%	Continued challenges in appointing new staff to vacant roles. A number of instructor posts still remain vacant within the NIP / LSO training structure. This has been further exasperated by the now pension implications. A number of additional instructor post created by the CIP still remain vacant this action will be transferred to the SST. Targeted Crew Commander promotion process specifically for Training and Implementation of secondments / temporary promotions into vacancies within the function being explored.	12 (3 x 4)	12 (4 x 3)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
9	TSA002	Staff Training	Decentralisation of business partnering model utilising local delivery (Year 1 of 3yr strategy)	Head of Training	Mar-24	Green - 70%	Weekend course delivery scheduled in each SDA / LSO Area. Additional training courses scheduled to deal with training backlog. DACO engagement sessions held in each SDA with all NIP & LSO instructional staff and Training Managers to discuss future revised business partnering and training model. Training Plans now scheduled for 2022/23 to deliver the requirements of the TNA both at Local and National level. Continued review and amendment of Training capacity in line with any ease in SFRS COVID protocols.	12 (4 x 3)	12 (4 x 3)	PC	PB
5	POD008	Medical Restrictions	Project team to be recruited in full.	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Aug-22	Green - 70%	Staff appointed and in post. Compliance levels averaging 90%. Programme has been impacted by Covid and the competing demands related to increased recruitment activity.	10 (2 x 5)	5 (1 x 5)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	POD009	Employment Tribunals	Complete review of Bullying, Harassment and Discrimination Framework and launch revised policy and toolkit	Roz Munro, HROD Manager, POD - Workforce Planning and Resourcing	Jul-22	Green - 80%	Policy reviewed and issued on i-hub. Contact Advisers appointed and training provided. Process implemented to formally review exit questionnaires that highlight diversity concerns and employees / formal employees contacted. Diversity training part of induction and ongoing review.	9 (3 x 3)	8 (2 x 4)	PC	PB
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	Mar-23	Amber - 75%	A H&S Auditor has been appointed and work is now being progressed in relation to the 2022/23 audit programme. Thematic review of face fit testing to be undertaken in Q1.	9 (3 x 3)	6 (2 x 3)	PC	NSAB
8	TSA003	Lessons Learnt	The 2-year funding of auditors within the HS Dept. will facilitate the determination of the effectiveness of the application of lessons learnt within the workforce	Head of Health and Safety and Assurance	Dec-23	Green - 10%	Auditors are now in place.	6 (3 x 2)	4 (2 x 2)	PC	NSAB

5	POD005	Employee Wellbeing	Strengthen Health and fitness arrangements	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Oct-22	Amber - 50%	<p>Number of additional staff appointed to carry out routine assessments enabling improved planning processes being progressed to address gaps in efficiency. HW employee records now on Cohort HWMS enabling HW to support SFRS wide on referrals. Development of Management Referral Module on Cohort HWMS complete and being piloted prior to wider roll out. Referral waiting times being monitored and triaged at peak times. Review of rehabilitation and physiotherapy arrangements progressing aligned to MSK Injury Reduction Action Plan. The research project to establish a role-based fitness assessment is complete and a plan is being developed to implement the assessment across SFRS. Annual Wellbeing and Inclusion Promotion Calendar agreed with events and campaigns ongoing on a regular basis.</p>	6 (2 x 3)	4 (2 x 2)	PC	PB
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SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	POD005	Employee Wellbeing	Reduce risk from Contaminants	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Dec-22	Amber - 50%	Dedicated cancer support sections introduced on iHub, Platforms app and LCMS containing a range of resources to promote awareness and support available. Research carried out on whether SFRS should undertake blood testing and other screening for cancers, however agreed focus to be on health awareness and education. Health surveillance risk assessment completed and options appraisal produced to determine how future asbestos medicals will be carried out. Cancer charities engaged and delivering sessions to support staff.	6 (2 x 3)	4 (2 x 2)	PC	PB

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
5	POD005	Employee Wellbeing	Implement agreed action plan milestones for 2021/22 aligned to Mental Health Strategy	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Mar-23	Green - 60%	Number of sub groups established under the Mental Health and Wellbeing Group to deliver the action plan. Collaboration and engagement with Royal Foundation and MIND to align SFRS plan with Blue Light Together commitment. Lifelines training increased and ongoing. Mental Wellbeing Champion Programme being introduced and training programme agreed.	6 (2 x 3)	4 (2 x 2)	PC	PB
5	POD005	Employee Wellbeing	Review of HW model and structure	Geri Thomson, Deputy Head of Human Resources and Organisational Development, Strategic	Dec-22	Green - 50%	The structure through which the mental health action plan will be implemented is now at an advanced stage of governance approval and will be implemented when funding is secured. Work has commenced on the review of the wider HW structure and information is being collated and analysed on capacity requirements to deliver HW services.	6 (2 x 3)	4 (2 x 2)	PC	PB

Directorate Closed Control Summary

Appendix 1d

Control Description	Risk ID	Risk Name	Risk Description	Control Comments	Control Owner	Committee	Executive Board
Collaborative CPD programme to be developed between POD and Legal teams to build insight and share learning from ET.	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.	Monthly knowledge sessions provided by legal services. Employment Tribunals successfully concluded. Case review taking place on key cases - this will be an ongoing process. Propose closing Control.	Head of People and Organisational Development	PC	PB
Recruitment of additional Auditing Officers and Community Safety Advocates following approval of business case	SD006	Statutory Duties	<p>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</p> <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 	The recruitment process has been completed. Final placements are being arranged and all future vacancies will be recruited under Business as usual process.	AC Pryde	PC	PB

Control Description	Risk ID	Risk Name	Risk Description	Control Comments	Control Owner	Committee	Executive Board
Complete structure review of LSO management teams across all SDA's.	SD006	Statutory Duties	<p>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</p> <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 	Action complete and proposal paper submitted to Service Delivery Directorate Management Team and recommendations approved.	Head of Function Watt	PC	PB
Completion of LCMS module targeted at learning lessons from significant events or identified accident trends.	TSA003	Lessons Learnt	<p>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</p>	Module completed and issued.	Head of Health and Safety and Assurance	PC	NSAB

Control Description	Risk ID	Risk Name	Risk Description	Control Comments	Control Owner	Committee	Executive Board
Monitoring of capacity able to meet Service demand	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.	<p>Additional resource freed from managing SFRS COVID -19 response but additional BAU activity still to be completed.</p> <p>Additional resource agreed with some posts now recruited with remaining posts subject to ongoing recruitment</p>	Head of Health and Safety and Assurance	PC	NSAB

Directorate Closed Risk Summary

Appendix 1e

Risk ID	Risk Name	Risk Description	Parent Risk ID	Parent Risk Name	Closure Reason	Risk Owner	Committee	Executive Board
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.	5	Skilled, trained and motivated staff	The risk stemming from the impact of COVID -19 on staffing resources has reduced at present. This may change should a new variant arise or a significant change in Scottish Government direction occur. (Risk Rating Reduced 9-4)	Head of Health and Safety and Assurance	PC	NSAB

Directorate Risk Rating Change Summary

Appendix 1f

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (PxI)	Initial Risk Rating (PxI)	Committee	Executive Board
POD004	Skilled, trained and motivated staff	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	Probability Increased; Probability score increased from 3 - 4 to reflect the current market conditions and challenges experienced around pay and ability to onboard quickly when recruiting to vacancies	16 (4 x 4)	12 (3 x 4)	PC	PB

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (Pxl)	Initial Risk Rating (Pxl)	Committee	Executive Board
TSA009	Legal and regulatory compliance	Health and Safety Legislation	<p>There is a risk of SFRS not being able to demonstrate legislative compliance due to ongoing delay with the development of the SFRS bespoke health and safety management system (HSMS), Think, Act, Stay safe (TASS). 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.</p>	Head of Health and Safety and Assurance	<p>Probability Increased; Due to continued challenges within ICT with regard recruiting staff and resourcing this project, timescales continue to slip and therefore probability has increased 4-5.</p>	<p>15 (5 x 3)</p>	<p>12 (4 x 3)</p>	PC	NSAB

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (PxI)	Initial Risk Rating (PxI)	Committee	Executive Board
TSA002	Protect Staff Covid-19	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	BOTH Decreased; Risk rating lowered from previous rating of 20 to 12 due to the reduction in social distancing protocols to 1m plus.	12 (4 x 3)	20 (5 x 4)	PC	PB

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (PxI)	Initial Risk Rating (PxI)	Committee	Executive Board
POD008	Skilled, trained and motivated staff	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	Probability Decreased; Reducing probability from 3 - 2 given the progress made in recruiting staff to the team.	10 (2 x 5)	15 (3 x 5)	PC	PB
POD009	Skilled, trained and motivated staff	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	Impact Decreased; With recent conclusion of ET cases bringing this to a small number, along with introduction of revised Dignity and Respect policy propose this risk impact is reduced from 5 - 3	9 (3 x 3)	15 (3 x 5)	PC	PB

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (PxI)	Initial Risk Rating (PxI)	Committee	Executive Board
TSA003	Improve performance	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	Impact Decreased; The risk has reduced in both Risk Rating and Target as the first interactive learning module based on the Albert Drive investigation has been issued. In addition to this than Organisational Learning Group has been established to facilitate the completion of actions stemming from internal and external learning sources. (R/R Impact 4-2. T Impact 3-2)	6 (3 x 2)	12 (3 x 4)	PC	NSAB

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 (PxI)	Target Risk Rating (PxI)
TSA010	Staff Resources	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 impact of pension changes within uniformed staff, retirement and the current job market and loss of continued funding for HS staff. This could result in criminal /civil litigation and associated financial and reputational costs adverse scrutiny whether internal or external, impact on the wellbeing of staff	5	Skilled, trained and motivated staff	Head of Safety and Assurance	PC	NSAB	Mar-23	12 (4x3)	4 (2x2)

New Directorate Controls Summary

Appendix 1h

Risk ID	Risk Name	Risk Description	Control Description	Control Owner	Control Due Date	Performance	Control Comments	Committee	Executive Board
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	The 2-year funding of auditors within the HS Dept. will facilitate the determination of the effectiveness of the application of lessons learnt within the workforce	Head of Safety and Assurance	Dec-23	Green - 10%	Auditors are now in place.	PC	NSAB

Risk ID	Risk Name	Risk Description	Control Description	Control Owner	Control Due Date	Performance	Control Comments	Committee	Executive Board
TSA010	Staff Resources	<p>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 impact of pension changes within uniformed staff, retirement, and the current job market and loss of continued funding for HS staff .</p> <p>This could result in criminal /civil litigation and associated financial and reputational costs adverse scrutiny whether internal or external, impact on the wellbeing of staff</p>	<p>Liaising with HR as part of the POD led Job Evaluation exercise. Collating evidence to support progression of Market allowance</p>	<p>Head of Safety and Assurance</p>	<p>Dec-22</p>	<p>Green - 5%</p>	<p>Work commenced.</p>	<p>PC</p>	<p>NSAB</p>



People Committee – 21 June 2022
Risk Spotlight Briefing Note
(SD006 On Call Retained/Volunteer Duty System (RVDS) People Specific
and around Recruitment/Training)

Submitted by: - Service Delivery ACO Stuart Stevens

Background: What would cause the risk to materialise / what is the effect likely to be?
<ul style="list-style-type: none"> • Service Delivery Risk SD006 - <i>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</i> • POD Directorate Risk - <i>The risk of being unable to support recruitment of staff across the Scottish Fire and Rescue Service (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.</i> Control and mitigation: <ol style="list-style-type: none"> 1. Review of RVDS Firefighter Recruitment Process 2. Implementing 21/22 agreed resource plan, accounting for additional activity resulting from Business cases and business as usual recruitment. • Current On Call deficiency of 1060 against Target Operating Model of 3693 full time equivalent (120+ hours per week) based on legacy numbers. • SFRS encounter challenges attracting, recruiting and retaining On Call personnel to fully populate the current model. • Often, in situations where staffing levels are healthy there remains a challenge maintaining operational availability at specific times of the day or on specific days of the week. • Delay in or failure to deliver the outcomes of the On Call Improvement Programme will see the risk increase and compound the challenges with sustaining our On Call.
Controls and mitigating actions (stating what actions are being taken if the residual/current risk assessment is operating above or below risk appetite).
<ul style="list-style-type: none"> • Ongoing negotiations to standardise RDS terms and conditions • RVDS Project elevated to strategic On Call Improvement Programme 3 projects being advanced to provide recommendations for implementation on 6 key fundamental On Call themes – variable contract options and remuneration, station establishments, responding options, duty system relationships, attraction and recruitment improvements. Completion date June 2023 • Attraction and recruitment project provides incremental improvement milestones which are being delivered across the lifetime of project providing immediate, medium and long-term enhancements. Examples - Creation of, implementation and evolution of Pre-Recruitment Engagement Programme (PREP), streamlining recruitment processes and approaches to support locally driven delivery, design and launch of National On Call Recruitment Tool Box, National On Call Practitioners forum to ensure wide stakeholder involvement, enhanced and structured engagement and communication plan for internal and external stakeholders. • Reviewing establishment methodologies, considering options and providing recommendations so we can understand and align our actual recruitment requirements to local risk and response needs • Training – Launch of new Training for Operational Competency (TfOC) provides a localised risk based approach whilst focussing on core skills acquisition and maintenance making

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training for On Call staff both more realistic and achievable given limitations such as time and facilities.

- Modularising Task & Task Management (initial On Call basic training programme)
- Scoping work for the potential evolution of the PREP which would see candidates immediately employed and engaged upon successfully meeting recruitment requirements and standards locally. Enabling them to undertake modules of the TTM on their local stations alongside other role related activities such as community safety prevention. This will enhance candidate experience, reduce time away from primary employers for basic training and enable the Service to deliver a greater number of courses; increasing the accessibility, frequency and capacity.
- Work being progressed in relation to providing a suite of variable contract options that would provide greater flexibility, enhance potential for improving cover during specific challenging time slots and may contribute to greater diversity in the workforce.

External or other factors which might impact on the current risk assessment.

- Standardising the approach to setting each On Call station / appliances FTE may, on paper, significantly reduce the identified gap in the vacancy figures. However, in isolation it will do nothing practically to address the stations struggling to maintain availability, despite the best efforts of local crews and managers. Hence the importance of advancing all the key themes in tandem.
- Continued prolonged negotiations on standardised RDS terms and conditions or failure to reach agreement will inhibit progression of numerous On Call Programme workstreams and recommendations
- Commencement and completion of standardising VDS terms and conditions which is reliant on agreement with standardised RDS terms and conditions
- No further work or consultation with staff groups can be carried out on advancing variable contract options until RDS Ts & Cs situation is resolved.
- Resources, capacity and skills to continue to deliver the On Call Projects and other interdependent strategic programmes due to the impact of the pension remedy and a competitive employee marketplace. The Business case to bolster the On Call Support team in line with the requirements of the On Call Improvement Programme was not supported due to financial constraints.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



Report No: C/PC/21-22

Agenda Item: 15.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	LEADERSHIP FOR CHANGE PROGRAMME UPDATE						
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>					
		A	B	C	D	E	F
1	Purpose						
1.1	This report provides an update on the Leadership for Change Programme (LfCP) following the first iteration of virtual delivery and details the future development and implementation plans for the programme.						
2	Background						
2.1	The requirement to build leadership capacity and strengthen change capability with the Service remains a priority and is key to SFRS strategic outcomes. As we recover from the impact of the COVID-19 pandemic, the implementation of the LfCP designed to develop and strengthen the required skills and behaviours, has been transition to a digital first delivery model.						
2.2	The revised digital first implementation plan included a wider range of bite-sized modules, as detailed below to optimise the virtual learning experience. <ul style="list-style-type: none"> • Leadership: 7 Habits of Highly Effective People: (6 x 2-hour sessions) • Trust: Speed of Trust: (2 x 2-hour sessions) • Change: Leaders@Change (2 x 2-hour sessions) 						
2.3	The timings of the latter two elements changed from original plans in response to participant availability and feedback.						
3	Main Report/Detail						
3.1	The programme ran from November 2021 to March 2022, with 24 participants taking part. 22 of the 24 participants submitted the end of course evaluation form (Gen 12 evaluation). As shown in Appendix A, the feedback was predominantly positive with 86.4% of respondents giving the course an overall rating of very good and the remaining 13.6% rating it good. In summary, the feedback highlighted the following themes. <p>Positives Themes:</p> <ul style="list-style-type: none"> • Gives more managerial tools • Good pace of learning • Gives context and structure to managerial approach adopted • Encouraged reflection • 360-degree feedback element 						

	<p>Improvement themes:</p> <ul style="list-style-type: none"> • Face to face delivery would have been better • Timing of sessions did not suit everyone • Consider the positioning of the videos so that delegates can see their relevance better • Technical issues – screen jumping at points <p>Personal benefits gained:</p> <ul style="list-style-type: none"> • I think I’m using listening actively and building trust the most • I’ve adopted elements from all the Habits and taken something from every Habit mostly 2,3,4 & 6 (See Appendix B: Leadership for Change (Virtual) Programme Overview) • I give more thought to my leadership behaviours • I’m building trust, seeking win-win outcomes and listening effectively • It helped me to reflect how I approach my work and family life and review what’s important to me as a person • I now consider my management style and general approach to leadership • The self-audit was something that I will do going forward when assessing my performance. • It’s given me skills and knowledge that I have already put into practice and has helped me be more effective as a leader <p>3.2 It is evident from feedback that participants wish to return to the classroom. However, the Leadership and Skills Development Team will give people additional support to assist the move to online learning in line with the Service’s Digital First principles. Future delivery of the programme will continue with online delivery as this reduces the disruption of extracting people from service delivery for long periods of time. Providing learning online reduces travel costs, subsistence costs, time and carbon footprint. It increases accessibility to learning for staff in more remote parts of the Service. It also reduces the length of time away from family and home – taking family responsibilities into consideration.</p> <p>3.3 The Leadership and Skills Development Team are currently scheduling follow up sessions with the first cohort of participants to contextualise their views on the programme now that they have had time to reflect on their learning experience. The team will further explore the improvement themes cited in the Gen 12 feedback (See Appendix C: Blank Gen 12 Evaluation Form). To finalise the evaluation of the pilot, a longer-term evaluation will be completed by both the participant and their line manager to assess the changes being experienced and observed as learning is transferred into the workplace. This will be aimed at identifying the application of learning and the benefits to the individual, team and organisation. All feedback gained will contribute to the further development of the programme.</p> <p>3.4 Future programmes will see the increased use of the agile approach to learning. The programme will begin with a Programme Induction and the creation of a learning plan agreed with the participant’s line manager. It will include opportunities for self-learning, directed reading, facilitated networking within peer groups, and the inclusion of work based projects to consolidate learning. Taking this approach allows participants to effectively manage their time to support their learning. It also allows them to share their learning experience with their line manager and colleagues, and be supported as they transfer their learning into practice through the work based project. This will contribute to the leadership capacity, capability, knowledge and skills required to lead and manage change effectively.</p> <p>3.5 In response to the need for flexibility, the programme was repeated on two different days each week. The existing training scheduling process was not used due to resourcing issues within training admin team. This meant that operational personnel had not been scheduled off shift to attend. As a result, some were called away from sessions to respond to operational needs. This resulted in fluctuating numbers on each day, which prevented</p>
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	cohorts gelling and made programme delivery challenging, for example, lack of interaction with low participant numbers.	
3.6	For the next iteration of the programme, programmes will be run in parallel with fixed cohorts. To continue to offer flexibility, the programmes will be staggered to allow participants to catch up if they miss a module. We will also look to record all training sessions so people can access the information and discussion for their particular cohort for respective sessions. This strategy will allow participants to respond to operational requirements without detriment to their learning. This approach will also allow us to maintain the connected and person-centred approach to our development activities.	
3.7	The information emerging from Service Learning Needs Analysis (LNAs) will inform our decisions about how many programmes we will run to meet demand, with the programmes being delivered across Q2-Q4.	
4	Recommendation	
4.1	The People Committee are asked to note the progress of the virtual Leadership for Change Programme.	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix A: Gen 12 Summary Feedback Table	
6.2	Appendix B: Leadership for Change (Virtual) Programme Overview	
6.3	Appendix C: Blank Gen 12 Evaluation Form	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Ruth Kelling, Corporate Skills Development Advisor	
Sponsored by:	Anne Gordon, Leadership and Skills Development Manager / Ceri Dodd Deputy Head of POD	
Presented by:	Ruth Kelling, Corporate Skills Development Advisor	
Links to Strategy and Corporate Values		
Long Term Vision Principles – Progressive; Inclusive; People Centred; Connected SFRS Strategic Plan 2022-25 – OUTCOME SIX: The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>21 June 2022</i>	<i>For information</i>

APPENDIX A

GEN 12 SUMMARY FEEDBACK TABLE

SCORES	n/a	0 Poor	1 Fair	2 Good	3 V Good
1. The course aims & learning outcomes were met.				18.2%	81.8%
2. The course was both beneficial & relevant to the role you currently perform.				9.1%	90.9%
3. The course has increased your knowledge & confidence in the subject.				36.4%	63.6%
4. The instructors were knowledgeable & professional during the course.				4.5%	95.5%
5. The training methods & course materials were appropriate.			4.5%	27.3%	68.2%
6. Training digital facilities were of a suitable standard.				31.8%	68.2%
7. The practical exercises were beneficial & relevant to the role you currently perform.	18.2%			18.2%	63.6%
8. What was your overall opinion of the course?				13.6%	86.4%

LEADERSHIP FOR CHANGE (VIRTUAL) PROGRAMME OVERVIEW

MANAGER IMPACT JOURNEY



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BLANK GEN 12 EVALUATION FORM



GEN 012 – COURSE EVALUATION

Now that you have completed your course, it would be very helpful to know your thoughts on the training & learning you have undertaken. The information collected is used to improve the service we provide; therefore, we welcome your comments. If you require more space, please use an additional sheet.

Thank you for taking the time to complete this evaluation.

Input No:

Please provide your details & circle your responses as appropriate

Name	
Service Delivery Area & Base/Station	
Email Address	
Course Code (if available)	
Course Title	
Course Date	

0	1	2	3
Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree

- | | | | | |
|---|----------|----------|----------|----------|
| 1. The course aims & learning outcomes were met. | 0 | 1 | 2 | 3 |
| 2. The course was both beneficial & relevant to the role you currently perform. | 0 | 1 | 2 | 3 |
| 3. The course has increased your knowledge & confidence in the subject. | 0 | 1 | 2 | 3 |
| 4. The instructors were knowledgeable & professional during the course. | 0 | 1 | 2 | 3 |
| 5. The training methods & course materials were appropriate. | 0 | 1 | 2 | 3 |
| 6. Training facilities were of a suitable standard. | 0 | 1 | 2 | 3 |

7. The practical exercises were beneficial & relevant to the role you currently perform. **n/a** **0** **1** **2** **3**

Continued on next page...

8. What was your overall opinion of the course? **0** **1** **2** **3**
Poor Fair Good V/Good

Question 1-8 comments:

9. Do you have any suggestions on how this course could be improved?

10. Do you have any additional comments?

11. If you requested additional support, assisted access or some other alteration were your needs fully met? n/a Yes No

12. Did SFRS personnel and course delegates behave in a professional and respectful manner at all times? Yes No

If you have selected “No” to either question 11 or 12 we would like to gather some more information from you so that we can deal with your concerns appropriately. The manager who will contact you will not have been a contributor to the course you attended to ensure confidentiality and impartiality.

SCOTTISH FIRE AND RESCUE SERVICE *People* Committee



Report No: C/PC/22-22

Agenda Item: 15.2

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	GRADUATE PROGRAMME UPDATE						
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 an update of the first year of the Scottish Fire and Rescue Service (SFRS) People and Organisational Development (POD) Graduate Programme pilot, and set out the initial next steps for a wider programme rollout proposal.						
2	Background						
2.1	The SFRS has a successful history of 'growing talent' in operational roles, seeing employees develop from their entry level role through the career ladder. There is an opportunity to build on existing good practice in support functions to build and diversify our talent pipelines to include undergraduate and graduate opportunities.						
2.2	SFRS currently have two graduates progressing through the Graduate Management Trainee Programme with a specialism in POD. Appendix A sets out their programme rotations.						
2.3	The aspiration of the SFRS Undergraduate and Graduate Programme is to strengthen alignment between existing youth and apprenticeship programmes taking a strategic and long-term approach to workforce development and planning, including graduate and foundation apprenticeships (where appropriate).						
3	Main Report/Detail						
3.1	<u>SFRS POD Graduate Programme Overview</u>						
3.1.1	Initial feedback from the first year has been gathered from the two graduates completing the SFRS POD Graduate Programme pilot, POD Managers (Rotation Mentors), and Programme Management team to consider successes and lessons learned.						
3.2	<u>Graduate Feedback</u>						
3.2.1	Each Graduate completed a questionnaire through MS forms. Generally, feedback is encouraging, with each having a positive experience through the application and onboarding process, their initial programme rotations, and each have reported they would recommend the Graduate programme. In depth details of the feedback is reported in Appendix B with an overview included in table below;						
	What worked well...			Even better if...			
	<i>"The application form was thorough and it took quite a significant amount of time it properly fill it out. I feel this provided the opportunity to really consider/ learn about the role and consider my suitability."</i>			<i>"I think having a better idea of how the CIPD course will work and run alongside rotation commitments would be beneficial."</i>			

	<p><i>"I enjoyed the interviews. At both I was made to feel relaxed and I felt that the people interviewing me were very welcoming and made it a positive experience for me"</i></p>	<p><i>"Perhaps a slightly more structured approach would make it easier to determine time spent where although I feel at the moment we are all learning together in this process."</i></p>
	<p><i>"I receive regular support from my line manager, colleagues in COD, managers and colleagues within rotations."</i></p>	<p><i>"Having some sort of guide/ booklet for new graduates may be helpful with key information and links to key policies they could refer back to would be helpful."</i></p>
	<p><i>"I think so far each rotation has been the right amount of time."</i></p>	
3.3	<p><u>Graduate Programme Qualification</u></p>	
3.3.1	<p>Both graduates, as part of their programme are currently working towards the CIPD L7 (SCQF 11) qualification in Advanced Strategic People Management. During the qualification the Learning and Skills Development team (L&SD) will provide wrap around support to enhance the graduate learning experience through enabling the practical application of learning, alongside contract and performance management of the qualification provider.</p>	
3.4	<p><u>Rotation Manager Feedback</u></p>	
3.4.1	<p>Each Rotation Manager completed a questionnaire through MS forms. Generally, feedback is encouraging, with each manager having a positive experience of facilitating a Graduate(s) through the specific rotation. Some positive and constructive feedback was provided. In depth details of the feedback is reported in Appendix C with an overview included in table below;</p>	
	<p>What worked well...</p>	<p>Even better if...</p>
	<p><i>"The support from the team was good. HW had experience of having a graduate previously so we were prepared and had a plan in place."</i></p>	<p><i>"I think it would be helpful to be able to see what the full graduate programme learning outcomes and what key learning points have been defined for each rotation so that we can see opportunities to link to past/future learning."</i></p>
	<p><i>"The opportunity to experience different business areas is a positive and an insight into SFRS and future opportunities."</i></p>	<p><i>"I think it would be useful to have a manager's briefing pack for the Graduates so that managers are clear on what is expected of them and what types of projects/support they should have in place for them."</i></p>
	<p><i>"Rotations work well, being given specific exposure to higher level work and being supported is a positive thing. I like the fact that graduates come with great skills and ideas and the receiving department can work with the graduate for both to get the best out of the experience."</i></p>	<p><i>"If I could suggest one thing it would be that a senior leader acts as a mentor and guide to the graduate."</i></p>
3.5	<p><u>Graduate Remuneration</u></p>	
3.5.1	<p>The remuneration proposal for the Graduate Programme is based on an annual increasing percentage as each graduate progress through their three-year programme. Appendix D sets out the agreed remuneration for the SFRS POD Graduate Programme pilot.</p>	
3.5.2	<p>Recruitment of the current graduates progressed with one commencing their programme on 19 April 2021 which is due to conclude on 14 April 2024 and the second commenced their programme on 29 September 2021 which is due to conclude on 25 September 2024.</p>	
3.5.3	<p>Budget is currently in place to support these programmes until 31 March 2024 aligned to the anticipated Graduate start dates of 1 April 2021. Discussions are progressing to realign the budget to each graduate's actual programme dates.</p>	

3.6	<u>Consideration for Future Graduate Programme(s)</u>	
3.6.1	There is an opportunity to consider both internal SFRS talent requirements and the external factors and skills profile as we look to build and diversify our talent pipelines to include future undergraduate and graduate opportunities.	
	Internal considerations:	
	<ul style="list-style-type: none"> Engage with the Workforce Planning and Resourcing team and internal stakeholders to diversify talent entry routes into SFRS e.g. hard to fill roles, address skill gaps, SFRS demographics Future Graduate programme funding options e.g. supernumerary, explore market allowance roles, wider development posts ('grow our own') within existing establishment 	
	External Considerations:	
	<ul style="list-style-type: none"> Market conditions and societal/ generational expectations and requirements Macro factors e.g. Socio-economic factors, political drivers, megatrends, regulatory and legislative frameworks 	
3.7	<u>Summary</u>	
3.7.1	Review and evaluation the SFRS POD Graduate Programme pilot will continue and continuous improvement action implemented. Engagement with stakeholders to explore future undergraduate and graduate programme options for the next 3 years will progress and proposals developed.	
4	Recommendation	
4.1	People Committee is asked to consider the content of the report, note the progress of the SFRS POD Graduate Programme pilot to date and that future programme proposals are being developed.	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix A – Graduate Programme Rotations	
6.2	Appendix B – Graduate Feedback	
6.3	Appendix C – Rotation Managers Feedback	
6.4	Appendix D – Graduate Remuneration (POD Specialism)	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Claire Horsburgh, HR Advisor	
Sponsored by:	Danielle Milligan, HROD Manager / Ceri Dodd, Deputy Head of POD	
Presented by:	Claire Horsburgh, HR Advisor	
Links to Strategy and Corporate Values		
Long Term Vision Principles – Progressive; Inclusive; People Centred; Connected SFRS Strategic Plan 2022-25 - OUTCOME SIX: The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Information</i>

APPENDIX A

Graduate Programme Rotations

Graduate One

SPECIALIST PROGRAMME – PEOPLE & ORGANISATIONAL DEVELOPMENT			
Year	Period of Rotation	Dates	Directorate/Function/Dept
One	1 Month	19/04/2021 - 16/05/2021	Corporate Induction Period
One	3 Months	17/05/2021 - 13/08/2021	Resourcing & Workforce Planning
One	3 Months	14/08/2021 - 19/11/2021	Business Partnering
One	3 Months	20/11/2021 - 18/02/2022	Leadership & Skill Development
One	2 Months	19/02/2022 - 15/04/2022	Health & Wellbeing
Two	2 Months	16/04/2022 - 17/06/2022	Governance and Administration
Two	2 Months	18/06/2022 - 19/08/2022	Equality & Diversity
Two	1 Month	20/08/2022 - 16/09/2022	Positive Action
Two	2 Months	17/09/2022 - 18/11/2022	Culture & Organisational Development
Two	2 Months	19/11/2022 - 13/01/2023	Reward & Benefit
Two	2 Months	14/01/2023 - 14/04/2023	Business Partnering
Three	12 Months	15/04/2023 - 14/04/2024	Trainee Choice of Final Year Specialism – Probationary Year
Three	March	14/04/2024	Assessment Period

Graduate Two

SPECIALIST PROGRAMME – PEOPLE & ORGANISATIONAL DEVELOPMENT			
Year	Period of Rotation	Dates	Directorate/Function/Dept
One	1 Month	29/09/2021 - 29/10/2021	Corporate Induction Period
One	3 Months	30/10/2021 - 28/01/2022	Resourcing & Workforce Planning
One	3 Months	29/01/2022 - 29/04/2022	Business Partnering
One	2 Months	30/04/2022 - 01/07/2022	Governance and Administration
One	2 Months	02/07/2022 - 02/09/2022	Culture & Organisational Development
Two	2 Months	03/09/2022 - 04/11/2022	Health & Wellbeing
Two	2 Months	05/11/2022 - 02/01/2023	Equality & Diversity
Two	3 Months	02/01/2023 - 02/04/2023	Leadership & Skill Development
Two	2 Months	03/04/2023 - 04/06/2023	Reward & Benefit
Two	2 Months	05/06/2023 - 06/08/2023	Business Partnering
Two	1 Month	07/08/2023 - 04/09/2023	Positive Action
Three	12 Months	04/09/2023 - 27/09/2024	Trainee Choice of Final Year Specialism – Probationary Year
Three		27/09/2024	Assessment Period

APPENDIX B

Graduate Feedback

Application Process

How did you find out about the SFRS Graduate Programme?	<ul style="list-style-type: none"> • MyJobScotland • I first started in the Service on a 6-week part-time internship placement in December 2020, which I heard about through someone I know who works for SFRS. Following this internship the Graduate Programme was approved and we were asked to pilot.
How did you find the application process?	<ul style="list-style-type: none"> • The application form was thorough and it took quite a significant amount of time it properly fill it out. I feel this provided the opportunity to really consider/ learn about the role and consider my suitability. I submitted my application early June and then heard back around 6 weeks later for an invite to interview. I was given 3 working days notice for this interview but as it was a short and relatively informal interview this was fine for me. I heard that I had been progressed one week later and was invited to attend the structured interview one week later. In this period I had to prepare a presentation and complete psychometric testing so I felt at this stage I had quite a lot to do. From initially hearing I was successful at stage one I felt that the process was moving at a good pace and that I was able to progress at a relatively fast pace. I then had confirmation that I was successful in the recruitment process just over one week after my final interview. From this point onward I experienced a few difficulties and delays to my initially proposed start date which meant my starting date was postponed for around 4-5 weeks. I feel that earlier/ more regular communication throughout this period of time would have been beneficial to me however I am now aware there were circumstances at the time that may have impacted this. • When I first joined there was no set application process in place. There was a few informal type conversations, asking about my experience and interests. I found these really informative and welcoming.
What did you enjoy most about the Application Process?	<ul style="list-style-type: none"> • I enjoyed the interviews. At both I was made to feel relaxed and I felt that the people interviewing me were very welcoming and made it a positive experience for me as this process can be quite daunting and I can often be nervous in this setting. I feel that the system of having an 'informal' interview first also helped with this as it allowed me to meet one of the people that would be conducting my structured interview so again this helped alleviate some of my nerves. • The application process wasn't in place at the time, so can't comment.
Do you have any suggestions on how we can improve the application process?	<ul style="list-style-type: none"> • I feel that, as mentioned previously, communication throughout the application process was good to begin with but could have perhaps been better towards the end of the recruitment process for me personally. I think that advertising the role across different platforms may also attract more applicants as, from my peers, I am aware that MyJobScotland may not be checked regularly by a wide range of prospective applicants. One way to target students/ graduates directly may be through universities. This is something I would look at and check often as we would receive email alerts and there was also an online page where you could check positions being advertised and where/ how to apply. • The current application process is long and goes through many stages, with multiple interviews and an assessment day (not sure if this has since been updated following the introduction of the Graduate Programme). This delays the application submission to a start date, which could mean losing candidates to other organisations who are faster at starting candidates.

Onboarding Process

<p>How did you find the SFRS Onboarding process?</p>	<ul style="list-style-type: none"> • I found it slightly disjointed and a bit overwhelming at times. I felt supported by my colleagues and managers responsible for on boarding. The induction checklist could be updated as well to reflect agile working and perhaps easier to interpret/ more user friendly, I think in a lot of ways it is too generic so could perhaps be slightly tailored for example for graduates/ trainees compared with new HRAs. • I thought it was useful as I was given time to do e-learning, navigate the iHub and learn how to use Sharepoint.
<p>We are currently reviewing the SFRS Onboarding process, do you have any suggestions on what we should keep, and what improvements we can make?</p>	<ul style="list-style-type: none"> • I think that the process could be more interactive. Although a lot of the information was useful, at times it was overwhelming, particularly in reading a lot of policies. I think if this could be spread or the delivery be amended to be more interactive it would help retain more of the information. Perhaps a 'one stop' for initial onboarding would be helpful as a 'go-to' guide that could be referred back to containing the highlights of key information/ policies and links to further reading/ processes etc so that you could quickly locate a piece of information and then where to find more. Within this could be user guides for things such as iHub, iTrent etc as well so that as the person is being integrated into the organisation they can refresh themselves into where to find these things and how to use them which may also help reduce being overwhelmed in learning everything so quickly. I found the onboarding POD sessions very helpful and allowed me the opportunity to meet a lot of people and see a lot of faces early on. They also helped to bring to life what each team does and where they sit within the department as I had looked at the structure but I feel that the sessions made it memorable for me who was in each team and what they do. • I think self-navigating through documents was useful, however I think the time period of a month given is long. I think 2 weeks would be sufficient time to spend on reading documents, as I find it easier to learn by "doing".

Work Rotations

<p>What Rotations have you completed so far?</p>	<ul style="list-style-type: none"> • Resourcing, (COVID), Business Partnering and currently with Governance and Admin. • Resourcing, Business Partnering, Learning and Skills Development, Health and Wellbeing and currently in POD Admin and Governance.
<p>Which Rotation have you enjoyed the most and why?</p>	<ul style="list-style-type: none"> • Business Partnering - I feel that I have been able to take the most away from this rotation so far. I was involved in various elements within this function and feel that I covered not only a wide variety of tasks but I was also able to develop a wide variety of my skills. I also feel that the set up in this rotation in having a 1-2-1 mentor helped the rotation to go smoothly. • Business Partnering - I was involved in meaningful projects and felt most like a 'HRA' in this rotation as I was given my own tasks to work on, e.g. contract checking, and taking on the role of the BP for POD. I always felt I had work to do and learned so much about the role of a HRA through job shadowing, attending grievance hearings, but also self-studying through viewing policies. I had a set plan in place and expectations were set through objectives presented to me when I first joined the team.
<p>Which Rotation have you least enjoyed and why?</p>	<ul style="list-style-type: none"> • Resourcing - I had issues with IT equipment for the majority of this rotation which prevented me from partaking in a lot of the key roles. I think if I had a laptop from the outset it may have been a different experience for me. • Resourcing - This was my very first rotation so I think we were all trying to find our feet. The team were extremely busy during my time so I didn't always have work to do, and I didn't have a set plan or mentor. I was still able to work on an Interview Skills Training package and produce meaningful work however, but I didn't fully get to see the Workforce Planning side of the team or understanding fully other tasks they would be involved in as I was mostly working on my own.

<p>Do you think each Rotation has been just right/too long/not long enough? Please provide details.</p>	<ul style="list-style-type: none"> • I think so far each rotation has been the right amount of time. I feel that I could have spent longer with the business partnering team as there is still some areas I could develop however I am aware I am returning to this team next year so I feel the balance is right in this sense. • It would be useful to have more time in some rotations, and less time in others. This can just be due to preference however, but also because I can start a project and not be able to finish it or see it through. For example, in Health and Wellbeing we started an MSK Injury campaign but due to having to move on to my next rotation I wasn't able to progress it any further.
<p>Do you think the overall three years for the Graduate Programme is just right/too long/not long enough? Please Provide details.</p>	<ul style="list-style-type: none"> • Yes, I think the timeline is just right. I look forward to the third year in completing a year-long placement as I feel that having such a long time with one team will allow me to be involved with longer term projects and complete some really meaningful work hopefully. I enjoy the rotations as it allows me to fully understand each team and get a better idea of what I think I would be good at personally. • I think the overall time is just right, and I like the idea of being able to choose what team to spend the final year in. I think this will be useful in being able to fully understand the job role in a specific team, as it can be hard to grasp in a period of 2/3 months.

Support

<p>Do you feel you have received the right, and enough support throughout your rotations? (Please provide details)</p>	<ul style="list-style-type: none"> • Yes, I receive regular support from my line manager, colleagues in COD, managers and colleagues within rotations. • In the beginning when I didn't have a mentor in each team sometimes you could feel like a burden as you didn't want to constantly bombard team members with questions when they are already so busy. The mentor system currently in place now is really useful, and I feel fully supported by the COD Team and my line manager through regular contact and check in meetings.
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Reflective Learning Log

<p>Do you find the reflective log helpful to record your rotations and learning? If not, please provide details of what could be better.</p>	<ul style="list-style-type: none"> • I find it partially helpful. I do find the logs in general to be helpful when reflecting back i.e. for year end review meeting I was able to look at the logs to remember key projects etc. I think the style/ questions could maybe be adapted as I sometimes find sections repetitive. I also think they could be more in line with objectives. For example include a section so that you could bullet point any actions that go toward objectives. • Yes, I think it is really useful being able to have a record of each of the tasks I have been involved in during each rotation. The beginning of the learning log asking how you felt before, during and after can feel a bit repetitive, maybe a general overall feeling about how you felt about the rotation would be better.
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Overall Experience and Feedback

<p>Overall, what have you enjoyed about the Graduate Programme?</p>	<ul style="list-style-type: none"> • I really enjoy working with different teams and getting to work with different people across a variety of tasks. • Overall, I think the Graduate Programme is great at finding your feet with HR and gives you a chance to be able to explore what areas you like/dislike, and where your niche is. Coming straight from University with no prior career experience in HR, it has been really useful for me to understand the different functions within HR and see which area I like best. I would recommend the Graduate Programme to anyone looking to begin their career in HR, but haven't quite decided what area to specialise in yet.
<p>What can we do to make the Graduate Programme better?</p>	<ul style="list-style-type: none"> • I think having a better idea of how the CIPD course will work and run alongside rotation commitments would be beneficial. Perhaps a slightly more structured approach would make it easier to determine time spent where although I feel at the moment we are all learning together in this process. • Looking at what projects teams have coming up over the year, and plan to spend time in that rotation based on what projects they have on at that time. I have enjoyed rotations the most where I have been kept busy and felt like I have produced meaningful work the team can use. It would also be useful for the rotational manager to pre-plan what activities we are going to be involved in before we arrive. This has been done in the majority of rotations which has been useful.
<p>Would you recommend the SFRS Graduate Programme to up and coming Graduates?</p>	<ul style="list-style-type: none"> • Yes • Yes
<p>Do you have any other comments to make about the Graduate Programme that will help up either support you as an individual or on the programme as a whole?</p>	<ul style="list-style-type: none"> • I think similar to my suggestion with the onboarding, I think having some sort of guide/ booklet for new graduates may be helpful with key information and links to key policies they could refer back to would be helpful • None

APPENDIX C

Rotation Managers Feedback

Have you facilitated a rotation within your team and did you find the time too short, just right, too long?	<ul style="list-style-type: none"> • Just Right • Just Right • Too Short
Did you find the reflective logs/management comments enough to monitor the Graduates journey and their learning?	<ul style="list-style-type: none"> • Yes • Yes • Yes
Please provide any comments on how we can improve this, or what works well.	<ul style="list-style-type: none"> • I think it would be helpful to be able to see what the full graduate programme learning outcomes and what key learning points have been defined for each rotation so that we can see opportunities to link to past/future learning. • I am not sure that I saw the Reflective logs, however we involved Maura in all our team meetings which gave us lots of opportunities to discuss these areas with her then. • I think it would be useful to have a managers briefing pack for the Graduates so that managers are clear on what is expected of them and what types of projects/support they should have in place for them. I simply did what I have done previously when working with Graduates.
Did you feel supported enough in preparation for the rotation? If not, please provide more details of what additional support you feel is required	<ul style="list-style-type: none"> • Yes and No, initial pre-discussion was helpful however very much left to develop work plan for rotation - this could be linked to key learning outcomes. Arrangements for registering on formal study course was delayed - appreciate buddy sessions have now been set up to support with this which will support a positive experience • See above as I think some managers may benefit from a structured brief about what a graduate should/could work on and the support that should be put in place. • The support from the team was good. HW had experience of having a graduate previously so we were prepared and had a plan in place.
What changes should be considered to improve the SFRS Graduate Programme?	<ul style="list-style-type: none"> • improving awareness of programme and expected outcomes. both graduates have done their resourcing rotation and due to workload priorities and team resource at each time had a different experience - perhaps a regular update on progress, a structured check in or handover from previous rotation lead would be helpful - to gain awareness on what they have just done etc. • As above • It is difficult to say because I this is the first set of rotations. I am a big fan of the graduate programme and I think it is currently designed very well. However, if I could suggest one thing it would be that a senior leader acts as a mentor and guide to the graduate.

<p>What works well with the SFRS Graduate Programme?</p>	<ul style="list-style-type: none"> • the opportunity to experience different business areas is a positive and an insight into SFRS and future opportunities. • Good quality Graduates so it makes it much easier to allocate them a discrete project to work on and take to completion. • Rotations work well, being given specific exposure to higher level work and being supported is a positive thing. I like the fact that graduates come with great skills and ideas and the receiving department can work with the graduate for both to get the best out of the experience.
<p>As we look to roll out the SFRS Graduate Programme, what departments/teams do you think we should consider rolling out to?</p>	<ul style="list-style-type: none"> • as per email to Claire • I would suggest a rotation to Strategic Planning and Governance, Finance, Operations and On - Call.. You could also consider Control and Prevention and Protection. • It would be good for graduates to get time in finance and procurement. Experience of budget management and maybe in SPP&C to understand governance.
<p>As we look to roll the SFRS Graduate Programme out to other specialist departments within SFRS, or as a general Business Graduate Programme, do you have any comments/thoughts on what we need to consider?</p>	<ul style="list-style-type: none"> • internal promotion/comms - sell "value" of having a graduate programme • I would suggest we look at where we have the greatest skill gaps or recruitment challenges and work back from that to help decide what graduates we should be looking to support. • We need to always make sure the mentorship and support is there and someone needs to maintain overall control.
<p>Are there any other comments/suggestions/points to consider as we look to progress the Graduate Programme?</p>	<ul style="list-style-type: none"> • None • I thought Maura brought a real benefit to our team. It is great to have that fresh set of young eyes in and helped us to think differently about how we do what we do and why we do it! • None

APPENDIX D**Graduate Remuneration (POD Specialism)**

- Year 1 - 65% of the minimum for Support Staff Grade 6
(£22,953 per annum based on 2020/21 salary scales)
- Year 2 - 70% of the minimum for Support Staff Grade 6
(£24,719 per annum based on 2020/21 salary scales)
- Year 3 - 75% of the minimum for Support Staff Grade 6
(£26,485 per annum based on 2020/21 salary scales)

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/14-22

Agenda Item: 15.3

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	BULLYING, HARASSMENT AND DISCRIMINATION PROJECT						
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>					
		A	B	C	D	E	F
1	Purpose						
1.1	To provide an update on progress being made on the review of the Scottish Fire and Rescue Service (SFRS) policies, procedures, and supporting arrangements relating to the Bullying, Harassment and Discrimination project and for noting the amended Dignity and Respect policy and accompanying procedure.						
2	Background						
2.1	The POD Directorate Plan includes an objective to review the SFRS approach to Bullying, Harassment and Discrimination, to support a positive and supportive workplace culture which is aligned with SFRS values. This piece of work will also be key to meeting the objectives of the Mental Health Strategy. This arose following feedback from SFRS staff as part of the 2018 Staff Survey. This review started in 2019 and included the facilitation of a series of workshops held towards the end of 2019 and the beginning of 2020 where employee feedback was sought.						
2.2	Following a pause of the review due to COVID-19, work was resumed and the draft Dignity and Respect Policy and Bullying, Harassment and Discrimination Procedure was issued for first and final consultation in June and July 2021.						
3	Main Report/Detail						
3.1	The revised Dignity and Respect Policy has a strong focus on the positive behaviours expected from employees. This will be underpinned by a Dignity Toolkit, along with input from the "Our Commitment" working group as part of the first phase of the Building the Future Together programme.						
3.2	Comprehensive feedback was received during the first consultation of the draft policy. This feedback was acted upon and consequently when the draft policy was issued for final consultation, there were minimal changes required.						
3.3	Policy Principles and Guidance						
3.3.1	SFRS is committed to ensuring all employees are treated with dignity and respect. The existing SFRS Dignity and Integrity at Work Policy has been reviewed and amended to have greater focus on ensuring that employees understand the positive behaviours that are required, and the unacceptable behaviours which have no place within the SFRS.						

3.3.2	The streamlined procedure has one informal level which seeks to resolve complaints of bullying, harassment or discrimination, and approaches to find appropriate resolutions or address the behaviours.
3.3.3	If the complaint is not resolved using this approach, the formal grievance or disciplinary procedures may be used.
3.4	Contact Advisers
3.4.1	During the workshops, there were strong views from employees that our current mechanisms for dealing with bullying, harassment or discrimination were inadequate and consequently, there is a reluctance to raise any concerns due to lack of trust and fear of reprisal.
3.4.2	Employees suggested that the introduction of a network of trained Contact Advisers would provide employees with confidence and reassurance that any concerns would be listened to in a confidential, impartial way that would build trust and provide an additional support to employees on issues relating to bullying, harassment and discrimination.
3.4.3	<p>The Strategic Leadership Team (SLT) approved the introduction of the role of Contact Adviser to be an empathetic and informed listener and help explore other sources of support available. The confidential support will deal with issues including, but not limited to:-</p> <ul style="list-style-type: none"> • Bullying and Harassment • Discrimination • Domestic Abuse
3.4.4	The creation of Contact Advisers will also support the recent Scottish Government guidance around issues of women's safety in the workplace, particularly in relation to uniformed public services.
3.4.5	This is a positive step and demonstrates SFRS commitment to improving the culture, current and future behaviours and building on existing positive relationships within SFRS. Following notes of interest for the role and subsequent informal discussions, 15 employees were appointed to the role in January 2022.
3.5	Training
3.5.1	SFRS worked with an external training provider and SFRS Legal Services who delivered skill and knowledge based training to the Contact Advisers. Feedback provided was very positive. The training was delivered late January 2022, in advance of the launch date of the revised policy and procedure (end February 2022).
3.5.2	Training was undertaken to equip the Contact Advisers with active listening skills, the ability to identify when a concern is a case of bullying, harassment or discrimination and when it is not. Contact Advisers will not "fix" things but will be able to sign post employees to different support networks available both internally and externally to SFRS.
3.5.3	In advance of the launch, HR Business Partners will provide an overview to managers and Contact Advisers as part of the soft launch of the revised policy and procedure.
3.5.4	SFRS's current Professional Behaviours and Equality training is scheduled for review by the Equality and Diversity Team with a view to reinforcing those elements and making the training more meaningful and broadening awareness of equality, diversity, inclusion and human rights. This would allow the practical issues of embedding professional behaviours and personal conduct, as required by the work associated with the Dignity and Respect Policy to be developed as a dedicated toolkit. Time to Talk information sessions will be expanded to cover key topics under the banner of bullying, harassment and discrimination which will be delivered by SFRS Health and Wellbeing Lead Practitioners.

3.5.5	All training elements will be explored further and reviewed, including the Professional Behaviours, Equality, and leadership and management training to ensure professional behaviours and equality themes are mainstreamed appropriately. It is the intention to add initial content to LCMS within the existing Professional Behaviours module regarding Dignity at Work to coincide with the policy launch. This will be further developed at an appropriate point post launch.
3.6	Communication
3.6.1	Additional resources and guidance documents are available and links are provided within the Dignity Toolkit. These will be made available on iHub and communicated to colleagues through the standard communication channels.
3.6.2	It is important to build relationships within teams and increase the confidence of team members through the introduction and/or enhancement of team meetings on a regular basis, encouraging interaction and supportive discussions. Managers will be encouraged to facilitate these, and is particularly important when employees are working from home and as we move towards a more agile approach to work.
3.7	Governance and Accountability
3.7.1	The accurate and robust recording of complaints regarding allegations of bullying, harassment and discrimination need to be in place so that the gravity, type and location of complaints is understood and acted upon to impact positive organisational change.
3.8	Risk
3.8.1	Failure to address the bullying, harassment and discrimination concerns raised in the 2018 staff survey would have a detrimental impact on staff engagement and contribute to increased staff turnover.
3.8.2	The revised policy, procedure and communications will assist to mitigate potential risk to the reputation of the SFRS from tribunals and other court cases and to the SFRS' aim to remain an employer of choice.
3.9	Financial
3.9.1	Financial costs for the training for 15 Contact Advisers was £2220. This will be met from existing budgets and formed part of the current Learning Needs Analysis. Workforce
3.9.2	This Policy is applicable to all employees and it is hoped that this review will help address instances of unacceptable behaviour and allow an open, transparent and inclusive approach to be taken. It will also provide employees with assurances that SFRS will treat concerns seriously and sensitively.
3.10	Workforce
3.10.1	This Policy is applicable to all employees and it is hoped that this review will help address instances of unacceptable behaviour and allow an open, transparent and inclusive approach to be taken. It will also provide employees with assurances that SFRS will treat concerns seriously and sensitively.
3.11	Health and Safety
3.11.1	Bullying, harassment and discrimination can have a significant effect on the physical and mental health of employees. SFRS takes a zero-tolerance approach to bullying, harassment and discrimination at work.

3.12	Legal	
3.12.1	This Policy meets SFRS legal obligations contained within the Equality Act 2010, the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 as amended, the Human Rights Act 1998 and the Data Protection Act 2018, which implements General Data Protection Regulation (GDPR).	
3.13	Service Delivery	
3.13.1	There may be requirement to support time off for Contact Advisers to carry out this role in addition to their SFRS role and to respond to concerns raised by employees. It is recognised that this may have an impact on service delivery however, there is a wide spread across uniformed and support staff and Directorates/functions so as not to detrimentally impact on one area.	
4	Recommendation	
4.1	People Committee are asked to note the content of the revised Dignity and Respect Policy and accompanying procedure which went live at the end of February 2022.	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix A – Dignity and Respect Policy	
6.2	Appendix B – Bullying, Harassment and Discrimination Procedure	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above) Yes	
Prepared by:	Roz Munro, HR-OD Manager	
Sponsored by:	Rachael Scott, Deputy Head of People and Organisational Development	
Presented by:	Liz Barnes, Director of People and Organisational Development	
Links to Strategy and Corporate Values		
The refreshed Dignity and Respect Policy and supporting Procedure have been developed to support the positive behaviours SFRS expect from employees and the early resolution of concerns where these may arise. It is therefore an enabler towards achieving our key outcome within the SFRS Strategic Plan for 2019-22 which identifies our People as a strategic priority.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Information Only</i>

People and Organisational Development



SCOTTISH
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PEOPLE AND ORGANISATIONAL DEVELOPMENT

DIGNITY AND RESPECT POLICY

Author/Role	Susan Gillan, HR Adviser
Date of Equality Impact Assessment	March 2021
Date of Impact Assessment (commenced)	December 2020
Date of Impact Assessment (concluded)	March 2021
Quality Control (name)	Roz Munro, HROD Manager
Authorised (name and date)	XXXXXXXXXXXXXXXXXXXX
Last Reviewed (name and date)	XXXXX
Date for Next Review	May 2026



DIGNITY AND RESPECT POLICY

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1. POLICY STATEMENT

1.1 AIMS OF THE POLICY

Respect is one of the four core Values of the Scottish Fire and Rescue Service (SFRS) and is an important principle for underpinning our desired organisational culture. By valuing respect, we will ensure we have an organisation where people work well together, where individuals recognise their own attitudes and actions have an impact on others, and where we all have a shared responsibility to challenge others in a constructive way if unacceptable behaviour is demonstrated.

Ensuring everyone is treated with dignity and respect at work is part of Our Commitment to you. Dignity and respect at work within SFRS extends beyond a workplace which is free from bullying, harassment or discrimination. It includes ensuring each person understands the positive behaviours which are required, and the unacceptable behaviours which have no place within our workplace culture. Each person should feel valued for the contribution they make, working in inclusive teams where there is supportive dialogue to proactively resolve concerns.

We respect our differences and we recognise the clear link between fairness, equality and employment.

We are committed to preventing bullying, harassment, victimisation and discrimination and these actions, in any form, will not be tolerated. SFRS is also committed to supporting employees' health and wellbeing and recognise that instances of this nature can have a significant impact on the physical and mental health of individuals and will therefore ensure appropriate support is provided.

This policy aims to set out our expectations and should be read in conjunction with the Bullying, Harassment and Discrimination Procedure which references the procedures to follow in the event that positive behaviours are not displayed or a complaint needs to be raised regarding unacceptable or discriminatory behaviour or conduct. Breaches of this policy may result in disciplinary action being taken, which could lead to termination of employment.

1.2 OBJECTIVES OF THE POLICY

The objectives of this policy are to promote a culture of dignity, integrity and respect and to clearly define the standards of behaviour required within the workplace, to signpost support and guidance in a culture where employees have the confidence to raise concerns knowing they will be treated seriously. This policy supports the SFRS strategic direction and reinforces our commitment to having a positive workplace culture in an organisation which listens, learns and evolves.

2. INTRODUCTION

- 2.1 SFRS is committed to providing a supportive working environment where individuals feel accepted for who they are, valued for their contribution and work in an environment which is free from unlawful discrimination, bias, harassment or victimisation, in line with the provisions of the Equality Act 2010. This commitment is given to all employees irrespective of employment status, age, disability, sex, sexual orientation, religion or belief, ethnicity, race or nationality, pregnancy or maternity status, marital status, gender reassignment status or their social or economic circumstances.
- 2.2 SFRS is a Stonewall Diversity Champion and is committed to advancing Lesbian, Gay, Bisexual & Transgender (LGBT) equality and this is reflective in all our policies which are inclusive of all protected characteristics. In addition, the prevention of discrimination, victimisation and harassment in relation to gender identity, gender expression, non-binary identities, language, social origin, employment status, political belief, trade union membership or activity, or responsibility for dependants is key to this policy.
- 2.3 Central to this pledge is the development, implementation and monitoring of employment practices, including recruitment and selection, promotion, training and career development, that are themselves supportive, inclusive and free from unlawful discrimination or bias.
- 2.4 As detailed within Our Values, we are entirely committed to having a positive approach to workplace relationships, based on a commitment to treat all employees with kindness and respect and to challenge, remove and prevent all forms of unacceptable behaviour

2.5 SFRS has a zero-tolerance approach to all forms of bullying, harassment and discrimination and encourages a report-it culture where employees are supported to raise concerns without fear of reprisal or victimisation.

2.6 By implementing this policy, SFRS will:

- Ensure a clear understanding of the expectations of all employees / representatives in terms of positive and professional behaviours in the workplace.
- Ensure all reasonable steps are taken to prevent all forms of bullying, harassment, victimisation and discrimination.
- Ensure refresher training is provided for all employees within SFRS, identified through the appraisal process and through local POD learning and skills development partners.

2.7 This policy outlines:

- The responsibilities of all employees
- Signposting employees to SFRS processes to follow in the event of concerns raised.

3. SCOPE

3.1 This policy applies to all SFRS employees including permanent, temporary, and fixed term staff (even if seconded to other organisations). Job applicants, volunteers, students, Board members, workers of SFRS e.g. agency staff, contractors, work experience placements and staff seconded to SFRS will be subject to the principles of the policy and may be asked to leave the Service if they do not comply with those principles. This policy outlines the framework and principles that SFRS will use in embedding equality and fairness for all within the workplace.

4. DEFINITIONS

4.1 Protected Characteristics

Protected characteristics covered in the Equality Act 2010 are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. There are differences in the scope and extent of protection for each of the protected characteristics.

4.2 **Direct Discrimination**

Direct discrimination occurs when someone is treated less favourably than another person because of a protected characteristic they have or are thought to have (see perceptive discrimination below), or because they associate with someone who has a protected characteristic (see associative discrimination below). Where a woman is treated less favourably because of her pregnancy or being on maternity leave this would constitute direct discrimination. Where an LGBT colleague is treated less favourably than another colleague because of this, this would also constitute direct discrimination.

4.3 **Indirect Discrimination**

Indirect discrimination can occur when you have a condition, rule, policy or practice that applies to everyone but particularly disadvantages people who share a protected characteristic. Indirect discrimination does not apply to the protected characteristics of pregnancy and maternity but may cover these conditions through the protected characteristic of sex (gender).

4.4 **Associative Discrimination**

Associative discrimination is a form of direct discrimination against a person because they associate with another person who possesses a protected characteristic. Associative discrimination applies to the protected characteristics of race, religion or belief, sexual orientation, age, disability, gender reassignment and sex. For example, a candidate who has been told they are getting a job is suddenly deselected after revealing they have a severely disabled child with complicated care arrangements or an employee is being discriminated against because their son/daughter/a relative is LGBT.

4.5 **Perceptive Discrimination**

Perceptive discrimination is a form of direct discrimination against an individual because others perceive they possess a particular protected characteristic. For example, someone is perceived to be LGBT based on their looks/mannerisms (links to stereotypes and prejudices). Perceptive discrimination applies to age, race, religion or belief, sexual orientation, disability, gender reassignment and sex. The person does not need to have these protected characteristics to be protected by this clause. Another example is where a Sikh man is being subjected to Islamophobic abuse as perpetrators mistakenly identify him as Muslim through wearing a turban.

4.6 **Harassment**

Harassment is unwanted conduct related to a protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual. Harassment applies to all protected characteristics except for pregnancy and maternity, and marriage and civil partnership.

Harassment at work has a significant negative effect on both personal and working lives. Mental and physical health and wellbeing are impacted alongside productivity.

Unwanted conduct can include (but is not limited to) spoken words, banter, written words, posts or contact on social media, images, physical gestures, facial expressions, pranks, aggression. Social media applications include but are not limited to Twitter, Facebook, Instagram, YouTube, WhatsApp, LinkedIn, Tik Tok, Snapchat.

4.7 **Victimisation**

Victimisation occurs when an employee is treated unfairly because they have made or supported a complaint or raised a grievance under the Equality Act 2010 or because they are suspected of doing so. SFRS will ensure that employees who make an allegation of bullying, harassment or discrimination in good faith, or who act as a witness in such a case will not be victimised for doing so. Where it is established that victimisation has taken place, disciplinary action may be taken, which can include dismissal.

4.8 **Bullying**

Bullying is behaviour from a person or group that is unwanted and can result in someone feeling uncomfortable, frightened, stressed, less respected, made fun of and/or upset. Bullying at work becomes harassment when the unwanted behaviour is about any of the nine protected characteristics contained within the Equality Act 2010.

Any activity or behaviour that has an impact on the workplace is relevant when considering the SFRS Dignity and Respect Policy. This includes cyber harassment or bullying via social media or communication apps, through personal emails and texts and can extend beyond the workplace where there is a negative impact on an employee of SFRS.

5. LEGAL REQUIREMENTS

5.1 SFRS has a duty to ensure compliance with the Equality Act 2010 and the associated Statutory Code of Practice: Employment. SFRS will take steps to comply with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (the Regulations). In this regard SFRS will:

- Ensure that all relevant employment policies and practices are considered within the SFRS Equality Impact Assessment process
- Take steps to gather, analyse and use employment monitoring data
- Publish an Equal Pay statement
- Collect and publish Gender Pay Gap and occupational segregation data
- Publish the gender diversity of SFRS board members
- Report on progress made towards achieving equality outcomes
- Publish an Equality Outcomes mainstreaming report

5.2 SFRS has a duty to act in a way which is compatible with the European Convention for the Protection of Human Rights and Fundamental Freedoms (ECHR). The relevant elements of the ECHR as it relates to SFRS employment practices are – privacy and data protection, freedom of expression and thought, trade union activity and harassment.

The ECHR provides that the right to freedom of expression and thought of one individual should not infringe upon the rights of others. This means that the expression of views that could cause harm to others is not protected under the ECHR; for example, the right to freedom of expression does not allow for the demonstration of religiously intolerant opinions. SFRS will take steps to ensure that all employees are familiar with the equality and human rights implications associated with the implementation of relevant employment policies and practices and will actively encourage equality and diversity good practice.

5.3 Employers are required to provide a safe place of work under the provisions of the Health and Safety at Work Act 1974. This includes ensuring risks are assessed and protecting workers and employees so they are protected from mental and physical health hazards. This can include work related stress, which can arise because of bullying, harassment or discrimination.

- 5.4 Individuals wishing further detail on the content and scope of the legislation should refer to the relevant documents available on i-Hub.

6. RESPONSIBILITIES

6.1. Corporate Responsibilities

Each Directorate/Area/Function is responsible for creating a positive and supportive culture where all employees come to work knowing they can be themselves and will be safe and protected from bullying, victimisation, harassment and discrimination of any kind.

6.2. Directorates

Directorates, through Heads of Service, will ensure this policy is implemented by creating a positive culture in which each individual is treated with dignity and respect and that SFRS values are embedded into our everyday working lives.

6.3. Managers

Local Senior Officers/ Area Commanders / Departmental Managers are responsible for:

- Ensuring they comply with this policy
- Leading by example by demonstrating professional behaviours at all times
- Creating a positive and supportive workplace culture
- Complying with health and safety legislation to create a safe working environment and assess risks to all employees and others
- Encouraging an open-door approach
- Having regular one to one meetings and creating opportunities for open dialogue with colleagues
- Ensuring assessment and mitigation of risks in the workplace are known and that these form part of regular governance monitoring arrangements
- Ensuring they create an environment where employees understand the professional and respectful behaviours expected of them and are clear that bullying, harassment and discrimination is completely and wholly unacceptable
- Supporting training for all employees which sets out what bullying, harassment

and discrimination are, the need to act immediately if employees experience it and how to handle complaints

- Actively challenging inappropriate behaviour and by responding constructively and supportively when an employee raises concerns
- Ensuring support is offered to any employee who raises a concern of bullying, harassment or discrimination and helping them to resolve the complaint
- Having an awareness of other relevant employment policies and practices in relation to equality issues that are referred to within this policy, e.g. reasonable adjustments on the grounds of disability within the Recruitment and Selection or the Attendance Management Policies
- Liaising with the Human Resource Business Partners (HRBPs) as required for advice and guidance

6.4. **People and Organisational Development (POD)**

POD is responsible for:

- Providing advice and guidance regarding this policy and other relevant policies
- Regular monitoring and review of this Policy and the supporting procedure and toolkit and their application
- Providing appropriate training where necessary

6.5. **Employees**

Employees must comply with this policy and behave in an appropriate, professional and positive way at all times towards colleagues and the public. All employees have a responsibility to demonstrate respect for others, treat others with dignity and encourage inclusiveness. All employees have a responsibility to help create a working environment free of bullying and harassment.

Employees are responsible for:

- Cooperating with managers to ensure the effective implementation of this policy
- Applying the contents and spirit of this policy in practice. This extends to workers and volunteers
- Ensuring that their personal conduct is professional, complies with the Code of Conduct and relevant job description

- Contributing to a dignified working environment in which bullying and / or harassment is unacceptable
- Appreciating the differences of others and respecting the differing views of others
- Ensuring that training is undertaken and regularly updated
- Challenging in an appropriate manner the behaviours of others where the behaviour is inconsistent with the principles and spirit of this policy
- Regularly seeking feedback from others and reflecting on own behaviours to ensure these are supportive
- Raising awareness of issues at the earliest opportunity. If an employee identifies an unsafe condition, hazard or risk within the workplace, then they must notify their line manager or a safety representative
- Actively participating in activities which foster positive working relationships with all colleagues
- Giving consideration on accessing support to maintain health and wellbeing

6.6. **Trade Unions**

Recognised Trade Union representatives' functions include:

- Co-operating with SFRS to ensure this policy is effectively implemented
- Consulting with managers and POD as appropriate where behaviours fall below the expected standards
- Encouraging employees to co-operate and comply with this policy

6.7. **Contact Advisors**

Contact Advisors are responsible for:

- Understanding and explaining the importance of the broad topic of Equality, Diversity and Inclusion
- Offering confidential support on issues relating to bullying, harassment and discrimination
- Explaining the informal and formal procedures under the Bullying, Harassment and Discrimination Procedure and different routes to resolution
- Recognising when and how to signpost individuals to sources of specialist support
- Compassionately challenging inappropriate behaviour

- Balancing the requirements of the Contact Advisor with their own role
- Actively listening to understand underlying issues without making judgement
- Recognising the importance of empathy when facilitating reflection and clarifying of events
- Attending training to support them in undertaking this role

7. EMPLOYEE SUPPORT

7.1 Health and Wellbeing

SFRS is committed to employees' health and wellbeing and recognise that being subject to unacceptable, unwanted or discriminatory behaviours may impact on the physical and mental health of individuals.

Negative behaviours can have a serious impact on stress levels and/or mental health. Many symptoms of stress and a mental health condition are similar, the main difference being the severity and impact on an individual's day to day life. Most people who are diagnosed with a mental health condition receive treatment and continue to work. It is essential to ensure appropriate help is sought at the earliest stage.

We will therefore ensure support is provided to employees who may require this through our Health and Wellbeing teams and SFRS Employee Assistance Programme. This can be through a self-referral or a referral by a line manager. Support information is also available on iHub.

7.2 Employee Assistance Programme

Our employee counselling service is independent and confidential and provides access to trained counsellors and welfare practitioners. The support is available free of charge to all SFRS employees 24/7, 365 days a year.

Counselling allows individuals to talk about their problems and feelings in a confidential and dependable environment and could help if they are suffering from a range of mental health conditions such as stress, anxiety, depression, post-traumatic stress disorder or any other difficulty that may be causing them emotional pain or making them feel uncomfortable. They are able to self-refer to this service and further information can be found on the Health and Wellbeing iHub page.

7.3 Trade Unions

Employees who are a member of a trade union may also wish to contact their representative for support and advice:

- Fire Brigades Union
- Fire Officers Association
- Fire and Rescue Services Association
- UNISON
- UNITE

8. MONITORING AND REVIEW

8.1 Monitoring and Record Keeping

SFRS is committed to evaluating the effectiveness of its activities and operations, and meeting its statutory obligations for monitoring. To do this, we will:

- Create and capture necessary data to demonstrate evidence, accountability and information about our decisions and activities and the effectiveness of policies, procedures and processes
- Maintain securely and preserve access to records, as long as they are required to support SFRS operations, in accordance with SFRS Records Retention Schedule
- Meet legal record-keeping requirements, including the Data Protection Act 2018 and the Freedom of Information (Scotland) Act 2002, and confidentially destroy those records as soon as they are no longer required

8.2 Privacy Statement

SFRS processes personal data collected as part of this Dignity and Respect Policy in accordance with the Data Protection Act 2018 and General Data Protection Regulation 2016/679 (GDPR). Data Protection Impact Assessments are carried out where necessary for new and revised policies, involving the processing of personal data. A privacy statement/privacy notice will include an explanation of the purpose for collecting/processing any data. It will include the lawful processing of personal data as set out in Article 6 of GDPR.

8.3 Consultation

This policy has been developed following full consultation with relevant stakeholders and representative bodies. It has been agreed by the relevant SFRS Boards/Committees who provide strategic advice and advice on matters affecting employees, whilst ensuring it supports the strategic aims of SFRS.

8.4 Policy Review

This policy will be subject to update and review as necessary by the POD Directorate, at no more than five yearly intervals or earlier should any relevant legislative, precedent, judgement, operational review or organisational changes occur prior to that date.

9. ASSOCIATED DOCUMENTS/REFERENCES

Bullying, Harassment and Discrimination Procedure
Dignity Toolkit

10. EQUALITY

The equality issues associated with this policy have been considered and are detailed within the Equality Impact Assessment, to which interested parties are directed for associated equality issues, both directly and indirectly relevant to this policy.

APPENDIX B

People and Organisational Development



SCOTTISH
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PEOPLE AND ORGANISATIONAL DEVELOPMENT

BULLYING, HARASSMENT AND DISCRIMINATION PROCEDURE

Author/Role	Susan Gillan
Date of Risk Assessment (if applicable)	N/A
Date of Equality Impact Assessment	November 2020
Date of Impact Assessment (commenced)	N/A
Date of Impact Assessment (concluded)	N/A
Quality Control (name)	Roz Munro, HROD Manager (May 2021)
Authorised (name and date)	Rachael Scott, Deputy Head of POD
Last Reviewed (name and date)	
Date for Review	May 2026

VERSION HISTORY

Version	Change	Who	When
1.0	First version issued	Susan Gillan, HR Adviser	



BULLYING, HARASSMENT AND DISCRIMINATION PROCEDURE

- 1. INTRODUCTION**
- 2. ROLE OF CONTACT ADVISER**
- 3. RAISING A COMPLAINT**
- 4. INFORMAL PROCESS**
 - 4.1 Timescales**
 - 4.2 Dealing with anonymous complaints**
 - 4.3 Outcome of Informal Process**
- 5. FORMAL APPROACH**
 - 5.1 Grievance Procedure**
 - 5.2 Disciplinary Procedure**
- 6. RIGHT OF APPEAL**
- 7. EMPLOYER RESPONSIBILITIES**
- 8. CONTACTS**

1. INTRODUCTION

Everyone has the right to be treated with dignity and respect and the Scottish Fire and Rescue Service (SFRS) considers any attempt to undermine someone's dignity or an attempt to bully, harass or discriminate as a very serious matter. The SFRS Code of Conduct and the Dignity and Respect Policy outline the professional behaviours expected from employees.

This procedure outlines the process for handling instances of bullying, harassment and/or discrimination and is supplemented by the Dignity Toolkit which provides further advice, guidance and training.

These procedures clarify what employees and managers need to know, including how to raise a complaint, providing an overview of the processes and the methods used to resolve instances of bullying, harassment and discrimination, and determining possible courses of action and the support available.

Actions that may be viewed as bullying, harassment or discrimination are unacceptable at any level in the organisation and SFRS is committed to a zero-tolerance approach to unacceptable behaviour. Any complaint will be treated seriously and handled sensitively.

Every employee has a role to play in ensuring bullying, harassment or discrimination has no place in SFRS. It is in all of our interests that no one allows unacceptable behaviour to go unchecked – this means that even if you are not directly affected by bullying, harassment or discrimination but are aware that it is taking place you have a duty to do something. If you cannot intervene personally to stop this type of behaviour you should report it to a manager who can do something about it.

2. ROLE OF CONTACT ADVISERS

SFRS Contact Advisers can assist employees with enquiries, and provide information on policies and sources of help and support. A Contact Adviser can be the first point of contact for individuals who feel they have experienced, or have been accused of, bullying, harassment and/or discrimination. Contact Advisers will provide impartial and confidential support to help employees to understand what options and services are available to them.

Contact Advisers are volunteers from across SFRS and have all received training to support them to undertake this role. A list of Contact Advisers is available on iHub, where you can find out more about their location and how to get in touch with them.

3. RAISING A COMPLAINT

The definitions of what constitutes bullying, harassment or discrimination are set out within the Dignity and Respect Policy. If you feel that you have experienced or witnessed any such behaviour then we would encourage you to raise this with your line manager, or another appropriate manager, at the earliest opportunity.

If you feel that you have cause for complaint, you may also find it helpful to talk to others about the situation; friends or family, a work colleague, contact adviser, trade union representative or an HR Adviser to discuss your feelings or where you have witnessed another person being treated in an unacceptable way.

You may find it useful to have a note of the interactions that have given you cause for concern e.g. keeping a written note of the events with as much detail as possible may be helpful in the event that the behaviour continues and to support you in raising a complaint either informally or formally.

This could include:

- Location
- What happened
- Who was involved (including the names of witnesses)
- When it happened (including day, date, time)
- Why you think it happened
- How you responded (if at all)
- The duration and frequency
- How you felt

4. INFORMAL PROCESS

You may consider that informal resolution will resolve the situation, in the first instance. You may choose to approach the individual(s) and inform them the effect their behaviour is having

on you and ask that it stops. However, if you feel the behaviour breaches the SFRRS Code of Conduct then you must ensure this is reported to your line manager, or an alternative manager, if the concern is about your line manager. You should also consider discussing this with your Trade Union representative, Contact Adviser or a colleague who may be able to support you in dealing with your concerns.

Your line manager, in liaison with their Human Resource Business Partner (HRBP), will be able to advise you on which approach is most suitable pertaining to the individual circumstances of the case.

The informal approach is likely to be appropriate where you feel able to discuss the unacceptable behaviour directly with the alleged harasser on a one-to-one basis. This is a direct approach and is usually effective in dealing with recent, less serious situations, often resolving issues more quickly and with more success. Alternatively, your manager may do this on your behalf.

Talk to the person directly, explaining how their treatment of you makes you feel, that it is unwanted and describe the appropriate behaviour that you feel should be used. It may be that the behaviour is unintentional and would stop if they are made aware of it. If you do this, keep a calm and reasoned approach. You may do this on your own or ask for a third party to accompany you, this may be a colleague or a trade union representative.

When approaching the individual, remember that the purpose is to explain, discuss, listen and resolve the issue with the aim of having a harmonious working relationship. Avoid apportioning blame since the person may not have intended to cause you harm. However, it is important that you are able to describe how the behaviour makes you feel and the impact this has on you. You should aim to come to an agreement that the unacceptable behaviour will stop but if you feel that agreement cannot be reached simply restate your position and end the interaction.

Always:

- Seek agreement that the behaviour will stop
- Keep a note of the interaction either at the time or shortly afterwards

- After agreement has been reached you should continue to review the situation to ensure that a positive working relationship remains
- If no agreement was reached or the individual has not changed their behaviour despite agreeing to do so you may consider raising a complaint through the Service's Grievance Procedure
- If the complaint raised via the Grievance Procedure is considered serious from the outset, the complaint may proceed straight to Disciplinary investigation or alternatively may be considered under the Grievance procedure, heard by the complainant's line manager, or an alternative manager if the complaint is about your line manager

4.1 Timescales

There is a three-month timescale for bringing complaints and although all cases will be looked at on their own merit, only in exceptional circumstances will complaints outside of this time limit be considered. The three-month timescale begins from the date of the last alleged incident of concern. You should therefore consider raising a complaint at the earliest possible opportunity, particularly as this is most likely to assist in resolving the matter in a timely manner.

If your manager does address your complaint on your behalf, resolution may be achieved through a process of discussion between complainant and the alleged harasser, facilitated by a manager or other third party. Alternatively, other management interventions may be used between manager / complainant and manager / alleged harasser such as informal counselling or in some instances formal mediation carried out by a trained Advisory, Conciliation and Arbitration Service (ACAS) mediator may be appropriate.

4.2 Dealing with anonymous complaints

Individuals accused of unwanted or inappropriate behaviour must be given sufficient information to allow them to understand the complaint against them so that they can answer the allegation(s) and give a full account of their actions. In most cases this will involve identifying the individual who has made the complaint. Some individuals may raise a

complaint but may not want to be identified. The manager should offer reassurance and support in relation to any concerns raised. Where an anonymous complaint is received, and the identity of the complainant is unknown, the manager should conduct a brief preliminary fact finding to establish the facts, if possible, and consult with their HRBP on the next course of action. If it is determined that there is no substance to the issue(s) raised the matter will go no further. If evidence is found that there may be a case to answer, advice should be sought from the HRBP before proceeding further.

4.3 Outcome of Informal Process

Where your manager has dealt with this informally on your behalf, the complainant will be advised within 7 days of any outcome of the informal process, either verbally or in writing.

5. FORMAL APPROACH

5.1 Grievance Procedure

If the issue has not been resolved informally, or it is considered to be serious enough in the first instance, that it should be progressed formally. The individual can raise their complaint through the SFRS Grievance procedure, by submitting a formal grievance using the pro-forma contained within this procedure and which can be found on iHub. This procedure will be fully utilised to its conclusion. The complainant, if known, will receive appropriate feedback, in writing, on the outcome of the process, in line with GDPR regulations.

5.2 Disciplinary Procedure

Where the line manager, or alternative manager who was involved in the informal stage, decides that there is sufficient evidence of a case of bullying, harassment and discrimination to answer then another manager who is neutral and has not been involved in the informal stage should be appointed to investigate the complaint under the Disciplinary Policy and Procedure. This also applies where the complaint is such that it cannot be considered at this stage e.g. discrimination on the basis of a protected characteristic. The complainant, if known, will be advised of the requirement to attend a disciplinary investigation interview as a witness and no further information in relation to the outcome will be provided to them, in line with GDPR regulations. This procedure will be fully utilised to its conclusion. The supporting evidence, if already collected can be used for this purpose.

In cases which appear to involve allegations of serious misconduct, and there is reason to separate the parties, a short period of suspension or alternative duties/workplace of the

alleged bully/harasser may need to be considered while the case is being investigated. Further information can be found within the Disciplinary Policy and advice should be sought from the HRBP.

If there are any workplace acts of violence and/or threats, this should also be reported and recorded as a Health and Safety event in line with the Event Reporting Management Arrangement.

Where serious allegations of bullying, harassment and discrimination, indicative of systematic organisational failings such as inappropriate cultures or management styles, will, where the matter remains unresolved, be referred to a HROD Manager. The HROD Manager will then be required to review the matter reported to identify the root causes and raise this with the Director of People and Organisational Development who will delegate the matter to an appropriate manager to investigate.

If an allegation involves members of the Strategic Leadership Team, it should be submitted to the Chair of the Board who will delegate the matter for investigation by members of the People Committee.

There may also be cases where somebody makes an unfounded allegation of bullying and/or harassment for malicious reasons. These cases may also be investigated and dealt with fairly and objectively under the Disciplinary Policy and Procedure.

6. RIGHT OF APPEAL

There is no right of appeal within the Bullying, Harassment and Discrimination procedure. However, if the complainant or the alleged harasser is not satisfied that the procedure was followed correctly or if the complaint is not resolved using the informal approach, the formal grievance or disciplinary procedures may be used. These procedures contain their own individual rights of appeal.

7. EMPLOYER RESPONSIBILITIES

SFRS has a duty to protect the health, safety and welfare of its employees. In doing so, SFRS assesses risk and as far as reasonably practicable, protects employees from harm. Information on risks is provided on iHub and to mitigate risks, comprehensive training is provided. This includes information and training on how to reduce stress and towards improving wellbeing. Bullying, harassment, discrimination and victimisation are not only

unacceptable on moral grounds but can, if unchecked or poorly handled, lead to serious problems including:

- Poor morale and poor employee relations
- Loss of respect for managers and supervisors
- Poor performance
- Absence
- Resignations
- Damage to the reputation of SFRS
- Employment Tribunal and other court cases

It is in every employer's interests to promote a safe, healthy and fair environment in which people can flourish.

8. CONTACTS

The following is a list of resources and organisations for further information, guidance and support.

Advisory, Conciliation and Arbitration Service (ACAS)

(Also advises on bullying and provides training)

Tel: 08457 474747

Website: www.acas.org.uk

MENTAL HEALTH AND WELLBEING

SFRS Health and Wellbeing Resource

Samaritans

Tel: 08457 909 090

Website: www.samaritans.org.uk

SAMH

Tel: 0141 568 7000

Website: www.samh.org.uk

BULLYING

Workplace Bullying

Website: www.workplacebullying.co.uk

DISABILITIES**Disability on the Agenda**

Website: www.disability.gov.uk

EQUALITIES**Equality and Human Rights Commission Scotland**

Website: www.equalityhumanrights.com

RACE**Scottish Alliance of Regional Equality Councils**

Website: www.sareconline.wordpress.com

SEXUAL ORIENTATION**LGBT Helpline Scotland**

Website: www.lgbt-helpline-scotland.org.uk

Tel: 0300 123 252

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



Report No: C/PC/20-22

Agenda Item: 15.4

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	STATUTORY HEALTH AND MEDICAL SURVEILLANCE						
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>					
		A	B	C	D	E	F
1	Purpose						
1.1	The purpose of this report is to provide information on the current provision of 'fitness for work medicals', health and medical surveillance currently in place and to present an options appraisal, including recommendations on the implementation of further health and medical surveillance resource requirements not currently in place, following a gap analysis of 'at risk staff' (see appendix C.).						
2	Background						
2.1	Historically, all operational firefighting staff have undergone three yearly 'fitness for work medicals' carried out by Health and Wellbeing (HW). These include audiometry, spirometry and skin assessment, all components of health surveillance but not at the required frequency under the specific legislation i.e. Control of Noise at Work Regulations 2015 and the Control of Substances Hazardous to Health (COSHH) Regulations 2002. A referral process is in place for abnormal results to be reviewed by an Occupational Health Physician (OHP) through our external OH contract provision.						
2.2	During the formulation of some recent HW policies i.e. Health Surveillance and Pre-placement, further engagement with Safety and Legal colleagues assisted to determine other 'at risk' staff groups through the formulation of a risk assessment and gap analysis and whether health and medical surveillance applied to certain groups (see appendix C). This process identified staff who are now required to undergo health surveillance under the Control of Vibration at Work Regulations 2005 and this will be implemented by the HW team in Q3.						
2.3	Firefighters are classed as 'licensed workers' under the Control of Asbestos Regulations 2012 (CAR 12) Regulations. This means they currently are required by law, to undergo medical surveillance with an appointed doctor, every three years and this is not currently carried out within the Service. (see appendix B)						
2.4	Engagement has taken place with the Legal team and Safety and Assurance colleagues. Communications on implementation and the delivery model will be issued in due course.						
2.5	Compliance with CAR 12 and Ionising Radiation Regulations 2017 brings challenges and securing provision through the current provider has been difficult due to demographics and a national shortage of specialised doctors. Whilst health surveillance can be undertaken by the Scottish Fire and Rescue Service (SFRS) HW team, only appointed doctors on a National Register can carry out medical surveillance.						

2.6	Since the introduction of the legislation in 2012, the HSE have advised that all employers should be fully compliant with the statutory requirement to undertake medical surveillance and that all asbestos workers will need to have proof of completion of the medical for both licensed and notifiable non-licensed work to be carried out on or before 30 April 2015. (see appendix B)
2.7	Whilst it has been known that the CAR 12 Regulations applied to firefighters, since 2015, ongoing collaboration with the Safety and Assurance Team and recent research carried out by Safety and Assurance, has resulted in an outcome informing the prioritisation of certain staff groups e.g. Fire investigation staff and Urban Search and Rescue (USAR) and International Search and Rescue (ISAR) teams.
3	Main Report/Detail
3.1	Under the Control of Noise at Work Regulations 2015, the current practice of undertaking baseline audiometry and three yearly follow ups with annual retests and fireground hearing assessments meets the requirements of the legislation therefore there is no requirement for change with this. In terms of spirometry, due to the requirement to wear BA in firefighting, exposure to respiratory sensitisers is controlled, and therefore the three yearly follow up, with annual for those with sub-optimal readings, meets the health surveillance requirements under the COSHH Regulations 2002. Three yearly skin assessments also meet the regulations for health surveillance under the COSHH Regulations 2002. If health surveillance is not undertaken this would expose the service to legal challenge and the risk of an individual developing occupational injury or disease.
3.2	Implementation of health surveillance under the Control of Vibration at Work Regulations 2005 is required by issuing annual hand arm vibration questionnaires, following up with further questionnaires and specialised screening where symptoms are identified in at-risk staff (see appendix C). This will be implemented in Q3. Refresher training will be required for practitioners to undertake Tier 3 hand arm vibration assessments.
3.3	For SFRS to become compliant with CAR 12 medical surveillance, an HSE approved doctor is needed to carry out the medical examination that includes completion of an examination form, spirometry and chest examination, resulting in the employee being issued with a certificate stating they are fit to work with asbestos. This would enable a record to be kept by SFRS of all medical examinations, ensuring the wellbeing of staff. There are currently 28 Scottish based appointed doctors who have be approached for assistance.
3.4	The options appraisal for asbestos medical surveillance to SFRS staff is based on circa 2000 per annum eligible operational staff.
3.5	It may also be prudent to consider the requirement to have access to appointed doctors who can carry out other legislative medical surveillance if deemed to be required in the future e.g. under the Ionising Radiation Regulations 2017. This will be covered by the new OHP contract.
3.6	Options appraisal
3.6.1	The options detailed in Appendix A have been identified and appraised, with recommendation as outlined below in section 4.
3.7	Information Governance
3.7.1	<i>DPIA NOT completed.</i> The DPIA required for this will be covered by the DPIA relating to both the Pre- placement policy and the Health Surveillance policy.

3.8	Equalities	
3.8.1	<i>EIA NOT completed.</i> The EIA will be covered by the EIA relating to both the Pre- placement policy and the Health Surveillance policy.	
3.9	On appraisal, Option five is the preferred route and was recommended to the Strategic Leadership Team (SLT). This recommendation was made on the basis that option five is likely the most cost-effective provision for SFRS, and should allow facilitation of these medicals locally reducing the impact on service delivery and reducing the need for travel by staff, whilst achieving compliance with the HSE regulations. Option 4 will be used by exception where there is a shortfall of availability of appointed doctors as per option 5.	
3.10	The indicative cost of the recommended option is up to £xxx per annum, however, the full cost cannot be determined until the availability of appointed doctors has been determined.	
3.11	It is recommended that the programme commences at the earliest opportunity by using interested appointed doctors on a risk based approach. This may commence with Fire Investigation staff followed by Urban Search and Rescue (USAR) and International Search and Rescue (ISAR) staff. Collaboration will take place with Safety and Assurance and Response and Resilience regarding an appropriate risk-based roll out.	
4	Recommendation	
4.1	The contents of this paper are for Information only. People Committee is asked to note the recommendations contained in this paper, following approval by the Strategic Leadership Team (SLT).	
5	Core Brief	
5.1	Not applicable	
6	Appendices/Further Reading	
6.1	Appendix A - Options Appraisal	
6.2	Appendix B - CFOA and HSE correspondence	
6.3	Appendix C - Risk Table and Gap Analysis	
6.4	<u>Further Reading:</u> Occupational physicians' pay scales (bma.org.uk) HSE and the work of appointed doctors https://www.hse.gov.uk/pubns/ms31.pdf	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Appropriately to Main Report/Detail	Added Yes
Prepared by:	Liz Muir, Clinical Lead.	
Sponsored by:	Liz Barnes, Director of People and Organisational Development	
Presented by:	Justin Smithson, Clinical Lead, Health and Wellbeing/Sandra Haig, Health and Wellbeing Manager.	
Links to Strategy and Corporate Values		
Strategic Plan 2019-22 Outcome 3; We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative services. Objective 3.3; We will care for our people through progressive health, safety and wellbeing arrangements.		

This also links to SFRS Values of Safety, Teamwork, Respect and Innovation		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People and Organisational Development Directorate Management Team</i>	<i>23 November 2021</i>	<i>For recommendation</i>
<i>National Safety Assurance Board</i>	<i>02 December 2021</i>	<i>For information</i>
<i>Strategic Leadership Team</i>	<i>22 March 2022</i>	<i>For decision</i>
<i>People Committee</i>	<i>02 June 2022</i>	<i>For information</i>
<i>Contaminants Group</i>	<i>23 May 2022</i>	<i>For information</i>
<i>Employee Partnership Forum</i>	<i>18 August 2022</i>	<i>For information</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Information</i>

Options Appraisal

Medical Surveillance Options:

There are five options to consider for the delivery of medical surveillance in relation to CAR 12.

Option one

SFRS continue with the status quo, in that the medical surveillance element and SFRS do not comply with the CAR 12 regulations. This is not considered to be a viable option as we are required by law to comply.

Option two

This option is for this work to be managed and carried out by an external provider. The cost is based on information from the former OHP providers, Optima. They have no HSE approved OHPs and therefore would be unable to carry out this service. They would have to source the provision of an HSE approved OHP to carry out the medical surveillance and the costings have been quoted as £xxx. (£xxxx p.a.) This does not take into consideration travel time and travel and accommodation costs. This is not considered to be a viable option as the costs are the most significant.

Option three

To recruit an Appointed Doctor who would also be an OHP to be employed directly by SFRS to carry out the medical surveillance for all operational employees. The proposed salary would be circa £xxxx to £xxxxx annually depending on experience. There is a national shortage of OHPs who are appointed doctors and the requirement to undertake these high numbers of asbestos medicals per annum would not be attractive to OHPs who would prefer a wider remit. This would also require extensive travel and subsistence costs for a single OHP covering SFRS wide therefore is not considered to be a viable option.

Option four

Seek a new specific contract with a new OH provider. The contracted service could provide the service to areas where the ad hoc doctor cannot provide cover. If all 2000 medicals were carried out under this option, the cost would be £xxx per annum. This not considered to be a viable option on its own, however is recommended as a blended approach alongside option 5.

Option five

To appoint a bank of 'ad hoc' Appointed Doctors who are already HSE appointed doctors to be contracted by SFRS to carry out the medicals. These OHPs would be required to provide their annual availability of where and when they can work, including the possibility of working weekends. They would be paid on a day rate of up to £xxx per day (calculated at minimum 100 days per annum at an expected rate of undertaking 3 per hour / 20 cases per day) = £xxxxx per annum.

Some appointed doctors have quoted on a per medical basis with the cheapest quoted by one appointed doctor at £xxx per medical, undertaking a shortened form of medical if spirometry carried out by technicians as agreed by the appointed doctor. This method is calculated at a cost of £xxxxx per annum. Both above quotation of costs excludes travel costs and time. The most expensive quotation on a per medical basis is £xxx per medical = £xxxx p.a. Average costs are £xxx per medical £xxxxxx p.a.

It has not been possible to calculate travel costs as this will depend on the doctors' bases. The planning would require to be managed by the HW team. This is a viable option providing enough of the 28 Scotland based appointed doctors were available and interested in ad hoc work. However, as this is a statutory requirement which the Service needs to implement at the earliest opportunity, a combination of option 4 and 5 would be required.

This is the recommended model (with option 4 utilised **should** there be a shortfall in availability).



CFOA
Publications

Circular

Title: Control of Asbestos Regulations 2012 (CAR 12) – Appointed Doctors

Reference Number: 2015-06

Date Issued: 8 May 2015

For the attention of: Chief Fire Officers, Operations Managers, Health and Safety Managers, HR Managers

Distribution

CFOA Members Fire & Rescue Service General Public

Relevant to:

England Northern Ireland Scotland Wales

Related Documentation: CFOA Circulars [2013-29](#), [2014-03](#), [2014-13](#); Control of Asbestos Regulations 2012; letter to all CFOs dated July 2013

Further Information or Discussion: [Mark Yates](#), Health & Safety Strategic Lead Officer

Issued by: CFOA HQ

Approved by: Roy Wilsher, Director of Operations

Summary

The matter of the Control of Asbestos Regulations 2012 (CAR 12) and their applicability to FRSs has been the subject of a number of CFOA Circulars (2013-29, 2014-03 and 2014-13). These circulars have covered two aspects of CAR 12: exemption from the requirements for notification to HSE when working with asbestos; and the requirements for medical surveillance for asbestos workers, in this particular case, FRS staff who may be conditioned to work in the operational arena.

Exemption from Notification to HSE

In accordance with CFOA Circular 2014-03 all FRSs in England, Scotland and Wales have now submitted an application for exemption from notifying the HSE when working with asbestos in the operational arena. Applications for exemption were based upon the method statement agreed between CFOA and the HSE and all FRSs have subsequently received a letter from the HSE confirming the exemption from this particular aspect of CAR 12.

Medical Requirements

CAR 12 requires asbestos workers to receive an 'asbestos medical' conducted by an Appointed Doctor every two years. During the past two years the CFOA Lead Officer for Health and Safety has been in discussions with the HSE regarding this requirement. In order to establish the medical surveillance provisions across UK FRSs a survey was completed by all FRSs in 2013 (Circular 2013-29 applies), which in turn informed the HSE of the extensive medical surveillance taking place across UK FRSs. Based upon the previous discussions and the results of the survey, the HSE agreed that the current practice of three yearly medicals was considered satisfactory for fire fighting staff in relation to asbestos worker monitoring. This position was set out in Circular 2014-13, which was accompanied by written correspondence from the HSE.

The matter of the requirement for Appointed Doctors to conduct FRS (asbestos) medicals was discussed informally, but until recently there was a general moratorium by the HSE on appointing Appointed Doctors and as such the matter didn't progress beyond informal discussions. This moratorium was lifted for the specific purpose of applications from FRS Occupational Physicians only and was referenced in a letter to CFOs in July 2013 (attached to this Circular).

Since that time the general moratorium has been lifted and the matter of Appointed Doctors has been raised by the HSE with the Lead Officer for Health and Safety (see attached letter dated 22 January 2015). Since receipt of the letter in January the Lead Officer has been in on-going discussions with HSE officers to ensure there is awareness of the financial and logistical implications of Appointed Doctor medicals in FRSs.

Action Required

The HSE (letter of 22 January 2015) has confirmed the requirement for all FRSs to ensure that firefighters who may be exposed to asbestos are '*under adequate medical surveillance by a relevant doctor*'. It can be seen from the HSE's correspondence that this does not necessarily mean the medical must be carried out by the Appointed Doctor, as HSE guidance allows for some elements of the medical examination to be delegated to **suitably trained and competent** nurses or occupational health technicians. Therefore for those FRSs that have nurse-led medicals, it does not necessarily mean any significant change to that process, provided that an Appointed Doctor has given relevant delegations to the person performing medicals and adequate oversight is in place. However, it must be emphasised that the decision on what aspects of the medical, (all, some or none) can be delegated lies entirely with each individual Appointed Doctor and is not prescribed by legislation nor the HSE.

The process for an Occupational Physician to achieve 'Appointed' status is relatively simple and involves nothing more than an electronic application. A guidance note is attached to this Circular to assist all FRSs and their Occupational Health providers.

HSE Monitoring

The letter from the HSE (22 January 2015) indicates that FRSs will be contacted in the second half of 2015 to establish 'the extent to which doctors have been appointed for the purposes of the regulations.' Discussions are taking place with the HSE to establish how this contact will be made and how CFOA may assist with this process.



CFOA
Chief Fire Officers
Association

The professional voice of the
UK Fire & Rescue Service

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To all Chief Fire Officers

23rd July 2013

Dear Colleague,

Control of Asbestos Regulations 2012 (CAR 12)

I write to you about the implications of the above regulations as the matter is currently shrouded in uncertainty and subject to various discussions around the country. If the Control of Asbestos Regulations 2012 (CAR 12) are accepted as written then it is clear that staff who may be conditioned to attending operational incidents are 'asbestos workers'. However, it is fair to say that there is a sympathetic but informal view from the HSE that FRSs may be the victims of unintended consequences in relation to the medical requirements of CAR 12.

FRSs currently hold an exemption certificate in respect of licensing and notification when working with asbestos, for obvious reasons FRSs do not have to give advanced notification of working with asbestos. However, this exemption does not extend to the requirement for medical surveillance of asbestos workers. The requirement in CAR 12 is for those workers undertaking licensable work to undergo medical surveillance every 2 years by an Appointed Doctor (AD). As the work of firefighters would be licensable under CAR 12 the requirement as it stands is therefore for firefighters to undergo medical surveillance every 2 years by an HSE agreed AD. It is fair to say that FRSs haven't been that well sighted on this requirement and not many (if any) services carry out two yearly asbestos medicals using an Appointed Doctor (AD).

You will have noticed from CFOA Circular 2013-39 that I am working closely with the HSE to explore whether there may be a way of exempting firefighters from the two yearly requirement for medicals with an AD based on the very infrequent and perhaps never-at-all exposure to asbestos. It is clear from my work with the HSE that they are very sympathetic to the implications of this requirement, hence they are exploring ways to remove the requirement. The above mentioned Circular asked for medical surveillance information to assist the HSE to assess the impact of the medical requirements of CAR 12 on FRSs. You will note that no FRS is being pursued for non-compliance with the full medical requirements of CAR 12 as they stand.

As CAR 12 currently stands, the HSE recognises some FRSs may want access to ADs who can undertake statutory asbestos medicals; they also appreciate that the number of firefighter medicals required may greatly exceed the number that are currently (or could be) conducted by existing ADs. Therefore, on this basis, the HSE will make exceptions to the moratorium on new applications for doctors who need to gain an appointment in order to carry out statutory asbestos medicals for the FRS.

In practice, this means that FRSs will be able to use either an existing Appointed Doctor (see link to list at: www.hse.gov.uk/doctors/index.htm) or another doctor of their choice newly appointed by the HSE for this purpose.

In order for the HSE to consider an application for a new appointment, the FRS's preferred doctor must meet certain criteria and provide the relevant information detailed on HSE's website (www.hse.gov.uk/doctors/information.htm). If their application is satisfactory, HSE will appoint the doctor for 12 months in the first instance. During this initial period, the newly appointed doctor will only be able to carry out asbestos medicals under CAR 12 for one organisation (the FRS).

The link given above provides full details of the procedures for appointing and reviewing doctors.

I continue to work with the HSE to ensure they have a full and accurate understanding of medical surveillance in the FRS in order to develop a sustainable solution for the future that considers the impact of these requirements on FRS. However, I do need to say that there are no guarantees around this work and I make no promises as to whether the current medical requirements will remain or be amended.

This is not an ideal position in which to find ourselves but it is where we are so I will try to do my best to keep you informed and continue the positive discussions with the HSE. Please give me a call if you want to discuss this matter any further.

Yours sincerely,

Yours sincerely



Mark Yates
CFOA Lead for Health and Safety

Tel: 01905 368201 (via Lisa)
Mobile: 07768733849
Email: myates@hwfire.org.uk



Health and Safety
Executive

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Reference

Public Services Sector

William Hazleton

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Tel: 020 7556 2100
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Bill.hazleton@hse.gsi.gov.uk

<http://www.hse.gov.uk/>

Head of Sector
Mr Geoff Cox

Date 22 Jan 2015

Dear Mark

CONTROL OF ASBESTOS REGULATIONS 2012

My letter of 16 October about the Control of Asbestos Regulations (CAR) and specifically HSE's position on enforcement regarding the frequency of medical surveillance, has prompted a number of enquiries about the requirement for medical surveillance to be undertaken by an appointed doctor.

This requirement is included in Regulation 22 which states that each employee who is exposed to asbestos should be "under adequate medical surveillance by a relevant doctor". Where the work with asbestos is licensable, a "relevant doctor" is one appointed in writing by HSE for the purposes of the regulations.

The Approved Code of Practice for regulation 22 of CAR goes on to state that the medical surveillance for a person who carries out licensable work must include a medical examination undertaken by an appointed doctor. Further guidance published by HSE (see <http://www.hse.gov.uk/doctors/information.htm>) allows for some elements of the medical examination to be delegated to suitably trained and competent nurses or occupational health technicians. However, overall responsibility for the medical examination remains with the appointed doctor.

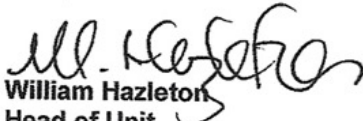
I understand that availability of appointed doctors has been a concern in the past so you may be interested to learn that HSE recently raised its moratorium on appointing new doctors. Further details can be found on our website at <http://www.hse.gov.uk/doctors/index.htm>

HSE has published a list of appointed doctors on its website at
<http://webcommunities.hse.gov.uk/connect.ti/appointeddoctors/view?objectid=28019>.

HSE will appoint new doctors providing they meet our appointment criteria – see
<http://www.hse.gov.uk/doctors/information.htm#appointment>

HSE intends to contact FRS in the second half of 2015 in order to determine the extent to which doctors have been appointed for the purposes of the regulations. In the meantime, please do not hesitate to contact me should you wish to discuss this further.

Yours sincerely


William Hazleton
Head of Unit
Defence and Public Protection

APPENDIX C

Gap analysis of 'at risk' staff

TASKS INVOLVED	SPECIFIC HAZARD	HW CONTROL MEASURES IN PLACE	PERSONS AFFECTED	ADDITIONAL CONTROL MEASURES REQUIRED
B1 Working with various equipment	Noise	Assessment outcomes, Health Surveillance HJ1 Audiometry carried out at recruitment and 3 yearly intervals. Annual reviews H3 – H5 category. Audio referrals when required. Practical Hearing assessments carried out when required. Refer to GP with any abnormal results for further investigations	Operational employees Fleet Training Instructors	Frequency increased for Health Surveillance purposes would be annual for the first 2 years and then 3 yearly. Noise reports to be provided on specific employees HSE - Noise: Publications
	Vibration	Assessment outcomes, Health Surveillance in the form of pre-placement and annual questionnaires. Follow up Tiers 3-5 if symptomatic	Employees exposed to long term vibratory equipment (tbc)	HAVS Questionnaire to be completed annually with required follow up if symptomatic (Not currently carried out) Annual Questionnaire for Tier 3 and 4 HAVS Refresher Training required HAVS Equipment would require to be purchased Health surveillance for Hand-arm vibration syndrome (hse.gov.uk)
	Substances e.g. oils	COSHH assessments, Health Surveillance Skin surveillance is carried out at Recruitment and at 3 yearly medicals in the form of a questionnaire.	Any employee exposed to substances	Health Promotion/awareness

		Skin referral when required to GP out with medicals Spirometry is also carried out for inhalation of respiratory sensitisers		
	Manual Handling	Manual Handling Assessments, Health Surveillance MSK working Group For operational employee's functional fitness assessments	All employees	Health Promotion/awareness
B2 Working with DSE	Ergonomic/Musculoskeletal	DSE assessments, Health surveillance Provision of contacted Physiotherapy Services Management Referral process LCMS Online DSE assessment Access to Work	Employees working within office environment	Health Promotion/awareness
B3 Attending various fires	Substances hazardous to health/contaminants e.g. PAHs	SOPs, Contaminants POG, Health Surveillance Spirometry Skin surveillance Medical referral process in place Prostate Cancer awareness project currently in place Engagement with cancer support charities Ihub section with support networks Research discussed	Operational employees	Health promotion/awareness Training required Medical Advisor may require to be employed
	Body fluids	SOPs, Health Surveillance Case by case basis Management referral process	Operational employees	Health awareness

	Ionising radiation	SOPs, Medical surveillance by an appointed Medical Advisor for exposure to radiation Case by case basis Management Referral process	Operational employees	<p>Medical Surveillance required by an approved Medical Advisor. The medical advisor must consider features of the work with ionising radiation and the fitness of the individual where appropriate:</p> <p>To wear any PPE (including RPE) required to restrict exposure;</p> <p>with a skin disease,</p> <p>to undertake work involving unsealed radioactive materials;</p> <p>with psychiatric illness or personality disorder, to undertake work with radiation sources that involve a special level of responsibility for safety;</p> <p>with a history of chronic pulmonary disease, blood disorder, treatment with cytotoxic drugs, inherited predisposition to cancers, or previous significant medical exposure to ionising radiation.</p> <p>Ionising Radiations Regulations 2017 ISBN 978 0 7176 6662 1</p>
	Lead	SOPs, Medical surveillance by an appointed Medical Advisor Case by case basis Management Referral process	Operational employees	<p>Medical Surveillance required by an approved Medical Advisor</p> <p>Blood lead levels</p> <p>Urinary levels</p> <p>Control of Lead Regulations ISBN 978 0 7176 2565 6</p>
B4 Undertaking search and rescue/ structure stability	Asbestos	SOPs, Medical surveillance by an appointed Medical Advisor Case by case basis Management Referral process	Operational employees Fleet	<p>Medical Surveillance required by an approved Medical Advisor.</p> <p>The employer must include a health record that is maintained and contains approved by the Executive for all that employer's employees who are exposed to asbestos;</p> <p>and that record, or a copy of that record is kept available in a suitable form for at least 40 years from the date of the last entry made in it;</p> <p>and each employee who is exposed to asbestos is under adequate</p>

				<p>medical surveillance by a relevant doctor.</p> <p>The medical surveillance should include:</p> <p>a medical examination not more than 3 years before the beginning of such exposure; and a periodic medical examination at intervals of at least once every 3 years or such shorter time as the relevant doctor may require while such exposure continues</p> <p>and each such medical examination must include a specific examination of the chest.</p> <p>Control of Asbestos Regulations 2012 ISBN 978 0 7176 6618 8</p>
	Silica dust	<p>SOPs, Medical surveillance by an appointed Medical Advisor Case by case basis Management Referral process</p>	<p>Operational employees USAR ISAR</p>	<p>Medical Surveillance required by an approved Medical Advisor. The precise form of health surveillance will depend on the circumstances of exposure (level, frequency and duration) identified by the risk assessment. This may include:</p> <p>health and working history questionnaires;</p> <p>lung function tests;</p> <p>chest X-rays (these will only be undertaken if the doctor feels they are necessary).</p> <p>Control of Exposure to Silica Dust ISBN 9780717665785</p>
	Body Fluids	<p>SOPs, Health Surveillance Case by case basis A&E/GP</p>	<p>Operational employees</p>	<p>Health advice.</p>
	Lead	<p>SOPs, Medical surveillance by an appointed Medical Advisor Case by case basis Management Referral process</p>	<p>Operational employees</p>	<p>Medical Surveillance required by an approved Medical Advisor</p> <p>Blood lead levels</p> <p>Urinary levels</p> <p>Control of Lead Regulations ISBN 978 0 7176 2565 6</p>

B5 Cleaning of PPE/Equipment	Substances hazardous to health/contaminants	SSOW, TINS, POGs	Operational employees	
B6 Night work/shift work	Fatigue, concentration	Rota system, Health Surveillance	Operational employees/OSC staff/Workshop/Communication Engineers	<p>Night worker questionnaire to be completed annually.</p> <p>Employers must offer workers a free health assessment before they become a night worker. Workers do not have to accept.</p> <p>The worker must get a follow-up examination by a health professional when an employer is unsure if the worker is fit for night work.</p> <p>A repeat assessment must be offered regularly.</p>

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/23-22

Agenda Item: 16.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
Report Title:	POD POLICY REVIEW SCHEDULE UPDATE						
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 (PC) with an update regarding ongoing work in relation to People and Organisational 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 of 31 March 2022 is attached as Appendix A. The schedule has been reviewed taking into account the Directorate Plan and priorities for 2022, with a focus on essential policies and the stakeholder engagement required moving forward.						
3.2	During quarter 4, the following policies were published: <ul style="list-style-type: none"> Dignity and Respect Policy Pre-Placement Policy 						
3.3	To support the Dignity and Respect Policy, 8 Contact Advisers are now in place, a mix of uniformed, support and control staff. They can offer confidential support for individuals who feel they have experienced, or have been accused of bullying, harassment and/or discrimination, as well as recognising when and how to signpost individuals to sources of specialist support.						
3.4	During this quarter, the following policy was issued for first consultation: <ul style="list-style-type: none"> Recognition of Prior Learning (RPL) 						
3.5	SFRS recognises that our people may have gained valuable knowledge, skills, experience or qualifications prior to joining the Service or moving into a new role.						

3.6	Where this is the case, the Service, with support from relevant awarding bodies, will consider each application based on its own merit.
3.7	The policy aims to allow the assessment and recognition of prior learning or experience to support our people work in agile and smart ways to support our Service priorities. The RPL policy is relevant to those new to the Service and our existing people who wish to move or progress their careers.
3.8	The Working Together Framework returned to Strategic Leadership Team (SLT) in March and will be presented again at a later date, following additional feedback from the Fire Brigades Union.
3.9	Consultation on the Statutory Health and Medical Surveillance Policy has been paused pending a review of options for delivering medical surveillance which has been referred to SLT. Once the future options are agreed, the policy consultation process will recommence.
3.10	Workshops with Representative Bodies to review the Secondary Employment Policy (includes in-scope driving), were held at the end of February/March. This feedback has been collated and will now be considered by the Task and Finish Group established in August 2021, prior to progressing through governance process. Initial feedback suggested little or no change around the Policy itself, with more discussion around the Manager/Employee Guide and the role of the manager in checking tachographs.
3.11	The piece of work around the review of POD Policies for 2022 has now been concluded, with work progressing during the next financial year (Details are attached in Appendix A).
3.12	Looking ahead to quarter 1, the following policies will be issued for first consultation: <ul style="list-style-type: none"> • Managing Employee Performance Policy (formerly Capability Policy) • Secondary Employment Policy (includes in-scope driving)
3.13	The Employee Recognition Scheme was launched in April 2022 in the form of a video from the Deputy Chief Officer and 2 communication articles. This was followed up with a second video to encourage staff to consider nominations.
4	Recommendation
4.1	People Committee are asked to note the information included in this paper. The individual POD Policies detailed above, are progressed through the relevant governance route for approval by People Board and where appropriate, the SLT. Any Key Strategic Implications will be detailed within the supporting report for each policy and discussed at that time.
5	Core Brief
5.1	The People Committee are provided with the revised POD Policy Review Schedule detailing a summary of ongoing work in relation to POD Policies. The latest version of the POD Policy Review Schedule, as of 31 March 2022, is attached as Appendix A.
6	Appendices/Further Reading
6.1	Appendix A – POD Policy Review Schedule
7	Key Strategic Implications
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above) Yes

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 Directorate Management Team</i>	<i>12 April 2022</i>	<i>For Decision</i>
<i>People Board</i>	<i>27 April 2022</i>	<i>For Information Only</i>
<i>Employee Partnership Forum</i>	<i>19 May 2022</i>	<i>For Information Only</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For Information Only</i>

APPENDIX A

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	Apr-22	2027
Working Together Framework	Revised	July 21	TBC	2027
Consultation and Negotiation	Revised	July 21	TBC	2027
Whistleblowing	Revised	Oct 21	Apr-22	2027
Family (Maternity, Paternity, Adoption, Parental, Shared Parental & Carers) Leave	Revised	Oct-21	Jun-22	2027
Recognition of Prior Learning	New	Mar 22	Jul-22	2027
Managing Employee Performance(Capability)	Revised	Apr-22	Aug-22	2027
Secondary Employment (includes inscope driving)	New	May 22	Jul-22	2027
Statutory Health and Medical Surveillance Policy	New	TBC	TBC	2027
Uniformed Managers In-Development to Competent	Revised	2022	TBC	2027
Recruitment and Selection	Revised	2022	TBC	2027
Reservists	Revised	2022	TBC	2027
Redeployment	Revised	2022	TBC	2027
Pay Protection (Support Staff)	Revised	2022	TBC	2027
Death in Service	Revised	2022	TBC	2027
Flexi-Time Scheme (Support Staff)	Revised	2022	TBC	2027
Temporary Promotions Procedure	Revised	2022	TBC	2027
Trainee Firefighter Development to Competent	Revised	2022	TBC	TBC
RDS Dual Contracts	New	2022 TBC - To be scoped once agreement reached on standardisation offer	—	TBC
RDS Annual Leave and Public Holiday Policy	New	2022 TBC - To be scoped once agreement reached on standardisation offer	—	TBC
RDS Payment for Work Activities	New	2022 TBC - To be scoped once agreement reached on standardisation offer	—	TBC
Further/Higher Education (Qualification) Policy	Revised	—	—	TBC
Exit Interviews Policy and Procedure	Revised	—	—	TBC
Grievance	Revised	—	—	TBC
Health and Wellbeing Policy	New	—	—	TBC
Working Hours (Day Duty) Policy	New	—	—	TBC
Clinical Supervision Policy	New	—	—	TBC
Appraisal Policy and Procedures	Revised	—	—	TBC
Relocation	Revised	—	—	TBC
Market Allowance Policy	Revised	—	—	TBC
No Smoking	Revised	—	—	TBC
Career Break	Revised	—	—	TBC
Attendance During Adverse Weather and Disruptive Conditions	Revised	—	—	TBC

Job Evaluation	Revised	-	-	TBC
ID Cards Policy and Procedure	Revised	-	-	TBC
Physiotherapy Policy	New	-	-	TBC
Substance Misuse Policy	New	-	-	TBC
Detached Duty Policy	Revised	-	-	TBC
ARA Policy	Revised	-	-	TBC
Code of Conduct	Revised	-	-	TBC
Transfer Request Policy	Revised	-	-	TBC
Firefighter Fitness Standards and Assessments Policy/Procedure	Revised	-	-	TBC
Induction Process	Revised	-	-	TBC
TOIL (Uniformed) Policy	Revised	-	-	TBC
Transfer of Uniformed Employees Policy	Revised	-	-	TBC
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
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
Re-Employment Policy	Revised	-	-	2026
Dignity and Integrity at Work Policy and Handbook (Bullying and Harassment)	Revised	-	-	2027
Pre Placement Policy	Revised	-	-	2027

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
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Report No: C/PC/27-22

Agenda Item: 16.2

Report to:	PEOPLE COMMITTEE						
Meeting Date:	21 JUNE 2022						
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 (PC), with an update regarding ongoing work in relation to the development and review of the Scottish Fire and Rescue Service's (SFRS) 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 HS Management Arrangements to support the implementation of the commitment and responsibilities outlined within the HS Policy.						
3	Main Report/Detail						
3.1	This report shows progress made against the 2019-2024 HS Policy and Management Arrangements (MA's) Forward Planning Schedule up to and including 2022-2023. Appendix A provides an overview of the current position.						
3.2	At present, there are no new MAs scheduled for development by the HS Department. The agreed suite of MAs identified for development and publication within the 2019-2024 forward plan schedule was completed within the 2021-22 financial year. To ensure ongoing legal compliance and currency of guidance, the HS Department continue to review and update the suite of MAs and will develop any new MAs required as required. The planned MA reviews for 2022-23 are detailed in Appendix A						
3.3	<p>The review processes implemented to maintain the currency of HS MAs is managed as follows:</p> <ul style="list-style-type: none"> All existing HS MAs have a next review date applied to the document, ranging from Annual review to either 3 or 5 yearly reviews dependant on MA topic and risk profile; Changes to legislation, guidance and prosecution outcomes are monitored by the HS Department to ensure all arrangements are kept current and legally compliant. The HS Department are developing Legal Register which will automatically notify HS of any changes to legislation, guidance or prosecutions outcomes that affect SFRS documents; Any ad-hoc changes to procedure or processes that may be identified through directorate or strategic consultations and communications are recorded within the MA change log and prioritised based on risk level to the organisation (high/med/low). 						

4	Recommendation	
4.1	The People Committee is asked to note the progress of the 2019-24 Health and Safety Policy and Management Arrangements Forward Planning Schedule.	
5	Core Brief	
5.1	Not Applicable	
6	Appendices/Further Reading	
6.1	Appendix A – Health and Safety Policy and Management Arrangements Forward Planning Schedule.	
7	Key Strategic Implications	
7.1	Key Strategic Implications Considered and those Identified Added Appropriately to Main Report/Detail (Section 3. Above)	Yes
Prepared by:	Mark Penman, Senior Health and Safety Advisor	
Sponsored by:	Andy Watt, Assistant Chief Officer, Director of Training, Safety and Assurance	
Presented by:	Andy Watt, Assistant Chief Officer, Director of Training, 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>09 June 2022</i>	<i>For information only</i>
<i>People Committee</i>	<i>21 June 2022</i>	<i>For information only</i>

APPENDIX A

Health, Safety and Wellbeing Policy and Management Arrangements Forward Planning Schedule 2022-2023

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
Health and Safety Policy	Review	2022-23		Issued 06/06/22				Draft version with DHSA for approval
Health and Safety Policy Statement	Review	2022-23		Issued 06/06/22				Pending agreement of Policy review
PUWER MA (carry-over from 21/22)	Review	2022/23						Review in progress to incorporate Plant & Equipment MA into PUWER MA
HS Representatives Management Arrangement V4.0 & LCMS Module	Review	2022-23						Q1 Review in progress
HS Audits (Support Review) Management Arrangement & LCMS Module	Review	2022-23						Q1 Review in progress

Safety and Assurance Engagement and Governance Management Arrangement V6.0 and LCMS module	Review	2022-23						Q1 Review in progress
Workplace Transport Management Arrangement V7.0 and LCMS module	Review	2022-23						Q1 Review in progress
Control of Substances Hazardous to Health (COSHH) Management Arrangement (Carry over from 2021-22)	Review	Carried over from 2021/22						Q1 review in progress
DSE Homeworking MA V3.0	Review	Carried over from 2021/22						Q1 review in progress
Personal Protective Equipment (Including Respiratory Protective Equipment) Management Arrangement V10.0 & LCMS Module	Review	2022-23						Review scheduled Q2
Asbestos Management Arrangement V4.0 and LCMS module	Review	2022-23						Review scheduled Q2
Management Self Audit Management Arrangement V3.0 and LCMS module	Review	2022-23						Review scheduled Q2
DSEAR Management Arrangement V7.0 and LCMS module	Review	2022-23						Review scheduled Q3

COVID-19 Workplace Risk Assessment Management Arrangement V10.0 & LCMS module	Review	2022-23						Review scheduled Q3 (review in progress)
First Aid Management Arrangement V6.0	Review	2022-23						Review scheduled Q4
Premises Inspection Management Arrangement V6.0 and LCMS module	Review	2022-23						Review scheduled Q4
Joint Investigation Protocol between the SFRS and Representative Bodies V 3.0	Review	2022-23						Version 3.0 published 20/04/22

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

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
5 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 Summary and Committee Aligned Directorate Risks • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: Policy Forward Planning Schedule Update, 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 • Staffing Tactical Action Group Update (AW/LG 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update • HS Policy and Policy Statement • Rehabilitation and Physiotherapy Service provision (S Haig) • 		

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 Summary and Committee Aligned Directorate Risks • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: Policy Forward Planning Schedule Update, 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"> • Positive Action Strategy (E Gerrard) • Staffing Tactical Action Group Update (AW/LG) 	<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 Summary and Committee Aligned Directorate Risks • RANSc Update (Private Session) • Key Case Update (Private) • Forward Planning: Policy Forward Planning Schedule Update, 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 • Staffing Tactical Action Group Update (AW/LG) 	<ul style="list-style-type: none"> • Independent Audit/ Inspection Action Plan Update 		