



**SCOTTISH**  
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**PUBLIC MEETING - CHANGE COMMITTEE**

**THURSDAY 10 AUGUST 2023 @ 1000 HRS**

**BRAIDWOOD SUITE, SCOTTISH FIRE AND RESCUE SERVICE HEADQUARTERS,  
WESTBURN DRIVE, CAMBUSLANG, G72 7NA / CONFERENCE FACILITIES**

**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: 11 MAY 2023 (attached)**

*F Thorburn*

*The Committee is asked to approve the minutes of the meeting.*

**6 ACTION LOG (attached)**

*Board Support*

*The Committee is asked to note the updated Action Log and approve the closed actions.*

**7 CHANGE PORTFOLIO/MAJOR PROJECTS**

7.1 Programme Project Highlight Report (attached)

*R Robison*

7.2 West Asset Resource Centre Closing Report (attached)

*I Morris/A Lane*

7.3 Safe & Well Project Update (attached)

*C Barlow*

7.4 Strategic Service Review Programme (verbal)

*J Thomson*

*The Committee is asked to scrutinise these reports.*

**8 GENERAL REPORTS**

8.1 Portfolio Office Progress Update (attached)

*C Montgomery*

*The Committee is asked to scrutinise this report.*

Please note that the meeting will be recorded for minute taking purposes only.

**OFFICIAL**

**9 RISK**

- 9.1 Portfolio Office Risk Report (*attached*)
- 9.2 Committee Aligned Directorate Risks (*attached*)
- 9.3 Risk Spotlight: *Seeking assurance on how the Service actively manages risks in decision making with the emphasis on project management (presentation)*

*R Robison  
C Montgomery  
D Lockhart*

*The Committee is asked to scrutinise these reports.*

**10 COMMITTEE ROLLING FORWARD PLANNING**

*F Thorburn*

- 10.1 Committee Forward Plan (*attached*)
- 10.2 Items for Consideration at Future IGF, Board and Strategy Day meetings

**11 REVIEW OF ACTIONS**

*Board Support*

**12 DATE OF NEXT MEETING**

A special private meeting is scheduled to be held on 20 September 2023 and the next full Committee meeting is scheduled to be held on Thursday 9 November 2023.

**PRIVATE SESSION**

**13 MINUTES OF PREVIOUS PRIVATE MEETING:**

- 13.1 **11 May 2023** (*attached*)
- 13.2 **26 June 2023 – Special** (*attached*)

*F Thorburn  
F Thorburn*

*The Committee is asked to approve the draft private minutes of the meeting.*

**14 PRIVATE ACTION LOG** (*attached*)

*Board Support*

*The Committee is asked to note the updated Action Log and approve the closed actions.*

**15 UPDATE ON PEOPLE, TRAINING, FINANCE AND ASSET SYSTEMS (PTFAS) INVESTMENT** (*attached*)

*L Gaja/  
P McGovern*

**16 MCDONALD ROAD CLOSING REPORT** (*attached*)

*I Morris/  
A Lane*

*The Committee is asked to scrutinise the report.*

**17 FINANCIAL REPORTING - CHANGE PORTFOLIO** (*attached*)

*C Montgomery*

*The Committee is asked to scrutinise the report.*

Please note that the meeting will be recorded for minute taking purposes only.

**OFFICIAL**

- 18 STRATEGIC SERVICE REVIEW PROGRAMME BRIEF** *(attached)* *J Thomson*  
*The Committee is asked to scrutinise the report.*
- 19 NEW MOBILISING SYSTEM** *(verbal)* *D Lockhart/  
D Wilson/  
C Adams*  
*The Committee is asked to note the verbal report.*

Please note that the meeting will be recorded for minute taking purposes only.



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**PUBLIC MEETING - CHANGE COMMITTEE**

**THURSDAY 11 MAY 2023 @ 1000 HRS**

**MEETING ROOM 1, EAST SERVICE DELIVERY AREA HEADQUARTERS,  
21 CLAYLANDS ROAD, NEWBRIDGE, EH28 8LF / CONFERENCE FACILITIES**

**PRESENT:**

Fiona Thorburn, Chair (FT)  
Stuart Ballingall (SB)

Brian Baverstock, Deputy Chair (BB)  
Nick Barr (NB)

**IN ATTENDANCE:**

Stuart Stevens (SS)	Deputy Chief Officer
Kirsty Darwent (KD)	Chair of the SFRS Board
David Lockhart (DL)	Assistant Chief Officer, Director of Service Development
Curtis Montgomery (CM)	Head of Portfolio Office
Ross Robison (RR)	Portfolio Manager
John Thomson (JT)	Acting Head of Finance and Procurement
Iain Morris (IM)	Acting Director of Asset Management
Andy Girrity (AG)	Area Commander, Service Development (Item 8.2 only)
Lyndsey Gaja (LG)	Head of People (Item 8.3 only)
Paul McGovern (PMcG)	Programme Manager (Item 8.3 only)
Sandra Fox (SF)	Head of ICT (Item 9.2 only)
Kevin Murphy (KM)	Group Commander, Board Support Manager
Heather Greig (HG)	Board Support Executive Officer
Debbie Haddow (DH)	Board Support/Minutes

**OBSERVERS**

Leanne Stewart	Portfolio Office
Joan Nilsen	Portfolio Office
Siobhan Hynes	Portfolio Office

**1 WELCOME**

1.1 The Chair opened the meeting and welcomed those participating via MS Teams.

1.2 The Committee were reminded to raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question and that the meeting would be recorded for minute taking purposes only.

**2 APOLOGIES**

Angiolina Foster, Board Member

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

- 3.1 The Committee agreed that the *Financial Reporting – Change Portfolio* (Item 16), *Update on Strategic Service Review Programme* (Item 17) and *New Mobilising System* (Item 18), would be heard in the private session due to confidential commercial/financial information (Standing Order 9E) and the confidential nature of the issues (Standing Order 9G).

#### **4 DECLARATION OF INTERESTS**

- 4.1 There were no declarations of interest noted.

#### **5 MINUTES OF PREVIOUS PUBLIC MEETING: 9 FEBRUARY 2023**

- 5.1 Subject to a minor typographical error, the minutes of the previous meeting were agreed as an accurate record.

- 5.1.1 **The minutes of the meeting held on 9 February 2023 were approved as a true record of the meeting.**

#### **5.2 Matters Arising**

- 5.2.1 There were no matters arising.

#### **6 ACTION LOG**

- 6.1 The Change Committee Rolling Action Log was considered and actions were agreed and removed.

Action 7.1.9 (Portfolio Office High Report Web/iHub Design Project Dossier – 10.11.22):  
CM advised that the project benefit profiles were still being worked on and internal governance processes were incomplete. CM to update the action log with an estimated due date for completion.

- 6.2 **The Committee noted the Action Log.**

#### **7 ANNUAL VALUE ADDED STATEMENT 2022/23**

- 7.1 FT presented the report which outlined evidence of how the Committee support the effective functioning of the Board for approval. FT advised that the statement reflected on the previous year's statement and actions since, how the Committee were only as good as information presented to them, and the justification for not including a long list of individual items presented to the Committee.

- 7.2 The Committee requested that the statement should be amended to include reference to the Strategic Service Review Programme (SSRP) and the ongoing discussions around the purpose/effectiveness of the Committee.

**ACTION: FT**

- 7.3 Brief discussion took place on who should be recorded as providing the assurance levels for this report. It was agreed to seek advice outwith the meeting and amend as necessary.

**ACTION: BST**

- 7.4 The Committee queried whether the title could be amended from Value Added Statement to Committee Statement of Assurance immediately rather than wait until next year. Clarification to be sought.

**ACTION: BST**

- 7.5 **The Committee approved the report, subject to the amendments requested.**

#### **8 CHANGE PORTFOLIO/MAJOR PROJECTS**

##### **8.1 Programme Project Highlight Report**

- 8.1.1 CM presented the Programme Project Highlight Report to the Committee which provided a wider overview of the identified risks, interdependencies, costs and capacity to deliver.

It was noted that some specific project updates were scheduled to be provided during the private session.

- 8.1.2 New Mobilising System (NMS): Clare Adam had been appointed to the project team for 10 weeks to assist with developing the project plan, business case and assurance plan which would be aligned with the design authority assurance.
- 8.1.3 The Committee commented on the absence of due dates within the report and that the business case was not complete. CM advised that the business case (5 case model) was currently in development. Further update to be provided in the private session.
- 8.1.4 Emergency Services Network (ESN): IM advised the Committee that the field device testing was undertaken at Dundee and was successful. The Board would be provided with a demonstration at a future Strategy Day (July 2023).
- 8.1.5 People, Payroll and Finance (PPF) and Rostering: Both project briefs and termination report for People, Training, Finance and Asset Systems programme presented under 8.2. The Senior Responsible Officer for the Rostering project was confirmed as DACO Stephen Wood.
- 8.1.6 On Call Improvement Programme: Progressing towards an evaluation report to include cost benefits and risk analysis. Evaluation report anticipated to be provided at the next Committee meeting (August 2023).

*(A Girrity left the meeting at 1020 hrs)  
(L Gaja joined the meeting at 1020 hrs)*

- 8.1.7 Safe and Well (S&W): Evaluation report still being finalised and it was anticipated to be provided at the next Committee meeting (August 2023). CM provided a brief update on the ICT challenges and potential additional work and project to combined CSET and HFSV systems (post evaluation).
- 8.1.8 The Committee commented on the current size of the portfolio compared to the limited resources. SS reminded the Committee that a number of inflight projects were nearing completion and this would allow the Service to reset and prioritise appropriately. CM advised that the Strategic Roadmap was being developed. CM further advised that the SSRP would bring 3 new workstreams and where possible, existing projects would be aligned into this programme of work to help concurrent delivery. CM noted the introduction of a prioritisation process based on the strategic outcomes and benefits, as well as an annual planning cycle for the portfolio for impact assessment purposes within the team. CM commented on the multiple portfolios and the Annual Operating Plan within the Service and the work ongoing to align these activities.
- 8.1.9 The Committee requested a visual summary to include where change projects are currently in the pipeline, when they will be completed and removed from reports, and how they connect into the integrated planning approach and strategy of the Service. To be brought back to the next meeting (August 2023).

**ACTION: SS/CM**

- 8.1.10 The Committee commented on the delay in producing the S&W evaluation report and the reliability of business cases. CM reminded the Committee that some business cases were produced retrospectively and highlighted the issues this had caused with clearly articulating the benefits. The Committee accepted that this was a historical issue and that the Service has learnt and improved processes over the last 18 months.

- 8.1.11 West Asset Resource Centre (ARC): IM confirmed the site would be handed over on 12 May 2023. BT issues were being resolved today and notices had been issued to staff. A site visit would be arranged for Board Members in the future.
- 8.1.12 McDonald Road Redevelopment/Museum of Fire: Closing report drafted and would be brought forward to the next meeting (August 2023). IM informed the Committee that temporary occupational certificates had been issued due to the ongoing challenges with fire exit signage and drainage which had now been rectified and resubmitted for final approval.
- 8.1.13 Low Carbon Appliance (LCA): Delayed on time due to late delivery of vehicle axle. IM provided a brief update on the concerns identified with the axle and process for replacement.
- 8.1.14 IM advised the Committee that the vehicle was owned by the Service and the Intellectual Property ie the technology was owned by Emergency One and shared with Scottish Government (who funded the project).
- 8.1.15 The Committee noted the top 3 risks were listed as reputation, infrastructure and Covid-19, however to allow for proper scrutiny the Committee requested properly populated up to date risks.
- 8.1.16 The Committee reiterated the request for financial information on the whole life costs to be circulated. CM reminded the Committee that the business case was previously circulated and included the costs in the pilot activities which would then inform the whole life costs. The Committee noted this, however stated the need to consider the lifetime costs associated with LCA for budgetary purposes, as the Service cannot solely be driven by government policy. CM to re-circulate information (by email) on the whole life costs associated with the Low Carbon Appliance.

**ACTION: CM**

- 8.1.17 Formatting issues were noted within the Excel project highlight report, this would be rectified in future reports.

8.1.18 **The Committee scrutinised the report.**

*(P McGovern joined the meeting at 1045 hrs)*

8.2 **People, Training, Finance and Assets System Programme Termination Report and Project Briefs**

8.2.1 LG presented the People, Training, Finance and Asset Systems (PTFAS) Programme Termination report and updated project briefs for the standalone projects that will continue following the closure of the Programme. The following key points were highlighted:

- Decision made to terminate the overarching PTFAS due to concerns re. complexity, risks and costs of this single programme.
- Recognition of the need and benefits of continuing with the Rostering and People, Payroll, Finance and Training (PPTF) projects.
- Benefits of PTFAS notably within the Health and Wellbeing system. These included increased functionality, improved business process, cashable savings, integration with iTrent (automated). In addition, across all areas of the scope there is an overall greater understanding of business processes, landscape and cashable/non-cashable savings by addressing the fundamental inefficiencies.
- Under investment in People processes, approx. 80% of processes are off-system.
- Critical enabler for the Corporate Service Review and Strategic Service Review programme.

- Expression of interests and updated outline business cases for both PPTF and Rostering projects.

8.2.2 PMcG further highlighted the output benefits of the improvement to the Health and Wellbeing System and potential future improvements to individual modules i.e. recruitment, procurement.

8.2.3 The Committee noted and welcomed the improvement to Health and Wellbeing as a result of the PTFAS project. Although these improvements did not impact on the 80% off-system processes, the Committee were informed that it did address another set of issues.

8.2.4 The Committee queried whether the Service had a complete picture of “as is” end to end processes. PMcG advised the Committee of the number of detailed and global processes.

8.2.5 The Committee noted the desire and need to make change and further noted that the Service needed to be clear on the organisational capability to drive through the changes and the cost of delivery.

8.2.6 LG advised the Committee that through PTFAS, the Service had a greater understanding of the market and the solutions available within the current costs/budgets. LG noted that the implementation costs, internal capabilities, reinvestment of efficiencies realised etc. would be considered and captured within the business case, which was currently being developed. LG further noted that the focus would not be a technology based solution, it would be primarily improving business processes.

8.2.7 The Committee requested detailed information on the benefits generated from the budgetary spend (£1.9m) on PTFAS.

**ACTION: LG/PMcG**

8.2.8 **The Committee scrutinised the report.**

*(L Gaja and P McGovern left at 1105 hrs)*

*(Meeting broke at 1105 hrs and reconvened at 1110 hrs)*

*(S Fox joined the meeting at 1110 hrs)*

## **9 GENERAL REPORTS**

### **9.1 Portfolio Progress Update**

9.1.1 CM presented the Portfolio Progress update report to the Committee which outlined the key activities undertaken by the PO in building and developing new and existing capacity specific to strategic Portfolio, Project and Programme management maturity (P3M3). The following key points were highlighted:

- Portfolio Benefits Management Framework Design: Framework and supporting toolkit created, several projects were engaged, Portfolio Office continue to engage with project teams.
- Business Case and Benefits Integrated: Initial phase of integration of the benefit management process into business case processes had been completed.
- Change Portfolio Prioritisation Model Design: Linked to the 7 strategic outcomes, complexity, benefits (financial/non-financial) and risk reduction. Will be used for all new projects.
- Portfolio Office Strategy: Four pillars of services outlined. In the process of appointing a Change Centre of Excellence manager. Introduced Portfolio Governance and Assurance model. PTFAS and NMS Teams brought into the Portfolio Office team.
- Business Change Lifecycle Design: Four phases of framework now in place and engagement ongoing with project teams to discuss new ways of working, highlight reports etc. This engagement has been well received.
- Portfolio Office Risk Reporting: Discussions were ongoing with Audit and Risk Manager to separate risk and issues.



- Portfolio Level Financial Reporting: Second iteration to be presented under Item 16.
- Portfolio Highlight Report Design: Some minor formatting issues noted earlier. Report provides more clarity across areas of focus of delivery against time, cost, quality, skill and resource, as well as dependencies and risk.

9.1.2 The Committee noted the progress being made and requested an update on the creation of an Architectural Design forum. CM advised that the Service plans to have a design authority which concentrates on bringing solution design through the start of the project to delivery. A key aspect should be business architecture but we do not have this function within the Service at this time.

9.1.3 The Committee queried whether there were processes in place to capture and assess the impact of any suggested changes on the business/technical architecture. CM advised that the Service were taking advice from external partners and ICT, however a holistic view across the organisation was not being considered. A technical and architectural roadmap would help with looking to the future and horizon scanning.

9.1.4 **The report was provided for information only.**

## 9.2 **ICT Bespoke Development**

9.2.1 DL introduced SF who presented the report to the Committee to provide an overview of ongoing and planned work for the ICT Development team in relation to bespoke developments. The following key points were noted:

- Background on the Business Service and Development Teams and areas of ongoing work. These were categorised as systems integration, digital process, systems of innovation and corporate applications.
- Development Team impacted by market forces and recruitment issues.
- Preferred approach was now to buy, not build, and to integrate where possible.
- All the corporate bespoke systems (circa 20) are frontline operational systems, with one exception which is TASS (Health and Safety). These systems would be replaced with off the shelf products going forward, when required.
- Systems integration tool currently being used (BOOMI) which allows integration between various systems.
- Planned worked for this year included management information systems for Johnstone Operations Control and Safe and Well production readiness.

9.2.2 In regards to vacancy levels, SF confirmed that this was currently 25%.

9.2.3 The Committee noted that the main reason for not developing in-house systems was because this was no longer the preferred route rather than due to resourcing issues.

9.2.4 DL advised the Committee the any internal requests for bespoke development were being pushed back, questioned and would need to be aligned with the digital strategy.

9.2.5 **The report was provided for information only.**

*(S Fox left the meeting at 1145 hrs)*

## 10 **RISK**

### 10.1 **Portfolio Office Risk Report**

10.1.1 RR presented the Committee with an overview of the identified risks that could impact on the various programmes of work being monitored by the Portfolio and noted that the areas of change were highlighted within the covering report. The following key points were highlighted:

- Two 2 new risks added (ESN0011: SG funding delays and iHub00: Staff Resourcing)
- Disaggregation of PTFAS risks.

- Creation of NMS project risk log.
- Ongoing discussions with Project Managers regarding the proactive review of risks and the nomenclature in the risk descriptions.

10.2 The Committee commented on the currency of the data within the report and the subsequent impact on the level of scrutiny being able to be applied. The Committee also requested more specific (and current) data on mitigating actions.

10.3 **The Committee scrutinised the report.**

10.2 **Committee Aligned Directorate Risks**

10.2.1 CM presented the Aligned Directorate Risks report to the Committee to provide an outline the identified Directorate risks and controls.

10.2.2 CM reminded the Committee of the intention to develop capabilities in risk management, split risks from issues and developing a new dashboard for reporting of portfolio risks.

10.2.3 CM highlighted the following risks:

- SDD001 (Delivery of Directorate Commitments): Positions remained vacant within the Portfolio Office due to budgetary issues.
- SDD004 (Continuous Improvement Culture): Links to Strategic Spending Review.

10.2.4 The Committee requested a risk spotlight to seek assurance on how the Service actively manages risks in decision making with the emphasis on project management at the next meeting.

**ACTION: CM**

10.2.5 JT reminded the Committee of the ongoing review of the risk register, the proposed changes and the reasons for same. Brief discussion took place on culture and behaviour towards risk, risk appetite, compartmentalisation of risk and the need to operationalise risk.

10.2.6 **The Committee scrutinised the report.**

**11 COMMITTEE ROLLING FORWARD PLAN**

11.1 **Committee Forward Plan**

11.1.1 The Committee noted the Forward Plan and noted the following additions/revision:

- Risk spotlight (August 2023).
- New Mobilising System updates would be presented in future highlight reports.

11.2 **Items for consideration at Future IGF, Board and Strategy Day Meetings**

11.2.11 No additional items were identified.

**The Committee noted the Forward Plan.**

**12 REVIEW OF ACTIONS**

12.1 KM confirmed that 7 formal actions was recorded during the meeting.

**13 DATE OF NEXT MEETING**

13.1 A Special Private meeting was scheduled for 26 June 2023.

13.2 The next full meeting is scheduled to take place on Thursday 10 August 2023 at 1000 hrs.

13.3 There being no further matters to discuss, the public meeting closed at 1210 hrs.

**PRIVATE SESSION**

**14 MINUTES OF PREVIOUS PRIVATE MEETING:**

**14.1 Thursday 9 February 2023**

14.1.1 The minutes of the meetings held on 9 February 2023 were approved as a true record of the meeting.

**14.2 Thursday 21 March 2023**

14.2.1 The minutes of the meetings held on 21 March 2023 were approved as a true record of the meeting.

**15 PRIVATE ACTION LOG**

15.1 The Change Committee Rolling Action Log was considered and actions were agreed and removed.

**16 FINANCIAL REPORTING – CHANGE PORTFOLIO**

16.1 JT presented a report to the Committee providing an overview of the financial forecast for the Change Portfolio and its evolution.

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

**17 UPDATE ON STRATEGIC SERVICE REVIEW PROGRAMME**

17.1 JT presented a report to the Committee providing an update of the progress in establishing the Strategic Service Review Programme (SSRP).

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

**18 NEW MOBILISING SYSTEM**

18.1 DL provided a verbal update to the Committee on the New Mobilising System (NMS) project.

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



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## CHANGE 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 their 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 8 actions. A total of 8 of these actions has been completed.

The Committee is therefore asked to approve the removal of the 8 actions noted as completed (Blue status), note zero actions categorised as Green status and note zero action categorised as Yellow status on the action log.

## CHANGE COMMITTEE ROLLING ACTION LOG

Committee Meeting: 10 November 2022						
Agenda Item	Actions Arising	Lead	Due Date	RAG Status	Completion Date	Position Statement
7.1.19	<p><b>Portfolio Office Highlight Report Web/iHub Design Project Dossier:</b> Provide further clarity on financial benefits associated with the project.</p> <p>(11/05/23: Committee requested estimated due date be provided – <b>CM to advise / send by email.</b>)</p>	MWa	February 2023		August 2023	<p><b>Update (09/02/2023):</b> Project benefit profiles are currently being documented and will be shared with Committee once the internal governance process is complete.</p> <p><b>Update (11/05/2023):</b> The benefit profiles are in progress and the baselines are being obtained.</p> <p><b>Complete (10/08/2023):</b> Benefit Profiles – Financial information was circulated to the Committee via <a href="#">email (02/08/2023</a> - <i>Following iHub &amp; Web Page Project Board approval, please find attached a copy of the anticipated financial benefits of the iHub &amp; Webpage Project for your information. These details will provide clarity on the financial benefits and will enable the closure of this outstanding action.</i>)</p>

Committee Meeting: 11 May 2023						
Agenda Item	Actions Arising	Lead	Due Date	RAG Status	Completion Date	Position Statement
7.2	<p><b>Annual Value Added Statement 2022/23:</b> The Committee requested that statement should be amended to include reference to the Strategic Service Review Programme and the ongoing discussions around the purpose /effectiveness of the committee</p>	FT	August 2023		August 2023	<p><b>Complete (10/08/2023):</b> An updated Statement was circulated by email to CC members.  <i>(09.08.2023 - Ref: <b>Change Committee Public Action Log – Committee Meeting 11 May 2023, Item 7.2 - Annual Value Added Statement 2022/23</b></i>  <i>(The Committee requested that statement should be amended to include reference to the Strategic Service Review Programme and the ongoing discussions around the purpose /effectiveness of the committee.)</i></p> <p>Please find <a href="#">attached an updated version of the Statement</a> based on discussions at the meeting of 11 May 2023 when the Committee approved the report, subject to the amendments requested. The Statement has also been renamed Committee Assurance Statement as discussed at that meeting. The circulation of this updated Committee Assurance Statement will enable the closure of this outstanding action.)</p>

7.3	<b>Annual Value Added Statement 2022/23:</b> Brief discussion took place on who should be recorded as providing the assurance levels for this report. It was agreed to seek advice outwith the meeting and amend as necessary.	BST	August 2023		May 2023	<b>Complete (10/08/2023):</b> Report amended to record Richard Whetton, Head of Governance, Strategy and Performance as the individual offering the assurance level.
7.4	<b>Annual Value Added Statement 2022/23:</b> The Committee queried whether the title could be amended from Value Added Statement to Committee Statement of Assurance immediately rather than wait until next year. Clarification to be sought.	BST	August 2023		May 2023	<b>Complete (10/08/2023):</b> Title of the report amended to Committee Assurance Statement.
8.1.9	<b>Programme Project Highlight Report:</b> DCO and CM to provide a visual summary to include where change projects are currently along the pipeline, when they will be completed and removed from reports, and how they connect into the integrated planning approach and strategy of the service. To be brought back to next meeting.	SS/CM	August 2023		August 2023	<b>Complete (10/08/2023):</b> The Service's current change portfolio has been assessed against the strategic assessment framework, which is aligned to the Scottish Fire and Rescue Service strategic vision and outcomes, this was done in September 2022. Visual summary provided at Appendix B within Project Highlight Report.
8.1.16	<b>Programme Project Highlight Report:</b> Re-circulate information by email on the whole life costs associated with the Low Carbon Appliance.	CM	August 2023		May 2023	<b>Complete (10/08/2023):</b> Low Carbon Appliance business case was recirculated by email (12 May). Full or total life cycle costs are unknown at present and will not form part of the business case. These costs will be discovered during the pilot activity and then taken into consideration during the evaluation.
8.2.7	<b>People, Training, Finance and Assets System Programme Termination Report and Project Briefs:</b> The Committee requested detailed information on the benefits generated	LG/PMcG	August 2023		August 2023	<b>Complete (10/08/2023):</b> Budget breakdown created across former Programme areas and will be presented to August Change Committee along with summary of

	from the budgetary spend (£1.9m) on PTFAS.					outputs. The Rostering OBC will be taken to the SFRS Board on 31 August for decision. The PPFT OBC may go to the SFRS Board on 31 August for discussion or decision subject to further considerations.
10.2.4	<b>Committee Aligned Directorate Risks:</b> The Committee requested a risk spotlight to seek assurance on how the Service actively manages risks in decision making with the emphasis on project management at the next meeting.	CM	August 2023		August 2023	<b>Complete (10/08/2023):</b> Project risk is managed in line with the Service's Risk Management Policy and Framework. An initial Risk assessment is conducted during Project Intake phase and managed thereafter. Scrutiny takes place at Project Board, CPPG and Change Committee.





Report No: C/CC/23-23

Agenda Item: 7.1


Report to:	CHANGE COMMITTEE							
Meeting Date:	10 AUGUST 2023 (DATA AS OF: 10/07/23)							
Report Title:	PROGRAMME PROJECT HIGHLIGHT REPORT							
Report Classification:	For Scrutiny	<b>Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>						
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>
<b>1</b>	<b>Purpose</b>							
1.1	The purpose of this report is to provide the Change Committee (CC) with a wider overview of the identified following areas – Risk, Interdependencies, Costs and Capacity to Deliver.							
<b>2</b>	<b>Background</b>							
2.1	The Portfolio Office (PO) will update the CC with available information associated with this programme during the reporting period.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	<b>Interdependencies</b>							
3.1.1	The capacity from the Training, Safety and Assurance and ICT across various projects remains an interdependency.							
3.1.2	Service Delivery Model Programme (SDMP) close involvement with various Portfolio Projects.							
3.1.3	There are key dependencies and interdependencies with the On Call Improvement Programme, People Payroll Training and Finance, Rostering, SDMP, Emergency Services Network, and New Mobilising System projects.							
3.2	<b>Capacity to Deliver</b>							
3.2.1	Full stakeholder engagement along with continuous monitoring of resource availability and allocation will be essential to ensure SFRS have the appropriate level of capacity to deliver all major change projects. The Portfolio Function will seek to develop Capacity Planning capabilities and embed across the change portfolio.							
3.2.2	Potential impact on retirements due to Pension update.							
3.3	<b>Project Performance showing Red or Amber</b>							
3.3.1	<b>New Mobilising System:</b> Amber for Time based upon receipt of high level implementation plans from suppliers (will be confirmed fully within tender responses), Amber for Costs based upon cost envelopes provided by suppliers (will be confirmed fully within tender responses), and Amber for Skills & Resources due to recruitment to key project specific roles.							

3.3.2	<b>Service Delivery Model Programme: Demand Based Duty Systems and Station &amp; Appliance Review</b> showing Amber for Skills/Resources – Senior GIS Delivery Partner, SWECO, have commenced development of built and natural risk environment layers. Work is scheduled to complete by the end of July 2023
3.3.3	<b>Emergency Services Network showing Red for Costs and Amber for Time</b> - Ongoing perusal of funding from Scottish Government.
3.3.4	<b>Rostering showing Amber for Skills and Resources</b> - due to short extension given for project staffing and potential future funding concerns
3.3.5	<b>Safe and Well: Showing Red for Time and Quality</b> - due to ongoing ICT challenges.
<b>4</b>	<b>Recommendation</b>
4.1	The Committee is asked to: a) Scrutinise the contents of the current report b) Consider the risk mitigation actions within the report and provide feedback as necessary.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	As detailed in section 3.1
5.2	<b>Financial</b>
5.2.1	As detailed in section 3.1
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	There are no direct key environmental & sustainability implications arising from this report.
5.4	<b>Workforce</b>
5.4.1	As detailed in section 3.1
5.5	<b>Health &amp; Safety</b>
5.5.1	There are no direct Health and Safety implications associated with this report.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	There are no direct Health and Wellbeing implications associated with this report.
5.7	<b>Training</b>
5.7.1	There are no direct Training implications associated with this report.
5.8	<b>Timing</b>
5.8.1	As detailed in section 3.1.
5.9	<b>Performance</b>
5.9.1	As detailed in section 3.1
5.10	<b>Communications &amp; Engagement</b>
5.10.1	There are no direct key performance implications arising from this report.
5.11	<b>Legal</b>
5.11.1	There are no direct key legal implications arising from this report.

5.12	<b>Information Governance</b>	
5.12.1	A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.13	<b>Equalities</b>	
5.13.1	An Equalities Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.14	<b>Service Delivery</b>	
5.14.1	There are no direct key Service Delivery implications arising from this report.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	David Lockhart, Director of Service Development
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient
7.2	<b>Rationale:</b>	To provide maximum business value and to monitor progress, the project costs, time, quality and resources are reviewed based on a red and amber escalation RAG status, including key dependencies and interdependencies.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A: Combined Highlight Report	
8.2	Appendix B: Summary of Change Projects	
<b>Prepared by:</b>		Joan Nilsen, Programme Officer
<b>Sponsored by:</b>		David Lockhart, Assistant Chief Officer Director of Service Development
<b>Presented by:</b>		Ross Robison, Area Commander Portfolio Manager
<b>Links to Strategy and Corporate Values</b>		
We are fully accountable and maximise our public value by delivering a high quality, sustainable and rescue service for Scotland.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Change Committee</i>		<i>10 August 2023</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>

# APPENDIX A

PROJECT HIGHLIGHT REPORT Period - 12 June - 10 July 2023										SCOTTISH OFFICE OF PUBLIC PROCUREMENT				
Project Name	New Mobilising System (NMS)			SRO	ACO David Lockhart	Project Manager	AC Derek Wilson	Project Start Date	06/01/2023	Original Project End Date	Phase 1: 31/12/2025	Change Rev		
Strategic Outcome Alignment	Outcome 2	Outcome 3	Outcome 5	Outcome 6	Revised Project End Date							dd/mm/yyyy	Rev 1	
Project Update						Project Governance & Mgmt. Control								
<p><b>Progress in this reporting period</b></p> <p>UIS held its final specification development meeting 07/07 at which the final draft of the technical specification was approved by the UIG. This will be reviewed by the Procurement Lead w/c 24/07.</p> <p><b>Tender evaluation process</b> - evaluation methodology and criteria have been developed, evaluation panel has been identified.</p> <p><b>Commodity Strategy</b> - final version to be complete by 31/07, to be approved by xx</p> <p><b>Actica Consulting</b> - extension of contract in place from 30/06 to support development of evaluation methodology, provide training and support to the evaluation panel, provide support for responses to tender clarification questions post publication of ITT, participate in tender evaluation process.</p> <p><b>Comms &amp; Engagement workstream</b> - being led by SC Caroline Rennie as newly appointed Workstream Lead. Development of the plan is underway - this will be based on the stakeholder analysis work already completed and will be event driven.</p> <p><b>Data workstream</b> - being led by GC Jill Barber as Workstream Lead. Continued engagement with AC Jacqui MacDonald &amp; OC room staff in preparation for tasking &amp; completion of work packages. 24 OC staff have responded to indicate desire to be involved in work packages</p> <p><b>Outline Business Case</b> - to be presented to NMS Project Board 02/08, to CPiG 23/08</p> <p><b>Integrated Assurance &amp; Approvals Plan</b> - to be presented to NMS Project Board 02/08</p> <p><b>Resourcing</b> - Paper submitted to SLT 11/07 - changes to PM grades made in the paper based on feedback from NMS PB 22/06</p> <p><b>Technical Design Authority (TDA)</b> - SFRS Design Authority approved the concept of a supplier led TDA being included as part of the tender specification 06/07</p> <p><b>Planned activities for next reporting period</b></p> <ul style="list-style-type: none"> <li>Planning for TAF Pre-Procurement Gate Review (estimated end Aug)</li> <li>Continue finalisation of ITT documentation</li> <li>5 x OC Watch engagement sessions scheduled for July</li> <li>Continue with planning of Comms &amp; Engagement Workstream activities</li> <li>Continue delivery of Data Workstream workpackages (standardisation of operational procedures &amp; business rules) - escalating decisions to be made on standardisation as required.</li> </ul>						Current Period Delivery Trend	→	Business Case	Project Dossier	Risk Register	Project Phase			
						Last Period Delivery Trend	→	NO	NO	YES	Planning			
						Project Performance	Overall Health	Time	Cost	Quality	Skills & Resource			
							A	A	A	G	A			
Pathway to Green / Next Steps						Significant Milestone Forecast								
<p><b>SIGNIFICANT MILESTONES:</b></p> <p><b>TIME: (REMAINS AMBER)</b> Limited &amp; very high level detail on project implementation timelines was provided by potential suppliers on 16 June indicating delivery of Phase 1 by Dec '25 should be achievable - but there is a dependency on date of contract award. Further detail &amp; confirmation on delivery timelines will not be received until tender bids have been submitted with implementation plans.</p> <p><b>COST: (REMAINS AMBER)</b> Potential suppliers have provided cost envelopes and these have been used to develop the Finance Case of the OBC. The budget has been based on the cost envelopes. Additional detail on supplier costs will not be received until tender bids have been submitted.</p> <p><b>SKILLS / RE SOURCE: (PREV RED, NOW AMBER)</b> Issue 001 has been closed as SLT approved the resourcing paper 11/07 thus giving approval to commence recruitment to key project specific roles. New risk to be raised around recruitment within required timelines.</p>						L1 - NMS Project Commodity Strategy complete		75-100%	In Progress	31/07/2023	31/07/2023			
						L1 - Receive draft specification from UIG		100%	Complete	26/06/2023	26/06/2023			
						L1 - Final specification approved by UIG		100%	Complete	07/07/2023	07/07/2023			
						L1 - Final draft Outline Business Case to CPiG		75-100%	In Progress	23/08/2023	23/08/2023			
Critical Path - Project Stage Completion						Critical Risk, Issue & Dependencies								
Gate 0 - INTAKE		Gate 1 - PLANNING		Gate 2 - DELIVERY		Gate 3 - CLOSURE								
Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual							
30/04/2023	30/04/2023	13/05/2024	dd/mm/yyyy	Phase 1: 31/12/2025	dd/mm/yyyy	dd/mm/yyyy	dd/mm/yyyy							
Dependency BRAG	Key Inter-Dependency			From (Giver)	To (Receiver)	Due Date (From)	Due Date (To)							
Complete	Based on SLTs approval on 01/06/2023 to retain NMS scope as ICCS & CAD, the inter-dependency on the SSS ICCS upgrade is no longer relevant. CLOSED					dd/mm/yyyy	dd/mm/yyyy							
Risk RAG/Score	Top 3 Delivery Risks			Mitigation Plan			Date Identified	Risk Owner	By When					
12	NMS 017 - There is a risk that if clearly defined approval routes are not in place for the Outline Business Case (OBC), Commodity strategy, Specification, and Invitation to Tender (ITT) documents this will result in delays to issuing the ITT to the market and therefore also delays to the overall timeline to award of contract			SRO is engaging with SLT colleagues and Chairs of Change Committee & SFRS Board to identify an agreed approval route for key project artefacts to ensure that there is no delay to issuing the ITT			03/07/2023	SRO	31/07/2023					
12	NMS 018 - There is a risk that if timely decisions are not made around escalated issues regarding agreeing new standardised operating procedures and business rules this will result in delays to the completion of this work and impact the position of readiness SFRS needs to be in prior to award of contract			Identify the subject areas where escalations for decision making are anticipated and likely timelines to materialise. Escalation routes will be developed with stakeholders to enable and support the decision making process			03/07/2023	Project Lead	17/08/2023					
12	NMS 019 - There is a risk that if, due to operational pressures, there is insufficient OC staff capacity to support delivery of the commissioned standardisation of operating procedures and business rules this will result in delays to the completion of this work and impact upon the position of readiness SFRS needs to be in prior to award of contract			Detailed workstream and workpackage plans to be implemented with tracking and monitoring of progress against timelines. Maintain close working links with OC Managers to identify early capacity issues and escalate resolution			03/07/2023	Project Lead	17/08/2023					
Issue Impact	Top 3 Delivery Issues			Corrective Action			Date Identified	Issue Owner	By When					
Vary High														
Financial & Benefit Tracking										General Benefit Tracking				
New Mobilising System (NMS) Provisional Financial Tracking, Reporting period: 2023/24 PERIOD 2 (content from CMG report)										Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date	
Previous Year(s)	Current Year			Future Year(s)		Total Cost	Variation	NO	dd/mm/yyyy	NO	dd/mm/yyyy			
Actual Spend £000's	Budget £000's	Year To Date Actual £000's	Forecast £000's	£000's	Forecast Project Cost £000's	Business Case (BC) Cost £000's	£ Variation to BC £000's							
										Cashable Benefits Identified		Non-Cashable Benefits Identified		
										NO	£ Total Value	NO	£ Total Value	
										£ Variation to BC as %	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy
										Approach to Financial Benefit Realisation: Benefits profiles, Realisation plan, Cashable and Non-cashable all in progress and will be completed for Business Case				

PROJECT HIGHLIGHT REPORT 12 Jun - 10 Jul 23													
Project Name	Community Risk Index Model (CRIM)			SRO	ACO David Lockhart	Project Manager	AC Andy Ginty	Project Start Date	05/01/2019	Original Project End Date	28/02/2020	Change Rev	
Strategic Outcome Alignment	Outcome 2	Outcome 3	Outcome 5	Outcome 6	Outcome 7	Revised Project End Date						31/03/2024	Rev 5
Project Update						Project Governance & Mgmt. Control							
<p>SWECO have made good progress the last few weeks regarding the development of the built and natural environment risk layers. This has brought timelines back on schedule and this is reflected in the updated RAG status across Project Performance.</p> <p>The built environment will utilise the FSE database and consider all structures over 18 metres and occupancy type. It will then formulate and apply a scoring methodology. A risk rating will be determined by distribution of occupancy type + concentration of buildings of height.</p> <p>Development of the CRIM, particularly the risk metric code, will continue to receive academic support from Nottingham University. This will mean additional consultancy days and associated costs are currently being identified. We anticipate this will conclude once the risk metric is updated with the new risk layers, and SFRS can maintain the CRIM independently.</p> <p>CRIM team members are currently considering data refresh requirements including sources and timing. We anticipate elements of this will require a business case for funding which will develop over the next few weeks. If available UFAS reduction will also feature within the data/model refresh.</p> <p>In summary, programme expenditure this year is anticipated to involve, SWECO Delivery Partner contract, next steps response modelling to support the SSRP, academic support during development and revision of CRIM risk metric and purchase of latest ACORN (or similar) dataset.</p>						Current Period Delivery Trend	→	Business Case	Project Dossier	Risk Register	Project Phase		
						Last Period Delivery Trend	→	YES	YES	YES	Delivery		
						Project Performance	Overall Health	Time	Cost	Quality	Skills & Resource		
							G	G	G	G	G		
						Significant Milestone Forecast		Progress	Status	Planned	Latest Predicted Date		
Complete arrangements that will allow SFRS to review, update and produce CRIM risk metric independently.		50-75%	In Progress	June 2021 - December 2022	31/08/2023								
Complete the development of appropriate and proportionate risk layers from the built and natural environment.		50-75%	In Progress	January 2022 - March 2023	31/08/2023								
Update CRIM with predictive elements arising from Unwanted Fire Alarm Signals (UFAS) consultation.		0%	Future Task	January 2023 - March 2023	31/08/2023								
Produce suitable process and methodology guidance that will allow the management and maintenance of CRIM to transition to "Programme End"		0-25%	In Progress	October 2023 - March 2024	31/03/2024								
Pathway to Green / Next Steps													
Complete development of the built and natural risk environment layers with Sweco Uk Ltd - August 2023.													
Continue to put in place arrangements that will support SFRS self sufficiency when maintaining the CRIM. This will include developing and training relevant staff in addition to securing access to required data/systems. This will also involve a phase of testing supported by academic guidance from Nottingham University - August 2023													
Update the current risk metric with built and natural risk layers and the predicted UFAS reduction figures - August 2023													
Identify and submit business case requirements in terms of data refresh/purchase - July 2023													
Critical Path - Project Stage													
Gate 0 - INTAKE			Gate 1 - PLANNING			Gate 2 - DELIVERY			Gate 3 - CLOSURE				
Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion				
30/12/2019	30/12/2019	30/03/2021	30/04/2021	30/03/2024	tbc	30/03/2024	tbc						
Critical Risk, Issue & Inter-Project Dependencies													
Dependency BRAG	Key Inter-Dependency				From (Giver)	To (Receiver)	Due Date (From)		Due Date (To)				
On Track	Securing necessary access to ICT systems and data critical to developing and maintaining the CRIM. This will include completing the programme Development Phase in Sept 23 and Transition to Programme End Phase, Oct 23- Mar 24				ICT	SDMP	01/05/2021		31/03/2024				
Risk RAG/Score	Top 3 Delivery Risks				Mitigation Plan			Date Identified	Risk Owner		By When		
Amber 12	Failure to meet SDMP outcomes, timelines and requirements aligned to budgetary forecasting. This could be due to failing to provide the required resources in order to meet the aims and objectives of the SDMP. This could result in financial and reputational damage to SFRS.				Senior GIS Delivery Partner has commenced development of built and natural risk environment. This work is due to be complete during July 2023. BCIAT has lost one WIC due to promotion with another in the SC holding pool. Backfill options are currently being considered. Manage any potential capacity issues due to supporting the priorities of the SSRP			01/05/2019	Andy Ginty		31/03/2024		
Issue Impact	Top 3 Delivery Issues				Corrective Action			Date Identified	Issue Owner		By When		
Financial & Benefit Tracking													
Provisional Financial Tracking: SDMP Programme Costings Reporting period: 2023/24, PERIOD 2							General Benefit Tracking						
Previous Year(s)	Current Year			Future Year(s)	Total Cost	Variation	Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date			
	Budget £000's	Year To Date Actual £000's	Forecast £000's	£000's	Forecast Project Cost £000's	Business Case (BC) Cost £000's	NO	dd/mm/yyyy	NO	dd/mm/yyyy			
Actual Spend £000's							Financial Benefit Tracking						
							Cashable Benefits Identified	Non-Cashable Benefits Identified					
							NO	£ Total Value	NO	£ Total Value			
							£ Variation to BC as %	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy		
							Approach to Financial Benefit Realisation: The programme will produce process and methodology that will allow others to implement Change Options as and when appropriate. This will potentially realise cashable benefits but if not anticipated these will be delivered directly by the SDMP.						

**PROJECT HIGHLIGHT REPORT**  
12 Jun - 10 Jul 23



<b>Project Name</b>	SDMP - Station Appliance Review (SAR)		<b>SRO</b>	ACO David Lockhart	<b>Project Manager</b>	GC Mark Loynd	<b>Project Start Date</b>	05/01/2019	<b>Original Project End Date</b>	Phase 2 30/06/2021	<b>Change Rev</b>					
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 6				<b>Revised Project End Date</b>	Phase 3 30/03/2024	Rev 5					
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>										
<ul style="list-style-type: none"> <li>A second paper has been prepared for SLT and the SFRS Board which details the analysis which was conducted to verify the combined impacts of the ten appliance based change options which were identified by the SAR Project to meet SSRP Phase One requirements.</li> <li>The initial SDMP Business Case and Impact Assessment pack continues to be refined iteratively based on its application to the potential change scenarios being developed. This includes the combined impacts of the ten appliance based changes agreed for SSRP Phase One implementation.</li> <li>The SAR project manager continues to be engaged in the provision of information and data requests to support of the SSRP Phase One implementation.</li> <li>A second engagement session took place with FBU officials on 21st June 2023. The process used for identifying the temporary changes being implemented for Phase One of the SSRP was presented and discussed.</li> <li>The project is still on track to offer a range of viable Options for Change which - if implemented as part of the SSRP - will deliver the intended benefit of enhanced financial efficiency by creating a closer alignment between operational resource levels, community risk and Service Delivery demand.</li> </ul>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
						<b>Last Period Delivery Trend</b>	→	NO	YES	YES		Delivery				
						<b>Project Performance</b>	<b>Overall Health</b>	G	<b>Time</b>	G	<b>Cost</b>	G	<b>Quality</b>	G	<b>Skills &amp; Resource</b>	A
						<b>Significant Milestone Forecast</b>		<b>Progress</b>		<b>Status</b>		<b>Planned</b>		<b>Latest Predicted Date</b>		
						Develop and consider 'Outline Risk-Based Station and Appliance Change Options' which align to evolving SFRS strategic requirements.		50-75%	In Progress	30/09/2023	30/09/2023					
						Refine the Matching Operational Resource to Risk and Demand (MORRD) process.		75-100%	In Progress	30/09/2023	30/09/2023					
						Refine Business Case Impact Assessment (BCIA) templates.		75-100%	In Progress	30/09/2023	30/09/2023					
<b>Pathway to Green / Next Steps</b>						Produce supporting guidance and documentation for the MORRD process and BCIA templates which will enable the SAR Project to 'Transition to Programme End.'		0-25%	In Progress	30/03/2024	30/03/2024					
<b>Next Steps</b>																
<ul style="list-style-type: none"> <li>Engage ORH in modelling potential Station and Appliance change Options which could be implemented in the medium- to long-term to address SSRP requirements. A SDMP business case is being developed which will identify the associated costs. (Jul-Sep 23)</li> <li>Engage with internal partners in the selection and development of viable Station and Appliance change scenarios. (Jul-Sep 23)</li> <li>Populate Business Case Impact Assessments with sufficient detail to enable options appraisal and consultation on the most suitable Station and Appliance Options for Change. (Jul-Sep 23)</li> </ul>																
<b>Critical Path - Project Stage</b>																
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>							
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>					
30/12/2019	30/12/2019	30/05/2021	30/04/2021	30/03/2024	tbc	30/03/2024	tbc	30/03/2024	tbc							
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>																
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>				<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>		<b>Due Date (To)</b>							
At Risk	Additional GIS capability to support development of CRIM built and natural environment risk layers				External means: SWECO	SDMP	06/01/2021		30/08/2023							
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>			<b>Mitigation Plan</b>			<b>Date Identified</b>	<b>Risk Owner</b>		<b>By When</b>						
Amber 12	Failure to meet SDMP outcomes, timelines and requirements aligned to budgetary forecasting. This could be due to failing to provide the required resources in order to meet the aims and objectives of the SDMP. This could result in financial and reputational damage to SFRS.			Senior GIS Delivery Partner (SWECO) has commenced programme of work that is scheduled to be completed in Q2 2023.			5/30/2019	Andy Girty		31/08/2023						
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>			<b>Corrective Action</b>			<b>Date Identified</b>	<b>Issue Owner</b>		<b>By When</b>						
<b>Financial &amp; Benefit Tracking</b>																
<b>Provisional Financial Tracking: SDMP Programme Costings (covered under CRIM)</b>								<b>General Benefit Tracking</b>								
<b>Reporting period: 2023/24, PERIOD 2</b>								<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>					
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>		<b>Variation</b>	NO	dd/mm/yyyy	NO	dd/mm/yyyy					
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>	<b>Financial Benefit Tracking</b>								
							<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>							
							NO	£ Total Value	NO	£ Total Value						
							<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	dd/mm/yyyy					
							<b>Approach to Financial Benefit Realisation:</b> Process enabler to identify efficiencies									

**PROJECT HIGHLIGHT REPORT**  
12 Jun - 10 Jul 23



<b>Project Name</b>	Demand Based Duty System (SDMP)		<b>SRO</b>	ACO David Lockhart	<b>Project Manager</b>	AC Andy Girty	<b>Project Start Date</b>	05/01/2019	<b>Original Project End Date</b>	28/02/2020	<b>Change Rev</b>					
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 3	Outcome 5	Outcome 6	Outcome 7				<b>Revised Project End Date</b>	31/03/2024	Rev 5					
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>										
<ul style="list-style-type: none"> <li>The SSRP Phase One implementation has delayed the production of the "Gap Analysis" being undertaken by the programme's HROD Business Partner to determine what would be required to expand the implementation of Alternative Duty Systems within SFRS. This is still due to be delivered by the end of the project Development Phase.</li> <li>A series of Alternative Duty System based change scenarios will be developed for presentation as potential change options which could be implemented in the medium- to long-term to address SSRP requirements.</li> <li>The initial SDMP Business Case and Impact Assessment pack continues to be refined iteratively based on its application to the potential change scenarios being developed. This will include potential duty system change options in support of Phases Two and Three of the SSRP.</li> <li>A second engagement session took place with FBU officials on 21st June 2023. The process used for identifying the temporary changes being implemented for Phase One of the SSRP was presented and discussed.</li> <li>The project is still on track to offer a range of viable Options for Change which - if implemented during Phases Two and Three of the SSRP - will deliver the intended benefit of enhanced financial efficiency by creating a closer alignment between operational resource levels, community risk and Service Delivery demand.</li> </ul>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
						<b>Last Period Delivery Trend</b>	→	<b>NO</b>		<b>YES</b>		<b>YES</b>		<b>Delivery</b>		
						<b>Project Performance</b>	<b>Overall Health</b>	<b>Time</b>	<b>Cost</b>	<b>Quality</b>	<b>Skills &amp; Resource</b>					
						<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>A</b>					
						<b>Significant Milestone Forecast</b>	<b>Progress</b>	<b>Status</b>	<b>Planned</b>	<b>Latest Predicted Date</b>						
						Develop and consider "Alternative Demand Based Duty System Options" which align with Service Delivery demands and evolving SFRS strategic requirements	50-75%	In Progress	30/09/2023	30/09/2023						
						Refine the Matching Operational Resource to Risk and Demand (MORRD) process.	75-100%	In Progress	30/09/2023	30/09/2023						
						Refine the Business Case Impact Assessment (BCIA) templates.	75-100%	In Progress	30/09/2023	30/09/2023						
<b>Pathway to Green / Next Steps</b>						Produce suitable process and methodology guidance that will allow the management and maintenance of CRIM to transition to "Programme End"	0-25%	In Progress	01/03/2024	01/03/2024						
<b>Next Steps</b>																
<ul style="list-style-type: none"> <li>Engage ORH in modelling potential Alternative Duty System Options for Change which could be implemented in the medium- to long-term to address SSRP requirements. A SDMP business case is being developed which will identify the associated costs. (Jul-Sep 23)</li> <li>Engage with internal partners in the development of potential Alternative Duty System change scenarios. (Jul-Sep 23)</li> <li>Populate Business Case Impact Assessments with sufficient detail to enable options appraisal and consultation on the most suitable Alternative Duty System Options for Change. (Jul-Sep 23)</li> </ul>																
<b>Critical Path - Project Stage</b>																
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>							
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>					
30/12/2019	30/12/2019	30/03/2021	30/04/2021	30/03/2024	tbc	30/03/2024	tbc	30/03/2024	tbc	30/03/2024	tbc					
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>																
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>					<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>		<b>Due Date (To)</b>						
On Track	Securing necessary access to ICT systems and data critical to developing and maintaining the CRIM					ICT	SDMP	01/05/2021		31/08/2023						
On Track	Additional GIS capability to support development of CRIM built and natural environment risk layers					ICT	SDMP	01/05/2021		31/08/2023						
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>				<b>Mitigation Plan</b>				<b>Date Identified</b>	<b>Risk Owner</b>	<b>By When</b>					
Amber 12	Failure to meet SDMP outcomes, timelines and requirements aligned to budgetary forecasting. This could be due to failing to provide the required resources in order to meet the aims and objectives of the SDMP. This could result in financial and reputational damage to SFRS.				Senior GIS Delivery Partner has commenced development of built and natural risk environment. This work is due to be complete during June 2023. BCIAT has lost one WC due to promotion with another in the SC holding pool. Backfill options are currently being considered.				01/05/2019	Andy Girty	31/03/2024					
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>				<b>Corrective Action</b>				<b>Date Identified</b>	<b>Issue Owner</b>	<b>By When</b>					
<b>Financial &amp; Benefit Tracking</b>																
<b>Provisional Financial Tracking: SDMP Programme Costings (covered under CRIM)</b> Reporting period: 2023/24, PERIOD 2								<b>General Benefit Tracking</b>								
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>	<b>Variation</b>	<b>NO</b>	<b>dd/mm/yyyy</b>	<b>NO</b>	<b>dd/mm/yyyy</b>						
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>									
								<b>Cashable Benefits Identified</b>	<b>Non-Cashable Benefits Identified</b>							
								<b>NO</b>	<b>£ Total Value</b>	<b>NO</b>	<b>£ Total Value</b>					
								<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	<b>dd/mm/yyyy</b>	<b>Realisation Completion Date</b>	<b>dd/mm/yyyy</b>				
								<b>Approach to Financial Benefit Realisation:</b> Process enabler to identify efficiencies/processes and methodology for ongoing projects to produce the benefits)								

**PROJECT HIGHLIGHT REPORT 2.0**  
12 June - 10 July 2023



<b>Project Name</b>	People Payroll Finance & Training		<b>SRO</b>	Lyndsey Gaja	<b>Project Manager</b>	Michael Tonner	<b>Project Start Date</b>	01/04/2021	<b>Original Project End Date</b>	01/04/2024	<b>Change Rev</b>				
<b>Strategic Outcome Alignment</b>	Outcome 3	Outcome 5	Outcome 6					<b>Revised Project End Date</b>	30/04/2026		Rev 1				
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>									
<ul style="list-style-type: none"> <li>As-is Process flows and User Journeys continue to be recorded, specific to fire service requirements</li> <li>PID/Dossier has been created and currently under review by the Project Board</li> <li>Expression of Interest responses received and reviewed. Report produced</li> <li>UG SOR Workshops concluded, document has been updated</li> <li>SOR has now been converted into a Requirements Traceability Matrix (RTM) and will be used as part of the Procurement exercise</li> <li>Contract Procurement documentation is currently being created.</li> <li>Change Committee has reviewed the OBC</li> <li>Whilst rating skills and resources as green, this is on the basis that we have team members covering capabilities not represented in their roles at the current time. It reflects where the project is now. Not sustainable in the long term but suitable in the short term</li> <li>Commodity Strategy being updated</li> <li>Decision made at July Project Board to revert evaluation scoring back to 70% quality/30% cost (from 60%/40%) as we now have reassurance around software affordability following the EOJ process</li> </ul>						<b>Current Period Delivery Trend</b>	↑	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>	
						<b>Last Period Delivery Trend</b>	→	<b>YES</b>	<b>NO</b>	<b>YES</b>	<b>Intake</b>				
						<b>Project Performance</b>	<b>Overall Health</b>	<b>Time</b>	<b>Cost</b>	<b>Quality</b>	<b>Skills &amp; Resource</b>				
						<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>	<b>G</b>				
						<b>Significant Milestone Forecast</b>		<b>Progress</b>	<b>Status</b>	<b>Planned</b>	<b>Latest Predicted Date</b>				
						Consolidated Requirements for solution		100%	Complete	30/09/2022	30/06/2023				
						Statement of Requirements for solution		100%	Complete	30/11/2022	30/06/2023				
						Production of PID/Dossier		75-100%	In Progress	31/01/2023	14/07/2023				
						<b>Pathway to Green / Next Steps</b>		<b>Scottish Government DAO Assurance Gate (TAF)</b>	50-75%	In Progress	30/09/2022	31/08/2023			
						<b>On track</b>		<b>Re-based/ Detailed Project Plan</b>	75-100%	In Progress	31/08/2022	14/07/2023			
<b>Critical Path - Project Stage</b>															
<b>Gate 0 - INTAKE</b>		<b>Gate 1 - PLANNING</b>		<b>Gate 2 - DELIVERY</b>		<b>Gate 3 - CLOSURE</b>									
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>						
30/09/2023		31/03/2024		23/04/2026		30/04/2026									
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>															
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>				<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>		<b>Due Date (To)</b>						
<b>On Track</b>	Cross System processes and data integration between Rostering and PPFT Projects				Rostering	PPFT	02/10/2023		06/10/2025						
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>			<b>Mitigation Plan</b>			<b>Date Identified</b>	<b>Risk Owner</b>		<b>By When</b>					
12	The temporary position of key project members risks the stability of the PPFT Project			Discussed at project Boards. Head of Portfolio office is putting forward a proposal to re-structure Portfolio Office to address this issue long term. Outline Business Case being presented to CPG 16th May to address resourcing issues post June 2023. Scoring reduced to 12 as short term risk is being minimised by contract extensions up to end of August 2023			20/09/2022	Lyndsey Gaja		31/08/2023					
8	There is a risk that we will receive no suitable tenders because we have not understood the market or the market hasn't understood our requirements correctly resulting in a need to undergo procurement process again.			EOJ responses have been received and currently under review			01/01/2022	Lyndsey Gaja		31/08/2023					
8	There is a risk that bids from suppliers may exceed our budget because we may not have have set the budget appropriately. This could result in commercial failure.			EOJ responses have been received and currently under review			01/01/2022	Lyndsey Gaja		31/08/2023					
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>			<b>Corrective Action</b>			<b>Date Identified</b>	<b>Issue Owner</b>		<b>By When</b>					
<b>Very Low</b>															
<b>Financial &amp; Benefit Tracking</b>															
<b>People, Payroll, Finance &amp; Training (PPFT) Provisional Financial Tracking</b> Reporting period: 2023/2024, PERIOD 2							<b>General Benefit Tracking</b>								
							<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>					
							NO	dd/mm/yyyy	NO	dd/mm/yyyy					
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>		<b>Variation</b>								
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>								
							<b>Financial Benefit Tracking</b>								
							<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>						
							NO	£ Total Value	NO	£ Total Value					
							<b>Realisation Completion Date</b>		<b>Realisation Completion Date</b>		<b>Realisation Completion Date</b>				
							dd/mm/yyyy		dd/mm/yyyy		dd/mm/yyyy				
<b>Approach to Financial Benefit Realisation:</b>															
The benefits profiles were discussed at the project board meeting in June however it was determined that some rewording was required before final approval can be given. Whilst it has been acknowledged that there are both cashable and non cashable benefits, these are detailed in the business case which is awaiting sign off. Rewording will take place after Business Case has been signed off.															



**PROJECT HIGHLIGHT REPORT**  
12 June - 10 July 2023



<b>Project Name</b>	Rostringer		<b>SRO</b>	DACO Stephen Wood	<b>Project Manager</b>	Sebastian O'Dell	<b>Project Start Date</b>	01/01/2022	<b>Original Project End Date</b>	31/12/2025	<b>Change Rev</b>	Rev 1
<b>Strategic Outcome Alignment</b>	Outcome 4	Outcome 5	Outcome 6					<b>Revised Project End Date</b>				

**Project Update** **Project Governance & Mgmt. Control**

- Procurement documentation will be drawn up by end of July in preparation of going to market once approval of OBC is given at SFRS Board.
- OBC was taken to Change Committee 26 June then goes to SFRS Board in July
- Station Commander Paul Grant joined the Project Team in June, working on evaluation criteria

<b>Current Period Delivery Trend</b>	➔	<b>Business Case</b>	Project Dossier	Risk Register	Project Phase
<b>Last Period Delivery Trend</b>	➔	YES	NO	YES	Intake
<b>Project Performance</b>	<b>Overall Health</b>	Time	Cost	Quality	Skills & Resource
	G	G	G	G	A
<b>Significant Milestone Forecast</b>		Progress	Status	Planned	Latest Predicted Date
Business Case approval		75-100%	In Progress	29/02/2023	27/07/2023
Creation of Project Dossier		75-100%	In Progress	31/05/2023	31/07/2023
Detailed project plan for next stage of project		25-50%	In Progress	01/04/2023	31/12/2023

**Pathway to Green / Next Steps**

Procurement preparation	50-75%	In Progress	29/02/2023	27/07/2023

<b>Critical Path - Project Stage</b>							
Gate 0 - INTAKE		Gate 1 - PLANNING		Gate 2 - DELIVERY		Gate 3 - CLOSURE	
Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion
30/09/2023		31/03/2024		30/09/2025		31/12/2025	

**Critical Risk, Issue & Dependencies**

Dependency BRAG	Key Inter-Dependency	From (Giver)	To (Receiver)	Due Date (From)	Due Date (To)	
On Track	Cross system processes and data integration between Rostringer and PPFT Projects	PPFT	Rostringer	01/03/2025	31/12/2025	
Risk RAG/Score	Top 3 Delivery Risks	Mitigation Plan		Date Identified	Risk Owner	By When
12	There is a risk that the Rostringer Project may not be able to go live because of delays in MMS go live dates meaning Rostringer Project having no visibility of future command and control system resulting in delays to Rostringer Project milestones.	Factor in flexibility and configurability of new rostringer system.Maintain and monitor through Dependency Log		24/03/2022	DACO Stephen Wood	31/12/2023
12	There is a risk that new systems and processes are not fully adopted because of a lack of communication and training resulting in a failure to deliver benefits	Fully engage with stakeholders, implement communication strategy and allow appropriate time for training and system implementation		24/03/2022	DACO Stephen Wood	31/12/2023
12	There is a risk that suppliers may not be able to migrate our data because it is contained off system	Prepare a data strategy/engage with Service Delivery regarding getting data tidied up		16/01/2023	DACO Stephen Wood	31/12/2023
Issue Impact	Top 3 Delivery Issues	Corrective Action		Date Identified	Issue Owner	By When

**Financial & Benefit Tracking**

Rostringer Provisional Financial Tracking Reporting period: 27/12/22, F16002							General Benefit Tracking			
Previous Year(s)	Current Year			Future Year(s)	Total Cost	Variation	Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date
	Budget £000's	Year To Date Actual £000's	Forecast £000's	£000's	Forecast Project Cost £000's	Business Case (BC) Cost £000's	NO	dd/mm/yyyy	NO	dd/mm/yyyy
Actual Spend £000's							Financial Benefit Tracking			
							Cashable Benefits Identified		Non-Cashable Benefits Identified	
							NO	£ Total Value	NO	£ Total Value
						£ Variation to BC as %	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy
							Approach to Financial Benefit Realisation:			
							The benefits profiles were discussed at the project board meeting in June however it was determined that some rewording was required before final approval can be given. Whilst it has been acknowledged that there are both cashable and non cashable benefits, these are detailed in the business case which is awaiting sign off. Rewording will take place after Business Case has been signed off.			

**PROJECT HIGHLIGHT REPORT**  
12 June - 10 July 2023



<b>Project Name</b>	Low Carbon Appliance		<b>SRO</b>	DACO Stewart Nicholson	<b>Project Manager</b>	GC Paul Robertson	<b>Project Start Date</b>	01/04/2020	<b>Original Project End Date</b>	31/03/2024	<b>Change Rev</b>					
<b>Strategic Outcome Alignment</b>	Outcome 3	Outcome 4							<b>Revised Project End Date</b>	30/06/2024		Rev 2				
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>										
<p><b>Update on period June/July</b> - information below presented to 5th July project board meeting</p> <ul style="list-style-type: none"> <li>Appliance completed and passed VCA testing at Millbrook with no issues - full update item 6.</li> <li>Appliance returned to E1 for test decommissioning and PDI completed - MAN component issue identified</li> <li>Appliance delivery to SFRS delayed due to part required from MAN</li> <li>Meeting held with E1 and SWARCO to discuss unit tracking technology</li> <li>Infrastructure progress on track with components delivered to site (GRP Enclosure)</li> </ul>						<b>Current Period Delivery Trend</b>	↗	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
						<b>Last Period Delivery Trend</b>	↕	<b>YES</b>		<b>YES</b>		<b>YES</b>		<b>Delivery</b>		
						<b>Project Performance</b>	<b>Overall Health</b>	G	<b>Time</b>	G	<b>Cost</b>	G	<b>Quality</b>	G	<b>Skills &amp; Resource</b>	G
						<b>Significant Milestone Forecast</b>	<b>Progress</b>		<b>Status</b>		<b>Planned</b>		<b>Latest Predicted Date</b>			
						Commission charging infrastructure	50-75%	In Progress	30/04/2023	31/07/2023						
SME Workshops	50-75%	In Progress	30/04/2023	31/07/2023												
Build complete and delivery to SFRS	50-75%	In Progress	30/04/2023	08/07/2023												
<b>Pathway to Green / Next Steps</b>						<b>Training and familiarisation commences</b>										
<b>Next Steps July/August</b>						<b>Benefits/Success criteria agreed</b>										
<ul style="list-style-type: none"> <li>Appliance delivery to SFRS - imminent</li> <li>Appliance acceptance testing for vehicle and equipment on delivery</li> <li>Commence firm scheduling of in house training - identify provisional on the run dates</li> <li>Workshop to agree benefits tracking requirements for on the run date</li> <li>Workshop to agree operational business rules with end users, local management team and OC colleagues</li> </ul>																
<b>Critical Path - Project Stage</b>																
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>							
<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>						
31/10/2021	01/10/2021		01/05/2022	01/05/2022		01/03/2023	01/08/2023		31/03/2024							
<b>Critical Risk, Issue &amp; Dependencies</b>																
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>					<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>			<b>Due Date (To)</b>					
At Risk	Infrastructure supply from third party					SWARCO	SFRS	01/04/2023			01/09/2023					
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>				<b>Mitigation Plan</b>			<b>Date Identified</b>	<b>Risk Owner</b>		<b>By When</b>					
12	Reputation				It is a known risk that this technology is moving at a very quick pace. This project recognises this and accepts that the model trialled will most likely not be a production model but will provide learning and lessons learned to allow SFRS to make an informed choice on a production model in the future. Communication of this information is key to mitigating risk and criticism			01/04/2020	DACO Stewart Nicholson		30/06/2024					
9	Infrastructure				Early identification and survey of potential sites has been highlighted as a priority given the technical complexity with installation of the required charging infrastructure. This will require close scrutiny, support and management to ensure suitable charging is in place to support the deployment of this appliance into a front line station			01/04/2020	DACO Stewart Nicholson		30/06/2024					
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>				<b>Corrective Action</b>			<b>Date Identified</b>	<b>Issue Owner</b>		<b>By When</b>					
Very Low																
<b>Financial &amp; Benefit Tracking</b>																
<b>Provisional Financial Tracking</b> Reporting period: 2023/2024, PERIOD 2								<b>General Benefit Tracking</b>								
								<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>					
Previous Year(s)		Current Year		Future Year(s)		Total Cost		Variation		NO	dd/mm/yyyy	NO	dd/mm/yyyy			
Actual Spend £000's		Budget £000's		Year To Date Actual £000's		Forecast £000's		Forecast Project Cost £000's		Business Case (BC) Cost £000's		£ Variation to BC as %				
								<b>Financial Benefit Tracking</b>								
								<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>						
								NO		£ Total Value		NO				
								£ Variation to BC as %		Realisation Completion Date		dd/mm/yyyy		Realisation Completion Date		
												dd/mm/yyyy				
								<b>Approach to Financial Benefit Realisation:</b> Project set up as a proof of concept so may not realise any financial benefits								

PROJECT HIGHLIGHT REPORT													
12 Jun - 10 Jul 23													
Project Name	ESMCP		SRO	Sandra Fox	Project Manager	Andrew Mosley	Project Start Date	30/08/2020	Original Project End Date	30/12/2023	Change Rev		
Strategic Outcome Alignment	Outcome 1	Outcome 2	Outcome 3	Outcome 5	Outcome 7	Revised Project End Date				30/01/2026	Rev 5		
Project Update						Project Governance & Mgmt. Control							
<ul style="list-style-type: none"> <li>Programme continues its Lot 2 preparation to go out to the market. Elaborated Requirements (ELABRS) are nearing completion. CMA final report has been published and is attached to April PB papers.</li> <li>Work is ongoing re Applications and technical integration with the SFRS back office. Early Market engagement with two key suppliers (Airbus and STC) has taken place with positive exchanges of information. This matter is now progressing to Procurement.</li> <li>Detailed work ongoing with In Vehicle Systems Project, Airwave and the software suppliers for an integrated solution between Airwave, mobilisation and ESN.</li> <li>Engagement with HR and Procurement relative to the options of recruiting fitters or engaging a fitting company via Home Office CCS framework.</li> <li>Field tests took place at the Radio 1 Big Weekend in Dundee and at the Scotland v Georgia international at Hampden, the results of these event tests are currently under review by the Programme Test and Assurance team (TAS).</li> <li>UIG established for the Vehicle device installation contract. First meeting took place, ongoing work with Procurement Lead.</li> </ul>						Current Period Delivery Trend	→	Business Case	Project Dossier	Risk Register	Project Phase		
						Last Period Delivery Trend	→	YES	YES	YES	Planning		
						Project Performance	Overall Health	Time	Cost	Quality	Skills & Resource		
							A	A	R	G	G		
						Significant Milestone Forecast		Progress	Status	Planned	Latest Predicted Date		
						Agreed funding (SG and Programme) (Data First)		75-100%	In Progress	30/6/2022	30/08/2023		
						Migration to ESN Data First		75-100%	In Progress	30/9/2023	30/11/23		
						Data coverage testing (Assure)		75-100%	In Progress	31/12/2023	31/12/2023		
						Fleet Technicians recruited		25-50%	In Progress	30/09/2023	30/09/2023		
						Installation Company employed		0-25%	In Progress	11/01/2024	11/01/2024		
Pathway to Green / Next Steps													
<ul style="list-style-type: none"> <li>The pathway to green is via a staged plan starting with a R5 device in red operational fleet supporting data on a commercial (MTPAS) SIM, thereafter an ESN SIM for Data only and finally ESN Version 1 with Voice and Data followed by Airwave shut down. To allow this an ESN enabled control room needs to be in place (NMS) and the in-vehicle solution for MDT removal complete.</li> <li>Financing of this option between the Home Office and Scottish Government is one of the significant issues to resolve. Securing long term funding from the Scottish Government will be a clear path to recruit resources and purchase assets. Meetings with SG Finance took place, still no assurance regarding long term funding, being managed as in year pressure. Funding for this year has been provided.</li> <li>Paper on reduced FVD numbers presented at April Project Board and approved. Work continues alongside the In Vehicles Project relative to integration of the OI systems and ESN (Handstee R5).</li> <li>Progressing vehicle device fitting options with Procurement and HR.</li> </ul>						Critical Path - Project Stage							
						Gate 0 - INTAKE		Gate 1 - PLANNING		Gate 2 - DELIVERY		Gate 3 - CLOSURE	
						Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion
						30/06/2020	30/07/2020	30/08/2020	tbc	30/08/2023	tbc	30/06/2026	tbc
Critical Risk, Issue & Inter-Project Dependencies													
Dependency BRAG	Key Inter-Dependency				From (Giver)	To (Receiver)	Due Date (From)	Due Date (To)					
At Risk	Scottish Government Funding agreement (ongoing)				Scottish Government	ESN	01/01/2013	30/08/2023					
On Track	Command and Control New Mobilisation System No immediate issue or risk, this will become an issue as we approach move over to ESN from Airwave.				NMS	SFRS/ESN	01/01/2013	01/07/2025					
Risk RAG/Score	Top 3 Delivery Risks			Mitigation Plan			Date Identified	Risk Owner	By When				
16	Recruitment and retention of vehicle fitting staff			Working with HROD to recruit. Possibility of short term contract offers, plan to advertise well underway.			01/01/2022	Head of People	03/09/2023				
9	Spare Vehicle capacity to facilitate transition (Will be de-risked by ESN Data First)			Liaising with fleet team to devise transition plan, budget pressures on the service will result in a smaller fleet and in turn a smaller spare fleet.			01/01/2022	Fleet Manager	30/09/2023				
12	Command and Control system not being ESN ready			Active engage engagement with ESN & NMS Project Managers			01/01/2023	Project Manager	31/12/2023				
Issue Impact	Top 3 Delivery Issues			Corrective Action			Date Identified	Issue Owner	By When				
Medium	Agreement of Current Scope for ESN Data First only			Agree/define scope, timeline			01/03/2022	Head of Operations	31/07/2023				
Financial & Benefit Tracking													
Provisional Financial Tracking Reporting period: 2022/2023, F400002							General Benefit Tracking						
							Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date			
Previous Year(s)	Current Year			Future Year(s)	Total Cost	Variation	NO	dd/mm/yyyy	NO	dd/mm/yyyy			
Actual Spend £000's	Budget £000's	Year To Date Actual £000's	Forecast £000's	£000's	Forecast Project Cost £000's	Business Case (BC) Cost £000's	£ Variation to BC as %	Financial Benefit Tracking					
							Cashable Benefits Identified		Non-Cashable Benefits Identified				
							NO	£ Total Value	NO	£ Total Value			
							Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy			
							Approach to Financial Benefit Realisation:						
							Review once funding approved						

**PROJECT HIGHLIGHT REPORT**  
12 Jun - 10 July 23



<b>Project Name</b>	Attraction & Recruitment Improvements (On Call)			<b>SRO</b>	ACO David Faries	<b>Project Manager</b>	People Manager Karen Lewis / AC Marc Pircombe	<b>Project Start Date</b>	30/11/2021	<b>Original Project End Date</b>	30/03/2023	<b>Change Rev</b>					
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 5	Outcome 6	<b>Revised Project End Date</b>			30/06/2023	<b>Change Rev</b>	Rev 1					
<b>Project Update</b>							<b>Project Governance &amp; Mgmt. Control</b>										
<p>• Project team members and OCST continue to undertake significant engagement with staff, internal partners and stakeholders via various forums and working groups, communications will continue to ensure issues are captured and a continuous improvement approach adopted. Recommendations within final report support future approaches to ensure these channels remain.</p> <p>• PREP 2 pilots ongoing. Full evaluation of pilots and other cost and resource implications need to be considered ahead of any decision for national implementation, final report to SLT contains recommendations in relation to this.</p>							<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
							<b>Last Period Delivery Trend</b>	→	<b>Business Case</b>	YES	<b>Project Dossier</b>	YES	<b>Risk Register</b>	YES	<b>Project Phase</b>	Closure	
							<b>Project Performance</b>	<b>Overall Health</b>	G	<b>Time</b>	G	<b>Cost</b>	G	<b>Quality</b>	G	<b>Skills &amp; Resource</b>	G
							<b>Significant Milestone Forecast</b>	<b>Progress</b>		<b>Status</b>		<b>Planned</b>		<b>Latest Predicted Date</b>			
							Design, rollout and evolve a supported RVDS pre-employment engagement programme (now PREP) to enhance the candidate experience and recruitment success rates.							100%	Complete	29/02/2023	30/06/2023
<b>Pathway to Green / Next Steps</b>																	
<p>• Continued liaison with key stakeholder groups to scope out opportunities and options for localised PST delivery and modularisation of On Call basic training courses which are included in final programme recommendations report.</p> <p>• Drafting end of project report and handover form. Approach and responsibility for project evaluation yet to be decided.</p>																	
<b>Critical Path - Project Stage</b>																	
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>								
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>								
30/11/2021	30/11/2021	30/11/2021	30/11/2021	28/02/2023	30/04/2023	30/06/2023	30/06/2023										
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>																	
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>				<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>	<b>Due Date (To)</b>									
<b>Risk RAG/Score</b>	Top 3 Delivery Risks			Mitigation Plan			<b>Date Identified</b>	<b>Risk Owner</b>	<b>By When</b>								
<b>Issue Impact</b>	Top 3 Delivery Issues			Corrective Action			<b>Date Identified</b>	<b>Issue Owner</b>	<b>By When</b>								
<b>Financial &amp; Benefit Tracking</b>																	
<b>Provisional Financial Tracking Programme level costings (Cost captured within BAU)</b> Reporting period: 2023/2004 - PE/RI/002							<b>General Benefit Tracking</b>										
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>		<b>Variation</b>	<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>						
								NO	01/11/2022	NO	dd/mm/yyyy						
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>	<b>Financial Benefit Tracking</b>									
								<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>							
								NO	£ Total Value	NO	£ Total Value						
							<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	dd/mm/yyyy						
<p><b>Approach to Financial Benefit Realisation:</b> Potential time efficiencies to be explored, OCH pass rates etc dependant on recommendations going forward.</p>																	

**PROJECT HIGHLIGHT REPORT**  
12 Jun - 10 July 23



<b>Project Name</b>	Responding Options & Duty Systems (On Call)			<b>SRO</b>	ACO David Faries	<b>Project Manager</b>	GC Gavin Hammond/AC Mark Bryce (retired)	<b>Project Start Date</b>	30/11/2021	<b>Original Project End Date</b>	6/30/2023	<b>Change Rev</b>				
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 3	Outcome 5	Outcome 7	Outcome 6	<b>Revised Project End Date</b>					30/06/2023	Rev 1				
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>										
<ul style="list-style-type: none"> <li>All of the identified project work streams have been completed with only one of the milestones not being fully achieved due to resourcing capacity and access to SME's. NOCLF and Board members aware and will be highlighted in end of project report.</li> </ul>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
						<b>Last Period Delivery Trend</b>	→	<b>YES</b>		<b>YES</b>		<b>YES</b>		<b>Closure</b>		
						<b>Project Performance</b>	<b>Overall Health</b>	<b>Time</b>	<b>Cost</b>	<b>Quality</b>	<b>Skills &amp; Resource</b>					
							G	G	G	G	G					
						<b>Significant Milestone Forecast</b>	<b>Progress</b>	<b>Status</b>	<b>Planned</b>	<b>Latest Predicted Date</b>						
<b>Pathway to Green / Next Steps</b>																
<ul style="list-style-type: none"> <li>Finalising end of project report in consultation with other project leads and portfolio office.</li> <li>In lieu of any SLT decisions following recommendations report OCST resources will be further reduced to only 1 x GC as of 30 June 2023</li> <li>Programme and project evaluation plan and approach to be determined and agreed.</li> </ul>																
<b>Critical Path - Project Stage</b>																
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>							
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>					
30/11/2021	30/11/2021	30/11/2021	30/11/2021	30/06/2023	30/06/2023	30/06/2023	30/06/2023	30/06/2023	30/06/2023							
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>																
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>					<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>	<b>Due Date (To)</b>							
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>					<b>Mitigation Plan</b>			<b>Date Identified</b>	<b>Risk Owner</b>			<b>By When</b>			
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>					<b>Corrective Action</b>			<b>Date Identified</b>	<b>Issue Owner</b>			<b>By When</b>			
<b>Financial &amp; Benefit Tracking</b>																
<b>Provisional Financial Tracking Programme level costings (Cost captured within BAU - under Attract &amp; Recruit)</b>								<b>General Benefit Tracking</b>								
<b>Reporting period: 2023/2004_PERIOD 2</b>								<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>					
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>		<b>Variation</b>	YES	01/11/2022	NO	dd/mm/yyyy					
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>	<b>Financial Benefit Tracking</b>								
								<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>						
								NO	£ Total Value	NO	£ Total Value					
							<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	dd/mm/yyyy					
<b>Approach to Financial Benefit Realisation:</b>																
Efficiencies to be explored dependency on recommendations being taken forward.																

**PROJECT HIGHLIGHT REPORT**  
12 Jun - 10 July 23



<b>Project Name</b>	Variable Contract & Station Establishments (On Call)			<b>SRO</b>	ACO David Faries	<b>Project Manager</b>	Rachael Scott & Craig McGoldrick	<b>Project Start Date</b>	30/11/2021	<b>Original Project End Date</b>	30/03/2023	<b>Change Rev</b>			
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 5	<b>Revised Project End Date</b>				30/06/2023	Rev 1				
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>									
<p>Final On Call Programme report with recommendations presented to On Call Board in June and SLT in July. Awaiting formal feedback from SLT regarding which recommendations they would like to take forward and next steps.</p> <p>Finalising end of project report in collaboration with other On Call project leads, OCSST and Portfolio Office for approval by Programme Board on 6th July 2023, prior to submission to CPIG and Change Committee.</p>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>	
						<b>Last Period Delivery Trend</b>	→	YES	YES	YES	Closure				
						<b>Project Performance</b>	<b>Overall Health</b>	Time	Cost	Quality	Skills & Resource				
							G	G	G	G	G				
						<b>Significant Milestone Forecast</b>	<b>Progress</b>	<b>Status</b>	<b>Planned</b>	<b>Latest Predicted Date</b>					
Present recommendation to SLT for decision		75-100%	Complete	01/12/2022	19/06/2023										
<b>Pathway to Green / Next Steps</b>															
Project close and official handover to take place.															
Project evaluation plan to be agreed in liaison with Portfolio Office.															
<b>Critical Path - Project Stage</b>															
<b>Gate 0 - INTAKE</b>			<b>Gate 1 - PLANNING</b>			<b>Gate 2 - DELIVERY</b>			<b>Gate 3 - CLOSURE</b>						
<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>		<b>Planned Completion</b>	<b>Actual Completion</b>					
30/11/2021	30/11/2021		30/11/2021	30/11/2021		30/06/2023	30/06/2023		30/06/2023	30/06/2023					
<b>Critical Risk, Issue &amp; Inter-Project Dependencies</b>															
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>					<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>			<b>Due Date (To)</b>				
<b>Risk RAG/Score</b>	Top 3 Delivery Risks					Mitigation Plan			<b>Date Identified</b>	<b>Risk Owner</b>		<b>By When</b>			
<b>Issue Impact</b>	Top 3 Delivery Issues					Corrective Action			<b>Date Identified</b>	<b>Issue Owner</b>		<b>By When</b>			
<b>Financial &amp; Benefit Tracking</b>															
<b>Provisional Financial Tracking Programme level costings (Cost captured within BAU under Attract &amp; Recruit)</b> Reporting period: 2023/2024, PERIOD 2								<b>General Benefit Tracking</b>							
								<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>				
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>		<b>Variation</b>	NO	dd/mm/yyyy	NO	dd/mm/yyyy				
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>	<b>Financial Benefit Tracking</b>							
							£0	<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>					
								NO	<b>£ Total Value</b>	NO	<b>£ Total Value</b>				
							<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	dd/mm/yyyy				
<b>Approach to Financial Benefit Realisation:</b> Benefits to be explored dependant on recommendations being taken forward.															

**PROJECT HIGHLIGHT REPORT**  
12 June - 10 July 2023



<b>Project Name</b>	iHub_Web		<b>SRO</b>	Marysia Waters	<b>Project Manager</b>	Shirley Hartridge	<b>Project Start Date</b>	05/04/2022	<b>Original Project End Date</b>	31/03/2024	<b>Change Rev</b>					
<b>Strategic Outcome Alignment</b>	Outcome 2	Outcome 3	Outcome 6	Outcome 7				<b>Revised Project End Date</b>	dd/mm/yyyy	<b>Rev</b>	1					
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>										
<ul style="list-style-type: none"> <li>Benefits approved by project board 30/06/23</li> <li>Storm &amp; SFRS ICT tech meeting 19/06/23</li> <li>Technical dependencies completed by SFRS ICT                             <ul style="list-style-type: none"> <li>Azure App registration complete 28/06/23</li> <li>Lambda configuration complete 30/06/23</li> <li>Access to Aws 06/07/23</li> <li>S3 Bucket 07/07/23</li> </ul> </li> <li>ICT &amp; Storm technical twice weekly stand ups implemented 04/07/23</li> <li>SFRS ICT Low level Design reviewed and feedback provided to Storm 05/07/2023</li> <li>Document Library Approval workflow sessions x3 completed as at 06/07/23</li> <li>Draft list of website forms and fields provided to storm 30/06/23</li> <li>Gather Content training provided by Storm to SFRS and content re write commenced 19/06/23</li> <li>Publication scheme content types and filters agreed and Mock up pages received for feedback 06/07/23</li> <li>Publication scheme meeting held x2 by 26/06/23</li> <li>Intranet Alpha SoW received from Storm 26/06/23 and feedback provided 03/07/23</li> <li>Intranet Kick off Meeting 05/07/23</li> </ul>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>		<b>Project Dossier</b>		<b>Risk Register</b>		<b>Project Phase</b>		
						<b>Last Period Delivery Trend</b>	→	<b>Business Case</b>	YES	<b>Project Dossier</b>	YES	<b>Risk Register</b>	YES	<b>Project Phase</b>	Delivery	
						<b>Project Performance</b>	<b>Overall Health</b>	G	<b>Time</b>	G	<b>Cost</b>	G	<b>Quality</b>	G	<b>Skills &amp; Resource</b>	G
						<b>Significant Milestone Forecast</b>	<b>Progress</b>		<b>Status</b>		<b>Planned</b>		<b>Latest Predicted Date</b>			
						Document Library	50-75%	In Progress	30/04/2023	31/08/2023						
Website Platform	25-50%	In Progress	31/08/2023	31/08/2023												
Intranet	0-25%	In Progress	28/02/2024	28/02/2024												
<b>Pathway to Green / Next Steps</b>																
<b>Critical Path - Project Stage</b>																
<b>Gate 0 - INTAKE</b>		<b>Gate 1 - PLANNING</b>		<b>Gate 2 - DELIVERY</b>		<b>Gate 3 - CLOSURE</b>										
<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>	<b>Planned Completion</b>	<b>Actual Completion</b>									
31/12/2022	31/12/2022	28/02/2023	28/02/2023	28/02/2024	dd/mm/yyyy	31/03/2024	dd/mm/yyyy									
<b>Critical Risk, Issue &amp; Dependencies</b>																
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>				<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>	<b>Due Date (To)</b>								
On Track	The successful delivery of a new intranet for SFRS will be linked to the work of the Sharepoint and Teams Working Group				Working Groups	iHub_Web	04/01/2023	30/01/2024								
On Track	Staff across the service Directorates to support the review and develop the iHub and Web				Directorates	iHub_Web	01/12/2023	30/01/2024								
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>			<b>Mitigation Plan</b>			<b>Date Identified</b>	<b>Risk Owner</b>		<b>By When</b>						
12	There is a risk that capacity challenges within the SFRS could affect the availability of staff to deliver the project which may result in delays to the project timeline.			Risk for key project staff members being on annual leave or unplanned absence at critical points. Annual leave tracker added to shared Teams channel with Storm, liaising with relevant department for alternative resources when appropriate. Ensuring resource lined up in accordance with the overall project plan.			22/05/2023	Marysia Waters, Head of Communications and Engagement		31/03/2024						
12	There is a risk that the Supplier may have limited resources/ skills to complete the required work because of absence / staff turnover which may result in delays to the project timeline			Work with the supplier to confirm resource expectations and required involvement in order to set expectations within the department to ensure effective planning and contingency. Regular monitoring and reviewing of capacity at the weekly project meeting and comms weekly team meeting			08/03/2023	Marysia Waters, Head of Communications and Engagement		31/03/2024						
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>			<b>Corrective Action</b>			<b>Date Identified</b>	<b>Issue Owner</b>		<b>By When</b>						
<b>Financial &amp; Benefit Tracking</b>																
<b>Provisional Financial Tracking</b> <i>Reporting period: 2023/2024 PERIOD 2</i>							<b>General Benefit Tracking</b>									
							<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>						
							YES	01/06/2023	NO	dd/mm/yyyy						
<b>Previous Year(s)</b>	<b>Current Year</b>			<b>Future Year(s)</b>	<b>Total Cost</b>	<b>Variation</b>										
<b>Actual Spend £000's</b>	<b>Budget £000's</b>	<b>Year To Date Actual £000's</b>	<b>Forecast £000's</b>	<b>£000's</b>	<b>Forecast Project Cost £000's</b>	<b>Business Case (BC) Cost £000's</b>	<b>£ Variation to BC £000's</b>									
							<b>Financial Benefit Tracking</b>									
							<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>							
							NO	£ Total Value	YES							
							<b>£ Variation to BC as %</b>	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	30/07/2024					
							<b>Approach to Financial Benefit Realisation:</b>									
							Project non cashable benefits approved by the project board 30/06/23. These benefits will be achieved via time saving efficiencies.									

PROJECT HIGHLIGHT REPORT 12 Jun - 10 July 2023													
<b>Project Name</b>	Safe and Well			SRO	DACO Iain MacLeod	<b>Project Manager</b>	Cathy Barlow	<b>Project Start Date</b>	04/01/2018	<b>Original Project End Date</b>	30/04/2022	<b>Change Rev</b>	
<b>Strategic Outcome Alignment</b>	Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 5	Revised Project End Date					31/08/2022	Rev 4	
<b>Project Update</b>						<b>Project Governance &amp; Mgmt. Control</b>							
<p>Two papers were tabled at the June CPPG meeting: "SAW Progress to Date and Benefits" and "SAW Options for Implementation". Option 4 (a full-roll out to all staff as revised HFSV) was supported in principle. Work now underway to prepare a Business Case for CPG with more information supporting this option.</p> <p>Original pilot project had an end date of 31/8/22. The interdependency, top risk and top issue have been updated to reflect this. The Gate 2 delivery date is also set to August 2022.</p>						<b>Current Period Delivery Trend</b>	→	<b>Business Case</b>	Project Dossier	Risk Register	Project Phase		
						<b>Last Period Delivery Trend</b>	→	YES	YES	YES	Planning		
<p>Business case to CPG (August 2023) following CPPG agreement to support Option 4 (June 2023). Project requires the Partner site to be completed and piloted as well as outstanding system requirements. ICT report that testing is underway and partner elements due to be completed by end of June (still some 'bugs' outstanding).</p> <p>ICT have confirmed developer only funded until end of June which will further affect timescales as they have indicated that based on current capacity the ICT elements will not be complete until early 2024 - this includes the Asset Management integration, PEN and Load testing, outstanding bugs and reporting (supported by BN).</p> <p>Once partner element of the site is ready this will be tested with partners to ensure the two way referral processes work. A decision is requested from CPPG about the future implementation (associated paper).</p> <p>Submission of a Closing Report.</p>						<b>Project Performance</b>	Overall Health	Time	Cost	Quality	Skills & Resource		
						A	R	G	R	A			
<b>Pathway to Green / Next Steps</b>						<b>Significant Milestone Forecast</b>							
Closing Report						Progress	Status	Planned	Latest Predicted Date				
Decision from CPPG regarding implementation						100%	Complete	30/06/2023	30/06/2023				
Work Plan completion						50-75%	In Progress	01/10/2023	01/10/2023				
Creation of Business Case for Option 4.						0-25%	In Progress						
Decision from CPPG regarding implementation						100%	Complete	30/06/2023	30/06/2023				
Work Plan completion						50-75%	In Progress	01/10/2023	01/10/2023				
Creation of Business Case for Option 4.						0-25%	In Progress						
Closing Report						0%	Future Task						
<b>Critical Path - Project Stage</b>													
Gate 0 - INTAKE			Gate 1 - PLANNING			Gate 2 - DELIVERY			Gate 3 - CLOSURE				
Planned	Actual		Planned	Actual		Planned	Actual		Planned	Actual			
30/04/2018	30/04/2018		30/04/2019	30/04/2019		31/08/2022	31/08/2022		30/06/2023				
<b>Critical Risk, Issue &amp; Dependencies</b>													
<b>Dependency BRAG</b>	<b>Key Inter-Dependency</b>					<b>From (Giver)</b>	<b>To (Receiver)</b>	<b>Due Date (From)</b>	<b>Due Date (To)</b>				
Will not happen/missed	ICT issues (Systems, mobile devices, Wi-Fi available on front line appliance)					ICT	Safe and Well	06/01/2022	31/08/2022				
<b>Risk RAG/Score</b>	<b>Top 3 Delivery Risks</b>					<b>Mitigation Plan</b>		<b>Date Identified</b>	<b>Risk Owner</b>	<b>By When</b>			
15	There is a risk of delay or implementation of safe and well, because of a lack of agreement with regards informed terms and condition to undertake the requirements of the project, resulting in a failure to deliver to the service strategy, reputational damage and adverse internal or external scrutiny. previously SW17					Agreement to designate all S&W activities as HFSV evolution, within current role map and Ts&Cs will mitigate this risk, details to be agreed at August CPPG, subject to business case.		08/01/2022	Cathy Barlow / Iain Macleod	31/08/2023			
15	Due to a lack of dedicated ICT resourcing (from 01 July) there is a risk that timescales for development and delivery of the SAW ICT system will be extended. This is due to competing priorities for internal ICT resource. As the roll-out of SAW is inextricably linked with the ICT system, any delays will have an impact on the ability to pilot and implement the project.					Work on-going with ICT to develop a timeline and implementation plan and to identify internal resources to support once dedicated support no longer available (30/06)		24/05/2023	ICT	01/07/2023 To be taken over by ICT Directorate			
12	There are risks of running two separate systems concurrently to manage HFSV and SAW. This will introduce complexities around data protection and information sharing as partners may be referring under different projects. Partner referrals to SAW will need to be minimal, or visits taken from CSET, to ensure pending list are manageable with a limited CSA work force. Fitting of detection will fall under two different policies and KPIs will need to take into account two different home safety projects.					Options paper for implementation to be discussed at June CPPG meeting. Agreement to align S&W with updated HFSV for all eligible personnel will remove risk associated with 2 systems being in operation (for HFSV) simultaneously. Failure to have updated system fully functional will prevent close down of current system.		5/16/2023	Cathy Barlow / Iain Macleod	01/07/2023 To be taken forward by Service Delivery Directorate			
<b>Issue Impact</b>	<b>Top 3 Delivery Issues</b>					<b>Corrective Action</b>		<b>Date Identified</b>	<b>Issue Owner</b>	<b>By When</b>			
Very High	SAW unable to be rolled out Service wide due to relationship with Terms and Conditions and discussions around widening of the role.					Discussions to be held between SRO and SLT members to consider options for future delivery. Agreement to designate all S&W activities as HFSV evolution, within current role map and Ts&Cs will mitigate this risk.		01/01/2023	Cathy Barlow / Iain Macleod	01/07/2023 To be taken forward by People Directorate			
Very High	Outstanding ICT activity required to support implementation. System development, ICT interfaces and ICT architecture issues all require additional capacity to ensure product is delivered.					New risk added to Risk Register (see above). ICT are working on a timeline and identifying resources to support the project.		24/03/2023	Cathy Barlow / Iain Macleod	01/07/2023 To be taken over by ICT Directorate			
<b>Financial &amp; Benefit Tracking</b>													
<b>Provisional Financial Tracking</b> Reporting period: 001/2024, 00000 2							<b>General Benefit Tracking</b>						
							<b>Benefit Profiles Created</b>	<b>Benefit Profile Created Date</b>	<b>Benefit Realisation Plan Created</b>	<b>Benefit Realisation Plan Created Date</b>			
Previous Year(s)	Current Year			Future Year(s)			Total Cost	Variation	NO	dd/mm/yyyy	NO	dd/mm/yyyy	
Actual Spend £000's	Budget £000's	Year To Date Actual £000's	Forecast £000's	£000's	Forecast Project Cost £000's	Business Case (BC) Cost £000's	£ Variation to BC £000's		<b>Financial Benefit Tracking</b>				
							<b>Cashable Benefits Identified</b>		<b>Non-Cashable Benefits Identified</b>				
							NO	£ Total Value	NO	£ Total Value			
							£ Variation to BC as %	<b>Realisation Completion Date</b>	dd/mm/yyyy	<b>Realisation Completion Date</b>	dd/mm/yyyy		
							Financial savings will be made through a reduction in travel related costs. Targets and delivery model for visits required to support this element of work in detail. More specific figures may become available once implementation model is agreed. Whilst no official benefits profiles exist as yet, the appendix contains a clear outline of a number of different benefits.						



## APPENDIX B

# Agenda item 7.1

Project	Current Phase	Planned Completion as at July 2022	Planned Completion as at July 2023	Slippage in months	Date change request submitted	Comments
Low Carbon Appliance	Delivery	31/12/2023	30/06/2024	7	None submitted	Proof of concept (POC) paper submitted July 2022 showing POC evaluation date as 2023 with an end of trial date in 2024
McDonald Road Redevelopment & Museum of Fire	Closure	30/09/2022	30/06/2023	9	Not submitted in relation to additional time (see comments)	Fire station delivery date was 21/12/21 and museum delivery date was 18/10/22 – the delay in closure was due to discussions with the contractors re final accounts
West ARC	Closure	31/07/2023	31/08/2023	1	n/a (see comments)	Site was ready and occupation started prior to planned completion date
Responding Options & Duty Systems (On Call)	Closure	30/06/2023	30/06/2023	0	15/09/2022	CR002 to SMB 15/9/22 – 3-month extension approved
Variable Contract & Station Establishments (On Call)	Closure	30/06/2023	30/06/2023	0	15/09/2022	CR002 to SMB 15/9/22 – 3-month extension approved
Attraction & Recruitment Improvements (On Call)	Closure	31/03/2023	30/06/2023	2	15/09/2022	CR002 to SMB 15/9/22 – 3-month extension approved and aligned closing date with other 2 projects
Rostering	Intake	01/04/2024	31/12/2025	20	Termination of programme	Original end date was as part of PTFAS programme
People, Payroll, Finance & Training	Intake	01/04/2024	30/04/2026	25	Termination of programme	Original end date was as part of PTFAS programme
ESMCP	Planning	30/12/2026	30/12/2026	0	n/a	-
Demand Based Duty System (SDMP)	Delivery	30/05/2026	31/03/2024	-26	02/11/2022	Align to Strategic change requirements and options of change progressed by Service Delivery
Station Appliance Review (SDMP)	Delivery	30/05/2026	31/03/2024	-26	02/11/2022	Align to Strategic change requirements and options of change progressed by Service Delivery
Community Risk Index Model (SDMP)	Delivery	30/05/2026	31/03/2024	-26	02/11/2022	Align to Strategic change requirements and options of change progressed by Service Delivery
New Mobilising System (NMS) [Previously CCF]	Planning	n/a	2025 (TBC)	n/a	n/a	NMS project was created to supersede previous CCF project
Safe & Well – Pilot	Closure	31/08/2022	30/06/2023	10(+)	Not submitted (see comments)	New option being put forward to supersede the pilot project
iHub/Webpage	Delivery	n/a	31/03/2024	n/a	n/a	-



# Portfolio strategic assessment scores and ranking summary

Portfolio Ranking summary	On Call IP - RESPONDING OPTIONS & DUTY SYSTEMS RELATIONSHIPS	On Call IP - ATTRACTION & RECRUITMENT IMPROVEMENTS	On Call IP - VARIABLE CONTRACT OPTIONS & ON CALL STATION ESTABLISHMENTS	Emergency Services Network	McDonald Road Redevelopment...Museum of Fire	West Asset Resource Centre	Safe & Well	SDMP - CRIM	SDMP - Demand Based Duty System	SDMP - Station Appliance Review	People, Payroll, Finance and Training (PPFT)	Rostering	New Mobilising System (NMS)	Low Carbon Appliance	iHub/Web
	1. Improve community safety & wellbeing/ help reduce social and economic inequalities/ help reduce community risk?	2	5	0	0	2	2	5	0	5	5	0	0	5	0
2. Help deploy the right operational capabilities to support and improve firefighter safety?	5	5	2	5	2	2	5	0	5	5	2	5	5	0	0
3. Positively contribute to developing a culture of innovation / improvement?	5	2	5	5	2	5	2	5	2	2	2	2	5	5	5
4. Help tackle climate change, prevent or respond to climate change related incidents?	2	2	2	2	5	5	2	0	5	5	0	0	2	5	2
5. Deliver non-cashable savings in business processes/ systems/ resources, making best value use of our resources to improve organisational effectiveness?	5	2	2	2	2	5	2	5	5	5	5	5	2	0	5
6. Positively impact on attracting, retaining or developing members of staff?	5	5	5	2	5	5	2	0	5	2	5	5	2	2	5
7. Help improve collaboration or partnership working including with communities?	0	2	2	2	5	0	5	5	5	5	0	0	0	0	2
8. Deliver recurring net cashable savings that contributes to an overall reduction in operating costs? (This question contains weighted scoring)	0	0	0	5	5	10	0	0	10	10	10	5	10	0	5
9. Provide an option that is deliverable and achievable given level of complexity/ impact on organisational risk/ our organisational change capacity and capability?	5	2	2	2	2	2	2	5	2	2	5	5	2	5	2
10. Positively impact on external stakeholder relationships / SFRS' reputation	5	5	2	2	5	2	5	2	5	5	0	0	2	5	5
11. Positively impact staff satisfaction/ motivation?	2	5	5	2	5	5	2	0	2	2	5	5	2	5	5
<b>TOTAL STRATEGIC ALIGNMENT SCORES</b>	<b>36</b>	<b>35</b>	<b>27</b>	<b>29</b>	<b>40</b>	<b>43</b>	<b>32</b>	<b>22</b>	<b>51</b>	<b>48</b>	<b>34</b>	<b>32</b>	<b>37</b>	<b>27</b>	<b>38</b>
<b>CURRENT RANK</b>	<b>7</b>	<b>8</b>	<b>12</b>	<b>11</b>	<b>4</b>	<b>3</b>	<b>10</b>	<b>14</b>	<b>1</b>	<b>2</b>	<b>9</b>	<b>10</b>	<b>6</b>	<b>12</b>	<b>5</b>



<b>Report to:</b>	<b>CHANGE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>10 AUGUST 2023</b>						
<b>Report Title:</b>	<b>WEST ASSET RESOURCE CENTRE CLOSING REPORT</b>						
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this paper is to provide summary information to the Change Committee for the Closing Report for the West Asset Resource Centre (ARC) being monitored by the Portfolio Office.						
<b>2</b>	<b>Background</b>						
2.1	In June 2013, September 2013 and January 2014 the Scottish Fire and Rescue Service (SFRS) Board approved proposals in relation to our Property Estate – Strategic Intent, to create a “fit for purpose, cost-effective, support estate that is strategically located across our communities, giving the Service a robust platform from which to deliver its strategic aims”.						
2.2	Following due process and approvals by the Board on 13 January 2022. The project commenced on 25 February 2022 works to construct the new facility on a site to the east of the SFRS property at Cambuslang. On 12 May 2023, the works to build the West ARC were certified as complete. SFRS occupation of the new facility was achieved in early June 2023 and the new Cambuslang ARC is now operational.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Delivery To Time:</b> Completion and occupation of the West ARC has been achieved within the approved SFRS programme dates.						
3.2	<b>Delivery To Cost:</b> While discussion on the agreement of the Final Account have yet to be concluded, it is fully anticipated that the agreed final sum will fall within the approved SFRS funding level, including identified contingency sum. The variance currently being debated is between £60k and £80K						
3.3	<b>Project Objectives:</b> the project objectives: “To design and construct a modern fit for purpose workshops, stores facility capable of increasing the efficiency of service delivery and a rationalised property estate with reduced maintenance liability and operating costs, to be located on a vacant site at Cambuslang to the east of the National HQ and Training Centre site” have been achieved in full.						
3.4	<b>Project Scope and Exclusions:</b> The Project encompassed all of the necessary work required to plan, design, build and commission the required workshop and stores facility. While the project scope did not extend to “the logistics of planning, moving and relocating of staff to the facility”, this report can confirm that the facility is now operational.						

3.5	<b>Constraints and Aspirations:</b> Included within the Transformation and Major Projects Programme and monitored by the Programme Office with scrutiny by the Programme Office Board and the Transformation and Major Projects Committee.
3.6	The project has resulted in the provision of a new Asset Resource Centre, meeting stated expectations being: <i>“a fully functioning facility with suitable modern comfortable and fit for purpose workshop, IT workshops, stores, Property Services, ICT office accommodation and ancillary accommodation”</i> .
3.7	<b>Users and Other Interested Parties:</b> Senior Users: Scott Roberts, Greg Aitken, Roddy MacKinnon, Martin McCabe Union Rep: Derek Jackson
3.8	<b>Project benefits/disbenefits:</b> All benefits identified within the Project Dossier have been realised, with evidence to be confirmed as appropriate. The disbenefits identified, were avoided through suitable management measures.
3.9	<b>Project Interdependencies:</b> All identified project interdependencies were appropriately managed as the project developed.
3.10	<b>Lessons identified:</b> While a detailed Lessons Learned Report for the West ARC has still to be compiled, a number of relevant matters have been identified within the Closing Report. It should be noted that <i>“Prior to engaging with this project, a review was carried out on difficulties experienced and good practice employed within similar SFRS construction projects, all in an effort to learn from recent experiences, both good and not so good.”</i> This wider consideration of good practice continued throughout the project duration with suitable measures employed as considered appropriate.
3.11	<b>Performance Measures:</b> All performance indicator measures identified within the Project Dossier have been concluded through regular reporting to the West ARC Project Board.
<b>4</b>	<b>Recommendation</b>
4.1	The Change Committee is asked to scrutinise the following: <ul style="list-style-type: none"> <li>• The Closing Report, Project Dossier V3 and Community Benefits.</li> <li>• The Change Committee have noted the reports and are content.</li> </ul>
<b>5</b>	<b>Key Strategic Implications</b>
5.1 5.1.1	<b>Risk</b> All risks are now closed.
5.2 5.2.1	<b>Financial</b> Final account discussion for the West ARC are progressing with an anticipated conclusion in mid July 2023.
5.2.2	While discussion on the agreement of the Final Account have yet to be concluded, it is fully anticipated that the agreed final sum will fall within the approved SFRS funding level, including identified contingency sum.
5.3 5.3.1	<b>Environmental &amp; Sustainability</b> Within the project objectives, there is a stated requirement for “reduced maintenance liability and operating costs”. This objective was identified within the project brief for the design and construction of the West ARC, resulting in a number of measures incorporated to best ensure environmental and sustainability matters were suitably realised.
5.3.2	This new facility provides enhanced facilities for decontamination controls with new showering facilities and identified clean rooms for specialised cleaning of equipment,

5.3.3	The design allowed for suitable environmental measures covering such aspects as new drainage provision with the inclusion of interceptor tanks, additional suds pond, etc. Sustainability measures include the provision of Air Source Heat Pumps (ASHP) utilised for the main heating system, photovoltaic panels (PV) with associated battery storage have also been incorporated to best utilise available opportunities for sustainability measures. Electric car charging points have also been installed. All to maximise the environmental efficiency and reduced carbon footprint of the new facility.
5.4	<b>Workforce</b>
5.4.1	Appropriate functional and space requirements were also adopted throughout all to provide a new fully functioning facility providing staff with suitable modern comfortable and fit for purpose accommodation.
5.4.2	Corporate standards were adopted throughout, all to ensure a singular corporate identity across the SFRS property portfolio.
5.4.3	All main stakeholders have been fully consulted throughout the development. Initial indications are that the project has succeeded in suitably providing the requirements of the project brief. A Lessons Learned exercise will be conducted with all main stakeholders to better determine and evidence the current understanding.
5.5	<b>Health &amp; Safety</b>
5.5.1	Appropriate functional and space requirements have been adopted throughout all to provide a new fully functioning facility providing staff with suitable modern comfortable and fit for purpose accommodation.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	Appropriate functional and space requirements have been adopted throughout all to provide a new fully functioning facility providing staff with suitable modern comfortable and fit for purpose accommodation.
5.7	<b>Training</b>
5.7.1	User demonstrations, including video presentations have been provided to best convey the requirements and use of the systems utilised within the new facility. Given staff relocation matters did not fall within the scope of this project there are no outstanding direct training implications associated with this cover paper.
5.8	<b>Timing</b>
5.8.1	Completion of the new facility was certified on 12 May 2023, with SFRS occupation and use of the new facility achieved in June 2023.
5.9	<b>Performance</b>
5.9.1	The new facility provides a fully functioning facility providing staff with suitable modern comfortable and fit for purpose accommodation. A Lessons Learned exercise will be conducted with all main stakeholders to better determine and evidence the performance of the new facility.
5.10	<b>Communications &amp; Engagement</b>
5.10.1	Throughout the progress of the project the Project Board authorised regular communication with both directly affected staff and SFRS staff generally, all as considered appropriate. Prior to completion of the works, all directly affected staff were afforded the opportunity to visit the new facility. Following of the new facility, initial indications are that the project has succeeded in suitably providing the requirements of the project brief.

5.11	<b>Legal</b>	
5.11.1	All necessary Local Authority Approvals have been sought and gained for the West ARC. While confirmation has been received that all matters have been resolved receipt of the Building Warrant Completion Certificate remains outstanding.	
5.12	<b>Information Governance</b>	
5.12.1	DPIA completed No. No personal information has been stored within this project.	
5.13	<b>Equalities</b>	
5.13.1	EHRIA completed Yes	
5.14	<b>Service Delivery</b>	
5.14.1	It is fully anticipated that measurable greater operational effectiveness will be achieved as a consequence of operating from this new fit for purpose Asset Resource Centre.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Iain Morris, Acting Director of Asset Management
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<b>Substantial/Reasonable/Limited/Insufficient</b>
7.3	<b>Rationale:</b>	Project is now completed and site is fully occupied .
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A: West Asset Resource Centre Closing Report	
<b>Prepared by:</b>		John Gillies. Project Manager
<b>Sponsored by:</b>		Alex Lane, National Property Manager
<b>Presented by:</b>		Iain Morris, Acting Director of Asset Management
<b>Links to Strategy and Corporate Values</b>		
SFRS strategic plan 2019-22 – object 4.3: We will invest in and improve infrastructure to ensure our services and systems are fit to deliver modern services.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Project Board</i>		<i>14 June 2023</i>
<i>Change Portfolio Progress Group</i>		<i>26 June 2023</i>
<i>Change Portfolio Investment Group</i>		<i>20 July 2023</i>
<i>Change Committee</i>		<i>10 August 2023</i>
		<b>Report Classification/ Comments</b>
		<i>Recommended</i>
		<i>Approved</i>
		<i>Noted</i>
		<i>For Scrutiny</i>



## PROJECT CLOSING REPORT

Programme Number:

Agenda Item: 7.2

<b>Project Name:</b>	West Asset Resource Centre																																																
<b>Project Start Date:</b>	August 2020																																																
<b>Project End Date:</b>	July 2023																																																
<b>Project Manager:</b>	JOHN GILLIES																																																
<b>Executive Lead:</b>	IAIN MORRIS																																																
<b>1</b>	<b>Project Delivery Status</b>																																																
<b>1.1</b>	<b>Delivery to Time</b>																																																
1.1.1	<p><b>Programme:</b> The approved programme for the West ARC as identified within the Dossier and Change Request 4 (approved) identifies completion of the construction works by the end of June 2023, with occupation / use of the new facility in July 2023.</p> <p><b>Contract Works:</b> On 12<sup>th</sup> May 2023, Completion was granted for the West ARC construction works by McLH.</p> <p>Although occupation activities rest out with the remit of this project, it is anticipated that full occupation of Cambuslang Asset Resource Centre will be achieved by the end of June 2023.</p>																																																
<b>1.2</b>	<b>Delivery to Cost</b>																																																
1.2.1	<p>The Final Account for the West ARC construction works has still to be concluded, as such, the following figures are based upon the most recent Cost Report 13 (dated 27<sup>th</sup> April 2023). *The final additional amount under dispute is between £60k and £80K*</p> <p><b>Project Budget:</b></p> <p><b>West ARC In Scope Construction</b></p> <table border="1"> <thead> <tr> <th>Element</th> <th>Approved Budget</th> <th>Predicted Project Final Costs</th> <th>Variance</th> <th>Comment</th> </tr> </thead> <tbody> <tr> <td>Construction works</td> <td>12,400,126</td> <td>12,997,157</td> <td>-597,031</td> <td></td> </tr> <tr> <td>Fees</td> <td>555,250</td> <td>572,750</td> <td>-17,500</td> <td></td> </tr> <tr> <td>Statutory Authority</td> <td>38,750</td> <td>38,750</td> <td>0</td> <td></td> </tr> <tr> <td>Contingency</td> <td>1,299,413</td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>Total:</b></td> <td><b>14,293,539</b></td> <td><b>13,608,657</b></td> <td><b>-614,531</b></td> <td></td> </tr> </tbody> </table> <p><b>Opportunity Spend via Contract</b></p> <table border="1"> <thead> <tr> <th>Other Cost</th> <th>Approved Budget</th> <th>Predicted Opportunity Final Costs</th> <th>Variance</th> <th>Comment</th> </tr> </thead> <tbody> <tr> <td>Segregation fence/gates</td> <td>63,120</td> <td>63,120</td> <td>0</td> <td></td> </tr> <tr> <td>Workshop Equipment</td> <td>651,019</td> <td>651,019</td> <td>0</td> <td></td> </tr> </tbody> </table>				Element	Approved Budget	Predicted Project Final Costs	Variance	Comment	Construction works	12,400,126	12,997,157	-597,031		Fees	555,250	572,750	-17,500		Statutory Authority	38,750	38,750	0		Contingency	1,299,413				<b>Total:</b>	<b>14,293,539</b>	<b>13,608,657</b>	<b>-614,531</b>		Other Cost	Approved Budget	Predicted Opportunity Final Costs	Variance	Comment	Segregation fence/gates	63,120	63,120	0		Workshop Equipment	651,019	651,019	0	
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Segregation fence/gates	63,120	63,120	0																																														
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Cargo Lift	77,322	77,322	0
<b>Total:</b>	<b>791,461</b>	<b>791,461</b>	<b>0</b>

**Total Spend via Contract**

Element	Approved Budget	Predicted Total Final Costs	Variance	Comment
Construction works	12,400,126	12,997,157	-597,031	
Fees	555,250	572,750	-17,500	
Statutory Authority	38,750	38,750	0	
Contingency	1,299,413		0	
Opportunity Spend via Contract	791,461	791,461	0	
<b>Total:</b>	<b>15,085,000</b>	<b>14,400,118</b>	<b>-614,531</b>	

**1.3 Delivery to Quality**

**1.3.1** **Project Brief:** The new Cambuslang Asset Resource Centre meets both the Core Brief requirements and stated Project Objectives.

As stated within the Project Brief *“The project will provide a new West Asset Resource Centre to meet current expectations. A fully functioning facility will provide staff with suitable modern comfortable and fit for purpose workshop, IT workshops, Stores, Property Services and ICT office accommodation (for those based in West SDA) and ancillary accommodation”* with a stated project objective of *“To design and construct a modern fit for purpose workshops, stores facility capable of increasing the efficiency of service delivery and a rationalised property estate with reduced maintenance liability and operating costs, to be located on a vacant site at Cambuslang to the east of the National HQ and Training Centre site.”*

**Change Request Items:** As the project progressed items for Change were identified, in total 10 such items were raised and assessed, the Change Request Register for these works is appended to this report.

Of the 10 Change Requests raised for these works 3 Change Request items allowed for additional works to be incorporated within the West ARC contract works, with resultant additional benefits to SFRS, these being:

- the provision of an anti-climb fence between the NTC and the West ARC to ensure both facilities are fully segregated for increased security of both facilities
- the installation of a cargo lift within the two storey Stores facility to address any concerns over manual handling for Stores and ICT transportation of materials to the first floor accommodation
- utilisation of contractor accommodation areas with provision of hardstanding along the new access road south of the West ARC to allow for overflow parking or siting of storage containers, should the need arise

**Layout Proposals:** The Cambuslang ARC as constructed meets *“The particular requirements of the facility .... in accordance with the specified needs identified by the Client Representative in conjunction with the SFRS Strategic Leadership Team (SLT).”* and incorporates the stated needs of the users.

Detailed review of the new facility is ongoing with assessment of the constructed works against stated project requirements, a list of snagging items/ defects is being compiled for actioning by the contractor. It is anticipated that the assessment and associated rectification works will be completed by the end of June.



<b>2</b>	<b>Benefits</b>		
<b>2.1</b>	<b>Cashable</b>		
2.1.1	<b>Anticipated from Dossier</b>	<b>Achieved</b>	<b>Reason/Comment</b>
	Modern fit for purpose workshops and stores facility capable of increasing the efficiency of service delivery.	Yes.	New facilities provided in accordance with stated requirements.
	A rationalisation of property estate with reduced maintenance liability and operating costs.	Yes.	Completion and subsequent occupation of the Cambuslang ARC will allow for properties in Cowcaddens, Hamilton and Johnstone to be vacated.
	The environmental impact of a new build facility will be considerably lower than the aging buildings in current use. The utilities cost (directly co-related to usage) for the new build is anticipated to be 39% of the combined cost of operating the existing facilities, post-refurbishment.	Yes.	Modern cost effective, energy saving and energy efficient systems have been incorporated within the new facility, including Air Source Heat Pump (ASHP) heating and photovoltaic (PV) panels.
	Improved environmental performance. This will be measured by the baseline comparison conducted by the ECMP.	Yes.	Modern energy saving and energy efficient systems have been incorporated within the new facility, including Air Source Heat Pump (ASHP) heating and photovoltaic (PV) panels.
<b>2.2</b>	<b>Non-Cashable</b>		
2.2.1	<b>Anticipated from Dossier</b>	<b>Achieved</b>	<b>Reason/Comment</b>
	Adoption of a corporate standard and identity for SFRS facilities will create consistency and therefore an improved perception of the SFRS brand. Post-implementation an evaluation of SFRS staff perception will be undertaken.	Yes.	The Cambuslang ARC as constructed aligns with the Corporate Specification and is readily recognisable as a modern fit for purpose SFRS facility.
<b>3</b>	<b>Disbenefits</b>		
<b>3.1</b>	<b>Cashable</b>		
3.1.1	<b>Anticipated from Dossier</b>	<b>Achieved</b>	<b>Reason/Comment</b>
	Staff are being relocated to a facility that may be generally less accessible for staff reporting to work than current workplace; this may include loss of staff through resignation, due to	No.	Regular and detailed discussions with affected staff has resulted in any identified issues being suitably addressed.

	relocation and/ or travel arrangements not being realistic.		
	Training, Safety & Assurance to relocate vehicle storage from link access road with arrangements required for the effective management and ongoing storage of vehicles during and following completion of the works.	No.	Additional RTC vehicle racking provision has been constructed within the NTC to best accommodate the loss of vehicle parking provision associated with the West ARC.
<b>3.2</b>	<b>Non-Cashable</b>		
<b>3.2.1</b>	<b>Anticipated from Dossier</b>	<b>Achieved</b>	<b>Reason/Comment</b>
	Other potential disbenefits may include disruption to traffic and staff accessing the general vicinity of HQ and NTC while the construction works are ongoing and any potential road works to Westburn Drive / Westburn Farm Road are carried out. These works may also increase security risk across the site.	No.	While some deliveries were wrongly delivered to HQ/NTC, the vast majority of West ARC traffic was suitably directed to the dedicated site access. Minimal disruption was experienced within HQ/NTC as a consequence of the West ARC works. No security issues were identified during these works.
<b>4</b>	<b>Project Interdependencies</b>		
<b>4.1</b>	<b>Project</b>	<b>Interdependency</b>	<b>Impact</b>
		The commitment to Business Need.	Positive outcome.
		The provision of SFRS Capital allocation for the Project.	Requirements managed as project developed.
		The agreement for a reasonable timescale for delivery of the Project to meet capital allocation.	Requirements managed as project developed.
		The provision of accurate requirements in terms of staffing and their required facilities.	Requirements identified and managed as project developed.
		Gaining approval and sign off from Project Board of project design.	Requirements identified and managed as project developed.
		Capacity of construction consultants / contractors to undertake works	Requirements identified and managed as project developed.

		within noted timescales.	
<b>5</b>	<b>Lessons Identified</b>		
5.1	<p>A detailed Lessons Learned exercise is to be carried out once the contractual matters, including snagging / outstanding items and final account negotiations for the Cambuslang ARC has been concluded. Initial discussions with the facility stakeholders will also be carried out over the coming weeks, it is anticipated that this will be carried out for the Lessons Learned Report to be issued in July 2023.</p> <p>Prior to engaging with this project, a review was carried out on difficulties experienced and good practice employed within similar SFRS construction projects, all in an effort to learn from recent experiences, both good and not so good.</p> <p>Below is a brief understanding of the issues/arrangements that have had a significant influence on the successful delivery of the Cambuslang ARC works and will form part of the forthcoming Lessons Learned exercise for these works:</p> <ol style="list-style-type: none"> <li>a. The early engagement of all relevant parties and setting up of the West ARC Project Board allowed for clear direction on the requirements of the project to be established from the onset</li> <li>b. The oversight and close scrutiny provided by a clearly defined Project Board, greatly assisted the smooth development of this project</li> <li>c. The provision of an agreed and approved Project Brief, including High Level Brief, allowed for clarity on user requirements and restricted the opportunity for project creep</li> <li>d. The early identification of a single point of contact for each Stakeholder, together with the continuity of SFRS delivery team members throughout the duration of the project greatly assisted a clear understanding of project requirements, identification of challenges and resolution of such challenges, and therefore assisted greatly in the delivery of the West ARC project</li> <li>e. Early site identification and detailed site assessment prior to commencing design works allowed for a more in depth understanding of accurate project costing, including for below ground works</li> <li>f. Lessons learned exercise from the McDonald Rd FS Refurbishment project identified the need for suitable development of design and cost prior to contracting the works, all to provide increased confidence in cost and programme moving forward. While every effort was made to ensure that there was a firm design and associated cost prior to engaging in contract with McLaughlin &amp; Harvey on the West ARC, programme delay by the contractor resulted in some issues in this regard.</li> <li>g. It is well understood that changes to the project brief and design during the progress of a project contribute significantly to cost increase and programme delay on construction project. The governance control provided by the West ARC Project Board with regular review and interrogation of Change Request items, together with clear direction on such matters ensured only minimal scope creep with the main cost and programme change issues raised as the result of external influences, such as COVID, Brexit, inflationary increases and material shortages due to geopolitical matters.</li> <li>h. While it is understood that the procurement of such a facility is after all a substantial commercial undertaking where the contractor is aiming to safeguard their financial position, the approach taken by the contractor has therefore a great influence on the</li> </ol>		

**NOT PROTECTIVELY MARKED**

	<p>delivery of the project works and, on this occasion, it would appear that the approach taken by McLH assisted with the overall project delivery</p> <p>i. While a further post occupation evaluation will be undertaken with building occupants after 12 months, Stakeholder involvement will be included within the Lesson Learned exercise proposed following Completion of the contract works.</p>			
<b>6</b>	<b>Outstanding Project Risk</b>			
6.1	<b>Concern</b>	<b>Mitigation</b>	<b>Probability</b>	<b>Impact</b>
	Only minor risks remain and will be maintained until contractor off site and final account agreed. No score greater than 1.	Monitoring and managing as required. Agreed at Project Board that ongoing risks will be managed through business as usual, and owned by National Property Manager.	1	1
<b>7</b>	<b>Future Projects</b>			
7.1	<b>Title</b>		<b>Intended Product/Benefit</b>	
	No further Asset Resource Centres proposed within current Strategic Plan.			
<b>8</b>	<b>Performance Measure</b>			
8.1	<b>Performance Indicator</b>		<b>Method</b>	
	Project Performance Indicators included an assessment of performance against predetermined costs, time and quality requirements.		Reports submitted monthly for review and monitoring at Project Board meetings.	
	Efficient delivery of key milestones for the project, aligned to the phases of development.		Regular and through review of the project works were carried out throughout the project programme, progress/issues identified to PB.	
	The method for managing the project will be the use of Gantt Charts indicating the earliest and latest start and finish dates for each activity.		A contract “approved programme” was monitored and reviewed monthly throughout the contract works with reporting at PB meetings. Further assessment and reporting made out with such contractual assessments was carried out regularly to ensure SFRS were best informed of the anticipated programme dates.	
	Submission of Highlight Reports to the Project Board for onward communication to SLT.		Reports submitted monthly at Project Board meetings.	
<b>9</b>	<b>Appendices/Further Reading</b>			
9.1	Appendix A: Closing Report			
<b>Prepared by:</b>	John Gillies, Project Manager			
<b>Sponsored by:</b>	Iain Morris – Acting Director of Asset Management			
<b>Presented by:</b>	Iain Morris – Acting Director of Asset Management			
<b>Links to Strategy</b>				
SFRS strategic plan 2019-22 – object 4.3: We will invest in and improve infrastructure to ensure our services and systems are fit to deliver modern services.				

NOT PROTECTIVELY MARKED

<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Comment</b>
<i>Project Board</i>	<i>14/06/2023</i>	<i>Recommended</i>
<i>Change Portfolio Progress Group</i>	<i>26/06/2023</i>	<i>Approved</i>
<i>Change Portfolio Investment Group</i>	<i>20/07/2023</i>	<i>Noted</i>
<i>Change Committee</i>	<i>10/08/2023</i>	<i>For Scrutiny</i>



Report No: C/CC/25-23

Agenda Item: 7.3

Report to:	CHANGE COMMITTEE						
Meeting Date:	10 AUGUST 2023						
Report Title:	SAFE AND WELL						
Report Classification:	For Information Only	<b>Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this document and associated reports is to provide the Change Committee with an overview of the progress to date, benefits, and options for the implementation of Safe and Well (SAW).						
<b>2</b>	<b>Background</b>						
2.1	A paper was submitted the Senior Management Board (SMB) on 15 March 2023 which provided a summary of pilot findings, project benefits, and proposals for future implementation.						
2.2	Following lengthy discussion, SMB members were supportive of Option 2 (utilising Community Safety Advocates in the first instance) but asked for further information on implementation to be brought back to a subsequent meeting before making a final decision.						
2.3	In the intervening period, a new Senior Responsible Officer and Project Manager took over management of the Safe and Well (SAW) project. In agreement with the Assistant Chief Officer (ACO) - Service Delivery, a decision was made to fully review the project to date, including the previous options for implementation. Details of this review are detailed in the two supporting papers.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	Two papers were produced for the June Change Portfolio Progress Group (CPPG) meeting, to further enhance their understanding of the project and setting out options for the future of SAW.						
3.2	The first paper <i>Safe and Well Progress to Date and Benefits</i> (Appendix A) sets out the history of the project, from its inception and intended purpose, through to current status and outstanding actions. The paper clearly illustrates that fire risk, and keeping those individuals most at risk from fire, are at the core of the visit. This paper is intended to provide the reader with a full understanding of the project, including how it relates to the Firefighter role-map.						
3.3	Also detailed are the benefits of moving to a person-centred visit which is more targeted due to update criteria and a reduction in overall visit numbers. The associated ICT application will also benefit Scottish Fire and Rescue Service (SFRS) staff, partners and the public, through more streamlined and secure processes.						

3.4	<p>The second paper <i>Safe and Well Options for Implementation</i> (Appendix B) sets out four potential options for implementation:</p> <ul style="list-style-type: none"> <li>• Option 1 – Continue to deliver Home Fire Safety Visits (HFSVs) as per current policy and cease the SAW project.</li> <li>• Option 2 – Utilise Community Safety Advocates (CSAs) to deliver SAW visits and uniformed staff deliver HFSVs.</li> <li>• Option 3 – All staff deliver SAW visits.</li> <li>• Option 4 – A review of the content of SAW is undertaken and any elements not considered as part of the role-map be removed and an updated HFSV is delivered, utilising the newly developed ICT system.</li> </ul>
3.5	For each option the Benefits, Disadvantages and Dependencies / Timescales / Cost have been captured to support CPPG members in their decision making.
3.6	Wider considerations are captured at the end of the report, along with potential next steps. Once an option has been agreed, additional work can be undertaken which will provide a detailed timeline for the project and associated costs etc.
<b>4</b>	<b>Recommendation</b>
4.1	<p>The Committee is asked to:</p> <ul style="list-style-type: none"> <li>• Note the contents of the information report.</li> </ul>
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	Key Strategic Implications have been considered and are detailed in main report
5.2	<b>Financial</b>
5.2.1	Costs of the project are detailed in the attached papers.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	Environmental benefits, through the reduction of journeys, is capture in the benefits section of Appendix A.
5.4	<b>Workforce</b>
5.4.1	Impact upon the workforce are detailed within the <i>Safe and Well Options for Implementation</i> and will be dependent on the chosen option.
5.5	<b>Health &amp; Safety</b>
5.5.1	There are no direct Health and Safety implications associated with this cover paper.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	There are no direct Health and Wellbeing implications associated with this cover paper.
5.7	<b>Training</b>
5.7.1	Training requirements are detailed within the <i>Safe and Well Options for Implementation</i> and will be dependent on the chosen option.
5.8	<b>Timing</b>
5.8.1	Timing will be dependant on the chosen option for implementation. A detailed timeline will be developed in accordance with this direction.

5.9	<b>Performance</b>	
5.9.1	Performance will be reviewed in relation to the chosen option as this will vary greatly dependant on the delivery model.	
5.9.2	Performance measures have been drafted and Prevention staff will work with Business Intelligence colleagues to incorporate into Power BI considering the above.	
5.10	<b>Communications &amp; Engagement</b>	
5.10.1	Comms support will be required around a number of elements (website, booklet, personalised PDF).	
5.10.2	Once an option is agreed, engagement with LSO teams and wider staff will be required.	
5.10.3	Engagement with partners will be required to promote chosen option and encourage / facilitate sign-up to the new Data Sharing Framework and ICT system.	
5.11	<b>Legal</b>	
5.11.1	Legal representatives have been involved in the project to-date.	
5.12	<b>Information Governance</b>	
5.12.1	A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.13	<b>Equalities</b>	
5.13.1	An Equalities Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.14	<b>Service Delivery</b>	
5.14.1	Dependent on the option chosen, the outcomes may affect all Service Delivery personnel.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	David Farries, Director of Service Delivery
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient
7.2	<b>Rationale:</b>	The project has effective governance in place including Risk Register, Project Board and associated project documentation. Regular updates are provided and scrutinised by CPPG with this forum providing direction for key project decisions.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix 1: Safe and Well Progress to Date and Benefits	
8.2	Appendix 2: Safe and Well Project – Delivery Options	
<b>Prepared by:</b>		Cathy Barlow, Deputy Head of Prevention and Protection
<b>Sponsored by:</b>		Iain MacLeod, Deputy Assistant Chief Officer
<b>Presented by:</b>		Cathy Barlow, Deputy Head of Prevention and Protection



<b>Links to Strategy and Corporate Values</b>		
<ul style="list-style-type: none"> <li>• Outcome 1. Our collaborative and targeted prevention and protection activities improve community safety and wellbeing, and support sustainable economic growth.</li> <li>• Outcome 1 Objective 1. We will work with our partners to ensure targeted prevention and early intervention are at the heart of what we do to enhance community safety and wellbeing.</li> <li>• Outcome 1 Objective 3. We will evaluate and learn from our prevention and protection activities and analyse data to ensure our resources are directed to maximise community outcomes.</li> <li>• Outcome 2 – Communities are safer and more resilient as we respond effectively to changing risks <ul style="list-style-type: none"> <li>○ ‘Improving how we manage calls from the public and deploy our resources to emergency incidents’</li> <li>○ ‘Providing the right technology and equipment to keep Firefighters safe.’</li> </ul> </li> <li>• Outcome 3. We are a great place to work where our people are safe, supported and empowered to deliver high performing innovative service.</li> <li>• Outcome 3. We value and demonstrate innovation across all areas of work <ul style="list-style-type: none"> <li>○ ‘Deploying new digital and other technologies to change how we work and to keep Firefighters safe.’</li> </ul> </li> </ul>		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Change Portfolio Progress Group</i>	<i>26 June 2023</i>	<i>Approved</i>
<i>Change Committee</i>	<i>10 August 2023</i>	<i>For information</i>

**SAFE AND WELL PROJECT  
PROGRESS TO DATE AND BENEFITS (JUNE 2023)**

- 1 Background
  - 1.1 Safe and Well
  - 1.2 SFRS and Safe and Well
- 2 Research and Considerations
  - 2.1 Research
  - 2.2 Resourcing and Costs to Date
- 3 Progress to Date
  - 3.1 Visit Criteria, Content and Referral Processes
    - 3.1.1 Criteria
    - 3.1.12 Referrals and Call-handling
    - 3.1.3 Visit Content
    - 3.1.4 Onward Referrals and Signposting
    - 3.1.5 Firefighter role-map and competencies
  - 3.2 Policy, Procedure and Guidance
  - 3.3 Training Modules
  - 3.4 Partnership Pack
  - 3.5 ICT System
- 4 Outstanding Work
- 5 Pilot and Benefits
  - 5.1 Pilot
  - 5.2 Perceived Benefits

Appendix A – Visit Content

Appendix B - HFSVs in Context of FF Competencies

## 1 BACKGROUND

### 1.1 Safe and Well

“Safe and Well” as a concept was introduced by Greater Manchester Fire and Rescue (GMFRS) circa 2016. There was a recognition that visits needed to be more focussed on the individual, rather than the household, and that contributory factors to fire were aligned with wider health and social considerations. Other UK Services started to adopt this approach, with some going one step further and delivering services on behalf of partners e.g. auditory tests and bowel cancer screening.

Around this time, other English FRSs also began to investigate the role their Services could play in terms of being a wider health asset, with the potential to attract local and national funding. This funding was not realised.

Since the introduction of Safe and Well there have been variations on what is delivered, and by whom. Many Services no longer use the term Safe and Well, including GMFRS (the Service who introduced it) who have spent considerable time and money to rebrand back to HFSV.

The National Fire Chiefs Council (NFCC) have undertaken work around home visits to support the standardisation of visits and support tools available. This is under the banner of the *Person-Centred Approach* which adopts the principles of putting the householder and their circumstances and behaviours at the heart of the visit.

### 1.2 SFRS and Safe and Well

In 2016/17 there was direction from the Chief Officer to review Safe and Well to see if elements of this could be adopted by SFRS. This also coincided with the recognition that the current ICT recording system (CSET) would need to be replaced in future years due to the age and functionality of the system.

Initial scoping of the project identified the complexities and inter-dependencies and the Service agreed to support it as an official project, providing funding and dedicated staff to facilitate its delivery.

In subsequent years, Safe and Well was included, as one of a number of elements ~~included~~, in the proposed expansion of the Firefighter role.

## 2 RESEARCH AND CONSIDERATIONS

### 2.1 Research

During the early stages of the project, research and scoping exercises were undertaken to help identify the content of the revised visit and ways that would make current practice easier for both our staff and partners. This included:

- Physical visits to a select number of UK FRSs
- Review of all UK FRS websites to identify what type of visit they were delivering
- Review of all relevant materials (predominantly from NFCC)
- Scoping exercise to identify current practice across SFRS LSO Areas (State of the Nation)
- Review of existing HFSV policy, procedure, guidance and associated documents
- Review of the Building Safer Communities *Strategic Assessment of Unintentional Harm*
- Review of data from fatal fire analysis to identify common contributory factors, causes and other trends.

From inception, there was a conscious decision that the risk criteria and visit content should all relate to fire; this included the contributory health and lifestyle factors as it is recognised that health and care issues, when coupled with fires in the home, result in worse outcomes including a much higher likelihood of fatalities.

Contributory factors include multi-morbidity and frailty, cognitive impairment, smoking, drugs, alcohol, physical inactivity, obesity, loneliness and cold homes. Some of these factors such as smoking increase the likelihood of having a fire and others, such as frailty, increase the likelihood of sustaining more serious injuries or fatalities.

The research phase also considered feedback from crews and senior managers around current policy. Frequent feedback identified the desire to deliver a visit programme that was more targeted to those at greater risk of fire, removing the concept of Low, Medium and High visits, whilst also reducing the overall number of visits delivered (from the annual target of 70,000).

Other early considerations included:

- A requirement to improve the referral process to ensure the Service adheres to GDPR
- Technology would be key to supporting staff to deliver an updated visit, removing duplication, and streamlining processes (e.g., onward referrals)
- A review of the re-visit methodology
- Impact on other Service policies, e.g., Post Domestic Incident Response (PDIR)
- Support for partners to understand fire risk, sign-up as a registered partner, and understand how to make a referral
- If moving to a more targeted visit, an alternative method for providing fire safety advice and education would be required to ensure SFRS are meeting statutory duties.

### 2.2 Resourcing and Costs to Date

Due to the complexities and scale of the work required it was agreed SAW should be considered an official Service project and resourcing was allocated. This included:

- Project Manager (GC) £263,00
- Watch Commander £197,478
  - Staff Total = £460,478

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- Funding for ICT development = £654,671 (this does not include internal resources e.g., ICT Project Manager)

**Total = £1,115,149** (as of beginning of May 2023)

In addition, this dedicated resourcing was supplemented by a Watch Commander and Grade 5 Support Staff member from the Prevention Portfolio (P&P Function).

### 3 PROGRESS TO DATE

The project has many elements which have been led by the P&P Function, with considerable support from other SFRS Directorates. The main areas of development have included:

- Visit criteria, content and referral processes
- Changes to call-handling and provision of information for those who are not eligible for a visit
- Policy and procedure – including revised elements relating to revisits and PDIR
- Training modules
- Partnership Pack including training materials, sign-up support to generate referrals, Information Sharing Protocol
- Bespoke ICT system and associated work

#### 3.1 Visit Criteria, Content and Referral Processes

The revised visit is an expansion of the elements which focus on providing advice to people during the visit, putting the person at the centre. Both the visit criteria and content remain focussed on fire safety.

The internal scoping exercise identified that in recent years, staff carrying out HFSVs have included other home and personal safety considerations. These include; alcohol and drug interventions, smoking cessation advice, falls referrals, child safety information and advice, onward referrals for Fire Safety Support and Education (firesetters), and guidance on home and community safety. The project aims to cement this good work and provide a standard approach to our visits; ensuring our staff are fully trained and supported, with robust local partnership arrangements.

The approach to developing the visit aligns with a similar approach taken by FRSs across the UK by adopting a Person-Centred Approach ([Person Centred Framework | NFCC CPO \(ukfrs.com\)](https://www.ukfrs.com)). Current visits are heavily focussed on the property and associated risk, this approach encompasses the following:

- **Personal Factors** - are integral to the person or people living in a property; things that are temporarily or permanently a part of them and cannot be changed such as their level of mobility.
- **Behaviour Factors** - are actions, activities or behaviours - things that people do (or don't do) such as smoking a cigarette, taking medication or substance use.
- **Home factors** - are those factors which are integral to the home itself, or its contents (physical environment). Or how the person interacts with others (social environment) such as the layout of the property and other people that occupy the property.

Again, it is important to highlight, this is all in relation to fire risk.

##### 3.1.1 Criteria

The criteria for a new visit are based on information from fire fatalities and includes:

- Aged 65+
- Anyone in the household has a history, or may be a target of, fire related crime
- High levels of clutter / hoarding
- History of fire, including signs of burns/scorch marks on furniture or clothing
- Use of medical oxygen, emollient products, or medical airflow mattress where someone in the household smokes

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- Unable to evacuate the property in an emergency due to their age or medical condition including visual or hearing impairment
- Dementia / Cognitive impairment
- Use of medication that causes drowsiness, visual disturbance or dizziness
- Alcohol, drug or substance dependent
- Anyone in the household who has shown an interest in starting fires

### 3.1.2 Referrals and Call-Handling

Visits will be gathered from various sources; self-referral (via a phone call or online), partner referral and Service generated, either through community events and initiatives or following fire incidents in the neighbourhood. Where possible, all self-referrals will be directed to the website as this will reduce costs and time for SFRS to manage phone calls. A free-phone number will however still be available as it is recognised that not all community members have access to the SFRS website or feel confident in their ICT literacy.

When requesting a visit online there will be a set of questions to complete, including the criteria detailed above. If the person does not meet the criteria, they will be informed at the completion of the online questionnaire and offered a bespoke PDF (Home Safety Guidance) containing information on a range of topics aligned to the answers they provided. For example, they may have indicated they use candles, but do not smoke, so the information will be relevant to the details provided. This is a similar approach to online checker which was developed during the pandemic [Online HFSV Checker](#).

Referrals from partner agencies will all go via the new ICT system (Partner Portal). No referrals should be accepted via email out with the system to ensure both parties are fully complying with data protection regulations.

As part of the project, the P&P Function has also reviewed current and future call-handling arrangements. Since May 2011, call-handling for HFSV requests has been outsourced to an external Call Centre. This has ensured we can provide a 24-hour service, all year round. The current contract ends in July and a feasibility exercise was undertaken to identify options for call-handling moving forward. Considerations included: cost, volume of calls, quality of call-handling and advice, and number of other calls received (the free-phone number attracts a number of “general messages” not associated with HFSVs).

It was identified that the most suitable option moving forward would be to bring call-handling in-house, supported by Corporate Admin. This will result in considerable savings to the Service and will ensure improved quality and general messages can be dealt with more effectively. It is also envisaged that the volume of calls will decrease when the new visit is adopted as SFRS will not be promoting it widely as a universal service, as per current approach.

### 3.1.3 Visit Content

The visit content is detailed in Appendix A. This covers the criteria questions along with the things to be considered during a visit. It should be noted that some of these elements are visual and not all questions will be applicable at every visit. All of the content relates to fire risk. This includes lifestyle and health questions, for example falls, social isolation, medication, hoarding / clutter, as it is recognised these are common contributory factors. Other new topics are included, again, related to fire / operation demand, for example flooding and gas shut off. The other areas that are slightly wider ranging include home security

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(although its important homeowners know where they have left keys etc. as part of an escape plan) and children / young person's safety (under safeguarding duties it is important to provide information around areas such as safe storage of liquid-tabs / hazards liquids, use of stair gates and blind chords).

There is no expectation for staff to provide or fit equipment, other than domestic fire detection.

### 3.1.4 Onward Referrals and Signposting

It was recognised during the research phase of the project, the majority of areas had examples where they were referring on to partners for advice and support as a result of a HFSV. This involved processing the referral on return to the station, often with the support of the Community Action Team (CATs). There were some commonalities with referral pathways amongst areas, whilst some had very localised partnership agreements in place.

When developing the new visit, the ability to automatically onward refer the individual has been built into the ICT system, reducing additional work for crews and CATs. There are a number of questions that may trigger the option for an onward referral, for example, if the person says they have trouble heating their home their details could be passed on to an organisation that can provide energy / grant advice. Referrals may be for national (AGE Scotland, Home Energy Scotland) or localised organisations (voluntary groups, local falls teams). Local Area staff will work with partners to identify if and what support is available, and through signing-up via the *Partnership Pack* the system will highlight if, and what referrals can be generated. If there are no relevant referral pathways for a local / LSO area, this will be indicated on the system.

Staff can also highlight services of other organisations, leaving the responsibility with the householder, utilising the bespoke Home and Fire Safety Booklet (currently being designed). At no point are staff being asked to provide information or carry out duties on behalf of a partner. The visit is about identifying risk linked directly to fire and acknowledging that where SFRS cannot provide the required support, we can link those most at risk with the partner organisations who can.

### 3.1.5 Firefighter Role-map and Competencies

The HFSV is the primary vehicle for delivering our legislative duty of providing advice and information. This is captured within the Firefighter Role-map under:

***FF1 - Inform and educate your community to improve awareness of safety matters (National Joint Council for Local Authority Fire & Rescue Services)***

The visit has been designed to ensure it reflects FF1.

The visit also takes cognisance of the competencies required by those who carry out HFSVs, developed by NFCC and currently out for consultation [Competences to support HFSV NFCC](#). The document provides guidance for use by Fire and Rescue Services to inform training and workforce development for HFSVs and is summarised in Appendix B. Under each of the sections detail has been added to illustrate how these competences have been supported via the project through either existing or new products.



### 3.2 Policy, Procedure and Guidance

As part of the project the following documents will be provided:

- Policy and Procedure – in addition to revisions to criteria and visit content there are also changes to the re-visit process. Instead of a requirement for staff to contact the householder when a revisit is due (currently three separate attempts) they will be sent a reminder via their chosen method (text or email) inviting them to contact SFRS if they require a re-visit.
- Post Domestic Incident Response (PDIR) Procedure – the current document required significant revision as only the property involved in the incident will be offered a visit under the new system, as households will need to meet the new criteria. This will mean a significant reduction in visits generated via PDIR; further stressing the importance of strong partnership arrangements to generate referrals.
- Guidance and Supporting Documentation – many current SFRS documents can be utilised to support the visit. This includes areas of lone working, safeguarding, health and safety, installation of detection. This will all be reviewed and collated prior to going live with the new visit.

### 3.3 Training Modules

The project recommends two mandatory modules for all staff:

- Overview of visits, policy and key elements / considerations
- ICT system

Staff should have also undertaken mandatory safeguarding training which directly supports visits and engagements with community members.

In addition, 10 modules have been created around thematic areas:

- Alcohol, Drugs and Smoking
- Telecare
- Health and Sensory Impairment
- Hoarding
- Home Safety and Security
- Medication and Specialist Healthcare Equipment
- Dementia
- Falls and Mobility
- Winter Warmth and Social Isolation

These modules will be mandatory for CAT members and optional for all other staff, providing additional information and context as to why they are included in the visit, their relation to fire risk, and key considerations. A wider range of additional resources are also available on the CSE Sharing Site [Community Safety Engagement Shared Site](#)

Training modules have also been developed for partners. One module supports partners to sign-up and make referrals, whilst a second provides them with fire risk recognition training to help identify those members of the community who would benefit from SFRS support. These modules will be held on the LearnPro Communities site. This is free to access and SFRS have the ability to create and alter content.

### 3.4 Partnership Pack

With the support of Information Governance, a Partnership Pack has been developed. This provides support for existing and new partners to sign-up to the new visits, with guidance and supporting tools. The document covers the following:

- What the visit is – purpose and overview
- Who benefits
- Contacts for support
- How to sign up as a partner
  - Data Sharing Framework
  - GDPR – Privacy Note
  - Consent from occupiers
  - Required information to sign-up – checklist
- Training and resources – including the process of making a referral via the new ICT system

A Data Sharing Agreement has been developed to ensure partners are referring individuals, with consent, to SFRS via the new ICT system. The document supports partners both to make referrals and receive them, should they have services and capacity to support.

As detailed above, training modules specifically for partners have been developed which can be accessed via the LearnPro Communities Site. These are referred to in the Partnership Pack.

Some of the key benefits of the new visit and ICT system are that referrals are easier for partners to make (less questions) and through the new system they are able to track the progress of individual referrals, as well as find out how many referrals their organisation has made. A common criticism of the current policy is that once a referral is made to SFRS the referring agency does not know if and when a visit was carried out.

### 3.5 ICT System

It is recognised that one of the key drivers for an updated HFSV is the need to replace the current ICT system; CSET. CSET was developed based on a legacy system and is now over 10 years' old. Updates / changes are extremely difficult to make and as such, P&P are unable to change any risk criteria to reflect emerging trends.

The new system has been built by ICT entirely and is bespoke. Whilst it replicates a number of processes from CSET, learnings and feedback from staff as to what improvements they would like to see have been incorporated. The result is a current and intuitive system that has many benefits:

- The way the ICT system has been built means (utilising a form builder) it is much easier for P&P functional staff to directly amend risk criteria and visit content
- There are more Admin permissions for P&P functional staff which supports ICT in terms of capacity required for user errors etc.
- The user can update the system when conducting the visit, therefore reducing duplication
- It is built on a very secure environment
- Automatic communications reduce administration duties
- Ability to amend/move/delete events previously saved
- Enhanced support, information sharing and communication with partner agencies
- “Design out” errors previously made in CSET when forms have been completed
- CAT can allocate individual referrals to themselves
- Updated and robust data sharing

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- The system ensures any information recorded is maintained in accordance with data protection law
- Supports automatic onward referrals to partner agencies (reducing time required for current processes)
- Ability to delay visits at the request of the occupier/referrer
- Advanced search facilities
- Full audit of changes made to a record including who, what and when
- Ability to offer download or view of bespoke fire safety plan once a referral form has been completed

A Phase 1 pilot was carried out, supported by a number of Community Safety Advocates. This report was provided to SMB (15<sup>th</sup> March 2023). Once the system is finalised, a second pilot will be undertaken to ensure all elements of the system work / are required, specifically the partner elements as these were unavailable for the first pilot.

#### 4 OUTSTANDING WORK

The project is nearing the final stages of development with the intention to have a product ready once options and timescales for delivery are agreed. Outstanding actions are as follows:

- ICT system to be finalised and Phase 2 of ICT system (partner elements) need to be tested
  - Additional ICT supporting work (PEN testing, Load testing, Asset Management App. Integration, Production Environment, Priority 2 bugs, Gazetteer etc.) to be complete
  - Draft Policy and Procedure need to go through formal consultation process
  - Training materials to be finalised (once system complete) and training delivery plan to be agreed (tied in with roll-out decisions)
  - Comms support required to design the website (where the public and partners will access the new system to request a visit and download safety information), personalised PDF, and the Booklet to be left with householders (this will provide signposting information to a range of services)
  - Partner engagement and sign-up. Resources are required to engage with partners to sign-up to the new visit prior to them making any referrals. There are hundreds of partners currently utilising CSET so this will take time. Work on this cannot begin until there is a decision on who will be delivering the visit and associated timescales.
  - Fully understand support for project long-term – Corporate Admin, P&P, ICT, TSA etc.
  - Identify and agree budget for roll-out and ongoing support – training, booklet, postage etc. Again, this is tied in with delivery options
  - Engagement with internal staff to update them on the new visit, the changes and benefits.
- These outstanding actions are detailed in an Action Plan which is shared with stakeholders at the SAW Working Group.

## 5 PILOT AND BENEFITS

### 5.1 Pilot

In February 2022, a pilot commenced incorporating all available elements of the project at that time. Seven Community Safety Advocates (CSAs) were identified across a number of LSO Areas. Each was issued with a mobile device (laptop) with data/WIFI capability on which the Safe and Well (SAW) ICT system was installed to deliver and record visits from a “self-referral” route.

The CSAs completed a suite of training modules before undertaking visits. They then identified high-risk visit recipients using those already on the Community Safety Engagement Toolkit (CSET) database and contacted them to make an appointment to attend their home for a SAW visit.

CSAs delivered visits using the new content, updating the recording system in real time. Based on visual observations and discussions with householders, staff were able to provide tailored home and fire safety advice.

Due to ICT constraints, the partner sign-up and referral (to and from SFRS) processes did not form part of the pilot.

The pilot ran for six months, concluding on 5th August 2022. A full summary of the pilot was provided to SMB on 15th March 2023.

It is proposed that a second pilot is run to fully test all elements of the project, with a particular emphasis on finalised training materials, and the partner elements (signing up to Data Sharing Agreements, training resources, referral processes), which were not included in the initial pilot.

## 5.2 Perceived benefits

The lessons learned from the pilot was scored against the Strategic Review to demonstrate the success of the pilot and identified suitable delivery measures.

Safe & Well Pilot		
Strategic alignment questions - Does the initiative:	Initiative Assessment Zero/Medium/High	
<p>1. Improve community safety &amp; wellbeing/ help reduce social and economic inequalities/ help reduce community risk?</p> <p>Strategic Outcomes – 1,2,3,5,6 &amp;7</p>	5	<p>SFRS has previously delivered on average, 70,000 HFSVs per annum. HFSVs are available to all households; risk rated to prioritise delivery.</p> <p>HFSV targets have been reduced to 50,000 (2023 / 24) to support staff to engage with partners and target those most at risk.</p> <p>SAW will maintain 50,000 annual visits (or potentially reduced further) with visits only delivered to those who meet criteria. Those who do not, will receive advice and education (literature / PDF).</p> <p>A reduction in visit numbers will release capacity to engage with partners and communities to identify and support those most at risk from fire.</p> <p>The proposed figures mean a reduction of 29% in the overall number of visits. Further efficiencies have been identified through the automation of processes, reducing administrative requirements on return to the station.</p> <p>Visit quality will improve due to consistent and wider prevention advice given. With the enhanced partnership training increased, accuracy of risk information will be recorded ensuring the number of targeted interventions will be higher.</p> <p><b>Measurement</b></p> <p>Through CSET we have the ability to record the number of visits and time allocated (HFSVs). This can be used as a baseline to compare the number and time allocated to SWA Visits.</p> <p>IRS can be utilised to identify the number of accidental dwelling fires we attend and any changes that can be attributed to SAW. However, the broader support to social and economic inequalities will be harder to measure and to attribute to SFRS activity. The SAW ICT system will accurately capture partner referral numbers and there will be changes to risk profile measurements over time which may inform this.</p>

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<p>2. Help deploy the right operational capabilities to support and improve firefighter safety?</p> <p>Strategic Outcomes – 1,2,3,5,6&amp;7</p>	5	<p>A reduction in visit numbers will release capacity which can be used to increase preventative / partnership activity to target and engage with those at higher risk of fire. Additional capacity may also be released to support wider SFRS activity e.g. operational training.</p> <p>If completed successfully, there is the potential to reduce the number and severity of fires SFRS attend and therefore reduce the risk to firefighters.</p> <p>Enhanced education of firefighters will increase the knowledge around emerging risk factors and circumstances of householders, ensuring SFRS is able to offer wider community support through positive partnership working. The greater the number of personnel involved in SWA will increase the benefit that SFRS can add to communities.</p> <p><b>Measurement</b></p> <p>Through CSET we have the ability to record the number of visits and time allocated (HFSVs). This can be used as a baseline to compare the number and time allocated to SWA Visits.</p> <p>IRS can be utilised to identify the number of accidental dwelling fires we attend and any changes that can be attributed to SAW. However, the broader support to social and economic inequalities will be harder to measure and to attribute to SFRS activity. The SAW ICT system will accurately capture partner referral numbers and there will be changes to risk profile measurements over time which may inform this.</p>
<p>3. Positively contribute to developing a culture of innovation / improvement?</p> <p>Strategic Outcome - 3</p>	2	<p>Introducing an electronic recording system, with the removal of the paper-based dependency of the current system, will reduce risk (data) and offer efficiencies / reduce duplication.</p> <p>There will be an improvement to user experience, with the opportunity to generate automated onward referrals and tie in with other SFRS systems (e.g. Power BI)</p> <p><b>Measurement</b></p> <p>There are no measures that can capture the development of a culture. However, the benefit from the innovation of this process change can be captured by equating the number of automated visits as a saving due to the previous requirement for a physical visit.</p>
<p>4. Help tackle climate change, prevent or respond to climate change related incidents?</p> <p>Strategic Outcome - 4</p>	2	<p>There will be demonstrable reductions in vehicle movement, fuel and road risk due to the reduction in the number of physical visits required for those at lower risk. In addition, there will also be a reduction in paper usage as we transfer to an electronic based process.</p> <p><b>Measurement</b></p> <p>Through CSET we have the ability to record the number of journeys from current HFSVs. This can be used as a baseline to compare the journeys required for the SAW visits. This can be monitored locally and nationally.</p>

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<p>5. Deliver non-cashable savings in business processes / systems/ resources, making best value use of our resources to improve organisational effectiveness?</p> <p>Strategic Outcomes – 1,3,4,5&amp;7</p>	<p>2</p>	<p>Efficiencies in reducing the number of SAW visits and the associated improved processes will reduce the administrative burden on staff and see a reduction in vehicle movements.</p> <p><b>Measurement</b></p> <p>Through CSET we have the ability to record the time taken from current HFSVs (evidenced as an average of 60 minutes end to end). This can be used as a baseline to compare time committed to the SAW visits. This can be monitored locally and nationally</p>
<p>6. Positively impact on attracting, retaining or developing members of staff?</p> <p>Strategic Outcome - 6</p>	<p>2</p>	<p>The implementation of SAW will have limited effect on attracting and retaining staff. However, the improvements offered have the potential to be included in more detail in recruitment processes where SFRS can offer increase community value. The SFRS will increase the staff skill and knowledge during the implementation of their community safety skill set.</p> <p><b>Measurement</b></p> <p>No measures are currently undertaken that can directly correlate with Home Safety activity with Staff satisfaction. SFRS will undertake to complete a targeted staff survey prior to the launch to give a base line then repeat survey regularly to evidence impact on staff.</p>
<p>7. Help improve collaboration or partnership working including with communities?</p> <p>Strategic Outcome - 7</p>	<p>5</p>	<p>The SAW process will strengthen the link between SFRS and Scotland's communities through improved partner training and delivering an efficient referral process to ensure that those most vulnerable in our communities get the widest partnership support possible.</p> <p><b>Measurement</b></p> <p>Through CSET measures are currently undertaken that allow SFRS to monitor the number of partnership referrals. We would anticipate the measure in SAW to be a % of visits that come from partner referrals. This allows local areas to monitor and support improved partnership working. SFRS can undertake a targeted stakeholder survey prior to the launch to give a baseline then repeat the survey regularly to evidence impact on collaboration with stakeholders both locally and nationally. In addition, we will capture how many partner referrals we make/receive/from the various organisations, and improvements in data sharing protocols.</p>
<p>8. Deliver recurring net cashable savings that contributes to an overall reduction in operating costs? (This question contains zero weighted scoring as savings were not considered at the initiation of the project)</p> <p>Strategic Outcome - 5</p>	<p>0</p>	<p>Net cash savings will be limited as staff time saved by reducing the visits to the lowest risk will be reinvested in targeted work with those most vulnerable. There will be a reduction on vehicle movements so reducing associated fuel costs.</p> <p><b>Measurement</b></p> <p>The current budgets are monitored to allow a true understanding for the finances invested in Home Safety. Regular monitoring of budget at local and national levels will offer an overview of savings. Additional analysis will be required to ensure SFRS understands the changes within spends.</p>



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<p>9. Provide an option that is deliverable and achievable given level of complexity/ impact on organisational risk/ our organisational change capacity and capability?</p> <p>Strategic Outcome - 5</p>	<p>2</p>	<p>Ensuring an effective communications and engagement and delivery plan. This is monitored through the current governance processes.</p> <p><b>Measurement</b></p> <p>Measurement of any delays in delivering and deploying the completed project reported by Time, Costs, Quality, Skills &amp; Resource</p>
<p>10. Positively impact on external stakeholder relationships / SFRS' reputation</p> <p>Strategic Outcomes – 1,3&amp;7</p>	<p>5</p>	<p>The SAW process will strengthen the link SFRS has with partners through improved partner training and delivering an efficient referral process to ensure that those most vulnerable in our communities get the widest partnership support possible.</p> <p><b>Measurement</b></p> <p>No measures are currently undertaken that can directly correlate with Home Safety activity with stakeholder satisfaction. The SFRS will undertake a targeted stakeholder survey prior to the launch to give a base line then repeat the survey regularly to evidence impact on stakeholders both locally and nationally.</p>
<p>11. Positively impact staff satisfaction/ motivation?</p> <p>Strategic Outcomes – 1,3,6&amp;7</p>	<p>2</p>	<p>The implementation of SAW will increase the number of opportunities where SFRS can offer increase community value through the enhanced skill set. This will offer SFRS staff the ability to provide greater support to the most vulnerable in our communities.</p> <p><b>Measurement</b></p> <p>No measures are currently undertaken that can directly correlate with Home Safety activity with Staff satisfaction. Undertake targeted staff survey prior to the launch to give a base line then repeat survey regularly to evidence impact on staff.</p>

In addition, a summary of benefits when comparing the new product with the existing HFSV programme has been captured below. This highlights the benefits to staff, partners and communities.

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	<b>Existing HFSV</b>	<b>SAW / Updated HFSV</b>
<b>Criteria</b>	<p>18 screening questions</p> <p>Question set has not been updated since 2013</p>	<p>Four main screening questions based on fire fatality data and current risks</p> <p>ICT system has been built to allow easy changes to criteria and visit content</p>
<b>Eligibility</b>	<p>Universal service categorised as High, Medium and Low visits</p>	<p>Only those who meet criteria will receive a visit. Those who do not, will receive advice and information (PDF or booklet).</p>
<b>Data Protection</b>	<p>Some partners making referrals who have not signed an Information Sharing Agreement or sending directly to Community Action Teams, rather than using CSET.</p>	<p>Partnership Pack, including Data Sharing Framework, available for all partners, along with training modules. This will support compliance with GDPR</p> <p>The system won't allow access unless Data Sharing Framework has been signed and approved by SFRS</p>
<b>Partner Referrals and Resources</b>	<p>Partners currently have access to fire risk recognition training via LearnPro Communities site.</p>	<p>Partnership pack and training modules (LearnPro communities) available to partners.</p> <p>Reduced number of criteria questions to complete. Ability to track progress of referrals to SFRS.</p> <p>The system can automate referrals to partners from SFRS; improving processes and reducing duplication.</p>
<b>Onward Referrals / Signposting</b>	<p>Currently any onward referrals are managed on return to station, often requiring support from Community Action Team members as not all station personnel have access to secure email systems (Egress).</p> <p>Signposting – currently, any signposting is done through providing additional leaflets. Not a consistent approach.</p>	<p>The ICT system will automatically support onward referrals (if partners have capacity to support), reducing time required for staff.</p> <p>Signposting – all relevant information will be contained in a booklet to be left with the householder.</p>

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	<p>Limited knowledge of partners due to inconsistent recording/reporting functionality.</p>	
<p><b>ICT System</b></p>	<p>Ageing system which requires visit information to be added on return to station.</p> <p>Unable to make any changes to system due to age.</p> <p>Will require to be hosted on a new platform due to licensing considerations.</p> <p>Difficulty in reporting on local partnership engagement.</p>	<p>The new ICT system has been built to make it much easier for P&amp;P to directly amend risk criteria and visit content</p> <p>There are more Admin permissions for P&amp;P staff which supports ICT in terms of capacity required for user errors etc.</p> <p>The user can update the system when conducting the visit, therefore reducing duplication</p> <p>It is built on a very secure environment</p> <p>Automatic communications reducing administration duties</p> <p>Ability to amend/move/delete events previously saved</p> <p>CAT can allocate individual referrals to themselves</p> <p>The system ensures any information recorded is maintained in accordance with data protection law</p> <p>Supports automatic onward referrals to partner agencies (reducing time required for current processes)</p> <p>Ability to delay visits at the request of the occupier/referrer</p> <p>Advanced search facilities</p> <p>Full audit of changes made to a record including who, what and when</p> <p>Ability to offer download or view of bespoke fire safety plan once a referral form has been completed</p> <p>P&amp;P Admin have permissions to amend, add or delete any questions on the system, including criteria questions.</p>

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		Ability to flag if a referral has been made for AP1, CPW, FSSE (firesetters), or Human Trafficking
<b>Training</b>	<p>Input to Wholetime trainee FFs only</p> <p>Risk Recognition and Home Safety module within the FFs in Development phase</p> <p>Optional LCMS module of wider CSE</p>	<p>Two LCMS modules developed (one on the visit and associated policy etc., and one on the ICT system)</p> <p>Additional optional thematic modules developed to support staff in their understanding of other issues relating to fire risk, e.g., hoarding and excess clutter, dementia, falls and mobility.</p>
<b>Visit Content</b>	<p>Guidance only provided to staff.</p> <p>No consistency as to what is covered / delivered as part of the visit</p>	<p>The system will require staff to deliver the same visit content (questions or observations)</p> <p>Consistency of delivery to ensure all householders receive same quality of visit</p>
<b>Detector Management</b>	Staff are required to update the Asset Management Application (a separate system) separately to CSET, duplicating data entry	The recording of alarms installed at the visit will be integrated into the new ICT system reducing requirement for duplicate data entry
<b>Revisit</b>	<p>High risk visits will populate automatically after 12 months onto the due list for station personnel to manage</p> <p>In addition, addresses selected as additional risk will also re-populate for a revisit</p>	Any householder who still meets the criteria after a visit will be sent a notification 1 year after their visit. The onus is on them to make contact or self-refer through the portal to arrange another visit. This lessens the work of SFRS staff.
<b>Reporting</b>	A standard set of reports can be run from CSET. It is difficult to compare performance over time periods / locations without running multiple reports which can be time consuming	The ICT system will provide a dashboard of reports for daily use. In addition, work is scheduled with the Business Intelligence Team to support performance reporting utilising Power BI

APPENDIX A – VISIT CONTENT

Section & Question	Operational Response Incident Type	Rationale, Background and Explanation for Inclusion
<p><b>Section 1 – Qualifying Criteria.</b></p> <p><b>There are behaviours or conditions that can make a person more at risk from fire or less able to react to an emergency - These are criteria questions and answering one or more will qualify the occupant for a visit</b></p>		
<p><b>Fire related crime and anti-social behaviour involving fire</b></p> <ol style="list-style-type: none"> <li>1. Is there anyone in the household who has shown an interest in starting fires?</li> <li>2. Is there anyone in the household who is currently a target of fire related crime?</li> </ol>	<p>Wilful Fire Raising</p>	<ul style="list-style-type: none"> <li>• Although fire fatalities in the youngest age group continue to be low, the problem of wilful fire raising, its dangers and anti-social aspects continue to require early intervention and the ability to break the cycle of fire setting behaviour via the Fire Safety Support and Education (FSSE) programme. Not all fire setting takes place within the home however, fire related antisocial behaviour places a significant demand on the resources of the SFRS, other public services and communities and this is another opportunity to help address this issue.</li> <li>• Fires started intentionally, either because of domestic abuse, or other acts of targeted violence continue to be of high risk. Immediate action and assistance are required when this risk is identified, and as a result this is one of the ‘time critical’ criteria for SAW.</li> </ul>
<p><b>Increased risk of fire due to:</b></p> <ol style="list-style-type: none"> <li>1. Over 65 years only</li> <li>2. Alcohol or drug dependant</li> <li>3. Uses medical oxygen, paraffin-based emollients or medical airflow mattress where someone in the household smokes.</li> </ol>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• The predominant contributory factor identified in recent fire death trends is age, with approximately 50% of victims being in the 60+ category.</li> <li>• Alcohol and/or drug dependency can make people with multiple or complex needs less aware of the risks and dangers of their activities, and affect their ability to take decisive action when faced with fire, or leave them incapacitated and unable to escape danger during an emergency.</li> <li>• Medical oxygen, emollients and airflow mattresses if exposed to heat, or fire can combust very dangerously, heightening the risk and outcome of a fire situation exponentially in terms of the rapid escalation of fire conditions.</li> </ul>

<p><b>Ability to react in the event of a fire:</b></p> <ol style="list-style-type: none"> <li>1. Unable to evacuate the property in an emergency due to age, mobility or medical condition including hearing and/or visual impairment.</li> <li>2. Use medication that causes drowsiness, visual disturbance or dizziness</li> <li>3. High levels of clutter/hoarding</li> <li>4. Dementia/cognitive impairment</li> </ol>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• There are several contributory factors with regards to the ability to evacuate, using dwelling fire data, it is hoped the variety of causes have been identified and covered in the available answers.</li> <li>• Where someone is unable to evacuate, this is ‘time critical’ information along with the fire related crime question and would lead to more urgent intervention by SFRS’ crews to assist with any control measures, advice or onward signposting and referral.</li> <li>• It is important to acknowledge that it is not down to the crew to ‘diagnose’ or ‘treat’ the occupier, only to identify that these are contributory factors to fire risk, and offer the correct advice in the correct manner, and where appropriate. signpost or refer that person to the correct organisation, utilising predetermined and identified referral pathways associated with each condition.</li> <li>• An ageing population living longer with health issues such as dementia; alongside the medicating of multi-morbidities with a variety of prescription drugs has the potential to put more people being at risk from fire.</li> </ul>
<p><b>The following can be seen within the home:</b></p> <ol style="list-style-type: none"> <li>1. Visible scorch or burn marks</li> <li>2. Signs of unsafe cooking practices</li> <li>3. Signs of unsafe smoking practices</li> </ol>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• These factors are considered ‘near misses’ and arguably are early warning signs of potentially more serious consequences of fire.</li> </ul>
<p><b>Section 2 – Fire Risk Information.</b></p>		
<p><b>Personal habits – Alcohol and smoking</b></p> <ol style="list-style-type: none"> <li>1. Does anyone in the household drink more than the low risk drinking guidelines of 14 units per week?</li> <li>2. Does anyone in the household smoke? Cigarettes, cigars, tobacco pipes etc</li> </ol> <p><i>Answer Dependant Questions:</i></p>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• The consumption of alcohol is obviously not a fire risk, but this coupled with cooking or smoking, can combine to increase fire risk substantially. To minimise this, advice can be offered.</li> <li>• Smoking, with regards to careless handling and the disposal of smoking materials, continues to be a very common contributory factor to many fires. It is the second highest cause of all Accidental Dwelling Fires (ADFs) following cooking. Again, this is often in combination with another contributory factor, however, without the cigarette or other smoking material, there would be no ignition source. Discussing the</li> </ul>

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<ul style="list-style-type: none"> <li>• Does anyone smoke under the influence of alcohol or drugs, including prescription drugs?</li> <li>• Does anyone smoke in bed?</li> </ul>		<p>person’s smoking habits can lead to further risk information being disclosed and identified.</p>
<p><b>Kitchen, and cooking safety</b></p> <ol style="list-style-type: none"> <li>1. Are there any items near to the cooker/hob which can easily catch fire? E.g., towels or kitchen roll etc.</li> <li>2. Does anyone ever leave cooking unattended?</li> <li>3. Does anyone cook while under the influence of alcohol and/or drugs including any over the counter or prescribed medication?</li> <li>4. Does anyone cook using a deep fat fryer, or saucepan full of oil?</li> <li>5. Has there ever been a kitchen fire at the property?</li> </ol>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• Cooking remains the most common cause of ADFs, especially where there has been a distraction and the person has left cooking unattended, for example incapacitation through excessive alcohol, or drug use. Individuals under the influence of alcohol/substance misuse continue to show up in SFRS fire data, with the mix of alcohol and smoking being one of the main causes of related fatalities and casualties.</li> <li>• Cooking methods using oil continue to carry higher risk</li> </ul>
<p><b>Around the house – Home Safety</b></p> <ol style="list-style-type: none"> <li>1. Are any of these items left running when the occupier has gone out or is sleeping? e.g., washing machine, tumble dryer, dishwasher</li> <li>2. Are any chargeable devices/items left plugged in once fully charged? e.g., tablet devices, mobile phone, e-cigarettes, mobility scooter etc.</li> <li>3. Are any of the following items used within the home? <ul style="list-style-type: none"> <li>• <i>Plug in air fresheners</i></li> <li>• <i>Plug in oil burners</i></li> <li>• <i>Square block adapters</i></li> <li>• <i>Electric blankets</i></li> </ul> </li> </ol>	<p>Fire</p> <p>Special Service Call – Domestic Flooding</p>	<ul style="list-style-type: none"> <li>• This risk has been brought into sharper focus recently, with some well known companies issuing recalls on their products. Along with this, the importance of maintenance, and ensuring these are not left running while unattended, and the higher incidents of fire fatalities overnight combine to make this key advice.</li> <li>• Opportunity to ensure these are being used as per the manufacturer’s instructions, and any unsafe practises identified, and advice given to lessen the chance of fire.</li> <li>• Opportunity to give any advice or guidance dependant on the answer given.</li> <li>• Advice given to stop using immediately and contact a qualified electrician if applicable.</li> <li>• Safe use of candles, and the dangers of unattended open flames.</li> <li>• Important from an operational response point of view, that if approached by the Incident Commander (IC) at an incident at their home, they can</li> </ul>

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<ul style="list-style-type: none"> <li>• <i>Straighteners, tongs, curlers</i></li> </ul> <ol style="list-style-type: none"> <li>4. Are there any cracks or exposed wires on any electrical cables, plugs or sockets?</li> <li>5. Are candles, scented oil burners or incense used in the property?</li> <li>6. What sources of heating are found in the home.             <ul style="list-style-type: none"> <li>• <i>Electric</i></li> <li>• <i>Gas central heating</i></li> <li>• <i>Propane/butane gas/oil</i></li> <li>• <i>Open fire/log burner</i></li> <li>• <i>Portable heaters</i></li> <li>• <i>Heat pump</i></li> <li>• <i>Under-floor heating</i></li> </ul> </li> <li>7. Do occupiers know how to isolate the water supply in the property and where to find the gas shut off valve and electricity isolation?</li> </ol>		<p>identify the location as required, however this will also lessen the damage if they encounter domestic flooding, or any other common home mishap</p>
<p><b>Outside the house – External Fire Safety</b></p> <ol style="list-style-type: none"> <li>1. Are household bins stored near to, or against the home?</li> <li>2. Is there an integral/attached or detached garage, or an outhouse or shed in the garden/outside space?</li> </ol> <p>Answer dependant question:</p> <ul style="list-style-type: none"> <li>• <i>Are these areas kept locked?</i></li> <li>• <i>Are there flammable liquids/substances/cylinders stored with these? e.g., spare petrol/diesel, paint thinners, gas bottles etc.</i></li> </ul>	<p>Fire</p>	<ul style="list-style-type: none"> <li>• Avoid fire spread to the property in the event of a bin fire.</li> </ul>



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<ul style="list-style-type: none"> <li>• <i>If the garage is integrated or attached and has direct access from the home, is the door a 'fire door'?</i></li> </ul> <p>3. Are external doors, and windows kept locked?</p> <p>Answer dependant question:</p> <ul style="list-style-type: none"> <li>• <i>Are the door and window keys kept where everyone can access them in the event of an emergency?</i></li> </ul> <p>4. Are there any fire risks in the garden/outdoor space? e.g., firepit, outdoor heater, chimenea, barbeque etc</p>		
<p><b>Children and young people in the home</b></p> <p>1. Does the occupier care for any young people up to the age of 16?</p> <p><i>Answer Dependant Questions:</i></p> <ul style="list-style-type: none"> <li>• Do you use stair gates, cupboard locks, blind cord safety devices or any other 'child safety' resources within the property?</li> <li>• Within the home, are harmful materials and substances stored safely? e.g., liquid detergent tabs, bleach, weed killer etc</li> <li>• Are matches and lighters kept safely out of reach of children?</li> <li>• Are there any hazards in the garden/outdoor space? e.g., pond, water feature, spa etc</li> </ul>	<p>Fire</p> <p>Safety in the home - Safeguarding</p>	<ul style="list-style-type: none"> <li>• Although the incidents of fire deaths in the youngest age category remains low, we have other responsibilities as a public service to issue basic risk advice to lessen the number of accidental injuries, and poisoning of young people in the home from a child protection and safeguarding point of view.</li> </ul>
<p><b>Detection, night-time routine and fire action plan</b></p>	<p>Fire</p> <p>Special Service Calls – Extreme weather, gas leak etc</p>	<ul style="list-style-type: none"> <li>• Ensure the occupiers know what to do in the event of a fire or other emergency so they can take decisive action to evacuate safely or move to a place of shelter to await the arrival of the Emergency Services.</li> <li>• Fire and heat alarms continue to be of great importance, and with the new standards of detection being implemented in 2022 across Scotland,</li> </ul>

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<ol style="list-style-type: none"> <li>1. Does the household have a night-time routine?</li> <li>2. Does the household have a fire action plan to ensure everyone knows what to do in the event of a fire?</li> <li>3. Does the property have working smoke alarms?</li> <li>4. Does the property have carbon monoxide detection fitted, where required?</li> <li>5. Does the property have telecare/community alarms?</li> <li>6. Are all external escape routes kept clear of obstructions? e.g., bikes, prams, garbage bags etc.</li> </ol>		<p>identification of any lack of, or shortage of detection needs to be discussed, advice given, and where applicable stand alone, or fully linked systems installed.</p> <ul style="list-style-type: none"> <li>• As above, although SFRS do not currently fit CO detectors, they instead, issue advice for the occupant to consider the fitting of an appropriate detector. SFRS Crews do attend properties where a carbon monoxide detector is activating, however with better understanding and advice issued the number of these calls would arguably fall</li> </ul>	
<b>SECTION 3 – Visual check</b>			
<p>SFRS personnel – This section allows you to select any area of concern from the visual check ‘walkaround checklist’ and select from the common issues associated with these topics, so when you finish the walkaround you can engage the occupier regarding any identified issues, offer advice, signpost, or use what you have seen to offer a referral in section 4.</p>			
<p>N.B. If the occupier is only happy to allow you access to parts of the household you should still select ‘YES’, and then record the areas you did not access below. Please explain the following to the occupier.</p>			
<p>Q10. During a Safe and Well visit, we carry out a brief fire risk survey of your home, allowing us to personalise the safety advice we provide you. During this accompanied walkaround we are looking for any signs or issues which may heighten your risk of fire, or accidental harm in the home. Are you happy for us to check your fire detection, and complete a survey of your home?</p>		<p>YES/NO</p>	
<p>Walkaround checklist. Please indicate below during the walkaround any topics that require further discussion:</p>			
Detection	National standard – Does not comply	Defective/faulty	Other
Kitchen safety	Oven/grill	Toaster	Other
Electrical safety	Unsafe charging/block adapters	Damaged sockets/cables	Other
Signs of ‘near-miss’	Scorch/burn marks	Smoke damage	Other
Clutter/hoarding	CIRS 1-3	CIRS 4-6	CIRS 7-9

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Children and young people	Child safety resources	Storage of harmful materials	Other
Health, medication and falls	Behaviour - Forgetful/confused	Unsteadiness/balance	Poor lighting/trip hazards
	Polypharmacy	Falls pendant	Other
Heating the home	Use of single room only	Bedding/blankets used out-with bedroom	Dampness, or feels very cold
	Occupier wearing excessive clothing	Other	
No issues observed			
Were there any areas of the house you were unable to check fully as part of your walkaround?			
Please select yes or no			YES/NO
Unable to check:			
Sitting room	Bedroom	Kitchen	
Utility	Other		
<b>Section 4 - Additional support – Signposting and onward referral</b>			
<p><b>Heating the home</b></p> <p>1. Do you find it difficult to keep your home warm?</p>	Fire	<p>If they are only using a single room are there other dangers within the house e.g., unable to access the other rooms due to hoarding. If they are unable to heat their home, are they using heaters safely? Are they at risk of harm and require intervention from another agency?</p> <p>By looking for these visual signs, action can be taken to lessen the risk of fire in the first instance, and the person can be sign posted or referred to a partner to deal with the root cause of the issue, be it a health issue, or financial inability to heat their home.</p>	
<p><b>Mobility and Falls Prevention</b></p> <p>1. Have you had a fall in the last 6months? (NOT the result of a simple accidental trip or slip)</p>	Fire	<p>This question is designed to identify if the occupier requires a referral to the NHS Falls Assessment Team. By identifying the potential for a fall, steps can be taken by the Falls Assessment Team to implement any control measures and support required. We are only referring! There will be no fitting of handrails etc. by SFRS staff.</p>	

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<p>Answer dependant question</p> <ul style="list-style-type: none"> <li>• How many times have you fallen in the last 6months?             <ul style="list-style-type: none"> <li>- 1-5</li> <li>- 6-10</li> <li>- 10+</li> </ul> </li> <li>• Where did you fall?             <ul style="list-style-type: none"> <li>- Inside</li> <li>- Outside</li> <li>- Both</li> </ul> </li> <li>• Did you experience a blackout, dizziness, light-headedness or feel drowsy when you fell?</li> <li>• Have you experienced difficulties carrying out your usual activities since you fell?</li> </ul> <p>2. Do you have any unsteadiness while on your feet or difficulties with walking or balance?</p> <ul style="list-style-type: none"> <li>• Are you worried about falling?</li> <li>• Do you use walking aids?</li> </ul>		<p>By referring the occupier, and ensuring they are offered the correct support during an early intervention, the risk of a fall will lessen. In turn this will lessen their risk from fire, ensure they can escape in the event of a fire. This means we are mobilised to less special service calls where the root cause has been slips, trips and falls.</p>
<p><b>Social Isolation</b></p> <ol style="list-style-type: none"> <li>1. Do you ever go several days without being in contact with anyone?</li> <li>2. Do you ever feel lonely or isolated?</li> </ol>	<p>Fire</p>	<p>This would be informed by the information gathered through the questions, and visual checks, and a referral made if required and agreed with the occupier. Evidence shows that living alone/ social isolation can be one of the contributory factors in many fire fatalities and casualties.</p>
<p><b>Telecare/Community Alarms</b></p> <ol style="list-style-type: none"> <li>1. Is there a telecare/community alarm service in the home?</li> </ol> <p><i>If 'No':</i></p>	<p>Fire</p> <p>Special Service Calls –</p> <p>Making Entry</p>	<p>This would be informed by the information gathered through the questions, and visual checks, and a referral made if required and agreed with the occupier.</p>

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<ul style="list-style-type: none"> <li>• Would the household benefit from a Telecare service?</li> <li>• Would you like information on how to sign up to a telecare/community alarms package?</li> </ul>		
<p>The Safe and Well booklet we will leave with you today covers other useful advice for your information. (Crews will then show the person this section of the booklet) If any of these sections are particularly relevant to you, I can spend some time explaining the information if you would like?</p> <p>If ‘Yes’ record ‘Specific areas explained’:</p> <ul style="list-style-type: none"> <li>• Winter warmth and home energy</li> <li>• Home security - Neighbourhood Watch</li> <li>• Doorstep crimes/scams/online safety</li> <li>• Flooding</li> <li>• Mental health support</li> </ul>	<p>Special Service Calls –</p> <p>Flooding</p> <p>Water Rescue</p> <p>Making Entry – Concern for occupier</p> <p>Duty of care</p>	<p>This section allows for crews to detail the supplementary information which is provided within the S&amp;W booklet, and if required spend some time going over any section that is particularly relevant to the occupier’s circumstances and explain the information as required.</p> <p>By recording this information, we can recognise if there is a pattern where one area is concerning people, and add this into the main question section, and expand upon it in greater detail.</p>

## Appendix B - HFSVs in Context of FF Competencies

### Competencies required to deliver a HFSV (adapted from NFCC guidance).

The competencies support the Person-Centred Approach to home safety advice. It is the position of NFCC and covers the various checks currently underway (Home Fire Safety Visit, Home Safety Check, Safe and Well Visit), acknowledging that whilst the Service may be doing slightly different things, there are a suite of commonalities.

### Purpose

The primary purpose of the Home Fire Safety Visit should be to mitigate and reduce fire risk whilst trying to change some of the riskier behaviours that may affect or increase exposure to increased fire risk.

The following functions are required to conduct targeted engagements with individuals and household groups:

- Engage and assess: Helping people to live safer lives by observing the situation, engaging to make every contact count and identifying risks based on a person-centred framework, drawing on standardised core components of the HFSV
- Intervene to mitigate: Solving problems and making referrals to partner agencies including safeguarding to mitigate risk
- Reflect and report: Reflecting on your practice and keeping records during and following the visit to support evaluation of effectiveness, operational handover, improvement of practice, and outcomes for individuals.

*The HFSV is the recommended approach to achieving these outcomes and these elements have been incorporated into the updated visit and supporting system.*

The HFSV programme also supports our statutory duties:

**Fire Scotland Act 2005 – amended by Police and Fire Reform Act 2012 Section 8 – Duty to promote fire safety advice – education/campaigns/HFSV publicity and encouragement to prevent fire and death and injury by fire**

### **Fire and Rescue Framework 2022**

SFRS should use an evidence-based approach to target groups and individuals according to risk, and universal population wide activities, to improve fire and wider community safety. These should contribute to reducing inequality and encouraging sustainable and inclusive growth. SFRS should work with public, private and voluntary organisations; communities and individuals where they can add value and contribute to outcomes.

### Staff Knowledge and Skills

To be competent to carry out a person-centred Home Fire Safety Visit (HFSV), staff require to have:

- **Knowledge** - including knowledge of policy, procedure, applicable legislation, locally available services, the principles of person-centred fire risk assessment and effective fire risk control measures.

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- **Skills** - including the ability to deliver a person-centred fire risk assessment, identify and implement effective fire risk control measures, and fit fire risk reduction equipment, along with communication and engagement skills, motivational and behaviour change skills, customer service skills, and record keeping skills.
- **Behaviour** - including offering personalised support, showing respect and compassion, enabling positive behaviour change, and offering coordinated support.

NFCC recommend the core components of the HFSV, as defined in the Person-Centred Framework (PCF) are:

1. Home Fire Detection (smoke and heat) incorporating Assistive Technology
2. Fire Safety in the Home (kitchen, candles and escape planning)
3. Fires and Heaters (safer heating)
4. Clutter and Hoarding
5. Arson/Deliberate Fires
6. Smoking-Related Fires
7. Medicines and Medical Devices
8. Electrical Safety.

*These are all covered in the visit, either as direct questions or visual checks. The core components have been selected as they are common causes or contributory factors to serious fires (this is common across UK Services).*

### Knowledge

Staff need to know and understand:

- Your local policy, procedures and guidance for delivering HFSVs or equivalent
- Your responsibilities relating to General Data Protection Regulation (GDPR)
- Your responsibilities relating to Health and Safety
- Your responsibilities relating to Safeguarding

*All covered within the Policy, Procedure and Guidance.*

To engage with and understand people, you need to know and understand:

- How you are perceived by others, in the context of public perceptions and expectations of fire and rescue services
- Your diverse local communities, their differing and changing needs and expectations and the implications for the way you engage with them to provide advice and to influence behaviour
- Your local accessibility statement
- The content of digital and printed material that you provide to occupants, as determined locally
- Risks to your own and colleagues' welfare in a HFSV, and techniques for managing your own safety, including local lone working arrangements.

*SFRS have a Lone-Working Policy and standard print materials (including a bespoke booklet that is in production). Local staff should have a sound knowledge of their communities, this is also covered in the local Prevention Plan.*

To understand and assess risk of fire in the home, you need to know and understand:

- The main causes of fire in the home and how to assess the associated fire risk by delivering a person-centred fire risk assessment
- Personal factors which impact risk, including physical health, mental health, learning disabilities, mobility, sensory impairment, age and frailty
- Behaviour factors which impact fire risk, including smoking, taking medication, substance use and bedtime routines
- Home factors which impact risk, including property layout, fire protection, state of maintenance and repair, clutter, egress, and the social environment which is how people interact with the physical environment and with one another
- The standardised core components for person-centred HFSVs, including the current NFCC position statements regarding the minimum scope for each component
- Other components defined in your local approach for assessing fire risks or wider risks as part of person-centred HFSVs, including health checks
- Safety standards applicable to the core components and any local components of HFSVs
- Your responsibilities with respect to the safeguarding fire standard, which includes statutory safeguarding duties, and any applicable local safeguarding arrangements
- The principles and practices for engaging other agencies to improve your understanding of occupants' needs.

*Mandatory training modules have been developed to support the points above. In addition, supplementary modules covering specific areas in detail e.g., dementia, hoarding and assistive technology will all be available to staff to increase their knowledge.*

*SFRS has robust safeguarding policies and processes in place. These have recently been updated and enhanced training delivered to select staff to increase Service wide support.*

To ensure the delivery of interventions that mitigate risk, you need to know and understand:

- The locally preferred hierarchy of risk control for mitigating risk in the home, which may be ERICP as suggested by the PCF8 in line with National Operational Guidance
- The professional boundaries that define what interventions fire and rescue services and other organisations can deliver to make physical changes and encourage behavioural change

Options for interventions to reduce fire risk relevant to each of the core and local components of the HFSV, including:

- the principles and practices for engaging with, signposting and making referrals to other agencies, including for health support
- techniques for delivering brief advice to influence positive behaviour change in different contexts
- techniques for mitigating fire risk in line with the locally preferred hierarchy of risk control for mitigating risk in the home.

*The project has consciously taken the decision to ask questions (that related to fire / operational risk) that will facilitate signposting and referrals. There is no expectation for staff to identify and deliver interventions / suggest behaviour change. We are not delivering services on behalf of partners, but helping individuals access support they may be unaware of.*

*The exception to this is in relation to safeguarding where staff would be expected to follow SFRS policy.*



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To reflect on your practice and keep records, you need to know and understand:

- Current standards and guidelines for keeping records during and following the visit, including:
- your responsibilities for data protection under GDPR, including your organisation's privacy notice
- your local policies and procedures for record keeping.

*The new visit has been designed that the majority of the activity is all recorded via the new ICT system. There will be no requirement for paper records to be kept. All referrals to SFRS will be made via the Partner Portal of the system, complying with GDPR. Householders will receive advice on how their information is being used and stored; supported by Information Governance. The only exceptions will be data relating to safeguarding referrals where relevant policy should be followed.*

To engage with and understand people, you must be able to:

- Prepare for the visit, in collaboration with others where necessary, in line with local procedures and guidance
- Deliver a clear introduction to help occupants understand what the HFSV is
- Put occupants at the centre of HFSV by asking them what they want, listening and responding to their needs and concerns
- Provide relevant advice, education and recommendations to occupants through:
  - face-to-face discussion
  - digital and printed material about fire safety in the home
  - other digital and printed material to meet local requirements, including your organisation's privacy notice
- Check people's understanding of, and ability to access, all information provided
- Work before, during and after HFSVs with personnel internally and with partner agencies or family, friends or carers for joint visits, including for safeguarding issues
- Manage yourself, your personal resilience, and the risks to yourself and colleagues associated with other people and the environment of a HFSV.

*Training and guidance have been developed to support staff. SFRS personnel have been delivering HFSVs for a number of years and are very experienced in engaging with communities.*

To understand and assess risk of fire in the home, you must be able to:

- Use observations, questioning and listening skills
- Take a person-centred approach to fire risk assessment by considering the impact of personal behaviour and home factors on fire risk
- Assess the risk of fire associated with each of the core components of HFSVs and any other components of local relevance.

To ensure the delivery of interventions that mitigate risk, you must be able to:

- Define interventions that meet the unique needs of the occupants to mitigate the identified risks using the locally preferred hierarchy of risk control
- Decide whether to provide, recommend or make referrals for these interventions by using your understanding of professional boundaries
- Make referrals internally and to partner agencies to make behavioural or physical interventions to reduce risks
- Encourage people to access help and support from other agencies and signpost or refer them if they choose to seek support
- Deliver brief advice to encourage positive behavioural change that enables people to reduce risk

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- Deliver verbal and written fire safety advice to address each core component and control risk
- Make changes in the property to mitigate fire risk
- Provide, fit, test and/or recommend fire risk reduction equipment including smoke alarms and equip occupants to use and maintain equipment effectively.

*The new ICT system supports automated onward referrals by incorporating a number of trigger questions. Staff need a basic awareness of how health and social factors effected fire risk but are not expected to provide any services on behalf of our partners and be subject matter experts.*

*The installation of detection is a core component of HFSVs. There is no expectation for SFRS to install any other equipment.*

To reflect on your practice and keep records, you must be able to:

- Reflect on all aspects of the visit, including what you have learnt from and with others, to make and recommend improvements to practice
- Keep timely and accurate risk-focused records to support subsequent evaluation of effectiveness, operational handover, improvement of practice, and outcomes for individuals
- Complete records in accordance with organisational policy, procedure and guidance
- Uphold responsibilities to data protection.

*The ICT system ensures records are updated at the visit (reducing duplication) and through effective partnership arrangements, data protection has been considered.*

**SAW PROJECT – DELIVERY OPTIONS****June 2023****1 INTRODUCTION**

There are several options to progress the Safe and Well (SAW) project. These are summarised below with associated risks and dependencies.

As discussed at the SMB meeting (15.03.23) three options for the future of the project were identified. These have been refreshed to include an additional option (number 4).

- Option 1 – Continue to deliver Home Fire Safety Visits (HFSVs) as per current policy and cease the SAW project.
- Option 2 – Utilise Community Safety Advocates (CSAs) to deliver SAW visits and uniformed staff deliver HFSVs.
- Option 3 – All staff deliver SAW visits.
- Option 4 – A review of the content of SAW is undertaken and any elements not considered as part of the role-map be removed and an updated HFSV is delivered, utilising the newly developed ICT system.

**2 OPTIONS****2.1 OPTION 1 – CONTINUE TO DELIVER HFSVs ARE PER CURRENT POLICY AND CEASE THE SAW PROJECT**

This option would officially close the SAW project without any further action. SFRS staff would utilise existing policy and procedure and the associated ICT system (CSET) to deliver the current HFSV programme.

**Benefits**

- Staff and partners are both familiar with the current HFSV programme and method of generating referrals.
- HFSVs are well recognised by the public and traditionally SFRS have publicised them to be available to any household in Scotland. SFRS are a “trusted brand” in that regard.
- No additional training required as staff are familiar with policy and accompanying ICT system.
- Closure of the project could be immediate – no additional resources required.

**Disadvantages**

- The current ICT system used to record HFSVs is coming to end of life, due to changes to the support provided by Microsoft. It is not fully fit for purpose and is extremely difficult to make any changes. This therefore affects the following:
  - The risk criteria used are not current and do not reflect emerging trends e.g., emollients.
  - Changes to prioritisation is not possible, therefore difficult to remove Low Visits or offer an alternative to a physical visit.
  - Duplication for staff as visit information needs to be noted on paper then transferred on to the system. This also raises GPDR concerns.
  - The current platform hosting CSET will no longer be available (as of March 2024), so resources will be required to move to a new secure hosting site (approximately £1,500 per month for hosting).
- Some partners are referring individuals directly to SFRS staff, via email, which is creating risk in relation to data protection.

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- Although guidance is provided to staff, there is no consistency of the visit content, including consistent onward referrals.
- Significant investment has been made in the project to date (more than £1.1 million). There is organisational risk (reputation and fiscal management) if this option is chosen.

### Dependencies / Timescales / Cost

- Ongoing support from ICT will be required to host CSET and investment in a new system will be required in the future.
- Closure of the project could be immediate.
- Costs to host CSET on a temporary platform (approximately £1,500 per month). This will be required until all modules on CSET have been updated and hosted on different ICT solutions

## **2.2 OPTION 2 – UTILISE COMMUNITY SAFETY ADVOCATES (CSAs) TO DELIVER SAW VISITS AND UNIFORMED STAFF DELIVER HFSVs**

### Benefits

- As CSAs are support staff, they are therefore not tied in with discussion around widening the role, which would enable the delivery of SAW visits.
- This will allow the Service to deliver SAW visits, albeit in small numbers.
- Uniformed colleagues will not witness any changes and will continue to deliver existing policy (HFSVs).
- CSAs can utilise laptops to deliver visits, so timescales and hardware solutions are not dependent on the In-Vehicle Systems project.
- There are no additional costs for training (LCMS) or ICT (laptops will be paid for by ICT Capital budget).

### Disadvantages

- This option would require the use of different policies and ICT systems for different staff. Crews would continue to use CSET and conduct HFSVs in the current format and CSAs would use SAW. This would present significant challenges for the Service and would be; confusing for personnel, difficult to manage, difficult to report data and cause duplication or visits being missed / not prioritised.
- This option may create the potential for a legal challenge where a different service is offered to different communities.
- The management of two systems to deliver HFSVs and SAW will significantly increase the administrative burden for both ICT and P&P staff who will be required to support two ICT systems and manage two policies / procedures.
- It is recognised that CSET is no longer fit for purpose and resources are required to move to a temporary platform. This option would require staff to use an ageing system with risk criteria which does not fully reflect emerging fire risks and an inability to remove Low visits. It will also require ongoing ICT support.
- Partner referrals would be overly complicated. Only partners who have signed up to the Data Sharing Framework and Privacy Notice would be able to make referrals into SAW. Therefore, details cannot be transferred across from CSET.
- To make referrals (public and partners) would require access to the SAW system which would need to be hosted on the SFRS website. This will cause confusion if two types of visits are available.
- The role of CSAs is not entirely focussed on HFSVs and there are limited numbers of staff across the country. There would need to be caution around signing up partners who generate visits if SFRS do not have the staff to deliver them and visits sit on pending lists. This will be the same issue with self-referrals.
- Nearly 25% of CSAs are on fixed term contracts, with no budget allocated after June 2026. This will further impact capacity.

## OFFICIAL

- Staff will require to undergo training, especially on the new system, which will require time (estimated at one hour via LCMS).

### Dependencies / Timescales / Cost

- Timescales are reliant on completion of the ICT system and associated work to deploy in a live environment (see ICT summary below).
- The SAW booklet that will be left with householders needs to be developed and finalised.
- There are no additional costs for training (LCMS) or ICT (laptops will be paid for by ICT Capital budget).
- Support / advice from Comms will be required as SFRS will not be able to provide a SAW visit to all communities and can only work with limited partners.

## 2.3 **OPTION 3 – ALL FRONTLINE STAFF DELIVER SAW VISITS**

### Benefits:

- All staff would be delivering a consistent visit with current risk / selection criteria based on information from fire fatalities and serious injury.
- Only those who meet criteria will receive a visit, others will be provided with information (bespoke PDF if arranged online, or booklet if not), therefore there is more focus on those most at risk from fire and a reduction in overall visit numbers.
- A bespoke electronic recording system will remove dependency on a paper-based system, reducing duplication and improving user experience.
- Easy for staff to signpost or refer to other services for support – there is currently a requirement to do this back at the station or via the CAT.
- Reduction of attending low risk households will free capacity which can be used to increase prevention activity targeted at those most at risk of fire.
- Enhanced education of staff will increase knowledge around emerging risk factors, ensuring SFRS is able to offer wider support through effective partnership working
- Reductions in vehicle movement, fuel costs and road risks due to revised visit targets.
- Improved partner support and training to ensure referrals meet the criteria, following robust information sharing processes.
- Once other modules have been developed CSET can be closed, reducing costs and time to maintain and host (£18,000 on hosting costs per annum plus staff resource).

### Disadvantages

- Some of the content may not be supported by the Fire Brigade's Union.
- Staff will require to undergo training, especially on the new system, which will require time and budget (for On-Call staff). This will be kept to a minimum (approximately one hour) with online links to additional resources. The system has been built to be intuitive and user-friendly. Supporting guidance will be available online and via P&P staff.
- Partners will need to sign up to a new Information Sharing Protocol and ICT system before they can make or receive referrals. It will take time to get all existing partners, as well as new ones, signed-up so this will need to be taken into consideration when meeting initial targets. This could take up to 12 months as there are hundreds of referral partners.
- Taking into consideration the above, service performance may be reduced in the initial years of the revised visit which will be reflected in key performance indicators e.g., total number of visits conducted.

Dependencies / Timescales / Cost

- Timescales are reliant on completion of ICT system and associated work to deploy in a live environment (see ICT summary below).
- Staff will be required to complete mandatory training (one hour). It is anticipated this will be captured via the TfOC for all operational staff, including On-Call.
- Associated costs for literature (SAW booklet) and postage – approximately £15k. All other costs will be absorbed through existing budgets e.g., advertising (P&P), call-handling (Corporate Admin and P&P), and detectors (P&P).
- A full-roll out will be dependent on the availability of In-Vehicle devices.
- Once timescales are identified, sufficient time will need to be factored into the project to engage and sign-up partners to the new Data Sharing Agreement / ICT system.

#### 2.4 **OPTION 4 – A REVIEW OF SAW CONTENT IS UNDERTAKEN. ANY ELEMENTS NOT CONSIDERED AS PART OF ROLE-MAP BE REMOVED. AN UPDATED HFSV IS DELIVERED, UTILISING THE NEWLY DEVELOPED ICT SYSTEM.**

SAW as a project has been considered as part of broadening the role of the firefighter and a decision has not been reached in relation to its implementation. As discussions around terms and conditions have yet to be resolved, with no defined timescales, it is recommended that SAW, as a project, is discontinued. Any elements of the visit which are deemed to be out-with the firefighter role-map could be removed, with the result being an evolved HFSV which incorporates current risks and is more technically advanced which will benefit SFRS staff, partners, and householders.

As previously stated, the current HFSV programme does not reflect current risk and there are increasing issues as it is an ageing ICT system. The solution therefore would be to move to the new system (with any revision required) to avoid duplicating ICT resource to initially maintain, then replace CSET over time.

Benefits

- All staff would be delivering a consistent visit with current risk / selection criteria based on information from fire fatalities and serious injury.
- Only those who meet criteria will receive a visit, others will be provided with information (bespoke PDF if arranged online, or booklet if not), therefore more focus on those most at risk from fire and a reduction in overall visit numbers.
- A bespoke electronic recording system will remove dependency on a paper-based system, reducing duplication and improving user experience.
- Easy for staff to signpost or refer to other services for support – there is currently a requirement to do this back at the station or via the CAT.
- Reduction of attending low risk households will free capacity which can be used to increase prevention activity targeted at those most at risk of fire.
- Enhanced education of staff will increase knowledge around emerging risk factors, ensuring SFRS is able to offer wider support through effective partnership working
- Reductions in vehicle movement, fuel costs and road risks due to revised visit targets.
- Improved partner support and training to ensure referrals meet the criteria, following robust information sharing processes.
- Once other modules have been developed, CSET can be closed, reducing costs and time to maintain and host.

Disadvantages

- Staff will require to undergo training (captured through TfOC), especially on the new system, which will require time and budget (for On-Call staff). This will be kept to a minimum with online links to additional resources. The system has been built to be

## OFFICIAL

intuitive and user-friendly. Supporting guidance will be available online and via P&P staff.

- Partners will need to sign up to a new Information Sharing Protocol and ICT system before they can make or receive referrals. It will take time to get all existing partners, as well as new ones, signed-up so this will need to be taken into consideration when meeting initial targets.
- Taking into consideration the above, performance may be reduced in the initial years of the revised visit.
- Some elements of the visits, considered under the SAW project, may need to be removed if they are not considered as part of the firefighter role-map.
- Work would be required to re-brand any materials produced to date which utilise the name *Safe and Well*.
- Project work to date – ICT system, documentation, training materials etc., all reference SAW so there will be work required to reflect the change to HFSV.

### Dependencies / Timescales / Cost

- Engagement with FBU to identify and discuss any elements of the proposed visits which are not considered as part of the firefighter role-map.
- Timescales are reliant on completion of ICT system and associated work to deploy in a live environment (see ICT summary below).
- Staff will be required to complete mandatory training (one hour). It is anticipated this will be captured via the TfOC for all operational staff, including On-Call
- Associated costs for literature (SAW booklet) and postage – approximately £15k. All other costs will be absorbed through existing budgets e.g., advertising (P&P), call-handling (Corporate Admin and P&P), detectors (P&P).
- A full-roll out will be dependent on the availability of In-Vehicle devices (see below).
- Once timescales are identified, sufficient time will need to be factored into the project to engage and sign-up partners to the new ICT system.
- If this option is chosen, the SAW project would be officially closed and a new project established which focusses on the implementation of the revised visit and associated workstreams.

## 3 CONSIDERATIONS (options 2, 3 and 4)

### 3.1 ICT

As of 01 July 2023, the majority of priority development work on the ICT system will be complete. This is the date the dedicated resource to the SAW ICT project will end (Developer and Tester contracts end).

There are however several additional ICT elements that are required before the site can be fully tested and launched. These include:

- Developing the environment and allocating support for a second pilot (previously unable to test any of the partner elements or personalised PDF) and identify resource to manage any problems the pilot may highlight
- Integration to the Safety Asset application to record the installation of detection
- Reporting tools – support will be provided from Business Intelligence to develop
- Several outstanding Change Requests and Bugs (priority 1 bugs complete, only 30% of total CRs and Bugs)
- Identify internal ICT resources and processes for back-up, recovery, and any emerging issues with the system
- Load testing

- Penetration Test
- Production environment to launch the site
- Work with Comms to create landing page for members of the public / partners to generate referrals

The roll-out of the system also has co-dependencies with the In-Vehicle System (IVS) project. Staff will update information obtained at the visit via a tablet (a paper-based system is not feasible due to duplication, GDPR and environmental reasons). The IVS project provides the infrastructure to support this, with Wi-Fi on appliances supporting connectivity. Any roll-out would need to consider IVS timescales and additional devices may be required to support Scotland wide roll-out if the IVS project timescales do not align.

P&P will work closely with ICT to develop a timeline which will in-turn form part of the Project Plan, with key milestones identified.

### **3.2 Training**

Once a “go-live” date for the preferred option is identified, appropriate time for training will be required. If all front-line staff require training, it is proposed this is included in the TFOC period prior to launch. This will allow sufficient time for staff to complete the LCMS module, whilst ensuring their knowledge remains current. As the training module will be around one-hour in duration, this can be factored into existing training programmes, therefore there will be no additional costs (including On-Call).

Community Action Team members will also need training, with additional training and support required to assist them to engage with partners – a crucial role to ensure SFRS receive referrals and identify those most at risk across Scotland’s communities.

The training modules will form part of the second pilot to ensure the level and duration of training is adequate.

### **3.3 Partners**

Sufficient time will be required to engage with partners to inform them of any changes moving to a new referral process and outline the benefits of referring in and out of SFRS. Resources and training to support this engagement have been developed which require to be tested as part of a second pilot.

Timescales also need to consider signing partners up to the new Data Sharing Agreement (DSA) which needs to be approved by Information Governance prior to any referrals being generated. There are hundreds of potential partners to sign-up to the new DSA and ICT system, which could take up to 12 months as it is reliant on local capacity to support and requires assistance from Information Governance.

## **4 RECOMMENDATION**

It is recommended that Option 4 is considered by CPPG members. Due to the resources already invested in the project, along with benefits to staff, communities and partners as outlined, this would have the most significant and positive impact. The project is closely aligned with the firefighter role map, and any adaptations required to questions / content are straightforward to make. It will target those most at risk from fire, ensuring SFRS fulfils its statutory duties, and will release capacity due to more streamlined and technological advanced processes.



**5 NEXT STEPS**

Working with the Portfolio Office, governance routes will be progressed to ensure the project is either closed or progressed to implementation.

If Option 1 is chosen, a Closure Report, Benefits Review and Lessons Learned document will all be complete and provided to CPPG for consideration.

If Options 2, 3, or 4 are chosen, it is proposed the following route is progressed - a Change Request is submitted, moving from a pilot project to an implementation project.

The documents provided to CPPG (*Progress to Date and Benefits* and *Options for Implementation*) should meet the requirement for the intake phase of the project life cycle.

The revised project will then move into the Planning Phase requiring an updated Dossier and Project Plan. The Project Plan will incorporate a second pilot to ensure all elements of the project and functionality of the ICT system (particularly in relation to partner sign-up and referrals) are tested and any required changes made prior to full implementation.

Cross-Directorate support will be required to create the Project Plan due the outstanding work and interdependencies as detailed in the two documents referred to above.

The project will then follow the cycle, moving onto Delivery and Closure Phases.



Report No: C/CC/26-23

Agenda Item: 8.1

<b>Report to:</b>	<b>CHANGE COMMITTEE</b>																
<b>Meeting Date:</b>	<b>10 AUGUST 2023</b>																
<b>Report Title:</b>	<b>PORTFOLIO PROGRESS REPORT</b>																
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>															
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>	<a href="#">G</a>									
<b>1</b>	<b>Purpose</b>																
1.1	The purpose of this report is to provide a regular update on progress to the Change Committee on the key activities undertaken by the Portfolio Office in building and developing new and existing capability specific to strategic Portfolio, Project and Programme management maturity (P3M3).																
<b>2</b>	<b>Background</b>																
2.1	Between 17-19 February 2020 an Independent Assurance Team from Scottish Governments Programme and Project Management Centre of Excellence carried out a Gateway Review of the SFRS Programme Office. The findings of this review were reported to SMB on 2 April 2020. The Gateway Review Action Plan was created to track the progress of recommendations from the findings. It was agreed by Change Committee on the 5 <sup>th</sup> August 2021 to close the Gateway Review action plan in its current form and track progress through quarterly updates presented by Portfolio Office Head of Function to the Change Committee and via a published Portfolio Office roadmap on an ongoing basis.																
2.2	Following on, an internal audit was carried out to identify opportunities to support the development of portfolio management and Portfolio Office capabilities within SFRS resulting in 6 Internal Audit (IA) actions. These actions are reflected in the capabilities detailed below. Following progress in developing the capabilities it was agreed that 5 out of the 6 IA actions are now closed.																
<b>3</b>	<b>Main Report/Detail</b>																
3.1	The main detail of the report in the current reporting period (Q1 2023) provides an overview and status of the key actions currently initiated by the Portfolio Office function in <b>'Building Capability'</b> .																
	<b>Key Insights:</b>																
	<b>1. Portfolio Benefits Management Framework Design</b> - Initial design of the Benefits Framework and Toolkit is now complete																
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Deliverable</th> <th style="width: 15%;">Thematic Group</th> <th style="width: 15%;">Status</th> <th style="width: 15%;">Original Due (FY)</th> <th style="width: 30%;">Latest Thinking Forecast (FY)</th> </tr> </thead> <tbody> <tr> <td>Benefits Mgmt. Framework Design</td> <td>VALUE</td> <td style="background-color: #0070C0; color: white;">COMPLETE</td> <td>Q1 '22-23</td> <td>Q1 '22 - 23</td> </tr> </tbody> </table>							Deliverable	Thematic Group	Status	Original Due (FY)	Latest Thinking Forecast (FY)	Benefits Mgmt. Framework Design	VALUE	COMPLETE	Q1 '22-23	Q1 '22 - 23
Deliverable	Thematic Group	Status	Original Due (FY)	Latest Thinking Forecast (FY)													
Benefits Mgmt. Framework Design	VALUE	COMPLETE	Q1 '22-23	Q1 '22 - 23													

Design of the benefits framework, process and test of change is now complete.

2. **Business Case and Benefits Integration** – The Benefits Management Framework will be used as the basis to make modification to the In-Place Business Case Template/Process to identify and capture benefits as new projects come forward along with SMART measures and success criteria. Portfolio Office are working with a delivery partner to prepare functional specifications to potentially digitise the process.

The benefits framework test of change is now complete.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Business Case & Benefits Integration	VALUE	COMPLETE	Q3 '22 - 23	Q4 '22 - 23

3. **Change Portfolio Prioritisation Model Design** – 1st draft of recommended Change Portfolio Prioritisation Model has been designed and circulated with peers and colleagues in SPPC directorate for input and feedback.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Change Portfolio Prioritisation Model Design	PRIORITISATION	COMPLETE	Q3 '22 - 23	Q1 '23 - 24

The design and testing of the prioritisation model is now complete.

**Portfolio Office Strategy** – A case for change containing the Portfolio Office strategy and proposed Target Operating Model was presented to SLT outlining the strategy to enhance portfolio office capabilities. It sets out to establish the new and enhanced portfolio office services into four pillars with supporting roles:

- I. Centre of Excellence (CoE)
- II. Portfolio Management, Governance and Assurance
- III. Business Architecture, Analysis and Service Improvement
- IV. Programme and Project Delivery

The strategy and target operating model were “agreed in principal” by SLT 7<sup>th</sup> December 2022. However current budgets do not provide sufficient capacity to recruit the proposed new roles into the team.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Portfolio Office Function Strategy	STRATEGIC	COMPLETE	Q2 '21 - 22	Q3 '22 - 23

Funding is currently unavailable for new posts outlined in the Portfolio Office strategy and alternative options are being explored to resource them.

4. **Business Change Lifecycle Design PH1** – 1st Iteration of the Business Change Lifecycle is complete with overarching phases, and outline sub-processes.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Business Change Lifecycle Design PH1	PROCESS	COMPLETE	Q4 '21 - 22	Q2 '22 - 23

The design and testing of the business change lifecycle is now complete.

**5. Portfolio Office Risk Reporting** – Transition of Change Portfolio Risk Registers over to a new risk reporting format now complete.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Risk Register Transition	RISK	DONE	Q4 '21 - 22	Q1 '22 - 23

Transition to new risk format is now complete and work continues to support development of the dashboard.

**6. Portfolio Level Financial Reporting** – Iteration 1 of the Change Portfolio Financial Report has been established.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Portfolio Level Financial Reporting	FINANCIAL	DONE	Q4 '21 - 22	Q1 '22 - 23

Iteration 2 of the Finance report is now complete.

**7. Portfolio Highlight Report Design** – Design of a new Change Portfolio Project Highlight report complete.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Project Highlight Report Design	MI & REPORT	DONE	Q1 '22 - 23	Q1 '22 - 23

Iteration 3 of the Highlight report is now complete.

**8. Portfolio Integrated Governance** – Re-design of governance specific to the Change Portfolio was approved at October SLT meeting and is planned to be introduced in Q4.

Deliverable	Thematic Group	Status	Original Due	Latest Thinking Forecast
Portfolio Integrated Governance	GOVERNANCE	COMPLETE / READY FOR RELEASE	Q4 '21 - 22	Q2 '22 - 23

The revised integrated portfolio governance model was introduced in April 2023. This action is now complete.

<b>4</b>	<b>Recommendation</b>
4.1	Change Committee are asked to scrutinise the Portfolio Office progress update.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>RISK</b>
5.1.1	<p><b><u>Critical Success Factors</u></b></p> <p>There is a risk that it will not be possible to successfully implement the new portfolio capabilities and Portfolio Office target operating model due to budgetary constraints and a lack of suitably qualified and experienced people currently in the team.</p> <p>The target operating model contains industry standard roles designed to support change across the organisation from development of the long-term strategic roadmap, through to realisation of benefits and all of the constituent processes, frameworks, methods and tools that will underpin successful delivery of change across SFRS.</p>

5.1.2	<p><b><u>Risk Spotlight</u></b>  <i>Extract from Portfolio Office Resourcing Spotlight presented at Change Committee Q1 2022:</i></p> <p><i>This risk should be considered as a live issue that has materialised as a result of organisational constraints that limit critical resource capacity and capability both within the Portfolio Office and across SFRS functions, which includes the necessity to further develop and build the skills and competencies that are required of a Strategic Change function within the current organisation structures.</i></p> <p><i>The capacity, skills and competencies are essential to provide enablement in the effective management of highly complex and valuable projects. Additionally, the management team are looking at how best to build and develop the skills and competencies within the current portfolio team structure and across the SFRS with a view to implementing capability and improving delivery performance.</i></p> <p><i>(A CPD approach however could have limited impact and potentially take longer)</i></p>
5.2 5.2.1	<p><b>Financial</b>  There are no direct key financial implications arising from this report.</p>
5.3 5.3.1	<p><b>Environmental &amp; Sustainability</b>  There are no direct key environmental &amp; sustainability implications arising from this report.</p>
5.4 5.4.1	<p><b>Workforce</b>  There are no direct key workforce implications arising from this report.</p>
5.5 5.5.1	<p><b>Health &amp; Safety</b>  There are no direct key health and safety implications arising from this report.</p>
5.6 5.6.1	<p><b>Health &amp; Wellbeing</b>  There are no direct health and wellbeing implications arising from this report.</p>
5.7 5.7.1	<p><b>Training</b>  There are no direct key training implications arising from this report.</p>
5.8 5.8.1	<p><b>Timing</b>  There are no direct key timing implications arising from this report.</p>
5.9 5.9.1	<p><b>Performance</b>  There are no direct key performance implications arising from this report.</p>
5.10 5.10.1	<p><b>Communications &amp; Engagement</b>  There are no direct key communication and engagement implications arising from this report.</p>
5.11 5.11.1	<p><b>Legal</b>  There are no direct key legal implications arising from this report.</p>
5.12 5.12.1	<p><b>Information Governance</b>  DPIA completed No. Report is provided for scrutiny.</p>
5.13 5.13.1	<p><b>Equalities</b>  EHRIA completed No. Report is provided for scrutiny.</p>

5.14	<b>Service Delivery</b>	
5.14.1	There are no direct key Service Delivery implications arising from this report.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable.	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	David Lockhart, Director of Service Development
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial/Reasonable/Limited/Insufficient</del>
7.3	<b>Rationale:</b>	Although the Portfolio Office are striving for improvement and work arounds, the risks remain reasonable with the challenge of budgets and resources.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Not applicable.	
<b>Prepared by:</b>	Curtis Montgomery, Head of Portfolio Office	
<b>Sponsored by:</b>	David Lockhart, Assistant Chief Officer Director of Service Development	
<b>Presented by:</b>	Curtis Montgomery, Head of Portfolio Office	
<b>Links to Strategy and Corporate Values</b>		
Outcome 4 – we are fully accountable and maximise our public value by delivery a high quality, sustainable fire and rescue service for Scotland.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Change Portfolio Investment Group</i>	<i>20 July 2023</i>	<i>For Noting</i>
<i>Change Committee</i>	<i>10 August 2023</i>	<i>For Scrutiny</i>

## SCOTTISH FIRE AND RESCUE SERVICE

## Change Committee



SCOTTISH  
FIRE AND RESCUE SERVICE  
Working together for a safer Scotland

Report No: C/CC/27-23

Agenda Item: 9.1

Report to:	CHANGE COMMITTEE																																																																						
Meeting Date:	10 AUGUST 2023 (DATA AS OF: 10/07/23)																																																																						
Report Title:	PORTFOLIO OFFICE RISK LOG																																																																						
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>																																																																					
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<b>1</b>	<b>Purpose</b>																																																																						
1.1	The purpose of this report is to provide the Change Committee (CC) with an overview of the identified risks that could impact on the various programmes of work being monitored by the Portfolio Office.																																																																						
<b>2</b>	<b>Background</b>																																																																						
2.1	The risk tracking process used by the Portfolio Office is designed to monitor risks that could potentially impact on the successful delivery of Service Delivery, Major Projects and business as usual.																																																																						
2.2	The risk information within this report has been collated via the submission of project update risk logs.																																																																						
<b>3</b>	<b>Main Report/Detail</b>																																																																						
3.1	The table below shows the total number of Risks being monitored through the Portfolio Office that are showing a current red risk or risk of 15 or more.																																																																						
3.1.1	<table border="1"> <tr> <td><b>TOTAL</b></td> <td><b>6</b></td> <td colspan="3"><b>Previous Month</b></td> <td colspan="3"><b>20</b></td> </tr> <tr> <td><b>New</b></td> <td>3</td> <td colspan="6">NMS011: rating 16 SDMP009: Rating 15 SW004: Rating 15</td> </tr> <tr> <td><b>Updated</b></td> <td>1</td> <td colspan="6">ESMCP009: Rating was 20 reduced to 16</td> </tr> <tr> <td><b>Closed/ Removed</b></td> <td>5</td> <td colspan="6"><b>Closed:</b> ONCALL001 &amp; ONCALL002: Programme closing. PTFAS001, 006, 008: Programme risks moved to project risk registers as required.</td> </tr> <tr> <td></td> <td>17</td> <td colspan="6"><b>Removed due to now below 15</b> See data below table for more information</td> </tr> <tr> <td><b>PROJECT</b></td> <td><b>NMS</b></td> <td><b>SDMP</b></td> <td><b>ESN</b></td> <td><b>S&amp;W</b></td> <td><b>iHub</b></td> <td><b>PPFT</b></td> <td><b>Rostering</b></td> </tr> <tr> <td>RED</td> <td>1</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>AMBER</td> <td>0</td> <td>1</td> <td>1</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> </tr> </table>							<b>TOTAL</b>	<b>6</b>	<b>Previous Month</b>			<b>20</b>			<b>New</b>	3	NMS011: rating 16 SDMP009: Rating 15 SW004: Rating 15						<b>Updated</b>	1	ESMCP009: Rating was 20 reduced to 16						<b>Closed/ Removed</b>	5	<b>Closed:</b> ONCALL001 & ONCALL002: Programme closing. PTFAS001, 006, 008: Programme risks moved to project risk registers as required.							17	<b>Removed due to now below 15</b> See data below table for more information						<b>PROJECT</b>	<b>NMS</b>	<b>SDMP</b>	<b>ESN</b>	<b>S&amp;W</b>	<b>iHub</b>	<b>PPFT</b>	<b>Rostering</b>	RED	1	0	0	1	0	0	0	AMBER	0	1	1	2	0	0	0
<b>TOTAL</b>	<b>6</b>	<b>Previous Month</b>			<b>20</b>																																																																		
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RED	1	0	0	1	0	0	0																																																																
AMBER	0	1	1	2	0	0	0																																																																

3.1.2	Please note that due to timing of Project Board meetings and late delivery of individual reports, versus collation of data required to run reports, the data maybe slightly out of sync. Where this is the case a verbal update should be given from the Project Sponsor.
3.2	<b>New Risks</b>
3.2.1	<b>NMS011: rating 16.</b> There is a risk that the number of suppliers on Crown Commercial Services framework RM6259, Lot 5 will result in an extended procurement process as a result of the number of bidders
3.2.2	<b>SDMP009: Rating 15.</b> Risk of failing to deliver accurate Community Risk profiling and associated scenario planning. This could be due to lack of appropriate data for short, medium and long term profiling. This could result in failure to match resource to risk leading to damage to SFRS reputation internally and externally.
3.2.3	<b>SW004: Rating 15.</b> There is a risk of failing to test and implement the remote software (PWA) due to delays in UAT and the lack of progress with availability of mobile devices resulting in a failure to implement S&W. Previously SW10
3.3	<b>Closed risks</b>
3.3.1	<b>ONCALL001:</b> RDS Terms & Conditions & <b>ONCALL002:</b> Resources to meet objectives. Closed due to Programme Closing. Risks are already owned by the relevant functions and directorates.
3.3.2	<b>PTFAS001:</b> Failure to procure solution in time for existing contracts <b>PTFAS006:</b> Failure to gain approval from Scottish government review <b>PTFAS008:</b> Project funding
3.4	<b>Removed risks – now below threshold of 15</b>
3.4.1	<b>ESN – full review of risk descriptions and ratings adjusted accordingly.</b> <b>ESN001, 002,003,004, 005,006,007,008, 0011:</b> all reduced to below the threshold of 15.
<b>4</b>	<b>Recommendation</b>
4.1	The CC is asked to: a) Scrutinise the contents of the current report b) Consider the risk mitigation actions within the report and provide feedback as necessary.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	As section 3
5.2	<b>Financial</b>
5.2.1	There are no direct financial implications associated with this report.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	There are no direct key environmental & sustainability implications arising from this report.
5.4	<b>Workforce</b>
5.4.1	There are no direct key workforce implications arising from this report.
5.5	<b>Health &amp; Safety</b>
5.5.1	There are no direct Health and Safety implications associated with this report.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	There are no direct Health and Wellbeing implications associated with this report.



5.7 5.7.1	<b>Training</b> There are no direct training implications associated with this report.	
5.8 5.8.1	<b>Timing</b> There are no direct key performance implications arising from this report.	
5.9 5.9.1	<b>Performance</b> There are no direct key performance implications arising from this report.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> There are no direct key performance implications arising from this report.	
5.11 5.11.1	<b>Legal</b> There are no direct key legal implications arising from this report.	
5.12 5.12.1	<b>Information Governance</b> A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.13 5.13.1	<b>Equalities</b> An Equalities Impact Assessment is not required as there is no personal/sensitive information on this cover paper.	
5.14 5.14.1	<b>Service Delivery</b> There are no direct key Service Delivery implications arising from this report.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	David Lockhart, Director of Service Development
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient
7.3	<b>Rationale:</b>	Resource and time is an ongoing risk for the organisation and we use our resources to review and manage risk mitigation, this includes new, removed, updated and closed risks.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix 1: Draft Portfolio Risk Report.	
8.2	Further Reading: - <a href="#">Risk Management Policy</a> .	
<b>Prepared by:</b>		Joan Nilsen, Programme Officer
<b>Sponsored by:</b>		David Lockhart, Director of Service Development
<b>Presented by:</b>		Ross Robison, Area Commander Portfolio Manager
<b>Links to Strategy and Corporate Values</b>		
The Portfolio Office links into The Risk Management Framework, forms part of the Service's Governance arrangements and links back to Outcome 5 of the 2022-25 Strategic Plan.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Change Committee</i>		<i>10 August 2023</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>

# Draft Portfolio Office Risk Report



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## Contents:

- Critical Risk Summary – Appendix 1a
- Project Risk Summary – Appendix 1b
- Project Risk Control Summary – Appendix 1c
- Closed Control Summary – Appendix 1d

# Critical Risk Summary

# Appendix 1a

Strategic Risk ID	Strategic Risk	Project Risk Ref	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
		SW005	Mobile Devices	There is a lack of progress with availability of mobile devices resulting in a failure to fully implement S&W. Previously SW10	ICT Project Manager	16 (4 x 4)	CC	SMB
1	Improve Safety and Wellbeing of Communities	NMS011	Framework supplier numbers extending procurement timelines	There is a risk that the number of suppliers on Crown Commercial Services framework RM6259, Lot 5 will result in an extended procurement process as a result of the number of bidders	SRO	16 (4 x 4)	CC	CPPG
5	Skilled, trained and motivated staff	ESMCP009	Recruitment & retention of Vehicle Fitters (ESMCP 24)	Recruitment and retention of vehicle fitting staff There is a risk that the service will not be able to recruit and retain Vehicle Fitters for the period of the transition. This is due to competition in the market place from private companies as well as other Scottish emergency services. The limited contract on offer will also be a factor.	Andrew Mosley	16 (4 x 4)	CC	CPPG

# Project Risk Summary

# Appendix 1b

Strategic Risk ID	Strategic Risk	Project Risk Ref	Risk Name	Summary	Risk Owner	Risk Rating (Pxl)	Committee	Executive Board
1	Improve Safety and Wellbeing of Communities	SW008	Partner sign up delays (ICT partner site)	There is a risk of not securing involvement of external partners/organisations or subsequent high risk referrals due to failure of access to the Safe and Well Partner application resulting from an expired certificate/ICT being locked out of Tenancy, resulting in a significant impact upon the successful delivery of the project. Previously SW7	ICT/SW Project Manager/P&P	15 (5 x 3)	CC	PB
1	Improve Safety and Wellbeing of Communities	SW004	ICT Management System (PWA)	There is a risk of failing to test and implement the remote software (PWA) due to delays in UAT and the lack of progress with availability of mobile devices resulting in a failure to implement S&W. Previously SW10	ICT Project Manager	15 (5 x 3)	CC	SMB
1	Improve Safety and Wellbeing of Communities	SDMP009	Community Risk Profiling (SDMPB 2/001)	Risk of failing to deliver accurate Community Risk profiling and associated scenario planning. This could be due to lack of appropriate data for short, medium and long term profiling. This could result in failure to match resource to risk leading to damage to SFRS reputation internally and externally.	DG	15 (3 x 5)	CC	SMB

## Project Risk Control Summary

## Appendix 1c

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Committee	Executive Board
	SW005	Mobile Devices	Engage with business partner to review workarounds and review of project milestones and timeline.	Lynne Gow	Mar-23	Red - 65 %	Procurement of devices due January 2023. Gap analysis of 72 devices required to enable P&P staff to undertake SAW visits. These are not available from the IVS Project stock (LL 15/02) possible standard spec laptops from stock may be available (Greg Aitken 15/02 awaiting reply).	16 (4 x 4)	9 (3 x 3)	CC	SMB
5	ESMCP009	Recruitment & retention of Vehicle Fitters (ESMCP 24)	Capacity of existing skill set in the labour market attractiveness of pay and conditions Short term contracts on offer	Andrew Mosley	Dec-22	Amber - 10 %	Ongoing work with ESN Connect to mitigate this risk. Job Descriptions and Person specs complete Early funded recruitment of Vehicle fitters part of ESN Connect funding bid.	16 (4 x 4)	4 (1 x 4)	CC	CPPG

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SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (PxI)	Target Rating (PxI)	Committee	Executive Board
1	SDMP009	Community Risk Profiling (SDMPB 2/001)	Risk of failing to deliver accurate Community Risk profiling and associated scenario planning. This could be due to lack of appropriate data for short, medium and long term profiling. This could result in failure to match resource to risk leading to damage to SFRS reputation internally and externally.	AG	Apr-23	Amber - 20 %	Hardware (HP Z1 workstation) and software secured. Use requires access to core Ordnance Survey spatial data (Premium MasterMap geopackages) essential for environmental analysis. Access to key data yet to be agreed with ICT. Additional privileged access securities being set-up on HP Z1 to permit secure OS downloads. Once agreement has been reached regarding data, this will allow independent loading and maintenance of core CRIM spatial data.	15 (3 x 5)	1 (1 x 1)	CC	SMB

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SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (PxI)	Target Rating (PxI)	Committee	Executive Board
1	SW008	Partner sign up delays (ICT partner site)	ICT business partner to resolve partner site outage issue and review timelines.	Lynne Gow	Mar-23	Red - 60 %	ICT sub group in place to monitor and coordinate actions. Regression testing is underway. Product reportedly available by April 2023 for piloting with assumptions that all requirements (CRs) are able to be fulfilled) and readiness of partner site.	15 (5 x 3)	6 (3 x 2)	CC	PB
1	SW004	ICT Management System (PWA)	Engage with business partner to review workarounds and review of project milestones and timeline.	Lynne Gow	Mar-23	Red - 65 %	PWA remains "on hold" to enable progress with other ICT elements as agreed at SAW Board (06/10/22) Potential for its redundancy if ESN project guarantees WIFI when doing a S&W visit) possibility of testing further connectivity issues in partner pilot.	15 (5 x 3)	6 (3 x 2)	CC	SMB

# Closed Control Summary

# Appendix 1d

SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (Pxl)	Target Rating (Pxl)	Comm ittee	Execu tive Board
1	NMS011	Framework supplier numbers extending procurement timelines	Market engagement with support of Technical Advisor where necessary.	Procurement	2023-05-30	Green - 100 %	Supplier information day held 05/06/23, all framework suppliers invited, 11 suppliers attended. Market information via Technical Advisors indicated number of ICCS & CAD and Airwave compliant suppliers available. Supplier responses to SFRS questions re intention to bid and feasibility have been received along with potential costs	16 (4 x 4)	6 (2 x 3)	CC	CPPG
1	NMS011	Framework supplier numbers extending procurement timelines	Supplier information day as part of procurement process.	Procurement	2023-05-30	Green - 100 %	Supplier information day held 05/06/23, all framework suppliers invited, 11 suppliers attended. Market information via Technical Advisors indicated number of ICCS & CAD and Airwave compliant suppliers available. Supplier responses received to SFRS feasibility and timeline questions along will potential costs	16 (4 x 4)	6 (2 x 3)	CC	CPPG



<b>Report to:</b>	<b>CHANGE COMMITTEE</b>							
<b>Meeting Date:</b>	<b>10 AUGUST 2023</b>							
<b>Report Title:</b>	<b>CHANGE COMMITTEE RISK UPDATE</b>							
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY</b>					<b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>	
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>		
<b>1</b>	<b>Purpose</b>							
1.1	The purpose of the report is to provide the Change Committee (CC) with details of the risks aligned to the business of the Board.							
<b>2</b>	<b>Background</b>							
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/Executive Board.							
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.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	The risk register is a management tool that provides assurance to the Service and its scrutiny bodies that the significant risks of the organisation have been identified, managed and are subject to ongoing monitoring, review and discussion.							
3.2	Following agreement by SLT, the reporting template will now focus on those Directorate risks where the risk rating is identified at 15 or above. This will allow scrutiny to be focused on the most significant risks impacting upon Directorates and consideration of related control actions.							
3.3	The table below identifies 8 risks associated with the Change Committee. The following report will only focus on the 4 risks rated 15 or above and Appendix A to the report provides additional information on these risks.							

What is the current status of each risk?				
Impact	2	3	4	5
3				2
4	1	3	1	
5		1		

3.4

Previous reports provided commentary on the associated control actions outlining significant changes and progress against each. Future reporting will now identify those actions that have passed their original due date, providing a RAG status similar to internal audit reporting:

Red	Over 9 months from original due date
Amber	3-9 months from original due date
Green	On target or 3 months from original due date

3.5

In relation to the Change Committee three controls are now 9 months or more passed their original due date and further information on these is provided below:

Risk ID	Control Description	Original Due Date	RAG	Control Comment
SDD005	Ongoing engagement with Scottish Government	31/03/2022	Red	Work will continue throughout 2023/24 until further information is received from Scottish Government. Funding for Data First interim solution expected to be confirmed by the end of May 2023. (data associated with this report was collated in March 2023 and updated information will be provided within future reports).
SDD001	Development of business cases, recruitment and implementation of posts to allow the population of proposed Directorate Structure in line with organisational need	31/03/2022	Red	Business Cases for ICT and SDMP have been completed. Portfolio Office Business Case Target operating model approved in principle with required funding to be identified. The estimated completion date has changed due to many factors within this timeline, all of which have impacted workloads and staff capacity. The Directorate has had a change of Director, an introduction of a HoF Portfolio Office role, a lack of skill levels available to create Business Cases and Models.
SDD004	Consideration should be given to the development of a Service Improvement Framework and Self-Assessment to ensure the systematic approach to continuous improvement which demonstrates the commitment to continuous improvement across the service	31/03/2022	Red	SFRS Maturity Assessment drafted and will inform the SFRS continuous improvement strategy 22-25 which is currently under development. In addition, a new Self-Assessment framework (EFQM) is now currently progressing through a Test of Change that will allow the SFRS to independently apply continuous improvement methods and measures into their BAU activities

3.6	<b>Significant Risk Changes</b>
3.6.1	<p>Closed Risk(s)</p> <ul style="list-style-type: none"> <li>• <b>SPPC002</b> – there is a risk that communication and engagement plans are not in place to support consultation processes. This risk has been closed and merged with SPPC007.</li> </ul>
3.6.2	<p>Risk Rating Change</p> <ul style="list-style-type: none"> <li>• <b>SDD001</b> – There is a risk that the Directorate is unable to deliver against stated commitments and ambitions, due to limited resources and capacity at a time where Directorate is still developing, maturing and responding to concurrent events. Risk impact has reduced from 4 to 3 aligned to guidance and actual impact.</li> </ul>
3.7	The information presented within the revised report is still under review with future reporting to use both the overview report and the new risk reporting tool. A workshop is being planned for the Audit and Risk Assurance Committee to review the reporting capabilities of the tool and to agree further reporting requirements to Committee's.
<b>4</b>	<b>Recommendation</b>
4.1	<p>The Change Committee is asked to:</p> <ul style="list-style-type: none"> <li>• Scrutinise the risk report, considering those control actions now significantly passed their original due date.</li> <li>• Identify future risk spotlights for discussion by the Committee.</li> </ul>
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	The report identifies risks from each Directorate together with controls to minimise the likelihood and impact upon the Service. Each Directorate will be responsible for the identification and mitigation of any associated risk and for the update of relevant risk registers.
5.2	<b>Financial</b>
5.2.1	The report identifies risks from each Directorate together with controls to minimise the likelihood and impact. Financial implications arising from decisions taken will be managed by the relevant Directorate.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	<b>Workforce</b>
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.
5.5	<b>Health &amp; Safety</b>
5.5.1	Any implications arising from the report will be managed by the relevant Directorate.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	Any implications arising from the report will be managed by the relevant Directorate.
5.7	<b>Training</b>
5.7.1	Any implications arising from the report will be managed by the relevant Directorate.
5.8	<b>Timing</b>
5.8.1	The report is provided to the Audit and Risk Assurance Committee on a quarterly basis as required.

5.9 5.9.1	<b>Performance</b> The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> Any implications arising from the report will be managed by the relevant Directorate.	
5.11 5.11.1	<b>Legal</b> Any implications arising from the report will be managed by the relevant Directorate.	
5.12 5.12.1	<b>Information Governance</b> DPIA completed - No. The report provides a summary of risks and actions to be taken by Directorates, and named individuals, to manage any significant risk identified. The responsible Directorate will ensure that any relevant DPIA is completed as required.	
5.13 5.13.1	<b>Equalities</b> EHRIA completed - No. An assessment was undertaken in relation to the Risk Management Policy. Any individual elements of work, which may have an impact upon Equalities, will require to be assessed and managed by the relevant Directorate.	
5.14 5.14.1	<b>Service Delivery</b> Any implications arising from the report will be managed by the relevant Directorate.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	John Thomson, Acting Director of Finance and Procurement
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial/Reasonable/Limited/Insufficient:</del> There is room for improvement in the identification of the right risks, controls and the completion of mitigating actions within identified timescales.
7.2	<b>Rationale:</b>	The report is based upon information identified by each Directorate and I have confidence that the information is correctly reported based upon these returns.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix 1 – Change Committee Risk Report	
<b>Prepared by:</b>		David Johnston, Risk and Audit Manager
<b>Sponsored by:</b>		John Thomson, Acting Director of Finance and Procurement
<b>Presented by:</b>		Curtis Montgomery, Head of Portfolio
<b>Links to Strategy and Corporate Values</b>		
Risk Management forms part of the Services Governance arrangements and links back to Outcome 5 of the 2022-25 Strategic Plan, specifically Objectives 5.1 and 5.6:		
<b>Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.</b>		
<ul style="list-style-type: none"> <li>Objective 5.1: Remaining open and transparent in how we make decisions</li> <li>Objective 5.6: Managing major change projects and organisational risks effectively and efficiently</li> </ul>		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Change Committee</i>		<i>10 August 2023</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>

# Change Committee Risk Report



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## Contents:

- Strategic Risk Summary – Appendix 1a
- Aligned Directorate Risk Summary – Appendix 1b
- Directorate Risk Control Summary – Appendix 1c
- Directorate Closed Control Summary – Appendix 1d
- Directorate Closed Risk Summary – Appendix 1e
- Directorate Risk Rating Change Summary – Appendix 1f

# 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	Director of Service Delivery	H (3 x 5)
2	Ability to reduce the number of unwanted fire alarm signals and associated occupational road risk	Director of Service Delivery	H (5 x 3)
3	Ability to collaborate effectively with partners and communities, to enhance service delivery and best value	Deputy Chief Officer	H (3 x 4)
4	Ability to ensure legal and regulatory compliance	Director of Strategic Planning, Performance and Communications	H (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	VH (5 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	VH (4 x 5)
7	Ability to deliver a high quality, sustainable service within the funding envelope	Director of Finance and Contractual Services	VH (5 x 4)
8	Ability to anticipate and adapt to a changing environment through innovation and improved performance	Director of Service Development	VH (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	H (3 x 4)

# Aligned Directorate Risk Summary

# Appendix 1b

Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
8	Improve performance	SDD004	Continuous Improvement Culture	There is a risk that the Directorates ability to promote, enhance and mainstream an organisational culture of continual development and improvement is impacted due to a lack of resources, skills or knowledge contributing to an inability to influence culture and promote development and positive change.	Head of Portfolio	16 (4 x 4)	CC	SMB
8	Improve performance	SDD001	Delivery of Directorate Commitments	There is a risk that the Directorate is unable to deliver against stated commitments and ambitions, due to limited resources and capacity at a time where the Directorate is still developing and maturing and responding to concurrent events, and in light of the constraints brought about by the strategic resource spending review. This could result in a lack of clarity and direction for Directorate members impeding the Directorates ability to work effectively and efficiently impacting on the support and delivery performance as a Directorate across the wider SFRS	Director of Service Development	15 (5 x 3)	CC	SMB
7	Financial Sustainability	SDD005	Additional Funding	There is a risk that Scottish Government funding for ESMCP will not be forthcoming resulting in the service being unable to resource the ESN implementation project and deliver this key area of change within the required timescales.	Head of ICT	15 (3 x 5)	CC	DB

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Strategic Risk ID	Strategic Risk	Directorate Risk	Risk Name	Summary	Risk Owner	Risk Rating (PxI)	Committee	Executive Board
8	Improve performance	SDD009	Delivery of Strategic Change	There is a risk of the Directorate being unable to embed Strategic Change capabilities across the SFRS as a result of organisational constraints that limit critical resource capacity and capability both within the Portfolio Office and across SFRS functions, which includes the necessity to further develop and build the skills and competencies that are required of a Strategic Change function. This could result in a number of consequences for SFRS which would include our ability to deliver change on time and within budget and to quality standards	Head of Portfolio	15 (5 x 3)	CC	SMB



# 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
8	SDD004	Continuous Improvement Culture	Consideration should be given to the development of a Service Improvement Framework and Self-Assessment to ensure the systematic approach to continuous improvement which demonstrates the commitment to continuous improvement across the service	Head of Portfolio	Sep-23	Green - 75 %	SFRS Maturity Assessment drafted and will inform the SFRS continuous improvement strategy 22-25 which is currently under development. In addition, a new Self-Assessment framework (EFQM) is now currently progressing through a Test of Change that will allow the SFRS to independently apply continuous improvement methods and measures into their BAU activities	16 (4 x 4)	8 (2 x 4)	CC	SMB
8	SDD001	Delivery of Directorate Commitments	Development of business cases, recruitment and implementation of posts to allow the population of proposed Directorate Structure in line with organisational need	Head of Portfolio / ICT / SD	Sep-23	Green - 70 %	Business Cases for ICT and SDMP have been completed. Portfolio Office Business Case Target operating model approved in principle with required funding to be identified. The estimated completion date has changed due to many factors within this timeline, all of which have impacted workloads and staff capacity. The Directorate has had a change of Director, an introduction of a HoF Portfolio Office role, a lack of skill levels available to create Business Cases and Models, a lengthy recruitment process, which has since improved and a financial market, which we are not in a position to compete with.	15 (5 x 3)	15 (3 x 5)	CC	SMB

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SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (PxI)	Target Rating (PxI)	Committee	Executive Board
7	SDD005	Additional Funding	Ongoing engagement with Scottish Government	Head of ICT	Mar-24	Green - 0 %	This will continue throughout 2023/24 until further information is received from SG. Funding for Data First interim solution expected to be confirmed by end June 2023. Recent years' funding has been agreed and provided by SG showing their commitment to funding the programme in full to date. Following an independent review by Intelligens SG have confirmed their support for continuing with the Programme. There are no controls in this risk past their completion date, the date changes each year as it is an ongoing action.	15 (3 x 5)	8 (2 x 4)	CC	DB
8	SDD009	Delivery of Strategic Change	Development of business cases, recruitment and implementation of posts, Partnership working across the service and continued professional development (CPD) of Strategic Change related roles will be essential in the mitigation of this risk	Head of Portfolio	Sep-23	Amber - 25 %	Business Cases for ICT and SDMP have been completed. Portfolio Office Business Case Target operating model approved in principle with required funding to be identified.	15 (5 x 3)	6 (3 x 2)	CC	SMB

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SR ID	Risk ID	Risk	Action Description	Owner	Est Date	Status	Control Comments	Risk Rating (PxI)	Target Rating (PxI)	Committee	Executive Board
8	SDD001	Delivery of Directorate Commitments	Development of market allowance business cases, recruitment and implementation of posts to improve the recruitment to vacant posts and ensure retention of existing ICT staff.	Head of ICT	Sep-23	Green - 75 %	Market Allowance process completed successfully. Recruitment to vacant posts restarted subject to potential operating model changes and SLT approval.	15 (5 x 3)	15 (3 x 5)	CC	SMB

# Directorate Closed Control Summary

# Appendix 1d

Control Description	Risk ID	Risk Name	Risk Description	Control Comments	Control Owner	Committee	Executive Board
Implement the recommendations from the internal communications review.	SPPC002	Communicate with Stakeholders	There is a risk that communication and engagement plans are not in place to support consultation processes because of a lack planning or consistency of approach resulting in unsupported and poorly defined strategy and change activity	Web and iHub review are ongoing with proposals for redevelopment to be completed by end March 2022. Risk closed and merged with SPPC007.	Head of Communication and Engagement	CC	GGB
Implement SFRS Communications and Engagement Strategy for 2021-23.	SPPC002	Communicate with Stakeholders	There is a risk that communication and engagement plans are not in place to support consultation processes because of a lack planning or consistency of approach resulting in unsupported and poorly defined strategy and change activity	Delivery of objectives contained within the Corporate Communications Workplan. Risk closed and merged with SPPC007.	Head of Communication and Engagement	CC	GGB

# 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
SPPC002	Communicate with Stakeholders	There is a risk that communication and engagement plans are not in place to support consultation processes because of a lack planning or consistency of approach resulting in unsupported and poorly defined strategy and change activity	8	Communicate with Stakeholders	Risk merged with SPPC007.	Head of Communication and Engagement	CC	GGB

# Directorate Risk Rating Change Summary

# Appendix 1f

Risk ID	Parent Risk	Risk Name	Risk Description	Risk Owner	Change Reason	Current Risk Rating (Px)	Change Type	Committee	Executive Board
SDD001	Improve performance	Delivery of Directorate Commitments	There is a risk that the Directorate is unable to deliver against stated commitments and ambitions, due to limited resources and capacity at a time where the Directorate is still developing and maturing and responding to concurrent events, and in light of the constraints brought about by the strategic resource spending review. This could result in a lack of clarity and direction for Directorate members impeding the Directorates ability to work effectively and efficiently impacting on the support and delivery performance as a Directorate across the wider SFRS	Director of Service Development	Impact reduced from 4 to 3 aligned to guidance and actual impact.  Wording Update	15 (5 x 3)	Decreased Risk	CC	SMB

## CHANGE COMMITTEE ROLLING FORWARD PLAN

Agenda Item 10.1

	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
20 September 2023 (Additional)	•		<u>Standing/Regular Reports</u> <b>General Reports</b> <ul style="list-style-type: none"> <li>New Mobilising System (Written update - PRIVATE)</li> <li>CCF Lessons Learned</li> </ul>		
9 NOVEMBER 2023	<ul style="list-style-type: none"> <li>Chair's Welcome</li> <li>Apologies</li> <li>Consideration of and Decision on any Items to be taken in Private</li> <li>Declaration of Interests</li> <li>Minutes of Previous Meeting</li> <li>Action Log</li> <li>Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>Review of Actions</li> <li>Date of Next Meeting</li> </ul>	<u>Standing/Regular Reports</u> <b>General Reports</b> <ul style="list-style-type: none"> <li></li> </ul> <u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>	<u>Standing/Regular Reports</u> <b>Projects</b> <ul style="list-style-type: none"> <li>PO Project Dashboard</li> </ul> <b>General Reports</b> <ul style="list-style-type: none"> <li>PO Progress Update</li> <li>New Mobilising System (Written update - PRIVATE)</li> <li>PO Risk Report</li> <li>Strategic Risk Summary and Committee Aligned Directorate Risks</li> <li>Finance Report – Change Portfolio (Private)</li> </ul> <u>New Business</u> <ul style="list-style-type: none"> <li>On Call Programme Closing Report</li> </ul>	<u>Standing/Regular Reports</u> <b>Change Portfolio/ Major Projects</b> <ul style="list-style-type: none"> <li></li> </ul> <b>General Reports</b> <ul style="list-style-type: none"> <li></li> </ul> <u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>	<u>Standing/Regular Reports</u> <b>Change Portfolio/ Major Projects</b> <ul style="list-style-type: none"> <li></li> </ul> <b>General Reports</b> <ul style="list-style-type: none"> <li></li> </ul> <u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>
20 December 2023 (Additional)	•		<u>Standing/Regular Reports</u> <b>General Reports</b> <ul style="list-style-type: none"> <li>New Mobilising System (Written update - PRIVATE)</li> <li>CCF Lessons Learned</li> </ul>		

## CHANGE COMMITTEE ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
15 FEBRUARY 2024	<ul style="list-style-type: none"> <li>Chair's Welcome</li> <li>Apologies</li> <li>Consideration of and Decision on any Items to be taken in Private</li> <li>Declaration of Interests</li> <li>Minutes of Previous Meeting</li> <li>Action Log</li> <li>Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>Review of Actions</li> <li>Date of Next Meeting</li> </ul>	<p><b><u>Standing/Regular Reports</u></b> <b>General Reports</b></p> <ul style="list-style-type: none"> <li></li> </ul> <p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><b><u>Standing/Regular Reports</u></b> <b>Projects</b></p> <ul style="list-style-type: none"> <li>PO Project Dashboard</li> </ul> <p><b>General Reports</b></p> <ul style="list-style-type: none"> <li>PO Progress Update</li> <li>New Mobilising System (Written update - PRIVATE)</li> <li>PO Risk Report</li> <li>Strategic Risk Summary and Committee Aligned Directorate Risks</li> <li>Finance Report – Change Portfolio (Private)</li> <li></li> </ul> <p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><b><u>Standing/Regular Reports</u></b> <b>Change Portfolio/ Major Projects</b></p> <ul style="list-style-type: none"> <li></li> </ul> <p><b>General Reports</b></p> <ul style="list-style-type: none"> <li></li> </ul> <p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><b><u>Standing/Regular Reports</u></b> <b>Change Portfolio/ Major Projects</b></p> <ul style="list-style-type: none"> <li></li> </ul> <p><b>General Reports</b></p> <ul style="list-style-type: none"> <li></li> </ul> <p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>
21 March 2024 (Additional)	<ul style="list-style-type: none"> <li></li> </ul>		<p><b><u>Standing/Regular Reports</u></b> <b>General Reports</b></p> <ul style="list-style-type: none"> <li>New Mobilising System (Written update - PRIVATE)</li> <li>CCF Lesson Learned</li> </ul>		