

#### **PUBLIC MEETING - CHANGE COMMITTEE**

#### **THURSDAY 15 FEBRUARY 2024 @ 0930 HRS**

# MEETING ROOM 1, EAST SERVICE DELIVERY AREA HEADQUARTERS, 28 CLAYLANDS ROAD, NEWBRIDGE, EH28 8LF / VIRTUAL (MS TEAMS)

- 1 CHAIR'S WELCOME
- 2 APOLOGIES FOR ABSENCE
- 3 CONSIDERATION OF AND DECISION ON ANY ITEMS TO BE TAKEN IN PRIVATE
- 4 DECLARATION OF INTERESTS

Members should declare any financial and non-financial interest they have in the items of business for consideration, identifying the relevant agenda item, and the nature of their interest.

5 MINUTES OF PREVIOUS MEETING: 9 NOVEMBER 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 Project Highlights Report (attached)
- 7.2 New Website KPI Benefits Initial Findings (attached)

G Buchanan N McGrath

The Committee is asked to scrutinise this report.

#### **8 GENERAL REPORTS**

8.1 Audit and Inspection Action Plan update (CCMS) (attached)

D Lockhart

The Committee is asked to scrutinise these reports.

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

#### 9 RISK

9.1 Portfolio Office Risk Report (attached)

9.2 Committee Aligned Directorate Risks (attached)

G Buchanan C Montgomery/

D Johnston

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

The next Special private meeting is scheduled to be held on Monday 18 March 2024. The next full public Committee meeting is scheduled to be held on Thursday 2 May 2024.

#### **PRIVATE SESSION**

#### 13 MINUTES OF PREVIOUS PRIVATE MEETING:

F Thorburn

- 13.1 Thursday 9 November 2023 (attached)
- 13.2 Monday 22 January 2024 Special (to follow)

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 FINANCIAL REPORTING - CHANGE PORTFOLIO (to follow)

S O'Donnell

The Committee is asked to scrutinise the report.

# 16 PORTFOLIO OFFICE PROGRESS UPDATE (to follow)

C Montgomery

The Committee is asked to scrutinise the report.

#### 17 ORGANISATIONAL CAPACITY AND CAPABILITY (to follow)

C Montgomery

The Committee is asked to scrutinise the report.

#### 18 PEOPLE, PAYROLL, FINANCE AND TRAINING (attached)

L Gaja/ P McGovern/

The Committee is asked to scrutinise the report.

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

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# 19 **ROSTERING PROJECT UPDATE** (attached) S Wood The Committee is asked to scrutinise the report. 20 **NEW MOBILISING SYSTEM PERIODIC UPDATE** (attached) D Lockhart/ D Wilson The Committee is asked to scrutinise the report. 21 **DIGITAL ASSURANCE OFFICE GATEWAY 3 REVIEW OPTIONS** D Lockhart/ D Wilson (attached) The Committee is asked to scrutinise the report. 22 **STRATEGIC SERVICE REVIEW PROGRAMME** (presentation) S Stevens The Committee is asked to scrutinise the verbal report. F Thorburn 23 **HOT DEBRIEF** (verbal)

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Agenda Item 5



#### **PUBLIC MEETING - CHANGE COMMITTEE**

#### THURSDAY 9 NOVEMBER 2023 @ 1000 HRS

MEETING ROOM 1, EAST SERVICE DELIVERY AREA HEADQUARTERS, 21 CLAYLANDS ROAD, NEWBRIDGE, EH28 8LF / VIRTUAL (MS TEAMS)

PRESENT:

Fiona Thorburn, Chair (FT)

Stuart Ballingall (SJB)

Brian Baverstock, Deputy Chair (BB)

Angiolina Foster (AF)

IN ATTENDANCE:

Stuart Stevens (SS) Deputy Chief Officer

David Lockhart (DL)

Assistant Chief Officer, Director of Service Development

Liz Barnes (LB) Interim Deputy Chief Officer, Corporate Services

Curtis Montgomery (CM) Head of Portfolio Office Ross Robison (RR) Portfolio Manager

Sarah O'Donnell (SO'D) Director of Finance and Contractual Services

John Thomson (JT) Head of Finance and Procurement

David Farries (DF)

Assistant Chief Officer, Director of Service Delivery

Cathy Barlow (CB)

Deputy Head of Prevention and Protection (Item 7.3 only)

Paul McGovern (PMcG) Programme Manager (Item 16 only)

Derek Wilson (DW) Area Commander, Service Development (Item 17 & 18 only)

Clare Adams (CA) Senior Project Manager (Item 17 & 18 only)
lain Ivory (II) Actica Consultants (Item 17 & 18 only)

Tim Wright (TW) Board Member

Heather Martin (HM) Change Centre of Excellence Manager Kevin Murphy (KM) Group Commander, Board Support Manager

Heather Greig (HG)

Board Support Executive Officer

Debbie Haddow (DH) Board Support/Minutes

#### **OBSERVERS**

Joan Nilsen Portfolio Office Siobhan Hynes Portfolio Office

Douglas Balfour Emergency Service Network

### 1 WELCOME

- 1.1 The Chair opened the meeting, welcoming Heather Martin to her first meeting and 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

2.1 None.

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

3.1 The Committee agreed that the *Programme Project Highlight Report* (Item 15), *Financial Reports – Change Portfolio* (Item 16), *New Mobilising System Periodic Update* (Item 17), *New Mobilising System: Invitation to Tender* (Item 18) and *Risk Spotlight: Organisational Capacity and Capability* (Item 19), 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: 10 AUGUST 2023

- 5.1 The minutes of the previous meeting were agreed as an accurate record.
- 5.1.1 The Committee were advised that an update on the development of the capacity management tool would be discussed under the Risk Spotlight (Item 19) in the private session.
- 5.1.2 The minutes of the meeting held on 10 August 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
- The Change Committee Rolling Action Log was considered, and actions were agreed and removed.
- 6.2 <u>Action: 7.3.3 Safe and Well Project Update (10/08/2023)</u>: Further clarification to be provided by CB on the revised wording within the revisit section and what onus was being placed on the householders. It was noted that the update position statement stated that householders would be contacted in the first instance. Action to be reopened.
- 6.3 The Committee noted the Action Log.

# 7 CHANGE PORTFOLIO/MAJOR PROJECTS

- 7.1 **Programme Project Highlights Report**
- 7.1.1 RR presented the Programme Project Highlights 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. The following key points were highlighted:
  - New Mobilising System (NMS): Amber for Time, Costs and Skills/Resources.
  - Service Delivery Model Programme (SDMP) Both Demand Based Duty System (DBDS) and Station and Appliance Review (SAR): Amber for Skills/Resources.
  - Emergency Services Mobile Communications Programme (ESMCP): Amber for Skills/Resources.
  - People, Payroll, Finance and Training (PPFT) and Rostering updates to be provided in private session due to financial elements.
- 7.1.2 The Committee requested what mitigating actions were in place for the areas reporting Amber. RR informed the Committee that external funding had been secured for ESMCP. JT advised that the full external funding would be split between Scottish Government and the Home Office. The Committee noted and welcomed this update.

7.1.3

In regard to the SDMP Senior GIS Delivery Partner (SWECO), DL confirmed that this work had been completed and the RAG status would be updated to Green.

7.1.4 The Committee scrutinised the report.

(D Farries joined the meeting at 1010 hrs)

#### 7.2 On Call Programme Closing Report

- 7.2.1 DF presented the Committee with the project closing report and the following key points were highlighted:
  - Programme concluded in June 2023.
  - No real costs were associated with the project, primarily due to existing staff undertaking additional duties and the dedicated resource of the On Call Support Team.
  - Project resulted in 43 recommendations being made to the Strategic Leadership Team (SLT), Change Portfolio Progress Group (CPPG) and Change Portfolio Investment Group (CPIG).
- 7.2.2 The Committee noted that the lessons learned were both helpful and consistent with those previously identified.
- 7.2.3 SS reminded the Committee that work would continue and the recommendations would be incorporated into the SSRP work to support future ambitions. DF noted that there were 3 categories of recommendations, those that were delivered, being piloted, and moving forward. Of those moving forward, these have been split into Business as Usual (BaU) activities with some elements being progressed by the On Call Support Team. It was noted that some internal directorate restructuring would be necessary to ensure the retention of the On Call Support Team and that this would be undertaken within the existing financial budgets. Other larger elements, those impacting on terms and conditions, systems etc would be progressed through the SSRP work.
- 7.2.4 In regard to tracking and maintaining visibility on recommendations, the Committee queried whether this would be captured through the current process already in place for HMFSI reports/recommendations. JT offered his view that it was appropriate to be progressed through BaU and would not propose a similar approach such as a tracker. The Committee commented on the importance of these recommendations and the potential future strategic changes which will impact on same. SS reiterated that the BaU element would lie with the Service Delivery Directorate with the remainder being progressed through SSRP work, however thought could be given to how any progress was captured. The Committee requested clarity on how the programme recommendations would be tracked going forward now that they were moving into BaU.

**ACTION: SS/DF** 

- 7.2.5 CM noted that regular reporting would continue to be provided through the SSRP highlight report.
- 7.2.6 The Committee scrutinised the report.

(C Barlow joined the meeting at 1025 hrs)

#### 7.3 Safe & Well Project Update

- 7.3.1 CB provided a verbal update to the Committee to provide an overview of progress to date, benefits and options for the implementation of Safe and Well (S&W). The following key points were highlighted:
  - Decision by CPIG to progress to a revised HFSV and the project would be formally closed.
  - Closing report to be brought to the next Change Committee meeting.

- Implementation Phase would be delivered through BaU by the Prevention and Protection Function. Implementation Board established and all associated governance arrangements were in place.
- Future updates would be submitted to the Service Delivery Committee.
- 7.3.2 The Committee noted the governance arrangements and future reporting to the Service Delivery Committee.
- 7.3.3 As per earlier discussions, the Committee sought clarification on the referral process and the onus being placed on the householders. The Committee noted their concerns for vulnerable individuals potentially not responding. CB reminded the Committee of the current process. CB explained the new method which would establish a preferred contact method with the individual ie text, letter etc and when the revisit is due the identified preferred method would be used. CB noted that should individuals' circumstances change, then they do not have to wait for a year but can request a further visit at any time. This was particularly stressed to partner referrals organisations.
- 7.3.4 Revisits are currently offered to high risk individuals however moving forward, everybody would be offered a revisit as the Service tries to change the risk profile and be more targeted in the visits carried out.
- 7.3.5 In order to gain a fuller understanding, the Committee noted that the provision of percentages relating to the uptake on the offer of revisits would be helpful. CB advised that it was difficult to capture this information within the current systems and that the new system would be able to provide this information. Evaluation to be undertaken on the percentage of revisits not able to be completed and the rationale for this.

**ACTION: CB/DF** 

7.3.6 The Committee asked whether social housing landlords were advised if tenants do not respond to the offer of a revisit. CB to provide further information on the process of partner referrals ie are partners notified if no response from individuals and where does the responsibility/risk lie.

ACTION: CB/DF

- 7.3.7 The Committee commented on an evaluation of HFSV and incidents occurring at the same premises. CB indicated that this data may be available and would work with data services to identify its value.
- 7.3.8 The Committee noted the verbal report.

(C Barlow and D Farries left the meeting at 1040 hrs)

#### 8 GENERAL REPORTS

#### 8.1 **Portfolio Progress Update**

- 8.1.1 CM provided a verbal update on the Portfolio Progress to the Committee noting the following key points:
  - New format of report was currently progressing through internal governance and would be presented at the next Committee meeting.
  - Future reports would concentrate on 3 KPIs developed and reported through the dashboard. These related to project time, cost and accumulative benefits.
  - Future report would also report on Portfolio Office (PO) target operating model and 3 PO objectives.
  - Development of health check process which had been piloted with the PPFT project.
  - Looking at stage gate assurance as part of change life cycle and would be piloted on the Rostering project. This would provide a link into assurance activities carried out by the new design authority.

- Next meeting of the Change Community of Practice was scheduled for November 2023. Email previously circulated to the Committee on the themes discussed at previous meetings and future development of capabilities across the organisation.
- Developing annual planning process to look at all change holistically across the organisation.
- Consideration being given to merge the CPIG and CPPG.
- Update on ongoing recruitment for SSRP Programme Manager, Business Architecture Analyst and Continuous Service Improvement Manager, NMS Senior Project Manager and Senior Business Analyst roles. Overall positive position and good engagement with agencies and direct applications.
- In relation to SSRP, developing approach to workshops, some roles to develop the strategic blueprint for the future of the Service. Outline Business Case being developed for securing dedicated resources for this programme.
- 8.1.2 In regard to career development/professional qualifications, CM advised that this had been discussed including the intention for the future. CM noted the use of Prince2 previously and that different methods of managing projects that have more agile delivery methods were being considered. CM outlined his ambitions for career development within the organisation.
- 8.1.3 The Committee recognised the progress made in the last 18 months and suggested it may no longer be appropriate to discuss PO progress as the Service has moved onto the next stage. CM advised that the new format of report would be more data focussed, focussing on embedding capabilities and effectiveness of outcomes from projects. CM noted that issues remained around resourcing issues on key capabilities within the team. CM noted and would consider the comments made.
- 8.1.4 The Committee noted the verbal report.

#### 9 RISK

#### 9.1.1 Portfolio Office Risk Report

RR presented the Committee with an overview of the identified risks that could impact on the various programmes of work being monitored by the PO. The following key points were highlighted:

- Total of 8 risks were recorded with risk rating of 15 or above and related to NMS and PPFT.
- Risks relating to the Safe and Well implementation project have been transferred to BaU implementation project.
- Two risks were removed due to reduction in risk rating (under 15). These related to NMS and SDMP.
- 9.1.2 In regard to Risk NMS023 (design authority) and NMS003 (procurement resources), the Committee sought clarity on whether these issues had been addressed. DL advised that procurement issues had been addressed, however this was not reflected in the paper due to a timing issue in the production of the documents. DL further advised that work in relation to the design authority was ongoing, risks identified, and a mitigation plan was in place. This included the onboarding of the preferred supplier and the work that will be set out with the technical design authority that we will ask them to provide, and how we engage with our own design authority.
- 9.1.3 Brief discussion took place regarding the design authority, technical design authority and interfacing/integration into the NMS and existing systems.
- 9.1.4 The Committee scrutinised the report.

## 9.2 Committee Aligned Directorate Risks

9.2.1

CM presented the Aligned Directorate Risks report to the Committee to provide an outline of the identified Directorate risks and controls. The following key points were highlighted:

- Risk SDD001 (inability to deliver against stated commitments and ambitions, due to limited resources and capacity) risk rating has reduced from 15 to 9.
- Risk SDD004 (continual development and improvement, due to resources etc) risk rating reduced from 16 to 6.
- Risk SDD005 (ESMCP funding) risk rating reduced from 15 to 10.

9.2.2

In regard to differing risk criteria between project and service risks, further information/discussions on the nuance to be taken at the Audit and Risk Assurance Committee.

**ACTION: CM** 

9.2.3

The Committee scrutinised the report.

#### 10 COMMITTEE ROLLING FORWARD PLAN

- 10.1 Committee Forward Plan
- 10.1.1 The Committee noted the Forward Plan and the following additions/revisions:
  - Demonstration of new HFSV system (including worked example and an analysis of data linked to incident location and HFSVs)

#### 10.2 <u>Items for consideration at Future IGF, Board and Strategy Day Meetings</u>

- 10.2.1 The following item(s) were identified for the Integrated Governance Forum:
  - Home Fire Safety Visits including effectiveness (cross over with Service Delivery Committee)
- 10.3 The Committee noted the Forward Plan.

#### 11 REVIEW OF ACTIONS

11.1 KM confirmed that 4 formal actions were recorded during the meeting.

#### 12 DATE OF NEXT MEETING

- 12.1 A special private meeting was scheduled for Wednesday 20 December 2023.
- 12.2. The next full meeting is scheduled to take place on Thursday 15 February 2024.
- 12.3 There being no further matters to discuss, the public meeting closed at 1115 hrs.

## PRIVATE SESSION

#### 13 MINUTES OF PREVIOUS PRIVATE MEETINGS:

- 13.1 **Thursday 10 August 2023**
- 13.1.1 The minutes of the meeting held on 10 August 2023 were approved as a true record of the meeting.
- 13.2 Wednesday 20 September 2023
- 13.2.1 The minutes of the meeting held on 20 September 2023 were approved as a true record of the meeting.
- 13.3 The minutes of the private meetings held on 10 August 2023 and 20 September 2023 (Special) were approved as a true record of the meetings.

#### 14 PRIVATE ACTION LOG

- 14.1 The Change Committee Rolling Action Log was considered and actions were agreed and removed or re-opened as appropriate.
- 14.2 The Committee noted the Private Action Log.

(P McGovern joined the meeting at 1150 hrs)

#### 15 PROGRAMME PROJECT HIGHLIGHTS REPORTS

- 15.1 RR presented the Programme Project Highlights Report to the Committee which provided a wider overview of the identified risks, interdependencies, costs and capacity to deliver. PMcG provided an update on the PPFT and Rostering projects.
- 15.2 The Committee scrutinised the report.

(P McGovern left the meeting at 1215 hrs)

#### 16 FINANCIAL REPORTING – CHANGE PORTFOLIO

- 16.1 JT presented a report to the Committee providing an overview of the financial spend and forecast of Programme and Projects within the Change Portfolio, as of September 2023.
- 16.2 The Committee scrutinised the report.
- 19 RISK SPOTLIGHT: ORGANISATIONAL CAPACITY AND CAPABILITY
- 19.1 CM gave a presentation to the Committee on organisational capacity and capability.
- 19.2 The Committee noted the presentation.

(The meeting broke at 1245 hrs and reconvened at 1315 hrs) (D Wilson and Iain Ivory joined the meeting at 1315 hrs)

#### 17 NEW MOBILISING SYSTEM PROJECT UPDATE

- 17.1 DL presented the report to the Committee providing an overview of New Mobilising System (NMS) Project delivery and progress to date, and the next steps for scrutiny.
- 17.2 The Committee scrutinised the report.
- 18 NEW MOBILISING SYSTEM: INVITATION TO TENDER DOCUMENTATION
- 18.1 DL introduced Iain Ivory, Technical Advisor (Actica) to the Committee and presented the report to the Committee providing the New Mobilising System (NMS) Invitation to Tender (ITT) documentation for scrutiny.
- 18.2 The Committee confirmed that they had sought and received assurances on the process of developing the ITT and the associated route to market. As Chair of the Committee, FT would provide an update at the Special Board meeting (23 November 2023) to this effect.
- 18.3 The Committee scrutinised the report.



# 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 7 actions. A total of 4 of these actions has been completed.

The Committee is therefore asked to approve the removal of the 4 actions noted as completed (Blue status), note 3 actions categorised as Green status and note no action categorised as Yellow status on the action log.

# CHANGE COMMITTEE ROLLING ACTION LOG

	ee Meeting: 10 August 2023								
Agenda Item	Actions Arising	Lead	Due Date	RAG Status	Completion Date	Position Statement			
7.3.3	Safe & Well Project Update: Review wording within the Re-Visit section of the comparison table.	СВ	November 2023		February 2024 November 2023	High-risk visits will populate automatically after 12 months onto the due list for station personnel to manage. A revisit attempt must include 3 phone calls and one letter. In addition, addresses selected as additional risk will also repopulate for a revisit  Revisit  Revisit  High-risk visits will be wouseholder who still meets the criteria after a visit will be sent a notification one-year after their visit. The onus is on them to make contact or self-refer through the portal to arrange another visit. This is similar to other agencies' / organisations' processes to make arrangements for an appointment. The revised process means householders can be contacted in			

				different ways
				(email, text or letter), and
				releases
				capacity for
				staff to
				support CSE activities.
				Householders
				and referring
				partners are
				advised a re-
				visit can be
				arranged any time
				circumstance
				s have
				changed
				which may increase risk
				of fire.
			REOPE	<b>NED</b> (09/11/2023): Further
				tion to be provided on the
				wording within the revisit
				and what onus being be
				on the householders.
			J	
			COMPL	.ETE (15/02/2024):
			The onu	is remains with the
			househo	older to agree to a revisit;
			howeve	r, communications would be
				he householder via their
				method of contact.
				that will be provided when a
			revisit it	due -
			LETTER	/ Email
			Dear occ	cupier
			Please i	note that this email has been
			sent fro	m a "no reply" email

	address
	It has been a year since you received a
	Home Fire Safety Visit (HFSV) visit
	from the Scottish Fire and Rescue
	Service.
	You are now eligible to receive your
	annual revisit where SFRS will provide
	you with information and guidance
	personalised to help you stay safe in
	your home. If you would like to book
	your revisit please visit
	www.firescotland.gov.uk or phone 0800 0731 999.
	Alternatively, you can take part in our
	self-assessment online safety checker
	https://www.firescotland.gov.uk/your-
	safety/at-home/home-fire-safety-
	<u>visit/online-hfsv-checker</u> or visit our
	website for a range of safety
	information and advice.
	Regards
	HFSV Administrators
	SFRS.HFSVadministrators@firescotland
	<u>.go</u>
	TEXT
	If you would like to book a Home Fire
	Safety revisit from Scottish Fire and
	Rescue please visit
	www.firescotland.gov.uk or phone
	0800 0731 999

8.1.2	Portfolio Office Progress Update: Provide a revised monitoring report that tracks portfolio office progress to the committee, to also include information on how its use is embedded with nonspecialist colleagues.	СМ	November 2023		Updated (09/11/2023): Interim report Portfolio Office progress highlights:  New format Portfolio Office Report for Change Committee in development and will include Portfolio KPIs (Time, Cost, Cumulative Benefits), Portfolio Office ToM, and Objectives.  Health Check process is being piloted with People, Payroll, Finance and Training (PPFT).  Stage Gate Assurance process to be piloted with the Rostering project early November and assured through Design Authority.  Third meeting of SFRS Change Community of Practice scheduled for November.  Work underway on new annual planning process that covers the demand process/pipeline, prioritisation and complexity model.  Review of CPIG and CPPG Portfolio Governance meetings underway – single CPGG meeting likely outcome.  Ongoing recruitment for a number of roles including SSR Programme Manager; Business Architecture, Analysis and CSI Manager; NMS Senior Project Manager, Project Manager and
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				Senior Business Analyst.  • Service Review Programme vison and blueprint approach being developed. Resourcing OBC and programme plan also in development.  Update (15/02/2024): New format Portfolio Office Report provided, detailing progress against the key capabilities and roles within the department.
9.3.4	Risk Spotlight: Further discussion was required to discuss how the Service as a whole actively manages risks, and how the Committee gains assurance and how concurrent risks are considered.	FT/JT	November 2023	Updated (09/11/2023): The Service has revised the approach to risk management and service wide risks are captured using power BI technology and includes mitigating actions. This new tool will be presented to the Change Committee and will provide awareness of risks impacting the Service and highlight the most significant risks impacting the Service. The tool will be helpful for the Change Committee to gain assurance. Update (15/02/2024): Aligned to the review and approach to risk management, a Change Committee risk report has been developed and is included in the Committee papers.

Committ	ee Meeting: 9 November 2023					
Agenda Item	Actions Arising	Lead	Due Date	RAG Status	Completion Date	Position Statement
7.2.4	On Call Programme Closing Report: Committee request clarity on how the programme recommendations would be tracked going forward, now that they are moving into business as usual.	SS/DF	February 2024		February 2024	Complete (15/02/2024): Recommendations will be tracked through the On Call Strategic Group (OCSG) which feeds into the SSRP Service Delivery Workstream. As such SSRP has oversight of On Call improvements.
7.3.5	Safe and Well Update Evaluation to be undertaken on the percentage of re-visits not able to be completed and the rationale for this.	DF/CB	February 2024		February 2024	Complete (15/02/2024): After investigation with the team, it is not possible to extract this information from the current HFSV management system (CSET). For clarity, rather than visits not being able to complete, it would be re-visits declined. There are many reasons why a revisit may not be taken up by the householder, which includes no longer being at that address, or feeling another visit is not required due to feeling they have adequate detection and have taken on the safety advice delivered at the initial visit. Householders and referring partners are advised a HFSV can be arranged any time circumstances have changed which may increase risk of fire. This may be before the 12-month

					revisit period, or any time after, even if a re-visit has not been taken up.
7.3.6	Safe and Well Update Provide further information on the process of partner referrals, are partners notified if no response from individuals and where does the responsibility/risk lie.	DF/CB	February 2024	February 2024	Complete (15/02/2024): We do not have the lawful basis to share information with partners in this manner. Contact for revisits is between SFRS and the data subject (occupier).  A partner agency cannot consent to a re-visit on behalf of a service user and very often the partner agency individual assigned to the occupier changes. Therefore, contacting a partner regarding a re-visit may result in no response or delay in actioning the re-visit.  The personal data held by SFRS is our responsibility and collected to enable us to communicate with the occupier (or occupiers' representative as stated on the referral form). The DSF/lawful basis (GDPR) does not allow us to share that personal data.
9.2.2	Committee Aligned Directorate Risks In regard to differing risk criteria between project and service risks, further information/ discussions on the nuance to be taken at the Audit and Risk Assurance Committee	СМ	February 2024		Update (15/02/2024): Portfolio Office are now a stand alone function reporting directly to the Interim Deputy Chief Officer for Corporate Services. A meeting is scheduled with the Risk & Audit Manager to discuss an approach to the Portfolio Management risk report.

# SCOTTISH FIRE AND RESCUE SERVICE

# **Change Committee**



Report No: C/CC/02-24

				Ag	enda l	tem:	7.1				
Report t	ю:	CHANGE COMMITTEE									
Meeting	Date:	15 FEBRUARY 2024 (DA	TA AS	OF: 10	) JAN	JARY :	2024)				
Report 1	Γitle:	PROGRAMME PROJECT HIGHLIGHTS COVER PAPER									
Report 0	Classification:	For Scrutiny	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9								
			<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	G		
1	Purpose										
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.										
2	Background										
2.1	The Portfolio Office (PO) will update the CC with available information associated with this programme during the reporting period.										
3	Main Report/De	etail									
3.1 3.1.1	Interdependencies The capacity from the Training, Safety and Assurance, ICT across various projects remains an interdependency.										
3.1.2	Service Delivery Projects.	y Model Programme (SDN	MP) clo	se inv	olveme	ent wit	h vario	ous Po	ortfolio		
3.1.3		ependencies and interdepe , Rostering, SDMP, Emero									
3.2 3.2.1	allocation will be appropriate leve	iver engagement along with core essential to ensure Scotti I of capacity to deliver all ma Capacity Planning capabilit	sh Fire ajor cha	and R	lescue ojects.	Service The Po	e (SFF ortfolio	RS) hav Function	ve the		
3.2.2	Potential impact	on retirements due to Pens	ion up	date.							
3.3 3.3.1	New Mobilising Amber for Time from potential so date of contract will be confirmed	nance showing Red or Am System showing Amber for based upon detail contain uppliers. December 2025 s award. Amber for Costs based of fully within tender respons cessful recruitment and app	or Time ed with hould l sed upo ses), ar	nin the be ach on cost nd Amb	high-le ievable envelo er for	evel im but is pes pr Skills &	plemers depersovided Reso	ntation ndent of by sup urces o	on the opliers		

3.3.2	<b>Emergency Services Network</b> showing Amber for Time and Skills & Resources – due to recruitment of staff - vehicle fitters.
3.3.3	<b>iHub_Web</b> showing Amber for Time and Skills & Resources – due to availability of ICT support to implement Nintex workflows.
3.3.4	<b>PPFT</b> showing Amber for Time and Skills & Resources – due to the OBC not being signed off at the end of August as anticipated, this was due to the potential of collaboration with Police Scotland or Scottish Government.
4	Recommendation
4.1	The CC is asked to:  a) Note the contents of the current report  b) Consider the risk mitigation actions within the report and provide feedback as necessary.
5	Key Strategic Implications
5.1 5.1.1	Risk Resourcing impact due to potential retirements due to Pension update.
5.0	
5.2 5.2.1	Financial There is no direct finance impact arising from this report
5.3	Environmental & Sustainability
5.3.1	There are no direct key environmental & sustainability implications arising from this report.
5.4 5.4.1	Workforce As detailed in section 3.1
5.5 5.5.1	Health & Safety There are no direct Health and Safety implications associated with this report.
5.6 5.6.1	Health & Wellbeing There are no direct Health and Wellbeing implications associated with this report.
5.7 5.7.1	Training There are no direct Training implications associated with this report.
5.8 5.8.1	Timing As detailed in section 3.1.
5.9	Performance
5.9.1	As detailed in section 3.1
5.10 5.10.1	Communications & Engagement There are no direct key performance implications arising from this report.
5.11 5.11.1	Legal There are no direct key legal implications arising from this report.
5.12 5.12.1	Information Governance A Data Protection Impact Assessment is not required as there is no personal/sensitive information on this cover paper.

5.13	Equalities									
5.13.1	An Equalities II	An Equalities Impact Assessment is not required as there is no personal/sensitive information on this cover paper.								
5.14	Service Deliver	У								
5.14.1	There are no dire	There are no direct key Service Delivery implications arising from this report.								
6	Core Brief	Core Brief								
6.1	Not applicable	Not applicable								
7	Assurance (Box	ard/Com	mittee M	leetings ONLY)						
7.1	Director:		Liz Barn	es, Interim Deputy Cl	nief Officer Corporate Services					
7.2	Level of Assura (Mark as appro		Substantial/Reasonable/Limited/Insufficient							
7.2	Rationale:		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.							
8	Appendices/Fu	rther Re	ading							
8.1	Appendix A: Cor	nbined F	lighlight F	Report						
Prepare	d by:	Joan N	ilsen, Pro	gramme Officer						
Sponso	red by:	Liz Barı	nes, Inter	nes, Interim Deputy Chief Officer Corporate Services						
Present	ed by:	Gillian I	Buchanan, Portfolio Manager							
Links to	Strategy and Co	rporate	Values							
We are f	ully accountable a	nd maxii	mise our p	oublic value by delive	ring a high quality, sustainable					
and resc	ue service for Sco	tland.								
Governa	ance Route for Re	eport		Meeting Date	Report Classification/ Comments					
Change	Committee			15 February 2024	For Scrutiny					



Project Name	New Mobilising System	n (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				Re	evised Project End Date	dd/mm/yyyy	Rev 1
		Proj	ect Update				F	Project Governance	& Mgmt. Control		
Progress in this reporting		ing of ITT document	tation undertaken by S	FRS Procurement to reflec	et the change in route to	Current Period Delivery Trend	<b>→</b>	Business Case	Project Dossier	Risk Register	Project Phase
market. Desk top review c recommendations had bee	arried out by Denis McF en cleared in order for IT	adden, PPG Reviev T to proceed was pr	w Team Member, and I rovided on 11/12 . ITT o	DAO confirmation to SFRS documentation presented to e is w/c 08th January 2024	S that all o and scrutinised by CPIG	Last Period Delivery Trend	<b>→</b>	YES	YES	YES	Planning
work packages to OC staf	ff. Status summary: Stat	tions – 100% compl	elete; Pumps – 90% co	ed stakeholder engagement emplete; Specials – 100% o eorting Criteria – 40% comp	complete; Incident Types		Overall Health	Time	Cost	Quality	Skills & Resource
35% complete; Reference     cancellation of November in	ce Information – 20% co meeting.	mplete. OVERALL	% COMPLETE: 55% S	Specials paper approved at	SD DMT 12/12 due to	Project Performance	A	Α	А	G	А
team resourcing for the Im	plementation/Delivery pl authority, NMS Project T	hase and early draft 「eam and NMS Proj	ting of the principles ar ject Board. This will de	iect team has been working nd roles for each of the Sup fine the interactions and de	oplier Technical Design	Significant Milest	tone Forecast	Progress	Status	Planned	Latest Predicted Date
				as been drafted and reviewe		L1 - NMS Project Commodi	ity Stategy complete	100%	Complete	31/07/2023	20/08/2023
out with Networked Fire S					non engagement camed	L1 - Final draft Outline Busin	ness Case to CPIG	100%	Complete	23/08/2023	23/08/2023
Resourcing - Senior Project Manager, Senior Business Analyst and Project Manager (grade 8) were advertised internally and externally with a parallel quick quote process via agency for Snr PM & Snr BA roles. Successful candidate offered the PM (grade 8) post declined, successful terviews for Snr PM held 06 to 08/12 and for Snr BA 19 to 29/12. Kate Whitelaw has accepted Senior PM role starting mid January (exact date TBC). Process to progress current vacancies for PM (grade 8), Assistant PM (grade 5) and Data Assistant are progressing.  Planned activities for next reporting period  Continue with the business readiness and data workstream activities as per plan  Respond to any supplier clarification questions post publication of ITT  Continue with recultment activities to key posts of PM (grade 8), Assistant PM (grade 5), and Data Assistant  Progress procurement exercise for continued external technical support (Jan/Feb)  Engagement with LFB on 26/01 as part of Peer network around CCMS procurement and implementation					L1 - ITT / Contract Notice P	lublished	75-100%	In Progress	22/09/2023	10/01/2024	
- Engagement with LFB of	120/01 as pair of Feer I		Green / Next Steps	pernentation		L1 - Stations and Pumps - S	Standardisation	100%	Complete	19/10/2023	19/10/2023
SIGNIFICANT MILESTON	NES:					Decision  L1 - Specials - Standardisat	ion Decision	100%	Complete	14/11/2023	12/12/2023
				ed by potential suppliers or contract award. ITT publica		L1 - Incident types & Report Decision	ting - Standardisation	25-50%	In Progress	21/11/2023	24/01/2024
08 Jan 2024 following dela	yed DAO feedback on F	PPG desktop review	v, ITT amendments, ext	ternal Legal contract review with implementation plans	w. Further detail &	L1 - Tender submissions clo	ose	0%	Future Task	21/11/2023	12/03/2024
				ve been used to develop the		L1 - Reference Info & Telep Standardisation Decision	hony Directory -	25-50%	In Progress	15/12/2023	29/02/2024
OBC. The budget has bee submitted.	n based on the cost env	elopes. Additional	detail on supplier cost	s will not be received until	tender bids have been	L1 - Tender evaluation comp	oletes	0%	Future Task	15/01/2024	12/04/2024
	ined post. PM (grade 8),	, Assistant PM (gra		ssful. Unable to appoint to l ant roles undergoing recrui		L0 - Award of contract		0%	Future Task	28/02/2024	23/05/2024
ability to fill all 3 posts with	n appropriately skilled a	oplicants.			Critical Path - Pro	oject Stage Completion					
		Gate (	0 - INTAKE Actual	Gate 1 - I	PLANNING Actual	Gate 2 - DE	LIVERY	Gate 3	- CLOSURE Actual		
		30/04/2023	30/04/2023	13/05/2024	dd/mm/yyyy	Phase 1: 31/12/2025	dd/mm/yyyy	31/03/2027	dd/mm/yyyy		
Dependency BRAG			Key Inter-Depen	dency	Critical Risk, Issue	From (Giver)	To (Receiver)	Due D	ate (From)	Due D	ate (To)
	Ainwaye Code of Conne	ection (CoCo) appro		from Airwave in relation to t	the NMS Ainveye	Trom (diver)					
On Track			f supplier premises of h		the Nivis Allwave	Airwave	SFRS	30/0	06/2025	30/06/2025	
Risk RAG/Score		Top 3 f	Delivery Risks			Mitigation Plan		Date Identified	Risk O	wner	By When
16	being received	o market capacity to	o deliver which will rest	ult in fewer tender bids	supplier information day of engagement with NFCC p Prior Information Notice (	carried out early market engag under Framework route indica orocurement hub. Procuremer PIN) to Open market on 10/11 Advisor around market knowle	ting market interest, nt Lead has issued a 1. Project Manager has	14/04/2023	Project	Lead	12/03/2024
16	available implementation supplier and SFRS res	on timescale for the courcing being requi	n publication of SFRS's successful supplier re ired through Phase 1 in	esulting in additional nplementation.	experience, on the appro- implementation timeline a to support. Prioritise NMS position on the Risk Regi		e given compressed ffing resource required ments based upon	12/10/2023	SRO	<b>)</b>	23/05/2024
16	standstill which may ex			orocess at award stage / award of contract	throughout procurement p Information Notice (PIN) t processes adhered to wit	ct Team and Legal will contin process. Procurement Lead p to open market on 10/11. SFF th ITT documents only being p approval. SFRS legal and exte	ublished Prior RS internal governance published following	02/08/2023	Procureme	ent Lead	23/05/2024
Issue Impact		Тор 3 🛭	Delivery Issues			Corrective Action		Date Identified	Issue O	wner	By When
Very High			nt resources to progress h will result in delay of	s to award of contract in project delivery	services and external leg	ement to ensure support to Ni al review of contract. Ensure t d documentation to procureme	timely provision of	20/09/2023	Procureme	ent Lead	12/01/2024
					Financial & Be	enefit Tracking					
		New		(NMS) Provisional Financ	cial Tracking,				General Bene		Benefit
	Reporting period: (Current Year from CMG report, Total Cost from approved OBC)							Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Realisation Plan Created Date
Previous Year(s)		Current Year		Future Year(s)	Tot	tal Cost	Variation	YES	02/08/2023	YES	02/08/2023
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		Financial Bene	efit Tracking	
	£000'S					2000 3		Cashable Be	enefits Identified	Non-Cashable B	Benefits Identified
							£ -	YES	£ Total Value	YES	£ Total Value
£	£	£ -	£ -	£ -	£ -	£	£ Variation to BC as	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy
-			-	-	-				cial Benefit Realisation:	·	1
							0.00%	Cashable and Nor suppliers have res	n-Cashable Benefits cann- sponded to tender indicati h the Cashable and Non-c completed for Full	ot be accurately eA38 ing how they would into cashable remain in pro	end to deliver their



9 November	er 2023 - 8 January 20	J24								South of		
Project Name	ESM	CP	SRO	Sarah O'Donnell	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			Re	vised Project End Date	30/01/2026	Rev 1	
		Projec	ct Update				F	Project Governance	& Mgmt. Control			
ESMCP  CMA has rejected Airway	nes anneal Int2 (users	senices) work continu	ious towards award dat	te of June/July 2024		Current Period Delivery	<b>→</b>	Business Case	Project Dossier	Risk Register	Project Phase	
ESN DATA FIRST	es appear, Lotz (user s	services) work continu	ious towards award dar	te of June/July 2024.		Trend	7	Dusilless Case	r roject bossier	Mak Negrater	r roject r nase	
Issue with IVS Software m						Last Period Delivery Trend	<b>→</b>	YES	YES	YES	Planning	
Work ongoing with procure Work ongoing with POD in						Project Performance	Overall Health	Time	Cost	Quality	Skills & Resource	
ıvs							Α	А	G	G	А	
Status – Supplier Demo D Route to Market by Procur Evaluation Panel names es	ement established as C stablished but scoring c	Computacenter SVAR riteria to be covered b	S – competition between the period of the publishing the re-	en 3TC- Modas Pro and A quirements. Award Feb.20	irbus Safe Command.	Significant Miles	tone Forecast	Progress	Status	Planned	Latest Predicted Date	
Samsung tablets rollout ar	id associated training co	ontinues on target wit	h 3 more areas to rece	elve devices.		Agreed funding (SG and Pro	gramme) (Data First)	100%	Complete	30/6/2022	10/01/2024	
						Migration to ESN Data First		75-100%	In Progress	30/8/2023	28/02/2024	
ESMCP		Pathway to G	reen / Next Steps			Data coverage testing (Assu	ire)	75-100%	In Progress	31/12/2023	30/06/2024	
The pathway to green is via ESN SIM for Data only and						Fleet Technicians recruited		25-50%	In Progress	30/09/2023	31/12/2023	
needs to be in place (NMS				at down. To allow this arre	2514 enabled control foom	Installation Company employ	yed	50-75%	In Progress	11/01/2024	11/01/2024	
ESN Data First Funding in place Recruit Fitting Company Resolve outstanding R5 ist Establish Service Manager IVS Procurement of the CF33 t	nent systems with Handale											
Procurement of the CF33 ( Fit of the CF33 and Havis I		Airwave voice radios.										
						ı - Project Stage						
			- INTAKE		PLANNING	Gate 2 - DE			- 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	tbc			
					wide   Diet Jesus 9 June 9	Project Dependencies						
Dependency BRAG			Key Inter-Depende		ritical Risk, Issue & Inter	From (Giver)	To (Receiver)	Due D	ate (From)	Due Da	ite (To)	
									, ,			
Complete On Track	Scottish Government F Command and Control			ue or risk, this will becom	e an issue as we	Scottish Government  NMS	ESN SFRS/ESN		01/2013	01/07		
Cir rideix				ed between Project teams.		11110	01 NO/2011	017.				
At Risk	IVS - Software Procure Airwave upgrades, R5 a		ation. Delays in the pro	curement of the Software	will result in delays for the	IVS	SFRS/ESN	01/	11/2023	31/01	01/2024	
Risk RAG/Score		Top 3 Do	elivery Risks			Mitigation Plan		Date Identified	Risk O	wner	By When	
16	Recruitment and retent	ion of vehicle fitting s	taff		Recruitment event held, li company.	mited candidates. Work ongo	oing to procure a fitting	01/01/2022	Head of I	People 31/01/2024		
12	There is a risk of the te systems & back office technical requirements cause delay to transition	applications not going resulting in technical	g to plan because of sy and potentially operati	stem compatibility and		Nirwave, IVS and ESN work all ect. Back office integration is		01/07/2023	Project Managers	and Head of ICT	31/01/2024	
12		ding for ESMCP in life	will not be forthcoming	g from the sponsor body 5 budget.		n the Strategic Lead and Sco Strategic Group meetings.	ttish Government	01/01/2021	Strategic Lo	ead/SRO	31/01/2024	
Issue Impact		Top 3 De	elivery Issues			Corrective Action		Date Identified	Issue O	wner	By When	
Medium	Logistics of vehicle dev	ice fitting along with a	availability of fitters and	vehicles.	coordinate all phases of fi	fitters or employ a fitting com it across all areas involving LS is process in place to structu t.	SO staff. Booking	01/01/2021	Programme Manag	ger/Head of Fleet	31/12/2023	
High	IVS - Software Procure	ment and Implementa	ation			cical part of the end to end so all of IVS devices as well as the		01/10/2023	Programme Manager / I	VS Project Manager	tbc	
					Financial & Ber	nefit Tracking						
									General Bene	fit Tracking		
	Provisional Financial Tracking Reporting period:							Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date	
Previous Year(s)		Current Year		Future Year(s)	Tot	al Cost	Variation	NO	dd/mm/yyyy	NO	dd/mm/yyyy	
Actual Spend £000's	s Budget 5000's Year To Date Forecast 5000's 5000's Forecast Project 0					Business Case (BC) Cost	£ Variation to BC		Financial Bene	efit Tracking		
	Actual £000's Forecas 2000's £000's					£000's	£000's	Cashable Be	enefits Identified		enefits Identified	
							£0	NO	£ Total Value	NO	£ Total Value	
							£ Variation to BC as	Realisation		Realisation		
£ -	£ -	£ -	£ -	£ -	£ -	0	%	Completion Date	dd/mm/yyyy	Completion Date	dd/mm/yyyy	
								Approach to Financ	aai Benefit Kealisation:	enefit Realisation:		
							0%	Review once funding approved				



Mathematical   Math	Project Name	Community Risk Index	Model (CRIM)	SRO	ACO David Lockhart	Project Manager	Damien Griffith	Project Start Date	05/01/2019	Original Project End Date	28/02/2020	Change Rev
Part		Outcome 2	Outcome 3	Outcome 5	Outcome 6	Outcome 7			Re	vised Project End Date	31/03/2024	Rev 5
Part			Proje	ct Update				F	roject Governance	& Mgmt. Control		
Mary	CRIM has been refreshed	to produce an updated ri	isk metric for Scotlar	nd incorporating Flood a	and Built Environment risks	6.		<b>+</b>	Business Case	Project Dossier	Risk Register	Project Phase
Part	Multiple dashboards and 2	D/3D maps of the built e	environment have bee	en completed.				-		,		,
Part	Knowledge transfer from S	WECO to SFRS comple	eted 4th & 7th Decer	nber.				<b>→</b>	YES	YES	YES	Delivery
Part					repeatable by SFRS.			Overall Health	Time	Cost	Quality	Skills & Resource
Part				•			Project Performance	G	G	G	G	G
			·	-								
Marie   Mar	A session of the SDMP St	akeholder Engagement	Group was held in N	ovember to scrutinise the	ne CRIM.				Progress	Status	Planned	
March   Marc							review, update and produce		75-100%	In Progress		30/01/2024
Primary   10   10   10   10   10   10   10   1							Unwanted Fire Alarm Signals	s (UFAS) consultation.	75-100%	In Progress		30/01/2024
Parameter   Par							guidance that will allow the r maintenance of CRIM to tran	management and	25-50%	In Progress		31/03/2024
Control Design   Cont			Pathway to G	ireen / Next Steps								
The Control of the Properties of the Control of the	Complete arrangements th	at will support SFRS CF	RIM self sufficiency.	(Jan 24)								
Column   C	Confirm UFAS reduction re	equirements for CRIM. (	Jan 24)									
Part			ntenance and develop	ement of the CRIM. Two	new SDMP risk controls	have been introduced to						
Part												
Part												
Part												
Plane   Completion   Complet												
Completion   Co												
Dependency BRAO  Key Inter-Dependency  Role			Completion	Completion	Completion	Completion	Completion	Completion	Completion	Completion		
Con Table   Con			30/12/2019	30/12/2019	30/03/2021	30/04/2021	30/03/2024	tbc	30/03/2024	tbc		
Risk RAG/Score  To 3 Delivery Risks  Risk of Stilling to deliver accurate Community. Risk predicting and associated scenario planning. The could be due to link of agentypease CT software equivments for short, to damage to SFRS regulated internally and extensive.  To 4 Delivery Risks  Risk of Stilling to deliver accurate Community. Risk predicting and associated scenario planning. The could be due to link of agentypease CT software equivments for short, to damage to SFRS regulated internally and extensive. The software regulated and self-red with support from blancing to the software of the software regulated and self-red with support from the blancing of Notificing and Elevance of the origination of the software regulated and self-red with support from the blancing of Notificing and associated scenario for the software regulated and self-red with support from the blancing of Notificing and Elevance of the software regulated and self-red with support from the blancing of Notificing and Elevance of the software regulated and self-red with support from the blancing of Notificing and Elevance of the software regulated and self-red with support from the blancing of Notificing and Elevance of the software regulated and self-red with support from the blancing of Notificing and self-red with support from the blancing of Notificing and the software of Notificing and State of the software of the special self-red with support from the support from the blancing of Notificing and State of the software of the special self-red self-red with support from the support f					С	ritical Risk, Issue & Inter	-Project Dependencies					
Risk RAG/Score  Top 3 Delivery Risks  Midgation Plan  Date Identified  Risk Owner  By When  Plan  Risk Control alling to other accuste Community Risk profiling and associated scenario planning. The could be due to lack of approprise of T-shriwan requirements for short, medium and ongoine stems for short in most recorate to risk leading to ordinary to stems of the project.  Tyellow 8  Failum to proving assess our toogher, regresse are copyring personal or state in failuse to make recorate to risk leading to ordinary to stems of the kind of proving the medium and ungest to risk leading to command to state in failuse or the project.  Failum to proving assess our toogher, regresse are subject, regresse are subject, regressed and referred with support from the University of Notingham (DAMSL) during the Translation to Programme End phase of the project.  Failum to read SDMP additions, from all and external. This could be also to laining the production of the project.  Failum to read SDMP additions, from all and external. The could be also to laining to provide the could not be also received.  Failum to read SDMP additions, from all and external. The could result in financial and reputational damage.  Failum to read SDMP additions, from all and external. The could result in financial and reputational damage.  Failum to read SDMP additions, from all and external and reputational damage.  Failum to read SDMP additions, from all and external and reputational damage.  Failum to read SDMP additions, from all and external and reputational damage.  Failum to read SDMP additions, from all and external and reputational damage.  Failum to read SDMP addition to read SDMP additional damage and consideration and reputational damage.  Failum to read SDMP additional damage and consideration and reputational damage.  Failum to read SDMP additional damage and consideration and reputational damage.  From a subject to the propriet.  From a subject to the subject	Dependency BRAG			Key Inter-Depende	ency		From (Giver)	To (Receiver)	Due Da	ate (From)	Due Da	nte (To)
Pellow B  Risk of hilling to deliver accurate Community Risk profiling and associated scenario planning. This could be due to lack of appropriate ICT software requirements for short, medium and torp temp rofiling. This could result in inflavor and the recurse for its leading of community of semingram (DAMSL) during the Transition to Programme Explanate of the project.  Failure to properly wasses our footing reportation, reported intensity and destroyley.  Failure to properly wasses our footing, reported intensity and destroyley being accessful. Could are for in originating intensition to the project.  Failure to properly wasses our footing, reported intensity and destroyley being accessful. Could are failure to properly desired properly associated properly	On Track	Secure necessary acco	ess to ICT systems a	and data critical to deve	loping and maintaining the	e CRIM.	ICT	SDMP	01/0	01/05/2021 31/03/20		/2024
Solventing. This could be due to last of appropriate CT solventine requirements for short, medium and to present profiler. The could result in later to match resource to risk leading to family and externally.  Failure to propriy assess or broging, response times, to correct and consist managements of Retiringham (DAMES) during the Transition to Programme Profiler. The could be the could result in the medium and to produce and externally.  Failure to propriy assess or broging, response times, to correct and deposite and stress and such deposite and schoology. Could result in increase the description, the could be the could result in deposite and such deposite and such deposite and such deposite and schoology. Could result in increase risk of formal companies, internal and externally. The increase of the programme result in the programme result in the increase of the programme result in the programme result in the increase of the programme result in the	Risk RAG/Score		Top 3 D	elivery Risks			Mitigation Plan Date Identified Risk Owner		wner	By When		
Yellow B   Decision - This could be because of lack of appropriate process adopted, expertise and technology, could result in increased risk of forms and complaints, increased risk of forms and a decternal. This could be because of lack of appropriate process adopted, expertise and technology, could assor settline (propriate) and increased risk of forms and a decternal. The Could also result in Organizational financial and reputational damage.    Yellow B   Failure to meet SDMP outcomes, timelines and requirements aligned to budgetary because the aims and objectives of the SDMP. This could be due to failing to provide the required resources in order to meet on FRS.    Yellow B   Top 3 Delivery Issues   Top 3 Deli	Yellow 8	planning. This could be medium and long term	e due to lack of appro profiling. This could i	priate ICT software requ result in failure to match	irements for short,	the University of Nottingha			01/07/2023	Mark L	oynd	31/03/2024
The protous Year(s)  Previous Year(s)  Budget £000*s    Mark Loyd   Mark Loyd	Yellow 8	options. This could be technology. Could resuincludes Ombudsman	because of lack of ap alt in increased risk and Legal challenges	opropriate process adop of formal complaints, in ( Interdicts and Judicia	oted, expertise and ternal and external. This al Review) being	the University of Nottingham End phase of the project, CRIM equality compliance	University of Nottingham (DAMSL) during the Transition to Programme I phase of the project, ensuring its statistical validity. M equality compliance requirements have been - and continue to be -		01/07/2022	Mark L	oynd	31/03/2024
Frevious Year(s)  Actual Spend £000's  ED  ED  ED  ED  ED  ED  ED  ED  ED  E	Yellow 8	forecasting. This could the aims and objectives	be due to failing to p	rovide the required reso	urces in order to meet				01/05/2019	Mark L	oynd	31/03/2024
Previous Year(s)  Budget £000's  ED   ED   ED   ED   ED   ED   ED   ED	Issue Impact		Top 3 D	elivery Issues			Corrective Action		Date Identified	Issue C	wner	By When
Previous Year(s)  Enemit Profile Submer Profile Created Date  Previous Year(s)  Enemit Profile Created Date  Future Year(s)  Enemit Profile Created Date  Future Year(s)  Enemit Profile Created Date  Forecast Floating Enemit Realisation Plan Created Date  Forecast Project Cost Enougy's Enougy's Enougy E						Financial & Ber	nefit Tracking					
Reporting period:  Previous Year(s)  Current Year  Future Year(s)  Future Year(s)  Forecast £000's  Forecast			Pro	visional Financial Tra	icking: SDMP Programm	ne Costinas				General Bene	fit Tracking	Panett
Actual Spend £000's Budget £000's Forecast £000's £												Realisation Plan
ED E	Previous Year(s)				Future Year(s)				NO	dd/mm/yyyy	NO	dd/mm/yyyy
E0 E	Actual Spend £000's	Budget £000's		Forecast £000's	£000's							
EO E			1					£0				
£0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £						i .	I	i e	NO	C Total Make		£ Total Value
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									NO	£ Total Value	NO	
	£0	£0	20	£0	£0	£0	£0		Realisation		Realisation	



Project Name	SDMP - Station Applia	nce Review (SAR)	SRO	ACO David Lockhart	Project Manager	SC Fraser Johnston	Project Start Date	05/01/2019	Original Project End Date	Phase 2 30/06/2021	Change Rev
Strategic Outcome Alignment	Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 6			Re	vised Project End Date	Phase 3 30/03/2024	Rev 5
g		Proje	ct Update				-	Project Governance 8	& Mamt. Control		
The SAR project has devel Assessment templates for refined as they are applied	identifying and recordin	rational Resources to ag potential Station ar	Risk and Demand (Mo			Current Period Delivery Trend	<b>→</b>	Business Case	Project Dossier	Risk Register	Project Phase
The "SDMP Development I Programme End Phase. T	Phase Position Report"	summarises the prog				Last Period Delivery Trend	<b>→</b>	NO	YES	YES	Delivery
and Change Committee.  A session of the SDMP St	akeholder Engagement	Group was held in De	ecember to scrutinise t	he MORRD processes		Decises Decision	Overall Health	Time	Cost	Quality	Skills & Resource
The external business part		·		•	cident data upto March	Project Performance	G	G	G	G	
2023.  The project has previously	suggested a range of "C	Outline Options for Ch	nange" involving alterna	tive station and pumping a	appliance distributions.	Significant Milest	one Forecast	Progress	Status	Planned	Latest Predicted Date
SSRP direction is required						Develop and consider "Outlir and Appliance Change Optic evolving SFRS strategic requ	ons" which align to	100%	Complete	30/09/2023	31/03/2024
						Refine the Matching Operation and Demand (MORRD) proc		100%	Complete	30/09/2023	31/03/2024
						Refine Business Case Impactemplates.		100%	Complete	30/09/2023	31/03/2024
Produce supporting guidance and documentation for the MORRD process and BCIA templates which will enable the SAR Project to "Transition to Progremme End."  In Progress  In Progress						30/03/2024	31/03/2024				
Next Steps Produce supporting guidance and documentation for the MORRD process and BCIA templates to meet the final SAR project milestone. (Jan -											
	24) sss-directorate review by the SDMP Stakeholder Engagement Group will be employed to scrutinise and refine SDMP processes and tools Mar 24)										
- SDMP tools and process - Identify - where appropria											
the SSRP. (Jan - Mar 24)	and proof	5 30701	,	Politica Mili							
					Critical Path	n - Project Stage					
		Gate 0	- INTAKE	Gate 1 - I	PLANNING	Gate 2 - DE	LIVERY	Gate 3 -	- CLOSURE		
		Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion		
		30/12/2019	30/12/2019	30/05/2021	30/04/2021	30/03/2024	tbc	30/03/2024	tbc		
				C	ritical Risk, Issue & Inter	-Project Dependencies					
Dependency BRAG			Key Inter-Depende	ency		From (Giver)	To (Receiver)	Due Da	ate (From)	Due Da	ate (To)
On Track	Incorporate the technic	al capabilities develo	ped by SDMP within fu	ture SFRS structures.		SSRP	SDMP	01/1	11/2023	30/03	/2024
Risk RAG/Score		Top 3 D	elivery Risks			Mitigation Plan		Date Identified	Risk O	wner	By When
Yellow 8	Failure to meet SDMP forecasting. This could the aims and objectives to SFRS.	be due to failing to pr	rovide the required reso			nanage any potential SAR ca support to non-SDMP tasks.		5/30/2019	Fraser Johnston		30/03/2024
Yellow 8	options. This could be	because of lack of ap alt in increased risk of and Legal challenges	propriate process adop of formal complaints, in ( Interdicts and Judicia	ternal and external. This I Review) being	internal and external scru of the project, ensuring th	vill continue to be reviewed ar tiny during the Transition to F ieir statistical validity. requirements have been - an	rogramme End phase	01/07/2022	Fraser Jo	ohnston	30/03/2024
Yellow 8	Failure to deliver progra This could be due to la stakeholders. Results	ck of resources or fai	lure to engage or comn		could arise from providing	nanage any potential SAR ca support to non-SDMP tasks. to the SSRP Consultation W		01/07/2022 Fraser Johnston		phnston	30/03/2024
Issue Impact		Top 3 De	elivery Issues			Corrective Action		Date Identified	Issue C	)wner	By When
		Provisional Fin	ancial Tracking: SDM	IP Programme Costings	Financial & Ber	nefit Tracking			General Bene	fit Tracking	
		— Provisional Pill		orting period:	(Sovered under Civin)			Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date
Previous Year(s)		Current Year		Future Year(s)	Tot	al 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		Financial Ben	efit Tracking	
	Actual 2000'S 2000'S 2000'S 2000'S					Cashable Be	nefits Identified	Non-Cashable B	enefits Identified		
							£0	NO	£ Total Value	NO	£ Total Value
60	00	60	00	00		00	£ Variation to BC as	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy
£0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £0 £											



Project Name	Demand Based Duty S	System (SDMP)	SRO	ACO David Lockhart	Project Manager	SC David Leonard	Project Start Date	05/01/2019	Original Project End Date	28/02/2020	Change Rev
Strategic Outcome Alignment	Outcome 1	Outcome 3	Outcome 5	Outcome 6	Outcome 7			Res	vised Project End Date	31/03/2024	Rev 5
		Proje	ct Update				P	roject Governance 8	& Mgmt. Control		
The DBDS project has dev Assessment templates for	identifying and recording	ng potential Station ar				Current Period Delivery Trend	<b>→</b>	Business Case	Project Dossier	Risk Register	Project Phase
The "SDMP Development Programme End Phase. 1	Phase Position Report"	summarises the prog				Last Period Delivery Trend	<b>→</b>	NO	YES	YES	Delivery
change scenarios. The rep Group (Dec) and Change (	ort and framework have					Project Performance	Overall Health	Time	Cost	Quality	Skills & Resource
The external business part 2023.	ner (ORH) has refreshe	d and revalidated the	SFRS Operational Res	sponse Model to include in	cident data upto March		G	G	G	G	G
The project has previously				ative Duty Systems. SSRF	P direction is required to	Significant Miles		Progress	Status	Planned	Latest Predicted Date
prioritise the refreshing of t	he analysis and constri	uct relevant options a	ppraisals.			Develop and consider "Altern Duty System Options" which Delivery demands and evolvi requirements.	n align with Service ng SFRS strategic	100%	Complete	30/09/2023	30/03/2024
						Refine the Matching Operati and Demand (MORRD) proc		100%	Complete	30/09/2023	30/03/2024
Refine the Business Case Impact Asse (BCIA) templates.						100%	Complete	30/09/2023	30/03/2024		
Pathway to Green / Next Steps					Produce supporting guidanc for the MORRD process and will enable the DBDS Project Programme End."	BCIA templates which	25-50%	In Progress	01/03/2024	30/03/2024	
Next Steps -Produce supporting guidance and documentation for the MORRD process and BCIA templates to meet the final DBDS project milestone. (Jan - Mar 24)											
	by the SDMP Stakehold	der Engagement Grou	p will be employed to	scrutinise and refine SDMF	processes and tools.						
<ul> <li>SDMP tools and process</li> <li>Identify - where appropria</li> </ul>				P requirements. (Nov 23 - I bject will be incorporated w							
the SSRP. (Jan - Mar 24)											
					Critical Path	- Project Stage					
		Gate 0	- INTAKE	Gate 1 - I	PLANNING	Gate 2 - DE	LIVERY	Gate 3 -	CLOSURE		
		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					-Project Dependencies						
Dependency BRAG			Key Inter-Depend		ritical Risk, Issue & Inter	Project Dependencies From (Giver)	To (Receiver)	Due Da	te (From)	Due Da	te (To)
Dependency BRAG On Track	Incorporate the technic	cal capabilities develo		lency	iritical Risk, Issue & Inter		To (Receiver)		nte (From) 1/2023	<b>Due Da</b>	
		Top 3 D	ped by SDMP within fu	lency uture SFRS structures.	iritical Risk, Issue & Inter	From (Giver)				31/03	
On Track	Failure to meet SDMP forecasting. This could	Top 3 D outcomes, timelines	ped by SDMP within fu elivery Risks and requirements alignously	lency uture SFRS structures.	Continually monitor and n	From (Giver) SSRP	SDMP	01/1	1/2023	31/03/ wner	/2024
On Track Risk RAG/Score	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This ess our footprint, resp because of lack of a ult in increased risk and Legal challenges	ped by SDMP within fu elivery Risks and requirements aligrowide the required rescould result in financial conse times, to consult oppropriate process adoptof formal complaints, in ( Interdicts and Judicia	ned to budgetary burces in order to meet and reputational damage t and consider reasonable pted, expertise and nternal and external. This al Review) being	Continually monitor and n which could arise from pre The MORRD processes v internal and external scru of the project, ensuring th	From (Giver)  SSRP  Mitigation Plan  manage any potential DBDS Poviding support to non-SDMP  will continue to be reviewed artiny during the Transition to Feir statistical validity.  ality compliance requirements	SDMP Project capacity issues tasks. Id refined through rogramme End phase	01/1  Date Identified	1/2023 Risk Ov	31/03/ wner	/2024 By When
On Track  Risk RAG/Score  Yellow 8	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This in ess our footprint, resp because of lack of ap alt in increased risk in or and Legal challenges presult in Organisatio amme aims and objectick of resources or fail	ped by SDMP within fuelivery Risks and requirements alignored the required rescould result in financial conse times, to consultipropriate process adopt of formal complaints, in (Interdicts and Judicianal financial and reputatives in a planned, melure to engage or communicatives and spage or communicatives and spage or communicatives in a planned, melure to engage or communicatives in a planned, melure to engage or communicatives and spage or comm	ture SFRS structures.  med to budgetary purces in order to meet and reputational damage and reputational damage tt and consider reasonable pted, expertise and nternal and external. This al Review) being ational damage.	Continually monitor and n which could arise from processes winternal and external scru of the project, ensuring the SAR contractual and equal continue to be - assessed Continually monitor and n could arise from staffing is	From (Giver)  SSRP  Mitigation Plan  manage any potential DBDS Poviding support to non-SDMP  will continue to be reviewed artiny during the Transition to Feir statistical validity.  ality compliance requirements	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and phase pacity issues which non-SDMP tasks.	01/11  Date Identified  01/05/2019	1/2023 Risk Ov	31/03/ wner oynd	By When 31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also Failure to deliver prograthis could be due to late.	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This ess our footprint, resp because of lack of a talt in increased risk and Legal challenges o result in Organisatio amme aims and objec ack of resources or fai s could be financial ar	ped by SDMP within fuelivery Risks and requirements alignored the required rescould result in financial conse times, to consultipropriate process adopt of formal complaints, in (Interdicts and Judicianal financial and reputatives in a planned, melure to engage or communicatives and spage or communicatives and spage or communicatives in a planned, melure to engage or communicatives in a planned, melure to engage or communicatives and spage or comm	ture SFRS structures.  med to budgetary purces in order to meet and reputational damage and reputational damage tt and consider reasonable pted, expertise and nternal and external. This al Review) being ational damage.	Continually monitor and n which could arise from professes winternal and external scru of the project, ensuring th SAR contractual and equicontinue to be - assessed Continually monitor and n could arise from staffing is Provide technical support	SSRP  Mitigation Plan  manage any potential DBDS R  oxiding support to non-SDMP  vill continue to be reviewed artiny during the Transition to R eir statistical validity.  ality compliance requirements d.  manage any potential SAR cassues or providing support to to the SSRP Consultation W  Corrective Action	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and phase pacity issues which non-SDMP tasks.	01/11  Date Identified  01/05/2019  01/07/2022	1/2023 Risk Ov Mark Lo	31/03/ wner oynd oynd	By When 31/03/2024 31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also Failure to deliver prograthis could be due to late.	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This ess our footprint, resp because of lack of a talt in increased risk and Legal challenges o result in Organisatio amme aims and objec ack of resources or fai s could be financial ar	ped by SDMP within fuelivery Risks and requirements alignorous the required rescould result in financial conse times, to consult oppopriate process adoptor formal complaints, in ( Interdicts and Judicia and financial and reputatives in a planned, melure to engage or commit deputational damage	ture SFRS structures.  med to budgetary purces in order to meet and reputational damage and reputational damage tt and consider reasonable pted, expertise and nternal and external. This al Review) being ational damage.	Continually monitor and n which could arise from processes winternal and external scru of the project, ensuring the SAR contractual and equal continue to be - assessed Continually monitor and n could arise from staffing is	SSRP  Mitigation Plan  manage any potential DBDS R  oxiding support to non-SDMP  vill continue to be reviewed artiny during the Transition to R eir statistical validity.  ality compliance requirements d.  manage any potential SAR cassues or providing support to to the SSRP Consultation W  Corrective Action	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and phase pacity issues which non-SDMP tasks.	01/11  Date Identified  01/05/2019  01/07/2022	1/2023  Risk Ov  Mark Lo  Mark Lo	31/03/wner  oynd  oynd  oynd  wner	31/03/2024 31/03/2024 31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also Failure to deliver prograthis could be due to late.	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or and Legal challenges result in Organisatio amme aims and object ck of resources or fails s could be financial ar	ped by SDMP within further requirements alignored the requirements and reputational financial and reputatives in a planned, melure to engage or common reputational damage alivery Issues	ture SFRS structures.  med to budgetary purces in order to meet and reputational damage and reputational damage tt and consider reasonable pted, expertise and nternal and external. This al Review) being ational damage.	Continually monitor and n which could arise from professes winternal and external scru of the project, ensuring th SAR contractual and equicontinue to be - assessed Continually monitor and n could arise from staffing is Provide technical support	SSRP  Mitigation Plan  manage any potential DBDS R  oxiding support to non-SDMP  vill continue to be reviewed artiny during the Transition to R eir statistical validity.  ality compliance requirements d.  manage any potential SAR cassues or providing support to to the SSRP Consultation W  Corrective Action	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and phase pacity issues which non-SDMP tasks.	01/11  Date Identified  01/05/2019  01/07/2022	1/2023  Risk Ov  Mark Lo  Mark Lo	31/03/wner  oynd  oynd  oynd  wner	31/03/2024 31/03/2024 31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also Failure to deliver prograthis could be due to late.	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or and Legal challenges result in Organisatio amme aims and object ck of resources or fails s could be financial ar	ped by SDMP within further requirements alignored the requirements and reputational financial and reputatives in a planned, melure to engage or common reputational damage alivery Issues	ture SFRS structures.  The dot budgetary purces in order to meet and reputational damage and reputational damage at and consider reasonable pted, expertise and internal and external. This al Review) being ational damage.  The dot of the dot o	Continually monitor and n which could arise from professes winternal and external scru of the project, ensuring th SAR contractual and equicontinue to be - assessed.  Continually monitor and n could arise from staffing is Provide technical support  Financial & Ber	SSRP  Mitigation Plan  manage any potential DBDS R  oxiding support to non-SDMP  vill continue to be reviewed artiny during the Transition to R eir statistical validity.  ality compliance requirements d.  manage any potential SAR cassues or providing support to to the SSRP Consultation W  Corrective Action	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and phase pacity issues which non-SDMP tasks.	01/11  Date Identified  01/05/2019  01/07/2022  01/07/2022  Date Identified  Benefit Profiles	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Seneral Bene  Benefit Profile	31/03/ wner  oynd  oynd  wner  fit Tracking  Benefit Realisation	By When  31/03/2024  31/03/2024  31/03/2024  By When  Benefit Realisation Plan
On Track  Risk RAG/Score  Yellow 8  Yellow 8  Issue Impact	Failure to meet SDMP forecasting. This could the aims and objective to SFRS. Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also Failure to deliver prograthis could be due to late.	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or result in Organisatio amme aims and object ck of resources or fails s could be financial an Top 3 De Provisional Fin	ped by SDMP within further requirements alignored the requirements and reputational financial and reputatives in a planned, melure to engage or common reputational damage alivery Issues	ture SFRS structures.  med to budgetary purces in order to meet and reputational damage and remail and external. This at Review) being ational damage.  thodical and safe manner. municate with key e to SFRS.	Continually monitor and n which could arise from processes winternal and external scru of the project, ensuring the SAR contractual and equicontinue to be - assessed.  Continually monitor and n could arise from staffing is Provide technical support  Financial & Ber	SSRP  Mitigation Plan  manage any potential DBDS F  widing support to non-SDMP  will continue to be reviewed are tiny during the Transition to F  eir statistical validity.  ality compliance requirements.  manage any potential SAR ca  ssues or providing support to to the SSRP Consultation W  Corrective Action  medit Tracking	SDMP  Project capacity issues tasks.  In refined through programme End phase is have been - and pacity issues which non-SDMP tasks.  Orking Group.	O1/11  Date Identified  O1/05/2019  O1/07/2022  O1/07/2022  Date Identified  Benefit Profiles Created	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Seneral Bene  Benefit Profile  Created Date	31/03. wner  oynd  oynd  wner  fit Tracking  Benefit Realisation Plan Created  NO	## By When    31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8  Issue Impact  Previous Year(s)	Failure to meet SDMP forecasting. This could the aims and objective to SFRS.  Failure to properly ass options. This could be technology. Could resuincludes Ombudsman successful. Could also Failure to deliver programs to the could be due to last akeholders. Results	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or and Legal challenges result in Organisatio amme aims and object ck of resources or fails s could be financial an Top 3 Do  Provisional Fin  Current Year	ped by SDMP within fuelivery Risks and requirements alignorous the required rescould result in financial conse times, to consult oppopriate process ado formal complaints, in ( Interdicts and Judicianal financial and reputatives in a planned, melure to engage or commit reputational damage elivery Issues  ancial Tracking: SDM Reg	ture SFRS structures.  The dot budgetary purces in order to meet and reputational damage and reputational damage are tand consider reasonable pted, expertise and internal and external. This all Review) being ational damage.  The dot and safe manner. The safe manner with the the safe m	Continually monitor and n which could arise from province of the project, ensuring the SAR contractual and equipment of the project, ensuring the SAR contractual and equipment of the project of the project, ensuring the SAR contractual and equipment of the project, ensuring the province to be - assessed.  Continually monitor and n could arise from staffing is Provide technical support  Financial & Ber (Covered under CRIM)	SSRP  Mitigation Plan  manage any potential DBDS is possible of the providing support to non-SDMP  will continue to be reviewed and the providing support to non-SDMP  will continue to be reviewed and the providing support to the ir statistical validity.  manage any potential SAR cassues or providing support to to the SSRP Consultation will be supported to the the SSRP Consultation will be supported to the s	SDMP  Project capacity issues tasks.  Indirect through regramme End phase is have been - and indirect through pacity issues which non-SDMP tasks. orking Group.  Variation  £ Variation to BC £000's	O1/11  Date Identified  O1/05/2019  O1/07/2022  O1/07/2022  Date Identified  Benefit Profiles Created  NO	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Seneral Bene  Benefit Profile  Created Date  dd/mm/yyyy	31/03. wner  oynd  oynd  oynd  wner  fit Tracking  Benefit Realisation Plan Created  NO  offit Tracking	## By When    31/03/2024
On Track  Risk RAG/Score  Yellow 8  Yellow 8  Issue Impact  Previous Year(s)	Failure to meet SDMP forecasting. This could the aims and objective to SFRS.  Failure to properly ass options. This could be technology. Could resuincludes Ombudsman successful. Could also Failure to deliver programs to the could be due to last akeholders. Results	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or and Legal challenges result in Organisatio amme aims and object ck of resources or fails s could be financial an Top 3 Do  Provisional Fin  Current Year	ped by SDMP within fuelivery Risks and requirements alignorous the required rescould result in financial conse times, to consult oppopriate process ado formal complaints, in ( Interdicts and Judicianal financial and reputatives in a planned, melure to engage or commit reputational damage elivery Issues  ancial Tracking: SDM Reg	ture SFRS structures.  The dot budgetary purces in order to meet and reputational damage and reputational damage are tand consider reasonable pted, expertise and internal and external. This all Review) being ational damage.  The dot and safe manner. The safe manner with the the safe m	Continually monitor and n which could arise from province of the project, ensuring the SAR contractual and equipment of the project, ensuring the SAR contractual and equipment of the project of the project, ensuring the SAR contractual and equipment of the project, ensuring the province to be - assessed.  Continually monitor and n could arise from staffing is Provide technical support  Financial & Ber (Covered under CRIM)	SSRP  Mitigation Plan  manage any potential DBDS is possible of the providing support to non-SDMP  will continue to be reviewed and the providing support to non-SDMP  will continue to be reviewed and the providing support to the ir statistical validity.  manage any potential SAR cassues or providing support to to the SSRP Consultation will be supported to the the SSRP Consultation will be supported to the s	SDMP  Project capacity issues tasks.  Independent of the second of the s	O1/11  Date Identified  O1/05/2019  O1/07/2022  O1/07/2022  Date Identified  Benefit Profiles Created  NO	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Issue O  General Bene Benefit Profile Created Date  dd/mm/yyyy  Financial Bene	31/03. wner  oynd  oynd  oynd  wner  fit Tracking  Benefit Realisation Plan Created  NO  offit Tracking	By When  31/03/2024  31/03/2024  31/03/2024  By When  Benefit Realisation Plan Created Date  dd/mm/yyyy
On Track  Risk RAG/Score  Yellow 8  Yellow 8  Issue Impact  Previous Year(s)	Failure to meet SDMP forecasting. This could the aims and objective to SFRS.  Failure to properly ass options. This could be technology. Could resuincludes Ombudsman successful. Could also Failure to deliver programs to the could be due to last akeholders. Results	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or and Legal challenges result in Organisatio amme aims and object ck of resources or fails s could be financial an Top 3 Do  Provisional Fin  Current Year	ped by SDMP within fuelivery Risks and requirements alignorous the required rescould result in financial conse times, to consult oppopriate process ado formal complaints, in ( Interdicts and Judicianal financial and reputatives in a planned, melure to engage or commit reputational damage elivery Issues  ancial Tracking: SDM Reg	ture SFRS structures.  The dot budgetary purces in order to meet and reputational damage and reputational damage are tand consider reasonable pted, expertise and internal and external. This all Review) being ational damage.  The dot and safe manner. The safe manner with the the safe m	Continually monitor and n which could arise from province of the project, ensuring the SAR contractual and equipment of the project, ensuring the SAR contractual and equipment of the project of the project, ensuring the SAR contractual and equipment of the project, ensuring the province to be - assessed.  Continually monitor and n could arise from staffing is Provide technical support  Financial & Ber (Covered under CRIM)	SSRP  Mitigation Plan  manage any potential DBDS is possible of the providing support to non-SDMP  will continue to be reviewed and the providing support to non-SDMP  will continue to be reviewed and the providing support to the ir statistical validity.  manage any potential SAR cassues or providing support to to the SSRP Consultation will be supported to the the SSRP Consultation will be supported to the s	SDMP  Project capacity issues tasks.  Indirect through regramme End phase is have been - and indirect through pacity issues which non-SDMP tasks. orking Group.  Variation  £ Variation to BC £000's	Date Identified  01/05/2019  01/07/2022  01/07/2022  Date Identified  Benefit Profiles Created  NO  Cashable Be	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Ssue O  General Benerit Profile Created Date  dd/mm/yyyy  Financial Benerits Identified	31/03/ wner  oynd  oynd  oynd  wner  fit Tracking  Benefit Realisation Plan Created  NO  sfit Tracking  Non-Cashable Be	By When  31/03/2024  31/03/2024  31/03/2024  By When  Benefit Realisation Plan Created Date  dd/mm/yyyy
On Track  Risk RAG/Score  Yellow 8  Yellow 8  Issue Impact  Previous Year(s)  Actual Spend £000's	Failure to meet SDMP forecasting. This could the aims and objective to SFRS.  Failure to properly ass options. This could be technology. Could rest includes Ombudsman successful. Could also failure to deliver programs to the could be due to lastakeholders. Results the could be due to lastakeholders. Besults the could be due to lastakeholders the could be due to lastakeholders. Besults the could be due to lastakeholders the could be due to lastakeholders the could be due to lastakeholders. Besults the could be due to lastakeholders the c	Top 3 D outcomes, timelines be due to failing to p s of the SDMP. This of ess our footprint, resp because of lack of ap alt in increased risk or amme aims and object ck of resources or fails s could be financial an Top 3 De  Provisional Fin  Current Year  Year To Date Actual £0000's	ped by SDMP within fuelivery Risks and requirements alignorized the required rest could result in financial conse times, to consult propriate process adopt formal complaints, in ( Interdicts and Judicianal financial and reputational financial and reputational damage commend reputational damage alivery Issues    Proceedings   Proceedings   Proceedings   Procedure	ture SFRS structures.  The do budgetary purces in order to meet and reputational damage and reputational damage at and consider reasonable pted, expertise and nternal and external. This all Review) being ational damage.  Thodical and safe manner. municate with key to SFRS.	Continually monitor and n which could arise from province of the project, ensuring the SAR contractual and equipment of the project, ensuring the SAR contractual and equipment of the project of the project, ensuring the SAR contractual and equipment of the project, ensuring the SAR contractual and equipment of the project of the proje	SSRP  Mitigation Plan  manage any potential DBDS is possible to non-SDMP  will continue to be reviewed and the possible to the statistical validity. A sility compliance requirements is the same and th	SDMP  Project capacity issues tasks.  Indirect through regramme End phase is have been - and pacity issues which non-SDMP tasks. orking Group.  Variation  £ Variation to BC £000's  £0  £ Variation to BC as %	Date Identified  01/05/2019  01/07/2022  01/07/2022  Date Identified  Benefit Profiles Created  NO  Cashable Be  NO  Realisation Completion Date  Approach to Finance	Mark Lo  Mark Lo  Mark Lo  Mark Lo  Mark Lo  Mark Lo  Issue O  General Bene  Benefit Profile Created Date  dd/mm/yyyy  Financial Bene nefits Identified  £ Total Value  dd/mm/yyyy  ial Benefit Realisation: entify efficiencies (processe	oynd  oynd	By When  31/03/2024  31/03/2024  31/03/2024  By When  Benefit Realisation Plan Created Date dd/mm/yyyy  enefits Identified £ Total Value dd/mm/yyyy

#### PROJECT HIGHLIGHT REPORT <u>SCOTTISH</u> Original Project End Project Manager Project Start Date Project Name larysia Waters 05/04/2022 Change Rev Hub\_Web hirley Hartridge 31/03/2024 Strategic Outcome Revised Project End Date dd/mm/yyyy Outcome 2 Outcome 3 Outcome 6 Outcome 7 Rev 1 **Project Update Project Governance & Mgmt. Control** · Web backlog remediation continues Current Period Delivery Trend Business Case Risk Register **→** Document Library remediation continues Intranet Phase 1 content mapped to new Information Architecture 07/11/2023 Intranet Content phase one rewrite commenced 14/11/2023 CR162581 raised and deployed 20/11/2023 -YES YES YES Delivery Skills & Resour SFRS UAT SharePoint Intranet environment created 24/11/2023 Engagement with the Digital Assurance office continues Significant Milestone Forecast Progress Status Planned In Progress 25-50% 29/02/2024 ntranet Pathway to Green / Next Steps eetings have been arranged with ICT to secure resources for the Nintex workflows. A dedicated copywriter has been appointed to develop ntent and ensure this completed in time for go-live. Work is ongoing with Storm ID to manage the timeline. Critical Path - Project Stage Gate 1 - PLANNING Gate 3 - CLOSURE Gate 0 - INTAKE Gate 2 - DELIVERY Planned Planned Actual Planned Planned Actual Actual Actual Completion Completion Completion Completion Completion Completion Completion Completion 31/12/2022 31/12/2022 28/02/2023 28/02/2023 28/02/2024 dd/mm/yyyy 31/03/2024 dd/mm/yyyy Critical Risk, Issue & Dependencies Dependency BRAG Key Inter-Dependency From (Giver) To (Receiver) Due Date (From) Due Date (To) The successful delivery of a new intranet for SFRS will be linked to the work of the Sharepoint and Teams Working 04/01/2023 On Track 30/01/2024 Working Groups iHub\_Web On Track Staff across the service Directorates to support the review and develop the iHub and Web iHub\_Web 01/12/2023 30/01/2024 Risk RAG/Score Top 3 Delivery Risks Mitigation Plan Date Identified By When Risk Owner As a result of unknown workflow designs there is a risk that the project may require Marysia Waters, Head of Communications Ongoing liaising between Supplier and comms to identify Intranet nintex additional licences or works resulting in descoping or additional cost to the project or 08/02/2023 31/01/2024 orks and address resources throughout the project timeline until Jan 2024. and Engagement project timelines Ongoing liaising with the organisation to ensure early notice of any changes of direction and Comms ensuring workloads are managed to accommodate There is a risk that resources may be redirected to priority projects/ tasks because of changes to Organisational Priorities which may result in delays to the project timeline Marysia Waters, Head of Communications 08/03/2022 29/03/2024 and Engagement eactive requirements. Nork is underway to identify content upload and nintex workflow timescales. There is a risk that the project go live will have to be rescheduled because project tasks dditional copywriter resource has been onboarded to support content rewrite Marysia Waters, Head of Communications 13/11/2023 29/02/2024 and activities have yet to be estimated and scheduled. and upload for intranet pages. User Testing to be added to the project and Engagement Issue Impact Top 3 Delivery Issues **Corrective Action** Date Identified Issue Owner By When mpact of DSSS Audit on project being established. This may result in Marysia Waters, Head of Communications It has been confirmed that the project will be audited by the Digital Assurance Office. additional delays and/or costs to the project and SFRS. 24/10/2023 17/11/2023 and Engagement Financial & Benefit Tracking **General Benefit Tracking Provisional Financial Tracking Benefit Profiles Benefit Profile** Benefit Realisation Reporting period: Realisation Plan **Created Date** Plan Created **Created Date** Previous Year(s) Future Year(s) Variation 01/06/2023 dd/mm/yyyy Year To Date Forecast Project Cost Business Case (BC) Cost £ Variation to BC Financial Benefit Tracking Actual Spend £000's Budget £000's Forecast £000's Actual £000's £000's £000's £000's Cashable Benefits Identified Non-Cashable Benefits Identified NO £ Total Value YES £116253.92 PA Realisation 30/07/2024 dd/mm/yyyy Completion Date Completion Date Approach to Financial Benefit Realisation: 0% These benefits will be achieved via time saving efficiencies.



Project Name	People Payroll Finance	e & Training	SRO	Lyndsey Gaja	Project Manager	Paul McGovern (Programme	Project Start Date	01/04/2021	Original Project End Date	01/04/2024	Change Rev
Strategic Outcome Alignment	Outcome 3	Outcome 5	Outcome 6					Re	vised Project End Date	30/04/2026	Rev 1
		Proje	ect Update				F	roject Governance	& Mgmt. Control		
Discussions ongoing on     follow up meeting sche     details requested on re	eduled with SG Program equirements for an MOU	nme Team members J between SFRS an	and SG Directors for d SG	11th January 2024		Current Period Delivery Trend	ä	Business Case	Project Dossier	Risk Register	Project Phase
As-is Process flows and     Contract Procurement do	User Journeys continue	to be recorded, ali	gned to fire service requ	eement on the preferred wa uirements shared externally until we		Last Period Delivery Trend	<b>→</b>	YES	NO	YES	Intake
route to market will be  • Project team progressing • PID and Project Plan - du			tion discussions				Overall Health	Time	Cost	Quality	Skills & Resource
				main on pause. DAO supp	ortive of approach on	Project Performance	А	R	А	G	А
<ul> <li>Internal health check car Board</li> </ul>	•			presentation to Project E	,	Significant Milest	one Forecast	Progress	Status	Planned	Latest Predicted Date
responsibility for day to da	y Project and Team ma	nagement. Reduce	d staffing costs while co	November 2023. Program ollaboration oppoclertunitie     of collaboration discussion	s are explored	Outline Business Case appr	oval	100%	In Progress	31/08/2023	tbc
to end March 2024				<ul> <li>of collaboration discussion</li> <li>Cost changed to amber</li> </ul>		Scottish Government DAO A	Assurance Gate (TAF)	0-25%	Future Task	30/09/2023	tbc
necessary staff costs	ve nave no cicar timese	ales from potential	conaboration partners	Cost changed to ambor	ado to origonig	Re-baselined Detailed Project	ct Plan	75-100%	In Progress	31/08/2023	31/03/2024
		Pathway to 0	Green / Next Steps			Publish final version of PID		50-75%	In Progress	18/08/2023	31/03/2024
Decision required on pref     Update of business case				tion, SFRS stand-alone pro	ocurement	ITT documentation (internal)		100%	Complete	31/10/2023	30/11/2024
				report is being prepared to	set out the position	Provide input to Internal Hea	Ith Check	100%	Complete	09/10/2023	
						Review Healthcheck feedbac	:k	0%	In Progress	31/01/2024	
	Action Healthcheck r				Action Healthcheck recomm	endations	0%	Future Task	31/03/2024		
	Critical Path - Project Stage										
	Gate 0 - INTAKE Gate 1 - PLANNING Gate 2 - DELIVERY  Planned P					Gate 3 -	CLOSURE				
		Completion	Actual Completion	Planned Completion	Actual Completion	Planned Completion	Actual Completion	Completion	Actual Completion		
		tbc		tbc		tbc		tbc			
				С	ritical Risk, Issue & Inte	r-Project Dependencies					
Dependency BRAG			Key Inter-Depend	dency		From (Giver)	To (Receiver)	Due Da	ite (From)	Due Da	ite (To)
On Track	Cross System process	ses and data integra	tion between Rostering	g and PPFT Projects		Rostering	PPFT	02/1	0/2023	06/10	/2025
At Risk	Collaboration discussion	ons with Police Sco	tland, Scottish Governr	ment and PWC		External project	PPFT	08/1	1/2023	31/01	/2024
Risk RAG/Score		Top 3 [	Delivery Risks			Mitigation Plan		Date Identified	Risk O	wner	By When
16	This is a risk that the w having no agreed comp significantly.			being delayed		n potential partners to fully un on and inform a decision on th		06/09/2023	Lyndsey Gaja		31/01/2024
12	The temporary position	of key project men	nbers risks the stability	of the PPFT Project		coring reduced to 12 as short term risk is being minimised by contract ktensions up to end of August 2023 and now currently extended to 31 Marc 024.			Lyndsey Gaja		31/03/2024
9		Programme Manag	ger has been extended	to cover this following the evel of support and	up meetings have been so	ported by Programme Officer cheduled which the SRO also and support. The Team have a clearly outlined.	attends on a regular	30/11/2023	Lyndsey Gaja		31/03/2024
Issue Impact		Top 3 D	elivery Issues			Corrective Action		Date Identified	Issue O	wner	By When
Very Low											
					Financial & Be	nefit Tracking					
		Poorle Pe	vroll Finance & Trei	ning (PPFT) Provisional	Financial Tracking				General Bene	fit Tracking	
		Реоріе, Ра		porting period:	rinanciai iracking			Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date
Previous Year(s)		Current Year		Future Year(s)		al 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		Financial Bene	efit Tracking	
							£0		nefits Identified		enefits Identified
								NO	£ Total Value	NO	£ Total Value
			00				£ Variation to BC as %	Realisation Completion Date	dd/mm/yyyy	Realisation Completion Date	dd/mm/yyyy
£0	£0 £0 £0 £0				£0		Ongoing exploration of we can make any neo able to quantify the fir Staff salaries remain	constant during this perio Monthly project cost has	opportunities need to book opportunities need to	approval, we will be exploration of	

#### PROJECT HIGHLIGHT REPORT SCOTTISH 9 November - 8 January 2024 Original Project End Change Rev Project Name SRO ACO Stephen Wood Project Manager bastian O'Dell Project Start Date 01/01/2022 31/12/2025 stering Strategic Outcome Outcome 5 Outcome 6 Revised Project End Date Outcome 4 Rev 1 Project Governance & Mgmt. Control **Project Update** • ITT process closed at the end of November. 3 tenders were submitted, checked for compliance and progressed to the next stage. Current Period Delivery Trend III process closed at the end of November. 3 tenders were submitted, checked for compliance and progressed to the next stage. Evaluation panel training completed in December. 3 demonstration days were scheduled with compliant bidders. 1 has taken and place and 2 are pending. Enablers for change report being prepared for submission to CPPG on how best to proceed with business change and adoption of a new system and processes by personnel. Risk Register Planning YES YES YES Following the conclusion of supplier evaluation, the full business case will be updated for projected project costs, benefits and resources. Overall Health Latest Predicted Significant Milestone Forecast Status Planned Progress 30/11/2023 ITT - Deadline for Submission 100% Complete Pathway to Green / Next Steps In Progress Evaluation concludes 25-50% 20/01/2024 On track FBC to CPIG 0% Future Task 20/02/2024 Internal Gateway (Intake) planning underway Project Initiation Document (Dossier) created and due to be presented at the project board Detailed project plan for next stages underway 31/03/2024 Contract award 0% Future Task Comms plan being implemented Critical Path - Project Stage Gate 0 - INTAKE Gate 3 - CLOSURE Gate 1 - PLANNING Gate 2 - DELIVERY Planned Actual Actual Actual Planned Actual **Planned Completion Planned Completion** Completion Completion Completion Completion 31/12/2025 02/02/2024 30/04/2024 01/06/2025 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 Rostering and NMS Project (Upstream integration) Rostering NMS 01/03/2025 31/12/2025 Cross system processes and data integration between Rostering and PPFT Project (Downstream integration) PPFT Rostering 01/03/2025 31/12/2025 Risk RAG/Score Top 3 Delivery Risks Mitigation Plan Date Identified Risk Owner By When There is a risk that new systems and processes are not fully adopted because of a lack of DACO Stephen Wood Reviewed impacted policies and agree changes with policy holders 24/03/2022 31/12/2024 alignment of policies resulting in a failure to deliver benefits. 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 DACO Stephen Wood 16/01/2023 30/06/2024 idied up Factor in flexibility and configurability of new rostering solution There is a risk that the Rostering Project solution is not able to go live because of delays 8 24/03/2022 DACO Stephen Wood 30/06/2024 in NMS go live dates resulting in delays to the Projects milestones Maintain and monitor through Dependency Log Issue Impact Top 3 Delivery Issues Date Identified By When Corrective Action Issue Owner Financial & Benefit Tracking

				Rostering					General Benefit Tracking		
	Provisional Financial Tracking Reporting period:					Benefit Profiles Created	Benefit Profile Created Date	Benefit Realisation Plan Created	Benefit Realisation Plan Created Date		
Previous Year(s)		Current Year		Future Year(s)	Tot	al Cost	Variation	YES	07/09/2023	NO	
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		Financial Bene	efit Tracking	
								Cashable Be	nefits Identified	Non-Cashable Be	enefits Identified
								YES	£631,415	YES	£2,357,776
£0	03	£0	£0	£0	£0		£ Variation to BC as	Realisation Completion Date	01/12/2026	Realisation Completion Date	01/12/2026
2.0	£U	£U	£U	£0	£0	£0		Approach to Financ	ial Benefit Realisation:		
								Benefits profiles have benefit realisation plan	been agreed by the proje n is in development.	ct board at 50% benef	it realisation. A

# SCOTTISH FIRE AND RESCUE SERVICE

# **Change Committee**



Report No: C/CC/05-24

Agenda Item: 7.2

				Ag	enda l	tem:	7.2		
Report	to:	CHANGE COMMITTEE							
Meeting	g Date:	15 FEBRUARY 2024							
Report	Title:	NEW WEBSITE KPI BENEI	FITS –	INITIA	L FIN	DINGS			
Report	Classification:	For Information Only  SFRS Board/Committee M For Reports to be held Specify rationale below Board Standing O						Privat erring	е
			<u>A</u>	<u>B</u>	<u>C</u>	D	<u>E</u>	E	G
1	Purpose								
1.1		ange Committee with an inter of the new website.	rim upo	late on	the ke	y perfo	ormano	e indic	ators
2	Background								
2.1	The new website launched in September 2023. In the lead-up to the launch, the project team worked with the contractor (StormID) to produce site tracking and analysis guidelines (STAG), which include KPIs related to the purpose of the site. The tool for analysing and measuring the data is Google Analytics.								
2.2		s of our KPIs will be possible v PowerBI. We will look to e am.							
2.3	cover the same December 202 2023. When mo In this report, b bonfire campai	rm project benefits, to track to timeframes. Therefore, the bit 2 and the measurement data easuring the success of camp benefit one measures increasing. The benchmark data was measurement data from 1 Oct	paseling was taigns, taigns, taigns aig awas s taker	e data aken f the tim areness n from	was ta rom O eline co s, and 1 Octo	ken front otober overs the ober 20	om Octo 2023 to ne cam aluation 022 to	ober 20 o Dece paign of of the 6 Nove	022 to ember dates. 2023
3	Main Report/D	)etail							
3.1 3.1.1	This KPI aims	increasing awareness (Bon to increase awareness of ur other KPI benefits.					ty info	rmatio	n and
3.1.2	During the 2023 bonfire night campaign (1 $Oct - 6 Nov$ ) we saw a phenomenal increase in website traffic, predominantly to fireworks and bonfire pages. The aim was to direct users to organised displays and this was the most searched term during that period, where users clicked through to our website.								
3.1.3	clicked through to our website.  The website sessions are the number of unique users visiting our website during that period, this increased by more than 85,000 sessions in 2023. The page views are unique to the firework and bonfire pages and show the number of visits to those pages, but they are not unique to users. Comparing these numbers helps us understand the user journey and how many people went on to look at other information during their visit.								

- Through SEO optimisation, a key component of the redesign, we saw an increase in traffic from search engines (Google) to the website, almost 70,000 of the visits during that time came from users using a search engine and clicking our website. The engagement rate of the fireworks and bonfire pages during this time was 56%. Engagement rate is the percentage of sessions in one page that were engaged sessions (where a user spends more than 10 seconds, takes some form of action on the page (click a link) or visits at least two pages) this means people were staying on the page and looking at other information.
- 3.1.5 The alert banner on the website displayed a link to the organised displays page, driving traffic and raising awareness during other visits.
- 3.1.6 The new template allowed the information to be laid out in a more accessible way and made it easier for users to find the information relevant to them.

Metric	2022	2023	Change	Change %
Sessions	5,185	90,500	+85,315	+1,645%
Page views	6,966	104,191	+97,225	+1,396%
Organic search	1,456	69,628	+68,172	+4,682%

- 3.2 Benefit two inform the public on safety at home and in the community
- 3.2.1 This KPI aims to inform the public on our main safety advice and information. Particularly focusing on at home, outdoors and businesses.
- Previously, the home fire safety visit information was tucked away under 'your safety', 'at home' and then 'home fire safety visit'. On the new site, it's available from the 'contact us' section, making it easier to find with fewer clicks. Using the quick links feature on the homepage, booking a home fire safety visit is only one click away, all aiding the increase in visits to the page. Google Analytics cannot measure the number of home fire safety visits booked at this time.
- 3.2.3 This has resulted in more than 5,000 more views of the HFSV page during the same period the year before.
- The safety information was previously all available from the 'your safety' section before selecting a focus area. These areas have been given more prominence in the top menu, a new layout, templates, and other features which have increased the number of visits to the collections overall.
- Our safety information is more accessible for members of the public now, with more than eight times more views on these sections during the same timeframe in 2022.

Metric		2022	2023	Change	Change %
HFSV	page	3,573	8,783	+5,210	+146%
views					
Safety		10,656	86,335	+75,679	+710%
collection	s				
page viev	VS				

- 3.3 Benefit three career and recruitment information
- The aim is to provide clear routes for career and vacancy information via recruitment content and the career hub where users can apply and obtain further information about the roles we offer.

- 3.3.2 This section has been completely overhauled to showcase the roles available and how to apply. The content has been streamlined and updated to ensure consistency across the site, and particularly the intricacies of the operational roles. The new page templates and information architecture help the user journey flow more easily.
- 3.3.3 The comparison between the number of sessions and page views shows that users who are looking for career information stay on the site for longer and navigate the career hub.
- During the measurement timeframe, and Firefighter Control recruitment campaign took place, and the homepage features allowed us to direct users to the recruitment information via a call to action. These stats will be driven by campaigns too, but the sheer volume of change shows we're doing better overall.
- 3.3.5 A 41% increase in sessions, and this means more users navigating the site, the increase in page views shows us they are navigating through the careers hub and it's improving their user journey.
- 3.3.6 With the addition of Google search console, we will be able to understand what users are searching for to get to this section and how we rank on search engines. We can include the search terms in our pages and metadata going forward to further optimise it and improve the rankings.

Metric		2022	2023	Change	Change %
Career	hub	32,164	45,226	+13,062	+41%
sessions					
Career	hub	88,985	156,246	+67,261	+76%
page views	3				

# 3.4 **Benefit four – legal requests**

- Parts of our site exist to ensure users can submit requests for information, like freedom of information requests, complaints, incident reports, and more. There are requirements for how these requests should be handled, including timescales. The website helps to ensure an effective and timely response.
- 3.4.2 The previous website had one form for all requests (plus other contact information). There was no information available about the timescales for responses, and more before the request was submitted because it sat on a different section of the website. The new website allows us to create a service start page, which guides users through the process and includes timescales, contacts, etc. before they click to complete the form. It increases the number of clicks for the users but ultimately benefits them when their request is more likely to be sent to the right people in the first place. These guide pages are not included in the stats to ensure as much consistency with the stats.
- Google Analytics allows us to track the number of visitors to each form page but not the number submitted. For consistency in the analytics, we compare the page views for the contact us form on the previous site where the form sat, with the collective form page views on the new site.

Metric		2022	2023	Change	Change %
Form views	page	5,659	6,943	+1,284	+23%

#### 3.5 **Benefit five – user satisfaction**

- 3.5.1 User satisfaction can be monitored in many ways, using Google Analytics the average session duration is a good indicator. We want users to visit our site and find what they are looking for, and we want them to stay on the site and browse other information particularly our safety information.
- 3.5.2 The devices that our visitors use can have an impact on the time they spend on the site, however, we hope that with the device optimisation built into our site and that over 70% of users visit on mobiles, this shouldn't be a factor for us. Monitoring the data based on devices as we gather more information in this area will allow us to determine this in the future.
- 3.5.3 We have no data to base the comparison on as this is a new feature for the new website and Google Analytics 4. Previously we could monitor the time on a page only, not the session as a whole. This new information gives us a better insight into the user journey.
- Not many, if any, organisations publish their analytics, so it's difficult to determine the measure of success in this area. Using more general reports from organisations that look more widely at analytics, we determined a 'good' average session duration is between 1.29 and 1.54 minutes. A bad average session duration would be anything below 1.09 minutes.
- 3.5.5 There is also some data to suggest that other public services average at 2.39 minutes. Therefore, we set our initial target for success at 2 minutes.
- 3.5.6 Our average session duration between October and December 2023 is 2.87 minutes.

Bad	Good	Public sector benchmark		How we're performing
<1.09 minutes	>1.29 minutes	2.39 minutes	2 minutes	2.87 minutes

# 3.6 Benefit six – publish information and publications

- 3.6.1 We publish a lot of information on our website to ensure visibility and accountability as a public section organisation. Our fire safety and organisational statistics, and incident statistics are published at the same time each year, making them a great example for showcasing the benefits of the new website and this KPI. The latest incident statistics were published on 31 October 2023, allowing us to compare the page views where the stats sit on the old site in 2022 and the new site in 2023.
- Our new website IA makes the information more accessible to users, the page views have increased by 10 times between October and December in 2023, compared to 2022.
- The stats show this section's page views have increased 10 times over, meaning its more visible, ensuring better accountability as a public sector organisation.

Metric	2022	2023	Change	Change %
Main statistics	304	3,075	+2,771	+912%
page views				

# 3.7 Benefit seven – the site is accessible and easy to use

- Part of the need for a new website was due to the lack of accessible features on our old site. Many aspects of the site were not accessible for users with disabilities, including those who use screen readers and other accessibility aids.
- 3.7.2 The new site was built to the WCAG 2.1 standard regulations, the latest at that time. An accessibility audit by StormID outlined any accessibility issues with the site, including our

- online home fire safety checker, use of PDFs and the fire station search. The accessibility statement for the site captures these and offers alternative solutions or our plans to make these areas more accessible.
- 3.7.3 We have a new template for documents for the website, to help us move away from PDF documents and make this information more accessible.
- There are some metrics that we can use to evaluate the accessibility features of a website, using the WAVE accessibility tool. It shows the number of alerts per page and more high-priority errors per page. It also highlights the number of positive ARIA labels on a page.
- 3.7.5 Across the board, we saw the expected improvements. The alerts we are seeing on the new website relate to a duplicate link that we incorporated following feedback from users to include an extra link to the homepage on the main menu. This is highlighted as one alert on each page.
- 3.7.6 Overall, you can see almost 100% improvement in the negative indicators. The positive indicators will depend on the type of content on the page (images, links etc.) and we would want to see an improvement in this area, we had targeted a minimum of 20 ARIA labels per page and we're exceeding this. Some of these improvements are due to our new processes and some are features built into the new site.
- 3.7.7 ARIA labels define accessible names to be read by screen readers for interface elements. They may be used when HTML associations (label, alternative text, etc.) are not sufficient.

Metric	2022	2023	Change	Change %
Averages alerts	189.88	1.13	-187.75	-99%
(per page)				
Average errors	6.25	0	-6.25	-100%
(per page)				
Average ARIA	6	32.38	+26.38	+440%
label (per page)				

#### 3.8 Benefit eight – provide new and updates

- There are several benefits to sharing news and updates on our website. The main driver of traffic to this section of the site is social media. On the old website, the contact details for media enquiries also sat in the news section, so journalists and news outlets would contact the media team using the information from there.
- Now, that information sits in the 'contact us' section and has its own page, that traffic is being driven there by the search. More than 1,000 views could have impacted our benefit stats, however, the traffic appears to be driven to the correct areas. The stats show a 26% increase in page views for the news section as a collection, further proving that the new media enquiries page is having the desired effect.
- 3.8.3 The news pages on the old site included raw text and floating images not good for responsive websites adapting to devices. Also, not great for accessibility and screen readers often pick up the information in the wrong order.
- 3.8.4 The new templates include individual content elements to ensure accessibility while aiding the performance of the pages. These include:
  - Test boxes
  - Landscape image (in line with other news publications)
  - Drop down boxes
  - Pull out quotes
  - Statistics

- 3.8.5 The new website allows us to customise text and images for social media, so when links are shared, information can be tailored to the channel.
- 3.8.6 In addition to this, the landing page allows us to feature news, share our key messages and direct users to our most important information and campaigns.

Metric	2022	2023	Change	Change %
News page collection page views	13,961	17,623	+3662	+26%
Media enquiry page views	N/A	1,030	N/A	N/A

# 3.9 Benefit nine – easy access to contact information

- 3.9.1 Outwith emergencies, we want to ensure our contact information is easily accessible for users.
- For this benefit, we're measuring the number of users on the site visiting the pages, rather than the total number of page views. The reason for this is that when a user types in a search query it creates a page result, if they search for more than one station during a session it creates several different pages, skewing the results.
- Instead, comparing users, we only see the people using the tool and not the number of times they use it making it more comparable across the two sites.
- The old website user journey was complex. The 'find a fire station' tool was a widget dropped into any page and it could be accessed from many different places. This included accessing it from 'your area', where users were asked to select the area they lived in based on our SDAs. Also, without a page of its own, the search engines struggled to find it. In addition to the user journey issues, it created an issue for us when we evaluated the use of the tool and made it difficult to pinpoint the tool and the data.
- Now, it has a page and search engines can find the information more easily, as can users and we can evaluate the use of the tool more effectively.
- In addition, we have the 'find a fire station' link on the homepage quick links for now, directing traffic to it and it's also on the footer of the page, meaning is available from everywhere, regardless of what page you are on.

Metric	2022	2023	Change	Change %
Find a fire	5,567	15,724	+10,157	+182%
station users				

# 3.10 Some of the new website features

There are several new features on the website, which have contributed to the progress we have seen towards our KPI benefits. These include:

- New information architecture IAs focus on organising, structuring, and labelling content effectively and sustainably. This was tested before launch to ensure the new IA would work as planned.
- New content types and templates a consistent format, and style and ensures accessible content.
- **New content guidelines** using plain English and the Hemingway app to draft content, ensuring the content is accessible to users of all levels of education. Our

	<ul> <li>content has gone from predominantly PHD level content to grade 7 (on average). This means it can be read by an average 10 year old.</li> <li>Search engine optimisation – the technical configuration of the website is optimised to help content relevance and link popularity – this means pages are more findable, more relevant, and popular for user searches. As a result, search engines rank them better. During the bonfire night campaign, almost 70,000 organic searches resulted in visits to our website. This means the free listing appeared high or at the top of the Google search because it was relevant to the person's search term. (for context, nonorganic searches are paid adverts)</li> <li>Related content – links at the bottom of pages to other related content to keep people on the site for longer.</li> <li>Optimised for devices – the website is responsive and adapts to different devices and screen sizes – particularly mobiles (70.5% of our website users are on mobiles).</li> <li>Accessible build – built to WCAG 2.1 standard, meeting the Public Sector Bodies (Websites and Mobile Applications) Accessibility Regulations 2018.</li> </ul>
4	Recommendation
4.1	The Committee is asked to note the contents of the report.
5	Key Strategic Implications
5.1 5.1.1	Risk The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.
5.2 5.2.1	Financial Any implications arising from the report will be managed by the relevant Directorate.
5.3 5.3.1	Environmental & Sustainability Any implications arising from the report will be managed by the relevant Directorate.
5.4 5.4.1	Workforce Any implications arising from the report will be managed by the relevant Directorate.
5.5 5.5.1	Health & Safety Any implications arising from the report will be managed by the relevant Directorate.
5.6 5.6.1	Health & Wellbeing Any implications arising from the report will be managed by the relevant Directorate.
5.7 5.7.1	Training Any implications arising from the report will be managed by the relevant Directorate.
5.8 5.8.1	<b>Timing</b> Any implications arising from the report will be managed by the relevant Directorate.
5.9 5.9.1	Performance Any implications arising from the report will be managed by the relevant Directorate.
5.10 5.10.1	Communications & Engagement Any implications arising from the report will be managed by the relevant Directorate.
5.11 5.11.1	Legal Any implications arising from the report will be managed by the relevant Directorate.

5.12 5.12.1	Information Governance DPIA completed No. An assessment was completed for the project as a whole.						
5.13 5.13.1	Equalities EHRIA completed No. An assessment was completed for the project as a whole.						
5.14 5.14.1	Service Delivery Any implications arising from the report will be managed by the relevant Directorate.						
6	Core Brief						
6.1	Not applicable	Not applicable					
7	Assurance (SFRS Board/Committee Meetings ONLY)						
7.1	Director:			McAteer, Director of Strategic Planning, Performance and munications			
7.2	Level of Assurance: (Mark as appropriate)			Substantial/Reasonable/Limited/Insufficient			
7.3	Rationale:		The paper is an interim report on benefits realisation for information only.				
8	Appendices/F	urther Re	ading				
8.1	Appendix A: B	enefit Too	<u>lkit</u>				
Prepare	d by:	Nic McG	rath, Com	ath, Communications Manager			
Sponsor	red by:	Marysia \	Vaters, Head of Communications and Engagement				
Presente	ed by:	Nic McG	rath, Communications Manager				
Links to	Strategy and C	orporate	Values				
Linked to	strategic outcor	mes 1,2,3,	5 and 6.				
Governa	ance Route for F	Report		Meeting Date	Report Classification/ Comments		
Change	Committee			15 February 2024	For information		

## SCOTTISH FIRE AND RESCUE SERVICE

## **Change Committee**



Report No: C/CC/03-24

Agenda Item: 8.1

		Agenda Item: 8.1									
Report t	o:	CHANGE COMMITTEE									
Meeting Date:		15 FEBRUARY 2024									
Report Title:		AUDIT ACTION PLANS AND CLOSING REPORTS UPDATE: COMMAND AND CONTROL MOBILISING SYSTEM									
Report Classification:		For Scrutiny	SFRS Board/Committee Meetings ONI For Reports to be held in Private Specify rationale below referring to Board Standing Order 9  A B C D E F						•		
1	Purpose		_	_		_	_	_			
1.1	The purpose	of this report is to provide the and inspection action plans		ange Co	ommitt	ee (CC)	) with a	ın upda	ate on		
1.2	relating to HM	ng the Committee are aske I Fire Service Inspectorate ( sh Fire and Rescue Service	HMFSI	) repor	t on:	•		e action	n plan		
1.3	There are no closing reports to consider.										
2	Background										
2.1	HMFSI inspects and reports on the Scottish Fire and Rescue Service (SFRS) with the purpose of assuring the public and Scottish Ministers that we are working in an efficient and effective way, and to promote improvement in the Service.										
2.2	Each year, HMFSI sets out its intended programme of thematic and local area inspections. Additional reviews may also be carried out at any time at the request of Scottish Ministers.										
2.3	Following the publication of reports, an action plan is prepared to address the issues or recommendations that are highlighted within the report.										
2.4	In line with the thematic process agreed in May 2020, once approved, action plans will be presented to the Corporate Board on a quarterly basis, followed by a nominated Committee of the Board to scrutinise progress.										
2.5	At their meeting on 5 October 2023, the Integrated Governance Forum agreed that the action plan regarding The Scottish Fire and Rescue Service Command and Control System HMFSI Report should be scrutinised by the Change Committee.										
3	Main Report/										
3.1	Service's Con	n by HM Fire Service Inspenmand and Control System B, attached as <b>Appendix A</b> .	(CCMS								
3.2	consequence	was a short focussed HI s of the decision to terminate g technical platform.									

<ul> <li>The key findings of the report were categorised under the main headings of: <ul> <li>Why a new mobilising platform was necessary</li> <li>The system specified</li> <li>The performance and resilience of the existing CCMS</li> <li>Contingency for system interruption</li> <li>Other factors</li> </ul> </li> <li>3.4 The report set out several recommendations within 'The Way Forward' and 'Conclus sections of the review report. In response to this, an Action Plan containing six act has been developed, attached as Appendix B. An opening Statement is also availas Appendix C.</li> <li>3.5 As the CCMS project was already well-established, five of the six actions have alrebeen completed. As such, CC members have been provided with a progress upagainst each of the actions of the new Action Plan and are asked to both approve Action Plan and note the update provided*.  *This progress update is from November 2023. A new update is scheduled to presented to the Corporate Board on 21 February 2024.</li> <li>4 Recommendation</li> <li>The CC is invited to: <ul> <li>Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.</li> <li>Approve the actions contained within HMFSI Action Plan the Scottish Fire and Rescue Service</li> </ul> </li> </ul>
sections of the review report. In response to this, an Action Plan containing six act has been developed, attached as Appendix B. An opening Statement is also available as Appendix C.  3.5  As the CCMS project was already well-established, five of the six actions have already been completed. As such, CC members have been provided with a progress upagainst each of the actions of the new Action Plan and are asked to both approve Action Plan and note the update provided*.  *This progress update is from November 2023. A new update is scheduled to presented to the Corporate Board on 21 February 2024.  4 Recommendation  4.1 The CC is invited to:  • Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.  • Approve the actions contained within HMFSI Action Plan the Scottish Fire and Rescue Service's Plant Rescue Service and Rescue Service's Command Control System, attached as Appendix A.
been completed. As such, CC members have been provided with a progress upon against each of the actions of the new Action Plan and are asked to both approve Action Plan and note the update provided*.  *This progress update is from November 2023. A new update is scheduled to presented to the Corporate Board on 21 February 2024.  4 Recommendation  4.1 The CC is invited to:  • Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.  • Approve the actions contained within HMFSI Action Plan the Scottish Fire and Rescue Service.
<ul> <li>presented to the Corporate Board on 21 February 2024.</li> <li>Recommendation</li> <li>The CC is invited to:         <ul> <li>Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.</li> <li>Approve the actions contained within HMFSI Action Plan the Scottish Fire and Res</li> </ul> </li> </ul>
<ul> <li>The CC is invited to:</li> <li>Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.</li> <li>Approve the actions contained within HMFSI Action Plan the Scottish Fire and Res</li> </ul>
<ul> <li>Note the HMFSI Report entitled The Scottish Fire and Rescue Service's Command Control System, attached as Appendix A.</li> <li>Approve the actions contained within HMFSI Action Plan the Scottish Fire and Res</li> </ul>
<ul> <li>Service's Command and Control System, attached as Appendix B, and scrutinise update provided.</li> <li>Note the content of the Scottish Fire and Rescue Service's Command and Col System Opening Statement attached as Appendix C.</li> </ul>
5 Key Strategic Implications
5.1 Risk 5.1.1 There are no risks associated with the recommendations of this report.
5.2 Financial
5.2.1 There are no financial implications associated with the recommendations of this repo
5.2.1 There are no financial implications associated with the recommendations of this repo  5.3  5.3.1 Environmental & Sustainability  There are no environmental implications associated with the recommendations of report.
5.3 Environmental & Sustainability 5.3.1 There are no environmental implications associated with the recommendations of
5.3 5.3.1 Environmental & Sustainability There are no environmental implications associated with the recommendations of report.  5.4 Workforce
5.3 5.3.1 Environmental & Sustainability There are no environmental implications associated with the recommendations of report.  5.4 5.4.1 Workforce There are no workforce implications associated with the recommendations of this report.  5.5 Health & Safety There are no health and safety implications associated with the recommendations of

5.8	Timing						
5.8.1		Action Plar	will be reported to the SMB on a quarterly cycle until completion.				
5.9 5.9.1	Performance		obust challenge and scrutiny of our performance against HMSFI				
0.0.1	recommended improvements.						
5.10	Communicat						
5.10.1	There is no in	nplication a	associated with the recommendations of this report.				
5.11	Legal						
5.11.1	The arrangements for independent inquiries into the state and efficiency of the SFRS are a statutory requirement as laid out in Section 43 of the Fire Scotland Act 2005.						
5.12	Information (						
5.12.1	A Data Protection Impact Assessment (DPIA) is not required for this report as there is no sensitive information to consider.						
5.13	Equalities						
5.13.1	An Equality and Human Rights Impact Assessment (EHRIA) is not required for this this report. These will be captured by Directorate and LSO EHRIAs.						
5.14	Service Delivery						
5.14.1	There are no service delivery implications associated with the recommendations of this report.						
6	Core Brief						
6.1	Not applicable						
7	Assurance (SFRS Board/Committee Meetings ONLY)						
7.1	Director:  David Lockhart, Director of Prevention, Protection and Preparedness						
7.2	Level of Ass (Mark as app		Substantial/Reasonable/Limited/Insufficient				
			Following receipt of Audit Reports, Action Plans are developed				
			in conjunction with Directorates and approved via the Strategic				
7.2	Rationale:		Leadership Team and the nominated Executive Committee of the Board. Quarterly reporting is made to the Corporate Board				
			and nominated Executive Board until full completion of the				
			Action Plan.				
8	Appendices/	Further Re	eading				
8.1	Appendix A: HMFSI Report: The Scottish Fire and Rescue Service's Command and						
	Control Syste	m					
8.2	Appendix B: HMFSI Action Plan: The Scottish Fire and Rescue Service's Comman						
	Control System						
8.3	Annondiy C	HMEGI 1	Opening Statement: The Scottish Fire and Passua Sarvica's				
0.3	Appendix C: HMFSI Opening Statement: The Scottish Fire and Rescue Service's Command and Control System						
		Derek Mi	Ison Area Commander New Mobilising System Project / Louise				
Prepare	d by:	Derek Wilson, Area Commander, New Mobilising System Project / Louise Patrick, Planning and Partnerships Coordinator					
		David Lockhart, Assistant Chief Officer, Director of Prevention, Protection					
Sponso	red by:	and Preparedness					
		and i reparedness					

Drocontod by	David Lockhart, Assistant Chief Officer, Director of Prevention, Protection
Presented by:	and Preparedness

### **Links to Strategy and Corporate Values**

Our audit and inspection process contributes to Strategic Outcome 5 of the Strategic Plan 2022-25: We are a progressive organisation, use our resources responsible and provide best value for money to the public.

Governance Route for Report	Meeting Date	Report Classification/ Comments			
Senior Management Board	15 November 2023	For Recommendation			
Integrated Governance Forum	5 October 2023	For Recommendation			
Change Committee	15 February 2024	For Scrutiny (CCMS)			

## **HM Fire Service Inspectorate**

# The Scottish Fire and Rescue Service Command and Control Mobilising System (CCMS)

#### March 2023

#### 1. INTRODUCTION

- The Scottish Fire and Rescue Service (SFRS) was created in April 2013 as a successor to the eight Fire and Rescue Service's (FRSs) that existed previously. Each of the eight predecessor FRSs had its own control room providing for the receipt of calls, mobilising resources, communications and associated functions.
- 2. The SFRS initiated a change programme known as 'Command and Control Futures' (CCF), ratified by the Fire Board in September 2013. The principal intention of CCF was to deliver:
  - a rationalisation of the eight legacy control room structure into a three site control room model with one each located within the three SFRS Service Delivery Areas, and
  - the procurement and provision of what was described as a new technical platform for the control rooms to replace what had been assessed as ageing systems.
- The CCF site relocation element has been achieved, however the provision of the technical platform has not been achieved despite being subject to procurement and contract award. The awarded contract was terminated in December 2022, four years after award.
- 4. As Chief Inspector, I had concerns regarding the impact this lack of progress might mean for the operational functionality of the Service. After discussion with the Director General for Education and Justice within Scottish Government, I initiated a short focussed HMFSI inspection to consider the operational consequences of the decision to terminate this contract.
- 5. The inspection terms of reference influenced the factors that we examined. These are:
  - the rationale behind the SFRS decision that a new mobilising platform was required;
  - the system specification considered by the SFRS;
  - the suitability of systems in place for mobilising SFRS resources;
  - the resilience of the existing systems;
  - the contingency arrangements for system failure;
  - the revised plans and associated timescale for procurement of a new mobilising system following the decision to terminate the contract.
- 6. We undertook that the outcome of our inspection would report assurance where appropriate, and raise concerns where we felt this was appropriate.
- 7. I wish to thank the SFRS employees who participated in the visits and interviews for their contribution.

#### 2. OVERVIEW OF INSPECTION OUTCOME

- The SFRS control rooms have legacy CCMSs considered to be well after end of life and the resilience of these systems is accordingly vulnerable. The contract cancellation has impacted the introduction of modern replacement systems.
- The Service has procedures in place to support continuity of service of the control room function and has, where possible, improved resilience.
- The SFRS management is aware of the priority that needs to be placed on replacement CCMSs and has a focus on achieving this.

#### 3. BACKGROUND

#### 3.1 Site relocation

- 8. The rationalisation of the SFRS control rooms was achieved by vacating five of the legacy control rooms whilst retaining and developing the remaining three thereby achieving the three site model. As a result the Service now has functioning control rooms in Johnstone, Edinburgh and Dundee. Having different sites provides resilience in the event that a site specific event at one location affects the functionality of that location, though the level of resilience is influenced by the interoperative capability of these sites.
- 9. HMFSI carried out an inspection of the Dundee control room in 2016 following the migration of the functions of the Inverness control room to Dundee. Our inspection report<sup>1</sup> was principally positive in respect of the issues considered and offered a view of the operation of the CCF programme as assessed at that time.
- 10. There had been an earlier working group report<sup>2</sup> into the FRS control rooms of the eight Scottish FRSs following the termination of a Regional Fire Control project in England. This group examined the lessons learned from the Regional Fire Control Report and, aware that Scottish FRS reform was under consideration, included general project recommendations in the report.

#### 3.2 Functions

11. A FRS control room requires a number of capabilities to operate. On a basic level these are:

#### Calls for assistance

<sup>&</sup>lt;sup>1</sup> The Scottish Fire and Rescue Service Operations Control Room in Dundee and Service Delivery and Support in Highland, Western Isles, Orkney Islands and Shetland Islands: HMFSI 2017

<sup>&</sup>lt;sup>2</sup> FiReControl Learning the lessons: Scottish Government Stakeholder Working Group, 2011

Traditionally the FRS would receive calls for assistance by telephone. Caller identity can be associated with location awareness. Automated searching can identify history or risk information where stored, or location can be displayed and there is potential for incorporation of geocodes. Looking forward, there may be the potential for situational awareness such as visual footage from camera phones to assist with mobilising and informing attending crews.

#### Mobilising of resources

The control room system needs to know the location and availability of resources. FRS resources have become more complex with specialist attributes being developed in response to changes in risk and the role of the FRS. A resource based mobilising system will identify the resources with the necessary attributes that are best placed to attend, based on availability, location and journey time.

#### Communicating with resources

Traditionally communication is by radio, using voice or data. Though having other communication channels with real time information available to resources may obviate the need for control staff to respond to requests.

#### · Statistics, analysis and audit reporting

A reporting function will facilitate these.

#### Future needs

A system might have the ability to be modified and adapted within its lifespan to accommodate changes or additions to functionality, though it may be difficult to know what demands and changes the future may bring.

#### 4. INSPECTION FINDINGS

#### 4.1 Why a new mobilising platform was necessary

- 12. The three OCs are equipped with a CCMS that was considered to require replacement because each was deemed to be at end of life. The systems required specialist support arrangements due to their age and were reliant on older hardware, the supply of which was likely to become more difficult to source over time. The systems did not offer interoperability between control rooms, and the process of procuring a single platform was seen as an opportunity to improve resilience and efficiency by enabling fully functional interoperability between the control rooms.
- 13. Work was carried out to each of the three existing CCMS in place as part of the merger process of control rooms in the three SDAs; West (2014), East and North (2016). The adaptions involved merging data and information to allow the control rooms to continue to function for the whole of the SDAs.
- 14. Due to the age of the systems, these adaptions resulted in OC systems requiring several manual processes in order to effectively handle calls and mobilise resources. These adaptions were seen as a 'stop gap' until a new CCMS could be sourced and implemented.

#### 4.2 The system specified

- 15. The SFRS decided that it would require a single proven Command and Control supplier to design, supply, install, commission and maintain the system. The SFRS' specification of requirements included:
  - A CCMS which would provide everything from management of telephony and radio calls to dispatch of resources, incident management, records management, provision of full audit log and support for mobilised resources.
  - Interoperability by incorporating the ability to intelligently route calls to the most appropriate OC in Scotland, and to allow any Scottish OC to manage telephony and radio calls from anywhere across Scotland to mobilise the most appropriate SFRS resource regardless of the OC or resource location.
- 16. The specification for the new system was lengthy, detailed and prescriptive and the view has been expressed to us, with the benefit of hindsight, that the original specification was overly detailed and prescriptive.
- 17. As a consequence of the large number of requirements and the amount of detail in the original specification, a number of prospective suppliers were deemed to be unable to fulfil the requirements.
- 18. Systel; (Systèmes et Telecommunications), a company based in France, was the only applicant declaring the ability to fulfil the requirements, and was awarded the contract in January 2018.
- 19. The SFRS then ran the project with a project team and received external scrutiny and major project assurance from the Scottish Government Digital Assurance Team.

#### 4.3 The performance and resilience of the existing CCMSs

- 20. In a FRS control room, the technical systems and equipment used need to be fit for purpose and interoperability between control rooms allows resilience arrangements to operate. We examined the position in the three SFRS control rooms.
- 21. The two main components of each OC's CCMS are an Integrated Communications Control System (ICCS) for radio and telephony and a Computer Aided Dispatch (CAD) system for mobilising, gazetteer and mapping - along with peripheral supporting systems such as on call resource availability.
- 22. It should be mentioned that there has been some investment in SFRS infrastructure in recent years relative to the planned implementation of Systel. It is understood this work and investment has not been wasted and it is envisaged that this will facilitate any new CCMS implementation. Examples of this infrastructure include standardisation of stationend equipment and network capability (WAN Wide Area Network) and the rationalisation of call-signs programme. There has also been the implementation of SIP (Session Initiation Protocol), which improves resilience by having links to more than one telephone exchange. SIP is not yet functional at Dundee OC (DOC) and Edinburgh OC (EOC) due to the inflexibility of current systems.

#### **Dundee OC (DOC)**

- 23. The system at DOC is Vision, which is a combined ICCS and CAD system. The system is newer than those in place at Johnstone OC (JOC) and EOC. However, being originally installed in 2006 it is still considered an old system and relies on old hardware which has become difficult to source replacement parts for.
- 24. The system is a different version of the Vision system in place at EOC, though is supported by the same supplier under the same support contract. Due to being a different version than at EOC, there is no interoperability potential between the systems.
- 25. There have been significant issues in recent years regarding the integrated telephony system at DOC which resulted in considerable attention by SFRS ICT and the support contractor to rectify.
- 26. A decision has been made to limit the volume of data on the system to improve resilience. The result being that some address related information is held separate to the system itself, which has involved a manual element for operators.
- 27. DOC has an integrated ICCS, which means there is a single point of failure. If any part of the system fails, it all fails. However, the arrangements in place at the Dundee Standby facility is a standalone ICCS, which gives more flexibility if one part of the system fails.

#### Johnstone OC (JOC)

- 28. The systems in place at JOC are Motorola Procad and Capita/Sungard. The systems generally function as required and allow JOC to carry out the required functions in the West SDA.
- 29. The CCMS at JOC was inherited from legacy arrangements and was adapted when the West SDA OCs merged in 2014. This resulted in some loss of functionality and some manual processes for OC personnel were implemented as a consequence. An example of this is OC staff having to manually update certain availability at change of shift, which was an automated process previously.
- 30. The system is now considered to be old technology, although the software itself is understood to be fairly reliable in terms of its stability. However, the hardware is dated and finding replacement parts when required is likely to be difficult to achieve, time consuming and costly.
- 31. The SFRS has a support contract in place with Motorola. The Service has some concerns around the availability of expertise to provide support in the long term.

#### **Edinburgh OC (EOC)**

- 32. The Systems at EOC consist of Northgate ICCS and Vision CAD system.
- 33. There are a number of manual processes which have become practice for operators handling emergency calls. This is mainly as a result of the merging of legacy control rooms in 2016 and the inflexibility of not being able to incorporate elements of other legacy CCMS into the current system. There is understood to have been some upgrade to the current system in 2016 as part of the merger process.

- 34. The server which hosts the CCMS for EOC had not been restarted for six months at the time of our visit in late December 2022. This is due to concerns over the system's resilience following previous difficulties which arose when attempting to carry out this process. All required changes have been stored to allow update in due course. A decision has not yet been communicated on when and how the server will be updated. As a result of this, there are six months' worth of information and data which has not been uploaded onto the system. This includes information on Flexi Duty Officers' details and certain mobilising instructions. All amendments to be added are communicated to personnel, but this results in control staff having to refer to various sources of information, some paperled as a work around. We were advised that the system does not often fail on its own.
- 35. EOC is working on Vision version 3. A support contract is in place with SSS Public Safety. Version 3 is an older system relying on ageing hardware.
- 36. In addition to the system failure risk due to age, the control room suite has major building issues with rainwater ingress which poses a risk to resilience.

#### 4.4 Contingency for system interruption

#### **ICT and Supplier Support Arrangements**

- 37. All three OCs have a process for raising faults and issues relating to their CCMS, which involves submitting a request for assistance with SFRS ICT department as a helpdesk request. There is an OC/ICT Service Level Agreement, and fault response is graded by impact. The prioritising and addressing of faults helps to ensure business continuity at each OC.
- 38. SFRS ICT department staff rectify faults for issues relating to the SFRS supplied hardware or software. For faults relating to supplied CCMS software or hardware, there are two support contracts in place (Motorola for JOC, and SSS Public Safety for EOC and DOC). Staff from the ICT department liaise with suppliers directly to try and facilitate a remedy for the reported fault. Both SFRS ICT and the support contractors provide support outside normal business hours.
- 39. The support contracts in place run until July 2023 for JOC, and March 2023 for EOC and DOC.
- 40. As all three CCMSs use old technology, the Service has some concerns around whether the level of expertise to provide the required support will be available in the long term.
- 41. The SFRS ICT department is aware of the fragility of the systems and as a method of managing system capacity and resilience system restarts and updates are managed and controlled. System updates are completed with the relevant system support contractor's advice and involvement. In some cases, data additions and server updates have been held back due to concerns over capacity and fragility of systems.
- 42. The SFRS has concern over one of the support suppliers' ability to provide continued service for an ageing product beyond the calendar year of 2023 due to the age of the system. To this end, SSS Public Safety is providing its current support on a 'reasonable-endeavours only' basis, reducing assurance and highlighting concerns regarding the fragility of the system in use at EOC and DOC.

#### **Business Continuity**

- 43. All three OCs have local buddy arrangements in place. In the event that one of the OCs cannot take a 999 call, due to spate calls or system failure for example, the call will be diverted by BT to another OC. DOC and EOC are 'buddies' as are JOC and Northern Ireland Fire and Rescue Service Control. This arrangement provides assurance that 999 calls can still be received by control staff even in the event of issues referred to above.
- 44. There is also a UK system in place Operation Willow Beck<sup>3</sup>. This is supported by the National Fire Chiefs Council (NFCC) and has been designed in collaboration with the Home Office and key partners to mitigate increased emergency call volumes during spate call conditions. This call distribution process allows BT to route calls to control rooms with capacity, without over-burdening a single buddy control room. SFRS has not experienced outwardly routed calls due to spate conditions, but has handled calls for other FRSs when Operation Willow Beck has been implemented. We were advised by staff that this arrangement also offers resilience if one of the SFRS OCs cannot handle calls due to a system outage.
- 45. As each of the OCs are operating on different systems, they are not able to mobilise resources to incidents within another SDA at short notice. Typically, a 'buddy' OC would log calls and ultimately pass these back to the OC to mobilise resources to. If the system outage was to last for a longer period, all OCs have the ability to implement 'Crash Laptops' to be able to mobilise resources in another SDA.
- 46. The provision of backup servers provide resilience that if one server fails, the back-up option, although not necessarily instantaneously, would enable the functionality of CCMS after a period of down-time.
- 47. Each OC has a number of laptops to use as back up if their own system fails, or as business continuity if another OC has a total system outage. These fallback arrangements require a level of manual intervention by operators.
- 48. Each OC has a standby facility at a physically separate location to allow staff to relocate to if the OC site is unusable due to building access and use issues, for example. These locations involve staff travelling to the alternative site, and arrangements are in place to facilitate travel. However, this arrangement would still rely on the use of crash laptops in the event of a total system outage. Equipment available at Standby locations are tested regularly, though due to staffing having been at consistently low levels the weekly testing regime has not always been consistently maintained.
- 49. The provision of stand-by locations would not be necessary if there was a system of full interoperability between the OCs, but at present the stand-by arrangements provide a degree of resilience for continuity of functions.
- 50. Each OC has a Business Continuity Plan and Evacuation Plans are in place which are tested regularly. These plans have been tested but there has not been an exercise to incorporate the scenario of a prolonged downtime of any CCMS.
- 51. The SFRS has procured a disaster recovery option of CCMS, 'Vision 5' for use in DOC and EOC, due to the Systel system not being implemented. This was a condition of the ongoing maintenance contract. We were told, "This is to see us through this period until a

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<sup>&</sup>lt;sup>3</sup> National Fire Chief's Council News article, May 2022.

- *new system is in place.*' However, due to system difficulties, this disaster recovery version is not yet fully installed.
- 52. The fact that the three OCs use a different CCMS with no interoperability means that in the event of total failure of a single system, the other two systems will not be directly affected by the other CCMS' fault. Consequently, at any one time, only one OC will be directly impacted by the total failure of a CCMS.

#### 4.5 Other factors

#### **Technology Changes and Key Dates**

53. There are some pending key dates, which impact on the priority to modernise the current CCMS at all three OCs.

The implications of the ISDN (Integrated Services Digital Network) switch off means that all three current CCMS will not be compatible with replacement technology from December 2025. Furthermore, the Home Office is delivering a new Emergency Services Network (ESN) which will replace the current Airwave radio system used by Emergency Services, the deadline for which for SFRS is also anticipated to be towards the end of 2025.

54. If the Systel Contract had been successfully implemented on time, technology changes would have been accommodated in a new system. The impact of a delay to implementing a replacement CCMS results in an increased risk of having equipment in place which is not compatible with the ISDN switch off and ESN implementation.

#### Consideration of electricity outages

55. SFRS has included in its overall resilience planning the consideration of power outages. Each Standby Control has back-up generators in place which are tested regularly. In the event of a mains electricity outage, in order to limit the impact of a change over from mains electricity to fuel powered generator supply, there has been investment in the UPS (uninterrupted power supply) backup systems at OCs. This has been carried out with the aim of reducing the risk of a potential 'cold start' of a server. A 'cold start' is an unplanned shut-down of a server, which would then require to be restarted from cold. There are concerns due to the fragility of systems that a cold start of a server could result in a significant system failure which may be difficult to recover from.

#### Staffing Levels

56. The OCs each have different workload demands and therefore different staffing arrangements. Staffing levels at all three OCs have been impacted as a result of staff turnover and absence. There has been a reliance on overtime on a regular basis to be able to maintain minimum staffing levels in OCs.

#### 5. THE WAY FORWARD

57. The SFRS management acknowledges the pressing requirement of sourcing, implementing and establishing suitable CCMS to replace current systems and apply the resources and focus to make this happen.

- 58. To accommodate network and telephony technological changes, replacement CCMS system(s) should be in place by summer 2025. This is to allow a period of settling prior to the ISDN and ESN network changes towards the end of 2025.
- 59. Having terminated the Systel contract, the SFRS is undertaking procurement afresh of a new CCMS system. The first stage of this is the appointment of a Client Advisor and this element is anticipated to be in place by February 2023.
- 60. The system procurement process itself is expected to take around nine months. The Service considered different procurement route options and has opted for what it believes to be the most appropriate in light of the prevailing issues of desired timescale and risk of challenge. There is also the potential to use supplier pre-qualification within an existing Emergency Services command and control systems framework, to accelerate the procurement process.
- 61. The Service may source and implement 'off the shelf' replacement systems to improve stability and meet deadlines in the short term. This seems an obvious strategy given that the original desire to create a bespoke system may in part have had an influence on the supplier's ability to deliver. Systems may be introduced as stand-alone without interoperability between OCs. This may be viewed by some to discount one of the original drivers of improved resilience and efficiency by enabling interoperability between OCs. The long term solution may still be the provision of a single CCMS spanning across the three OCs achieved by the procurement and implementation of three separate CCMS systems to be provided by the same supplier and set up with the same configuration which may allow future interoperability.
- 62. We spoke to a selection of staff with knowledge of the operational and technical requirements. They are confident that the target of establishing replacement systems by 2025 is achievable, though there are challenges involved. However, they also highlighted the importance of getting things right in terms of procurement, appointing of a competent supplier and maintaining focus by prioritising implementation.
- 63. There are thought to be a number of blue light services in the UK commencing procurement for CCMS at a similar time to the SFRS, and there may therefore be challenges in terms of supplier capacity to deliver.
- 64. There has been significant turnover of personnel over the period of the Systel project. As an example, there have been five different Senior Responsible Officers and seven project managers. We think it important that the Service puts in place suitable project team members to drive the project forward and maintain focus.

#### 6. CONCLUSION

65. The SFRS has three control rooms each with old CCMS systems which are at end-of-life. The risk of system failure is acknowledged by the Service and is high on the SFRS risk register. The implementation of a Systel system would have replaced the old systems. Contrary to its plans, the Service is in a situation which requires it to start new procurement and subsequently an implementation process, whilst maintaining the current systems for longer than had planned.

- 66. The SFRS has two support contracts with external providers to support its current systems. Due to the age of the systems, one of the contractors will only commit to a 'reasonable endeavours only' basis of rectifying issues.
- 67. The contingency measures the SFRS has put in place provides assurance that 999 calls will continue to be answered. However, in the event of a total system failure, the manual work arounds to carry out functions of the OC may impact significantly on staffing, depending on the length of time a CCMS is down.
- 68. There has been testing of evacuation and business continuity plans. However, it is understood the scenario of a prolonged downtime of any CCMS has not been tested, the potential for which is foreseeable and should be considered by the SFRS' management.
- 69. In order to maintain and prolong the CCMS systems, the SFRS ICT department arrange careful management of system updates assisted by external support contractors.
- 70. The Service has taken advice on improving resilience of systems by optimising power supply arrangements and procuring a disaster recovery option for two of the systems.
- 71. The management of system updates and limiting the addition of data within some elements of systems has resulted in the creation of operational workarounds for control staff, the level of which vary between control rooms.
- 72. The three CCMS systems in place are not compatible with changes which will occur toward the end of 2025. These are the ISDN switch off and the Home Office implementation of the Emergency Services Network (ESN) to replace the Airwave radio system. The replacement technology to accommodate this must be fully established prior to this date.
- 73. Establishing replacement CCMSs to the above timescales appears achievable, but with time constraints now at a critical level, it is important that the SFRS management provide appropriate support and resources to the CCMS project team and completion of this project as a priority.
- 74. Due to the tight timescales to complete the CCMS project, skill-set and continuity of the project team is an important factor which should be considered by SFRS. The Service should evaluate requirements against the skill-set available to support their focus of achieving the sourcing and implementation of a fit for purpose CCMS within the time deadline.

## Glossary

CAD	computer assisted dispatch
CCF	Command and Control Futures
CCMS	command and control mobilising system
DOC	Dundee Operations Control
EOC	Edinburgh Operations Control
ICCS	Integrated communications control system
JOC	Johnstone Operations Control
ОС	'Operations Control' the SFRS designation for control room
SDA	Service Delivery Area

### **Appendix**

#### **About HM Fire Service Inspectorate**

His Majesty's Fire Service Inspectorate in Scotland (HMFSI) is a body that operates within, but independently of, the Scottish Government (SG). Inspectors have the scrutiny powers specified in section 43B of the Fire (Scotland) Act 2005. These include inquiring into the state and efficiency of the SFRS, its compliance with Best Value, and the manner in which it is carrying out its functions.

HMFSI Inspectors may, in carrying out inspections, assess whether the SFRS is complying with its duty to secure Best Value and continuous improvement. If necessary, Inspectors can be directed by Scottish Ministers to look into anything relating to the SFRS as they consider appropriate.

We also have an established role in providing professional advice and guidance on the emergency response, legislation and education in relation to the Fire and Rescue Service in Scotland.

#### How this inspection was carried out

This inquiry is self-directed by HM Chief Inspector.

The Inspection team members were:

- Robert Scott QFSM, Chief Inspector
- Brian McKenzie, Assistant Inspector (Lead Inspector)
- Iain Cameron, Inspection Officer (Seconded from the SFRS)

All the members of the inspection team contributed to the development of this report and the quality assurance provided a professional challenge to the contents, assumptions and conclusions made.

Our report reflects the circumstance at the time of our visits and interviews which were undertaken between December 2022 and January 2023.

This inspection was not a comprehensive in-depth audit, albeit it is sufficiently detailed in order for the Chief Inspector to give a professional judgement on the activity and suitability of the Service's arrangements within an operational context.

## **Methodology**

A draft outline was prepared which defined the scope of the inspection.

We undertook a desk-top review of the documents supplied to us by the SFRS.

We visited each of the SFRS control rooms and spoke with a manager and, where it was possible, a staff member.

We interviewed relevant SFRS managers and employees involved in the project.

#### Scottish Fire and Rescue Service Command and Control Mobilising System - Action Plan Progress

	APPENDIX B
Updated	Next Update
Nov-23	Feb-24

HMFI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	RAG	Evidence
To accommodate network and telephony technological changes, replacement Command and Control Mobilising Systems (CCNS) system(S) should be in place by summer 2025. This is to allow a period of settling prior to the ISDN and ESN network changes towards the end of 2025.	1	Engage with potential suppliers to establish whether a target date of December 2025 for the implementation of a new CCMS in all three Operations Control rooms, is achievable and project plan accordingly.	Project Lead	Jun-23	N/A	Complete	15 November 23: SFRS invited all suppliers on Crown Commercial Services (CCS) Framework RM6259 to its Supplier Information Day on 5 June 23. Suppliers were given a high level overview of SFRS's requirements and timelines and were asked a number of questions including feasibility to implement by December 2025, which they were requested to respond to by 16 June 23. SFRS received four supplier responses and confirmation that December 2025 implementation was achievable and that the best method was to Go Live with one Operations Control at a time but integrate as we go, meaning that any issues would be identified and resolved before moving on to and integrating the next. Thus achieving implementation and settling ahead of the December 25 deadline. This view was supported and endorsed by SFRS Technical Advisors Actica.	100%	Jun-23	Complete	1) SFRS Supplier Information Day PowerPoint presentation, 2) Supplier responses to Supplier Information Day questions.
Having terminated the Systel contract, the SFRS is undertaking procurement afresh of a new CCMS system. The first stage of this is the appointment of a Client Advisor and this element is anticipated to be in place by February 2023.	2	Appointment of Technical Advisor.	Project Lead	Feb-23	N/A	Complete	15 November 23: SFRS carried out a Quick Quote procurement process and appointed Independent Industry Expert Technical Advisors (Actica) on 8 February 2023.	100%	Feb-23	Complete	1) Actica letter of award of contract dated 08/02/2023
The system procurement process itself is expected to take around nine months. The Service considered different procurement route options and has opted for what it believes to be the most appropriate in light of the prevailing issues of desired timescale and risk of challenge. There is also the potential to use supplier pre-qualification within an existing Emergency Services command and control systems framework, to accelerate the procurement process.	3	Utilise Crown Commercial Services Vertical Applications Solutions Framework (RM6259) as the route to procure a CCMS.	Project Lead	Apr-24	N/A	In Progress	15 November 2023: Following a request for external legal advice in relation to Crown Commercial Services (CCS) Framework RM6259, 5FRS received advice in September and October 2023 indicating the potential for legal challenge. A paper was submitted to SFRS Board on 26 October requesting a change in procurement route from Framework to Open, which was approved in principle. The New Mobilising System (NMS) Invitation to Tender (ITT) is being revised accordingly for the purposes of procuring a new solution via open procurement. Procurement quality reviews of the ITT have been undertaken and revised documentation is being presented through governance including Change Portfolio Investment Group (08/11), Change Committee (09/11), external desktop review via Digital Assurance Office (w/c 13/11 and 20/11), SFRS Board 23/11, and final response by Scottish Government DAO w/c 27/11. Procurement have issued a Prior Information Notice (PIN) to the market and the NMS ITT will be issued on a revised timeline of end November/early December 2023. Bid evaluation will follow in February 2024, and award of contract in April 2024.	80%		Green	1) SFRS Board paper 'Overview of the options for a replacement Command and Control Mobilising System' 2) CCS RM6259 Procurement documentation 3) SFRS Board paper 'NMS procurement procedure'
The Service may source and implement 'off the shelf' replacement systems to improve stability and meet deadlines in the short term. This seems an obvious strategy given that the original desire to create a bespoke system may in part have had an influence on the supplier's ability to deliver. Systems may be introduced as stand-alone without interoperability between OCs. This may be viewed by some to discount one of the original drivers of improved resilience and efficiency by enabling interoperability between OCs. The long term solution may still be the provision of a single CCMS spanning across the three OCs achieved by the procurement and implementation of three separate CCMS systems to be provided by the same supplier and set up with the same configuration which may allow future interoperability.	4	Ensure that Project Objectives within the Project Brief reflect the need for a 'Commercial off the shelf' solution and one which has the ability to be integrated across more than one site.	Project Lead	Mar-23	N/A	Complete	15 November 23: SFRS New Mobilising System (NMS) Project Brief captures the requirement to procure a Commercial off the shelf (CoTS) solution within its objectives. The Project Brief has been reviewed and approved by the NMS Project Board before subsequently progressing for approval through the required governance routes subsequently being signed off in February 2023.	100%	Feb-23	Complete	1) SFRS Supplier Information Day PowerPoint presentation, 2) Supplier responses to Supplier Information Day questions, 3) NMS Project Brief
There are thought to be a number of blue light services in the UK commencing procurement for CCMS at a similar time to the SFRS, and there may therefore be challenges in terms of supplier capacity to deliver.	5	Engage with National Fire Chiefs Council Procurement Hub to establish the number of other FRSs commencing procurement in 2023/24.	Project Lead	Jun-23	N/A	Complete	15 November 23: SFRS engaged with the National Fire Chiefs Council procurement hub initially at the Sector and Supplier event in December 2022, and then subsequently via a number of Teams meetings. This was further supplemented by SFRS engaging with other UK fire and rescue services in May 2023 who were out to procurement to gain insight and feedback, and through discussion and market insight from SFRS's appointed independent Technical Advisors (Actica). A SFRS Supplier Information Day was held in June 2023, and the responses following have all contributed to indicate that there is the desire to bid for SFRS's tender and the capacity to fulfil it.	100%	Jun-23	Complete	NFCC Procurement hub Teams meeting invites, 2) UK FRS's Teams meeting invites, 3) Supplier responses to Supplier Information Day questions
There has seen significant turnover of personnel over the period of the Systel project. As an example, there have been five different Senior Responsible Officers and seven project managers. We think it important that the Service puts in place suitable project team members to drive the project forward and maintain focus.	6	Recruitment of a Project team consisting of professional Project Management roles along with Uniformed Subject Matter Experts.	SRO	Apr-23	N/A	Complete	15 November 23: The New Mobilising System (NMS) project was moved to Service Development on 09 January 2023 with ACO David Lockhart appointed as Senior Responsible Officer from that date. AC Derek Wilson, previously appointed Project Manager with Command and Control Futures Project moved across to become Project Lead for NMS from that date. Falling within Service Development the NMS Project sits within the Portfolio Office and benefits from the qualified and professional project management structure, guidance and support therein. Senior Project Manager Clare Adams is a qualified and experienced project manager and was onboarded 16 April 2023. Uniformed Operations Control Subject Matter Experts include Group Commander Jill Barber, Station Commander Caroline Rennie, Watch Commander Elaine Baird and Crew Commander Sandra Crampsey.	100%	Apr-23	Complete	1) NMS Project location within Service Development, Portfolio Office, 2) NMS Project structure

## HMFSI AUDIT AND INSPECTION POSITION STATEMENT COMMAND AND CONTROL MOBILISING SYSTEM

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COMMAND AND CONTROL	
Recommendation 1	To accommodate network and telephony technological changes, replacement Command and Control Mobilising
	Systems (CCMS) system(s) should be in place by summer 2025. This is to allow a period of settling prior to the ISDN
	and ESN network changes towards the end of 2025.
Action 1	Engage with potential suppliers to establish whether a target date of December 2025 for the implementation of
	a new CCMS in all three Operations Control rooms, is achievable and project plan accordingly.
Opening position statement	Given the target implementation date of December 2025 for a New Mobilising System (NMS), the Project Team require
at Month and Year	to engage with the market and potential suppliers to determine if this can be achieved using a Commercial off the Shelf
	solution.
Closing position statement	
at Month and Year	
Recommendation 2	Having terminated the Systel contract, the SFRS is undertaking procurement afresh of a new CCMS system. The first
Recommendation 2	stage of this is the appointment of a Client Advisor and this element is anticipated to be in place by February 2023.
Action 2	Appointment of Technical Advisor.
Opening position statement at	To support the procurement of a New Mobilising System (NMS) the Project Team require to undertake a Quick Quote
Month and Year	procurement process to appoint an independent industry expert technical advisor.
Closing position statement	
at Month and Year	
Recommendation 3	The system procurement process itself is expected to take around nine months. The Service considered different
	procurement route options and has opted for what it believes to be the most appropriate in light of the prevailing issues
	of desired timescale and risk of challenge. There is also the potential to use supplier pre-qualification within an existing
	Emergency Services command and control systems framework, to accelerate the procurement process.
Action 3	Utilise Crown Commercial Services Vertical Applications Solutions Framework (RM6259) as the route to
	procure a CCMS.
Opening position statement	To minimise the timescales and risk associated with the procurement of a New Mobilising System (NMS) the Project
at Month and Year	Team must progress mini competition from a suitable Crown Commercial Services (CCS) Framework.
Closing position statement	
at Month and Year	
Recommendation 4	The Service may source and implement 'off the shelf' replacement systems to improve stability and meet deadlines in
	the short term. This seems an obvious strategy given that the original desire to create a bespoke system may in part
	have had an influence on the supplier's ability to deliver. Systems may be introduced as stand-alone without
	interoperability between OCs. This may be viewed by some to discount one of the original drivers of improved resilience
	and efficiency by enabling interoperability between OCs. The long-term solution may still be the provision of a single
	CCMS spanning across the three OCs achieved by the procurement and implementation of three separate CCMS
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## HMFSI AUDIT AND INSPECTION POSITION STATEMENT COMMAND AND CONTROL MOBILISING SYSTEM

	systems to be provided by the same supplier and set up with the same configuration which may allow future interoperability.
Action 4	Ensure that Project Objectives within the Project Brief reflect the need for a 'Commercial off the shelf' solution and one which has the ability to be integrated across more than one site.
Opening position statement at Month and Year	In procuring a New Mobilising System (NMS) the Project Team require to engage with the market and suppliers to determine the most successful route to implementing a replacement CCMS, in the most efficient timeframe, utilising a Commercial off the Shelf system.
Closing position statement at Month and Year	
Recommendation 5	There are thought to be a number of blue light services in the UK commencing procurement for CCMS at a similar time to the SFRS, and there may therefore be challenges in terms of supplier capacity to deliver.
Action 5	Engage with National Fire Chiefs Council Procurement Hub to establish the number of other FRSs commencing procurement in 2023/24.
Opening position statement	To ensure the best chance of successful procuring and implementing a New Mobilising System the Project Team
at Month and Year	require to engage with other Fire and Rescue Services, including the National Fire Chiefs Council Procurement hub, to determine market capacity for this to be achieved.
Closing position statement at Month and Year	
Recommendation 6	There has seen significant turnover of personnel over the period of the Systel project. As an example, there have been five different Senior Responsible Officers and seven project managers. We think it important that the Service puts in place suitable project team members to drive the project forward and maintain focus.
Action 6	Recruitment of a Project team consisting of professional Project Management roles along with Uniformed Subject Matter Experts.
Opening position statement	Long term resourcing of the New Mobilising System (NMS) Project Team must be considered to enable professional
at Month and Year	project management, long term stability, and momentum.
Closing position statement	
at Month and Year	

## SCOTTISH FIRE AND RESCUE SERVICE

## **Change Committee**



Report No: C/CC/04-24

Agenda Item: 9.1

Agenda Item: 9.1											
Report t	to:	CHANGE COI	CHANGE COMMITTEE								
Meeting	Date:	15 FEBRUAR	15 FEBRUARY 2024 (DATA AS OF: 10 JANUARY 2024)								
Report	Title:	PORTFOLIO (	OFFICE RIS	K LOG	COV	ER PA	PER				
Report (	Classification:	For Scrutiny		Board/Committee Meetings OI For Reports to be held in Priv Specify rationale below referrin Board Standing Order 9					Private erring	е	
				<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	E	E	G	
1	Purpose										
1.1		of this report is to risks that could im to Office.									
2	Background										
2.1	potentially im	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.									
3	Main Report	/Detail									
3.1		ow shows the totale showing a curren			_		ored th	rough	the Po	rtfolio	
3.1.1		an now be found inder Project Risks a							<u>rd Sun</u>	<u>nmary</u>	
3.1.2	TOTAL = 9										
	NMS031: There is a risk of legal challenge to procurement process at award stage / standstill v may extend timescales, costs, or result in non-award contract. Rating 16.  POST004. There is a risk that now systems.							dstill w n-awa	hich rd of		
	Rating		ROST004 There is a risk that new systems as processes are not fully adopted because of a lack alignment of policies resulting in a failure to deliv benefits. Rating 15					k of			
	No change	7	ESN009, PFFT006, NMS003,0		3,026						

Closed/ Removed	0						
PROJECT	NMS	SDMP	ESN	iHub	PPFT	Rostering	
RED	3	0	1	0	2	0	
AMBER	2	0	0	0	0	1	

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.

## 3.1.3 Portfolio Office Projects Risk Report

Risk ID	Status	Risk Description	Risk Owner	Strategic Outcome ID	Risk Rating	Target	Previous Risk Ratii
ESMCP009	Treat	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	2	16	4	16
NMS008	Tolerate	There is a risk that the number of FRS entering CCMS procurement in 2023 presents a challenge to market capacity to deliver which will result in fewer tender bids being received	Project Lead	5	16	6	9
NMS026	Treat	There is a risk that the delay in publication of SFRS's NMS ITT will reduce available implementation timescale for the successful supplier resulting in additional supplier and SFRS resourcing being required through Phase 1 implementation.	Project Lead	5	16	6	16
NMS031	Treat	There is a risk of legal challenge to the procurement process at award stage / standstill which may extend timescales, costs, or result in non-award of contract	Procurement Lead	5	16	12	
PPFT006	Treat	This is a risk that the work currently undertaken with Scottish Government Shared Service Programme and Police Scotland having no agreed completion milestone could lead to the project being delayed significantly	Lyndsey Gaja	3	16	4	16
PPFT007	Treat	There is a risk that the work currently undertaken with Scottish Governemnt Shared Service Programme Police Scotland having no agreed completion milestone could lead to increased project costs	Lyndsey Gaja	3	16	4	16
NMS003	Treat	There is a risk that procurement resources to progress to award of contract in an optimal timeframe are insufficient which will result in delay of project delivery	Procurement	5	15	6	15
NMS004	Treat	There is a risk that delays to achieveing successful compliance with Scottish Government Digital Assurance Office (DAO) Technical Assurance Reviews may impact upon project timelines and result in a delay to project delivery	SRO	5	15	2	15
ROST004	Treat	There is a risk that new systems and processes are not fully adopted because of a lack of alignment of policies resulting in a failure to deliver benefits.	Seb O'Dell	3	15	8	12

4	Recommendation
4.1	The CC is asked to:
7.1	a) Note the contents of the current report
	b) Consider the risk mitigation actions within the report and provide feedback as
	necessary.
	·
5	Key Strategic Implications
5.1	Risk
5.1.1	As section 3
5.2	Financial
5.2.1	There are no direct financial implications associated with this report.
5.3	Environmental & Sustainability
5.3.1	There are no direct key environmental & sustainability implications arising from this report.
5.4	Workforce
5.4.1	There are no direct key workforce implications arising from this report.
5.5	Health & Safety
5.5.1	There are no direct Health and Safety implications associated with this report.
5.6	Health & Wellbeing
5.6.1	There are no direct Health and Wellbeing implications associated with this report.
5.7	Training
5.7.1	There are no direct training implications associated with this report.
5.8	Timing
5.8.1	There are no direct key performance implications arising from this report.
5.9	Performance
5.9.1	There are no direct key performance implications arising from this report.
5.10	Communications & Engagement
5.10.1	There are no direct key performance implications arising from this report.
5.11	Legal
5.11.1	There are no direct key legal implications arising from this report.
5.12	Information Governance
5.12.1	A Data Protection Impact Assessment is not required as there is no personal/sensitive
	information on this cover paper.
5.13	Equalities
5.13.1	An Equalities Impact Assessment is not required as there is no personal/sensitive
	information on this cover paper.
5.14	Service Delivery
5.14.1	There are no direct key Service Delivery implications arising from this report.
6	Core Brief
6.1	Not applicable

7	Assurance (Board/Committee Meetings ONLY)					
7.1	Director: Liz Barnes, Interim Deputy Chief Officer Corporate Services					
7.2	Level of Assurance: (Mark as appropriate)  Substantial/Reasonable/Limited/Insufficient					
7.3	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.					
8	Appendices/Fu	rther Reading				
8.1	Further Reading: Risk Management Policy					
Prepared	Prepared by: Joan Nilsen, Programme Officer					

Prepared by:	Joan Nilsen, Programme Officer				
Sponsored by:	Liz Barnes, Interim Deputy Chief Officer Corporate Services				
Presented by:	Gillian Buchanan, Portfolio Manager				

### **Links to Strategy and Corporate Values**

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.

Governance Route for Report	Meeting Date	Report Classification/ Comments
Change Committee	15 February 2024	For Scrutiny

## SCOTTISH FIRE AND RESCUE SERVICE

## **Change Committee**



Report No: C/CC/06-24

Agenda Item: 9.2

			Ag	enda i	tem:	9.2		
ort to: CHANGE COMMITTEE								
Date:	15 FEBRUARY 2024							
Title:	RISK UPDATE REPORT							
Classification:	For Scrutiny	For Reports to be held Specify rationale below i						е
		<u>A</u>	<u>B</u>	<u>C</u>	D	<u>E</u>	Ē	<u>G</u>
Purpose								
	•	e Chan	ge Co	mmitte	e with	an ove	erview	of the
Background								
Assurance proce	esses, providing additional a							
and the Accou	ntable Officer on the ad	èquacy	and	effecti	veness	of th	ne Ser	vice's
management of reflection of the champion the ir	The Strategic Leadership Team (SLT) has responsibility for the identification and management of risk and will ensure that Risk Registers present a fair and reasonable reflection of the most significant risks impacting upon the organisation. The SLT will champion the importance of risk management in supporting the achievement of the Service's strategic outcomes and objectives.							
Risk Registers are prepared in consultation with the Board and SLT and are managed collectively by the SLT, with each Directorate Risk allocated to an identified Head of Function. These Responsible Owners provide information on the current controls in place and identify additional actions still required.								
Main Report/Detail								
Risk Overview 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.								
with only those r allow scrutiny to	isks rated 15 or above to be be focused on the most sig	e includ	led witl	nin rep	orting t	emplat	es. Th	is will
	Purpose The purpose of current risks high  Background The purpose of Assurance procerequired to mining The Audit and Frand the Accourangements for the Strategic I management of reflection of the champion the in Service's strategic Risk Registers a collectively by the Function. These and identify additional identify additional management of reflection of the champion the information of the collectively by the function. These and identify additional identify additional identify additional identification of the collectively by the function of the collectively by the collectively by the function of the collectively by	Title:  RISK UPDATE REPORT  Purpose  The purpose of this report is to provide the current risks highlighted by Directorates.  Background  The purpose of the risk register is to in Assurance processes, providing additional a required to minimise these risks.  The Audit and Risk Assurance Committee and the Accountable Officer on the ad arrangements for risk management and has The Strategic Leadership Team (SLT) I management of risk and will ensure that F reflection of the most significant risks improhampion the importance of risk manage Service's strategic outcomes and objectives.  Risk Registers are prepared in consultation collectively by the SLT, with each Director Function. These Responsible Owners proving and identify additional actions still required.  Main Report/Detail  Risk Overview  The risk register is a management tool the scrutiny bodies that the significant risks of the and are subject to ongoing monitoring, review Following discussion within SLT all Director with only those risks rated 15 or above to be	Title:  RISK UPDATE REPORT  SFR  SI  Classification:  For Scrutiny  Purpose  The purpose of this report is to provide the Chancurrent risks highlighted by Directorates.  Background  The purpose of the risk register is to inform of Assurance processes, providing additional awaren required to minimise these risks.  The Audit and Risk Assurance Committee (ARAC and the Accountable Officer on the adequacy arrangements for risk management and has oversit The Strategic Leadership Team (SLT) has remanagement of risk and will ensure that Risk Regreflection of the most significant risks impacting champion the importance of risk management is Service's strategic outcomes and objectives.  Risk Registers are prepared in consultation with collectively by the SLT, with each Directorate Resunction. These Responsible Owners provide inform identify additional actions still required.  Main Report/Detail  Risk Overview The risk register is a management tool that proviscrutiny bodies that the significant risks of the orgal and are subject to ongoing monitoring, review and Following discussion within SLT all Directorate risk with only those risks rated 15 or above to be included allow scrutiny to be focused on the most significant.	Title:    SFRS Boar For Respecify   Bc	Title:    SFRS Board/Cor For Reports Specify ration:   Board St	Title:    SFRS Board/Committee   For Reports to be hospecify rationale beloard Standing	Title:    Classification:   For Scrutiny   SFRS Board/Committee Meet For Reports to be held in Specify rationale below ref Board Standing Orde   A B C D E	Title:    Classification:   For Scrutiny   SFRS Board/Committee Meetings C For Reports to be held in Private Specify rationale below referring Board Standing Order 9   A B C D E E E

3.1.3 The table below identifies the alignment between the 2022-25 Strategic Outcomes and all current Directorate Risks, with the number of related live control actions in brackets:

	Strategic Outcomes		Directorate Risks				
	VH	H (15+)	H (<15)	М	L		
	Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.						0
	Communities are safer and more resilient as we respond effectively to changing risks.	3 (8)	1 (3)	4 (4)	3 (9)		11
Outcome 3	We value and demonstrate innovation across all areas of our work.	1 (2)		2 (2)	4(5)		7
	We respond to the impacts of climate change in Scotland and reduce our carbon emissions.				1 (1)		1
	We are a progressive organisation, use our resources responsibly and provide best value for money to the public	2 (4)	2 (3)	6 (9)	3 (5)		13
	The experience of those who work for SFRS improves as we are the best employer we can be.	2 (2)		3 (5)	2 (4)		7
	Community safety and wellbeing improves as we work effectively with our partners			1 (1)			1
			3	3 1	6 13		40

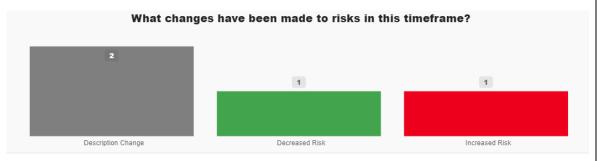
- 3.1.4 Outcome 1 has no aligned Directorate risks with Outcomes 4 and 7 having 1 risk each. Directorates were asked to align risk to a single outcome so there may be overlaps with other outcomes not identified. Work will be undertaken to ensure current risk alignment is accurate and Directorates will consider whether any additional risks need to be provided.
- 3.1.5 Each of the identified risks also have a number of closed actions, 141 in total, which can be viewed within the risk dashboard.
- In relation to the current period Directorates reviewed registers identifying 7 Directorate risks, aligned to the Change Committee, with 2 risks rated at 15 or above (falling to the right of the shaded line):

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

Appendix A to the report provides information on the two risks aligned to the Change Committee, rated 15 or above, together with their associated live control actions. The information is also available through the risk dashboard and a copy of the link is attached for information - Risk Dashboard. The information provided has still to be updated to reflect changes within the corporate structure:

- SDD001 There is a risk that the Directorate is unable to deliver against stated commitments and ambitions, due to limited resources and capacity whilst responding to concurrent events and in light of the constraints brought about by the strategic resource spending review.
- SDD009 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.

3.1.8 Following review in November the following changes have been made to all Change Committee risks over the last quarter:



The table below highlights SDD001, which is rated 15 or above, and identifies a change to its risk rating:

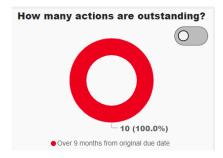
Risk ID	Risk Name	Change Type	Changes Made
SDD001	Delivery of	Increased Risk	Probability increased.
	Directorate		From 9 (3x3)
	Commitments		To 15 (5x3)
			Updated probability due to capacity impacts and
			description update.

#### 3.2 **Progress of Control Actions**

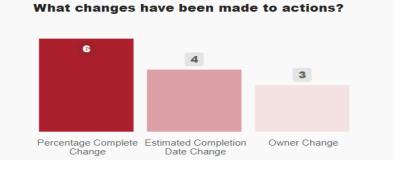
3.2.1 Without action taken on progressing identified controls, risks are likely to remain static and additional reporting has been put in place to manage control actions through a RAG status, similar to internal audit. This will focus scrutiny on priority areas, allowing responsible officers to provide assurance updates.

Green	On target or within 3 months of original due date
Amber	3-9 months delay from original due date
Red	Delay of over 9 months from original due date

In relation to all 7 risks aligned to the Change Committee there are 10 current control actions delayed by over 9 months, with Appendix A detailing the three control actions relating to risks rated 15 or above. These relate to SDD001 and SDD009.



3.2.3 Following review, the following changes have been made to all current control actions:



	·
3.2.4	In relation to SDD001, which is rated 15 or above, the control percentage completed has changed from 25% to 75%:
	Action
	<ul> <li>Development of market allowance business cases, recruitment and</li> </ul>
	implementation of posts to improve the recruitment to vacant posts and ensure
	retention of existing ICT staff.
	Update
	This has resulted from the Market Allowance process being successfully
	completed and recruitment to vacant posts restarting, subject to potential
	operating model changes and SLT approval. Further work is awaiting the outcome
	of an ICT structure review.
3.2.5	All risks and related control actions are discussed with relevant owners on a quarterly basis.
4	Recommendation
4.1	The Change Committee is asked to:
	<ul> <li>Scrutinise the information presented within the report.</li> </ul>
5	Key Strategic Implications
5.1	Risk
5.1.1	The report identifies risks from each Directorate together with the significant changes made
	since the last update. Each Directorate will be responsible for the identification and
	mitigation of any associated risk and for the update of relevant risk registers.
5.2	Financial
5.2.1	The report identifies risks from each Directorate with financial implications arising from
	control decisions to be managed by the relevant Directorate.
	T 1 (100 (1 100)
5.3	Environmental & Sustainability
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	Workforce
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.
J. <del>4</del> . I	Any implications ansing from the report will be managed by the relevant birectorate.
5.5	Health & Safety
5.5.1	Any implications arising from the report will be managed by the relevant Directorate.
0.0.1	The following from the report will be managed by the relevant birecterate.
5.6	Health & Wellbeing
5.6.1	Any implications arising from the report will be managed by the relevant Directorate.
5.7	Training
5.7.1	Any implications arising from the report will be managed by the relevant Directorate.
5.8	Timing
5.8.1	The report is provided to the Audit and Risk Assurance Committee on a quarterly basis.
5.9	Performance
5.9.1	The risk report is used to ensure risks are identified and suitably managed by relevant
	Directorates.
T 40	Communications 9 Franciscus
5.10	Communications & Engagement
5.10.1	Any implications arising from the report will be managed by the relevant Directorate.

5.11 5.11.1	Legal Any implications	arising f	rom the report will be managed by the relevant Directorate.				
5.12 5.12.1	Information Governance DPIA completed - No. The report provides a summary of risks identified by Directorates. Each Directorate will ensure that any relevant DPIA is completed as required.						
5.13 5.13.1		licy. An	o. An assessment was undertaken in relation to the Risk by individual elements of work, which may have an impact upon be assessed and managed by the relevant Directorate.				
5.14	Service Deliver	У					
5.14.1	Any implications	arising f	rom the report will be managed by the relevant Directorate.				
6	Core Brief						
6.1	Not applicable						
7	Assurance (SFRS Board/Committee Meetings ONLY)						
7.1	Director:		Sarah O'Donnell, Director of Finance and Contractual Services				
7.2	Level of Assurance: (Mark as appropriate)  Substantial/Reasonable/Limited/Insufficient There is room for improvement in the identification of the right risks, controls and the completion of mitigating actions within identified timescales.						
7.2	Rationale:		The report is based upon information identified by each Directorate and I have confidence that the information is correctly reported based upon these returns.				
8	Appendices/Fu	rther Re	ading				
8.1	Appendix A – Significant Risks						
8.2	Further Reading: Risk Dashboard						
Prepare	d by:	David J	ohnston, Risk and Audit Manager				
Sponsor	-		D'Donnell, Director of Finance and Contractual Services				
Presente	_	Curtis N	Montgomery, Head of Portfolio				
	Links to Strategy and Corporate Values						

#### **Links to Strategy and Corporate Values**

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:

Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.

- Objective 5.1: Remaining open and transparent in how we make decisions.
- Objective 5.6: Managing major change projects and organisational risks effectively and efficiently.

Governance Route for Report	Meeting Date	Report Classification/ Comments
Change Committee	15 February 2024	For Scrutiny

# Appendix A – Significant Risks and Related Control Actions (Risks rated 15 or above)

Risk ID	Strategic Outcome	Risk Description					Committee Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
SDD001	5	ambitions, due to lir in light of the constr	mited resources aints brought a bility to deliver	s and capacity wh bout by the strat	eliver against stated com illst responding to concu egic resource spending re e support and delivery pe wider SFRS.	СС	Director of Service Development	15 (increased)	4	9	
	Controls Actions			Est' Completion Date	Owner	Comment		Acti	Action Status		
recruitme to allow t Directora	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	31/03/2024	Heads of Function	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. Work ongoing to review ICT structure.		d fro	er 9 months om original due date		
business implement recruitment	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.		31/12/2022	31/03/2024	Acting Head of ICT	posts restarted su	bject to poter	oleted successfully. Recrui utial operating model chan ICT structure review.		fro	er 9 months om original due date

# Appendix A – Significant Risks and Related Control Actions (Risks rated 15 or above)

Risk ID	Strategic Outcome	Risk Description					Committee Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
SDD009	5	the SFRS as a resu capability both w necessity to furth Strategic Change fund	e Directorate being unable to embed Strategic Change capabilities across ult of organisational constraints that limit critical resource capacity and within the Portfolio Office and across SFRS functions, which includes the per develop and build the skills and competencies that are required of a ction. This could result in a number of consequences for SFRS which would by to deliver change on time and within budget and to quality standards						6	15	
Controls Actions			Original Due Date	Est' Completion Date	Owner			Comment		Acti	on Status
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 essential in the mitigation of this risk		31/03/2023	31/03/2024	Head of Portfolio	Business Case Tar	get operating on tified. Furthe	P have been completed. Po model approved in princip r business case requested l port SSRP.	le with require	ed fro	-9 months om original due date	

	CHANGE COMMITTEE ROLLING FORWARD PLAN					
	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION	
18 March 2024 (Additional)	•		Standing/Regular Reports General Reports  New Mobilising System (Written update - PRIVATE) Intelligent Client Capability and Capacity			
2 MAY 2024	<ul> <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>	Standing/Regular Reports General Reports  New Business	Standing/Regular Reports Projects PO Project Dashboard  General Reports PO Progress Update New Mobilising System (Written update - PRIVATE) PO Risk Report Strategic Risk Summary and Committee Aligned Directorate Risks  New Business	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  New Business  •	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  Committee Assurance Statement  New Business  New Business	
13 June 2024 (Additional)	•		Standing/Regular Reports General Reports  New Mobilising System (Written update - PRIVATE)			
1 AUGUST 2024	<ul> <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> </ul>	Standing/Regular Reports General Reports •	Standing/Regular Reports Projects PO Project Dashboard  General Reports PO Progress Update New Mobilising System (Written update - PRIVATE)	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  •	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports	

#### **CHANGE COMMITTEE ROLLING FORWARD PLAN**

CHANGE COMMITTEE ROLLING FORWARD PLAN								
	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION			
	Action Log     Forward Planning:     Committee Forward Plan     and Items to be     considered at future IGF,     Board and Strategy Days     Review of Actions     Date of Next Meeting	New Business	PO Risk Report     Strategic Risk Summary and Committee Aligned Directorate Risks     Finance Report – Change Portfolio (Private)  New Business	New Business	New Business			
19 September 2024 (Additional)	•		Standing/Regular Reports General Reports  New Mobilising System (Written update - PRIVATE)					
7 NOVEMBER 2024	<ul> <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> </ul>	Standing/Regular Reports General Reports •	Standing/Regular Reports Projects PO Project Dashboard  General Reports PO Progress Update New Mobilising System (Written update - PRIVATE) PO Risk Report Strategic Risk Summary and Committee Aligned Directorate Risks Finance Report - Change Portfolio (Private)	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  •	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  •			
	Date of Next Meeting	New Business  •	New Business •	New Business	New Business •			

#### **CHANGE COMMITTEE ROLLING FORWARD PLAN**

	STANDING ITEMS	FOR INFORMATION	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
18 December 2024 (Additional)	•		Standing/Regular Reports General Reports  New Mobilising System (Written update - PRIVATE)		
6 FEBRUARY 2025	Chair's Welcome     Apologies     Consideration of and Decision on any Items to be taken in Private     Declaration of Interests     Minutes of Previous Meeting     Action Log     Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days     Review of Actions     Date of Next Meeting	Standing/Regular Reports General Reports •	Standing/Regular Reports Projects PO Project Dashboard  General Reports PO Progress Update New Mobilising System (Written update - PRIVATE) PO Risk Report Strategic Risk Summary and Committee Aligned Directorate Risks /Risk Dashboard Finance Report – Change Portfolio (Private)	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  •	Standing/Regular Reports Change Portfolio/ Major Projects  General Reports  •
		New Business •	New Business	New Business	New Business •