



**SCOTTISH**  
**FIRE AND RESCUE SERVICE**

Working together for a safer Scotland

**PUBLIC MEETING - PEOPLE COMMITTEE**

**THURSDAY 12 SEPTEMBER 2024 @ 1300 HRS**

**BRAIDWOOD SUITE, SCOTTISH FIRE AND RESCUE SERVICE HEADQUARTERS,  
WESTBURN DRIVE, CAMBUSLANG, G72 7NA / VIRTUAL (MS TEAMS)**

**AGENDA**

- 1 CHAIR'S WELCOME**
- 2 APOLOGIES FOR ABSENCE**
- 3 CONSIDERATION OF AND DECISION ON ANY ITEMS TO BE TAKEN IN PRIVATE**
- 4 DECLARATION OF INTERESTS**  
*Members should declare any financial and non-financial interest they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.*
- 5 MINUTES OF PREVIOUS MEETING: 6 JUNE 2024 (attached)** *M Wylie*  
*The Committee is asked to approve the minutes of this meeting.*
- 6 ACTION LOG** *Board Support*  
The Committee is asked to note that there were no outstanding actions.
- 7 HIGH LEVEL KEY PERFORMANCE INDICATOR REPORT (attached)** *L Gaja/A Watt*  
*The Committee is asked to scrutinise this report.*
- 8 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING**
- 8.1 People Performance Report Quarter 1 2024/25 (attached)** *L Gaja*  
*The Committee is asked to scrutinise this report.*

Please note that the public meeting will be recorded for minute taking purposes only.  
The recording will be destroyed following final approval of the minutes.

**OFFICIAL**

**9 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK**

9.1 Culture Update (*attached*) L Barnes

*The Committee is asked to scrutinise these reports.*

**10 TRAINING**

10.1 Training Function Update and Performance Report Quarter 1 2024/25 (*attached*) C McGoldrick

*The Committee is asked to scrutinise this report.*

**11 HEALTH AND SAFETY**

11.1 Safety and Assurance Performance Report Quarter 1 2024/25 (*attached*) J Holden

*The Committee is asked to scrutinise these reports.*

**12 AUDITS/INSPECTIONS**

12.1 HMFSI Inspection Action Plan Updates and Closing Reports (*attached*) J Holden

12.2 Internal Audit Updates (*attached*) L Gaja

*The Committee is asked to scrutinise these reports.*

**13 PEOPLE COMMITTEE RISK**

13.1 Risk Update Report (*attached*) L Gaja/A Watt

13.2 Spotlight: Operations Control Staffing Improvement Plans (*attached*) J MacDonald

*The Committee is asked to scrutinise these reports.*

**14 PARTNERSHIP WORKING**

14.1 Employee Partnership Forum (verbal) M Wylie

14.2 Partnership Advisory Group (verbal) L Gaja

**15 FORWARD PLANNING**

15.1 Committee Forward Plan Review (*attached*) M Wylie

15.2 Items for Consideration at Future IGF, Board and Strategy Day meetings M Wylie

**16 REVIEW OF ACTIONS** (*verbal*) Board Support

**17 DATE OF NEXT MEETING**

Thursday 5 December 2024

**Report(s) for Information only:**

- Training Function Policy Review Schedule (*attached*)
- Safety and Assurance Management Arrangement Framework (*attached*)
- Contaminants Quarterly Report (*attached*)
- Update on the Effectiveness of the 21 Day Arrangements Process (*attached*)
- Training Continuous Improvement Programme – Update Report (*attached*)

Please note that the public meeting will be recorded for minute taking purposes only.  
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**PRIVATE SESSION**

**18 MINUTES OF PREVIOUS PRIVATE MEETING: 6 JUNE 2024  
(attached)**

*M Wylie*

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

**19 REMUNERATION, APPOINTMENTS AND NOMINATIONS  
SUB COMMITTEE UPDATE**

- 19.1 Draft Minutes of last meeting – 6 June 2024 *(attached)*
- 19.2 Update of last meeting – 12 September 2024 *(verbal)*

*F Thorburn*

*F Thorburn*

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

**20 KEY CASE UPDATES 2024/25 – Q1 *(verbal)***

*L Gaja*

*This verbal report is for information only.*



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**PUBLIC MEETING – PEOPLE COMMITTEE**

**THURSDAY 6 JUNE 2024 @ 1345 HRS**

**BRAIDWOOD SUITE, SCOTTISH FIRE AND RESCUE SERVICE HEADQUARTERS,  
WESTBURN DRIVE, CAMBUSLANG, G72 7NA / VIRTUAL (MS TEAMS)**

**PRESENT:**

Mhairi Wylie (Chair) (MW)  
Neil Mapes (NM)  
Fiona Thorburn (FT)

Steve Barron (Deputy Chair) (SB)  
Andrew Smith (AS)

**IN ATTENDANCE:**

Lyndsey Gaja (LG)	Interim Director of People
Bruce Farquharson (BF)	Deputy Assistant Chief Officer, Head of Training
Jim Holden (JH)	Head of Safety and Assurance
Kelly McDougall (KMCD)	People Advisor (Item 9.1 only)
Elaine Gerrard (EG)	Equality, Diversity and Inclusion Manager (Item 9.3)
Kirsty Darwent (KD)	Chair of SFRS Board
Kevin Murphy (KM)	Group Commander, Board Support Manager
Heather Greig (HG)	Board Support Executive Officer
Debbie Haddow (DJH)	Board Support/Minutes

**OBSERVERS**

John McKenzie, Fire Brigades Union  
Gus Sproul, Fire Brigades Union

**1 CHAIR'S WELCOME**

- 1.1 The Committee Chair opened the meeting and welcomed those present and attending via MS Teams.
- 1.2 Those participating via MS Teams were reminded to raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question. This meeting would be recorded for minute taking purposes only.
- 1.3 On behalf of the Committee, the Chair thanked BF for his hard work and efforts throughout his career and in particular to this Committee, wishing him well for his imminent retirement.

**2 APOLOGIES FOR ABSENCE**

- 2.1 Malcolm Payton, Board Member  
Andrew Watt, Assistant Chief Officer, Director of Training, Safety and Assurance  
Liz Barnes, Interim Deputy Chief Officer, Corporate Services  
David Farries, Assistant Chief Officer, Director of Operational Delivery  
Fiona Munro, Head of People  
Geri Thomson, Deputy Head of People  
Richard Whetton, Head of Governance, Strategy and Performance

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

- 3.1 The Committee discussed and agreed that the *Key Case Update* verbal report would be heard in private session due to the small number of individuals involved and confidentiality in line with Standing Orders (Item 9D). The draft minutes/verbal update of the *Remuneration, Appointments and Nominations Sub Committee* would be taken in private due to the confidential nature of the issue (Item 9G).
- 3.2 No further items were identified.

**4 DECLARATIONS OF INTERESTS**

- 4.1 No conflicts of interest were declared.

**5 MINUTES OF PREVIOUS MEETING: THURSDAY 7 MARCH 2024**

- 5.1 The minutes were agreed as accurate record of the meeting.
- 5.2 **The minutes of the meeting held on 7 March 2024 were approved as a true record of the meeting.**

**5.2 Matters Arising**

- 5.2.1 No matters arising from the minutes of the previous meeting.

**6 ACTION LOG**

- 6.1 The Committee considered the Action Log, noting the updates and agreed the closure of completed items.
- 6.2 **Members noted the updated Action Log and approved the removal of completed actions.**

**7 COMMITTEE STATEMENT OF ASSURANCE**

- 7.1 MW presented the People Committee (PC) and Remuneration, Appointments and Nominations Sub-Committee (RANSC) Statement of Assurance 2023/24, outlining evidence of how the Committee supports the effective functioning of the Board for approval.
- 7.2 **The Committee approved the report.**

**8 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING**

**8.1 People Performance Report Quarter 4 2023/24**

- 8.1.1 LG provided the People Performance Report Quarter 4 2023/24 to the Committee for scrutiny of the People KPIs from the Performance Management Framework and the further details within the People Performance Report. The following key areas were highlighted from the Executive Summary:
- Ongoing work of the On Call Strategic Co-ordinating Group to support attraction and retention.
  - Enhanced remuneration (retainer fee) and flexibility in availability bands for On Call personnel effective from January 2025.
  - Ongoing work on recruitment and development activities within Operations Control. Future spotlight scheduled for September 2024.
  - Update on the main reasons for health and wellbeing referrals.
  - Both 4<sup>th</sup> quarter and annual performance measures reported.
  - Error noted within the narrative for KPI46 (Rural Full Time) as this still related to Quarter 3.
- 8.1.2 In regard to KPI48 (staff turnover), the Committee were reminded that exit interviews were offered but the uptake was limited. LG noted the short and longer-term measures to improve this position. LG further noted that all exit interviews are reviewed to help identify any trends or if any necessary actions are required.

- 8.1.3 In regard to KPI62 (female ratio – wholetime), LG confirmed that there was only a 3% increase in female wholetime staff since 2016. LG explained the reason was the closure of the application window due to the significant pool of applications already received. This increase was consistent across the sector, however the ambition was to make improvements in this area.
- 8.1.4 In regard to KPI63 (equalities data), LG advised that this data was captured at recruitment stage however, there were limitations on historically reviewing this data.
- 8.1.5 In regard to employee demographics, LG advised that this data was captured and was a key metric in terms of workforce planning projections. LG offered to discuss further off table with Committee members.
- 8.1.6 In regard to the wellbeing programme within OC, LG offered to discuss further off table with Committee members.
- 8.1.7 In regard to the Safecall confidential reporting line, LG advised that this had been in place for one month. An initial review and evaluation would be undertaken, and an update would be brought to the Committee in due course. Brief discussion took place on the projected levels of activity and benchmarking against other fire and rescue services.
- 8.1.8 The Committee queried the process which would be undertaken following a reported incident and sought assurance that any necessary action would be taken promptly. LG outlined the process that would be taken following any reported incident, including the different reporting methods available, experienced trained investigators handling calls, appropriate safeguards in place, escalation process, signposting to wellbeing support and advice etc.
- 8.1.9 The Committee commented on previous complaints relating to the length of time that grievances etc can take and sought assurance on prompt timescales for any investigations arising from the confidential reporting line. LG provided assurances on the timeliness of initial contact and investigations commencing. The overall timescale of the investigation would be dependent on the complexity of the individual cases, however the intention would be to resolve as promptly as possible.
- 8.1.10 LG noted that formal reporting on any complaints etc would be provided under the normal reporting process. The Committee requested an update on volume of calls to the Safecall confidential reporting line and analysis of themes be provided early in the next financial year. (Captured under Item 15.1)
- 8.1.11 **The Committee scrutinised the report.**
- (KMcD joined the meeting at 1405 hrs)*

## **9 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK**

### **9.1 Colleague Experience Survey Update**

- 9.1.1 KMcD provided a verbal update in relation the Colleague Experience Survey and highlighted the following key points:
- Survey was live for 6 weeks from 31 March 2024 to 6 May 2024 with 1887 responses (27%) received. Breakdown of responses were Operational Delivery (80%), Corporate Services (15%) and unknown (5%). Other statistics on responders were noted as Wholetime (52%), over 16 years' service (50%), male (68%), female (22%).
  - To evidence the effectiveness of the communication strategy, the source of origin to complete the survey was reported as weekly brief (45%), iHub (18%), line managers (13%) and other categories (15%).
  - Continued support from and engagement with Rep Bodies.
  - Weekly meetings held with survey champions which helped support them, share informal feedback, and shape communication.



- Outline of next steps relating to communication, reporting and analysing the survey results.

9.1.2 LG reminded the Committee that an update would be provided at the next Board Strategy Day (25 July 2024) and the final report would be submitted to the SFRS Board (August 2024).

9.1.3 In regard to the frequency of staff surveys, LG noted that the last service wide survey was undertaken in 2018 with the intention having been to undertake surveys every 2 years. However, due to the pandemic and the subsequent recovery period, this had not been achieved. LG further noted that more frequent and shorter focussed surveys had been considered. However, the recent full colleague experience survey would provide baseline data and would allow the Service to progress with shorter pulse surveys in the future if deemed appropriate.

9.1.4 KMCD informed the Committee of the longer-term communications plans for the survey and to help address some of the concerns, continuing to engage to build trust levels and collectively make improvements.

9.1.5 The Committee noted the low response rate and queried whether this was a sufficient baseline for the full workforce. KMCD reminded the Committee that the response target was 30% and that the potential reasons for the shortfall was noted. KMCD noted that there was still work to be done to improve engagement, communications and trust with the Service to encourage more responses in the future. KMCD further noted the intention for future collaborative work with Rep Bodies to understand the reasons for not completing the survey and to provide an opportunity for gathering additional information to build on the feedback.

9.1.6 In regard to the survey questions, LG outlined how the questions were set noting 2 key considerations. These were the ability to compare with the 2018 survey to demonstrate changes/improvements and maximising benchmarking opportunities with other justice sector organisations. KMCD noted that the Rep Bodies were in agreement with the questions.

9.1.7 LG confirmed that the action plan for communicating the results of the survey would include the format of 'you said, we did', and this would be delivered over a sustained period to maximise awareness.

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

*(KMCD left the meeting at 1435 hrs)*

## **9.2 Culture Development Group Update**

9.2.1 LG presented a report to the Committee to provide an update on the Culture Action Plan (CAP) and progress made by the Culture Development Group (CDG) and associated culture activities within the Service. The following key points were highlighted:

- Work undertaken to benchmark, planning activities around culture, convening of the CDG and workstreams.
- Key work to date included the colleague experience survey, confidential reporting line, various engagement sessions across the Service, first tranche of delivery of management development programme for supervisory managers, establishment of various employee networks and work to review recruitment and selection approach, and specifically tailored promotional processes.

9.2.2 In regard to the action plan, LG to review and update off table on any missing dates and RAG status.

9.2.3 The Committee commented on the work undertaken and still required, the need for momentum and timely delivery of change and noted that the first year had not achieved what had been intended.

- 9.2.4 LG offered her assurance that this area remained a key priority and focus for the Service. LG reminded the Committee of the work undertaken and progress made within the first year whilst acknowledging that further work was still required. LG noted the significance of the colleague experience survey which would provide a baseline to measure against going forward.
- 9.2.5 LG reminded the Committee of the work and engagement across the organisations relating to the critical role of managers on setting the tone and addressing situations where behaviours were unacceptable. LG noted that this process would take time to embed across the Service. LG further noted that feedback from supervisory management development days, which were being held off station, had been excellent and this would be brought to the Committee for scrutiny in due course. LG acknowledged that this process would take longer, however it was felt that this would be a more effective learning experience and would increase understanding within participants.
- 9.2.6 The Committee noted the work undertaken and requested that consideration be given to provide a fuller update on activities going forward. LG noted the comments and would consider for future updates.
- 9.2.7 Discussion took place on the potential for smaller or localised changes as opposed to Service wide. LG noted that the analysis from the colleague experience survey could provide opportunities for localised action plans and engagement. It was recognised that the role of managers, and the support they required, was significant to enable effective change within the Service. The Committee noted that this area of work required to be progressed at pace.
- 9.2.8 The Committee commented on improvements needed on the pace given to challenging and responding (consequences) to unacceptable behaviour.
- 9.2.9 The Committee commented on the need to support and develop managers appropriately for their role. LG reminded the Committee of the level of movement within the Service in the past few years and noted the capacity difficulties in maintaining the level of support required.
- 9.2.10 The Committee noted that further off table discussions would be helpful to understand the timeframes involved and what the realistic end position would be.
- 9.2.11 **The Committee scrutinised the report.**

*(E Gerrard joined the meeting at 1455 hrs)*

### **9.3 Women's Employee Liaison Forum Case Study**

- 9.3.1 LG presented the report to provide an update on activities of the Women's Employee Liaison Forum (WELF) and highlighted the following key points:
- Alignment with other workstreams and programmes of work whilst avoiding duplication of activities.
  - Open and honest forum without being overly bureaucratic to allow discussions on issues affecting women in the workplace.
  - One example of some of the issues/gaps that had been highlighted and how this would be addressed in the workplace. It was noted that this forum allowed small changes to be made which would have a positive impact on individuals.
  - Beneficial and effective forum from an equality, diversity and inclusion perspective and appreciated by the Rep Bodies.
- 9.3.2 The Committee queried whether there was any specific work in relation to menopause or carers in the workforce. EG noted that both these areas were being progressed through the People Directorate activities rather than specifically through WELF. EG provided a brief outline of the activities regarding both menopause and carers within the Service.



9.3.3 LG reiterated the benefits of this informal opportunity, involvement of Rep Bodies and the collegiate approach from all those involved.

9.3.4 **The Committee scrutinised the report.**

*(E Gerrard left the meeting at 1500 hrs)*

## 10 TRAINING

### 10.1 Training Function Update and Performance Report Quarter 4 2023/24

10.1.1 BF presented the high-level overview of the Training function activity and performance over Quarter 4 2023/24 and highlighted the following key points:

- Top level KPIs contained within the report are underpinned by detailed performance indicators which allows detailed scrutiny, good practice and areas of improvement to be identified across the function.
- KPI22-24 (various modules) – Reminder that the completion of these modules was the responsibility of individual line managers.
- KPI22 (core skill modules) – Day Duty staff were included for the first time in Q1 2023/24 and attributed to the reported decline during that reporting period.
- KPI25 (incident command modules) – Small reduction (ICL1) in this reporting period due to difficulties in arranging courses in rural areas over the winter months.
- KPI26 (core skills) – brief explanation on how the target was set for this indicator. Improvements and efficiencies were noted in both ICAT and driving courses. Review and pilot of revised (combined) breathing apparatus courses underway and proposed next phase.
- KPI29 (training function course delivery) – Explanation provided on the reduction in this reporting period. Following a review, online evaluation form to be introduced.
- Draft Training Strategic Asset Management Plan would be presented at the next meeting (August 2024).

10.1.2 In regard to assessing impact on Workforce Pro for non-uniformed staff, BF advised that the introduction of this system would provide a single recording platform which would be monitored by line management and performance reported via the training function.

10.1.3 In regard to support and provision of additional learning needs/styles, BF advised that LCMS modules complied with accessibility standards and were supported through the accessible tools available. In relation to practical training, all instructors and crew commanders on stations are required to complete a methods of instruction module which include information on different learning styles, delivery methods etc.

10.1.4 In regard to simulation software (XVR), BF advised that this would be rolled out across the incident command training and noted that this was an improvement on the current provision. BF briefly noted other opportunities to increase the use of simulation training within the Service.

10.1.5 BF briefed the Committee on the various accreditation and standards required and achieved by the Service.

10.1.6 In regard to efficiencies within the training function, BF explained that this related to smarter and more efficient delivery and provision of courses/learning materials.

10.1.7 The Committee noted their thanks and best wishes for BF ahead of his upcoming retirement.

10.1.8 **The Committee scrutinised the report.**

*(Meeting broke at 1520 hrs and reconvened at 1530 hrs)*

## 11 HEALTH AND SAFETY

### 11.1 Health and Safety Performance Report Quarter 4 2023/24

11.1.1 JH presented the Health and Safety Performance Report Quarter 4 2023/24 to provide an overview of progress against the Annual Health and Safety Improvement Plan 2023/24 and the Health and Safety KPIs. The following key areas were highlighted:

- Reduction in verbal attacks within this reporting period, however there was an increase in physical attacks. Recent engagement with Police Scotland regarding attacks on emergency workers, convening a working group and participating in a study to identify trends ie scale, type and locations.
- Reduction in RIDDOR reports against the same period last year with 2 incidents being reported.
- Increase in accident/injuries reported during the quarter. However, the number of incidents would reduce due to the further evidence now received/pending. One event involved 9 personnel and related to suspected asbestos exposure.
- Near miss reporting continues to improve.
- Overall decrease in vehicle accidents. Joint investigation ongoing in relation to the recent RTC involving an appliance in Wester Ross.
- Overall completion of Health and Safety Improvement Plans was 92% (78% for quarter 4).
- Key work activities during the quarter includes review of risk assessments and publication of Service Delivery Area Handbook (March 2024).
- Operational Assurance work has recognised trend in asbestos incidents and proactive control measures were now in place.
- Full debrief and report was scheduled on a Level 4 incident in Edinburgh.
- Good progress was being made in relation to supporting the review of Event Management processes.
- Good progress was being made in relation to review and completion of COSHH Assessments.

11.1.2 The Committee noted and welcomed the succinct report.

11.1.3 The Committee commented on the variations in the level of incidents in different reporting periods and queried whether the Service benchmarked against other fire and rescue services (FRS). JH advised that the Service does benchmark against other FRS, however there were difficulties in identifying a similar demographic and geographic footprint. JH further advised that the levels, for the size of the Service, were not high and were affected by seasonal elements, level of operational and training activities.

11.1.4 In regard to verbal/physical attacks, JH noted that there was a clear increase being seen across all emergency services. JH further noted that physical attacks reported within SFRS were mainly directed at fire appliances rather than individuals. JH confirmed that costs related to any damage or repairs required were recorded via the fleet system.

11.1.5 JH provided a brief outline of the proposals and intentions for a working group being convened to review attacks on emergency workers.

11.1.6 **The Committee scrutinised the report.**

### 11.2 Contaminants Update

11.2.1 JH presented a report to the Committee to provide an update on the management of contaminants within the Service. The following key points were highlighted:

- Approval of budget for managing fire contaminants in 2024/25.
- Development of standard operating procedures was progressing well along with support training materials and video.
- Anticipated implementation by the end of the year.

11.2.2 JH explained the links between the work with CivTech and Professor Stec. JH noted that the Service would continue to work with Professor Stec and FBU colleagues to look at wider contamination issues.

11.2.3 The Committee queried whether the Service were engaging with NHS colleagues in regard to potential contamination issues or support available. JH noted that this could be considered as part of health and wellbeing and health surveillance and also via links with business partners to raise awareness of the risk.

11.2.4 The Committee commented on the potential to communicate the level of investment being made in this area to raise awareness of how the Service were proactively making improvements to safeguard personnel. JH noted that a joint video comms between the Service and the FBU would be issued shortly to highlight the investment and the wider work being undertaken.

**11.2.5 The Committee scrutinised the report.**

### **11.3 Draft Health and Safety Annual Report 2023/24**

11.3.1 JH provided a verbal update and presentation on the draft Health and Safety Annual Report 2023/24 for information and awareness. JH highlighted the revised format, including of engagement and proactive work, key performance indicators with additional narrative, benchmarking, and details on individual directorates etc.

11.3.2 The Committee commented on the narrative relating to future improvements however there was limited acknowledgment of good news stories. JH noted the comments and stated that this was a high level published report and there was the opportunity to interrogate the data further at a local level.

11.3.3 It was agreed to recirculate the survey slides to new Committee members for information (actioned directly after meeting).

**11.3.4 This verbal update and presentation was presented for information only.**

## **12 AUDIT/INSPECTIONS**

### **12.1 HMSFI Inspection Action Plan Updates and Closing Reports**

12.1.1 LG presented the report updating the Committee on the progress against the action plan developed in response to the HMFSI Report relating to Mental Health and Wellbeing Provision. The following key points were highlighted:

- All actions raised have either been added or combined into the pre-existing mental health action plan.
- Actions from the Suicide Prevention Subgroup have been incorporated into the overarching mental health action plan and would continue to be progressed/monitored.
- Due to previous or ongoing work undertaken, actions were not required for some recommendations.

12.1.2 The Committee sought clarification on how the Service measures the impact of mental wellbeing champions, both on staff seeking assistance and on the champions themselves, and the provision of chaplaincy support.

12.1.3 LG advised that the mental health and wellbeing champions model was relatively new, however positive feedback was being provided from both colleagues and champions. LG further advised that there was an ongoing programme of continued professional development and peer support network in place for champions.

12.1.4 LG informed the Committee that the current chaplaincy provision was inherited from one of the legacy fire and rescue services and was supported by a Memorandum of Understanding. It was noted that this spiritual care was available to all but only provided on invitation from

individuals. LG noted that the Service was aware that this provision only represented a limited number of faith groups.

12.1.5 The Committee commented on the recent Deloitte's report on mental health in children relative to working families and the potential impact this issue could have in staff/workplaces.

12.1.6 **The Committee scrutinised the report.**

## **12.2 Internal Audit and Inspection Updates**

12.2.1 LG presented the report updating the Committee on the progress against the action plans relating to internal audit and inspections where People Directorate is the lead area of the organisation. The following key points were highlighted:

- HMFSI Thematic Inspection of Organisational Culture: Currently within the information gathering phase.
- Scottish Vocational Qualifications: Good progress with several actions awaiting closure.
- On Call Workforce Planning: Good progress with several actions awaiting closure.
- Sickness Absence Management: Short extension requested for some actions.
- Equality, Diversity and Inclusion: Short extension requested for some actions.
- Closing report would be presented to Audit and Risk Assurance Committee in due course.

12.2.2 **The Committee noted the report.**

## **13 PEOPLE COMMITTEE RISK REGISTER**

### **13.1 Committee Aligned Directorate Risk**

13.1.1 LG and AW presented the Risk Report, identifying Directorate risks and controls pertinent to the business of the Committee. It was noted that there were 3 risks reporting risk ratings of 15 or above, the following was highlighted:

- FSC018 which relates to the ability to recruit and retain skilled individuals to support the move to cloud-based environment and securing funding to upskill existing staff. Control measures in place were outlined. These included the review of current skills, structure, job descriptions and market allowance.

13.1.2 It was noted that discussions had taken place at the Change Committee in relation to concerns over the Service's preparedness for the increasing use of cloud-based technology and cyber security. LG advised that once the review and restructure of the ICT function had taken place, recruitment would be undertaken to fill any identified gaps. LG noted that the Service would also look to maximise opportunities to use talent programmes ie modern apprenticeships, graduate apprenticeships, etc.

13.1.3 The Committee requested that a risk spotlight be presented at the next meeting (September 2024) to help understand the Service's approach around attraction and retention of ICT/specialist talent through external recruitment processes (captured under Section 15).

13.1.4 **The Committee scrutinised the report.**

## **14 PARTNERSHIP WORKING**

### **14.1 Employee Partnership Forum (EPF)**

14.1.1 SB provided the Committee with a verbal update noting that the EPF meeting on 9 May 2024 was stood down due to no items being tabled.

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

### **14.2 Partnership Advisory Group (PAG)**

14.2.1 LG advised the Committee that the last scheduled meeting (28 May 2024) had been stood down due to no items being tabled.

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

## **15 FORWARD PLANNING**

### **15.1 Committee Forward Plan Review**

15.1.1 The following items were noted for future meetings:

- Volume of calls to Safecall confidential reporting line and analysis of themes (March/June 2025)
- Broader paper on attraction and retention of talent within the Service.

15.1.2 **The Committee noted the Forward Plan.**

### **15.2 Items for Consideration at Future IGF, Board and Strategy Meetings**

15.2.1 The following items were noted for future IGF meetings:

- Policy on staff use of AI technology

## **16 REVIEW OF ACTIONS**

16.1 KM confirmed that no formal actions were recorded during the meeting.

## **17 DATE OF NEXT MEETING**

17.1 The next meeting is scheduled to take place on Thursday 12 September 2024.

17.2 There being no further matters to discuss, the public meeting closed at 1615 hrs.

*(Public meeting broke at 1615 hrs and reconvened in Private session at 1620 hrs)*

## **PRIVATE SESSION**

### **18 MINUTES OF PREVIOUS PRIVATE MEETING: 7 MARCH 2024**

18.1 The minutes of the private meeting held on 7 March 2024 were approved as a true record of the meeting.

### **19 PRIVATE ACTION LOG**

19.1 Members noted the updated private Action Log and approved the removal of completed actions.

### **20 REMUNERATION, APPOINTMENTS AND NOMINATIONS SUB COMMITTEE (RANSc) UPDATE**

20.1 The draft minutes of the RANSc meeting on 7 March 2023 had been circulated to the Committee and a verbal update from the meeting on 6 June 2024 was provided.

20.2 **The Committee noted the draft minutes and verbal update.**

### **21 KEY CASE UPDATES 2023/24 – QUARTER 4**

21.1 LG provided a verbal update to the Committee providing an overview on employee relations cases which have resulted in claims to the Employment Tribunal.

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



Report No: C/PC/31-24

Agenda Item: 7

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>HIGH LEVEL KEY PERFORMANCE INDICATOR REPORT– Q1 2024/25</b>						
<b>Report Classification:</b>	For Scrutiny	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
<b>1</b>	<b>Purpose</b>						
1.1	To provide members with the first quarter performance of <b>KPIs 22 – 29 (Training)</b> , <b>KPIs 46 – 49 (People) &amp; KPIs 50 – 56 (Safety &amp; Assurance)</b> for fiscal year 2024/25. Three annual performance indicators <b>KPIs 62, 63a and 63b (People)</b> will be reported in the fourth quarter report.						
<b>2</b>	<b>Background</b>						
2.1	The Performance Management Framework (PMF) defines how we, the Scottish Fire and Rescue Service (SFRS), manage our performance and how we use performance information to inspire change and improvement. This framework remains in place for the current fiscal year until the roll out of a new Strategic Plan in 2025.						
2.2	56 quarterly indicators (15 for TSA and 4 for People) and 9 national indicators (2 for People) were identified across directorates to provide senior leaders, committees and the SFRS Board with relevant information on our performance. This supports those responsible for scrutiny of how SFRS perform in delivering its Strategic Outcomes.						
2.3	The quarterly performance dashboard (& report) provide an overview for those indicators and through the use of statistical process control charts (SPC) alerts stakeholders to situations deteriorating or improving or where performance is stable and in control.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	This paper covers all performance indicators stated in the PMF intended for scrutiny by the SFRS Board.						
3.2	Exceptional variation &/or for monitoring: <ul style="list-style-type: none"> <li>• 28 - % Training Function Currency</li> </ul>						
3.3	Deteriorating (long-term): <ul style="list-style-type: none"> <li>• 46 – On Call Retained FTE</li> <li>• 46 – Support Staff FTE</li> </ul>						
3.4	Improving (long-term): <ul style="list-style-type: none"> <li>• 26 - % Core Skills Currency</li> <li>• 27 - % Specialist Rescue Currency</li> <li>• 46 – Off Station FTE</li> </ul>						



3.5	<ul style="list-style-type: none"> <li>• 50 – Verbal attacks on Firefighters</li> <li>• 52 – RIDDOR</li> <li>• 55 – Vehicle Accidents</li> <li>• 56 - % YTD H&amp;S Actions Completed</li> </ul> <p>Not changing:</p> <ul style="list-style-type: none"> <li>• 22 - % Core Skills Modules Completed</li> <li>• 23 - % Advanced, Support &amp; Emerging Risks Modules Completed</li> <li>• 24 - % Flexi Officer Module Completion</li> <li>• 25 - % Incident Command Module Completion</li> <li>• 46 - On Call Volunteer FTE</li> <li>• 46 - Flexi Officer FTE</li> <li>• 46 - Operations Control FTE</li> <li>• 46 - Resource Based Crewing FTE</li> <li>• 46 - Rural Full-time FTE</li> <li>• 47 - Vacancies Rate</li> <li>• 48 - Turnover Rate</li> <li>• 49 - Absence Rate</li> <li>• 51 - Physical attacks on Firefighters</li> <li>• 53 - Accidents and Injuries (excl. RIDDOR)</li> </ul>
3.6	<p>Not known – limited data:</p> <ul style="list-style-type: none"> <li>• 29 - Customer Satisfaction Rate</li> <li>• 54 - Near Miss</li> </ul>
<b>4</b>	<b>Recommendation</b>
4.1	Members are invited to scrutinise the contents of this, question KPI performance and provide feedback on practical use of reporting to ensure continuous development of user experience. The live version of the report can be accessed through the Governance area of the <a href="#">Power BI Landing Page</a> .
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	SFRS has a specific risk SPPC001 There is a risk of the service not consistently providing accurate performance management information from some sources due to inaccurate data or inadequate systems resulting in loss of confidence in reporting service performance.
5.2	<b>Financial</b>
5.2.1	There are no specific financial issues raised within this paper
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	There are no specific Environmental & Sustainability implications addressed in this paper
5.4	<b>Workforce</b>
5.4.1	Performance measures reported for Strategic Outcomes 6 provide insight to workforce
5.5	<b>Health &amp; Safety</b>
5.5.1	There are no specific Health and Safety implications addressed in this paper
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	There are no specific Health and Wellbeing implications addressed in this paper

5.7 5.7.1	<b>Training</b> Performance measures reported for Strategic Outcomes 2 & 6 provide insight to delivery of training and safety & assurance	
5.8 5.8.1	<b>Timing</b> Some performance indicators rely on manual collation of data and are a 'snapshot' in time (2/3 weeks ahead of scrutiny) and may be subject to change dependant on relevant business areas business practices	
5.9 5.9.1	<b>Performance</b> All performance measures reported are linked to Strategic Outcomes 6 with a focus on personnel.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> There are no specific Communications & Engagement implications addressed in this paper	
5.11 5.11.1	<b>Legal</b> There are no specific Legal implications addressed in this paper	
5.12 5.12.1	<b>Information Governance</b> DPIA completed - No	
5.13 5.13.1	<b>Equalities</b> EHRIA completed - No	
5.14 5.14.1	<b>Service Delivery</b> Performance measures reported for Strategic Outcomes 2 & 6 are linked to Service Delivery	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Lyndsey Gaja, Interim Director of People & ACO Andy Watt, Training, Safety & Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial</del> / <b>Reasonable</b> / <del>Limited</del> / <del>Insufficient</del>
7.3	<b>Rationale:</b>	The service has continued to develop its approach to performance reporting. The Organisational Performance Dashboard, aligned to the SFRS Performance Management Framework, is now live and available across the service with a pdf version made available to the public. Scrutiny of service performance is evident across the service, at executive level and by the SFRS Board at committee and board level.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Link to <a href="#">Power BI Landing Page.</a>	
<b>Prepared by:</b>		Chris Fitzpatrick, Business Intelligence and Data Services Manager
<b>Sponsored by:</b>		Richard Whetton, Head of Corporate Governance, Strategic Planning, Performance and Communications Directorate
<b>Presented by:</b>		Lyndsey Gaja, Interim Director of People & ACO Andy Watt, Training, Safety & Assurance

<b>Links to Strategy and Corporate Values</b>		
<u>Strategy</u> Outcome 2 - Communities are safer and more resilient as we respond effectively to changing risks Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Training, Safety &amp; Assurance Board</i>	<i>15 August 2024</i>	<i>For scrutiny</i>
<i>Corporate Board</i>	<i>26 August 2024</i>	<i>For scrutiny</i>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For scrutiny</i>

## SCOTTISH FIRE AND RESCUE SERVICE

## People Committee



Report No: C/PC/35-24

Agenda Item: 8.1

<b>Report to:</b>		<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>		<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>		<b>PEOPLE PERFORMANCE REPORT – QUARTER 1 2024/25</b>						
<b>Report Classification:</b>		<b>For Scrutiny</b>					<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>	
<b>1</b>	<b>Purpose</b>							
1.1	The purpose of this report is report is to enable the Scottish Fire and Rescue Service (SFRS) People Committee to scrutinise the People KPIs from the Performance Management Framework (PMF) and the more detailed quarterly People Performance Report.							
<b>2</b>	<b>Background</b>							
2.1	People performance is monitored and reported through the quarterly People Performance Report, associated KPIs in the PMF, and scrutinised by the People Committee as well as within the SFRS Annual Report.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	The People quarterly performance report sets out organisational performance against the agreed set of People measures, which are regularly reviewed and enhanced where appropriate and practical.							
3.2	The Executive Summary of the report (p. 2) draws the Committee’s attention to key points relating to: <ul style="list-style-type: none"> <li>• The work of the On Call Strategic Co-ordination Group, particularly the modularisation on on-call Task &amp; Task Management courses to provide more flexible attendance options.</li> <li>• An increase in absence in Operations Control as a result of several short-term absences becoming long term (from 9.97% in Q4 to 11.52% in Q1)</li> <li>• An anticipated increase in Wholetime retirements, which is reflected in an increase in Wholetime trainee numbers.</li> <li>• Continued work on the Cultural Action Plan, including launch of the Confidential Reporting Line and completion of the Colleague Experience Survey response gather stage.</li> </ul>							
3.3	The People related measures from the PMF dashboard are included as Appendix 2 of the attached paper.							
<b>4</b>	<b>Recommendation</b>							
4.1	The People Committee is asked to scrutinise the report.							

<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	Risks identified and tracked and managed through the People risk register.
5.2	<b>Financial</b>
5.2.1	There are financial implications related to absence in terms of contractual sick pay costs and increases in overtime. Turnover leads to indirect costs associated with recruitment, onboarding and training processes for new colleagues.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	There are no environmental and sustainability implications arising from this report.
5.4	<b>Workforce</b>
5.4.1	The report outlines organisational performance against key people and workforce measures.
5.5	<b>Health &amp; Safety</b>
5.5.1	There is potential that some of the absences reported in this paper result from Health & Safety related incidents.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	The report details a range of health & wellbeing activities to support employee wellbeing, attendance and performance.
5.7	<b>Training</b>
5.7.1	The report highlights training activity related to the Management Capability Framework, which is designed to increase manager confidence and capability in managing people matters.
5.8	<b>Timing</b>
5.8.1	The report details performance over the first quarter of 2023/24 and provides longer term trend analysis.
5.9	<b>Performance</b>
5.9.1	The report details organisational performance against a range of people measures.
5.10	<b>Communications &amp; Engagement</b>
5.10.1	This report is shared with a range of governance forums for scrutiny and for information.
5.11	<b>Legal</b>
5.11.1	Some elements of the report relate to SFRS' legal responsibilities as an employer.
5.12	<b>Information Governance</b>
5.12.1	DPIA not required for this report.
5.13	<b>Equalities</b>
5.13.1	EHRIA not required for this report.
5.14	<b>Service Delivery</b>
5.14.1	There are no direct Service Delivery implications arising from this report.
<b>6</b>	<b>Core Brief</b>
6.1	Not applicable

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<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Lyndsey Gaja, Interim Head of People
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.3	<b>Rationale:</b>	The accompanying report details SFRS performance against agree People measures, allowing trend analysis to be carried out, risks identified, and corrective actions taken as appropriate. It should be noted that many aspects of the reporting are dependent on accurate recording of information by the relevant colleagues and managers, and manual analysis of data.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A: Q1 People Performance Report	
<b>Prepared by:</b>		People Managers and DMT
<b>Sponsored by:</b>		Lyndsey Gaja, Interim Director of People
<b>Presented by:</b>		Lyndsey Gaja, Interim Director of People
<b>Links to Strategy and Corporate Values</b>		
Strategic Plan 2022-25 Outcome 6: The experience of those who work for SFRS improves as we are the best employers we can be.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>People Committee</i>		<i>12 September 2024</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>





# **People Quarterly Management Information Report Quarter 1 2024 / 25**

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## Introduction

The performance of the Scottish Fire and Rescue Service (SFRS) is set out against the priorities established by Scottish Government in the Fire and Rescue Framework for Scotland 2022. In turn these priorities are reflected in the outcomes of SFRS' strategic plan, including outcome six: ***“The experience of those who work for SFRS improves as we are the best employer we can be.”***

Our performance is monitored and reported through the quarterly People Performance Report and scrutinised by the People Committee as well as within the SFRS Annual Report.

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

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

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

## **Executive Summary**

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

The On-Call Strategic Co-ordination Group are continuing to seek ways to address recruitment and retention challenges within the On-call employee group. Notably, a pilot of a modularised approach to the Task and Task Management course, is taking place to address challenges that potential candidates may have in attending the initial training.

Absence rates within Operations Control has increased by 1.55% in quarter 1 to 11.52% (from 9.97 in Q4). Similar to other staff groups this is because of an increase in long term absence. Wellbeing support is being provided as well as training for managers in supporting employees who are absent from work.

The anticipated increase in Wholetime retirements has materialised and this is being managed through planned recruitment activity. Alongside this, an improved recruitment process for Firefighter (Control), has been developed for launch in quarter 2, supported by a new communication and engagement strategy to improve attraction.

Work continues to support the Cultural Action Plan, with the Confidential Colleague Reporting Line which launched in quarter 1 and the Colleague Experience Survey. Analysis of the results of the Colleague Experience Survey commenced in quarter 1 and will continue during quarter 2, supported by communications.

## Section 1

### 1.1

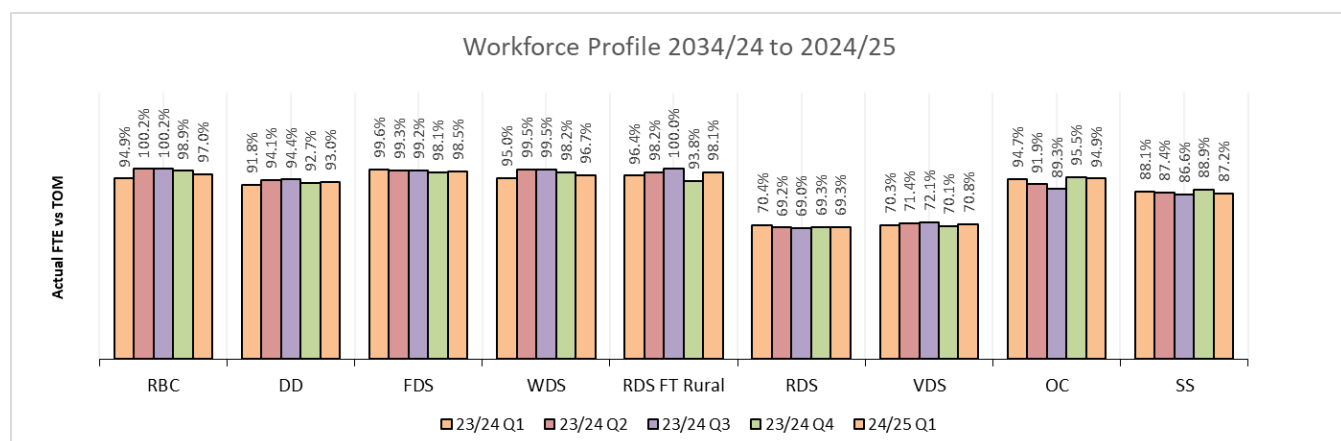
**Strengthen and continually improve our approach to Strategic Resourcing Planning, ensuring that SFRS current and future workforce requirements are understood and planned for**

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

EMPLOYEE GROUP	Wholetime (WDS)					Retained*					
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS*	VDS*	OC	SS	TOTAL (ALL)
Target Operating Model (FTE)	2855	350	256		3461	58	3309	377	172	853	8230
Initiatives, Projects and Capital Funded		10	13		23				1	78	102
Actual (FTE)	2769	335	265	48	3417	57	2295	267	164	812	7012
Actual (Headcount)	2772	335	265	48	3420	58	2724	267	171	869	7509

\*The notional TOM for RDS and VDS staff is reflective of the establishment figures that were in place under legacy FRS arrangements and does not represent a staffing figure that is required to crew all appliances on SFRS On Call stations.

As at 30 June 2024, SFRS employed 6,965 people, equating to a headcount of 7,556. The variance between the number of employees and actual headcount is reflective of where staff hold more than one role (dual contract). In addition to the figures in the above table; 13 employees are on external Secondment (including union duties), 21 on career or reservist breaks and 13 in Partnership Initiative funded posts. As illustrated in the table below, the actual FTE versus Target Operating Model for each staff group has remained broadly consistent over the past five quarters.





### 1.1.2 Number of vacancies by FTE

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (FTE)	38	26	4	68	1	1014	110	9	119	1321

\*The notional TOM for RDS and VDS staff is reflective of the establishment figures that were in place under legacy FRS arrangements and does not represent a staffing figure that is required to crew all appliances on SFRS On Call stations.

### 1.1.3 Percentage Staff vacancies by staff group

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (%)	1.3%	7.2%	1.5%	1.9%	1.9%	30.7%	29.2%	5.1%	12.8%	15.8%

\*The notional TOM for RDS and VDS staff is reflective of the establishment figures that were in place under legacy FRS arrangements and does not represent a staffing figure that is required to crew all appliances on SFRS On Call stations.

The overall vacancy rate and the rates per staff group are broadly in line with the previous period. Compared to the same period last year, there has been a 50% reduction in the vacancy rate for wholetime, largely as a result of the interim TOM introduced in September 2024 following the temporary withdrawal of 10 appliances.

Workforce planning forecasts indicate that there will be an increasing deficiency against the interim Target Operating Model (TOM) as we progress through 2024, which will be addressed through planned recruitment activity. Actual retirements versus forecast continues to be monitored and reported to inform recruitment requirements within the Wholetime Uniformed Staff Group.

An intake of 48 Wholetime Firefighters commenced in April 2024 with a further intake of 58 scheduled for August at the National Training Centre (NTC) and Newbridge. A further Wholetime training course will take place in quarter 4, with a Strategic Leadership Team (SLT) decision on numbers anticipated in August. Engagement continues with the remaining candidates in the holding pool to meet the anticipated demand. Planning has started in advance of reopening Wholetime Firefighter applications, supported by a review of attraction and selection approaches, including positive action activities.

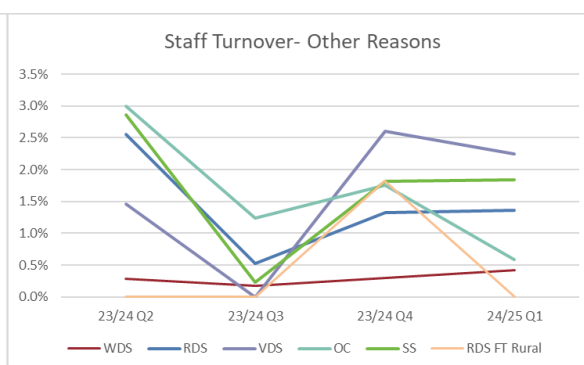
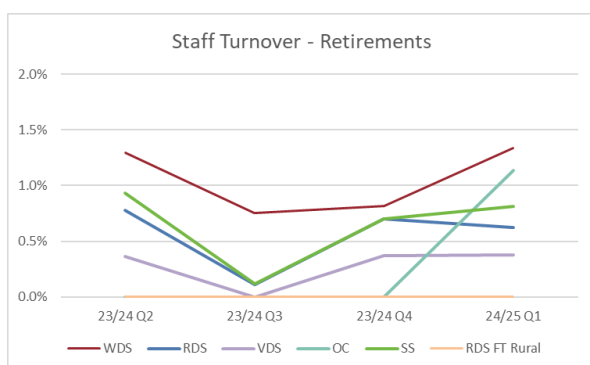
The work of the On Call Strategic Co-ordination Group (OCSCG) continues, with focus on recruitment data, candidate status and dashboard insights to inform decision making, an evaluation of the Pre-Recruitment Engagement Programme and development of On Call to WT migration process.

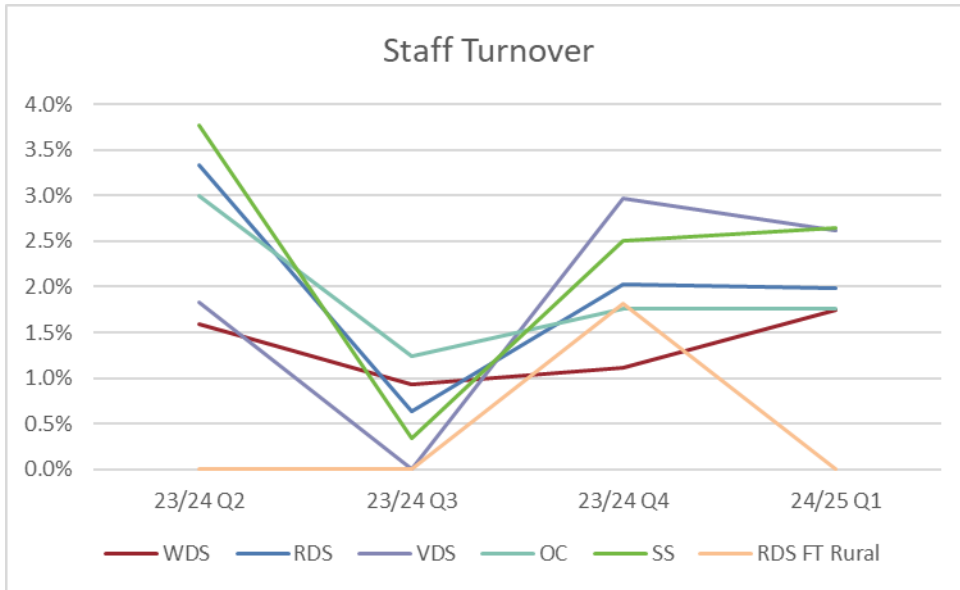
The OCSCG is also overseeing a pilot of modularisation of On Call Task and Task Management Courses (TTM). Evaluation of the pilot will inform whether this may address some recruitment challenges associated with the time commitment to attend initial training for On Call colleagues.

Operations Control continue to work with the People Directorate to enhance the recruitment approach, including the creation of new recruitment materials to aid attraction, developing more effective selection methods and improving the overall candidate experience. Planning is underway for the 2024 National Recruitment Campaign to more effectively promote the Firefighter (Control) role with support from the Communications and Engagement Team. A communications plan has been developed and agreed working towards a go live date early September.

#### 1.1.4 Percentage Staff turnover by employee group

EMPLOYEE GROUP	Wholetime (WDS)				Retained					
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS	VDS	OC	SS	TOTAL (ALL)
Retirements	0.8%	2.7%	5.7%	1.3%	0.0%	0.6%	0.4%	1.1%	0.8%	1.0%
Other Reasons	0.4%	0.6%	0.0%	0.4%	0.0%	1.4%	2.2%	0.6%	1.8%	1.0%
<b>Turnover</b>	<b>1.2%</b>	<b>3.3%</b>	<b>5.7%</b>	<b>1.7%</b>	<b>0.0%</b>	<b>2.0%</b>	<b>2.6%</b>	<b>1.8%</b>	<b>2.6%</b>	<b>1.9%</b>





Within the uniformed staff group, turnover has increased with the most notable increase in Flexi Duty Officers which, due to retirements, has increased from 1.5% in quarter 4 to 5.7% this quarter. This increase in Wholetime retirements was anticipated as at the end of quarter 1 a full year's impact of the 2023/24 pay award would impact the final salary element of accrued pension benefits.

OC turnover remained static at 1.8% in quarter 1. The 14 trainees recruited in January all successfully completed their training and are now in their development phase. This will alleviate some of the ongoing OC staffing challenges, alongside a range of other improvements to support recruitment, retention and employee engagement, including development activity for supervisory and middle managers.

## **Section 2**

### **2.1**

**Support, promote and monitor the development of an inclusive culture, aligned with SFRS values.**

#### **2.1.1 Total number of grievance cases**

The number of grievances submitted in this quarter was 3, which is a decrease of 3 from the previous quarter. From these, 1 was based in the East SDA, with the other 2 cases in Directorates. Two cases were in relation to Dignity & Respect at Work, whilst the other case was in relation to breach of policy. Two of these cases have concluded and no appeals were received following the outcome, whilst the other case remains ongoing.

#### **2.1.2 Total number of discipline cases**

A total of 14 new disciplinary cases commenced within quarter 1, which is a decrease of 9 from the previous quarter. Of these cases, 1 was within a Directorate, 6 in the North, 5 in the East and 2 in the West. The main themes in these new cases are Breach of the Code of Conduct, Breach of Policy and Breach of Contract.

In this quarter, 2 cases concluded within 6 weeks, 2 concluded within 6-12 weeks, 1 case concluded in 12+ weeks and the remaining 9 cases will carry over to quarter 2 2024/25. At the end of quarter 1, a total of 29 cases carried forward into quarter 2. The majority of those carried forward commenced near the end of this quarter and some have scheduled hearing dates in early quarter 2 which will conclude the process. Planned annual leave over the early summer period also impacted the availability of employees, investigating officers, people advisers and union representatives, leading to some delays in progressing cases.

#### **2.1.3 Confidential Reporting Line**

Since the launch of the Confidential Reporting Line (CRL) in May 2024 as part of the Service's Cultural Action Plan, two monthly reviews have been conducted, identifying opportunities to streamline internal process. The communication and publication of material has proven to be an effective way to signposting employees to the CRL.

To date, the majority of reporters have opted to use the web based encrypted portal to raise concerns. A number of reports have been received from individuals who are not currently employed by the SFRS and they have been directed to the appropriate channels to raise their concerns. A fuller review will be undertaken after six months.

## **Section 3**

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

#### **3.1.1 Top 3 reasons for New Management Referrals**

In quarter 1 2024/25 there were 239 management referrals attended with wellbeing Physiotherapist and Practitioners. The top 3 reasons for management referrals in quarter 1 were:

1. Musculoskeletal – 98
2. Psychological - 72
3. Circulatory – 6 and Neoplasm - 6

Musculoskeletal (MSK) and psychological continue to be the 2 leading reasons for referral however circulatory and neoplasms replace digestive system as the joint third leading reasons in comparison to quarter 4 2023/24.

To ensure timely access to physiotherapy support, an additional 37 referrals were made directly to external physiotherapists, rather than the normal practice of attending an initial in-house virtual physiotherapy appointment. Considering both internal and external referrals there has been no change in the number of MSK referrals from quarter 4 2023/24 to quarter 1 2024/25.

Further analysis of the 72 new appointments attended due to psychological reasons shows that 19 were due to mental health and 53 due to stress. This represents a reduction in mental health referrals of 6 and stress referrals of 17 compared to the previous period.

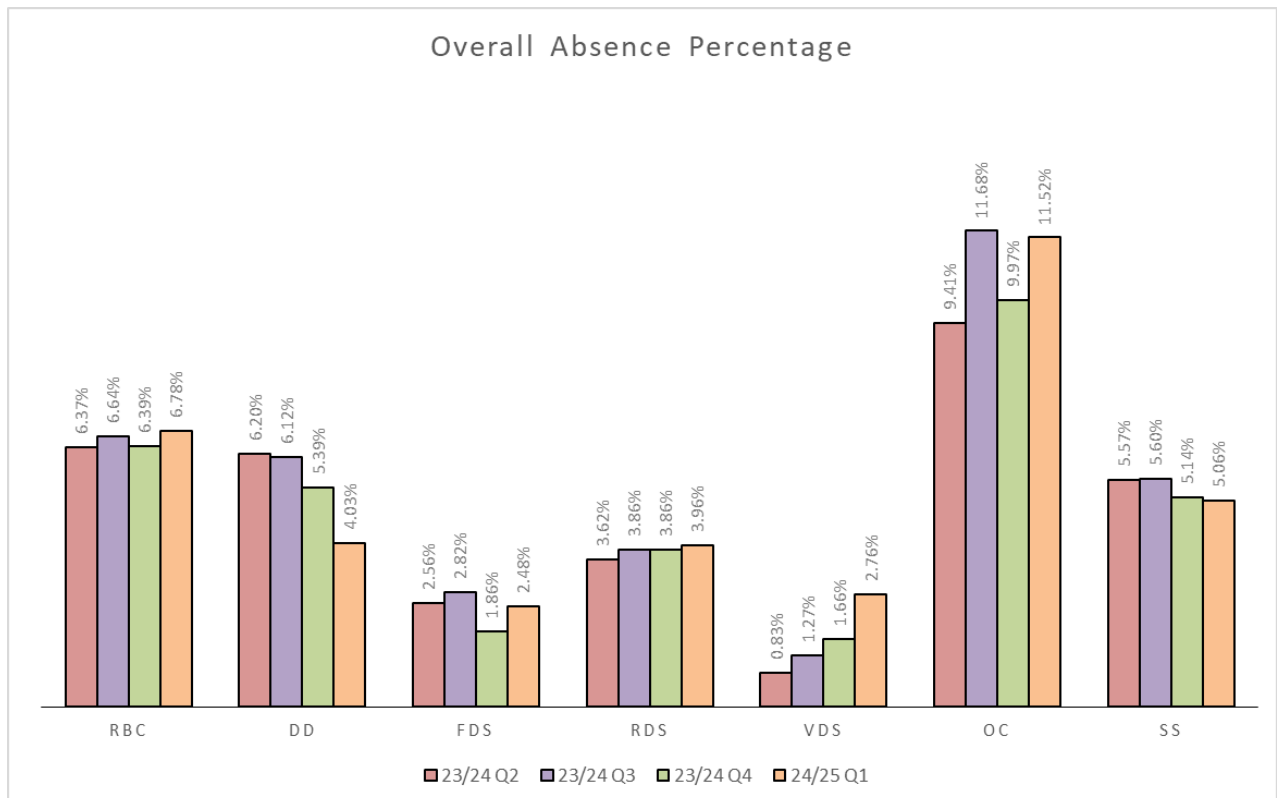
Of the 53 referrals due to stress, 23 were attributed to work-related stress and 30 were attributed to non-work-related stress. The leading reason for work related stress in quarter 1 was Role (15). This is consistent with the previous period when there were 18 referrals due to stress attributable to work-related role.

### 3.1.2 Overall absence percentage

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Overall Absence (work days lost versus work days available)	6.78%	4.03%	2.48%	<b>5.85%</b>	3.96%	2.76%	11.52%	5.06%	<b>4.68%</b>

There has been a minimal increase to the overall absence rate of 0.15% versus quarter 4 2023/24 when the total was 4.53% and in comparison, to the same period last year when the rate was 4.08%. All duty groups other Day Duty and Support Staff than have seen a slight increase in their overall absence figures.

The absence rate in Operations Control has increased by 1.55% this quarter, from 9.97% in quarter 4, as a result of increase in long term absence (see 3.1.4 below). A focused wellbeing programme continues to be rolled out across the OCs and a wellbeing open day will be hosted at Dundee OC on 21<sup>st</sup> August 2024, with planning underway to complete a further event at Edinburgh OC later in the year. The programme is complete for Johnston OC. In addition to ongoing support provided locally by the People Adviser to manage individual absence cases, a development session for OC Crew and Watch Commanders is scheduled on 5<sup>th</sup> September 2024.



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

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Short-Term Absence (work days lost versus work days available)	2.26%	0.76%	0.73%	<b>1.84%</b>	0.84%	0.14%	3.05%	1.49%	<b>1.20%</b>

All duty groups have seen a decrease in short term absences from the previous quarter and rates are in line with the same quarter last year. People Advisers continue to support Line Managers in managing attendance and ensuring suitable monitoring is in place to reduce short term absence.

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

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Long-Term Absence (work days lost versus work days available)	4.52%	3.27%	1.76%	<b>4.01%</b>	3.11%	2.62%	8.47%	3.56%	<b>3.48%</b>

Long-term absence rates have increased since last quarter, from 3.06% in quarter to 3.48%. The largest increase is within OC where a number of short terms absences have moved to long term, taking the long-term absence rate 6.65% to 8.47% since the last quarter. All long-term absences are monitored by Line Managers and appropriate support is provided by the Wellbeing team and wider People Directorate.

### 3.1.5 Short-term absence by top three absence reasons

Short Term Sick - Top 3 Reasons	Musculoskeletal	Respiratory	Stomach or Bowel	Other	TOTAL
RBC	585	800	385	563	2333
DD	48	44	25	59	176
FDS	19	14	5	79	117
RDS	611	721	179	590	2101
VDS	7	0	1	26	34
OC	40	40	32	95	207
SS	217	87	83	272	659
<b>Total Working Days Lost</b>	<b>1527</b>	<b>1706</b>	<b>710</b>	<b>1684</b>	<b>5627</b>
<b>Number of Employees</b>	<b>287</b>	<b>389</b>	<b>256</b>	<b>289</b>	<b>1221</b>

### 3.1.6 Long-term absence by top three absence reasons

Long Term Sick - Top 3 Reasons	Musculoskeletal	Psychological	Surgical	Other	TOTAL
RBC	2326	836	698	806	4666
DD	95	338	75	249	757
FDS	21	136	125	0	282
RDS	3772	1442	968	1588	7770
VDS	264	114	91	168	637
OC	32	291	33	218	574
SS	360	447	156	606	1569
<b>Total Working Days Lost</b>	<b>6870</b>	<b>3604</b>	<b>2146</b>	<b>3635</b>	<b>16255</b>
<b>Number of Employees</b>	<b>187</b>	<b>97</b>	<b>53</b>	<b>86</b>	<b>423</b>



The tables above show the main reasons for employee absence in terms of working days lost, for both short and long-term absence, and the total number of employees absent within these categories. Short term absences are in line with the same period last year.

The overall working days lost due to psychological absence has increased by 541 days compared to previous quarter, with a general upward movement this quarter across all staff groups. This is in contrast with the referral rate to Wellbeing in this quarter with the psychological referral rate decreasing from 95 to 72. We will continue to track this data and offer any analysis or trends moving forward.

## Appendix 1 – Glossary of Terms

CAP	Culture Action Plan
CDG	Culture Development Group
CES	Colleague Experience Survey
CRL	Confidential Reporting Line
DD	Day Duty
E,D&I	Equality, Diversity and Inclusion
FDO	Flexi Duty Officer
FDS	Flexi Duty System
FTE	Full Time Equivalent
EHRIA	Equality and Human Rights Impact Assessment
LSO	Local Senior Officer
MSK	Musculoskeletal
NTC	National Training Centre
OC	Operations Control
On-Call RDS/VDS	Retained and Volunteer Duty System
OCSCG	On-Call Strategic Coordinating Group
RBC	Resource Based Crewing
RDS	Retained Duty System
RDS FT	Retained Duty System Full Time
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SLT	Strategic Leadership Team
SPPA	Scottish Public Pensions Agency
SS	Support Staff
SVQ	Scottish Vocational Qualification
T&C	Terms and Conditions
TOM	Target Operating Model
TOR	Terms of Reference
TTM	Task and Task Management
TU	Trade Union
VDS	Volunteer Duty System
WC	Watch Commanders
WDS	Watch Duty System
WTFF	Wholtime Firefighter

## Appendix 2 – PMF People Measures

The experience of those who work for SFRS improves as we are the best employer we can be.

KPI	Indicator	Purpose	Geography	Frequency	Target	Business Area
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - Flexi	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - OC	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - OS	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People

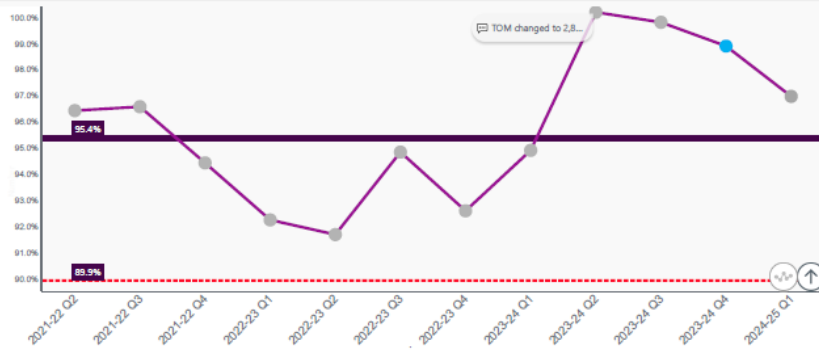
### KPI 46 Resource Based Crewing FTE



Track

**PURPOSE:** This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:** Head of People



#### SUMMARY

RBC FTE v TOM has decreased significantly from previous Quarter. An increased intake for Aug from 48 to 72 was approved and an increased intake for Jan 25 has been requested.

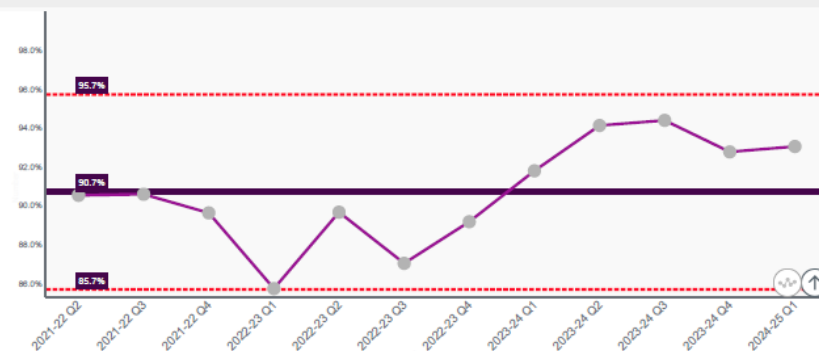
### KPI 46 Off Station FTE



Track

**PURPOSE:** This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:** Head of People



#### SUMMARY

Off Station FTE continues to show increased deficiency against TOM, mainly due to Leavers at WC level across Directorates and Functions. Work is ongoing to support the position.

**KPI 46 Flexi Officer FTE** Track

**PURPOSE:** This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:** Head of People

**SUMMARY**

Flexi Officer FTE continues to show an increasing deficiency against TOM due to numbers of leavers due to Pension Remedy and Retirement. Work is ongoing to improve the position.

Quarter	FTE %
2021-22 Q2	98.1%
2021-22 Q3	97.8%
2021-22 Q4	97.8%
2022-23 Q1	95.8%
2022-23 Q2	97.0%
2022-23 Q3	95.4%
2022-23 Q4	96.2%
2023-24 Q1	99.2%
2023-24 Q2	98.2%
2023-24 Q3	98.2%
2023-24 Q4	98.1%
2024-25 Q1	98.5%

**KPI 46 Operations Control FTE** Track

**PURPOSE:** This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:** Head of People

**SUMMARY**

OC FTE v TOM has decreased slightly since previous Quarter - due to a slight increase in TOM, and slight reduction in FTE. Overall Headcount has remained the same though.

Quarter	FTE %
2021-22 Q2	95.0%
2021-22 Q3	97.5%
2021-22 Q4	93.5%
2022-23 Q1	95.8%
2022-23 Q2	99.0%
2022-23 Q3	98.0%
2022-23 Q4	94.0%
2023-24 Q1	94.8%
2023-24 Q2	92.2%
2023-24 Q3	89.0%
2023-24 Q4	95.0%
2024-25 Q1	94.8%

**KPI 46 Rural Full-time FTE** Track

**PURPOSE:** This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:** Head of People

**SUMMARY**

Rural FT FTE is 100% staffed in terms of Headcount and just under 100% staffed in terms of FTE.

Quarter	FTE %
2021-22 Q2	97.2%
2021-22 Q3	98.2%
2021-22 Q4	98.2%
2022-23 Q1	96.5%
2022-23 Q2	94.8%
2022-23 Q3	96.5%
2022-23 Q4	98.5%
2023-24 Q1	96.5%
2023-24 Q2	98.5%
2023-24 Q3	99.8%
2023-24 Q4	93.2%
2024-25 Q1	98.5%

**KPI 46**

**On Call Retained FTE**



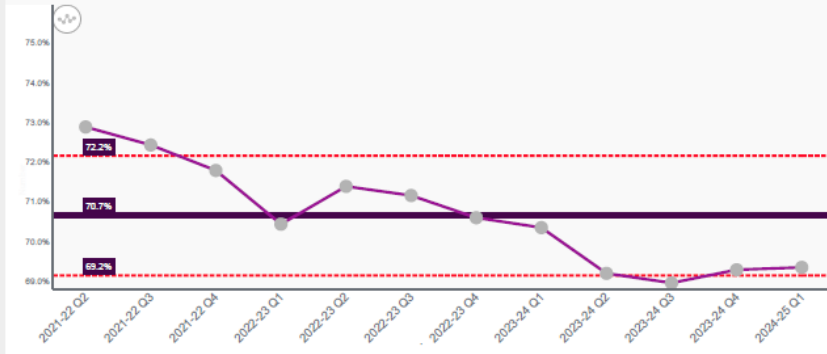
Track

**PURPOSE:**

This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:**

Head of People



**SUMMARY**

On Call Retained FTE continues to show an increased deficiency against TOM, mainly due to challenges around recruitment and recruitment timeframes. Work is ongoing within OCSCG to improve the position.

**KPI 46**

**On Call Volunteer FTE**



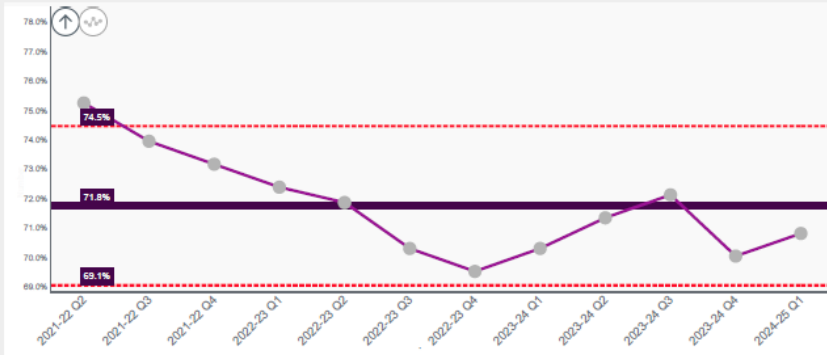
Track

**PURPOSE:**

This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:**

Head of People



**SUMMARY**

On Call Volunteer FTE has slightly decreased from previous Quarter but over all gap between TOM and FTE has also decreased due to smaller TOM. Variation between TOM and FTE now slightly less than Q4 from previous year.

**KPI 46**

**Support Staff FTE**



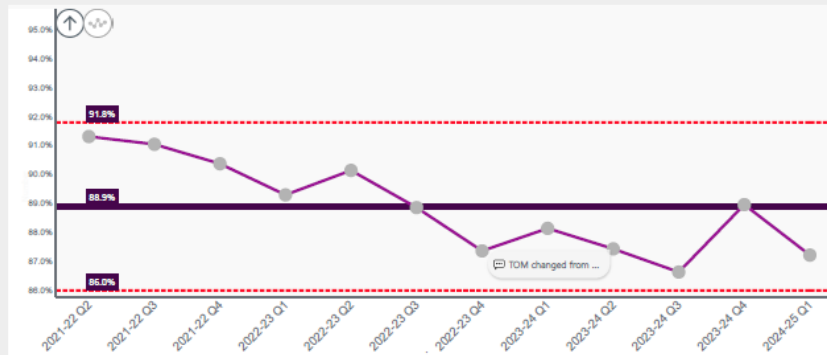
Track

**PURPOSE:**

This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

**OWNER:**

Head of People



**SUMMARY**

SS Turnover has remained reasonably consistent from previous Quarter. Overall SS Vacancies has seen an increase as a result of increased recruitment requirements within the Portfolio Office. As a result - the overall SS TOM has increased also.

**KPI 47**

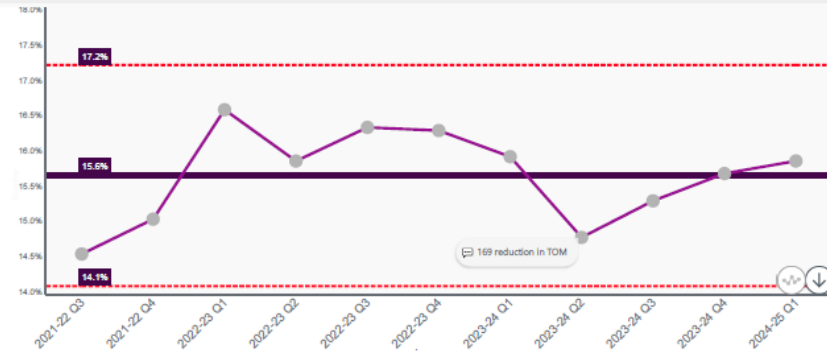
**Vacancies Rate**



Track

**PURPOSE:** Monitoring the vacancy rate provides insight into the Service's ability to attract, recruit and retain staff, and the time to hire.

**OWNER:** Head of People



**SUMMARY**

Vacancies, overall, has seen a slight increase since previous Quarter but overall Percentage remains roughly the same. Biggest challenge remains Recruitment Landscape. Work is ongoing across all strands to improve Vacancy position.

**KPI 48**

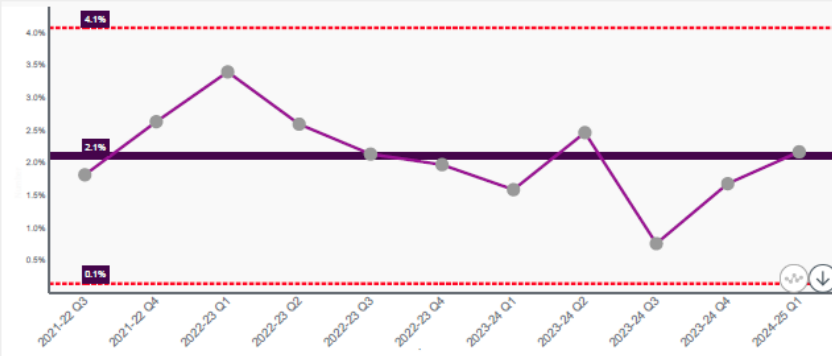
**Turnover Rate**



Track

**PURPOSE:** Monitoring staff turnover and the underlying reasons provides insight into SFRS' attractiveness as an employer, aligned to our ambition to develop and sustain a positive and inclusive workplace culture where all employees are treated with respect and dignity.

**OWNER:** Head of People



**SUMMARY**

Turnover Rate, overall, has seen a slight increase from previous Quarter; mainly due to a significant increase in FDS Turnover. All other Groups have remained reasonably consistent.

**KPI 49**

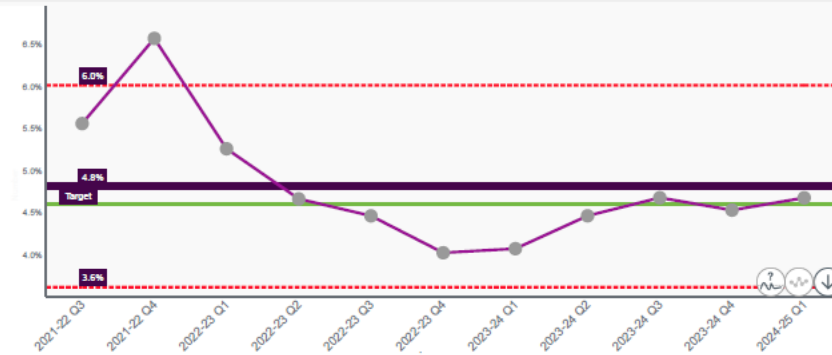
**Absence Rate**



Reduce against previous year

**PURPOSE:** Monitoring levels of short- and long-term absence along with the underlying reasons and trends enables SFRS to support employee health and wellbeing, helping colleagues return to work and stay in work.

**OWNER:** Head of People



**SUMMARY**

All Duty Groups, less DD and SS, have seen a slight increase in their overall absence figures, with an overall increase of 0.15% in Absence from the last Quarter (Q4) of 2023/2024.

# SCOTTISH FIRE AND RESCUE SERVICE

## PEOPLE COMMITTEE



Report No: C/PC/34-24

Agenda Item: 9.1

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>CULTURE ACTION PLAN – UPDATE PAPER</b>						
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>					
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
<b>1</b>	<b>Purpose</b>						
1.1	To update the People Committee on the progress of future pathway activities detailed within the Culture Action Plan and delivered via the Culture Development Group (CDG) and associated sub-groups.						
<b>2</b>	<b>Background</b>						
2.1	Continued scrutiny of Fire and Rescue Services in England and Wales has noted widespread discrimination, harassment and bullying through several published documents. This includes the London Fire Brigade report, HMICFRS 'Values and Culture in the FRS 2023' paper and the National Fire Chief Council (NFCC) Cultural Action Plan, as well as the HMICS Thematic Inspection into Organisational Culture in Police Scotland.						
2.2	The Scottish Fire and Rescue Service (SFRS) has reviewed our position against this external context and wider media reports and recognise that whilst these behaviours do not represent the majority of our employees, there is evidence of behaviour within the Service that does not fit with our values and professional standards. This cultural misalignment needs to be addressed as a strategic priority.						
2.3	Therefore, a Culture Action Plan (CAP) has been approved to address these concerns. Three priority actions have been identified and work commenced on these during 2023, alongside the establishment of the CDG.						
2.4	The need for review continues to be shaped by many factors, including service transformation, public cultural and behavioural perceptions of the industry, as outlined above, as well as improvements identified by SFRS from employee relations cases.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b><u>Previous work undertaken</u></b>						
3.1.1	An internal review of current policies, practices, and targeted engagement activity informed the approach and provided a baseline for discussion. This includes but is not limited to: <ul style="list-style-type: none"> <li>• A comparative analysis of other FRS's cultural reports/industry insights (detailed above) to highlight opportunities for improvement.</li> <li>• Review of outputs from supervisory manager engagement sessions, SFRS Values Framework and content of the FBU Firestorm report</li> <li>• Analysis of the SFRS employee relations cases spanning 2020-2023</li> </ul>						



3.1.2	<p><b><i>Culture Development Group (CDG)</i></b>  The CDG was set up in late 2023 to support the delivery of the CAP with the fundamental objective of promoting positive workplace behaviours, tackling unacceptable behaviour and establishing a pathway for sustained improvement. It comprises membership from across the SFRS and all recognised Trade Unions, with allotted space at monthly meetings for attendance across our workforce to encourage wider participation and promote transparency.</p>
3.1.3	<p>The CDG aims to support delivery of the CAP objectives by setting down the foundations for culture change and enabling positive behaviours.</p>
3.1.4	<p><b><i>Culture Action Plan (CAP)</i></b>  The outputs of the internal review (detailed in 3.1.1) have contributed to the formation of the Culture Action Plan. The CAP comprises 42 actions identifying areas for development and / or improvement to support the delivery of the SFRS' cultural objectives.</p>
3.1.5	<p>A cultural roadmap is being developed in collaboration with the Portfolio Office which will bring the key deliverables from the action plan together in a single strategic view. This will be used to identify links into the inflight portfolio and highlight any significant inter-dependencies with the Strategic Service Review Programme (SSRP).</p>
3.1.6	<p>Three priority actions have been identified as strategic imperatives and work commenced on these during 2023. It was necessary to identify these key actions to support strategic and resource planning. However, it is also important to highlight that there is continuing activity across the remaining actions detailed within the CAP. Including: ongoing Strategic Leadership Team (SLT) workplace visits, promotion and succession planning, review of exit interview process, and continuing work to identify and act on opportunities that arise through organisational change programmes to influence workplace culture. An overview of current workflow relative to the three priority actions is shared below:</p>
3.1.7	<p><u>Priority 1: Attracting and supporting a more diverse pool of candidates.</u></p> <ul style="list-style-type: none"> <li>• Review of existing end-to-end recruitment and selection processes including the experiences of candidates and perceptions of current employees. This is being approached incrementally, with adaptations and enhancements being applied to new activities from September 2023 and will continue iteratively.</li> <li>• Review of Positive Action (PA) activities (internal &amp; external) and opportunities to increase diversity of workforce / raise awareness of SFRS as an inclusive employer. Feedback from PA Masterclasses has informed a rolling programme of these for under-represented groups. Enhancements are planned to commence from September 2024</li> <li>• Opportunities to understand community perceptions and the barriers currently experienced by under-represented groups will be developed to assist in improved marketing of the SFRS and the role of Firefighter. Insight to shape this work will be influenced by the Emergency Service Awareness event (May 2024); Career Ready programme; (June 2024) Women in the Fire Service event; (Sept 2024) HMFSI Inspection; Confidential Reporting Line insight; the Colleague Experience Survey; 2024 and ongoing engagement with local Community Action teams, Strategic People Partner insight and other relevant PA activity.</li> </ul>
3.1.8	<p><u>Priority 2: Developing Managers and Leaders</u></p> <ul style="list-style-type: none"> <li>• The People Directorate engagement sessions have concluded. The dashboard of feedback from the East has now been combined with North &amp; West, shared with the SDA management teams and the CDG. The combined feedback provided essential insight and informed the development of the Management Development Framework</li> <li>• The Management Development Framework (Day 1 People Essentials) pilot, for supervisory managers has been delivered within the East and West SDAs and feedback will continue to shape future sessions. The Day 1, People Essentials</li> </ul>



session provides an introduction to the role of the supervisory manager and expectations of that role in upholding SFRS values. The session incorporates communication skills and having difficult conversations, as well as an Equality and Diversity session. A practical scenario is incorporated into the session which further explores management skills and supporting employees, in an inclusive manner across a range of managerial and cultural topics.

- The People Essentials course will be further supported through digital sessions on individual topics, self-learning and other in person sessions, covering the full range of the supervisory manager role.
- Existing Leadership development programmes have continued, with Learning Needs Analysis (LNA) processes established to collectively identify opportunities for employees to access individual learning. Programmes have been well received with learners providing presentations of how they have applied their learning in the workplace and the positive impact this has made. align with the continued development and rollout of the Management Development Framework

### 3.1.9 Priority 3 – Improving Business Intelligence to inform future actions.

- Analysis of the Colleague Experience Survey (CES) commenced in Q1 2024/25, with outcomes and actions being communicated across the Service during Q2 2024/25 to highlight key findings and provide insights to collaboratively build action plans for driving performance and employee engagement.
- The Confidential Reporting Line (CRL) will provide the SFRS with a platform to inform a real time MI dashboard. Anonymised data may provide engagement indicators by area or function; non-anonymised, anonymised or partially anonymised data, in the form of a complaint or allegation of misconduct, may be used to inform investigations; all of which will contribute to a suite of data that shapes cultural intelligence in a significantly more pro-active way than current practice.
- Senior Point of Contact (SPOC) appointed to act as direct liaison with HMFSI and facilitate the thematic inspection of culture. The aim of the inspection is to assess the organisational culture of the SFRS and whether it enables us to achieve our aims and ambitions.
- Work is being undertaken to develop what defines good culture within the SFRS. Included within this is a review of how we can improve the quality of sensitive data that our employees choose to share with us. The outputs of this will contribute to our wider objective of building meaningful intelligence to inform future activities relating to culture and, along with the above insight will demonstrate performance against our aspirations.

3.1.10 These workstreams will provide indications of alignment with our strategic objectives to measure performance against plan and influence continued approach.

### 3.2 Current Work in Progress

3.2.1 Below provides an update on the current progress across key enablers and work-streams that will support SFRS to continue to deliver the CAP.

#### 3.2.2 Communication of the Cultural Action Plan

Development of a culture and values communication and engagement strategy is underway and will provide essential branding to 'in progress' culture work so that activity is visible to colleagues and aligns with our values and embeds messages. To support the understanding of our aims. Benefits and improvements will be measured and used to identify and inform ongoing activity.

3.2.3 A joint communication between the SFRS and FBU was shared with colleagues on 6 August to provide some context for our culture review activity and collaborative plans to facilitate this. A dedicated 'Culture' space on iHUB was also launched via the weekly communication brief to provide an overview of the Culture Development Group aims and share an abbreviated version of the Culture Action Plan. This iHUB space is being used to 'house' all

	<p>culture related activity, including CES, CRL work and HMFSI and now provides functionality to signpost colleagues to a single information source for all culture related news and activity updates. This iHub page will continue to evolve as the work progresses.</p>
3.2.4	<p><u>Colleague Experience Survey</u>  The CES 2024 results have undergone scrutiny via the relevant Governance routes and have now been shared with key stakeholders, including Union colleagues and across the wider service. The communication focusses on highlighting the Top 5 Areas of Performance and Improvement, as well as our Employee Advocacy Scores and other key insights. The CES (individual) Corporate Services and Operational Delivery results are currently being finalised and discussions are underway with Skills for Justice to commission result splits at Directorate level. Next step actions include the formation of focus groups to validate the results, identify key drivers and promote solution focussed discussions to inform the development of manager toolkits and action planning.</p>
3.2.5	<p><u>Confidential Reporting Line</u>  A 3-month post implementation review of the CRL has been undertaken and identified some minor process improvements to promote efficiency in the handover of information internally. The review confirms that the introduction of the confidential reporting line has been a success and is working effectively.</p>
3.2.6	<p>The SFRS have received 12 reports in 3 months. There are currently 4 reports open and 8 have been closed. Of the closed reports, 7 have been found to be Unsubstantiated and 1 has been Substantiated. It should be noted that while most closed cases were not upheld, the information shared by the reporter has resulted in enhancements to management practises and refreshed communication on current process, where we have capitalised on opportunities to promote continuous improvement.</p>
3.2.7	<p><u>Management Development Framework (MDF)</u>  Delivery of Management Development Framework Day 1: People Management Essentials for Supervisory Managers is continuing with engagement taking place across SFRS to facilitate the training.</p>
3.2.8	<p>A recent Crew Commander promotion process has provided the opportunity to deliver the training to newly promoted supervisory managers, with the first training sessions due to take place in the North SDA. It is anticipated that this will be continued within both the East and West SDA upon conclusion of their Crew Commander promotion processes with the aim of ensuring that the understanding of supervisory role, values and behaviours is provided at an early stage.</p>
3.2.9	<p>Design has commenced on Supervisory Management Day 2 (Training Safety and Assurance Management) and 3 sessions (Operating and managing on the incident ground and in the community -PP&amp;P/Operations focussed). In addition, the development of the wider Management Development Framework resources is being progressed alongside the Management Development CDG Subgroup and informed by the combined feedback from the People Directorate engagement sessions. These wider framework resources will include in-person sessions, online and digital options ranging from directed self-learning to subject matter expert facilitated sessions. In addition to consolidation and peer learning opportunities.</p>
3.2.10	<p>Collaboration with the NFCC and rollout of existing Supervisory Leadership Development Programme continue with the launch of the second Supervisory Leadership Development Programme in August 2024. This aligns with the continued development and rollout of the Management Development Framework and follows the programmes positive pilot in 2023-24 which included delegates demonstrating how they applied their learning in the workplace and the positive impact made. Preparations have commenced for the launch of the Middle Manager Leadership Development Programme pilot in Q3 2024-25.</p>

3.2.11	<p><u>HMFSI Inspection</u></p> <p>Senior Point of Contact has been appointed to provide a direct liaison with the Inspectorate and offer support throughout the audit process. The SFRS have facilitated the submission of HMFSI's data request and information gathering sessions. Interviews commenced within the People Directorate on 22 August to initiate discussions around 14 policy areas that have been identified as the key focus. Broader fieldwork to obtain a representative sample across SFRS is currently being discussed with HMFSI. However, due to the size of the data request, desk and fieldwork will be simultaneous. More details, and the timeline for the inspection can be obtained via the published <a href="#">HMFSI outline</a>.</p>
3.2.12	<p><u>Culture Development Group &amp; Subgroup Updates</u></p> <p>Terms of Reference and CDG membership has been agreed with meetings in full flight. The formation of sub-groups is now complete, with the appointment of sub-group leads and member recruitment finalised prior to launch of the groups. The first sub-group meetings took place throughout July. A session on Good Culture was delivered by the Consultancy Group 31-Ten on 2 July CDG meeting, which was arranged as part of our commitment to use 'Speaker Events' to share expertise and enhance CDG understanding across the broad spectrum of culture. Further 'Speaker Events' will be explored over the coming months. However, the focus of the CDG has primarily been to stand up the sub-groups.</p>
3.2.13	<p>Below details the Subgroup Progress to date:</p>
3.2.14	<p><u>Organisational Learning Subgroup</u></p> <p>The following priority actions have been confirmed with subgroup members along with allocated action owners and projected timelines so that progress can be monitored.</p> <ol style="list-style-type: none"> <li>1. To develop proposals for delivering a learning culture and supporting individuals/organisation to be receptive to feedback.</li> <li>2. To review the current Exit Interview Questionnaire and propose improvements to the content to maximise information/ insight</li> <li>3. Development a Case Review process to support lessons learned and areas of good practice</li> <li>4. Develop proposals to obtain feedback from other employment practices (people, asset, training)</li> </ol>
3.2.15	<p>Data collation has commenced to identify the scope of current reporting capabilities, such as absence, discipline &amp; grievance and exit interviews. This collation will also highlight opportunities to gain further insight from other data intel, for example, the Confidential Reporting Line and CES 2024 insight. The intention will be to hold this data in a central repository that is overseen by the CDG to enable a consistent data baseline that informs each subgroup.</p>
3.2.16	<p><u>Management Development Subgroup</u></p> <p>The following priority actions have been confirmed with subgroup members along with allocated action owners and projected timelines so that progress can be monitored.</p> <ol style="list-style-type: none"> <li>1. Support the development of Supervisory management framework, both in person training, guidance and toolkits</li> <li>2. To review the Induction content for internal promotions / movements to identify pathways/ development requirements</li> <li>3. Consider and propose other opportunities for development (eg use of development days, appraisal) to support Development Frameworks</li> </ol>
3.2.17	<p><u>Professional Standards Subgroup</u></p> <p>The professional standards subgroup has been split into 3 deliverables. The key outputs have been summarised below; -</p>

3.2.18	<p><i>Integrating Culture (Subgroup: 1 Core Code of Ethics)</i></p> <ol style="list-style-type: none"> <li>1. A review of NFCC Core Code of Ethics; and</li> <li>2. An Action plan for embedding them in SFRS culture and values.</li> </ol>
3.2.19	<p><i>Integrating Culture (Subgroup: 2 Station and Professional Standards)</i></p> <ol style="list-style-type: none"> <li>1. A review of SFRS Station Standards/Professional Standards.</li> <li>2. An action plan to ensure that SFRS core values, positive culture and ethical behaviour is embedded in watches and teams via the Stations Standards and wider Operational Assurance/Station audit Process; and</li> <li>3. Consideration of supporting measures (such as education, systems, audit and training) that will support excellence in standards, behaviour and culture on stations, in watches and teams in SFRS.</li> </ol>
3.2.20	<p><i>Integrating Culture (Subgroup: 3 High performing Teams with total psychological safety)</i></p> <ol style="list-style-type: none"> <li>1. A review and report on the relationship between psychological safety and high performing teams.</li> <li>2. A consideration of the measures, tools or frameworks that may help embed the concept of “high performing teams with total psychological safety” in SFRS.</li> <li>3. A review of any additional related (or unrelated) academic and industry concepts that could add value to the psychological wellbeing and cultural health of the SFRS.</li> </ol>
3.2.21	<p><b><u>Attraction &amp; Engagement Subgroups</u></b></p> <p>The attraction and engagement subgroups progress is outlined as follows; -</p> <ol style="list-style-type: none"> <li>1. Stakeholder mapping exercise completed on what future recruitment looks like</li> <li>2. Focus group meeting arranged and hosted in Livingston to capitalise on a location with diverse working arrangements</li> <li>3. Focus group organised for the Women in Fire Service event in September</li> <li>4. Day in the life of a firefighter (DILO) initiative in progress</li> <li>5. Dedicated culture section on the iHub where comms is being managed through</li> <li>6. Undertaking a reviewing of how we communicate our values and behaviours</li> <li>7. Reflection on feedback from research and analysis of how broader insight can be used to develop a communication and marketing campaign</li> </ol>
<b>4</b>	<b>Recommendation</b>
4.1	To note progress relating to key priorities identified within the Culture Action Plan and update on the work of the Culture Development Group and associated subgroups to support delivery of these objectives.
<b>5</b>	<b>Key Strategic Implications</b>
5.1 5.1.1	<p><b>Risk</b></p> <p>There is a risk of potential reputational, legal and financial risks associated with any failure to embed an inclusive and psychologically healthy workplace culture.</p>
5.2 5.2.1	<p><b>Financial</b></p> <p>There are currently no financial implications. There may be financial implications associated with any future development of actions in support of the findings.</p>
5.3 5.3.1	<p><b>Environmental &amp; Sustainability</b></p> <p>There are no specific Environmental &amp; Sustainability implications arising from this paper.</p>
5.4 5.4.1	<p><b>Workforce</b></p> <p>There is a risk that cultural actions will not be effective if we do not engage with employees to identify their requirements and gain buy in. There is a risk of increased turnover in our workforce if we do not have a positive and inclusive culture.</p>

5.5 5.5.1	<b>Health &amp; Safety</b> There are no specific Health and Safety implications arising from this paper.
5.6 5.6.1	<b>Health &amp; Wellbeing</b> There are no specific Health & Wellbeing implications arising from this paper, though the activities within the cultural action plan have the potential to positively impact employee health and wellbeing.
5.7 5.7.1	<b>Training</b> There may be implications associated with future development frameworks for supervisory and middle managers.
5.8 5.8.1	<b>Timing</b> Taking account of recent external reports in relation to culture across Fire and Rescue Services it is important to act responsively to support delivery of planned activities for 2024/25.
5.9 5.9.1  5.9.2	<b>Performance</b> Any improvement in cultural alignment with SFRS values will lead to improved engagement and productivity.  Any improvement in working environment directly calibrates with increased performance and productivity. Conversely, failure to maintain skilled and engaged employees could have a negative impact on performance.
5.10 5.10.1	<b>Communications &amp; Engagement</b> Engagement has taken place with representative bodies. Further engagement will take place with managers and employees through the finalisation and roll out of the CAP. Support from the Communication & Engagement team will be required to develop and deliver strategies to support the aims of the CAP and CDG, and to communicate activities across the Service.
5.11 5.11.1	<b>Legal</b> There is a requirement to ensure that SFRS comply with employment legislation and our People policies; and that managers are appropriately trained to do so.
5.12 5.12.1	<b>Information Governance</b> DPIA completed Yes/ <b>No</b> . No personal data is in scope of this paper.
5.13 5.13.1	<b>Equalities</b> EHRIA will be completed for any policy or practice change arising from this.
5.14 5.14.1	<b>Service Delivery</b> Engagement and support from Service Delivery will be required to ensure successful delivery of the Cultural Action Plan.
<b>6</b>	<b>Core Brief</b>
6.1	The Interim Deputy Chief Officer of Corporate Services presented an update on activity to support the priority actions relating to the Cultural Action Plan.

<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Liz Barnes, Interim Deputy Chief Officer – Corporate Services
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<b>Substantial/Reasonable/Limited/Insufficient</b>
7.3	<b>Rationale:</b>	Significant activity has taken place to progress the actions within the Cultural Action Plan and future activity has been prioritised.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	N/A	
<b>Prepared by:</b>	KellyAnne McDougall, Talent Team	
<b>Sponsored by:</b>	Liz Barnes, Interim Deputy Chief Officer – Corporate Services	
<b>Presented by:</b>	Liz Barnes, Interim Deputy Chief Officer – Corporate Services	
<b>Links to Strategy and Corporate Values</b>		
Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.		
Outcome 6: The experience of those who work for SFRS improves as we are the best employer we can be.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Scrutiny</i>





Report No: C/PC/36-24

Agenda Item: 10.1

<b>Report to:</b>		<b>PEOPLE COMMITTEE</b>									
<b>Meeting Date:</b>		<b>12 SEPTEMBER 2024</b>									
<b>Report Title:</b>		<b>TRAINING FUNCTION UPDATE &amp; PERFORMANCE REPORT Q1 2024-25</b>									
<b>Report Classification:</b>		<b>For Scrutiny</b>		<b>SFRS Board/Committee Meetings ONLY</b>							
				<b>For Reports to be held in Private</b>							
				<b>Specify rationale below referring to</b>							
				<b><u>Board Standing Order 9</u></b>							
				<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>	<a href="#">G</a>	
<b>1</b>	<b>Purpose</b>										
1.1	The purpose of this report is to provide a high-level overview of the Training Function activity and performance over Q1 2024-25.										
<b>2</b>	<b>Background</b>										
2.1	This report outlines the performance measures collated by the Training Function against the Priorities set out by Scottish Government in the Fire and Rescue Framework for Scotland 2022, the SFRS Strategic Plan 2022-25 and Performance Management Framework (PMF).										
<b>3</b>	<b>Main Report/Detail</b>										
3.1	For ease of reference, this report is split into three parts. Firstly, providing a Training Function Update (Appendix A) regarding key aspects of work across the Training Function over Q1 2024-25.										
3.2	Secondly, the report places a specific focus on the Key Performance Indicators as set out in the <a href="#">Performance Management Framework (PMF) 2023-24</a> , with an update into the Q1 2024-25 data, using the corporate <a href="#">Power BI</a> reporting tool, aligned to the Training Function (Appendix B).										
3.3	Finally, further detail to support the Q1 2024-25 Power BI report can be found in Appendix C – Performance analysis.										
<b>4</b>	<b>Recommendation</b>										
4.1	To scrutinise the report and provide feedback as necessary on its content.										
<b>5</b>	<b>Key Strategic Implications</b>										
5.1	<b>Risk</b>										
5.1.1	To ensure risk movement is monitored and actions taken to mitigate this at a Function level the Training Function have reviewed the Functional Risk Register with a specific focus on the control actions and aligned this to workstreams where applicable.										
5.2	<b>Financial</b>										
5.2.1	There are no financial implications arising from the content of this report.										

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5.3 5.3.1	<b>Environmental &amp; Sustainability</b> There are no environmental & sustainability implications arising from the content of this report.
5.4 5.4.1	<b>Workforce</b> The purpose of this report is to strengthen performance managements and drive improvement of our workforce.
5.5 5.5.1	<b>Health &amp; Safety</b> There are no health and safety implications arising from the contents of this report.
5.6 5.6.1	<b>Health &amp; Wellbeing</b> There are no health and wellbeing implications arising from the contents of this report.
5.7 5.7.1	<b>Training</b> To ensure we have personnel maintain their currency within required training requirements for their role.
5.8 5.8.1	<b>Timing</b> Presented on a quarterly basis to allow scrutiny of performance against the Key Performance Indicator's as set out in the Performance Management Framework.
5.9 5.9.1	<b>Performance</b> To strengthen performance managements arrangements and drive improvement. The report details the agreed targets and how we monitor our progress against these throughout the quarter/reporting year.
5.10 5.10.1	<b>Communications &amp; Engagement</b> To ensure performance and risk is discussed at all levels and the content of this reports shared to the relevant forums.
5.11 5.11.1	<b>Legal</b> There are no legal implications arising from the contents of this report.
5.12 5.12.1	<b>Information Governance</b> DPIA completed No.
5.13 5.13.1	<b>Equalities</b> EHRIA completed – Yes. Training Function EHRIA
5.14 5.14.1	<b>Service Delivery</b> To support and drive improvement across the Service to positively impact upon the delivery of our services to the communicates of Scotland.
<b>6</b>	<b>Core Brief</b>
6.1	Not applicable
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>
7.1	<b>Director:</b> Andrew Watt, Director of Training Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b> Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.3	<b>Rationale:</b> The content of this paper demonstrates the approach being taken and the quarterly reporting against performance and risk, to continue to take corrective action where possible/necessary.



<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A – Training Function Update	
8.2	Appendix B– Training Function – Power BI Dashboard	
8.3	Appendix C – Performance analysis – Q1 2024-25	
<b>Prepared by:</b>	Area Commander Ally Cameron, Training Function and Andy Scott, Learning Content, E-Systems & Performance Manager.	
<b>Sponsored by:</b>	Craig McGoldrick, Deputy Assistant Chief Officer Head of Training	
<b>Presented by:</b>	Craig McGoldrick, Deputy Assistant Chief Officer Head of Training	
<b>Links to Strategy and Corporate Values</b>		
<b>SFRS Strategic Plan 2022-25</b>		
<p>Outcome 2 – Communities are safer and more resilient as we respond effectively to changing risks. We will achieve this by: Training effectively and efficiently as a Service and with our partners to improve community safety.</p> <p>Outcome 4 - We respond to the impacts of climate change in Scotland and reduce our carbon emissions. We will achieve this by: Ensuring our people continue to plan, are trained for, and equipped to respond to climate change incidents.</p> <p>Outcome 6 – The experience of those who work for SFRS improves as we are the best employer we can be. We will achieve this by: Continuing to provide training and development opportunities for all our people to ensure they have the right mix of knowledge and skills.</p>		
<b>SFRS Training Strategy 2023-28</b>		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Training Functional Management Team</i>	<i>5 August 2024</i>	<i>For Scrutiny</i>
<i>Directorate Management Team</i>	<i>22 August 2024</i>	<i>For Scrutiny</i>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Scrutiny</i>
<i>Training Safety and Assurance Board</i>	<i>10 October 2024</i>	<i>For Scrutiny</i>

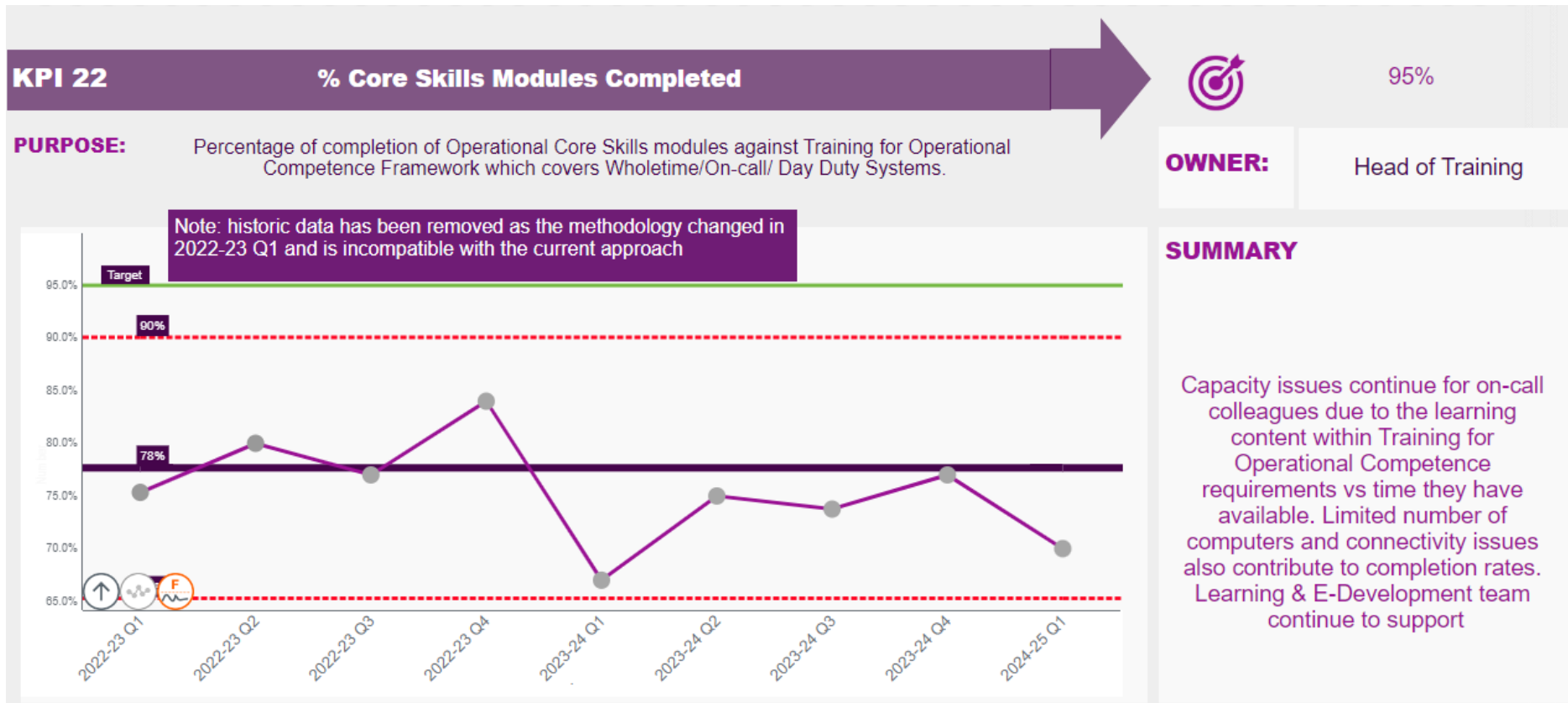
**Introduction**

The purpose of this report is to provide a high-level overview of the Training Function Performance Q1 2024-25. This will enable key stakeholders and owners, to identify areas which can be discussed and what improvement actions are required.

**1.1 Key activity within the Training Function this quarter to support performance improvement.**

SAFETY AND RISK REDUCTION	
Item	Commentary
<b>BA</b>	BA Recovery Plan Phase 2: A first full quarter (Apr-Jun'24) has now been completed with over 800 Firefighters through the bespoke 1-day BA course (incorporating Tactical Ventilation (TV), BA Search & Rescue, and Compartment Fire Behaviour (CFBT)). The course is designed to be modular to allow for flexibility in training and ensure all required learning outcomes continue to be achieved.
<b>Wildfire</b>	Initial training for all Tier 3 wildfire stations has now been completed. Delivery of Level 2 courses at Tier 2 wildfire stations is progressing. Training continues to provide strategic and subject matter expertise (SME) support to the Wildfire Project Strategic lead
QUALITY ASSURANCE, BENCHMARKING AND STANDARDS	
Item	Commentary
<b>British Standards Institute (BSI) Audit</b>	In July an audit was undertaken by BSI at our National Training Centre. The objective of this audit was to conduct a surveillance assessment and look for positive evidence to verify elements of the scope of BSI certification. The audit objectives were all achieved and met intended outcomes, with no nonconformities raised during the audit.
<b>Casualty Care Programme</b>	A review of the SFRS casualty care programme is now complete. The review considered; course content, delivery model, quality assurance, acquisition, and refresher training options, with benchmarking against the National Fire Chiefs Council (NFCC) National Operational Guidance (NOG) and framework standards set out by the Faculty of Pre-Hospital Care (FPHC).
<b>RTC (Road Traffic Collision) Resource provision</b>	A review of the Procurement Framework (Scrap Car / Vehicle supply in support of RTC acquisition and maintenance training) is now complete. Main findings were that the current suppliers can meet the requirements of the Training Function / Service Delivery. However improved delivery arrangements have been identified and will be implemented to improve provision at the point of need.
<b>Driver Training</b>	A collaborative approach between Police Scotland and SFRS in the assessment of new drivers now implemented with successful assessment outcomes.
<b>EXIT Project</b>	Partnership engagement with the EXIT Project initiative, this project is looking at new extrication techniques which focus on improved patient outcomes following Road Traffic Collisions. An SFRS Training Working Group has been established to consider the implementation of new training delivery content based on Project findings.

**PowerBI Dashboard Data Training Function: -**



### KPI 23 % Advanced, Support & Emerging Risks Modules Completed



95%

**PURPOSE:**

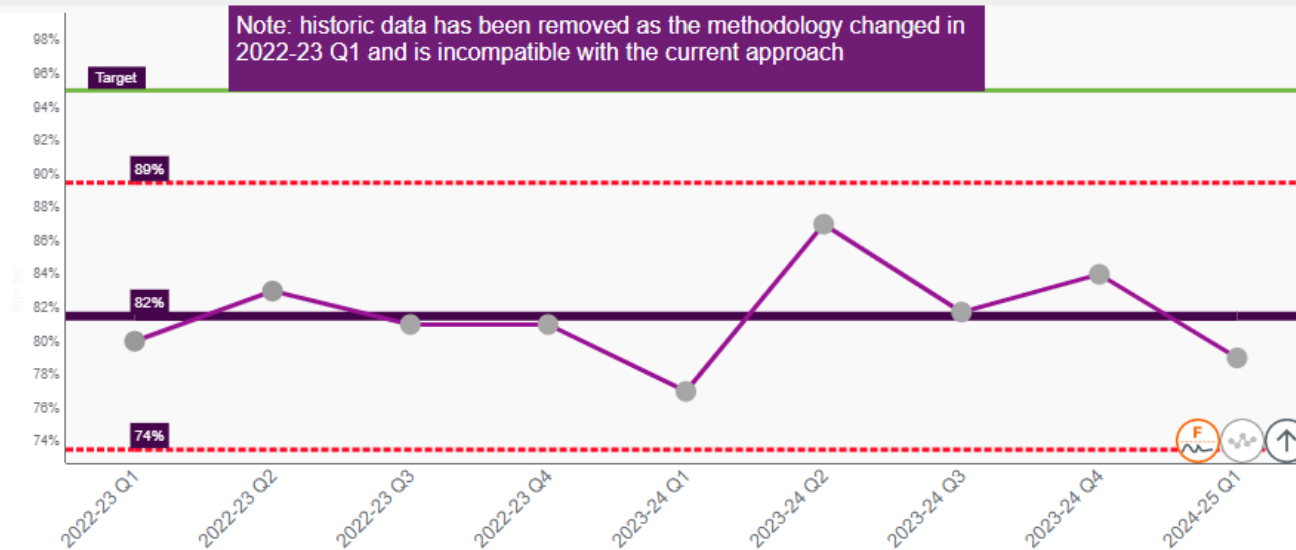
Percentage of completion of Advanced, Support and Emerging Risks Modules against the Training for Operational Competence Framework which covers Wholtime/On-call/ Day Duty Systems.

**OWNER:**

Head of Training

**SUMMARY**

There has been a slight decrease in completion rates across Wholtime, Volunteer, and Day Duty groups. However, the on-call duty group has reported a promising increase this quarter.



**KPI 24**

**% Flexi Officer Module Completion**



95%

**PURPOSE:**

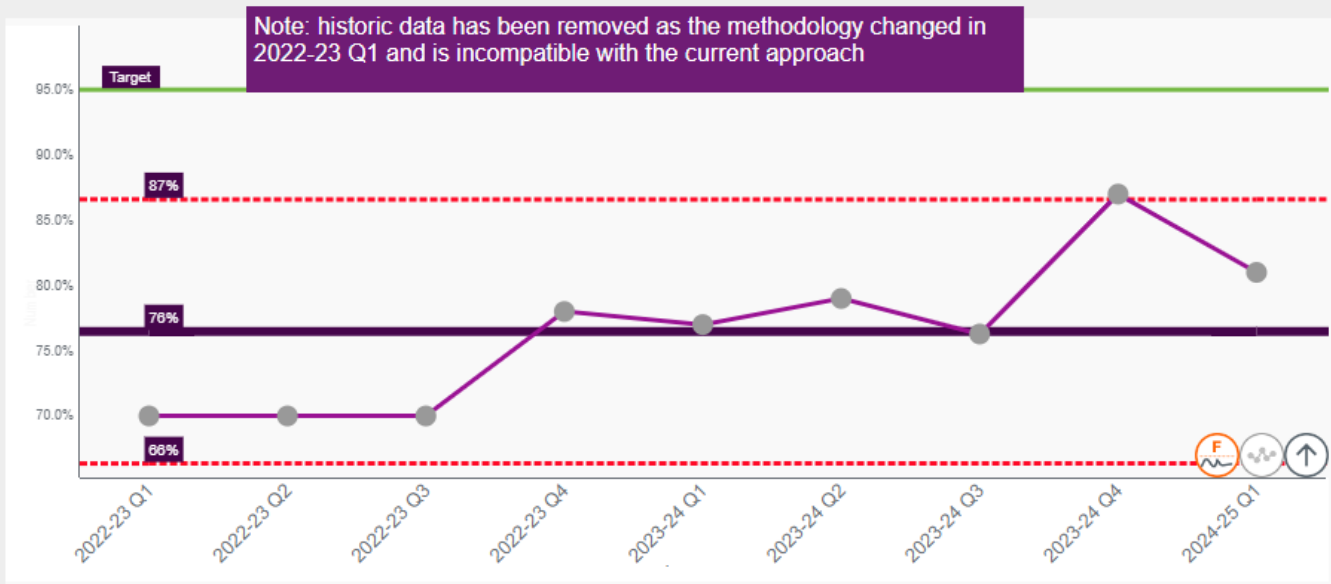
Percentage of completion of Flexi Duty Officer Modules against the Training for Operational Competence Framework which cover Flexi Duty Officers.

**OWNER:**

Head of Training

**SUMMARY**

Training continue to engage with Flexi Duty Officers to improve overall completion rates at the point of Key Performance Indicator reporting.



**KPI 25**

**% Incident Command Course Currency**



91%

**PURPOSE:**

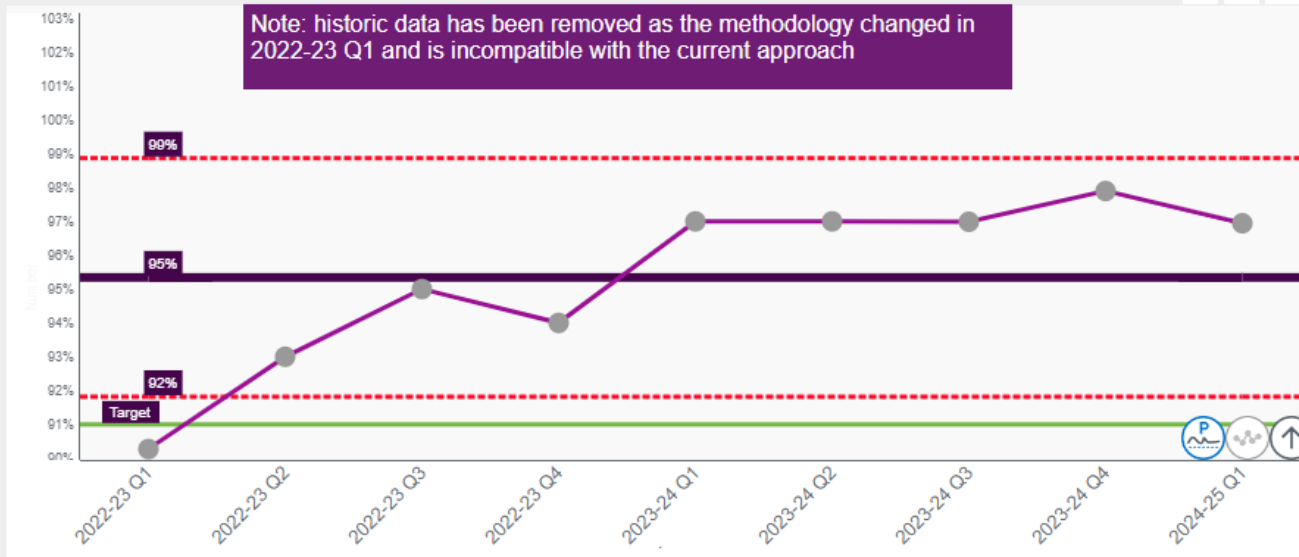
Percentage of completion of Incident Command currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

**OWNER:**

Head of Training

**SUMMARY**

Q1 of 2024-25 showed Incident Command completion rates remaining high, with only a small decrease across all duty groups compared to the previous quarter.



**KPI 26**

**% Core Skills Currency**



73%

**PURPOSE:**

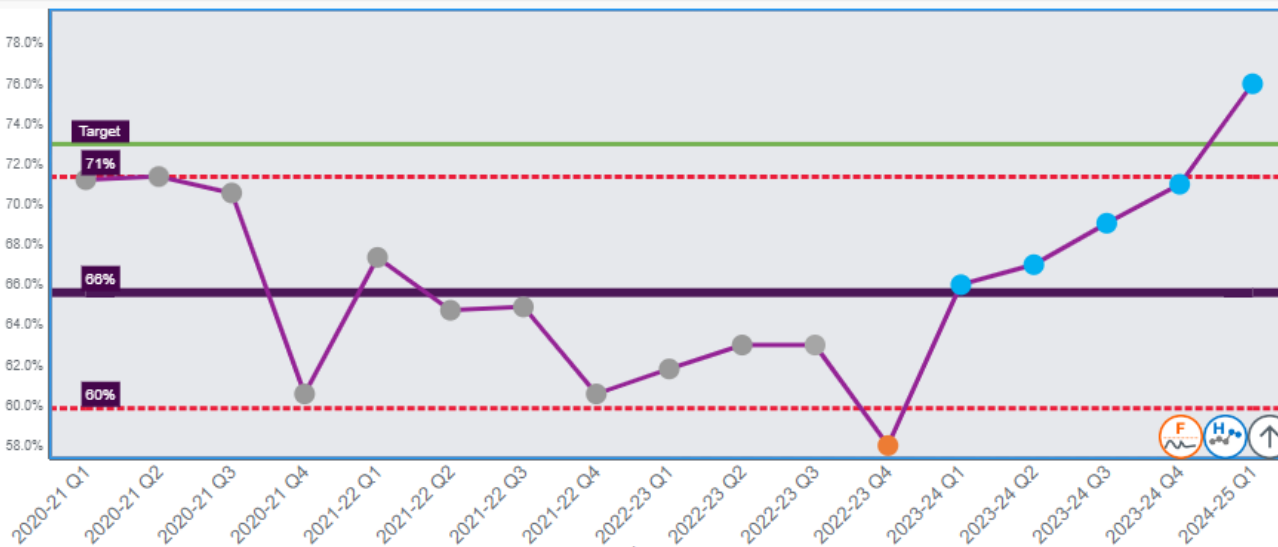
Percentage of completion of Core Skills currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

**OWNER:**

Head of Training

**SUMMARY**

Q1 of 2024-25 showed a continued increase in completion rates of core skills. The Breathing Apparatus recovery Plan is now underway and making a positive contribution.



### KPI 27

### % Specialist Rescue Currency



92%

**PURPOSE:**

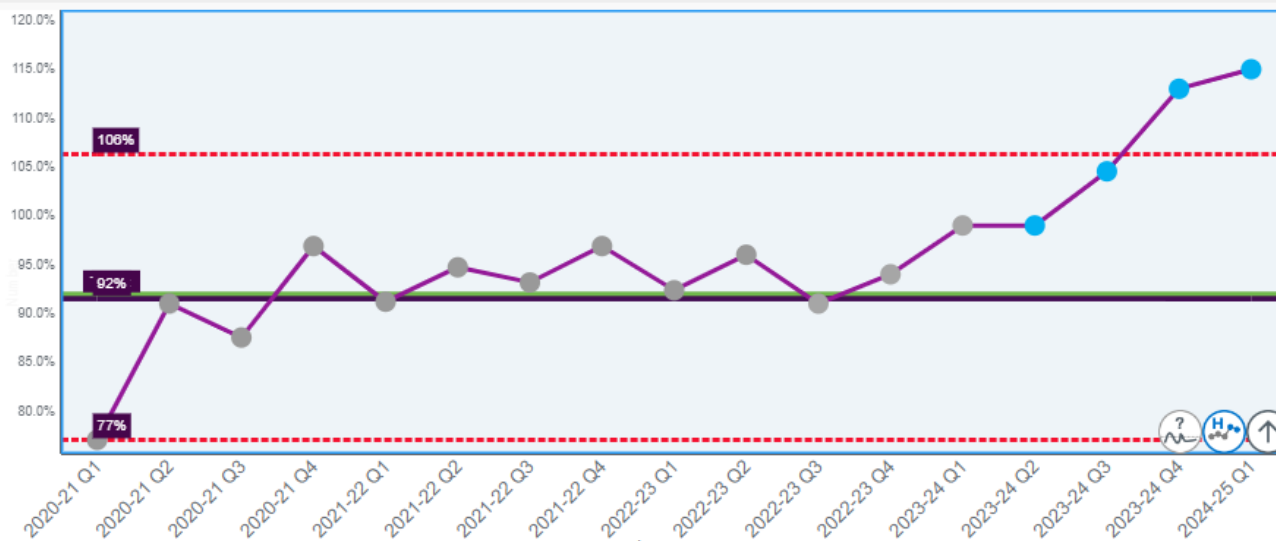
Percentage of completion of Specialist Rescue currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

**OWNER:**

Head of Training

**SUMMARY**

There has been a continued increase in completion rates against 4 out of the 5 specialist rescue capabilities. Mass Decontamination shows a slight decrease against previous quarters but remains above target.





**KPI 28**

**% Training Function Currency**



95%

**PURPOSE:**

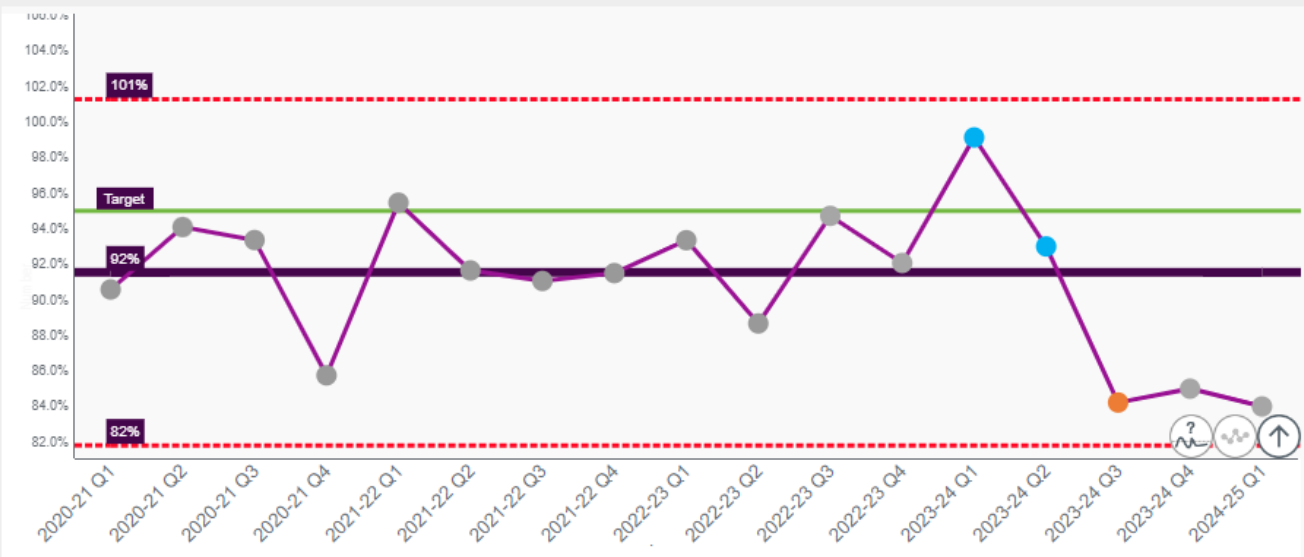
Percentage of all Training Function Courses delivered versus total number of courses scheduled within agreed Training Delivery Plan

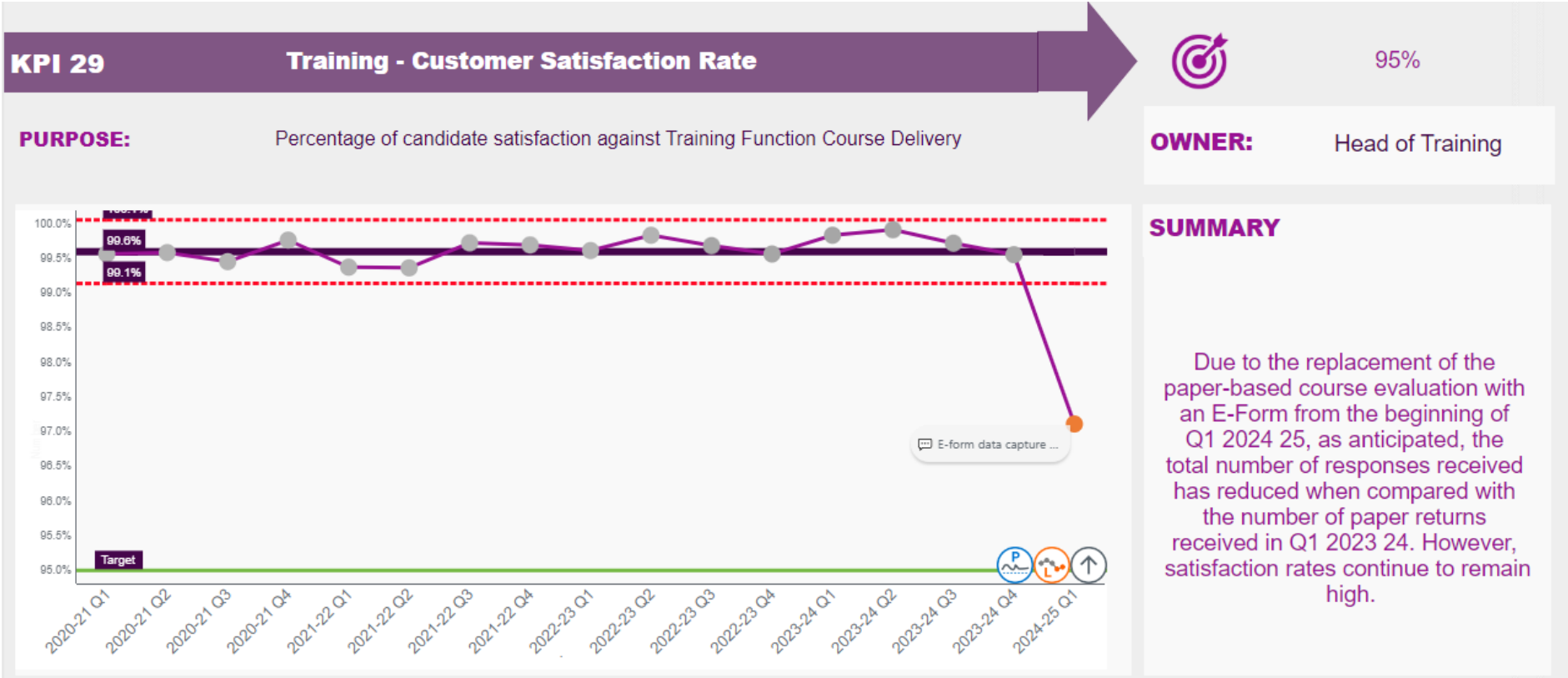
**OWNER:**

Head of Training

**SUMMARY**

A small number of courses were cancelled due to insufficient numbers, instructor availability and priority changes. Work is on-going to improve these factors as part of our commitment to continuous improvement





## Performance analysis – Q1 2024-25

### **KPI 22 - % completion of Operational Core Skill Modules for Firefighter to Watch Commander against training programme.**

The Operational Core Skills Modules within the TfOC are pre-populated and follow a 12-month rolling program.

For Q1 2024-25, the figures for the five core skills indicate a 6% decrease for the wholetime duty group. Both the On Call (Retained) and On Call (Volunteer) groups recorded a 10% decrease. However, Day Duty staff showed a slight 1% increase when compared with the Q4 2023-24 figures.

Core Skill topics covered in Q1 2024-25 were as follows:

- BA / CFBT / Tactical Ventilation
- RTC- Extrication
- SWAH (Safe Working at Height)
- Water Awareness
- Driver Awareness – Banksman

Through engagement and direct feedback from Local Senior Officer (LSO) areas, it was relayed that the primary challenge is that the demands of the TfOC are perceived in some instances as unachievable for all on call staff vs training time available, in particular volunteer on call staff.

The Training Function have listened to this feedback and are integrating core and incident type modules that will deliver the same outcomes by working smarter. The Training Function and LSO area management teams will continue to consider and review any training activity that is not required to be undertaken, based on station risk profiles and competency requirements of staff.

Additional key points raised in the LSO area feedback include resource challenges related to IT equipment, Wi-Fi connectivity issues, particularly in rural areas, and limited access to scrap vehicles. Staffing issues and personnel movements were also commonly mentioned in the feedback.

Attempts to increase local performance figures focus on ongoing staff engagement, monitoring sickness and absence management, collaborating with ICT to improve hardware and connectivity issues, and providing reassurance while encouraging dialogue with the Learning & E-Development team.

The Learning & E-Development team has attended sessions with LSO management teams and station-based supervisory management teams to provide support for development pathway completion, offer best practice suggestions for TfOC completion, and address connectivity challenges by promoting offline solutions. Additionally, there has been an increase in the uptake of out-of-hours Teams sessions with on call staff to provide support during training nights.

Training continues to provide local managers with performance reports to allow for performance review and necessary action to be taken to improve completion of TfOC modules.

### **KPI 23 - % completion of Advanced, Support and Emerging Risks Modules for Firefighter to Watch Commander against training programme**

Topics covered in Q1 2024-25 were as follows:

- Secure Accommodation
- Aircraft
- S19 Hydrants
- Mental Health & Wellbeing – Lifelines Road Trip
- Fraud
- Professional Behaviours & Equality

The data for Q1 2024/25 reveals a decrease in completion rates among the Wholetime (-2%), Volunteer- On Call (-8%), and Day Duty (-5%) groups compared to Q4 2023/24. However, the On Call duty group has shown a promising increase in completion rates (7%).

Feedback from LSO areas align with that of the Core Skill modules feedback.

Training continues to provide local managers with performance reports to allow for performance review and necessary action to be taken to improve completion of TfOC modules.

### **KPI 24 - % completion of Flexi Duty Officer Modules against training programme**

FDO Modules topics covered in Q1 2024-25 were as follows:

- April - Blue light driving
- May - Secure Accommodation
- June - BA Sector Commander and SHOPQC

The Flexi Duty Officer (FDO) Training for Operational Competence (TfOC) in Q1 of 2024/25 shows a decrease compared to Q4 of 2023/24, however it should be noted that there remains an overall positive upward trend in performance (completion rate).

Training continues to engage with and provide support to the FDO cadre to improve the overall completion rates at the point of KPI reporting.

### **KPI 25 - % completion of Incident Command currency following National Training Standards)**

Incident Command competence across all duty groups continue to show a high level of performance with the National Incident Command Team continuing to deliver training and assessments across all levels and support the delivery of Service Delivery Area (SDA) assessments at ICL1 level.

ICL1, whilst still above the target of 90% the slight drop of in figure is attributed to the standard difficulties in arranging ICA assessments in remote rural areas for on-call and volunteer personnel, travel cancellations, no notice sickness or candidate cancellations. Only one LSO Area has fallen below 90% at ICL1 and follow up investigation has confirmed this is due to short notice cancellations. Within the WSDA 65 new Crew Commander appointments have recently been made, of which only 3 required to attend a ICL1 course for substantive promotion, demonstrating notable improvement in succession planning and preparing personnel for future role as part of the career pathway.

ICL2 has reported a slight reduction in performance, this equates to 5 personnel and can be attributed to long term sickness or no notice cancellations. All the above where possible have been rescheduled or already been completed.

ICL3 has remained above target and fairly static at 95%.

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ICL4 reports a drop in figures for the due to the requirement of one Deputy Assistant Chief Officer (DACO), the percentage is more notable due to the smaller number reported against at this level.

### **KPI 26 - % completion of Core Skills currency following National Training Standards**

#### **ICAT OPERATOR:**

The current competency target for ICAT Operators is based on a 60% attainment threshold for operational personnel within stations, LSO's and SDA's. The percentage figures provided in this report are taken as a percentage of the 60% attainment target.

The ICAT Operator competency percentage for the three SDA's, across all relevant duty groups is 102% for Q1. This is an overall increase by 23% from the Q4 figures. Wholtime competency rates during this period have continued to rise from 92% in Q4 to 120% in Q1 and account for the significant rise in the overall ICAT Operator percentage increase. On-Call competency rates have also increased, with a rise from 70% in Q4 to 90% in Q1.

#### **Driving:**

The overall percentage of Emergency Response Driving (ERD) reassessment completion currently sits at 82% across all duty systems with wholtime showing an increase in 1%, from 76% to 77% completion, On-Call has seen a slight increase from 89% from 90% and Volunteers duty system seeing a decrease from 65% to 64% from last reporting period. The results remain like previous reporting period due instructor numbers across the SFRS due to resignations, promotion and reversions. Two additional instructors have now taken up post in the WSDA with two current vacancies included in the upcoming NSDA CC campaign, with hopes these will see appointments in the coming weeks, which will have a positive impact in upcoming completions rates.

As detailed previously, engagement between driver training and Central Staffing management to discuss a proposal to increase the quantity of ERD reassessments daily has led to a rethink of approach by Driver Training management which has now identified an alternative solution, with the same result of a fourfold increase. This proposal is now being presented to the Training, Safety & Assurance Directorate Management Team for final approval.

The proposed model, developed in partnership with Police Scotland through a series of benchmarking exercises, (once approved) will see no reduction in training standards and all elements contained within the current SFRS ERD reassessment course content would be fully assessed.

#### **Breathing Apparatus (BA), Compartment Fire Behaviour Training (CFBT). Tactical Ventilation (TV):**

All three SDA's are now delivering the BA recovery course (Phase 2). Throughout this reporting quarter approximately 1000 candidate places were scheduled. The Training Function Support Co-Ordinator along with Central Staffing Team C continues to identify personnel who require the appropriate training and schedule when and where the training will be delivered for improved efficiency. This targeted approach will see risk critical training delivered to those showing a greater period out of currency improving Ff Safety and reducing organisational risk. At this time there is still a transition of those going through the BA recovery 3 to 1 and those falling out of currency in the interviewing period which will be addressed through the course of the plan. Further increases in currency across the country, are forecast throughout 2024/25.

#### **BA:**

The percentage of BA currency over all SDA's sits at 83% which is a 1% increase from Q4.

Wholtime currency over all three SDA's is 84% a 1% increase from Q4

On Call currency is 82% which is an increase of 2%, Volunteer currency is 61% and is an increase of 4% from Q4

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### **CFBT:**

CFBT currency over all SDA's is currently 74% which is an increase of 3% from Q4

Wholetime currency is 79% which is a decrease of 1%

On Call currency is 71% which is an increase of 7%, Volunteer currency is 44% an increase of 6% from Q4

### **Tactical Ventilation:**

Tactical Ventilation over all SDA's is currently 53% which is an increase of 4% from Q4

Wholetime currency is 49% which is an increase of 2% from Q4

On Call currency is 61% an increase of 7%, Volunteer currency is 12% and increase of 2% from Q4

### **KPI 27 - Specialist Rescue Competence (% of Staff deemed competent against requirement)**

All Specialist Rescue courses are under continual review to highlight any efficiencies that can be made promoting a more efficient use of training resources, enhanced training delivery and improving collaboration with our blue light partners. Localised Training delivery is also being used for all courses where there are the appropriate local facilities. Where performance percentage exceed 100% this is measured against the Target Operating Model. The additional personnel trained is to support succession planning arrangement and provide a level of resilience, work continues to optimise this approach in order Training resources are directed accordingly.

### **Heavy Rescue:**

The East SDA is currently showing a currency level of 107% against the Target Operating Model (TOM) while the West SDA is currently sitting at 125%. While the focus will remain across all SDAs linked to maintaining and improving currency levels to provide resilience and flexibility in this area the courses that will be scheduled in 2024 – 2025 will continue to allocate higher course nomination numbers to NSDA stations with this attribute which is sitting at 76%. An HRO scrap vehicle supplier has been identified and delivery of vehicles will take place in late July to allow NSDA specific HRO courses to be run locally to support the attainment of the TOM within training year.

CPD events have also now taken place to provide refresher training specifically in the WSDA, ensuring maintenance of skills is protected and the currencies of existing HRO qualified personnel are maintained.

### **USAR:**

Urban Search and Rescue (USAR) currency has seen a significant increase from 64% to 90% in Q1. A series of USAR Technician acquisition and Train the Trainer courses were delivered at maximum candidate capacity over this period, where possible further acquisition courses and CPD events have also been scheduled which will further enhance competency levels. Three USAR Tactical Advisor courses have now been completed upskilling 17 FDOs with a further course being scheduled for Q2/Q3 due to sicknesses/unavailability of prospective candidates.

Creation of the NSDA USAR Instructional Team is allowing for the implementation and quality assurance of the USAR Knowledge Applied Training Assessment (KATA) programme which has resulted in the projected increase in competency figures within the area.

### **Water Rescue:**

Water rescue continues to maintain a higher level of competence against the target performance figure. This is however linked to the request to have every trainee assigned to a water rescue station fully trained within two weeks of completing their trainee foundation course, combined with a change to the Standard Operating Procedure regarding the number of operators required for a boat crew.

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VHF radio courses for all 20 stations is nearing completion with only 1 station still outstanding however scheduled. Knowledge Applied Training Assessment (KATA) sessions continue to be used to assess station currencies. Water Rescue and High-Volume Pump Instructional cadre along with Capability team have all completed the Managing Water and Flood Incidents course, to allow for the Tactical Advisors course development throughout Q2/Q3 2024.

### **Rope Rescue:**

Rope rescue competency has seen a slight increase into Q1 where it sits at 124%. Ongoing communications with the Rope Rescue Station Commanders have assisted in aligning competency levels across the 5WDS. The purpose being to select the most suitable personnel from each station, with a targeted training approach for each watch.

### **Mass Decontamination:**

Mass Decontamination competency has seen a slight decrease in performance to 108% but remains above the TOM.

### **KPI 28 - % of all Training Function Courses delivered versus total number of courses scheduled within agreed Training Delivery Plan**

During Q1 2024-25 the Training Function has achieved completion rate of 84% against the level KPI's which aligns to agreed compliance levels.

The two most significant reasons for cancellation are minimum number of students not being met on courses (33%) and re-prioritisation of other courses based on Service Delivery Training Needs Analysis (26%), such as the change to the "3-in-1" BA Recovery detailed.

A significant reason for non-completion within the refresher programme is the transition to the "3-in-1" BA Recovery; this has necessitated pre-programmed course dates being re-purposed from the previous model to the new delivery model – for scheduling purposes this required the cancellation of courses previously scheduled as the previous iterations of BA Refresher and Carbonaceous refresher and reinstatement with the updated course coding; crucially, there has been no loss of delivery capacity in this case. Further reasons for cancellation within the refresher programme have been lack of instructor availability and minimum student numbers not being met.

With regards to initial On-Call training courses, 2 courses have been cancelled due to insufficient numbers of nominees to populate a course to make it viable, however alternative course places have been made available for effected individuals through consolidating into larger, more efficient courses (e.g. new entrant offered alternative venue for TTM (Task and Task Management) course).

Work is on-going to improve these factors as part of our commitment to continuous improvement.

### **KPI 29 - Training Function Course Delivery (Candidate Satisfaction %)**

Due to the replacement of the paper-based course evaluation with an E-Form from the beginning of Q1 2024 25, as anticipated, the total number of responses received has reduced notably when compared with the number of paper returns received in Q1 2023 24.

This process change is the main contributing factor in the 2.61% drop in overall candidate satisfaction between Q4 2023 24 and Q1 2024 25 however benefits from the change in terms of a reduction in administration time, ease of analysis and paper use have been realised. It has become apparent that candidates are providing more detailed, open and constructive comments, possibly due to the additional time to reflect on their training experiences and being able to complete the evaluation form at a time of their choosing.



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Other reasons for candidates selecting “Fair” or “Poor” for their overall experience include limited shower and changing facilities at Dundee Airport, with a need to travel offsite, as was the case in Q4 2023 24, ongoing faults in the Draeger units at Newbridge affecting the delivery of hot fire training. This KPI still remains above target (95%).

This KPI comes from the number of candidates selecting “Good” or “Very Good” vs the total number of responses to the “What was your overall opinion of the course” question on the course evaluation forms. i.e., 2.89% of candidates (35 candidates from 1210) in Q1 2024 25 selected “Fair” or “Poor”.





Report No: C/PC/37-24

Agenda Item: 11.1

<b>Report to:</b>		<b>PEOPLE COMMITTEE MEETING</b>						
<b>Meeting Date:</b>		<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>		<b>SAFETY AND ASSURANCE PERFORMANCE REPORT: QUARTER ONE (Q1) 2024-25</b>						
<b>Report Classification:</b>		<b>For Scrutiny</b>		<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>				
				<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>
<b>1</b>	<b>Purpose</b>							
1.1	<p>The purpose of this report is for the People Committee (PC) to scrutinise the Safety and Assurance (SA) performance as below:</p> <ul style="list-style-type: none"> <li>• Overview of progress against the Scottish Fire and Rescue Service (SFRS) Annual Health and Safety Improvement Plan (HSIP) 2024-25; and</li> <li>• SFRS SA Key Performance Indicators (KPI).</li> </ul>							
<b>2</b>	<b>Background</b>							
2.1	The SFRS annual HSIP is developed to provide compliance with statutory obligations and promote continual improvement. An overview of the HSIP performance is detailed within KPI 56.							
2.2	The Safety and Assurance Function have provided an update regarding key projects of work across the function in Q1.							
2.3	The Performance Management Framework 2024-2025 defines the HS KPIs.							
2.4	The KPIs within PowerBi provides an overview of the SFRS Health and Safety performance.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	<p>This report provides an overview on Health and Safety performance against the following KPIs:</p> <ul style="list-style-type: none"> <li>• KPI 50: Verbal Attacks on Firefighters. The KPI demonstrates how many verbal attacks have occurred to SFRS personnel by members of the public.                             <ul style="list-style-type: none"> <li>- There was a 60% (5 to 2) decrease when comparing Verbal Attacks from the same quarter in 2024/24.</li> </ul> </li> <li>• KPI 51: Physical Attacks on Firefighters. The KPI demonstrates how many physical attacks have occurred to SFRS personnel by members of the public.                             <ul style="list-style-type: none"> <li>- There has been a 50% increase in reported physical attacks compared to the previous reporting year. Positively, none of these resulted in injuries against SFRS staff in Q1 2024/25.</li> </ul> </li> </ul>							

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3.2	<ul style="list-style-type: none"> <li>• KPI 52: Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR). The KPI demonstrates how many events were required to be reported to the Health and Safety Executive (HSE).               <ul style="list-style-type: none"> <li>- There was an 86% (7 to 1) decrease when comparing RIDDOR events from the same quarter in 2023/24.</li> </ul> </li> <li>• KPI 53: Accident and Injuries. The KPI demonstrates total accidents and injuries to occur through workplace accidents.               <ul style="list-style-type: none"> <li>- There was a 9% decrease (55 to 50) when comparing to Q1 in the previous reporting year. The top three causations were situational awareness, hot and cold (temperatures) and slip and trips.</li> </ul> </li> <li>• KPI 54: Near Miss (NM). The KPI is the total recorded number of near miss events that had the potential to lead to an accident or ill-health.               <ul style="list-style-type: none"> <li>- There was a 37% decrease (67 to 42) when comparing Q1 to the previous reporting year. The most common categories were Breathing Apparatus (10 of 42), Appliance and Pumps (6 of 42) and Ladders (5 of 42).</li> </ul> </li> <li>• KPI 55: Vehicle Accidents. The KPI is the total number of events that involved vehicle accidents.               <ul style="list-style-type: none"> <li>- There was a 16% (61 to 51) decrease in Vehicle Accidents when comparing Q1 to the previous reporting year.</li> </ul> </li> <li>• KPI 56: % of Year to Date (YTD) H&amp;S Actions Completed. The KPI demonstrates the completion of improvement plans to enhance safety performance.               <ul style="list-style-type: none"> <li>- 88% of Q1 actions were complete. 2 ongoing actions for method of entry training will be carried into Q2.</li> </ul> </li> <li>• KPI 19: Ops Assurance Audit Actions. This KPI demonstrates the number of significant recommendations identified through Operational Assurance Debrief Processes.               <ul style="list-style-type: none"> <li>- There were no new actions recorded during Q1. Actions from previous debriefs continue to be monitored through the Organisational Learning Group (OLG).</li> </ul> </li> </ul> <p>Further detail can be found within the Safety and Assurance Quarter 1 Report and the PowerBi KPIs.</p>
<b>4</b>	<b>Recommendation</b>
4.1	PC are asked to scrutinise and note the Safety and Assurance performance for Q1 2024-25.
<b>5</b>	<b>Key Strategic Implications</b>
5.1 5.1.1	<p><b>Risk</b></p> <p>Failure to monitor Health and Safety performance and identify areas of continuous improvement in Health and Safety.</p>
5.2 5.2.1	<p><b>Financial</b></p> <p>There are no financial implications with the production of this report. Any recommendations to improve performance will be managed through appropriate governance routes by the risk owner.</p>
5.3 5.3.1	<p><b>Environmental &amp; Sustainability</b></p> <p>There are no environmental implications to be considered. This report is circulated electronically.</p>

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5.4	<b>Workforce</b>	
5.4.1	This report highlights the monitoring of SA performance and makes recommendations for continuous improvement to reduce the risk of injury or ill-health of the SFRS workforce.	
5.5	<b>Health &amp; Safety</b>	
5.5.1	Failure to monitor and improve the management of SA may result in injury or ill-health of our workforce and those affected by their activities, HSE investigation, receipt of an enforcement notice, fines and adverse publicity damaging the reputation of SFRS.	
5.6	<b>Health &amp; Wellbeing</b>	
5.6.1	No implications identified for Health and Wellbeing. Trend analysis of events will assist in implementing strategies to improve the Health and Wellbeing of SFRS employees.	
5.7	<b>Training</b>	
5.7.1	There are no training implications as a result of this report. Training requirements will be approved through other governance routes or captured in Health and Safety Improvement Plans.	
5.8	<b>Timing</b>	
5.8.1	The performance will be reported through the appropriate governance routes as noted within the Governance Route of Report Section.	
5.9	<b>Performance</b>	
5.9.1	Health and Safety Performance is monitored through KPIs managed by Think, Act, Stay Safe (TASS) performance reports and through use of PowerBi. The performance outcomes are communicated through Safety and Assurance Improvement Groups (SAIG).	
5.10	<b>Communications &amp; Engagement</b>	
5.10.1	No further engagement is required. Performance is communicated through local Safety and Assurance Liaison Officers (SALO's) and SAIGs.	
5.11	<b>Legal</b>	
5.11.1	Failure to monitor and improve the management of Health and Safety could result in non-compliance to Health and Safety legalisation.	
5.12	<b>Information Governance</b>	
5.12.1	There are no implications that require to be noted for GDPR purposes.	
5.13	<b>Equalities</b>	
5.13.1	There are no implications to be noted for equality and diversity. An Equality and Human Rights Impact Assessment (EHRIA) has been completed for the Health and Safety Policy and supporting arrangements.	
5.14	<b>Service Delivery</b>	
5.14.1	This report has no direct impact on Service Delivery. Any actions will be discussed through service delivery SAIGs.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training, Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial</del> /Reasonable/Limited/Insufficient

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7.3	<b>Rationale:</b>	The Quarterly Report informs the workforce of the organisation's safety performance and the progress being made toward achieving the defined KPI's, as well as how they contribute to the organisation's success.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A: Health and Safety Quarter 1 Report 2024/25	
<b>Prepared by:</b>		Victoria Regan – Health and Safety Business Support Officer
<b>Sponsored by:</b>		Jim Holden - Head of Safety and Assurance
<b>Presented by:</b>		Jim Holden - Head of Safety and Assurance
<b>Links to Strategy and Corporate Values</b>		
<b>Strategic Plan 2022-25</b>		
Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public. What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety and wellbeing of the public and our staff. Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be. Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety and wellbeing of the public and our people.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>TSA Directorate Management Team</i>		<i>22 August 2024</i>
<i>SASG</i>		<i>09 September 2024</i>
<i>People Committee (PC)</i>		<i>12 September 2024</i>
<i>Training, Safety and Assurance Board</i>		<i>10 October 2024</i>
<i>Strategic Leadership Team (SLT)</i>		<i>16 October 2024</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>
		<i>For Scrutiny</i>
		<i>For Scrutiny</i>
		<i>For Decision</i>
		<i>For Information</i>

# Safety and Assurance Quarter 1 Report 2024-25

The purpose of this report is to provide an overview of progress against the Scottish Fire and Rescue Service (SFRS) annual Health and Safety Improvement Plan (HSIP) 2024-25 and SFRS health and safety Key Performance Indicators (KPIs).

The SFRS annual HSIP is developed to provide compliance with statutory obligations and promote continual improvement. This is detailed within KPI 56.

The Safety and Assurance (SA) Function have provided an update regarding key projects of work across the Function in Q1.

The Performance Management Framework defines the Health and Safety Key Performance Indicators. The KPI's within PowerBi provides an overview of SFRS health and safety performance.

*\*For information, all KPI graphs will be replaced following PowerBi update.*

## Key activity within the Safety and Assurance Function this quarter to support performance improvements:

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### Safety and Assurance Function Update

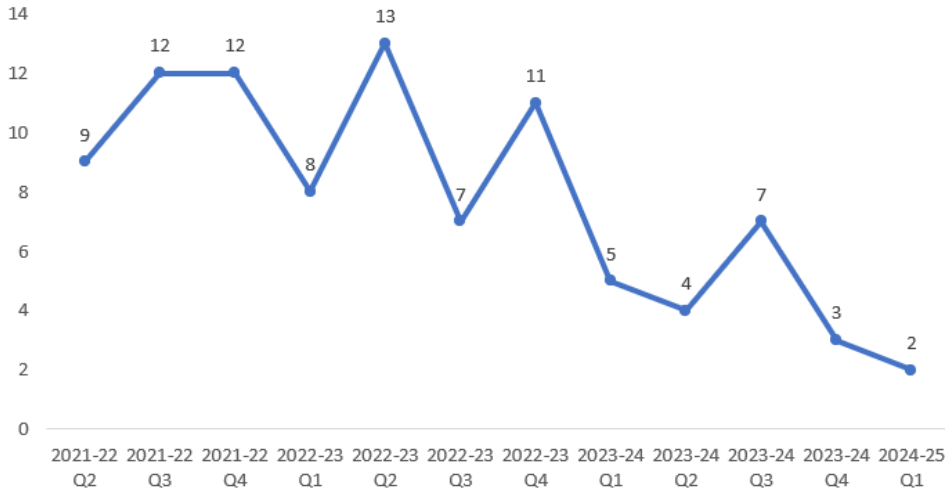
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Item	Commentary
<b>Face Fit Testing</b>	Safety and Assurance have a 100% completion rate in FFT with exception from those exempt and maternity leave.
<b>Risk Assessments</b>	SA continue to support the review of risk assessments identified within Gantt Charts. The Wellbeing handbook has been approved and will be published on iHub.
<b>Contaminants Project</b>	A paper has been presented on the findings of the Fire Contaminants SOP trial in North, East and South Ayrshire. The Generic Risk Assessment (GRA) has been drafted. The Standard Operating Procedure (SOP) has been issued for initial consultation, followed by a Draft Fire Contaminants Management Arrangement which continues to be updated with all relevant information.
<b>OA Improvements</b>	A frontline update was published through governance on Renewable Energy Technologies. A debrief has been carried out for the level 4 incident at Breadalbane Street Edinburgh and analysis of findings will be progressed through governance.
<b>Support Reviews</b>	A support review was carried out on Safety and Assurance Improvement Groups with each SAIG receiving feedback in accordance with the current terms of reference. Recommendations for standardisation have been compiled to review in Qtr. 2.
<b>Planning Update</b>	Impound and Inspection MA was reviewed and published on iHub. Provision and Use of Work Equipment Regulations (PUWER) has been published for 28-day consultation and will go live in July 24.

# KPI50: Verbal Attacks on SFRS Staff

## KPI 50: Verbal attacks on Firefighters

Purpose: Demonstrate how many verbal attacks have occurred to SFRS personnel by members of the public



**Summary**

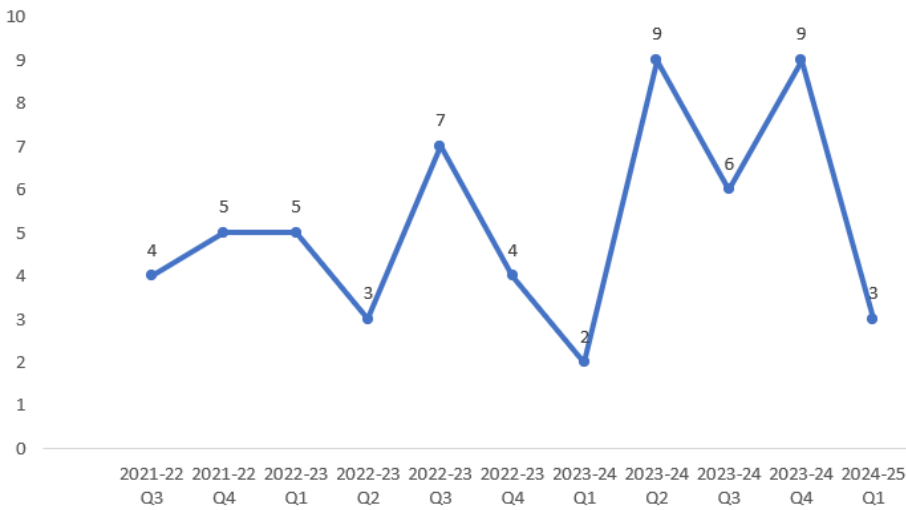
A positive decrease is noted. Directorates continue to work with partner organisations supporting the "Your Safety Matters" campaign, establishing local support. Staff are encouraged to report all AoV incidents.

1 event occurred at an operational incident and the other at a community event. Both were reported to Police Scotland. Verbal attacks decreased 60% from Q1 23/24. AoVs continue to be managed through SDA engagement with partner agencies to enhance and support the ongoing reduction. When compared to the same quarter in the previous reporting year (5), there is a numerical decrease of 3.

# KPI51: Physical Attacks on SFRS Staff

## KPI 51: Physical attacks on Firefighters

Purpose: Demonstrate how many physical attacks have occurred to SFRS personnel by members of the public



**Summary**

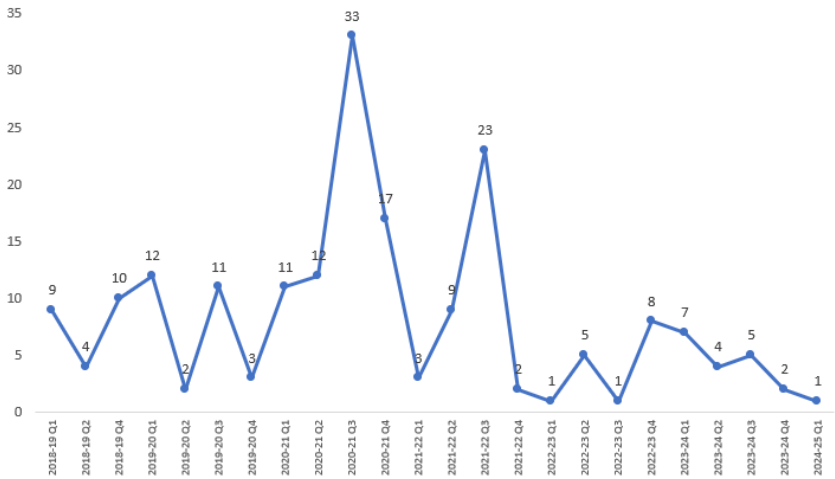
A significant decrease is noted. This can be attributed to the proactive measures Directorates carry out, such as feeding back to the Community Action Team and reactive measures such as event investigation outcomes and staff awareness on information and local risks.

Physical attacks increased 50% from Q1 23/24. There were no injuries to SFRS staff. All 3 events occurred during operational activities, and all were attacks against property. SDA continue to engage with partner agencies to further develop and enhance current arrangements to support the reduction of Acts of Violence (AoV).

# KPI52: Reporting of Injuries, Diseases and Dangerous Occurrences

## KPI 52: RIDDOR

Purpose: Demonstrates how many notifications there has been to the HSE which may include death, specified injury, over 7 day injury, non-worker taken to hospital for treatment, dangerous occurrence or an occupational disease.



**Summary**

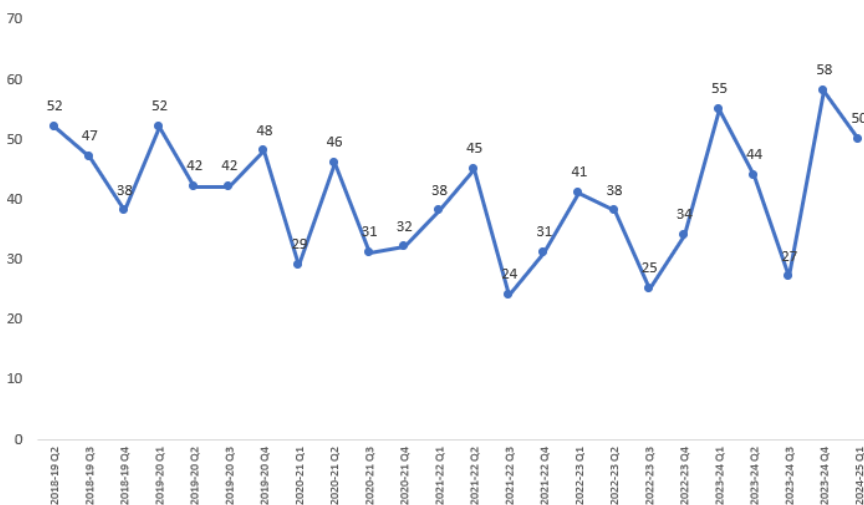
A further decrease is noted and the event relates to suspected exposure to Asbestos. Recommendations from the thematic audit continue to be progressed through the Organisational Learning Group (OLG).

In RIDDOR events decreased by 86% (7 to 1) from Q1 23/24. The event was reported as a Dangerous Occurrence due to suspected exposure to Asbestos during an operational activity.

# KPI53: Accident/Injuries (Excl. RIDDOR)

## KPI 53: Accidents and Injuries (excl. RIDDOR)

Purpose: Demonstrates total accidents and injuries to occur through workplace accidents.



**Summary**

All events are investigated to reduce the likelihood of recurrence. Safety and Assurance Improvement Groups continue to monitor local trends and take action where required.

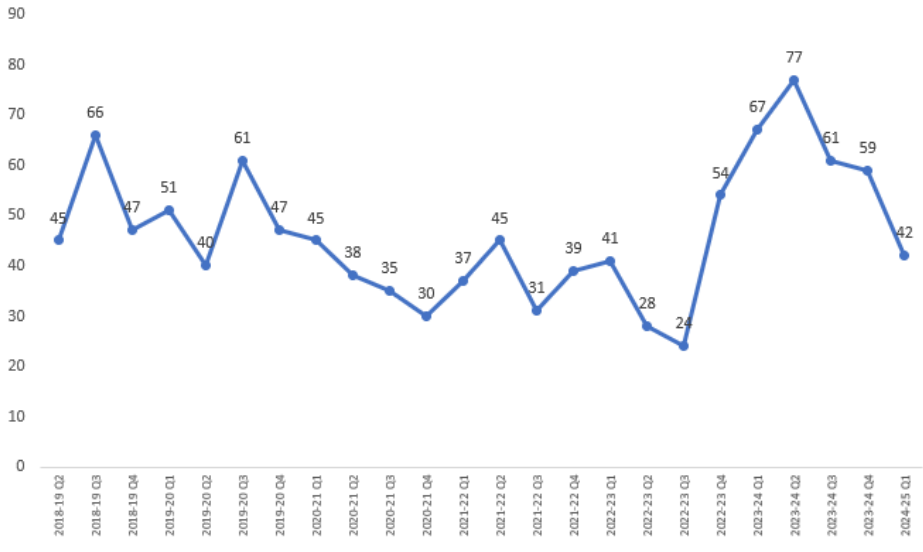
There was a 9% decrease in Accidents from Q1 23/24. The top three causations were Situational Awareness, Hot and Cold and Slip and Trips. 42% (21 of 50) occurred during non-operational activities, 36% (18 of 50) occurred during training activities and 22% (11 of 50) occurred during operational activities. Investigations are carried out to identify actions and to reduce the risk of recurrence.



# KPI54: Near Miss Events

**KPI 54: Near Miss**

Purpose: Total recorded number of near miss events that had the potential to lead to accident or ill health.



**Summary**

All Directorates should promote Near Miss (NM) reporting to reduce the risk of injury and to ensure safe working environments. The reduction of NMs should be discussed at local SA Improvement Groups for action.

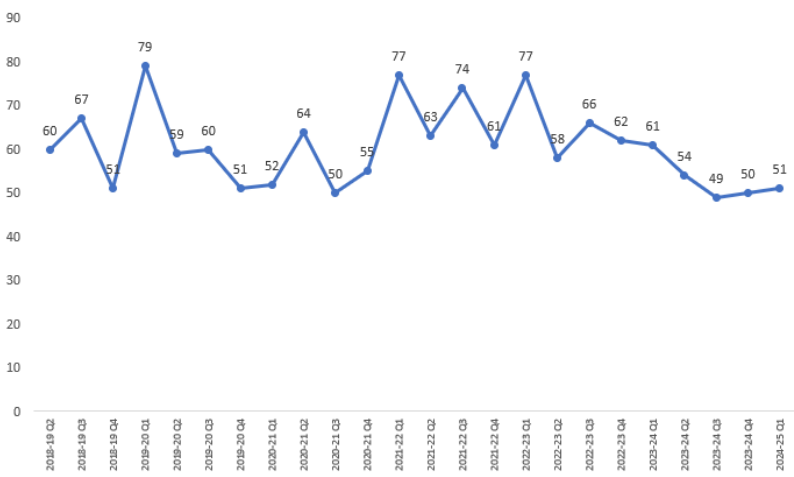
Near Misses (NM) decreased 37% from Q1 23/24. Non-operational NMs accounted for 53%, Training for 33% and 14% during operational activities. The most common categories were Breathing Apparatus (10 of 42), Appliance and Pumps (6 of 42) and Ladders (5 of 42).

SA and SDA continue to promote reporting through local Safety and Assurance Improvement Groups (SAIGS).

# KPI55: Vehicle Events

**KPI 55: Vehicle Accidents**

Purpose: Total number of events that involved vehicle accidents.



**Summary**

The Driver Safety Group monitors vehicle trends and take action where required, such as supporting the production of Vehicle Information Cards and providing enhanced information on Low-Speed Manoeuvres etc.

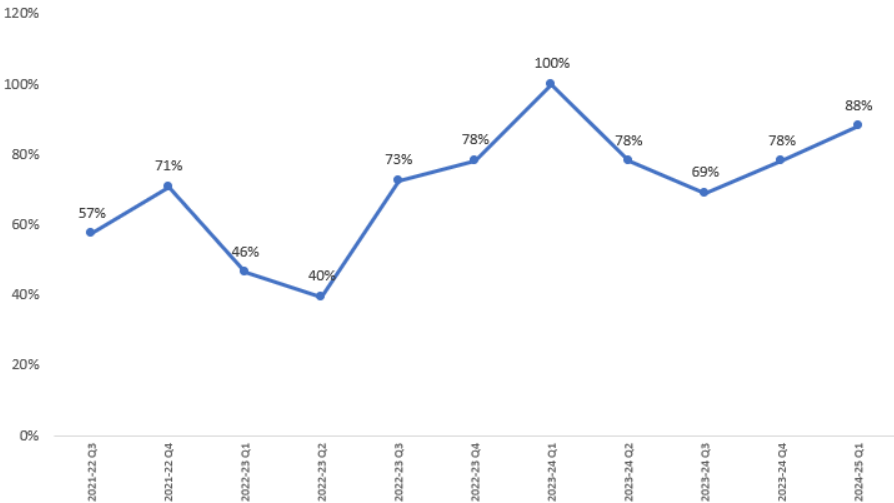
Local areas continue to promote TfOC driving training modules.

Vehicle Accidents (VAs) decreased by 16% compared to Q1 in 23/24. 59% (30 of 51) of all vehicle accidents reported were attributed to operational incidents. A further 33% (17 of 51) were attributed to non-operational activities and 8% (4 of 51) were accidents attributed to training. 49% of VA were during low-speed manoeuvres and 22% during blue light conditions. Driver Safety Group continues to work collaboratively with business partners to reduce VAs.

# KPI56: % of Year-to-Date Health and Safety Improvement Plan Actions Completed

**KPI 56 % YTD H&S Actions Completed:**

Purpose: Demonstrates the completion of improvement plans to drive safety performance



**Summary**

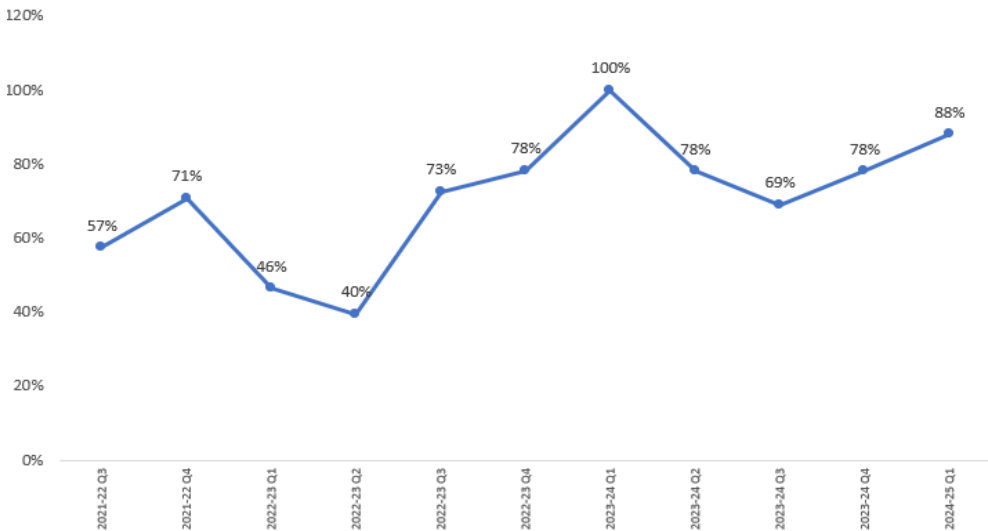
2024/25 Improvement Plans were agreed and progress is monitored at SAIG meetings. HS improvement plans are supported by guidance provided by SA to support all functions achieve their actions. This demonstrates continual improvement within the service.

88% of Q1 actions were complete. This does not include carried forward actions. TSA completed 88% (7 of 8) of 2024/25 Q1 actions. Operations completed 80% (4 of 5) of 2024/25 Q1 actions and all other SDAs and Directorates completed 100% of their overall actions. Local SAIG groups continue to manage and support the completion of improvement plans.

# KPI19: Ops Assurance Audit Actions

**KPI 56 % YTD H&S Actions Completed:**

Purpose: Demonstrates the completion of improvement plans to drive safety performance



**Summary**

2024/25 Improvement Plans were agreed and progress is monitored at SAIG meetings. HS improvement plans are supported by guidance provided by SA to support all functions achieve their actions. This demonstrates continual improvement within the service.

There were no actions identified during Qtr.1 24/25. Significant debrief for Level 4 Incident - Breadalbane Street remains ongoing with a paper to be submitted through the governance routes.

For further information or enquires please contact

- [SFRS.HealthandSafety@firescotland.gov.uk](mailto:SFRS.HealthandSafety@firescotland.gov.uk) or,
- [Health and Safety iHub](#)

## SCOTTISH FIRE AND RESCUE SERVICE

## People Committee



Report No: C/PC/38-24

Agenda Item: 12.1

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>HMFSI INSPECTION ACTION PLANS AND CLOSING REPORTS UPDATE</b>						
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to provide the People Committee (PC) with an update on HMFSI inspection action plans.						
1.2	At this meeting the People Committee (PC) are asked to scrutinise the progress of the action plans relating to His Majesty's Fire Service Inspectorate (HMFSI) reports on: <ul style="list-style-type: none"> <li>• Management of Health and Safety: An Operational Focus</li> <li>• Mental Health and Wellbeing Provision</li> </ul>						
1.3	There are no closing reports to consider.						
<b>2</b>	<b>Background</b>						
2.1	HMFSI inspects and reports on the Scottish Fire and Rescue Service (SFRS) with the purpose of assuring the public and Scottish Ministers that we are working in an efficient and effective way, and to promote improvement in the Service.						
2.2	Each year, HMFSI sets out its intended programme of thematic and local area inspections. Additional reviews may also be carried out at any time at the request of Scottish Ministers.						
2.3	Following the publication of reports, an action plan is prepared to address the issues or recommendations that are highlighted within the report.						
2.4	In line with the new thematic process agreed in May 2020, once approved certain action plans will be presented to PC on a quarterly basis to scrutinise progress.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Health and Safety: An Operational Focus</b>						
3.2	The HMFSI report on Health and Safety: An Operational Focus was published in April 2022. The action plan contains a total of 18 actions and is attached as <b>Appendix A</b> .						
3.3	During the reporting period, one action has been completed (see R4.1), one has been proposed completed (see R1.1), one has an amber status, and three have a red status.						
3.4	The majority of actions with an amber or red status are due to a slip in project timescales, however, it is anticipated that at least two of them will be completed by the next progress update and the remaining two completed within Quarter 3 (see R3.1, R5.2, R5.3 and R7.1).						

3.5	<p>PC members are asked to note the following:</p> <ul style="list-style-type: none"> <li>• <b>Action R1.1:</b> It is proposed to close this action due to Operations embedding this action within the Functional Plan for 2024/25 (OPSFP020) and will continue to work with Communications in anticipation of the delivery platform. The Operations Functional Plan will see the wider communication to other stakeholders following the implementation and review stages which will meet the recommendations of HMFSI.</li> <li>• <b>Action R3.1:</b> A third proposed revised due date from March 2024 to June 2024 has been provided. The slip in timescales was due to interdependency with the iHub and Website project.</li> <li>• <b>Action R5.2:</b> A third proposed revised due date from March 2024 to August 2024 has been provided. The slip in timescales was due to competing priorities.</li> <li>• <b>Action R5.3:</b> A second proposed revised due date from March 2024 to October 2024 has been provided. The slip in timescales was due to competing priorities.</li> <li>• <b>Action 7.1:</b> A third proposed revised due date from April 2024 to October 2024 has been provided. The slip in timescales was due to competing priorities.</li> </ul>
3.6	<p>The overall RAG rating for this action plan is <b>red</b> and is estimated as 95% complete. <i>(Percentage completions for individual actions are an estimate provided by the action owner leading to the overall average percentage).</i></p>
3.7	<p><b>Mental Health and Wellbeing Support</b>  The HMFSI report on Mental Health and Wellbeing Support in the Scottish Fire and Rescue Service was published in December 2023. The report highlights 16 areas of good practice that the Service has adopted and contains 20 recommendations for SFRS to consider with five of these having subsequently been identified as not requiring further action to be taken.</p>
3.8	<p>The Action Plan and Position Statement were presented to People Committee (PC) in June 2024 and the first formal performance update will be presented to the Corporate Board (CB) in October 2024. People Committee (PC) will receive this progress update for scrutiny at the next available meeting thereafter, which will be in December 2024.</p>
<b>4</b>	<b>Recommendation</b>
4.1	<p>The PC is invited to:</p> <ul style="list-style-type: none"> <li>• Review the Management of Health and Safety: An Operational Focus action plan, attached as <b>Appendix A</b>.</li> </ul>
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	<p>There are no risks associated with the recommendations of this report.</p>
5.2	<b>Financial</b>
5.2.1	<p>There are no financial implications associated with the recommendations of this report.</p>
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	<p>There are no environmental implications associated with the recommendations of this report.</p>
5.4	<b>Workforce</b>
5.4.1	<p>There are no workforce implications associated with the recommendations of this report.</p>
5.5	<b>Health &amp; Safety</b>
5.5.1	<p>There are no health and safety implications associated with the recommendations of this report.</p>

5.6 5.6.1	<b>Health &amp; Wellbeing</b> There are no health and wellbeing implications associated with the recommendations of this report.	
5.7 5.7.1	<b>Training</b> There are no training implications associated with the recommendations of this report.	
5.8 5.8.1	<b>Timing</b> Each HMFSI Action Plan will be reported to the CB on a quarterly cycle until completion.	
5.9 5.9.1	<b>Performance</b> This process supports robust challenge and scrutiny of our performance against HMSFI recommended improvements.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> There is no implication associated with the recommendations of this report.	
5.11 5.11.1	<b>Legal</b> 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 5.12.1	<b>Information Governance</b> A Data Protection Impact Assessment (DPIA) is not required for this report as there is no sensitive information to consider.	
5.13 5.13.1	<b>Equalities</b> An Equality and Human Rights Impact Assessment (EHRIA) is not required for this this report. These will be captured by Directorate and LSO EHRAs.	
5.14 5.14.1	<b>Service Delivery</b> There are no service delivery implications associated with the recommendations of this report.	
<b>6</b>	<b>Core Brief</b>	
6.1	N/A	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Mark McAteer, Director of Strategic Planning Performance and Communication
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial</del> / <b>Reasonable</b> / <del>limited</del> / <del>Insufficient</del>
7.2	<b>Rationale:</b>	Following receipt of Audit Reports, Action Plans are developed in conjunction with Directorates and approved via the Strategic Leadership Team and the nominated Executive Committee of the Board. Quarterly reporting is made to the Senior Management Board and nominated Executive Board until full completion of the Action Plan.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	<b>Appendix A: Health and Safety: An Operational Focus Action Plan Update</b>	
<b>Prepared by:</b>	Kirsty Jamieson, Planning and Performance Officer	
<b>Sponsored by:</b>	Jim Holden, Head of Safety and Assurance	
<b>Presented by:</b>	Jim Holden, Head of Safety and Assurance	

<b>Links to Strategy and Corporate Values</b>		
Our inspection process contributes to Strategic Outcome 5 of the Strategic Plan 2022-25: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Corporate Board</i>	<i>24 June 2024</i>	<i>For recommendation</i>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For scrutiny (Health and Safety; Mental Health and Wellbeing Support)</i>

# APPENDIX A

## HMFSI Management of Health and Safety: An Operational Focus - Action Plan Progress

Action Plan Owner: Jim Holden, Head of Safety and Assurance

Updated	Next Update
Jun-24	Oct-24

HMFI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	RAG	Evidence
The outcomes of the Document Conversion Project currently being carried out in the Operations function, should be evaluated and the benefits extended to other SFRS Directorates, including Training Safety and Assurance (TSA).	R1.1	Principles of the Document Conversion Project to be presented to all Directorates.	AC Craig McGoldrick, Operations	Mar-23	3rd revised Aug-24	Complete	<p>21 February 2024: This action remains aligned to, and dependent on the Communications and Information Governance Project for the Website/iHub redesign. Completion of the aforementioned will allow for the go-live of the Document Conversion Project and the publication of the Standard Operating Procedure detail. This action remains red due to the slip in original timescale and updated timescales regarding the iHub and Website project are expected by the next update.</p> <p><b>24 June 2024: Due to the dependency on the Communications and Information Governance iHub Project, the Operations Function, as yet, have no platform to deliver a live Document Conversion Project.</b></p> <p>Subject matter content and an order of roll out by thematic packages remains available, with the currency of the content and detail under constant review.</p> <p>Outstanding actions to achieve the milestones will require scheduled training of Operations staff in the use of the iHub platform (Communications project team to deliver in May 2024), transferring of content/document format (Word to HTML- Operations now required to resource), the development of a communication plan to launch the platform for user interaction, and the revised timeline for phased uploads (due to associated volumes of information this was determined to be one work package per quarter). It is proposed to close this action based on the following: The Operations Function have embedded this action within the Functional Plan for 2024/25 (OPSP020) and continue to work with Communications in anticipation of the delivery platform. The Operations functional plan will see the wider communication to other stakeholders following the implementation and review stages which will meet the recommendations of HMFSI. This action has been marked as blue given the proposal to close the action as a result of the work ongoing as Business as Usual.</p> <p><b>[Proposal to close HMFSI Action Plan action as work will continue to undertaken and monitored as part of the Operations Functional Plan]</b></p>	100%		Blue	
The SFRS should ensure that risk critical information provided to crews via the GETAC tablet is easily accessible when required, up to date and the information available suitable for all foreseeable incident types.	R3.1	Determine risk critical information required for GETAC tablets to ensure that this information is provided to crews.	AC Craig McGoldrick, Operations	Sep-23	Sep-23 to Mar-24 to Jun-24	In Progress	<p>21 February 2024: This action remains aligned to, and dependent on the Communications and Information Governance Project for the Website/iHub redesign and the In Vehicle Solutions Project. Completion of the aforementioned projects will allow for the go-live of the Document Conversion Project and the publication of the Standard Operating Procedure detail and the replacement of the GETAC tablets with an alternative device.</p> <p>This action is amber due to the slip in original timescale and updated timescales regarding the iHub and Website project are expected by the next update.</p> <p><b>24 June 2024: Due to the dependency on the Communications and Information Governance iHub Project, the Operations Function, as yet, have no platform to deliver a live Document Conversion Project.</b></p> <p>Subject matter content and an order of roll out by Thematic Packages remains available, with the currency of the content and detail under constant review.</p> <p>Acknowledging the progress of the New In Vehicle Solutions Project, the replacement of the GETAC tablet with a Samsung device will provide greater opportunity to update information currency once the Communications and Information Governance iHub project delivers.</p> <p>The due date requires to be revised to June 2024 in line with the completion of the iHub Project.</p> <p>This action remains amber due to the slip in timescales as a result of the interdependency to the iHub project.</p> <p><b>[Proposed revised due date from Mar-24 to Jun-24]</b></p>	75%		Amber	
The SFRS should ensure that the Post Incident Support Procedure is amended so that triggers are in place and are activated automatically to support all levels of operational staff attending relevant incidents.	R4.1	Health and Wellbeing Team to review Post Incident Support Procedure to determine the need for automatic activations criteria and process.	Justin Smithson, Clinical Lead	Jun-23	Dec-23 to Mar-24	Complete	<p>21 February 2024: We are now in receipt of the report following the HMFSI thematic inspection, and these recommendations have been considered as part of the Post Incident Support Procedure (PISP) review. It is anticipated that this PISP review will be completed and commence its governance journey in Quarter 4 2023/24.</p> <p>This action has moved from amber to red due to the slip in original timescale. It is, however, expected that the action will be completed by March 2024.</p> <p><b>[Proposed revised due date from December 2023 to March 2024]</b></p> <p><b>24 June 2024: The end-to-end review of the Post Incident Support Policy and Procedure completed its governance journey in Quarter 1 2024/25 and will be published in due course with supporting communications.</b></p> <p>This action has been marked blue and is now complete.</p>	100%		Blue	

<p>The SFRS should identify the cultural barriers that prevent staff reporting 'near misses'. It should design, develop and test all near miss recording systems, ensuring that the systems are accessible to staff and encourage ease of use to improve and encourage reporting across the organisation.</p>	R5.2	<p>Consider process to ensure that outcomes and lesson learned from Near Miss reporting are made widely available to staff.</p>	<p>Teresa Kelly, Deputy Head of Safety and Assurance</p>	Mar-23	<p>Sep-23 to Mar-24 to <b>Aug-24</b></p>	<p>In Progress</p>	<p>21 February 2024: Analysis of the Safety Culture Survey shows 92% of respondents know how to report Health and Safety events and 89% are made aware of recommendations following events. Safety and Assurance continue to communicate outcomes via local Safety and Assurance Improvement Groups. Awareness Briefings/Urgent Instructions are now published with "Health and Safety Event" where applicable. Communication Strategy will consider the routes of feedback. This action remains amber due to the slip in timescales.  <b>24 June 2024: A draft Communications and Engagement Framework is currently under review. It is due to be published in Quarter 2.</b>  <b>This action has been marked as red due to the slip in timescales, however, work is due to progress to completion for the proposed revised due date of August 2024.</b>  <a href="#">[Proposed revised due date from Mar-24 to Aug-24]</a></p>	90%		Red	
<p>The SFRS should identify the cultural barriers that prevent staff reporting 'near misses'. It should design, develop and test all near miss recording systems, ensuring that the systems are accessible to staff and encourage ease of use to improve and encourage reporting across the organisation.</p>	R5.3	<p>Develop improvement/suggestion scheme and a hazard reporting system including feedback methods.</p>	<p>Teresa Kelly, Deputy Head of Safety and Assurance</p>	Mar-23	<p>Mar-24 to <b>Oct-24</b></p>	<p>In Progress</p>	<p>21 February 2024: The Hazard reporting system on Think, Act, Stay Safe System has been created by ICT developers and is currently under trial by Safety and Assurance prior to going live. The action remains amber due to the slip in original timescales, however, it is on target for completion in March 2024.  <b>24 June 2024: The Hazard Reporting module is near completion, however, due to other priorities arising for ICT, it will be October 2024 when work recommences, pending confirmation.</b>  <b>This action has been marked as red due to the slip in timescales, however, work is due to progress to completion for the proposed revised due date of October 2024.</b>  <a href="#">[Proposed revised due date from Mar-24 to Oct-24]</a></p>	90%		Red	
<p>The SFRS should design and develop an electronic asset management and testing solution, which would reduce reliance on paper records and limit organisational exposure and risk.</p>	R7.1	<p>Identify, test and implement a suitable management system.  (This will need substantial ICT support and will need to be in the ICT workplan to be able to proceed. There is currently a Vehicle Inventory Checking System (VIC) being trailed but it's taken almost 2 years to get this solution to trial status)</p>	<p>Roddy Mackinnon, Scottish Equipment Manager</p>	Sep-23	<p>Mar 24 to Apr 24 to <b>Oct-24</b></p>	<p>In Progress</p>	<p>21 February 2024: Final UAT system development complete with six vehicle types now added. The UAT system to be replicated to the live system. Competing ICT resource requirement across SFRS is affecting completion of this work. Anticipated time for live system availability is April 2024. [Proposed revised due date from September 2023 to Apr 2024]  <b>24 June 2024: The live system is still in development with ICT due to competing resources and projects impacting completion.</b>  <b>This action has been marked as red due to the slip in timescales, however, work is due to progress to completion for the proposed revised due date of October 2024.</b>  <a href="#">[Proposed revised due date from Apr-24 to Oct-24]</a></p>	50%		Red	



## SCOTTISH FIRE AND RESCUE SERVICE

## People Committee



Report No: C/PC/39-24

Agenda Item: 12.2

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>INTERNAL AUDIT UPDATES</b>						
<b>Report Classification:</b>	For Scrutiny	<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	To provide People Committee with an updated position on the action plans related to internal audits where the People Directorate is the lead area of the organisation.						
<b>2</b>	<b>Background</b>						
2.1	Azets have carried out internal audits relating to: <ul style="list-style-type: none"> <li>• Sickness Absence Management</li> <li>• Scottish Vocational Qualifications</li> <li>• On-Call Workforce Planning</li> <li>• Equality, Diversity &amp; Inclusion</li> </ul>						
2.2	Progress on the agreed action plans is scrutinised by People Committee.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Internal Audit – Sickness Absence Management – Action Plan</b> The latest action plan is shown at Appendix A. Two actions remain in progress. As noted in the last update, work is progressing to complete activities related to GDPR and document storage before the remaining audit actions can be closed.						
3.2	<b>Internal Audit – Scottish Vocational Qualification – Action Plan</b> The latest action plan is shown at Appendix A. Both remaining actions have been marked as complete and the associated evidence has been submitted to Azets for review, prior to confirming closure.						
3.3	<b>Internal Audit – On-Call Workforce Planning – Action Plan</b> The latest action plan is shown at Appendix A. The final remaining action is marked as complete and the associated evidence was submitted to Azets for review on 31 July 2024, prior to confirming closure.						
3.4	<b>Internal Audit – Equality, Diversity &amp; Inclusion – Action Plan</b> The latest action plan is shown at Appendix A. Three of the actions are now marked as complete and the associated evidence has been submitted to Azets for review, prior to confirming closure. All other actions are progressing to planned timescales.						

<b>4</b>	<b>Recommendation</b>
4.1	People Committee is asked to scrutinise the attached reports and note the progress made.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	Internal and external audit and inspection activity support SFRS in the identification of risks and provide assurance around the appropriateness and effectiveness of controls.
5.2	<b>Financial</b>
5.2.1	There are financial implications related to areas covered by the audits and inspections detailed in this report. For example, effective management of SFRS' Modern Apprenticeship contract and appropriate management of absences from work.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	None identified.
5.4	<b>Workforce</b>
5.4.1	The audits and inspections covered by this report relate to several areas impacting SFRS workforce, as set out in the audit and inspection reports, and associated action plans.
5.5	<b>Health &amp; Safety</b>
5.5.1	No specific Health & Safety implications from the actions detailed in this report.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	Aspects of Culture, absence management, and EDI may impact on colleague health & wellbeing.
5.7	<b>Training</b>
5.7.1	Training needs are identified in several audit and inspection recommendations and are addressed in the associated action plans.
5.8	<b>Timing</b>
5.8.1	The timescales for completion of agreed actions are as noted in the action plans.
5.9	<b>Performance</b>
5.9.1	Effective delivery of the agreed actions will support enhanced performance in the areas covered by the audit / inspection.
5.10	<b>Communications &amp; Engagement</b>
5.10.1	Delivery of agreed actions is supported by appropriate communication and engagement activity as required, including with the representative bodies.
5.11	<b>Legal</b>
5.11.1	There are specific legal requirements and considerations related to the Service's approach to absence management and EDI.
5.12	<b>Information Governance</b>
5.12.1	DPIA completed Yes/No. If not applicable state reasons.
5.13	<b>Equalities</b>
5.13.1	Not applicable.
5.14	<b>Service Delivery</b>
5.14.1	The areas examined in the on-call workforce planning internal audit relate to the service's approach to attracting and retaining colleagues into the on-call workforce.

<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Lyndsey Gaja, Interim Director of People
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.3	<b>Rationale:</b>	The audits and inspections are carried out independently and in line with agreed scope. The internal audit programme is agreed by the SLT and Board based on organisations priorities and risks. Completion of agreed actions plans provides assurance on the robustness of controls.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix 1 – Internal Audit Action Plans	
<b>Prepared by:</b>	Lyndsey Gaja, Interim Director of People	
<b>Sponsored by:</b>	Lyndsey Gaja, Interim Director of People	
<b>Presented by:</b>	Lyndsey Gaja, Interim Director of People	
<b>Links to Strategy and Corporate Values</b>		
Outcome five: We are a progressive organisation, use our resources responsibly and provide best value for money to the public. Outcome six: The experience of those who work for SFRS improves as we are the best employer we can be.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Scrutiny</i>

**Action Owners Progress Updates – as at 6<sup>th</sup> August 2024**

STATUS KEY	
GREEN	On Target to complete within agreed due date or within 3 months of original due date.
AMBER	Delay from original due date of between 3 to 9 months
RED	Delay of over 9 months or no evidence of progress

2022-23	Sickness Absence Management	Total No of Actions	% Complete Actions	Fully Implemented				Part/In Progress				Not Implemented				
				4	3	2	1	4	3	2	1	4	3	2	1	
		6	66%	0	3	1	0	0	1	1	0	0	0	0	0	
Rec No. <b>1.1</b>	<b>RISK</b>	<b>There is a risk of incomplete employee files with incorrect or mitted evidence relating to their sickness periods. Furthermore, this increases the risk of increased absences as sickness absence is not being managed effectively and employees may be felling unsupported within their job roles.</b>														
	<u>Compliance with Policies and Procedures</u>	Line managers should be given reminders or a fresher course on the requirements of the sickness absence policies and procedures and the role they play in managing sickness absence, with particular emphasis on the issues identified relating to E-Self Cert forms, Fit Notes and Attendance Support Meetings. In addition to this, sickness absence files should be checked over by another member of the management team after a period of absence to ensure all documentation is up to date and stored correctly to enforce consistency in relation to record keeping with the Service.				Report Agreed Date	3rd Agreed Revised Date	Priority	% Complete	Status						
	Responsible Owner Agreed Response <b>People Manager (Advice &amp; Employee Relations) &amp; People Manager (Talent)</b>	<i>Review current guidance for managers and update to include requirements for absence recording, monitoring of absence and management of data. Incorporate into new supervisory management development course and Middle manager development sessions.</i>				31 October 2023	31 December 2024	Grade 3	90%	AMBER						
Progress to date (Update provided 23/05/24)	The review of the current guidance documentation has taken place. People Adviser leads have completed the action plan to progress the revisions to the middle manager development sessions and develop the inclusion of a managing absence toolkit in the management induction toolkit for implementation in 2024. Communication managers’ reminder was issued in January 2024 and will be shared periodically. This includes reminding managers of the procedures and their responsibilities for the completion of E-self-certs, ensuring fit notes cover whole of absence period, submission and storage of fit notes and recording of ASMs. The Management Capability framework will be rolled out iteratively which will also encompass these aspects. Design of the broader framework beyond the 1 day session based on Senior Leadership Team feedback and an extension of content/ requirements/ delivery model will be discussed and confirmed in Q4. The one day development session will be piloted in the East Service Delivery Area early Q4 and reviewed to inform actions for 2024/25 and will remain iterative. Discussion around the development of an independent periodic verification process of compliance (all absence management file documentation being complete and recorded in e-PRF) between People and Audit & Risk commenced in Quarter 4.															
Outstanding actions to close the recommendation	Discussion around the development of an independent periodic verification process of compliance between People and Audit & Risk to progress in Q1 with a process and approach agreed, along with appropriate timescales for this. There have been some further delays to developing a proposed independent verification process and approach due to competing priorities and absence within the People team, along with some associated actions required related to GDPR and storage of documentation in the agreed centralised location of the e-PRFs which need to be resolved prior to this process being viable and embedded prior to a verification process commencing.															
Azets comments	Awaiting evidence of checks being undertaken by management to ensure all documentation has been correctly retained in order to close this action.															

Rec No. <b>4.2</b>	<b>RISK</b>	<b>Failure to hold Attendance Support Meetings means that the underlying reasons for repeated periods of sickness may remain undetected and appropriate support may not be offered to help the employee reduce their periods of absence due to sickness.</b>				
	<u>Absence Triggers</u> Checks should be performed by a senior staff member on a frequent basis to ensure Attendance Support Meetings have been carried out and appropriately documented with any outstanding meetings being completed at the next available opportunity.	Report Agreed Date	2nd Agreed Revised Date	Priority	% Complete	Status
	Responsible Owner Agreed Response <b>People Manager (Advice &amp; Employee Relations) &amp; People Manager (Talent)</b>	<i>Attendance Management Guidance to be updated to ensure managers responsibility to review absences within their area and ensure appropriate action and documentation is clear. Management development sessions to incorporate this.</i>	31 October 2023	31 December 2024	Grade 2	90%
Progress to date (Update provided 23/05/24)	<p>The improvements identified in the Guidance documentation will be implemented in 2024 and is supported in the meantime by the managers reminders communication issued in January 2024.</p> <p>Discussions with SDA DACO's were delayed due to absence to consider an independent process for managers vetting of case work within their areas or alternative options which may assist in providing similar assurance, with the view being that whilst local managers would monitor compliance, the preference would be for an independent verification process to provide assurance of compliance across the Service.</p> <p>Discussions have commenced around the development of an independent periodic verification process of compliance between People and Audit &amp; Risk, with further development of this across Quarter 4.</p> <p>LSO/Directorate management teams continue to receive absence reports for their areas to ensure that they can effectively identify where employees have hit triggers as per the policy and ensure that this is followed up with their local managers in terms of management actions including completion of Attendance Support Meetings, review periods where appropriate etc. The People Directorate continue to liaise with managers on an ongoing basis to ensure the absence reports they receive provide the information they require to manage absences effectively.</p> <p>Discussions have commenced around the development of an independent periodic verification process of compliance between People and Audit &amp; Risk in Q4. This will be progressed under Rec No 1.1</p>					
Outstanding actions to close the recommendation	There have been some further delays to developing a proposed independent verification process and approach due to competing priorities and absence within the People team, along with some associated actions required related to GDPR and storage of documentation in the agreed centralised location of the e-PRFs which need to be resolved prior to this process being viable and embedded prior to a verification process commencing.					
Azets comments	Evidence of the independent verification process (once agreed) is required to close this action.					

2022-23	SVQ Review		Total No of Actions	% Complete Actions	Fully Implemented				Part/In Progress				Not Implemented				
					4	3	2	1	4	3	2	1	4	3	2	1	
			3	33%	0	1	0	0	0	1	1	0	0	0	0	0	0
Rec No. 4.3	<b>RISK</b>	<b>Failure to have appropriate arrangements in place for monitoring and succession planning in respect of Internal Assessors and Verifiers thereby ensuring that an appropriate number of qualified and experienced staff are retained to perform IA and IV duties, could result in failing to replace staff key to the award of the SVQ leading to the organisation's ability to award the qualification being withdrawn once again.</b>															
	<u>Resourcing</u>	Management must ensure that the quota of qualified and experienced Internal Assessors and Verifiers is continuously monitored to ensure that sufficient numbers are retained to aid the SVQ award. Appropriate succession planning arrangements should be put in place to ensure that Internal Assessors and Verifiers leaving the Service are suitably replaced.										Report Agreed Date	1 <sup>st</sup> Agreed Revised Date	Priority	% Complete	Status	
	Responsible Owner Agreed Response <b>Deputy Head of People</b>	<i>Deliver training to increase the number of assessors and verifiers, across the SFRS to an appropriate level. Establish a process with Workforce Planning to ensure that the retirement profile is monitored and planning arrangements in place to replace those who exit SFRS.</i>										31 March 2024	30 June 2024	Grade 3	100%	AMBER	
Progress to date (Update provided 28/05/24)		<p><b>Training to Increase SFRS Assessor and Verifier Numbers</b></p> <p>The delivery of this training to 55 colleagues is progressing across a framework of external providers. It is being proactively monitored by the internal MA/SVQ team who continue to support the candidates complete their awards.</p> <p>The delivery of an internal training course for 12 Internal Verifier candidates commenced on 05 Feb 2024 and is due to conclude on the 30 April 2024. This will inform the SQAs ongoing review of the current hold on SFRS ability to award the Assessor and Verifier qualifications. It will be considered by the SQA External Verifier (EV) at their next meeting which we are trying to schedule.</p> <p>The Lead Assessor course (with 14 candidates from across all LSO's) was completed on the 23 Feb 2024. This has increased the provision of approved L&amp;D Assessors within the SFRS to enable assessment delivery of the L&amp;D9Di Award within service delivery in each area.</p> <p>SQA have confirmed availability for an EV visit on 29 May 2024. Following a positive outcome from the EV meeting further assessor and IV training will be provided on a regular basis.</p> <p><b>SFRS Assessor and Verifier Succession Planning Arrangements</b></p> <p>The Strategic Workforce Planning Update report is used to inform meetings and discussions regarding the succession planning requirements for SFRS.</p>															
Outstanding actions to close the recommendation		Supporting Documented evidence to be forwarded regarding succession planning arrangements by the responsible owner															
Azets Comments		Evidence of Internal Assessor/Verifier training course required as well as evidence of succession planning arrangements in order to close action.															
Rec No. 5.4	<b>RISK</b>	<b>Inadequate governance arrangements including the lack of oversight and ownership of the SVQ has no doubt been an issue which has contributed to the failures associated with the SVQ award.</b>															
	<u>Governance – Ownership &amp; Oversight</u>	Going forward it is essential that ownership of the Internal Assessment and Verification functions as well as oversight of the operation of the SVQ award in general is assigned with responsibilities for monitoring compliance and scrutiny clearly defined. This will ensure SFRS is well positioned to stay compliant with SQA guidance and will assist in mitigating the likelihood of similar issues occurring again. To achieve this SFRS should require an annual review of SVQ award arrangements to confirm alignments with SQA requirements. This review should be undertaken at a sufficiently senior level jointly within the People and Service Delivery Areas.										Report Agreed Date	2nd Agreed Revised Date	Priority	% Complete	Status	
	Responsible Owner Agreed Response <b>Deputy Head of People</b>	<i>Establish a review panel, comprising of Strategic Managers from People, Service Delivery and Training to provide an annual review and assurance of the SVQ process.</i>										31 December 2023	30 April 2024	Grade 2	100%	AMBER	
Progress to date (Update provided 09/07/24)		As a result of discussions with key stakeholders, strategic oversight will be via the Service Delivery Board with the first SVQ update scheduled for the Service Delivery Board meeting on 8 April 2024. SVQ/MA programme update is now a standing agenda item on the Service Delivery Board to enable Strategic level scrutiny of arrangements.															
Outstanding actions to close the recommendation		Supporting evidence forwarded to Azets 09/07/24 for review and awaiting outcome															
ARAC Comments		Evidence of the above arrangements required in order to close action.															

2023-24	Workforce Planning – On Call Firefighters (Attraction & Recruitment)		Total No of Actions	% Complete Actions	Fully Implemented				Part/In Progress				Not Implemented				
					4	3	2	1	4	3	2	1	4	3	2	1	
			5	80%	0	0	4	0	0	0	1	0	0	0	0	0	0
Rec No. <b>2.2</b>	<b>RISK</b>	<b>There is a risk SFRS are not identifying the reasons behind withdrawn applications and potential barriers to candidates continuing on with the PREP, due to a lack of consistent analysis of candidate figures, resulting in potential loss of good candidates and reputational damage.</b>															
	<b>PREP Analysis</b>	<p>The analysis currently being performed should be enhanced to include further detail on the uptake of PREP such as:</p> <ul style="list-style-type: none"> <li>• The number of recruits who were given the opportunity to participate in PREP against those who did participate and those who chose not to; and</li> <li>• The number of recruits who did participate in PREP, but subsequently went on to withdraw their applications and the reason why.</li> </ul> <p>This will assist in determining the effectiveness of the programme and future recruitment activities.</p>										Report Agreed Date	Agreed Revised Date	Priority	% Complete	Status	
	Responsible Owner Agreed Response <b>People Manager (Strategic Partnering)</b>	<p><i>Review and revisit current On Call R&amp;S dashboard to include additional detail regarding what stage candidates participating in PREP withdraw from the process and the reasons for this. Ensure that this dashboard information is being presented to the appropriate SFRS forums to ensure this can fully inform decision making in respect of the evolution of PREP in supporting On Call recruitment.</i></p>										31 March 2024	n/a	Grade 2	100%	AMBER	
Progress to date (Update provided 31/07/24)	<p>Improvements to the dashboard to capture dropout rates are under review at present. Feedback questionnaires have been issued to a significant number of candidates to evaluate candidate experience and recruiting managers asked to follow up locally. Analysis of returns will be undertaken and findings presented to OCSCG in April 2024. Changes to the Candidate Tracker are being explored to support dashboard analysis. Recruiting manager guidance being developed to help reaffirm stakeholder responsibilities and encourage timely review/updates to candidate tracker. Template for sharing information is in development and will be shared at OCSCG in April 2024.</p>																
Outstanding actions to close the recommendation	<p>Supporting evidence forwarded to Azets 27/03/24 for review. Azets reviewed &amp; provided comment below People have included these areas of the form for PREP and then a form and evidence forwarded for review to Azets – 31/07/2024</p>																
Azets Comments	<p>Awaiting further supporting evidence to be provided in order to close action.</p>																



2023-24	<b>Equality, Diversity &amp; Inclusion</b> *2.1 & 5.1 are classed as one recommendation		Total No of Actions	% Complete Actions	Fully Implemented				Part/In Progress				Not Implemented					
					4	3	2	1	4	3	2	1	4	3	2	1		
			5	25%	0	0	1	0	0	0	4	0	0	0	0	0	0	
Rec No. <b>1.2</b>	<b>RISK</b>	The Equality and Diversity Charter may become outdated and obsolete if it is not subject to periodic review to ensure it remains fit for purpose.																
	<b>Review of Equality and Diversity Charter</b>		SFRS should ensure the Equality and Diversity Charter is subject to periodic review and that this is evidenced by ensuring appropriate version control is recorded on the document. Should any updates be required if there are any changes in Scottish Regulations for Mainstreaming Equality, these should be made in a timely manner.						Report Agreed Date	Agreed Revised Date	Priority	% Complete	Status					
	Responsible Owner Agreed Response <b>EDI Manager</b>	Review as required the Equality and Diversity Charter to ensure this remains up-to-date and relevant, taking account of the outcomes of the review of the Scottish Regulations for Mainstreaming Equality. This should include appropriate version control.	31 March 2025	n/a	Grade 2	0%	GREEN											
Progress to date (update provided 06/08/24)		This item will not progress until Q3 2024 following receipt of further information regarding renewal of the Public Sector Equality Duty.																
Outstanding actions to close the recommendation		Review of Charter following receipt of changes to PSED regulations and introduction of version control onto the document.																
Azets Comments		Awaiting updated Equality and Diversity Charter which includes version control in order to close action.																
Rec No. <b>2.1*</b>	<b>RISK</b>	There is a risk that there are errors in the tracking of completion rates for EDI training, this could lead to incomplete mandatory training going unaddressed, and result in staff not having an appropriate awareness of and approach to EDI matters.																
	<b>Monitoring of training completion data</b>		Management should ensure that the system is being updated with relevant employee data (new joiners/ leavers/ transfer of location) regularly in order for it to produce accurate training completion rates. An overall summary table should be included in the report that differentiates completion rates for operational and non-operational staff to improve the presentation of the report and make it easier to understand.						Report Agreed Date	1 <sup>st</sup> Agreed Revised Date	Priority	% Complete	Status					
	<b>Action 1</b> Responsible Owner Agreed Response <b>EDI Manager/ People Services Manager</b>	A process to be developed and introduced between People and Training, Safety and Assurance colleagues that enables the employee data on the Learnpro system to be periodically updated to ensure accurate reporting of training completion data.	31 March 2024	31 May 2024	Grade 2	100%	AMBER											
<b>Action 2</b> Responsible Owner Agreed Response <b>EDI Manager/ Learning Content, E-Systems and Performance Manager</b>	Reporting of E&D/Professional Behaviours training completion rates to be reviewed and enhancements to the presentation of the report introduced, including a summary table containing breakdown by employee group.	31 March 2024	31 July 2024	Grade 2	100%	AMBER												
<b>Action 1</b> Progress to date (update provided 06/08/24)		Part 1 - Written process agreed between EDI Team and Learning and E Development Team documenting quarterly reporting requirements which will come into effect for the reporting of Q1 2024/25. The process also documents the method for onward sharing of the data to the EDI Team for wider organisational distribution and reporting in the annual Mainstreaming Report.																
Outstanding actions to close the recommendation		Supporting evidence forwarded to Azets for review																
<b>Action 2</b> Progress to date (update provided 06/08/24)		Module is scheduled for Q1 2024/25 of Training for Operational Competence cycle and will allow reporting against this training cohort. Production of first report using the new process following the end of Q1 2024/25.																



<b>Action 2</b> Outstanding actions to close the recommendation		Supporting evidence forwarded to Azets for review					
Azets Comments		Awaiting evidence of completion of tasks above in order to close action.					
Rec No. <b>4.1</b>	<b>RISK</b>	<b>In the absence of a centralised record of EHRIAs, there is an increased risk that an EHRIA may not have been performed where required. There is also a risk of the EHRIAs not being reviewed and updated in a timely manner which could result in SFRS not having given adequate consideration to EDI matters when approving policies etc.</b>					
	<b>Central record of Equality and Human Rights Impact Assessments</b>	SFRS should maintain a centralised record of Equality and Human Rights Impact Assessments which have been performed along with their respective review dates. As part of this, SFRS should consider whether there are any common issues identified as part of the assessment process from which lessons for future improvement could be learned	Report Agreed Date	1 <sup>ST</sup> Agreed Revised Date	Priority	% Complete	Status
	Responsible Owner Agreed Response <b>EDI Manager</b>	Develop and collate a register of existing Equality and Human Rights Impact Assessments and introduce guidance to assist managers in updating the register as they complete an EHRIA.	30 June 2024	30 Sept 2024	Grade 2	75%	<b>GREEN</b>
Progress to date (update provided 06/08/24)		Validation of existing data held has been completed. The introduction of a revised process for maintaining a register of completed EHRIA has been developed as a component part of the proposed modifications to the EHRIA process which commences governance approval stages on 28 May 2024. The proposed EHRIA revised process is progressing through governance and is schedules for decision at Corporate Board in August 2024.					
Outstanding actions to close the recommendation		Completion of the governance process of the proposed EHRIA process modifications to complete governance stages which will meet the recommendation of introducing new guidance for managers in contributing data to the EHRIA register.					
Azets Comments		Awaiting evidence of centralised register of EHRIAs and capture of lessons learned for future improvements in order to close action.					
Rec No. <b>5.1*</b>	<b>RISK</b>	<b>There is a risk that important actions raised as part of the Equal Pay and Gender Pay Gap report have not been monitored and progressed as required. In addition, there is a risk that as part of making EDI 'business as usual', directorates may not give sufficient consideration to EDI matters and monitor EDI related actions appropriately in order to provide the EDI team with sufficient information for them to perform their role effectively and efficiently.</b>					
	<b>5.1 Action Plan Monitoring</b>	Management should review the Action Plan created as part of the Equal Pay and Gender Pay Gap report 2023 to ascertain how these actions are being taken forward and monitored, if still required. In addition, the EDI Manager should consider what enhancements could be made to the current monitoring/reporting arrangements in relation to EDI actions with particular consideration given to the role of the Equality Partnership Group and ways in which the Directorates could facilitate this process in order to improve effectiveness and efficiency of the EDI monitoring and reporting arrangements.	Report Agreed Date	2nd Agreed Revised Date	Priority	% Complete	Status
	<b>Action 1</b> Responsible Owner Agreed Response <b>EDI Manager/Reward Manager</b>	Undertake a mapping exercise of the Action Plan within the Equal Pay and Gender Pay Gap report 2023 to identify where and how each action is being progressed. A summary of progress against each action to be provided to Corporate Board.	30 June 2024	30 Sept 2024	Grade 2	80%	<b>GREEN</b>
	<b>Action 2</b> Responsible Owner Agreed Response <b>EDI Manager</b>	Review the Terms of Reference and attendees of the Equality Partnership Group to incorporate clear expectations regarding the role of the group in relation to EDI monitoring and reporting and reinvigorate the group itself	31 March 2024	31 May 2024	Grade 2	100%	<b>AMBER</b>
<b>Action 1</b> Progress to date (update provided 06/08/24)		The Equal Pay Gap and Gender Pay Gap Action Plan progress review is included within the governance papers for the Mainstreaming Report which commences governance stages on 28 May 2024. In this regard, an extension to 30 September is requested for this element of the recommendation to allow the completion of all governance stages relating to the update on the Equal Pay actions and publication of the Mainstreaming Report.					
<b>Action 1</b> Outstanding actions to close the recommendation		An extension to part 1 (Equal Pay and Gender Pay Gap Action Plan) reporting to Corporate Board is requested – reporting to the Corporate Board will be included within the annual Mainstreaming Report documentation which commences governance routes on 28 May 2024. This action remains scheduled for completion by target date. No further update at this time.					

<b>Action 2</b> Progress to date (update provided 06/08/24)	With respect to the review of the Terms of Reference of the Equality Partnership Group – this review has been completed and has informed proposed changes to the Terms of Reference which commences governance stages on 28 May 2024. – Revised terms of reference for the Equality Partnership Group were approved by the Corporate Board.
<b>Action 2</b> Outstanding actions to close the recommendation	Supporting evidence forwarded to Azets for review
Azets Comments	Awaiting evidence of the above in order to consider closing action.



Report No: C/PC/40-24

Agenda Item: 13.1

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>RISK UPDATE REPORT</b>						
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>					
		<u><a href="#">A</a></u>	<u><a href="#">B</a></u>	<u><a href="#">C</a></u>	<u><a href="#">D</a></u>	<u><a href="#">E</a></u>	<u><a href="#">F</a></u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to provide the People Committee with an overview of the current risks highlighted by Directorates.						
<b>2</b>	<b>Background</b>						
2.1	The purpose of the risk register is to inform decision making through Scrutiny and Assurance processes, providing additional awareness of the risks we face and the actions required to minimise these risks.						
2.2	The Audit and Risk Assurance Committee (ARAC) is responsible for advising the Board and the Accountable Officer on the adequacy and effectiveness of the Service's arrangements for risk management and has oversight of the Strategic Risk Register.						
2.3	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.						
2.4	Executive Boards provide oversight, direction and decision making in relation to aligned Service activity. Each Executive Board will receive a risk report on relevant Directorate risks to ensure appropriate action is being undertaken. Where additional assurance is required, this will be through risk spotlighting.						
2.5	Following discussion within SLT all Directorate risks will be aligned to the Strategic Plan with only those risks rated 15 or above to be included within reporting templates. This will allow scrutiny to be focused on the most significant risks impacting upon Directorates and consideration of related control actions.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Risk Overview</b>						
3.1.1	The table below identifies the alignment between the 2022-25 Strategic Outcomes and the current Directorate Risks:						

Strategic Outcomes		Directorate Risks				Total
		VH	H	M	L	
Outcome 1	Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.	1	1	1		3
Outcome 2	Communities are safer and more resilient as we respond effectively to changing risks.	5	3	2		10
Outcome 3	We value and demonstrate innovation across all areas of our work.			1		1
Outcome 4	We respond to the impacts of climate change in Scotland and reduce our carbon emissions.		1			1
Outcome 5	We are a progressive organisation, use our resources responsibly and provide best value for money to the public	3	5	4		12
Outcome 6	The experience of those who work for SFRS improves as we are the best employer we can be.	1	3	2		6
Outcome 7	Community safety and wellbeing improves as we work effectively with our partners			1		1
		10	13	11		34

3.1.2 Directorates will continue to review the alignment of risk to the Strategic Plan with revisions to be made within future reports to ensure the accuracy of this information.

3.1.3 Risk Registers have been updated to reflect identified common themes and the table below provides an alignment between these themes and identified risk.

Themes	Directorate Risks				Total
	VH	H	M	L	
Communication and Engagement		1	1		2
Environmental and Sustainability		1			1
Financial	1	2			3
Health and Safety		1			1
Health and Wellbeing			1		1
Information Governance	1				1
Legal		2	2		4
Performance	1	1	1		3
Service Delivery	2		3		5
Training	1	1			2
Workforce	4	4	3		11
		10	13	11	34

3.1.4 Risk themes were introduced to identify common areas of risk across Directorates, allowing consideration of the wider controls in place to manage common risk. Work currently being undertaken in relation to Risk Appetite, and agreed appetite categories, will allow this work to be developed further.

**Risk Appetite**

3.2  
3.2.1 The purpose of setting risk appetite levels is to define the amount of risk that the Service is prepared to accept, tolerate, or be exposed to at any point in time to achieve our strategic outcomes.

3.2.2 Risk registers identify a rating for each risk, based upon controls in place and a consideration of the risk upon the Service. Incorporating risk appetite levels will allow SLT and the Board to identify the gap between the level of risk the Service is prepared to accept and the current position identified by Directorates.

3.2.3 Our appetite for risk will vary depending upon the category of risk being considered and the use of an agreed set of risk appetite categories will provide a consistent basis from which to develop category specific statements. SLT have agreed 8 categories which are listed below:

Financial	Service Delivery
Organisational Security	People
Environmental	Innovation
Compliance	Political & Stakeholder Relationships

3.2.4

Within each of the above categories key elements of activity have been identified, together with an agreed appetite level, supported by the identification of associated controls, aligned to our assurance framework. The agreed appetite levels are outlined below:

Category	Category Description
Minimalist	Preference for low level of associated risk and uncertainty and will only look to accept risk where it is essential to do so. The creation of opportunity is not a key driver.
Cautious	Preference for safe options where the level of benefit and risk is limited but some opportunity may be experienced.
Open	Willing to consider all potential delivery options and to choose the one that is most likely to result in success and opportunity whilst also providing an acceptable level of risk.
Ambitious	Eager to be innovative and to take opportunities offering potentially higher reward, whilst accepting greater risk and uncertainty.

3.2.5

Risk Appetite statements are currently being developed by the SLT for the 8 categories outlined above and aligned to the risk appetite levels identified. These statements will be discussed at a Board Strategy Day in September, before submission to ARAC and the Board in October.

3.3

**People Committee Aligned Risk**

3.3.1

In relation to the current period Directorates reviewed registers identifying 9 Directorate risks, aligned to the People Committee with 3 risks rated at 15 or above. All risks rated 15 or above are now coloured red, with the table below providing the current status of each risk:

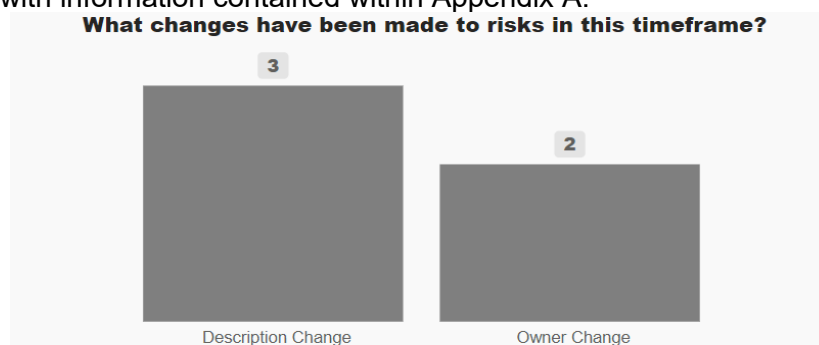
What is the current status of each risk?						
		Impact				
		1	2	3	4	5
Probability	1					
	2			1		
	3			1	2	
	4			2	1	
	5				2	

3.3.2

Appendix A to the report provides information on the 3 risks rated 15 or above. The information is also available through the risk dashboard and a copy of the link is attached for information - [Risk Dashboard](#).

3.3.3

Following the last review the table below outlines the changes made to risks following the last update, with information contained within Appendix A:

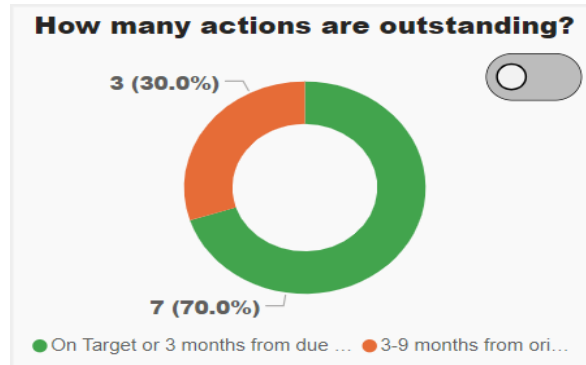


3.4  
3.4.1

**Control Actions**

Without action taken on progressing identified controls, risks are likely to remain static and additional reporting has now been put in place to manage control actions through a RAG status, aligned to the reporting process agreed for 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

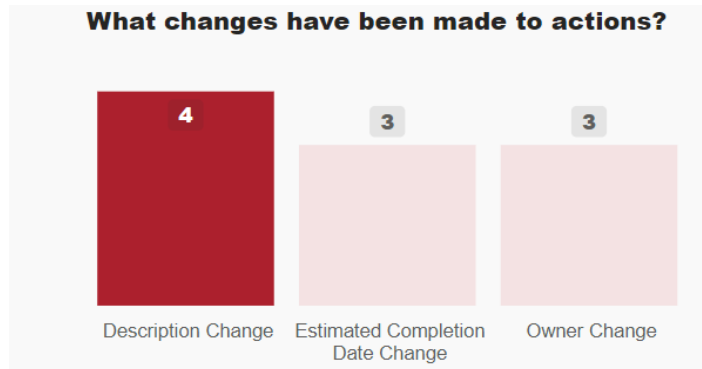


3.4.2

Information on the three control actions now classed as 3 to 9 months from their original due date is attached within Appendix A. These control actions relate to POD015 and TSA019 which are currently under review.

3.4.3

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



Risk	Action Description	Changes Made
TSA019	Analysis of USAR specialist skill delivery, including an options appraisal to identify short, medium and long term options to enhance capacity to optimise training delivery.	Estimated Completion Date From 30/06/2024 To 30/12/2024
TSA019	Engagement with Asset Management and Fleet, Equipment & Workshop FEW regarding facilities and equipment.	Estimated Completion Date From 30/06/2024 To 30/12/2024
TSA019	Review the suitability of Dundee Airport site (course delivery and welfare facilities).	Estimated Completion Date From 30/06/2024 To 30/12/2024

<b>4</b>	<b>Recommendation</b>
4.1	The People Committee is asked to: <ul style="list-style-type: none"> <li>• Scrutinise the information presented within the report.</li> <li>• Note progress in relation to the development of risk appetite statements.</li> </ul>
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	The report identifies risks from each Directorate together with 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	<b>Financial</b>
5.2.1	The report identifies risks from each Directorate with financial implications arising from control decisions to be managed by the relevant Directorate.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	<b>Workforce</b>
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.
5.5	<b>Health &amp; Safety</b>
5.5.1	Any implications arising from the report will be managed by the relevant Directorate.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	Any implications arising from the report will be managed by the relevant Directorate.
5.7	<b>Training</b>
5.7.1	Any implications arising from the report will be managed by the relevant Directorate.
5.8	<b>Timing</b>
5.8.1	The report is provided to the Audit and Risk Assurance Committee on a quarterly basis.
5.9	<b>Performance</b>
5.9.1	The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.
5.10	<b>Communications &amp; Engagement</b>
5.10.1	Any implications arising from the report will be managed by the relevant Directorate.
5.11	<b>Legal</b>
5.11.1	Any implications arising from the report will be managed by the relevant Directorate.
5.12	<b>Information Governance</b>
5.12.1	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	<b>Equalities</b>
5.13.1	EHRIA completed - No. An assessment was undertaken in relation to the Risk Management Policy. Any individual elements of work, which may have an impact upon Equalities, will require to be assessed and managed by the relevant Directorate.
5.14	<b>Service Delivery</b>
5.14.1	Any implications arising from the report will be managed by the relevant Directorate.

<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Sarah O'Donnell, Director of Finance and Contractual Services
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial/Limited/Insufficient</del> <b>Reasonable</b> There is room for improvement in the identification of the right risks, controls and completion of mitigating actions, within identified timescales, to ensure scrutiny can be taken effectively.
7.2	<b>Rationale:</b>	The report is based upon information identified by each Directorate and I have confidence that the information is correctly reported based upon these returns.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A – People Committee Significant Risks	
<b>Prepared by:</b>	Tracy Shankland, Risk and Insurance Officer	
<b>Sponsored by:</b>	Sarah O'Donnell, Director of Finance and Contractual Services	
<b>Presented by:</b>	ACO Andrew Watt, Director of Training Safety and Assurance Lyndsay Gaja, Interim Director of People	
<b>Links to Strategy and Corporate Values</b>		
Risk Management forms part of the Services Governance arrangements and links back to Outcome 5 of the 2022-25 Strategic Plan, specifically Objectives 5.1 and 5.6:		
<b>Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.</b>		
<ul style="list-style-type: none"> <li>Objective 5.1: Remaining open and transparent in how we make decisions.</li> <li>Objective 5.6: Managing major change projects and organisational risks effectively and efficiently.</li> </ul>		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Scrutiny</i>



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

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
FCS018	6	There is a risk of continued challenges with recruiting and retaining staff with the necessary skills and experience required to support the move to a Cloud based environment as well as the availability of budget to upskill existing staff with the skills required. This is because of a very buoyant ICT job market, pay grade challenges and the availability of budget to provide the necessary training. This can result in the inability to support our current systems and deliver innovation that new systems would bring.	PC (CB)	Director of Finance and Contractual Services	20	8	20
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment		Action Status
Implement ICT Restructure		31/12/2024	31/12/2024	Head of ICT	Staff engagements sessions held, job evaluation to be finalised and the final implementation of new ICT structure		On Target or 3 months from due date
Review current Market Allowance and propose new allowances for new roles		31/12/2024	31/12/2024	Head of ICT	Discussions are ongoing with exercise to be completed by end of December 2024		On Target or 3 months from due date

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Risk ID	Strategic Outcome	Risk Description	Committee Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
POD015	2	There is a risk that the People and Finance teams are unable to effectively support the significant number of concurrent Pensions related exercises and associated implementations due to competing priorities and capacity constraints, and not receiving timely information and engagement from the Scottish Public Pensions Agency resulting in lack of clarity and discontent for employees, and potential legal challenge and / or employee relations issues resulting in delays, employee discontent , uncertainty over procedures and entitlements, and financial disadvantage.	PC (CB)	Director of People	16	4	16
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment		Action Status
Continue to monitor the resource requirements related to each Pensions exercise and capacity within the People and Finance teams to support this as a result of reprioritising work activities or the need for business case for additional resource if appropriate.		31/03/2025	31/03/2025	Deputy Head of People	One Full Time Administration Assistant has been assigned to support the project, with further support from the People Services team during periods of high activity. Ongoing support from the Finance systems team also being provided as required.		On Target or 3 months from due date
Engage with Scottish Public Pensions Agency and stakeholders to develop appropriate employee communications on each Pension related exercise to ensure current and former employees are updated on the potential impacts and implementation arrangements timeously.		31/03/2025	31/03/2025	Deputy Head of People	The detailed project plans which are being developed will set out timescales/responsibilities for comms on each workstream and monthly meetings are in place to discuss comms on an ongoing basis. SPPA and SFRS have agreed a joint Communication Strategy to inform pension scheme members of implementation plans. Regular meetings with Trade Unions also taking place.		On Target or 3 months from due date
Ensure regular participation in process planning, and ongoing dialogue with the Scottish Public Pensions Agency and Finance colleagues through a number of forums. Provide regular progress updates to SFRS management teams and stakeholders to ensure appropriate oversight and escalation of potential challenges should these arise.		31/12/2023	31/03/2025	Deputy Head of People	Project Plan for implementation of 2nd Option exercise now in final stage of development. Plan for implementation of Booth Bradshaw under development. Delay in development of project plan for McCloud Sargant due to bugs in SPPA software package developed to carry out Remedy Calculations. SPPA have however confirmed that the issue of Remedial service statements will be rescheduled from August 2024 till April 2025. Admin Support now in place to support project.		3-9 months from original due date

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Risk ID	Strategic Outcome	Risk Description	Committee Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
TSA019	2	There is a Directorate risk, of an inability to maintain or improve our training delivery due to the limited finance/budget available for capital investment, condition and location of our Training Estate and therefore lack of access to appropriate facilities, which could result in current and future negative impact on currency in operational skills & capacity and associated legal, regulatory, compliance, financial and reputational cost.	PC (TSAB)	Director of Training, Safety and Assurance	20	8	16
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment		Action Status
Implementation of the recommendations from the draft contaminants POG with a timeline of Immediate, Medium and Long-term actions.		31/03/2025	31/03/2025	Head of Training	A Training SC now has the Contaminants reference, and they are leading on the production of the SSOW and will be creating a bespoke team (WC + CC) to support this work in collaboration with the S&A Team.		On Target or 3 months from due date
Review the suitability of Dundee Airport site (course delivery and welfare facilities).		01/04/2024	30/12/2024	Head of Training	Progress is also being made to develop Perth Training Centre for CFBT training in conjunction with Asset Management and the designated property manager, with site visits undertaken, a design team is also in the process of being appointed to invest and develop in this strategic location, again this links to the TSAMP to make best use of the capital allocation.		On Target or 3 months from due date
Engagement with Asset Management and Fleet, Equipment & Workshop FEW regarding facilities and equipment.		31/03/2024	30/12/2024	Head of Training	Continued engagement at HOF level to progress this control action, and the identified challenges with regard to the ageing training fleet, this also links to the Training Strategic Asset Management Plan TSAMP		3-9 months from original due date
Scope out options to utilise temporary structures to increase venue capacity / improve welfare facilities.		31/03/2024	31/03/2025	Head of Training	Portlethen Management team working with Assets to attempt to utilise unused shower unit located at Hamilton to remedy Welfare / Shower shortages at Portlethen site. This work is progressing with Strategic support.		3-9 months from original due date
Analysis of USAR specialist skill delivery, including an options appraisal to identify short, medium and long term options to enhance capacity to optimise training delivery.		30/06/2024	30/06/2024	Head of Training	Business Case / Report (Collapsed Structure Simulator - CSS) was presented at FMT (February) for "progression". Paper and specifications have been submitted to Alex Laing (National Property Manager). Property have provided indicative costings for the 3 submitted specifications and this paper was progressed through DMT (March). Further meeting with Project Property Manager on the 24th April to progress tendering process for identified site.		On Target or 3 months from due date



## People Committee – 12 September 2024

### Risk Spotlight Briefing Note OD001 – Operations Control Staffing

Submitted by: Jacqui MacDonald, Area Commander (Control)

#### Background: What would cause the risk to materialise / what is the effect likely to be?

There is a risk of a non-resilient fire control due to insufficient fire control employees and an ineffective fire Control structure. Failure to attract, recruit, retain personnel, high abstraction and sickness levels, lead to ineffective workforce planning, as a result, we would be failing to provide a resilient fire control capability.

Insufficient numbers of personnel would not allow Fire Control to fulfil its critical role as an integral part of Scottish Fire and Rescue Service operational preparedness, response and incident command arrangements. Resilience plans are in place to support Operations Control (OC) when staffing levels fall.

There has been a high abstraction rate over the past two years, and there continues to be leavers, although the number has significantly reduced.

#### Controls and mitigating actions (stating what actions are being taken if the residual/current risk assessment is operating above or below risk appetite).

- Review of Operations Control (OC) Succession Planning / Recruitment Strategy
- Additional Temporary Posts to provide resilience during implementation of new mobilising system
- Utilise information from exit interviews to improve staff retention
- Review ways to improve staff wellbeing – collective PSIP review due to cumulative exposure to incidents
- Review OC structure to ensure fit for purpose
- Maternity cover provision
- Development to Competent rate of pay – consider implementing incremental increase
- Flexible working – high levels of flexible working requests and associated impact

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

Same recruitment and retention issues across the Control Fire Sector in the UK.

**PEOPLE COMMITTEE – ROLLING FORWARD PLAN**

**Agenda Item 15.1**

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
<b>5 December 2024</b>	<ul style="list-style-type: none"> <li>• Chair’s Welcome</li> <li>• Apologies for Absence</li> <li>• Consideration of and Decision on any Items to be taken in Private</li> <li>• Declaration of Interests</li> <li>• Minutes of Previous Meeting</li> <li>• Action Log</li> <li>• Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>• Review of Actions</li> <li>• Date of Next Meeting</li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>• Partnership Working Update (EPF &amp; PAG)</li> <li>• People Policy Forward Planning Schedule Update</li> <li>• Training Policy Review Schedule</li> <li>• S&amp;A Documents Forward Planning Schedule</li> <li>• RANSc update (Private)</li> <li>• Key Case Update (Private)</li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>• Performance Reports (People, Training &amp; H&amp;S)</li> <li>• HMFSI Independent Audit/ Inspection Action Plan Update</li> <li>• Committee Aligned Directorate Risks</li> <li>• Risk Spotlight - (TBC)</li> <li>• Contaminants Quarterly update</li> <li>• Culture Update (verbal)</li> <li>• Audit Action Plan Update:                             <ul style="list-style-type: none"> <li>-SVQ</li> <li>-Sickness Absence Management,</li> <li>-On Call</li> <li>-EDI</li> </ul> </li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>•</li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>•</li> </ul>
		<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li>• Health and Safety Policy and Policy Statement</li> </ul>	<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li>• Overview of Approach to Identifying Talent (LB)</li> <li>• Health &amp; Safety Annual Report 2023/24</li> </ul>	<p><b><u>New Business</u></b></p>	<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li>•</li> </ul>

## PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
<b>6 March 2025</b>	<ul style="list-style-type: none"> <li>Chair’s Welcome</li> <li>Apologies for Absence</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> <li></li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>Partnership Working Update (EPF &amp; PAG)</li> <li>People Policy Forward Planning Schedule Update</li> <li>Training Policy Review Schedule</li> <li>S&amp;A Documents Forward Planning Schedule</li> <li>RANSc update (Private)</li> <li>Key Case Update (Private)</li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li>Performance Reports (People, Training &amp; H&amp;S)</li> <li>HMFSI Independent Audit/ Inspection Action Plan Update</li> <li>Committee Aligned Directorate Risks</li> <li>Risk Spotlight - (TBC)</li> <li>Contaminants Quarterly update</li> <li>Culture Update (verbal)</li> <li>Audit Action Plan Update:                             <ul style="list-style-type: none"> <li>-SVQ</li> <li>-Sickness Absence Management,</li> <li>-On Call</li> <li>-EDI</li> </ul> </li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><b><u>Standing/Regular Reports</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>
		<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li>Learning and Development Overview</li> <li>Training SAMP</li> </ul>	<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li>Volume Of Calls To Safecall Confidential Reporting Line And Analysis Of Themes</li> </ul>	<p><b><u>New Business</u></b></p>	<p><b><u>New Business</u></b></p> <ul style="list-style-type: none"> <li></li> </ul>



**SCOTTISH**  
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**PUBLIC MEETING - PEOPLE COMMITTEE**  
**THURSDAY 12 SEPTEMBER 2024 @ 1300 HRS**

**REPORTS FOR INFORMATION ONLY**



Report No: C/PC/46-24

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE							
Meeting Date:	12 SEPTEMBER 2024							
Report Title:	TRAINING FUNCTION POLICY REVIEW SCHEDULE							
Report Classification:	For Information Only	<b>SFRS Board/Committee Meetings ONLY</b>					<b>For Reports to be held in Private</b>	
		<b>Specify rationale below referring to <u>Board Standing Order 9</u></b>						
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>
<b>1</b>	<b>Purpose</b>							
1.1	The purpose of this report is to provide the People Committee with a quarterly update on the status of Training Function documents and an overview of current and recently completed work.							
<b>2</b>	<b>Background</b>							
2.1	The Training Function maintain a range of documents including policies, procedures and training standards that are applicable to SFRS personnel both within and out with the Training Function. This report provides information on document review work completed during Q1, documents currently under review and also those due to be reviewed during Q3 2024 25. The status and other relevant details for each document were exported from the Training Function Document Review Schedule on the 26 August 2024 and are included in the Appendix.							
2.2	Currently, the review period for most documents is set of five years as this aligned with review intervals in other Directorates however this may be reduced through a current piece of work with Information Governance to adopt the document review, authorisation and publication processes within the new SharePoint Document Library. The Training Function has recently been supporting this work with user testing of the new workflows.							
2.3	To ensure documents are current, an annual “light touch” review process is carried out during February and March. Where these are not able to be carried out during these months then they are carried out in the following months, when capacity allows.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	<b>New Documents</b>							
3.1.1	During Quarter 1 of 2024 25, the following new document was approved and published:							
3.1.2	Non Conformance and Corrective Action This was a new procedure that was produced to support the Training Function Quality Management System and it replaced two existing procedures which have been unpublished: Identifying Non conformances in our System and Corrective Actions.							



3.2	<b>Reviewed Documents</b>
3.2.1	<p>During Quarter 1 of 2024 25, the following documents were reviewed, approved and published:</p> <ul style="list-style-type: none"> <li>• Animal Rescue Response</li> <li>• Hazardous Materials Response</li> <li>• Maintaining High Quality Training Delivery</li> <li>• MRG Terms of Reference</li> <li>• Training Function EHRIA</li> <li>• Uniformed Employees Performance Improvement Plan Management Arrangement</li> </ul>
3.3	<b>In Development and current work</b>
3.3.1	The three new frameworks that were being developed to support the Training Vision and Strategy have been merged into a single document to create the Training Function Framework which has been updated to be structured around the Plan, Do, Check Act model.
3.3.2	The review of the Wholetime Instructors Working Hours and Leave Policy is progressing. A meeting took place on the 13th June with FBU representatives and the first consultation process was initiated on the 10th July. GC Nelson has since met with People Services and an updated draft has been produced following feedback and this policy document is now out for final consultation.
3.3.3	An updated Terms of Reference for the Clinical Governance Technical Working Group has been progressing through governance and has recently been to the Service Delivery Committee.
3.3.4	A Training for Operational Competence (TfOC) review project is currently underway and following the completion of this, the TfOC Guidance Note will be finalised and published.
3.4	<b>Under Review</b>
3.4.1	There are currently eight documents under review (see Appendix A), five of which are Terms of Reference. The Command Competence Review procedure is likely to remain under review for the longer term, and the Health Management of Compartment Fire Behaviour Training Instructors is progressing with additional information now having been received from Health and Wellbeing. The remaining document under review is the Training Function Governance Arrangements Guidance Note which has recently been updated and is progressing towards a final version.
3.5	<b>Upcoming Review</b>
3.5.1	Out of the set of documents that have the status “current”, there is one, Animal Rescue Response, that is due for review during Q3 2024 25.
<b>4</b>	<b>Recommendation</b>
4.1	The People Committee are asked to note the information included in this report.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	Appropriate governance and scrutiny will reduce the risk that Training Function documents no longer meet requirements which could potentially affect the quality of training delivery.
5.2	<b>Financial</b>
5.2.1	Not applicable

5.3 5.3.1	<b>Environmental &amp; Sustainability</b> Not applicable	
5.4 5.4.1	<b>Workforce</b> Not applicable	
5.5 5.5.1	<b>Health &amp; Safety</b> Not applicable	
5.6 5.6.1	<b>Health &amp; Wellbeing</b> Not applicable	
5.7 5.7.1	<b>Training</b> Not applicable	
5.8 5.8.1	<b>Timing</b> Not applicable	
5.9 5.9.1	<b>Performance</b> Not applicable	
5.10 5.10.1	<b>Communications &amp; Engagement</b> Not applicable	
5.11 5.11.1	<b>Legal</b> Not applicable	
5.12 5.12.1	<b>Information Governance</b> DPIA completed No – nothing is being processed in relation to these proposed changes.	
5.13 5.13.1	<b>Equalities</b> EHRIA completed No – This has not been carried out as it has been considered but there is no impact on people in relation to the General Equality Duty.	
5.14 5.14.1	<b>Service Delivery</b> Not applicable	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training, Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <del>Reasonable</del> / <del>Limited</del> / <del>Insufficient</del>
7.3	<b>Rationale:</b>	<p>A full review of the existing Training Function review schedule was undertaken and a new one was created in the form of a SharePoint list. This list is supported by corresponding tasks within Microsoft Planner which provides automated notifications when reviews are due and a place for document owners to track review progress. In addition to this, tasks are monitored monthly at the Training FMT.</p> <p>This method of recording and governance ensures that documents are reviewed according to schedule and also provides</p>

		the information required to complete this report on a quarterly basis.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A - Training Function Document Review Schedule	
<b>Prepared by:</b>	Watch Commander Roger Crawford & Group Commander Bryan Nelson, Training Function	
<b>Sponsored by:</b>	Craig McGoldrick, Deputy Assistant Chief Officer Head of Training	
<b>Presented by</b>	Craig McGoldrick, Deputy Assistant Chief Officer Head of Training	
<b>Links to Strategy and Corporate Values</b>		
<b>Training Function Vision &amp; Strategy 2023-28</b>		
<b>SFRS Strategic Plan 2022-2025</b>		
Outcome 6: People The experience of those who work for SFRS improves as we are the best employer we can be.		
<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Information Only</i>

## Training Function Document Review Schedule

Document Type	Document Title	Status	Approval Status	Published	Review due date
National Training Standard	Overarching Principles	Current	Approved	08/11/2022	02/11/2027
National Training Standard	Rope Rescue and Safe Working at Height	Current	Approved	11/09/2023	07/09/2028
National Training Standard	Water Rescue and Flood Response	Current	Approved	13/10/2022	07/09/2027
National Training Standard	Urban Search and Rescue	Current	Approved	13/10/2022	07/09/2027
National Training Standard	Animal Rescue Response	Current	Approved	03/04/2024	31/12/2024
National Training Standard	Driver and Emergency Response Training	Current	Approved	15/11/2023	02/11/2028
National Training Standard	Breathing Apparatus	Current	Approved	11/05/2022	04/05/2027
National Training Standard	Firefighting with UHPFS	Current	Approved	08/08/2024	08/08/2029
National Training Standard	Hazardous Materials Response	Current	Approved	06/05/2024	01/10/2028
National Training Standard	Casualty Care	Current	Approved	08/08/2024	07/09/2027
National Training Standard	Incident Command	Current	Approved	08/11/2022	02/11/2027
National Training Standard	Marine Firefighting	Current	Approved	28/04/2022	06/04/2027
National Training Standard	Extrication (RTC)	Current	Approved	28/04/2022	06/04/2027
Policy	Quality Management System Quality Policy	Current	Approved	22/12/2021	22/12/2026
Policy	Training for Operational Competence Policy	Current	Approved	20/02/2024	01/01/2027
Policy	Incident Command Development Pathway Policy	Current	Approved	07/06/2022	01/05/2027
Policy & Procedure	Training Delivery Assurance	Current	Approved	22/12/2021	01/01/2027
Procedure	Non Conformance and Corrective Action	Current	Approved	30/05/2024	30/05/2029

OFFICIAL

Document Type	Document Title	Status	Approval Status	Published	Review due date
Procedure	Maintaining High Quality Training Delivery	Current	Approved	30/05/2024	30/05/2029
Procedure	Credit Rating Procedure	Current	Approved	20/03/2024	20/03/2029
Framework	BAI Revalidation Framework	Current	Approved	30/08/2023	01/06/2028
EHRIA	Incident Command EHRIA	Current	Approved	07/06/2022	06/06/2027
Management Arrangement	Uniformed Employees Performance Improvement Plan MA	Current	Approved	19/06/2024	01/05/2027
Terms of Reference	MRG Terms of Reference	Current	Approved	30/05/2024	30/05/2025
EHRIA	Training Function EHRIA	Current	Approved	12/06/2024	26/10/2028
Terms of Reference	BA Practitioners Group Terms of Reference	Current	Approved	17/07/2024	31/07/2025
Guidance	Training For Operational Competency	In Development	Not Submitted		N/A
Framework	Training Function Framework	In Development	Not Submitted		N/A
Strategy	Training Vision & Strategy 2023-28	Sent for publishing	Approved		N/A
Policy & Procedure	Health Management of Compartment Fire Behaviour Training Instructors	Under Review	Not Submitted		15/05/2020
Procedure	Command Competence Review	Under Review	Not Submitted		N/A
Terms of Reference	TMT Terms of Reference	Under Review	Not Submitted	03/05/2023	03/05/2024
Terms of Reference	FMT Terms of Reference	Under Review	Not Submitted	12/04/2023	30/04/2024
Terms of Reference	OCSG Terms of Reference	Under Review	Not Submitted		30/04/2024
Terms of Reference	OCTWG Terms of Reference	Under Review	Not Submitted		16/08/2024
Terms of Reference	Clinical Governance Technical Working Group Terms of Reference	Under Review	Requested		N/A
Guidance	Training Function Governance Arrangements	Under Review	Approved		N/A



Report No: C/PC/42-24

Agenda Item: N/A FIO

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>SAFETY AND ASSURANCE DOCUMENTS FORWARD PLANNING SCHEDULE</b>						
<b>Report Classification:</b>	For Information Only	<b>Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to provide the People Committee with an update regarding the management of Safety and Assurance documentation up until the end of quarter 1 (Q1) 2024/25 in accordance with our Function Plan.						
<b>2</b>	<b>Background</b>						
2.1	The Safety and Assurance Function are responsible for the ongoing management of our published Policies, Frameworks and supporting Management Arrangements (MA) to ensure legal compliance, best practice and continual improvement of our management systems.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	The Provision and User of Work Equipment (PUWER) Management Arrangement has now been republished, it was significantly delayed due to consultation feedback, development of support guidance and Service Governance restructure during the review period. Feedback during the 28-day familiarisation period was minor and the MA has been well received.						
3.2	Impounding and Inspection MA was carried over from Q4 as we successfully trailed a new impounding inspection process during the review. Three different processes at each stage of impound, inspection and impound management processes were developed into procedural flow charts making the MA more user friendly.						
3.3	Our first Safety Culture Framework has been developed and is now working through our Governance Process, the framework has 'we will' and 'commitment statements' developed from the five themes of the 2023/24 Safety Culture Survey. Once approved it will be cascaded and shared through Safety and Assurance Improvement Groups. Most actions have already been captured within existing Health and Safety Improvement Plans or Business Partner workstreams.						
3.4	Safety Training and Safety and Assurance Communications Framework as also in advance development following the format of the Safety Culture Framework.						
<b>4</b>	<b>Recommendation</b>						
4.1	The People Committee is asked to note the progress against the 5-year rolling Management Arrangement tracker up until the end of Q1, 2024/25 which is also reflected in our SA Function Plan.						

<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b> SFRS failing to maintain the currency and robustness of its safety and assurance management system without frequent periodic review as detailed within this report.
5.2	<b>Financial</b> There are no financial implications for the development, maintenance, and monitoring of these processes, however failure to comply with Health and Safety Legislation, learning lessons may result in financial implications.
5.3	<b>Environmental &amp; Sustainability</b> There are no environmental and sustainability implications for the development, maintenance, and monitoring of these processes.
5.4	<b>Workforce</b> Safety and Assurance continue to monitor progression of actions in line with Health and Safety Improvement Plans and in partnership with our business partners.
5.5	<b>Health &amp; Safety</b> Failure to comply with health and safety legislation may lead to potential consequences for both the organisation and individuals which may result in, involvement, engagement and investigation and potential action from the HSE. Demonstrate Clause 6.1.3 Determination of Legal and other Requirement (ISO 45001)
5.6	<b>Health &amp; Wellbeing</b> There are no health and wellbeing implementations for the development, maintenance, and monitoring of these processes.
5.7	<b>Training</b> There are no training implications as MAs have supporting Programmes of Learning, or will be captured in generic health and safety induction content.
5.8	<b>Timing</b> Safety and Assurance MA's are scheduled for periodic 5-year review, to minimise disruption and maximise implementation for our business partners. Safety and Assurance will still review major/minor revision subject to changes in legislation, guidance, best practice, or outcomes of event investigation out width this 5-year review cycle on a risk based approach.
5.9	<b>Performance</b> Periodic review of our Health and Safety legal register and guidance review process will assist SFRS maintaining its health and safety management system effectively and support possible ISO 45001 Requirements.
5.10	<b>Communications &amp; Engagement</b> The high level of compliance should be included in future health and safety communications as part of SA Communication Framework.
5.11	<b>Legal</b> If Safety and Assurance Policies, Frameworks and supporting arrangements are not maintained or fully implemented, there is a risk that the SFRS may not be compliant with its legislative responsibilities.

5.12	<b>Information Governance</b> DPIA completed No. If not applicable state reasons. The review process of SA Documents includes DPIAs where personal data is identified to be held on file. Safety and Assurance are working with Information Governance to complete these assessments as required.	
5.13	<b>Equalities</b> EHRIA completed No. If not applicable state reasons. The documents reviewed within the paper is part of the SFRS Health and Safety Policy or Operational Assurance policy which both have an overarching EHIRA.	
5.14	<b>Service Delivery</b> It is anticipated that the outcomes of this annual periodic MA review processes outlined within the paper will have a positive impact on the safety of all SFRS staff and the committees we serve.	
<b>6</b>	<b>Core Brief</b>	
6.1	The Safety and Assurance Documents Forward Planning Schedule 2024-2025 has been updated to reflect progress up until the end of Q4, 2024/25 also reflected in our Safety and Assurance Function Plan process.	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training, Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.2	<b>Rationale:</b>	The Safety and Assurance Forward Planning Schedule continues to be progressed on target and will be expanded to include Operational Assurance documentation once the ongoing review has concluded.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	<a href="#">Appendix A</a> – Safety and Assurance Documents Forward Planning Schedule.	
<b>Prepared by:</b>	Derrick Watson, Senior Health and Safety Adviser	
<b>Sponsored by:</b>	Andrew Watt, Assistant Chief Officer, Director of Training, Safety and Assurance	
<b>Presented by:</b>	Jim Holden, Head of Safety and Assurance	
<b>Links to Strategy and Corporate Values</b>		
<b>Strategic Plan 2022-2025:</b> Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public.  What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff.  Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.  Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety and wellbeing of the public and our people.  Objective 6.2 Developing and deploying new and more agile ways of working to protect the safety, wellbeing, physical and mental health of our people.		
<b>Safety Value:</b>		



OFFICIAL

Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.

<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Safety and Assurance FMT</i>	<i>19 August 2024</i>	<i>For Information</i>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Information</i>

## SAFETY AND ASSURANCE DOCUMENTS FORWARD PLANNING SCHEDULE 2024-2025

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
PUWER MA and LCMS module (carry-over)	5 Year Review	2021/22		28 Day consultation	April SA FMT	Closed 14/07	15/07/24	Republished on the iHub
Impound and Inspection MA (carry-over)	5 Year Review	2023-24		Conducted during review	N/A	N/A	30/05/24	Republished on the iHub
Engagement and Governance MA (Carry-over)	5 Year Review	2023-24						Scheduled for review in Q2
Support Review and Audit Management Arrangement (Withdrawn from iHub)	Major review and republication	2022-23						
Contaminants MA (Carry-over)	New	2023-24		Conducted during review				Development ongoing
Liaising with the HSE MA	5 Year Review	2024-25		Conducted during review	Aug SA FMT	N/A		
Safety and Assurance Strategy 2024-27	Review	2024-25						
Safety Culture Framework	New	2024-25		Conducted during development	Aug SA FMT	N/A		
Safety and Assurance Communications Framework	New	2024-25						

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Safety and Assurance Training Framework	New	2024-25						
Health and Safety Policy	Annual Review	2024-25		Conducted during review	Aug SA FMT	N/A		
Health and Safety Policy Statement	Annual Review	2024-25		Conducted during review	Aug SA FMT	N/A		
Confined Spaces MA	5 Year Review	2024-25				N/A		
Mobile Elevated Work Platforms MA	5 Year Review	2024-25				N/A		
Working at Height MA	5 Year Review	2024-25				N/A		
Station Audit MA	5 Year Review	2024-25				N/A		
Working with Young Persons MA	5 Year Review	2024-25				N/A		
Working with Volunteers MA	5 Year Review	2024-25				N/A		
Control of Contractors MA	5 Year Review	2024-25				N/A		

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



Report No: C/PC/40-34

Agenda Item: N/A FIO

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>CONTAMINANTS UPDATE</b>						
<b>Report Classification:</b>	<b>For Information Only</b>	<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of the paper is to provide People Committee with an update on the management of contaminants in Scottish Fire and Rescue Service (SFRS).						
<b>2</b>	<b>Background</b>						
2.1	The research of Professor Anna Stec published in 2023, the work of the National Fire Chief Council (NFCC) Contaminants Group, attendance at conferences is providing informative research outcomes and information on new and emerging developments on the management of fire contaminants.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Business Case</b>						
3.1.1	Strategic Leadership Team (SLT) approved budget of £3,226,500m for managing fire contaminants in 2024/25. This comprises of capital expenditure of £2,898,200, a one-off resource cost of £80,600 and resource costs of £247,700. Expenditure is ongoing. £400,000 has been spent on PPE, of which one third has been received. The remaining order will be received in the next six months. Purchasing of airing racks, containers for dirty kit etc. are in the planning stage. The requirement for Hazardous waste bins was researched and it has been deemed that they are not required at this stage. Professor A. Stec supported this decision.						
3.2	<b>Research</b>						
3.2.1	On Thursday 18 April, CivTech facilitated a workshop on “ <i>How can technology identify contaminants across different types of incidents?</i> ”. SFRS have now had a challenge accepted through the Scottish Government funded CivTech Innovation Accelerator Programme. A challenge has been set for academics, subject matter experts and industry leader to develop a technology that will enable the identification and measurement of contamination firefighters are exposed to during the duties. There has been a good level of interest so far and a Q&A session has been held in August. Applications are to progress to the next phase, developing a minimum viable product, and they will be evaluated in quarter 3 of this financial year.						
3.3	<b>Fire Contaminants SOP</b>						
3.3.1	The Fire Contaminants Standard Operating Procedure (SOP) has been drafted and circulated for the first internal consultation. Feedback will be reviewed at the end of August.						

3.4	<b>Zoning for Fire Contaminants</b>
3.4.1	To support the management of contaminants, prior to the publishing of the Fire Contaminants SOP, relevant premises are required to implement zoning. To assist with the completing this objective, a Premises Checklist and an Information Pack has been developed. The outcome is to have a Specific Risk Assessment for each Station, NTC etc. and zoning complete by the end of Q3.
3.5	<b>Communications</b>
3.5.1	SFRS and the Fire Brigade Union (FBU) will be issuing a Joint Comms on the £3.2m investment, progress of the Contaminants Implementation Plan and the intended timeline for the implementation of the Contaminants SOP.
3.6	<b>Implementation Plan</b>
3.6.1	The Implementation Plan converts SFRS strategic direction into specific management tasks and assist in managing implementation of contaminant control measures appropriately. It is a live document, as latest information/research may result in further actions.
3.7	<b>Health and Safety Executive</b>
3.7.1	The HSE has sought fire kits from UK Fire Rescue Services. SFRS have supported this ask. The kits will be tested as part of research to determine ' <i>how clean is clean?</i> '. The HSE intend to start testing in September/October 2024.
<b>4</b>	<b>Recommendation</b>
4.1	The request for the People Committee to note content of this report.
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	There is a risk that failure to implement robust arrangements to manage contaminants may result in personal injury claims being brought against the SFRS.
5.2	<b>Financial</b>
5.2.1	There is significant capital and resource budget allocation required to progress the contaminants implementation plan.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	Not applicable
5.4	<b>Workforce</b>
5.4.1	Potential impact of decontamination on operational resilience and resource availability which will considered in the planning and implementation process.
5.5	<b>Health &amp; Safety</b>
5.5.1	There is a risk that failure to implement robust arrangements to manage contaminants may result in non-compliance with the employers' duty of care under the Health and Safety at Work etc. Act 1974.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	The implementation of arrangements for health surveillance for staff exposed to contaminants will ensure the effective monitoring and early diagnosis of illness potentially linked to contaminants.
5.7	<b>Training</b>
5.7.1	Service wide training required to support the implementation of procedures and safe systems of work and develop positive culture and behaviours related to contaminants.

5.8 5.8.1	<b>Timing</b> There is significant political and public pressure for the SFRS to demonstrate progress of arrangements to manage the risks associated with contaminants therefore it is essential that appropriate resources are allocated to ensure this workstream is prioritised.	
5.9 5.9.1	<b>Performance</b> Monitoring of implementation and application of arrangements will be through existing and new assurance arrangements.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> Communications and engagement strategy required to ensure understanding and implementation of control measures.	
5.11 5.11.1	<b>Legal</b> There is a risk that failure to implement robust arrangements to manage contaminants may result in personal injury claims being brought against the SFRS and Health and Safety legislation.	
5.12 5.12.1	<b>Information Governance</b> No, but will be completed prior to publication of any documentation.	
5.13 5.13.1	<b>Equalities</b> No. Consideration will be given at the prior to publication of any documentation.	
5.14 5.14.1	<b>Service Delivery</b> Potential impact of decontamination on operational resilience and resource availability will be considered in the planning and implementation process.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training, Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient
7.3	<b>Rationale:</b>	A reasonable level of assurance is provided. The Contaminates Group/Contaminants Subgroup have made progress. There are several workstreams to be progressed. The impact of actions implemented to mitigate the risk of contaminants will be evaluated.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	N/A	
<b>Prepared by:</b>	Teresa Kelly, Deputy Head of Safety and Assurance	
<b>Sponsored by:</b>	Andrew Watt, Assistant Chief Officer, Director of Training, Safety and Assurance	
<b>Presented by:</b>	Andrew Watt, Assistant Chief Officer, Director of Training, Safety and Assurance	
<b>Links to Strategy and Corporate Values</b>		
<b>Strategic Plan 2022-2025:</b> Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public.		

What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff.

Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.

Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety and wellbeing of the public and our people.

Objective 6.2 Developing and deploying new and more agile ways of working to protect the safety, wellbeing, physical and mental health of our people.

**Safety Value:**

Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.

Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Information</i>



Report No: C/PC/44-24

Agenda Item: N/A FIO

<b>Report to:</b>	<b>PEOPLE COMMITTEE</b>						
<b>Meeting Date:</b>	<b>12 SEPTEMBER 2024</b>						
<b>Report Title:</b>	<b>UPDATE ON SA21 INVESTIGATION PROCESS</b>						
<b>Report Classification:</b>	<b>For Information Only</b>	<b>SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to inform the People Committee on the status and effectiveness of the Safety and Assurance 21-day investigation process (SA21). The report also outlines the anticipated future direction and timescales for full integration of this process within Scottish Fire and Rescue Service (SFRS) arrangements for safety event investigation.						
<b>2</b>	<b>Background</b>						
2.1	The TASS Event Reporting and Investigation module was introduced in October 2020, at which point the levels of investigation were reduced from four to two. While this simplified the investigation process an unexpected consequence of this was a delay in identifying the lessons to be learned from all significant event investigations. This also delayed embedding those lessons into policy, procedure and training.						
2.2	On 8 December 2022, a report was taken to SFRS National Safety and Assurance Board (NSAB) highlighting the challenges being experienced with the two-tiered approach. The report contained a set of proposals that highlighted the time and resource efficiencies that could be achieved through introducing some small changes to the OA21 process, while ensuring that the investigation process remained effective.						
2.3	NSAB approved the recommended actions within the report., However, following the Jenners incident in January 2023 the commitment of significant time and resource from the Safety and Assurance function has delayed its full implementation e.g. updating Management Arrangements etc.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	Investigation of health and safety events is essential to allow the SFRS to understand how and why an event occurred, to identify improvements in policy, procedures, safe systems of work, and to enhance the health, safety, and wellbeing of employees and others.						
3.2	However, it is recognised that the investigation of the more significant safety events are time and resource intensive. There are occasions where the immediate, underlying and root causes of a significant safety event can be identified through following the principles of the OA21 procedure. Where this is possible it allows for the expedited progression of investigation findings and recommendations through governance to promote and enable the early identification of organisational and individual learning.						



3.3	<p>NSAB approved the following actions to allow for this change in approach:</p> <ul style="list-style-type: none"> <li>• That the scope of the OA21 procedure is widened to cover all safety events i.e. to include those that occur out with the operational environment.</li> <li>• That Safety and Assurance set the terms of reference, identify the key lines of enquiry, and carry out the lead investigator role for all investigations of this type.</li> <li>• That engagement with representative bodies is included for this tier of investigation as per the principles set out in the Joint Investigation Protocol.</li> <li>• A review of the Event Reporting and Investigation Management Arrangement (MA) and Undertaking Significant Investigation Procedure MA is conducted to embed this approach into SFRS arrangements; and</li> <li>• A review of the OA21 GIN and report template to ensure that it meets the requirements of these recommendations and rename SA21.</li> </ul>
3.4	<p>The SA21 approach has now been trialled on two occasions. Firstly, following an incident where a crew from Polmadie entered the rail line to extinguish a fire prior to a stop being put on the rail line and subsequently following a firefighter entanglement involving a BA team from Kirkcaldy. On both occasions it is likely that under previous arrangements full Level 2 investigations would have been required. Experience has shown that it would not be unusual for a period of 9 to 12 months to elapse between the safety event occurring and the production of an agreed action plan to mitigate risk to firefighter safety. However, the investigations conducted under these revised arrangements had completed their governance route in 2 months and 3 months respectively.</p>
3.5	<p>Throughout both investigations there remained the option to escalate to a full Level 2 process should it be deemed that further investigation was required. However, the consensus of Safety and Assurance personnel conducting and overseeing the investigations was positive and it was recognised the investigations were concluded timeously and effectively.</p>
3.6	<p>The next step is to embed this process within SFRS arrangements for event reporting and investigation. The investigation into the tragic events at Jenners in 2023 has significantly impacted on the timescales for completion of this aspect of the workstream.</p>
3.7	<p>Furthermore, the gravity of the Jenners event coupled with the external scrutiny on the organisation will necessitate a full review of SFRS event investigation arrangements and all associated arrangements including the Joint Investigation Protocol with Representative Bodies. It is anticipated that this review, including the formal integration of the 21-day investigation process, will be complete within the 2024/25 business year.</p>
<b>4</b>	<b>Recommendation</b>
4.1	<p>The People Committee are asked to note the update on the SA21 process outlined in this report.</p>
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk</b>
5.1.1	<p>There is a risk of the organisation not learning from events in a timeous manner to prevent the risk of reoccurrence. There is also a risk of adverse publicity causing harm to SFRS reputation. There is also an increased risk of insurance and litigation.</p>
5.2	<b>Financial</b>
5.2.1	<p>There are no specific financial implications of this report at this time.</p>
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	<p>There are no specific environmental or sustainability issues to be considered.</p>

5.4 5.4.1	<b>Workforce</b> Risk to employee safety if investigations are not completed and actioned within a reasonable timescale.	
5.5 5.5.1	<b>Health &amp; Safety</b> Failure to monitor and improve the management of Health and Safety may result in injury or ill health of our workforce and those affected by their activities, HSE investigation, receipt of an enforcement notice, fines and adverse publicity damaging the reputation of SFRS.	
5.6 5.6.1	<b>Health &amp; Wellbeing</b> Risk to health and wellbeing of SFRS personnel where recommendations are not actioned. Trend analysis of events will assist in implementing strategies to improve the Health and Wellbeing of SFRS employees.	
5.7 5.7.1	<b>Training</b> Updates to training requirements will be identified, these will be managed through the appropriate governance routes.	
5.8 5.8.1	<b>Timing</b> Implementation of the changes to process will be influenced by external factors relating to the Jenners investigation. Anticipated to be within the current business year.	
5.9 5.9.1	<b>Performance</b> Health and Safety performance is monitored through KPI reports. The performance outcomes are communicated through local Safety and Assurance Improvement Groups, SASG and TSAB.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> Communication and engagement will be managed through the review of applicable Management Arrangements and consultation on any required changes.	
5.11 5.11.1	<b>Legal</b> There is a risk that the SFRS may be found to be in breach of its statutory duties under the Health and Safety at Work etc. Act 1974 and subordinate legislation if investigations are not effectively managed.	
5.12 5.12.1	<b>Information Governance</b> There are no implications that require to be noted for GDPR purposes.	
5.13 5.13.1	<b>Equalities</b> There are no implications that require to be noted for equality and diversity. An EHRIA has been completed for the Health and Safety Policy and supporting arrangements.	
5.14 5.14.1	<b>Service Delivery</b> There may be a risk to Service Delivery where investigations are not progressed in a timely manner.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training, Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient

7.3	<b>Rationale:</b>	Investigations have been undertaken in a reasonable time. Further improvements have been identified and planned into SA workstreams.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	None	
<b>Prepared by:</b>		David Bennett, Senior Health and Safety Advisor
<b>Sponsored by:</b>		Jim Holden, Head of Safety and Assurance
<b>Presented by:</b>		Jim Holden, Head of Safety and Assurance
<b>Links to Strategy and Corporate Values</b>		
<p><b>Strategic Plan 2022-2025:</b>  Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public.</p> <p>What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff.</p> <p>Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.</p> <p>Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety, and wellbeing of the public and our people.</p> <p>Objective 6.2 Developing and deploying new and more agile ways of working to protect the safety, wellbeing, physical and mental health of our people.</p> <p><b>Safety Value:</b>  Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.</p>		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>People Committee</i>		<i>12 September 2024</i>
		<b>Report Classification/ Comments</b>
		<i>For Information</i>



Report No: C/PC/45-24

Agenda Item: N/A FIO

Report to:		PEOPLE COMMITTEE						
Meeting Date:		12 SEPTEMBER 2024						
Report Title:		TRAINING CONTINUOUS IMPROVEMENT PROGRAMME – UPDATE REPORT						
Report Classification:		For Information Only					<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>	
<b>1</b>	<b>Purpose</b>							
1.1	The purpose of this paper is to provide an update on the progress to implement the recommendations contained within the Scottish Fire and Rescue Service (SFRS) Training Continuous Improvement Programme (CIP). This report will be a “living” document that will accurately reflect the improvements made and provide that history along with the current position of the CIP Action Plan and will be updated and presented within the agreed meeting schedules. This will ensure all relevant members are briefed to the most up-to-date progress position of the CIP.							
<b>2</b>	<b>Background</b>							
2.1	In 2019, the Training function published an extensive review of the Training and development of operational staff within the SFRS. This review generated 56 recommendations and formed the nucleus of the Training CIP. Since then, it has been reviewed and further recommendations added, to what will now be a ‘living’ document for the Training Function.							
2.2	The CIP Action Plan was fully updated and reviewed in February 2023 with all outstanding recommendations reassessed and ownership reviewed to ensure that the Training Function had ownership and oversight of each of the 2019 review recommendations and that a process was put in place to catalogue all newly identified improvement recommendations within the CIP Action Plan and to ensure that the relevant function leads took ownership of all actions detailed within these recommendations.							
<b>3</b>	<b>Main Report/Detail</b>							
3.1	The CIP Action Plan remains a “living” document that incorporates all agreed closed, existing, and newly identified improvement recommendations. Training Function leads will update the Action Plan as required and all recommendations and updates will be reviewed at the weekly Training Management Team (TMT) meeting (CIP is now a standing item on the TMT meeting agenda).							
3.2	As of 1 September, 2024, the status of all 74 recommendations is as follows: <ul style="list-style-type: none"> <li>• <b>54</b> recommendations are now complete.</li> <li>• <b>20</b> recommendations therefore remain and are currently in progress, to be delivered by the allocated Training Function leads and their teams.</li> </ul>							

3.3	<p>The Training Function will retain responsibility for the progression of all 20 outstanding recommendations, with an owner assigned to each and managed through the TSA Directorate governance route. A protocol is in place for the addition of new improvement recommendations and to allow periodic and status updates to the CIP Action Plan.</p>
3.4	<p>Additionally, and for further assurance. The remaining “In Progress” recommendations will be assigned to each owner on our ‘Tasks by Planner – MS Teams’ and progress will be tracked at weekly Training Management Teams meeting as a standing item and reported by exception at monthly FMT’s. The CIP Action Plan will sit on the Training Management Team SharePoint, where progress will be reviewed and updated accordingly.</p>
3.5	<p><b><u>CIP Action Plan - Recommendations added within the last 6 months – 70 – 74.</u></b></p> <p><b>April/ May 2024</b></p> <ul style="list-style-type: none"> <li>• <b>70</b> - Planned review of the Procurement Framework supporting the Training Function - RTC / HRO Training - Scrap Vehicle Suppliers (Transport).</li> <li>• <b>71</b> - Full review of Methods of Instruction training delivery / provision. Acquisition and maintenance of skills to be considered during review.</li> </ul> <p><b>July 2024</b></p> <ul style="list-style-type: none"> <li>• <b>72</b> - XVR Virtual Reality Incident Command Training and Assessment tool - To investigate the best use of the XVR immersive reality software for use in a blended training delivery/assessment approach</li> <li>• <b>73</b> - Introduce WorkforcePro for non-operational personnel - Implement the WorkforcePro software system to support the planning and recording of training for non-operational personnel</li> <li>• <b>74</b> - Creation of On Call Support Crew Commanders - Creation of positions to provide additional resilience and capacity for core course delivery, station support and driver training.</li> </ul>
3.6	<p><b><u>CIP Action Plan - Recommendations completed within the last 6 months.</u></b></p> <ul style="list-style-type: none"> <li>• <b>27</b> - It is recommended to move away from the current 3-year cycle and to combine the three formerly separate refresher training subjects of BA Search &amp; Rescue, Compartment Fire Behaviour Training (CFBT) and Tactical Ventilation (TV) into an a single live-fire refresher event which will be themed to capture operational assurance and or national operational learning as well as providing quality assurance of knowledge and practical application. The use of UHPL will also be included, as appropriate, for a holistic, systematic approach.</li> <li>• <b>44</b> - It is recommended to create a dedicated NIP Height team which would consist of 3 x WM’s and 3 x CM’s. (1 x WM &amp; 1 CM per SDA). Introducing this model will require to form part of a wider review and analysis of instructor resource requirements and disposition.</li> <li>• <b>48</b> - The implementation of a progressive pathway and a move away from individual accreditation onto a “top tier” only accreditation model has the potential to realise an estimated efficiency saving of £116k annually across three areas. The first being a reduction of £46k in accommodation (Connel), secondly £10k in overtime and thirdly a reduction of £60k in Rescue 3 skills packs/paperwork costs</li> <li>• <b>49</b> - It is proposed that USAR awareness sessions will continue to be delivered by watch / unit supervisory managers. All other USAR courses will be delivered by the USAR NIP SMEs. To enable the delivery of these USAR courses, a peripatetic delivery model is recommended through the introduction of a dedicated USAR delivery team who would be deployed Nationally across the three Service Delivery Areas (SDA’s). The team would comprise of 3 x WM’s and 1 x CM. Introducing this model will require to form part of a wider review and analysis of instructor resource requirements and disposition.</li> </ul>

<p>3.7</p>	<ul style="list-style-type: none"> <li>• <b>58</b> - Training needs to develop a cohesive plan in conjunction with Service Delivery which determines the critical skills required by firefighters based on risk and the training required to support these. Following this, if a capacity gap remains, then a business case should be developed to establish and prioritise the necessary investment to achieve the required level of training.</li> <li>• <b>70</b> - Planned review of the Procurement Framework supporting the Training Function - RTC / HRO Training - Scrap Vehicle Suppliers (Transport).</li> <li>• <b>71</b> - Full review of Methods of Instruction training delivery / provision. Acquisition and maintenance of skills to be considered during review.</li> </ul> <p><b><u>Recommendations under review (New Section - CIP Action Plan – June 2024)</u></b></p> <ul style="list-style-type: none"> <li>• There are currently 4 proposed CIP Recommendations requiring further review (See Appendix CIP link - Secondary tab at base of CIP Action Plan – “Recs under review”). All Recommendation owners have provided details and context for these proposed additions. All proposed recommendations will be reviewed at the monthly FMT meeting, and all accepted recommendations will be uploaded as “In Progress” to the live CIP Action Plan.</li> </ul>
<p><b>4</b></p>	<p><b>Recommendation</b></p>
<p>4.1</p>	<p>For the People Committee to note the content of this report and provide any feedback relating to its content.</p>
<p><b>5</b></p>	<p><b>Key Strategic Implications</b></p>
<p>5.1 5.1.1</p>	<p><b>Risk</b> The risk to the Training Function and SFRS is through non-completion of improvement recommendations, current and future, within this CIP Action Plan. However, the use of this update paper as a reporting mechanism through the governance process will ensure timely and consistent review and auditing of this Continuous Improvement Programme.</p>
<p>5.2 5.2.1</p>	<p><b>Financial</b> As a result of the budget pressures and to ensure best value finance/budgets will continue to be taken into account and any further re-structuring will continue to consider, finance as a key consideration.</p>
<p>5.3 5.3.1</p>	<p><b>Environmental &amp; Sustainability</b> Not applicable</p>
<p>5.4 5.4.1</p>	<p><b>Workforce</b> This ongoing improvement programme is in support of the development of the Training teams and the wider development of SFRS personnel.</p>
<p>5.5 5.5.1</p>	<p><b>Health &amp; Safety</b> Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.</p>
<p>5.6 5.6.1</p>	<p><b>Health &amp; Wellbeing</b> Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.</p>
<p>5.7 5.7.1</p>	<p><b>Training</b> A “live” CIP Action Plan ensures and promotes regular review of all activities within the Training Function and supports improvement recommendations from all areas within the function as well as from internal and external partners.</p>

5.8 5.8.1	<b>Timing</b> All recommendations within the Training CIP Action Plan have planned completion dates and allocated Training Function Leads (TFL). All CIP Action Plan recommendations are regularly updated, and all completion dates reviewed as required.	
5.9 5.9.1	<b>Performance</b> All Improvement Recommendations submitted to the Training CIP Action Plan look to provide best value and best practise within the Training Function to improve internal performance and ensure the development and improvement of the service that we provide for our primary customers within Service Delivery.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> The CIP Action Plan / CIP Update Report are now standing items within both the Training Management Team (TMT) and Training Function Management Team (FMT) meeting agendas.	
5.11 5.11.1	<b>Legal</b> Not applicable.	
5.12 5.12.1	<b>Information Governance</b> DPIA completed <del>Yes</del> /No. If not applicable state reasons. The process uses existing systems and processes which are already in place.	
5.13 5.13.1	<b>Equalities</b> EHRIA completed <del>Yes</del> /No. If not applicable state reasons. The process uses existing systems and processes which are already in place.	
5.14 5.14.1	<b>Service Delivery</b> All improvement recommendations within the Training Function CIP Action Plan through progression and completion will have a positive impact on frontline teams through improved training course delivery.	
<b>6</b>	<b>Core Brief</b>	
6.1	Note applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Director of Training Safety and Assurance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<del>Substantial</del> / <b>Reasonable</b> / <del>Limited</del> / <del>Insufficient</del>
7.3	<b>Rationale:</b>	The CIP action plan demonstrates progress being made towards the recommendations, with a robust governance process now in place thereby satisfying the level of assurance marked above.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A – CIP Action Plan	
<b>Prepared by:</b>		Bryan Nelson, Group Commander Training Function
<b>Sponsored by:</b>		Alasdair Cameron, Area Commander Training Function
<b>Presented by:</b>		Craig McGoldrick, Deputy Assistant Chief Officer Head of Training
<b>Links to Strategy and Corporate Values</b>		
<b>SFRS Training Strategy 2020-25</b>		
The Overall Strategic Objective of the Training Function is:		



“To develop and deliver high quality training and development to support organisational and individual performance throughout the Scottish Fire and Rescue Service with a clear focus on safety and the pursuit of excellence.”

<b>Governance Route for Report</b>	<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Training FMT</i>	<i>4 September 2024</i>	<i>For Scrutiny</i>
<i>People Committee</i>	<i>12 September 2024</i>	<i>For Information</i>
<i>Training Safety and Assurance Board</i>	<i>TBA</i>	<i>For Information</i>
<i>TSA Directorate Management Team</i>	<i>TBA</i>	<i>For Scrutiny</i>



Continuous Improvement Programme - Action Plan Progress

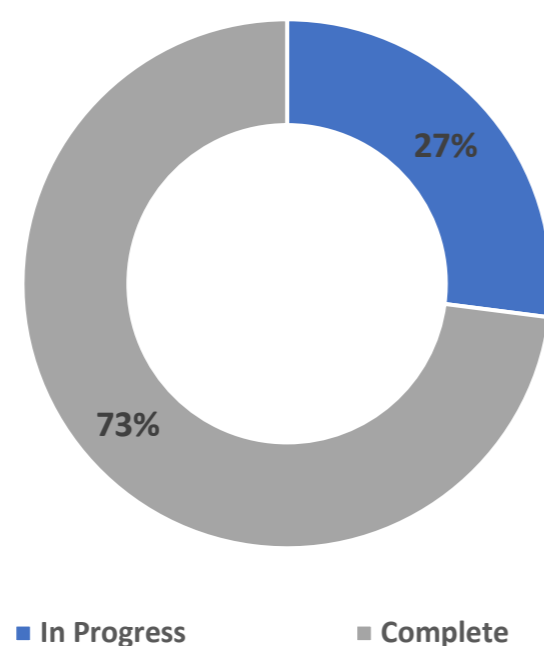
Updated	Next Update
Aug-24	September-24

Status	Count
In Progress	20
Complete	54

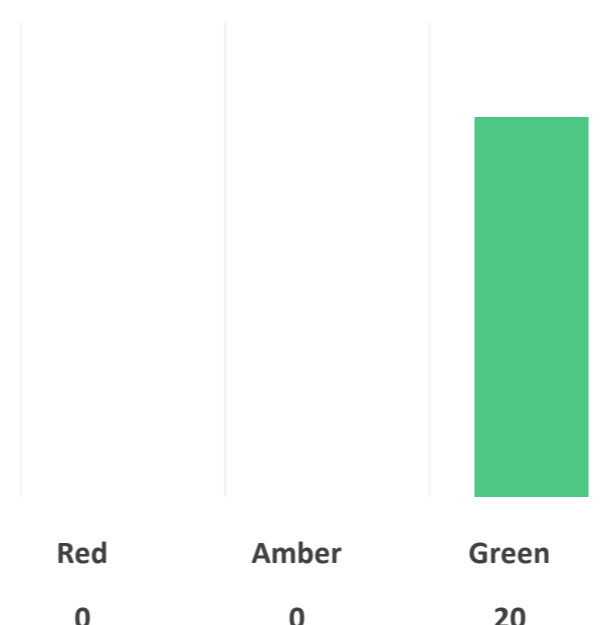
Recommendations deemed not viable at this time / deferred	0
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94%

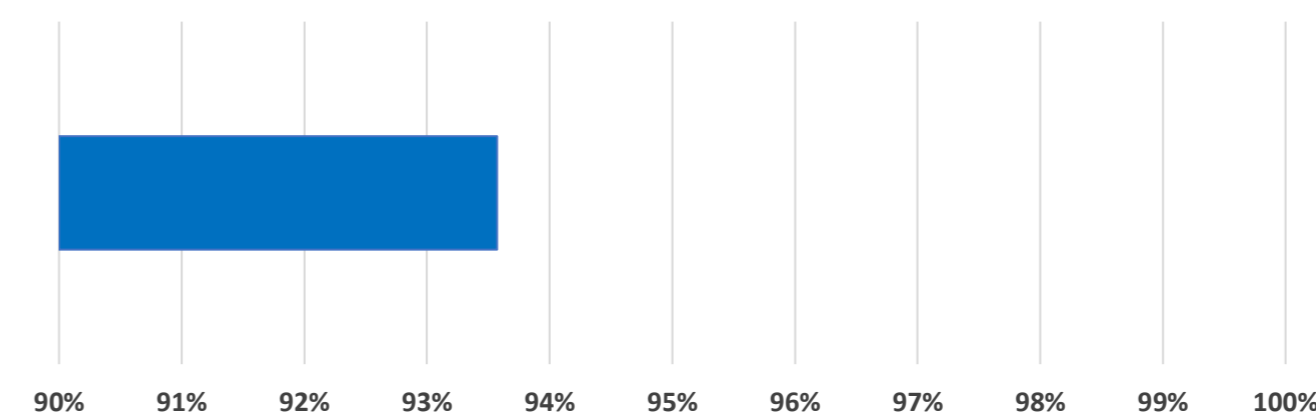
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In Progress RAG Rating



Overall Progress August 2021 36%  
Overall Progress August 2024 94%



Operational Training Review Recommendation	Action Ref	Description	Status as of April 2022	Action Owner	Governance	Current Status	Progress Update Commentary	% Complete	Due Date	Completion Date	Evidence / Benefits Realised
<b>Strategic Overview</b>											
<b>Recommendation 1</b> A clearer Business Partnering Model be introduced to reflect clearer delineation of key roles and responsibilities. This model would reflect a de-centralised training delivery structure.	1	This recommendation would seek that, in the main, the TED Function will deliver foundation, acquisition and instructor training, centred from each of SFRS's Training Centres: whilst On-Call staff training, maintenance and refresher training is facilitated, as close to the point of need as possible and is undertaken by Service Delivery's training teams. Utilising this option would require a re-distribution of instructor resources which is reflective of the volume, frequency and location of the relevant training programmes.	Training Function Lead	GC Nelson	Training FMT	Complete	<p>Aug 21: The Training Instructor Terms and Conditions have now been agreed and have been implemented. We are now in a transition year where the 7 day scheduling of Training has begun and Training Management teams are meeting with their counterparts in LSO areas to progress the future delivery of training in their areas.</p> <p>April 2022: A pilot project will now be run in the NSDA whereby all LSO Training Instructors will move into the National Instructor Pool. This pilot is aimed at improving the efficiency of the Training Delivery model in the NSDA. The staff arrangements will remain in place for the duration of the pilot. On completion the Training function will undertake a full review of the pilot prior to making any required permanent changes. Future similar piloted will be run in the East and West Service Delivery Areas.</p> <p>July 22 - NSDA - Business Partnership Model in NSDA being examined following engagement with AC Wilson for NSDA TSA amalgamation plan.</p> <p>Sept 22 - Engagement held with all Instructors across the NSDA. Engagement held with LSO regarding local delivery and On-Call Station support visits. Draft NSDA Training structure being scoped out. NSDA Instructor merger Action plan produced with specific timelines and Actions.</p> <p>Nov 22 - Engagement held with NSDA Training GC's to discuss propsoed structure options on the back of the pilot merger. Final structured role out of Instructor Merger in each LSO Area across the NSDA in Q4. A meeting with the Fire brigade Union (FBU) representatives is planned for December to discuss the merger and concerns that have been raised by a minority of Instruction staff.</p> <p>Jan23 - All NSDA training instructors both NIP and LSO have moved over and are now under the direct management of the TSA / Training Function. Liaison with Workforce Planning is</p>	100%	Apr-24	Apr-24	<a href="https://firescotland.sharepoint.com/sites/TRG-Directorate/TNA/Forms/AllItems.aspx">https://firescotland.sharepoint.com/sites/TRG-Directorate/TNA/Forms/AllItems.aspx</a>
<b>Recommendation 2</b> It is recommended that consideration be given to the introduction of a career development pathway for operational staff that includes an expectation that individuals will not normally progress from supervisory management roles into middle management (flexi-duty manager) roles without having served a defined period of time within a non-operational role within either a Directorate or Service Delivery Area (e.g. Training, Prevention & Protection, Health & Safety etc.)	2	Recent campaigns have highlighted that instructor posts can be challenging to fill: with many candidates preferring to undertake supervisory management roles within the operational environment. Barriers to attraction of staff into the Function include: the potential for loss of income, owing to the amount of pre-arranged overtime that is available in a station-based environment; a perception of a less-favourable duty pattern, when compared to the five-watch duty system; a perception that there would be difficulty moving back out of the function again, due to a requirement to retain specialist instructors.	Recommendation deemed not viable at this time	AC Cameron	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 2 aligns to work currently being undertaken by HR in their review of existing and creation of new policies. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>Apr 22: This Recommendation will now be closed as this does not come under the remit of the Training Function.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>

<p><b>Recommendation 3</b> Consideration should be given to structuring the TED instructional cadre to in a way that may allow for it to be resourced by way of fixed-term secondments. This should include the ability to recruit experienced Firefighters into instructor roles.</p>	3	Recent campaigns have highlighted that instructor posts can be challenging to fill: with many candidates preferring to undertake supervisory management roles within the operational environment. Barriers to attraction of staff into the Function include: the potential for loss of income, owing to the amount of pre-arranged overtime that is available in a station-based environment; a perception of a less-favourable duty pattern, when compared to the five-watch duty system; a perception that there would be difficulty moving back out of the function again, due to a requirement to retain specialist instructors.	Training Function Lead	GC Galloway	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 3 aligns to work currently being undertaken by HR in their review of existing and creation of new policies. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>Apr 22: Due to the challenges being brought by the low SFRS staffing levels, all methods of supporting the delivery of Training by utilising Service Delivery personnel are now being developed. An options paper will be progressed through governance looking for the SFRS to support innovative ways where skilled personnel within service delivery can support the delivery of training.</p> <p>Mar 23: Significant progress has been made in identifying hard to fill posts across the TSA directorate. Innovative solutions have been discussed and a report has been prepared to provide options to fill these positions through a number of various proposals.</p> <p>Sept 23 - Hard to fill post identification process has been carried out and complete. The creation of 5 x non uniformed posts across the Function has been delivered and posts advertised. This has seen 4 of the 5 posts now filled with personnel starting early September 23, with the remaining vacant post to be filled imminently. 06/09/2023 - Recommendation 3 signed off at FMT today. Status updated from "In Progress" to "Complete". BN 07/10/2023</p>	100%	Mar-22		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 4</b> It is recommended, that all National Training Standards are streamlined and set out in an electronic platform</p>	4	To date, twelve National Training Standards have been promulgated: Breathing Apparatus, Command and Control, Driver & Emergency Response Training, Extrication, Firefighting with UHPL Cutting and Suppression Equipment, Hazardous Materials Response, Large Animal Rescue, Marine Firefighting, Rope Rescue & Safe Working at Height, Trauma Care, Urban Search & Rescue and Water Rescue & Flood Response. It is recognised that these documents are not currently presented in not the most accessible format.	Completed within CIP	GC Todd	Training FMT	Complete	<p>Aug 21: The SFRS National Training Standards are now hosted and accessible via the SFRS Learning Content Management System (LCMS). The Training Learning and Development Team maintain the LCMS system and can therefor update the National Standards where required. The National Training Standards visible and adjacent to where Operational crews access their online training packages.</p>	100%	Nov-21	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 5</b> It would be proposed that, where practicable, a suite of supporting guidance notes will be produced in support of the Training Standards.</p>	5	In support of the National Training Standards, where pertinent, the production of instructor guidance notes and training manuals will support the existing learning materials. This will help to ensure consistency of instructional input by capturing the knowledge and experience of subject matter experts which, has traditionally been passed down verbally and will therefore, greatly enhance the development of newly appointed instructors.	Training Function Lead	GC Todd	Training FMT	Complete	<p>Aug21: Progress has been made with the production of supporting guidance notes to support the NTS in regard to the delivery of Specialist Rescue training, work currently on going with the creation of guidance notes to support the delivery of BA training.</p> <p>April 2022: Training Function are currently developing new performance and quality assurance standards for all areas of Training delivered across the SFRS. This recommendation will be closed and delivered as business as usual through the implementation of the performance and Quality Assurance arrangements.</p> <p>October 2022: GC Todd to investigate to get a full understanding of previous actions and agreements of how this action is to progress.</p> <p>March 2023: All Training Courses are delivered aligned to the NTS. Course admin includes Timetables and lesson plans are available. This allows for the continuity of course delivery and support for Instructors. Practitioners groups are established to discuss and share best practice as well as issues faced. Information relating to course delivery but not contained within Policy or guidance statements are can be passed during the induction process and communicated using an Instructor Briefing Note. Briefing Notes can then be accessed by all Instructors (new and current) and the information contained in these will be reviewed annually to assess if it required will be inserted into the NTS before being removed.</p> <p>September 2023: Recommend that this action is complete and presented to FMT on 06/09/23.</p> <p>06/10/2023 - Recommendation 5 signed off at FMT today. Status updated from "In Progress" to "Complete". BN 07/10/2023</p>	100%	Mar-23	Mar-23	<a href="#">Evidence and benefits realised for Recommendation 5</a>
<p><b>Recommendation 6</b> Where practicable, operational response stations should be categorised in line with the six Scottish Government urban rural classification breakdowns with response and allied training requirements</p>	6	Training will require to reflect the roles and skills which our staff need to perform and the equipment that they are liable to use. This may vary across the Service depending on location and local demographics, therefore, a "one size fits all" approach to training cannot be efficient and the training	Completed within CIP	GC Todd	Training FMT	Complete	<p>Aug 21: The work being carried out by the SFRS in regard to the publication of Community Risk Index Model 2 (CRIM 2) is expected to be published in Quarter 4 of this financial year. When this information is available the Training function alongside LSO teams can assess and progress the categorising and risk profiling of operational response stations.</p>	100%	Mar-23	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 7</b> It is recommended work is undertaken to support SFRS Digital Strategy to ensure that E-Systems are interlinked and that compatible databases are utilised to avoid duplication of data inputs e.g. iTrent, Gartan etc.</p>	7	The use of various software systems that are not interlinked e.g. iTrent, Gartan, PDR-Pro, TED Scheduler and the Learning Content Management System creates a challenge as it requires users to input data on multiple occasions. PTFAS project team are supporting the Training Function to complete this recommendation.	Training Function Lead	Andy Scott	Training FMT	In Progress	<p>Aug 21: The SFRS have convened a User Intelligence Group to procure an electronic system to manage information relating to People, Finance, Training and Assets. The Training function are part of this group in order to ensure that the new systems and operability can deliver the requirements of the Training function.</p> <p>Apr 22: This recommendation will be delivered through PTFAS project and will therefore be closed on this Action Plan.</p> <p>March 23: The Training Function continue to support the work of the PPFT project. Functional specifications have been recorded for Training systems. These will be reviewed over the next month, before the Expression of Interest is issued to the market.</p> <p>May 23: Further engagement is planned between the PPFT Project team and the Training Function to reaffirm functional requirements. The Expression of Interest has been issued to vendors. Returns will be reviewed in due course.</p> <p>August 23: Functional requirements have now been signed off. Expression of Interest returned 3 responses. Project now gearing up to enter tendering phase.</p> <p>November 23: PPFT Project team continue to progress to tendering phase. Statement of Requirements (SOR) fully completed and ready for use in this phase. Training function fully</p>	90%	Mar-25		Highlight Reports from project boards can be provided on request. This project is high priority on the ICT workplan.



<p><b>Recommendation 8</b> It is recommended that all interdependencies are identified, prioritised and managed through the Programme Office Board to ensure a critical path timeline is agreed and understood by all stakeholders.</p>	8	In current times, particularly as the Service Transformation agenda begins to quicken pace, challenges can arise where the dynamism and pace of change leads to a desire to run pilot trials. The same can be said for the introduction of equipment or practices which require training packages to be developed and delivered solely for that purpose and, by definition, often prior to the promulgation of Standard Operating Procedures and Safe Systems of Work. This can result in duplicating training and can cause confusion over training practices taught for a pilot / trial and those which have been fully developed for formal adoption.	Completed within CIP	AC Hall	Training FMT	Complete	<p>Aug 21: The Training function have put in place resources to manage the implementation of the Training Review recommendations. AC Hall has taken up post as the Continuous Improvement Manager and is assisted by a Station Commander. AC Hall will ensure that where required, the recommendations from the Training Review as well as any new developing work load for Training is identified, prioritised, resourced and managed in conjunction with the Programme Office Board.</p> <p>Apr 22: After a review of this Action Plan, none of the remaining active recommendations will be delivered via the Portfolio Office and this action will close. In future the Training function will utilise the Dependency tracker currently being developed by the Portfolio Office as part of project management.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 9</b> It would be suggested that in moving towards realising any of the efficiencies identified within this report: through an implementation program; that this be considered in tandem with a suitable resourcing plan that takes recognition of the separate requirements of "business as usual" training and the implementation of the recommendations being instigated. This would include a requirement to consider any specialist resources required to amend and develop our multimedia, blended learning materials.</p>	9	The weight and pace of change within a maturing SFRS has borne an exponentially increasing need for operational training: the volume of which has created an instructional capacity challenge. The resultant effect has seen a sustained focus on training delivery therefore, limiting opportunities for any in-depth review or, the ability to create capacity for course development, innovation and evolution. As the Service continues to progress through the Transformation journey it is anticipated the training requirement will not diminish and may, indeed, increase.	Completed within CIP	N/A	Training FMT	Complete	<p>Aug 21: The Training function have put in place resources to manage the implementation of the Training Review recommendations. AC Hall has taken up post as the Continuous Improvement Manager and is assisted by a Station Commander. AC Hall will ensure that where required, the recommendations from the Training Review as well as any new developing work load for Training is identified, prioritised, resourced and managed in conjunction with the Programme Office Board.</p> <p>Apr 22: The resources to deliver the Training Continuous Improvement Programme are no longer be required due to the majority of recommendations being delivered, moved to business as usual, moved to the Staffing Solutions Team or being closed as not viable. This recommendation will now be closed.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 10</b> That a centre of excellence for trainee firefighters is established at the National Training Centre.</p>	10	This would see the formation of a Centre of Excellence with a cadre of dedicated instructors who would be responsible for Whole-time practical selection tests, Trainee Firefighter Foundation Programmes (incl. RDS see below) and Green Phase assessments.	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>April 22 - The Centre of Excellence has been established delivering Wholetime practical selection tests as well as the Trainee Firefighter Foundation Programme by a cadre of dedicated instructors. The development of the Training Function Performance and Quality Assurance standards will see all Training sites across SFRS striving to be Centres of Excellence.</p>	100%	Nov-21	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 11</b> There remains a consideration for a potential longer term resource efficiency to be realised by way of a capital investment in accommodation. It is therefore recommended that, in line with any recruitment strategy, consideration be given to developing a revised business case for the provision of on-site accommodation at the National Training Centre</p>	11	Over the two year period, 2017-2019, the requirement to provide overnight accommodation has utilised £1,123,110 of resource funding solely for the students upon the foundation programme (averaging £2452 per student). The provision of on-site accommodation was the subject of a briefing paper by DCO McGown to the Strategic Intent Executive Board on 27th January 2015 which forecasted a potential capital outlay of £5 million at that time.	Recommendation deemed not viable at this time	DACO King	Training FMT	Complete	<p>Aug 21: DACO Paul King presented a paper to the Senior Management Board (SMB) outlining the business case for the SFRS to have on-site accommodation for students at the SFRS National Training Centre. The decision by the board was not to progress this project.</p>	100%	Nov-21	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Trainee Firefighter Programme</b>											
<p><b>Recommendation 12</b> It would be proposed that the syllabus and timetable for the Wholetime Trainee Firefighter Foundation Programme is remapped in order to align with the Institution of Fire Engineers Level 2 certificate.</p>	12	In conjunction with SFRS's Leadership Development Pathway, this would offer an opportunity for providing a technical development pathway covering all roles from Firefighter to Station Manager.	Training Function Lead	GC Kennedy	Training FMT	In Progress	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 12 impacts on the current Scottish Vocational Qualification for Trainees and also the Modern Apprenticeship. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>April 2022: This recommendation is related to Firefighter Foundation courses and work currently being undertaken by the Staffing Solutions Team (SST). This recommendation will now be transferred to the SST.</p> <p>Dec 22: Not progressed by SST due to prioritisation of work relating directly to staffing challenges. This recommendation has been transferred back into Training Function.</p> <p><b>March - 23 -SK - WTTFFP</b> is currently written to align with the SVQ and Modern Apprenticeship (MA). This attracts funding in accordance with the MA .</p> <p>If there is a strategic direction to map to the WTTFFP to IFE qualifications, it will need to be clarified if this will be done in tandem with the SVQ/MA or if it will supersede it. I would suggest that if IFE mapping is the desired future direction then this should take place as part of a wider review of all development pathways (rather than Training altering the WTTFFP in isolation).</p> <p>Any substantial review of the WTTFFP will require a significant time commitment and would best take place during a hiatus when the WTTFFP is not being delivered.</p> <p>01/09/23 - In doing some research into Fire Engineers Level 2 Certificate, it is recommended that candidates should spend around 180hrs preparing for the examination. This would equate to 60 hrs for each section of the syllabus although candidates may need to allocate a higher proportion of their preparation time to one of more of the sections depending upon their pre-existing Knowledge and Understanding. Total Qualification time is <b>183hrs</b>. There is also a 3hr assessment for three one hour examinations. Most candidates prepare for IFE</p>	50%	Oct-24		
<p><b>Recommendation 13</b> It is recommended that a basic literacy and numeracy test is undertaken as part of the practical selection testing process.</p>	13	On a regular basis significant portions of instructional and managerial time are directed towards identifying and supporting various degrees of neuro-diversity which have not been identified through the on-line selection tests. Particular challenges can be countered during the BA phase of training whilst undertaking critical but basic arithmetical calculations. On occasion there has been anecdotal evidence that the applicant has had the on-line tests completed for them by a third party.	Completed within CIP	GC Kennedy	Training FMT	Complete	<p>Aug 21: Basic literacy and numeracy have now been incorporated in the practical selection and testing process for operational firefighters.</p>	100%	Nov-21	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>

<p><b>Recommendation 14</b> An option to introduce pre-attendance mandatory modules could reduce the overall course duration or create space for additional skills acquisition within the programme. (SST)</p>	14	These external training packages could also potentially be made publically accessible and used by community members for their personal development e.g. transferrable skills such as first aid, using a defibrillator, CPR training, manual handling etc. The time currently spent on these subjects could then be withdrawn from the programme syllabus and reduce the duration.	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 14 will need to be delivered in conjunction with HR. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>Jan 22: Work is ongoing to introduce a Pilot for the Foundation course in 2022 for trainees to attend a pre-foundation programme induction day 4 week prior to commencing their foundation course. This will include e-learning packages and PPE/kit fitting which will create capacity on the foundation course.</p> <p>April 2022: This recommendation is related to Firefighter Foundation courses and work currently being undertaken by the Staffing Solutions Team (SST). This recommendation will now be transferred to the SST.</p> <p>Dec 22: This action has been completed as BAU within the Training Function. Candidates complete material on SFRS Code of Conduct, Discipline, Managing Yourself &amp; Team Building prior to attending Foundation course.</p>	100%	Mar-23	Dec-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 15</b> It is recommended that new employees attend a pre-foundation programme induction course.</p>	15	During this induction, candidates would receive their kit issue, and an initial task management skills introductory session. This would provide them with a greater understanding of the physical requirements of the course and allow them to be issued with a fitness development plan which hopefully will reduce the instances of students failing to reach the minimal fitness requirements and decrease the potential of minor musculoskeletal injuries. If these prior two elements were to be implemented, course duration could be reduced and the students would be able to participate in practical task management training earlier within the programme.	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 14 will need to be delivered in conjunction with HR. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>Jan 22: Work is ongoing to introduce a Pilot for the Foundation course in 2022 for trainees to attend a pre-foundation programme induction day 4 week prior to commencing their foundation course. This will include e-learning packages and PPE/kit fitting which will create capacity on the foundation course.</p> <p>April 2022: This recommendation is related to Firefighter Foundation courses and work currently being undertaken by the Staffing Solutions Team (SST). This recommendation will now be transferred to the SST.</p> <p>Dec 22: Not progressed by SST due to prioritisation of work relating directly to staffing challenges. This recommendation has been transferred back into Training Function.</p> <p>Feb 23: A 2 day foundation course is now in place and has been running as part of the foundation course since May 2022. This is not 4 weeks before but is incorporated into the first 2 days of the foundation course. Trainees will then return to attend course on a 4 on 4 off basis. The foundation course 4 weeks before is not practice as they will not be SFRS employees and will have no access to IT etc and will still be in employment with their previous employer. Holding this in the West, North and East will be problematic with Instructor availability and future trainees being released from their current employer. This Recommendation is submitted for review and sign off at FMT 01/03/2023). (GC Kennedy - 17/02/2023)</p> <p>March 23: AC Getty is carrying out a review of Trainee resignations / withdrawals from within the Trainee Program (FMT 01/03/2023). This will be fed back into TMT / FMT for review and progression within this recommendation (BN 01/03/2023)</p> <p>30/05/23: Awaiting update from AC Getty.</p> <p>01/09/23: As mentioned in February 2023 a 2 day Induction programmed at the start of</p>	100%	Apr-23	Apr-23	<p><a href="#">Recommendation 15</a></p> <p><a href="#">Recommendation 16</a></p>
<p><b>Recommendation 16</b> It would therefore be proposed that migrating staff should still attend the entire duration of the foundation programme, however, post-course development and pace of progression through the trainee firefighter development pathway toward the attainment of competency within role should be considered on an individual basis. (SST)</p>	16	That a review is undertaken of any prospective migrant's personal development record and that where parity of assessment is evidenced, that this is recognised as transferable approved prior learning. This would then be assessed along with evidence of the individual's skills, knowledge and experience to create a bespoke personal development plan. The migrant would then attend such foundation modules as may be required in order to address the identified areas of development. Post-migration, the pathway for progression onto competent status will be managed in a similar fashion.	Transferred to SST	AC Robison (SST)	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 15 will need to be delivered in conjunction with HR. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>Jan 22: A number of meetings have taken place with HROD to discuss accredited prior learning and how this impacts the pace of progression through the trainee firefighter development programme.</p> <p>April 2022: This recommendation is related to Firefighter Foundation courses and work currently being undertaken by the Staffing Solutions Team (SST). This recommendation will now be transferred to the SST.</p> <p>Dec 22: Migration pilot including application-stage confirmation of skill acquisition delivered, with full policy to be developed by NOCLF.</p>	100%	Mar-23	Dec-22	
<p><b>Recommendation 17</b> The process for ascertaining the training</p>	17	Operational Staff applying for re-employment into the service should be considered for the same process as recommendation	Completed within CIP	AC Hall	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 17 will need to be delivered in conjunction with HR.</p>	100%	Mar-23	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>



<p><b>Recommendation 18</b> It would be proposed that RDS acquisition training be modularised and aligned to station risk-profiling. This profiling could align with local risk profiling, appliance type etc. and allow an opportunity to move away from a one size fits all training programme to one which is aligned to local needs e.g. initial acquisition modules for a remote rural, rural or semi urban station could run over 7.5, 8.5 or 10 days. Thereafter employees would embark upon BA training and an agreed learning pathway comprising 7, 9 or 11 days of development within a mutually agreed timeframe.</p>	18	It would be proposed that RDS acquisition training be modularised and aligned to station risk-profiling. This profiling could align with local risk profiling, appliance type etc. and allow an opportunity to move away from a one size fits all training programme to one which is aligned to local needs e.g. initial acquisition modules for a remote rural, rural or semi urban station could run over 7.5, 8.5 or 10 days. Thereafter employees would embark upon BA training and an agreed learning pathway comprising 7, 9 or 11 days of development within a mutually agreed timeframe.	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>Aug 21: The work being carried out by the SFRS in regard to the publication of Community Risk Index Model 2 (CRIM 2) is expected to be published in Quarter 4 of this financial year. When this information is available the Training function alongside LSO teams can assess and progress the categorising and risk profiling of operational response stations.</p> <p>April 2022: The delivery models and content of On Call Firefighter foundation courses are currently being reviewed by the Staffing Solutions Team in conjunction with the On Call leadership forum. The outcome of their review will see Trainee Firefighter Foundation courses being re modelled. This recommendation will be transferred to the SST.</p> <p>Dec 22: Not progressed by SST due to prioritisation of work relating directly to staffing challenges. This recommendation has been transferred back into Training Function.</p> <p>Feb 23: A modular based TTM programme and Modular based BA Initial course has now been designed by Training and has been delivered to GC Hammond and the On call Prep Team. This will allow flexibility in delivery model for both courses. 28/01/2024 - SK -Modularisation Report for on -call TTM and BA Initial being provided to DACO Wright.</p>	100%	Mar-23		<p><b>Feb 23: A modular based TTM programme and Modular based BA Initial course has now been designed by Training and has been delivered to GC Hammond and the On call Prep Team. This will allow flexibility in delivery model for both courses</b></p> <p><b>June 2023- Update from GC Rodney Anderson (On Call Support Team)</b> <b>With Regard to the modulation of the TTM and Initial BA Courses for the On Call, the modularisation programmes that you and your team provided have been used to support two of the recommendations which have been included in the final On Call Improvement Programme Recommendation Report, these recommendations are for further scoping and exploration as a modularised approach to these two courses. Within the further scoping the programmes that you provided have been suggested as the basis for any local, modularised delivery of these courses. As the majority of the workstreams under the programme were to point of</b></p>
<p><b>Recommendation 19</b> It is recommended that the option above be linked with Recommendation 16 and that a working group be established to explore the practical implications of implementing a move away from pre-defined timescales toward one based upon student performance.</p>	19	It could be deliberated whether submission for assessment by line managers at an appropriate juncture rather than tied to a pre-defined timescale is more appropriate to a supportive learning experience. Such an approach could allow an accelerated pathway to competence where appropriate, assisting service delivery.	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 18 will need to be delivered in conjunction with HR. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.</p> <p>April 2022: The development pathway for Trainee Firefighters will be considered by the SST. This recommendation will be transferred to the SST.</p> <p>Dec 22: Not progressed by SST due to prioritisation of work relating directly to staffing challenges. This recommendation has been transferred back into Training Function.</p> <p>Feb 23: On Call migration has been trialed in December 2022. This is now going through a review debrief. This will determine future Migration courses and the process of accelerating development pathways. The outcome of the On-Call Migration is with AC Robison.</p>	100%	Mar-23	Mar-23	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 20</b> It would be recommended that a quantity of newer, fully clad, training vehicles and equipment: commensurate with any decision on recruitment strategy are introduced into the training fleet and located accordingly.</p>	20	The age of the training fleet and some equipment has presented some challenges with reliability, maintenance and the ability to conduct off-site training. It would be highly desirable for students to train with new, modern appliances reflective of the emerging technologies being adopted by SFRS.	Completed within CIP	GC Galloway	Training FMT	Complete	<p>Aug 21: GC McCurry is a member of the New Appliance Working Sub Group and continues to negotiate with the Fleet Management team to source newer appliances and equipment for SFRS Training Centres and the Driver Training fleet.</p> <p>April 2022: The requirements of the Training function in regard to Appliances and Training equipment will be managed as business as usual. Appliance requirements for Training are now discussed at the New Appliance Working Group which is attended by the Driver Training Group Commander.</p>	100%	Mar-23	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 21</b> As all new applicants are required to be medically assessed prior to their employment, it is recommended that an option be explored which ensures that the pre-employment examination also covers the requirements for CAT C licensing: thereby mitigating the requirement for further medical examination prior to applying for a CAT C provisional license and entry onto the driver development pathway.</p>	21	Whilst Driver Training is explored elsewhere within this review, despite driving duties forming part of the firefighter role map a challenge exists in progressing firefighters through the driving pathway. There is a time and cost implication for the medical requirements involved in Large Goods Vehicle (LGV / Category C) license acquisition.	Recommendation deemed not viable at this time	AC Hall	Training FMT	Complete	<p>Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 21 will need to be delivered in conjunction with HR and Health and Wellbeing. Initial meetings with Health and Wellbeing are currently being arranged.</p> <p>April 2022: This recommendation will be closed due to no longer being viable. The SFRS do not have a need, or capacity to LGV deliver driver training to all trainees so the additional capital spent on CAT C medicals would be money wasted. The SFRS will continue to provide CAT C medicals to personnel nominated to attend LGV driver training.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Core Training</b>											
<p><b>Recommendation 22</b> This can be achieved by creating "LITE" module versions to be utilised for employees on a maintenance cycle. The training module would focus on 3 areas • Information changes for the risk / subject • Learning which has been identified as specific to that subject • Need to know requirements of the subject.</p>	22	This review has identified a need to recognise the differing requirements between training modules for developing firefighters and those used by competent firefighters in order to support maintenance of their existing skills. An opportunity exists to re-work e-learning materials for the future of SFRS while maintaining a blended approach, which supports all duty systems, and supporting the in-development phase of fire-fighters and maintaining competent personnel currency. This also has the potential to realise more practical training time by recognising the distinct training phases of acquisition and maintenance.	Completed within CIP	AC Hall	Training FMT	Complete	<p>Aug 21: Work has begun to undertake a review of the current SFRS Training for Operational Competency (TFOC). A proposed new TFOC model has been devised and will be presented at the Continuous Improvement Programme Board on the 20th August looking for approval to go to consultation on the new TFOC model.</p> <p>Jan 22: Consultation completed with all LSO areas and Functional Management Teams. Training for Operational Competence Strategy Group established to determine scheduling and prioritisation of modules. Technical Working Group who will determine content of modules scheduled to meet Jan 22.</p> <p>April 2022: The new TFOC went live on the 4th April 2022 and delivers on this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 23</b> RDS station risk profiling should be re-assessed every three years in the October prior to the end of each three-year training cycle. This will allow a sufficient timeframe for any changes required to be altered by TED for each station / station cluster / area.</p>	23	The requirement for RDS station profiling for assessing allocation of TFOC Advanced Module requires to be reinforced and should be reviewed in order that these modules are specific to either a station or cluster of stations on a risk based approach.	Completed within CIP	AC Hall	Training FMT	Complete	<p>Jan 22: RDS station risk profiling will be carried out in line with TFOC review with measures put in place to re-assess every 3 years.</p> <p>April 2022: The new TFOC allows local management teams to determine quarterly training related to each stations risk profile. The new TFOC delivers this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 24</b> Whilst it may be the case that the Task and Task Management skills should be covered by practical training against the other core skills within the Fire Professional Framework, it is recommended that the status quo is maintained in order that it can be ensured that dedicated Task and Task Management maintenance training is undertaken on an annual basis and is easily broken into one skill per month</p>	24	In pursuit of efficiencies, there could be an opportunity to realign with the Fire Professional Framework and reduce the amount of core skills modules contained within the Training for Operational Competence Framework. However, SFRS Operational Assurance processes, Operational Assurance Audits; together with the auditing work completed by the Balmoral Bar Implementation Group suggest that a continuation of dedicated focus on the practical application of the full range of core skills should have a positive influence on Firefighter safety.	Completed within CIP	AC Hall	Training FMT	Complete	<p>Aug 21: Work has begun to undertake a review of the current SFRS Training for Operational Competency (TFOC). A proposed new TFOC model has been devised and will be presented at the Continuous Improvement Programme Board on the 20th August looking for approval to go to consultation on the new TFOC model.</p> <p>Jan 22: Core Modules in new TFOC model will include Task &amp; Task Management Module to ensure maintenance training is undertaken as per recommendation.</p> <p>April 2022: Task and Task management is delivered through 2 of the 4 quarters on an annual basis. The new TFOC delivers and enhances this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>

<p><b>Recommendation 25</b> There are further options available which can assist in releasing training capacity by removing unnecessary duplication of information that sits across some modules which cover similar topics and streamlining them into a more concise single package e.g. combining "Casualty Care" with "Trauma &amp; Medical Emergencies" or combining "Domestic", "Commercial" &amp; "Public Entertainment" modules into a single "Firefighting in the Built Environment" package.</p>	25	Releasing further training capacity by streamlining and combining modules.	Completed within CIP	AC Hall	Training FMT	Complete	<p>Aug 21: Work has begun to undertake a review of the current SFRS Training for Operational Competency (TFOC). A proposed new TFOC model has been devised and will be presented at the Continuous Improvement Programme Board on the 20th August looking for approval to go to consulation on the new TFOC model.</p> <p>Jan 22: New TFOC model includes combined modules with a concious effort to create more concise single packages removing the unnecessary duplication of information which currently sits across some modules.</p> <p>April 2022:The new TFOC has merged these topics to ensure there is no duplication of learning. The changes made deliver and enhance this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
Breathing Apparatus											
<p><b>Recommendation 26</b> It is proposed to instigate a mandatory BA Wear every 3 months for station based operational staff. This would be inclusive of operational use, be organised at watch level and be reported on via PDR pro at watch, station, LSO, SDA and National level.</p>	26	The Training for Operational Competence (TFOC) framework does not currently compel all personnel to wear a BA Set during training other than on the annual centrally run refresher programme, as detailed above. Therefore, it is possible that personnel may not wear a BA set from one year to the next; other than during any operational activity. There requires to be an emphasis in order to focus greater attention onto station based practical training and ensure the recording of live operational (red) wears to evidence the operational exposure and experience levels of personnel.	Completed within CIP	GC Todd	Training FMT	Complete	<p>Aug 21: Action now complete. Awareness Briefing issued on 21/06/21 stating that BA wearers must record either a hot or an ambient wear at least once each quarter.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 27</b> It is recommended to move away from the current 3-year cycle and to combine the three formerly separate refresher training subjects of BA Search &amp; Rescue, Compartment Fire Behaviour Training (CFBT) and Tactical Ventilation (TV) into an a single live-fire refresher event which will be themed to capture operational assurance and or national operational learning as well as providing quality assurance of knowledge and practical application. The use of UHPL will also be included, as appropriate, for a holistic, systematic approach.</p>	27	SFRS's current BA maintenance of skills training programme outlines the requirement for an annual live (hot) fire refresher BA Wear during the phases of either BA Search & Rescue, Compartment Fire Behaviour or Tactical Ventilation, as part of 3-year cycle, held at a suitable training centre. This review has noted that the application of refresher training has been impacted due to instructor capacity being focussed upon concurrently facilitating foundation training across three sites. There is an opportunity to review the frequency of the live fire refresher training event in alignment with NOG from annually to every two years, however, it is considered that this may have a negative correlation with firefighter safety. Taking this into considerations, recommendation 27 provides a further viable option.	Training Function Lead	GC Todd	Training FMT	Complete	<p>Aug 21: Work has begun an assessing how the delivery of BA training would be delivered by combining BA Search &amp; Rescue, Compartment Fire Behaviour Training (CFBT) and Tactical Ventilation (TV) into an a single live-fire refresher event. An options paper is being prepared to be presented at the Training Safety and Assurance Directorate Management Team meeting in Q3 of this year.</p> <p>October 2022: This work has been reinvigorated following COVID. Priority is being placed on the re-introduction of Gas Rigs to reduce the impact on CFBT facilities,travel distances,cost of timber, contaminants and instructor capacity. Once this work has been completed a wider review can then take place of the BA refresher content.</p> <p>March 2023: A full review of BA Refresher Training is ongoing. An additional SC has been allocated to this work to progress.</p> <p>September 2023: A BA Recovery plan proposal has been formulated. This will be a one day course (3/1) incorporating BA, Tac Vent &amp; CFBT (UHPL included if the attending crew have this asset). The recovery will be over a 18-24 month period. A new BAU model is then proposed which will be a 3 year programme with year1 - 1 day BA &amp; Tac Vent course, Year 2 - 1 day CFBT Course, year 3 - a watch led exercise aligned to local risk.</p> <p>April 2024: BA recovery plan has launched in April 2024. BA Training Guidance Document support the launch and the National Training Standard has been amended to reflect the change in delivery. Following the BA Recovery a new BAU model will be delivered.</p>	100%	Apr-24	Apr-24	<a href="#">EVIDENCE LINKS FOR RECOMMENDATION 27</a>
<p><b>Recommendation 28</b> It is proposed, within the TFOC Framework to amalgamate the BA and CFB core modules adding in Tactical Ventilation. The programmes of learning are to be revised and condensed to remove excessive information and focus upon "need to know", risk critical information. Once revised this will enhance practical application exercises at watch and station level.</p>	28	Releasing further training capacity by streamlining and combining modules.	Completed within CIP	GC Todd	Training FMT	Complete	<p>Aug 21: Work has begun to undertake a review of the current SFRS Training for Operational Competency (TFOC). A proposed new TFOC model has been devised and will be presented at the Continuous Improvement Programme Board on the 20th August looking for approval to go to consulation on the new TFOC model.</p> <p>Jan 22: New BA Core Module within TFOC review will be a combination of BA, CFBT and Tac Vent as per recommendation. SME's currently working on new video content and creation of workcards to ensure adequate training is delivered annually. April 2022: The improvements made within the TFOC relating to BA training went live on the 4th April 2022. These improvements deloiver and enhance this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 29</b> It is recommended that an electronic Instructors Training Manual be introduced. This document will provide a single repository for the technical application aspects that instructors traditionally share via word of mouth: thus ensuring clarity and consistency across SFRS.</p>	29	It is recommended that an electronic Instructors Training Manual be introduced. This document will provide a single repository for the technical application aspects that instructors traditionally share via word of mouth: thus ensuring clarity and consistency across SFRS.	Training Function Lead	GC Todd	Training FMT	Complete	<p>Aug 21: Progress has been made with the production of supporting guidance notes to support the National Training Standards in regard to the delivery of specialist rescue training, Work is currently on going with the creation of guidance notes to support the delivery of BA training.</p> <p>Jan 22: New video content for BA is currently being filmed to demonstrate best practice ensuring clarity and continuity across the Service.</p> <p>April 2022: The Training function are currently developing new Performance and Quality Assurance standards for all areas of Training delivered across the SFRS. This recommendation will be closed and delivered as business as usual through the implementation of the Performance and Quality Assurance arrangements.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 30</b> That the status quo, in line with current BA POG, is maintained and that individuals are not eligible to undertake the BA Team leader until deemed competent within the firefighter role</p>	30	BA Policy and Operational Guidance currently details that only a competent firefighter can undertake the role of BA team leader at an operational incident. Due to the ratio of firefighters being recruited into the SFRS, this can impact upon the staffing of appliances across all duty systems. Having completed an initial course, then been assessed at watch level during training & at operational incidents, in conjunction with attending an annual refresher: providing they are successful, could enable individuals to operate as BA Team Leaders at operational incidents within a more compressed timeframe. It could be considered that where these criteria are met that firefighters can perform the BA Team Leader role after successful completion of their Amber (24 month) assessment. The implementation of Option nine does however place additional onus on the individual and, would result in the SFRS operating out with the National Fire Chiefs Council (NFCC) BA POG.	Completed within CIP	GC Todd	Training FMT	Complete	<p>Aug 21: Current SFRS BA POG states "The Supervisory Manager will nominate a (minimum) competent firefighter to take up the role of BA Team Leader for each pumping appliance.</p>	100%	Mar-22	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>



<b>Recommendation 31</b> In order to realise the maximum potential for the Capital already invested, it is recommended that sufficient additional equipment is procured to allow acquisition training to be delivered at these locations in addition to the current maintenance programmes.	31	Significant Capital funding has been invested to support the training strategy of delivering training as close to the point of need as possible. Predominantly this has benefited remote rural locations with respect to maintenance phase, refresher programmes.	Completed within CIP	GC Todd	Training FMT	Complete	Aug 21: The additional resources identified as being required to deliver BA training as close to the point of need have been procured and delivered into service. This equipment is currently being issued to the relevant Training sites.	100%	Mar-22	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Driver Training</b>											
<b>Recommendation 32</b> It is recommended that, in a move away from one size fits all course delivery towards a locally tailored model, aligning the Emergency Response Driving (ERD) course duration dependant upon risk would not only enhance the delivery, but would realise efficiency savings and greatly assist personnel on the RDS duty system. It would be proposed that stations that fall under the following classifications align to the delivery model associated;  <ul style="list-style-type: none"> <li>Urban 5 days (or 3 weekends) – no saving</li> <li>Rural 3 days (or 2 weekends) – 1 instructor day saving per course</li> <li>Remote Rural 2 days (or 1 weekend) – 3 instructor days saved per course.</li> </ul>	32	As per Recommendation	Training Function Lead	GC Galloway	Training FMT	Complete	Aug 21: Recommendation 31 cannot be progressed until the SFRS are aware of the impact the impending enactment of Section 19 of the Road Safety Act 2006. The SFRS are in deliberations with the Scottish Government alongside Police Scotland and the Scottish Ambulance Service to highlight the impact this enactment will have on Scotland's emergency services with regard to Emergency Response Driver Training.  April 2022: Discussions have been ongoing between SFRS and the Department for Transport (DfT) surrounding the impending enactment of Section 19 of the Road Safety Act 2006. A focal point of these discussions surrounded the application of a "Scottish island speed training course". The SFRS has proposed a 40 hours course, 1:1 Instructor / student ratio (above that of the minimum 1:2 ratio), that aligns with NFCC Driver Training Standards and meets the training requirements on a risk based approach therefore, allowing the SFRS to request a concession under the banner of "Derogation". This concession has now been agreed. "Urban" and "rural" course options are not attainable under the Section 19 legislation as both fall under the banner of "mainland" Scotland and as such will be bound by the national framework and legislation contained within Section 19. Due to the impact the COVID 19 pandemic and challenges related to the number of personnel with driving skills who are now leaving the service, all efforts to improve driver Training will be delivered under BAU.  Sept 23 - Engagement with Scottish Government continue around the possibility of an exemption for SFRS in relation to Section 19 regulation. Further meetings to be scheduled in and updates on outcomes will be added in due course.	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 33</b> Following on from two pilot trials: the adaption of Category C licence acquisition from a student / instructor ratio of 1:1 to 2:1 for five days and also 1:1 for four days it is recommended that these options being combined and that, on a trial basis, courses are delivered on a 2:1 student / instructor ratio over four days. The four-day programme aligns better with the wholetime duty pattern and realises an additional day of instructor capacity within the working week.	33	As per Recommendation	Training Function Lead	GC Galloway	Training FMT	Complete	Aug 21: Recommendation 32 cannot be progressed until the SFRS are aware of the impact the impending enactment of Section 19 of the Road Safety Act 2006. The SFRS are in deliberations with the Scottish Government alongside Police Scotland and the Scottish Ambulance Service to highlight the impact this enactment will have on Scotland's emergency services with regard to Emergency Response Driver Training.  April 2022: Work in this area continues under BAU to identify efficiencies and increase capacity and throughput of new Cat C drivers. Covid restrictions required that driver training reduce instructor to student to a ratio of 1:1 to comply with ScotGov Covid management regulations. Work will continue to progress this recommendation as restrictions are eased, this will now be delivered under BAU.  August 2022: Full review of training standard taking place on 22nd August with a view to identifying efficiencies across course delivery.	100%	Dec-22	Aug-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 34</b> It is recommended that SFRS enhance the instructor cadre by the addition of 4 uniformed instructors. These instructors would be strategically located within LSO Area Teams across SFRS where there is a higher density of RDS personnel.	34	As per Recommendation	Completed within CIP	GC McCurry	Training FMT	Complete	Aug 21: 4 Additional driver instructors have been employed and are currently delivering driver training across Scotland.	100%	Nov-20	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 35</b> It is recommended that SFRS should seek to introduce the acquisition of a CAT C Licence as a mandatory element to be completed prior to becoming a competent Firefighter and that a working group should be established to explore all variable options further.	35	As per Recommendation	Recommendation deemed not viable at this time	GC Galloway	Training FMT	Complete	Aug 21: There are a number of recommendations that cannot be delivered by the Training function in isolation. Recommendation 35 will need to be delivered in conjunction with HR. Initial meetings have taken place between AC Hall and Ceri Dodd to ensure that HR are aware of the recommendations within the Training Review that impact on HR policies and each function will now work collaboratively to deliver these recommendations.  April 2022: This recommendation is not viable as Driver Training does not have the capacity and the SFRS does not have the need to provide LGV training to every developing Firefighter. By invoking FF9 of the Firefighter role map, the SFRS may eradicate a number of challenges being faced by a shortage of personnel willing to drive. The invoking of FF9 does not come under the remit of the Training function.  March 2023: This recommendation is now complete. A revised contract for new Firefighters	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Incident Management</b>											
<b>Recommendation 36</b> It is proposed to utilise the current Operational Assurance (OA) process to reaccredit Incident Command Currencies.	36	Cross-mapping the role assessment criteria of WM7 and EFSM2 with the OA Framework may enable an individual's Incident Command Competence to be extended during the course of an OA Review thus increasing the currency period between formalised IC assessments.	Training Function Lead	GC Dippie	Training FMT	In Progress	Jan 22: Command Competence Review Procedure has been developed to re-accredit Incident Command competence. This document has been out for consultation and work is ongoing. April 2022: This recommendation is going to TCIB for approval on the 25th April 2022.  June 2022: Command Competence Review Procedure now live Nov 2023: November FMT - DACO Farquharson asked that Rec. 36 is reopened linked to the ongoing Command Competence Review Procedure. March 24 MD - Policy on hold for full review.	60%	Dec-24		Emails and meeting agenda and logs
<b>Recommendation 37</b> Realignment of ICL 2 & 3 (currently provided to Station Managers and Group & Area Managers respectively) with the Learning Development Framework (ICL2 SM & GM, ICL3 AM) would provide consistency of development and also realise a 67% efficiency at ICL3.	37	Realignment of ICL 2 & 3 (currently provided to Station Managers and Group & Area Managers respectively) with the Learning Development Framework (ICL2 SM & GM, ICL3 AM) would provide consistency of development and also realise a 67% efficiency at ICL3.	Completed within CIP	GC Haggerty	Training FMT	Complete	Aug 21: The work to realign the ICL 2 & ICL 3 courses is complete and now being delivered as business as usual.  June 2022: Revised Incident Command Pathway now live	100%	Nov-20	Jun-22	Realignment complete and published in the following documents: Incident Command Development Pathway: <a href="https://ihub.firescotland.gov.uk/download.cfm?ver=68166">https://ihub.firescotland.gov.uk/download.cfm?ver=68166</a> . Incident Command NTS: <a href="https://ihub.firescotland.gov.uk/download.cfm?doc=docm93jjm4n6384.xls&amp;ver=73330">https://ihub.firescotland.gov.uk/download.cfm?doc=docm93jjm4n6384.xls&amp;ver=73330</a>

<p><b>Recommendation 38</b> It is recommended that recognition is given to the allocation of dedicated time and resource to review, expand and develop incident management training and assessment materials in order to be reflective of the evolving roles of a modern fire and rescue service.</p>	38	A number of gaps have been identified within current Incident Management training packages with respect to Sector Specific Roles and also for the maintenance of Specialist Tactical Advisor skillsets. The review of learning materials has also highlighted that there is a necessity to review all current training and assessment scenarios in order to ensure they remain in alignment with the dynamically evolving operational roles within the fire and rescue service and in particular, with Service Transformation requirements.	Training Function Lead	GC Dippie	Training FMT	In Progress	<p>Aug 21: Through approved business cases to secure additional staff within Training to assist with the recovery from the Covid-19 pandemic, 3 Watch Commanders and 1 Crew Commander will be joining the current SFRS Incident Command Training team. This will allow capacity to deliver additional courses across the country and allow time for new scenario resources to be developed. The Training function are currently identifying suitable candidates to fill these new posts.</p> <p>April 2022: The Training function are undertaking a review of all Incident Command (IC) Training, this will include outlining the required IC scenarios to meet the needs of the various incident types currently faced by Incident Commanders, Practical Training exercises required to be undertaken by Incident Commanders across Service Delivery areas and the number of IC Instructors required across the country to deliver IC training in each SDA. This review will deliver recommendations 38, 39 and 40 as BAU.</p> <p>July 2022: The ICL2 course content has now been reviewed and updated to reflect better the training required for new flexi duty officers. The Assessments for ICL2 have been updated to reflect changes to ICPOG and Ops Assurance findings. ICL3 course content and assessment are now being reviewed. ICL4 format has been amended to reflect the more strategic nature of the role with greater emphasis on the multi-agency aspects of the role. This is now live and has been used for the ACO AICC in April and has now been adopted by the ACO as the format for future ICL4 AICC's</p> <p>November 2022 DH. ICL3 format has been agreed and timetable adjusted. Discussions with partners around Multi-Agency to be scheduled to widen the scope of the course to include more strategic MA approach.</p> <p>March 2023 MD - Wild fire case study now fully embeded in ICL2 D course. ICL 2 &amp; 3</p>	75%	Mar-25		SC Gow and GC personal emails regarding XVR and ICL3 Redesign.
<p><b>Recommendation 39</b> It is proposed that a programme of larger scale, area-based exercises are instigated on a quarterly basis and this be aligned to the introduction for Flexi Duty Fire Groups training together and the completion of 1 CPD day annually as a group. A quarterly exercise will provide the opportunity for all four FDM groups to exercise annually.</p>	39	Due to the decrease in operational activity and the resultant focus on high quality realistic training; there is an opportunity available to cement the progress already made by the introduction of station standards, practical assessments within the L&D pathway, incident command assessments and operational assurance by the introduction of periodic SDA-level exercises combined with flexi duty manager (FDM) command group training.	Training Function Lead	GC Dippie	Training FMT	In Progress	<p>April 2022: The Training function are undertaking a review of all Incident Command (IC) Training, this will include outlining the required IC scenarios to meet the needs of the various incident types currently faced by Incident Commanders, Practical Training exercises required to be undertaken by Incident Commanders across Service Delivery areas, and the number of IC Instructors required across the country to deliver IC training in each SDA. This review will deliver recommendations 38, 39 and 40 as BAU.</p> <p>September 2022: Meeting has been arranged with DACO Farquharson to review the most appropriate way to liaise across all flexi groups and directorates as well as the scope of the training exercises to coincide with SMARTEU and NFRS exercises.</p> <p>November 2022 DH. Initial meeting with DACO has taken place and work is ongoing. Initial workstreams have been discussed as part of wider review of FDO training which will incorporate exercising across FDO groups and SDA's.</p> <p>March 2023 MD - No formal progress on FDO duty group training but discussions underway with Katherine Lamb Assoc. for purchasing their Effective Command package which would provide an online platform for this purpose with over 60 scenarios. Discussions with procuremnt at an early stage. CPD will be enhanced by the functional role discussions highlighted in recommendation 38.</p> <p>26/09/23 MD - Demonstration by XVR of on line virtual reality Incident Command platform that could be used to improve current course delivery. Next step is to visit other services who use this platform for real world assessment</p> <p>March 24 - Research on how best to use XVR to commence 24/25 training year. Initial plan to develop a training package for functional officer roles for Fire Group training to commence start of training year 24/25. Large scale scenario/exercise training further down</p>	30%	Mar-25		Emails and outlook meetings.
<p><b>Recommendation 40</b> Currently the dedicated incident management instructional team is based at NTC. Given the improved regional training resources made available through SFRS Capital investment and, the level of requirement for ICL1 development, it is recommended that additional dedicated incident management instructors be sourced in order to provide an opportunity for additional courses to be delivered across all three SDAs.</p>	40	As per Recommendation	Training Function Lead	GC Dippie	Training FMT	Complete	<p>Aug 21: Through approved business cases to secure additional staff within Training to assist with the recovery from the Covid-19 pandemic, 3 Watch Commanders and 1 Crew Commander will be joining the current SFRS Incident Command Training team. This will allow capacity to deliver additional courses across the country and allow time for new scenario resources to be developed. The Training function are currently identifying suitable candidates to fill these new posts.</p> <p>Jan 22: 3 Watch Commanders and 1 Crew Commander have joined the Training Incident Command team for a 2-year period. These posts will bolster the Incident Command team and provide the capacity required to deliver the current backlog of ICL1 courses. The benefits of the enhancing the Incident Command team will be measured over the tenure of the secondments with potential future business cases being made to all or a number of the seconded posts.</p> <p>April 2022: The Training function are undertaking a review of all Incident Command (IC) Training, this will include outlining the Required IC scenarios to meet the needs of the various incident types currently faced by Incident Commanders, Practical Training exercises required to be undertaken by Incident Commanders across Service Delivery areas and the number of IC Instructors required across the country to deliver IC training in each SDA. This review will deliver recommendations 38, 39 and 40 as BAU.</p> <p>July 2022: Additional Incident Command team members have been inpost and are now fully trained to deliver ICL1 courses as a dedicated Newbridge Incident Command Team. They will continue to be based between NTC and Newbridge until they have completed the ICL2 training and can therefore deliver this at Newbridge.</p> <p>An ICL1 local delivery programme has also been developed to allow ICL1 to be delivered within an LSO on either a five-day course or as a modular development course delivered over a maximum of twelve-weeks. This facility has been utilised by LSO areas across the service</p>	100%	May-24	May-24	People in position spreadsheet. Emails in evidence folder.
Specialist Training											



<p><b>Recommendation 41</b> It is recommended that wherever possible, a move towards Knowledge Applied Training and Assessment (KATA) sessions for periodic refresher &amp; maintenance training is implemented across the Height, Water and USAR Skills Capabilities. These KATA sessions will underpin all elements of these training families.</p>	41	Knowledge Applied Training Assessment (KATA) sessions will be specifically developed for each operational watch / group dependent upon their recorded training and operational activity over the previous 12 months. This will be achieved by Subject Matter Expert (SME) Instructors analysing watch performance by interrogating Pdr-pro: thus providing the opportunity to design bespoke development KATA sessions, reflecting true CPD that will be accurately recorded upon completion in order to evidence that the required level of competencies have been maintained.	Training Function Lead	GC McGill	Training FMT	In Progress	<p>Aug 21: KATA is in place for Rope Rescue. A planning meeting is scheduled for November to consider KATA for USAR and Water Rescue.</p> <p>Jan 22: Whilst KATA is currently in place for Rope Rescue work is still ongoing to determine if KATA is a viable option for USAR and Water Rescue. SFRS have held initial meetings with Rescue 3 to review contracts and determine what courses are required moving forward.</p> <p>July 22: USAR Station Training Programme has commenced however further resource analysis is required to deliver KATA sessions nationally. WR KATA sessions are being quality assured by SMEs who are evaluating recorded development prior to attending events.</p> <p>Aug 22: Awaiting costings of concrete from supplier to finalise resource analysis of USAR KATA Programme.</p> <p>Oct 22: Programme and costing exercise complete however analysis has identified significant station based Instructor skills deficiencies. Further USAR Train the Trainer courses to be scheduled prior to implementation.</p> <p>Nov 22: Currently 31 Train the Trainers across SFRS, further courses will be required in the TNA 23/24 to enhance this figure to support the KATA rollout, minimum of one per Watch being required.</p> <p>Feb 23: Train the trainer courses have been scheduled to allow 1 x instructor per watch, timber and concrete packs have been priced to allow training at stations and KATA sessions to start QA by NIP.</p> <p>May 23 KATA sessions are being delivered to all Height stations and Water stations with USAR following suit later this year when we have suitably trained personnel at station. Nov 23 Awaiting the last few watches to have USAR trainers introduced before supplying the materials necessary to run CPD KATA sessions this is programmed in for Q4 which will complete this</p>	95%	Jan-25		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 42</b> It is recommended that scoping is undertaken to ascertain the practicalities of introducing dedicated instructors for specialist areas e.g. Health&amp; Safety, P&amp;P, Hazmats</p>	42	Whilst specific recommendations are detailed for certain resilience capabilities, it is also considered that when reviewing overall instructor resource requirements and functional structures; there would be benefit in considering the creation of additional specialist roles.	Training Function Lead	GC McGill	Training FMT	In Progress	<p>May 23: A cross function working group will need to be established to ascertain if these post and still required.</p> <p>April 2024: To be requested to be CLOSED</p> <p>May 2024: Further discussions required between TSA Management Team to establish probability of this workstream prior to recommendation of removal.</p> <p>August 2024: This topic has been discussed at GC level and within TMT and FMT meetings. This recommendation is deemed unachievable and a request will be made at Sept. FMT to change the status of this recommendation to complete.</p>	100%	Sep-24		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Rope Rescue &amp; Working At Height</b>											
<p><b>Recommendation 43</b> It is recommended that the current Height development pathway is expanded with the introduction of Safe Working At Height (SWAH) Level 2 instructors within all Level 2 response stations as are identified within Operations Con Ops.</p>	43	SWAH level 2 delivery through to Rope Rescue Supervisor will be delivered by NIP Rope Rescue Instructors utilising a peripatetic delivery model.	Training Function Lead	GC McGill	Training FMT	In Progress	<p>Aug 21: The Operations function are currently undertaking a review of the SFRS Concept of Operations. Once this work is complete we will be aware of the stations which have been identified as requiring SWAH level 2 training and an implementation plan to deliver this training will be created. April 2024: Still awaiting Operations to progress through governance, training packages have been designed.</p> <p>Jul 22: Awaiting Concept of Operations to be published to create and deliver implementation plan.</p>	80%	Feb-25		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 44</b> It is recommended to create a dedicated NIP Height team which would consist of 3 x WM's and 3 x CM's. (1 x WM &amp; 1 CM per SDA). Introducing this model will require to form part of a wider review and analysis of instructor resource requirements and disposition.</p>	44	This introduction of dedicated delivery teams across the three Service Delivery Areas (SDA's) would provide 7250 hrs of student contact time.	Training Function Lead	GC McGill	Training FMT	Complete	<p>Mar 23: Currently trying to establish which posts are free to bring in 1 x Rope trained WC for the NSDA. 2 x WC retirements this year with the rope section will need to be back filled come July. Nov 23 we currently have a full cadre of RR instructors with succession planning started for back fills to cover 2 x retirements and a transfer. Nov 23: Projected 2 x retirements have not progressed, succession planning continues by upskilling CC Instructor within Rope pathway. May 2024: Rope Rescue Instructor model now in place within ESDA and WSDA. NSDA WC in place with identified CC now being upskilled. Recommendation to mark as complete FMT May 8 2024.</p>	100%	Apr-23	May-24	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Water</b>											
<p><b>Recommendation 45</b> It is recommended to realign the water training pathway by a reduction in the number of course types from 25 to 13 and that the current complex and resource intense re-assessment process is refreshed by applying the innovative KATA approach to the re-assessment process that includes a robust QA overlay.</p>	45	With the rapid expansion of flood response stations, the introduction of additional swift-water assets and the additional requirements for boat operators, the current pathway has become overly complex.	Training Function Lead	GC Lennox	Training FMT	Complete	<p>Aug 22: Water Rescue KATA sessions are being delivered to quality assure station-based training. This will be a scheduled programme for the upcoming TNA year of 2023/24.</p> <p>Nov 22: KATA Sessions are now embedded within Water Rescue training delivery, SMEs providing quality assurance during attendance of Watch training.</p>	100%	Mar-23	Nov-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 46</b> It is proposed that there is further integration between water (historical NTS) and High Volume Pump (HVP) requirements with NIP SRTI's training as HVP operators. Thereafter, these Instructors would be utilised to provide a national approach to the delivery.</p>	46	As per Recommendation	Training Function Lead	GC McGill	Training FMT	In Progress	<p>Aug 21: The recovery plan for Water Rescue has prioritised the next 3 years requirements and will delay the recommendation outlined. Proposal is to defer this recommendation Mar 23: The use of current Water rescue instructors is being assessed and upskilling will need to be prioritised and instructor numbers also need to reflect the extra workload. May 23: A HVP train the trainer course was scheduled by National resilience in March, however this was cancelled due to IA and MoU issues. a further course is being considered to upskill existing instructors at station in the coming months. initial meetings by GC McGill and National resilience has taken place with a view to training being more involved with decisions. Nov 23 meetings with National resilience continue and MOU with external training provider has been started to provide SFRS with HVP INstructors. April 2024: MoU agreed with external training provider Instructor course scheduled for Q2. training instructors will not form part of the HVP instructor cadre this will be organised and controlled by National Fire Resilience with LSO based instructors.</p>	100%	Dec-24		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p><b>Recommendation 47</b> It would be recommended that the Tac Ad roles of Water Incident Manager (WIM) and HVP should be combined into a single role of "Water" Tac Ad: with the introduction of KATA sessions to ensure ongoing competency is maintained.</p>	47	As per Recommendation	Training Function Lead	GC McGill	Training FMT	Complete	<p>July 22: Meeting with Water Rescue Capabilities lead scheduled to explore the development of a WIM Tac Ad role including initial training and skills maintenance requirements. Costings have been received from 2 providers to upskill Instructors.</p> <p>Aug 22: 5 day WIM course being developed with support from Water Rescue SMEs and Capability Lead and in line with revised NTS.</p> <p>Oct 22: 8 Water SMEs being upskilled by Rescue 3 accredited training provider to allow for course design for delivery across 3 SDAs in 23/24</p> <p>Nov 22: Water and Flood Tac Ad Paper approved through TSA governance, course scheduled for Feb 23, recommendation now closed. Nov 23 WIM Course being developed Q4 with a view to start delivery Q1 24 April 2024: WIM course has been partially developed with a view to begin TAC AD courses in Q3.</p>	100%	01/010/2024	Nov-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>

<b>Recommendation 48</b> The implementation of a progressive pathway and a move away from individual accreditation onto a "top tier" only accreditation model has the potential to realise an estimated efficiency saving of £116k annually across three areas. The first being a reduction of £46k in accommodation (Connel), secondly £10k in overtime and thirdly a reduction of £60k in Rescue 3 skills packs/paper work costs	48	As per Recommendation	Training Function Lead	GC McGill	Training FMT	Complete	<p>Aug 21: Rescue 3 contract has been extended to March 2022. This will allow this recommendation to be considered and the relevant accreditation to be scoped out.</p> <p>Jul 22: Rescue 3 contract has been extended until March 2024, efficiency savings will not be as significant following the migration to electronic reference materials. Proposal is to close this recommendation. Mar23: contract with Rescue 3 has been agreed and will be revisited every 3 years currently we are in contract until March 25. April 2024: Rescue 3 contract continues until March 25 at this point we can discuss T&amp;C's. May 2024: Localised training model now implemented with an estimated annual saving of £68k. Rescue 3 contract ongoing included within zero budget with renewal due May 2025. Recommendation through FMT 8th of May 2024 to mark as complete.</p>	100%	Mar-25	May-24	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Urban Search &amp; Rescue</b>											
<b>Recommendation 49</b> It is proposed that USAR awareness sessions will continue to be delivered by watch / unit supervisory managers. All other USAR courses will be delivered by the USAR NIP SMEs. To enable the delivery of these USAR courses, a peripatetic delivery model is recommended through the introduction of a dedicated USAR delivery team who would be deployed Nationally across the three Service Delivery Areas (SDA's). The team would comprise of 3 x WM's and 1 x CM. Introducing this model will require to form part of a wider review and analysis of instructor resource requirements and disposition.	49	This review has highlighted that the current reaccreditation / reassessment process is not applied consistently across the Service; nor is it achievable within current instructional resource levels. It has been identified that existing practices provide only a very limited opportunity for operational crews to undertake specific refresher training. However, it has been recognised that these matters can be mitigated by moving onto a less complex development pathway and by the utilisation of KATA maintenance sessions.	Training Function Lead	GC McGill	Training FMT	Complete	<p>Aug 21: 3 x Train the Trainer events have taken place to upskill LSO Training personnel, with another planned for Dec 21. The staffing model has been progressed through the addition of 1 Watch Commander. Other staff have been identified and awaiting the outcome of a National Crew Commander process.</p> <p>Jul 22: USAR Team is now resourced and well established (2 WCS and 1 CC) and delivering acquisition courses. Station based USAR training programme is being supported with the aim to introduce a 3 year KATA Schedule as referenced in Action 41.</p> <p>Aug 22: This action is now linked to Recommendation 41 May 2024: USAR Team fully resourced at 3 x WC, 1 x CC. 43 Train the Trainers upskilled across USAR stations to allow for stationbased KATA sessions. Competency levels are sitting at 78% Nationally. Recommendation through FMT 8th of May 2024 to mark as complete.</p>	100%	Jun-24	May-24	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 50</b> In streamlining the USAR development pathway it is recommended that the Tools Operator Course be removed and in alignment with NOG, that the Technicians course be amended to suit the needs of the 6 USAR modules (realising an efficiency of 5 days per person).	50	As per Recommendation	Completed within CIP	GC Gallacher	Training FMT	Complete	Aug 21: This recommendation has been implemented and LCMS course packages have been created to reflect this change	100%	Mar-22	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 51</b> It is also recommended that a USAR awareness module be created for incorporation into the Operations Control TFOC framework.	51	As per Recommendation	Completed within CIP	GC Jacqui Macdonald	Training FMT	Complete	Jan 22: GC Macdonald has confirmed that current "Rescues" Module within OC TFOC contains adequate information on USAR to address recommendation.	100%	Mar-22	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Operations Control</b>											
<b>Recommendation 52</b> That an amendment is made within the off-station structure to allow an additional Group Manager (Control) post within the Training and Employee Development Function with a dedicated National reference for Operations Control training.	52	It has been identified there is an opportunity to strengthen the links and ensure consistency between training provided for Operational Staff and that which is provided for Operations Control (OC) Staff.	Training Function Lead	GC Julie Crawford	Training FMT	In Progress	<p>Mar 24 - GC process to be concluded by end of March, full restructure of functional OC FDO roles will be completed after SC(C) process concluding by end of May 24.</p> <p>Jan 24: Formal Consultation process continuing. GC process for roles within restructure concluding March 24. Processes for all other roles to follow.</p> <p>July 23: Formal Consultation process with rep body now commenced and working towards implementation of restructure in early 2024. June 23: OC structure review has been published and talks are progressing with Rep Body. Implementation of structure expected to start late 2023. Apr 23: Talks are currently</p>	50%	Dec-24		Benefit of shared training knowledge, experience, resources, practices and avoidance of duplication of effort. Opportunity to develop fully integrated learning material for all uniformed roles.
<b>Recommendation 53</b> A Learning and Development pathway from Firefighter (Control) to Area Manager (Control) should be developed.	53	This will align closely with the Operational FF-AM pathway which is currently being introduced into The Service. Through the proposed revision of structure (above): joint development activities should be included which will further integrate OC Staff into the Incident Command pathway and the Operational Assurance process.	Training Function Lead	GC Julie Crawford	Training FMT	In Progress	<p>March 24 - work to be completed following OC restructure and alignment of posts.</p> <p>Jan 24: no further progress due to continuing competing priorities</p> <p>July 23: Report on Fire Control Standard has been drafted and sent to DACO for review.</p> <p>June 23: Pathway will be developed following implementation of structure review. National work on OC Incident Command is continuing and included in the revised National Fire Control standard</p> <p>Jan 23: Working on OC Incident Command in conjunction with other UK FRSS.</p> <p>Aug 21: Initial meeting have been held to scope out what the OC development pathway</p>	10%	Dec-24		will provide a consistent approach to the training, development and assessment of OC ICs, conforming to national standards.
<b>Marine</b>											
<b>Recommendation 54</b> Due to large numbers of personnel requiring training across a wide area, it is proposed to realign the course, with the initial two days focusing on basic knowledge and firefighting techniques, which all would attend. The final two days would thereafter be attended by CM and WMs, focusing on more specialised knowledge and application of the ICS to a marine incident.	54	All staff posted to a Maritime Offshore Group (MOG) station are required to attend the Tactical Ship Firefighting (TSF) course, a total of 1010 personnel, with a refresher every three years. Of these, only 74 are current. A number of personnel have lapsed from currency due to the organisational prioritisation on the delivery of critical skills training impacting upon the remaining numbers of instructors available for delivery of other training subject.	Completed within CIP	GC Wright	Training FMT	Complete	Mar 22: Meetings have taken place between Training and the Marine Operations Group (Chaired by AC Robison) to discuss the reinvention of Marine attribute to dedicated stations and therefore the introduction of Marine Tactical Ship Firefighting Training. This will consist of a 3 day Firefighting course for all personnel at a dedicated Marine station and an additional 2 day Marine Incident Command course for a CC & WC at dedicated stations. This is with a view to start scheduling in delivery of this in Q3 /Q4 this training year. Further training for all FDO's is also currently being looked at.	100%	Mar-23	Mar-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Large Animal Rescue</b>											
<b>Recommendation 55</b> It is proposed to further develop the current MPDP module in order that it aligns to meet the aims and objective of the AR1 syllabus. This would permit all SFRS operational personnel to be developed and to maintain competence to a minimum of AR1.	55	Going forward, the aspiration is to align the LAR attribute with 3 levels of competence currently being developed by the NFCC Animal Rescue Practitioners Forum. These three levels of competence are outlined as follows; AR1 – Animal Rescue Awareness – Suitable for firefighters and vets who may find themselves responding to an animal rescue incident. AR2 – Animal Rescue Responder – This is for teams expected to carry out the animal rescue and teaches techniques as well as animal handling. AR3 – Animal Rescue Instructor/Specialist – A course which teaches advanced animal rescue techniques.	Completed within CIP	AC Acton	Training FMT	Complete	Jan 22: SFRS Animal Rescue Scottish User Group have met with Edinburgh University Royal Dick School of Veterinary Studies and British Animal Rescue & Trauma Association to develop an SFRS AR1 package. This e-learning package will replace current "Animals" Module on LCMS and ensure all station based personnel are developed and maintain competence to AR1 level.	100%	Mar-23	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<b>Recommendation 56</b> Crews possessing the Heavy Rescue and USAR attributes would be developed to AR2 level. In order to develop and maintain this pathway it is proposed that a selected number of personnel are developed to AR3 (Instructor) level in the first instance.	56	As Above	Completed within CIP	AC Acton	Training FMT	Complete	Jan 22: Work is currently ongoing between SFRS Animal Rescue Scottish User Group, Edinburgh University Royal Dick School of Veterinary Studies and British Animal Rescue & Trauma Association to develop an MOU/Agreement which will look at the introduction of a Large Animal Rescue attribute into SFRS. Training Functional Management Team have approved delivery of AR2 & AR3 courses scheduled in 2022 to assist with delivery of this recommendation. Future meetings with Operations Function and Animal Rescue Scottish User Group scheduled for 2022.	100%	Mar-23	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>



Restructuring 2023											
<p><b>Recommendation 57</b>            Training Function restructuring project involving the removal of 5 "hard to fill" CC uniformed posts from the structure to support positive restructuring proposals within the Function. Driver Training / LED / Instructors cadre are all areas that are to be supported and strengthened through this project work.</p>	57	<p>The Training Function restructuring proposals are designed to provide support to a number of areas within Training to improve the effectiveness and efficiency of the departments involved and to increase the existing Instructor cadre by utilising non traditional resourcing methodology to maintain and improve firefighter safety</p>	Training Function Lead	GC Galloway	Training FMT	Complete	<p>Mar 2023: GC Nelson is currently engaging with Rep bodies to detail these proposals. Workforce planning, JE team, HR and the the Resourcing team have all been involved in this process in support of this restructuring project.</p> <p>May 2023: The recruitment request documentation linked to the Training Function restructuring program was presented at SLT by ACO Watt and ratified. All WFP and Resource Team requests have now been actioned including the CS Team C NOI process and the Non Uniformed reengagement recruitment process. (BN - 12/05) <b>June 2023:</b> CS Team C Professional discussions are currently taking place (14th - 20th June) - Wash up days - 28th / 29th June. Performance post within LED team was advertised through Myjobscotland on 13th June. <b>August 2023 (30/08)</b> - Driver Training Examiner positions completed, Performance Officer within LED team to start his position on the 4th September (while remaining primarily in support of Training Admin / CS Team C until the 25th September). Non Uniformed Instructors - preferred candidates identified and pre employment checks almost complete. 2 of the 5 have been issued contracts and their line managers are in the process of confirming start dates. CS Team C is scheduled to "Go Live" on the 25th September. A new TL is currently being identified through a NOI / PD process.</p>	100%	Nov-23	Nov-23	