



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

PUBLIC MEETING - PEOPLE COMMITTEE

THURSDAY 5 DECEMBER 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: 12 SEPTEMBER 2024 (attached)** *M Wylie*
The Committee is asked to approve the minutes of this meeting.
- 6 ACTION LOG (attached)** *Board Support*
The Committee is asked to note the updated Action Log and approve the closed actions.
- 7 HIGH LEVEL KEY PERFORMANCE INDICATOR REPORT (attached)** *L Gaja/C McGoldrick*
The Committee is asked to scrutinise this report.
- 8 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING**
8.1 People Performance Report Quarter 2 2024/25 (attached) *L Gaja*
The Committee is asked to scrutinise this report.
- 9 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK**
9.1 Culture update (attached) *L Barnes*
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

10 TRAINING

- 10.1 Training Function Update and Performance Report Quarter 2 2024/25 (attached) C McGoldrick/
R Robison

The Committee is asked to scrutinise this report.

11 SAFETY AND ASSURANCE

- 11.1 Safety and Assurance Performance Report Quarter 2 2024/25 (attached) J Holden
11.2 Contaminants Update (attached) C McGoldrick
11.3 Safety and Assurance Annual Performance Report 2023/24 (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) L Gaja/C McGoldrick
12.2 Internal Audit and Updates (attached) L Gaja/C McGoldrick

The Committee is asked to scrutinise these reports.

13 PEOPLE COMMITTEE RISK REGISTER

- 13.1 Risk Update Report (attached) L Gaja/C McGoldrick
13.2 Risk Spotlight: ICT Recruitment and Retention (attached) G Aitken/
L MacKenzie
13.3 Risk Spotlight: POD015 Pensions (attached) L Gaja/G Lindsay

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 6 March 2025

Report(s) for Information only:

- Training Continuous Improvement Programme Update (attached)
- Training Function Policy Review Schedule (attached)
- Health and Safety Policy and Policy Statement (attached)
- Safety and Assurance Documents Forward Planning Schedule (attached)

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.

PRIVATE SESSION

- 18 MINUTES OF PREVIOUS PRIVATE MEETING: 12 SEPTEMBER 2024** *M Wylie*
(attached)

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

- 19 PRIVATE ACTION LOG** *Board Support*

The Committee is asked to note that there were no outstanding actions.

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

- 20.1 Draft Minutes of last meeting – 12 September 2024 (attached) *M Wylie*
20.2 Update of last meeting – 5 December 2024 (verbal) *M Wylie*

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

- 21 KEY CASE UPDATES 2024/25 – Q2** (verbal) *L Gaja*

This verbal report is for information only.



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THURSDAY 12 SEPTEMBER 2024 @ 1300 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)

Andrew Smith (Deputy Chair) (AS)
Malcolm Payton (MP)

IN ATTENDANCE:

Lyndsey Gaja (LG)	Interim Director of People
Andrew Watt (AW)	Assistant Chief Officer, Director of Training, Safety and Assurance
Liz Barnes (LB)	Interim Deputy Chief Officer Corporate Services
Craig McGoldrick (CMcG)	Deputy Assistant Chief Officer, Head of Training
Jim Holden (JH)	Head of Safety and Assurance
Jacqui MacDonald (JMac)	Area Commander Control (Item 13.2 only)
Kirsty Darwent (KD)	Chair of SFRS Board
Heather Greig (HG)	Board Support Executive Officer
Debbie Haddow (DJH)	Board Support/Minutes

OBSERVERS

Fiona Griffith, People Manager
Mike Collier, Group Commander

1 CHAIR'S WELCOME

- 1.1 The Committee Chair opened the meeting and welcomed those present and attending via MS Teams, in particular, DACO Craig McGoldrick to his first meeting.
- 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 Fiona Thorburn for her commitment and efforts throughout her tenure and wished her well for her pending retirement.
- 1.4 The Chair announced that Andrew Smith had agreed to assume the role of Deputy Chair for the Committee.

2 APOLOGIES FOR ABSENCE

- 2.1 Madeline Smith, Board Member
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

Chris Casey, Group Commander, Board Support Manager

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

- 3.1 The Committee discussed and agreed that the *Key Case Updates 2024/25 – Quarter 1* 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 6 JUNE 2024

- 5.1 The minutes were agreed as an accurate record of the meeting.
- 5.2 **The minutes of the meeting held on 6 June 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 HIGH LEVEL KEY PERFORMANCE INDICATOR REPORT Q1 2024/25

- 7.1 The High Level Key Performance Indicator Report Q1 2024/25 was presented to the Committee for scrutiny of the KPIs 22-29 (Training), KPIs 46-49 (People) and KPIs 50-56 (Safety and Assurance) and was taken as read.
- 7.2 **The Committee scrutinised the report.**

8 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING

8.1 People Performance Report Quarter 1 2024/25

- 8.1.1 LG provided the People Performance Report Quarter 1 2024/25 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-ordination Group relating to enhancements to recruitment and retention. One area of focus was the delivery of modularised task and task management courses and identifying opportunities to pilot this delivery method.
 - Increased absence rates within Operations Control (OC). To be discussed later on the agenda (Item 13.2).
 - Increases in both Wholetime retirements and recruitment. Factors that influence retirements included age, level of service and recent changes to pension regulations.
 - Milestones of culture action plan reached included the launch of the confidential call line in May 2024. Colleague Experience Survey closed, and analysis had been undertaken in quarter 1 with an update provided at the Board meeting (29 August 2024).
- 8.1.2 In regard to assurances on the pension schemes and funding, the Committee queried how this was provided. LG reminded the Committee that there were 2 pension schemes, Firefighters Pension Scheme and Local Government Pension Scheme (Control and Support

staff). LG outlined the funding arrangements for both schemes, the Service's representation on the Advisory Board, close working with the Scottish Public Pensions Agency and the various specific updates on Pension Remedy workstream activities provided to the Board. LG noted that a risk spotlight had previously been presented to the Committee and agreed to provide further details off table around the different pension remedy workstreams in operation within the Service.

ACTION: LG

- 8.1.3 The Committee were reminded that a session relating to reviewing risks would be scheduled for the upcoming workshop (24 October 2024).
- 8.1.4 The Committee sought assurance on the ability to access psychological support services and whether the options for physiotherapy provision were reviewed. LG outlined the different approaches available to access psychological support including crisis, post incident and management/self-referral support and the various organisations involved.
- 8.1.5 LG reminded the Committee that the physiotherapy provision was reviewed last year and this was currently being provided by 2 inhouse physiotherapists. The provision was scheduled to be reviewed in March 2025 and the evaluation/analysis report would be provided to the Committee for information.
- 8.1.6 The Committee noted that the 2nd highest reason for absence was recorded as "other reasons". LG advised that this category was broken down into approximately 15 sub-categories and provided an example of some of the reasons.
- 8.1.7 The Committee queried whether the NHS waiting time impacted and delayed staff returning to work. LG noted that NHS waiting times did impact on timescales and the Service had acknowledged this.
- 8.1.8 In regard to supporting newly recruited OC staff, LG advised the Committee of the different methods of support available. LG noted that feedback was being sought following the latest OC intake to identify whether additional support measures could be provided.
- 8.1.9 **The Committee scrutinised the report.**

9 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK

9.1 Culture Action Plan – Update Paper

- 9.1.1 LB provided an update to the 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. The following key points were highlighted:
- Summary of previous work undertaken and the identification of 3 key priorities.
 - Summary of the current work in progress, including the launch of the confidential reporting line, colleague experience survey and management development framework (MDF).
 - Recent HMFSI inspection provided a helpful external oversight.
 - Outline of the areas of focus for the newly formed sub groups – Operational Learning, Management and Development, Professional Standards and attraction and engagement.
- 9.1.2 In regard to mental ill health, the Committee queried whether there was an opportunity for the Service to enhance the understanding and awareness of how this can manifest itself. LB advised that this was being considered within the discipline work and both parties were already being offered support and monitoring. LB further advised that the sub group members would be appropriately trained and would build experience over time as they would have freedom from their day job to undertake these activities.
- 9.1.3 In regard to the MDF (pilot session), the Committee queried how assurances on the outputs/outcomes could be provided. LB advised that the pilot sessions had allowed feedback to be gathered. Due to resourcing challenges, LB noted that a train the trainer

approach was being used and that there was an initial focus on newly promoted Crew Commanders with wider roll out thereafter. LB further noted that the resourcing challenges related to both delivery of training and individuals being released to attend.

- 9.1.4 In regard to the CES focus group updates, LG advised that 15 individuals had volunteered to date and further engagement with local management teams would be undertaken to try to ensure a wider cross section of staff. LG noted that the focus groups would commence in October 2024 and would review the quantitative data to consider the influencing factors/experiences. The Committee commented on the limited number of participants to the survey and the limited membership of the focus groups. LB noted that potentially the same individuals would be involved, however there were other mechanisms for individuals to share their view ie stations visits, future pulse surveys, etc.
- 9.1.5 LB advised that the cultural roadmap was being developed and recruitment was ongoing for dedicated resource. LB noted that the roadmap could potentially be available for the next meeting (December 2024).
- 9.1.6 In regard to the MDF, LB advised that the initial focus was newly promoted Crew Commanders and Operations Control. LG noted that the aspiration for a roll out across all supervisory managers, however this was dependent on facilitation and consumption capacity. LB further noted that when capacity allowed the intention would be to incorporate this into every promotion process.
- 9.1.7 In regard to the HMFSI inspection, LB reminded the Committee that the HMFSI would immediately inform the Service of any critical issues identified during their inspection.
- 9.1.8 The Committee queried how the Service would address the culture for change. LB advised that once the culture action plan was included in the portfolio programme the Service would start to look at this area. LB noted that there needed to be a realisation that change was not a standalone issue and that it was the new normal of continuous change. AW commented on the differences in training required for the various roles within the organisation to ensure accurate messaging and leadership at each level.
- 9.1.9 The Committee commented on the opportunity to highlight areas of ongoing good work and positive culture in the organisation within the report.
- 9.1.10 **The Committee scrutinised the report.**

10 TRAINING

10.1 Training Function Update and Performance Report Quarter 1 2024/25

- 10.1.1 CMcG presented the high-level overview of the Training function activity and performance over Quarter 1 2024/25 and highlighted the following key points:
- Update on BA recovery plan progress including delivery of bespoke one day training and the revised approach to scheduling and identifying individuals to attend the course.
 - Update on the Wildfire training rollout and mop up sessions as required.
 - Reminder that from Q1 2022-23, KPI22-24 were re-baselined and mandatory timescales were re-introduced.
 - KPI22-24, whilst offering assurance, were not solely within the control of training. Training function remains committed to working with stakeholders to achieve targets.
 - KPI28 (% training function currency) decreased performance rates directly correlated with the intentional reduction in planned courses.
- 10.1.2 The Committee noted that the leading causes of accidents/injuries were attributable to situational awareness and asked how this was being addressed through training. CMcG noted lack of concentration was a main factor and this was a focus for training, such as risk assessments, identifying and communicating risks during incidents/trainings and raising awareness/responsibilities across all roles. JH advised that a safety and assurance training

framework was being developed and would stipulate the levels of training and awareness required for all levels within the Service. JH noted that the IOSH training had been refreshed and rolled out within the Service.

- 10.1.3 The Committee commented on the limited/shared computers at certain locations and queried the potential solution. CMcG noted that individuals were responsible for updating their own training records and this could cause issues with accessing computers/connectivity. The Service were aware of these issues and were identifying improvements that could be made. CMcG advised that training could be delivered remotely to a group and offline packages were also being developed/accessed if necessary.
- 10.1.4 In regard to KPI22 (core skills modules), the Committee sought assurance that the Service would review and monitor the achievability of training for On Call staff. CMcG commented on the number of mandatory modules required, flexibility to react to risk and individual needs and other non-training requirements. CMcG noted that the modules only formed part of the training delivery methodology. CMcG outlined the various tracking methods that could be used to check performance for individuals/stations.
- 10.1.5 AW noted that the Service were aware of the challenges and would continue to work closely with On Call colleagues to focus on addressing these issues.
- 10.1.6 In regard to VR (virtual reality) training, AW commented on recent discussions and the potential opportunities this would afford the Service.
- 10.1.7 AW advised the Committee that a meeting was scheduled with HMFSI to discuss the proposed future thematic audit on training.
- 10.1.8 **The Committee scrutinised the report.**

(Meeting broke at 1424 hrs and reconvened at 1430 hrs)

11 HEALTH AND SAFETY

11.1 Health and Safety Performance Report Quarter 1 2024/25

11.1.1 JH presented the Health and Safety Performance Report Quarter 1 2024/25 to provide an overview of progress against the Annual Health and Safety Improvement Plan 2024/25 and the Health and Safety KPIs. The following key areas were highlighted:

- Increase in verbal and physical attacks from 2 to 5 and 2 to 3 incidents, respectively.
- One RIDDOR reportable event during this quarter however, this was subsequently downgraded following quality assurance process.
- Update on non RIDDOR events noted including causation and continued monitoring/investigation.
- Reduction in Near Miss reporting which could be attributed to the increase in the previous reporting periods. Front line update briefing to be issued.
- Reviewing current electronic management system with a view to identifying a suitable replacement.
- Vehicle accidents continue in a similar trend. Recently trialled training programme to be rolled out across the Service.
- Low speed manoeuvres handbook and management guidance has been developed and approved.
- Good progress continues in relation to the improvement plans with increased engagement with business partners.
- Incorrect Operational Assurance chart has been included within the report; however, no events have occurred during this reporting period.
- Update on face fit testing which was 75% complete across the Service.

11.1.2 The Committee queried whether assurance could be given that there was the right reporting culture for accidents, near misses, etc across the Service. JH noted that following the recent

Safety Culture Survey, actions were created to develop the culture further and the responses received were positive. JH further noted that the front-line update briefing would be the first formal communication to highlight how near misses, etc fit into the reporting structure and how this information is used. JH highlighted that the draft Safety Culture Framework was being developed and would address specific areas that were identified with the safety culture survey as well as streamlining the reporting process.

11.1.3 Discussion took place on the importance of creating a safe environment for reporting events without the fear of repercussions, raising awareness of the benefits and improvements to firefighter safety through reporting events and responsibilities of individual roles.

11.1.4 The Committee requested further details on the breathing apparatus near miss incidents. JH advised that these related to equipment which had been used in a controlled situation (non-operational) and summarised the issues encountered. If deemed appropriate, equipment was impounded and formally inspected internally and/or by Draeger.

11.1.5 **The Committee scrutinised the report.**

12 AUDIT/INSPECTIONS

12.1 HMFSI Inspection Action Plan Updates and Closing Reports

12.1.1 JH and 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 and Management of Health and Safety. The following key points were highlighted:

- Management of Health and Safety action plan – Explanation provided on the revised timescales for Action 3.1, 5.2, 5.3 and 7.1.
- Health and Wellbeing action plan would be presented at the next meeting (December 2024).

12.1.2 In regard to the revised due dates, the Committee commented on the need to include the authorising process for this within the report.

12.1.3 **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:

- Sickness Absence Management: Two actions remain in progress.
- Scottish Vocational Qualifications: Good progress with final remaining actions awaiting closure. After the circulation of the report, Azets have confirmed that the evidence provided was sufficient for closure of the remaining actions.
- On Call Workforce Planning: Good progress with final remaining action awaiting closure. After the circulation of the report, Azets have confirmed that the evidence provided was sufficient for closure of the remaining action.
- Equality, Diversity and Inclusion: Good progress and remains within planned timescales.

12.2.2 In regard to the Sickness Absence Management review, LG advised that there were significant off systems recording of data and manual processes required to capture and collate data. LG noted that the PPFT project would help to address these issues.

12.2.3 LG advised that Recommendation 4.3 and 5.4 were reporting Amber within the report as the timeline had been exceeded and agreement from Azets had not yet been received. Once received, the recommendation would be amended to Green.

12.2.4 **The Committee scrutinised the report.**

(J MacDonald joined the meeting at 1455 hrs)

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 key points were highlighted:

- Risk POD015 (pension related exercises) noting that the different workstreams were progressing.
- Potential for discussions at the Integrated Governance Forum on where and how cross Directorate risks are allocated to the Committee. Committee commented on risks PPP001 and OD001 having core people implications but were not contained within the report and that OD001 was the featured risk spotlight.
- Risk TSA19 (limited finance/budget) noting that an investment commitment of £6 million had been secure for training assets over the next 3 years and this would help mitigate the risk.

13.1.2 **The Committee scrutinised the report.**

13.2 Risk Spotlight: Operations Control Staffing

13.2.1 JMac presented the risk spotlight to provide an update on the recruitment and retention of Operations Control (OC) function. The following key points were highlighted:

- Review of succession planning and recruitment strategy. Difficult to predict accurate retiral rates, as OC personnel can retire between 55 and 68 years of age with the Local Government Pension Scheme. The current trending age for retirement was 60 years old. The prediction for the next 2 years was 10 retirals (6 to date) in 2024 and 4 retirals in 2025. The next peak predicted was in 2030 with 10 retirals.
- Recruitment campaign was launched in September 2024 with 2 further campaigns planned for January and April/May 2025.
- Business case approved for recruitment of an additional 15 temporary OC personnel for a period of 23 months to provide resilience during testing, training and implementation of the new mobilising system.
- Exit interviews were undertaken and provided insight into factors for leaving the Service. An example of these factors were culture/relationship issues, challenging working environment, salary and flexible working. It was noted that the option to work from home was currently not available and would continue to be considered in the future.
- Currently reviewing structure within OC to ensure sufficient resources and resilience within the function.
- As OC staff were predominately female, periods of maternity leave impact on resilience on a regular basis.
- Consideration being given to introduce incremental salary rates/bands from development through to competent status.
- Limitations on the ability to offer flexible working.

13.2.2 The Committee offered their praise on the recent social media post (live call) used for the recruitment campaign.

13.2.3 The Committee commented on the accumulative effect on OC staff due to the nature of their role. JMac outlined the immediate procedures in place for OC staff handling significant incidents for both the individual and teams involved. OC staff also had access to initiate support through the Post Incident Support Policy (PISP). Due to the large geographical areas covered, a cumulative PISP was recorded and reviewed to help identify if early intervention was required for any individuals/teams.

13.2.4 In regard to potential home working, JMac confirmed that this would be restricted to non-emergency response activities.

- 13.2.5 In regard to the shift pattern, JMac noted that this mirrored the shift patterns on stations with the addition of a 12-hour mid shift. In general, OC staff preferred the 4 longer shifts.
- 13.2.6 JMac advised that it was more likely for OC staff to transfer into Operational roles and there were a few OC staff currently on dual contract (On Call).
- 13.2.7 In regard to accumulative trauma, the Committee queried whether there were regular reflective practices or debriefs. JMac advised the Committee that debriefs were undertaken, staff had access to all health and wellbeing resources and were able to withdraw to quiet rooms if necessary.

13.2.8 The Committee scrutinised the report.

(J MacDonald left the meeting at 1515 hrs)

14 PARTNERSHIP WORKING

14.1 Employee Partnership Forum (EPF)

14.1.1 MW advised the Committee that the last scheduled meeting (27 August 2024) had been 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 (8 August 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:

- Risk spotlight on ICT recruitment and retention (FCS018)
- Safecall Confidential Reporting Line to be moved from March 2025 to June 2025

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 Integrated Governance Forum meetings:

- How are risks determined for each Committee.

16 REVIEW OF ACTIONS

16.1 One formal action was recorded during the meeting.

17 DATE OF NEXT MEETING

17.1 The next meeting is scheduled to take place on Thursday 5 December 2024.

17.2 There being no further matters to discuss, the public meeting closed at 1528 hrs.

REPORTS FOR INFORMATION ONLY:

The following reports provided for information only were taken as read.

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

(Public meeting broke at 1530 hrs and reconvened in Private session at 1540 hrs)

PRIVATE SESSION

18 MINUTES OF PREVIOUS PRIVATE MEETING: THURSDAY 6 JUNE 2024

18.1 The minutes of the private meeting held on 6 June 2024 were approved as a true record of the meeting.

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

19.1 The draft minutes of the RANSc meeting on 6 June 2024 had been circulated to the Committee and a verbal update from the meeting on 12 September 2024 was provided.

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

20 KEY CASE UPDATES 2024/25 – QUARTER 1

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

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

DRAFT

PEOPLE COMMITTEE – ROLLING ACTION LOG



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Background and Purpose

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

The status of actions are categorised as follows:

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

Actions/recommendations

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

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

OFFICIAL

Minute Ref	Action	Lead	Due Date	RAG Status	Completion Date	Position Statement
Meeting Date: 12 September 2024						
8.1.2	People Performance Report Quarter 1 2024/25: Further details to be provided off table around the different pension remedy workstreams in operation within the Service.	LG	October 2024		October 2024	Complete (05/12/2024): Risk Spotlight briefing note, previously submitted to the March 2024 meeting, was recirculated by email on 17 October 2024.



Report No: C/PC/50-24

Agenda Item: 7

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 DECEMBER 2024						
Report Title:		HIGH LEVEL KEY PERFORMANCE INDICATOR REPORT – 2024-25 Q2						
Report Classification:		For Scrutiny	SFRS Board/Committee Meetings ONLY					
			For Reports to be held in Private					
				Specify rationale below referring to		<u>Board Standing Order 9</u>		
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>
1		Purpose						
1.1	To provide members with the second quarter performance of KPIs 22 – 29 (Training), KPIs 46 – 49 (People) & KPIs 50 – 56 (Safety & Assurance). Three annual performance indicators KPIs 62, 63a and 63b (People) are also reported in the fourth quarter report.							
2		Background						
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 annual 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.							
3		Main Report/Detail						
3.1	This paper covers all performance indicators stated in the PMF intended for scrutiny by the People Committee.							
3.2	Exceptional variation: <ul style="list-style-type: none"> • None 							
3.3	Deteriorating (long-term): <ul style="list-style-type: none"> • 46 - On Call Retained FTE 							
3.4	Improving (long-term): <ul style="list-style-type: none"> • 26 - % Core Skills Currency • 27 - % Specialist Rescue Currency • 46 - Off Station FTE • 50 - Verbal attacks on Firefighters • 55 - Vehicle Accidents 							

<p>3.5</p> <p>3.6</p>	<p>Not changing:</p> <ul style="list-style-type: none"> • 22 - % Core Skills Modules Completed • 23 - % Advanced, Support & Emerging Risks Modules Completed • 24 - % Flexi Officer Module Completion • 25 - % Incident Command Module Completion • 28 - % Training Function Currency • 46 - On Call Volunteer FTE • 46 - Flexi Officer FTE • 46 - Operations Control FTE • 46 - Resource Based Crewing FTE • 46 - Support Staff FTE • 46 - Rural Full-time FTE • 47 - Vacancies Rate • 48 - Turnover Rate • 49 - Absence Rate • 51 - Physical attacks on Firefighters • 52 - RIDDOR • 53 - Accidents and Injuries (excl. RIDDOR) • 56 - % YTD H&S Actions Completed <p>Not known – limited data or unspecified direction;</p> <ul style="list-style-type: none"> • 29 - Customer Satisfaction Rate • 54 - Near Miss
<p>4</p>	<p>Recommendation</p>
<p>4.1</p>	<p>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 Power BI Landing Page.</p>
<p>5</p>	<p>Key Strategic Implications</p>
<p>5.1</p> <p>5.1.1</p>	<p>Risk 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.</p>
<p>5.2</p> <p>5.2.1</p>	<p>Financial There are no specific financial issues raised within this paper.</p>
<p>5.3</p> <p>5.3.1</p>	<p>Environmental & Sustainability There are no specific Environmental & Sustainability implications addressed in this paper.</p>
<p>5.4</p> <p>5.4.1</p>	<p>Workforce Performance measures reported for Strategic Outcomes 6 provide insight to workforce.</p>
<p>5.5</p> <p>5.5.1</p>	<p>Health & Safety Performance measures reported for Strategic Outcomes 6 provide insight to safety and assurance.</p>
<p>5.6</p> <p>5.6.1</p>	<p>Health & Wellbeing There are no specific Health and Wellbeing implications addressed in this paper.</p>

OFFICIAL

5.7 5.7.1	Training Performance measures reported for Strategic Outcomes 2 & 6 provide insight to delivery of training and safety & assurance.	
5.8 5.8.1	Timing 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	Performance All performance measures reported are linked to Strategic Outcomes 2 & 6 with a focus on personnel.	
5.10 5.10.1	Communications & Engagement There are no specific Communications & Engagement implications addressed in this paper.	
5.11 5.11.1	Legal There are no specific Legal implications addressed in this paper.	
5.12 5.12.1	Information Governance DPIA completed - No	
5.13 5.13.1	Equalities EHRIA completed - No	
5.14 5.14.1	Service Delivery Performance measures reported for Strategic Outcomes 2 & 6 are linked to Service Delivery.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Lyndsey Gaja, Interim Director of People & ACO Craig McGoldrick, Training, Safety & Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	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.
8	Appendices/Further Reading	
8.1	Appendix A: PDF copy of PBI0068 report	
8.2	<u>Further Reading:</u> Link to Power BI Landing Page .	
Prepared by:		Chris Fitzpatrick, Business Intelligence and Data Services Manager
Sponsored by:		Richard Whetton, Head of Corporate Governance, Strategic Planning, Performance and Communications Directorate

Presented by:	Lyndsey Gaja, Interim Director of People & Craig McGoldrick, Assistant Chief Officer, Director of Training, Safety & Assurance	
Links to Strategy and Corporate Values		
<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.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Training, Safety & Assurance Board</i>	<i>12 December 2024</i>	<i>For scrutiny</i>
<i>Corporate Board</i>	<i>09 December 2024</i>	<i>For scrutiny</i>
<i>People Committee</i>	<i>05 December 2024</i>	<i>For scrutiny</i>



SCOTTISH

FIRE AND RESCUE SERVICE

Working together for a safer Scotland

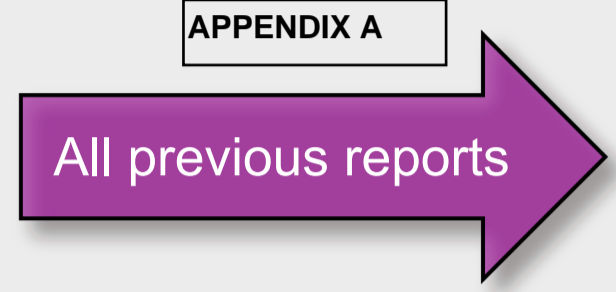
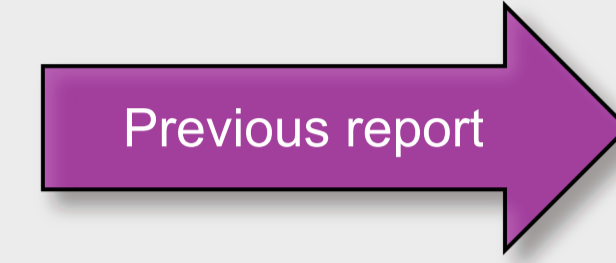
People

People Committee Performance Report



**LIVE
MANAGEMENT
INFORMATION**

Latest quarter shown: **2024-25 Q2**



You can use these navigational buttons to go to other pages, or use the contents panel at the left-hand side of the screen



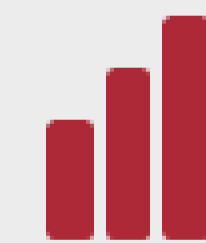
Welcome

The People Committee Performance Report provides a view of how the Scottish Fire and Rescue Service is performing against its corporate performance measures, as mapped against our Strategic Plan Outcomes.

Our Performance Management Framework 2023-24 defines these corporate performance measures, whilst the Strategic Plan 2022-25 outlines the high-level outcomes through which the Service will continually work towards its overall purpose.

This report is a tool to support and scrutinise effective delivery of the Strategic Plan 2022-25. Each KPI has an owner, who's responsible for monitoring and commenting on its performance.

Key contact: Bl@firescotland.gov.uk



**BUSINESS
INTELLIGENCE**



LIVE MANAGEMENT INFORMATION

There is no confidential information in this report – content can be shared with partners.
Data is subject to change.

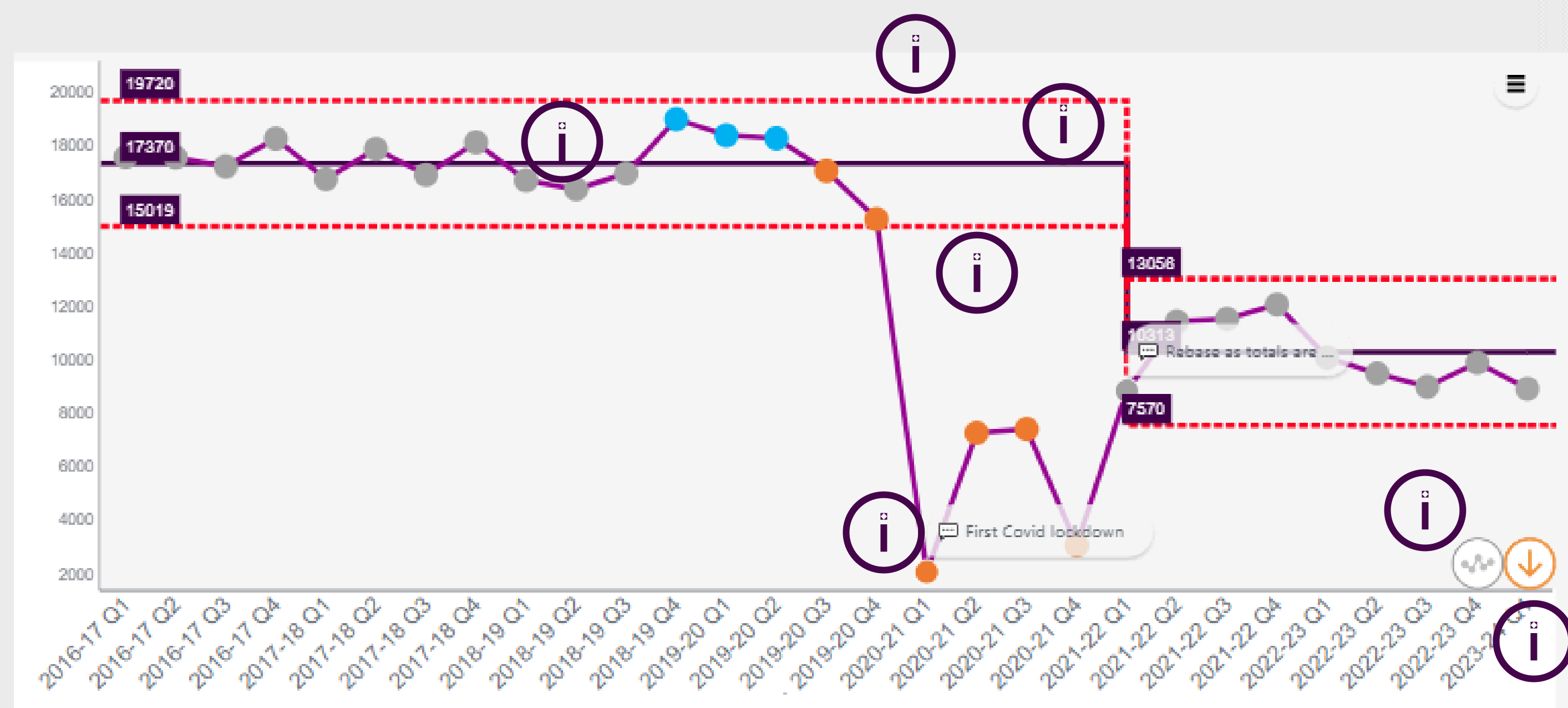
This report presents data over time for each of the quantitative performance measures as detailed in the [Performance Management Framework 2023-24](#), broken down into the Strategic Plan Outcomes. The Contents page (next) provides direction as to where you can find certain information.

SPC Charts

In this PMF Board Report, we use **Statistical Process Control (SPC) charts** to analyse and visualise how the Service is performing against each of its corporate performance measures. We also use commentary as provided by the KPI owner to provide context and highlight key messages. This approach to analysis is how the Business Intelligence Team will analyse, interpret and present performance data going forwards.

SPC is an analytical technique that **plots data over time**. It helps us to **understand variation** and guides us to take the most appropriate action.

SPC alerts us to a situation that may be deteriorating, shows us if a situation is improving, shows us how capable a system is of delivering a standard or target, and shows us if a process that we depend on is reliable and in control.



Above: anatomy of a SPC chart

How to Interpret SPC Charts - see chart - anatomy of a SPC chart

Normally data points will fall **between the upper and lower control limits**. If any of the following scenarios apply, the change needs to be investigated and an explanation provided. Over time this lets us analyse performance in a meaningful way.

- An **ORANGE** data point indicates special cause variation of particular concern and needing action. For example, whenever a data point falls outside of a control limit, or if 2 out of 3 data points are close to a control limit.
- A **BLUE** data point indicates where improvement appears to lie.
- A **GREY** data point indicates no significant change (common cause variation) as well as the baseline.

The following variation icons will also appear on each SPC chart:

Common cause – no significant change	Special cause of concerning nature or higher pressure due to (H)igher or (L)ower values	Special cause of improving nature or lower pressure due to (H)igher or (L)ower values

Source: [making-data-count-getting-started-2019.pdf \(england.nhs.uk\)](#)

Data source for this report:

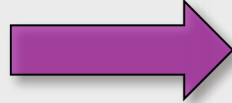
Details of each data source can be found on the Index page. Some of these are automated whilst others are manual.

Frequency of update:

This report will be updated quarterly.

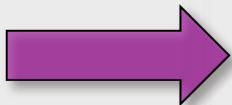
OUTCOME 02 (Response)

Communities are safer and more resilient as we respond effectively to changing risks.



OUTCOME 06 (People)

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



Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.

KPI	Indicator	Purpose	Geography	Frequency	Target	Business Area
22	% of completion of Operational Core Skills modules against training requirement	Percentage of completion of Operational Core Skills modules against Training for Operational Competence Framework which covers Wholetime/On-call/ Day Duty Systems.	National	Quarterly	95%	Training
23	% of completion of Advanced, Support and Emerging Risks Modules against training requirement	Percentage of completion of Advanced, Support and Emerging Risks Modules against the Training for Operational Competence Framework which covers Wholetime/On-call/ Day Duty Systems.	National	Quarterly	95%	Training
24	% completion of Flexi Duty Officers against training programme	Percentage of completion of Flexi Duty Officer Modules against the Training for Operational Competence Framework which cover Flexi Duty Officers.	National	Quarterly	95%	Training
25	% of completion of Incident Command currency following National Training Standards	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.	National	Quarterly	91%	Training
26	% of completion of Core Skills currency following National Training Standards	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.	National	Quarterly	73%	Training
27	% of completion of Specialist Rescue currency following National Training Standards	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.	National	Quarterly	92%	Training
28	% of all Training Function Courses delivered versus total number of courses scheduled within agreed Training Delivery Plan	Percentage of all Training Function Courses delivered versus total number of courses scheduled within agreed Training Delivery Plan	National	Quarterly	95%	Training
29	Training Function Course Delivery (Candidate Satisfaction %)	Percentage of candidate satisfaction against Training Function Course Delivery	National	Quarterly	95%	Training



Response

Communities are safer and more resilient as we respond effectively to changing risks.



KPI 22 % Core Skills Modules Completed

95%

PURPOSE: Percentage of completion of Operational Core Skills modules against Training for Operational Competence Framework which covers Wholtime/On-call/ Day Duty Systems.

OWNER: Head of Training

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach

SUMMARY

On-call colleagues face ongoing challenges due to the time required for Training, which is impacted by the available time they have. The limited number of computers and connectivity issues further hinder completion rates. The Learning & E-Development team continues to provide support as needed.

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

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach

SUMMARY

There has been a slight increase in completion rates across Wholtime, On-Call (Retained), and Day Duty groups. However, there has been a slight decrease in completion rates for On-Call Volunteers.

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

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach

SUMMARY

The Flexi Duty Officer (FDO) Training for Operational Competence (TFOC) shows an increase compared to the previous quarter. Ongoing communication within this cadre will continue, to encourage completion rates.

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

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach

SUMMARY

Q2 of 2024-25 showed Incident Command completion rates remaining high, with only a small decrease across the Incident Command Level 2 courses. However, all courses continue to remain above target levels.

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

Q2 of 2024-25 showed a continued increase in completion rates across all core skills. The Breathing Apparatus Recovery Plan continues to make 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

Q2 of 2024-25 showed a slight decrease in completion rates across 3 out of the 5 specialist skills. However, rates continue to remain above set targets.

Response



Communities are safer and more resilient as we respond effectively to changing risks.

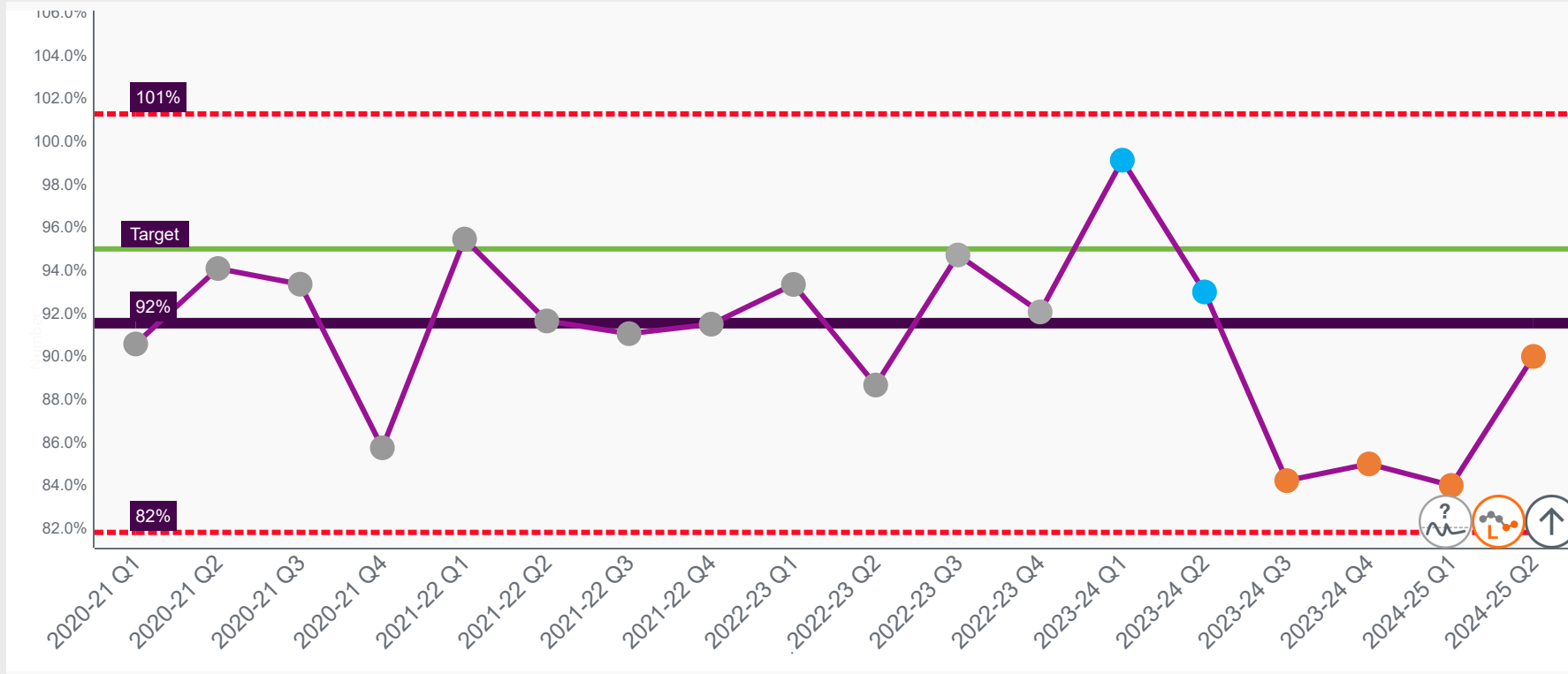
KPI 28 % Training Function Currency



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

During Q2 2024-25, the Training Function achieved a 90% completion rate, meeting established Key Performance Indicator (KPI) compliance levels. This success aligns with our commitment to delivering high-quality training despite operational challenges.

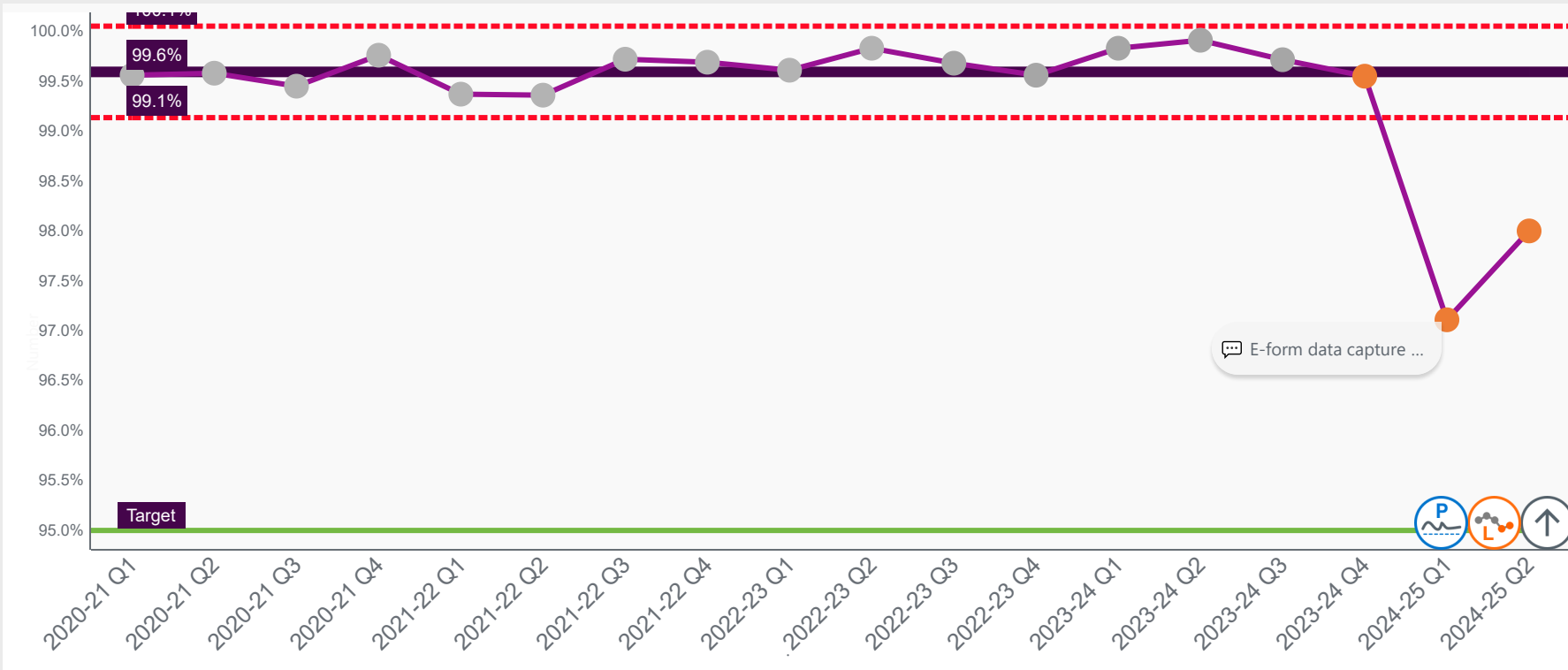
KPI 29 Training - Customer Satisfaction Rate



95%

PURPOSE: Percentage of candidate satisfaction against Training Function Course Delivery

OWNER: Head of Training



SUMMARY

Following the drop recorded in Q1 due to the new electronic feedback process, Q2 shows an increase in candidate satisfaction which remains above target. The change in the feedback process is providing the Training Function with more qualitative feedback.

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
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - RBC	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 - RDS	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 - RFT	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 - SS	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 - VDS	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
47	% staff vacancies	Monitoring the vacancy rate provides insight into the Service's ability to attract, recruit and retain staff, and the time to hire.	National	Quarterly	Track	People
48	% staff turnover	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.	National	Quarterly	Track	People
49	% staff absence	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.	National	Quarterly	Reduce against previous year	People
50	Number of incidents in which there was a verbal attack on a firefighter	Demonstrates how many verbal attacks have occurred to SFRS personnel by members of the public	National	Quarterly	Reduce against previous year	Safety and Assurance
51	Number of incidents in which there was a physical attack on a firefighter	Demonstrates how many physical attacks have occurred to SFRS personnel by members of the public	National	Quarterly	Reduce against previous year	Safety and Assurance
52	Number of RIDDOR reportable injuries	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.	National	Quarterly	Reduce against previous year	Safety and Assurance
53	Number of accidents and injuries	Demonstrates total accidents and injuries to occur through workplace accidents	National	Quarterly	Reduce against previous year	Safety and Assurance
54	Number of near miss events	Total recorded number of near miss events that had the potential to lead to an accident or ill health	National	Quarterly	Track	Safety and Assurance
55	Number of vehicle accidents	Total number of events that involved vehicle accidents	National	Quarterly	Reduce against previous year	Safety and Assurance
56	Completion of Health and Safety Improvement Plans	Demonstrates the completion of improvement plans to drive safety performance	National	Quarterly	100%	Safety and Assurance
62	Gender balance	Allows the Service to report on and understand gender balance of various staff groups and how representative our workforce is of communities we serve	National	Annually	Increase proportion of female staff	People
63a	% of staff choosing to enter data into the sensitive information fields of iTrent	This indicator shows the % of SFRS Staff who entered data into the sensitive information fields in iTrent against key protected characteristics.	National	Annually	Increase against previous year	People
63b	% of staff choosing to withhold their demographic equalities data in iTrent.	This indicator shows the % of Staff who entered data into the Sensitive Information fields who then selected the Prefer not to Say response for that characteristic.	National	Annually	Reduce against previous year	People



People

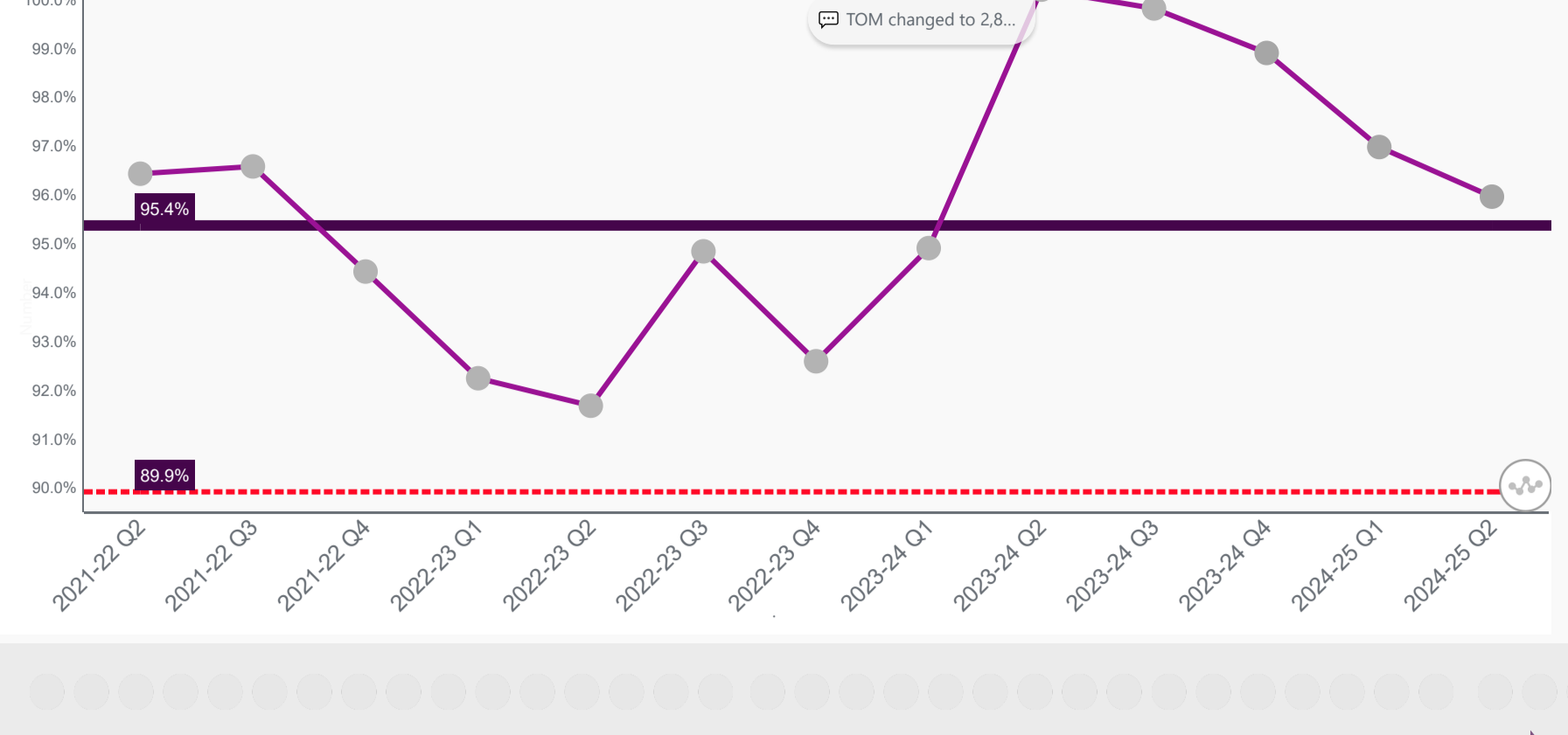


The experience of those who work for SFRS improves as we are the best employer we can be.

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

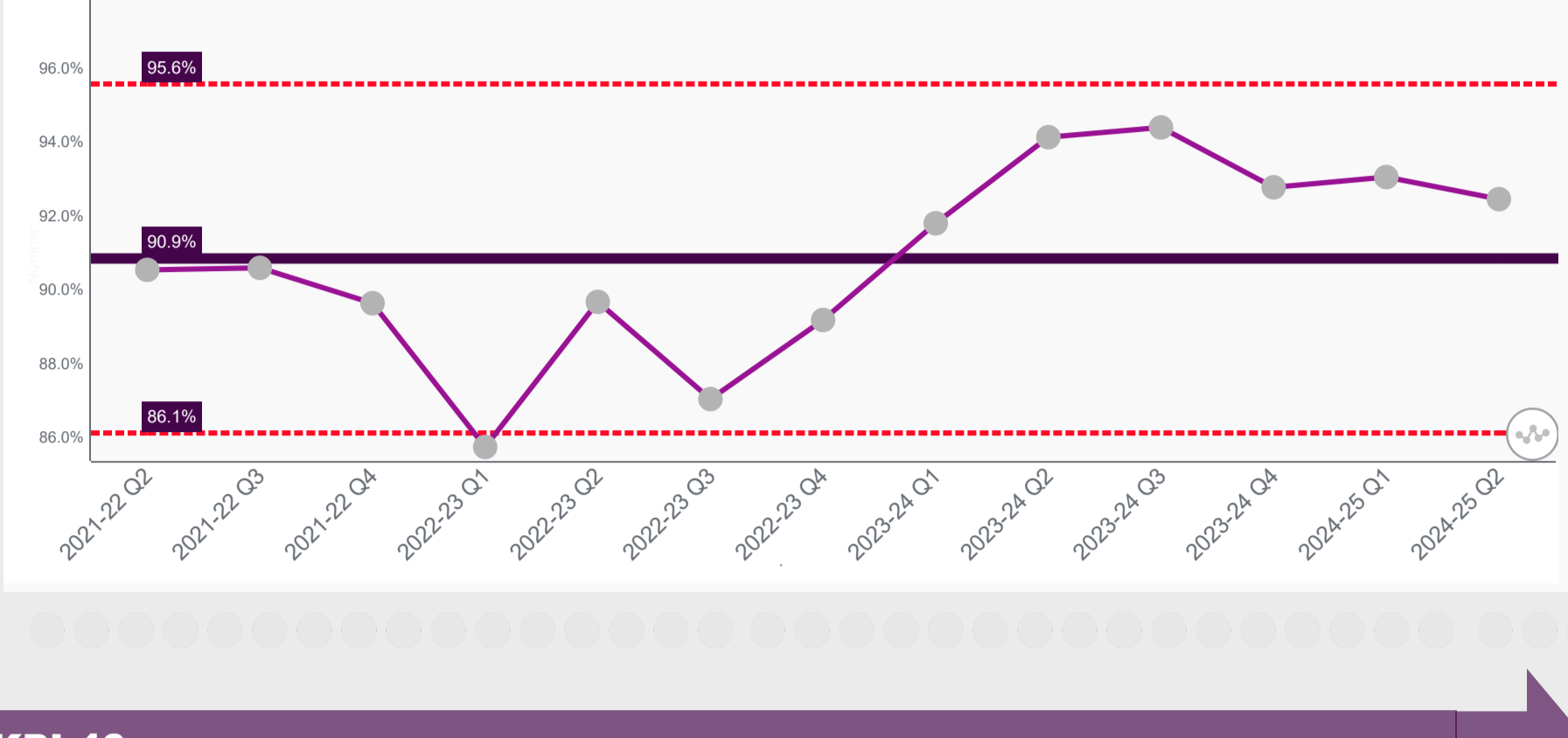


SUMMARY
RBC against TOM has primarily decreased due to forecast retirements. This will be partly off set by the wholetime trainee group that commenced in August, with further wholetime recruitment activity scheduled for Q4.

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

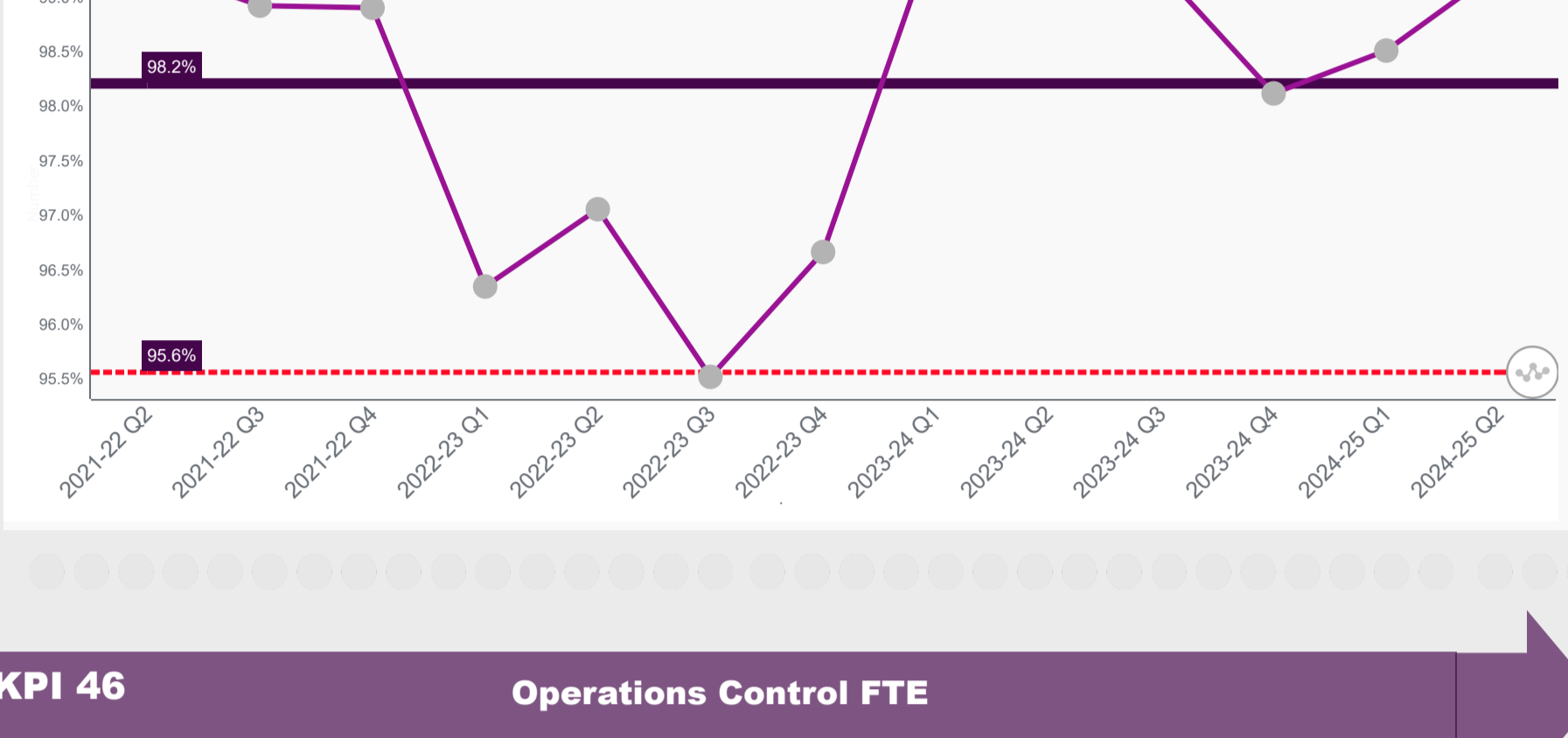


SUMMARY
The off station FTE has remained broadly consistent over the past five quarters.

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

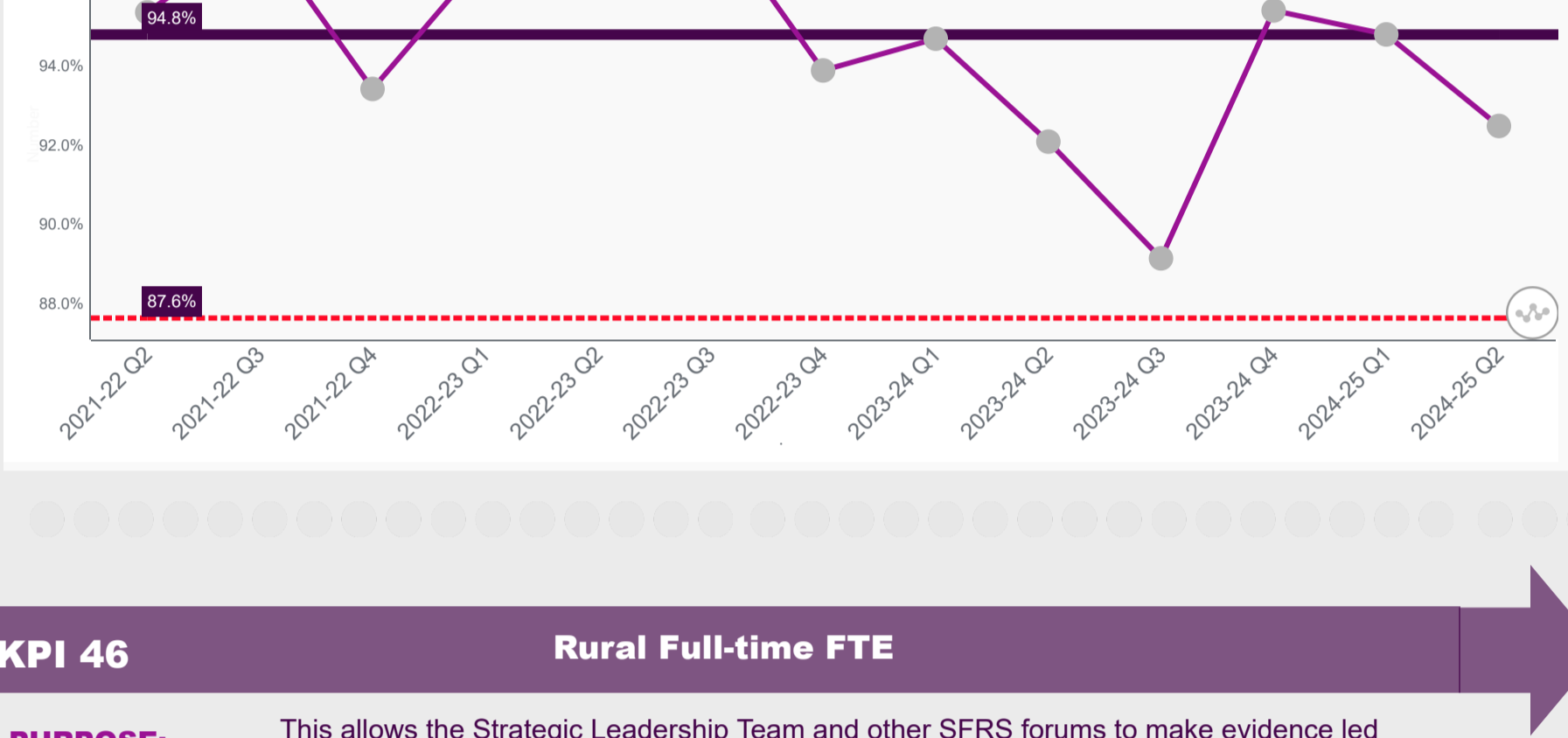


SUMMARY
As a result of a halving of the FDO retirements rate between quarters one and two, combined with delivery of promotional activity, the FDO TOM is almost fully populated.

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

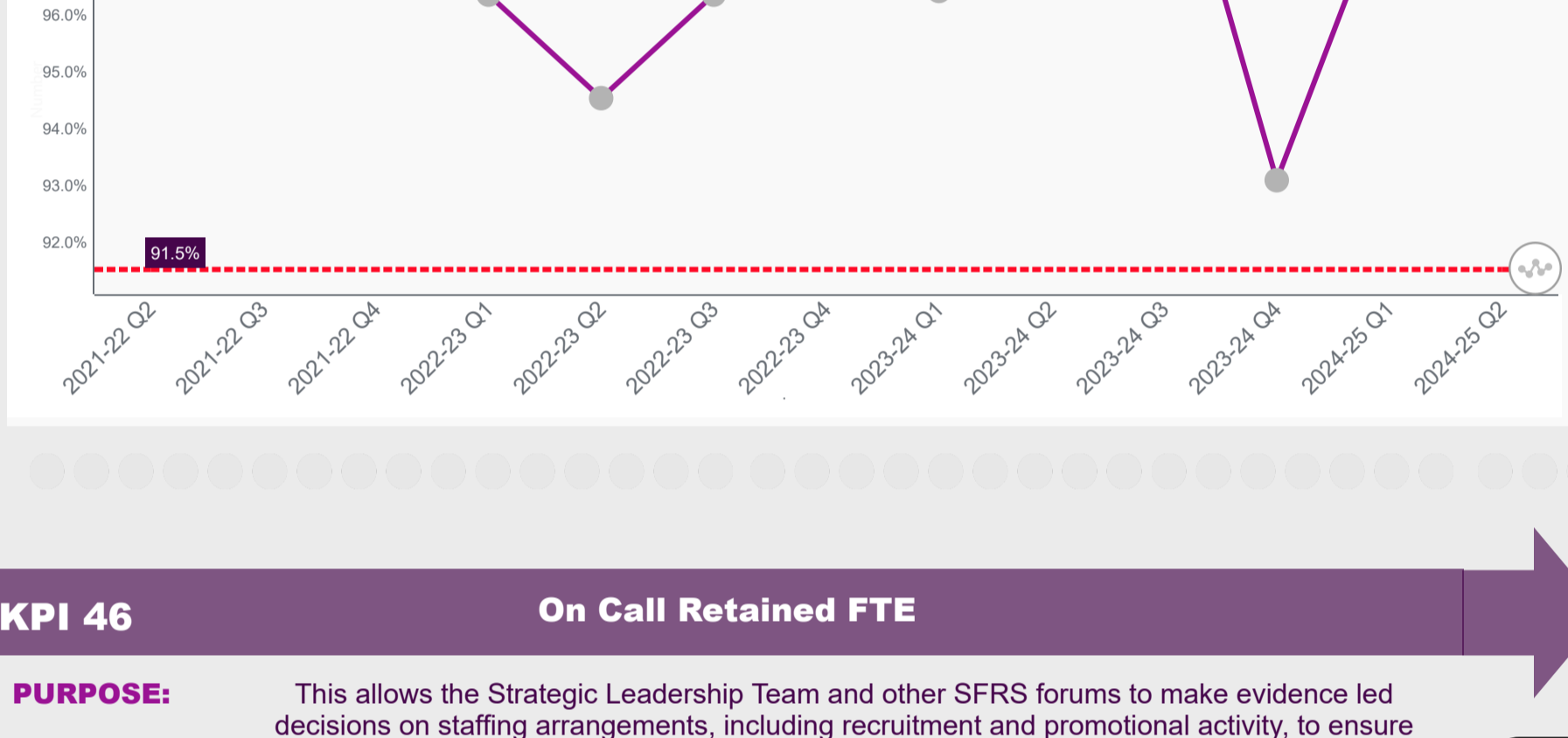


SUMMARY
The FTE in Operations Control reduced by 4 in Q2. A successful recruitment campaign is progressing to fill all existing vacancies and create additional capacity within Operations Control to support strategic priority projects.

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

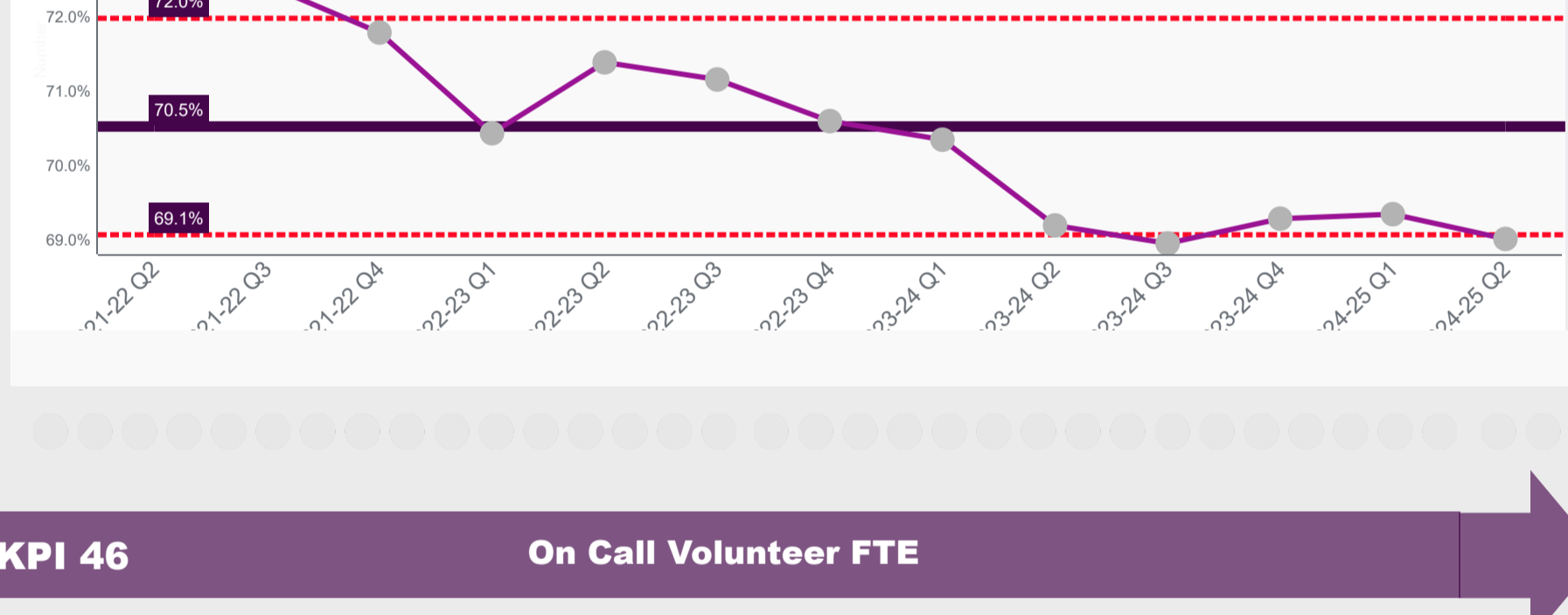


SUMMARY
Recruitment activity has been completed to fill the 4 FTE vacancies that arose in Q4 2023-24, meaning this staff group is now fully established.

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

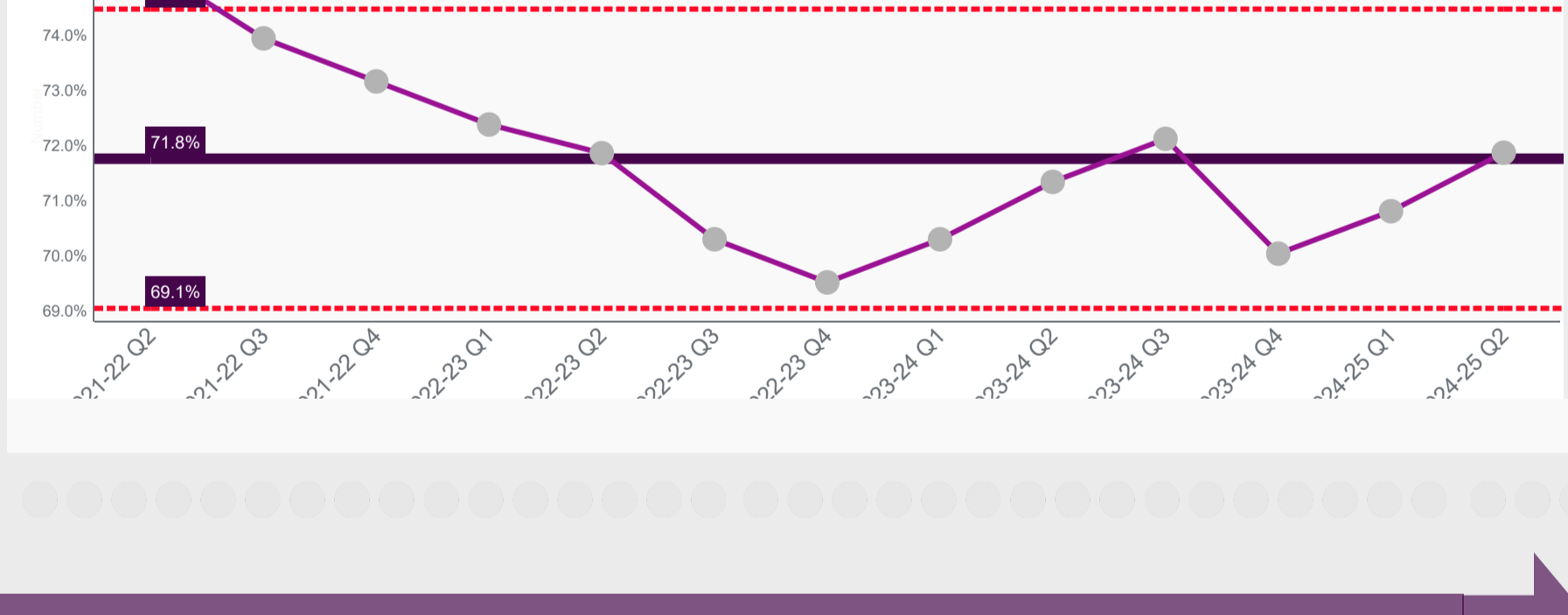


SUMMARY
On-call attraction and retention remaining challenging. In addition to work progressing through the On-call Strategic Coordinating Group, it is anticipated that changes to retaining fees and contractual flexibility to be introduced in Q4 will enhance attraction and retention for this colleague group

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

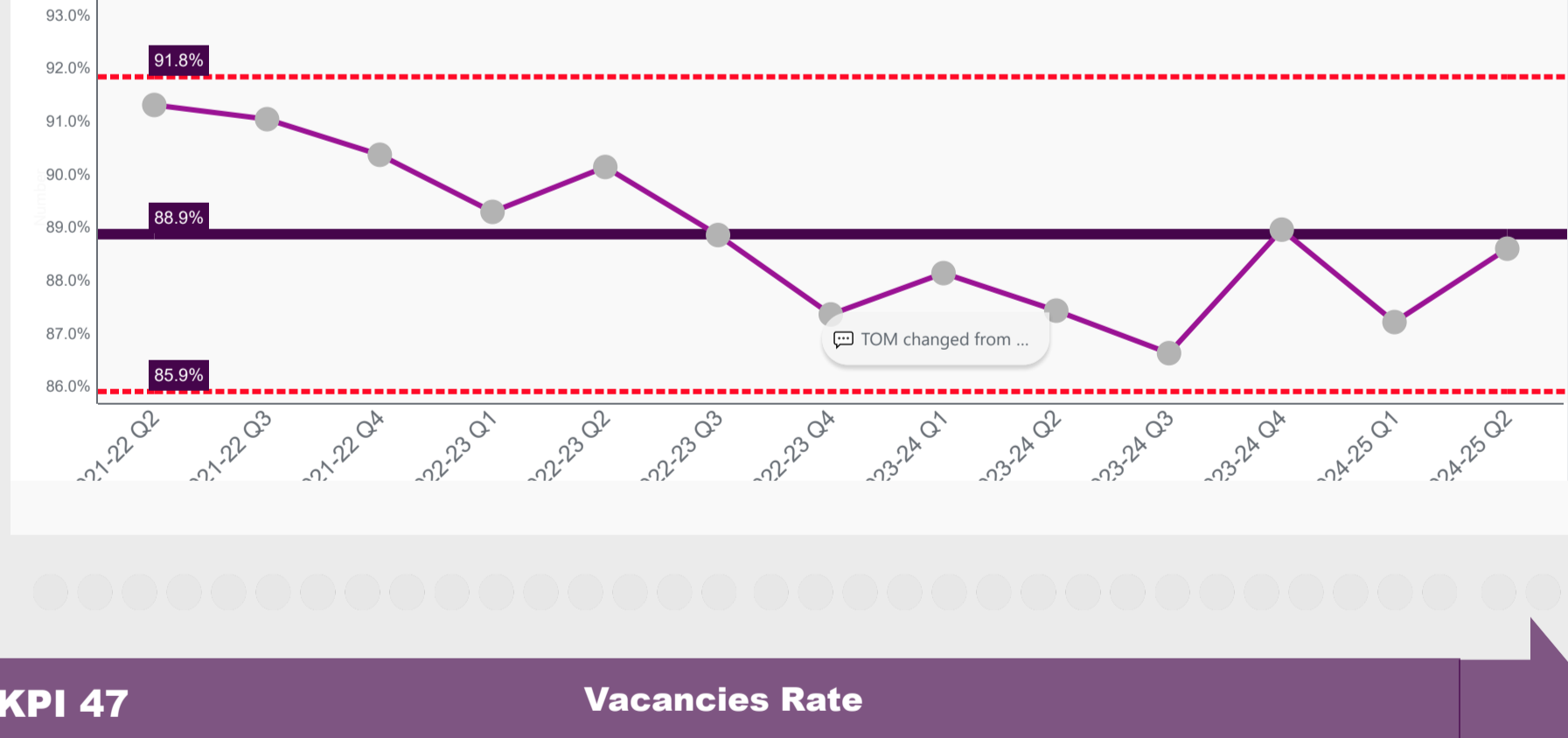


SUMMARY
On-Call Volunteer FTE shows a slight improvement in the position since last Quarter. Work continues to improve the position further.

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

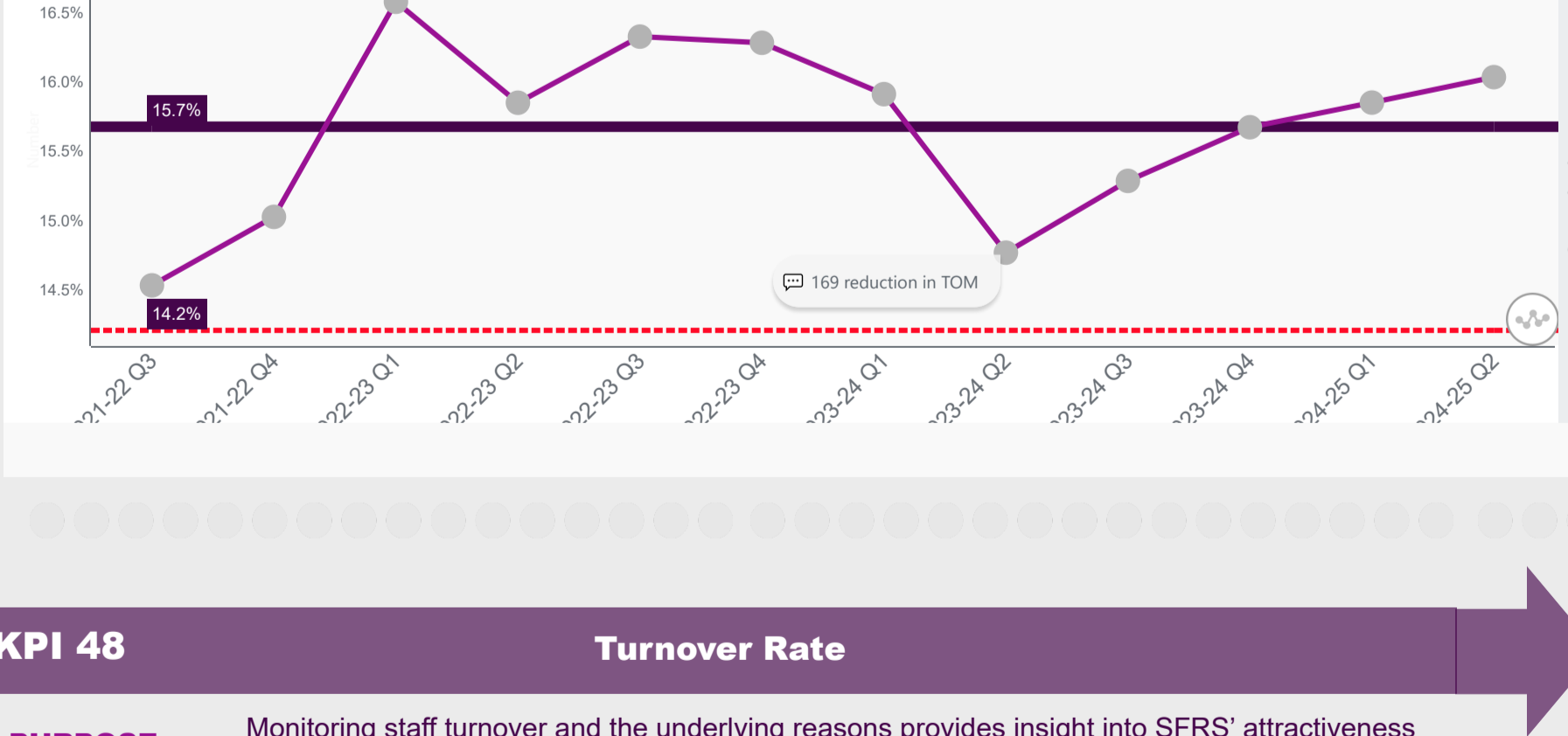


SUMMARY
Successful recruitment processes have reduced the vacancy rate in the support staff group this quarter, which continues to be within expected levels of variation.

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

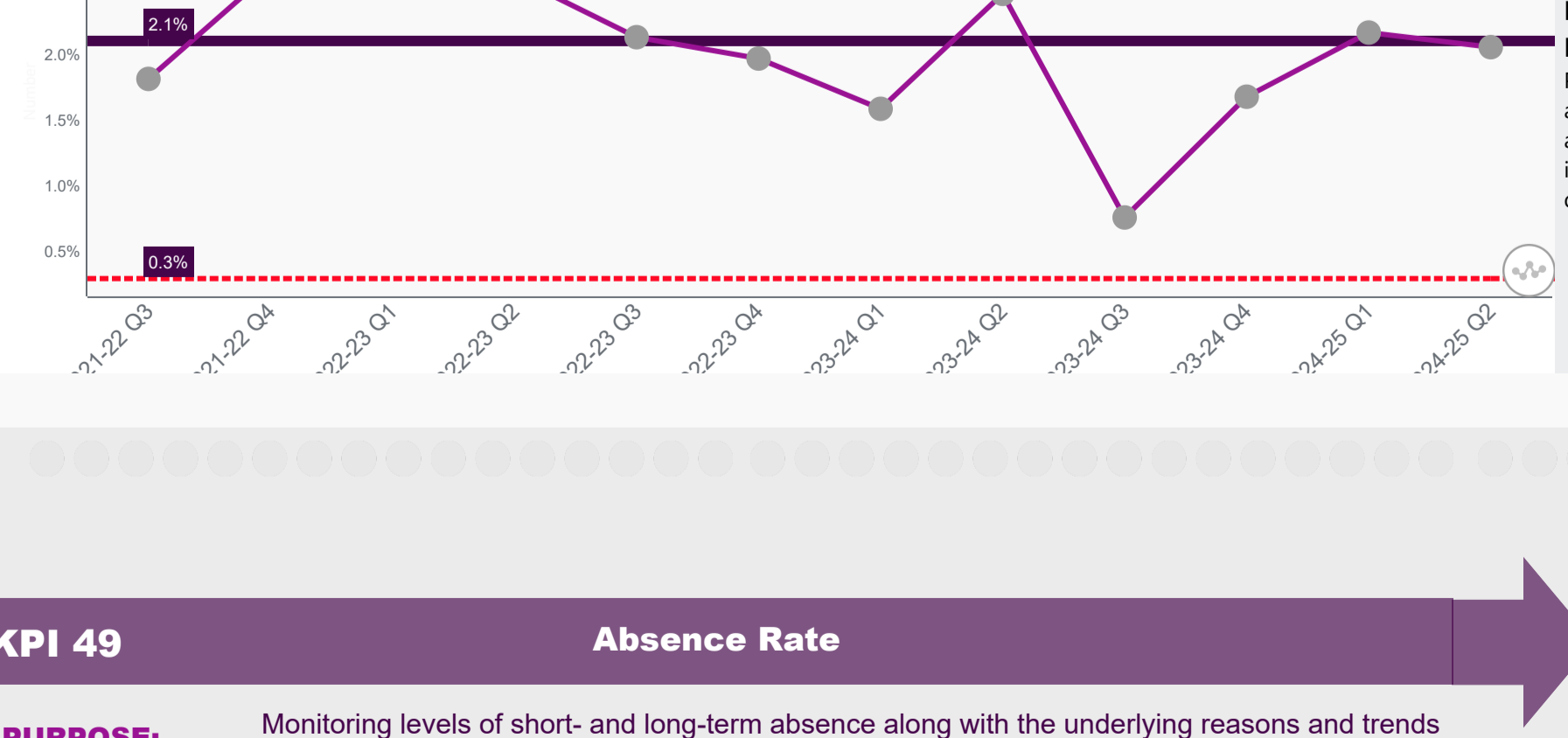


SUMMARY
There was no significant change in the vacancy rate in quarter 2, which remains within historic parameters.

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

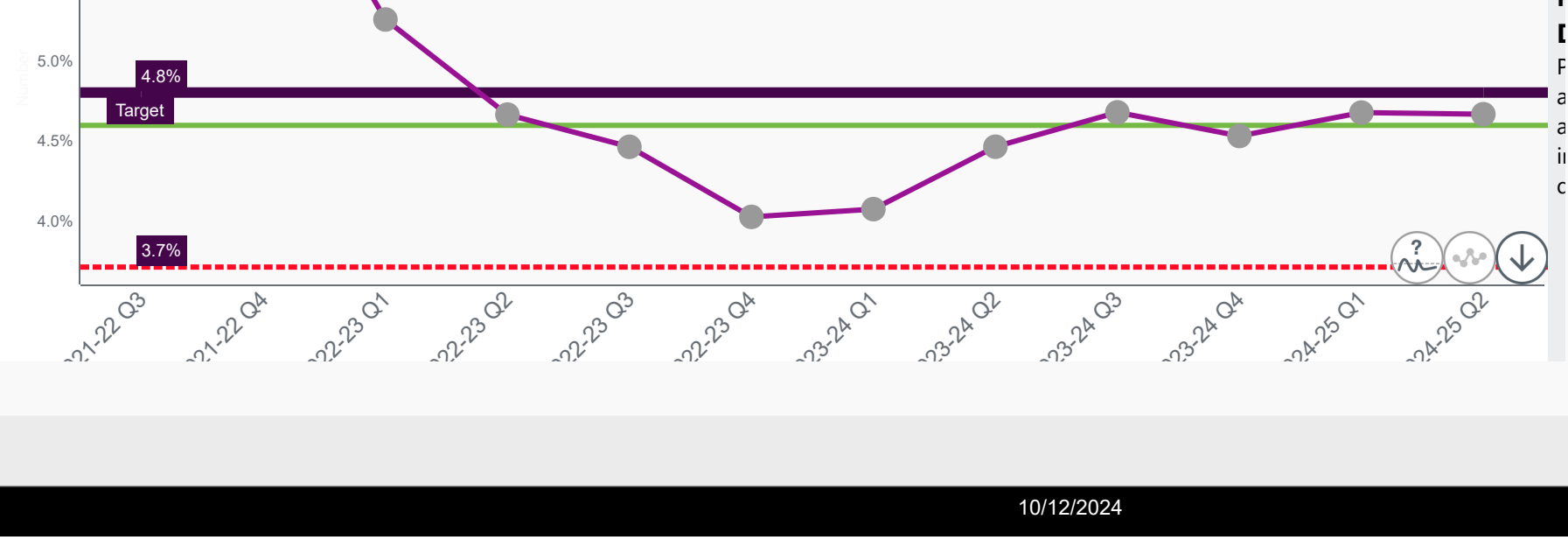


SUMMARY
Turnover remains in line with historic norms and is broadly consistent across staff groups.

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
Absence rates have continued to remain broadly stable since Q2 2022-23.

People



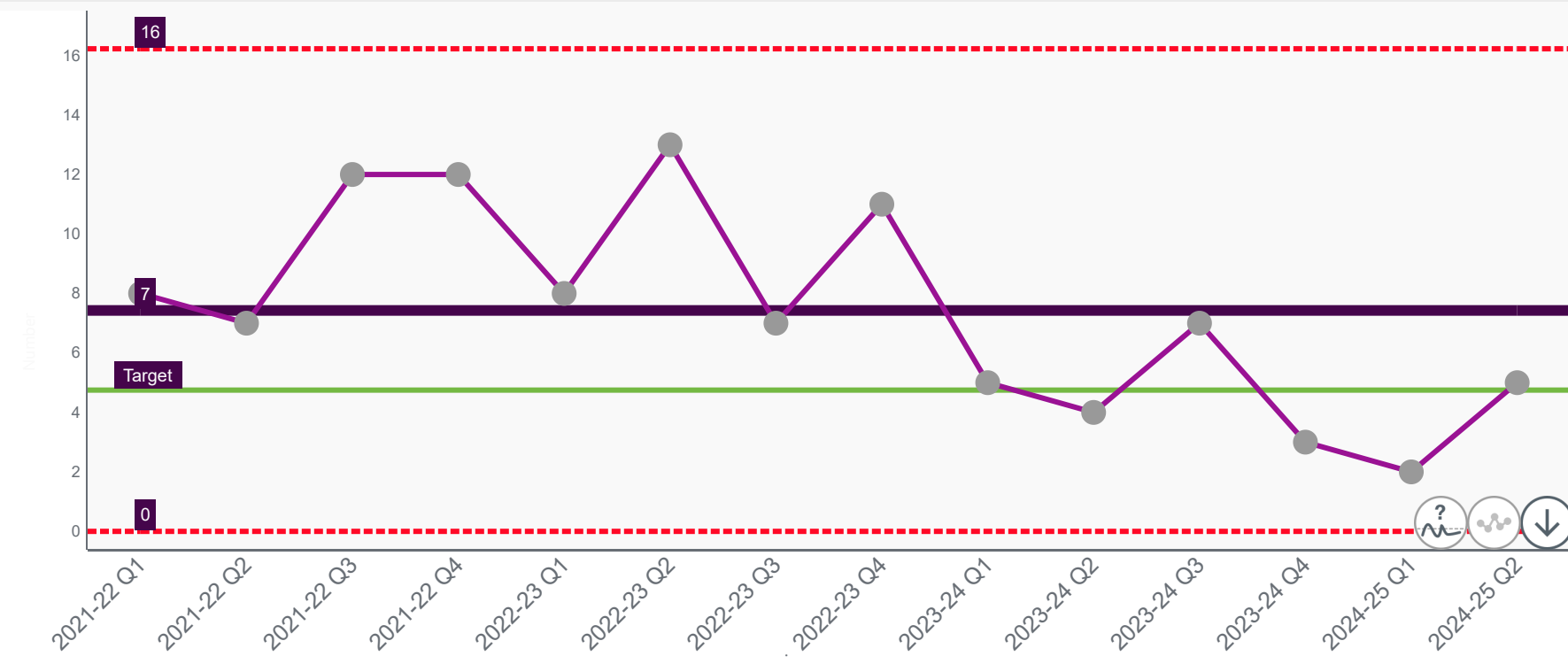
The experience of those who work for SFRS improves as we are the best employer we can be.

KPI 50 Verbal Attacks on Firefighters

PURPOSE: Demonstrates how many verbal attacks have occurred to SFRS personnel by members of the public

Reduce against previous year

OWNER: Head of Safety and Assurance



SUMMARY

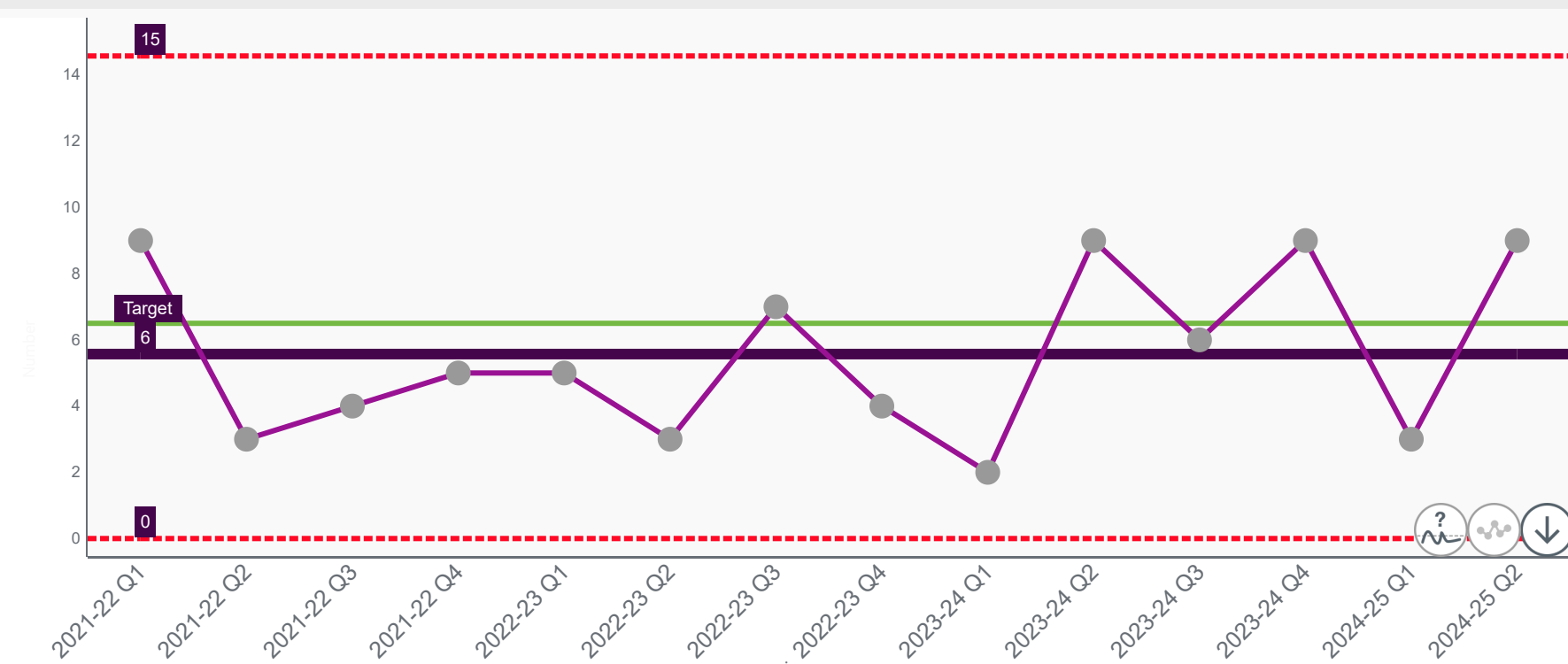
The Scottish Fire and Rescue Service has run a media campaign against Acts of Violence. Staff are encouraged to report all AoV incidents. A change in season historically sees an increase in AoV towards personnel.

KPI 51 Physical Attacks on Firefighters

PURPOSE: Demonstrates how many physical attacks have occurred to SFRS personnel by members of the public

Reduce against previous year

OWNER: Head of Safety and Assurance



SUMMARY

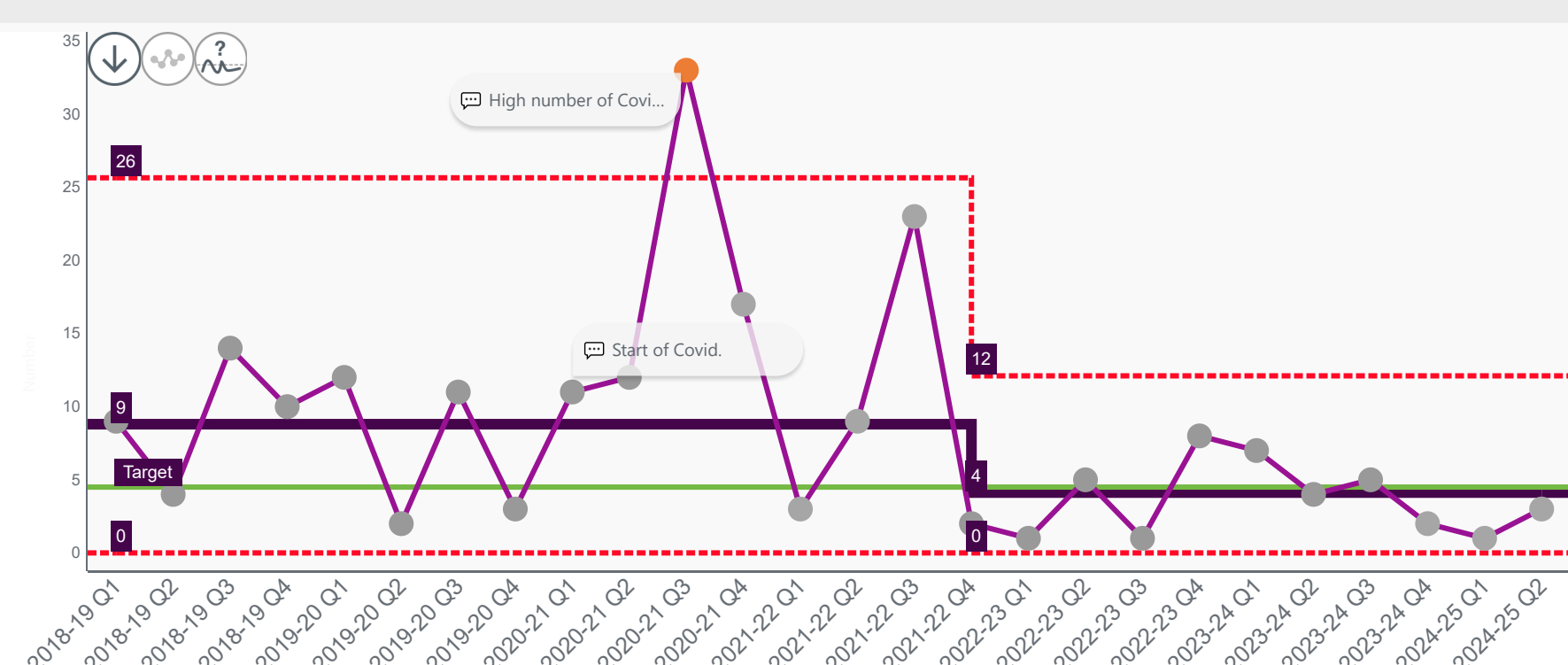
A spike is noted which may be attributed to seasonal increase. The Scottish Fire and Rescue Service has run a media campaign against Acts of Violence. There has been no injuries reported, the majority of incidents involve missiles, i.e. stones etc.

KPI 52 Number of RIDDOR reportable injuries

PURPOSE: Demonstrates how many notifications the 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.

Reduce against previous year

OWNER: Head of Safety and Assurance



SUMMARY

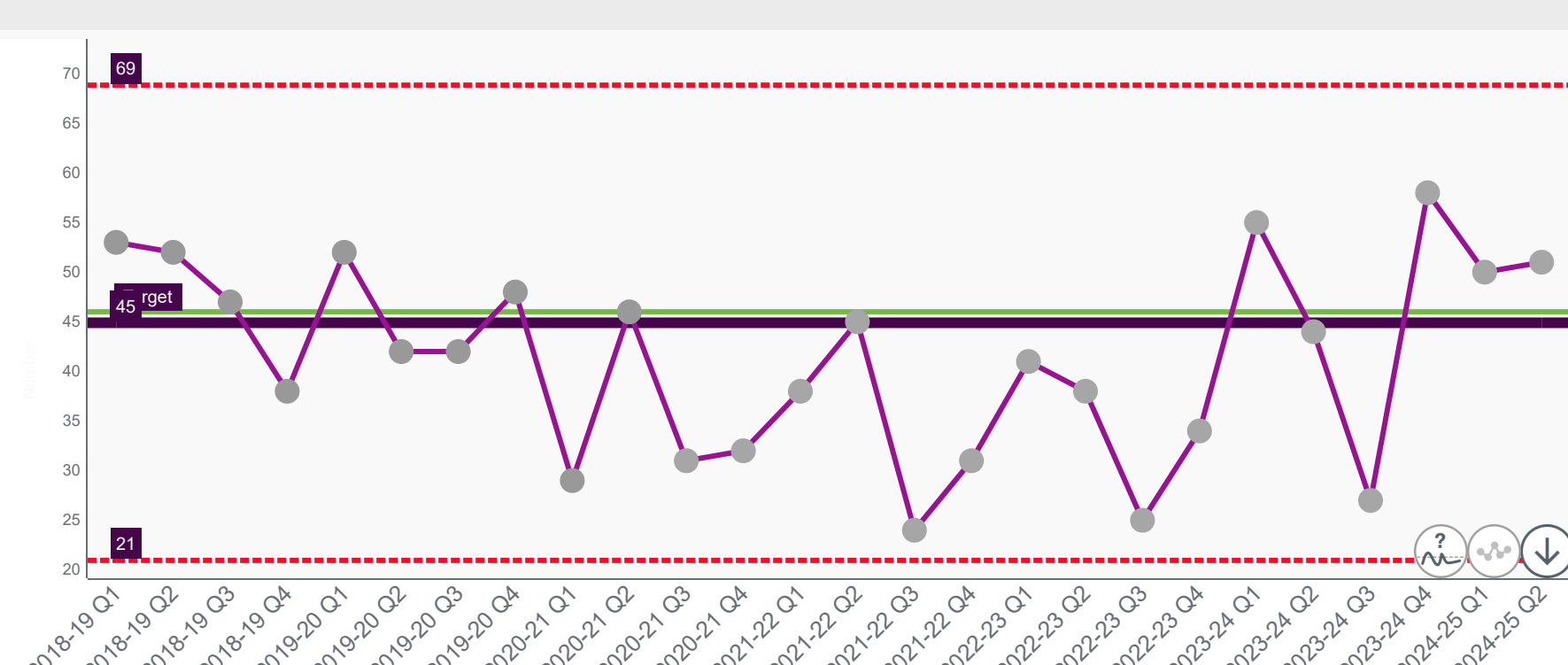
All RIDDOR reported related to Accident Injuries, all three are Over 7 day with no Dangerous Occurrence reported in Q2. Each event was managed locally within the LSO area.

KPI 53 Accidents and Injuries (excl. RIDDOR)

PURPOSE: Demonstrates total accidents and injuries to occur through workplace accidents

Reduce against previous year

OWNER: Head of Safety and Assurance



SUMMARY

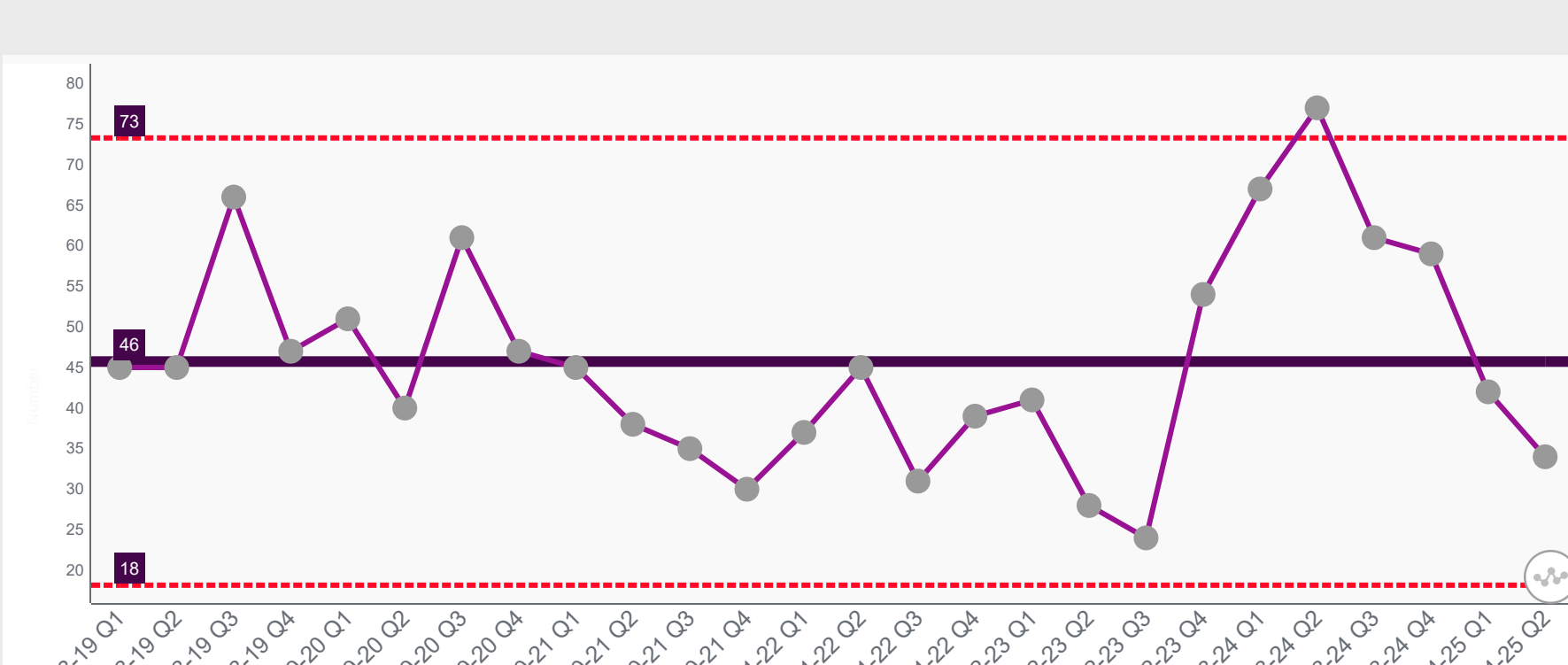
An increase is noted in Q2. All events are investigated to reduce the likelihood of reoccurrence. Safety and Assurance Improvement Groups continue to monitor local trends and take action where required. A Trend Analysis has been identified for ladders and PRE.

KPI 54 Near Miss

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

Track

OWNER: Head of Safety and Assurance



SUMMARY

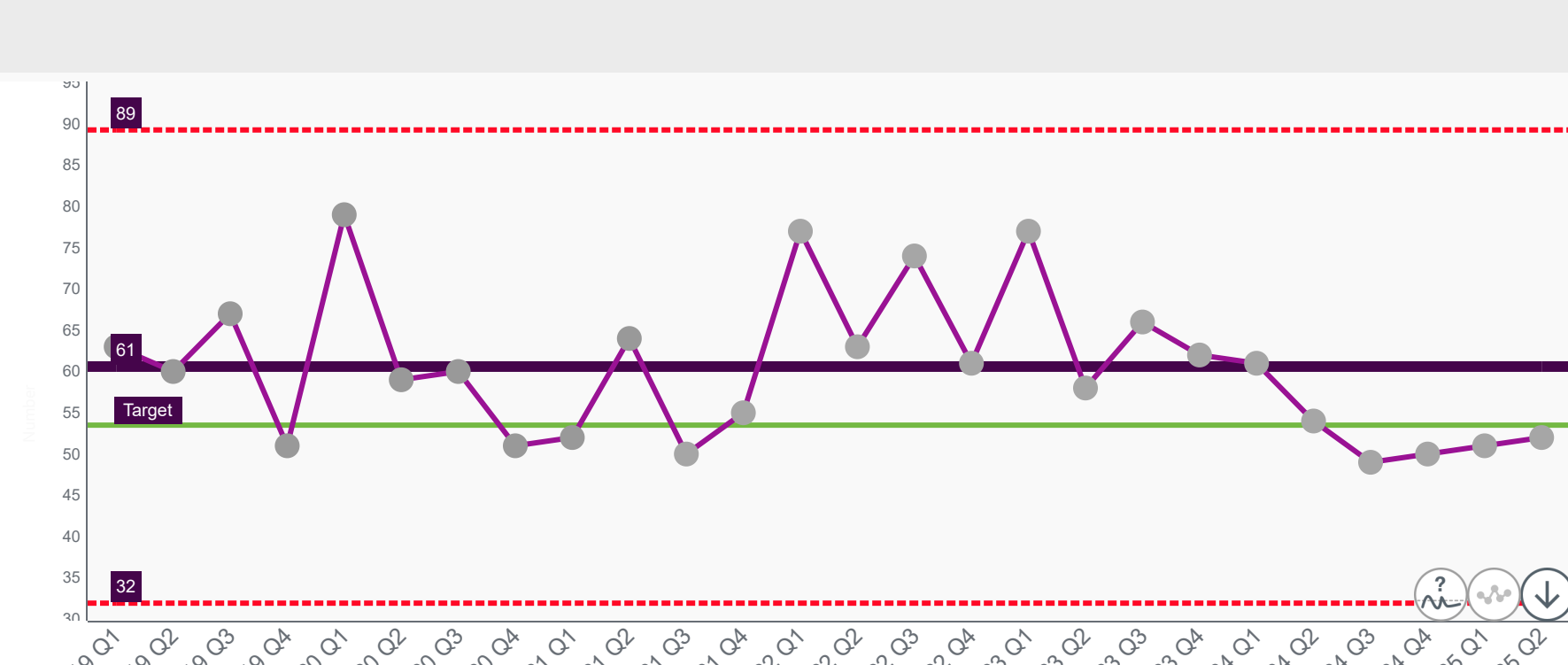
All Directorates should promote Near Miss (NM) reporting to reduce the risk of injury and to ensure safe working environments. The reduction of NMs should be discussed at local SA Improvement Groups for action. A Near Miss Frontline Update was circulated in October encouraging NM reporting.

KPI 55 Vehicle Accidents

PURPOSE: Total number of events that involved vehicle accidents

Reduce against previous year

OWNER: Head of Safety and Assurance



SUMMARY

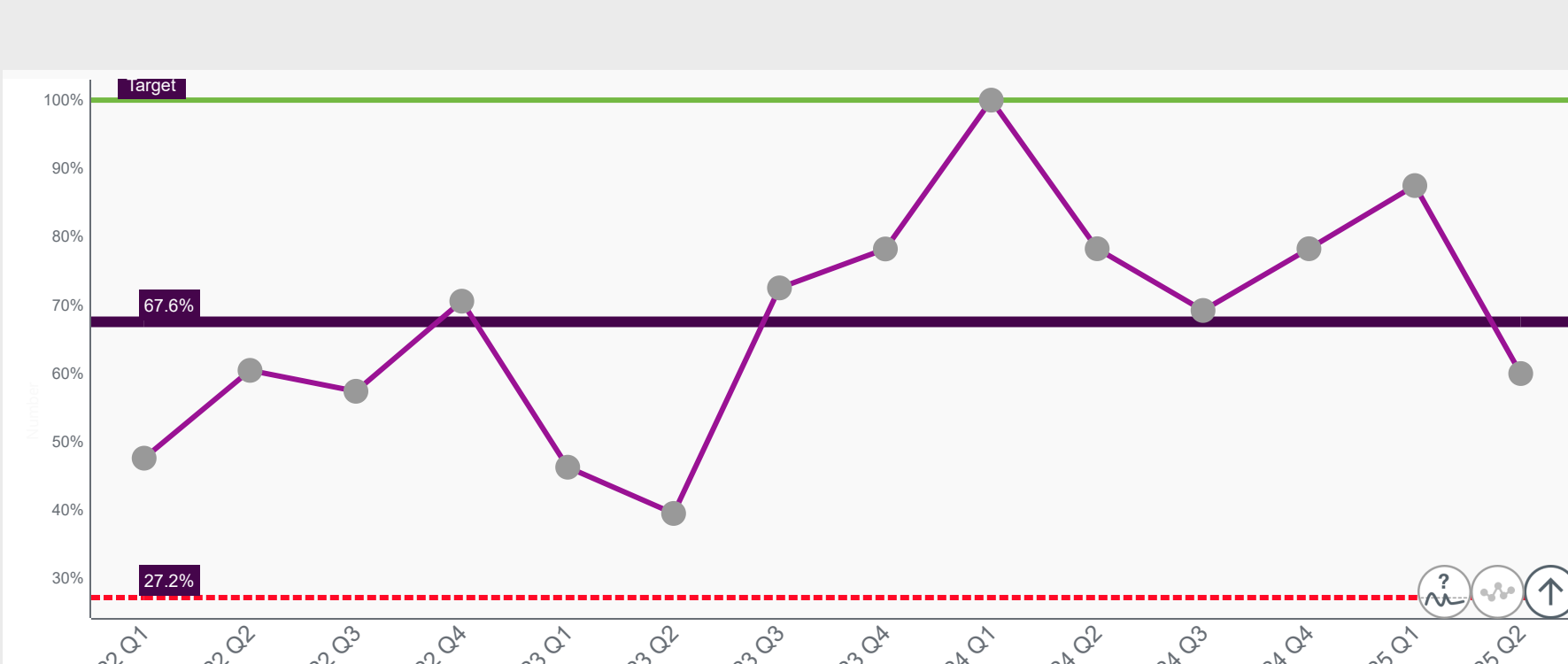
The Driver Safety Group monitors vehicle trends and take action where required, such as supporting the production of Vehicle Information Cards and providing enhanced information on Low-Speed Manoeuvres etc. Local areas continue to promote TfOC driving training modules.

KPI 56 Completion of Health and Safety Improvement Plans

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

100%

OWNER: Head of Safety and Assurance



SUMMARY

A decrease is noted in Q2. This can be attributed to outstanding actions relating to Support Reviews for Self-Compliance and the development of IOSH Managing Safety Course. HS improvement plans are supported by guidance provided by SA to support all functions achieve their actions.

Full guidance can be found on the [Power BI Users Yammer Community](#), along with details of available support.

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- You can use the filters on the report page to target specific areas or time periods etc. To select more than one option in a filter (for example more than 1 business area), **press and hold the Ctrl button on your keyboard** whilst you click on the filter selections.

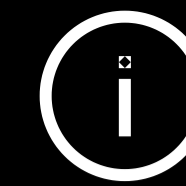
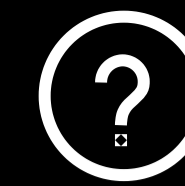
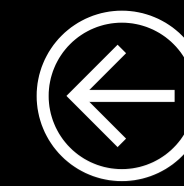
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Report No: C/PC/50-24

Agenda Item: 8

Report to:	PEOPLE COMMITTEE							
Meeting Date:	5 DECEMBER 2024							
Report Title:	PEOPLE PERFORMANCE REPORT – QUARTER 2 2024/25							
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
		A	B	C	D	E	F	G
1	Purpose							
1.1	The purpose of this report is report is to enable the SFRS People Committee to scrutinise the People KPIs from the Performance Management Framework (PMF) and the more detailed quarterly People Performance Report.							
2	Background							
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.							
3	Main Report/Detail							
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	<p>The Executive Summary of the report (p. 2) draws the Committee’s attention to key points relating to:</p> <ul style="list-style-type: none"> • Key people measures on absence, turnover and vacancies rates are all in line with the previous quarter, showing no notable changes. • Decisions in principle have been made for 2025 Wholetime recruitment, encompassing on-call to wholetime migration, external transfers and Wholetime Trainee Firefighter Foundation Programme (WTFFFP) courses. Final numbers for the WTFFFP courses will be confirmed closer to the time based on workforce planning and finance data. Inclusion of on-call to wholetime migration and external transfers increases the speed at which new recruits can be deployed to station and in the case of migration has the further advantage of potentially reducing the time taken to progress from development to competent. This recruitment plan has been combined with forecast promotional requirements to develop the draft 2025 uniformed resourcing plan, which is now progressing through governance. • A successful OC recruitment campaign, including open days, online engagement events, day in the life features, and a real fire survival guidance call led to over 500 applications. This is almost double the number received from the previous campaign. The quality of applicants was hgh, with an improved success frate at shortlisting compared to previous campaigns. Appointment of successful candidates will progress in Q3, ahead of the training course starting in January 2025. 							

3.3	The People related measures from the PMF dashboard are included as Appendix B of the attached paper.
4	Recommendation
4.1	The People Committee is asked to scrutinise the report.
5	Key Strategic Implications
5.1	Risk
5.1.1	Risks identified and tracked and managed through the People risk register.
5.2	Financial
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	Environmental & Sustainability
5.3.1	There are no Environmental & Sustainability implications arising from this paper.
5.4	Workforce
5.4.1	The report outlines organisational performance against key people and workforce measures.
5.5	Health & Safety
5.5.1	There is potential that some of the absences reported in this paper result from Health & Safety related incidents.
5.6	Health & Wellbeing
5.6.1	The report details a range of health & wellbeing activities to support employee wellbeing, attendance and performance.
5.7	Training
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	Timing
5.8.1	The report details performance over the first quarter of 2023/24 and provides longer term trend analysis.
5.9	Performance
5.9.1	The report details organisational performance against a range of people measures.
5.10	Communications & Engagement
5.10.1	This report is shared with a range of governance forums for scrutiny and for information.
5.11	Legal
5.11.1	Some elements of the report relate to SFRS' legal responsibilities as an employer.
5.12	Information Governance
5.12.1	DPIA not required for this report
5.13	Equalities
5.13.1	EHRIA not required for this report

5.14 5.14.1	Service Delivery There are no direct Service Delivery implications arising from this report.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Lyndsey Gaja, Interim Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	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 .
8	Appendices/Further Reading	
8.1	Appendix A: Q2 People Performance Report	
Prepared by:	People Managers and DMT	
Sponsored by:	Lyndsey Gaja, Interim Director of People	
Presented by:	Lyndsey Gaja, Interim Director of People	
Links to Strategy and Corporate Values		
<u>Strategy</u> Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>05 December 2024</i>	<i>For scrutiny</i>



People Quarterly Management Information Report Quarter 2 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:

Measures for vacancy rate, turnover and absence are all broadly in line with those for the previous period.

Decisions in principle have been made for 2025 Wholetime recruitment, encompassing on-call to wholetime migration, external transfers and Wholetime Trainee Firefighter Foundation Programme (WTFFFP) courses. Final numbers for the WTFFFP courses will be confirmed closer to the time based on workforce planning and finance data. Inclusion of on-call to wholetime migration and external transfers increases the speed at which new recruits can be deployed to station and in the case of migration has the further advantage of potentially reducing the time taken to progress from development to competent. This recruitment plan has been combined with forecast promotional requirements to develop the draft 2025 uniformed resourcing plan, which is now progressing through governance.

A successful OC recruitment campaign, including open days, online engagement events, day in the life features, and a real fire survival guidance call led to over 500 applications. This is almost double the number received from the previous campaign. The quality of applicants was high, with an improved success rate at shortlisting compared to previous campaigns. Appointment of successful candidates will progress in quarter 3, ahead of the training course starting in January 2025.

Section 1

1.1

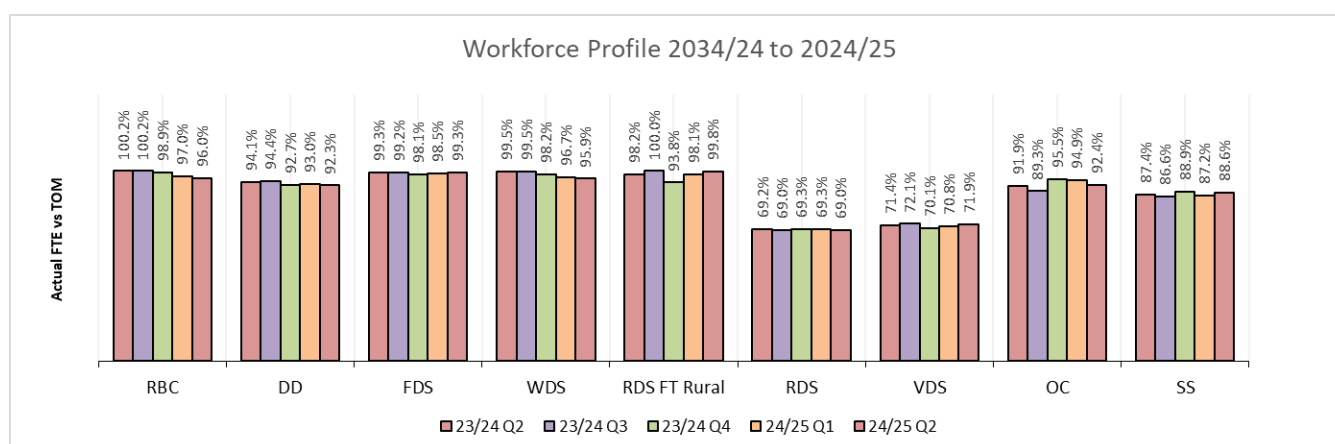
Strengthen and continually improve our approach to Strategic Resourcing Planning, ensuring that SFRS current and future workforce requirements are understood and planned for

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*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS*				
Target Operating Model (FTE)	2855	350	256		3461	58	3309	377	172	861	8238
Initiatives, Projects and Capital Funded		8	14		22				1	69	92
Actual (FTE)	2740	331	268	58	3397	58	2284	271	160	824	6994
Actual (Headcount)	2743	331	268	58	3400	59	2710	271	164	883	7487

*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 September 2024, SFRS employed 6925 people, equating to a headcount of 7532. 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; 14 employees are on external Secondment (including union duties), 20 on career or reservist breaks and 11 in Partnership Initiative funded posts.



1.1.2 Number of staff vacancies by FTE

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (FTE)	57	28	2	87	0	1025	106	13	106	1337

*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

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (%)	2.0%	7.8%	0.7%	2.5%	0.2%	31.0%	28.1%	7.6%	11.4%	16.0%

*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, with a marginal increase from 15.8% in quarter 1 to 16% in quarter 2. The main area of increased vacancies is within the WDS and within all WDS employee groups (RBC, DD and FDS), a total increase from 1.9% in quarter 1 to 2.5% in quarter 2. OC have also seen an increase in vacancy rate from 5.1% in quarter 1 to 7.6% in quarter 2, which will be addressed through the current OC recruitment activity.

Workforce planning forecasts indicate that there will be an increasing deficiency against the interim Target Operating Model (TOM) as we come towards the end of 2024. Planned recruitment activity continues with the Resourcing Plan for 2025 currently being consulted on. Actual retirements versus forecast continues to be monitored and reported to inform recruitment requirements within the Wholetime Uniformed Staff Group.

In August 2024 59 Wholetime Firefighters commenced their training. An intake of 72 Wholetime Firefighters will commence in February 2025 between National Training Centre (NTC) and Newbridge. Further courses are proposed in August 2025 and January 2026, with a decision on numbers for to be made nearer the time. We are working with the remaining holding pool to meet this anticipated demand with 188 candidates at varying stages of the recruitment process as of 1st November.

Planning has started in advance of reopening Wholetime Firefighter applications, supported by a review of attraction and selection approaches, including positive action activities.

Aligned to WTFF recruitment requirements for 2025, the SLT have approved plans for a RDS to Wholetime Firefighter Migration Transition Course to take place in January 2025, with candidates for this being drawn from the existing Wholetime Firefighter Recruitment Pool. There are currently 12 candidates being progressed. In addition, a process for external transfers into SFRS is progressing, with interviews, medicals and fitness arranged for 18 candidates.

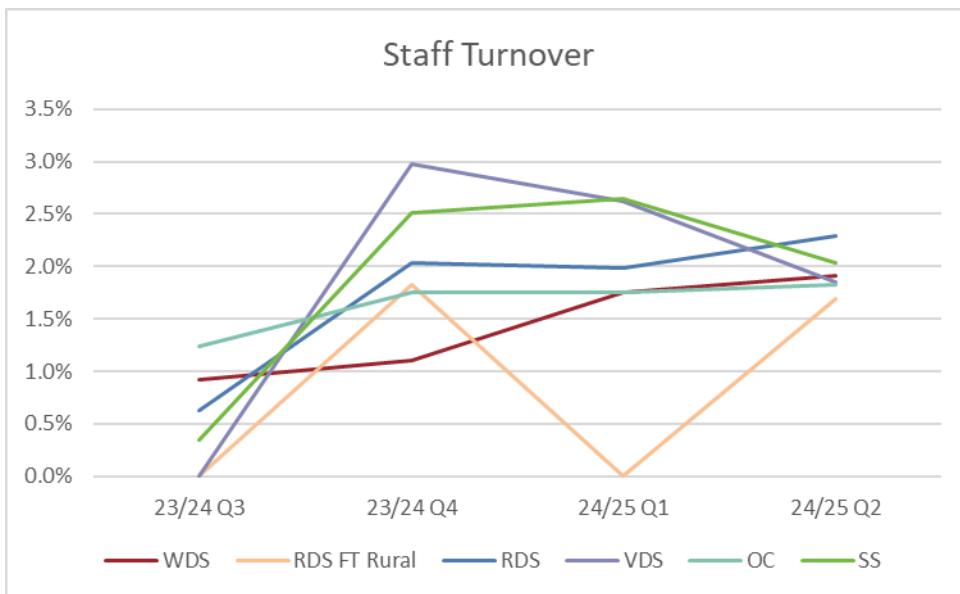
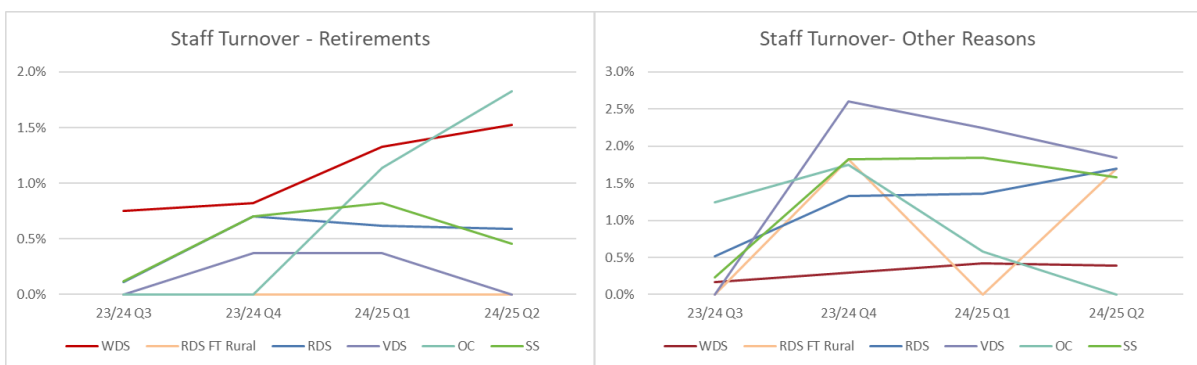
Promotional activity has continued this quarter with Group Commander and Station Commander processes. The Crew Commander process concluded within the East SDA. A full review and evaluation of the process across the 3 SDAs will commence in November, to inform our approach to future promotional processes.

The Operations Control 2024 National Recruitment process opened in quarter 2 with a significant social media campaign to promote the Firefighter (Control) role. The Communications and Engagement Team prepared several stories from current employees, introduced a fire call to demonstrate the requirements of the role, as well as open days being held in the 3 control rooms and an online engagement event. Many applications across the 3 SDAs were received and initial feedback is that the revised recruitment and selection process has been well received and effective – for example, this campaign attracted twice as many applicants compared to the last one, and the success rate at shortlisting was higher. A full review and evaluation will take place at the end of the selection process to inform future approaches.

As part of ongoing work to address On Call recruitment and retention challenges, engagement continues with the On Call Strategic Coordination Group (OCSCG), On Call Improvement Team (OCIT) and On Call SDA Leads to ensure effective monitoring of candidate status/progress through the Recruitment and Selection (R&S) process, to ensure Task and Task Management (TTM) courses are filled aligned to station priorities. Monthly engagement continues with TSA, Wellbeing and Asset colleagues and quarterly with wider stakeholders to ensure a co-ordinated approach. In addition, Recruiting Manager Engagement Sessions are planned to commence late November, to further support effective communications and drive a focus on timely stakeholder actions throughout the process.

1.1.4 Percentage Staff turnover by employee group

EMPLOYEE GROUP	Wholetime (WDS)				Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS				
Retirements	1.24%	3.02%	2.61%	1.53%	0.00%	0.59%	0.00%	1.83%	0.45%	1.00%
Other Reasons	0.44%	0.30%	0.00%	0.39%	1.69%	1.70%	1.85%	0.00%	1.59%	1.06%
Turnover	1.68%	3.32%	2.61%	1.92%	1.69%	2.29%	1.85%	1.83%	2.04%	2.06%



Overall staff turnover has remained similar to last quarter, with only a 0.16% increase, and is marginally lower than the same period last year. After the large increase in retirements within Flexi Duty Officer cadre in quarter 1, retirements for this group have reduced from 5.7% to 2.61% this quarter. OC turnover remained static at 1.8% in quarter 2 with no anticipated or confirmed retirements or leavers due in quarter 3.

Section 2

2.1

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

2.1.1 Total number of grievance cases

A total of 3 grievances were submitted within quarter 2, the same as the previous quarter, with all 3 were based within the North SDA. One case was in relation to Dignity & Respect at Work, whilst the other two cases were in relation to Breach of Policy. One of these cases has concluded, whilst the other two cases remain ongoing due to their complex nature and further information having to be gathered.

2.1.2 Total number of discipline cases

A total of 24 new disciplinary cases commenced within quarter 2, which is an increase of 10 from the previous quarter. Of these cases, 3 were in the East, 8 in the North and 13 in the West, with no new cases being reported within the Directorates. The main themes of these new cases were Breach of the Code of Conduct, Breach of Policy and Breach of Contract.

Of these new cases, 6 were concluded within 6 weeks, 1 concluded within 6-12 weeks and the remaining 17 cases will carry over to quarter 3 2024/25, 8 of which commenced in the final weeks of this quarter.

A total of 25 ongoing cases will be carried forward into quarter 3. Several of these cases are at the stage of finalising the investigation report or have a hearing date scheduled to conclude the case. Planned annual leave has continued to impact the availability of employees, investigating officers, people advisers and union representatives. The complex nature of some of the cases has also increased the timescale required to progress. Work is underway to consider approach to Employee Relation (ER) investigations with a view to addressing several challenges including the duration of investigations.

2.1.3 Confidential Reporting Line

As expected, Confidential Reporting Line (CRL) activity has stabilised following its introduction in May 2024. The two most recent reports received were in September and October respectively. Currently there are 3 cases open and 12 closed. The CRL Privacy Statement was updated to reflect the Workers Protection Act 2023 (Equality Act) changes, which has now been published on iHUB and Safecall's website. Communication and promotion activity is continuing to ensure colleagues are aware of the CRL, including further distribution of posters and a rotational campaign on iHub.

Section 3

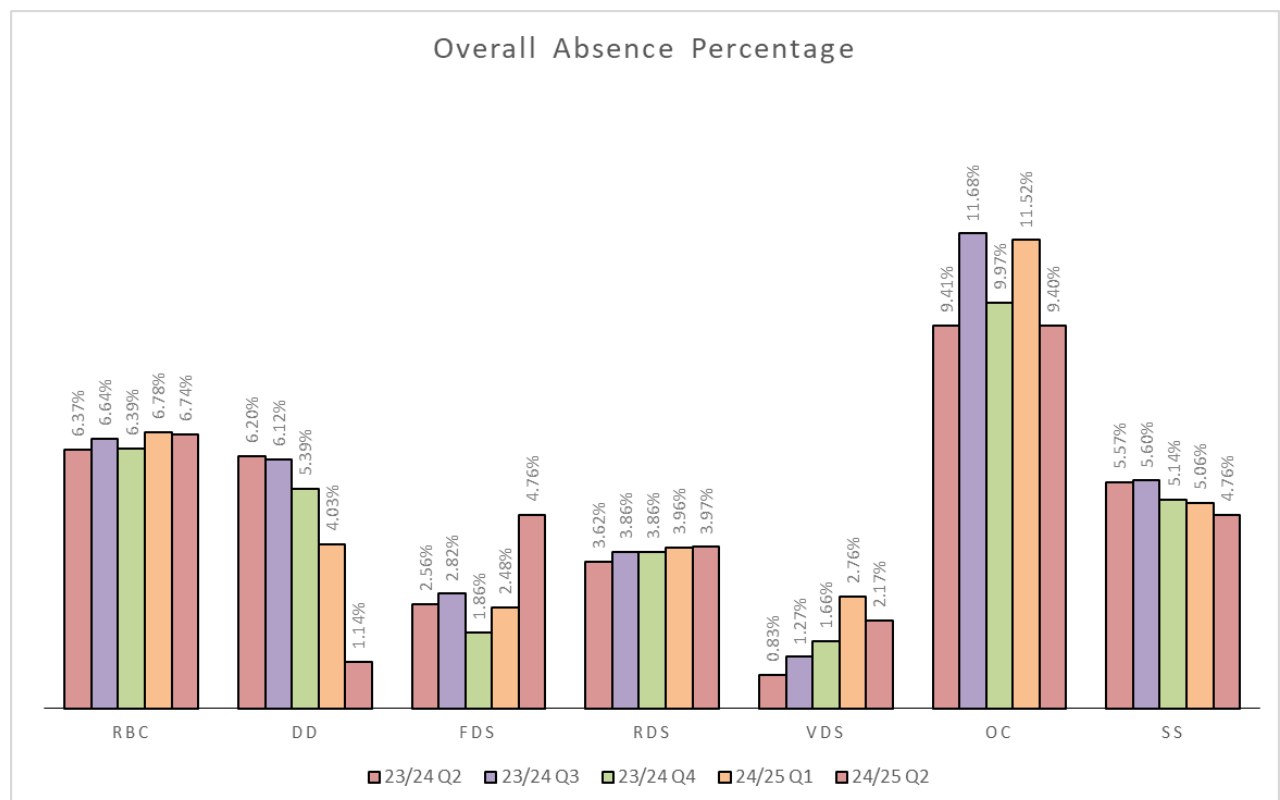
3.1 Strengthen health, wellbeing and fitness arrangements to enable staff to safely and effectively undertake their roles.

3.1.1 Top 3 reasons for New Management Referrals

Quarter two management referral information will be reported alongside the quarter three People Performance Report.

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)	6.74%	4.14%	4.76%	6.11%	3.97%	2.17%	9.40%	4.76%	4.67%



The overall absence percentage for all SFRS working days lost in quarter 2 is 4.67% which is consistent with both the previous quarter (4.68%) and the same quarter last year (4.47%). The overall absence percentage has remained under 5% since 2022/23 following the COVID pandemic.

All duty groups have seen only marginal change (i.e. a variance of no more than 0.5%) in their absence figures between quarter 1 and quarter 2, except those on FDS which has experienced an increase of 2.28 percentage points and OC which has experience a decrease of 2.12 percentage points compared to quarter 1.

The reduction in the absence rate in Operations Control is positive, albeit this remains high at 9.4% in quarter 2. This decrease is due to a reduction in long term absence (see 3.1.4 below). The OC wellbeing open day held in August was well received along with the development session held for OC Crew and Watch Commanders in September and it is anticipated that further sessions will contribute to effective support to colleagues, management of absence cases, and to early intervention to prevent absence where possible, in the longer term.

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)	2.27%	0.93%	1.29%	1.95%	0.83%	0.09%	3.20%	1.31%	1.20%

The total of short-term absence at 1.2% has remained the same as in quarter 1. All duty groups have seen a small increase in their short-term absences from the previous quarter except RDS and VDS employees however, the variance between quarter 1 and quarter 2 for all groups is marginal. 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)	4.48%	3.21%	3.47%	4.17%	3.15%	2.07%	6.20%	3.45%	3.47%

There has been no significant change in the overall long term absence rate since last quarter. The increase within FDS results where several short-term absences moving into long term, taking the long-term absence rate for this group from 1.76% to 3.47%. Long term absence within OC has reduced from 8.47% in quarter 1 to 6.2% in quarter 2 as outlined at 3.1.2 and this will continue to be monitored closely. 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	504	848	418	550	2320
DD	84	36	21	67	208
FDS	37	68	6	87	198
RDS	436	745	179	716	2076
VDS	0	12	0	11	23
OC	58	27	40	79	204
SS	175	97	71	231	574
Total Working Days Lost	1294	1833	735	1741	5603
Number of Employees	318	341	267	296	1222

3.1.6 Long-term absence by top three absence reasons

Long Term Sick - Top 3 Reasons	Musculoskeletal	Psychological	Surgical	Other	TOTAL
RBC	2242	1060	499	778	4579
DD	188	349	31	147	715
FDS	20	280	202	31	533
RDS	3902	1349	918	1717	7886
VDS	146	121	184	54	505
OC	54	145	1	194	394
SS	371	400	292	438	1501
Total Working Days Lost	6923	3704	2127	3359	16113
Number of Employees	172	91	59	85	407

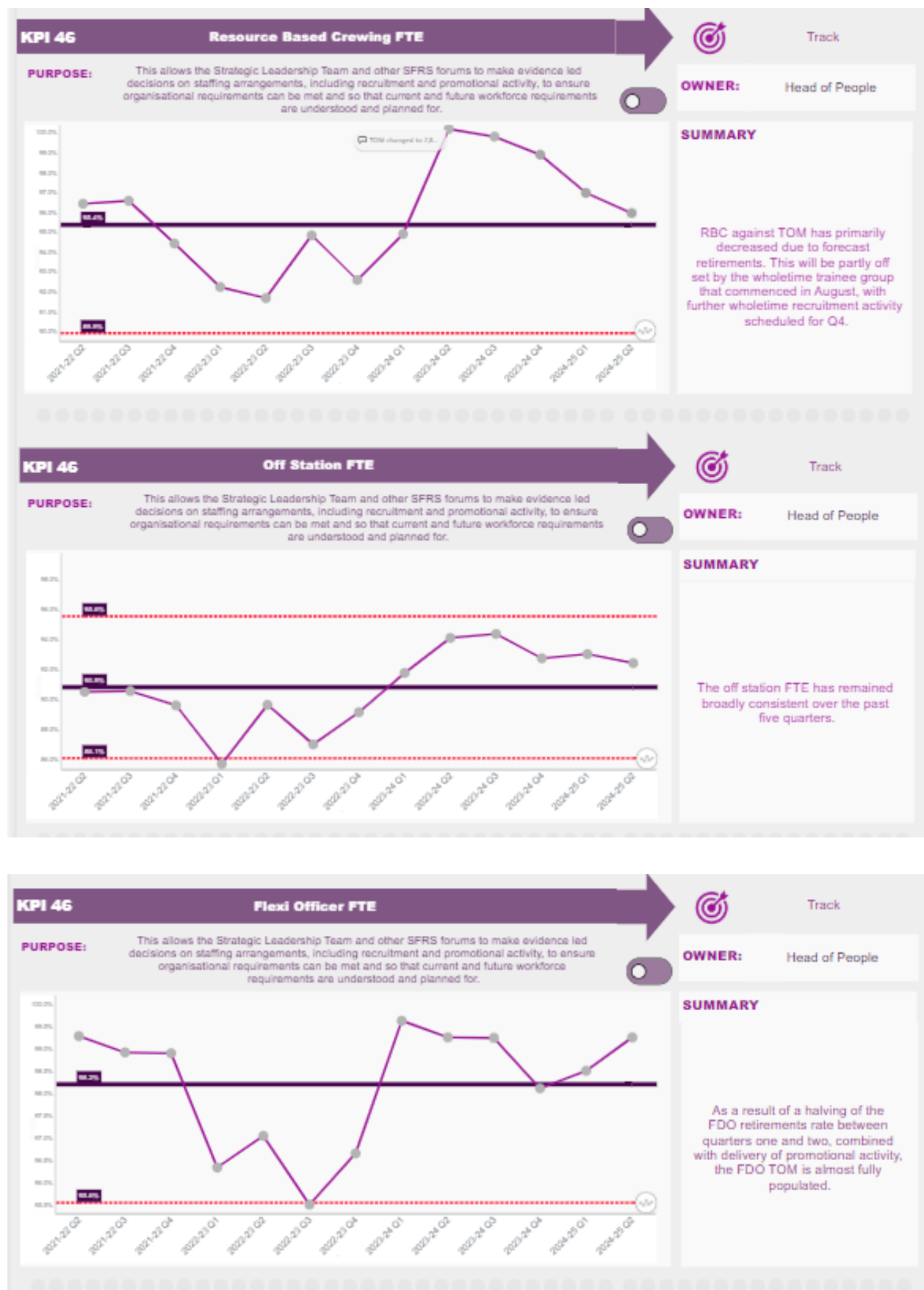
The tables above show the main reasons for employee absence in terms of working days lost, for both short and long-term absence, and the total number of employees absent within these categories. The most common short and long-term absence reasons are in line with the previous quarter and remain the same from the same quarter of 2023/24.

The overall working days lost due to long term absence due to psychological reasons has increased by 100 days compared to previous quarter equates to an additional 1.5 FTE being absent across the period, with increases seen in all duty groups except RDS and OC. OC has seen a decrease from 291 days last quarter to 145 days lost in quarter 2 due to psychological reasons.

Appendix 1 – Glossary of Terms

CRL	Confidential Reporting Line
DD	Day Duty
ER	Employee Relations
FDO	Flexi Duty Officer
FDS	Flexi Duty System
FTE	Full Time Equivalent
NTC	National Training Centre
OC	Operations Control
On Call RDS/VDS	Retained and Volunteer Duty System
OCSCG	On Call Strategic Coordinating Group
OCIT	On Call Improvement Team
RBC	Resource Based Crewing
RDS	Retained Duty System
RDS FT	Retained Duty System Full Time
R&S	Recruitment and Selection
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SLT	Strategic Leadership Team
SS	Support Staff
TOM	Target Operating Model
TSA	Training, Safety and Assurance
TTM	Task Management Courses
VDS	Volunteer Duty System
WDS	Watch Duty System
WTFF	Wholetime Firefighter
WTFFFP	Wholetime Trainee Firefighter Foundation Programme

Appendix 2 – PMF People Measures



KPI 46

Operations Control FTE



Track

PURPOSE:

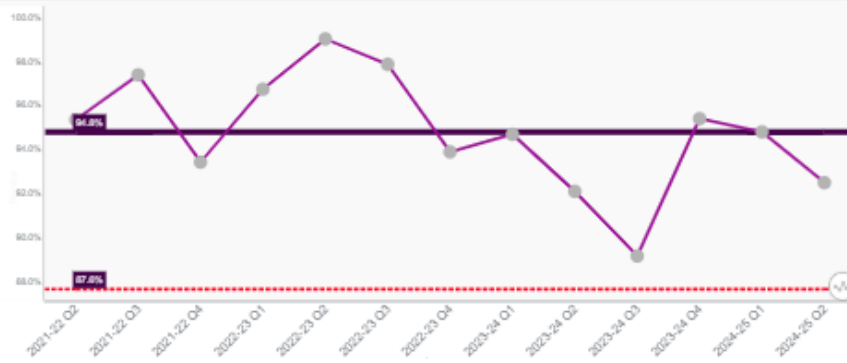
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

The FTE in Operations Control reduced by 4 in Q2. A successful recruitment campaign is progressing to fill all existing vacancies and create additional capacity within Operations Control to support strategic priority projects.



KPI 46

Rural Full-time FTE



Track

PURPOSE:

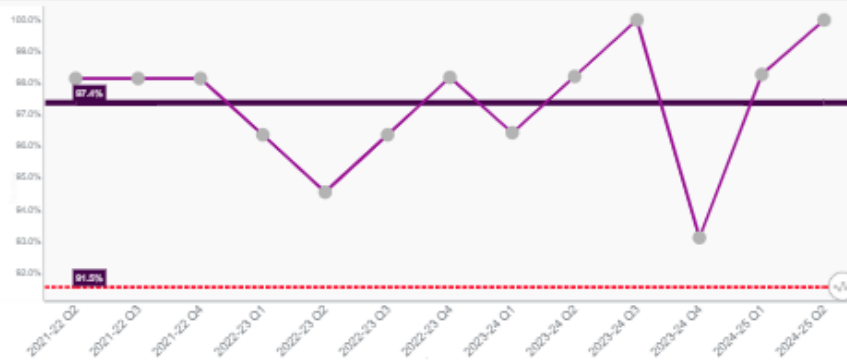
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

Recruitment activity has been completed to fill the 4 FTE vacancies that arose in Q4 2023-24, meaning this staff group is now fully established.



KPI 46

On Call Retained FTE



Track

PURPOSE:

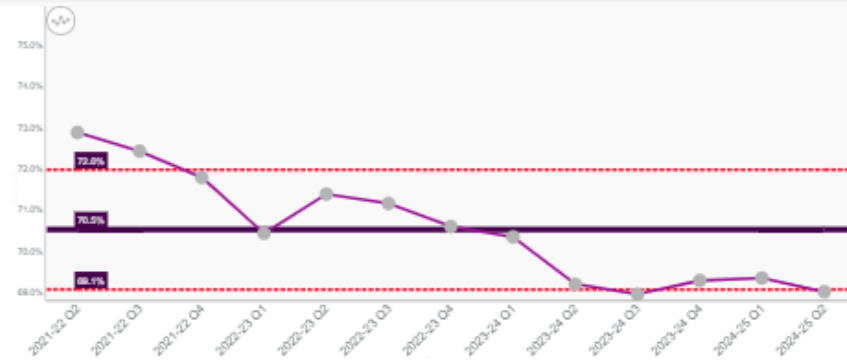
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

On-call attraction and retention remaining challenging. In addition to work progressing through the On-call Strategic Coordinating Group, it is anticipated that changes to retaining fees and contractual flexibility to be introduced in Q4 will enhance attraction and retention for this colleague group



KPI 46 On Call Volunteer FTE



Track

PURPOSE:

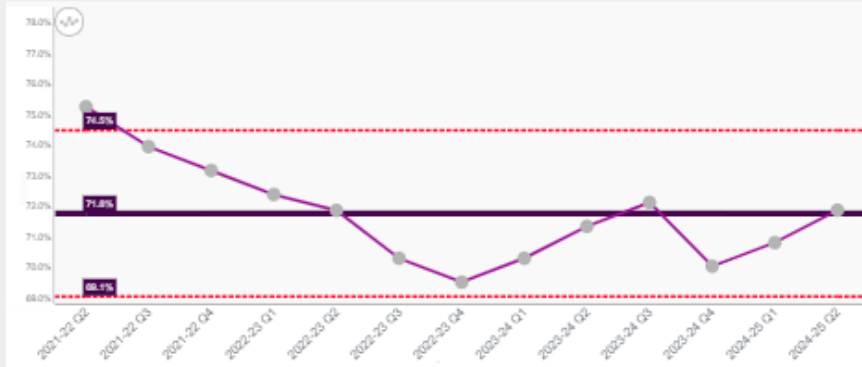
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

On-Call Volunteer FTE shows a slight improvement in the position since last Quarter. Work continues to improve the position further.



KPI 46 Support Staff FTE



Track

PURPOSE:

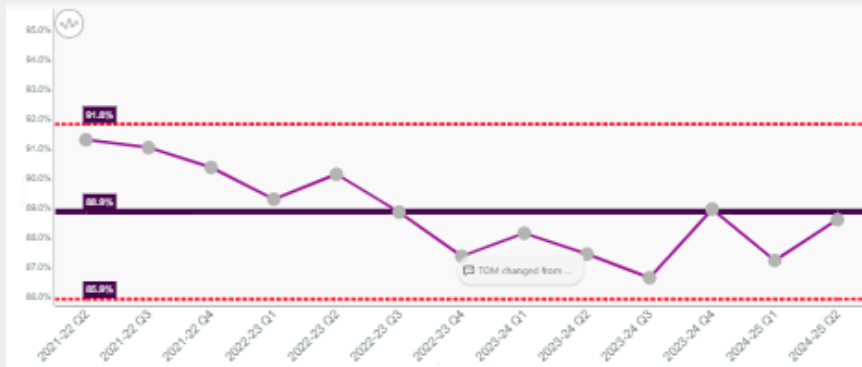
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

Successful recruitment processes have reduced the vacancy rate in the support staff group this quarter, which continues to be within expected levels of variation.



KPI 47 Vacancies Rate



Track

PURPOSE:

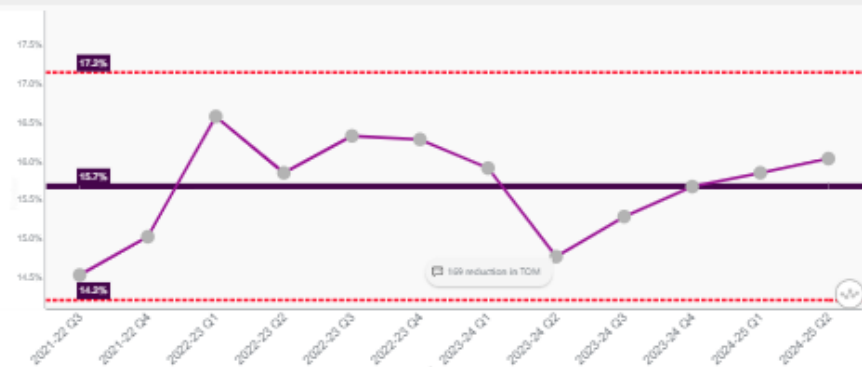
Monitoring the vacancy rate provides insight into the Service's ability to attract, recruit and retain staff, and the time to hire.

OWNER:

Head of People

SUMMARY

There was no significant change in the vacancy rate in quarter 2, which remains within historic parameters.



KPI 48**Turnover Rate**

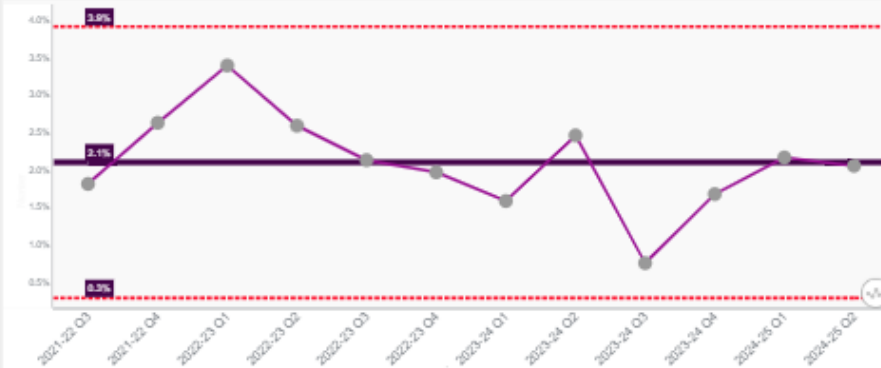
Track

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 remains in line with historic norms and is broadly consistent across staff groups.

KPI 49**Absence Rate**

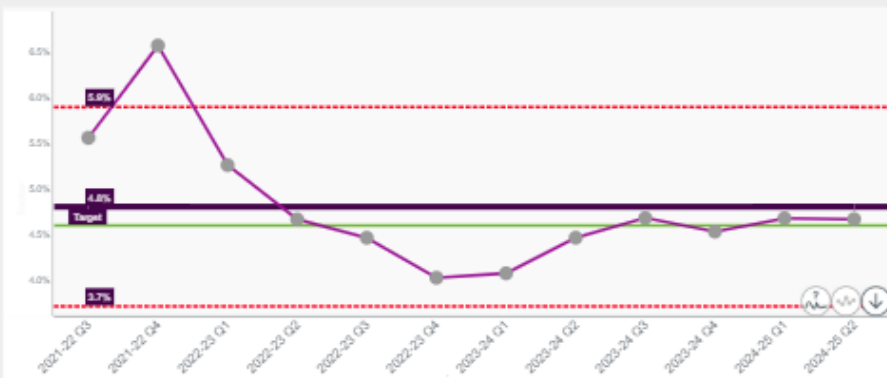
Reduce against previous year

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**

Absence rates have continued to remain broadly stable since Q2 2022-23.



Report No: C/PC/55-24

Agenda Item: 9.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	CULTURE ACTION PLAN – UPDATE PAPER						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	To update the People Committee on the progress of future pathway activities detailed within the Culture Action Plan (CAP) and delivered via the Culture Development Group (CDG) and associated sub-groups. Including a spotlight update on the Scottish Fire and Rescue Service (SFRS) Management Development Framework (Priority 2: Developing Managers and Leaders).						
2	Background						
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 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	A Culture Action Plan has been approved to address these concerns. Identifying three priority actions as strategic imperatives: 1. Attracting and supporting a more diverse pool of candidates. 2. Developing Managers and Leaders 3. Improving Business Intelligence to inform future actions.						
2.4	Work has continued on these actions throughout 2024, under the governance of the Culture Development Group. 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.						
3	Main Report/Detail						
3.1	<u>Current Work in Progress</u>						
3.1.1	Below provides an update on the current progress across key enablers and work-streams that support the SFRS to continue to deliver the CAP.						

<p>3.1.2</p> <p>3.1.3</p> <p>3.1.4</p> <p>3.1.5</p> <p>3.1.6</p> <p>3.1.7</p> <p>3.1.8</p>	<p>Confidential Reporting Line The Confidential Reporting Line has been live for 6 months. During this period, the SFRS have received 17 reports which is in line with our benchmarked potential usage. There are currently 5 reports open and 12 have been closed. Due to the small number of reports, it is not the intention to publish any wider statistics due to the risks associated with identifying any parties involved in the reporting process. The introduction of the reporting line has been a success and is working effectively.</p> <p>Like any new initiative, we are continuing to monitor communication and have published the Safecall posters as a downloadable library resource on iHUB so that additional copies can be printed and displayed locally. There are some plans to develop the infographics around the Safecall communication in 2025 to maintain awareness and increase understanding of the reporting process.</p> <p>HMFSI Inspection People Directorate and CDG Subgroup Lead interviews have concluded. SDA short visits in which external advisors are accompanying the interviews are scheduled for: East SDA 11-13 Nov (accompanied by Professor Paresh Wankhade), North SDA 20-22 Nov (No external advisor) West SDA 2-3 Dec (accompanied by Mark Cashin). Trade Union and staff network interviews are being planned, alongside the inspection team planning the wider SDA random sample. The period this will run for is yet to be determined, and a communication to has been issued 5 November via the weekly brief. There may be some slippage to the timelines as detailed in the inspection outline, this will be communicated when known.</p> <p>Colleague Experience Survey The CES 2024 results for Corporate Services and Service Delivery have now been communicated. Issues relating to the renewal of the Skills for Justice membership has delayed the timeline for sharing free text responses (SfJ own the data) which are now expected during W/C 18/11/24. A lack of take up is impacting the ability to effectively roll out focus groups across all Service Delivery Areas. Trade Union colleagues are eager to support this process, and discussions are in progress with Communication & Engagement colleagues and Subgroup leads to identify opportunities to work collaboratively across discussion group requirements to realise the resource investment in these. The focus group discussions remain a pivotal part of the CES 2024 evaluation process as they provide a platform to validate results, identify key drivers and promote solution focussed discussions to inform the development of manager toolkits and action planning.</p> <p>Next step actions include the provision of Departmental dashboards and discussions are in progress with Skills for Justice regarding associated timeline and resource requirements. It is anticipated that the optimum publishing window for these results will be January 2025, which also recognises guidance from the Communication & Engagement team</p> <p>Communication of the Cultural Action Plan The culture and values communication and engagement strategy has been completed 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.</p> <p>A joint communication between the SFRS and FBU was shared with colleagues on 6th 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 culture related activity, including CES, CRL work and HMFSI and now provides</p>
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	<p>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>
3.1.9	<p>Culture Development Group & Subgroup Updates The Culture Development Group continue to meet regularly to discuss broad culture activity, identify further improvement opportunities and steer and evaluate the work of the subgroups.</p>
3.1.10	<p>The subgroups' progress is noted below; -</p>
3.1.11	<p>Organisational Learning Subgroup The following priority actions have been identified to inform the work of this subgroup; -</p> <ol style="list-style-type: none"> 1. To develop proposals for delivering a learning culture and supporting individuals/organisation to be receptive to feedback. 2. To review the current Exit Interview Questionnaire and propose improvements to the content to maximise information/ insight 3. Development of a Case Review process to support lessons learned and areas of good practice 4. Develop proposals to obtain feedback from other employment practices (people, asset, training)
3.1.12	<p>Progress update; -</p> <ul style="list-style-type: none"> • Commenced development of information/training that can be incorporated as part of the Management Development Framework (MDF) • A revised Exit Questionnaire has been developed. This includes a rearrangement of information to encourage completion, a focus on differentiating reasons for leaving and crucially, realignment of content to link with other data intelligence sources such as the Colleague Experience Survey/Confidential Reporting Line, which will make it easier to report on, measure progress and identify themes. A review of process, including reporting of information and guidance for employees and managers is also underway. • Work has commenced to identify the types and format of the case review process and how this will complement the wider MDF. • An initial meeting to discuss and scope ideas for future proposals surrounding other employment practices has taken place
3.1.13	<p>Data collation has also commenced to identify the scope of the current reporting capabilities, such as absence, discipline & grievance and exit interviews. This 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>
3.1.14	<p>Management Development Subgroup The following priority actions have been identified to inform the work of this subgroup; -</p> <ol style="list-style-type: none"> 1. Support the development of Supervisory management framework, both in person training, guidance and toolkits 2. To review the Induction content for internal promotions / movements to identify pathways/ development requirements 3. Consider and propose other opportunities for development (e.g. use of development days, appraisal) to support Development Frameworks
3.1.15	<p>Progress update; -</p> <ul style="list-style-type: none"> • The development of the Supervisory Management Development Framework continues with the design of Day 2 and Day 3. The Day 1 People Essentials has been updated following the initial pilot with 11 sessions planned for Q3. Work is underway to pilot an approach to on-call delivery

	<ul style="list-style-type: none"> • A review of current internal and external Induction material is underway. Guidance documents are being developed alongside the use of iHub to support easy access to this information. • The group are collating other areas of development for potential inclusion and considering options for access and delivery of these to maximise opportunity and reach. <p>*Further information relating to the Management Development Framework is spotlighted within Section 3.2.1.</p>
3.1.16	<p>Attraction & Engagement Subgroup</p> <p>The following priority actions have been identified to inform the work of this subgroup; -</p> <ol style="list-style-type: none"> 1. Developing evidence-based recruitment campaigns which support diversity 2. Reviewing the way that organisational values are promoted within SFRS, in line with the work undertaken by the Professional Standards Subgroup, 3. Developing a communications campaign to support the work undertaken within the Culture Development Group and designated sub-groups. 4. Developing a community engagement framework to support direct engagement with communities.
3.1.17	<p>Progress update; -</p> <ul style="list-style-type: none"> • One-to-one interviews (3 to date), focus groups (2 to date) and a stand at the Gurdwara has facilitated feedback from different ethnic minority groups, religions and backgrounds about their perceptions of the role of a firefighter, and awareness of other roles within SFRS. • Feedback will be collated and, alongside ongoing scheduled visits, will continue to shape and inform the direction of the Attraction and Engagement Subgroup workstreams. • Feedback from the Women in the Fire Service Event held in September is also being reviewed.
3.1.18	<p>Future planned activity; -</p> <ul style="list-style-type: none"> • Engaging with Universities to expand feedback, with initial plans to meet with different student groups from Glasgow Caledonian University. • Continued planning and preparation of Subgroup lead Vlogs to share progress updates with all SFRS Colleagues. Filming is complete for one of the updates and planning is underway for the remaining two. • Work continues on the day in the life of (DILo) firefighter video • Dual contract stories – sharing stories of employees with more than one role in the service, or interesting roles that people do alongside working with the SFRS. • Evaluation from OC recruitment campaign being shared with the subgroup to inform continued approach. • Full report of engagement activities to be completed. • Develop community engagement framework and scope pilot of a community engagement team. • Draught outline plan for developing an allyship programme.
3.1.19	<p>Professional Standards Subgroup</p> <p>The professional standards subgroup has been split into 3 deliverables. The key outputs and associated progress updates have been summarised below; -</p>
3.1.20	<p>Integrating Culture (Subgroup: 1 Core Code of Ethics)</p> <ol style="list-style-type: none"> 1. A review of NFCC Core Code of Ethics (completed, Oct 24) 2. An Action plan for embedding them in SFRS culture and values (draft completed, Nov 24)
3.1.21	<p>Integrating Culture (Subgroup: 2 Station & Professional Standards)</p> <ol style="list-style-type: none"> 1. A review of SFRS Station/Professional Standards (draft completed Oct 24)

	<ol style="list-style-type: none"> 2. An action plan to ensure that SFRS core values, positive culture and ethical behaviour is embedded in watches and teams via the Station Standards and wider Operational Assurance/Station audit Process (draft completed Nov 24) 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 (expected Dec 24).
3.1.22	<p><i>Integrating Culture (Subgroup: 3 High performing Teams with total psychological safety)</i></p> <ol style="list-style-type: none"> 1. A review and report on the relationship between psychological safety and high performing teams (expected Jan 25). 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 (expected March 25). 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 (expected March 25).
3.1.23	<p>In relation to the above progress the CDG have been asked to review the following papers for endorsement and progression through SFRS Governance:</p> <ol style="list-style-type: none"> 1. Core Code of Ethics Paper - recommending the adoption of NFCC’s Core Code of Ethics for Fire and Rescue Services. 2. Professional and Station Standards Paper - recommending the implementation of a General Information Note (GIN) for Station Standards. 3. Total Psychological Safety in High Performing Teams Update – briefing paper to provide the CDG with a mandate to progress work in respect of embedding the concept of ‘high performing teams with total psychological safety’.
3.2	<p>Spotlight Update: Management Development Framework - Supervisory Management People Essentials Pilot</p>
3.2.1	<p>Over 60 engagement session took place across the SFRS (all staff groups) during 2023 and anonymised feedback was collated to create a dashboard of findings. This feedback, alongside engagement with middle and strategic managers, the people advice and employee relations team, and wider externally published reports has informed the development of a Supervisory Management People Essentials session, which is Day 1 of the Supervisory Management Development Framework.</p>
3.2.2	<p>The Supervisory Management People Essentials session (Day 1) comprises a welcome scene setting, overview of content, outline rationale and expectations for the session and wider Management Development Framework. The session has been developed around 3 main themes; -</p> <ol style="list-style-type: none"> 1. “Understanding Self” – who they are, their communication preferences, what motivates them, how they respond to change. 2. “Understanding Others” – the importance of knowing their team, so they can support, influence and challenge them in a way that gets the best out of them, recognising that individuality means being able to adapt their style to consider the best way to approach their teams in any given environment. 3. “Managing the SFRS way” – recognising inclusion as a key component of leadership, culminating in an interactive exercise, which enables participants to actively apply principles of SFRS People policy and guidance (course pre-reading). Importantly, the exercise also provides opportunities to apply refreshed learning to demonstrate how delegates would support and manage team members through a diverse and multifaceted guided scenario.
3.2.3	<p>The aims and objectives of the Supervisory Management People Essentials session (Day 1) are outlined in Appendix A (Slide 1).</p>

3.2.4	MDF Day 1 pilot testing was conducted through separate sample groups of Middle and Supervisory Managers respectively. This order of delivery provided opportunities to upskill Middle Managers in advance of their direct reports, facilitated the cascade of a consistent message in advance of Supervisory Manager attendance and, crucially, placed Middle Managers in prime position to optimise the provision of support to their teams. Feedback from pilot testing has been collated to refine the sessions and shape future content.
3.2.5	To date, 81 participants have attended 7 x Day 1 Supervisory Management People Essentials sessions. And 30 Middle Managers have attended over three associated Middle Manager developmental Briefing Sessions. There are a further six Supervisory sessions planned across the East and West in Q3 2024-25 evenly split across National HQ Cambuslang and Newbridge. Discussions are ongoing with colleagues in the North to confirm dates and include opportunities for attendance from newly promoted Supervisory Managers following the recent Crew Commander promotion process. Discussions are also in hand with East and West SDAs to support the attendance of their newly promoted Crew Commanders, providing time critical opportunities to enhance understanding of Supervisory roles, values and behaviours and embed these early on their leadership journey. Sessions to date have been run in the West and East, with attendance comprising mainly of Day-Duty, Operations Control and Support colleagues, with some Station-based staff. Participants have travelled from the North to attend across Q3 sessions.
3.2.6	In appreciation of the additional considerations for On-call colleagues, we are currently evaluating alternative delivery models for On-call and aim to pilot these in the North. Proactive engagement from the management team in the East has already enabled the opportunity to repurpose an existing On-call development session to a Day 1, Supervisory People Essentials session for On-call staff in MELSB. This will be jointly facilitated by local management and People team members on Saturday 18 January 2025 and will be used to develop options and inform proposals for future On-call delivery, alongside feedback from the North On-call pilot currently under discussion.
3.2.7	Participant feedback has been overwhelmingly positive and supported course delivery on an in-person versus digital platform, highlighting the myriad benefits of this, with an optimised learning environment that provided opportunities for peer supported learning and sharing best practise. There was also an appreciation of high-quality delivery, content and relevant resources. Other feedback suggested building on the inclusion of EDI material and expert input from graphics colleagues to brand visual content. A synopsis of course evaluation is outlined in Appendix A (Slide 2).
3.2.8	The design of MDF Days 2 & 3 is underway. Short-term working groups are preparing content with input from various subject matter experts, including Training, Safety & Assurance Management, Prevention, Protection & Preparedness and Health & Wellbeing. Proposals are scheduled for discussion at the Management Development subgroup meeting in January. Development of the wider MDF resources is also being progressed by the subgroup and will include a variety of learning options to suit need and circumstance. The Supervisory Management roadmap is included in Appendix A (Slide 3).
3.2.9	Options for the ongoing delivery of the Supervisory Management Development Framework will be presented to Strategic Leadership Team (SLT) on 17 December 2024. This will include proposals for the forward plan for 2025-2030 based on workforce planning data forecasting the anticipated requirement for Supervisory Managers year-on-year; proposals for delivery to Supervisory Managers already in post; proposals for delivery to On-call Supervisory Managers and; proposals to identify an appropriate selection mechanism and shift towards proactively developing staff in advance of and in preparation for promotion.
3.2.10	Collaboration with the NFCC and rollout of existing Supervisory Leadership Development Programme continues, with the delivery of the second Supervisory Leadership Development Programme which launched in August 2024. This aligns with the continued development and

<p>3.3 3.3.1</p>	<p>rollout of the Management Development Framework and follows the programme’s positive pilot in 2023-24 which enabled delegates to demonstrate how they applied their learning in the workplace and identify the positive impacts of this in phase 2 of the Management Development Framework, developing leadership skills. The NFCC Middle Manager Leadership Development Programme pilot commenced with the Line Manager briefing, followed by participant welcome session in late November 2024.</p> <p>Future Action Following a session on Culture with the Board, SLT are considering a variety of next step options to ensure current activity is embedded whilst considering how we can build on this to continuously develop our culture aspirations.</p>
<p>4</p>	<p>Recommendation</p>
<p>4.1</p>	<p>To note progress relating to key priorities identified within the Culture Action Plan, update on the work of the Culture Development Group (CDG) and associated subgroups to support delivery of these objectives. Notably, a detailed update on the SFRS Management Development Framework (Priority 2: Developing Managers and Leaders).</p>
<p>5</p>	<p>Key Strategic Implications</p>
<p>5.1 5.1.1</p>	<p>Risk 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>
<p>5.2 5.2.1</p>	<p>Financial There are currently no financial implications. There may be financial implications associated with any future development of actions in support of the findings.</p>
<p>5.3 5.3.1</p>	<p>Environmental & Sustainability There are no specific Environmental & Sustainability implications arising from this paper</p>
<p>5.4 5.4.1</p>	<p>Workforce 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>
<p>5.5 5.5.1</p>	<p>Health & Safety There are no specific Health and Safety implications arising from this paper.</p>
<p>5.6 5.6.1</p>	<p>Health & Wellbeing 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.</p>
<p>5.7 5.7.1</p>	<p>Training There may be implications associated with future development frameworks for supervisory and middle managers.</p>
<p>5.8 5.8.1</p>	<p>Timing Taking account of external reports in relation to culture across Fire and Rescue Services it is important to act responsively to support the delivery of planned activities for 2024/25.</p>
<p>5.9 5.9.1</p>	<p>Performance Any improvement in cultural alignment with SFRS values will lead to improved engagement and productivity.</p>

	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	Communications & Engagement	
5.10.1	Engagement has taken place with representative bodies. Further engagement continues with managers and employees through the communication and roll out of the CAP and enabling workstreams. Ongoing support from the Communication & Engagement team is required to develop and deliver strategies to support the aims of the CAP and CDG, and to communicate associated activities across the Service.	
5.11	Legal	
5.11.1	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	Information Governance	
5.12.1	DPIA completed Yes/No. No personal data is in scope of this paper.	
5.13	Equalities	
5.13.1	EHRIA will be completed for any policy or practice change arising from this paper.	
5.14	Service Delivery	
5.14.1	Engagement and support from Service Delivery will be required to ensure successful delivery of the Cultural Action Plan.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Liz Barnes, Interim Deputy Chief Officer – Corporate Services
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	Significant activity has taken place to progress the actions within the Cultural Action Plan and future activity has been prioritised.
8	Appendices/Further Reading	
8.1	Appendix A – MDF Slides People Committee Culture Update 05.12.24	
Prepared by:	KellyAnne McDougall, Talent Team	
Sponsored by:	Liz Barnes, Interim Deputy Chief Officer – Corporate Services	
Presented by:	Liz Barnes, Interim Deputy Chief Officer – Corporate Services	
Links to Strategy and Corporate Values		
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.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>05 December 2024</i>	<i>For Scrutiny</i>

Aim:

To explore the role of Supervisory Managers within SFRS. Ensuring a consistent approach to the management of all colleagues by providing some of the key tools and techniques that should be adopted.

Objectives- by the end of today, you will be able to:

- List the management essentials required for any 'good' manager.
- Recall the elements of communication and the importance of each element.
- Demonstrate questioning and listening techniques.
- Define feedback and the model used to deliver it to others.
- Tailor your communication to balance the level of challenge and support provided to your teams.
- Approach people matters effectively and consistently, knowing how to use the guidance, policies and procedures to support you.
- Role model acceptable behaviours and manage your teams to do the same.



Supervisory Management Development Framework: Spotlight

ENGAGEMENT & DESIGN

- Over 60 engagement sessions took place across SFRS (all staff groups) during 2023 leading to development of Day 1 – Supervisory Management People Essentials.

23.5% Supervisory Participant Feedback Responses Rate - 19 of the 81 participants have provided feedback to date

100% of participants overall opinion the course was “good” or “very good”

95% believe the course increased their knowledge & confidence in role

95% of participants agreed Aims & Objectives were met

95% agreed content was beneficial to their role

100% agreed the practical exercises were relevant to their role

100% agreed the training method and session materials were appropriate

PILOT FEEDBACK

PARTICIPANT COMMENTS

"Interactive sessions kept me engaged, examples of real-life situations from peers helped."

"I took a lot of aspects regarding being a good leader & how to project that during meetings or communications".

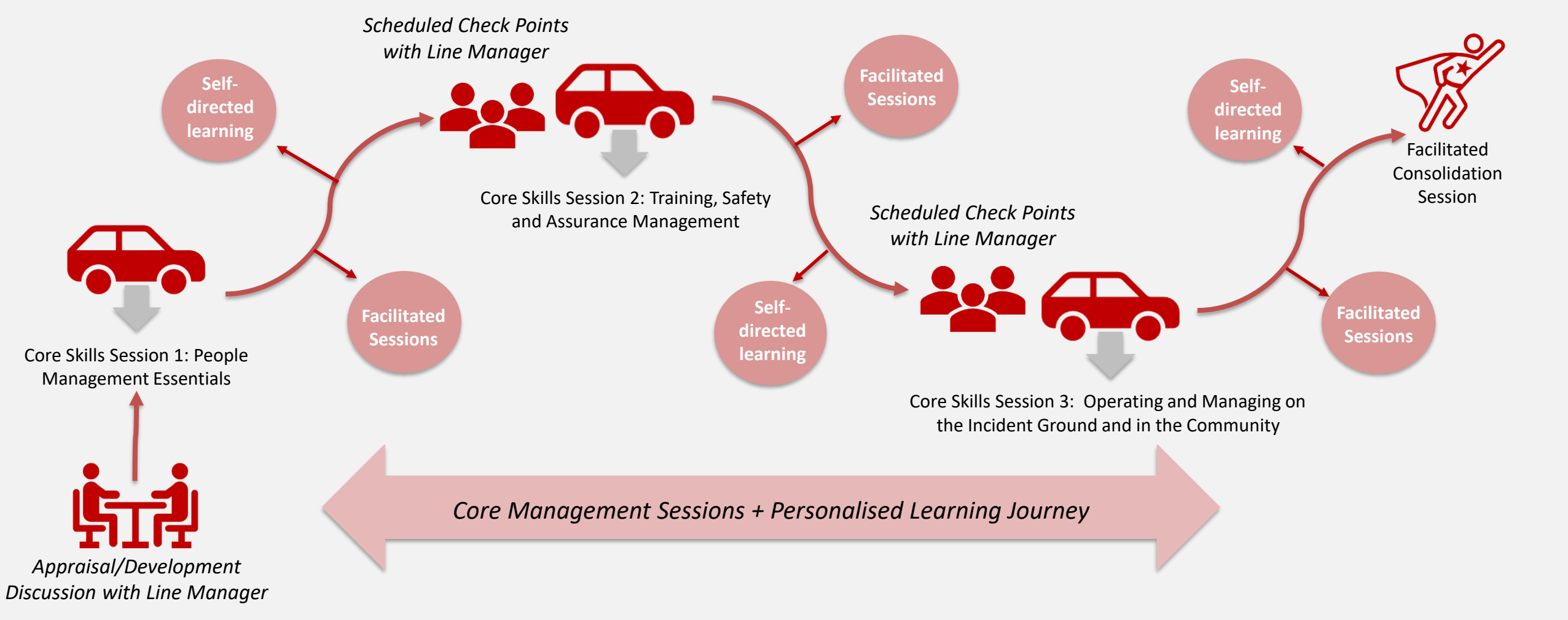
"The session was very well delivered and great interaction with everyone from all departments."

"I felt I got more of an insight into management techniques and how to better deal with people and teams regarding wording and body language"

"The course itself and facilitators could not be improved, as were very good, however just feel some of the topics were very familiar to me (which I think would have been due to the difference in experience in the room) and would possibly like to explore further in depth a course, which covers more discipline and grievance etc."

Supervisory Management Road Map

Phase 1: Developing Management Skills





Report No: C/PC/47-24

Agenda Item: 10.1

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 DECEMBER 2024						
Report Title:		TRAINING FUNCTION UPDATE & PERFORMANCE REPORT Q2 2024-25						
Report Classification:		For Scrutiny					<p style="color: red; text-align: center;">SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></p>	
1	Purpose							
1.1	The purpose of this report is to provide a high-level overview of the Training Function activity and performance over Q2 2024-25.							
2	Background							
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 Scottish Fire and Rescue Service (SFRS) Strategic Plan 2022-25 and Performance Management Framework (PMF).							
3	Main Report/Detail							
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 Q2 2024-25.							
3.2	Secondly, the report places a specific focus on the Key Performance Indicators as set out in the Performance Management Framework (PMF) 2023-24 , with an update into the Q2 2024-25 data, using the corporate Power BI reporting tool, aligned to the Training Function (Appendix 2).							
3.3	Finally, further detail to support the Q2 2024-25 Power BI report can be found in Appendix 3 – Performance analysis.							
4	Recommendation							
4.1	People Committee are asked to scrutinise the report and provide feedback as necessary on its content.							
5	Key Strategic Implications							
5.1	Risk							
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.							

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5.2	Financial	
5.2.1	There are no financial implications arising from the content of this report.	
5.3	Environmental & Sustainability	
5.3.1	There are no environmental & sustainability implications arising from the content of this report.	
5.4	Workforce	
5.4.1	The purpose of this report is to strengthen performance managements and drive improvement of our workforce.	
5.5	Health & Safety	
5.5.1	There are no health and safety implications arising from the contents of this report.	
5.6	Health & Wellbeing	
5.6.1	There are no health and wellbeing implications arising from the contents of this report.	
5.7	Training	
5.7.1	To ensure we have personnel maintain their currency within required training requirements for their role.	
5.8	Timing	
5.8.1	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	Performance	
5.9.1	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	Communications & Engagement	
5.10.1	To ensure performance and risk is discussed at all levels and the content of this reports shared to the relevant forums.	
5.11	Legal	
5.11.1	There are no legal implications arising from the contents of this report.	
5.12	Information Governance	
5.12.1	DPIA completed No.	
5.13	Equalities	
5.13.1	EHRIA completed – Yes. Training Function EHRIA.docx	
5.14	Service Delivery	
5.14.1	To support and drive improvement across the Service to positively impact upon the delivery of our services to the communicates of Scotland.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training Safety & Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient

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7.3	Rationale:	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.
8 Appendices/Further Reading		
8.1	Appendix A – Training Function Update	
8.2	Appendix B– Training Function – Power BI Dashboard	
8.3	Appendix C – Performance analysis – Q2 2024-25	
Prepared by:		Ally Cameron, Area Commander Training Function and Andy Scott, Learning Content, E-Systems & Performance Manager.
Sponsored by:		Ross Robison, Deputy Assistant Chief Officer Head of Training
Presented by:		Ross Robison, Deputy Assistant Chief Officer Head of Training
Links to Strategy and Corporate Values		
<p>SFRS Strategic Plan 2022-25</p> <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> <p>SFRS Training Strategy 2023-28</p>		
Governance Route for Report		Meeting Date
<i>Training Functional Management Team</i>		<i>6 November 2024</i>
<i>Directorate Management Team</i>		<i>21 November 2024</i>
<i>People Committee</i>		<i>5 December 2024</i>
<i>Training Safety and Assurance Board</i>		<i>12 December 2024</i>
		Report Classification/ Comments
<i>Training Functional Management Team</i>		<i>For Scrutiny</i>
<i>Directorate Management Team</i>		<i>For Scrutiny</i>
<i>People Committee</i>		<i>For Scrutiny</i>
<i>Training Safety and Assurance Board</i>		<i>For Scrutiny</i>

Training Function Update

Introduction

The purpose of this report is to provide a high-level overview of the Training Function Performance Q2 2024-25. This will enable key stakeholders and owners, to identify areas which can be discussed and what improvement actions are required.

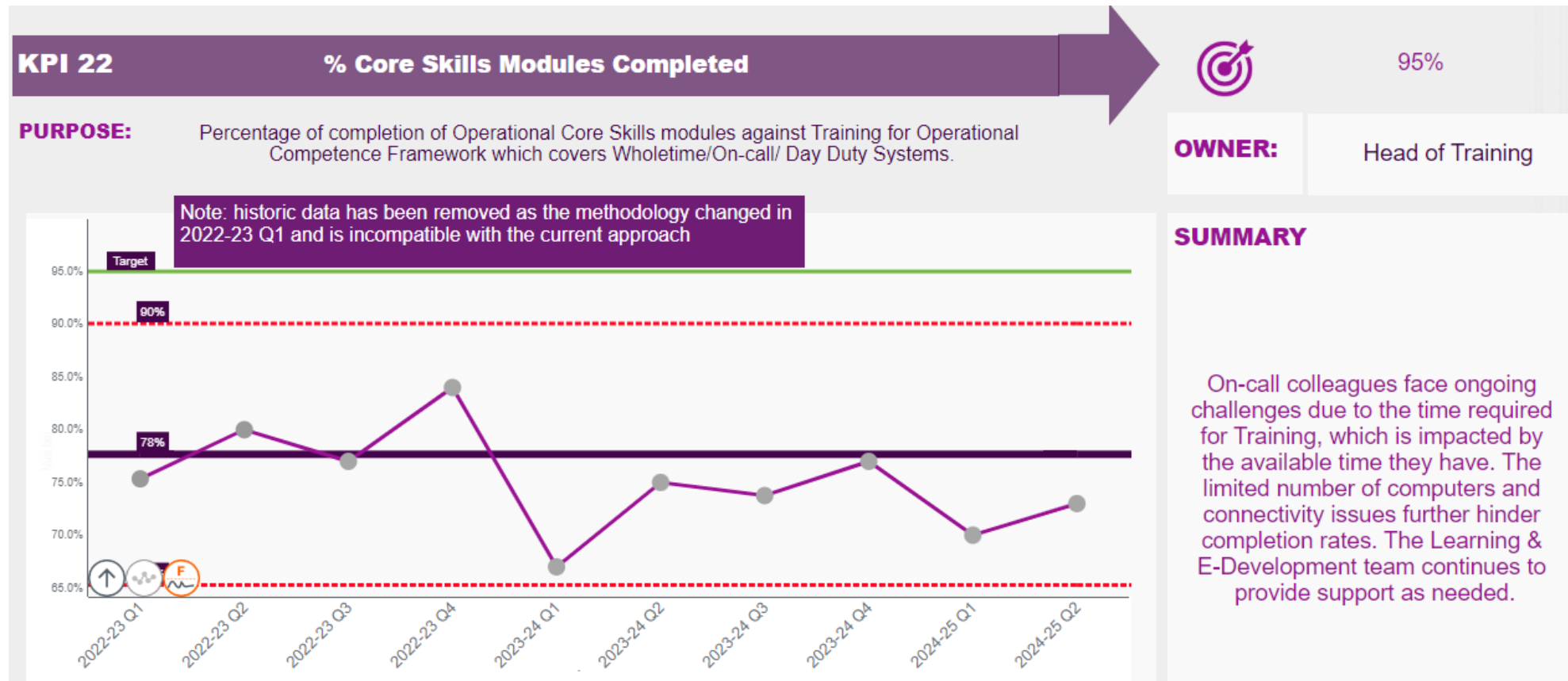
1.1 Key activity within the Training Function this quarter to support performance improvement.

<u>Item</u>	<u>Commentary</u>
<u>Functional Risk Register</u>	Further to our full review and update of the Training Function Risk Register Guidance document, regular meetings are now scheduled to improve focus on 'risks and issues' and also to further utilise 'Risk Appetite' to inform our thinking and position.
<u>Firefighter Safety</u>	To improve Firefighter safety linked to contaminants, all Training Centres are being supplied with additional Fire Kit (Reserve Stock) in support of students / candidates carrying out Compartment Fire Behaviour Training. Key sites will now receive 200 sets of new PPE. Instructors have also been issued a fourth set of PPE given the greater level of exposure due to the nature of their role.
<u>Item</u>	<u>Commentary</u>
<u>CFBT Visitations</u>	Aligned to the Training Function Vision & Strategy 2023-28 and the (draft) Training Strategic Asset Management Plan, personnel from the Training Function BA & Contaminants team have been conducting visitations across the UK FRS Sector, most recently at County Durham & Darlington FRS and Warwickshire FRS. The purpose of these visitations was to conduct benchmarking and also scoping linked to CFBT training facilities and the management of contaminants.
<u>Performance Reporting</u>	Following a Training Function workshop facilitated on Thursday 3 October, the Function has now streamlined some internal elements of performance reporting. These changes within our internal reporting structures are designed to improve upon and refine the process by which the Function collects and analyses performance data. A more concise form of internal performance reporting will assist the Training Function in making data-driven decisions and driving continuous improvement. It is evident the Training Functions focus on performance is assisting in general terms with the consistent positive trend against our KPI's.
<u>BA Recovery Plan</u>	Since the commencement of Phase 2 at the start of April 2024/25 (Q1) through to end of October 2024/25 (Q2), at total of 1598 operational personnel have now successfully completed the 3-1 refresher event at one of our 11 CFBT training sites across SFRS. We maintain on track to deliver against our overarching plan, with further courses programmed, and the aim is still to complete the full programme within fiscal year 2025/26, transitioning to a business-as-usual model which will be further informed from lessons learned as a result of the BA Recovery programme itself. A point to note that due to an organisational need to facilitate additional wholetime trainee courses through 2025/26, this will require a further consideration and review of the resource demand to continue to deliver as intended.

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<u>XVR</u>	XVR is the new Incident Command immersive software package recently purchased by the Training Function. The Incident Command Team will facilitate a demo to SLT on Wednesday 20 November to showcase XVR and discuss the planned integration of the software within our SFRS Incident Command Training Methodology.
<u>Partnership Working – Police Scotland</u>	A meeting took place on Wednesday 30 October between the SFRS Training Function and the Police Scotland National Innovation Team. The purpose of the meeting was to explore opportunities for collaboration linked to innovation, particularly in the learning environment. Initial discussions were extremely productive, and a further meeting will take place in due course. In the interim, the SFRS Training Function have been invited to attend an AVERT (Adaptive Virtual Reality Training) demonstration at Jackton Police College on Thursday 7 November.
<u>Capital Investment</u>	Working in partnership with colleagues in Asset Management and Property, the Training Function are now progressing several in-year priority repairs and wider capital investment projects aligned to the (draft) Training Strategic Asset Management Plan, and to maximise the budget allocation across our Training estate.

PowerBI Dashboard Data Training Function: -



KPI 23 % Advanced, Support & Emerging Risks Modules Completed



95%

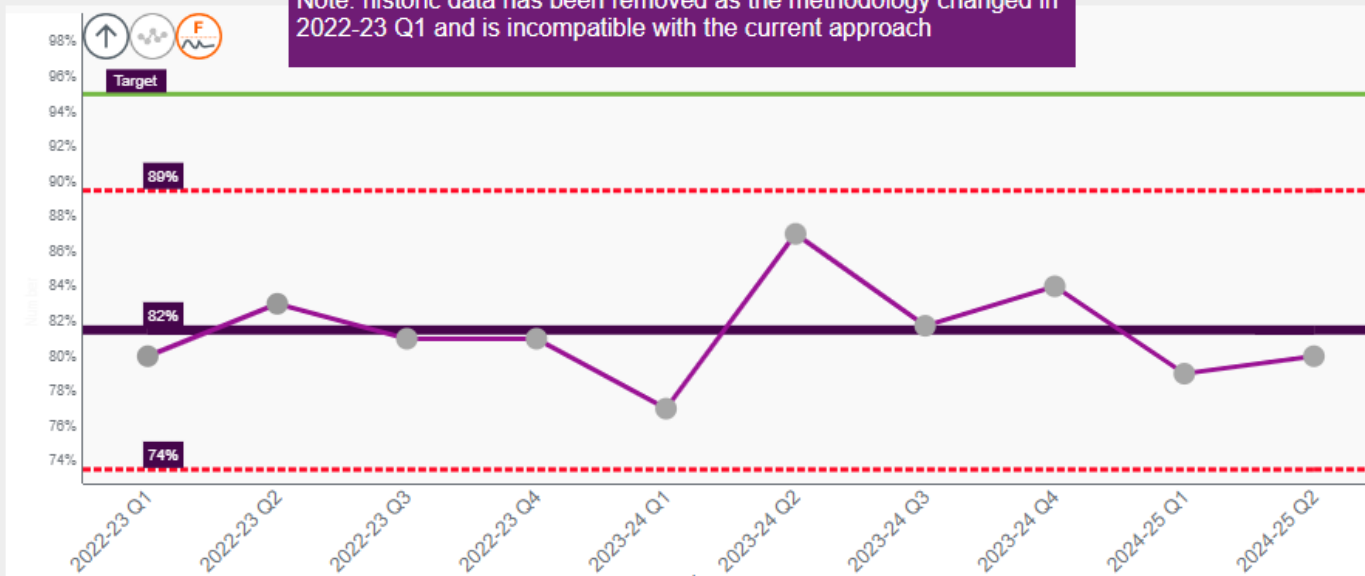
PURPOSE:

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

OWNER:

Head of Training

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach



SUMMARY

There has been a slight increase in completion rates across Wholetime, On-Call (Retained), and Day Duty groups. However, there has been a slight decrease in completion rates for On-Call Volunteers.

KPI 24

% Flexi Officer Module Completion



95%

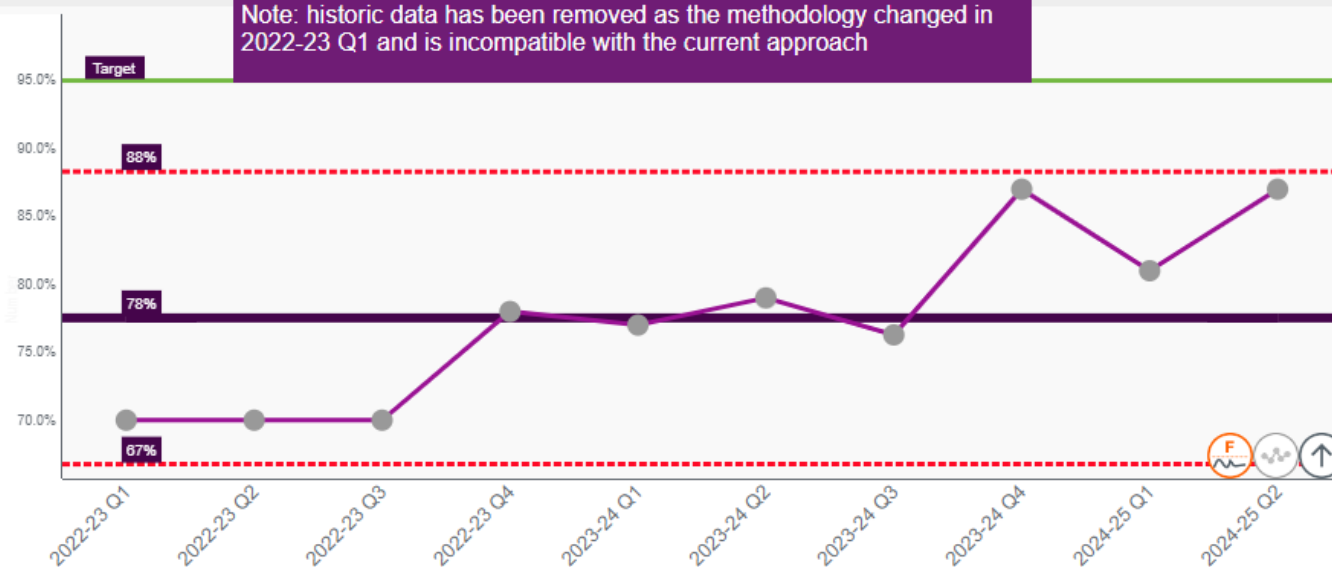
PURPOSE:

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

OWNER:

Head of Training

Note: historic data has been removed as the methodology changed in 2022-23 Q1 and is incompatible with the current approach



SUMMARY

The Flexi Duty Officer (FDO) Training for Operational Competence (TfOC) shows an increase compared to the previous quarter. Ongoing communication within this cadre will continue, to encourage completion rates.

KPI 25

% Incident Command Course Currency



91%

PURPOSE:

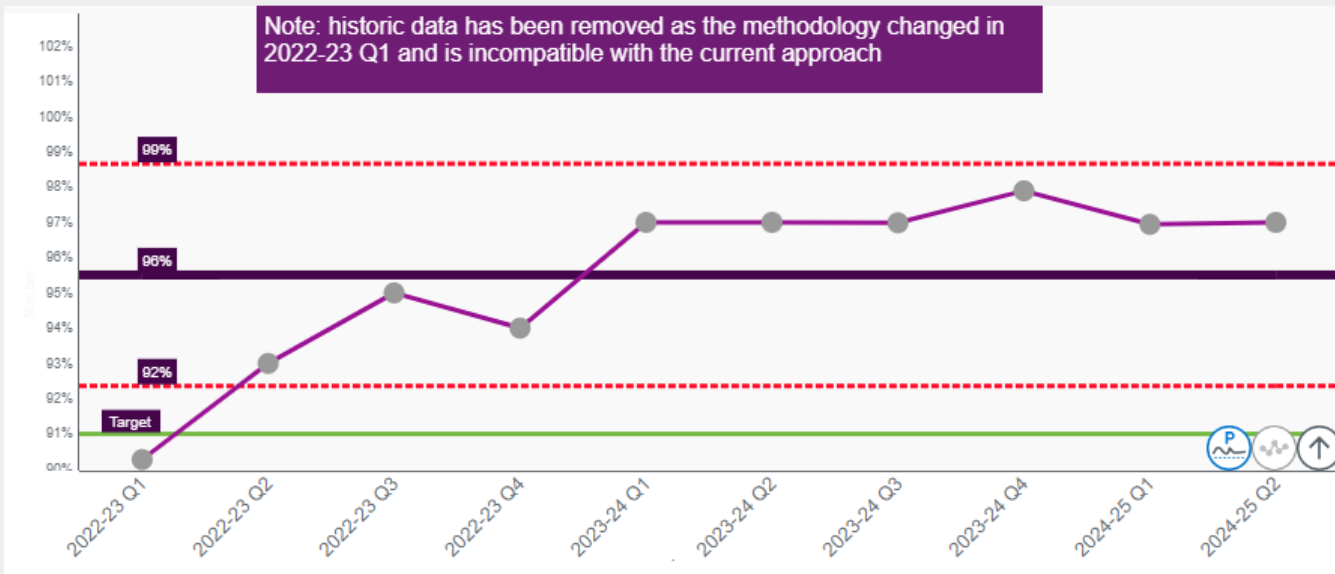
Percentage of completion of Incident Command currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

OWNER:

Head of Training

SUMMARY

Q2 of 2024-25 showed Incident Command completion rates remaining high, with only a small decrease across the Incident Command Level 2 courses. However, all courses continue to remain above target levels.



KPI 26

% Core Skills Currency



73%

PURPOSE:

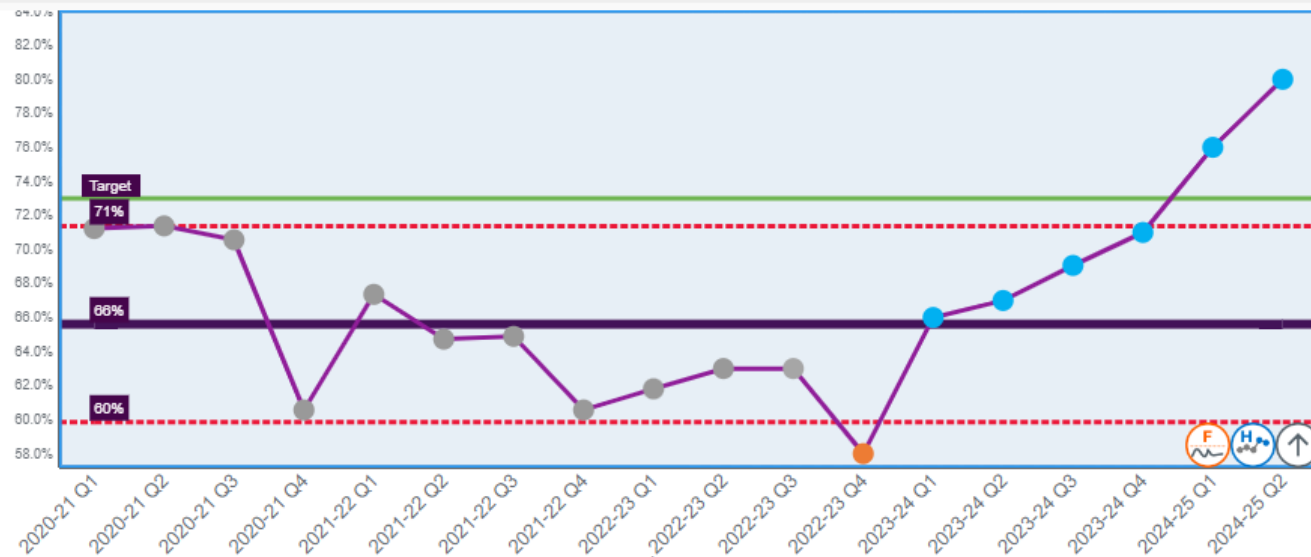
Percentage of completion of Core Skills currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

OWNER:

Head of Training

SUMMARY

Q2 of 2024-25 showed a continued increase in completion rates across all core skills. The Breathing Apparatus Recovery Plan continues to make a positive contribution.



KPI 27

% Specialist Rescue Currency



92%

PURPOSE:

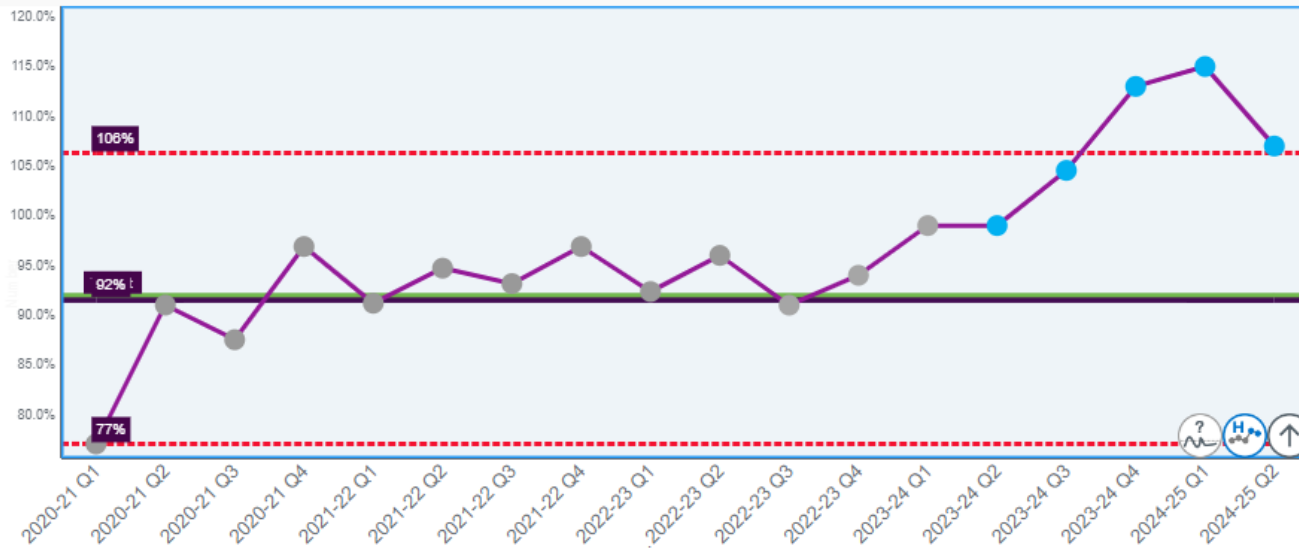
Percentage of completion of Specialist Rescue currency against the National Training Standard courses which focus on the acquisition and refresher courses delivered by the Training Function to provide/maintain currency of operational personnel.

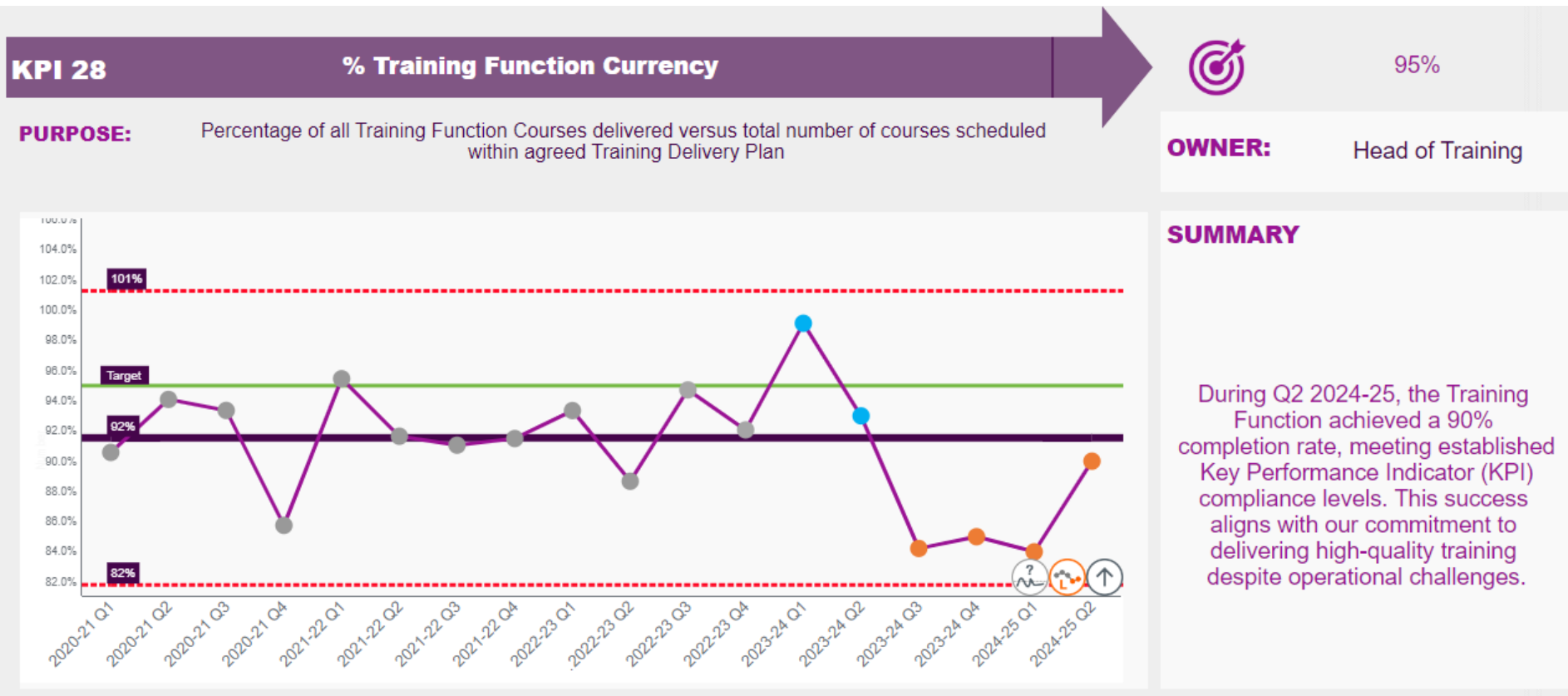
OWNER:

Head of Training

SUMMARY

Q2 of 2024-25 showed a slight decrease in completion rates across 3 out of the 5 specialist skills. However, rates continue to remain above set targets.





KPI 29

Training - Customer Satisfaction Rate



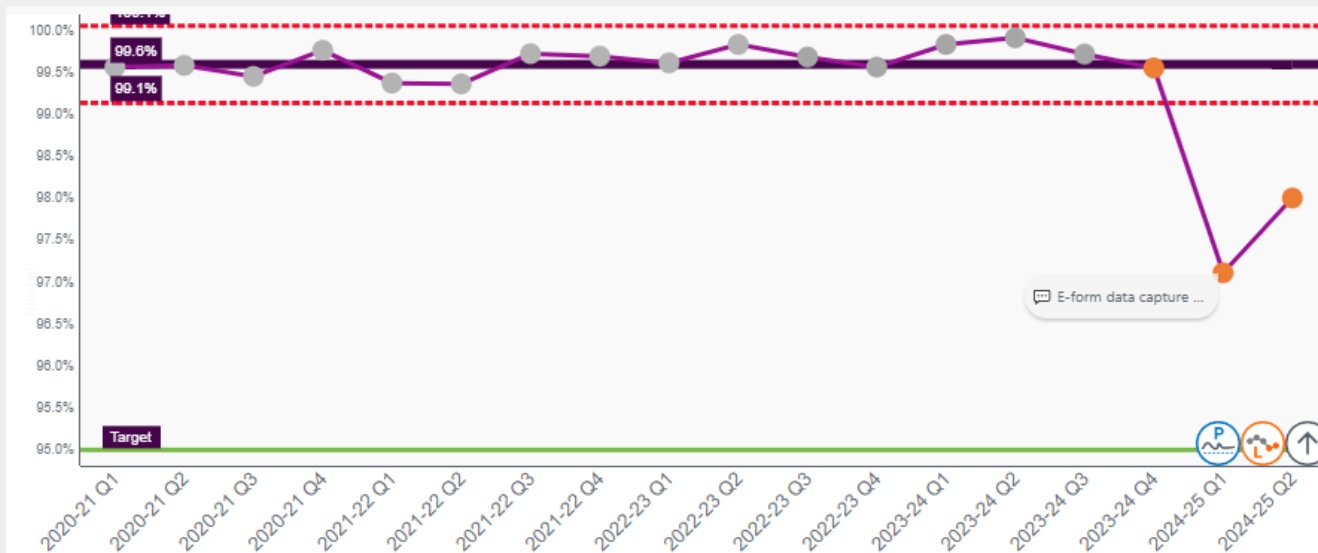
95%

PURPOSE:

Percentage of candidate satisfaction against Training Function Course Delivery

OWNER:

Head of Training



SUMMARY

Following the drop recorded in Q1 due to the new electronic feedback process, Q2 shows an increase in candidate satisfaction which remains above target. The change in the feedback process is providing the Training Function with more qualitative feedback.

Performance analysis – Q2 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 Q2 2024-25, the figures for the seven core skills indicate a 3% increase for the wholetime duty group. On Call recorded a 5% increase with Volunteer a 1% decrease. The Day Duty staff showed no change when compared with the Q1 2024-25 figures.

Core Skill topics covered in Q2 2024-25 were as follows:

- BA / CFBT / Tactical Ventilation
- RTC/Extrication
- Casualty Care
- SWAH
- Water Awareness
- Hazmat
- TTM Foam

Following a review of feedback from LSO areas, which returned only 2 responses, it was found that again this feedback mirrors that of previous quarters. Feedback would suggest that the challenges and expectations of TfOC modules and core skills maintenance remains too high for on call and volunteer staff. Work is being done to address this and LSO areas are continuing to support teams ensuring recording and maintenance of TfOC and PDR Pro.

Additional trends evident where practical elements attainment was lower than the technical across several core skills.

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 continue to attend 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 when needed. 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. The introduction of viva engage bolsters the options to provide additional support.

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

Topics covered in Q2 2024-25 were as follows:

- Fire Contaminants
- Gifts & Hospitality

The data for Q2 2024/25 reveals a slight increase in completion rates among the Wholetime and Day Duty groups. However, On Call (Retained) and Volunteer duty groups have seen a slight decrease compared to Q1 2024/25.

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Feedback from LSO areas aligns with that of the Core Skill modules, indicating that the demands are unachievable for On Call and Volunteer On Call staff groups. The demand for this quarter was significantly less than the previous however to continue to reduce the overall demand, the Learning & E-Development team continue to blend some of the Core Skill elements with the Incident Type modules.

This approach delivers technical input in an applied context rather than as isolated technical input. For example, BA stair procedures have been integrated into the Secure Accommodation module. Additionally, there are proposals to map out the organisational learning over a three-year training cycle, aiming to evenly distribute these types of modules and avoid overburdening individual quarters.

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

FDO Modules topics covered in Q2 2024-25 were as follows:

- July – Haz Mat
- August – Fire Contaminants / IOR / Radiation
- September – Command Support

The Flexi Duty Officer (FDO) Training for Operational Competence (TfOC) in Q2 of 2024/25 shows an increase compared to Q1 of 2024/25. Ongoing communication within this cadre, along with scrutiny of the data, aims to identify and inform individuals who are failing to maintain competency.

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 at over 90% in all areas. The one National refresher programme that has dipped below 90% is the ICL1 Refresher WSDA/Volunteer figure that has dropped to 87%. On interrogation this equates to 14 volunteer (potential) incident commanders out of a total of 108. This shortfall is due to the usual unavoidable difficulties faced with availability, transport and short notice sickness. Planning is underway for future ICL4 CPD and assessments that will be arising from the new round of promotions at DACO and above.

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 100% for Q2. This is an overall decrease of 2% from the Q1 figures, and while this represents a small reduction for the quarter the overall target has been achieved. Wholetime competency rates during this period remain high with a Service wide competency rate of 122% for Q2. The Service wide On-Call competency rates have decreased marginally from the previous quarter, going from 90% in Q1 down to 84% in Q2. This will be monitored but it is worth noting that this figure is still a significant increase on the 70% figure from last years Q4.

As per previous quarters, when reviewed against each SDA there remains some significant variations in currency rates. The ESDA wholetime and On-call duty groups both continue to perform strongly with figures of 152% and 117% respectively for Q2, both showing minimal fluctuation from Q1 figures. The North SDA wholetime also exceed target figures, with 133% competency rates. On-call figures for Q2 have decreased slightly from 90% in Q1 to 86% in

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Q2, which would be considered a marginal fluctuation. The WSDA Q2 overall whole-time figures have increased from 90% to 100% of the competency target, which is part of an ongoing improvement trend. West SDA On-call and volunteer groups competency targets have shown 1% decrease and 3% percentage increases respectively, but the competency targets overall are not being achieved, with On-call achieving 56% and volunteers achieving 19% of the ICAT Operator competency rates for Q2. As per previous quarters when reviewed against the specific LSO areas in the WSDA there are significant variations in the performance figures. For EWDAB, Dumfries and ENSA the competency rates for all duty groups remain well below the target level while ERRI and Lanarkshire both demonstrate competency levels above or close to the target for both their whole-time and On-call station personnel.

The low competency levels in some West SDA LSO areas remain as a key area of focus with the WSDA ICAT instructional leads working with the LSO areas with the aim of supporting the training delivery improvements required to meet the competency thresholds. The Service lead for casualty care with the support of the Casualty Care Practitioner Group are supporting the WSDA ICAT delivery leads with addressing the challenges. An example of a focused approach for the LSO areas in the West SDA involved training selected watch personnel to an ICAT Intermediate (Instructor) level within the CoG watches, where there had previously been low ICAT competency levels. This allows the ICAT Operator course content to be delivered at a watch-based level over a period time on station. At a pre-arranged date an assessment of skills competency will be undertaken by Training Function instructors. This approach has a number of delivery-based benefits for candidates and the additional capacity created for assessing Training Function instructors provides an opportunity to increase the number of personnel coming through the ICAT pathway. This process has seen an increase in competency rates in CoG.

Driving:

The overall percentage of 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 91% and Volunteers duty system seeing a minor increase from 64% to 65% 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 three current vacancies included in the recent NSDA CC campaign, sadly, TSA were able to secure appointments from the NSDA process and three positions remain vacant. This will, undoubtedly continue to affect capacity and completion rates within the NSDA. Several proposals are currently being considered to address the challenges faced in recruitment across the uniformed cadre of instructors.

Individual SDA results for wholtime show the NSDA completion rate rising from 85% to 86%, despite the limited instructor availability and ESDA performing as per last reporting period, with a slight decrease from 81% to 80%. The WSDA again continues to perform as per last period with another slight decrease from 72% to 71% completion rate. The steady position across all areas can be attributed to recovering staffing levels within the driver training section, due to long term sickness returns and appointment of a CC in WSDA. Improvements are expected in WSDA on completion of two newly appointed staff obtaining relevant ERDTI status and available to assist in the delivery of courses, this is expected to be complete by Q4 of 2024/25 training year and will contribute to increasing performance figures within the WSDA.

On-Call and volunteer completion rates across all SDAs shows; NSDA On-Call rise from 82% to 85% and Volunteer increasing from 70% to 74%, showing a small increase from previous reporting period; ESDA On-Call remains similar at 101% and WSDA On-Call 95% and Volunteer increasing by 1% from 62% to 63%, showing a small increase of 1% from previous reporting period. A clear focus for driver training in the ESDA, through discussion with LSO's, was a drive to improve On Call driver availability, hence the high percentage rates. The

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upskilling of newly appointed staff within WSDA and NSDA driver training section, expected in Q4 of 2024/25 training period, should see an increase in percentages across WSDA On Call and Volunteer personnel. Additional discussions have begun between Driver Training lead and OCSCG to identify alternative solutions to increase driver numbers, particularly within the NSDA On Call and Volunteers duty systems, which will significantly increase driver availability.

Results between individual LSO areas also varies with EWDAB and CoG remaining as the LSO area's showing the lowest completion rates within WSDA, at 61% and 66% respectively. This, as above, is the result of staffing levels within the WSDA driver training section due to sickness absence and vacancies. The recent appointment of 2 new driving instructor will support an improving picture in the WSDA and the return of 1 members of staff, currently absent from work, has also improved the figures across the SDA. Significant work is in progress to address the staffing levels across the WSDA and wider Driver Training team through conversions of positions and a proposed pilot pathway report, currently working through governance. All of which are designed to support an increase in course delivery across all SDA's.

Within the NSDA, the focus continues to be towards Highland LSO On-Call which has the lowest completion rate within the NSDA at 71% an increase from previous period, with WIOS LSO showing 77%. The NSDA has again seen some personnel and staffing issues within Inverness with long term sickness and a temporary promotion seeing a reduced instructor number. The return of the Watch Commander from long term sickness has greatly assisted in improving the completion rates across Highlands LSO area with the loss of a substantive Crew Commander within Inverness driver training team to WIOS core Watch Commander position through promotion, 2 further Crew Commander vacancies and another ACAM based instructor now retired, has had an impact on capacity. The current vacancies in the NSDA (3 x CC driving instructor positions) remain a priority area for Driver Training management teams to address. A collaborative piece of work with WIOS LSO has taken place and resulted in an innovative solution to fill hard to fill posts across all WIOS islands and has seen the appointment of 2 x On Call Crew Commander, who will support driver training in future, to support an increase in training outcomes.

A proposal to increase the quantity of ERD reassessments daily has resulted in a new reassessment model being developed and implemented as a pilot across all SDA's. The new model will see substantial increases in reassessment take place on any given day, delivered locally to individual crews, with all ER drivers on each watch being assessed on the same day. This will see a minimum twofold increase (single appliance watches) through to a potential fivefold increase at multi appliance watches, significantly increasing completion percentages moving forward.

The proposed model, developed in partnership with Police Scotland through a series of benchmarking exercises, would 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):

BA:

The percentage of BA currency over all SDA's is 88% which is an 5% increase from Q1
Wholetime currency over all three SDA's is 92% which is an 8% increase from Q1
On Call currency is 86% which is a 4% increase from Q1
Volunteer Currency is 60% which is a 1% decrease from Q1

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CFBT:

The percentage of CFBT currency over all SDA's is 80% which is an increase of 6% from Q1
Wholetime currency over all three SDA's is 85% which is an 6% increase from Q1
On Call currency is 77% which is a 6% increase from Q1
Volunteer Currency is 45% which is a 1% increase from Q1

TV:

The percentage of Tac Vent currency over all SDA's is 59% which is an increase of 6% from Q1
Wholetime currency over all three SDA's is 54% which is an 5% increase from Q1
On Call currency is 66% which is a 5% increase from Q1
Volunteer Currency is 18% which is a 6% increase from Q1

All three SDA's continue to deliver the BA recovery programme, we shall continue to see an increase of currency across the country. Regular meetings and dialogue are now firmly established with KFT, Property and Asset management with Premises responsible persons been identified and communicated.

The training support co-ordinator continues to identify personnel who require the appropriate training and schedule the course required and location.

This targeted approach ensures risk critical training is delivered on a priority basis and captures personnel who require re-accreditation. This improves the skills within area, increases competency and reduces the organisational risk to the service.

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

Competency across all Specialist Rescue capabilities continues to progress following the impact of unforeseen pension changes, SSRP, retirements and recent promotion processes leading to staff promotions and/or transfers. All Specialist Rescue courses are under continual review to highlight any efficiencies that can be made promoting 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 that local facilities allow.

Heavy Rescue:

The currency levels within this specialist training area continue to improve as can be seen from the above graphic. The East SDA is currently showing a currency level of 150% against the Target Operating Model (TOM) while the West SDA is currently sitting at 106%. 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 continue to be scheduled in 2024 – 2025 will allocate higher course nomination numbers to NSDA stations, specifically PKAD and H&I, as the NSDA currency levels while improving currently sit at 84% (ACAM – 140%, H&I – 71% and PKAD – 69%) against the TOM. GC Nelson has worked with SMEs to schedule 7 HRO courses during the current Training year (2024 – 2025) which is projected to ensure all SDAs attain the TOM and that the increases in currency will provide resilience and flexibility within the specialism across all SDAs. Current TOM for HRO is 60%. The scheduled courses will look to increase the working currency levels within each HR Station to approx. 75% (15% above the TOM) for resilience and succession planning.

CPD events have now taken place in 2024 – 2025 to provide refresher training specifically in the WSDA ensuring maintenance of skills is protected and the currencies of existing HRO qualified personnel are maintained.

OFFICIAL

A HRO scrap vehicle supplier has been identified and delivery of vehicles has taken place supporting a NSDA specific HRO course which was delivered in late July at Perth Training Centre. Further NSDA specific courses are planned for early December (Inverness) and January 2025 (Perth) in support of this work to ensure all SDAs attain the HRO TOM by the end of this Training Year.

USAR:

Urban Search and Rescue (USAR) currency has seen a slight reduction from 90% to 87% in Q2. A reduction to 87% is attributed to 3 courses being cancelled due to insufficient numbers, a directed approach has been taken to identify the stations with skills gaps and a request is being made via the Training SPOCs to areas for targeted course nominations. 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 KATA programme which has resulted in the projected increase in competency figures within the area. A possible Mass Decon instructor course may be required in Q3.

The removal of the training collapsed structure simulator has impacted upon course delivery over the last 5 quarters. The Collapsed structure simulator has now been sanctioned and due for completion early 2025.

On completion of the previous Trainee Foundation course there were 8 Trainees assigned to stations with the USAR attribute, this impacted figures for Q2, however, a course will be scheduled at the earliest opportunity to upskill the candidates.

Water Rescue:

Water Rescue maintains a consistent elevated level of competence with over performance figures linked to the request of SLT to have every trainee assigned to a water rescue station fully trained within two weeks of completing foundation course, an adaptation to this process was implemented for the current trainee course which allowed for each candidate allocated a WR station to be upskilled to SRT level prior to starting at station. An issue with the wrong paperwork being issued & submitted by Rescue 3 has delayed the recording of 48 courses which has impacted on the overall figures, this has now been rectified. A change to the Standard Operating Procedure regarding the number of operators required for a boat crew has impacted positively on currency figures. VHF radio courses for all 20 stations nearing completion with 19 of the 20 stations complete due to personnel issues within Newton Stewart FS. A combined Swift and Flood Rescue Boat Operator and Royal Yachting Association level 2 with VHF Short Range Certificate within the same course has been completed and will continue as a course efficiency/improvement. Knowledge Applied Training Assessment (KATA) sessions continue to maintain 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 Tactical Advisors course development Q2/Q3 2024 time permitting.

Rope Rescue:

Rope rescue competency has stabilised at 124% in Q2. Ongoing communications with the Rope Rescue Station Commanders have assisted in aligning competency levels across the 5GDS. The purpose being to select the most suitable personnel from each station, with a targeted training approach for each watch. Rope Rescue SNUG meetings ongoing to allow for shared ideas around training and subject progression.

Mass Decontamination:

Mass Decontamination competency has seen a slight decrease in performance to 89% this is due to the reallocation of the skills across the country a full review of the skill will be started to ascertain if additional instructor courses are required. The impact of BA recovery due to the local training teams has also affected training delivery.

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

During Q2 2024-25, the Training Function achieved a 90% completion rate, meeting established Key Performance Indicator (KPI) compliance levels. This success aligns with our commitment to delivering high-quality training despite operational challenges.

Key Reasons for Course Cancellations:

- **Instructor Availability:** Primarily impacting Driver Training Courses, instructor shortages led to the cancellation of 12 courses.
- **Shift in Priorities – "3-in-1" BA Recovery Transition:** As previously reported, the transition to the "3-in-1" BA Recovery model required repurposing of pre-scheduled course dates to align with the new delivery format. This shift led to the cancellation of courses initially scheduled as BA Refresher and Carbonaceous refresher sessions. However, no reduction in delivery capacity has occurred due to the updated course coding.

Non-Completion Factors within Refresher Programmes: The transition to the "3-in-1" BA Recovery model remains a significant factor for non-completion, as course dates were restructured to fit the updated delivery model. Additional cancellations within refresher programmes were due to:

- **Instructor Availability:** Availability continues to impact course scheduling.
- **Minimum Attendance Requirements:** Affected some courses unable to meet minimum student numbers.

Continuous Improvement Measures: To enhance training efficiency, the department is actively:

- Consolidating courses with low attendance,
- Offering alternative venues to accommodate more participants, and
- Addressing instructor availability issues.

These efforts reflect the department's dedication to continuous improvement and operational resilience.

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

The number of returns is up slightly from Q1 with 1242 valid evaluation forms being submitted for Q2 courses.

Following the large drop recorded in Q1 due to the new electronic feedback process, Q2 shows an increase in candidate satisfaction of 1.28% to 98.39% which remains above target (95%).

Reasons for candidates selecting "Fair" or "Poor" for their overall experience include lack of adequate wash and decontamination facilities, catering provision and course structure/delivery models.

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., 1.61% of candidates (20 candidates from 1242) in Q2 2024 25 selected "Fair" or "Poor".



Report No: C/PC/48-24

Agenda Item: 11.1

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 DECEMBER 2024						
Report Title:		SAFETY AND ASSURANCE PERFORMANCE REPORT: QUARTER TWO (Q2) 2024-25						
Report Classification:		For Scrutiny					<p style="text-align: center;">SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u></p>	
1	Purpose							
1.1	<p>The purpose of this report is for the People Committee to scrutinise the content of the Safety and Assurance (SA) Q2 2024/25 Q2 Performance Report as below:</p> <ul style="list-style-type: none"> • Safety and Assurance Key Achievements; • Legislative Compliance; • Scottish Fire and Rescue Service (SFRS) SA Key Performance Indicators (KPI); • Working Group Updates; and • SDA/Directorate Statistics. 							
2	Background							
2.1	The revised Q2 report now includes a comprehensive range of Safety and Assurance information along with relevant updates. This enhancement aims to improve communication and understanding among SFRS staff and demonstrates our commitment to continual improvement.							
2.2	The Safety and Assurance Function have provided an update regarding key projects of work across the function in Q2 to support SFRS Safety and Assurance Performance.							
2.3	The KPIs within PowerBi provides an overview of the SFRS Safety and Assurance performance in accordance with the Performance Management Framework 2024-2025 which defines the SA KPIs.							
2.4	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.							
3	Main Report/Detail							
3.1	<p>This report provides an overview on Health and Safety performance against the following KPIs:</p> <ul style="list-style-type: none"> • 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"> - There was a 25% (4 to 5) decrease when comparing Verbal Attacks from the same quarter in 2024/24. 							

<p>3.2</p>	<ul style="list-style-type: none"> • 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"> - Physical attacks remain numerically consistent when compared to Q2 23/24 (9). Positively, none of these resulted in injuries against SFRS staff in Q1 2024/25. • 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"> - A 25% decrease is noted in RIDDOR events when compared Q2 of 23/24, (4 to 3). • KPI 53: Accident and Injuries. The KPI demonstrates total accidents and injuries to occur through workplace accidents. <ul style="list-style-type: none"> - There was a 18% increase (44 to 52) when comparing to Q2 in the previous reporting year. The top three causations were human error, slips, trips, and falls and impact from a stationary/moving object. • 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"> - There was a 56% decrease (77 to 34) when comparing Q2 to the previous reporting year. The most common categories were Appliance and Pumps (11 of 34), Ladders (5 of 34) and Firefighting Equipment (2 of 34) • KPI 55: Vehicle Accidents. The KPI is the total number of events that involved vehicle accidents. <ul style="list-style-type: none"> • There was a 4% (54 to 52) decrease in Vehicle Accidents when comparing Q2 to the previous reporting year. • KPI 56: % of Year to Date (YTD) H&S Actions Completed. The KPI demonstrates the completion of improvement plans to enhance safety performance. <ul style="list-style-type: none"> - 60% of Q2 actions were complete. This reduction can be attributed to outstanding actions relating to Support Reviews for Self-Compliance and the development of IOSH Managing Safely Course. • 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"> - There were 18 new actions recorded during Q2. Actions from debriefs continue to be monitored through the Organisational Learning Group (OLG). <p>Further detail can be found within the Safety and Assurance Quarter 2 Report and the PowerBi KPIs.</p>
<p>4</p>	<p>Recommendation</p>
<p>4.1</p>	<p>People Committee are asked to scrutinise the content of the Safety and Assurance performance for Q2 2024-25.</p>
<p>5</p>	<p>Key Strategic Implications</p>
<p>5.1 5.1.1</p>	<p>Risk Failure to monitor Health and Safety performance and identify areas of continuous improvement in Health and Safety.</p>
<p>5.2 5.2.1</p>	<p>Financial 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	Environmental & Sustainability There are no environmental implications to be considered. This report is circulated electronically.
5.4 5.4.1	Workforce 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 5.5.1	Health & Safety 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 5.6.1	Health & Wellbeing 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 5.7.1	Training 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 5.8.1	Timing The performance will be reported through the appropriate governance routes as noted within the Governance Route of Report Section.
5.9 5.9.1	Performance 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 5.10.1	Communications & Engagement No further engagement is required. Performance is communicated through local Safety and Assurance Liaison Officers (SALO's) and SAIGs.
5.11 5.11.1	Legal Failure to monitor and improve the management of Health and Safety could result in non-compliance to Health and Safety legalisation.
5.12 5.12.1	Information Governance There are no implications that require to be noted for GDPR purposes.
5.13 5.13.1	Equalities 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 5.14.1	Service Delivery This report has no direct impact on Service Delivery. Any actions will be discussed through service delivery SAIGs.
6	Core Brief
6.1	Not applicable

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7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The Quarterly Report informs the workforce of the organisation's safety performance and the progress being made toward achieving the KPI's and monitoring the effectiveness of the Health and Safety Management System.
8	Appendices/Further Reading	
8.1	Appendix A: Health and Safety Quarter 2 Report 2024/25.	
Prepared by:		Victoria Regan – Health and Safety Business Support Officer
Sponsored by:		Jim Holden - Head of Safety and Assurance
Presented by:		Jim Holden - Head of Safety and Assurance
Links to Strategy and Corporate Values		
<p>Strategic Plan 2022-25</p> <p>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.</p> <p>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.</p>		
Governance Route for Report		Meeting Date
<i>SA Functional Management Team</i>		<i>07 November 2024</i>
<i>Safety and Assurance Subgroup</i>		<i>07 November 2024</i>
<i>TSA Directorate Management Team</i>		<i>21 November 2024</i>
<i>People Committee</i>		<i>05 December 2024</i>
<i>Training, Safety and Assurance Board</i>		<i>12 December 2024</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>
		<i>For Recommendation</i>
		<i>For Scrutiny</i>
		<i>For Scrutiny</i>
		<i>For Decision</i>

Safety and Assurance Quarter 2 2024-25 Performance Report

Enhancing Safety and Assurance across the Scottish Fire and Rescue Service by sharing lessons learned, promoting continual improvement.



Content

- [Introduction](#)
- [SA Key Achievements](#)
- [Legislative Compliance](#)
- [SA SFRS Key Performance Indicators \(KPIs\)](#)
- [Working Group Updates](#)
- [Directorate Event Statistics](#)

Introduction

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.

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.

All statistics and figures quoted are internal management information, they are provisional and may be subject to change. Published statistics should be quoted for wider public use.

For any further information please email SFRS.HealthandSafety@firescotland.gov.uk.

Key Achievements: Safety and Assurance Function

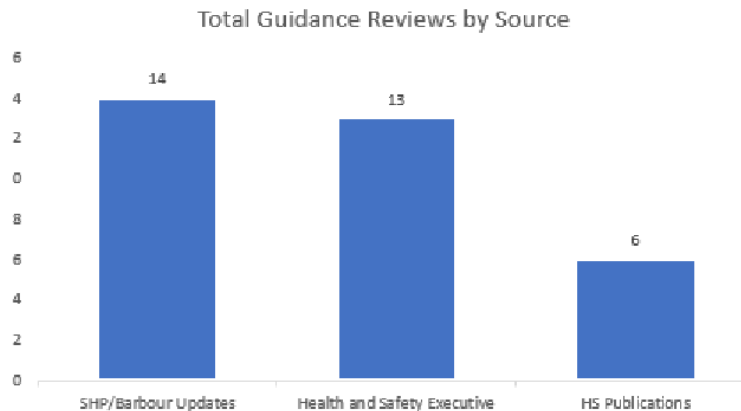
Safety and Assurance have worked on the following key activities to support performance improvements.

Item	Commentary
Face Fit Testing (FFT)	Safety and Assurance have a 100% completion rate in FFT with exception from those exempt and long-term leave. SA continues to support other Directorates to achieve compliance.
Risk Assessments	SA continue to support the review of risk assessments identified within Gantt Charts. A total of 47 GRAs, SSOW and Technical assessments have been completed in Q2. SA GRA Register shows 69% of GRAs are live and in date.
Contaminants Project	SA have developed a fire contaminants questionnaire to assist Assets decipher they space available for airing rags/cages. To support zoning of SFRS premises, SA are developing a Fire Contaminants Risk Assessment Checklist and Information Zoning Guidance.
OA Improvements	A debrief has been carried out for the level 3 incident at Linwood. 3 further information notes have been received from NFCC are under review and will be progressed through relevant governance.
Food Safety	Following direction at TSAB, an implementation plan has been created to manage risks associated with food safety following research.
Support Reviews	A support review was carried out on the 2023 Self Compliance documentation. A 10% sample was reviewed and all those selected obtained a gold award. Feedback was provided to participants to review and update their opportunities for improvements.
Planning Update	Premise Fire Safety Management Arrangement has been re-published after approval of a revised Personal Emergency Evacuation Plan. Office Handbook and GRA043 was updated to reflect HSE homeworking guidance and violence and aggression guidance.

Legislative Compliance

A total of 33 health and safety guidance reviews were carried out in Q2 2024/25 showing a proactive approach to maintaining our Health and Safety Management System by ensuring legislative compliance, horizon scanning for best practice and reviews of health and safety journal articles.

Of the 33, 18 required no further action as our arrangements reflected guidance content. 9 were sent on to Business Partners for collaboration and continuous improvement in accordance with their own arrangements. The remaining 6 reviews were logged for future arrangements, research or development considerations.

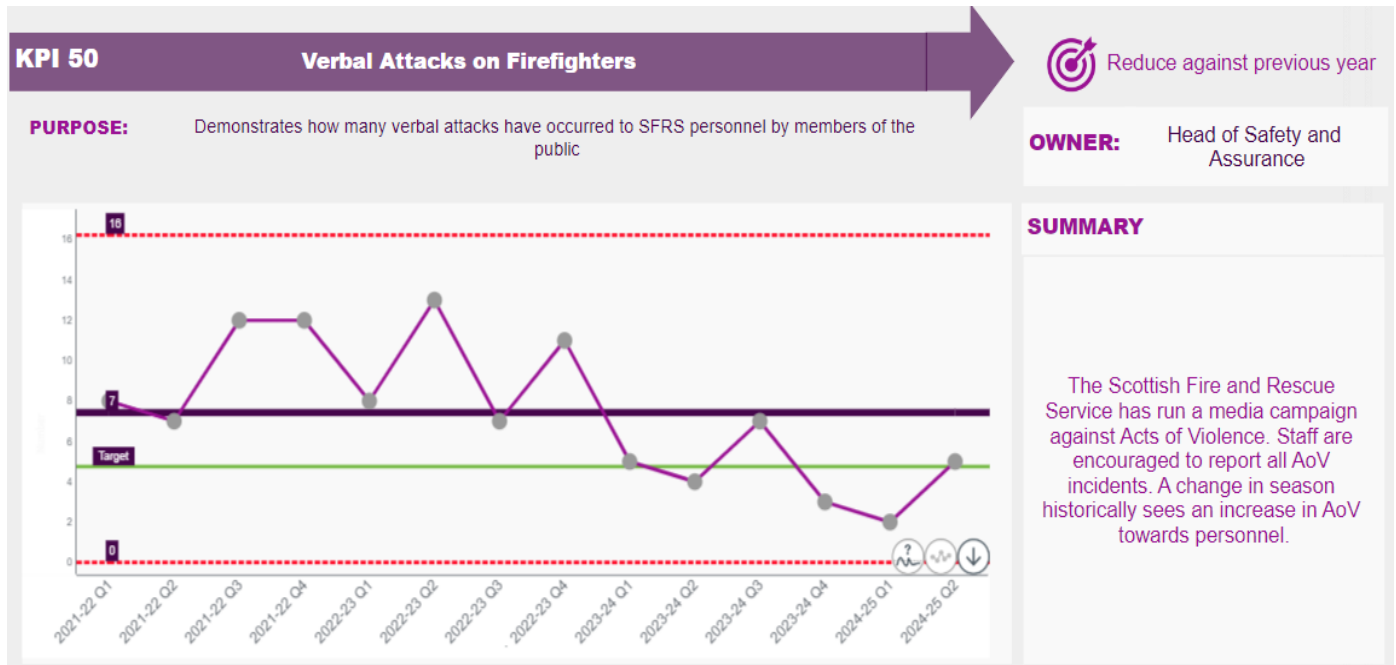


Example of reviews:

- Health and Safety Executive (HSE) [Asbestos campaign podcast](#), highlighting risk of asbestos. SFRS Management Arrangement and procedures follow HSE Asbestos guidance and podcast shared with Business Partners.
- HSE [Managing work related violence and aggression](#) was shared with relevant Business Partners to be captured in business partners arrangements i.e. Support Staff Handbook update.
- HSE [Home working guidance](#) including violence and aggression guidance was reviewed and updated into [Health and Safety Office Handbook](#) and supporting generic risk assessment.

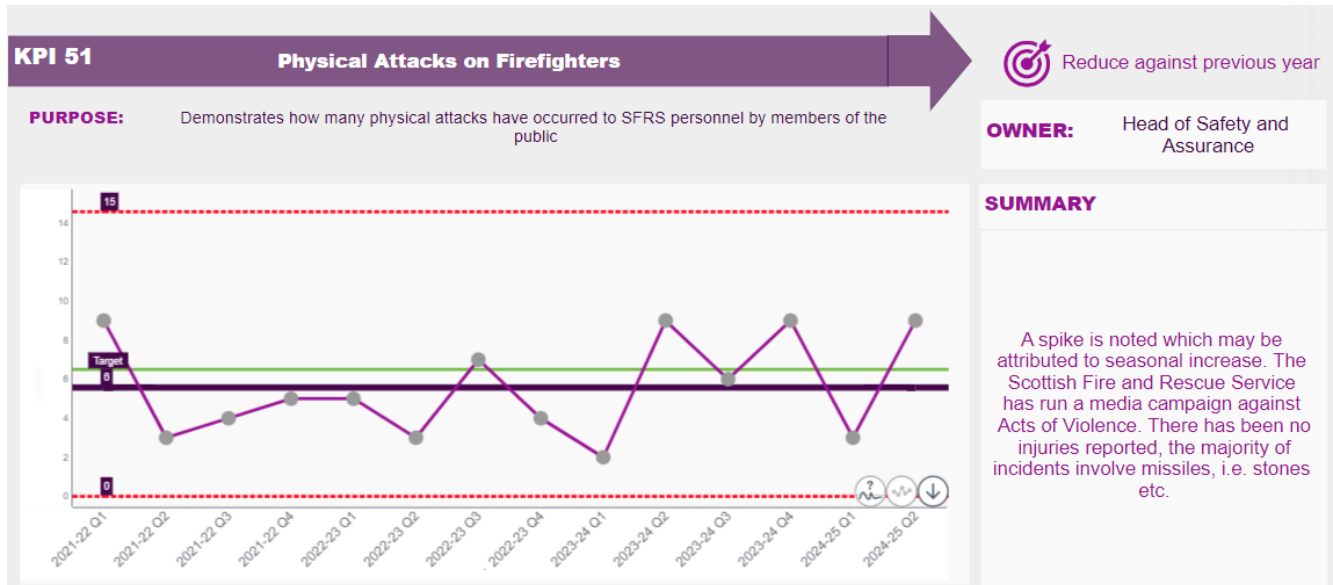
Key Performance Indicators

KPI50: Verbal Attacks on SFRS Staff



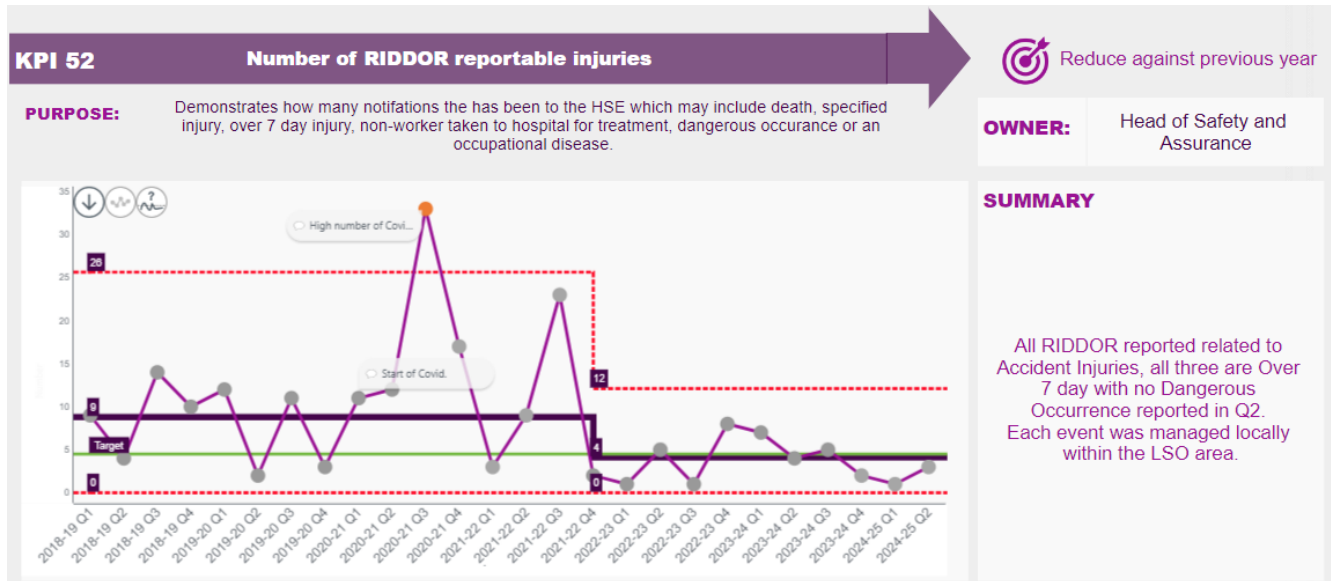
3 events occurred at non-operational incidents and the remaining 2 at operational incidents. 1 required the assistance of Police Scotland. Verbal attacks increased 25% from Q2 23/24. Acts of Violence (AoVs) continue to be managed through SDA engagement with partner agencies to enhance and support the ongoing reduction. When compared to the same quarter in the previous reporting year (4), there is a numerical increase of 1.

KPI51: Physical Attacks on SFRS Staff



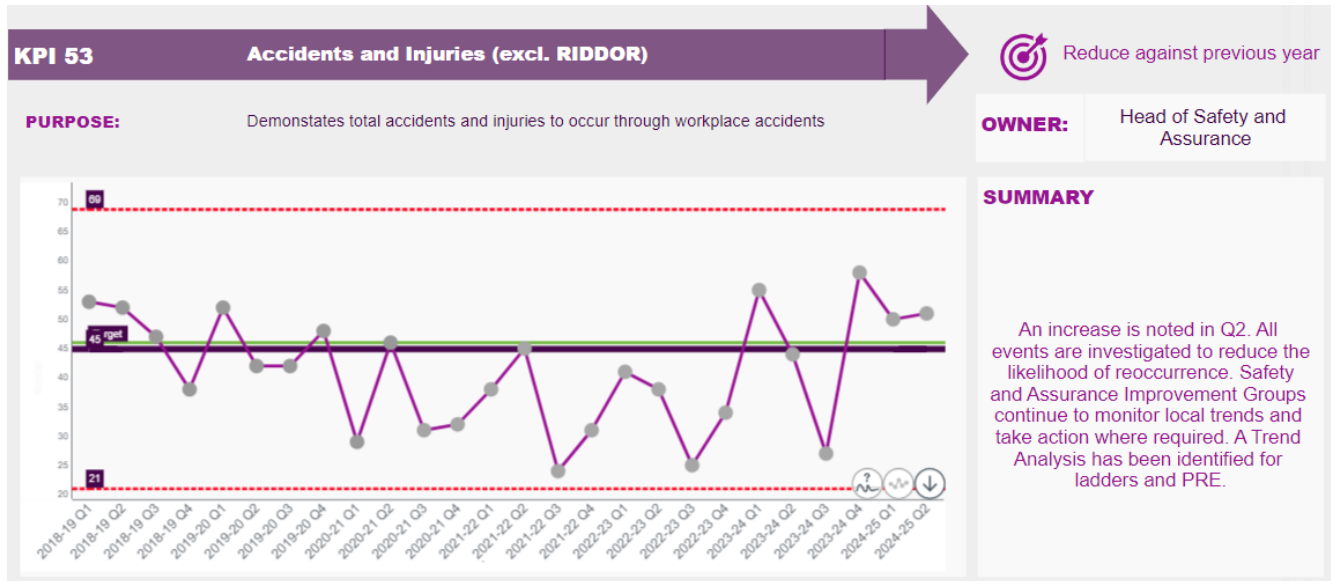
Physical attacks remain numerically consistent when compared to Q2 23/24 (9). There were no injuries to SFRS staff. 8 events occurred during operational activities and the remaining occurred during a non-operational activity involving an attack against property where damage to the fire boat and stolen equipment was reported. 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 (RIDDOR)



A 25% decrease is noted in RIDDOR events when compared Q2 of 23/24, (4 to 3). All 3 events were reported as Accidents and included damage to a shoulder when exiting a loft, a steam burn and an injury to leg from a Stanley knife, resulting in stitches.

KPI53: Accident/Injuries (Excl. RIDDOR)



There was a 18% increase in Accidents from Q2 23/24. The top three causations were Human Error, Slips, Trips and Falls and Impact from a stationary/moving object. 43% (22 of 52) occurred during non-operational activities, 29% (15 of 52) occurred during operational activities and 28% (14 of 52) occurred during training activities. Investigations are carried out to identify actions and to reduce the risk of reoccurrence.

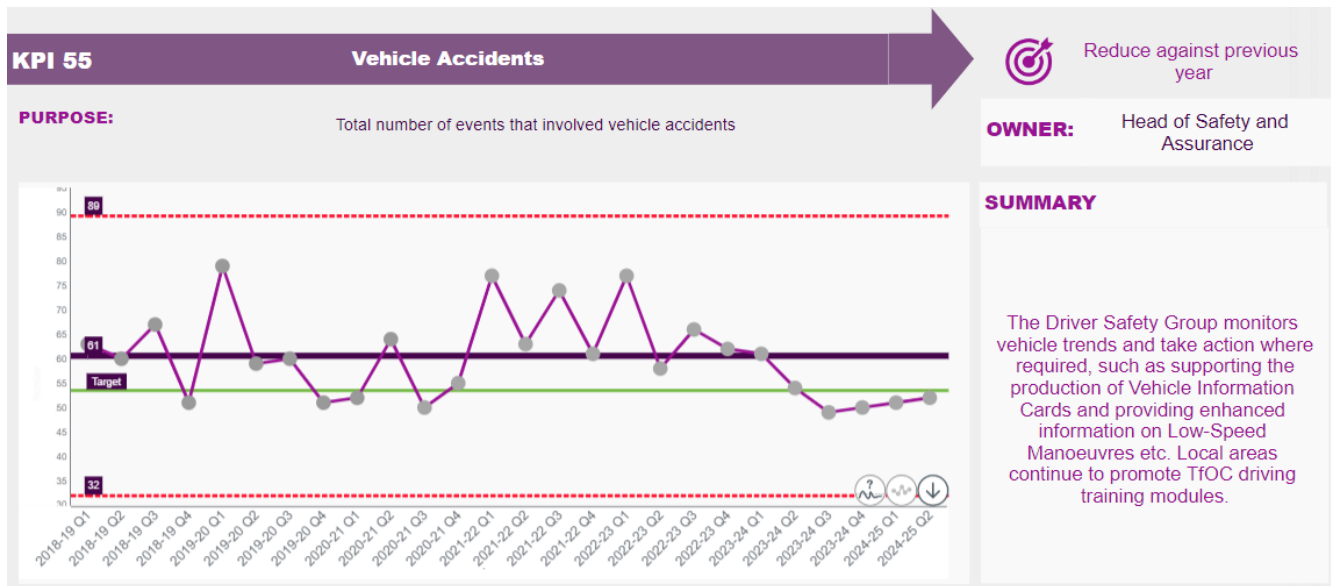
KPI54: Near Miss Events



Near Misses (NM) decreased 56% from Q2 23/24, (77 to 34). Operational NMs accounted for 38%, non-operational for 35% and 27% during training activities. The most common categories were Appliance and Pumps (11 of 34), Ladders (5 of 34) and Firefighting Equipment (2 of 34)

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

KPI55: Vehicle Events



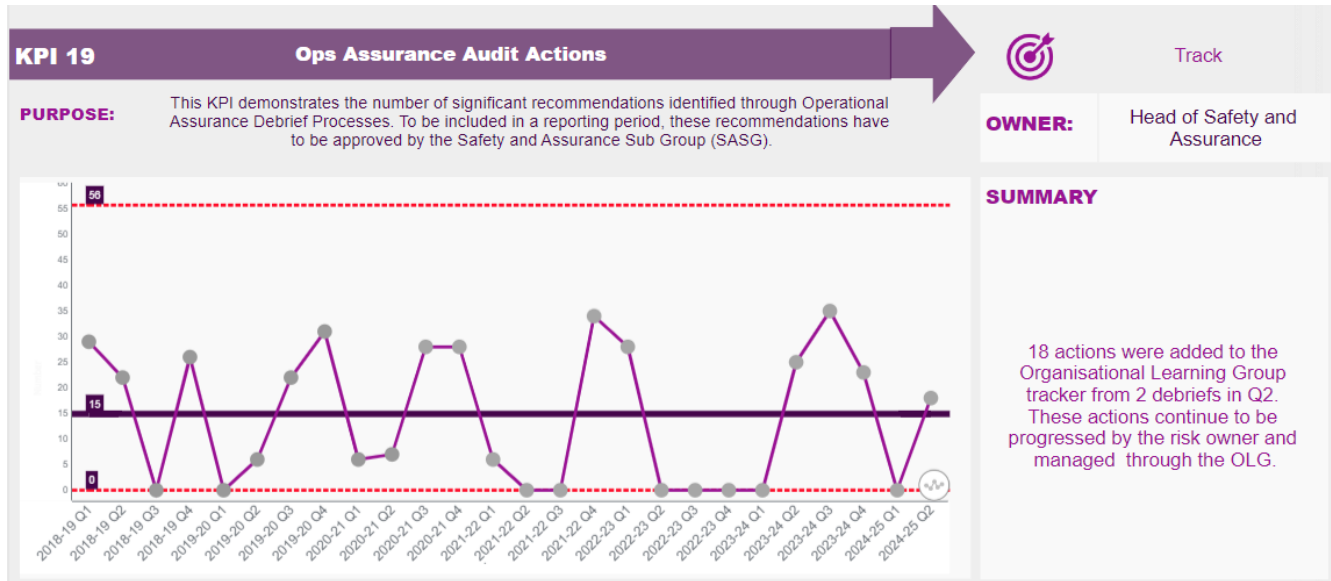
Vehicle Accidents (VAs) decreased by 4% compared to Q2 in 23/24, (54 to 52). 62% (32 of 52) of all vehicle accidents reported were attributed to operational incidents. A further 33% (17 of 52) were attributed to non-operational activities and 5% (3 of 52) were accidents attributed to training. 42% of VA were during low-speed manoeuvres and 33% 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



60% of Q2 actions were complete. This does not include carried forward actions. TSA completed 78% (7 of 9) of 2024/25 Q2 actions. The WSDA completed 75% (3 of 4), PP&P completed 67% (2 of 3) and the NSDA completed 50% (2 of 4) of 2024/25 Q2 actions. 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: Operational Assurance Debrief Actions



There were 2 debrief reports, resulting in 18 new actions recorded during Q2. Actions from debriefs continue to be monitored through the Organisational Learning Group (OLG). Further detail on these reports can be found within the Working Group Updates section.

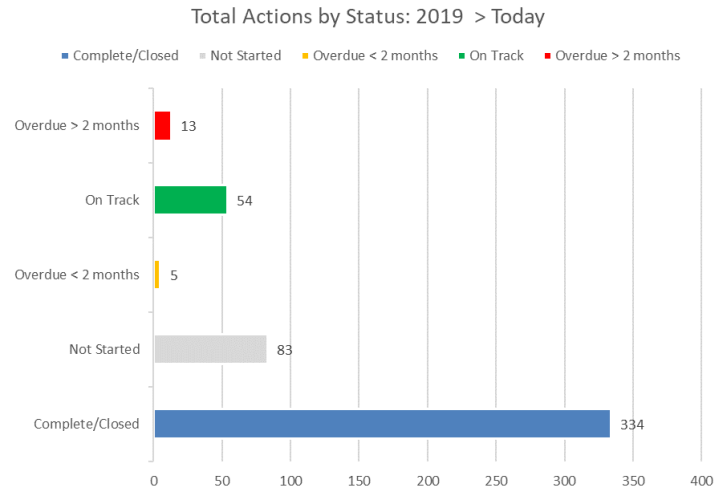
Working Group Updates

Organisational Learning Group (OLG)

There has been a total of 489 recommendations from Debriefs, Accident/Near Miss Investigations and external learning cases etc. added to the OLG tracker.

During Q2 5 new action plans totalling 30 actions were passed through governance to be progressed by the Risk Owner:

- Breadalbane Street, Level 4 Incident Debrief
- MV Ultra Virtue King George V Dock Debrief
- NOL Gas Monitoring Equipment Limitations
- NOL Information Note Mines
- NOL Liquefied Natural Gas Fuelled HGV Fire



Contaminants

Projects of work currently being progressed via the Contaminants Group/Subgroup are as follows:

- A paper was presented on the findings of the Fire Contaminants SOP Trial in North, East, South Ayrshire.
- A questionnaire to assist with type and quantities of airing racks/cages was issued.
- The Premises Zoning Guidance and Premises Specific Risk Assessment Checklist have been issued.
- Consultation and research are ongoing prior to ordering external airing cages.
- The Health and Safety Executive have sought further information on Fire Investigators from SFRS.
- Procurement is ongoing for the purchasing of additional PPE, including provision of female fire kits. Additional storage locations are being considered.
- The draft Fire Contaminants SOP was issued for service wide consultation and over 250 feedback responses were received. The Operations Functions is conducting the initial review, and will assign to Contaminant Subgroup members, as deemed necessary.

Driver Safety Group (DSG)

The DSG continue to promote control measures and safe systems, some key workstreams include:

- Low Speed Manoeuvres (LSM) guide circulated to all DSG members for comment
- Iveco Vehicle Information Card has been completed by Training.
- Review of training requirements for ERD Blue light journeys within rural and remote stations ensuring competency.
- There was a reported decrease in Q1 in Low-Speed Manoeuvres, and this is a positive indication of awareness within areas. Local areas should continue to promote safe LSM.
- The LSM local training trial with use of purchased equipment is being extended to other areas within the service.
- Positive increase in Driving Licence Checks return rate of all employees which increased to 73% this year. The data highlights some areas for review such as “in scope drivers”.
- Vehicle accidents from Tranman show a majority are due to low-speed manoeuvres resulting in minor damage to appliances.
- An update was provided on legislative changes to heavy good vehicles (HGV)/trucks which continue to be monitored by Fleet.

Directorate Events

The KPI statistics provided are for information only, the Local Safety and Assurance Improvement Groups (SAIGs) will identify local trends and take action to reduce risk of injury or ill health.

> Red	Highlights an increase in statistical figures.	< Red	Highlights a negative decrease in Near Miss Events.	< Green	Highlights a reduction in statistical figures.
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NORTH	Q2 2023/24	Q2 2024/25
Verbal AoV	0	> 1
Physical AoV	0	> 1
RIDDOR	0	0
Accident/Injuries	8	> 15
Near Miss	31	< 11
Vehicle Accidents	8	> 11
Improvement Plan % Completion	100%	50%

EAST	Q2 2023/24	Q2 2024/25
Verbal AoV	1	1
Physical AoV	2	> 3
RIDDOR	1	> 2
Accident/Injuries	14	> 16
Near Miss	24	< 8
Vehicle Accidents	19	< 13
Improvement Plan % Completion	100%	100%

WEST	Q2 2023/24	Q2 2024/25
Verbal AoV	3	< 2
Physical AoV	7	< 5
RIDDOR	2	< 1
Accident/Injuries	11	> 15
Near Miss	16	< 15
Vehicle Accidents	25	> 27
Improvement Plan % Completion	100%	75%

Training, Safety and Assurance	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	> 1
Accident/Injuries	9	< 2
Near Miss	5	< 1
Vehicle Accidents	2	<1
Improvement Plan % Completion	77%	78%

Operations	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	> 1
Near Miss	1	< 0
Vehicle Accidents	1	< 0
Improvement Plan % Completion	100%	100%

Financial and Contractual Services	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	1	> 2
Near Miss	2	< 0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	100%

Strategic Planning, Performance and Communications	Q2 2023/24	Q2 2024/25
Verbal AoV	0	> 1
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	100%

Prevention, Protection and Preparedness	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	67%

PEOPLE	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	100%

PORTFOLIO	Q2 2023/24	Q2 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	100%





Report No: C/PC/49-24

Agenda Item: 11.2

Report to:	PEOPLE COMMITTEE							
Meeting Date:	5 DECEMBER 2024							
Report Title:	CONTAMINANTS UPDATE							
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
		A	B	C	D	E	F	G
1	Purpose							
1.1	The purpose of the paper is for People Committee to scrutinise the update on the management of contaminants in Scottish Fire and Rescue Service (SFRS).							
2	Background							
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.							
3	Main Report/Detail							
3.1	Business Case							
3.1.1	Strategic Leadership Team (SLT) approved budget of £3,226,500m for managing fire contaminants in 2024/25. £1.4 million has been spent on PPE, with approximate £290,000 worth of goods received. Assets are holding discussions with LSOs to identify suitable storage locations for reserve PPE. Assets have received a sample of a 'gassing off rig'/cages. Assets are collaborating with the supplier on a design change to minimise the size of the gassing off rig/cage. A questionnaire was issued to all relevant premises to clarify available space and the most appropriate gassing off rig/cage for each. SA are analysing the results.							
3.1.2	Members of the Contaminants Sub-Group have identified an external dirty storage box. A meeting in mid-November should determine quantities required of both gassing off rigs/cages and external dirty storage boxes.							
3.2	Research							
3.2.1	CivTech facilitated a workshop on "How can technology identify contaminants across different types of incidents?". 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.							
3.2.2	The process has selected three applicants to progress to the exploration stage. This requires involvement with SFRS e.g. observe training exercises. At the end of November, there are interviews taking place.							
3.3	Fire Contaminants Standard Operating Procedure (SOP)							
3.3.1	The Fire Contaminants SOP has been circulated for service wide consultation. There were over 250 responses. SMEs within the Contaminants sub-group will be allocated respective							

	points to provide feedback on. The responses will require discussion and action at the Contaminants Sub-Group.																				
3.4	Zoning for Fire Contaminants																				
3.4.1	Prior to the publishing of the Fire Contaminants SOP, relevant premises are required to implement zoning. To assist with the completing this objective, SA have developed a Premises Checklist and an Information Pack. The outcome is to have a Specific Risk Assessment for each Station, NTC etc. and zoning complete by the end Q4.																				
3.5	Communications																				
3.5.1	ACO McGoldrick SFRS and the 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	Implementation Plan																				
3.6.1	The Implementation Plan converts SFRS strategic direction into specific management tasks and assist in managing implementation of contaminant control measures appropriately. Engagement with Business Partners has taken place to ensure the Implementation Plan captures all actions being managed by Business Partners.																				
3.7	Training																				
3.7.1	Training is focusing on changing cultures at NTC's. The training materials for the Breathing Apparatus course have streamlined. A trial on the use of washing machines was conducted at Portlethan. Following discussion, the outcome is that although the washing machines assisted with availability of fire kit, it is not a model we are keen to progress. This is due to concerns about efficacy of washing, the ongoing ' <i>how clean is clean</i> ' HSE research, concerns about cross contamination etc.																				
3.8	National Fire Chief's Council																				
3.8.1	The NFCC has established a Contaminants Project Group, who are a sub-group of the NFCC Health and Safety Committee. The group is responsible for monitoring, reviewing and supporting evidence-based research to understand potential risks as well as inform future guidance and recommendations.																				
	<table border="1"> <thead> <tr> <th>Group</th> <th>Current Project Status</th> </tr> </thead> <tbody> <tr> <td>Literature Review</td> <td>A summary document is regularly reviewed and updated to reflect scientific research information.</td> </tr> <tr> <td>Risk Assessment / Safe Systems of Work</td> <td>10 risk assessments identified; 6 in draft.</td> </tr> <tr> <td>Training and Development</td> <td>Evaluated training needs and have drafted standardised modules which are pending internal feedback.</td> </tr> <tr> <td>Appliances & Equipment</td> <td>Reviewing appliance designs throughout UK FRS. Drafting a Clean Cab Concept.</td> </tr> <tr> <td>Estates</td> <td>Collecting data from other UK FRS to assist with developing best practice guidance.</td> </tr> <tr> <td>RPE</td> <td>Reviewing relevant literature and drafting questions to ask UK FRS. First focus group will be held in Nov. 2024.</td> </tr> <tr> <td>PPE</td> <td>Engaging with PPE Project Technical Group and relevant national standards bodies.</td> </tr> <tr> <td>Health Surveillance</td> <td>Looking at evidence to support cancer screening programme for cancers referred to in IARC Report.</td> </tr> <tr> <td>National Guidance</td> <td>At the meeting in September, there was a brainstorming session to assist with developing a revised Position Statement "<i>Based on what we know to date, what would the NFCC</i></td> </tr> </tbody> </table>	Group	Current Project Status	Literature Review	A summary document is regularly reviewed and updated to reflect scientific research information.	Risk Assessment / Safe Systems of Work	10 risk assessments identified; 6 in draft.	Training and Development	Evaluated training needs and have drafted standardised modules which are pending internal feedback.	Appliances & Equipment	Reviewing appliance designs throughout UK FRS. Drafting a Clean Cab Concept.	Estates	Collecting data from other UK FRS to assist with developing best practice guidance.	RPE	Reviewing relevant literature and drafting questions to ask UK FRS. First focus group will be held in Nov. 2024.	PPE	Engaging with PPE Project Technical Group and relevant national standards bodies.	Health Surveillance	Looking at evidence to support cancer screening programme for cancers referred to in IARC Report.	National Guidance	At the meeting in September, there was a brainstorming session to assist with developing a revised Position Statement " <i>Based on what we know to date, what would the NFCC</i>
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		<i>Contaminants Working Group want to achieve for firefighters and fire and rescue services". This is currently in draft.</i>
4	Recommendation	
4.1	The request from the People Committee is to scrutinise the content of this report.	
5	Key Strategic Implications	
5.1	Risk	
5.1.1	There is a risk that failure to implement robust arrangements to manage contaminants may result in personal injury claims against the SFRS.	
5.2	Financial	
5.2.1	There is significant capital and resource budget allocation required to progress the contaminants implementation plan.	
5.3	Environmental & Sustainability	
5.3.1	Not applicable	
5.4	Workforce	
5.4.1	Potential impact of decontamination on operational resilience and resource availability which will be considered in the planning and implementation process.	
5.5	Health & Safety	
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	Health & Wellbeing	
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	Training	
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	Timing	
5.8.1	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	Performance	
5.9.1	Monitoring of implementation and application of arrangements will be through existing and new assurance arrangements.	
5.10	Communications & Engagement	
5.10.1	Communications and engagement strategy required to ensure understanding and implementation of control measures.	
5.11	Legal	
5.11.1	There is a risk that failure to implement robust arrangements to manage contaminants may result in personal injury claims against the SFRS and Health and Safety legislation.	
5.12	Information Governance	
5.12.1	No – to be completed prior to publication of any documentation.	

5.13 5.13.1	Equalities No. Consideration will be given at the prior to publication of any documentation.	
5.14 5.14.1	Service Delivery Potential impact of decontamination on operational resilience and resource availability will be considered in the planning and implementation process.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	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.
8	Appendices/Further Reading	
8.1	None	
Prepared by:	Teresa Kelly, Deputy Head of Safety and Assurance	
Sponsored by:	Craig McGoldrick, Assistant Chief Officer Director of Training, Safety and Assurance	
Presented by:	Craig McGoldrick, Assistant Chief Officer Director of Training, Safety and Assurance	
Links to Strategy and Corporate Values		
<p>Strategic Plan 2022-2025: 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.</p> <p>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.</p> <p>Safety Value: Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.</p>		
Governance Route for Report		Meeting Date
<i>People Committee</i>		<i>5 December 2024</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>



Report No: C/PC/54-24

Agenda Item: 11.3

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	SAFETY AND ASSURANCE ANNUAL PERFORMANCE REPORT 2023/24						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee (PC) with the approved Safety and Assurance Annual Performance Report 2023/24 detailing the SFRS Safety and Assurance (SA) performance prior to publication.						
2	Background						
2.1	The Safety and Assurance Annual Performance Report provides analysis of the key areas of performance during the reporting year and details the intended risk reduction control measures on key themes such as accident and injury reduction, managing safety standards and continual improvement.						
2.2	This year's report has been enhanced to better demonstrate our commitment to improvement and the activities undertaken throughout the year to improve safety. This report focuses on proactive measures and identifying areas of improvement through our "we will" statements noted within the report. The new report layout has been created with the audience in mind, to ensure information is relevant and visually engaging.						
3	Main Report/Detail						
3.1	This report provides an update on the Annual Operating Plan, the SA Strategy and Legal Compliance. This year, the report also includes engagement activities and a summary of leading indicators.						
3.2	<p>Accident/Injury Summary</p> <p>In 2023/24 there was a total of 185 Accidents and Injuries recorded. When compared to the previous reporting year, there has been a 34% (138 to 185) increase.</p>						
3.3	<p>Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) Summary.</p> <p>A total of 16 events were reported to the Health and Safety Executive under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations. When compared to the previous reporting year, there has been a 7% increase (15 to 16).</p>						
3.4	<p>Vehicle Accidents Summary.</p> <p>There was a total of 214 Vehicle Accidents reported. When compared to the previous reporting year, there has been a 7% decrease (263 to 214).</p>						

3.5	Near Miss Reporting. 273 Near Misses were reported in 2023/24. When compared to the previous reporting year, there has been an 86% increase (147 to 273).
3.6	Acts of Violence Summary. In 2023/24 there was a total of 19 verbal attacks to SFRS personnel reported. When compared to the previous reporting year, there has been a decrease of 54% (41 to 19). A further 41 physical attacks to SFRS personnel were reported, remaining consistent when comparing to the previous year.
3.7	Operational Assurance Audit Actions. In 2023/24 there was a total of 5 structured debriefs carried out in 2023/24 by the Operational Assurance team. The debriefs collated and review information of the event to highlight good practice and to make recommendation where required to promote continual learning and improvement.
3.8	Health and Safety Improvement Plans (HSIP) Summary. Overall completion of the 2023/24 HISP is 92% (71 of 77), representing an 18% increase when compared to the previous reporting year.
3.9	The report includes an overview on benchmarking from data collated from other UK Fire and Rescue Services.
3.10	A summary by each directorate covers HSIP progress, accident summary and key achievements. The report also includes areas of continual improvement through Support Reviews and Station Audits.
4	Recommendation
4.1	The People Committee is asked to scrutinise the content of the Safety and Assurance Annual Performance Report 2023/24 ahead of publication.
5	Key Strategic Implications
5.1	Risk
5.1.1	Failure to monitor Health and Safety performance and identify areas of continuous improvement in Health and Safety.
5.2	Financial
5.2.1	No financial implications within the production of this report. Some recommendations within the report may have financial implications and will be managed through appropriate governance routes by the risk owner.
5.3	Environmental & Sustainability
5.3.1	No environmental impact as this report is circulated electronically.
5.4	Workforce
5.4.1	The Annual Safety and Assurance Report highlights the monitoring of Health and Safety performance and makes recommendations for continuous improvement to reduce the risk of injury or ill-health of the SFRS workforce.
5.5	Health & Safety
5.5.1	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	Health & Wellbeing 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 5.7.1	Training There are no training implications as a result of the Annual Safety and Assurance Report. Training requirements will be approved through other governance routes or captured in Health and Safety Improvement Plans.	
5.8 5.8.1	Timing The Annual Safety and Assurance Report was progressed through the Governance routes as indicated within the Governance Route for Report section. Once the Annual Safety and Assurance Report has went through the relevant governance routes, the report will be published on SFRS iHub and SFRS website.	
5.9 5.9.1	Performance Health and Safety Performance is monitored through Key Performance Indicators (KPIs) managed by Think, Act, Stay Safe (TASS) performance reports and the development of quarterly and annual reports. The performance outcomes are communicated through Safety and Assurance Improvement Groups (SAIG).	
5.10 5.10.1	Communications & Engagement No further engagement is required. This report will be communicated to all SFRS staff and will be published on the SFRS website.	
5.11 5.11.1	Legal Failure to monitor and improve the management of Health and Safety could result in non-compliance to Health and Safety legalisation.	
5.12 5.12.1	Information Governance There are no implications that require to be noted for GDPR purposes.	
5.13 5.13.1	Equalities 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	Service Delivery The Annual Safety and Assurance Report has no direct impact on Service Delivery and is provided for awareness and information.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The Safety and Assurance Annual Performance Report informs the audience 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.
8	Appendices/Further Reading	
8.1	Appendix A: Safety and Assurance Annual Performance Report 2023/24	

OFFICIAL

Prepared by:	Victoria Regan, Business Support Officer	
Sponsored by:	Jim Holden, Head of Safety and Assurance	
Presented by:	Jim Holden, Head of Safety and Assurance	
Links to Strategy and Corporate Values		
<p>Strategic Plan 2022-2025: 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.</p>		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>SA Functional Management Team</i>	<i>06 June 2024</i>	<i>For Scrutiny</i>
<i>Safety and Assurance Sub-Group</i>	<i>11 July /2024</i>	<i>For Recommendation</i>
<i>Training, Safety and Assurance Board</i>	<i>10 October 2024</i>	<i>For Decision (Circulated/Approved)</i>
<i>Strategic Leadership Team</i>	<i>20 November 2024</i>	<i>For Information</i>
<i>People Committee</i>	<i>05 December 2024</i>	<i>For Scrutiny</i>

SCOTTISH FIRE AND RESCUE SERVICE

Safety and Assurance Annual Report 2023/24



Contents



1 Introduction

Chief Officer and Board Chair; Head of Safety and Assurance; and Key Achievements

Introduction

We are delighted to introduce the Annual Safety and Assurance Performance Report for 2023/24. This report demonstrates the dedication to our core value of ensuring staff safety.

The Strategic Leadership Team continues to ensure safety is a key focus within all business decisions. This report highlights the proactive approach to maintaining compliance with statutory obligations and evidences the Service's commitment to continual improvement.

This year's Safety Culture Survey provided valued staff contribution, engagement and feedback. The survey provided an understanding of our current safety culture, employee perceptions and behaviours. The findings enable the Strategic Leadership Team to provide appropriate resources for the strategic objectives set out to ensure we fulfil impactful change within the Service.

Key Performance Indicators (KPI) demonstrate our efforts towards reducing Health and Safety (HS) events and injuries, and promoting a proactive safety culture. We are delighted to report improvements in the recording of Near Miss (NM) events and a notable decrease in vehicle accidents throughout the year. We continue to monitor trends and undertake projects to ensure the safety of our people and compliance with legislation.

Ongoing monitoring and horizon scanning for local and national risks, e.g. increased response to wildland fires, flooding incidents, and the management of fire contaminants, ensures robust arrangements are implemented to mitigate these risks. We are proud of the way our staff continue to respond to these challenges whilst carrying out their duties.

This year, on the Bicentenary of the world's first municipal fire and rescue service, it is appropriate to recognise the dedication of our staff in support of safety advancements and keeping the people of Scotland safe while ensuring our own safety is a priority.



Stuart Stevens
SFRS Chief Officer



Dr Kirsty Darwent
Chair of SFRS Board

Overview

I am extremely proud of the positive accomplishments that the Service has achieved in the past year, enhancing arrangements to ensure legislative compliance and processes based on identified key risks, which directly impact on the safety of our personnel.

The Safety and Assurance (SA) Function is committed to continuous improvement by identifying opportunities across the SFRS and working with other UK Fire and Rescue Services to benchmark and ensure best practices. We demonstrate this by participating in National Fire Chiefs Committees (NFCC), such as HS, Contaminants, and the National Organisation Learning User Group.

Our commitment to improvement is evidenced through the Health and Safety Improvement Plans (HSIP) and other notable achievements, such as the introduction of a legal register, simplified

arrangements and the efforts of the Organisational Learning Group (OLG), which draws valuable lessons from our incidents and learning from UK Fire and Rescue Services.

In 2023/24, we conducted our first Safety Culture Survey, which provided excellent and useful feedback. We are continuing to incorporate the feedback into a revised strategy and framework that captures learning and details enhancements for the coming year.

The updated Annual Safety and Assurance Performance Report is an important improvement to our communication and engagement processes. It presents key information in an accessible manner, recognising our achievements and identifying areas for improvement as outlined in our “We Will” commitments. These initiatives support the Safety and Assurance Strategy, HS Policy, and Operational Assurance Policy.

The Safety and Assurance Function would like to thank all our business partners and staff for their continued support and dedication to improving safety.



Jim Holden
Head of Safety and
Assurance

Key Highlights for 2023/24



Planning

Introduction of a Management Arrangement (MA) Framework simplifying content to support the end users.



Operations

Introduction of new Service Delivery Area (SDA) HS Handbook, review and production of Operational Generic Risk Assessments (GRAs) and supporting the development of Risk Information Cards.



Directorates

Gantt Charts were introduced to support the management of Scottish Fire and Rescue Service (SFRS) GRAs, Safe Systems of Work, and Technical Assessments. Over 220 assessments were reviewed and published.



Event and Investigation

Over 700 hundred events were reported and investigated with recommendations made for organisational learning. With SA leading on 3 significant investigations.



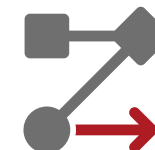
Safety Assurance

Quarterly themed Support Reviews were undertaken, highlighting areas of best practice and opportunities for improvement.



Operational Assurance

5 Structured Debriefs and 4 Frontline updates published on various themes to provide assurance of performance and identify areas of operational learning.



Business Support

Introduction of PowerBI KPI for strategic business partners and simplified performance reporting for all staff.



2 Plan

Annual Operating Plan Progress; Safety and Assurance Strategy; and Legislative Compliance

Annual Operating Plan (AOP)

Safety and Assurance AOP details the work which was carried out to contribute to the delivery of the SFRS Strategic Plan, achieving more for the people of Scotland. SA continue to monitor and report progress through the action plan to the relevant governance group.

Risk Assessment (RA)

Identify areas for improvement within RA in SFRS and develop a programme of work to collaborate with Business Partners and confirm consistency in approach and standard to ensure legislative compliance.

Engage with Business Partners to develop, maintain and review SFRS assessments, as required.

Action Progress:

SA have implemented RA Gantt charts for all Directorates and is recorded within the HSIP where progress is updated.

Contaminants

- Finalised Contaminants MA with the aim of safeguarding Firefighters from harmful carcinogenic substances;
- Implement Contaminants MA;
- Finalise Contaminants Policy and Operational Guidance; and
- Progress Implementation of Contaminants Action Plan.

Action Progress:

SA continue to lead on Contaminants and Sub-Group, reviewing guidance and research. Action plan remains ongoing to support the MA. Further information detailed within engagement update.

Strategic Planning




- Deliver the Safety Culture Survey and analyse the safety culture results;
- Publish new Safety and Assurance Culture Strategy and
- Develop a Safety and Assurance Strategy Implementation Plan.

Action Progress:

Survey complete and analysis used to inform Safety Culture Framework.

Safety Culture Framework will be progressed through governance for publication and support the SA Strategy Plan.

SA Strategy 2022/26 – Year 3

Achieved	Partially Achieved	Not Achieved
		

ACTION: SFRS has a defined programme of both proactive and reactive audits

UPDATE: Self-compliance, Premise Inspection, and Station Audit Arrangements established. Quarterly Support Review process implemented to enhance assurance on SFRS MAs.

ACTION: SFRS significant event investigations are carried out in a timely manner by proficient investigators

UPDATE: Training for Significant Investigations revisited and updated on LCMS. SA leading on all significant events to support timescales allocated.

ACTION: The SFRS appraisal process is linked to measurable SA performance

UPDATE: Safety and Assurance mandatory behaviours and guidance updated and included in new induction process.

ACTION: SFRS will review arrangements in place to manage enterprise risk within the context of the organisational environment through targeted engagement and support reviews

UPDATE: Captured within Support Review process, incorporated into Health and Safety Improvement Plan (HSIP). Safety and Assurance Improvement Groups (SAIGs) continue to review local risk and engage with relevant governance groups to manage.

ACTION: SFRS will have a revised event investigation and OA process which expedites the identification of lessons

UPDATE: Introduced Safety and Assurance 21 process for several events leading to timeously identification of lessons to be learned. OLG tracker has been updated to provide dashboard on statistics, highlighting work undertaken and any outstanding actions. The OLG report has been amended to include spotlights in trends, risks or overdue actions etc.

ACTION: SFRS has a defined behavioural safety campaign to reduce events attributed to human error and poor situational awareness and to enhance our safety culture

UPDATE: Safety Culture Survey has been undertaken and analysis completed. Findings shared and captured in a new Safety Culture Framework.

ACTION: SFRS will have defined arrangements for topic specific audits which are informed by lessons learnt, audit outcomes and event trends

UPDATE: Captured within Support Review process, incorporated into HSIP.

ACTION: Hazard perception is measured during recruitment processes

UPDATE: Hazard Perception paper and recommendations shared through Governance. Work remains ongoing to embed recommendations into the internal promotion progress with People Directorate.

Legislative Compliance

Legal Register

In 2023, SA introduced a HS Legal Register maintaining a record of legal compliance relevant to SFRS operations.

The legal register generated 13 actions which resulted in updates to our MAs to maintain legal compliance.

All actions were complete in 2023/24. The Register continues to be reviewed on a six-monthly basis.

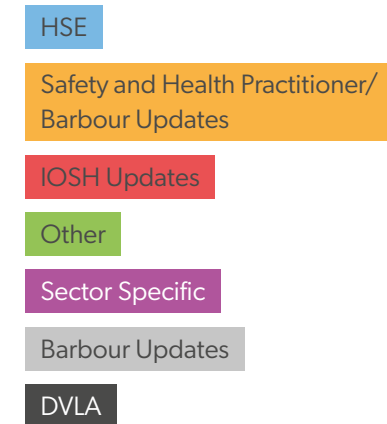
Guidance Review Register

A total of 110 HS guidance reviews were carried out in 2023/24, ensuring compliance or sharing research or best practice with our business partners.

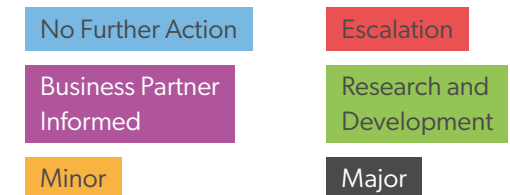
Example of reviews:

- HSE Asbestos awareness and Lung Cancer information published as a Wellbeing and Inclusion theme in November 2023 with awareness towards exposure to Asbestos, Silica Dust and Welding Fumes.
- SA engaged with People Directorate to promote, Stress, Mental Health, and Menopause HSE guidance and best practice.
- HSE Safety Notice for LPG powered Forklift Truck Fire Risk, SFRS arrangements reviewed and updated.

Percentage Guidance Review by Source






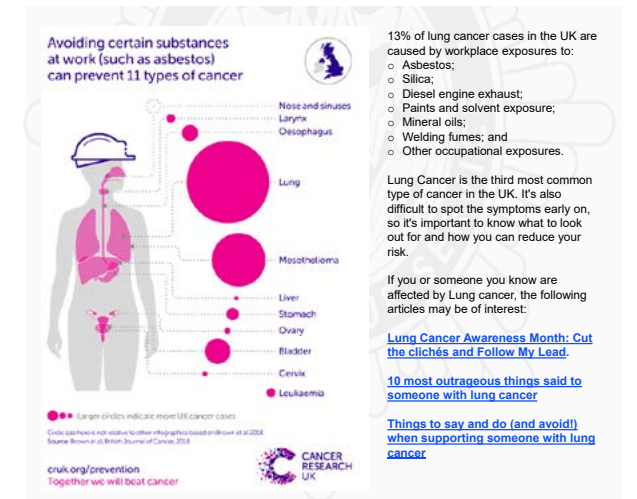
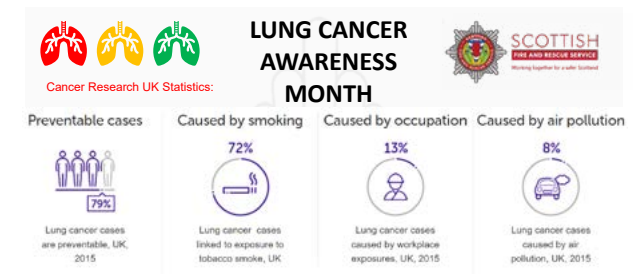
Review Outcomes



Legislative Compliance

Statutory Enforcement

<p>Health and Safety Executive Enforcement / Notices</p> <p>No enforcement or notices.</p> 	<p>His Majesty's Fire Service Inspectorate</p> <p>No enforcement or notices.</p> 
<p>Local Authority Scrutiny Boards/Committees</p> <p>No enforcement actions reported.</p> 	



Cancer Research UK, [Lung cancer risk](#) | Cancer Research UK, Accessed 16/10/2023.
Roy Castle Lung Cancer Foundation, [Roy Castle Lung Cancer Foundation](#), Accessed 16/10/2023.

Example of work carried out from guidance reviews.



3 Do

Safety Culture Survey; Contaminants; and Driver Safety Group

Safety Culture Survey 2023

We would like to thank everyone who took the time to participate in our first SFRS Safety Culture Survey.

Our first Safety Culture Survey (SCS) was undertaken in the reporting year, the Survey generated 1,095 consultation returns, equivalent to 14% staff response rate.

The survey focused on five safety culture themes: Leadership, Safety Culture, HS Arrangements, HS Events, and Training and Competency, each theme had five questions and an option for written feedback to be provided.

There was a significantly positive outcome for the SCS, with staff responses in agreement ranging from 84% around Leadership Resources, to 94% in agreement on Training and Competence. An overview of the findings were published to all staff on the iHub and Viva Engage.

The written feedback was analysed and provided positive, negative and constructive feedback of staff experiences. These have now been captured within a new draft Safety Culture Framework current progressing through our Safety and Assurance Governance processes.



Theme 1: Leadership Resources

Leading by example, challenging unsafe behaviour, communication and engagement and listening to HS concerns.

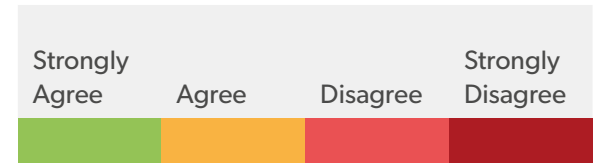
151 Consultation comments provided.

Theme 2: Safety Culture

Personal belief that HS matters, staff are informed, immediate action is taken to prevent injury, following HS instruction, not letting others down and understanding of responsibilities.

51 Consultation comments provided.

Safety Culture Survey 2023



Theme 3: HS Arrangements

Hazards identified, risk assessments and SSOW implemented and periodically reviewed. Routinely informed of what is happening with HS, introduction of, or change in equipment.

57 Consultation comments provided.

Theme 4: HS Events

Staff encouraged and know how to report events and hazards to help learn lessons. Made aware of recommendations and outcomes of investigations, including changes to instruction and training.

59 Consultation comments provided.

Theme 5: Training and Competency

Suitability of induction training, including transfer and promotion, supervisory checks of safe working practices, understanding of SFRS safety value, completion of mandatory HS training modules including Training for Operational Competence.

66 Consultation comments provided.

Contaminants

Throughout 2023/24, the Safety and Assurance Function led and participated in the Contaminants and Sub-Group aimed at reducing the risk of injury or ill health among all SFRS staff. Progress within these groups is reported through the Safety and Assurance Sub-Group and subsequently to the Training, Safety and Assurance Board.

Following research conducted by Professor Anna Stec, the SFRS continues to advance the implementation plan for managing contaminants. This is achieved through regular meetings with all relevant stakeholders, including the National Fire Chiefs Council (NFCC), Scottish Ministers, and the Health and Safety Executive (HSE).

The group remains committed to horizon scanning and adopting best practices to control the risk of contaminants as far as reasonably practicable, in collaboration with other UK Fire and Rescue Services.

As part of this ongoing effort, an awareness presentation and a video demonstrating walk-through zoning and post-fire Breathing Apparatus (BA) doffing and decontamination have been disseminated to highlight the risks associated with contaminants. Additionally, a business case has been submitted and approved to increase the reserve stock of PPE available to firefighters.

The Fire Brigades Union (FBU) has led the DECON campaign, supporting the University of Central Lancashire Health Surveillance initiative. The SFRS has also focused on the recording of contaminants and has completed a paper detailing the specifics of asbestos medicals.

The contaminants group continues to make progress on the Contaminants Safety Operating Procedure and all related documentation. SFRS have supported visits from the HSE to establish contaminates best practices and support their enforcement policy and guidance.



Driver Safety Group (DSG)

The DSG continues to receive updates from Service Delivery Areas, Training and Fleet and conducts trend analyses of all reported vehicle incidents.

The group remains focused on both proactive and reactive measures to ensure the safety of our personnel and others. The Fleet department continues to provide updates on new vehicle specifications and introductions through tendering processes and has also provided updates on driver technology equipment to ensure compliance with EU General Safety Regulations.

Documentation, including “In Scope” driver’s regulations, towing trailers, and Periodic Inspection and Testing (PIT) for boat trailers, as well as the Safe System of Work for Vehicle Charging Reels, has been published to further enhance knowledge and mitigate risks.

Following an event, an Urgent Instruction was issued regarding the negotiation of red lights, supported by a training module. An Awareness Brief was also issued concerning First in Attendance for Flexi Duty Officers (FDO). Additionally, a light fleet group was established to review issues such as FDO equipment storage, wildfire equipment storage, and radio cradles.

A national framework draft has been proposed to support low-speed manoeuvres (LSM). A trial for increased training equipment has been extended within the West SDA and remains ongoing.

Vehicle Speeds

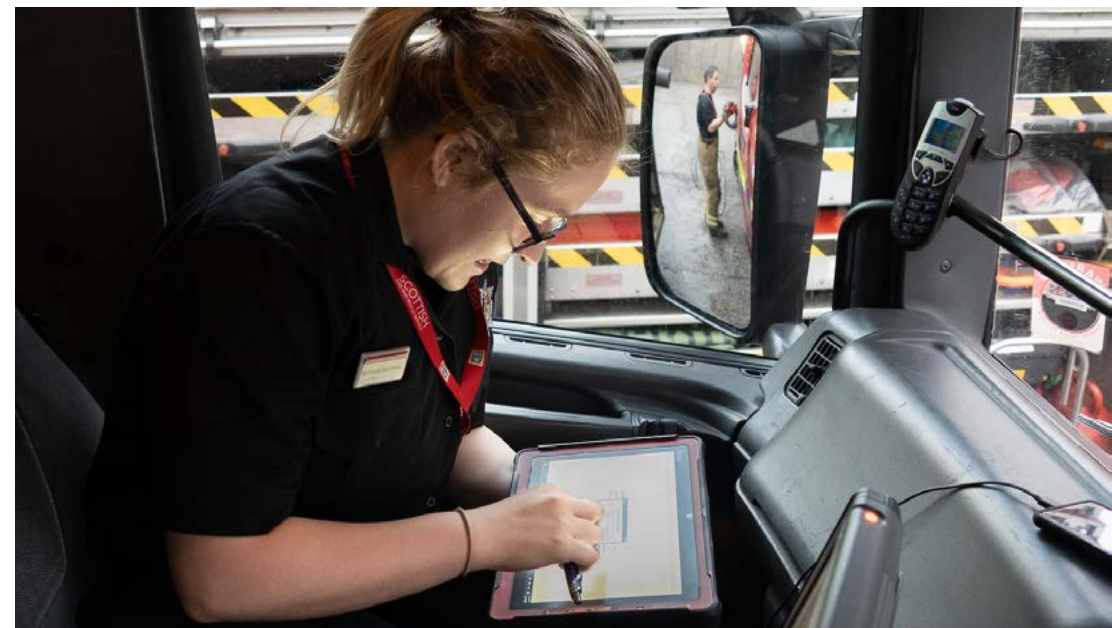
Slow Speed

Emergency Response Driving

Normal Road Speed

Stationary

Other





4 Check

Key Performance Indicators; Safety and Assurance Indicators; and Benchmarking

KPI: Near Miss (NM)

In 2023/24 there was a total of 273 NM reported. When compared to the previous reporting year, there has been an 86% increase (147 to 273).

Most common cause of NM reported were;

- Appliance and pumps 26% (71 of 273); and
- BA 18% (50 of 273).

When considering the number of NM in relation to the number of Accidents/Injuries including Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) Reportable

Events we see a ratio of 1:1.35, an increase (1:0.97) recorded when compared to the previous reporting year. This is an area of continued focus; a review of the NM reporting arrangements is being conducted to ensure the process is simplified for the end user.

Examples of NM reporting include;

- During entanglement training, the Velcro strip on a BA cylinder became loose, resulting in a cable becoming entangled. The affected equipment was impounded for investigation and this event will be considered in future BA tender group evaluations; and
- Flammable substances stored within a boiler room creating a fire hazard, this was removed and correctly stored in accordance with Control of Substances Hazardous to Health (COSHH) assessments.

The Safety and Assurance Improvement Groups (SAIGs) continue to promote the reporting of NM among staff groups. The North SDA ran a campaign that successfully increased the number of NM reports. This positive culture change is evidenced by the increased NM to accident ratio.

By Activity

Operational

Non-Operational

Training

By Location

North SDA

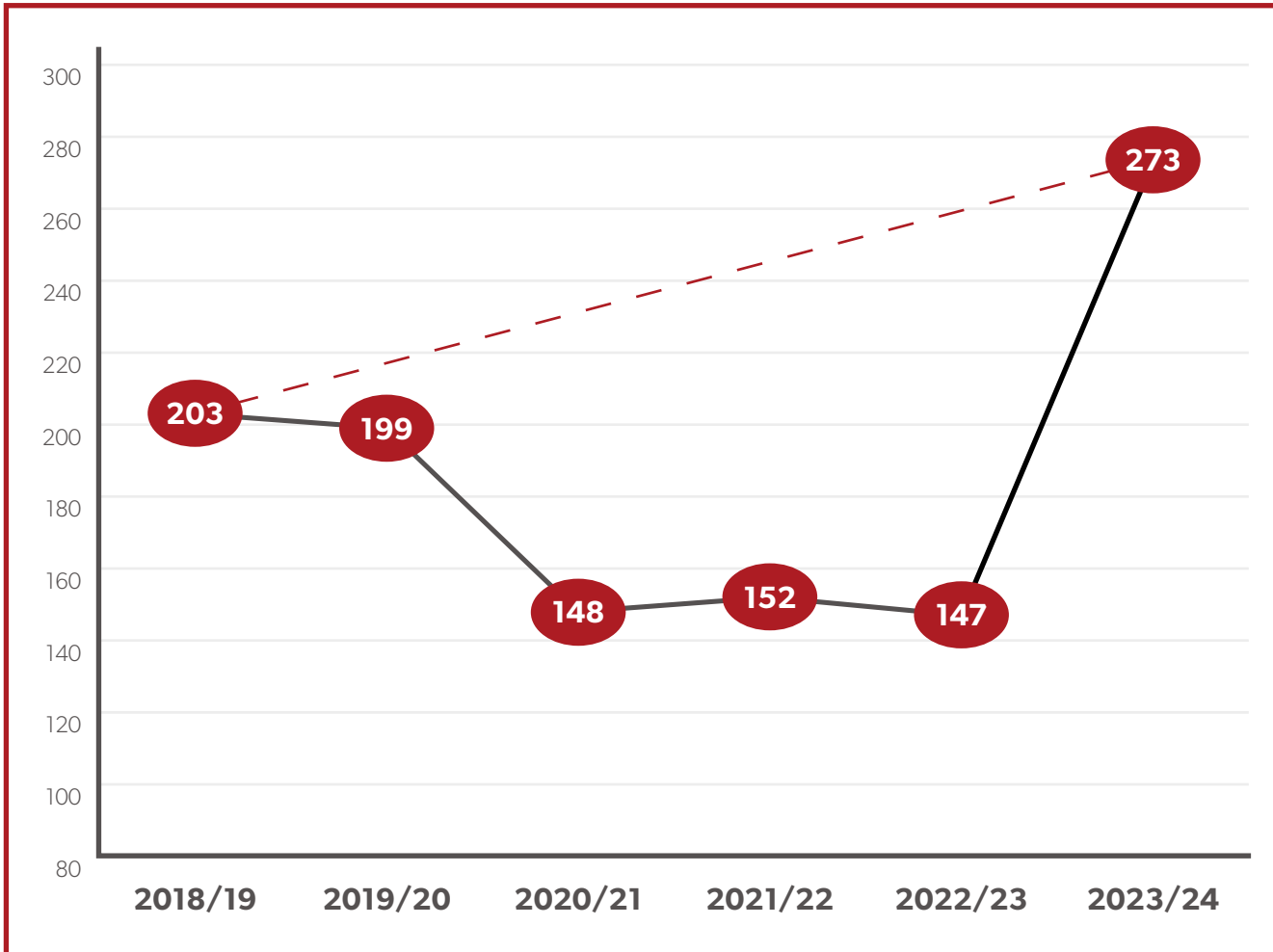
West SDA

East SDA

Directorates



KPI 54: Near Miss



Purpose:

Total recorded number of NM events that had the potential to lead to an accident or ill health.

We will:

Collectively promote the reporting of NMs by ensuring all staff understand what NMs are and the benefits of identifying and reporting them. Safety and Assurance (SA) will provide feedback from NMs and promote shared learning.

KPI: Accident and Injuries

(excl. RIDDOR)

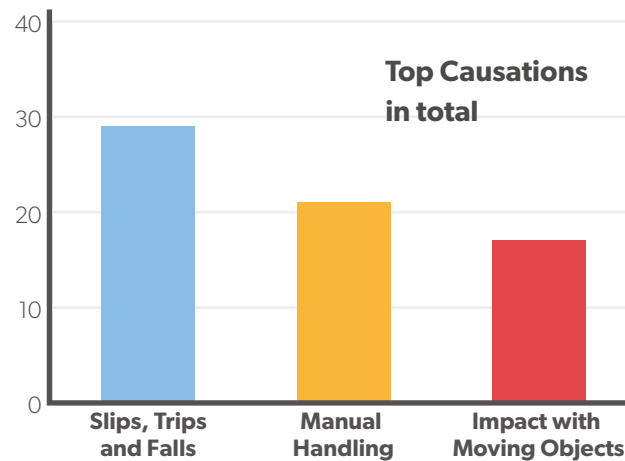
In 2023/24 there was a total of 185 Accidents and Injuries recorded. When compared to the previous reporting year, there has been a 34% (138 to 185) increase.

Examples of Accident/Injuries include:

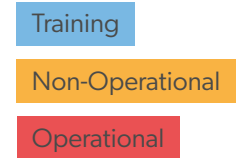
- During training, Injured Person (IP) opened a fire compartment door for demonstration purposes which caused reddening to the skin due to over application of water; and
- Following a fire involving solar panels, IP was informed the panels were “de-energised” and when removing panels to check for fire spread the IP received minor electrical shocks. Operational Assurance compiled a front-line update on solar panels.

The SFRS Musculoskeletal (MSK) group continues to analyse causations and trends, highlighting areas for improvement. Support is provided through Health and Wellbeing to ensure all personnel receive the necessary assistance following an injury.

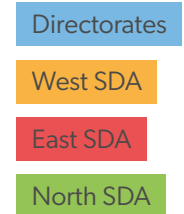
Local SAIGs meet regularly to identify local trends and highlight any required actions. When there are national implications, these are escalated to the Safety and Assurance Sub-Group for review.



By Activity

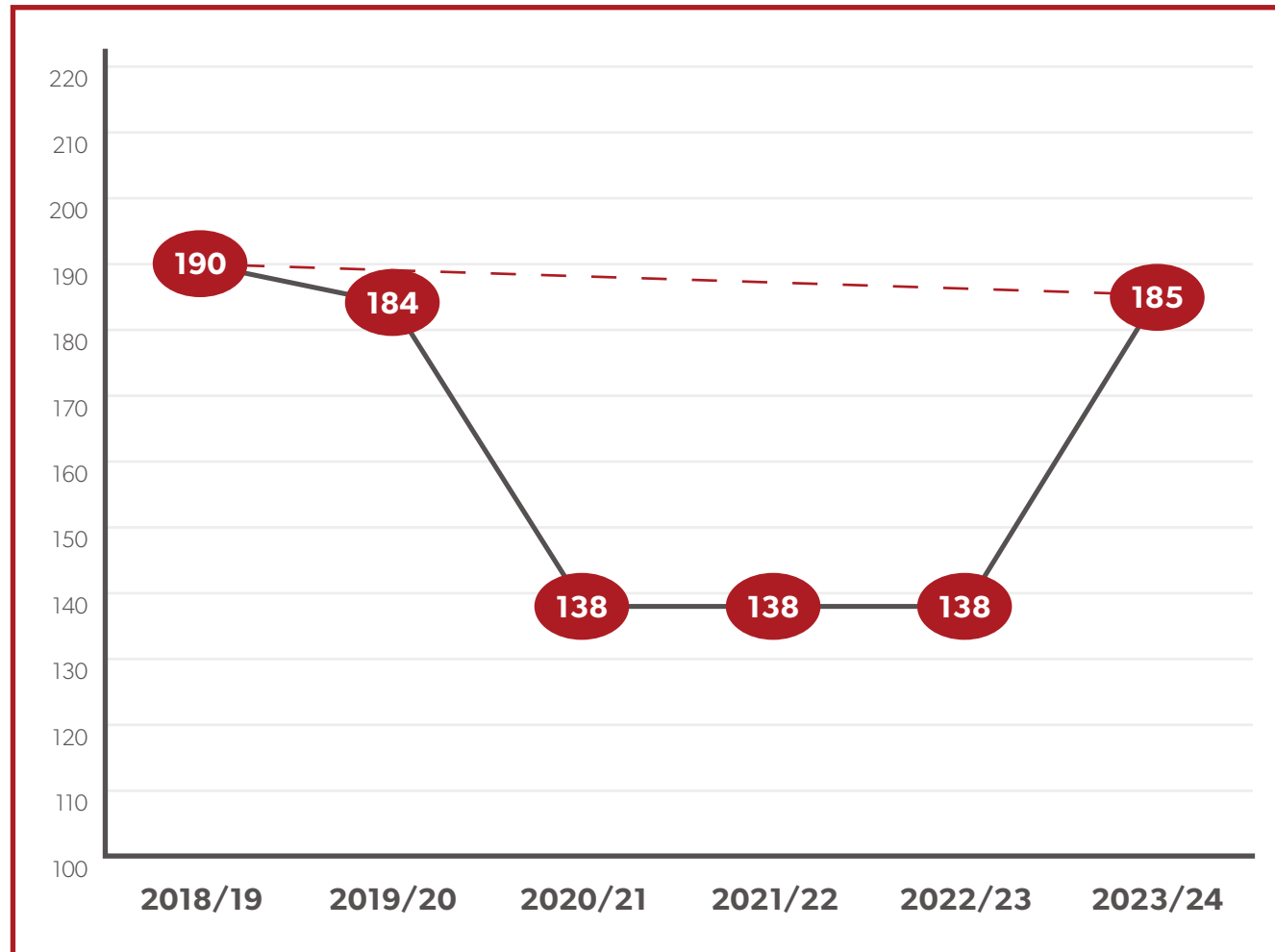


By Location



KPI 53: Accident and Injuries

(excl. RIDDOR)



Purpose:

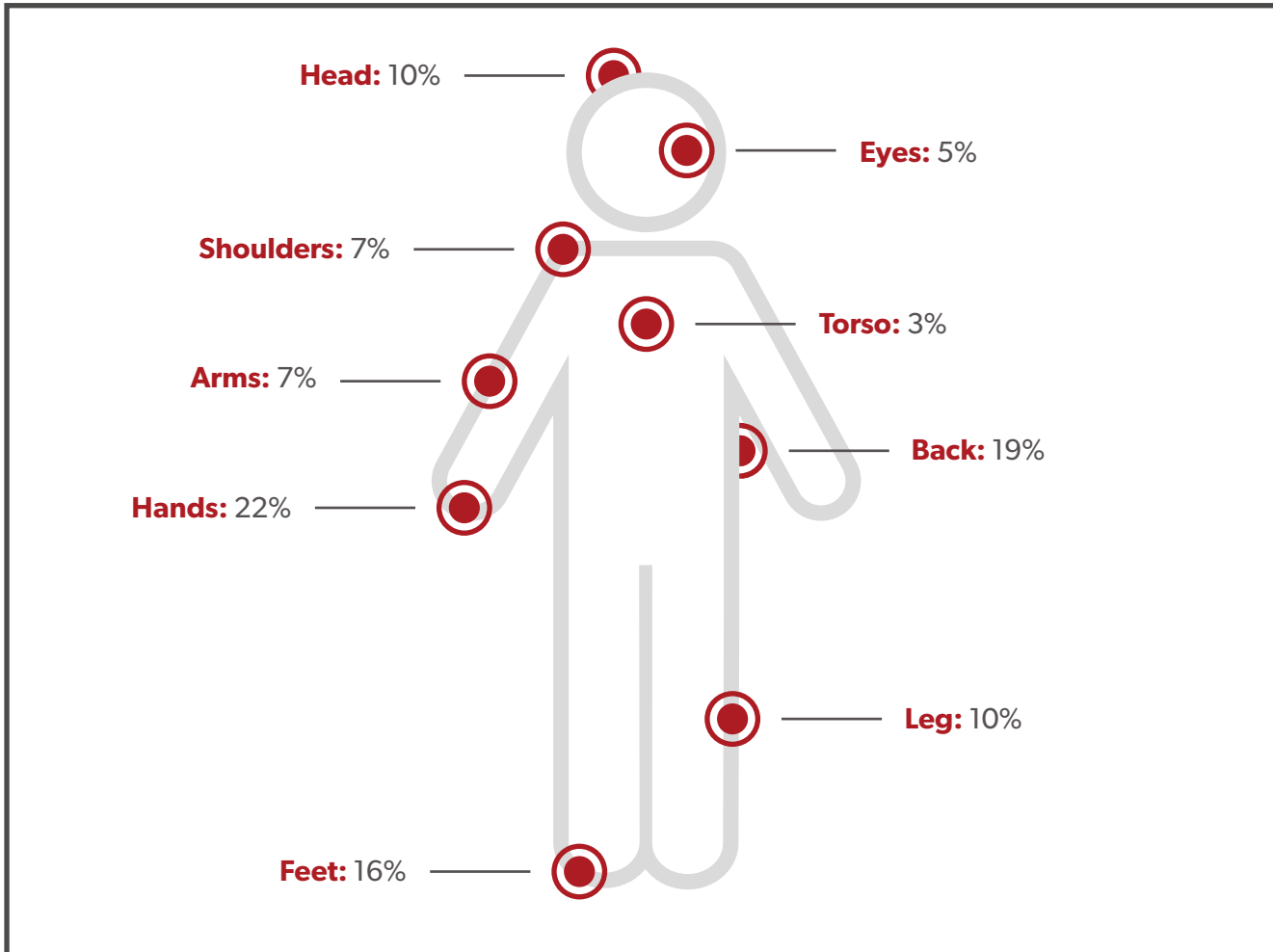
Demonstrates total accidents and injuries to occur through workplace accidents.

We will:

Continue to investigate all accidents promptly and take proportionate actions to prevent the likelihood of recurrence. Additionally, we will review our Manual Handling Training course on the Learning Content Management System (LCMS) to support MSK reduction.

KPI: Accident and Injuries

(excl. RIDDOR)



The analysis shows that hands, back and feet are the most common areas of injury for SFRS staff.

Body Map

Percentages for Accident/Injuries.

- Please note there may be multiple injuries per accident.

KPI: RIDDOR Reportable Events

In 2023/24 a total of 16 events were reported to the HSE under the RIDDOR. When compared to the previous year, there has been an increase of 1 event, which equates to a 7% increase (15 to 16).

This increase can be partly attributed to the rise in fire incidents attended where there was potential exposure to asbestos.

The most common cause of over 7-day injuries was slips, trips, and falls, accounting for 40% (4 of 10). This remains numerically consistent with the previous year (4 of 12).

An example of a RIDDOR reportable event included:

- Vehicle overturning when travelling over rough terrain, this resulted in a significant event investigation and recommendations made.

During the 2023/24 reporting year, numerous recommendations and actions were implemented to reduce the risk of reoccurrence. These include a review of the Standard Operating Procedure: Incidents Involving Asbestos and a revised LCMS Asbestos Module. Operational Assurance conducted a thematic audit on asbestos identifying areas for improvement. The recommendations identified are progressed and monitored through the OLG.

By Activity

Operational

Non-Operational

Training

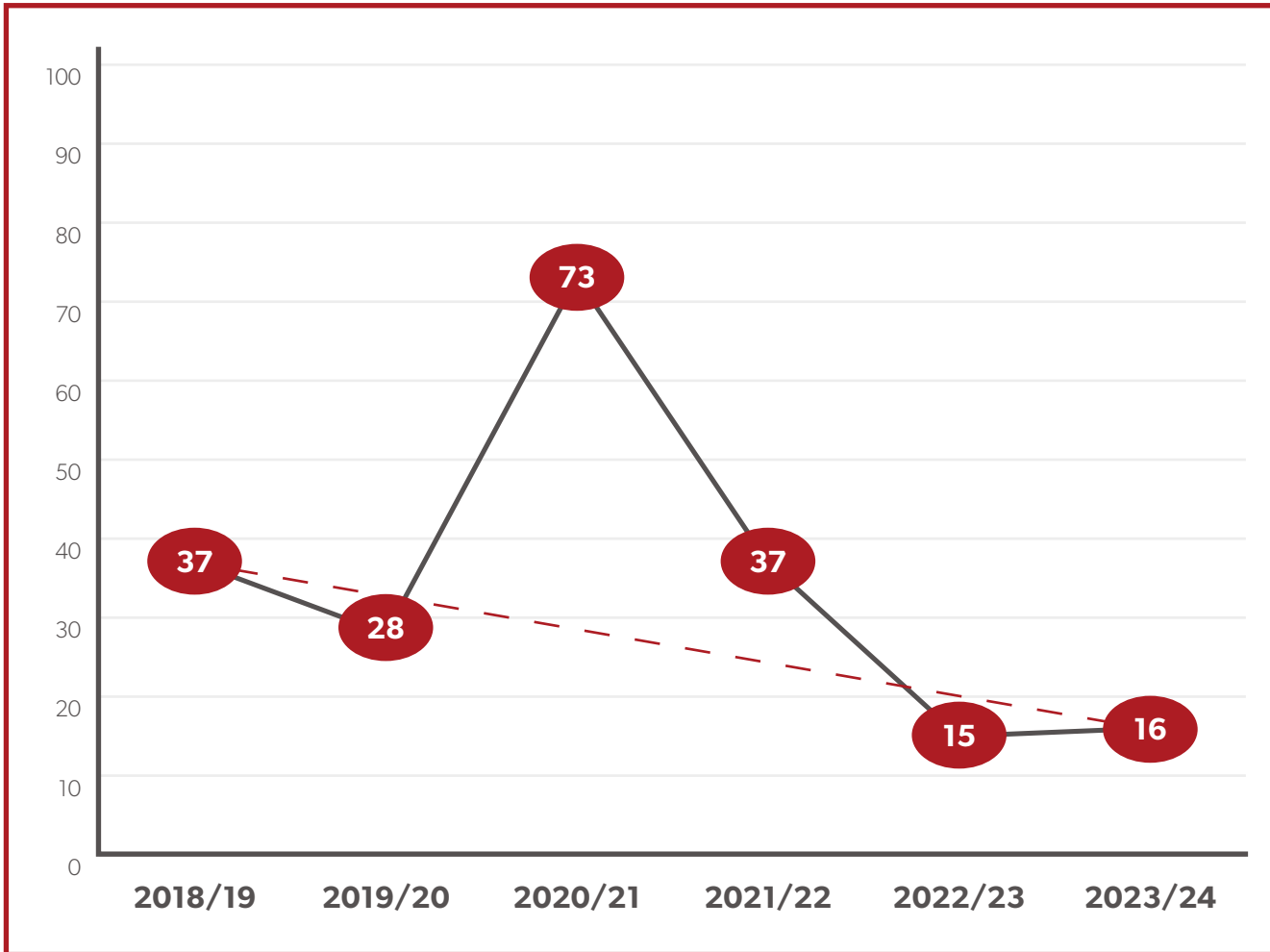
Type of RIDDOR

Over 7 Day Injuries

Dangerous Occurrence

Specified Injuries

KPI 52: RIDDOR Reportable Events



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.

We will:

Continue to identify trends and take proactive measures to minimize the risk of RIDDOR Reportable events, ensuring that lessons are learned.

The SFRS will ensure the welfare of all personnel following an accident or injury at work and direct to the appropriate support services where required.

KPI: Verbal Attacks on SFRS Staff

In 2023/24 there was a total of 19 verbal attacks to SFRS personnel reported. When compared to the previous reporting year, there has been a decrease of 54% (41 to 19).

There has been a significant decrease of verbal attacks within the East SDA, decreasing by 60% (15 to 6). This can be attributed to the ongoing work within the area working collaborative with external business partners to manage local risks.

84% (16 of 19) events were reported during operational activities. 16% (3 of 19) during non-operational activities.

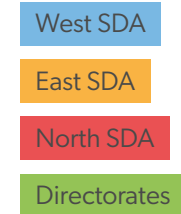
There were 2 injuries reported

- Exposure to potentially harmful substance due to passing of saliva.
- Slip and Trip whilst retreating from a verbal attack.

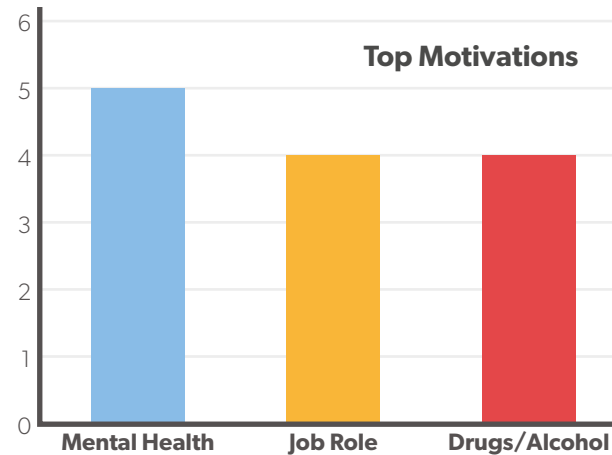
17 verbal attacks were from individual persons towards staff, the remaining 2 were group acts.

Police were requested for 15 of the 19 verbal assaults and 4 of those considered as reportable under the Emergency Workers (Scotland) Act 2005.

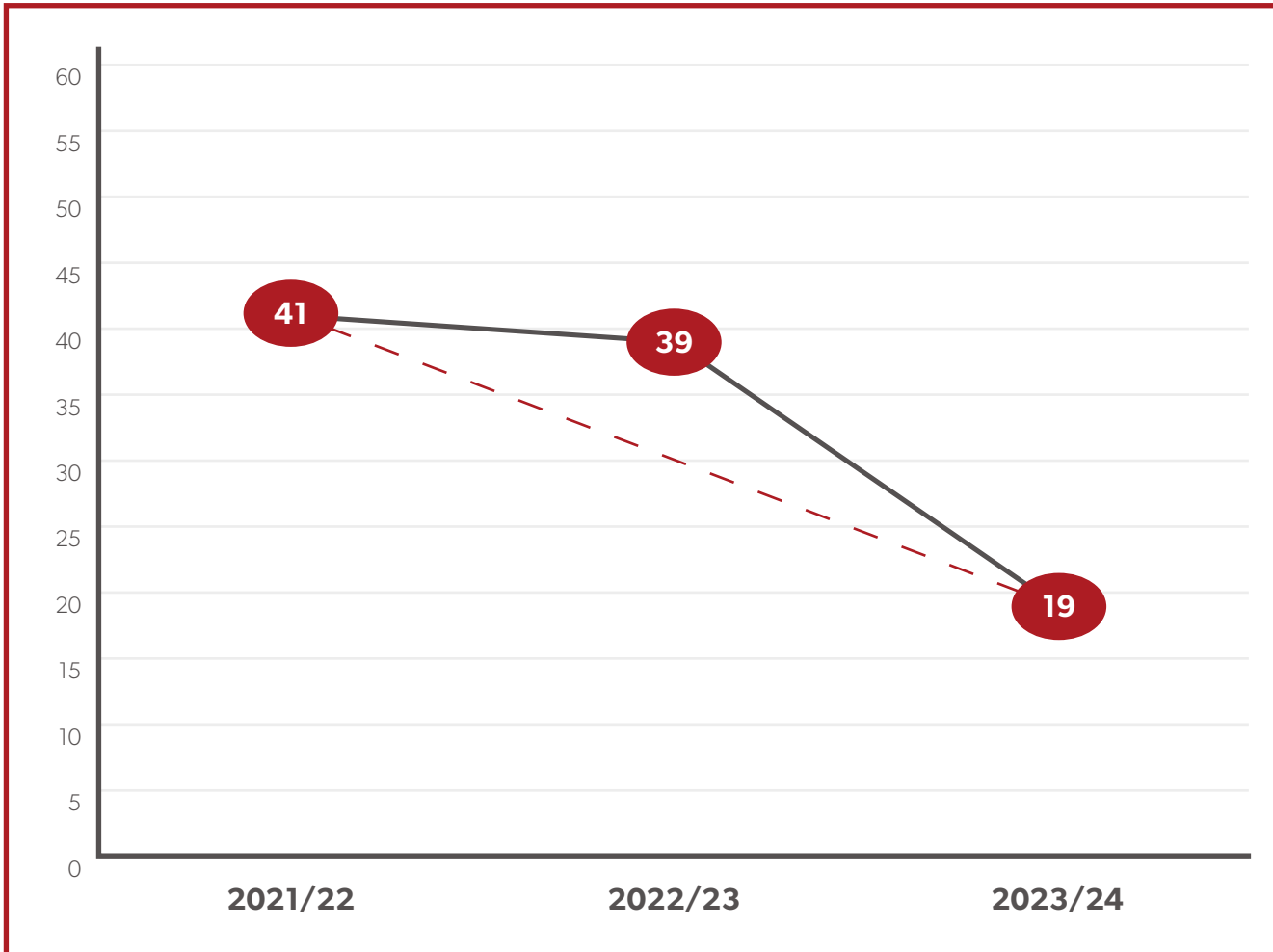
By Location



Top Motivations



KPI 50: Verbal Attacks on SFRS Staff



Purpose:

Demonstrates how many verbal attacks have occurred to SFRS personnel by members of the public.

We will:

Support SDA to engage with Prevention, Protection and Preparedness (PPP) for community engagement initiatives and share any lessons learned between all SDA areas via local and national SAIGs by identifying geographical hotspots where Acts of Violence (AoV) have taken place so that community engagement activities can be tailored and targeted.

KPI: Physical Attacks on SFRS Staff

Physical Attacks on SFRS staff include damage to equipment and property including missiles, fireworks, stones etc.

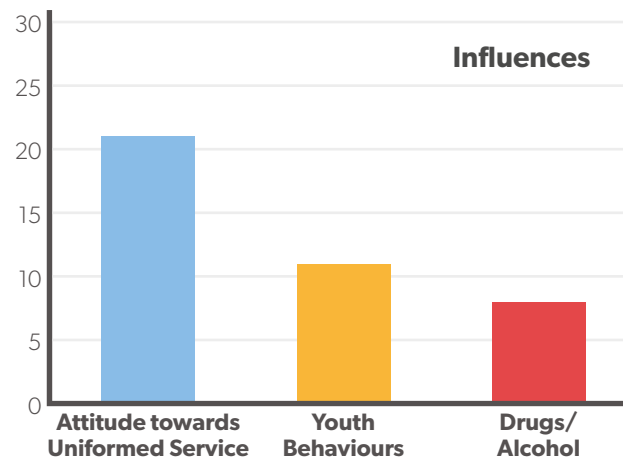
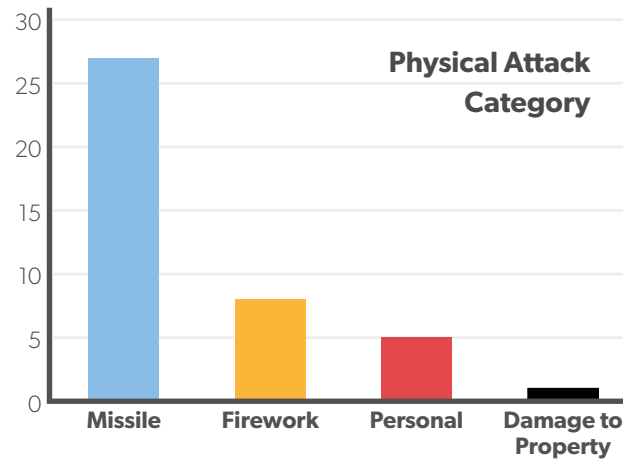
In 2023/24 there was a total of 41 physical attacks to SFRS personnel reported, remaining consistent when compared to the previous year.

There has been an increase in Directorates from 0 to 2, the past 6 years of data show there were no physical attacks on a member of staff. This increase can be attributed to an extended approach to community engagement work carried out within the PPP Directorate.

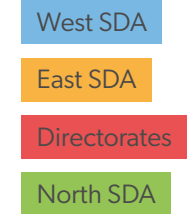
85% (35 of 41) events were reported during operational activities. 15% (6 of 41) occurred during non-operational activities. 1 event resulted in a minor upper limb injury.

32 physical attacks were through group acts, the remaining 9 were from individual persons.

Police were requested for 27 of the 41 physical assaults and 3 of those considered as reportable under the Emergency Workers (Scotland) Act 2005.



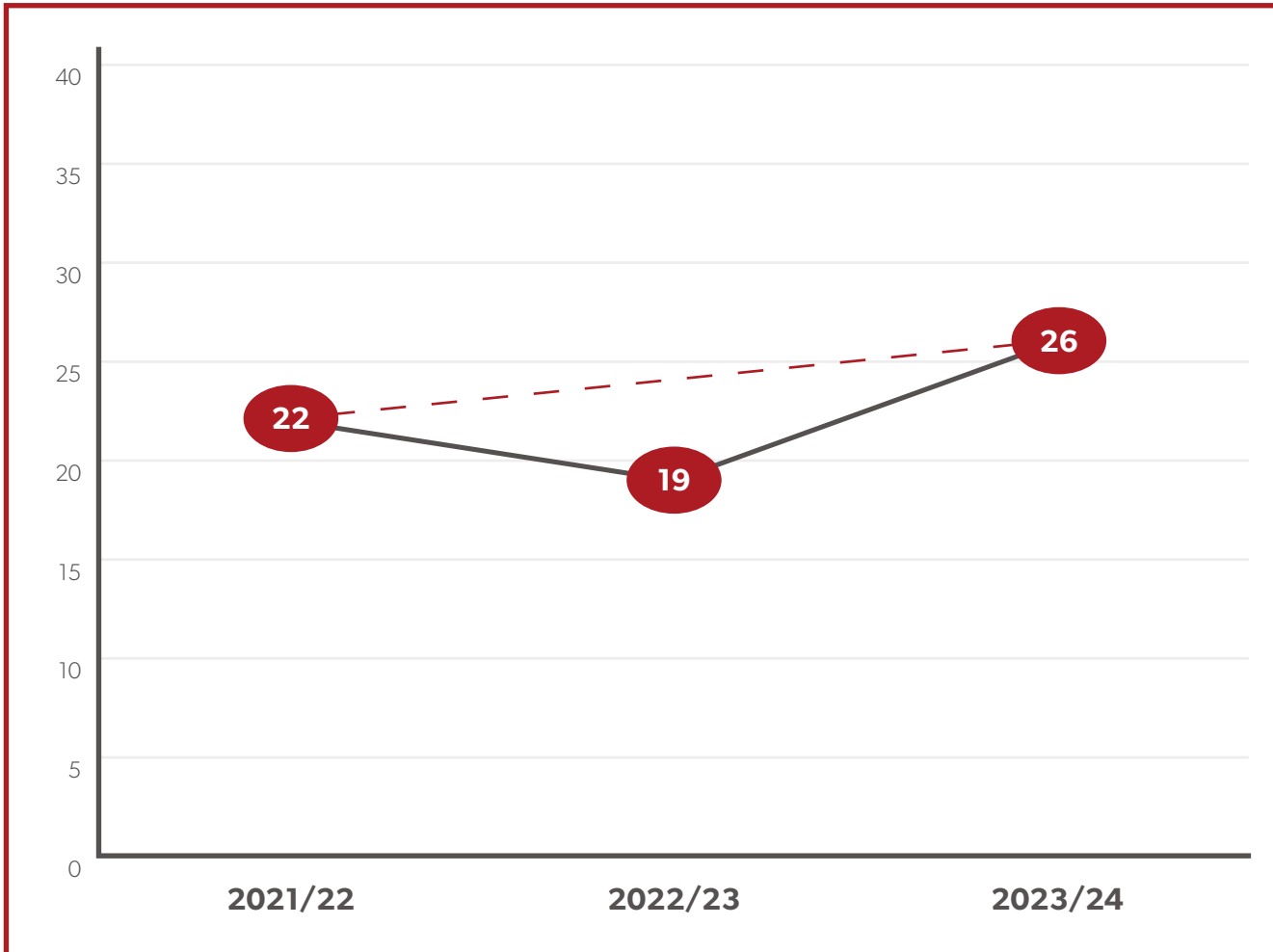
By Location



The figures reported in the SFRS Official Statistics will vary from the SFRS Safety and Assurance Annual Performance Report due to a difference in categorisations, however, numerically the total figures remain consistent.



KPI 51: Physical Attacks on SFRS Staff



Purpose:

Demonstrates how many physical attacks have occurred to SFRS personnel by members of the public.

We will:

Continue to work with Police Scotland to ensure AoV are reported, perpetrators prosecuted under the Emergency Workers (Scotland) Act 2005 and communicate any learning between LSO Areas and Functions to reduce the risk of physical attacks to SFRS staff.

KPI: Vehicle Accidents

In 2023/24 there was a total of 214 Vehicle Accidents (VAs). When compared to the previous reporting year, there has been a 19% decrease (263 to 214).

The most common cause of VA continues to “hit something fixed or stationary”, accounting for over 63% (134 of 214).

Of the Low-Speed Manoeuvres, 30% (36 of 119) of VAs involved the use of Driving Assistants.

Example of VA events includes:

- Reversing into appliance bay and collided with pillar within the appliance bay;
- Auto eject on appliance failed and the driver drove out the bay resulting in damage to vehicle; and
- During water rescue training when moving the boat into shallow water the boat hit into rocks resulting in damage.

Vehicle accidents continue to be investigated, and action taken. The DSG continues to monitor trends and implement further controls and support to reduce the risk of vehicle accidents. All Directorates should continue to promote safe driving to continue this positive decreasing trend.

Activity Type

Operational

Non-Operational

Training

Vehicle Speeds

Slow Speed

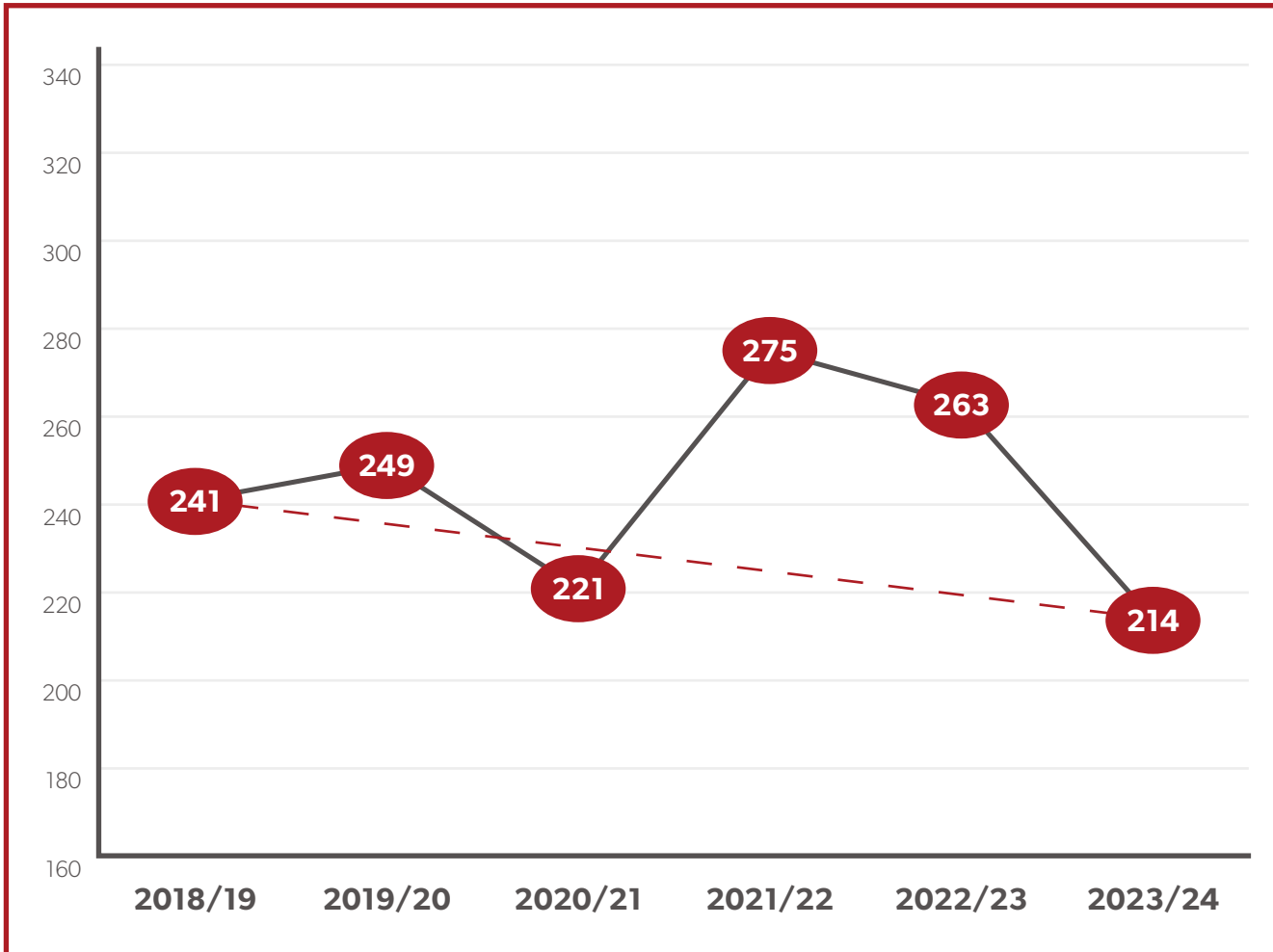
Emergency Response Driving

Normal Road Speed

Stationary

Other

KPI 55: Vehicle Accidents



Purpose:

Total number of events that involved vehicle accidents.

We will:

Develop a Low-Speed Manoeuvre Guidance document to support drivers and to minimise the risk of reoccurrence and continue to raise awareness of NM Reporting whilst carrying out driving activities.

KPI: Operational Assurance Audit Actions

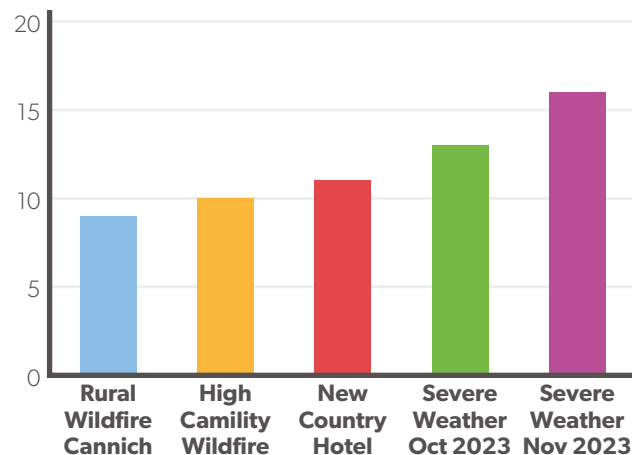
In 2023/24 there was a total of 5 structured debriefs carried out by Operational Assurance (OA). The debriefs collate and review information of the event to highlight good practice and to make recommendation where required to promote continual learning and improvement.

An Asbestos Thematic Audit was carried out in 2023/24 following an increase in potential exposure to asbestos at operational incidents. The thematic audit identified a total of 21 recommendations.

All recommendations stemming from debriefs and thematic audits are progressed through governance and added to the Organisational Learning Tracker for the relevant risk owner to progress to completion with supporting evidence.

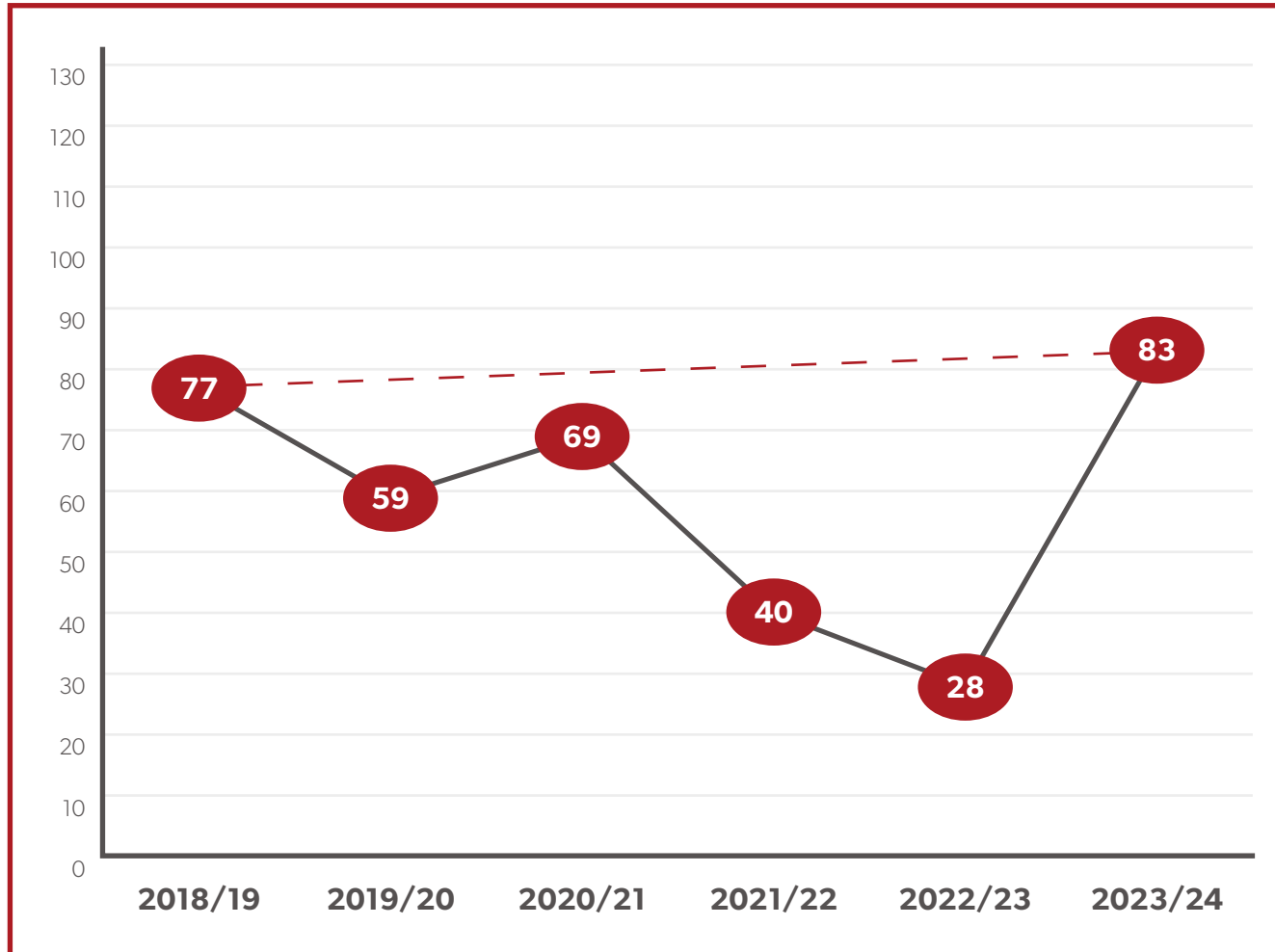
The OA function would like to thank staff who have been involved in the debriefs throughout the year. The contribution this brings to organisational learning and review of procedures is of significant value to enhance safety and reduce the risk of injury or ill health.

Debriefs and Action Totals



Photograph by JASPERIMAGE

KPI 19: Operational Assurance Audit Actions



Purpose:

The KPI demonstrates the number of Significant recommendations identified through OA Debrief Processes.

We will:

Continue to review significant events when required and continue to promote hot debriefs and the recording of what went well and what didn't through the Operational Assurance Recording and Reporting System (OARRS).

KPI: Health and Safety Improvement Plans

Overall completion of the 2023/24 HSIP is 92% (71 of 77) representing an 18% increase when compared to the previous reporting year.

The North SDA, PPP, Strategic Planning, Performance and Communication (SPPC), Service Delivery (SD) and the Operations Function completed 100% of their overall actions for 2023/24.

The 6 outstanding actions will be considered and monitored in the 2024/25 improvement plan.

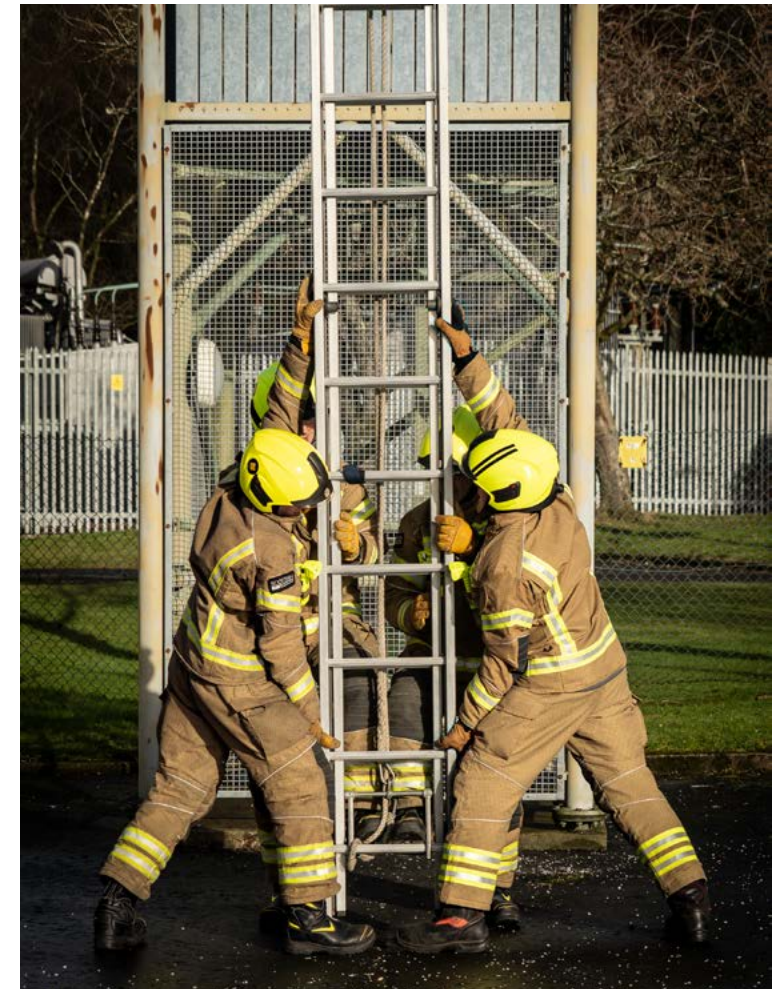
Our 2024/25 Improvement Plans set out our commitment to further enhance legal compliance through our Health and Safety Management System (HSMS). Our focus continues to be on people, processes and systems with the overall objective of continuing to improve staff safety.

HSIPs are supported by guidance provided by SA and SAIG meetings to support all functions achieve their actions. This demonstrates continual improvement within the service.

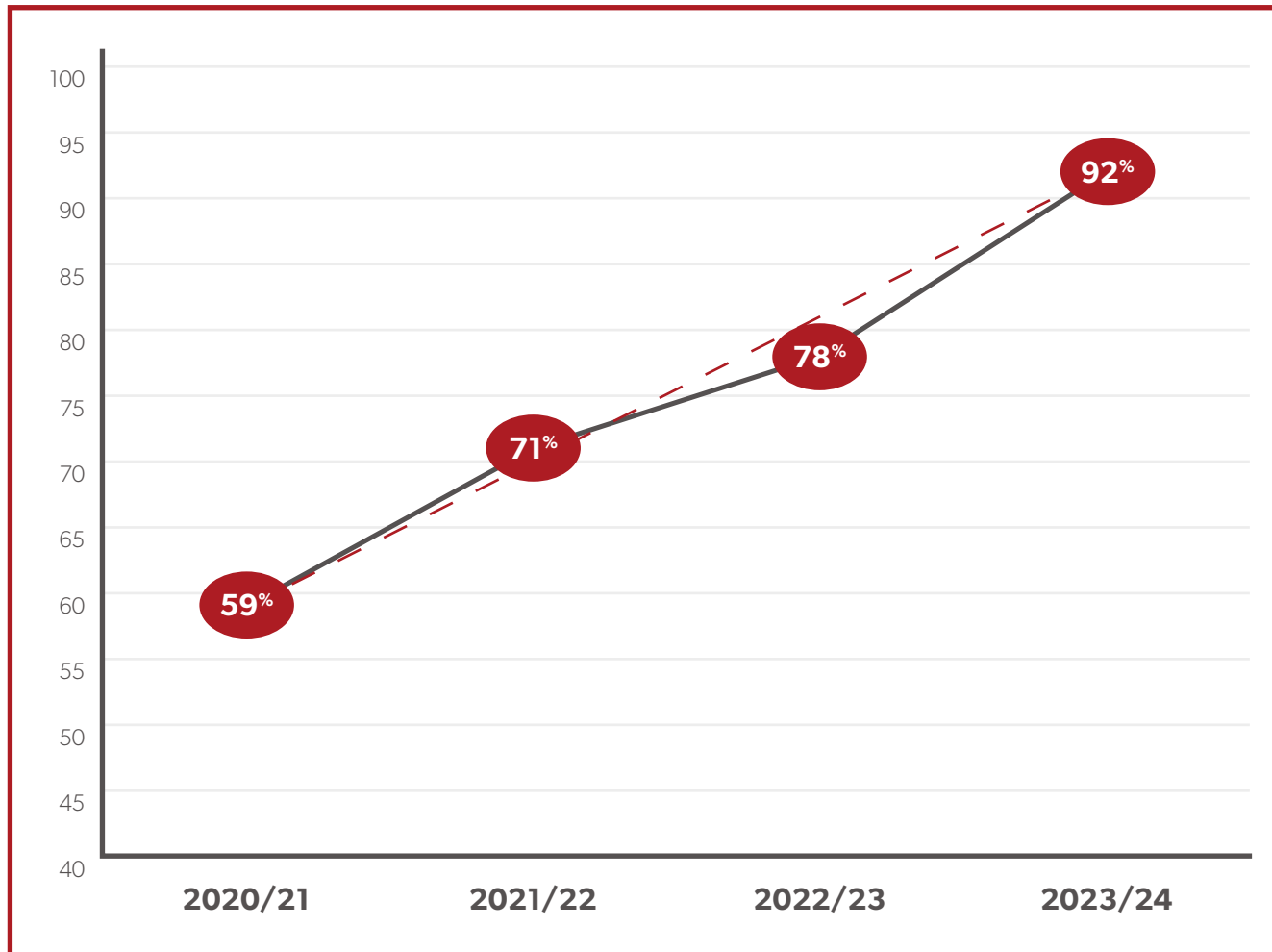
Following feedback from 2023/24, SA have introduced an FAQ Microsoft Teams Channel providing further assistance and guidance for our Business Partners.

Key achievements from the HSIPs include:

- Introduction of a Safety and Assurance Coordinator and Safety and Assurance Liaison Officer awareness package to enhance understanding of key SA requirements of the role;
- Update to SFRS Safety and Assurance appraisal process to support staff throughout the year;
- Review and update of 10 MAs and supporting training packages to enhance knowledge;
- Review all technical assessments and populate GANTT charts to ensure statutory compliance; and
- Progress findings from “compare and contrast” of OA to ensure we continually learn and improve.



KPI 56: Health and Safety Improvement Plans



Purpose:

Demonstrates the completion of improvement plans to drive safety performance.

We will:

Continue to improve HS standards and performance ensuring legal compliance and risk reduction through SMART objectives for the service.

Performance Indicators 2023/24

Assessment Reviewed

COSHH

Safe System of Work

Risk Assessment

Manual Handling

Personal Protective Equipment

Event Investigations

BRAG 790 Events in Total

Closed Completed

Open Investigation Ongoing

Operational

Assurance Totals

Structured Debriefs

Frontline Updates

We will:

Continue to review risks to the SFRS and provide staff with relevant information on how to identify and manage risks. Additionally, support our business partners in reviewing all risks and technical assessments to ensure hazards are identified and appropriate control measures are implemented in accordance with the GANTT charts.

Performance Indicators 2023/24

Support Reviews

Gold

Silver

Bronze

No Award

MA Updates 16 in Total

Complete

Overdue

Deferred

Recinded

DSE Assessments

Total Completed
DSE Assessments

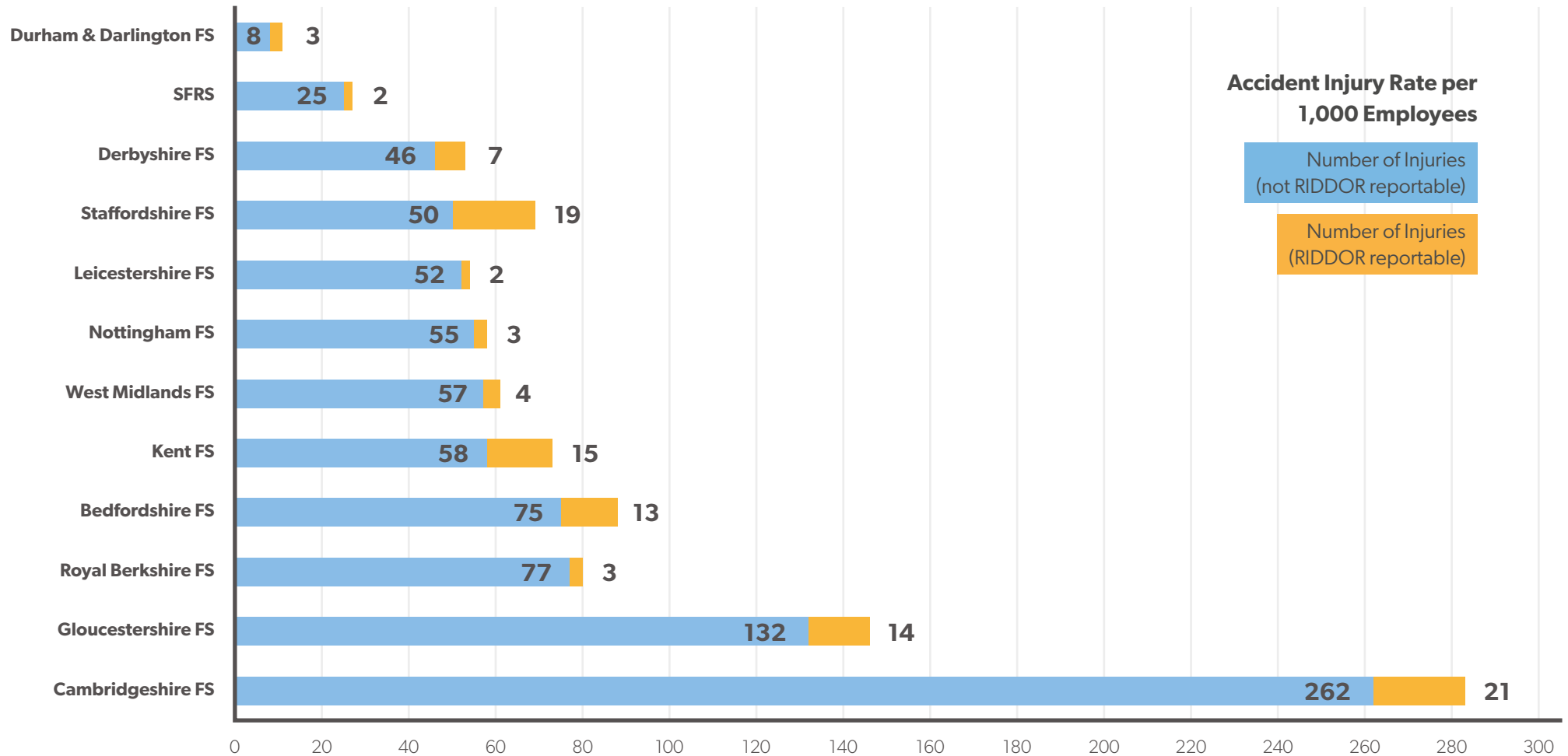
Open Ongoing > 1M

Open Ongoing

Rejected No LCMS

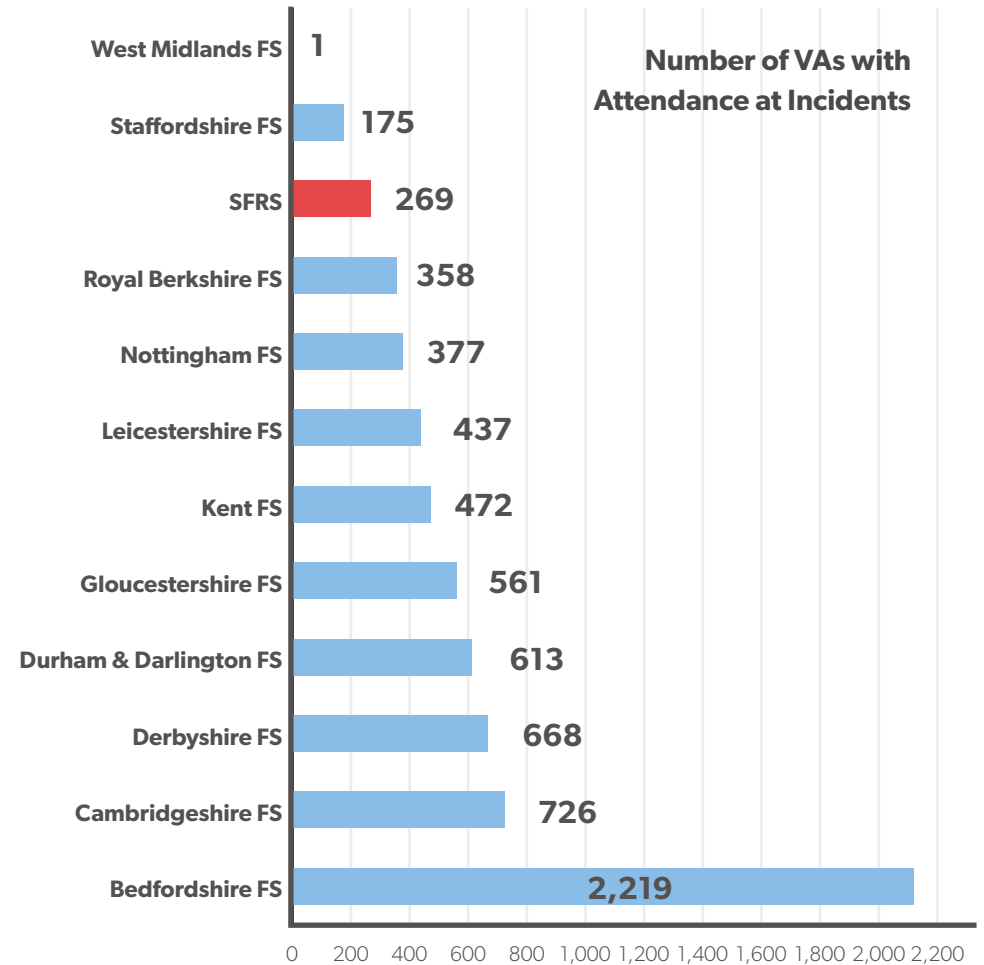
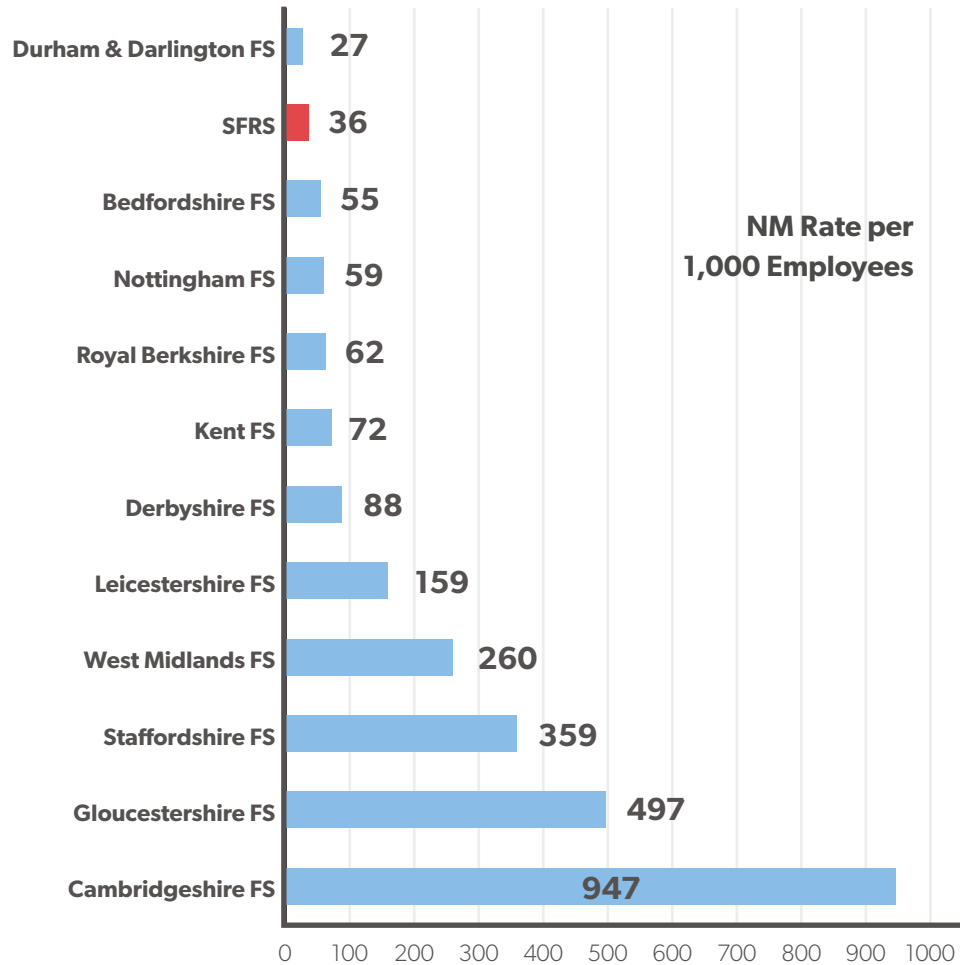
Benchmarking UK FRS

(01/04/2023 – 31/03/2024)



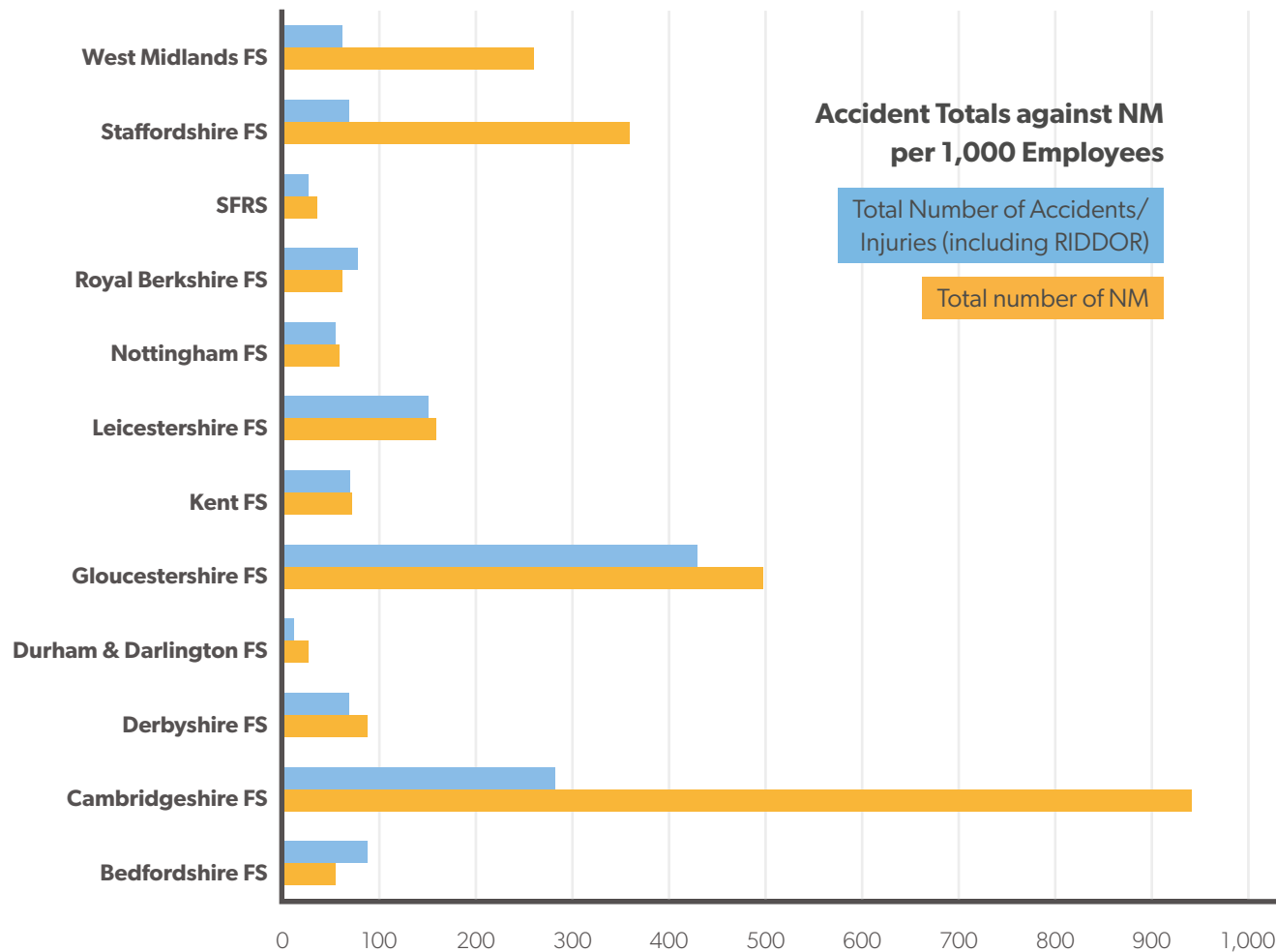
Benchmarking UK FRS

(01/04/2023 – 31/03/2024)



Benchmarking UK FRS

(01/04/2023 – 31/03/2024)



Each UK FRS has different reporting variables and as such we have used the figures per 1,000 employees to make benchmarking indicators applicable. Through data analysis of the figures provided there are areas of good performance and areas of improvement for the SFRS.

The data indicates high vehicle accident rate which the SFRS continues to monitor to take preventative measures and work continues through the DSG. Although the SFRS NM figures have increased this year, it is relatively low in comparison to the UK FRS per 1,000 employees. SA have included hazard perception to the Operational new recruits training together with local promotions to emphasise the importance of NM event and will continue to support directorates on NM reporting.

We will:

Continue to liaise and engage with other UK FRS through the NFCC HS Committee, sharing areas of best practice enhancing safety UK wide.



5 Act

Directorate Summaries; Continual Improvement; and Looking Ahead

Training, Safety and Assurance (TSA)

(Training)

- Implementation of enhanced wildfire training to personnel at specialist Tier 3 Wildfire Stations ensuring that the appropriate SSoWs are implemented and training provided at specialist Tier 3 Wildfire Stations.
- Review of BA training delivery model, implementing a BA Recovery Plan. Phase one of the three phase plan has been successfully delivered during 2023/24. Phase 3 will introduce a new business-as-usual (BAU) training model.
- Working with Operations colleagues to provide a training package on the use of Thermal Image Cameras.
- Following attendee feedback, the wholetime BA acquisition training has been increased from 2 weeks to 3 weeks to provide exposure to realistic training whilst allowing for effective management of contaminants. The on-call elements are currently under review with the continuation of a 2-week timetable with the additional elements conducted in the station by Training Instructors.
- Implemented Service-wide Training Programme for Face Fit and on track to be fully delivered in 2024. This has involved the training of 146 Face Fit Instructors and over 2,500 face fit tests at the time of writing the report.
- Re-instated IOSH Training Courses aimed at improving safety awareness of Supervisory Managers, with over 150 personnel having achieved the IOSH Managing Safely award.
- Methods of Instruction (MOI) process rolled out. Acquisition and maintenance of skills through Crew Commander CEP process and through LCMS packages for all Supervisory Managers within SFRS.
- Procurement Framework Review - RTC Training - Scrap car / vehicle provision, improving the availability of vehicles.
- SSoWs are being developed by the Training Function, aligned to the Draft Contaminants SOP for the management of contaminants in training.

TSA Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • Accident (37) • NM (26) • VA (9) 	<ol style="list-style-type: none"> 1. Temperature, Manual Handling 2. Other 3. Slips, Trips and Falls

HS Improvement Plan

Complete

Outstanding

Training, Safety and Assurance (TSA)

(Safety and Assurance)

Policy and Objectives:

- SA collaborated with business partners to develop the 2024/2025 Improvement Plans, including briefs and Gantt charts, with a focus on addressing local risk areas.
- Creation of the Safety Culture Survey and analysis.
- Introduced a MA Framework, simplifying the HS Policy and its supporting arrangements, reducing content through flow charts.
- Review and update of the Operational Incident Risk Assessment (ARA/DRA) MA to enhance user orientation.
- Memorandum of Understanding for Terms of Occupancy enhanced to strengthen and reinforce safety priorities.
- SA continue to review the PUWER MA to ensure the document is more accessible for the end user

Risk Management:

Supporting the implementation of Risk and Technical Assessments and SSoW including;

- SDA, Training and Museum of Scottish Fire Heritage Handbook.
- PPE Assessments and Supporting Equipment Information Card for Draeger Xplore 8000 RPE Kits
- COSHH Assessment process simplified, and 181 documents reviewed and updated.
- Production of MSK, Methods of Entry and Manual Handling Reports
- Supporting the completion and actions for DSE Assessments

The following papers were progressed through governance;

- Firefighter Heat and Health guidance;
- BA Trend analysis;
- Local Exhaust Ventilation;
- Food Safety Review;
- AoV;
- Vehicle Events (Low Speed Manoeuvres) and;
- Noise and Vibration.

Training and Communication:

- Development of a safety culture, communication and training frameworks commenced.
- Four new LCMS e-learning modules developed: Vibration, Noise, Lone Working and Safety Signs and Signals;
- The following training and awareness content was delivered:
 - Safety and Assurance Coordinator and Liaison Officer Awareness and OA SPoC network;
 - Revised Fire Fighter HS Induction Package for new trainees;and
 - TASS Presentation during People Career Ready Week.
- Establish a COSHH working group and re-establish Noise working group to review, update and progress assessments and outstanding action plans.
- Staff awareness campaigns completed for Wellbeing and Inclusion calendar including Working in Hot and Cold Conditions, Asbestos Awareness, Lung Cancer Awareness, Returning to Work after Maternity Leave and Stress Awareness monthly campaigns.

Operations

- Incident Command Policy and Operational Guidance, Organised Crime and Counter Terrorism Unit updated Code Red General Information Note (GIN);
- Severe Weather Plan GIN and Severe Weather Business Continuity Plan. The Incident Response, Flexi Duty Officer and Principal Officer Mobilising COPs published; and Flexi Duty Officer Mentoring and Support GIN and GIN Standards of Dress;
- The following Standard Operating Procedures (SOPs) were updated; Incidents Involving Asbestos, Timber Framed Buildings, The Post Fire Ventilation, Evacuation and Water Rescue and Flooding;
- Equipment Information Cards for the following have been published, BA, Branches and Ladders, Fire Escape Hood (FEH), Trauma Care, and Fire Service Pumps;
- The HAZMAT supporting document Initial Operational Response Protocol was updated;
- Awareness Brief was issued on BA testing and hygiene requirements;
- Marauding Terrorist Attack (MTA) - Joint Operating Principles Training was provided to all Operational Personnel on LCMS;
- Audits on Yellow 70mm Delivery Hose and Fire Extinguishers looking at Per- and Polyfluoroalkyl Substances requirements;
- Roll out of new and redistribution of Thermal Image Cameras and Introduction of Pulse Oximeters across the service and CD Oxygen Cylinder Flow Selector to West SDA to enhance trauma care practices and standardisation of equipment;
- An Operations Safety Subgroup (OSSG) was created to support progression of actions to manage risk in the operational environment;
- The Operations PM Meeting incorporates the progression of SFRS actions allocated to Operations via His Majesty's Fire Service Inspectorate in Scotland, as well as HS Action Plans; and
- Revised the Function Risk Register to enhance reporting and progression of Operations risks.

Operations Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • NM (30) • VA (21) • Accident (15) 	<ol style="list-style-type: none"> 1. Other 2. Sharp Object 3. Temperature

HSIP

Complete

Outstanding

Urgent instructions

Awareness Briefings

Standard Operating Procedures

Policy and Operational Guidance

Equipment Info Cards

General Info

Service Delivery Areas (North)

- North SDA promoted the importance of NM reporting. North SDA-wide communication reinforced the importance of reporting HS events, the communication included a NM Fact Sheet and TASS guidance poster for station display. This has led to a significant increase in NM reporting compared to 2022-23;
- Following a large number of events involving exhaust smoke contaminating stations and PPE, being reported at stations across Highland that had non-Euro compliant LDV appliances and no LEV on station, Industry-standard filters were purchased for applicable appliances. Filters attach temporarily to exhausts for station movements, detaching for road driving. Filters remove all particles and contaminants. Training and operational guidance provided;
- Due to the large increase of Battery Energy Storage Sites (BESS) located within the ACAM area of the North SDA. ACAM created a SharePoint site for BESS sites throughout the area. This is maintained by PPP and information shared with SC's and Operational staff so crews can gather OI information to ensure Operational preparedness. This ensures that staff are fully

aware of associated risks and hazards and site layout enabling crews to identify and mitigate risks promptly, allowing them to take appropriate precautions during incidents;

- Multi agency complex Control of Major Accident Hazards exercise undertaken at St Fergus gas terminal in collaboration with staff and partner agencies from across the North SDA. This exercise rigorously tested our Command & Control, JESIP protocols, internal procedures, and external plans. Importantly, it addressed a critical issue concerning risks and hazards contained within the site along with the complex layout, which could pose severe hazards to firefighters and our partners' safety. The insights gained will be pivotal in enhancing our emergency response and ensuring the safety of all stakeholders;
- Derelict properties groups have been re-invigorated across the North SDA with a program in place for building inspections and a multi-agency groups working together to ensure buildings are secure. This is with a view to generating a reduction in secondary fires which has the added benefit of reduced Blue light journeys; and

North Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • NM (74) • Accident (44) • VA (44) 	<ol style="list-style-type: none"> 1. Slips, Trips and Falls 2. Other 3. Impact (Stationary Objects)

HSIP

Complete

Outstanding

- Reinforced Aerated Autoclaved Concrete (RAAC) register created and held on Local Area SharePoint sites across the North SDA. This is maintained by PPP and information shared with SC's so crews can gather OI information. This is with a view to enhance firefighter safety as an understanding of the structural vulnerabilities of RAAC helps in safeguarding not only the lives of the firefighters but also the public and property, as crews can identify and mitigate risks promptly, enabling them to take appropriate precautions during incidents.

Service Delivery Areas (East)

- LSO area developed a quarterly HS newsletter for staff including performance against TASS KPIs and MSK awareness information;
- A multi-agency tabletop exercise was carried out to promote safe working practices and response to a full evacuation scenario at a high-rise residential tower block supported by all Blue light partners and Fife Local Resilience Partnership representatives. This exercise tackled an identified issue in relation to building construction that could pose a significant hazard to FF, Public and partner safety;
- Collaborative work with Falkirk council and blue light partners relating to a large derelict property complex in Falkirk town centre. SFRS staff engaged with owners and local authority to have the area properly secured prior to partial demolition and refurbishment;
- Commenced a pilot in relation to Contaminants control in advance of a HSIP and communicated this to LSO staff. They have used this template identified at Dalkeith Fire station to identify working solutions where minimal property adaptation was required;
- Anti-social behaviour initiative in conjunction with Police Scotland / Local Council / CAT Team and West Lothian Youth Action Project. Extensive work to reduce the significant anti-social behaviour issues and awareness sessions highlighting the role of firefighters and the dangers etc. This has resulted in a reduction of violence targeted at SFRS staff and appliances and a reduction of secondary fires (blue light mobilisation);
- Extensive engagement with local Prison. Along with supporting a reduction of operational incidents on site and the ongoing investigation with Police Scotland / Prison and the Crown Prosecution Service. Work has been carried out to put additional flame-retardant furnishings within cells, programme established to help and support prisoners being safe when they leave prison;
- A review was carried out to standardise the HS Notice boards in stations clearly promoting HS literature and presentation of PRP documentation. This has supported an improved HS culture and support the station audit process; and
- East LSO areas have seen a reduction in vehicle related events following positive engagement with staff relating to low-speed manoeuvres. Engaging with SAIG and action log.

East Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • NM (53) • Accident (47) • VA (44) 	<ol style="list-style-type: none"> 1. Other 2. Slips, Trips and Falls 3. Manual Handling

HSIP

- Complete
- Outstanding

Service Delivery Areas

(West)

- Following a high number of staff changes throughout the year, SALOs and Deputy SALO prioritised their attendance at the SAC / SALO presentation delivered by SA;
- Face Fit Testing training provided, and staff will be completed within 2024. West provided best practice information from external organisations regarding face fitting test fail percentiles and measures put in place by the service;
- Event Management Support Review all six LSO areas, achieved a GOLD outcome from the Event Management Support Review;
- A pilot for VAs and in particular, Low Speed Manoeuvres was introduced in Lanarkshire LSO including equipment for on station training and carrying out robust investigations. Resulting in improved performance, actions identified were communicated to staff such as reinvigorate topography sessions to identify high risk streets for double parking and access issues. Crews provided SFRS Think Before You Park leaflets. ERRI enhanced appraisal process to include a key work objective, "Promote a positive HS culture to Reduce health and events and Low Speed Manoeuvre instances", This shows a positive decrease within the area;
- Due to high number of incidents within West SDA, staff refamiliarised with the LCMS Asbestos module;
- City of Glasgow (CoG) presented a good practice paper to the West SDA SAIG & SASG on their Thematic Review on the CoG Station Audit Programme. Looking at standardisation and best practice;
- Outcomes from OA processes and HS Investigations continue to provide valuable lessons for operational personnel. These processes, along with the establishment of added Command Group communication channels and bespoke learning events will continue be used;
- West proactively increased the reserve kit stock and put measures in place to access this in anticipation of the forthcoming contamination policy/procedure and provided a presentation to be distributed to all personnel regarding the risks and control measures to be adopted whilst awaiting formal SFRS procedures; and

- A local trend analysis was conducted following an increase in events associated with BA and events involving spare appliances and equipment. On conclusion reports were submitted to the local Safety and Assurance Improvement Groups for relevant action.

West Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • VA (73) • NM (69) • Accident (60) 	<ol style="list-style-type: none"> 1. Other 2. Slips, Trips and Falls 3. Sharp Objects

HSIP

Complete

Outstanding

Financial and Contractual Services (FCS)

- In addition to the SFRS Building Surveyor quarterly Inspection program, Intrusive detailed surveys based on new Guidance from the Standing Committee on Structural Safety commenced in September 2023;
 - Projects to provide dignified facilities, contamination control and modernisation in fire stations is ongoing with the property estate;
 - Training provided for maintenance and repair of Electric Vehicles (EV) including the EV appliance that is based at Clydesmill. This enhances knowledge when called out to an EV event;
 - A light fleet review is being undertaken developing processes and procedures for better allocation of light fleet and range of options for the provision of FDO vehicles which best meets the Service’s cost of risk profile, in the face of an ageing fleet;
 - Personal Safety Device (PSD) includes a person down system is implemented within Fleet to support lone working;
 - Respiratory Protective Equipment (RPE) poster and awareness training session implemented within Fleet on “Protection of your lungs.
- Alternative RPE was procured to provide protection for local requirements;
- Personal Protective Equipment (PPE) distributed to firefighters for various activities e.g. wildfire. SFRS will facilitate wearer trials and sizing and feedback to NFCC water rescue PPE project. Current reserve stock and sizing profiles is being reviewed with a view to increasing existing stock levels and assist in contaminant controls;
 - An electronic system was created for “reserve PPE availability list” allowing stations to view reserve stock of PPE and the sizes available within holding stations within their areas;
 - The introduction of Personal Protective Equipment (PRE) to replace Hydraulic Rescue Equipment (HRE) is now in phase 5 to reduce the risk of pressurised injection injuries to operational staff;
 - Hand and Arm Vibration Syndrome (HAVS) awareness training accompanied by the implementation of a monthly HAVS monitoring system to reduce the likelihood of contracting HAVS; and
- Work with SA on vehicle insurance claims incurred, ensuring lessons learned can be considered and population of directorate risk registers to identify significant risk and associated controls.

FCS Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> Accident (8) VA (3) NM (1) 	<ol style="list-style-type: none"> Impact (Stationary object) Other Manual Handling

HSIP

- Complete
- Outstanding

People

- MSK Injury Reduction Group re-established with strengthened alignment between physical and mental wellbeing;
- Career Ready Programme ran across 2023/24;
- Launch of the SFRS Colleague Experience Survey;
- Cultural Engagement Sessions were held across all staff groups and SDAs which informed the development and subsequent pilot of the “People Management Essentials”, the first element of the wider SFRS Management Development Framework;
- Commenced review of eyesight standards for firefighters;
- Development and launch of Agile Working Manager’s Toolkit and supporting LCMS module;
- Preparatory work to establish an SFRS Confidential Reporting Line commenced;
- Train the facilitator programme delivered to enable SFRS colleagues to take forward Lifelines programme across the Service;
- Introduction of a Pre-Recruitment Engagement Programme aimed at providing 1:1 support and guidance to help candidates prepare for the formal fitness assessment and the practical selection tests;
- Work with Collective Learning Partnership and Union Learning continues to provide access to lifelong learning opportunities across a broad range of topics including first aid for mental health. Pre- and post-natal exercise and nutrition and menopause cafes;
- Support of the Service Delivery Model Programme as the Services continues to improve its response to risk and demand across Scotland; and
- Creation, review and implementation of various policies and procedures that support a culture of health, wellbeing and safety across the Service.

People Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • Minor Injury (2) 	<ol style="list-style-type: none"> 1. Impact (moving object) 2. Other 3. NA

HSIP

Complete

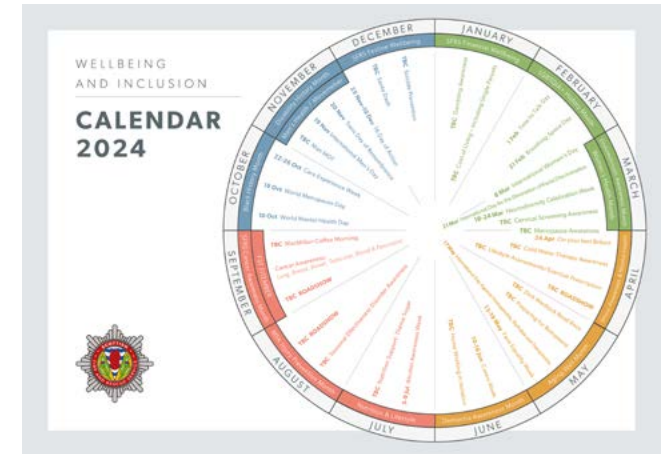
Outstanding

People

(Wellbeing)

Over 170 Wellbeing Champions in SFRS to support colleagues

- Implementation of the 2024 Wellbeing, Inclusion and Learning Calendar of activities with inclusion from SA in all Wellbeing events and initiatives.
 - Collaboration with NFCC and The Fire Fighters Charity commissioning of Nottingham Trent University to carry out research into the health and wellbeing of UK fire and rescue service staff, which has now been published.
 - Participation in His Majesty's Fire Service Inspectorate Inspection on mental wellbeing support for staff within SFRS.
 - Creation and training of a network of circa 170 Wellbeing Champions provision support to colleagues across SFRS.
 - Training for wellbeing professionals to provide support on mental wellbeing and neurodiverse conditions.
- Review of Post Incident Support Procedure and arrangements to improve inclusion and encourage wider engagement.
 - Improved and created partnerships with a broad range of health and wellbeing Charities to expand support for colleagues including the Fire Fighters Charity and the SFRS Family Support Trust.
 - Established a working group to develop a sustainable programme of mental health learning resources to support employees through their career lifecycle including a revised modular approach to Lifelines.
 - Completed a wellbeing survey to establish employees' views on wellbeing support provided by SFRS.
 - Bespoke development programme delivered to improve the wellbeing of Operational Control colleagues.



Portfolio Office, PPP and SPPC

(Portfolio Office)



Portfolio Office Accident Summary

Types of Events:

- Accident (2)

Top 3 causations:

1. Manual Handling
2. Impact (Moving Object)
3. NA

HSIP

Complete

Outstanding

Have undergone structure change and increase in membership this year. Throughout these changes, proactive design of the Portfolio Office SAIG, and local management processes have ensured achievement and maintenance of 100% improvement plan compliance this year and across the last three years.

In addition, high levels of commitment to staff safety continue to be exhibited in achievement of full LCMS mandatory training undertaken by the Portfolio Office to March 2024.

Portfolio Office, PPP and SPPC

(Prevention, Protection and Preparedness)



PPP Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none"> • NM (1) • VA (1) • AoV (1) 	<ol style="list-style-type: none"> 1. NA 2. NA 3. NA

HSIP

Complete

Outstanding

PPP have implemented the Established Electrical Infrastructure Working Group, focusing on Lithium-ion batteries and Battery Energy Storage Systems.

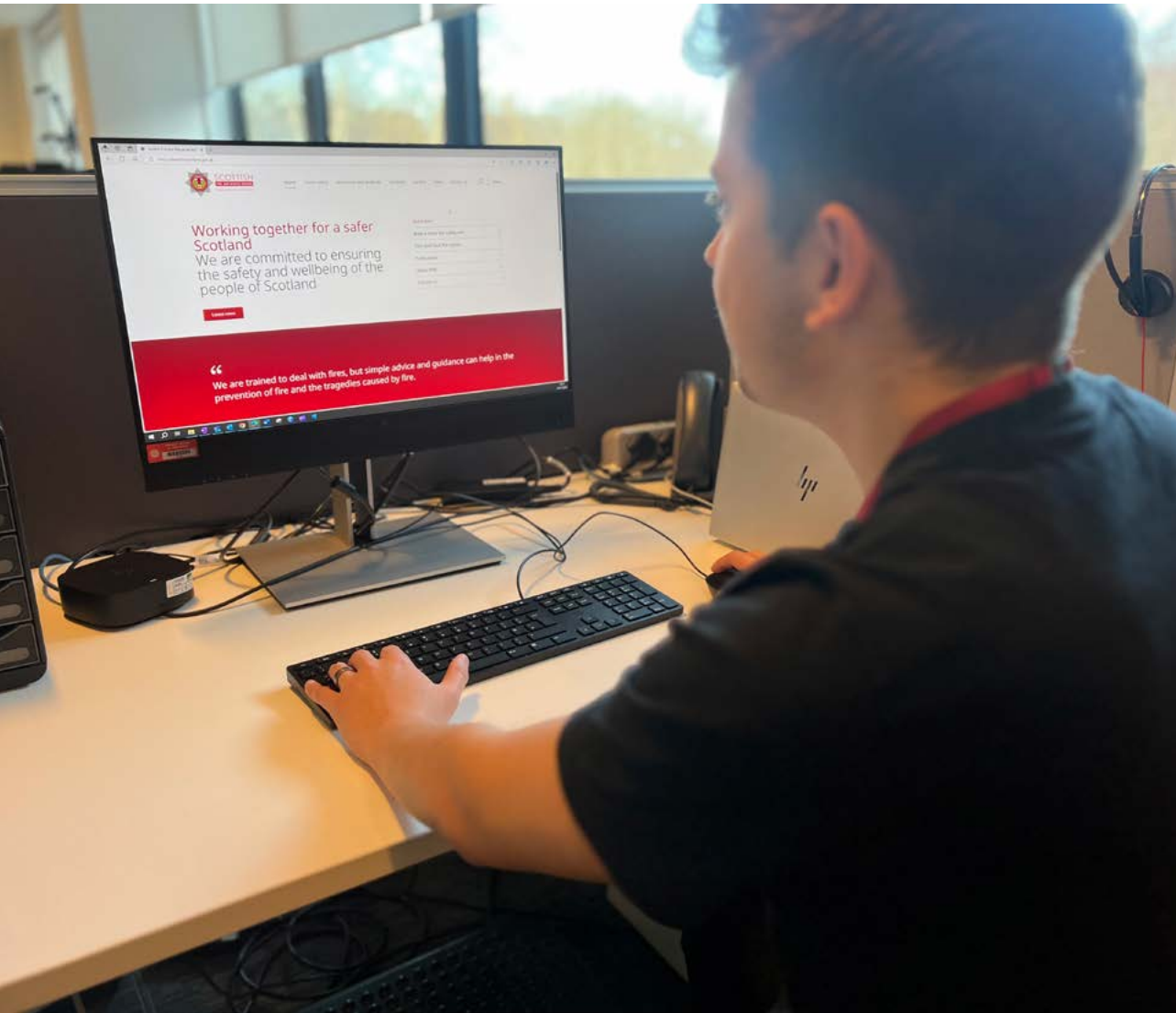
Cross functional work on Fatal Accident Inquiries for the Crown Office and Procurator Fiscal following fire incidents.

Complex multistage formal notices such as Edinburgh Royal Infirmary.

Work with Local Authority Building Standards Scotland on new best practice approach for formal Building Warrant consultations.

Portfolio Office, PPP and SPPC

(Strategic Planning, Performance and Communication)



SPPC Accident Summary	
Types of Events:	Top 3 causations:
<ul style="list-style-type: none">Injury (1)VA (1)	<ol style="list-style-type: none">Manual HandlingNANA

HSIP

Complete

Outstanding

Introduced a Power BI dashboard to support the tracking of the HS action plan requirements. We use this to track completion and ensure everything is actioned in line with the plan which proves to be useful.

Continual Improvement

SA Improvements

- SA contributed to SFRS Performance Appraisal mandatory behaviours and guidance to better support our safety culture;
- Introduction of KPI utilising PowerBI;
- Review of Operational Assurance function recommending 21 updates to OARRS;
- OLG action tracker updated to include live updates and dashboard to provide analysis of information, resulting in a reduction of long-term outstanding actions;
- ISO45001 Gap Analysis and Maturity Model under development identifying areas of improvement; and
- Introduction of KPI and iPowerBI and updating of performance reports.

Support Reviews

Support Reviews continue to be carried out throughout each Quarter.

SRs is a tool to provide assurance with SFRS requirements, and in addition supports legal compliance. The aim of the SR is to promote and share areas of best practice or highlight where improvements can be made to allow standardisation throughout the service.

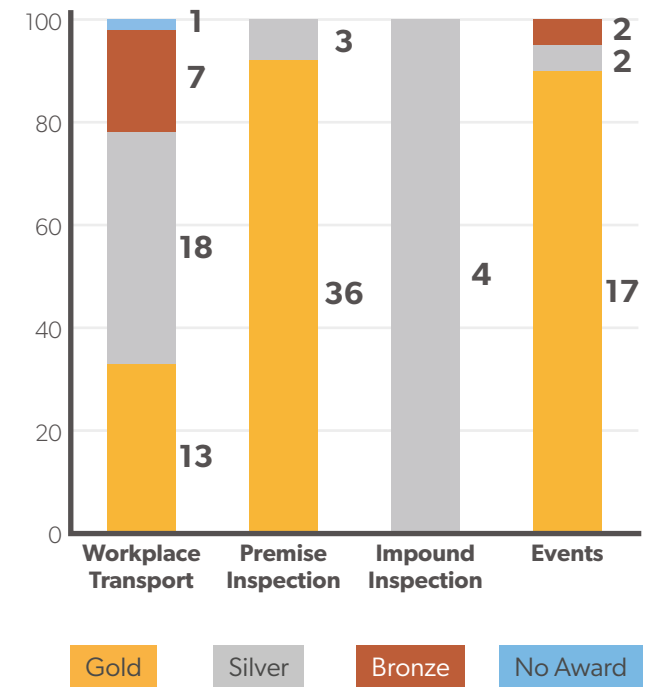
The following topics were completed in 2023/24:

- Workplace Transport;
- Premise Inspection;
- Impound Inspection; and
- Event Management.

As a result of the SRs areas of national learning have been identified and continue to be addressed through various workstreams such as the review and update of the Impound Inspection MA to amalgamate the documentation to simplify for the end user.



Support Reviews



Continual Improvement (Operational Assurance)

2023/24 Service Delivery completed the Station Audit process utilising the Operational Assurance Reporting and Recoding System (OARRS).

A total of 99 audits were reported:

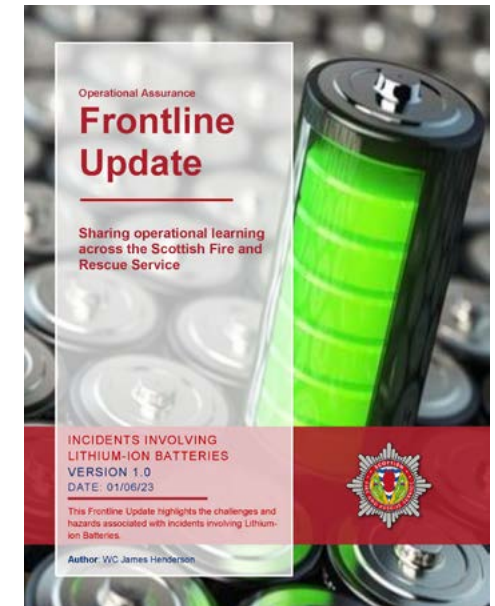
- North SDA 16 audits,
- East SDA 35 audits,
- West SDA 48 audits.

Actions continue to be monitored where significant improvement is required, and where minor areas of improvement was identified these actions were resolved at local level.

OA have published 4 Frontline Updates

- Incidents Involving Solar Panels
- Incidents Involving Lithium-Ion Batteries
- Incidents Involving Disused Mining Operations
- Katherine Street, Livingston Incident

The purpose of these updates is to provide staff with an overview of the challenges and hazards associated to increase knowledge and share learning across the Service.



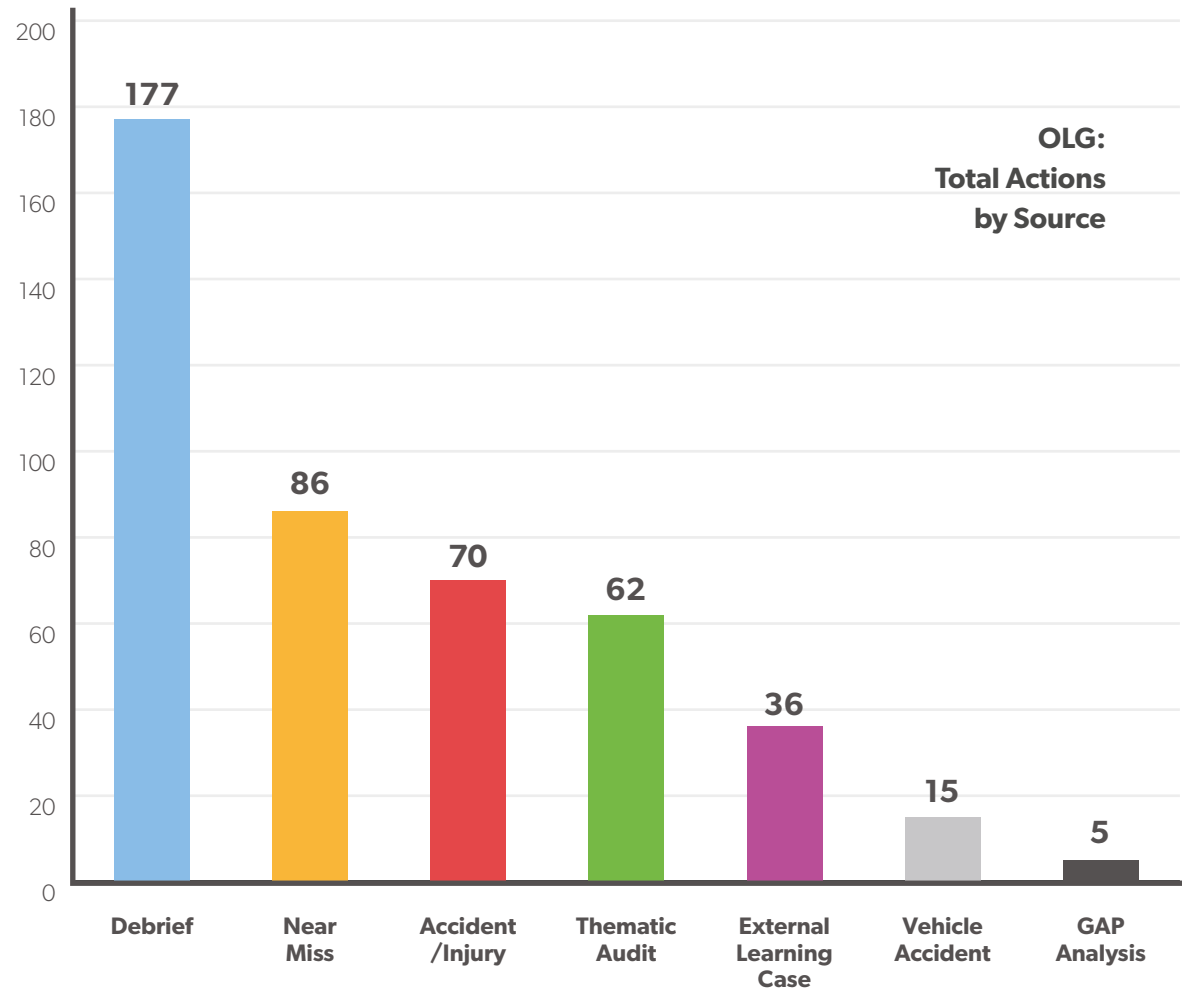
Continual Improvement

(Organisational Learning Group)

Since the introduction of the reformed OLG meeting risk owners continue to manage recommendations from various sources.

In the year 2023/24 the OLG tracker was redesigned to a “live dashboard” allowing risk owners to populate as required, prior to final decision at the OLG meeting. This allows key stakeholders to review live statistics, identify trends and monitor progression to enhance the HS to staff and others.

Since the dashboard was created a total of 325 recommendations have been completed and numerous actions remain ongoing. Of these 325 actions a total of 86 actions were completed in 2023/24 highlighting the risk owner’s dedication. Due to the nature, a large amount of these sit with the Operations directorate and it is acknowledged the work undertaken to prioritise actions.



Continual Improvement

(Organisational Learning Group)

Significant Event Summary

The SFRS carried out a total of 3 Significant/ Safety and Assurance 21 (SA21) events;

Beauly ATV Incident

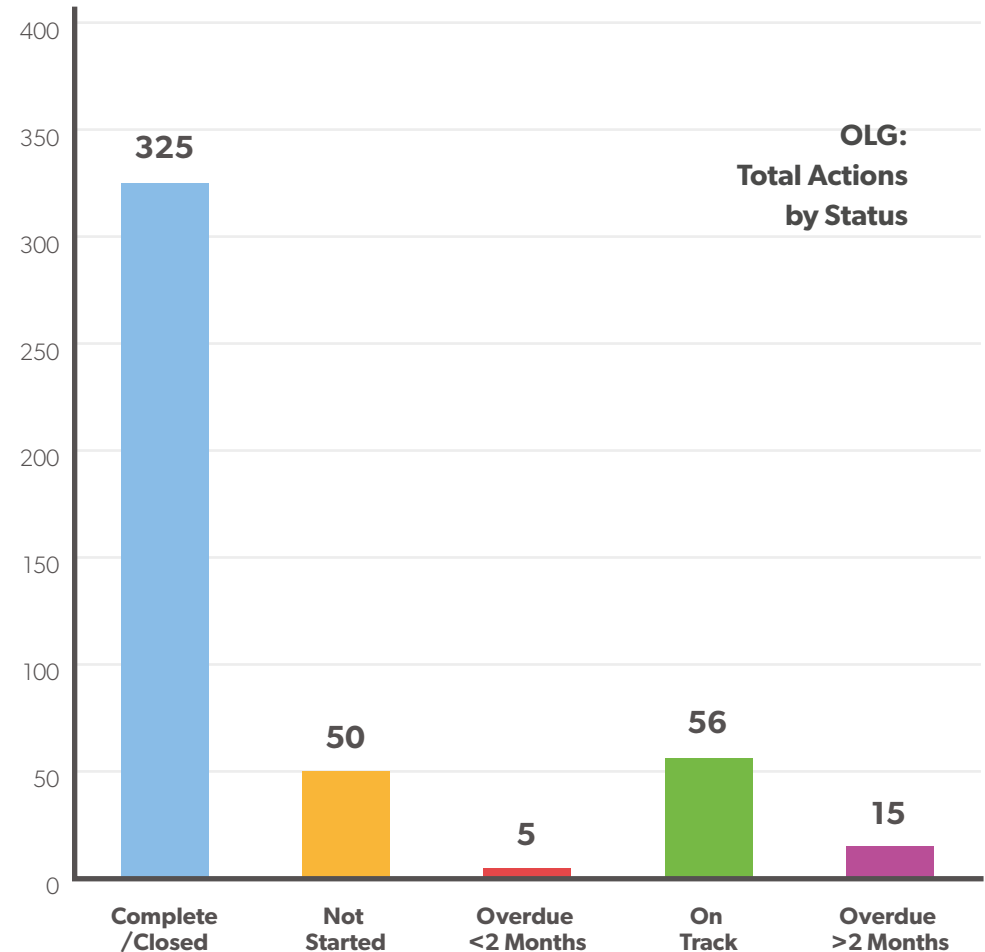
Description: An All-Terrain Vehicle (ATV) was in use at a wildfire incident. While traveling up a gradient across moorland, the ATV overturned and landed on its roof, resulting in injuries to SFRS staff. Outcome: Following the investigation, 8 recommendations were made.

Pollok Fire Involving Asbestos

Description: SFRS staff attended a large building fire where the gable end and roof collapsed. It was later suspected that the building contained asbestos-containing material. Outcome: An SA21 investigation was conducted, leading to a thematic audit due to further incidents involving asbestos. As a result, 19 recommendations were made.

Polmadie Road Traffic Collision (RTC)

Description: An appliance was mobilised to an incident and, while en-route, approached a junction with red lights and collided with a public vehicle. Outcome: The significant investigation concluded with 8 recommendations.





Looking Ahead

SA will focus on developing the strategy and vision and implementing supporting SA Frameworks.

We will continue to lead on arrangements for the management of fire contaminants through engagement with national groups and review of research from academic and industry experts.

Our focus will remain on continual improvement and Organisational learning through robust investigation and assurance arrangements.

We will prioritise the safety of our people through strengthened risk and technical assessments and supporting documentation to ensure risks to our people are managed and mitigated, so far as is reasonably practicable.

Lastly, we will continue to enhance our communication and engagement activities to ensure our staff are informed of all relevant safety matters.

For further information of enquiries please contact HealthandSafety@firescotland.gov.uk

Our goal is to ensure that our people are safe, healthy and protected from risks they are faced with whilst carrying out their work activities.

The continued focus on safety relies on application of the SFRS values;



We sincerely thank all employees for continually contributing to the health, safety and wellbeing of our people and creating a Safer Scotland.



Glossary of Terms

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

Accident/Injury Rate: The total number of reported Accidents/Injuries divided by total number of employees multiplied by 1,000 to give the accident injury rate per employee

AoV: Acts of Violence

ATV: All-terrain Vehicle

BA: Breathing Apparatus

BAU: Business as Usual

CoG: City of Glasgow

COSHH: Control of Substances Hazardous to Health

DSG: Drivers Safety Group

EV: Electric Vehicle

FBU: Fire Brigades Union

FCS: Fleet and Contractual Services

FDO: Flexi Duty Officer

FEH: Fire Escape Hood

GIN: General Information Note

GRA: Generic Risk Assessment

HRE: Hydraulic Rescue Equipment

HS: Health and Safety

HSE: Health and Safety Executive

HSIP: Health and Safety Improvement Plan

HSMS: Health and Safety Management System

IP: Injured Person

KPI: Key Performance Indicators

LCMS: Learning Content Management System

LEV: Local Exhaust Ventilation

LSM: low-speed manoeuvres

LSO: Local Senior Officer

MA: Management Arrangement

MOI: Methods Of Instruction

MSK: Musculoskeletal – Referring to the musculoskeletal system including bones, ligaments, muscles, tendons, nerves and other connective tissues

MTA: Marauding Terrorist Attacks

NFCC: National Fire Chiefs Committee



Glossary of Terms

NM: Near Miss

OARRS: Operational Assurance Recording and Reporting System

OCSG: Operational Competency Strategy Group

Operational Accident/Injury Rate:
Total number of reported Accidents/Injuries divided by total number of incidents multiplied by 100 to give the accident injury rate per incident attended

OLG: Organisational Learning Group

OSSG: Operations Safety Subgroup

People: People Directorate

PIT: Periodic Inspection and Testing

PPE: Personal Protective Equipment

PPP: Prevention, Protection and Preparedness Directorate

PRP: Premise Responsible Person

RIDDOR: Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

RPE: Respiratory Protective Equipment

RTC: Road Traffic Collision

SAIG: Safety and Assurance Improvement Group

SA: Safety and Assurance

SCS: Safety Culture Survey

SD: Service Development

SDA: Service Delivery Area

SFRS: Scottish Fire and Rescue Service

SOP: Safe Operating Procedure

SPPC: Strategic Planning, Performance and Communication

SSOW: Safe System of Work

TASS: Think, Act, Stay, Safe

VA: Vehicle Accident



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SFRS Safety and Assurance
Annual Report 2023/24

Version 1.0
December 2024



Report No: C/PC/51-24

Agenda Item: 12.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	HMFSI INSPECTION ACTION PLANS AND CLOSING REPORTS UPDATE						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		A	B	C	D	E	F
1	Purpose						
1.1	The purpose of this report is to provide the People Committee (PC) with an update on HMFSI inspection action plans.						
1.2	At this meeting the 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"> • Management of Health and Safety: An Operational Focus • Mental Health and Wellbeing Provision 						
1.3	There are no closing reports to consider.						
2	Background						
2.1	HMFSI inspects and reports on the SFRS with the purpose of assuring the public and Scottish Ministers that we are working in an efficient and effective way, and to promote improvement in the Service.						
2.2	Each year, HMFSI sets out its intended programme of thematic and local area inspections. Additional reviews may also be carried out at any time at the request of Scottish Ministers.						
2.3	Following the publication of reports, an action plan is prepared to address the issues or recommendations that are highlighted within the report.						
2.4	In line with the new thematic process agreed in May 2020, once approved certain action plans will be presented to PC on a quarterly basis to scrutinise progress.						
3	Main Report/Detail						
3.1	Health and Safety: An Operational Focus						
3.1.1	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 Appendix A .						
3.1.2	During the reporting period one action was completed (see R7.1), one action was later completed following discussion at Corporate Board (see R5.2) and the two remaining actions (see R3.1 and R5.3) have a red status due to slip in timescales as a result of conflicting workloads and interdependency on other projects. These are currently both 90% complete with completion dates set for December 2024 and March 2025 respectively.						

<p>3.1.3</p>	<p>CB members are asked to note the following:</p> <ul style="list-style-type: none"> • Action R3.1: <i>Determine risk critical information required for GETAC tablets to ensure that this information is provided to crews.</i> Following discussion at Corporate Board, this workstream is now being progressed through the in vehicle solutions team and phase 1 of the Document Conversion Project is now complete. This will be progressed as part of introduction of the Modas software project and IVS, therefore it is proposed to close this action. • Action R5.2: <i>Consider process to ensure that outcomes and lessons learned from Near Miss reporting are made widely available to staff.</i> A fourth proposed revised due date from August 2024 to December 2024 has been provided to allow the Safety and Assurance Communications and Engagement Framework complete its governance journey. The slip in timescales was due to competing priorities. • Action R5.3: <i>Develop improvement/suggestion scheme and a hazard reporting system including feedback methods.</i> Following discussion at Corporate Board, with an update from ICT and the resources available this action will now be completed later than previously expected. A third revised due date from October 2024 to March 2025 has been proposed.
<p>3.1.4</p>	<p>It is anticipated that the remaining actions will be completed by the next reporting period.</p>
<p>3.1.5</p>	<p>The overall BRAG rating for this action plan is red 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>
<p>3.2</p>	<p>Mental Health and Wellbeing</p>
<p>3.2.1</p>	<p>The HMFSI report on Mental Health and Wellbeing was published in December 2023. The action plan contains a total of 30 actions and is attached as Appendix B.</p>
<p>3.2.2</p>	<p>Of the 30 actions, 5 have been determined to have no further action required following consideration (see 4, 10, 12, 14 and 15) and 3 of the actions were deemed complete during the creation of the action plan (see 18, 19 and 20).</p>
<p>3.2.3</p>	<p>During the reporting period, 5 actions were completed (see 2, 6.1, 6.2, 8.2 and 16). Of the remaining actions, 1 has a red status due to the process of aligning to current performance governance processes (see 3); 8 have an amber status (see 5, 6.3, 6.4, 7.2, 7.4, 8.1, 9.1 and 13) and 8 have a green status (see 1, 7.1, 7.3, 7.5, 7.6, 9.2, 11 and 17).</p>
<p>3.2.4</p>	<p>CB members are asked to note the following:</p> <ul style="list-style-type: none"> • Action 3: <i>Carry out a review of the Mental Health and Wellbeing Group Terms of Reference to align with revised SFRS governance arrangements. Agree the format and methods of scrutiny and reporting of progress on the SFRS Mental Wellbeing Action Plan and decisions of the Mental Health and Wellbeing Group with the SFRS People Committee.</i> A first revised due date from September 2024 to July 2025 has been provided as there is a need to align the action with the Performance Management Framework reporting. The annual review of the Terms of Reference did not give any further consideration at this stage to scrutiny and reporting to the People Committee and the intention is that this would be considered in the review of how and what the People Directorate reports on from 2025/26. • Action 7.2: <i>Develop and implement resources to signpost or provide support to candidates applying to join or move to other roles within SFRS.</i> A first revised due date from December 2024 to March 2025 has been provided as there has been a slip in timescales for this work to be undertaken as a result of a high volume of workload and staffing constraints within the department.

3.2.5	The overall BRAG rating for this action plan is green and is estimated at 55% complete. <i>(Percentage completions for individual actions are an estimate provided by the action owner leading to the overall average percentage).</i>
4	Recommendation
4.1	The PC is invited to: <ul style="list-style-type: none"> • Scrutinise the Management of Health and Safety: An Operational Focus Action Plan, attached as Appendix A. • Scrutinise the Mental Health and Wellbeing Action Plan, attached as Appendix B.
5	Key Strategic Implications
5.1	Risk
5.1.1	There are no risks associated with the recommendations of this report.
5.2	Financial
5.2.1	There are no financial implications associated with the recommendations of this report.
5.3	Environmental & Sustainability
5.3.1	There are no environmental implications associated with the recommendations of this report.
5.4	Workforce
5.4.1	There are no workforce implications associated with the recommendations of this report.
5.5	Health & Safety
5.5.1	There are no health and safety implications associated with the recommendations of this report.
5.6	Health & Wellbeing
5.6.1	There are no health and wellbeing implications associated with the recommendations of this report.
5.7	Training
5.7.1	There are no training implications associated with the recommendations of this report.
5.8	Timing
5.8.1	Each HMFSI Action Plan will be reported to the CB on a quarterly cycle until completion.
5.9	Performance
5.9.1	This process supports robust challenge and scrutiny of our performance against HMSFI recommended improvements.
5.10	Communications & Engagement
5.10.1	There is no implication associated with the recommendations of this report.
5.11	Legal
5.11.1	The arrangements for independent inquiries into the state and efficiency of the SFRS are a statutory requirement as laid out in Section 43 of the Fire Scotland Act 2005.
5.12	Information Governance
5.12.1	A Data Protection Impact Assessment (DPIA) is not required for this report as there is no sensitive information to consider.
5.13	Equalities
5.13.1	An Equality and Human Rights Impact Assessment (EHRIA) is not required for this this report. These will be captured by Directorate and LSO EHRIAs

5.14 5.14.1	Service Delivery There are no service delivery implications associated with the recommendations of this report.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Mark McAteer, Director of Strategic Planning, Performance and Communications
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.2	Rationale:	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.
8	Appendices/Further Reading	
8.1	Appendix A: Health and Safety: An Operational Focus Action Plan Update	
8.2	Appendix B: Mental Health and Wellbeing Action Plan Update	
Prepared by:	Kirsty Jamieson, Planning and Performance Officer	
Sponsored by:	Jim Holden, Head of Safety and Assurance / Lyndsey Gaja, Interim Director of People	
Presented by:	Craig McGoldrick Assistant Chief Officer, Director of Training, Safety and Assurance / Lyndsey Gaja, Interim Director of People	
Links to Strategy and Corporate Values		
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.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Corporate Board</i>	<i>28 October 2024</i>	<i>For recommendation</i>
<i>People Committee</i>	<i>05 December 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
Oct-24	Feb-25

HMFI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	BRAG	Evidence
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 William Pollard	Sep-23	Sep-23 to Mar-24 to Jun-24 to Dec-24	Complete	<p>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. 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. This action remains amber due to the slip in timescales as a result of the interdependency to the iHub project. [Proposed revised due date from Mar-24 to Jun-24]</p> <p>28 October 2024: Following training from Information Governance colleagues, Operations is now in a position to upload Document Conversion Project (DCP) content for a service-wide launch. In response to the action to determine risk-critical information required for GETAC tablets and ensure it is provided to crews, we are currently uploading Phase 1 of the Document Conversion Project (DCP). This will be accessible through the secondary tablet on the appliances, providing risk-critical information at the point of need in an easy-to-access and understandable format. We are also working closely with the In Vehicle Solutions (IVS) team to ensure that relevant apps are available on these tablets and that all information is accessible on the CF33 tablet once it is installed.</p> <p>This action has moved from amber to red due to the delay which resulted from the interdependency to the iHub project and workloads within ICT.</p> <p>[Proposed revised due date from Jun-24 to Dec-24]</p> <p>19 November 2024 - (Update from Corporate Board): This workstream is now being progressed through the In vehicle solutions team and phase 1 of the Document Conversion Project is now complete. This will be progressed as part of introduction of the Modas software project and IVS, therefore it is proposed to close this action.</p>	100%		Blue	
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.	R5.2	Consider process to ensure that outcomes and lessons learned from Near Miss reporting are made widely available to staff.	Teresa Kelly, Deputy Head of Safety and Assurance	Mar-23	Sep-23 to Mar-24 to Aug-24 to Dec-24	In Progress	<p>24 June 2024: A draft Communications and Engagement Framework is currently under review. It is due to be published in Quarter 2. 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. [Proposed revised due date from Mar-24 to Aug-24]</p> <p>28 October 2024: Safety and Assurance has developed a Near Miss Reporting Frontline Update, updated the Near Miss section in the annual report template, continues to promote Near Miss through the Safety and Assurance Improvement Group (SAIG), and is researching the potential for use of technology to assist with Near Miss reporting (e.g. QR Codes etc.) The Safety and Assurance Communications and Engagement Framework started its Governance journey in August 2024 and will be published once approved.</p> <p>This action remains red due to the slip in original timescales as a result of departmental workloads.</p> <p>[Proposed revised due date from Aug-24 to Dec-24]</p>	90%		Red	
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.	R5.3	Develop improvement/suggestion scheme and a hazard reporting system including feedback methods.	Teresa Kelly, Deputy Head of Safety and Assurance	Mar-23	Mar-24 to Oct-24 Mar-25	In Progress	<p>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. 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. [Proposed revised due date from Mar-24 to Oct-24]</p> <p>28 October 2024: This action remains as is due to the capacity of ICT to support Think, Act, Stay Safe (TASS). All Think, Act Stay Safe (TASS) projects of work have been put on hold however it is anticipated that Action R5.3. will be completed by 31st October 2024.</p> <p>This action remains red due to the slip in original timescales as a result of workloads within ICT.</p> <p>19 November 2024 (Update from Corporate Board): - Following an update from ICT and the resources available this action will now be completed by March 2025.</p> <p>[Proposed revised due date from Oct-24 to Mar-25]</p>	90%		Red	
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.	R7.1	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)	Roddy Mackinnon, Scottish Equipment Manager	Sep-23	Mar 24 Apr 24 Oct-24	Complete	<p>24 June 2024: The live system is still in development with ICT due to competing resources and projects impacting completion.</p> <p>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. [Proposed revised due date from Apr-24 to Oct-24]</p> <p>28 October 2024: A system has now been full developed for use within SFRS. Assets have completed the initial roll out of Vehicle Inventory Checking (VIC) system to 20 water rescue stations and have also completed end user engagement and feedback from these stations. Analysis of the feedback from these 20 stations is still to be completed and then further progressed to establish lessons learned and any further developments and equipment requirements (phones, tablets etc.). A plan has been developed for a further roll out to specialised stations including High Reach, Rapid Response Unit (RRU), Detection Identification and Monitoring DIM Unit, Hydrants and Fire Investigation (FI). This will commence following the feedback review.</p> <p>It is proposed that this action is closed in terms of the HMFSI recommendation given that we now have a live system that is currently being used at operational stations (water rescue) to undertake Vehicle inventory checks and a continued program of implementation of the Vehicle Inventory Check system across all vehicle types within the service will be managed and monitored through Business as Usual.</p> <p>This action has been marked blue and is now complete in terms of the HMFSI recommendation with a system now in place and being utilised, and with further roll out across the Service programmed.</p>	100%	Oct-24	Blue	

<p>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).</p>	R1.1	<p>Principles of the Document Conversion Project to be presented to all Directorates.</p>	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>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.</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).</p> <p>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.</p> <p>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>[Proposal to close HMFSI Action Plan action as work will continue to undertaken and monitored as part of the Operations Functional Plan]</p>	100%		Complete	
<p>The SFRS should revise and amend the LCMS packages on Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA) to ensure that they focus on how and why to complete the documentation, ensuring the content is suitable for all Operational staff.</p>	R2.1	<p>Develop Management of Operational Risk Policy and Operational Guidance.</p>	Teresa Kelly, Deputy Head of Safety and Assurance	Mar-23		Complete	<p>15 February 2023: Draft has been developed. A meeting to discuss suitability for implementation was cancelled due to unforeseen events occurring.</p> <p>This action is currently green and on track for completion by the proposed due date.</p> <p>17 May 2023: Alternative approach to addressing this action has been agreed which includes completed reviews of Dynamic Risk Assessment / Analytical Risk Assessment arrangements, training, and the development of Safety Culture Strategy in 2022/23. See evidence column.</p> <p>This action is green and complete.</p>	100%	Mar-23	Complete	<p>Upon review of Head of Function, the Management of Operational Risk Policy and Operational Guidance is no longer required as further evidence and updates have been made, including update of: Incident Command Policy and Operational Guidance, Operational Aide Memoir, Breathing Apparatus Policy and Operational Guidance and urgent instruction for requirement to complete Analytical Risk Assessment (ARA) /Dynamic Risk Assessment (DRA). Further work regarding the Learning Content Management System (LCMS) package remains ongoing.</p>
<p>The SFRS should revise and amend the LCMS packages on Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA) to ensure that they focus on how and why to complete the documentation, ensuring the content is suitable for all</p>	R2.2	<p>Review the LCMS package for Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA).</p>	Teresa Kelly, Deputy Head of Safety and Assurance SC Ben Carlin (Health and Safety)	Mar-23		Complete	<p>15 February 2023: Production of Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) maintenance module (working with Training and Employee Development. Work continues to embed ARA/DRA in Training for Operational Competence (TIOC) material. This action is on track and has been marked green.</p> <p>17 May 2023: The review of the Learning Content Management System (LCMS) packages relating to Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) was completed in Quarter Q4 2022/23.</p>	100%	Mar-23	Complete	
<p>The SFRS should revise and amend the LCMS packages on Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA) to ensure that they focus on how and why to complete the documentation, ensuring the content is suitable for all Operational staff.</p>	R2.3	<p>Review Incident Command assessments.</p>	AC Alasdair Cameron, TSA	Jun-23		Complete	<p>15 February 2023: The Incident Command Core Skill within the Training for Operational Competence (TIOC) for Quarter 4 has content relating to Dynamic Risk Assessment (DRA) and Analytical Risk Assessment (ARA). There is also a Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) module within the Health and Safety Programme of Learning which is currently live on the LCMS system. All can be evidenced within Learning Content Management System (LCMS) itself.</p> <p>This action is green and is complete.</p> <p>17 May 2023: Launched in April 2022, the Training for Operational Competence Framework now includes a dedicated Learning Content Management System (LCMS) packages for all operational levels. This includes a dedicated 'Risk Assessments at Operational Incident' module with specific content relating to Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) along with Incident Command Assessment that focuses specifically on this area. Combined it provides clarity on how and why to complete an Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA), as this is an essential element that contributes towards Firefighter safety. The design of this new Learning Content Management System (LCMS) content now makes it achievable across all Operational staff Groups, which is a key element to its success.</p> <p>This action is green and complete.</p>	100%	Feb-23	Complete	LCMS
<p>The SFRS should revise and amend the LCMS packages on Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA) to ensure that they focus on how and why to complete the documentation, ensuring the content is suitable for all Operational staff.</p>	R2.4	<p>Integrate principles of Analytical Risk Assessment (ARA) and Dynamic Risk Assessment (DRA) as relevant to risk in all courses.</p>	AC Alasdair Cameron, TSA	Mar-23		Complete	<p>15 February 2023: Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) included in all relevant training material and managed by the Operational Competence Strategy Group. This action is green and is complete.</p> <p>17 May 2023: Established in April 2022, the Operational Competence Strategy Group now provides a platform that reviews the Training for Operational Competence based on risk, with content that integrates the principles of Analytical Risk Assessment (ARA)/Dynamic Risk Assessment (DRA) relevant to the subject matter being covered. This aligns to the principles of the 'Risk Assessments at Operational Incident module'.</p> <p>This action is green and complete.</p>	100%	Feb-23	Complete	LCMS

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.	R3.2	Determine Operational Intelligence information required for GETAC tablets to ensure that risk critical information provided to crews.	AC Craig McGoldrick, Operations	Sep-23	Complete	15 February 2023: Once the Phase 1 Document Conversion Project is launched the GETAC/ or secondary Tablet will be used to display the latest risk critical information. 4G connectivity will allow information to be updated as and when required. This action is currently green and on track for completion by the proposed due date. 17 May 2023: It is proposed that this action is closed as complete. All Operational Intelligence documentation was reviewed in 2022. The process to gather risk critical Operational Intelligence, using the Operational Intelligence Generic Information Note and supporting systems, is reflected in the information available to crews. A performance framework was developed by the Operational Intelligence team which has a focus on the Operational Intelligence reporting toolkit. The first review period is due to provide outcomes/findings in June 2023. Areas for improvements will be translated into Area based support by the Operational Intelligence team. In terms of the action the available and correct risk critical information is being provided to crews. This action is green and complete.	100%	May-23	Complete	
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	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. 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. [Proposed revised due date from December 2023 to March 2024] 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. This action has been marked blue and is now complete.	100%		Complete	
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.	R5.1	Health & Safety Department to liaise with Service Delivery Areas to identify the cultural barriers that prevent Near Miss reporting.	Teresa Kelly, Deputy Head of Safety and Assurance	Mar-23	Sep-23 to Mar-24 Complete	15 November 2023: The Hazard Reporting module has been handed to ICT for development on the Think, Act, Stay Safe System and is expected to be completed by Quarter 4. The Safety Culture Survey has concluded. An analysis will be conducted in October. This action is amber as it has missed the September 2023 deadline. [Proposed revised due date from September 23 to March 2024] 21 February 2024: Near misses continue to increase through awareness and local campaigns. There has been a 75% increase in reporting (22/23:135 – 23/24 236). The Hazard reporting system is currently under trial by Safety and Assurance prior to going live. This action is complete.	100%	Feb-24	Complete	
RVDS staff should be provided with effective middle management supervision and support to ensure that knowledge and information is shared and staff assessed to the required standards.	R6.1	Review On Call recruitment and terms of conditions to potentially enhance staffing levels.	AC Craig McGoldrick, Operations Gavin Hammond	Sep-23	Complete	15 February 2023: A total review of On Call recruitment process has been completed. Efficiencies and improvement identified and introduced under the On Call improvement programme. There is a need for continued improvement as work progresses out with the project and where other On Call recommendations have been made but final decisions around implementation are yet to be made. Terms and Conditions (T&Cs) standardisation for RDS are yet to be agreed. Further recommendations from the On Call programme are likely to be stalled until agreement is reached. This action is currently green and on track however completion by the proposed due date will be determined by future decision-making and developments with regards to the Terms and Conditions. 17 May 2023: Propose to consider transfer/closure of this action. There is clear evidence that the recommendation has been given due regard. The project has been underway for a number of years, with major aspects required to reach completion remaining out with the control of SFRS. It is recommended that this recommendation is closed off as 'business as usual' as it features on the People and Organisational Development Directorate Plan for 2022/23 and will be monitored accordingly. On the assumption that this recommendation is agreed, the action has been marked green and 100% complete.	100%	May-23	Complete	
RVDS staff should be provided with effective middle management supervision and support to ensure that knowledge and information is shared and staff assessed to the required standards.	R6.2	Review management/supervisory provision to On Call staff and determine any actions required to enhance current levels.	AC Craig McGoldrick, Operations Gavin Hammond	Sep-23	Complete	15 February 2023: A national cadre of On Call Support Watch Commanders, 54, have been imbedded within Service Delivery Areas (SDAs). The central On Call Support team has been in place since March 2021, within the Operations function. This team is currently temporary up to the end of the On Call improvement programme with decisions still to be made about substantiating a dedicated centralised On Call support function. This action is currently green and on track however completion by the proposed due date will be determined by future decision-making. 17 May 2023: Propose to consider this action completed/closed. Provision of supervision (Operations) is provided via the SFRS incident response Control Operating Procedure (COP). Flexi Duty Officer (FDO) and Mobilising Control Operating Procedure and supported by the mentoring and monitoring roles undertaken during any incident as per the Duting Incident Operational Assurance (General Information Note, the recording of which is managed through the SFRS OARRS process (link provided in Evidence). Provision of management support was enhanced in 2021 with the addition of On Call Support Watch Commanders. Any additional support is determined and delivered by the Local Senior Officer Area Management Teams and is beyond the remit of Operations. This action is green and is now complete.	100%	May-23	Complete	Home Page - Operational assurance (oarrs.azurewebsites.net)
RVDS staff should be provided with effective middle management supervision and support to ensure that knowledge and information is shared and staff assessed to the required standards.	R6.3	Consider methods to increase visibility /presence of Flexi-Duty Officers at On Call stations.	AC Craig McGoldrick, Operations Propose transfer of action to Service Delivery, as LSO Area Flexi Duty Officers (FDOs) are not aligned to Operations Function.	Mar-23	Complete	17 May 2023: Propose transfer of action to Service Delivery, as Local Senior Officer Area Flexi Duty Officers are not aligned to Operations Function. This issue will be discussed at the next Operational Learning Group and this plan will be updated in the next reporting period. This item has been marked as red due to the slip in original timescale and the requirement for further discussion and decision to be made regarding action owner. 16 August 2023: On behalf of Service Delivery and the National On Call Leadership Forum (NOCLF), we would propose this action to Service Delivery. Local Senior Officers via the National On Call Leadership Forum (NOCLF) Single Point of Contacts (SPOCs) have actioned and where practicable, increased/maximised attendance and engagement at On Call Stations and also delivered a number of On Call Manager engagement sessions. This action has been marked as green and it has been proposed that it should be marked as complete.	100%	Aug-23	Complete	
RVDS staff should be provided with effective middle management supervision and support to ensure that knowledge and information is shared and staff assessed to the required standards.	R6.4	Consider options for sharing knowledge and information with On Call staff and confirming competence.	AC Craig McGoldrick, Operations	Mar-23	Complete	15 February 2023: Due to capacity and timing issues, an update was not received for this action. The update was not received when the Action Plan was submitted to the People Committee for scrutiny. 17 May 2023: An On Call dedicated SharePoint site was created which provided a single source for information (see link in Evidence). The site has a number of links to Frequently Asked Questions and engagement tools, including an 'Issues and Innovations Log' where best practice is shared by stations for consideration of the NOCLF. In relation to competence this is captured either through Training, Safety and Assurance business as usual i.e. LCMS/PDR Pto/TFOC or via our Operational Assurance processes. This action is green and complete.	100%	Mar-23	Complete	On Call Firefighters National Site - Home (sharepoint.com)

The SFRS should ensure that information related to Operational risk and safety critical hazards is clearly prioritised with key messages identified and information targeted to the intended recipient rather than to general staff groups.	R8.1	Consider actions captured in R1, R3, C17, C18, C22.	N/A	N/A		Cancelled	Response to this action is fully captured and considered within the work currently being undertaken for actions R1 and R3. Updates will be provided within these actions and therefore it is proposed that this action is cancelled to direct focus to these and avoid duplication.			Complete	
The SFRS should ensure that information related to Operational risk and safety critical hazards is clearly prioritised with key messages identified and information targeted to the intended recipient rather than to general staff groups.	R8.2	Develop process to ensure targeted messaging methods are available.	AC Craig McGoldrick, Operations	Jun-23	Dec-23 to Mar-24	Complete	<p>15 November 2023: This work is scheduled for Quarter 4 and will be progressed following further discussions with Teresa Kelly to agree a terms of reference and pathway for progression. This action has moved from red to amber as the work is now scheduled.</p> <p>[Proposed revised due date from December 2023 to March 2024]</p> <p>21 February 2024: Frontline Support (FLS) Operations, have a robust framework for communicating critical risk information, designed to categorise information efficiently, ensuring a tailored response to different levels of risk. Information is now categorised into Service Delivery Alerts, Urgent Instructions, and Awareness Briefings, providing a structured approach to communication based on the nature and potential risk associated with the information.</p> <p>Internal processes have been enhanced through the utilisation of our SFRS records manager. Each individual within SFRS must record and acknowledge receipt of critical information through PDRpro. Furthermore, for additional actions beyond acknowledgment, LCMS/PDRpro serves as a platform for recording and tracking, promoting a comprehensive approach to risk management.</p> <p>In certain scenarios, FLS members are tasked with carrying out audits, contributing to our commitment to maintaining the highest standards of compliance. These audit findings are meticulously collated by the department and stored securely on Microsoft Forms, ensuring accessibility and transparency.</p> <p>This action is complete.</p>	100%	Feb-24	Complete	Frontline Support - Templates and guidance - All Documents (sharepoint.com)

APPENDIX B

HMFSI MENTAL HEALTH AND WELLBEING SUPPORT IN THE SFRS - ACTION PLAN

Updated	Next Update	Committee Update (PC)
Oct-24	Feb-25	Dec-24

HMFSI Recommendation	Action Ref	Action Description	Action Owner	Due Date	Revised Due Date	Status	Progress Update Commentary	% Complete	Completion Date	BRAG	Evidence
The new Mental Health Strategy should continue to be aspirational in that it offer for staff should be broad, but it also must be achievable and robust. The strategy should be subject to SMART assessment, action plans for achieving outcomes should be considered in advance of its publication. Adequate resources should be in place to support the strategy intentions.	1	Develop Wellbeing Framework and supporting action plan(s) that focus on a preventative and responsive approach to support the wider physical and mental wellbeing agenda	Sandra Haig	Jun-25	N/A	Not Started	28 October 2024: Commencement of this work has been deferred due to other emerging wellbeing risks and priorities. A plan is being developed to address these and a revised date will be considered as part of this plan in due course. This action has not yet started due to work commitments, however, has been marked green as it will progress as planned to the original due date.	0%		Green	Wellbeing survey results Benchmark nationally through NFCC and collaboration with tri-services Strategy document, action plan and completed governance
The SFRS should consider the nomination of a Corporate Mental Health and Wellbeing Champion for the Service. The Champion should be of a sufficiently senior level to be able to direct action and ensure that appropriate oversight and governance is put in place to allow them to scrutinise progress against the next Strategy and any associated action plans.	2	Define the scope of the Corporate Mental Wellbeing Champion clearly stating the differences between the Champion role and the Wellbeing Executive Lead; identify methods to provide the workforce with opportunities to engage with the Champion.	Sandra Haig	Dec-24	N/A	Complete	28 October 2024: The Deputy Chief Officer has taken on the role of Corporate Wellbeing Champion and is now a standing member of the Mental Health and Wellbeing Group (MHWG). Engagement with communications colleagues regarding raising awareness and the profile of the role is currently ongoing. Visibility of our corporate champions is now in place, including a video which was published to SFRS employees with direct messages on the importance of employee wellbeing. A video has also been developed to promote the Fire Fighters Charity event in September. A promotional banner has been provided for use at wellbeing events and roadshows. This action has been marked blue and is now complete.	100%	Aug-24	Blue	Promotion of Corporate Champion video and implementation approach agreed. DCO as Corporate Champion now a standing member of MHWG. Promotional material developed for use in wellbeing promotional activity.
The Board of SFRS should assess if they are fully scrutinising progress of Mental Health outcomes against the aspirations of the Mental Health Strategy. Governance routes up to Board level should be reinvigorated and formalised to ensure scrutiny, oversight and transparent accountability are in place.	3	Carry out a review of the Mental Health and Wellbeing Group Terms of Reference to align with revised SFRS governance arrangements. Agree the format and methods of scrutiny and reporting of progress on the SFRS Mental Wellbeing Action Plan and decisions of the Mental Health and Wellbeing Group with the SFRS People Committee.	Lyndsey Gaja	Sep-24	Jul-25	In Progress	28 October 2024: Annual review of the Terms of Reference has been approved by Mental Health and Wellbeing Group (MHWG) in line with the revised SFRS governance arrangements. A review of future People indicators and reporting is currently being carried out with the People Committee as part of the SFRS Performance Management Framework, and this will inform any future approach. A revised due date of Jul-25 has been proposed to align with the first reporting period of new Performance Management Framework (PMF). The annual review of the Terms of Reference did not give any further consideration at this stage to scrutiny and reporting to the People Committee and the intention is that this would be considered in the review of how and what the People Directorate reports on from 2025/26. This action has been marked red due to the change in original timescale. [Proposed new due date from Sep-24 to Jun-25 to align action with the Performance Management Framework reporting]	0%		Red	Revised Terms of Reference approved by Mental Health and Wellbeing Group Approval from People Committee on format of reporting Formalised reporting model Revised performance indicators
The Service should consider the most appropriate way that it can offer professional support for its Mental Wellbeing Champions. This support should include appropriate processes to track any interventions work of Champions, debriefing and evaluation of interventions and reflective supervision and support.	5	Review model of professional support to ensure appropriate interventions are being implemented, ensuring that the integrity of the service and support provided remains uncompromised and that collation of data complies with General Data Protection Regulation (GDPR) requirements.	Geri Thomson / Sandra Haig	Dec-24	TBC	In Progress	Five engagement sessions were held in January & February 2024 covering an overview of various resources, including Wellbeing and Inclusion, Musculoskeletal (MSK), Exercise and the Post Incident Support Process (PISP)/Rivers Centre, and attended by 36 champions. Feedback from these sessions will help inform further events. Further sessions are scheduled to take place in May and June 2024 covering Firefighter Charity, Scottish Men's Shed Association and Breathing Space. Also, separate Continued Professional Development (CPD) sessions provided by the Firefighters Charity will be delivered July 2024. Supplementary communications have been issued to identify additional volunteers to the programme, aiming to focus on areas where there may be gaps in provision. 28 October 2024: Feedback has been collated from the range of sessions provided to Champions and this has been used to inform the support provided. A survey has been carried out to consider what support Champions need from SFRS and results have informed new arrangements which are being put in place. Monthly joint engagement sessions are in place with the Wellbeing Team to provide support, with access to clinicians when required. A Microsoft Teams channel is now in place to enable reach into Wellbeing and for peer support. A monthly newsletter is in place providing further information and support to aid further development. Three Veteran Champions are in place to provide specific support for current and former serving employees. The induction programme has been reviewed and updated. An on call dedicated SharePoint site includes dedicated information to support champions. The remaining part of the action is to consider how we collate data and information on types of interventions and the level of support provided. Commencement of this work has been deferred due to other emerging wellbeing risks and priorities, however, a plan is being developed to address these and a revised date may be considered as part of this plan in due course. This action is in progress and has been marked amber due to the possible slip in timescales as a result of work being undertaken to conclude the action.	70%		Amber	Completion of evaluation of the Wellbeing Champion programme since inception that includes a benchmarking exercise. Presentation of paper to MHWG on 2023 Wellbeing Champion survey that includes recommendations.

Awareness of the Mental Wellbeing Champion (MWC) role within the SFRS should be raised. The Mental Wellbeing Champion approach taken to date should be reviewed and robust governance put in place to capture and analyse the work that they do and demonstrate its value. Their ongoing work should be subject to review to ensure outcomes.	6.1	Further promote and build further awareness of Mental Wellbeing Champions across the Service	Geri Thomson / Sandra Haig	Dec-24	N/A	Complete	28 October 2024: Mental Health Champions now play a pivotal role in leading local initiatives and are an integral part of the network of support available and to promote and support events. A number of roadshows and development events are now being led and supported by Champions with Wellbeing acting as support rather than lead. Further communications have been issued to promote the role as part of mental health awareness week and supplementary communications were issued to identify additional volunteers to the programme, aiming to focus on areas where there may be gaps in provision. As the role is now well established it is proposed that this work becomes business as usual and action closed. It is proposed that, for the purposes of the recommendation within the HMFSI report, this action is closed with work being undertaken as Business as Usual (BaU). This action has been marked blue and is now complete.	100%	Aug-24	Blue	Evaluation report and action plan presented to Mental Health and Wellbeing Group (MHWG)
	6.2	Embed peer support arrangements for Mental Wellbeing Champions to share good practice and promote events and activities	Geri Thomson / Sandra Haig	Dec-24	N/A	Complete	28 October 2024: Update included in action 5 and 6.1. Propose action closed as now business as usual with any new arrangements captured in action 5. It is proposed that, for the purposes of the recommendation within the HMFSI report, this action is closed with work being undertaken as Business as Usual (BaU). This action has been marked blue and is now complete.	100%	Aug-24	Blue	
	6.3	Carry out a full evaluation of the Mental Wellbeing Champion programme to inform future improvements and changes to the SFRS mental wellbeing support model.	Geri Thomson / Sandra Haig	Dec-24	TBC	Not Started	28 October 2024: Commencement of this work has been deferred due to other emerging wellbeing risks and priorities. A plan is being developed to address these and a revised date will be considered as part of this plan in due course. This action has been marked amber due to the expected slip in timescales with work commencing in due course.	0%		Amber	
	6.4	Use outputs from evaluation to develop longer term actions to develop and sustain Mental Wellbeing Champion model.	Geri Thomson / Sandra Haig	Jun-25	TBC	Not Started	28 October 2024: Commencement of this work has been deferred due to other emerging wellbeing risks and priorities. A plan is being developed to address these and a revised date will be considered as part of this plan in due course. This action has been marked amber due to the expected slip in timescales with work commencing in due course.	0%		Amber	
The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.1	Continue to progress the actions of the Mental Wellbeing Learning Resource Group to incorporate / integrate learning from Lifelines and future mental wellbeing and suicide prevention training into the employee lifecycle. This includes identifying requirements/opportunities to develop a programme from onboarding; induction; in development; in role; on promotion and through to retirement and also consider where face to face training maybe appropriate and achievable; whilst taking into account SFRS digital first principles.	Mental Wellbeing Learning Resource Group Chair (TBC)	Jun-25	N/A	In Progress	28 October 2024: A modularised programme has been developed and now implemented into the Wholetime Firefighter Induction Programme. 38 Facilitators have been trained to deliver the Lifelines content, however, a programme to ensure competency is still to be implemented and recommendations for an ongoing delivery model to be considered. This action is ongoing and has been marked green.	40%		Green	Learning Resources Matrix finalised and agreed by MHWG, specifying types and levels of training to be provided; stage in employment lifecycle and detailing specialist training for specific posts.
The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.2	Develop and implement resources to signpost or provide support to candidates applying to join or move to other roles within SFRS	Jen Kidd/Anne Whyte	Dec-24	Mar-25	Not Started	28 October 2024: A large volume of campaigns and natural attrition within the Talent Acquisition team has meant that this piece of work has not progressed and a new due date of Mar-25 has been proposed. This action has been marked amber due to the slip in original timescale as a result of workload and resource constraints with a proposed new due date in place. <u>[Proposed amended due date from Dec-24 to Mar-25]</u>	0%		Amber	Supporting information and signposting available on SFRS internet and intranet
The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.3	Review onboarding and induction resources and support, to provide a holistic approach between SFRS and partner organisations / charities	Jen Kidd/Anne Whyte	Mar-25	N/A	In Progress	28 October 2024: Talent Development and Corporate Governance are due to commence a review of induction materials across the Service in line with the Culture Development Group Sub-group action assigned. This action is in progress and has been marked green.	25%		Green	Induction process in place for all staff groups
The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.4	Refine and implement resources as part of the Management Capability Development Framework in support of development of existing and aspiring managers ensuring a blended approach to delivery including face to face.	Jen Kidd/Mandy Harper	Dec-25	N/A	In Progress	28 October 2024: The Management Development Framework will roll out in October 2024; Days 2 & 3 are in the design stages and supporting deep dive and bitesize sessions will be considered to support this objective. A mapping exercise has been conducted to identify key areas for integration across our current systems. This action is in progress and has been marked amber due to some slip in timescales.	25%		Amber	Management Capability Framework implemented, evaluated to inform improvements and embedded across SFRS
The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.5	Identify and secure appropriate suicide prevention and crisis management training, learning resources and support to enable people in crisis to be supported	Mental Wellbeing Learning Resource Group Chair (TBC)	Mar-25	N/A	In Progress	28 October 2024: A learning resources matrix has been created containing range of modules available for delivery at appropriate stages throughout the employment lifecycle. Included in this are modules developed in support of suicide prevention and crisis management training and resources for those in crisis e.g. Lifelines modules: 5 (Talking about suicide), 6 (Post Trauma Support Understanding how trauma affects us), 7 (Psychological first aid) as well as the Scottish Government's Distress Brief Intervention and modules available from Public Health Scotland / National Education for Scotland. Also, Suicide First Aid training is now complete for Wellbeing team. This action is progressing and has been marked green.	40%		Green	Learning resources matrix embedded including suicide prevention modules

The SFRS should review the adequacy of mental health training. The most appropriate delivery method should be considered for this training, face to face engagement on critical elements such as the Post Incident Support Procedure should be considered. Preparation for new roles upon promotion is essential, and mental health should be included within this.	7.6	Collaborate with partners and stakeholders to implement appropriate training and resources to support volunteers and youth groups	Mental Wellbeing Learning Resource Group Chair (TBC)	Jun-25	N/A	In Progress	28 October 2024: Youth Volunteer Scheme National Officer attended the facilitators course and is working to identify anyone who is a wellbeing champion and a Youth Volunteer. Relevant resources have been identified regarding neurodiversity elements and resilience for young people (e.g. the impacts of social media). Basopko courses are being provided to enable Youth Volunteer Instructors to deliver the Lifelines road trip to volunteers. This action is ongoing and has been marked green.	20%		Green	Learning resources matrix embedded including modules which can be used or adapted for young people
The SFRS should consider how best to involve the families in supporting the achievement of positive mental health of their employees and offering social support away from the work environment.	8.1	Develop resources to provide families with information on the role of the SFRS and the types of challenges that family members employed by SFRS may face and support available to them.	Geri Thomson / Sandra Haig	Apr-25	N/A	In Progress	28 October 2024: A draft version of family booklets has been considered, however capacity to progress has been impacted by other priorities. The current target date will be monitored and may be subject to change. Progress on this has been deferred due to other emerging wellbeing risks and priorities. A plan is being developed to address these and a revised date will be considered as part of this plan in due course. This action is ongoing and has been marked amber due to some slip in timescales.	20%		Amber	Resource finalised and published in various formats / platforms
The SFRS should consider how best to involve the families in supporting the achievement of positive mental health of their employees and offering social support away from the work environment.	8.2	Review whether a formal approach to delivering social events is required across SFRS in addition to local and national events delivered as Business as Usual (BaU) activity.	Geri Thomson / Sandra Haig	Dec-24	N/A	Complete	28 October 2024: All National and major events have been submitted to the Mental Health and Wellbeing Group (MHWG) for approval. Local events will continue to be run as Business as Usual (BaU). Major events delivered or planned for 2024 in conjunction with partners include the Dick Wedlock Annual Road Race, Fire Rox and the Santa Dash. This action has been marked blue and is now complete for the purposes of the HMFSI recommendation with it being identified that a formal approach to delivering social events is required across SFRS.	100%	Oct-24	Blue	Santa dash and summer events complete and evaluation carried out.
The SFRS should consider how it may better utilise the resources that The Fire Fighters Charity can offer in the pursuit of positive mental health for all its employees and their families. This should be done on a systematic basis that allows families to be informed of resources that may be available to them, and how they can support their loved ones who serve in the Service.	9.1	Identify and implement opportunities for families to access support from the Fire Fighters Charity and other SFRS partners	Greg Hastie / Comms and Engagement	Apr-25	N/A	In Progress	28 October 2024: There has been continued formal ongoing engagement with the Fire Fighters Charity through the SFRS / Firefighters Charity Committee Meeting and the establishment of Strategic Partnership Group. Regular engagement with the Fire Fighters Charity in being undertaken to obtain information on the support available to families. Delivery of this action will also be reliant on the progress of action 9.2 to improve a means of communicating with families. This action is progressing and has been marked as amber due to a co-dependence on action 9.2.	50%		Amber	Wellbeing and inclusion calendar of annual events. Annual evaluation of the calendar events to include FFC events.
The SFRS should consider how it may better utilise the resources that The Fire Fighters Charity can offer in the pursuit of positive mental health for all its employees and their families. This should be done on a systematic basis that allows families to be informed of resources that may be available to them, and how they can support their loved ones who serve in the Service.	9.2	Development and implement wider 'family' section of the SFRS website to enables access to resources and information to families and retired employees	Marysia Waters	Apr-25	N/A	In Progress	28 October 2024: The content for the family section of the website is being developed by the team at Lifelines. A meeting has been arranged with Lifelines and the Communications Department will continue to progress this. This action is ongoing with work having begun and has been marked green.	5%		Green	New page on SFRS website dedicated to families and retirees
The SFRS should consider how to best prepare its serving firefighters and support staff for life following their retirement from Service. These considerations should not be limited to financial planning but should also consider the social aspects of the change that retirement brings. They should consider collaboration opportunities within the fire sector to assist with this.	11	Establish a working group to further develop and implement the recommendations agreed by the Mental Health and Wellbeing Group on preparation for, and post retirement.	Robert Lennox	Mar-25	N/A	In Progress	28 October 2024: Further engagement has taken place to form a short life working group to take forward the recommendations of the approved retirement paper. Preparation of a draft action plan is in progress. Benchmarking with other organisations has commenced. Work has also commenced on a draft employee survey to consider employee views on the retirement framework content. The Fire Fighter Charity "Preparing to Retire Programme" has been implemented for SFRS employees. This action is progressing and has been marked as green.	20%		Green	Paper presented to MHWG in October 2023, around next steps to support transition to retirement and beyond. This paper contained recommendations to progress this piece of work and was approved. Initial scoping underway to
The Service should consider the most appropriate use of On Call drill night hours to ensure that appropriate access to essential information, including mental health and wellbeing resources, can be achieved.	13	Implement a pilot Wellbeing development event for On Call Support Watch Commanders to consider how further support can be provided to the wider On Call workforce	Les Mason / Mandy Ironside / Greg Hastie	Mar-25	N/A	In Progress	28 October 2024: An update is required to the pilot event. It has been determined that a month in the annual calendar is to be dedicated to On Call colleagues during 2025. This action is progressing and has been marked as amber due to slip in timescales however work is continuing to progress towards the original due date.	10%		Amber	Wellbeing development events implemented and evaluated for On Call Support Watch Commanders
The SFRS should consider a range of options to ensure that Post Incident Support Procedure questionnaires are returned following operational incidents, these should include options for mandatory returns.	16	Undertake an end to end review of the existing the Post Incident Support Policy to ensure it continues to meet SFRS needs. [note this action description relates to actions 16-20 inclusive] As part of this review, give consideration to options to promote the return of the 'POST INCIDENT SUPPORT: Promoting Resilience & Keeping Staff Well' questionnaires.	Justin Smithson	May-24	N/A	Complete	28 October 2024: Governance process is now complete, and the revised policy has now been published. Feedback has been positive to date with initial data demonstrating that numbers referred directly are showing upward trend. This action is now complete and has been marked blue.	100%	Oct-24	Blue	Task and finish group consisting of key stakeholders complete. draft PISP policy complete and commencing through governance.
The SFRS should consider the most effective means of raising awareness of the Post Incident Support Process (PISP) with a focus on the personal value for those within the operational roles of the Service. Following its consideration, awareness raising of the Post Incident Support Process (PISP) should be planned and delivered across the Service. The awareness raising approaches used should be up to and including face to face engagement with subject matter experts, uniformed personnel and possibly with those who would be prepared to share lived experience of the Post Incident Support Process (PISP).	17	Liaise with key internal and external stakeholders to develop, plan and implement a communications schedule to raise further awareness and promotion of the revised Post Incident Support Process (PISP) policy and procedure.	Justin Smithson	Dec-24	N/A	In Progress	28 October 2024: To coincide with the launch of the revised policy, communications have been put in place to support and promote. This has also been communicated to Champions to help promote and support them. Engagement event has been established to further promote with the aim to produce lived experience videos supported by colleagues with experience of Post Incident Support Process (PISP). This action is progressing and has been marked green.	80%		Green	Planned and scheduled programme of awareness raising events. Future learning resources group to consider programme of awareness through employee life cycle.

The SFRS should initiate a review of Post Incident Support Process (PISP) elements that relate to the Operations Control (OC). The procedure should be fully explained to Operation Control (OC) managers and staff via a bespoke communications plan for the Operations Controls. The Service should consider how the Post Incident Support Process (PISP) can be more systematic and less open to personal interpretation in its implementation within the Operations Control (OC) personnel group.	18	Review the Post Incident Support Process (PISP) policy and procedure end to end to expand and develop those components which relate to the role of the Operations Control (OC) staff group. This includes development and implementation of standard templates across all Operations Control (OCs) to ensure consistent communications across all Operations Control (OC) locations and teams.	Justin Smithson	Jan-24	N/A	Complete	28 October 2024: Engagement with key stakeholders in Operations Control (OC) is now complete and an agreed template has been established for consistency across all Operations Control (OC) areas. This has now been communicated and implemented across all Operations Controls by the Operational Control (OC) Policy Team. This action is now complete and has been marked blue.	100%	Jan-24	Blue	Standard template now in place and operational. Policy amended to reflect these changes. Communication plan implemented to include written guidance and face to face engagement.
The inclusion of Flexi-Duty Officers (FDOs) within the Post Incident Support Procedure should be more systematic with set criteria for them to be opted out only as a necessity. The aim should be to include Flexi Duty Officers (FDOs) within the support procedure following operational incidents, and for this to be tracked as appropriate.	19	As part of the review of the Post Incident Support Policy (PISP) and procedure, consider options and approaches to ensure the inclusion of Flexi-Duty Officers as standard when the PISP is triggered.	Justin Smithson	Jan-24	N/A	Complete	28 October 2024: Policy reviewed and end to end to ensure process is inclusive to all staff groups. Reference to Flexi Duty Officers (FDOs) explicit in inclusion in Post Incident Support Policy (PISP) process when initiated. Professional discussions between SFRS Wellbeing and NHS Rivers Centre, agree there is no clinical justification or organisational benefit for Flexi Duty Officers (FDOs) to be opted out. It was agreed that a programme of raising awareness is the appropriate approach to assist with increasing return rates in this staff group. This action is now complete and has been marked blue.	100%	Feb-24	Blue	Policy amended and specifies that initiation of PISP process should include details of all flexi duty officers in attendance at incident
We note the new monthly contact from the Health and Wellbeing team to their Fire Investigation (FI) colleagues. Given the relatively low levels of Post Incident Support Procedure returns within the SFRS, and the potential impact upon the mental health of the Fire Investigation (FI) team, the SFRS should consider making the completed return of Fire Investigation (FI) questionnaires mandatory for the role. It also appears that the Fire Investigation (FI) team has had limited contact with professional support regarding the many traumatic incidents that they have attended over recent years. The SFRS should consider this, and how they may assess the potential impact of historical incidents on FI team members' mental health to date.	20	As part of the review of the Post Incident Support Policy, engage with the external service provider to consider options which promote the return of the questionnaires, increase the wellbeing support available for Fire Investigation (FI) staff, and any further support or interventions which may help address any potential impact from the cumulative impact of historical incidents in this staff group.	Justin Smithson	Jan-24	N/A	Complete	28 October 2024: Professional discussions between SFRS Wellbeing and NHS Rivers Centre, agree there is no clinical justification or organisational benefit to making these returns mandatory. It was agreed that a programme of raising awareness is the appropriate approach to assist with increasing return rates in this staff group. Work has been undertaken to strengthen the process to increase surveillance for Fire Investigation (FI) staff. Positive changes have been made to the process to include automatic issue of questionnaires every 3 months. Engagement sessions have been held hosted by Wellbeing and Rivers Centre to promote the role of Wellbeing support available from the Rivers Centre and the importance of Post Incident Support Process (PISP). All staff reminded of opportunity to attend the Lifelines programme of training. Mental Wellbeing Champion appointed within Fire Investigation (FI) to help engage with and support the wider team. This action is now complete and has been marked blue.	100%	Feb-24	Blue	Bespoke screening questionnaires are in place for Fire Investigation staff and a risk based approach to frequency of screening has been adopted.
The SFRS should consider the suitability of the governance arrangements for the Suicide Prevention subgroup. If it is considered that this group cannot achieve the outcomes that are set out within the Mental Health Strategy, then the Service should consider alternative arrangements to replace it. Any new arrangements should ideally be in place before the current subgroup is disbanded.	4	N/A	N/A	N/A	N/A	Cancelled					
The SFRS should consider if a formal role is appropriate for the Chaplaincy service within their mental health and wellbeing offer to personnel. Options to establish pastoral care across all of the Service Delivery Areas of the Service should be explored.	10	N/A	N/A	N/A	N/A	Cancelled	Memorandum of understanding in place for two Chaplains who currently provide services to SFRS, clearly outlining the role carried out				Mental Wellbeing Champion Evaluation Report Memorandum of understanding Wellbeing signposting literature
The Watch Commander (WC) role is critical within the Watch based system. They are often the first point of contact for mental health and/or wellbeing issues that may be affecting their Watch personnel. WCs are a trusted role within the Watch system, and they cover the majority of operational firefighters at work. The SFRS should consider how best to utilise the WC role and make them 'mental health advocates' to support the needs of operational firefighters on the Watch. Additionally, the Service should consider the training that would be required to ensure any advocates approach is robust. The mental health advocate role for WCs should be mandatory.	12	N/A	N/A	N/A	N/A	Cancelled	N/A				Completion of evaluation of the Wellbeing Champion programme since inception. Action plan from the future learning resource group.
The SFRS should monitor the potential mental health impacts of the hybrid working system. It should consider the impact upon managers who may need to spend additional time in the support of hybrid working team members.	14	N/A	N/A	N/A	N/A	Cancelled					Agile working framework Agile working survey LCMS Agile Working Module
The SFRS should consider all aspects of training that may be required for any new or novel operational interventions that may be required to be performed by its staff. These considerations should include aspects of any operational work that may have the potential to cause psychological trauma and negatively impact the mental health and wellbeing of responding firefighters. Mitigations and support should be developed and implemented if harms are identified.	15	N/A	N/A	N/A	N/A	Cancelled					



Report No: C/PC/54-24

Agenda Item: 12.2

Report to:	PEOPE COMMITTEE							
Meeting Date:	5 DECEMBER 2024							
Report Title:	INTERNAL AUDIT UPDATES							
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
		A	B	C	D	E	F	G
1	Purpose							
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.							
2	Background							
2.1	Azets have carried out internal audits relating to: <ul style="list-style-type: none"> • Scottish Vocational Qualifications • On-Call Workforce Planning • Equality, Diversity & Inclusion • Sickness Absence Management 							
2.2	Progress on the agreed action plans is scrutinised by People Committee.							
3	Main Report/Detail							
3.1	Internal Audit – Scottish Vocational Qualification – Action Plan							
3.1.1	Azets have reviewed and accepted the evidence of completion for the remaining actions and the plan is therefore complete. An update to this effect will be provided to Audit and Risk Assurance Committee (ARAC).							
3.2	Internal Audit – On-Call Workforce Planning – Action Plan							
3.2.1	Azets have reviewed and accepted the evidence of completion for the remaining actions and the plan is therefore complete. An update to this effect will be provided to ARAC.							
3.3	Internal Audit – Equality, Diversity & Inclusion – Action Plan							
3.3.1	The latest action plan is shown at Appendix A. One action is reen and on track for March 2025. Actions for the other two recommendations have been completed and supporting evidence has been submitted to Azets for review, prior to confirming closure. This will conclude the action plan.							
3.4	Internal Audit – Sickness Absence Management – Action Plan							
3.4.1	The latest action plan is shown at Appendix B. Two actions remain in progress. Evidence will be submitted to Azets by the end of November for review, prior to confirming closure. This will conclude the action plan.							

4	Recommendation
4.1	People Committee is asked to scrutinise the attached reports and note the progress made.
5	Key Strategic Implications
5.1	Risk
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	Financial
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	Environmental & Sustainability
5.3.1	None identified.
5.4	Workforce
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	Health & Safety
5.5.1	No specific Health & Safety implications from the actions detailed in this report.
5.6	Health & Wellbeing
5.6.1	Aspects of Culture, absence management, and EDI may impact on colleague health & wellbeing.
5.7	Training
5.7.1	Training needs are identified in several audit and inspection recommendations and are addressed in the associated action plans.
5.8	Timing
5.8.1	The timescales for completion of agreed actions are as noted in the action plans.
5.9	Performance
5.9.1	Effective delivery of the agreed actions will support enhanced performance in the areas covered by the audit / inspection.
5.10	Communications & Engagement
5.10.1	Delivery of agreed actions is supported by appropriate communication and engagement activity as required, including with the representative bodies.
5.11	Legal
5.11.1	There are specific legal requirements and considerations related to the Service's approach to absence management and EDI.
5.12	Information Governance
5.12.1	DPIA completed Yes/No. If not applicable state reasons.
5.13	Equalities
5.13.1	Not applicable.
5.14	Service Delivery
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.

6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Lyndsey Gaja, Interim Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The audits and inspections are carried out independently and in line with agreed scope. The internal audit programme is agreed by the Strategic Leadership Team and Board based on organisations priorities and risks. Completion of agreed actions plans provides assurance on the robustness of controls.
8	Appendices/Further Reading	
8.1	Appendix A – Internal Audit Action Plan – Equality, Diversity & Inclusion	
8.2	Appendix B – Internal Audit Action Plan – Sickness Absence Management	
Prepared by:		Lyndsey Gaja, Interim Director of People
Sponsored by:		Lyndsey Gaja, Interim Director of People
Presented by:		Lyndsey Gaja, Interim Director of People
Links to Strategy and Corporate Values		
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.		
Governance Route for Report		Meeting Date
<i>People Committee</i>		<i>5 December 2024</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>

Internal Audit Action Plan – Equality, Diversity & Inclusion

2023-24	Equality, Diversity & Inclusion <small>*2.1 & 5.1 are classed as one recommendation</small>		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
Rec No. 1.2	RISK	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.														
	Review of Equality and Diversity Charter		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 EDI Manager	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 23/09/24)		This item will not progress until Q3 2024 following receipt of further information regarding renewal of the Public Sector Equality Duty. 12.11.24 will commence in Q3 2024/25.														
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. 4.1	RISK	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.														
	Central record of Equality and Human Rights Impact Assessments		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 st Agreed Revised Date	Priority	% Complete	Status							
	Responsible Owner Agreed Response EDI Manager	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	100%	AMBER								
Progress to date (update provided 23/09/24)		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 scheduled for decision at Corporate Board in August 2024. The renewed EHRIA process was approved by the Corporate Board at their meeting in August 2024 12.11.24 EHRIA Process paper approved by Corporate Board shared along with current EHRIA log. Guidance for managers on updating the log has not been developed as the EDI Team are maintaining responsibility for updating the log.														
Outstanding actions to close the recommendation		Supporting Evidence to be forwarded by the responsible owner														
Azets Comments		Awaiting evidence of centralised register of EHRIAs and capture of lessons learned for future improvements in order to close action.														

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Rec No. 5.1*	RISK	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.					
	5.1 Action Plan Monitoring 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
	Action 1 Responsible Owner Agreed Response EDI Manager/Reward Manager	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	100%	AMBER
	Action 2 Responsible Owner Agreed Response EDI Manager	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%	BLUE
Action 1 Progress to date (update provided 23/09/24)		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. The Corporate Board accepted and approved the Mainstreaming Report and the update on the Equal Pay Action Plan at their meeting in August 2024. 12.11.24 An update on the Equal Pay Action Plan was submitted and accepted by the Corporate Board. The Corporate Board approved the 2024 Mainstreaming Report for publication.					
Action 1 Outstanding actions to close the recommendation		Supporting Evidence to be forwarded by the responsible owner					
Action 2		Complete – 29/08/2024					
Azets Comments		Awaiting evidence of the above in order to consider closing action.					

Internal Audit Action Plan – Sickness Absence Management

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. 1.1	RISK	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.															
	<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. <u>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.</u>			Report Agreed Date	3rd Agreed Revised Date	Priority	% Complete	Status									
	Responsible Owner Agreed Response People Manager (Advice & Employee Relations) & People Manager (Talent)	<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	95%	RED									
Progress to date (Update provided 19/09/24)		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. 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. This will continue to be a future action to be progressed. Whilst development of an independent verification process remains a future action once the Personal Record File/GDPR arrangements have been further developed, the below steps should satisfy the mitigation of this risk and address this audit action in the meantime.															
Outstanding actions to close the recommendation		An email communication to Heads of Function and their LSO/Directorate management teams is being prepared to remind them of the purpose of the monthly absence reports they receive for their areas and their responsibilities and follow up actions regards reviewing absences within their areas to ensure the Attendance Management Procedure is being followed including Attendance Support Meetings, support arrangements and appropriate follow up, as well as ensuring all absence files and documentation are recorded, collated and stored appropriately. The manager guidance issued in January 2024 is also being refreshed to include the need for managers to have appropriate checks in place that their management team are managing absence appropriately and documentation is up-to-date and stored – this will be reissued as a															

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	further reminder of these responsibilities. Each of these will be issued by end of November 2024 latest and periodically thereafter. Evidence of these communications will be shared once issued.					
Azets comments	Awaiting evidence of above communications being issued and checks being undertaken by management to ensure all documentation has been correctly retained in order to close this action.					
Rec No. 4.2	RISK	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.				
	<u>Absence Triggers</u>	Report Agreed Date	2nd Agreed Revised Date	Priority	% Complete	Status
	Responsible Owner Agreed Response People Manager (Advice & Employee Relations) & People Manager (Talent)	31 October 2023	31 December 2024	Grade 2	95%	RED
Progress to date (Update provided 19/09/24)	<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 commenced around the development of an independent periodic verification process of compliance between People and Audit & Risk in Q4 (linked to Rec No 1.1). 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. This will continue to be a future action to be progressed. Whilst development of an independent verification process remains a future action once the Personal Record File/GDPR arrangements have been further developed, the below steps should satisfy the mitigation of this risk and address this audit action in the meantime</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>					
Outstanding actions to close the recommendation	An email communication to Heads of Function and their LSO/Directorate management teams is being prepared to remind them of the purpose of the monthly absence reports they receive for their areas and their responsibilities and follow up actions regards reviewing absences within their areas to ensure the Attendance Management Procedure is being followed including Attendance Support Meetings, identification of absence triggers, support arrangements and appropriate follow up, as well as ensuring these are clearly documented/recorded. This will be issued by end of November 2024 latest and periodically thereafter. Evidence of this communication will be shared once issued.					
Azets comments	Awaiting evidence of above communications being issued and checks being undertaken by management to ensure all documentation has been correctly retained in order to close this action.					



Report No: C/PC/53-24

Agenda Item: 13.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	RISK UPDATE REPORT – AS AT 05 NOVEMBER 2024						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee with an overview of the current risks highlighted by Directorates.						
2	Background						
2.1	The purpose of the risk register is to inform decision making through Scrutiny and Assurance processes, providing additional awareness of the risks 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. All other Committees will scrutinise risks, pertinent to the business of the Committee, and consider the adequacy of management's response to risk.						
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.						
3	Main Report/Detail						
3.1	Risk Overview						
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	6	4		13
Outcome 6	The experience of those who work for SFRS improves as we are the best employer we can be.	2	3	3		8
Outcome 7	Community safety and wellbeing improves as we work effectively with our partners			1		1
		11	14	12		37

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			2
Service Delivery	3		3		6
Timing			1		1
Training	2				2
Workforce	3	6	4		13
		11	14	12	37

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.

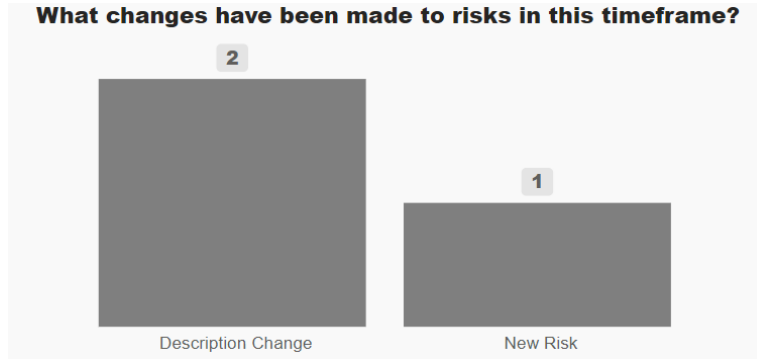
3.2 **People Committee Aligned Risk**

3.2.1 In relation to the current period Directorates reviewed registers identifying 12 Directorate risks, aligned to all People Committee with 4 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			2	2	
	4			3	2	
	5				2	

3.2.2 Appendix A to the report provides information on the 4 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](#).

3.2.3 Following the last review one new risks have been identified, reportable to the Service Delivery Committee, over the last quarter. These are included within Appendix A:

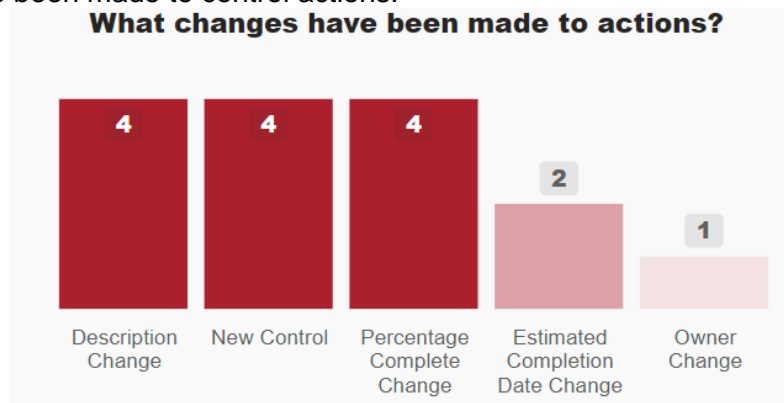


3.2.4

Risk ID	Risk Name	Description
POD020	People Capacity & Wellbeing	There is a risk that the Directorate is unable to deliver against stated commitments and objectives or provide timeous support to wider SFRS projects and change initiatives, due to limited resources and capacity brought about by the current financial context and competing organisational priorities. This could result in a lack of ability to deliver and perform effectively as a Directorate, as an enabler to the SFRS, as well as negatively impacting the health and wellbeing of People colleagues, resulting in increased levels of absence, reduced engagement, higher staff turnover and reduced ability to deliver against Directorate and Service plans.

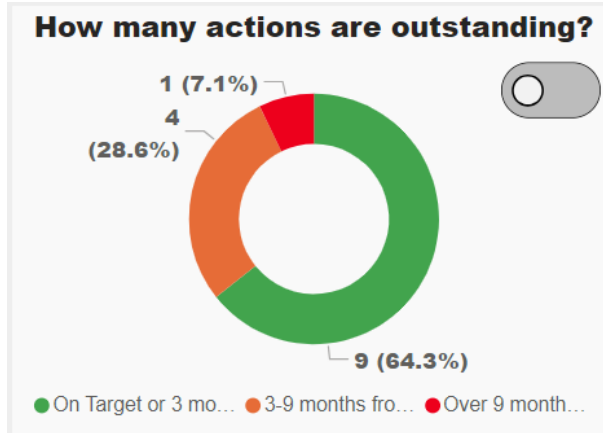
3.3 **Control Actions**

3.3.1 All Directorates are now able to provide monthly updates which will assist in ensuring up to date information is provided within risk reports. Following review, the following changes have been made to control actions:



3.3.2 Without action being taken on progressing identified controls, risks are likely to remain static. Discussions with Directorates will focus on identifying actions required within the current financial year with a RAG status incorporated within reports, aligned to the agreed process for Internal Audit, to identify progress made. 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



3.3.3 Information on the control action now over 9 months from its original due date is attached within Appendix A. This control action relate to POD015 and is currently being reviewed by the People Directorate.

Risk ID	Control Action	Control Action Comment
POD015	Ensure regular participation in process planning, and ongoing dialogue is in place with Scottish Public Pensions Agency and Finance colleagues through a number of informal and formal forums and provide regular progress updates to SFRS management teams and stakeholders to ensure appropriate oversight and escalation of potential challenges should these arise.	Project Plan for implementation of 2nd Option exercise remains in final stage of development, with first issue of Notification of Interest letters to sample group due in week commencing 12th August 2024. Plan for implementation of Booth Bradshaw under development to integrate this with the McCloud Sargent project. Delay in development of project plan for McCloud Sargent due dependency on software package developed to carry out Remedy Calculations, although resolving these appears to be nearing completion. The issue of Remedial service statements will be rescheduled from August 2024 till April 2025. Admin Support now in place to support project.

4	Recommendation
4.1	The People Committee is asked to scrutinise the information presented within the report.
5	Key Strategic Implications
5.1	Risk
5.1.1	The report identifies risks from each Directorate together with the significant changes made since the last update. Each Directorate will be responsible for the identification and mitigation of any associated risk and for the update of relevant risk registers.
5.2	Financial
5.2.1	The report identifies risks from each Directorate with financial implications arising from control decisions to be managed by the relevant Directorate.
5.3	Environmental & Sustainability
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	Workforce
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.

5.5 5.5.1	Health & Safety Any implications arising from the report will be managed by the relevant Directorate.	
5.6 5.6.1	Health & Wellbeing Any implications arising from the report will be managed by the relevant Directorate.	
5.7 5.7.1	Training Any implications arising from the report will be managed by the relevant Directorate.	
5.8 5.8.1	Timing The report is provided to the Audit and Risk Assurance Committee on a quarterly basis.	
5.9 5.9.1	Performance The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.	
5.10 5.10.1	Communications & Engagement Any implications arising from the report will be managed by the relevant Directorate.	
5.11 5.11.1	Legal Any implications arising from the report will be managed by the relevant Directorate.	
5.12 5.12.1	Information Governance DPIA completed - No. The report provides a summary of risks identified by Directorates. Each Directorate will ensure that any relevant DPIA is completed as required.	
5.13 5.13.1	Equalities EHRIA completed - No. An assessment was undertaken in relation to the Risk Management Policy. Any individual elements of work, which may have an impact upon Equalities, will require to be assessed and managed by the relevant Directorate.	
5.14 5.14.1	Service Delivery Any implications arising from the report will be managed by the relevant Directorate.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Sarah O'Donnell, Director of Finance and Contractual Services
7.2	Level of Assurance: (Mark as appropriate)	Substantial / Reasonable / Limited / Insufficient : There is room for improvement in the identification of the right risks and their associated risk rating, controls and the completion of mitigating actions within identified timescales.
7.2	Rationale:	The report is based upon information identified by each Directorate and I have confidence that the information is correctly reported based upon these returns.
8	Appendices/Further Reading	
8.1	Appendix A – Significant Risks	
Prepared by:		Tracy Shankland, Risk and Insurance Officer
Sponsored by:		Lynne McGeough, Head of Finance and Procurement
Presented by:		Craig McGoldrick, Assistant Chief Officer, Director of Training Safety and Assurance and Lyndsay Gaja, Interim Director of People

Links to Strategy and Corporate Values		
<p>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:</p> <p>Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.</p> <ul style="list-style-type: none"> Objective 5.1: Remaining open and transparent in how we make decisions. Objective 5.6: Managing major change projects and organisational risks effectively and efficiently. 		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>05 December 2024</i>	<i>For Scrutiny</i>

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

Risk ID	Strategic Outcome	Risk Description	Committee Alignment	SLT Risk Owner	Risk Rating	Target	Previous Risk Rating
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	SC (Contaminants) has identified a WC and CC to support the creation of the Contaminants SSOW. Meetings are being held to brief the new team and move the production of this document forward in Late October / November.		On Target or 3 months from due date
Review the suitability of Dundee Airport site (course delivery and welfare facilities).		30/06/2024	31/12/2024	Head of Training	Strategic decision taken to move forward with modular design for CFBT Training Centre at Perth T.C. This to be facilitated within Training Budget 2025-2026. First Working Group site meeting took place on 23rd October. Further Warwickshire site meetings and BA Working Group SME design meetings to take place in October / November to progress this project. Timeframes have been acknowledged by all participants in process.		3-9 months from original due date
Engagement with Asset Management and Fleet, Equipment & Workshop FEW regarding facilities and equipment.		31/03/2024	31/03/2025	Head of Training	Continued engagement at HOF level to progress this control action, and the identified solutions regarding the ageing training fleet, this also links to the Training Strategic Asset Management Plan TSAMP (last update July / August).		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	Site inspection took place on the 10th of October. Feasibility Study is being completed in support of this asset transfer. Asset / property lead (NSDA) has stated that the relocation of Hamilton Shower / Welfare Unit to Portlethen should begin in Q4 (transfer of unit and build) with Strategic budget sign off.		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	30/12/2024	Head of Training	Agreed spend for Collapsed Structure Simulator has been sanctioned. Full design and location have been agreed with design teams and property. Estimated time frame for completion is April 2025. A review of the national USAR response is currently taking place within Ops.		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	
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 Sargent due to bugs in SPPA software package developed to carry out Remedy Calculations. The issue of Remedial service statements will be rescheduled from August 2024 till April 2025. Admin Support now in place to support project.			Over 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
POD020	6	There is a risk that the Directorate is unable to deliver against stated commitments and objectives or provide timeous support to wider SFRS projects and change initiatives, due to limited resources and capacity brought about by the current financial context and competing organisational priorities. This could result in a lack of ability to deliver and perform effectively as a Directorate, as an enabler to the SFRS, as well as negatively impacting the health and wellbeing of People colleagues, resulting in increased levels of absence, reduced engagement, higher staff turnover and reduced ability to deliver against Directorate and Service plans.	PC (CB)	Director of People	16	4	16
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment		Action Status
Undertake a prioritisation exercise against all People activity (BAU and project based) and Directorate resource/capacity to consider whether resource meets existing and known commitments and organisational need from the People Directorate		31/03/2025	31/03/2025	Head of People	DMT and People Managers have had several workshops and captured all current and planned activity across the People Directorate. This has been categorised into continue, slow down or defer/stop based on the resource available to undertake this activity.		On Target or 3 months from due date
Prepare report for SLT identifying proposals for the areas which the People Directorate can continue to support with existing resource and activity which may need to be slowed or deferred to focus on these priorities		31/12/2024	31/12/2024	Director of People	Directorate Priority Paper being finalised which categorises Priorities and details what activities can progress, what activities are paused/stalled and what activities require additional resource.		On Target or 3 months from due date
Develop business cases for additional resource to meet strategic priorities for consideration via governance and, if approved, undertake the required recruitment to appoint resources to support critical priorities		31/03/2025	31/03/2025	Head of People	Business Case being drafted explaining/justifying requirement for additional resource in certain areas and risk involved in not supplying additional resource.		On Target or 3 months from due date
Review Directorate meeting arrangements to ensure these enable regular review of People workplan in light of shifting organisational requirements, realigning resources and replanning work as required, as well as ongoing management of workloads and wellbeing check ins via regular team catch ups, 1:1s, etc		31/03/2025	31/03/2025	Head of People	Work ongoing to identify appropriate/suitable arrangements.		On Target or 3 months from due date



**People Committee – 5 December 2024
Risk Spotlight Briefing Note**

FCS018 – ICT Recruitment & Retention

Submitted by: Greg Aitken, Interim Head of ICT

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

Continued challenges in recruiting and retaining appropriately skilled and experienced colleagues into ICT support staff roles, which provide SFRS' ICT support and delivery service, as well as the availability of budget to upskill existing staff with the skills required to support Digital, Application and Cloud strategies.

The challenges the ICT function is experiencing are particularly acute for certain technical and cyber security roles. This is due to a very buoyant ICT job market, pay and reward challenges and the availability of budget to provide the necessary training.

The recruitment and retention challenges are in line with the broader ICT labour market, with employers experiencing significantly higher competition for skilled ICT workers, and the ability of comparative Scottish public sector bodies e.g. Scottish Government and Police Scotland, to offer significantly more attractive terms and conditions in terms of higher salary values for similar roles.

This is likely to result in continued challenges in supporting our current ICT systems, continued challenges in addressing control actions around our Cyber Security risks and is also expected to compromise our ability to deliver any real innovation in the systems we implement and support

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

The ICT function is addressing this risk on several fronts:

- Restructuring the department to provide a modern and fit-for-purpose ICT function
- Modernising job titles, which align to the Scottish Governments' Digital, Data and Technology (DDAT) Framework, to make them more attractive to the labour market
- Updating job descriptions to include modern and current technologies
- Regular review of Market Allowances to support attraction/retention where appropriate
- Building our own resources through greater use of Modern and Graduate Apprenticeships and development roles, and creating improved career pathways through restructure
- Provision of online training platforms for all ICT staff to promote learning and development
- Using exit interview and candidate feedback to better understand reasons for leaving / not joining
- Focus on functional and organisational culture and flexibility as an attraction and retention tool

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

The competitive ICT labour market continues to place upward pressure on wages, causing SFRS salaries to fall behind market rates for many ICT roles, further exacerbating recruitment and retention challenges.

A high vacancy factor, combined with the implications of the resource budget pressures has the potential to further increase staff turnover if those colleagues who remain are required to do more, especially where similar roles are available elsewhere with significantly higher salaries.



**People Committee – 5 December 2024
Risk Spotlight Briefing Note**

POD015 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 the ability of external partners to confirm requirements, 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.

Submitted by: George Lindsay, Lead People Adviser (Reward)

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

SFRS is currently supporting the Scottish Public Pensions Agency (SPPA) to implement three changes to Firefighter pension provisions necessary to comply with the outcome of successful legal challenges. These are termed:

- Matthews O'Brien, 2nd option: Involves retrospective access to pensions for circa 3,600 current and former Oncall Ffs employed between April 2000 and April 2006.
- McCloud Sargeant ("pension remedy"): Involves resolving age discriminatory impacts resulting from the transitional arrangements applied by government during the change from final salary to Care Average Revalued Earnings (CARE) schemes for circa 5,400 current and former employees employed between April 2015 and April 2022.
- Booth Bradshaw: Involves 187 Wholetime and circa 3,400 Oncall Ffs who received certain payments between 2015 and 2021 which have since been reclassified as pensionable.

Matthews O'Brien and Booth Bradshaw requires the SPPA to contact qualifying current and former employees and offer them the opportunity to buy back pensionable benefits for periods in which they were not previously permitted to accrue pensionable benefits.

McCloud Sargeant requires SPPA to remedy discrimination on the grounds of age by offering in-scope current and former employees the choice of having pensionable benefits calculated under either the 2015 Ff Pension Scheme (CARE), or that scheme which preceded it (either the 1992 or 2006 Scheme).

Under statute, McCloud Sargeant must be addressed by April 2025, and Matthews O'Brien by September 2025. There are no statutory deadlines for the completion of Booth Bradshaw, however due to interdependencies, this must be addressed coterminously with McCloud Sargeant as the decision made by individual employees under Booth Bradshaw may then impact their calculations under McCloud Sargeant.

SPPA have now recognised that to permit employees affected by two or more of these issues to make a fully informed choice will require that SPPA synthesise the benefits into a single "Remedy Service Statement" that specifies the benefits and costs to each such individual, enabling them to make a fully informed decision. Whilst this has been agreed in principle, the complexity of these calculations requires bespoke processes that are still in the early stage of development.

Addressing these challenges presents both SFRS and SPPA with significant capacity issues. Both organisations' normal responsibilities for applying the terms of Ff Pension Schemes are primarily transactional, and therefore limited in both scope and complexity. Developing and implementing the policies and processes necessary to address the three current pension projects is therefore challenging. The qualifying period for the Matthews O'Brien 2nd Option also presents specific challenges, as employee and pay information for this period has been deleted in conformity with

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record retention schedules. This has partially been resolved through the accessing records developed to support the 1st Option exercise of 2015, however the extension of the scope and qualifying criteria of the 2nd option exercise, and the probability of contact details being outdated necessitates the use of an internal and external facing Comms Strategy to alert qualifying individuals to their entitlements and options and the need for them to contact SFRS where they are not contacted by the scheduled date.

Whilst responsibility to address these issues lies with the SPPA, SFRS are supporting SPPA through the provision of employee and pay information, administrative support, and employee communications. A failure to meet the statutory deadlines could result in SFRS being named in further legal actions as a co-respondent with the SPPA, and to employee dissatisfaction and a deterioration in employee relations.

The SPPA has also requested that the SFRS either reimburse or reclaim any monies relating to Employee Pension Contributions owed by or to current employees as a result of the various pension remedies. Those owing outstanding pension contributions will be offered the opportunity to pay these by instalments over a ten-year period. In contrast, those who are due a rebate will be paid these through a lump sum. As the respective Firefighters' Pension Schemes are unfunded, and payments to pension scheme members are normally made by SPPA, SFRS's Finance function are currently reviewing how SFRS will be funded to meet these costs, and how the phasing of this funding will be provided to avoid cash flow challenges.

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

To mitigate this risk, several actions have been taken or are underway:

- The temporary creation of a 0.5 FTE Grade 7 Lead Adviser post to align SFRS support to SPPA and coordinate SFRS's internal activities, and a Grade 2 Administrative Assistant post to issue, receive and record communications between SFRS to and in-scope current and former employees.
- Realignment of resource into the SFRS Systems Team over November and December 2024 to support completion of time-sensitive payroll reprocessing activities.
- Providing support to the SPPA Project managers in developing overarching Project Plans.
- Accessing and cleansing the available pay and employee data necessary to inform the calculation of pensionable benefits due to individuals, and the costs they will have to meet to access these.
- Weekly and monthly meetings with SPPA colleagues to develop, apply and monitor the processes necessary to realise solutions.
- The development and implementation of internal and external Communications Strategies to inform in-scope former and current employees of their entitlement to pensionable benefits, how and when each issue is being addressed, and what actions they are required to take.
- The development of financial and payroll processes to receive and oversee the receipt of current employees' payment of outstanding employee contributions.

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

The external factors that may impact on the current risk assessment include but are not limited to:

- Limited capacity within the SPPA to develop and implement solutions to the current pension issues.
- An ongoing legal challenge at the U.K. level that seeks to extend the terms of the existing Matthews O'Brien pension remedy.
- The phasing of funding by the SPPA/ Scottish Government to reimburse SFRS for the payment of pension contributions refunds not aligning with the payments made to employees, and causing cash-flow challenges.

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

Agenda Item 15.1

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
6 March 2025	<ul style="list-style-type: none"> Chair’s Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight - (OC Staffing Levels) Contaminants Quarterly update Culture Update (verbal) Audit Action Plan Update: -SVQ -Sickness Absence Management, -On Call -EDI 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none">
		<p><u>New Business</u></p> <ul style="list-style-type: none"> Learning and Development Overview Training SAMP Evaluation of physiotherapy services 	<p><u>New Business</u></p> <ul style="list-style-type: none"> Talent Pathway (LB) 	<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none">
5 June 2025	<ul style="list-style-type: none"> Chair’s Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight: (TBC) Contaminants Annual Report 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Committee Statement of Assurance

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
	<ul style="list-style-type: none"> Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 		<ul style="list-style-type: none"> Culture Update (written) Draft Health & Safety Annual Report 2024/25 (TBC) Learning Needs Analysis Annual Report (June mtgs) Audit Action Plan Update 		
		<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none"> Volume Of Calls To Safecall Confidential Reporting Line And Analysis Of Themes 	<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none">
11 September 2025	<ul style="list-style-type: none"> Chair’s Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) Health and Safety Annual Report 2024/25 Health and Safety Policy and Policy Statement 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight - (TBC) Culture Update (verbal) Audit Action Plan Update Contaminants Quarterly update 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> 	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none">
	<ul style="list-style-type: none"> Review of Actions Date of Next Meeting 	<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none"> 	<p><u>New Business</u></p> <ul style="list-style-type: none">

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
4 December 2025	<ul style="list-style-type: none"> Chair’s Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight: - (TBC) Culture Update (verbal) Audit Action Plan Update Contaminants Quarterly update 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
		<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none">
6 March 2025	<ul style="list-style-type: none"> Chair’s Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight (TBC) Culture Update (verbal) Audit Action Plan Update Contaminants Quarterly update 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
		<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none">

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SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

PUBLIC MEETING – PEOPLE COMMITTEE

THURSDAY 5 DECEMBER 2024

The following reports were submitted for information only.



Report No: C/PC/59-24

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	TRAINING CONTINUOUS IMPROVEMENT PROGRAMME – UPDATE						
Report Classification:	For Information Only	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		A	B	C	D	E	F
1	Purpose						
1.1	The purpose of this 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.						
2	Background						
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.						
3	Main Report/Detail						
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 21 November 2024, the status of all 77 recommendations is as follows: <ul style="list-style-type: none"> • 54 recommendations are now complete. • 23 recommendations therefore remain and are currently in progress, to be delivered by the allocated Training Function leads and their teams. 						
3.3	The Training Function will retain responsibility for the progression of all 23 outstanding recommendations, with an owner assigned to each and managed through the TSA						

3.4	<p>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> <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><u>CIP Action Plan - Recommendations added within the last 6 months (“In Progress”) 72 – 77.</u></p> <p>July 2024</p> <ul style="list-style-type: none"> • 72 - 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 • 73 - Introduce WorkforcePro for non-operational personnel - Implement the WorkforcePro software system to support the planning and recording of training for non-operational personnel • 74 - 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. <p>November 2024</p> <ul style="list-style-type: none"> • 75 - The design and implementation of a new business as usual BA training delivery model following the BA Recovery - BA Recovery Plan Phase 3. Following the delivery of the BA Recovery Plan (phase 1&2). The BAU model will commence delivery in April 25. • 76 - Using API technologies to extract reportable data to inform quarterly KPIs - Engage with pdrPro supplier to explore the utilisation of API technologies to assist in the production of the quarterly KPIs • 77 - Casualty care (ICAT) delivery model / Casualty care Instructor pathway – Train and utilise station/OCRWC ICAT Intermediates for delivery of ICAT operator refresher courses. Initial pilot project ongoing. Full review of our ICAT instructor pathway being undertaken to ensure best practice when training up to instructor level, aligns with NFCC pre-hospital casualty care standards and Pre-Hospital Emergency Medical (PHEM) treatment competencies as set by the Royal College of Surgeons
3.6	<p><u>CIP Action Plan - Recommendations completed within the last 6 months.</u></p> <ul style="list-style-type: none"> • 70 - Planned review of the Procurement Framework supporting the Training Function - RTC / HRO Training - Scrap Vehicle Suppliers (Transport). • 71 - Full review of Methods of Instruction training delivery / provision. Acquisition and maintenance of skills to be considered during review.
3.7	<p><u>Recommendations brought forward (Nov FMT) for change of status – “In Progress” to “Complete”</u></p> <ul style="list-style-type: none"> • 42 - It is recommended that scoping is undertaken to ascertain the practicalities of introducing dedicated instructors for specialist areas e.g. Health& Safety, P&P, Hazmats • 46 - 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.

3.8	The status of the above recommendations are currently being discussed by DACO Robison and recommendation(s) owner GC McGill.
3.9	<p><u>Recommendations under review (New Section - CIP Action Plan – June 2024)</u></p> <ul style="list-style-type: none"> • There were 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. • FMT – November 2024 – 2 Recommendations under review were accepted in their original format (Recs. 75 + 76) and 2 were amalgamated into Recommendation 77 within the Live CIP Action Plan
4	Recommendation
4.1	For the People Committee to note the content of this report and provide any feedback relating to its content.
5	Key Strategic Implications
5.1	Risk
5.1.1	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.
5.2	Financial
5.2.1	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.
5.3	Environmental & Sustainability
5.3.1	Not applicable
5.4	Workforce
5.4.1	This ongoing improvement programme is in support of the development of the Training teams and the wider development of SFRS personnel.
5.5	Health & Safety
5.5.1	Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.
5.6	Health & Wellbeing
5.6.1	Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.
5.7	Training
5.7.1	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.
5.8	Timing
5.8.1	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	Performance	
5.9.1	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	Communications & Engagement	
5.10.1	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	Legal	
5.11.1	N/A	
5.12	Information Governance	
5.12.1	DPIA completed Yes/No. If not applicable state reasons. The process uses existing systems and processes which are already in place.	
5.13	Equalities	
5.13.1	EHRIA completed Yes/No. If not applicable state reasons. The process uses existing systems and processes which are already in place.	
5.14	Service Delivery	
5.14.1	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.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	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.
8	Appendices/Further Reading	
8.1	Appendix A: Training Management Team - CIP Action Plan	
Prepared by:		Bryan Nelson, Group Commander Training Function
Sponsored by:		Alasdair Cameron, Area Commander Training Function
Presented by:		Craig McGoldrick, Assistant Chief Officer Director of Training, Safety and Assurance
Links to Strategy and Corporate Values		
SFRS Training Strategy 2020-25		
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.”		

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Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Training Functional Management Team</i>	<i>6 November 2024</i>	<i>For Scrutiny</i>
<i>TSA Directorate Management Team</i>	<i>21 November 2024</i>	<i>For Scrutiny</i>
<i>People Committee</i>	<i>5 December 2024</i>	<i>For Information</i>
<i>Training Safety and Assurance Board</i>	<i>19 December 2024</i>	<i>For Information</i>

Continuous Improvement Programme - Action Plan Progress

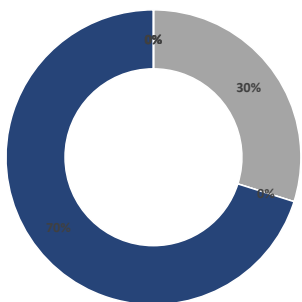
Updated	Next Update
Dec-24	January - 24

Status	Count
Not Started	0
In Progress	23
Transferred	0
Complete	54
Transferred	0
Cancelled	0

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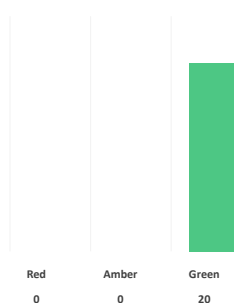
94%

Res



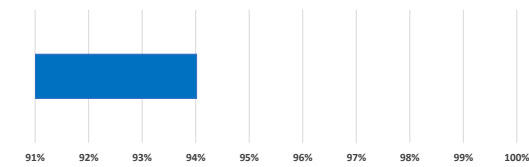
■ Not Started ■ In Progress ■ Transferred ■ Complete ■ Transferred ■ Cancelled

In Progress RAG Rating



Overall Progress August 2021 36%

Overall Progress September 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
Recommendation 1 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 proposed 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	https://firescotland.sharepoint.com/sites/TRG-Directorate/TNA/Ferms/AllItems.aspx
Recommendation 2 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>Recommendation 3 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>Recommendation 4 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 therefore 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>Recommendation 5 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	Evidence and benefits realised for Recommendation 5
<p>Recommendation 6 Where practicable, operational response stations should be categorised in line with the six Scottish Government urban rural classification breakdowns</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"	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>Recommendation 7 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 has 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>Recommendation 8 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	<p>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.</p>	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>Recommendation 9 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	<p>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.</p>	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>Recommendation 10 That a centre of excellence for trainee firefighters is established at the National Training Centre.</p>	10	<p>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.</p>	Training Function Lead	GC Kennedy	Training FMT	Complete	<p>April 22 - The Centre of Excellence has been established delivering Whole-time 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>Recommendation 11 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	<p>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 McGowan to the Strategic Intent Executive Board on 27th January 2015 which forecasted a potential capital outlay of £5 million at that time.</p>	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>
<p>Recommendation 12 It would be proposed that the syllabus and timetable for the Whole-time Trainee Firefighter Foundation Programme is remapped in order to align with the Institution of Fire Engineers Level 2 certificate.</p>	12	<p>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.</p>	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>March - 23 -SK - WITFFFP is currently written to align with the SVQ and Modern Apprenticeship (MA). This attracts funding in accordance with the MA . If there is a strategic direction to map to the WITFFFP 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 WITFFFP in isolation).</p> <p>Any substantial review of the WITFFFP will require a significant time commitment and would best take place during a hiatus when the WITFFFP 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 183hrs. There is also a 3hr assessment for three one hour examinations. Most candidates prepare for IFE</p>	50%	Oct-24		
<p>Recommendation 13 It is recommended that a basic literacy and numeracy test is undertaken as part of the practical selection testing process.</p>	13	<p>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.</p>	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	<p>Recommendation 12 <PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>

<p>Recommendation 14 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	<p>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.</p>	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 & Team Building prior to attending Foundation course.</p>	100%	Mar-23	Dec-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 15 It is recommended that new employees attend a pre-foundation programme induction course.</p>	15	<p>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.</p>	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>Recommendation 15</p> <p>Recommendation 16</p>
<p>Recommendation 16 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	<p>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.</p>	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	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 17 The process for ascertaining the training requirement</p>	17	<p>Operational Staff applying for re-employment into the service should be considered for the same process as recommendation</p>	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>Recommendation 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.</p>	18	<p>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>	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>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</p> <p>June 2023- Update from GC Rodney Anderson (On Call Support Team) 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 recommendation</p>
<p>Recommendation 19 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	<p>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.</p>	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 19 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	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 20 It would be recommended that a quantity of newer,</p>	20	<p>The age of the training fleet and some equipment has presented some challenges with reliability, maintenance and</p>	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</p>	100%	Mar-23	Apr-22	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 21 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	<p>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.</p>	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 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	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 22 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	<p>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.</p>	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	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 23 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	<p>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.</p>	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	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 24 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	<p>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 Balmerholme 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.</p>	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 & 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	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>

<p>Recommendation 25 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 & Medical Emergencies" or combining "Domestic", "Commercial" & "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 consultation on the new TFOC model.</p> <p>Jan 22: New TFOC model includes combined modules with a conscious 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>
<p>Recommendation 26 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>Recommendation 27 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 & Rescue, Compartment Fire Behaviour Training (CFBT) and Tactical Ventilation (TV) into 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 & Rescue, Compartment Fire Behaviour Training (CFBT) and Tactical Ventilation (TV) into 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 & 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 year 1 - 1 day BA & 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	EVIDENCE LINKS FOR RECOMMENDATION 27
<p>Recommendation 28 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 consultation 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 deliver and enhance this recommendation.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 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.</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>Recommendation 30 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>

<p>Recommendation 31 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.</p>	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>
<p>Recommendation 32 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;</p> <ul style="list-style-type: none"> • Urban 5 days (or 3 weekends) – no saving • Rural 3 days (or 2 weekends) – 1 instructor day saving per course • Remote Rural 2 days (or 1 weekend) – 3 instructor days saved per course. 	32	As per Recommendation	Training Function Lead	GC Galloway	Training FMT	Complete	<p>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.</p> <p>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.</p> <p>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.</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 33 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.</p>	33	As per Recommendation	Training Function Lead	GC Galloway	Training FMT	Complete	<p>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.</p> <p>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.</p> <p>August 2022: Full review of training standard taking place on 22nd August with a view to identifying efficiencies across course delivery.</p>	100%	Dec-22	Aug-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 34 It is recommended that SFRS enhance the instructor cadre by the addition of 4 uniformed instructors. These instructors would be strategically located within LSD Area Teams across SFRS where there is a higher density of RDS personnel.</p>	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>
<p>Recommendation 35 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 available options further.</p>	35	As per Recommendation	Recommendation deemed not viable at this time	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 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.</p> <p>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.</p> <p>March 2023: This recommendation is now complete. A revised contract for new Firefighters</p>	100%	Mar-22	Apr-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 36 It is proposed to utilise the current Operational Assurance (OA) process to reaccredit Incident Command Currencies.</p>	36	Cross-mapping the role assessment criteria of WM7 and EFSM2 with the OA Framework may enable an individuals 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 Dipple	Training FMT	In Progress	<p>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.</p> <p>June 2022: Command Competence Review Procedure now live</p> <p>Nov 2023: November FMT - DACO Farquharson asked that Rec. 36 is reopened linked to the ongoing Command Competence Review Procedure.</p> <p>March 24 MD - Policy on hold for full review.</p> <p>June 24 MD - no further updates due to workloads.</p>	60%	Dec-24		Emails and meeting agenda and logs
<p>Recommendation 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.</p>	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	<p>Aug 21: The work to realign the ICL 2 & ICL 3 courses is complete and now being delivered as business as usual.</p> <p>June 2022: Revised Incident Command Pathway now live</p>	100%	Nov-20	Jun-22	Realignment complete and published in the following documents: Incident Command Development Pathway: https://hub.firescotland.gov.uk/download.cfm?ver=68166 . Incident Command NTS: https://hub.firescotland.gov.uk/download.cfm?doc=docm93jjm4n6384.xls&ver=73330

<p>Recommendation 38 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	<p>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.</p>	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 embedded in ICL2 D course. ICL 2 & 3 courses, both development and refresher, to include development discussions on functional roles the</p>	75%	Mar-25		<p>SC Gow and GC personal emails regarding XVR and ICL3 Redesign.</p>
<p>Recommendation 39 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	<p>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.</p>	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 procurement 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 the line.</p>	50%	Mar-25		<p>Emails and outlook meetings.</p>
<p>Recommendation 40 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	<p>People in position spreadsheet. Emails in evidence folder.</p>

<p>Recommendation 41 It is recommended that wherever possible, a move towards Knowledge Applied Training and Assessment (KATA) sessions for periodic refresher & 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	<p>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 P46-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.</p>	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. 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. 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 action.</p>	95%	Jan-25		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 42 It is recommended that scoping is undertaken to ascertain the practicalities of introducing dedicated instructors for specialist areas e.g. Health & Safety, P&P, Hazmat</p>	42	<p>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.</p>	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 May</p> <p>2024: Further discussions required between TSA Management Team to establish probability of this workstream prior to recommendation of removal. August 2024:</p> <p>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 Nov. FMT to change the status of this recommendation to complete.</p>	100%	Nov-24		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 43 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	<p>SWAH level 2 delivery through to Rope Rescue Supervisor will be delivered by NIP Rope Rescue Instructors utilising a peripatetic delivery model.</p>	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. Oct 2024 Ops nd assesses have now agreed the station for SWAH Tier 2 a training programme is now being developed and actioned to upskill stations and provide LSO Instructors.</p>	85%	Feb-25		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 44 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 & 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	<p>This introduction of dedicated delivery teams across the three Service Delivery Areas (SDA's) would provide 7250 hrs of student contact time.</p>	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>
<p>Recommendation 45 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	<p>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.</p>	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>Recommendation 46 It is proposed that there is further integration between water (historical NTS) and High Volume Pump (HVP) requirements with NIP SRT'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. August 2024: HVP course has been scheduled for</p>	100%	Dec-24		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 47 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>

<p>Recommendation 48 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 (Connell), secondly £10k in overtime and thirdly a reduction of £60k in Rescue 3 skills packs/paper work costs</p>	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&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>
<p>Recommendation 49 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.</p>	49	This review has highlighted that the current re-accreditation / 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>
<p>Recommendation 50 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).</p>	50	As per Recommendation	Completed within CIP	GC Gallacher	Training FMT	Complete	<p>Aug 21: This recommendation has been implemented and LCMS course packages have been created to reflect this change</p>	100%	Mar-22	Aug-21	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 51 It is also recommended that a USAR awareness module be created for incorporation into the Operations Control TFOC framework.</p>	51	As per Recommendation	Completed within CIP	GC Jacqui Macdonald	Training FMT	Complete	<p>Jan 22: GC Macdonald has confirmed that current "Rescue" Module within OC TFOC contains adequate information on USAR to address recommendation.</p>	100%	Mar-22	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 52 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.</p>	52	It has been identified there is an opportunity to strengthen the link 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 SCIC 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.</p> <p>June 23: OC structure review has been published and talks are progressing with Rep Body. Implementation of structure expected to start late 2023.</p> <p>Apr 23: Talks are currently</p>	50%	Dec-24		Benefit of shared training knowledge, experience, resources, practice and avoidance of duplication of effort. Opportunity to develop fully integrated learning material for all uniformed roles.
<p>Recommendation 53 A Learning and Development pathway from Firefighter (Control) to Area Manager (Control) should be developed.</p>	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>	10%	Dec-24		will provide a consistent approach to the training, development and assessment of OC ICs, conforming to national standards.
<p>Recommendation 54 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.</p>	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	<p>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.</p>	100%	Mar-23	Mar-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 55 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.</p>	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	<p>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.</p>	100%	Mar-23	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 56 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.</p>	56	As Above	Completed within CIP	AC Acton	Training FMT	Complete	<p>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.</p>	100%	Mar-23	Jan-22	<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>

<p>Recommendation 57 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 Resourcing team have all been involved in this process in support of this restructuring project. May</p> <p>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) June 2023: 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.</p> <p>August 2023 (30/08) - 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	
<p>Recommendation 58 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.</p>	58	<p>The Training Function will support Service Delivery Areas to determine the critical skills and training required to ensure FF safety based on risk, and ensure the Training Needs Analysis identifies the level of training required and establish where investment may be needed.</p>	Training Function Lead	GC McGill	Training FMT	Complete	<p>April 23 - Training for Operational specialist skills are now based on the TOM for that discipline. The number of courses required to achieve or maintain the TOM in each specialist skill has been identified as part of the TNA. A gap analysis will be completed in Q2 to establish if further investment in this area is needed. Critical core skills for all operational staff are now identified using information held within i-Trent. This forms part of the maintenance of competency and refresher programme identified within the relevant Training Standards. A report was produced for the FMT highlighting the current deficiencies in core competencies and the number of additional course required to achieve full 100% competency for core skills for all staff. Work is currently ongoing into rectifying this issue.</p> <p>June 23 - Q2, Q3 and where know Q4 training delivery courses now schedule as per the TNA. Within Q1 and Q2 there was still difficulties being experienced in ensuring all candidate spaces on course were filled thus ensuring course delivery achieved maximum efficiency and effectiveness.</p> <p>Further liaison is planned with LSO areas to ensure that all allocated course spaces are fully filled. There has been a significant increase in the core competency of WIOS due to the new supported delivery plan. TNA report of Core skills of BA CFBT and TV has been produce for Q1 showing the progress to date and what is still required to achieve the Training delivery plan.</p> <p>Jan 2024 - A full review of the TNA guidance document has now been completed by a Working Group including GC McGill, GC Nelson SC MCFie and Paula Frederick. This document will be presented at Feb FMT for review and sign off. This document clearly lays out the requirement for all Training leads and specifically Training Site leads to fully liaise with LSO teams primarily LSO Training / Resourcing SPOCs. This guidance will clearly identify the responsibilities of the managers within the Training Function and Service Delivery to work together supported by the statistical skills maintenance and resourcing reporting data to ensure a cohesive and collaborative approach to assessing and identifying skills gaps and producing the required courses with the appropriate candidates attending to support front line teams and managers.</p> <p>April 2024: TO BE CLOSED</p>	100%	May-24	Apr-24	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 59 As planned, management should introduce regular training needs analysis and the shift to a more localised approach for refresher training. As part of this, management needs to consider the financial implications of this new process and how it will impact staff and be effectively communicated.</p>	59	<p>Training are currently developing a revised Training Needs Analysis process that will ensure a more flexible approach to identifying the Training requirements of the Service.</p>	Training Function Lead	GC Wright	Training FMT	Complete	<p>March 2023 - The TNA process has been reviewed and amended for training year 2023/24, making it a more live and fluid process. A quarterly review will now be undertaken with liaison from LSO Areas, to ensure any changes to LSO Area course requirements are considered with a clear focus on critical courses needed to fulfil organisational requirements. As part of the current review, the TNA process will be further amended to utilise a new reporting system on Power BI. This is to allow for more accurate and simple reporting. All information will soon be able to be accessed easily all in the same place.</p> <p>June 23 - TNA report of Core skills of BA CFBT and TV has been produce for Q1 showing the progress to date and what is still required to achieve the Training delivery plan. To ensure future compliance and consistency as Draft TNA Policy is being produced with a time line of Q2 for publication.</p>	100%	Apr-23		<p>Evidence - Training Needs Analysis - Scottish Fire and Rescue Service (firescotland.gov.uk)</p>
<p>Recommendation 60 Management should ensure that all Training related policies and procedures are reviewed and updated, where necessary within the appropriate timescales and then circulated to all relevant staff.</p>	60	<p>Training are developing a "Policy & Procedures Forward Planner" that will ensure all Training documentation is reviewed within set timescales and communicated to relevant stakeholders through agreed governance routes.</p>	Training Function Lead	GC Nelson	Training FMT	Complete	<p>April 2023 - Policy / Procedure paper for FMT has been completed detailing the work to date and options available to be discussed / decision at FMT 3rd May. (BN 26/04) April 2023 - New Training Function SharePoint Policy and Procedure "List" Library has been created in conjunction with a planned Task by Planner generic Task applied to all relevant personnel's Task list (TBP) to ensure a periodic review of the Policy and Procedure Library to capture all required reviews preventing a "single point of failure" role within the Training Function. TBP will be reviewed by Strategic leads to monitor all "outstanding" and "live" reviews for progress towards completion and authorisation (sign off). (BN 03/05)</p> <p>May 2023 - SFRS Policy & Procedure Library / Review Project - Training Function review team (GC Nelson / WC Crawford) to work with Carol Wade to identify task specific teams for Admin / Production / Authorisation roles with project. WC Crawford tasked with reviewing and updating function policies and procedures within Sharepoint and SFRS iHub ahead of meeting with GC Nelson on the 24th May (soft completion date for information return a project update to Carol Wade - 2nd June). (BN 12/05/2023) Dec 2023 - A robust review and reporting procedure is now in place for the Training Function utilising a SharePoint document "list" and Teams Task By Planner. Business Support WC will support this process and produce the necessary governance reports as required. 04/12/2023</p>	100%	Apr-24	Dec-23	<p>Evidence added to CIP Action Plan Evidence folder</p>

<p>Recommendation 61</p> <p>well as considering savings on in-house training delivered, management should undertake a cost/benefit evaluation to access if better value could be sought by using external training providers for at least some elements of mandatory training, e.g. casualty care. This evaluation should be reviewed on a periodic basis to ensure best value continues to be achieved.</p>	<p>As</p> <p>61</p>	<p>Training will, as part of its continuous improvement and through its governance processes, consider the outsourcing of training delivery to ensure best value is achieved and that it is reviewed as necessary.</p>	<p>Training Function Lead</p>	<p>AC Hill</p>	<p>Training FMT</p>	<p>In Progress</p>	<p>May 23 - GC Marc McGill is engaging with Procurement around the Long-Term Arrangements for External Training for Operational Competence Services. This will consider contracts with external providers and ongoing assessments are being considered for best value training when considering course delivery. Through collaborative approaches, the Function have been creating opportunities with partner agencies in a number of training events, including Police Scotland assisting with Driver Training and Incident Command Assessments and also the Scottish Ambulance Service in delivering All Terrain Vehicle Training.</p> <p>11/04/2024 - GC Galloway engaging with Procurement around the substantial increase in external training provider quotes for Hook Lift instructor / Plant operator courses. Additional quotes being requested to allow for comparisons and best value to be sought.</p>	<p>25%</p>	<p>Nov-24</p>	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 62</p> <p>During the refresh of the Training Needs Analysis, roles and responsibilities for generating compliance reports and enforcing compliance are agreed and clearly set out.</p> <p>Where compliance with mandatory training is below the target of 95%, SFRS should provide explanations for this and develop action plans with assigned action owners and timescales to improve completion rates. In addition, competency should be assessed more formally on a frequent basis, with management devising appropriate methods for performing this assessment and providing clear guidance on the action to take should a firefighter be deemed to be not competent. Guidance should also be devised in respect of the process to be followed should an operational firefighter's refresher training not be fully up to date.</p> <p>The Training Function should also review reporting on compliance rates to ensure that if a firefighter has completed mandatory training, it is reported as compliant regardless of any subsequent change in position or location.</p>	<p>62</p>	<p>Training will develop a Skills Maintenance Framework that will clearly set out what is required within each skill set to ensure compliance. This will detail how skills will be assessed and what action will be taken should any personnel deemed to be not yet competent or are out with their refresher training current periods.</p>	<p>Training Function Lead</p>	<p>AC Hill</p>	<p>Training FMT</p>	<p>In Progress</p>	<p>Dated extended to allow for further engagement, development and to go through Governance.</p>	<p>20%</p>	<p>Nov-24</p>	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>
<p>Recommendation 63</p> <p>When improvement actions are agreed at MRG based on analysis of feedback, they should be assigned action owners and implementation timeframes. Once actions have been implemented by the responsible owner, communications should be issued to staff to demonstrate that feedback received is duly considered and taken on board, where appropriate to encourage further feedback.</p>	<p>63</p>	<p>Improvement actions identified through candidate experience and feedback will be fully captured by Training. Responsibility will be given to action owners to ensure the completion of agreed improvements and communicated to relevant stakeholder to demonstrate its value and encourage future submissions. Work is underway to improve how training capture and analysis feedback, moving from a paper-based system to an easy to complete e-form.</p>	<p>Training Function Lead</p>	<p>AC Cameron</p>	<p>Training FMT</p>	<p>Complete</p>	<p>May '23 - Options were put forward to Training Management Team in March'23 and Nintex was decided for implementation as the Training candidate experience and feedback tool. It is a cloud-based workflow tool that allows users to automate business processes. It offers a range of functionalities, including electronic forms and workflows which makes it a good fit for a candidate feedback process.</p> <p>July '23 - ICT in the process of moving the workflows into the cloud the next steps are to test these and produce screenshots that will go into a communication to ensure all stakeholders are informed of the changes prior to going live, which is still on track for Q2 23/24. Dec'23 - This has been delayed due to technical issues and other priority workstreams. This has now been scheduled to conclude in Q4 2023/24 in preparation for reporting year 2024/25. 1/4/24 - Trial complete and engagement with Central Staffing Team undertaken ready to go live on the 1st April '24, evidence uploaded to demonstrate approach and provide the example e-forms/process. This updated process has been mapped as part of the PPFT project and to give sight of this improvement in approach. This also forms part of the Management Review Group standing agenda to identify any common themes or areas needing addressed at relevant Training Centres etc. As part of the quarterly management meetings. This also links to our PMF, specifically KPI 29 which will continue to evolve through a PowerBI dashboard and further improve the analysis of data.</p>	<p>100%</p>	<p>Apr-24</p>	<p>Rec 5.1</p>
<p>Recommendation 64 - BA Recovery Programme</p> <p>BA Training Delivery Model - Currency Analysis across all BA linked Core Courses - BA / CFBT / Tac Vent</p>	<p>64</p>		<p>Training Function Lead</p>	<p>GC Todd</p>	<p>Training FMT</p>	<p>Complete</p>	<p>September 2023: Quarterly and annual report on BA, CFBT & Tac Vent currency statistics is provided to Management Teams and Service Delivery Senior Management Teams. BA Recovery plan and new BAU model formulated to increase currency levels.</p>	<p>100%</p>	<p>Sep-25</p>	<p>Evidence & Benefits Realised for Recommendation 64</p>
<p>Recommendation 65</p> <p>The creation / production of a Training Function Vision and Strategy document. This is to be a collaborative process involving all members of the Training Function Management Team (TMT) with consultation across a wide range of internal and external partners.</p>	<p>65</p>	<p>This document will be fully consulted on and shared with a variety of Internal and External Customers.</p>	<p>Training Function Lead</p>	<p>AC Cameron</p>	<p>Training FMT</p>	<p>Complete</p>	<p>Initial draft completed incorporating feedback from Training Function development days, management sessions conducted to pull the content together. Wider engagement across all Directorates and key stakeholder/representative bodies concluded. Presented through governance to the People Committee, for scrutiny. All feedback incorporated and graphics produced a design version. AC Cameron submitted a paper for decision to the SLT on 8th Nov'23.</p>	<p>100%</p>	<p>Nov-23</p>	<p>Training Vision & Strategy (Review-Development)</p>
<p>Recommendation 66</p> <p>The Creation / production of a Skills Maintenance Framework document in support of the Training Function Vision and Strategy document. This document will be one of the 3 fundamental building blocks to support the delivery of the Functions Vision and Strategy.</p>	<p>66</p>	<p>Working Groups to be created to support with this workstream. GC Scott Kennedy will be the primary support to GC Nelson during this process.</p>	<p>Training Function Lead</p>	<p>GC Nelson</p>	<p>Training FMT</p>	<p>In Progress</p>	<p>Jan 2024 - preliminary work on the creation of the Skill Maintenance library have taken place with SMEs within the Training function fully involved / engaged. Draft production will be complete by mid Feb.</p> <p>March 2024 - Skills Maintenance Framework (SMF) Doc is in first draft and the Skills Maintenance Library which is being created in support of the SMF is now in draft form within LearnPro/LCMS.</p> <p>July 2024 - The Skills Maintenance Framework (SMF) / Skill Maintenance Library (SML) are now sections of the overarching Training Framework Document that has been produced by GC Nelson, GC Galloway supported by WC Crawford. This Training Framework Document will also encompass sections covering Training Delivery and Assets and Resources. This further evolution of this work has considered feedback from DACO Farquharson, AC Cameron and AC Hill.</p> <p>August 2024 - DACO McGoldrick has now provided feedback to GC Nelson and GC Galloway and the Framework document has now been restructured to facilitate a Plan, Do, Check, Act approach. The next draft will be presented at September FMT after further review by AC Cameron, AC Hill and DACO McGoldrick. The completed draft including supporting documentation (SML and Mapping Tool) will be presented at DMT in the coming months.</p> <p>November 2024 - Training Framework Document - Skills Maintenance Library (SML) / Training Delivery Mapping System Development - Engagement Sessions (Recorded) 16th / 23rd October - invites to all Training Team members - feedback forms have been produced and distributed</p>	<p>70%</p>	<p>Dec-24</p>	<p><PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE></p>

<p>Recommendation 67 The creation / production of a Training Delivery Framework document in support of the Training Function Vision and Strategy document. This document will be one the 3 fundamental building blocks to support the delivery of the Functions' Vision and Strategy.</p>	67	Working Groups to be created to support with this workstream. GC Malcolm Dippie will be the primary support to GC Galloway during this process.	Training Function Lead	GC Galloway	Training FMT	In Progress	<p>April 2024 : Training Delivery Framework document and supporting documentation has been completed as a 1st Draft after review within wider TMT and has now been presented to DACO Farquharson for review and feedback.</p> <p>September 2024 - Framework documents have been reviewed with the intention to consolidate 3 framework documents in to a single framework. Updated version now prepared and to be scrutinised at September FMT.</p> <p>November 2024 - Training Framework Document - Skills Maintenance Library (SML) / Training Delivery Mapping System Development - Engagement Sessions (Recorded) 16th / 23rd October - invites to all Training Team members - Feedback forms have been produced and distributed</p>	70%	Dec-24		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 68 The creation / production of a Training Assets Framework document in support of the Training Function Vision and Strategy document. This document will be one the 3 fundamental building blocks to support the delivery of the Functions' Vision and Strategy.</p>	68	Working Groups to be created to support with this workstream. GC Marc McGill will be the primary support to GC Todd during this process.	Training Function Lead	GC Douglas Tait	Training FMT	In Progress	17.08.2024 - this has been delayed due to changing of personnel, this will be started in due course	10%	Mar-25		<PLEASE INSERT UPDATED RELEVANT EVIDENCE / INFORMATION HERE>
<p>Recommendation 69 The programmed review of the Training for Operational Competence (TIOC) framework following the end of it's 3-year cycle. This will include acting on feedback/lessons learned throughout the first 3-year cycle to produce a revised framework.</p>	69	The Learning and E-Development (LED) team will lead on this workstream	Training Function Lead	Andy Scott	Training FMT	In Progress	<p>29.2.24 - AS - Paper to be presented at FMT on 6.3.24</p> <p>April 24 - Paper presented at both FMT and DMT meetings. Approval received to proceed with wider review. Scoping meeting due to take place in May 24.</p> <p>August 2024 - Paper presented at Training Function FMT on 5.8.24. Further detail required relating to underpinning policies. Engagement with People Directorate ongoing as well as workforce Pro system configuration.</p> <p>October 2024 - Continued dialogue with People directorate to explore underpinning policy to support completion of mandatory organisational learning. Workforce Pro configuration on track for launch April 2025.</p> <p>TIOC review meeting held with AC Cameron 4.10.24. Revised TIOC discussed, with further recommendations taken on-board. Further meeting planned for November 2024.</p>	30%	Mar-25		
<p>Recommendation 70 Planned review of the Procurement Framework supporting the Training Function - RTC / HRO Training - Scrap Vehicle Suppliers (Transport).</p>	70	GC Nelson to work with Ashley Gould (Procurement - Category Lead) to review the existing Procurement Framework supporting RTC/ HR Training nationally. All suppliers to be contacted and a review of their capability to meet the required scrap car / vehicle provision for the 2024 - 2025 training year. Planned protocols to be reproduced in support of this work.	Training Function Lead	GC Nelson	Training FMT	Complete	<p>Dec 2023 - Planning meeting involving Training Strategic leads, Ashley Gould and GC Nelson to support this work and to create a plan for information collation and supplier engagement.</p> <p>Feb 2024 - GC Nelson providing Procurement with a fully collated ask from the Training Function linked to scrap cars / vehicles - this to cover all acquisition courses held within dedicated Training Centres as well as the station requirements to support maintenance of skills training at station level.</p> <p>March 2024 - further meetings held between GC Nelson and Ashley Gould to discuss shortfalls experienced in previous training year.</p> <p>May 2024 - Meeting held with all Training Site leads to discuss Procurement Review findings. GC Nelson to produce briefing doc. / email guidance in the coming weeks. A meeting will also be held to update Strategic leads.</p> <p>June 2024 -Positive outcomes of review with all suppliers able to meet the required ask. Areas of improvement identified through the review - Improved communications between supplier / end user and effective scheduling of RTC Maintenance program by LSD Teams. Comprehensive communications strategy put in place and all relevant teams advised. This recommendation is requested to be closed.</p>	100%	Jun-24		Recommendation 70 - Evidence Folder
<p>Recommendation 71 Full review of Methods of Instruction training delivery / provision. Acquisition and maintenance of skills to be considered during review.</p>	71	GC Nelson to work with L & D team (Andrea Fraser) and LED Team (Andy Scott / Meg Ritchie) to produce an acquisition and maintenance pathway for the provision of this important development / skill. To be accessible to all managers / commanders within the Service. Primary focus on the Supervisory Manager cadre.	Training Function Lead	GC Nelson	Training FMT	Complete	<p>Dec 2023 - Planning meeting involving GC Nelson and L&D Team to provide pathway for acquisition through the CC CEP process.</p> <p>Dec 2023 - Meeting held with GC Nelson and LED team to support the production of the required MOI LCMS Modules in support of this workstream.</p> <p>Jan 2024 - GC Nelson and Andy Scott (LED team) met to discuss MOI maintenance route within LCMS / PDRpro.</p> <p>March 2024 - further meetings held between GC Nelson and Andrea Fraser (L&D Team) to highlight the relevant sections within the CC CEP process that met the criteria to support the MOI learning.</p> <p>April 2024 - Meeting held with AC Cameron to discuss the production of Service wide comms in support of this work.</p> <p>May 2024 - Service Wide Communication issued. Effective processes in place to ensure positive outcomes through acquisition and maintenance of this important skill set. This recommendation is requested to be closed.</p>	100%	Jun-24		Recommendation 71 - Evidence Folder
<p>Recommendation 72 XVR Virtual Reality Incident Command Training and Assessment tool.</p>	72	To investigate the best use of the XVR immersive reality software for use in a blended training delivery/assessment approach.	Training Function Lead	Andy Scott	Training FMT	In Progress	<p>August 2024 - Training for LED and IC teams will be carried out between 2-3 September. Following this training, a scoping session will be held to identify suitable projects for using the XVR software.</p> <p>October 2024 - Training now complete. Recent Marine incident being considered for case study, using XVR software. XVR demo to SLT board scheduled for November.</p>	40%	Feb-25		
<p>Recommendation 73 Introduce WorkforcePro for non-operational personnel</p>	73	Implement the WorkforcePro software system to support the planning and recording of training for non-operational personnel	Training Function Lead	Andy Scott	Training FMT	In Progress	<p>August 2024 - Paper presented at Training Function FMT on 5.8.24. Further detail required relating to underpinning policies. Engagement with People Directorate ongoing as well as workforce Pro system configuration.</p> <p>October 2024: Continued dialogue with People directorate to explore underpinning policy to support completion of mandatory organisational learning. Workforce Pro configuration on track for launch April 2025.</p>	25%	Feb-25		
<p>Recommendation 74 Creation of On Call Support Crew Commanders</p>	74	Creation of positions to provide additional resilience and capacity for core course delivery, station support and driver training. Positions established in remote communities (WIOS) where it is difficult to recruit uniform instructors at CC or WC level.	Training Function Lead	GC MacLennan	Training FMT	In Progress	<p>March 2024 - Development of position references and title, line management arrangements and recruitment process confirmed with Training Function and WIOS LSD.</p> <p>April 2024 - 2 x OCSCC position advertised (Orkney & Shetland) through My Job Scotland.</p> <p>May 2024 - Interviews held and 2 successful candidates identified. Chris Gaskby (Is a FI in Bixter) for Shetland, start date 14th June 24 and Darren Muir (He is a WC in Shapinsay) for Orkney, start date 8th August.</p> <p>June / Aug 2024 - induction and development programmes to be completed.</p>	80%	Oct-24		

Recommendation 75 The design and implementation of a new business as usual BA training delivery model following the BA Recovery.	75	BA Recovery Plan Phase 3. Following the delivery of the BA Recovery Plan (phase 1&2). The BAU model will commence delivery in April 25.	Training Function Lead	GC Douglas Tait	Training FMT	In Progress	10%	Mar-26		
Recommendation 76 Using API technologies to extract reportable data to inform quarterly KPIs	76	Engage with pd/Pro supplier to explore the utilisation of API technologies to assist in the production of the quarterly KPIs	Training Function Lead	Andy Scott	Training FMT	In Progress	10%	Dec-25		
Recommendation 77 Casualty care (ICAT) delivery model / Casualty care Instructor pathway	77	Train and utilise station/OCRWC ICAT intermediates for delivery of ICAT operator refresher courses. Initial pilot project ongoing, provides additional resilience on stations for casualty care and frees up instructors for other duties. Full review of our ICAT instructor pathway being undertaken to ensure best practice when training up to instructor level, aligns with NFCC pre hospital casualty care standards and Pre Hospital Emergency Medical (PHEM) treatment competencies as set by the Royal College of Surgeons	Training Function Lead	GC MacLennan	Training FMT	In Progress	10%	Dec-25		



Report No: C/PC/56-24

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE							
Meeting Date:	5 DECEMBER 2024							
Report Title:	TRAINING FUNCTION POLICY REVIEW SCHEDULE							
Report Classification:	For Information Only	SFRS Board/Committee Meetings ONLY					For Reports to be held in Private	
		Specify rationale below referring to <u>Board Standing Order 9</u>						
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>
1	Purpose							
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.							
2	Background							
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 Q2, documents currently under review and also those due to be reviewed during Q4 2024 25. The status and other relevant details for each document were exported from the Training Function Document Review Schedule on 31 October 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.							
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.							
3	Main Report/Detail							
3.1	New Documents							
3.1.1	During Quarter 2 of 2024 25, there were no new documents approved and published.							
3.2	Reviewed Documents							
3.2.1	During Quarter 2 of 2024 25, the following documents were reviewed, approved and published:							
3.2.2	BA Practitioners Group Terms of Reference National Training Standard - Firefighting with UHPFS National Training Standard - Casualty Care							

3.3	In Development and current work
3.3.1	Work on the Training Function Framework has continued during Q2 and is nearing its final draft. It has been shared with all Instructors and two engagement sessions have been carried out.
3.3.2	The BAI Revalidation Framework has been renamed BAI Revalidation Procedure and is currently being updated. The supporting BAI Revalidation Assessment Form has had some minor updates and has been republished.
3.3.3	Three new Revalidation Assessment forms (TVI, CFBTI, UHPFSI) have been created and published and supporting procedures are close to completion.
3.3.4	The review of the Wholetime Instructors Working Hours and Leave Policy is complete and is progressing through the Corporate Board in Q3. A summary change report detailing the minor changes made to the policy has been produced for strategic leads.
3.3.5	The Training for Operational Competence (TfOC) review project is progressing and a deeper review of the TfOC policies and procedures has now commenced. It will focus on minor refinements to the TfOC framework and work, including planned sessions with stakeholders, will continue through Q4 and Q4. Following the completion of this, the TfOC Guidance Note will be finalised and published.
3.4	Under Review
3.4.1	There are currently seven documents under review (see Appendix A), four of which are Terms of Reference. The initial review of the FMT and TMT ToR has been completed and these will be brought for approval in Q3.
3.4.2	The Command Competence Review procedure remains under review for the longer term, and the Health Management of Compartment Fire Behaviour Training Instructors is now in the final stages of review and due to be brought for approval in Q3. The remaining document under review is the Training Function Governance Arrangements Guidance Note which has had further updates and is due to be taken to FMT in Q3.
3.5	Upcoming Review
3.5.1	Out of the set of documents that have the status “current”, there are no documents due for review in Q4.
4	Recommendation
4.1	The People Committee are asked to note the information included in this report.
5	Key Strategic Implications
5.1	Risk
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	Financial
5.2.1	Not applicable
5.3	Environmental & Sustainability
5.3.1	Not applicable
5.4	Workforce
5.4.1	Not applicable

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5.5 5.5.1	Health & Safety Not applicable
5.6 5.6.1	Health & Wellbeing Not applicable
5.7 5.7.1	Training Not applicable
5.8 5.8.1	Timing Not applicable
5.9 5.9.1	Performance Not applicable
5.10 5.10.1	Communications & Engagement Not applicable
5.11 5.11.1	Legal Not applicable
5.12 5.12.1	Information Governance DPIA completed No – nothing is being processed in relation to these proposed changes.
5.13 5.13.1	Equalities 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	Service Delivery Not applicable
6	Core Brief
6.1	Not applicable
7	Assurance (SFRS Board/Committee Meetings ONLY)
7.1	Director: Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate) Substantial /Reasonable/Limited/Insufficient
7.3	Rationale: 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. This method of recording and governance ensures that documents are reviewed according to schedule and also provides the information required to complete this report on a quarterly basis.
8	Appendices/Further Reading
8.1	Appendix A - Training Function Document Review Schedule
Prepared by:	Watch Commander Roger Crawford & Group Commander Bryan Nelson, Training Function
Sponsored by:	Alisdair Cameron, Area Commander Training Function
Presented by	Craig McGoldrick, Assistant Chief Officer Director of Training, Safety and Assurance

Links to Strategy and Corporate Values			
Training Function Vision & Strategy 2023-28 SFRS Strategic Plan 2022-2025 Outcome 6: People The experience of those who work for SFRS improves as we are the best employer we can be.			
Governance Route for Report	Meeting Date	Report Comments	Classification/
<i>Training Functional Management Team</i>	<i>6 November 2024</i>	<i>For Scrutiny</i>	
<i>People Committee</i>	<i>5 December 2024</i>	<i>For Information Only</i>	
<i>TSA Directorate Management Team</i>	<i>18 December 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	12/03/2024	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
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 Management Arrangement	Current	Approved	19/06/2024	01/05/2027
Terms of Reference	Clinical Governance Technical Working Group Terms of Reference	Current	Approved	10/04/2024	30/04/2025
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
Guidance	Training Function Governance Arrangements	Under Review	Approved		N/A



Report No: C/PC/58-24

Agenda Item: N/A FIO

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 DECEMBER 2024						
Report Title:		HEALTH AND SAFETY POLICY AND POLICY STATEMENT						
Report Classification:		For Information Only					<p style="color: red; text-align: center;">SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to Board Standing Order 9</p>	
1	Purpose							
1.1	To inform the People Committee of this year's Health and Safety Policy and Policy Statement following its annual review.							
2	Background							
2.1	SFRS has implemented a health and safety management system supported by Health and Safety Policy and a new management arrangement framework supporting its topic-specific management arrangements, improvement plans and assurance processes to ensure legal compliance and monitor performance, reviewed through established governance processes by senior management demonstrating continual improvement of our safety culture.							
2.2	The Health and Safety Policy is designed to provide a statement of intent, responsibilities, and arrangements to demonstrate how SFRS manages health and safety within SFRS and promote a positive safety culture by ensuring our Safety Value is embedded in everyone's thinking and actions.							
2.3	The implementation of the Health and Safety Policy is facilitated through the annual health and safety improvement plans.							
3	Main Report/Detail							
3.1	The Health and Safety Policy has been developed to ensure compliance with the content of the Health and Safety at Work etc. Act 1974 and all associated applicable legislation, regulations and guidance. The Policy has been updated to reflect best practice and Health and Safety Executive guidance.							
3.2	The Health and Safety Policy outlines: <ul style="list-style-type: none"> • A revised Policy Statement of intent covering the 5 key themes as outlined within the Safety and Assurance Strategy 2022-2026; • A new strategic Responsibilities section linking to our new Management Arrangement Framework and definitions in its supporting appendices, reducing duplication and content; • A new Arrangements Section covering the plan, do check and act approach, based upon Managing for Health and Safety HS(G)65 guidance; and • Acknowledgement of the development of assurance and audit processes as we transition towards ISO 45001 in accordance with the Safety and Assurance Strategy. 							

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3.3	This Health and Safety Policy applies to all SFRS premises and work activities, and the Policy Statement shall be displayed on all SFRS premises.
4	Recommendation
4.1	The People Committee are asked to note the content of the Health and Safety Policy and Policy Statement.
5	Key Strategic Implications
5.1	Risk
5.1.1	If the Health and Safety Policy and its arrangements are not fully implemented, the SFRS may not comply with its legislative responsibilities and duties.
5.2	Financial
5.2.1	There are no financial implications in respect to the annual review of the SFRS Health and Safety Policy.
5.3	Environmental & Sustainability
5.3.1	The annual review of the SFRS Health and Safety Policy has no environmental or sustainability implications.
5.4	Workforce
5.4.1	The Health and Safety Policy and its arrangements promote a positive safety culture by ensuring that our Safety Values are embedded in everyone's thinking and actions.
5.5	Health & Safety
5.5.1	The Health and Safety Policy and its arrangements ensure a robust health and safety management system that supports legal compliance and our transition to ISO 45001 compliance.
5.6	Health & Wellbeing
5.6.1	The Health and Safety Policy and Statement help support the health and well-being of SFRS staff through risk assessment and safe systems of work and health surveillance, where identified risks ensure safer workplaces and activities.
5.7	Training
5.7.1	There are no training implications in respect to the annual review of the Health and Safety Policy and Policy Statement.
5.8	Timing
5.8.1	The Health and Safety Policy and Policy Statement is reviewed annually in accordance with Health and Safety Improvement Plans.
5.9	Performance
5.9.1	The Health and Safety Policy arrangements are monitored, measured, analysed, and evaluated through event reporting and annual health and safety improvement plans.
5.10	Communications & Engagement
5.10.1	The Health and Safety Policy and its arrangements follow Safety and Assurance engagement and Governance Management Arrangements.
5.11	Legal
5.11.1	If the Health and Safety Policy and its arrangements are not fully implemented, the SFRS may not be compliant with its legislative responsibilities.

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5.12	Information Governance	
5.12.1	DPIA completed – Yes – The Health and Safety Policy has a supporting DPIA.	
5.13	Equalities	
5.13.1	EHRIA completed—Yes, the Health and Safety Policy has a supporting EHRIA, and no implications on equalities should be noted.	
5.14	Service Delivery	
5.14.1	Any impact on service delivery will be discussed through Safety and Assurance Improvement Groups (SAIG) prior to agreement and action.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	The Safety and Assurance Function continues to review arrangements and simplify content to increase knowledge and understanding. This approach is reflected in this year’s annual review of our Health and Safety Policy.
8	Appendices/Further Reading	
8.1	Appendix A: SFRS Health and Safety Policy.	
Prepared by:	Derrick Watson, Senior Health and Safety Adviser	
Sponsored by:	Jim Holden, Head of Safety and Assurance	
Presented by:	Craig McGoldrick, Assistant Chief Officer Director of Training, Safety and Assurance	
Links to Strategy and Corporate Values		
<p>Strategic Plan 2022-25</p> <p>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>		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>SA Functional Management Team</i>	<i>08 August 2024</i>	<i>For Recommendation</i>
<i>TSA Directorate Management Team</i>	<i>18 October 2024</i>	<i>For Information</i>
<i>Training, Safety and Assurance Board</i>	<i>10 October 2024</i>	<i>For Decision</i>
<i>Strategic Leadership Team</i>	<i>06 November 2024</i>	<i>For Decision</i>
<i>People Committee</i>	<i>05 December 2024</i>	<i>For Information</i>



Training, Safety and Assurance

SAFETY AND ASSURANCE

HEALTH AND SAFETY POLICY

Original Author/Role	Karen Lockhart – Head of Health and Safety
Date of Risk Assessment (if applicable)	N/A
Date of Data Protection Impact Assessment (if applicable)	N/A
Date of Equality Impact Assessment	Refer to EIA HS Policy
Quality Control (name)	Teresa Kelly – Deputy Head of Safety and Assurance
Authorised (name and date)	TBC
Date for Next Review	4 October 2024

Safety. Teamwork. Respect. Innovation.

VERSION HISTORY

Version	Change	Who	When
1.0	First version issued as Health and Safety Policy	Karen Lockhart, Head of Health, and Safety	05/06/2013
1.0	First version issued as Health, Safety and Wellbeing Policy	Health, Safety and Wellbeing	08/10/2014
2.0	Reviewed and updated	Health, Safety and Wellbeing	11/12/2015
3.0	Reviewed and updated	Health, Safety and Wellbeing	08/06/2018
4.0	Reviewed and updated	Health, Safety and Wellbeing	03/04/2019
5.0	Reviewed and updated, issued as Health and Safety Policy	Jim Holden, Senior HS Adviser	09/07/2021
6.0	Reviewed and updated, to include consultation feedback	Mark Penman, Senior HS Adviser	09/02/2023
7.0	Reviewed and updated	Annie Wakeham, HS Adviser; Derrick Watson, Senior HS Adviser	07/02/2024
8.0	Annual review	Jonathan Boal, HS Adviser	01/08/2024

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1. POLICY STATEMENT

The SFRS recognises that our staff are central to the delivery of our service. We are committed to sensible and proportionate health and safety management that recognises the need to balance operational risk against firefighter and public safety.

This policy is inclusive of and supports the content outlined within the [Safety and Assurance Strategy 2022-2026](#), through the following five themes:

1. Safety Culture

We Will: Implement a safety culture framework, providing visible leadership with defined role specific requirements to support the [safety value](#) of the SFRS.

We Aim to: Enhance a positive safety culture, challenge unsafe behaviours, be open to safety discussions and confident in reporting of health and safety events.

2. Safety Training

We Will: Implement a safety training framework, providing staff with training modules to be completed.

We Aim to: To increase safety awareness and understanding, ensuring our staff are competent within their roles.

3. Safety Communication and Engagement

We Will: Communicate with staff, at all levels, and their representatives, ensuring that open engagement co-operation and feedback.

We Aim to: Enhance our communication arrangements to include consultation and engagement with feedback to stakeholders.

4. Risk Management

We Will: Continue to identify risks and ensure sensible and proportionate arrangements to manage health and safety. Ensure staff at specific risk are not disadvantaged.

We Aim to: Develop and train staff to be competent in their role, identify risks and implement control measures, creating a safe working environment.

5. Continual Improvement

We Will: Develop support reviews and monitor the effectiveness of health and safety arrangements to maintain continual improvement and performance.

We Aim to: Enhance our arrangements through organisation learning and assurance processes, recognising safe behaviour and maintaining improvement through our HSIP.

Signature (Chief Officer):

Signature (Chair of Board):

Date:

Date:

2. INTRODUCTION

The Scottish Fire and Rescue Service (SFRS) is committed to the continual improvement and compliance with its legal duties under the Health and Safety at Work Etc. Act 1974, and other supporting regulations, to ensure the safety of our staff and others who may be affected by our activities in the communities we serve.

3. SCOPE

To achieve this, SFRS has implemented a health and safety management system supported with frameworks and topic specific management arrangements, improvement plans and assurance processes to ensure legal compliance. Performance is monitored and reviewed by senior management through established governance processes ensuring continual improvement of our safety culture.

This Health and Safety Policy and all associated arrangements are applicable to all SFRS employees, young people and volunteers, regardless of gender.

4. STAFF AND FIREFIGHTER SAFETY

The SFRS recognises that all our staff are central to the delivery of our service and that operational incidents present the highest risk environment. Whilst there is a degree of foreseeable risk, it is acknowledged that each incident will have its own specific hazards and associated risks due to unique and unforeseeable environmental factors. To manage this risk to firefighters, the SFRS endorses and promotes the [Health, Safety and Welfare Framework for the Operational Environment](#) and the safe person principles contained within. This is supported through robust arrangements for operational risk assessment.

5. RESPONSIBILITIES FOR HEALTH AND SAFETY

To ensure our commitment to health and safety is achieved, maintained and continually improved Health and Safety responsibilities are defined within this Policy and are expanded upon with the [Safety and Assurance Management Arrangement](#)

[Framework](#) and the [Safety and Assurance Engagement and Governance Management Arrangement](#) or within other topic specific health and safety management arrangements, where required.

5.1 The Board

The Board are responsible for overseeing the strategic direction and effective management of health and safety within the SFRS. This will result in the promotion of a positive safety culture that ensures effective management and continual improvement of health and safety whilst fulfilling our Safety Value.

The Board shall ensure that health and safety is given the necessary due attention when making board decisions, scrutinise health and safety performance, provide support, guidance and hold the Chief Officer to account on health and safety matters.

5.2 Chief Officer

The Chief Officer is legally responsible for the discharging of SFRS duties under the Health and Safety at Work, etc. Act 1974 and ensuring competent health and safety advice is provided to the Service by suitably trained professionals. The Chief Officer can delegate responsibilities, as required, whilst remaining accountable for the actions and decisions taken.

The Chief Officer will determine and resource the strategic direction of health and safety throughout the Service, detail the SFRS organisational structure through which this Health and Safety Policy and all associated arrangements are implemented. Promote a positive safety culture by ensuring our Safety Value is embedded into everyone's thinking and actions.

5.3 Deputy Chief Officer(s)

In the absence of the Chief Officer, the Deputy Chief Officers become responsible for discharging SFRS legal health and safety duties.

5.4 Strategic Leadership Team (SLT)

All SLT Directors and Assistant Chief Officers (ACOs) are responsible for the development of a positive safety culture within the SFRS and ensuring that our Safety Value is integrated into all SFRS business processes and key decision making.

SLT members shall ensure the availability of resources to meet the requirements of this Health and Safety Policy, all associated arrangements; and visibly demonstrate commitment to effective health and safety through the promotion, implementation and monitoring of management arrangements, improvement plans, and the effectiveness of any controls implemented.

SLT members will scrutinise management information and recognise any areas of good practice, improvement and oversee continual improvement by leading by example, undertake staff engagement, inspections, and assurance reviews. This determines the effective application of the health and safety management system and legislative compliance.

5.5 Training Safety and Assurance Board (TSAB)

The TSAB serves as the primary forum through which the SFRS Safety Value is promoted and measured, assisting the Chief Officer in the discharge of their health and safety responsibilities, determining the strategic direction of health and safety matters, operational readiness, effectiveness, monitoring health and safety performance and seeking endorsement from and advising the SLT on current or emerging risk, best practice and identifying areas for improvement.

5.6 Director of Training, Safety and Assurance

The Director of Training, Safety and Assurance is the Service's Safety Champion, has a delegated duty to act on behalf of the Chief Officer in relation to health and safety matters and is the nominated chair of TSAB.

The Safety Champion is responsible for promoting and monitoring the continual improvement of the Health and Safety Policy and all associated arrangements to ensure the effective management of health and safety, ensuring that the Board and SLT are advised of aspects of health and safety performance, and promoting a positive safety culture in accordance with our Safety Value.

5.7 Director of People

The Director of People has a delegated duty to provide effective health surveillance as identified through risk assessment for all relevant staff.

5.8 Head of Safety and Assurance

The Head of Safety and Assurance Function is deemed to be the SFRS 'competent person' and is the service lead for Health and Safety and Operational Assurance.

5.9 Strategic Managers (Heads of Function, Area Commanders and Department Managers, etc.) and Supervisory Managers (Group Commanders, Station Commanders, etc.)

Strategic Managers and Supervisory Managers are responsible for promoting, resourcing, implementing and monitoring the Health and Safety Policy and all associated arrangements to ensure the effective management of health and safety within their area of responsibility.

To achieve this, they will appoint Safety and Assurance Co-ordinators (SAC), Safety and Assurance Liaison Officers (SALO) and Deputy SALOs who will ensure health and safety is integrated into all management processes, decisions and monitor performance and compliance ensuring continual improvement, and promote a

positive safety culture, through inspection, discussion, consultation, and engagement with staff in accordance with our Safety Value.

5.10 Premises Responsible Persons

Premises Responsible Persons (PRP) have responsibility for the implementation of Health and Safety Policy and all associated arrangements within SFRS premises. PRPs are also responsible for the sharing of the outcomes of these arrangements with separate groups, co-occupants, contractors, and visitors occupying the same premises.

5.11 Safety and Assurance Function

The Safety and Assurance Function's principal aim is to develop, implement and maintain a health and safety management system, based on the plan, do, check and act model set out in the Health and Safety Executive's guidance: Managing for Health and Safety (HSG65). This management system will develop and implement Safety and Assurance Frameworks, Management Arrangements and supporting documentation to ensure legal compliance, best practice and promote a positive health and safety culture for all SFRS staff.

The Function will continue to develop our assurance processes from implementation, review, and organisational learning to assure effectiveness and help develop an annual Health and Safety Improvement Plan, as we transition towards ISO 45001 in accordance with the [Safety and Assurance Strategy](#).

5.12 Safety and Assurance Co-ordinators (SAC)

SACs have delegated authority from the Strategic Manager for overseeing the implementation of the Health and Safety Policy and associated arrangements and completion of Health and Safety Improvement Plans (HSIP) and health and safety actions from the National Safety and Assurance Board.

5.13 Safety and Assurance Liaison Officers

SALOs are nominated Department Manager / Group Commander level with specific health and safety duties and are responsible for facilitating the implementation of this Health and Safety Policy and all associated arrangements, event investigations and HSIPs, and promoting a positive safety culture within their area of responsibility.

5.14 Employees

All SFRS staff are responsible for taking reasonable care of their own health and safety and of other persons who may be affected by their acts or omissions. By complying with management arrangements, reporting safety events, raising concerns to and engaging with management which will contribute towards our positive safety culture in accordance with our Safety Value.

5.15 Trade Unions

The SFRS is committed to working in partnership with employees and will engage, collaborate, and consult with Trade Union Representatives. Communication of health and safety matters will be through established governance and engagement arrangements.

The SFRS will provide facilities and assistance to Safety Representatives to enable them to perform their functions in accordance with the [Health and Safety Representatives Management Arrangement](#).

6. HEALTH AND SAFETY ARRANGEMENTS

To ensure the health and safety of our staff, visitors and contractors, the SFRS has established this Health and Safety Policy and associated arrangements to mitigate risk within the activities we undertake within our workplaces and the committees we serve.

To ensure the effectiveness of these arrangements, the SFRS have implemented a plan, do, act and check approach, based upon Managing for Health and Safety HSG65 guidance.

This SFRS Health and Safety Policy is supported by frameworks, management arrangements, generic and technical risk assessments, emergency arrangements and associated documents created to establish a robust health and safety management system designed to ensure minimum legal compliance.

With the aim of achieving a positive safety culture, legal compliance and best practice, the Safety and Assurance Function will consult with Directorates and Service Delivery Areas to produce bespoke annual HSIPs. These will be developed from identified risk-based priorities, changes in legislation, best practice, assurance reviews and lessons learned, setting realistic, measurable, and achievable key objectives in consultation with Trade Unions. Implementation of HSIPS will be monitored and progress recorded through a formalised meeting structures defined in the [Safety and Assurance Engagement and Governance Management Arrangement](#).

To maintain continual improvement, identify good practice, assess our safety culture, and evaluate SFRS compliance with statutory duties, a series of self-compliance standards, surveys, support reviews, assurance and performance reports have been implemented. Assurance and audit processes are in development as we transition towards ISO 45001 in accordance with the [Safety and Assurance Strategy](#).

The Health and Safety Department will continually communicate, consult and encourage participation with our staff, risk owners and interested parties. We will monitor and analyse changes in legislation, legal precedence and best practice in both health and safety and sector specific guidance to maintain currency of our arrangements. We will participate in audits conducted by external bodies, such as the His Majesty's Fire Safety Inspectorate (HMFSI) and/or regulators such as the Health and Safety Executive.

The Operational Assurance Department will continue to conduct debriefs, undertake audits of identified incidents and emerging trends that have potential impact on operational activity and capture any internal and external operational learning.

7. REVIEW

The SFRS is fully committed to continual improvement of health and safety performance. This Policy will be subject to review annually or as a result of:

- Changes to existing or introduction of new legislation or technology;
- Changes to organisation of the SFRS;
- Significant learning following implementation of SFRS health and safety arrangements or outcomes of major accident investigations;
- At the request of the HSE; and
- As a result of emerging research or guidance relating to SFRS health and safety matters.

All records of revisions to the Policy and Arrangements will be retained for future reference and subject to audit as required.

8. FURTHER INFORMATION

Please contact the [Health and Safety Department](#) for further information.

9. ASSOCIATED DOCUMENTS / REFERENCES

[Equality Human Rights Impact Assessment – Health and Safety Policy](#)

[Health and Safety Policy Statement](#)

[Health and Safety Representatives Management Arrangement](#)

[Our Values](#)

[Safety and Assurance Engagement and Governance Management Arrangement](#)

[Safety and Assurance Strategy 2022-2026](#)

[DCLG, Fire and Rescue Authorities: Health, Safety and Welfare Framework for the Operational Environment, 2013](#)

[HSE, Managing for Health and Safety \(HSG65\), 2013](#)

[Health and Safety at Work etc. Act 1974](#)

[Management of Health and Safety at Work Regulations 1999](#)

DRAFT



Report No: C/PC/57-24

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 DECEMBER 2024						
Report Title:	SAFETY AND ASSURANCE DOCUMENTS FORWARD PLANNING SCHEDULE						
Report Classification:	For Information Only	Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee with an update regarding the management of Safety and Assurance documentation up until the end of quarter 2 (Q2) 2024/25 in accordance with our Functional Plan.						
2	Background						
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.						
3	Main Report/Detail						
3.1	The Liaising with the HSE Management Arrangement (MA) was republished using the new MA Template. Additions included new procedural flow charts, supporting the enhancement of guidance on workplace inspections and the powers of inspectors while still achieving an overall reduction of content.						
3.2	The Safety Training and Safety and Assurance Strategy and its three supporting Frameworks, Safety Culture, Safety Training, and Safety and Assurance Communications, have all undergone further development during an engagement session of the Safety and Assurance Function Management Team. Each of the draft Frameworks will be transferred to Action Plans instead. Once finalised, they will progress through additional engagement and consultation.						
3.3	The Health and Safety Legal Register, Management Arrangement Framework and the Lone Working MA all received minor amendments to support the introduction of Worker Protection Act 2023 which came into effect on the 26 th of October 2024. The LCMS Lone Working module will also be updated to reflect these changes.						
3.4	A brand-new Provision and Use of Work Equipment Regulations (PUWER) LCMS module has been drafted and published in LCMS. The module aims to raise awareness of PUWER and its requirements for assessing work equipment and ensuring all equipment is fit for its intended purpose. The new module also has additional guidance on completing PUWER Assessments and is aimed at members of User Intelligence Groups.						

3.5	A new all staff Manual Handling Induction Module has also been drafted and passed through the MSK Group for consultation prior to development by Training into a new interactive LCMS programme of learning. As with PUWER separate guidance has also been included to support the development of Manual Handling Assessments. This brings training content up to date and reflective of current guidance and best practice.
3.6	The Manual Handling LCMS content is expected to finish development, approval and publication during Q3.
4	Recommendation
4.1	The People Committee is asked to note the progress against the 5-year rolling Management Arrangement tracker up until the end of Q2, 2024/25 which is also reflected in our SA Functional Plan.
5	Key Strategic Implications
5.1	Risk SFRS fails to maintain the currency and robustness of its safety and assurance management system without frequent periodic reviews, as detailed in this report.
5.2	Financial 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	Environmental & Sustainability There are no environmental and sustainability implications for developing, maintaining, and monitoring these processes.
5.4	Workforce Safety and Assurance continue to monitor the progression of actions in line with Health and Safety Improvement Plans and in partnership with our business partners.
5.5	Health & Safety 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 Requirements (ISO 45001)
5.6	Health & Wellbeing There are no health and wellbeing implementations for developing, maintaining, and monitoring these processes.
5.7	Training 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	Timing Safety and Assurance MAs 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 revisions subject to changes in legislation, guidance, best practice, or outcomes of event investigation outside this 5-year review cycle on a risk-based approach.
5.9	Performance A periodic review of our Health and Safety legal register and guidance review process will assist SFRS in maintaining its health and safety management system effectively and support possible ISO 45001 Requirements.
5.10	Communications & Engagement The high level of compliance should be included in future health and safety communications as part of SA Communication Framework.
5.11	Legal If Safety and Assurance Policies, Frameworks, and supporting arrangements are not maintained or fully implemented, the SFRS may not be compliant with its legislative responsibilities.

5.12	Information Governance 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	Equalities 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	Service Delivery 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.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	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.
8	Appendices/Further Reading	
8.1	Appendix A: Safety and Assurance Documents Forward Planning Schedule.	
Prepared by:	Derrick Watson, Senior Health and Safety Adviser	
Sponsored by:	ACO Craig McGoldrick, Director of Training, Safety and Assurance	
Presented by:	Jim Holden, Head of Safety and Assurance	
Links to Strategy and Corporate Values		
Strategic Plan 2022-2025: 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.		

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Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>05 December 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	Complete	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	Complete	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	Final draft	Conducted during review				Awaiting internal consultation feedback
Support Review and Audit Management Arrangement (Withdrawn from iHub)	Major review and republication	2022-23	First draft					Scheduled for review in Q3
Contaminants MA (Carry-over)	New	2023-24	Third draft	Conducted during review				Development ongoing
Liaising with the HSE MA	5 Year Review	2024-25	Complete	Conducted during review	Aug SA FMT	N/A	26/08/24	Republished on the iHub
Safety and Assurance Strategy 2024-27	Review	2024-25	Second draft	03/09 SA FMT Workshop				Preparing for Governance
Safety Culture Framework	New	2024-25	Final draft	03/09 FMT Workshop	Aug SA FMT	N/A		Action plan to be merged with Strategy
Safety and Assurance Communications Framework	New	2024-25	First draft					Action plan to be merged with Strategy
Safety and Assurance Training Framework	New	2024-25	First draft					Action plan to be merged with Strategy

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Health and Safety Policy	Annual Review	2024-25	Complete	Conducted during review	Oct TSAB	N/A		Working through Governance (now at SLT)
Health and Safety Policy Statement	Annual Review	2024-25	Complete	Conducted during review	Oct TSAB	N/A		Working through Governance (now at SLT)
Confined Spaces MA	5 Year Review	2024-25	Awaiting First Draft			N/A		Review commencing Nov
Mobile Elevated Work Platforms MA	5 Year Review	2024-25				N/A		Q4
Station Audit MA	5 Year Review	2024-25				N/A		To be merged into Support Review and Audit Management Arrangement
Working with Young Persons MA	5 Year Review	2024-25	N/A	Aug SA FMT	Oct SA FMT	N/A	24/10/24	MA withdrawn and content merged with Risk Assessment MA
Working with Volunteers MA	5 Year Review	2024-25	Final Draft	Conducted during review		N/A		Review commencing Oct
Working at Height MA	5 Year Review	2024-25				N/A		Q4
Control of Contractors MA	5 Year Review	2024-25				N/A		Q4

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