



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

Working together for a safer Scotland

**PUBLIC MEETING – SERVICE DELIVERY COMMITTEE**

**WEDNESDAY 28 MAY 2025 @ 1000 HRS**

**PORTLETHEN TRAINING CENTRE, PORTLETHEN,  
ABERDEEN, AB12 4RR / VIRTUAL (MS TEAMS)**

**AGENDA**

**1 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: THURSDAY 25 FEBRUARY 2025  
(attached)**

*T Wright*

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

**6 ACTION LOG**

*Board Support*

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

**7 COMMITTEE STATEMENT OF ASSURANCE (attached)**

*T Wright*

*The Committee is asked to approve the attached report.*

**8 SERVICE DELIVERY**

**8.1 Service Delivery Update (attached)**

*A Watt*

**8.2 Local Senior Officer Performance Overview (verbal)**

*A Wright*

*The Committee is asked to scrutinise these attached reports.*

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

**OFFICIAL**

**9 INSPECTIONS/AUDITS**

- 9.1 Update from HM Fire Service Inspectorate (*attached*) *HMFSI*

*The Committee is asked to scrutinise the attached report.*

**10 SERVICE DELIVERY PERFORMANCE REPORTING**

- 10.1 Quarterly Performance Report for Q4 2024/25 (*attached*) *A Watt*

*The Committee is asked to scrutinise the attached report.*

**11 SERVICE DELIVERY RISK REGISTER**

- 11.1 Risk Update Report (*attached*) *A Watt*

*The Committee is asked to scrutinise the attached report.*

**12 FIRESTORM REPORT UPDATE (*attached*)**

*A Watt*

*This report is for information only.*

**13 ELECTRICAL INFRASTRUCTURE WORKING GROUP PRESENTATION (*attached*)**

*J Henderson/  
S Nesbit/  
A Buchan*

*This report is for information only.*

**14 FORWARD PLANNING**

- 14.1 Committee Forward Plan (*attached*) *T Wright*  
14.2 Items for Consideration at Future IGF, Board and Strategy/Information and  
Development Day meetings (*verbal*) *T Wright*

**15 REVIEW OF ACTIONS**

*Board Support*

**16 DATE OF NEXT MEETING**

Thursday 21 August 2025

**PRIVATE SESSION**

**17 OPERATIONAL LEARNING – FRONTLINE UPDATE:  
BREADALBANE STREET, EDINBURGH (*attached*)**

*C McGoldrick*

*This report is for information only.*

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**SCOTTISH**  
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## **PUBLIC MEETING – SERVICE DELIVERY COMMITTEE**

**TUESDAY 25 FEBRUARY 2025 @ 1020 HRS**

**CONFERENCE ROOM, MOTHERWELL COMMUNITY FIRE STATION, AREA  
HEADQUARTERS, DELLBURN STREET, MOTHERWELL, ML1 1SE / VIRTUAL (MS TEAMS)**

### **PRESENT:**

Tim Wright, Chair (TW)  
Madeline Smith (MS)

Andrew Smith (AS)

### **IN ATTENDANCE:**

Andy Watt (AW)	Deputy Chief Officer
David Farries (DF)	Assistant Chief Officer, Director of Operational Delivery
Craig McGoldrick (CMcG)	Assistant Chief Officer, Director of Training, Safety and Assurance
Jonathan Henderson (JH)	Assistant Chief Officer, Director of Prevention, Protection and Preparedness
Richard Whetton (RW)	Head of Governance, Strategy and Performance
Chris Fitzpatrick (CF)	Business Intelligence and Data Services Manager (Item 10.1 only)
John Joyce (JJ)	HMFSI
Jim Quinn (JQ)	Area Commander, Local Senior Officer Lanarkshire (Item 7.1 only)
Marysia Waters (MW)	Head of Corporate Communications (Items 11 & 12 only)
Carol Wade (CW)	Information Governance Manager (Items 11 & 12 only)
Chris Casey (CC)	Group Commander, Board Support Manager
Heather Greig (HG)	Board Support Executive Officer
Iona Milne	Business Support Executive / Minutes

### **OBSERVERS**

None

### **1 WELCOME**

- 1.1 The Chair opened the meeting and welcomed those present and participating via MS Teams.
- 1.2 Those participating via MS Teams were reminded to raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question. This meeting would be recorded for minute taking purposes only.

### **2 APOLOGIES**

- 2.1 Angelina Foster, Board Member  
Paul Stollard, Board Member  
Robert Scott, HMFSI

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

- 3.1 The Committee agreed there were no items to be taken in private.

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

4.1 There were no declarations of interests.

#### **5 MINUTES OF PREVIOUS MEETING: 26 NOVEMBER 2024**

5.1 The minutes were agreed as an accurate record of the meeting. The word 'instant' within bullet point 4 of paragraph 11.1 should be amended to read 'incident'.

5.2 MS queried paragraph 13.1.2 in relation to the Risk item. It was confirmed that Risk was a standing item on the agenda but would be considered as necessary for each meeting.

5.3 **The minutes of the meeting held on 26 November 2024 were approved as a true record of the meeting subject to the above amendment.**

#### **6 ACTION LOG**

6.1 There were no outstanding actions on the action log.

#### **8 SERVICE DELIVERY**

##### **8.2 Local Senior Officer Performance Overview**

8.2.1 Due to technical issues and the delayed start of the meeting, agenda item 8.2 was taken at this juncture to enable JQ to attend other commitments.

8.2.2 JQ provided a verbal overview regarding Local Senior Officer (LSO) Performance in the Lanarkshire area and highlighted the following:

- JQ is the Area Commander for Lanarkshire which has 8 wholtime stations and 11 on call stations and covers 2 Local Authority areas.
- Good relationships with both North and South Lanarkshire Chief Executives.
- JQ, alongside a Police Scotland representative, Chairs and Co-Chairs the Strategic Leadership Board in North Lanarkshire. An outcome of this was a collaborative approach to water safety across Lanarkshire.
- The LSO team were keen to progress innovation.
- There were setbacks to the document conversion work in 2017, but this was now back on track and the team were looking at the document suite.
- 3 priorities for the LSO were On Call, Home Fire Safety Visits (HFSV) and introduction to the realistic training programme.
- A HFSV referral pathway in the Lanarkshire area has been produced which is now being rolled out across the Service.
- Realistic training programme ensures there is a realistic training space in a relaxed environment which also enables multi agency exercises to be undertaken.
- Innovation is key throughout the whole Service.

8.2.3 The Committee queried the amount of flexibility available to explore innovation. JQ advised that it had improved with support from the new Strategic Leadership Team who have asked LSO teams to look at areas that can be improved.

8.2.4 The Committee asked how innovation at a local level is percolated through the rest of the Service. JQ advised that structures are in place and it is disseminated through these processes. JQ provided an example of where innovation was rolled out.

8.2.5 The Committee asked how JQ liaised with other LSOs. JQ advised that the LSO's within the West Service Delivery Area attend fortnightly meetings where discussions take place to discuss good practices etc.

8.2.6 The Committee asked how JQ ensures the wider Service are made aware of innovative ideas that can be taken forward. JQ advised these would be captured through the LSO meetings.



- 8.2.7 The Committee noted the good partnership relationship and asked for further information around that. JQ advised that a meeting takes place every 4 weeks with Local Authority leads, Police Scotland and NHS where partners can discuss any challenges that they are facing and provide support to ensure initiatives such as the Wishaw event can be implemented.
- 8.2.8 DF noted that the Service recognised the need for innovation and highlighted the work undertaken around the realistic training environment which had now been rolled out across the Service.
- 8.2.9 The Committee asked how the Service makes sure that conversations with partners are taking place. RW advised there is a lot going on and there is an annual report that has been produced which highlights a summary of the significant volume of work that is undertaken. The Committee noted the time and effort that goes into making those partnerships. JH advised that conversations need to be made at all levels.
- 8.2.10 With regards to the partnership report and having to summarise the work ongoing, AW advised that conversations required to be held on how to use the data in regard to performance. RW advised that there is an audit recommendation in relation to this which relates to the CSET system. The intent is to improve the capture process to reach a richer narrative.
- 8.2.11 The Committee enquired as to the approach taken to maintain existing relationships when an LSO is replaced. JQ advised that partner organisations recognised the need to maintain positive relations and these were continued through the weekly meetings and regular conversations that take place.
- 8.2.12 With regards to mental health in the community, the Committee asked if JQ considered the role of the Service was evolving. JQ believed that recognition of mental health issues was improving and was an area of focus. JQ noted the mental health champions within the Service who were intrinsic to the organisation and the impact of fire risk and prevention. AW advised that work was ongoing around trauma to ensure that staff were prepared to deal with these types of incidents and this was being monitored through the People Committee. JH advised that this work was evolving and conversations were taking place with partner organisations.
- 8.2.13 DF thanked JQ for his contributions over the years ahead of his impending retiral.
- 8.2.14 **The Committee scrutinised the report.**

## **7 INSPECTIONS/AUDITS**

### **7.1 Update From HM Fire Service Inspectorate**

7.1.1 JJ presented the report to the Committee to provide an update on HMFSI inspection and reporting activity. The following key points were highlighted:

- HMFSI currently has 3 ongoing inspections. The findings of these reports will be issued in summer and autumn 2025.
- The Chief Inspectors Plan would be published in April 2025.

7.1.2 The Organisational Culture report is due to be published in summer 2025 however the Chief Inspectors Plan referred to a publication date of December 2025 which the Committee queried. JJ confirmed the Organisational Culture report is anticipated for summer 2025 and would confirm the anticipated publication date for the Chief Inspectors Plan.

- 7.1.3 The Committee noted the external stakeholder interviews carried out in relation to the North Service Delivery Area (SDA) inspection and asked who took part in the interviews and if it had been the same for all the SDA inspections. JJ confirmed that it had been the same for all the SDA inspections and advised that a range of stakeholders had been interviewed such as local authorities, police, coast guard etc.
- 7.1.4 The Committee noted Group Commander Lynne Gow, who was seconded to HMFSI had returned to the SFRS and asked if HMFSI were able to carry out the inspections due to this. JJ advised that HMFSI have the capacity to deliver what has been set out in the Chief Inspectors Plan and thanked the SFRS for allowing secondments to HMFSI.
- 7.1.5 **The Committee noted the report.**
- 7.2 HMFSI Inspection Action Plans Update
- 7.2.1 RW presented the report to the Committee providing an update on the following action plans:
- 7.2.2 Firefighting in High Rise Buildings  
At the last meeting there was one outstanding action which related to the standard operating procedure for high rise which is now closed. The overall action plan is now blue and complete.
- 7.2.3 Climate Change Impact  
One remaining action which related to the delivery of vehicles, at the previous meeting it was proposed to close. Action plan now blue.
- 7.2.4 Contingency Planning for Industrial Action  
The outstanding action related to an exercise of plans and was proposed to close the action.
- 7.2.5 East Service Delivery Area  
No actions have been completed in the last period, the one remaining action is related to RAAC which has been discussed at previous meetings. Overall, the action plan rating is green.
- 7.2.6 West Service Delivery Area  
Action 17 changed to amber due to a delay as a result of conflicting work priorities with a new timeline proposed. Action 20 marked green; however, it is linked to a long-term piece of work within the Service. A timeline due date has been proposed to change it to September 2026. Action 21 review of national recruitment standards and terms and conditions is progressing and marked green but is a long-term piece of work. Action 27 tactical ship firefighting has moved to amber due to a slip in the original timescale. A new timescale has been proposed.
- 7.2.7 The Committee asked what the Service's responsibilities were in relation to areas of water and shipping incidents. DF advised UK waters were not classified as SFRS area and only become involved in ship firefighting when a vessel is alongside land. DF explained why action 27 was developed and advised there were a different set of circumstances if it is within a military establishment.
- 7.2.8 Regarding ferries, DF confirmed that once a ferry sets sail from port is it no longer SFRS responsibility. DF noted that there was ongoing work around lithium ion battery technology and as part of this SFRS have a responsibility to assist agencies for them to be as safe as possible. SFRS are in dialogue with ferry operators to look at what the plans would be and how they would take a vessel into SFRS jurisdiction.

7.2.9 Regarding action 20 the Committee noted the revised due date would be September 2026 and asked if there were any milestones where if sufficient progress had been made, the action could be closed off. AW advised there were a number of actions that could be closed off rather than leave them open for an extended period of time. RW advised that he and CF had met with the HMFSI team around the issues of process and have agreed a new part of the process in terms of data flow and date capture. The BI team will be the point of contact rather than local contacts which will be easier in terms of quality control. RW and HMFSI would meet next week to discuss whether the process can be adjusted slightly to make it easier for HMFSI to see what actions are being taken and that due regard is being given which could lead to the action being closed.

7.2.10 The Committee were content for the proposed actions to be closed and to extend the recommended due dates.

7.2.11 **The Committee scrutinised the report.**

## **8 SERVICE DELIVERY**

### **8.1 Service Delivery Update**

8.1.1 AW introduced the update report detailing relevant matters from an SFRS Service Delivery perspective, which comprised Operational Delivery, Prevention, Protection and Preparedness and Training, Safety and Assurance Directorates. The report covered the period from November 2024 to February 2025, albeit some issues may precede and extend beyond this period.

8.1.2 The Committee noted there were 9 candidates to commence the On Call migration course and asked if this would continue or if it was just a small pool of candidates and if the prep programme would be rolled out nationally. DF advised that migration was now a tool that would be used in terms of recruitment and would provide opportunity for existing employees to be transferred to areas of need and where gaps have been identified. DF advised the prep programme had been rolled out across the organisation however different areas were at different stages due to the various start dates of the process.

8.1.3 The Committee highlighted the critical faults linked to Airwave connectivity at Edinburgh Operations Control (OC) and queried if this was an area of concern or if it had been addressed. DF advised that the faults were not directly linked to Airwave and occurred within all OC's with peaks and troughs over time. It was noted that the system was working at full capacity and when work was being undertaken on the system it created faults, however, the faults had not escalated the risk and there was no indication that this was a long-term challenge. JH advised that teams were working together to make sure they understood the issues and did not make anything worse while implementing new systems.

8.1.4 The Committee enquired if a report would be provided in relation to the review of staff performance and working efficiencies within the Operational Intelligence Unit. JH advised that the review had been undertaken internally and completed in December 2024. The trial period had started in January 2025 however although there was no specific report available the review would inform future activities in this area to generate more efficiencies. In terms of assurances around this, JH advised that a formal review of the year would be undertaken at the end of 2025 and a further one in 2026 which would provide a full evaluation of how the team were performing and the efficiencies created by undertaking activities differently.

8.1.5 Regarding the activities application JH noted that data would be fed back through normal reporting structures for scrutiny by and assurance to the Committee.

- 8.1.6 The Committee asked for some clarification on the challenges around the impact of short term lets. JH noted the demand on resources and time to interpret the legislation and conversations were taking place with Scottish Government to convey the implications for the team. The Committee asked who was responsible for undertaking the work. JH confirmed it was the auditing officers. With regards to any increase in work around short term lets, JH noted the legislation was new however once it became more embedded as business as usual it should be more manageable moving forward. DF highlighted the pilot scheme being carried out within the Highland area to train some On Call firefighters to start the process of the short term lets. The Committee asked how the team educate those that are affected. JH advised that there was information on the SFRS website and support was offered to help individuals achieve what they need to do however as the Service was the enforcement body against the legislation it was the responsibility of the duty holder/owner to comply with legislation.
- 8.1.7 The Committee noted there had been multiple lithium-ion incidents in the same area and enquired how the incident debrief cascaded through and if it would potentially lead to asking Scottish Government for additional regulation. JH advised that the teams have visited the site multiple times in the last 10 years and issued notices of improvement which the site had followed up on and were for the large part compliant with the elements required. From an SFRS perspective it was considered that the Service were doing all that could be done. AW advised that an electrical infrastructure group had been established and was currently in the research phase. CMcG highlighted the Operational Assurance procedure.

8.1.8 **The Committee scrutinised the report.**

*(C Fitzpatrick joined the meeting at 1135hrs)*

**9 SERVICE DELIVERY PERFORMANCE REPORTING**

9.1 Quarterly Performance Report for Q3 2024-25

- 9.1.1 AW presented the quarterly performance report for quarter 3 of 2024-25.
- 9.1.2 The Committee asked for assurance around the growing incident type pattern and requests for resources in relation to KPI30 Assist other agency incidents and KPI31 Effect entry/exit incidents. CF noted that KPI31 included call outs to assist with medical responses and incidents involving suicide. CF added that incidents of this type could be recorded by one crew as an assist other agency, whereas another crew may record it as a medical response. It was noted that incidents of this nature had increased significantly since 2009/10 and particularly during the period when the Service was involved in the Out of Hospital Cardiac Arrest trials.
- 9.1.3 The following key points were highlighted:
- 60% of all calls received were interagency calls (40% originate from Scottish Ambulance Service (SAS) and 20% from Police Scotland (PS)) compared to 15% and 16% respectively in 2009/10.
  - 35% of all calls received originated from public landlines or mobile telephones compared to 57% in 2009/10, however the number of calls received had increased with the time of day an influencing factor rather than day of the week.
  - For every 1,000 incidents recorded, there were 40 fatalities.
  - Average of 100 casualties were recorded per 1,000 interagency incidents.
  - The noted increases were being absorbed within workloads but demonstrated the changing role within communities.
  - Started to deliver effective entry training and working with partners to understand what this looks and feels like and the relevant skill set required.
  - SFRS may be deploying resources to non-traditional incidents and recording them under this category.

- RW highlighted that this sits within demand management within public services and that he and CF were starting to consider this area in terms of horizon scanning and would form part of the Digital, Data and Technology (DDaT) work however it would require resource and data.

9.1.4 Regarding KPI14 the Committee noted the rising response times within the West and queried the reason for this. DF considered that a number of complex factors could contribute to this however the situation was being monitored. JH advised that when previously attending UFAS calls these would be in built up areas and the response times would be good however taking those calls out of the system can naturally lead to increased response times. AW advised that there has been an increase in wildfires, flooding and severe weather incidents which could also have an effect on response times. CF agreed and advised that although response times appear to be increasing within the West the response times are reporting around 8 minutes whereas response times within the North were reporting at 10 minutes, therefore rurality was a factor. CF noted this was a UK wide issue and the Home Office was unable to pinpoint what was driving the increase in response times. RW shared the statistics from the research undertaken by the Home Office around this.

9.1.5 **The Committee scrutinised the report.**

*(C Fitzpatrick left the meeting at 1215 hrs)*

9.2 Unwanted Fire Alarm Signal Report

9.2.1 JH presented a report to the Committee to provide an update on the progress against the work plan and give an overview of performance following the implementation of the new Automatic Fire Alarms (AFA) response model. The following key points were highlighted:

- Prior to 2023 there were approximately 28,000 UFAS incidents attended which equated to 31% of operational activity. Since the changes this now equates to 18%.
- When the policy was implemented, the goal was to achieve a 15% reduction however a 54% reduction has been realised with around 35 UFAS calls now received per day compared to 78 previously.
- This report reflects the last 12 months of work and is not a final report.

9.2.2 The Committee asked for clarity on some of the percentages provided within the report and advised that some caution be given when headlining numbers. JH provided clarity.

9.2.3 With regards to technological signs of fire the Committee enquired if there was any sanction or additional training that could be provided to help identify this type of incident. JH advised that the policy was built around engagement and education and the SFRS work with those responsible to try and minimise calls and take appropriate action where legislation allows.

9.2.4 The Committee noted that there had been 9000 hours released that could be focused on training and asked if there were other activities being undertaken with this time. JH advised it was difficult to classify as there had been an increase in training and the quality of training however it had freed-up time to undertake further prevention based activities. The next step would be to undertake a more detailed/academic evaluation of activities. The Committee intimated that future initiatives should be clear on how benefits are measured.

9.2.5 The Committee asked if saving had been quantified. JH advised that the turn out for these incidents was around £300 per turn out which included crewing, fuel etc and there have been around 5000 less calls which equates to around £50,000. Looking at the pay budgets for On Call for the whole year there has been a saving of just over £1 million.



- 9.2.6 The Committee enquired if station level data had been captured around changes related to UFAS and if there were any developing trends or patterns. JH advised that station level data captured incident types however trends and patterns were dependent upon the area. It was noted that there was no significant impact from the UFAS changes to any particular station. With regards to how learning was capture, JH advised that it feeds into operational delivery through the performance reporting. JH noted this report was based on the end of the 12 month period and there was an expectation of a similar report in a further 12 months that would build on the next steps. JH referred to the recommendations contained within the report.
- 9.2.7 Regarding the peak times detailed within the report the Committee asked about any prevention activities connected to this. JH advised that the peak times were when there was higher electrical/cooking activity such as meal times and staff were engaging with care homes in order to try and reduce this. Care homes were high risk premises and received regular visits.
- 9.2.8 The Committee asked if the UFAS data was benchmarked with other services. JH advised he was one of the leads for UFAS in the National Fire Chiefs Council (NFCC). JH noted SFRS was a unique Service due to its size and received significantly more calls than other Services. It was noted that some Services were reluctant to expand into this work due to potential negative perceived impacts on their response times. There were Services at different stages but there was scope to learn from other Services.

9.2.9 **The Committee scrutinised the report.**

*(JH left the meeting at 1235 hrs.)*

**10 SFRS COMPLAINTS ANNUAL REPORT 2023/24**

- 10.1 CW presented the report to provide the Service Delivery Committee with the 2023/24 complaints annual report and highlighted the statistics within the report.
- 10.2 The Committee asked if the team monitor social media for complaints. MW advised that the corporate accounts managed by the Comms team were monitored however affiliated accounts were not at present as there were too many. This would be considered as part of the social media review to be undertaken later in the year.
- 10.3 The Committee enquired if the benchmarking piece with New Zealand would progress. CW anticipated that the benchmarking piece would be progressed.
- 10.4 The learning which had resulted from the driving themes was noted and the Committee asked if there were any other areas of learning that could be picked up from emerging themes. MW advised that trends were examined and provided an example.
- 10.5 In regard to benchmarking the Committee enquired if the Scottish Ambulance Service (SAS) had been considered. MW noted that SFRS would need to have decades of data to obtain the same amount of data that SAS had to be able to benchmark against systemic issues.
- 10.6 The Committee enquired if SFRS Board members ever had the opportunity to look over the complaints and if not, would this be feasible. CW advised that GDPR required to be taken cognisance of to ensure individuals were not identified from a particular complaint, hence including examples within the annual reports could be difficult. RW suggested a discussion with the Chair of the Board in terms of the annual review process.
- 10.7 **The Committee scrutinised the report.**



**11 SFRS COMPLIMENTS ANNUAL REPORT 2023/24**

11.1 CW presented the report to provide the Service Delivery Committee with the 2023/24 compliments annual report and highlighted the statistics within the report.

11.2 The Committee asked for assurance that compliments were passed to the relevant colleagues. CW advised that compliments received through the Information Governance team were passed to the LSO/Head of Function to pass to the relevant individual(s) and complimentary stories also appeared in the different staff communications.

11.3 The Committee asked if there were any additional measures than could be put in place to encourage compliments received being shared more widely. MW advised that stories were issued to local media, were included in the staff brief and posted on iHub. It was noted that work was ongoing to capture compliments received at station level via thank you cards etc, however, the challenge would be in capturing verbal compliments received by operational crews.

11.4 **The Committee scrutinised the report.**

*(M Waters and C Wade left the meeting at 1310hrs)*

**12 DRAFT PREVENTION STRATEGY**

12.1 As JH had left the meeting, the Chair proposed that Committee members send any feedback directly to JH.

**13 OPERATIONAL USE OF RESEARCH, DEVELOPMENT AND INNOVATION**

13.1 RW provided a presentation on Research, Development and Innovation (RDI) and a brief background on CivTech and examples of RDI activity within the Service.

13.2 The Committee asked how quickly an innovative idea such as smart helmets could be deployed and what the timeline would be. DF advised the research stage was important and being part of the NFCC was beneficial for contributing to developing new products. The timeline was not quick as testing was required and raised questions around whether the Service wanted to buy off the shelf or have input as to how the fire sector developed.

13.3 RW noted that the Service were being contacted by companies in relation to robotics and asking what solutions we would be interested in which had not happened previously.

13.4 The Committee were encouraged to see the prioritisation of innovation and future investment in it.

13.5 With regards to innovation social development becoming business as usual, RW advised that there is a strong sense of desire from colleagues across the Service and this would be embedded through providing structure and opportunity. RW highlighted that London Fire Brigade had recently started to build in elements of data literacy into the firefighter job description.

13.6 **The Committee noted the presentation.**

**14 SERVICE DELIVERY RISK REGISTER**

**14.1 Risk Update Report**

14.1.1 AW presented a report to the Committee containing the identified Directorate risks and controls aligned to the business of the Committee. The following key points were highlighted:

- A new risk (PPP05) which was in relation to the risk of an insufficient level of qualified fire engineers. Control measures to address this were included within the paper.
- SD001 has 3 control actions in red due to timing. These were around the New Mobilising System which was progressing well, the implementation of the DSE1000 which was progressing and almost complete and the control action around disaster recovery system with a solution currently being worked on.

**14.1.2 The Committee scrutinised the report.**

**15 FORWARD PLANNING**

**15.1 Committee Forward Plan**

**15.1.1** The following items were added to the forward plan:

- Marmot to be added tentatively for 12 months' time.

The following items would be removed from the forward plan:

- UFAS to be removed as a standing agenda item.
- XVR

**15.1.2 The Committee noted the forward plan.**

**15.2 Items for Consideration at Future Integrated Governance Forum, Board and Strategy/Information and Development Day Meetings**

**15.2.2** There were no items for consideration.

**16 REVIEW OF ACTIONS**

**16.1** CC confirmed that there were no formal actions recorded during the meeting.

**17 DATE OF NEXT MEETING**

**17.1** The next meeting is scheduled to take place on Wednesday, 28 May 2025.

**17.2** There being no further matters to discuss, the public meeting closed at 1340 hours.

## SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



**SCOTTISH**  
FIRE AND RESCUE SERVICE  
Working together for a safer Scotland

Report No: C/SDC/11-25

Agenda Item: 7

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	28 MAY 2025						
Report Title:	COMMITTEE STATEMENT OF ASSURANCE 2024/25						
Report Classification:	For Decision	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to present the annual Service Delivery Committee (SDC) Statement of Assurance 2024/25, outlining evidence of how the Committee supports the effective functioning of the Board.						
<b>2</b>	<b>Background</b>						
2.1	The Statement of Assurance was introduced to support the Board's overall approach to reviewing the effectiveness of its committee operating structure, and further to this feeds into the Service's Annual Governance Statement. The statement has evolved from previous Value Added Statements, in line with best practice, as outlined within the Scottish Fire and Rescue Service (SFRS) Good Governance Framework.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	A paper outlining the governance review arrangements for the Board and its Committees was approved at its meeting on 24 April 2025.						
3.2	The annual Statement of Assurance of this Committee will be appended to the subsequent paper relating to the SFRS Annual Governance Statement which will, thereafter, form part of the SFRS Annual Report and Accounts.						
3.3	Further information on the effectiveness of the Board and its Committees during the year of 2024/25 will be reported to the SFRS Board in June 2025.						
<b>4</b>	<b>Recommendation</b>						
4.1	The Committee is requested to approve the contents of the annual Statement of Assurance 2024/25 as set out in Appendix A and provide feedback as necessary.						
<b>5</b>	<b>Key Strategic Implications</b>						
5.1	<b>Risk Appetite and Alignment to Risk Register</b>						
5.1.1	The Annual Statement of Assurance forms a key part of the Service's Assurance Framework, for which the risk appetite currently sits as Cautious.						
5.2	<b>Financial</b>						
5.2.1	The SDC scrutinises and evaluates Service Delivery across Scotland with regard to Best Value.						

5.3 5.3.1	<b>Environmental &amp; Sustainability</b> There are no environmental and sustainability implications arising from this report.
5.4 5.4.1	<b>Workforce</b> The SDC scrutinises the resources and capabilities required for effective Service Delivery.
5.5 5.5.1	<b>Health &amp; Safety</b> This report highlights the contribution towards improving the operational Health & Safety of frontline staff.
5.6 5.6.1	<b>Health &amp; Wellbeing</b> There are no Health & Wellbeing implications arising from this report.
5.7 5.7.1	<b>Training</b> There are no training implications arising from this report.
5.8 5.8.1	<b>Timing</b> This report will support the SFRS Annual Governance Statement which will be presented to the Board as part of the Annual Report and Audited Accounts for 2024/25.
5.9 5.9.1	<b>Performance</b> Information contained within this report deems that there are no significant gaps in the performance of Service Delivery.
5.10 5.10.1	<b>Communications &amp; Engagement</b> This report provides an opportunity for SDC members to review the contents and provide feedback prior to its submission to the Board on the arrangements for reviewing the effectiveness of the Board and its Committees.
5.11 5.11.1	<b>Legal</b> Production of this report is consistent with Scottish Fire and Rescue Service (SFRS) Committee arrangements and generally accepted principles of good corporate governance as described in the SFRS Good Governance Framework.
5.12 5.12.1	<b>Information Governance</b> DPIA completed <del>Yes</del> /No. No DPIA was required for this paper as it contains no personal information.
5.13 5.13.1	<b>Equalities</b> EHRIA completed <del>Yes</del> /No. If not applicable state reasons. Covered by the SFRS Corporate Governance Arrangements 2025 EHRIA.
5.14 5.14.1	<b>Service Delivery</b> This report highlights the effective contribution that the SDC provides within SFRS Board and Committee governance arrangements, in relation to Service Delivery.
<b>6</b>	<b>Core Brief</b>
6.1	Not applicable.

OFFICIAL

<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Richard Whetton, Head of Governance, Strategy and Performance
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.3	<b>Rationale:</b>	Effective governance arrangements relating to the Board and its Committees have been embedded in SFRS governance structures for a substantial number of years and are reviewed regularly. The annual Statement of Assurance allows for the Committee to outline evidence of its effectiveness.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A – Change Committee Annual Statement of Assurance 2024/25	
<b>Prepared by:</b>		Heather Greig, Board Support Executive Officer / Tim Wright, Chair – Service Delivery Committee
<b>Sponsored by:</b>		Tim Wright, Chair – Service Delivery Committee
<b>Presented by:</b>		Tim Wright, Chair – Service Delivery Committee
<b>Links to Strategy and Corporate Values</b>		
This links to all seven outcomes of the SFRS Strategic Plan 2022-25.		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Service Delivery Committee</i>		<i>28 May 2025</i>
		<i>For Decision</i>



## **Service Delivery Committee**

### **Annual Statement of Assurance**

#### **2024/25**

#### **1 Purpose**

The purpose of this statement is to give an overview of the value added and assurance sought by the Service Delivery Committee over the period April 2024 – March 2025, in its role as a Committee supporting the work of the SFRS Board. The statement forms part of the annual review of effectiveness of the Board and its committees and is incorporated into the Service's Annual Governance Statement.

#### **2 Background**

The Service Delivery Committee was formed in April 2017 and serves to provide assurance to the Board, via the Chair of the Committee, on the ongoing safety, risk management, performance and quality management of business-as-usual operations. The Chair of the Committee reports directly to the Board with the minutes of Committee meetings presented at Board meetings, along with a verbal update report on Committee business. Additionally, the Chair is also a member of the Integrated Governance Forum which meets 4 times a year with the aim of co-ordinating committee and board work.

#### **3 Summary of the Committee's Work**

During the reporting period, the Committee has formally convened on 4 occasions and has continued to scrutinise the operational output of the Service and over the 12-month period has received and discussed papers on a wide range of operational subjects. The Committee continues its remit of visiting operational locations and meeting staff. This year has seen Committee meetings being held at Inverness, Perth, Galashiels and Motherwell. The on-site meetings are particularly useful to committee members as they provide opportunity to relate discussions to the reality of people, equipment and locations. Committee members value the time spent in discussion with operational staff members following these meetings.

This approach to bringing greater insight to local matters has been enhanced by the introduction of a specific section to the agenda where an LSO is invited to speak directly to the Committee. At each meeting, the members continue to receive a Service Delivery Update report, updating key points of work from across the Service Delivery Directorates and this has been reformatted to align more directly with the key areas of responsibility of the Committee.

Additionally, the Committee values the presence of the HMFSI representative at meetings and notes the continued and welcome presence of observers from the Representative Bodies as the Committee scrutinised the Service's response to the Fire Storm Report.



Specific examples of the Committee's wider work are:

- Assurance on Fire Safety Enforcement
- Incidents involving Recycling and Battery Storage
- The Response to the Grenfell II Report
- The Pilot Revised HFSV Approach

#### **4 Future Work Priorities of the Committee**

The Committee continues to fulfil its Terms of Reference and provides scrutiny and oversight of key operational initiatives, alongside business-as-usual activities.

We progressively develop our agenda to allocate sufficient time to discuss and explore substantive agenda items and that we maintain a balance of scrutiny across our key areas of focus as set out in the Terms of Reference – specifically safety and risk reduction, quality assurance, benchmarking and standards, performance and outcomes, and horizon scanning.

These Terms of Reference were reviewed in February 2025 at the annual governance workshop.

#### **5 Actions to Improve the Committee's Governance Arrangements**

In order to exercise continual quality improvement of Committee business and increase knowledge and understanding of members, it is intended to:

- Continue to have the ability to privately debrief any issues of administration, presentation or governance following any meeting.
- To hold subject-specific workshops, as and when necessary, to ensure the development of understanding on key issues.
- Meet regularly with relevant directors to continue to ensure high-quality input and alignment to Terms of Reference.
- Actively seeks to enhance and develop the reporting and monitoring material available to it, notably in the context of new KPIs and indicators emerging from the new SFRS Strategy.
- Report matters as necessary to the Integrated Governance Forum for discussion amongst other Committee Chairs.
- Have a close working relationship with the Strategic Planning and Change Committee to ensure a joined-up approach on common areas of interest.

**Tim Wright**  
**Chair, Service Delivery Committee**  
**May 2025**

## SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



SCOTTISH  
FIRE AND RESCUE SERVICE  
Working together for a safer Scotland

Report No: C/SDC/12-25

Agenda Item: 8.1

Report to:	SERVICE DELIVERY COMMITTEE						
Meeting Date:	28 MAY 2025						
Report Title:	SERVICE DELIVERY UPDATE REPORT						
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	<b>Purpose</b>						
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) with an update on relevant matters from a Scottish Fire and Rescue Service (SFRS) service delivery perspective.						
2	<b>Background</b>						
2.1	The overall purpose of SDC is to scrutinise and challenge the safety, quality and performance of service delivery across Scotland, providing assurance to the SFRS Board.						
2.2	To support SDC in this role, this Service Delivery Update Report is presented by the Deputy Chief Officer at each meeting of the committee. This highlights key issues and workstreams from an SFRS service delivery perspective.						
2.3	For the purposes of the committee's role, and this update report, service delivery comprises of Operational Delivery, Prevention, Protection and Preparedness and Training, Safety and Assurance Directorates.						
3	<b>Main Report/Detail</b>						
3.1	Each Service Delivery Update Report provides details to SDC of key issues across SFRS' service delivery. Although these updates are provided at each quarterly meeting of the committee, some issues are longer-term and will span beyond the immediate timescale being reported upon.						
4	<b>Recommendation</b>						
4.1	SDC is invited to scrutinise the detail provided in Appendix A of this report.						
5	<b>Key Strategic Implications</b>						
5.1	<b>Risk Appetite and Alignment to Risk Register</b>						
5.1.1	A specific Service Delivery Risk Register is also provided to each meeting of SDC, which complements this update report.						
5.2	<b>Financial</b>						
5.2.1	Any financial implications associated with this report will be considered by the Strategic Leadership Team and SFRS Board where this is out with the normal budgetary arrangements for the Service Delivery, and Training, Safety and Assurance Directorates. Where appropriate, this will be done through the Service's Business Case process.						

5.3 5.3.1	<b>Environmental &amp; Sustainability</b> Although there are no direct environmental or sustainability implications associated with this report, SFRS is committed to protecting the environment from a service delivery perspective.	
5.4 5.4.1	<b>Workforce</b> Any workforce issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.	
5.5 5.5.1	<b>Health &amp; Safety</b> Any health and safety issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.	
5.6 5.6.1	<b>Health &amp; Wellbeing</b> Any health and safety issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.	
5.7 5.7.1	<b>Training</b> Specific details in relation to operational training are contained within Appendix A.	
5.8 5.8.1	<b>Timing</b> This report aligns to the committee's governance cycle and associated reporting period.	
5.9 5.9.1	<b>Performance</b> A specific Service Delivery Quarterly Performance Report is also provided to each meeting of SDC, which complements this update report.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> Where appropriate, issues highlighted within Appendix A are communicated internally and externally.	
5.11 5.11.1	<b>Legal</b> Any legal issues arising from matters outlined within Appendix A are managed in accordance with normal SFRS protocols in this regard.	
5.12 5.12.1	<b>Information Governance</b> DPIA completed Yes/No. If not applicable state reasons. A Data Protection Impact Assessment is not required as no personal information has been used in the creation of this report.	
5.13 5.13.1	<b>Equalities</b> EHRIA completed Yes/No. If not applicable state reasons. A specific Equality Impact Assessment is not required for this report, albeit these will have been undertaken where appropriate for relevant issues highlighted within Appendix A.	
5.14 5.14.1	<b>Service Delivery</b> This report provides an update to SDC on service delivery related matters.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Deputy Chief Officer
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/Reasonable/Limited/Insufficient

7.3	<b>Rationale:</b>	Due to the breadth and depth of activity being undertake across the Service the DCO can offer the Committee reasonable level of assurance that SFRS is fulfilling its statutory duties and meeting the commitments as set out within the Strategic Plan.	
8	<b>Appendices/Further Reading</b>		
8.1	Appendix A – Service Delivery Update.		
<b>Prepared by:</b>		Operational Delivery, PPP and Training, Safety and Assurance Directorates	
<b>Sponsored by:</b>		Andrew Watt, Deputy Chief Officer	
<b>Presented by:</b>		Andrew Watt, Deputy Chief Officer	
<b>Links to Strategy and Corporate Values</b>			
This report supports the SFRS Objectives of <i>Prevention, Response and People</i> , and all four Values of <i>Safety, Teamwork, Respect and Innovation</i> .			
<b>Governance Route for Report</b>		<b>Meeting Date</b>	<b>Report Classification/ Comments</b>
<i>Service Delivery Committee</i>		<i>28 May 2025</i>	<i>Scrutiny</i>

## SERVICE DELIVERY COMMITTEE HIGHLIGHT REPORT

SAFETY AND RISK REDUCTION	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
<u>Item</u>	<u>Commentary</u>
<b>Frontline Support</b>	<p>The Frontline Support team continues to support a range of internal partners with the issuing of Awareness Briefings, Service Delivery Alerts and Urgent Instructions. We have completed the rollout of Smoke Curtains, which are scheduled to become operational mid-2025 and have assisted Training, Safety &amp; Assurance (TSA) with the development of a Training for Operational Competence (TFOC) module to support the development of operational crews.</p> <p>A Methods of Entry strategy paper has been submitted and approved by the Operational Delivery Management Team (ODMT), this will see an investment in standardised equipment and procedures designed to reduce MSK injuries. We have also assisted TSA in the development of a training package</p> <p>Frontline Operations have now assisted Assets with the removal of all C6 foam and with its replacement of new Respondal Fluorine free foam concentrate. This ensure SFRS are compliant with the UK C6 ban which comes into force in July 2025. We are in the process of developing a strategy paper for both the mobilisation of satellite and bulk foam stocks and the procurement of new Co2 and Dry Powder extinguishers for all frontline appliances</p> <p>The new digital fireground radios rollout is complete. The Digital Project Board are now looking at digital readiness tasks and what needs finalised before the full switch over date is agreed. It was agreed that this would now go live nationally, and Shetland would now not be used within a trial as the Training Function are currently already in the process of trialling radios.</p> <p>Frontline Support are supporting the implementation of the SFRS Wildfire Strategy by liaising with TSA and the Scottish Wildfire Users Group (SWUG). Personnel are involved in the delivery of Technical Training to Tier 2 and 3 Stations, developing a mobilisation arrangement and supporting assets with the additional purchase of suppression and All-Terrain Vehicle (ATV) equipment.</p>
<b>On Call Improvement Team</b>	<p>The On Call Improvement Team (OCIT) have significantly advanced the creation of a Bank Working Policy to support its use as a staffing tool for On Call appliances. Consultation commenced on this draft policy in late April. This will provide clarity on the use of the scheme as a staffing tool which will reduce risk to personnel and communities by enhancing On Call appliance availability, as well as reducing the risk caused by having different interpretations of the scheme being applied across the Service.</p> <p>The OCIT team supported colleagues in the People Function (Pay and Reward) with the creation and implementation of the RDS Terms and</p>

<p><b>Policy and Procedure Team</b></p>	<p>Conditions with particular regard being given to the Dual Contractor Policy. This ensures that that SFRS are compliant with its obligations under the Working Time Regulation 1998 and staff are appropriately rested and providing a balance approach to operational appliance availability.</p> <p>OCIT are supporting the People Function (Resourcing) to formalise arrangements for On Call to Wholetime Duty System (WDS) Migration in support of forecasted staffing needs. This has included an evaluation of the most recent On Call to WDS Transition course which concluded in Feb 2025 and included a management engagement session to support this process. Alongside the People team, OCIT are chairing the Migration Short Life Working Group to advance the required workstreams to embed Migration into SFRS policy.</p> <p><b>Fire Contaminants SOP – Implementation and Assurance</b></p> <p>Following the closure of the Service-wide consultation, the Fire Contaminants Standard Operating Procedure (SOP) is now live. Consultation feedback was reviewed collaboratively with the Contaminants Group and Chair, leading to a refined SOP that is currently being embedded across the Service. Feedback on implementation is being actively collated and reviewed by the Contaminants Subgroup to identify opportunities for continuous improvement.</p> <p>Workstreams since January have included:</p> <ul style="list-style-type: none"> <li>• Addressing residual concerns such as contamination during wildfire incidents, clothing worn beneath firekit, PPE doffing without shelter, shower access, and laundering of contaminated uniforms.</li> <li>• Continuing engagement around SOP integration to support implementation, with local area solutions being identified where appropriate.</li> <li>• Promoting SOP awareness and behavioural change through structured education and communication.</li> <li>• Investigating future methods for assessing contamination levels and developing practical mitigations.</li> <li>• Assurance activities for consistent SOP improvement are in progress with support from the Contaminants Subgroup.</li> </ul> <p>Support of the Service Delivery Review (SDR) Programme</p> <ul style="list-style-type: none"> <li>• Liaison with the SDR Team in follow up with previous data and modelling requests.</li> <li>• NFRS continue to actively represent the Ops Function in the Training Impact Assessment Tool Board.</li> <li>• Review of SDR data and modelling provided.</li> <li>• Review of options that were presented to the balanced room – consideration of impacts on Specialist Capabilities.</li> <li>• Liaison meetings with LSOs affected. 8 meetings with LSOs have taken place where options may present a potential impact on Specialist Capabilities.</li> <li>• Planned and co-ordinated a Workshops Day with the Operations Function Management Team and Capability Leads Workshop.</li> <li>• Work ongoing to collate feedback and learning from the Balanced Room.</li> </ul>
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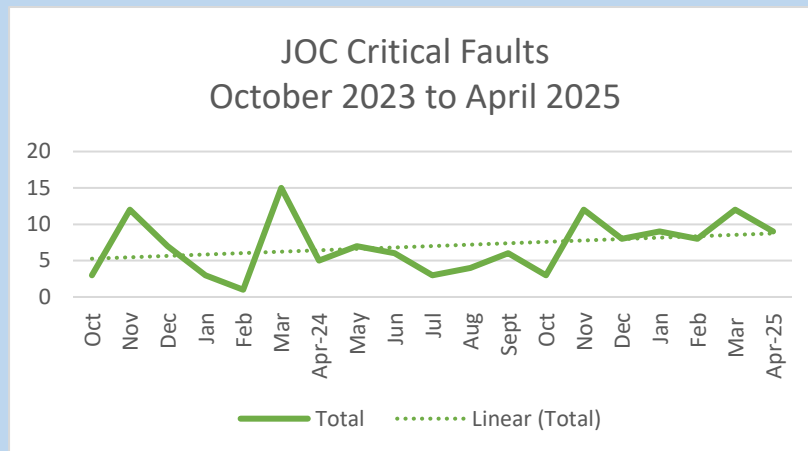
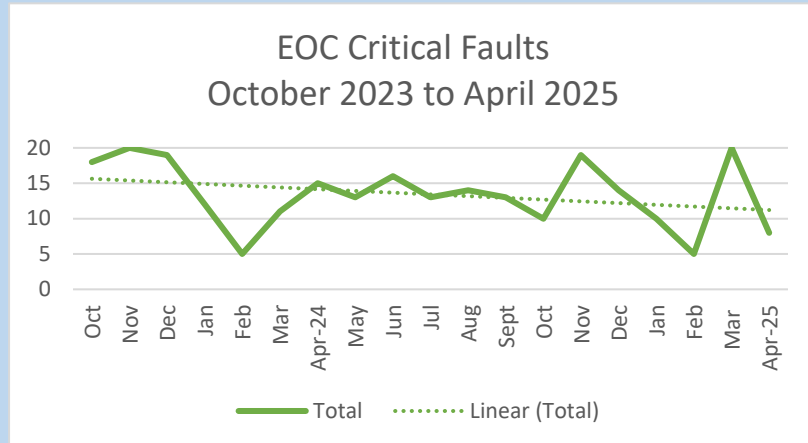
<b>National Fire Resilience Scotland (NFRS)</b>	<p>National Fire Resilience Capabilities:</p> <ul style="list-style-type: none"> <li>• Urban Search and Rescue (USAR) - A National Review of our USAR Response Model is currently underway led by our USAR Capability Lead and supported by NFRS.</li> <li>• Enhanced Logistical Support (ELS) - A National Review of our ELS/Command Support Unit (CSU) Response Model is currently underway led by our USAR Capability Lead and supported by NFRS. User Intelligence Group (UIG) to be established by Fleet for budgeted replacement of CSU Vehicles.</li> <li>• Detection, Identification and Monitoring (DIM) Vehicle Project: Liaison with DIM Lead, Glasgow Scientific Services and National Fire Chiefs Council (NFCC) DIM Lead to understand established NFCC Procurement Routes ahead of meeting with Fleet, Assets and Procurement Managers prior to UIG being undertaken.</li> <li>• Support with the establishment of Water and Flood Incident Manager role – this cadre of newly trained FDOs are designed to enhance SFRS' Water and Flood Capability by supporting Incident Commanders at Water and Flood incidents – expected to go live early in May 2025.</li> </ul> <p>Support of other SFRS Capabilities:</p> <ul style="list-style-type: none"> <li>• Continued Chair role of West Aerial Ladder Platform (ALP) Implementation Group. Kilmarnock's new ALP went on the run on 11 April. Coatbridge's is scheduled to go on the run w/c 2 June.</li> <li>• Support with the establishment of Marine Tactical Advisors. Our cadre of 12 x FDO Tactical Advisors (spread across our 3 SDAs) went on the run on 22<sup>nd</sup> March to enhance our Marine Response Capability.</li> </ul>
<b>SERVICE DELIVERY AREAS</b>	<b>NATIONAL</b>
<p><u>Item</u></p> <p><b>The Noisy Smoke Alarm</b></p> <p><b>Vehicle Accidents</b></p> <p><b>Breakfast Club Expansion</b></p>	<p><u>Commentary</u></p> <p>Clacks Fife &amp; Stirling (CFS) CAT team secured £1074 funding through cash for kids to print a further 300 copies of The Noisy Smoke Alarm. This is a playful informative book written by Community Advocate Evelyn Taylor to help children with Autism understand what to do when they hear a smoke alarm.</p> <p>East Safety Assurance Improvement Group (ESAIG) has supported the development of a new Low Speed Manoeuvre (LSM) Handbook in collaboration with Safety &amp; Assurance. East SDA has procured Low Speed Manoeuvre (LSM) Training Kits, these have now been delivered to stations and a schedule established to rotate them across all stations within the SDA.. Low Speed Manoeuvre (LSM) training also being rolled out to all 55 City of Glasgow (CoG) watches.</p> <p>Management teams across the North have secured an additional £9000 in funding from partners to support the expansion of community engagement programs such as Warm spaces, Brew with a Crew, out of hours Foodbanks and expanding the Breakfast Clubs, opening them up to include parents as</p>

<b>FireSkills</b>	<p>well as children. They have also partnered to signpost people to NHS Mental Health and Health and Well-being programs, along with the Cash-First initiative, supporting local authorities in striving to end the need for Food Banks, and providing money advice.</p>
<b>Young Farmers</b>	<p>NSDA Management teams have secured an additional £15000 from partners to ensure the continued provision of Fireskills courses across the area. These have been highly popular and successful across the north, with very positive engagement from students and elected members. This has been recognised by MSP Jacki Dunbar, who submitted a motion to the Scottish Parliament in recognition of SFRS staff delivering the Fireskills initiative.</p> <p>Young farmers are a group of people who we have not previously proactively engaged with, we attend a number of incident types at farms and felt that an open engagement session would be beneficial to both the young farmers and SFRS. The Scottish Association of Young Farmers Clubs (SAYFC) is a membership organisation is for young people who live and work in rural Scotland. It is Scotland's largest rural youth organisation, with over 70 Clubs throughout the country, for people aged between 14 and 30 years. Young farmers focus on developing young people and giving them access to a wide range of new opportunities and experiences. Hosting these evenings allowed SFRS to support the development of the young farmers and opened them up to potentially new experiences.</p>

QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
<u>Item</u>	<u>Commentary</u>
<b>On Call Improvement Team</b>	<p>OCIT supported the implementation of the RDS Terms and Conditions and supporting policies. This introduced standardised, national Terms and Conditions for our RDS personnel and removed legacy arrangements relating to pay, annual leave, drill nights, work activity and compliance with the Working Time Regulation 1998.</p> <p>OCIT drew several pilot/trials to an evaluated conclusion in April, including:</p> <ul style="list-style-type: none"> <li>• Local Practical Selection Tests (PST)</li> <li>• Pre Recruitment Engagement Programme (PREP)</li> <li>• Local Fitness Testing</li> <li>• Modular Task and Task Management (TTM)</li> </ul> <p>These evaluations particularly focused on the delivery of locally targeted programmes, whilst ensuring adherence to Service standards and quality assurance in regard to delivery and assessment.</p>

SERVICE DELIVERY AREAS	NATIONAL
<u>Item</u>	<u>Commentary</u>
<b>Staff Development</b>	<p>Implementation of further staff development in preparation for future processes. Collaborating closely with the Continual Improvement Development GC to develop a one-day session for 15 newly promoted Watch Commanders within the East SDA. The sessions have been created in conjunction with representation from all East LSO areas. The first session took place on April 28, 2025, with a catch-up day scheduled for May 2025.</p> <p>A Watch Commander Development seminar has also been held for WSDA area personnel who have been endorsed for career progression. Five (6) candidates attended following their success at application sift. A further session will be organised for the Crew Commander process during February with the date still TBC.</p>
<b>Appraisal Training</b>	<p>Has been successfully delivered to all Watch Commanders within the East SDA. Key focus was on setting direction, maintaining high standards and continuous improvement, with a clear understanding of SFRS Values, Mandatory Behaviours, Key Work Objectives, Unconscious Bias, Development Plans and Ready for Career Progression.</p> <p>The chosen delivery model involved a Station and/or Group Commander from each LSO Area leading a two-hour session via Microsoft Teams. MELSB and the City of Edinburgh collaborated to deliver joint sessions.</p>
<b>Station Audits</b>	<p>Station Audits have been conducted across all areas of the North SDA with a rolling timetable of visits in place running from April to March. All stations across PKAD, ACAM and Highland receive an annual visit with WIOS, due to the geography of the area, conduct a two-yearly rolling program of audits. These are recorded on the OARRS system and any improvements that are required are carried out locally with follow up visits programmed in to ensure that continuous improvement is undertaken</p>
<b>Testing &amp; Exercising</b>	<p>Over the last two quarters there have been 4 Testing and Exercising events within MELSB, these have all been based around BA Search and Rescue with one including Hazmat. A total of 3 Wholtime and 6 On-Call crews have been involved including 11 Firefighters within the Development Phase. The events were delivered by local BA Training Instructors supported by FDOs.</p> <p>Planning has commenced for the EWDAB annual Business Continuity Plan proving exercise to be held in June. This will incorporate a severe weather event with widespread power outages and will be attended by the Area Management Team and volunteers from stations, supported by the Civil Contingencies Officer cadre.</p> <p>As part of the ongoing training and development undertaken between SFRS and Capita FRS, crews from Helensburgh and surrounding on-call stations will attend HM Naval Base Clyde to participate in joint training. The training will involve the combined response to a simulated MSF fire in one of the accommodation units and aims to increase awareness of each other's capacity and capability.</p>

PERFORMANCE AND OUTCOMES																																																													
OPERATIONAL DELIVERY DIRECTORATE																																																													
OPERATIONS																																																													
Item	Commentary																																																												
On Call Improvement Team	<p>In order to monitor and measure the impact of the introduction of the RDS Terms and Conditions, Dual Contractor Policy and Wholetime Recruitment Guidance Note, OCIT are monitoring On Call Appliance availability and reporting to the Operational Availability Group (OAG) and On Call Strategic Co-Ordinating Group (OCSCG). This is being completed on the following basis to allow for scrutiny and action:</p> <ul style="list-style-type: none"><li>• Monthly</li><li>• Three month average (compared to previous quarter)</li><li>• Three month average (compared to same quarter from the previous year)</li></ul>																																																												
Policy and Procedure Team	<p><b>Document Conversion Project (DCP) – Phase Delivery</b></p> <p>The Document Conversion Project continues to deliver in line with the planned phased approach:</p> <ul style="list-style-type: none"><li>• <b>Phase 1 – All Incidents:</b> Successfully launched on 3rd January 2025, with associated legacy documents now rescinded.</li><li>• <b>Phase 2 – Fires and Firefighting:</b> Out for Service-wide familiarisation and confirmed to go live on <b>2nd June 2025</b>.</li><li>• <b>Phase 3 – Transport Incidents:</b> Drafting is in progress, with planned publication in <b>Q2 2025/26</b>.</li><li>• <b>Phase 4 – Hazmat:</b> Under development for release in <b>Q3 2025/26</b>.</li></ul> <p>The team continues to collaborate with stakeholders to ensure each phase delivers accessible, risk-critical information supported by clear governance and performance tracking.</p>																																																												
Operations Control	<p>The graphs below show the fault trend across all 3 OCs. It should be noted a new Interim Integrated Communication Control System (ICCS) became operational in all 3 OCs during March and April 2025. As anticipated, there was an initial spike in faults whilst the system beds into operational service.</p> <div><p>DOC Critical Faults October 2023 to April 2025</p><table><thead><tr><th>Month</th><th>Total</th><th>Linear (Total)</th></tr></thead><tbody><tr><td>Oct</td><td>10</td><td>10</td></tr><tr><td>Nov</td><td>16</td><td>10</td></tr><tr><td>Dec</td><td>9</td><td>10</td></tr><tr><td>Jan</td><td>7</td><td>10</td></tr><tr><td>Feb</td><td>6</td><td>10</td></tr><tr><td>Mar</td><td>7</td><td>10</td></tr><tr><td>Apr-24</td><td>15</td><td>10</td></tr><tr><td>May</td><td>7</td><td>10</td></tr><tr><td>Jun</td><td>8</td><td>10</td></tr><tr><td>Jul</td><td>15</td><td>10</td></tr><tr><td>Aug</td><td>16</td><td>10</td></tr><tr><td>Sept</td><td>10</td><td>10</td></tr><tr><td>Oct</td><td>9</td><td>10</td></tr><tr><td>Nov</td><td>17</td><td>10</td></tr><tr><td>Dec</td><td>9</td><td>10</td></tr><tr><td>Jan</td><td>15</td><td>10</td></tr><tr><td>Feb</td><td>10</td><td>10</td></tr><tr><td>Mar</td><td>14</td><td>10</td></tr><tr><td>Apr-25</td><td>7</td><td>10</td></tr></tbody></table></div>	Month	Total	Linear (Total)	Oct	10	10	Nov	16	10	Dec	9	10	Jan	7	10	Feb	6	10	Mar	7	10	Apr-24	15	10	May	7	10	Jun	8	10	Jul	15	10	Aug	16	10	Sept	10	10	Oct	9	10	Nov	17	10	Dec	9	10	Jan	15	10	Feb	10	10	Mar	14	10	Apr-25	7	10
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SERVICE DELIVERY AREAS		NATIONAL	
Item		Q4 23-24	Q4 24-25
<b>KPI's</b>			
	1. Total incidents attended	15935	12211 (-5206 from Q3)
	2. Total HFSV's	9683	3457 (-5390 from Q3)
	3. ADF casualties	117	110 (+36 from Q3)
	4. ADF fatalities	6	13 (+10 from Q3)
	5. On Call availability:		
	East total	67%	73% (+10% from Q3)
	North total	78%	78% (+8% from Q3)
	West total	80%	81% (+6% from Q3)
	<b>Commentary</b> 1. Significant reduction compared with previous Q. Likely to be heavily influenced by UFAS reduction arrangements. 2. The reduction in home safety visits is reflective of the recently implemented high risk-based approach, (quality rather than quantity).		

General	<p>3. In general, casualty figures remain consistent although there has been a spike when comparing the previous Q in 2024-25.</p> <p>4. Fatalities have seen an increase in both Q comparisons. This is being actively assessed through established review protocols, including collaboration with external partners.</p> <p>5. On Call appliance availability shows a positive trend. This may be attributable to the newly introduced On Call retainer bandings however further evaluation will be required.</p> <p>As referenced in other sections and previous SDC reports, improving performance continues to be a focus and priority for operational delivery staff, particularly stations and watches. This is being achieved by developing managers and raising general awareness regarding our statutory duties and why and how performance is reported locally and nationally. At the core of this is improving FF and Community Safety and its vital that our staff clearly understand their responsibilities and how they contribute to both. Good progress is being made which is demonstrated in recent improvements in several KPI's including Health and Safety statistics. Whilst this is positive, maintaining momentum is key and will require resource, time and capacity.</p>
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HORIZON SCANNING	
OPERATIONAL DELIVERY DIRECTORATE	
OPERATIONS	
<u>Item</u>	<u>Commentary</u>
On Call Improvement Team	<p>OCIT will monitor and measure the impact of the RDS Terms and Conditions and pay bandings over the short to medium term. This will inform any Policy review which takes place, as well as the identification of mitigation measures needed.</p> <p>OCIT will also provide support in the standardisation of Volunteer Duty System (VDS) Terms and Conditions as required.</p>
Policy and Procedure Team	<p>The ongoing trials that are currently the subject of evaluation will be concluded, with the resulting reports being progressed through the most appropriate governance route.</p> <ul style="list-style-type: none"> <li>• <b>Large Animal Rescue (LAR):</b> Scoping work is underway to assess SFRS's current LAR capabilities, with a view to establishing clear operational guidance and identifying training/resource needs through the creation and support of a LAR SNUG.</li> <li>• <b>Generic Risk Assessment (GRA) Review:</b> A full review of GRA content is being undertaken, with updates planned to align with each DCP phase and reflect evolving operational risks.</li> <li>• <b>Operations Control – DCP Alignment:</b> OC documentation is being reviewed, consolidated, and restructured to match the DCP format. A draft Policy and Operational Guidance (POG) covering <b>Call Handling and Incident Response</b> has been produced and will shortly be issued for SME review. Additional OC POGs, manuals and OP's are planned for future release.</li> </ul>



	<b>Governance Framework Development:</b> Work is underway to introduce a formal process on policy change within the Policy and Procedure team. This framework will improve coordination, tracking, and assurance across all Policy and Procedure workstreams and ensure robust governance of future procedural changes.
<b>SERVICE DELIVERY AREAS</b>	<b>NATIONAL</b>
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>Local Plans</b>	There is ongoing partner engagements relating to SFRS Strategy consultations and subsequent development of Local Fire and Rescue Plans. These discussions will also take cognisance of SDR and how outcomes could influence the development of local plans.
<b>Succession planning</b>	Careful planning is required to meet the current and identified retirement profile across many LSO areas. Since the review of projected vacancies for the most recent TFFFP intake, there has been significant movement following the WC/CC campaigns. There continues to be staffing challenges due to various factors.

SAFETY AND RISK REDUCTION	
PREVENTION	
Item	Commentary
<b>Safeguarding</b>	<p>Safeguarding training continues to be delivered to Wholetime Trainees and new Community Action Team members.</p> <p>The CSE function have developed a three-hour Safeguarding for Managers session to support Watch and Station Commanders within Prevention/CSE roles in the Service Delivery to meet their safeguarding responsibilities. A Quality Assurance exercise was also carried out over the reporting period.</p>
<b>FSSE</b>	<p>The Directorate delivered Fire Safety Support and Education (FSSE) training sessions in the first quarter of 2025 with the support of the Training and Development section. The training was delivered to 28 staff in Aberdeen, Newbridge and Cambuslang to ensure a spread of skills and knowledge across the country. This training will support areas to continue to deliver FSSE interventions with children and young people.</p>
<b>YVS</b>	<p>Stranraer YVS Scheme completed their three-year course and held a celebratory event to mark the closure of the unit.</p> <p>A new Scheme is currently being established in Sanquhar to continue the work of YVS within Dumfries and Galloway.</p>
<b>Youth Engagement</b>	<p>Drillground Supervision course has been created, working with Training and H&amp;S, and will be launched in May 2025 to support the delivery of practical elements of YVS and FireSkills.</p>
<b>Home Fire Safety Vists</b>	<p>The revised HFSV policy went live, February 2025. The new policy has introduced criteria for visits, utilises technology to record visits in real time, strengthens partner referrals (GDPR compliance) and promotes consistency in the delivery of the visit to householders.</p>
<b>Water Safety</b>	<p>A welfare support process for staff involved in Drowning and Incident Reviews (DIRs) has been introduced. Recognising the emotional impact of handling drowning cases, the new measures include a pre-meeting self-checklist, structured post-meeting support, and closer welfare monitoring for those leading multiple DIRs. This initiative aligns with the SFRS mental health strategy by promoting early intervention, protecting staff wellbeing, and building on the success of the DIR programme since its 2023 launch.</p>
PROTECTION	
<u>Item</u>	<u>Commentary</u>
<b>Strathclyde University Forensic Science Projects</b>	<p>SFRS Fire Investigation personnel are in discussion with Strathclyde University Forensic Science staff on how SFRS can support students with fire-related research projects in the coming year. This builds on a similar and very successful collaboration last year, which saw research projects involving emollient creams and UV light in detecting ignitable liquids.</p>

<p><b>Serious and Fatal Fire Learning Review Policy and Procedure</b></p> <p><b>Frontline Update</b></p>	<p>Research topics for this year's students will include thermal blocking and contaminants in run-off water from firefighting. FI management will look to explore opportunities to expand this collaboration to benefit FIOs and other staff groups.</p> <p>The Serious and Fatal Fire Learning Review Policy and Procedure went live, 01 April. This policy has replaced the Case Study and Case Conference Policy and Procedure and will give a quicker and more consistent feedback of pertinent key learning from certain fire incidents.</p> <p>Following a Level 4 incident in City of Edinburgh in March 2024, FIOs provided detailed information on the origin and cause, following significant research, which was included in an associated Frontline Update. This information briefed personnel about the risk associated with underfloor heating systems when not used in accordance with manufacturing instructions.</p>
<p><b>PREPARDNESS</b></p>	
<p><u><b>Item</b></u></p> <p><b>Hydrant Lid Lifters (Hydraulic)</b></p> <p><b>SFRS EWIG/SEPA BESS information</b></p> <p><b>Reinstating the RPA National Steering Group</b></p> <p><b>Fire Stations (Health &amp; Safety) - Contaminants Project</b></p>	<p><u><b>Commentary</b></u></p> <p>Hydrant Operatives are now trailing hydraulic hydrant lid lifters that have been recently purchased following the development of EIC and POWER assessments.</p> <p>The is a test of change as work continues towards efficiency and financial savings in relation to the repairs of defective hydrants and the safety of our personnel by preventing exposure to potential musculoskeletal injuries</p> <p>The SFRS Electrical Infrastructure Working Group (EWIG) have been working with SFRS stakeholders and SEPA to provide easy to access and consistent BESS information/guidance to developers and members of the public. Through this collaborative working, both SFRS and SEPA have published information within our external websites. The following links should be considered for sign posting when engaging with developers locally.</p> <p><a href="https://www.sepa.org.uk/regulations/waste/batteries/">https://www.sepa.org.uk/regulations/waste/batteries/</a></p> <p><a href="https://www.firescotland.gov.uk/businesses-and-landlords/battery-energy-storage-systems/">https://www.firescotland.gov.uk/businesses-and-landlords/battery-energy-storage-systems/</a></p> <p>Initial meeting being held on 29<sup>th</sup> April 2025 to reinstate RPA National Steering Group. This will ensure a standardised approach to the RPA process across the 3 RRP's moving forward.</p> <p>CAD plans have been created for all SFRS Fire Stations for H&amp;S Contaminates project. Plans indicating Red/Amber/Green locations for contaminants procedure were verified by Station Commanders &amp; LSOs</p>

<b>CAD Laptops &amp; peripherals</b>	New HP G11 ZBook laptops, home & desktop hubs and CAD mice were tested and delivered to CAD Team. OI Unit has conveyed its thanks to DDaT Services for an efficient update of key hardware and support throughout.
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<b>QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS</b>	
<b>PREVENTION</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>Safeguarding Training (pilot)</b>	Safeguarding training (pilot) for managers has been delivered to CATs across ESDA and the Community Safety Engagement (CSE) Team. Plans are in place to roll training out across all three SDAs later in the year. Training continues to be delivered to Wholetime Trainees and CATs.
<b>HFSV</b>	The CSE team are continuing with partnership engagement sessions, providing guidance and support for partners to assist with signing up to a Data Sharing Framework, ensuring that information shared between organisations is GDPR compliant. LSO Area staff have also attended the sessions and will continue to engage with partners. Feedback from partners and personnel has been positive.
<b>PROTECTION</b>	
<b>Joint Scottish Fire Investigation Training Facility</b>	<p>FIOs are working with partners in preparation for the next burn at the joint fire investigation facility at Portlethen. This burn, due to take place later in the year, will provide another opportunity for CPD for FIOs and colleagues from Police Scotland and the Scottish Police Authority who also attend fire investigations.</p> <p>This training scene is supported using Virtual Reality technology so that learning from a particular scene can be accessed by personnel who cannot undertake a physical inspection.</p> <p>The Protection Function has developed an e-learning module on Fire Engineering, now integrated into LCMS training packages for operational crews and Flexi Duty Officers. This activity aligns with key findings from the Grenfell Tower Inquiry and reinforces awareness of built-in fire safety features designed to protect both firefighters and the public. The module went live at the beginning of March and was incorporated into the TFOC for the fourth quarter.</p>
<b>Fire Engineering FDO Module</b>	An agreement has been secured with the University of Central Lancashire to enrol SFRS personnel onto their undergraduate B.Eng (Hons) Fire Engineering degree course. The course starts in September and is accredited by the Institution of Fire Engineers. Candidates are being short listed and four are expected to attend subject to suitability discussions. In the medium to longer term, this will build on existing capacity and resilience levels within the Fire Engineering section, mitigating the impact of any future leavers or promotions in this specialist area.

<b>Fire Engineering - Further Education Procurement</b>	Following the Grenfell Tower fire, the training standards for Protection Officer were revised across the UK. In response, the Scottish Fire and Rescue Service (SFRS) upgraded its foundation training to an SCQF Level 8 fire safety qualification.
<b>RPL for Fire Safety Enforcement</b>	To bring existing staff in line with this standard and mitigate potential legal challenges over competence, SFRS commissioned Recognition of Prior Learning (RPL) courses through CS Todd following a procurement process. The first of four courses was delivered in Q4, with 24 delegates successfully achieving the Level 8 award.
<b>PREPAREDNESS</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>Framework</b>	<p>The Preparedness Framework was launched on the 27<sup>th</sup> of March and provides the foundation in which the Function will deliver against the Prevention Strategy.</p> <p><a href="#">SFRS Preparedness Function Framework 2025-2028</a></p>
<b>Cultural Development Plan</b>	The <a href="#">Functional Cultural Development Plan</a> lays out how the team will be developed over the next three years and supported to ensure the Framework is delivered.
<b>Wholetime Access to Hydrant Management System (HMS)</b>	The Water Planning team have been working collaboratively with DaTS colleagues to identify the viability of the HMS being expanded for the use Wholetime stations in recording hydrant inspections outcomes. The team are now at a point where trials are to be held to test the concept of change and the HMS's functionality and capacity. During quarter 1 (2025/26), the water planning team will be identifying two wholetime station to assist with the trial.
<b>Analysing Resilience PDA</b>	Two cohorts of 12 students have commenced a Professional Development Award (PDA) in Analysing Resilience that is being delivered by New Lanarkshire College. Candidates were identified from LSO Areas and the Resilience team with the longer-term aim in creating a Resilience Champions Network that will support the delivery of Community Resilience.
<b>Business Continuity Institute (BCI) Training</b>	Four members of the Preparedness Function have undertaken BCI Good Practice Guide (GPG) courses. The aim of this development is to ensure that the development and implementation of the organisations BC Management System (BCMS) meets international recognised standard.

PERFORMANCE AND OUTCOMES	
<b>PREVENTION</b>	
<u>Item</u>	<u>Commentary</u>
<b>UFAS</b>	A 12-month review paper was submitted and delivered to SDB/C. The paper highlighted the positive impact the new policy has had and noted the wider impact on SFRS. The report also noted several future considerations which will form an Action Plan to be taken forward by the Service under Business as Usual.
<b>PROTECTION</b>	
<u>Item</u>	<u>Commentary</u>
<b>Fatal Fires</b>	<p>In the 2024–25 fiscal year, there were 37 recorded fire fatalities, with this figure potentially subject to reduction pending the outcomes of post-mortem examinations. This represents a decrease from 42 fatalities recorded in the 2023–24 fiscal year.</p> <p>Year to date, unfortunately there have been 5 fatal fires though pending postmortem results, this could be reduced to 3 that are directly attributed to fire as a cause.</p>
<b>Fire Investigation Test Burns</b>	<p>SFRS FIOs carried out a realistic test burn, with the support of TSA colleagues. This test burn was used to support the outcome of a Level 2 Fire Investigation and will be used as training material for the wider FI team.</p> <p>FIOs are also working to establish a working protocol with Glasgow City Council to procure items which can be used for future burns, either relating to specific investigations or as part of FI CPD.</p>
<b>FIO/FISD Engagement</b>	<p>FIOs have carried out engagement sessions on topics ranging from Fire Investigation input to the role of the Fire Investigation Search Dog. These inputs have been to a variety of audiences including operational crews, Police Scotland and Forensic Science students.</p> <p>The FISD team have also supported other engagement events including the Museum of Fire Brigade Heritage, SFRS Modern Apprenticeship event and SFRS Comms Safety Message project</p>
<b>Prosecutions &amp; Investigations - Update</b>	<p><u>Addiewell Prison</u> An interim report has been given to COPFS and recent meetings held to discuss evidence with a view to obtaining further direction on any future scope of the investigation.</p> <p><u>New County Hotel</u> All currently available evidence has been processed following additional resourcing provided to the Investigation Team. Ongoing discussion with Police Scotland will ascertain how further evidence contained within 4 computers can be shared with the SFRS investigation team for review. The</p>

	<p>team is also in dialogue with SFRS Legal Services to determine whether a report should be submitted to COPFS on a specific person of interest.</p> <p><u>Royal Infirmary of Edinburgh</u></p> <p>At a recent pre-trial meeting the judge unexpectedly ordered a 12-week postponement of proceedings regarding their appeal of an issued Enforcement Notice until 15 July 2025.</p> <p>At that hearing, parties must either confirm a resolution or clarify how the case should proceed, with no further procedural delays anticipated.</p> <p>A further meeting will be arranged shortly among operational representatives (no solicitors). A redraft of the Enforcement Notice has taken place following discussions with one of the major Dutyholders. SFRS Legal services have been extensively involved in this process.</p>
<b>PREPARDNESS</b>	
<u>Item</u>  <b>Expansion of Hydrant Operative's support</b>	<u>Commentary</u>  <p>Quarter 4 has seen the expansion of hydrant operative support to the areas of Newtonmore and Kingussie (Highland LSO Area). This expansion will provide additional support to the LSO area in the inspection and maintenance of hydrants within key areas.</p>

<b>HORIZON SCANNING</b>	
<b>PREVENTION</b>	
<u>Item</u>  <b>Activities Module</b>	<u>Commentary</u>  <p>A new ICT module has been created to support staff to record and report on CSE related activities. Directorate staff are working on guidance and supporting materials with the launch due in June 2025.</p>
<b>PROTECTION</b>	
<u>Item</u>  <b>Review of Fire Engineering Technical Support Procedure</b>	<u>Commentary</u> <p>The Fire Engineering and Technical Support (FETS) Procedure has been reviewed and updated to address the need for upskilling current personnel and ensuring they attain the necessary Fire Engineering qualifications to act as consultees for SFRS in relation to Building Warrant applications.</p> <p>The revised FETS Procedure is designed to reduce the increasing workload on the Fire Engineering Team by streamlining and standardising the process for receiving, reviewing, and responding to Building Warrant applications. It also aims to better utilise LSO Area Protection Officers who hold the appropriate qualifications.</p> <p>Information sessions on the updated procedure will be delivered throughout May, with implementation scheduled for 2nd June.</p>



<b>Auditing Officer - Job Evaluation</b>	<p>An Auditing Officer (AO) Job Evaluation engagement session is scheduled Friday 2 May. Following this session, formal consultation with UNISON and the SFRS Reward Team will commence to amend current job descriptions to allow AOs to be appointed under legislation.</p> <p>The objective is to transition all AOs into the revised role and associated pay grade by 1 July or as soon as is reasonably practicable thereafter.</p> <p>A dedicated Q&amp;A resource is now live to support staff through this process.</p>
<b>UFAS Training OC – Technical Signs of Fire</b>	<p>Training is being arranged with OC UFAS champions to equip OC staff with the confidence and knowledge to challenge callers who report technical signs of fire in premises. This is often stated by ARC personnel to trigger a full PDA. Currently, OC staff are hesitant to probe these claims due to a perceived lack of subject matter expertise.</p>
<b>PREPARDNESS</b>	
<b><u>Item</u></b>  <b>Significant Events</b>	<b><u>Commentary</u></b> <ul style="list-style-type: none"> <li>• POTUS visit, 2025</li> <li>• Commonwealth Games 2026</li> <li>• Tour de France, Grand Depart Edinburgh in July 2027</li> <li>• UEFA European Championships, Glasgow 2028</li> </ul>
<b>New Mobilising Systems (NMS)</b>	
<b><u>Item</u></b>  <b><u>NMS</u></b>	<b><u>Commentary</u></b> <p>Activities and workshops continue to be undertaken to support the build, configuration and refinement of the new ICCS and CAD systems. The NMS 'sandpit' environment is being used to gain familiarisation with the new system and to enable configuration activities. Strategies for both Training and Testing are being reviewed and detailed plans for each are being developed. The project remains on target to deliver the new ICCS by the end of December 2025.</p>

## SAFETY AND RISK REDUCTION

### TRAINING, SAFETY AND ASSURANCE DIRECTORATE

<b>OPERATIONAL ASSURANCE</b>	
<b><u>Item</u></b>  <b>Significant Incident</b>	<b><u>Commentary</u></b> <p>Storm Eowyn structured debrief conducted on the 31 March facilitated by Operational Assurance team on behalf of Deputy Chief Officer. Debrief report is in draft form and will be presented to SAFMT in June.</p>

<b>NFCC</b>	OA team have gathered information at the request of NFCC following the recent wildfires. This involved input from Operations control and SFRS Wildfire Tac Ads.
<b>TRAINING FUNCTION</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>FF Safety</b>	<p>Work has been progressing in conjunction with Assets to support the rollout of supplementary structural firefighting PPE and storage boxes with these having been delivered to Newbridge and further deliveries expected at NTC Cambuslang and Portlethen. CPD events for fire contamination have been scheduled for Training Centres.</p> <p>BA Set washing machines have been installed in three Training Centres and will contribute towards the reduction in contaminants.</p>

<b>QUALITY ASSURANCE, BENCHMARKING, AND STANDARDS</b>	
<b><u>TRAINING, SAFETY AND ASSURANCE DIRECTORATE</u></b>	
<b>OPERATIONAL ASSURANCE</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>ESDA Watch Commander OA Input</b>	Newly promoted watch commander cadre from East SDA development session held on the 28 April and 1 May 2025. OA provided input to approximately 30 WC on the purpose and expectations of OA at operational incidents and how they can contribute to operational learning.
<b>OA Documents</b>	OA GINs in process of being transferred to Management Arrangements.
<b>HMFSI OA Audit</b>	Draft report from HMFSI has been issued to Head of Function for feedback and will be published later in 2025.
<b>OA ICL 2 Input</b>	OA Team continue to provide input at ICL 2 development courses to ensure new Flexi duty officers are aware of their roles and responsibilities and the purpose of OA within SFRS
<b>25/26 Station Audit</b>	Station audit process for 25/26 is now live and documentation has been updated after consultation with LSO areas and Directorates. This has resulted in a more streamlined form with less duplication of content within.
<b>TRAINING FUNCTION</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>Review of National Training Standards</b>	A Training Standards Review Project has recently commenced which will deliver a systematic review of all SFRS Training Standards. This will focus on key elements such as accuracy, standardisation, legislative compliance, alignment to SFRS and Training Function Strategy as well as benchmarking, innovation and alignment with key stakeholders.

PERFORMANCE AND OUTCOMES														
TRAINING, SAFETY AND ASSURANCE DIRECTORATE														
OPERATIONAL ASSURANCE														
Item	Commentary													
Frontline Update	A frontline update on the Breadalbane Street incident has been published through internal comms with over 3000 views in the first week of its release.													
Case Study	MV Ultra Virtue Case study has been released by LED team and is now available on TfOC. This is following lessons learned from an incident debrief.													
TRAINING FUNCTION														
Item	Commentary													
Performance Reporting	Following the procurement of Workforce Pro to support the recording of organisational learning undertaken by support staff, it is expected to go live in June after completion of data impact assessments and further communications. This development will now provide a clear and reportable process across all staff groups in relation to mandatory learning/training.													
BA Recovery Plan	The BA Recovery Plan is continuing to progress, with BA, CFBT and Tactical Ventilation currencies showing improvement between Q1 and Q4 2024 25: <table><tr><td></td><td>Q1 24-25 Currency</td><td>Q4 24-25 Currency</td></tr><tr><td>BA</td><td>82%</td><td>91%</td></tr><tr><td>CFBT</td><td>71%</td><td>89%</td></tr><tr><td>TV</td><td>49%</td><td>75%</td></tr></table>			Q1 24-25 Currency	Q4 24-25 Currency	BA	82%	91%	CFBT	71%	89%	TV	49%	75%
	Q1 24-25 Currency	Q4 24-25 Currency												
BA	82%	91%												
CFBT	71%	89%												
TV	49%	75%												
Training Function Framework	The Training Function Vision and Strategy and supporting Training Function Framework have been published and the first two videos of a mini-series, presented by the ACO and DACO have been produced in conjunction with SFRS Comms.													

HORIZON SCANNING	
TRAINING, SAFETY AND ASSURANCE DIRECTORATE	
OPERATIONAL ASSURANCE	
<u>Item</u>	<u>Commentary</u>
Significant Event	A structured debrief will be carried out in due course following the recent spate of wildfires within Scotland.
Incident Debrief	OA Team have been requested to facilitate a structured debrief within the PKAD LSO area following an incident in Aberfeldy.

<b>TfOC Content</b>	OA Team are currently producing a storyboard to be available on TfOC for all supervisory managers to promote Operational Learning and feeding into OA processes.
<b>TRAINING FUNCTION</b>	
<b><u>Item</u></b>	<b><u>Commentary</u></b>
<b>XVR</b>	<p>The Training Function is continuing to explore and develop innovative and new ways of working and has procured an immersive learning environment software package, XVR. Throughout the last year, the Learning and E-Development and Incident Command teams have upskilled their personnel to operate the software and to identify where it can add value to current delivery methods.</p> <p>Work is currently underway to develop FDO training scenario(s) which will be delivered to all FDO duty groups across the Service and future work is planned to use XVR within Incident Command Level 2 and Level 3 courses.</p> <p>XVR technology is being integrated into the Training for Operational Competence modules and has been included in Low-Speed Manoeuvres and Marine incident Ultra Virtue training materials which are accessible to all Operational personnel.</p>
<b>Capital Investment</b>	<p>Work is continuing to deliver improvements to facilities and equipment in line with the Training Service Asset Management Plan. Construction of a new collapsed structure simulator at the NTC Cambuslang is expected to complete in June 2025 and will enable the delivery of additional types of Urban Search and Rescue training.</p> <p>Visits to other UK FRS, including Warwickshire, Durham and Darlington to benchmark BA facilities and inform development of SFRS facilities have been undertaken by the Training Function. These have provided opportunities to share information and have informed changes to some aspects of current construction projects, including some related to contaminants.</p> <p>The continued investment in BA training and the development of new, purpose-built training facilities at Perth Training Centre will significantly enhance firefighter safety by ensuring personnel are better prepared for complex and high-risk scenarios.</p>



# HM Fire Service Inspectorate

**Report to:** SCOTTISH FIRE AND RESCUE SERVICE, SERVICE DELIVERY COMMITTEE

**Date:** 28 May 2025

**Report By:** HM Fire Service Inspectorate

**Subject:** Routine report on HMFSI business

## 1. PURPOSE

1.1 To provide the Service Delivery Committee with an update on HMFSI inspection and reporting activity.

## 2. RECOMMENDATIONS

2.1 That the Committee notes the update from HMFSI.

## 3. ACTIVITY AND PROGRESS

### 3.1 Service Delivery Area Inspection

The North Service Delivery Area (SDA) Inspection fieldwork and analysis has now concluded, and the first draft of the report has been issued to the Service for formal consultation. Feedback from this process is due for return to HMFSI on 14 May 2025. Informal consultation with key SFRS stakeholders concluded on 7 May 2025. All consultation comments will be fully considered, and a final draft of the Inspection report will be prepared for laying in the Scottish Parliament on 25 June 2025.

### 3.2 Thematic Inspection Work

#### Organisational Culture

HMFSI are undertaking a thematic Inspection of Culture of SFRS. To date, Inspectors have interviewed SFRS policy owners, representatives from across all support directorates, station-based personnel, operations control teams, staff network groups and trade union representatives. A further series of MS Teams interviews were held with a randomly selected sample of individuals from across various functions of the Service. All of the interviews and visits sought views relating to organisational values, policies, procedures and training that support organisational culture. The inspection has now progressed to formal consultation phase with responses due back on 19 May 2025. The report is scheduled to be laid in the Scottish Parliament in June 2025.

## **Operational Assurance**

HMFSI are currently carrying out a thematic inspection of Operational Assurance within the SFRS as per the previously agreed outline. All scheduled fieldwork has been completed with report development and informal consultation ongoing. At the request of the Service, and following positive engagement, the consultation period has been extended and is now due to conclude by summer 2025. The final report is due to be published in the autumn of 2025.

## **Operational Training and Development**

HMFSI are currently initiating a thematic inspection of Operational Training and Development within the SFRS with the Inspection Outline consulted upon and agreed. HMFSI have engaged with SFRS managers to discuss further action as well as develop an interview and fieldwork schedule. The fieldwork is due to start in June 2025 with analysis, report development, and informal consultation due by winter 2025. The final report is due to be published in the Spring of 2026.

### **3.3 Additional Inspection Activity**

#### **Chief Inspector's Plan 2025-2028**

The Chief Inspector has a statutory obligation to publish an inspection plan outlining inspections scheduled, and information on how inspections will be carried out. Following a period of formal consultation, the Chief Inspector's Plan for 2025-28 was laid in Parliament in April 2025. The HMFSI Annual Operating Plan for 2025-26 has also been shared with key stakeholders and outlines areas of inspection scheduled to commence this year.

The Chief Inspector and his team propose focussing on three key areas: -

- Operational Training and Development
- Service Delivery, from the perspective of those working in corporate functions.
- Organisational Culture – Phase 2 – behaviour, discipline, grievance etc.

We will also consider the Service's planning and preparation for the 2026 Commonwealth Games and will produce a focussed report, in line with those published for previous events of this type.

**HM Chief Inspector Robert Scott QFSM**

**Date: 28 May 2025**



# SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



Report No: C/SDC/14-25

Agenda Item: 10.1

Report to:		SERVICE DELIVERY COMMITTEE						
Meeting Date:		28 MAY 2025						
Report Title:		SERVICE DELIVERY COMMITTEE QUARTERLY PERFORMANCE – Q4 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 href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
1	Purpose							
1.1	To provide members with the end year performance of <b>KPIs 1 – 21, 30 &amp; 31</b> for fiscal year 2024-25.							
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 (23 for Service Delivery) and 9 national indicators 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 Service Delivery Committee.							
3.2	Please note that KPI 6 - HFSV Conducted, KPI 7 - % High Risk HFSV and KPI 8 - % Partner Referral HFSV are not available this quarter. Work to enable reporting from the new Home Fire Safety Visit (HFSV) system has been progressing, although access to data has been delayed due to capacity constraints and conflicting priorities within Digital and Technology Services (DaTS) and the Business Intelligence team. The technical complexity of integrating the new cloud hosted data source into our existing on-premise data warehouse has contributed to delays, as there were challenges associated with establishing a secure and reliable data pipeline. This is now in place, and the BI team is currently undertaking data quality assurance and data modelling.							
3.3	Please note also that data for KPI 8 - % Partner Referral HFSV will not be complete for 2025-26 Q1 as there was a delay in launching The Partnership Portal for the new Home Fire Safety Visit System and suitable referral data for this KPI will not exist from Feb 2025 to the point the portal goes live.							

3.4	KPI 17 - Wholetime Availability was not provided prior to the paper submission deadline and is therefore not included in this report. We will include this data in the live report as soon as it is accessible.
3.5	As an interim measure (pre 2025 SFRS Strategy & PMF), any current KPI indicators with compliance, statutory or other legislative implications, are identified in <u>red underlined text</u> to assist their intended audience considering wider implications than just improving or deteriorating performance.
3.6	<p>The indicators identified in this report as pertinent to the requirement of 3.5 are –</p> <ul style="list-style-type: none"> <li>• <b>9 - Audits Completed</b> – SG Fire and Rescue Framework states “<i>SFRS should deliver its statutory duties by providing information, guidance and advice and fire safety audits of relevant premises</i>”.</li> <li>• <b>17 - Wholetime Availability</b> – 5WDS Collective Agreement Statement states “<i>The 5WDS is managed with the aim of maintaining agreed confidence levels</i>”.</li> <li>• <b>18 - OI Inspections</b> – OI Policy and Guidance states “<i>SFRS has a statutory obligation under the Fire (Scotland) Act 2005, which directs the SFRS to have arrangements in place for obtaining information required or likely to be required for fires and other emergencies</i>”.</li> </ul>
3.7	<p>Exceptional variation:</p> <p>NA</p>
3.8	<p>Deteriorating (long-term):</p> <ul style="list-style-type: none"> <li>• 11 - % High Severity ADFs</li> <li>• 14 - Median Response Time to Life Risk Incidents</li> <li>• 15 - Median Call Handling Time for Life Risk Incidents</li> </ul>
3.9	<p>Improving (long-term):</p> <ul style="list-style-type: none"> <li>• 1 - Non-domestic Building Fires</li> <li>• 2 - Deliberate Primary Fires</li> <li>• 10 – ADFs</li> <li>• 12 - Total Incidents</li> <li>• <u>18 - OI Inspections – NO TARGET</u></li> <li>• 20 - Hydrant Inspections</li> <li>• 21 - UFAS Incidents</li> </ul>
3.10	<p>Not changing:</p> <ul style="list-style-type: none"> <li>• 3 - Refuse and Vehicle Fires</li> <li>• 4 - Fire Fatalities</li> <li>• 5 - Fire Casualties</li> <li>• <u>9 - Audits Completed – TARGET NOT KNOWN</u></li> <li>• 13 - Non-refuse Secondary Fires</li> <li>• 16 - On-Call 1st Appliance Availability</li> <li>• 19 - Ops Assurance Audit Actions</li> </ul>
3.11	<p>Not known – limited data or unspecified direction:</p> <ul style="list-style-type: none"> <li>• 6 - HFSV Conducted</li> <li>• 7 - % High Risk HFSV</li> <li>• 8 - % Partner Referral HFSV</li> <li>• <u>17 - Wholetime Availability</u></li> <li>• 30 - Assist Other Agencies Incidents</li> <li>• 31 - Effect Entry/Exit Incidents</li> </ul>

<b>4</b>	<b>Recommendation</b>
4.1	Members are invited to scrutinise the contents of this, question KPI performance and provide feedback on practical use of reporting to ensure continuous development of user experience. The live version of the report can be accessed through the Governance area of the <a href="#">Power BI Landing Page</a> .
<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk Appetite and Alignment to Risk Register</b>
5.1.1	SFRS has a specific risk SPCC001 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. This links to the 'Compliance' risk category. In relation to our internal governance, including systems of controls and data governance, SFRS has a Cautious appetite.
5.2	<b>Financial</b>
5.2.1	There are no specific financial issues raised within this paper
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	There are no specific Environmental & Sustainability implications addressed in this paper
5.4	<b>Workforce</b>
5.4.1	There are no workforce implications in this paper
5.5	<b>Health &amp; Safety</b>
5.5.1	There are no specific Health and Safety implications addressed in this paper
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	There are no specific Health and Wellbeing implications addressed in this paper
5.7	<b>Training</b>
5.7.1	There are no specific Training implications addressed in this paper
5.8	<b>Timing</b>
5.8.1	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	<b>Performance</b>
5.9.1	All performance measures reported are linked to Strategic Outcomes 1 & 2
5.10	<b>Communications &amp; Engagement</b>
5.10.1	There are no specific Communications & Engagement implications addressed in this paper
5.11	<b>Legal</b>
5.11.1	There are no specific Legal implications addressed in this paper
5.12	<b>Information Governance</b>
5.12.1	DPIA completed - No
5.13	<b>Equalities</b>
5.13.1	EHRIA completed - No
5.14	<b>Service Delivery</b>
5.14.1	All performance measures reported are linked to Strategic Outcomes 1 & 2 and specific to Service Delivery

<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	David Farries, Director of Operational Delivery
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	Substantial/ <b>Reasonable</b> /Limited/Insufficient
7.3	<b>Rationale:</b>	The service has continued to develop its approach to performance reporting. The Organisational Performance Dashboard, aligned to the SFRS Performance Management Framework, is now live and available across the service with a pdf version made available to the public. Scrutiny of service performance is evident across the service, at executive level and by the SFRS Board at committee and board level.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A: PDF copy of Service Delivery Committee Performance Report	
8.2	Further Reading: - Link to <a href="#">Power BI Landing Page</a> .	
<b>Prepared by:</b>		Chris Fitzpatrick, Business Intelligence and Data Services Manager
<b>Sponsored by:</b>		Richard Whetton, Head of Corporate Governance, Strategic Planning, Performance and Communications Directorate
<b>Presented by:</b>		Andrew Watt, Deputy Chief Officer
<b>Links to Strategy and Corporate Values</b>		
<u>Strategy</u> <u>Outcome 1 - Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.</u> <ul style="list-style-type: none"> <li>Supporting business owners to protect Scotland's non-domestic buildings and premises.</li> <li>we will continue to enforce and provide advice around fire safety legislation to business owners in shops, offices, workshops and factories.</li> <li>We will further expand our prevention work to Scottish households and develop our prevention approaches to influence people's behaviours to help keep themselves safe and improve their wider wellbeing.</li> <li>We will build on the work with our partners to target education and safety initiatives to those who need it most, including the young and the vulnerable.</li> </ul> <u>Outcome 2 - Communities are safer and more resilient as we respond effectively to changing risks.</u> <ul style="list-style-type: none"> <li>More efficiently responding to false fire alarm calls and improving road safety by reducing the number of blue light journeys we make to them.</li> <li>Improving how we manage calls from the public and deploy our resources to emergency incidents.</li> <li>We will ensure we have the right resources in the right places at the right times and further improve our On Call service.</li> </ul>		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Service Delivery Committee</i>		<i>28 May 2025</i>
<i>Service Delivery Board</i>		<i>17 June 2025</i>
		<b>Report Classification/ Comments</b>
		<i>For scrutiny</i>
		<i>For scrutiny</i>



# SCOTTISH

## FIRE AND RESCUE SERVICE

Working together for a safer Scotland

# Service Delivery Committee Performance Report



**LIVE  
MANAGEMENT  
INFORMATION**

Latest quarter shown: **2024-25 Q4**

Previous report

All previous reports

APPENDIX A

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



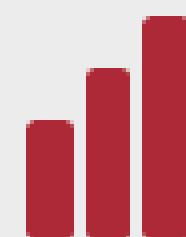
## Welcome

The Service Delivery 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](mailto: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.

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

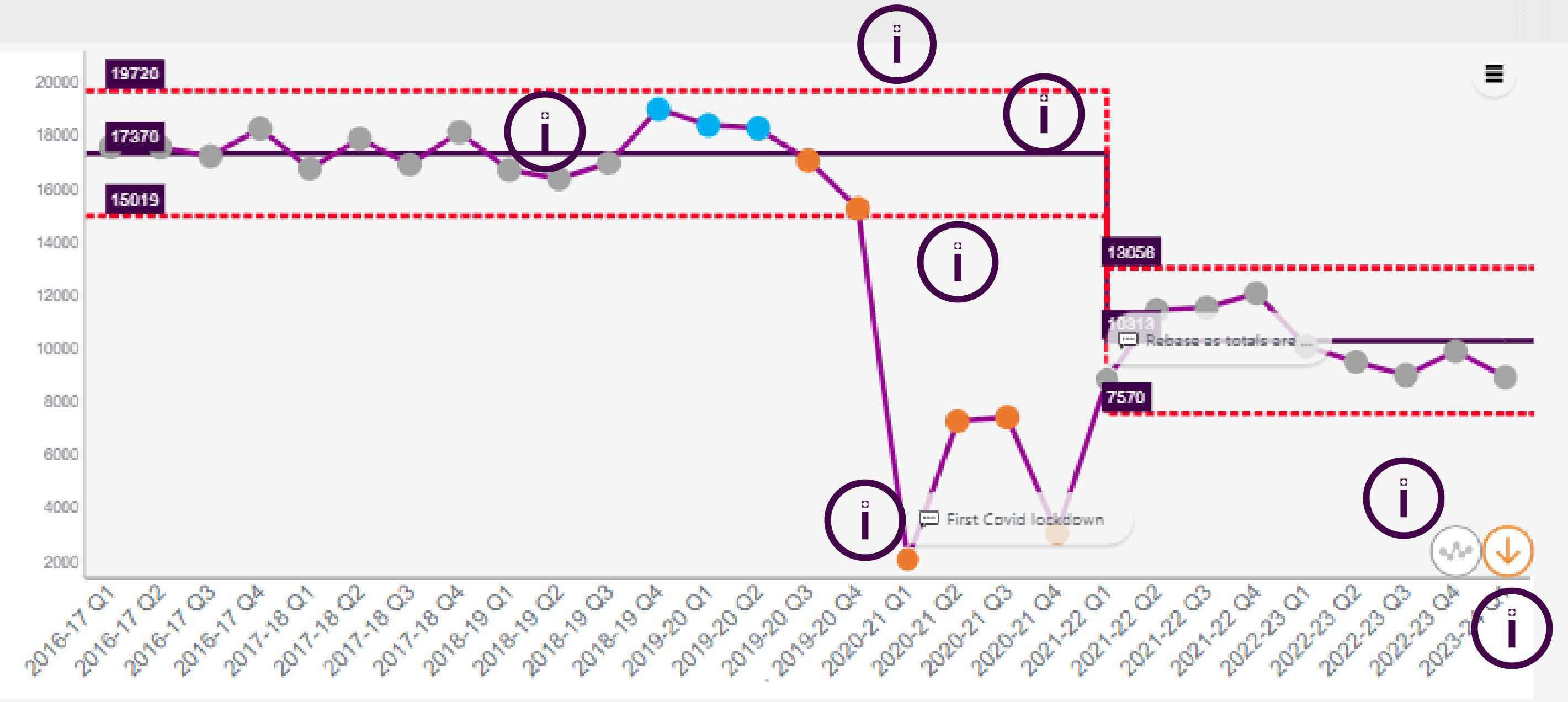
Normally data points will fall **between the upper and lower control limits**. If any of the following scenarios apply, the change needs to be investigated and an explanation provided. Over time this lets us analyse performance in a meaningful way.

- 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 \(england.nhs.uk\)](#)



Above: anatomy of a SPC chart

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.



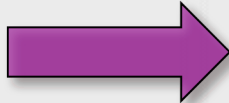
OUTCOME 01 (Prevention & Protection)

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



OUTCOME 02 (Response)

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



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

KPI ▲	Indicator	Purpose	Geography	Frequency	Target	Business Area
01	Number of fires in non-domestic buildings (as defined in Part 3 of Fire (Scotland) Act 2005)	SFRS aim to supporting business owners to protect Scotland's non-domestic buildings and premises and this means driving down non-domestic fires.	National	Quarterly	Reduce against previous year	Service Delivery Areas
02	Number of deliberate primary fires	SFRS aims to improve community safety and wellbeing within the domestic environment, as well as reduce significant impact on communities and partner agencies caused by deliberate fires.	National	Quarterly	Reduce against previous year	Service Delivery Areas
03	Number of refuse and vehicle fires	SFRS aims to support business owners and individuals to increase the safety of their premises and property	National	Quarterly	Reduce against previous year	Service Delivery Areas
04	Number of fire fatalities	SFRS aims to refocusing our preventative activities to address issues of social, economic and health inequalities. Fire Fatalities is the most severe outcome of any fire and reducing this occuring is a key goal.	National	Quarterly	Reduce against previous year	Service Delivery Areas
05	Number of fire casualties	SFRS aims to refocusing our preventative activities to address issues of social	National	Quarterly	Reduce against previous year	Service Delivery Areas



Prevention and Protection



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

KPI 1 Non-domestic Building Fires

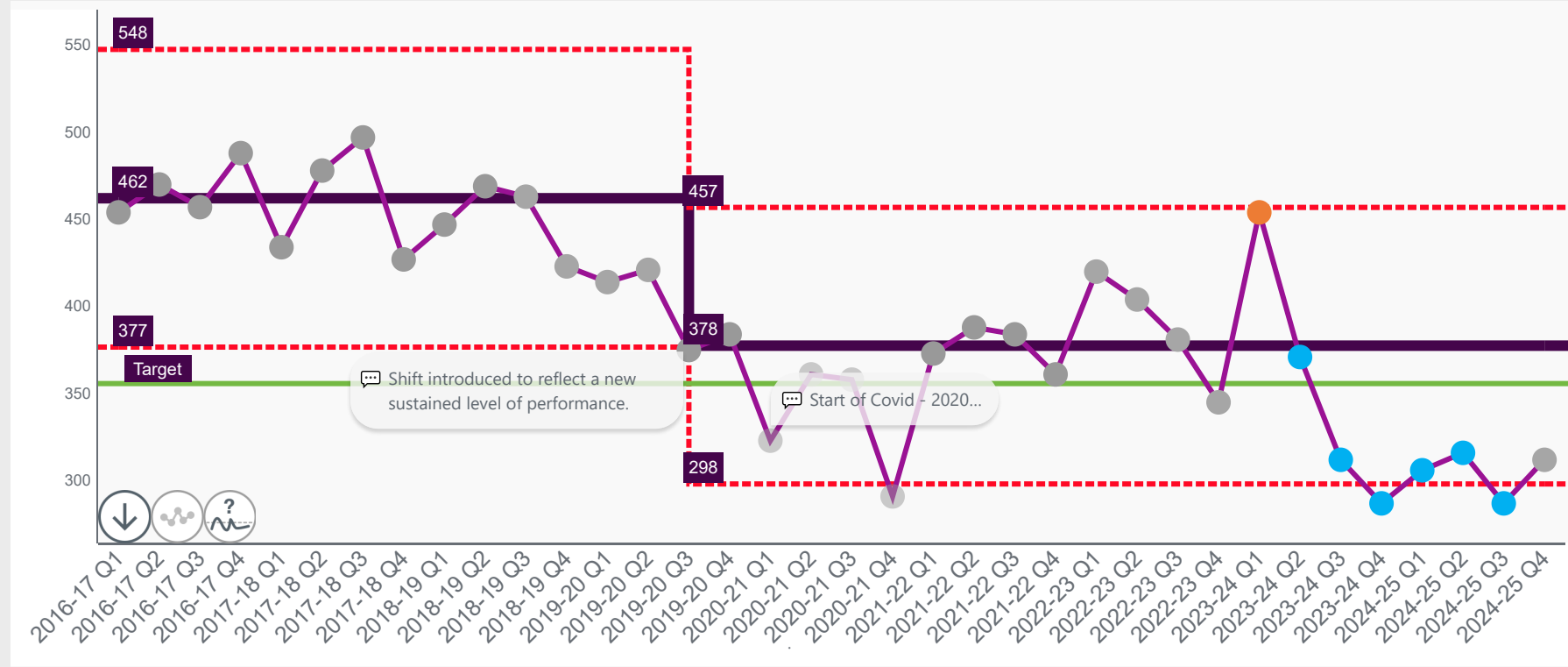
PURPOSE: SFRS aim to supporting business owners to protect Scotland’s non-domestic buildings and premises and this means driving down non-domestic fires.

Reduce against previous year

OWNER: Head of Service Delivery - East

SUMMARY

Maintaining Fire Safety enforcement schedules, continuing to educate Duty holders regarding responsibilities in fire safety. Continual monitoring at a local and national level, analysis will inform any remedial action if required.



KPI 2 Deliberate Primary Fires

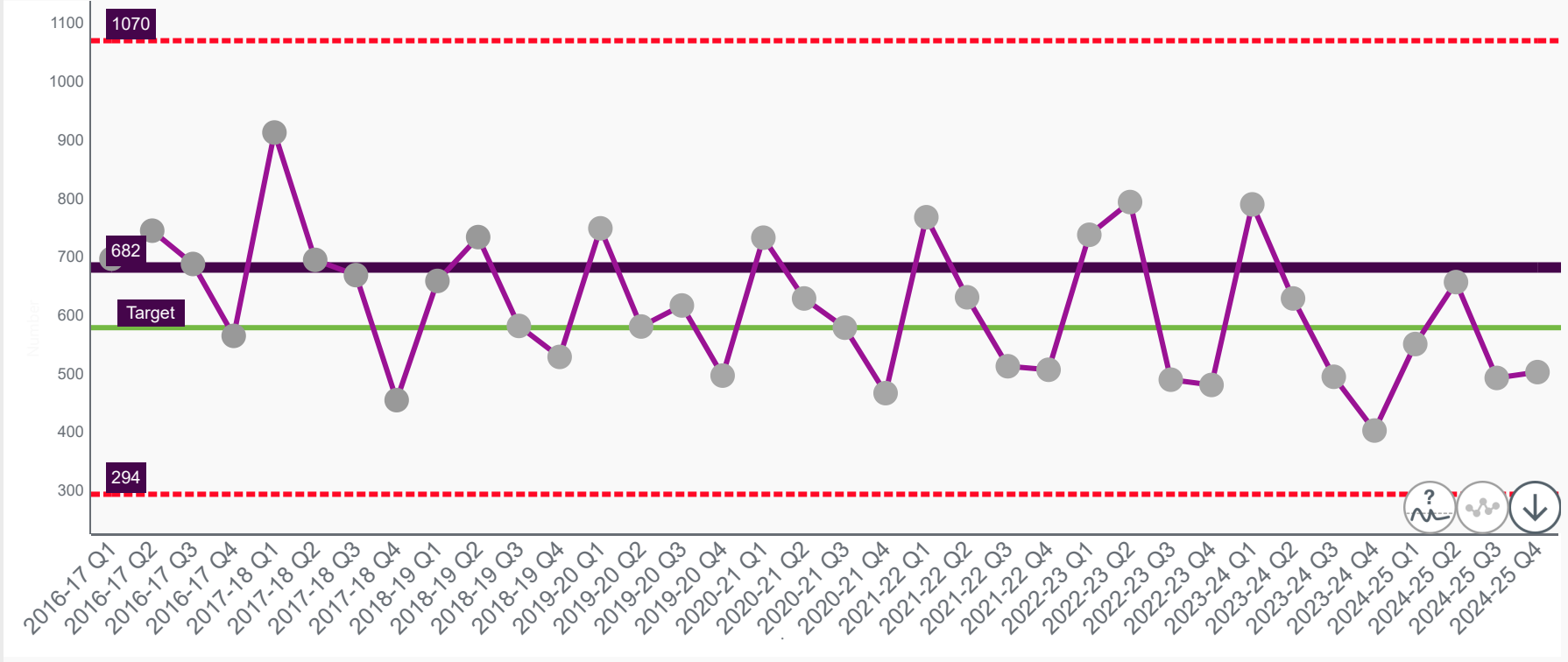
PURPOSE: SFRS aims to improve community safety and wellbeing within the domestic environment, as well as reduce significant impact on communities and partner agencies caused by deliberate fires.

Reduce against previous year

OWNER: Head of Service Delivery - East

SUMMARY

Continued prevention activities within both domestic and non domestic settings. Data should be used to identify and drive appropriate prevention activities.



KPI 3 Refuse and Vehicle Fires

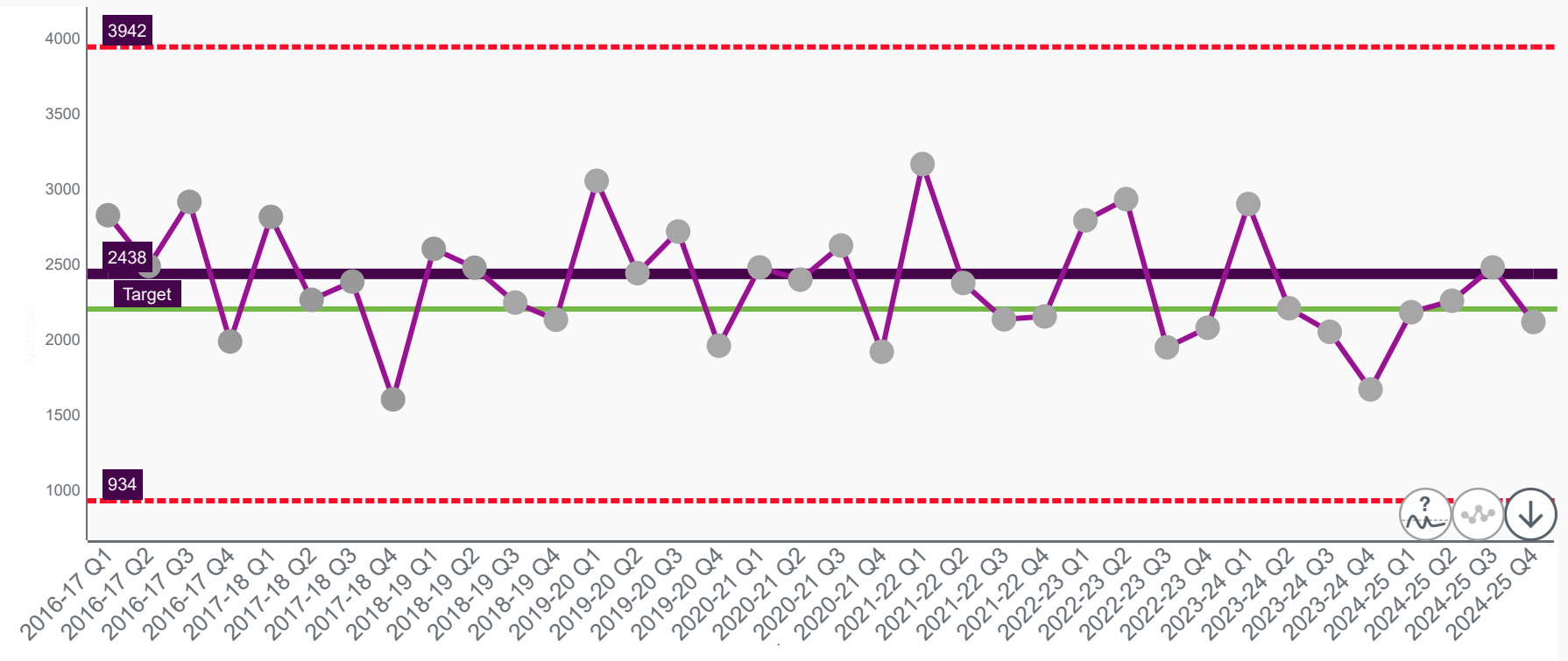
PURPOSE: SFRS aims to support business owners and individuals to increase the safety of their premises and property

Reduce against previous year

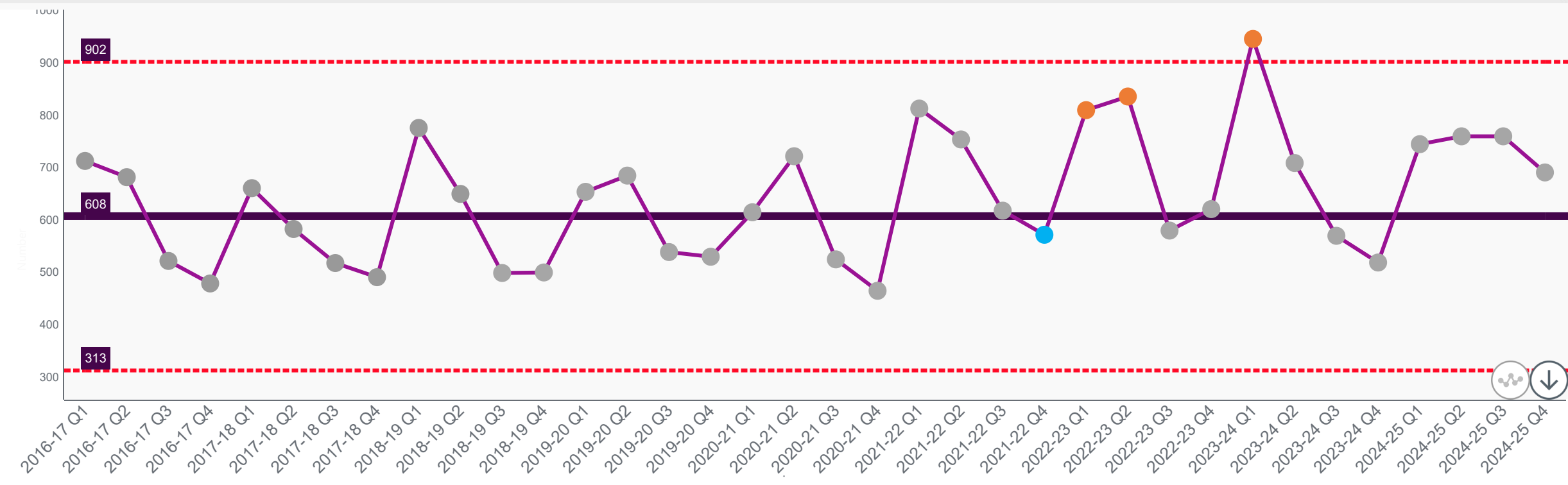
OWNER: Head of Service Delivery - East

SUMMARY

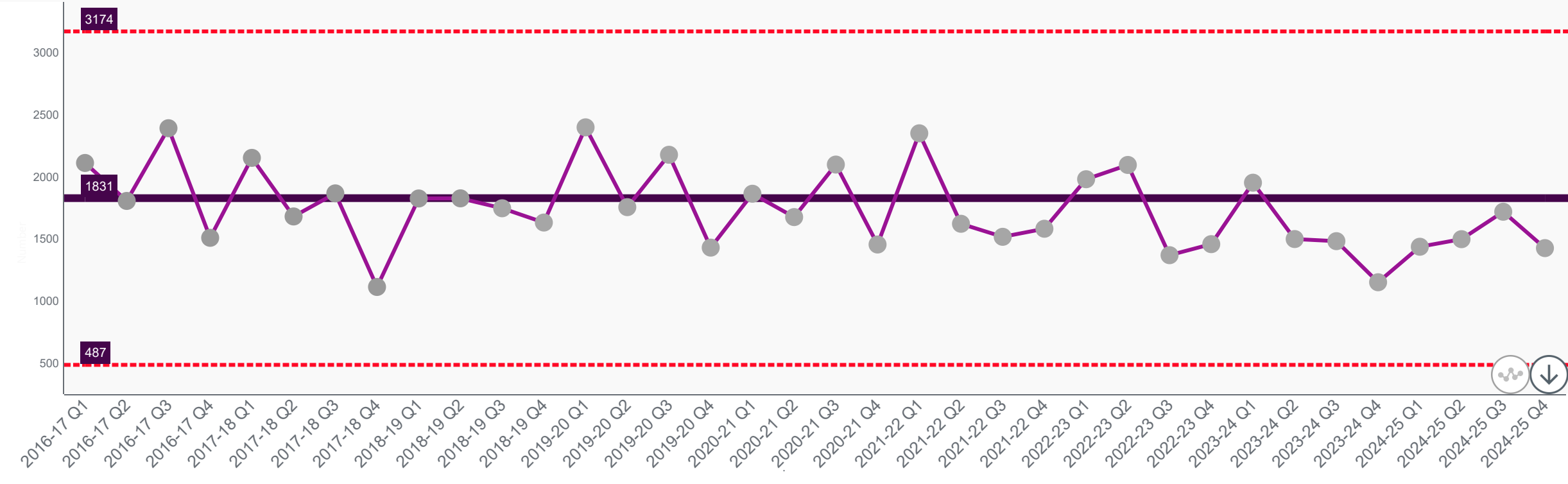
Data should be used to identify and target appropriate prevention activities. This should be considered within seasonal thematic action plans at watch, station and LSO area level. Increased partnership working should be considered as an effective prevention approach.



Accidental Refuse and Vehicle Fires



Deliberate Refuse and Vehicle Fires









OUTCOME 1: KPI 6 - 11

SCOTTISH  
FIRE AND RESCUE SERVICE

LIVE  
MANAGEMENT  
INFORMATION

Prevention and Protection

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

KPI 6

Number of Home Fire Safety Visits conducted

PURPOSE:

SFRS aims to refocusing our preventative activities to address issues of social, economic and health inequalities. Fire Fatalities is the most severe outcome of any fire and reducing this occurring is a key goal.

Update as of 2024-25 Q4: This KPI has been temporarily withdrawn as reporting from the new Home Fire Safety Visit (HFSV) system is not yet assured or integrated into the Business Intelligence (BI) infrastructure. The BI team is actively working in collaboration with Digital and Technology Services (DaTS) and the Community Safety team to ensure suitable quality for future reporting.

OWNER:

Head of Prevention, Protection and Preparedness

50,000 (annually)

KPI 7

% High Risk of Home Fire Safety Visits

PURPOSE:

The KPI demonstrates the organisations commitment to providing advice, information to members of the community in their homes and how to escape should a fire occur. Conducting HFSVs is one method used to provide advice etc in order to meet the Fire Scotland Act 2005 legislative requirements to provide advice, information and details on means of escape. This should assist in reducing fire fatalities and casualties in dwellings across Scotland.

Update as of 2024-25 Q4: The data for this KPI has been temporarily withdrawn as reporting from the new Home Fire Safety Visit (HFSV) system is not yet assured or integrated into the Business Intelligence (BI) infrastructure. The BI team is actively working in collaboration with Digital and Technology Services (DaTS) and the Community Safety team to ensure suitable quality for future reporting.

OWNER:

Head of Prevention, Protection and Preparedness

Increase against previous year

SUMMARY

A change in policy (February 2025) meant visits were no longer classified as Low, Medium and High. A new criteria was introduced, with only those who meet the criteria offered a visit. This is reflected in the data as all visits post the new policy are considered "high risk".

KPI 8

% Partner Referral of Home Fire Safety Visits

PURPOSE:

The KPI demonstrates the organisations commitment to providing advice, information to members of the community in their homes and how to escape should a fire occur. Conducting HFSVs is one method use to provide advice etc in order to meet the Fire Scotland Act 2005 legislative requirements to provide advice, information and details on means of escape. This should assist in reducing fire fatalities and casualties in dwellings across Scotland.

Update as of 2024-25 Q4: The data for this KPI has been temporarily withdrawn as reporting from the new Home Fire Safety Visit (HFSV) system is not yet assured or integrated into the Business Intelligence (BI) infrastructure. The BI team is actively working in collaboration with Digital and Technology Services (DaTS) and the Community Safety team to ensure suitable quality for future reporting.

OWNER:

Head of Prevention, Protection and Preparedness

Track (2023/24 tracking is required to set a baseline)

SUMMARY

Work was undertaken to raise awareness of fire safety and HFSVs with a range of partners to generate referrals. This is reflected in the data. The Partnership Portal of the HFSV App was delayed in launching, so the data will not fully reflect the number of referrals and this may impact on Q1 25/26.

KPI 9

Fire Safety Audits Completed

PURPOSE:

The KPI measures the number of audits undertaken within the service during the period against the number identified by LSO area at the commencement of a year. The LEDPs are the responsibility of the LSO and area to complete which will identify the premises that require auditing for that year in accordance with the perceived risk. Overall, it demonstrates the effective delivery of enforcement in non domestic premises in the Service.

OWNER:

Head of Prevention, Protection and Preparedness

100% of premises identified within the Local Enforcement Delivery Plans (LEDP)

SUMMARY

LSO areas have been impacted with an increase in Short Term Let premises that require auditing and this, alongside an increase in competency within LSO areas should demonstrate a positive move in performance and risk reduction within non-domestic premises over the coming year

KPI 10

Accidental Dwelling Fires

PURPOSE:

SFRS has committed to preventing problems from arising by engaging with partners and communities to reduce risk and encourage positive behavioural change within homes

OWNER:

Head of Service Delivery - East

Reduce against previous year

SUMMARY

Continue to target those most at risk within the community through home fire safety visits and other prevention activities. This should be data led and enhanced by working with local community partners. This KPI is subject to seasonal trends.

KPI 11

% of accidental dwelling fires classed as High Severity

PURPOSE:

SFRS has committed to preventing problems from arising by engaging with partners and communities to reduce risk and encourage positive behavioural change within homes

OWNER:

Head of Service Delivery - East

Reduce against previous year

SUMMARY

Prevention activities to be informed by previous data, this will include targeting those most at risk in the community through home fire safety visits. Continue to educate partners regarding referrals of those most at risk in the community.

19/05/2025

© Scottish Fire & Rescue Service

2025

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

KPI ▲	Indicator	Purpose	Geography	Frequency	Target	Business Area
12	Number of incidents attended	SFRS aim to ensure the right resources are available and deployed to meet the changing risks and needs of the community post covid.	National	Quarterly	Track	Service Delivery Areas
13	Number of non-refuse secondary fires	SFRS will build upon knowledge of communities to meet the changing risks and needs, working with partners to improve community safety	National	Quarterly	Reduce against previous year	Service Delivery Areas
14	Response times to life-risk incidents - National	SFRS are adapting to the changing risks of communities and using a place based approach in how they respond	National	Quarterly	Reduce against previous year	Service Delivery Areas
14	Response times to life-risk incidents - SDA	SFRS are adapting to the changing risks of communities and using a place based approach in how they respond	SDA	Quarterly	Reduce against previous year	Service Delivery Areas
15	Call Handling Times to life-risk incidents - National	SFRS are adapting to the changing risks of communities and using a place based approach in how they manage, train and respond to incidents	National	Quarterly	Reduce against previous year	Service Delivery Areas





Response



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

KPI 12

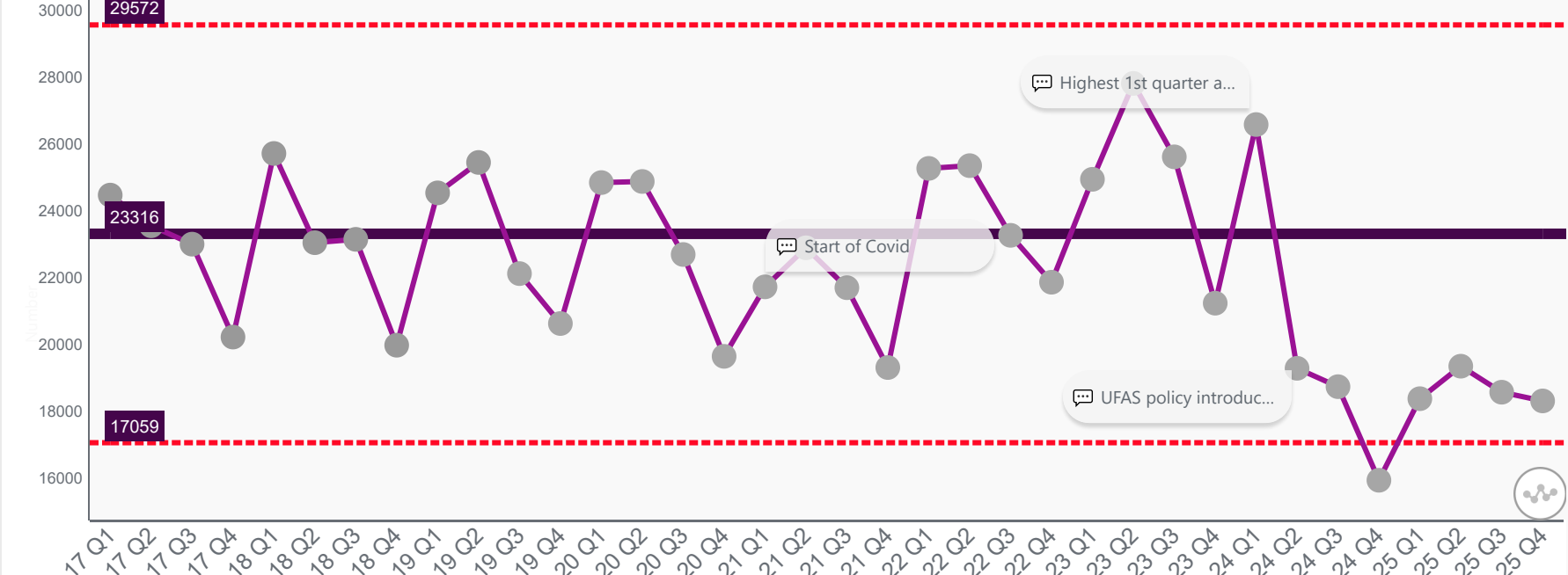
Total Incidents

**PURPOSE:** SFRS aim to ensure the right resources are available and deployed to meet the changing risks and needs of the community post covid.



Track

**OWNER:** Head of Service Delivery - East



SUMMARY

Decrease from previous quarter. UFAS reduction continues to have a positive impact on total number of incidents attended.

KPI 13

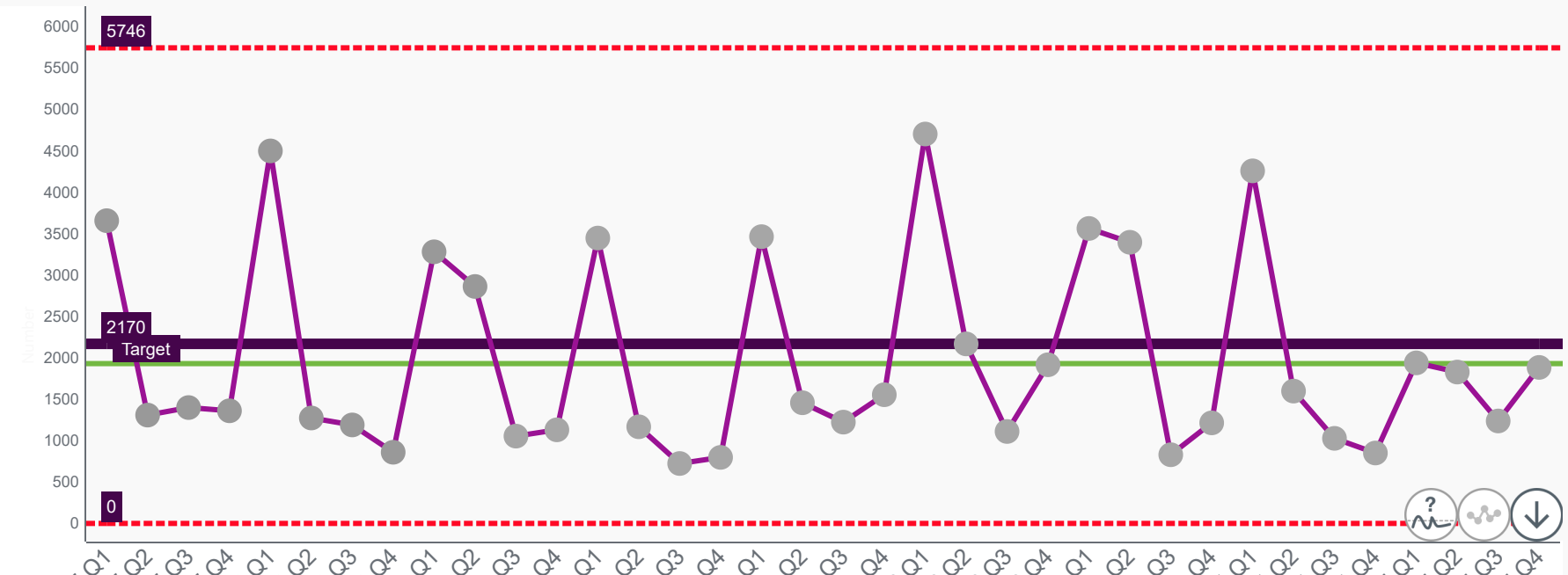
Non-refuse Secondary Fires

**PURPOSE:** SFRS will build upon knowledge of communities to meet the changing risks and needs, working with partners to improve community safety



Reduce against previous year

**OWNER:** Head of Service Delivery - East



SUMMARY

Prevention activities should be led by data where available and enhanced through a partnership approach, where appropriate. This KPI is subject to seasonal trends.

KPI 14

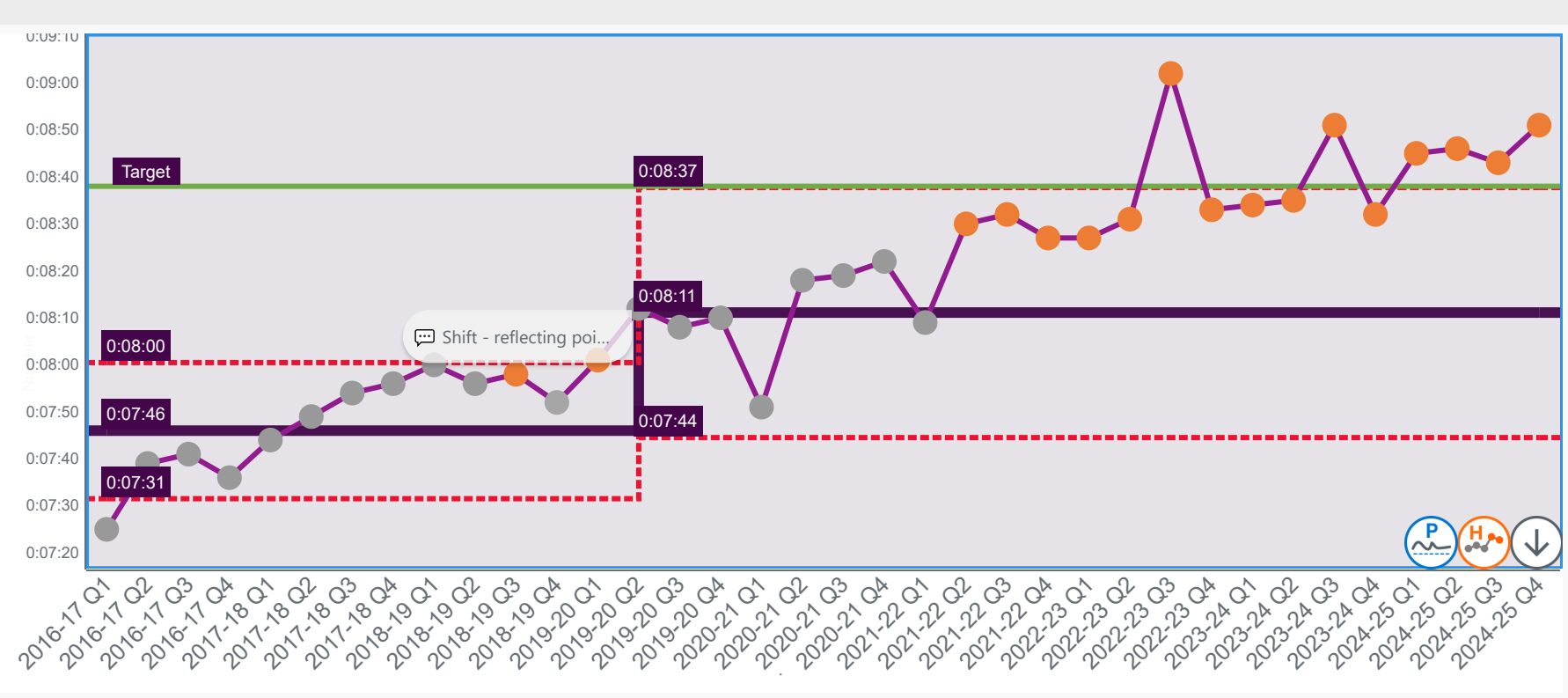
Median Response Time to Life Risk Incidents - National

**PURPOSE:** SFRS are adapting to the changing risks of communities and using a place based approach in how they respond



Reduce against previous year

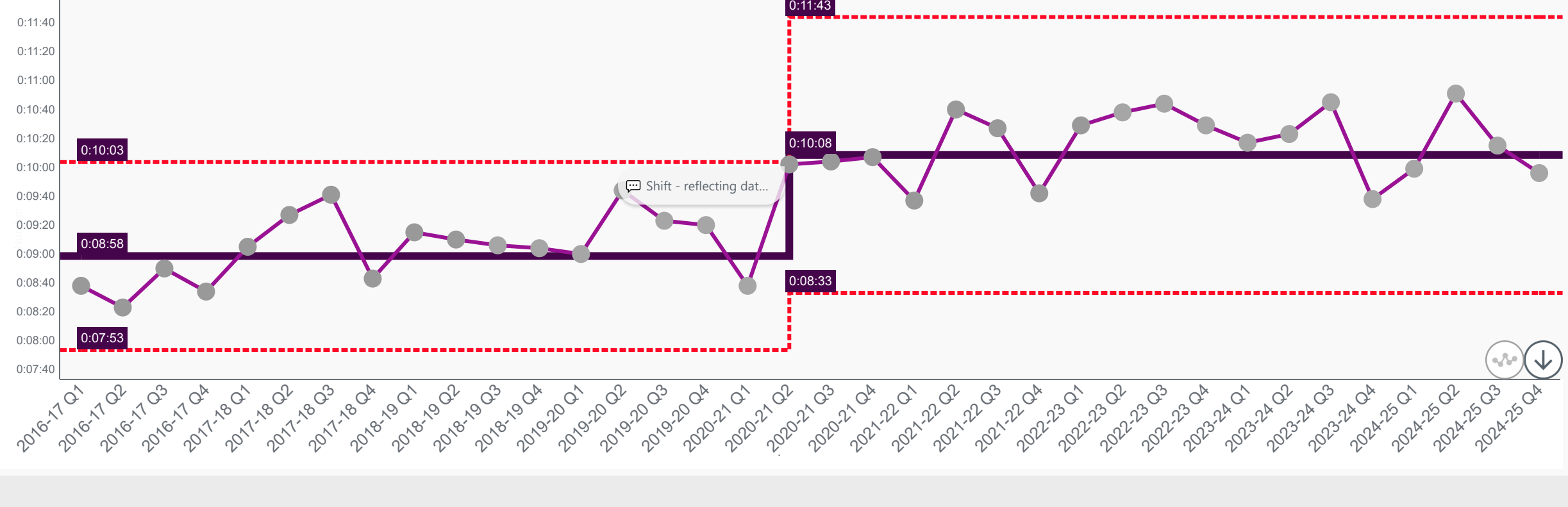
**OWNER:** Head of Service Delivery - East



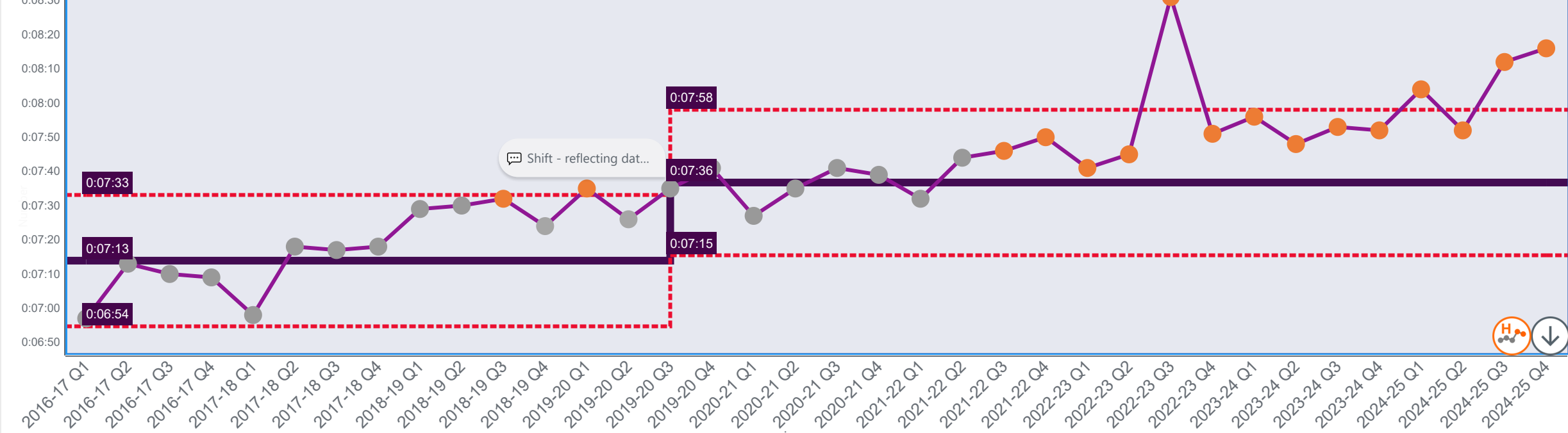
SUMMARY

Variance in performance could be due to a number of factors. This could include operational demand and appliance availability.

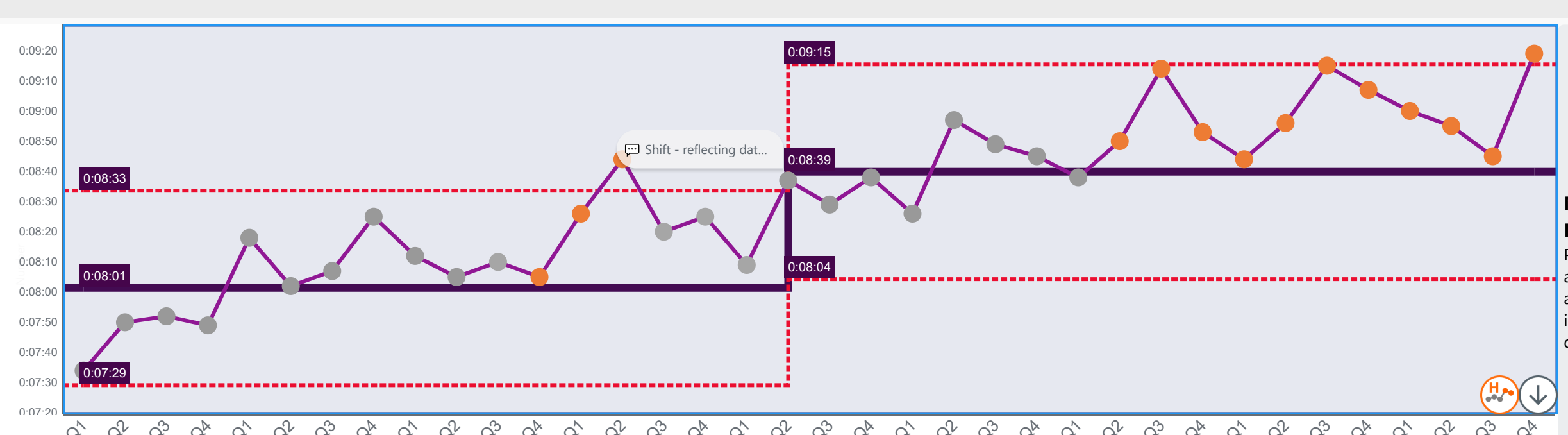
Median Response Time to Life Risk Incidents - North SDA



Median Response Time to Life Risk Incidents - West SDA



Median Response Time to Life Risk Incidents - East SDA



KPI 15

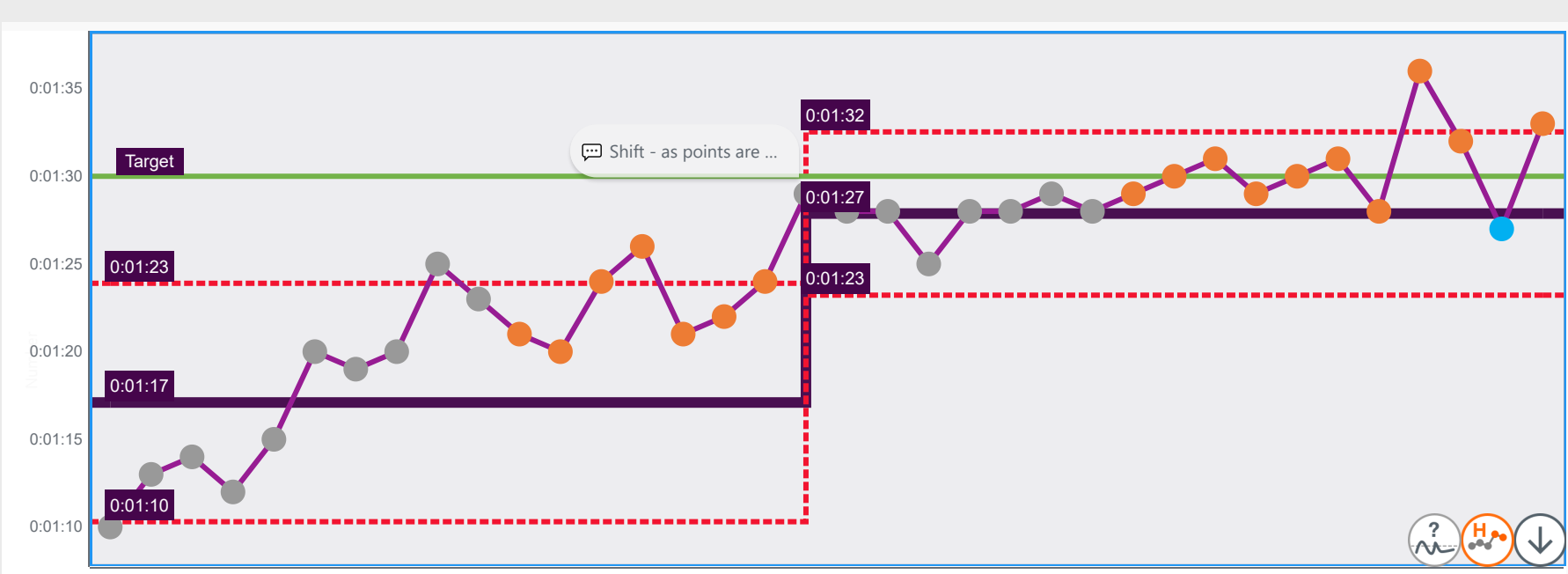
Median Call Handling Time for Life Risk Incidents - National

**PURPOSE:** SFRS are adapting to the changing risks of communities and using a place based approach in how they manage, train and respond to incidents



Reduce against previous year

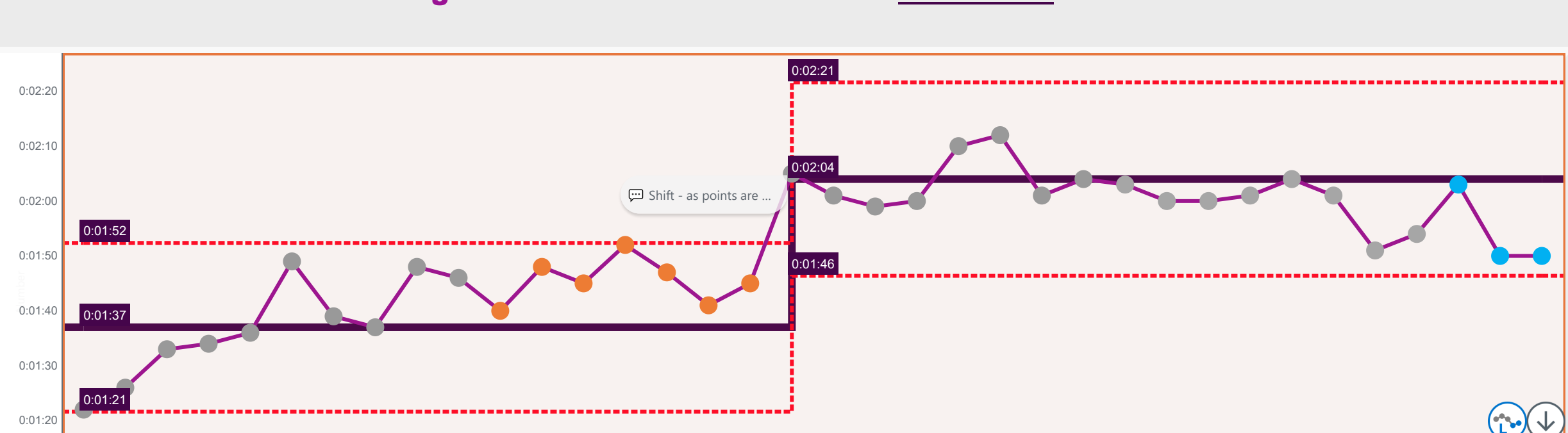
**OWNER:** Head of Service Delivery - East



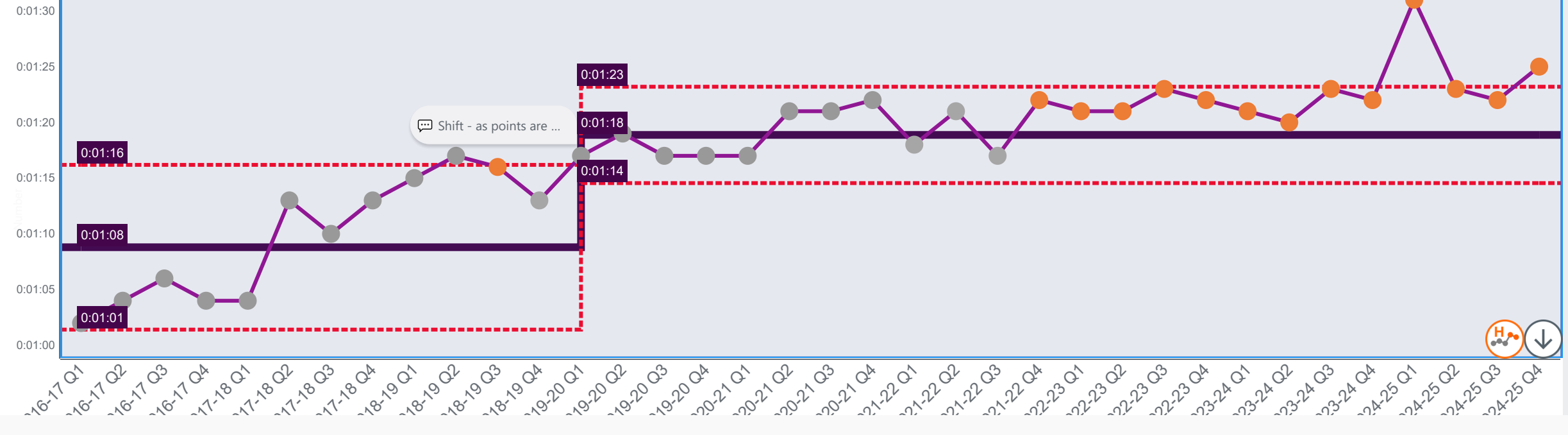
SUMMARY

Call handling time will continue to be influenced by technology, systems, information at time of call and staff profiles within Operational Control.

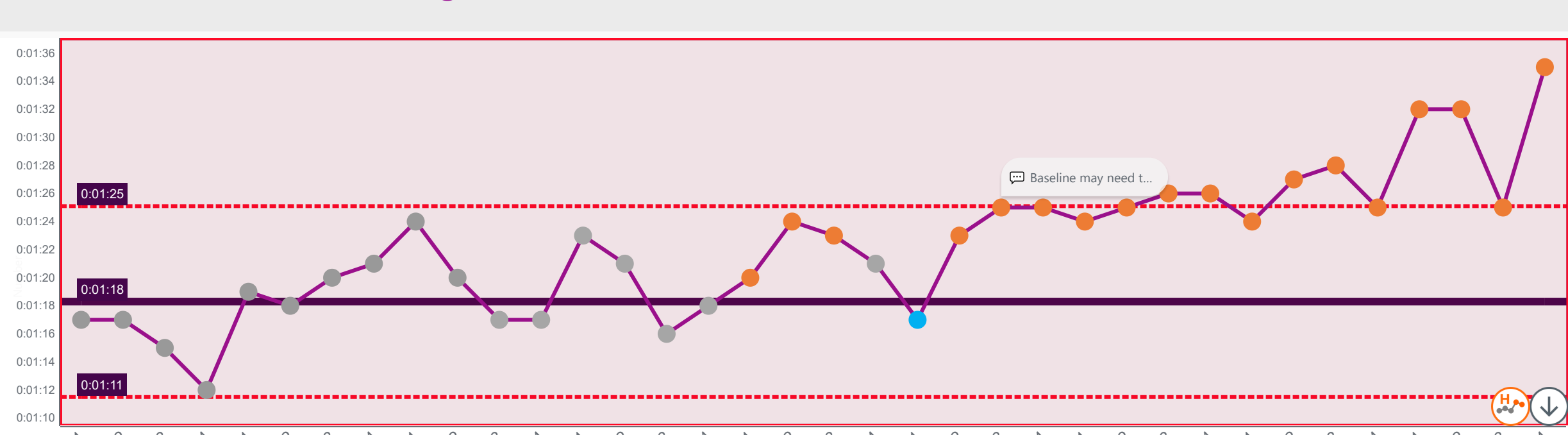
Median Call Handling Time for Life Risk Incidents - North SDA



Median Call Handling Time for Life Risk Incidents - West SDA



Median Call Handling Time for Life Risk Incidents - East SDA





Response

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



**KPI 16**

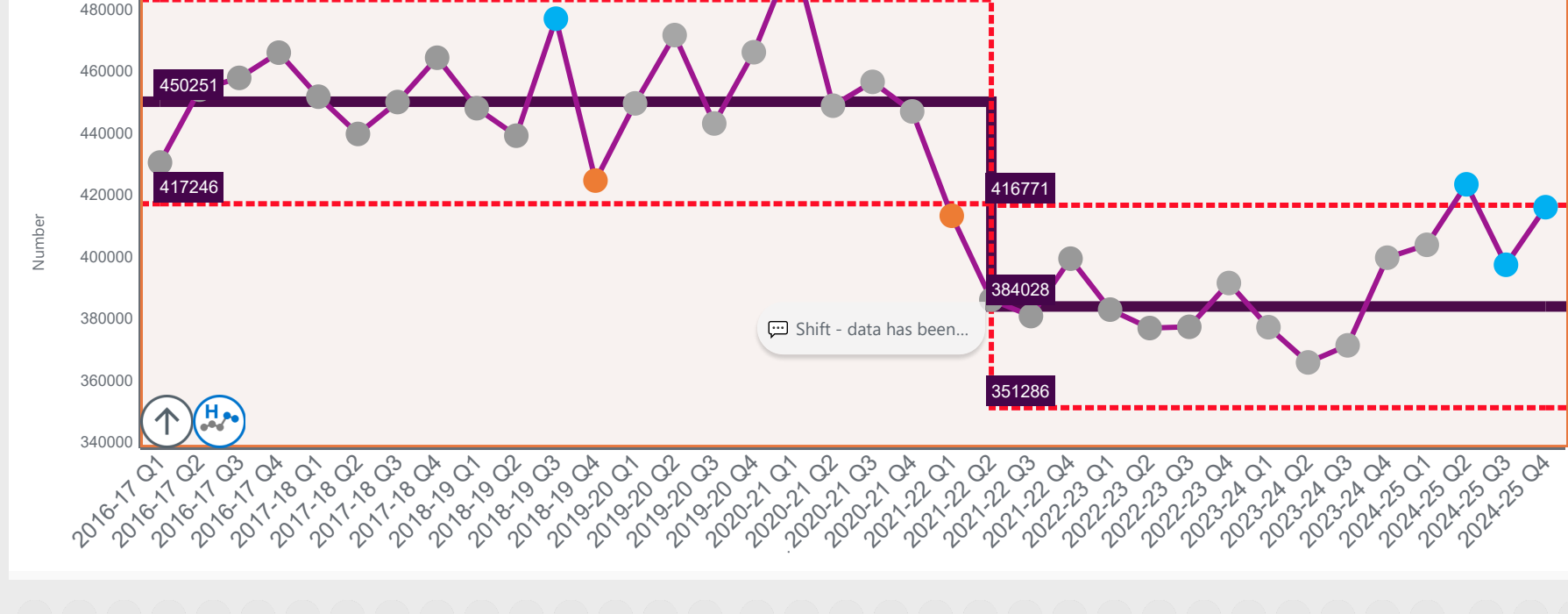
**On-Call 1st Appliance Availability**

**PURPOSE:**

Percentage of time On Call fire appliances (stations) are available to respond to operational incidents.

**OWNER:**

Head of Operations



**SUMMARY**

Work is progressing on target to develop the Migration Procedure incorporating candidate selection & Line Manager endorsement process, one day selection event, migration course syllabus & route to competency. Short Life Working Group is advancing all areas of this work in lieu of advert launch.

**KPI 17**

**Wholetime Availability**

**PURPOSE:**

Percentage of time wholetime fire appliances are available (on the run) this data comprises both dayshift availability and nightshift availability.

**OWNER:**

Head of Operations

This performance indicator was not available by the paper submission deadline and is therefore not included.

**SUMMARY**

No Performance Statement Available

**KPI 18**

**Operational Intelligence Inspections**

**PURPOSE:**

The number of fully completed OI inspections carried out. Premises that require OI inspections are categorised as Very High, High, Medium, Low or Very Low risk level.

**OWNER:**

Head of Prevention, Protection and Preparedness

**SUMMARY**

The number of OI inspections has been consistent over the previous four reporting quarters

**KPI 19**

**Ops Assurance Audit Actions**

**PURPOSE:**

This KPI demonstrates the number of significant recommendations identified through Operational Assurance Debrief Processes. To be included in a reporting period, these recommendations have to be approved by the Safety and Assurance Sub Group (SASG).

**OWNER:**

Head of Safety and Assurance

**SUMMARY**

No Performance Statement Available

**KPI 20**

**Hydrant Inspections**

**PURPOSE:**

Hydrant inspections have a role in ensuring public safety and effective emergency response. Hydrants serve as critical water sources for operations, and their functionality is paramount during emergencies.

**OWNER:**

Head of Prevention, Protection and Preparedness

**SUMMARY**

SFRS Hydrant Operatives have performed well over this quarter due to effective forward planning and leadership

**KPI 21**

**Unwanted Fire Alarm Signal (UFAS) Incidents**

**PURPOSE:**

SFRS aim to more efficiently responding to false fire alarm calls and improving road safety by reducing the number of blue light journeys we make to them.

**OWNER:**

Head of Service Delivery - East

**SUMMARY**

Continued decrease in UFAS and we will continue to engage with duty holders to highlight their responsibilities and continue to apply robust call challenging procedures within ops control.

**KPI 30**

**Assist Other Agencies Incidents**

**PURPOSE:**

SFRS are committed to training with partners to improve community safety and effectively manage incidents.

**OWNER:**

Head of Service Delivery - East

**SUMMARY**

Expect demand for this type of incident to continue, which reflects changes in community risk. We have experienced a slight decrease in requests for partner agencies to access fire & rescue capabilities in previous quarter.

**KPI 31**

**Effect Entry/Exit Incidents**

**PURPOSE:**

SFRS aims to ensure we are focused on effective and appropriate response to the changing risks within our communities

**OWNER:**

Head of Service Delivery - East

**SUMMARY**

Expect consistent trend line to continue, which reflects changes in community risk and operational demand. This also reflects a slight decrease in requests from partner agencies to access fire & rescue capabilities.



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

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- Look out for the hint buttons on pages, which tell you how you can interact with the dashboard:



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- You can change how a visual looks by sorting it, for example by numeric values or text data. To sort a visual, first select it and then click on the **More actions** (...) button on the visual, which will bring up the sorting options. Power BI reports retain the filters, slicers, sorting, and other data view changes that you make.
- 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.

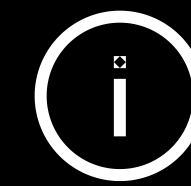
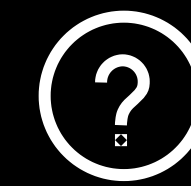
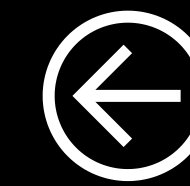
### Interpreting statistics and trends:

For help with interpreting the statistics within this report, identifying potential trends, or to gain a deeper understanding of what the data means, please contact the Business Intelligence Team.

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[bi@firescotland.gov.uk](mailto:bi@firescotland.gov.uk)



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MANAGEMENT  
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# SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



**SCOTTISH**  
FIRE AND RESCUE SERVICE  
Working together for a safer Scotland

**Report No: C/SDC/15-25**

**Agenda Item: 11.1**

<b>Report to:</b>	<b>SERVICE DELIVERY COMMITTEE</b>						
<b>Meeting Date:</b>	<b>28 MAY 2025</b>						
<b>Report Title:</b>	<b>RISK UPDATE REPORT</b>						
<b>Report Classification:</b>	<b>For Scrutiny</b>	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <u><b>Board Standing Order 9</b></u>					
		<u><a href="#">A</a></u>	<u><a href="#">B</a></u>	<u><a href="#">C</a></u>	<u><a href="#">D</a></u>	<u><a href="#">E</a></u>	<u><a href="#">F</a></u>
<b>1</b>	<b>Purpose</b>						
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) with an overview of the current risks highlighted by Directorates.						
<b>2</b>	<b>Background</b>						
2.1	The purpose of the risk register is to inform decision making through Scrutiny and Assurance processes, providing additional awareness of the risks we face, and the actions required to minimise these risks.						
2.2	The Audit & Risk Assurance Committee (ARAC) is responsible for advising the Board and the Accountable Officer on the adequacy and effectiveness of the Service's arrangements for risk management and has oversight of the Strategic Risk Register.						
2.3	The Strategic Leadership Team (SLT) has responsibility for the identification and management of risk and will ensure that Risk Registers present a fair and reasonable reflection of the most significant risks impacting upon the organisation. The SLT will champion the importance of risk management in supporting the achievement of the Service's strategic outcomes and objectives.						
2.4	Risk Registers are prepared in consultation with the Board and SLT and are managed collectively by the SLT, with each Directorate Risk allocated to an identified Head of Function. These Responsible Owners provide information on the current controls in place and identify additional actions still required.						
<b>3</b>	<b>Main Report/Detail</b>						
3.1	<b>Risk Overview</b>						
3.1.1	The risk register is a management tool that provides assurance to the Service, and its scrutiny bodies, that the significant risks of the organisation have been identified, managed and are subject to ongoing monitoring and review.						
3.1.2	Appendix A provides details of all risks above the risk rating of 15, as previously agreed by the Service, with Appendix B providing a summary of risks falling below 15 together with details on the position of control actions.						

## 3.2

**Alignment to Strategic Outcomes**

## 3.2.1

The table below identifies the alignment between the 2022-25 Strategic Outcomes and the current Directorate Risks with each risk aligned to a single outcome:

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	4	7	2		13
Outcome 6	The experience of those who work for SFRS improves as we are the best employer we can be.	3	4	3		10
Outcome 7	Community safety and wellbeing improves as we work effectively with our partners			1		1
		13	16	10		39

## 3.2.2

All risks will be realigned to the new 2025-2028 Strategic Plan once this is agreed.

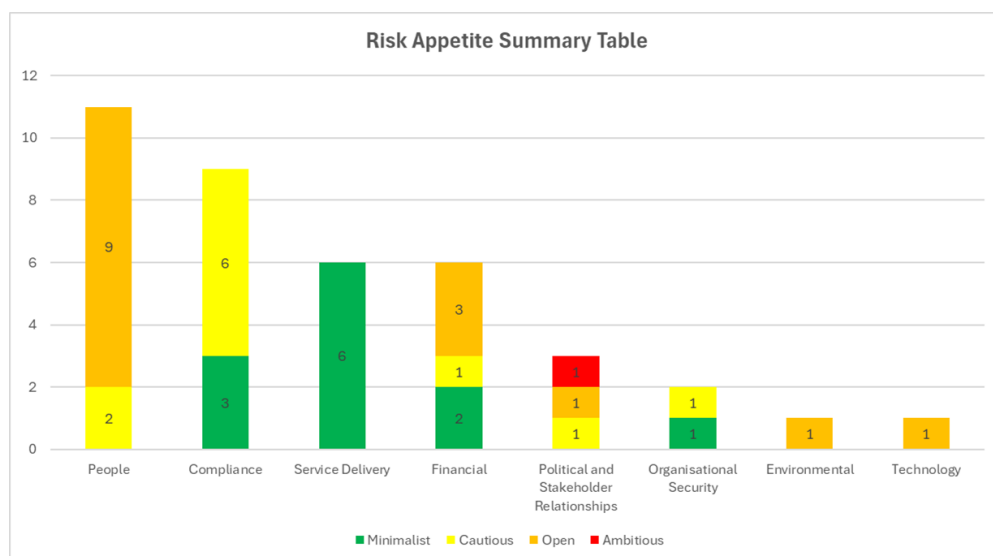
## 3.3

**Risk Appetite**

## 3.3.1

Following agreement of the Services risk appetite statements an alignment to current Directorate risks was undertaken. The tables below provides information on each of the stated risk appetite definitions and a summary of risk alignment to stated risk appetite:

Risk Appetite Levels	Category Description	Associated Risk Target Rating
Minimalist	Preference for low level of associated risk and uncertainty and will only look to accept risk where it is essential to do so. The creation of opportunity is not a key driver.	Rating Appetite Rating of 1 - 3
Cautious	Preference for safe options where the level of benefit and risk is limited but some opportunity may be experienced.	Rating Appetite Rating of 4 - 9
Open	Willing to consider all potential delivery options and to choose the one that is most likely to result in success and opportunity whilst also providing an acceptable level of risk.	Rating Appetite Rating of 10 - 12
Ambitious	Eager to be innovative and to take opportunities offering potentially higher reward, whilst accepting greater risk and uncertainty.	Rating Appetite Rating of 15 - 25



## 3.3.2

The table below provides a breakdown of information in relation to the alignment between risks rated 15 or over and risk appetite:

Risk ID	Governance Alignment	Risk Rating	Target Risk	Risk Appetite	RR Against RA
FCS005	ARAC (CB)	16	8	Financial (Minimalist)	Above
FCS018	PC (CB)	16	6	People (Open)	Above
FCS019	SDC (SDB)	20	12	Technology (Open)	Above
FCS022	PC (CB)	16	12	People (Open)	Above
OD001	SDC (SDB)	15	6	Service Delivery (Minimalist)	Above
POD020	PC (CB)	16	4	People (Open)	Above
PPP005	SDC (SDB)	16	4	People (Open)	Above
SD001	SDC (SDB)	15	10	Service Delivery (Minimalist)	Above
SDD007	ARAC (CB)	20	12	Organisational Security (Minimalist)	Above
SPPC001	SDC (SDB)	16	8	Compliance (Cautious)	Above
SPPC004	ARAC (CB)	20	8	Compliance (Cautious)	Above
TS018	PC (TSAB)	16	6	Compliance (Minimalist)	Above
TS019	PC (TSAB)	16	8	Financial (Open)	Above

## 3.3.3

The table below provides a breakdown of information in relation to the alignment between risks rated below 15 and risk appetite:

Risk ID	Governance Alignment	Risk Rating	Target Risk	Risk Appetite	RR Against RA
FCS008	ARAC (SDB)	12	8	Environmental (Open)	Within
FCS011	ARAC (CB)	12	9	Financial (Minimalist)	Above
FCS015	ARAC (SDB)	12	8	People (Open)	Within
FCS020	ARAC (CB)	12	8	Financial (Open)	Within
FCS021	ARAC (SDB)	12	8	Financial (Open)	Within
FCS023	ARAC (CB)	12	9	Financial (Cautious)	Above
FSC024	ARAC (SDB)	12	4	People (Open)	Within
FCS025	PC (CB)	12	4	People (Open)	Within
POD015	PC (CB)	12	4	People (Cautious)	Above
POD016	PC (CB)	9	4	Service Delivery (Minimalist)	Above
POD018	PC (CB)	12	4	Compliance (Cautious)	Above
POD021	PC (CB)	6	4	Service Delivery (Minimalist)	Above
POD022	PC (CB)	12	4	People (Cautious)	Above
POD023	PC (CB)	6	4	People (Open)	Below
PPP004	SDC (SDB)	12	4	People (Open)	Within
PPP006	SDC (SDB)	6	4	Compliance	Above
SD003	SDC (SDB)	9	9	Service Delivery (Minimalist)	Above
SD004	SDC (SDB)	8	6	Compliance (Cautious)	Within
SD006	PC (CB)	12	8	Service Delivery (Minimalist)	Above
SPPC003	ARAC (CB)	8	8	Compliance (Cautious)	Within
SPPC007	ARAC (CB)	12	12	Political and Stakeholder Relationships (Cautious)	Above
SPPC012	ARAC (CB)	12	8	Organisational Security (Cautious)	Above
SPPC013	ARAC (CB)	8	8	Political and Stakeholder Relationships (Open)	Below
SPPC014	ARAC (CB)	8	8	Compliance (Cautious)	Within
SPPC015	ARAC (CB)	6	6	Political and Stakeholder Relationships	Below
TS014	PC (TSAB)	12	4	Compliance (Minimalist)	Above



3.3.4

3.4

3.4.1

3.4.2

3.5

3.5.1

3.5.2

Whilst risks rated 15 or above fall above our stated appetites, the alignment between risks rated below 15 and risk appetite shows a closer relationship, with 13 risks currently sitting within or below the stated appetite.

### Risk Spotlights

Throughout 2024/25 Committee’s utilised risk spotlights to gain additional assurance on a number of risk areas, this is in addition to additional assurance requested on associated risk areas within submitted reports. These include:

- Pension Remedy and associated workstreams
- Operational Intelligence
- Management of Contaminants
- Protection Staffing and Development
- Statutory Duties
- Operations control Staffing Improvement Plans
- ICT Recruitment and retention
- OC Staffing Levels
- Cyber Security
- Fraud Action Plans
- Development of risk appetite

Future risks reports will identify risk spotlights undertaken by each Committee to ensure adequate levels of assurance are being provided and, where possible, to minimise the duplication of reports.

### Significant Directorate Risks

In relation to the current period Directorates reviewed their registers identifying 39 Directorate risks of which 13 are rated at 15 or above and coloured red within the table.

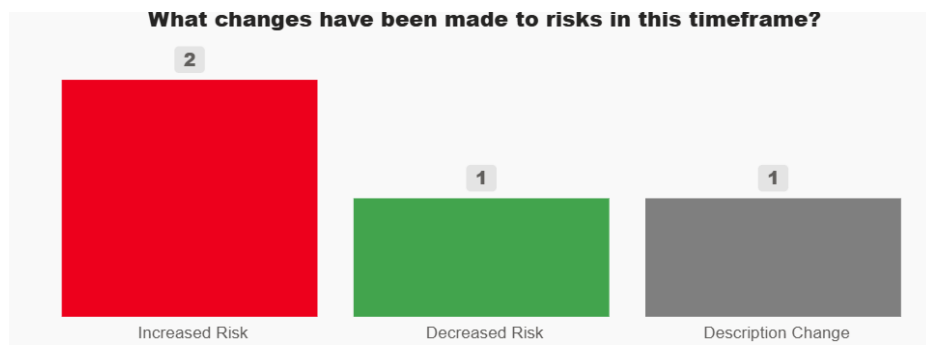
What is the current status of each risk?						
		Impact				
		Negligible (1)	Low (2)	Medium (3)	High (4)	Very High (5)
Probability	Rare (1)					
	Unlikely (2)			4	4	
	Possible (3)			2	12	1
	Likely (4)			4	8	2
	Almost Certain (5)			1	1	

Appendix A to the report provides information on all risks rated 15 or above. In relation to the SDC, there are 5 risks where scrutiny is required:

Risk Ref	Risk Description
FCS019	There is a risk that many of our critical services and systems, which support Operations Control team functions, could fail and be unrecoverable.
PPP005	There is a risk of insufficient levels of qualified and skilled Fire Engineering resources due to challenges with recruitment, access to qualifications/training requirements, finances and retention of staff
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
OD001	There is a risk of a non-resilient fire control due to insufficient employees and an ineffective fire control structure. Failure to attract, recruit, personnel, high abstraction and sickness levels lead to ineffective workforce planning
SD001	There is a risk of failure to mobilise to an incident due to a technical failure of the existing mobilising systems.

3.5.3

Following review, the following changes have been made in relation to risks aligned to SDC rated 15 or above, as outlined within Appendix A:



3.5.4

In relation to the increased risk rating this aligns to:

Risk ID	Description	Increased Risk	Comment
FCS019	There is a risk that many of our critical services and systems, which support Operations Control team functions, could fail and be unrecoverable. This is because of the age of both the hardware and software elements involved, much of which is substantially beyond end of life	Impact rating increased from 4 to 5 resulting in a new risk rating of 20, from 16.	Increased rating relates to continuing age of existing kit and an additional risk as new kit is introduced placing additional testing requirements and pressure on existing kit.
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	Probability Increased from 3 to 4 resulting in a new risk rating of 16 from 12.	Emerging risk of the new Home Office FaRDap system. Mitigations for this not yet confirmed so risk to service data is raised at this time.

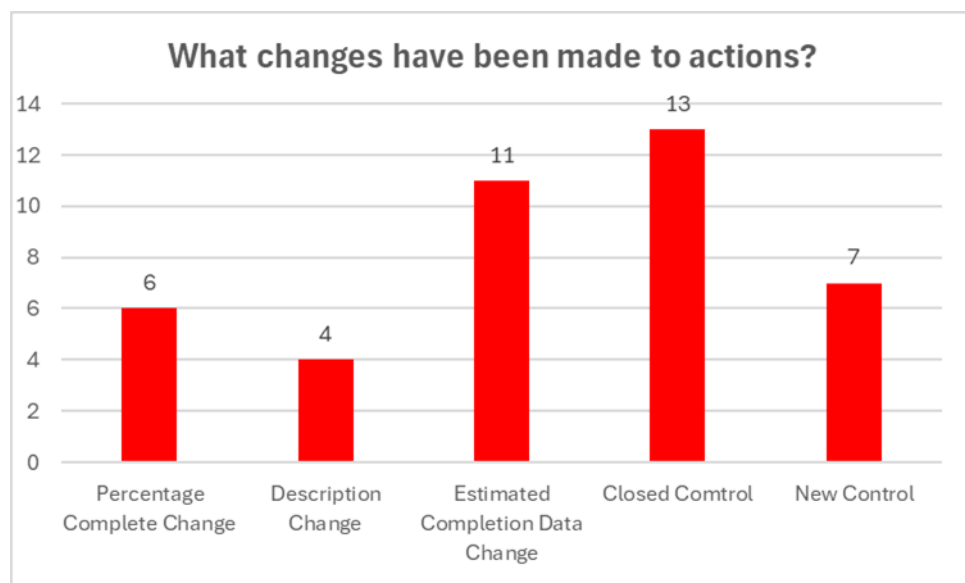
3.6

In relation to those risks rated below 15 aligned to SDC no changes have been made:

3.6.1

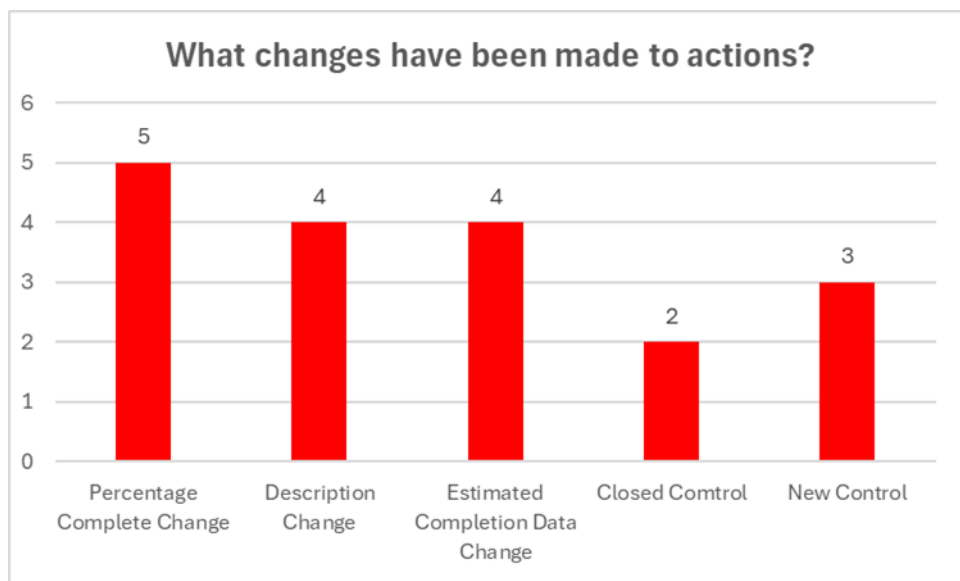
### Control Actions

Following review, the following changes have been made to SDC control actions rated 15 or above:



3.6.2

In relation to risks falling below a rating of 15 the following changes have been identified:



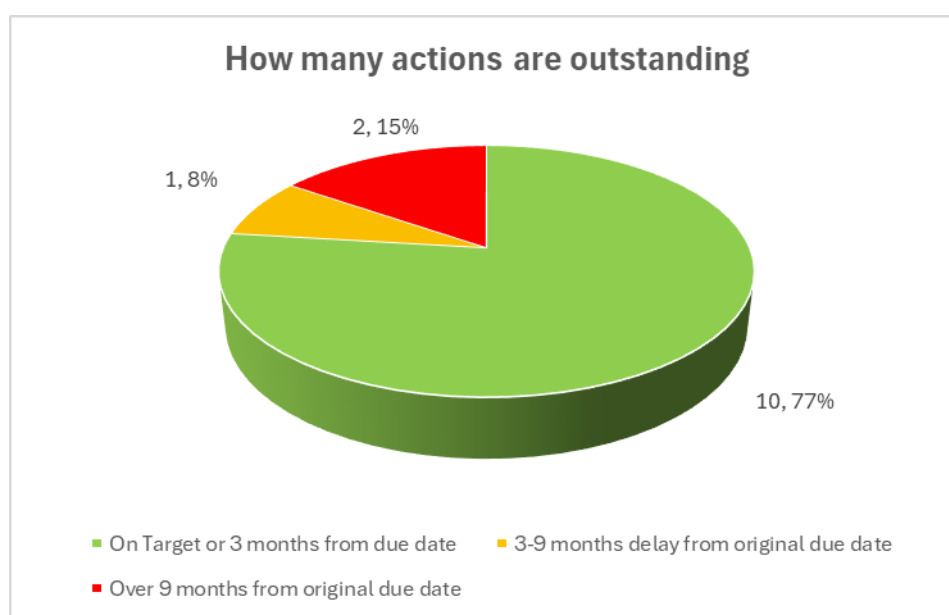
3.6.3

Without immediate 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

3.6.4

In relation to risks rated 15 or above, Appendix A identifies the 2 control actions now over 9 months from their original due date:



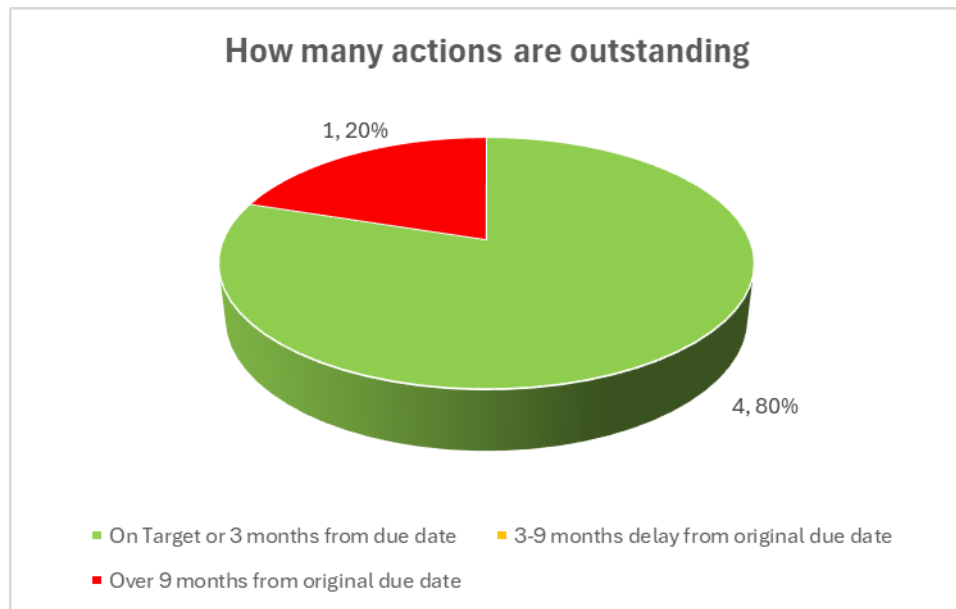
3.6.5

The table below identifies the control actions over 9 months from their original due date. Discussions continue to be held with Directorates to ensure these control actions are progressed in line with revised dates:

Risk ID	Action Description	Action Due	Est. Date	Action Comment
SD001	Procurement and implementation of Vision 5 Disaster Recovery System (for EOC and DOC)	31/12/23	31/07/25	Vision modems reset and remain inoperable. Request from NEC to change sim cards however this has not resolved the issue. Modems remain inoperable and we are still unable to mobilise via Vision 5 - investigations continue. Meeting with NEC to be arranged to discuss a way forward. DATS colleagues to engage with NEC on remedial work.
SD001	Support the design, procurement, delivery and implementation of the New Mobilising System (NMS) - Phase 1	31/12/23	31/12/25	NMS Procurement now concluded with contract award to Motorola. NMS Project now moved onto Phase 1 - Planning and Implementation, with initial fact-finding workshops which will work to deliver the initial 'sandpit' environment in early December. Estimated completion date of ICCS implementation will be December 2025 with CAD implementation August to October 2026.

3.6.6

In relation to risks falling below a rating of 15, there is one control action over 9 months from its original due date:



3.6.7

The table below identifies the 1 control actions over 9 months from their original due date:

Risk ID	Action Description	Action Due	Est. Date	Action Comment
SD004	Delivery of Document Conversion Project	03-2023	31/12/2025	Phase 2 GRAs are in the sign-off phase, with the go-live date for Phase 2 (covering fires and firefighting) scheduled for the 2nd of June. The DCP continues to progress as planned. Phase 3 – Transport is in the final stages of review and is scheduled to be published for familiarisation before the end of Q2 2025/26

**4****Recommendation**

4.1

The Service Delivery Committee is asked to scrutinise the information presented within the report.

<b>5</b>	<b>Key Strategic Implications</b>
5.1	<b>Risk Appetite and Alignment to Risk Register</b>
5.1.1	The report identifies risks from each Directorate together with the significant changes made since the last update. Each Directorate will be responsible for the identification and mitigation of any associated risk and for the update of relevant risk registers.
5.1.2	The report is aligned to the Services Compliance risk appetite in relation to our internal governance, including systems of control, where the Service has a <b>Cautious</b> appetite.
5.2	<b>Financial</b>
5.2.1	The report identifies risks from each Directorate with financial implications arising from control decisions to be managed by the relevant Directorate.
5.3	<b>Environmental &amp; Sustainability</b>
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	<b>Workforce</b>
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.
5.5	<b>Health &amp; Safety</b>
5.5.1	Any implications arising from the report will be managed by the relevant Directorate.
5.6	<b>Health &amp; Wellbeing</b>
5.6.1	Any implications arising from the report will be managed by the relevant Directorate.
5.7	<b>Training</b>
5.7.1	Any implications arising from the report will be managed by the relevant Directorate.
5.8	<b>Timing</b>
5.8.1	The report is provided to the Audit and Risk Assurance Committee on a quarterly basis.
5.9	<b>Performance</b>
5.9.1	The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.
5.10	<b>Communications &amp; Engagement</b>
5.10.1	Any implications arising from the report will be managed by the relevant Directorate.
5.11	<b>Legal</b>
5.11.1	Any implications arising from the report will be managed by the relevant Directorate.
5.12	<b>Information Governance</b>
5.12.1	DPIA completed - No. The report provides a summary of risks identified by Directorates. Each Directorate will ensure that any relevant DPIA is completed as required.
5.13	<b>Equalities</b>
5.13.1	EHRIA completed - No. An assessment was undertaken in relation to the Risk Management Policy. Any individual elements of work, which may have an impact upon Equalities, will require to be assessed and managed by the relevant Directorate.
5.14	<b>Service Delivery</b>
5.14.1	Any implications arising from the report will be managed by the relevant Directorate.

<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Deborah Stanfield, Director of Finance and Contractual Services
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<b>Substantial/Reasonable/Limited/Insufficient:</b> Continued development of the risk framework is being undertaken in order to enhance levels of assurance provided. Work associated with risk appetite will also inform these changes in relation to the right risks, controls and the completion of mitigating actions within identified timescales.
7.2	<b>Rationale:</b>	The report is based upon risk information identified by each Directorate and I have confidence that the information is correctly reported based upon these returns.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	Appendix A – Significant Risks – April 2025	
8.2	Appendix B – Other Risk Summary – April 2025	
<b>Prepared by:</b>		Tracy Shankland, Risk and Insurance Officer
<b>Sponsored by:</b>		Lynne McGeough, Head of Finance and Procurement
<b>Presented by:</b>		Andrew Watt, Deputy Chief Officer
<b>Links to Strategy and Corporate Values</b>		
Risk Management forms part of the Services Governance arrangements and links back to Outcome 5 of the 2022-25 Strategic Plan, specifically Objectives 5.1 and 5.6:		
<b>Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.</b> <ul style="list-style-type: none"> <li>Objective 5.1: Remaining open and transparent in how we make decisions.</li> <li>Objective 5.6: Managing major change projects and organisational risks effectively and efficiently.</li> </ul>		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Service Delivery Committee</i>		<i>28 May 2025</i>
		<b>Report Classification/ Comments</b>
		<i>For Scrutiny</i>

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS018	6	There is a risk of challenges with recruiting and retaining staff with the necessary skills and experience required to support the digital and technology services and systems used by the Service, as well as the availability of budget to upskill existing staff with the skills required. This is because of a very buoyant DaTS job market, pay grade challenges and the availability of budget to provide the necessary training.			PC (CB)	Director of Finance and Contractual Services	16	20	6	Open (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Review vacancies on a case-by-case basis and proceed to advert only when filling vacancy has been justified		31/03/2026		Head of DaTS	Action currently being progressed and on target.				On Target or 3 months from due date	
Advertise vacancies wider than just MyJobScotland, using LinkedIn. Consideration should also be given to using wider social media platforms or specialist recruitment companies.		31/03/2026		Head of DaTS	Action currently being progressed and on target.				On Target or 3 months from due date	
Ensure staff appraisals identify skills gaps		31/03/2026		Head of DaTS	Action currently being progressed and on target.				On Target or 3 months from due date	
Ensure DaTS budget availability to support staff training and development		31/03/2026		Head of DaTS	Action currently being progressed and on target.				On Target or 3 months from due date	



## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP005	1	There is a risk of insufficient levels of qualified and skilled Fire Engineering resources due to challenges with recruitment, access to qualifications/training requirements, finances and retention of staff, resulting in the potential that the Directorate/SFRS may not be able to deliver against its statutory and organisational responsibilities and demands.			SDC (SDB)	Head of Directorate (DACO)	16	20	4	Open (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Engage with the University of Edinburgh to establish new course in relation to Fire Engineering Degree and forward business case to LPG to secure interim funding for alternative degree course in England.		31/03/2025	31/03/2026	Head of Directorate (DACO)	UK Wide scoping work and engagement undertaken to determine available courses for Fire Engineers. Ongoing work with Edinburgh University and NFCC to consider Scottish Degree and Masters level options. This will take some time to develop. SFRS have secured interim degree courses at UCLan commencing Aug 25 though the budget remains to be secured in line with the FSE Modules and RPL courses stated above. Business Case developed and discussions ongoing at Director level to secure funding. SFRS at risk of losing several Fire Engineers in the short term with succession planning reliant upon completion of new Degree course.				On Target or 3 months from due date	
Form contingency options to mitigate any Service failures to deliver Fire Engineering services through existing staff. Option to be progressed through governance for decision.		31/03/2025	31/10/2025	Head of Directorate (DACO)	SFRS may have to consider an external contractor to assist with responsibilities should we be unable to secure appropriately skilled staff. This would require careful contract considerations due to organisational risk of conflicts of interest in specialist work. Alternative option would require employment at market value rates approximately 3 times the current contractual pay grade. Discussions with People Directorate and Trade Unions is required which will include potential necessary interim options for Fire-Engineering through sub-contracting. This would have significant financial impact due to current market rates of pay, demand currently outweighing supply and impact of the Grenfell Phase 2 report/outcomes and recent implementation of the Cladding Remediation (Scotland) Act.				On Target or 3 months from due date	

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SDD007	5	There is a risk of SFRS being unable to maintain adequate levels of Cyber Security to avoid any breach. This may result because of a lack of staff awareness, education and adherence to the policies and processes in place. This may result in the failure of access to or stability of systems, affecting SFRS activity			ARAC (CB)	Director of Finance and Contractual Services	20	20	12	Minimalist (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Staff Engagement and Education (KnowBe4 Training)		31/03/2025	31/03/2025	Head of DaTS	Q3 and Q4 training have a combined completion status of around 75% to date.				On Target or 3 months from due date	
Ensure a Service wide priority around staff Cyber Security training, and seek assistance from other functions/directorates i.e. People, Service Delivery, etc, to improve completion rates		31/03/2026		Head of DaTS	Action currently being progressed and on target.				On Target or 3 months from due date	

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC004	5	There is a risk that the service fails to comply with information governance legislation because of non-compliance resulting in sanctions and loss of stakeholder and public confidence			ARAC (CB)	SPPC	20	20	8	Cautious (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Review resource and structure of IG Team		31/03/2025	31/10/2025	Head of Governance, Strategy and Performance	Resource paper drafted for discussion with Business Case currently being prepared by Director. Temporary staff have been appointed to address backlog, pending outcome of business case.					On Target or 3 months from due date
Undertake review within SFRS to ascertain policy compliance		01/04/2025	31/03/2026	Head of Governance, Strategy and Performance	Discussions being held with FCS in relation to Compliance Monitoring					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FSC005	5	There is a risk that the Service may be unable to secure levels of funding required to achieve its strategic objectives. Additional pressure has been placed upon government finances causing uncertainty over future funding settlements			ARAC (CB)	FSC	16	16	8	Minimalist Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Develop a 3 year medium term financial plan, taking account of the developing strategic service review programme.		31/03/2025	31/07/2025	Head of Finance and Procurement	The 3-year delivery plan will be reported to the SFRS Boasrd at the end of June 2025. Draft budget allocation has been provided for 25/26 which is currently being aligned to SFRS Strategy and Priorities with the aim of achieving a balanced budget. Discussions continue with SG re financial demands and impact of settlements.					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FSC019	2	There is a risk that many of our critical services and systems, which support Operations Control team functions, could fail and be unrecoverable. This is because of the age of both the hardware and software elements involved, much of which is substantially beyond end of life			SDC (SDB)	Director of Finance and Contractual Services	20	16	12	Open (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Work closely with support partners to ensure preventative maintenance is carried out on at risk systems.		31/03/2026		Head of DaTS	Action currently being progressed and on target.					On Target or 3 months from due date
Ensure subject matter experts are involved in the NMS transition phase of the project		31/03/2026		Head of DaTS	Action currently being progressed and on target.					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FSC022	6	There is a risk of continued challenges with recruiting and retaining staff with the necessary skills and experience required to support the Finance and Procurement Function. This is particularly apparent within the Accountancy and Procurement Sections which is proving to have a very buoyant job market and provides pay grade challenges			PC (CB)	FSC	16	16	12	Open (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Review of Finance and Procurement Structure to ensure alignment with Strategic and Directorate priorities and associated projects.		31/12/2025	31/12/2025	Head of Finance & Procurement	Proposed structure developed and shared with FMT - potential revisions being considered at which point finalised structure will move through governance / unions etc. FMT discussions continue					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
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.			PC (CB)	PEOPLE	16	16	4	Open (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
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	30/06/2026	Head of People	Majority of Business cases not progressed due to budgetary constraints, with one remaining outstanding					On Target or 3 months from due date
Subject to outcomes from business cases, review the resources against the agreed priorities with final outcomes shared with stakeholders		05/02/2025	30/09/2025	Head of People	Awaiting outcome of business cases.					On Target or 3 months from due date



## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC001	5	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.			SDC (CB)	SPPC	16	16	8	Cautious (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Continue work to establish SFRS Data Governance arrangements		31/03/2026	31/03/2026	Head of Governance, Strategy and Performance	Evidence of data governance work progressing.				On Target or 3 months from due date	
Development of Board Risk and Performance Reporting		31/03/2026	31/03/2026	Head of Governance, Strategy and Performance	Work being progressed in line with requirements.				On Target or 3 months from due date	
Establish of Data and Information Governance Group		31/03/2026	31/03/2026	Head of Governance, Strategy and Performance	DIGG Group established				On Target or 3 months from due date	
Ongoing Service Delivery dashboard development		31/03/2026	31/03/2026	Head of Governance, Strategy and Performance	Service wide reporting and dashboard development on-going				On Target or 3 months from due date	
Produce SFRS Digital, Data and Technology Strategy		31/03/2026	31/03/2026	Head of Governance, Strategy and Performance	Procured support for DDaT Strategy and work underway				On Target or 3 months from due date	

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA018	2	There is a Directorate risk, of an inability to maintain or improve our training delivery due to insufficient capacity being available within the Training Function to meet current demand,			PC (TSAB)	TSA	16	16	6	Minimalist (Above Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Introduce supplementary Structural Firefighting PPE solutions in collaboration with Asset Management across the Training Function.		31/03/2024	31/05/2025	Group Commander Training	Contaminants Working Group continue to work with Assets to support the roll out of supplementary PPE, storage and PPE for Newbridge is scheduled to be onsite for 31/04/25.					Over 9 months from original due date
Review of Driver Training instructor / examiner staff retention.		31/03/2025	30/06/2025	Group Commander Training	Evaluation of role is progressing via the Rewards Team with the involvement of Instructors and delegated examiners completing questionnaires. The Rewards Team have indicated that interviews will take place in May. Process duration is currently being established, Driver Training are liaising with People Team to gauge an understanding of predicted timeline for the process outcome. Dependent on outcome and the possibility of an increase in Grading, there is a risk that this will impact on resource budget. If there is no increase, then this may make it more challenging attracting people to apply for the role. This will require to be considered following the outcome of the job evaluation review.					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
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	16	16	8	Open (Outwith Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment					Action Status
Review the suitability of Dundee Airport site (course delivery and welfare facilities).		30/06/2024	30/06/2025	Head of Training	Onsite meeting 22/04/25 scheduled with Property, H&S, Training SMEs to review recommendations and outstanding actions taking cognisance of the Fire Contaminants MA and new Management of Contaminants at Training Centres GRA/SSoW, from this a specific GRA/SSoW will be produced. Short-term solutions include self-decontamination onsite as per Operational Procedures/ Fire Contaminants SOP. Medium- term solutions, as per adaption requests, hand washing facilities, fire kit disrobe area, dignified changing facility. Some adaption request timeframes may significantly impact the risk of the capital allocation. Consideration will be given to reasonable returns in investment before the projected withdrawal of the site in Q2 2026/27. Timeframe and project cost will be reviewed post meeting 22/04/25. Long-term solutions will be implemented Q2 2026/27 moving to Perth's new CFBT facility.					Over 9 months from original due date
Liaise with Assets / Property Function to support and oversee tenders priced, planning permission granted, and the delivery of works completed, for the new welfare facility at Portlethen TC.		01/03/2025	01/12/2025	Head of Training	Property is awaiting a fee quote for professional services to complete the design, provide tender documentation and make planning and building warrant applications.					On Target or 3 months from due date
Oversee the tactical implementation of the Training Service Asset Management Plan		01/03/2025	30/01/2023	Head of Training	First meeting concluded on 25/03/25. Action Log, Area specific updates by property managers and Training facilities including Sumbrugh and New Carbonaceous boxes all discussed. Actions and priorities agreed by all.					On Target or 3 months from due date

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
OD001	2	There is a risk of a non-resilient fire control due to insufficient employees and an ineffective fire control structure. Failure to attract, recruit, personnel, high abstraction and sickness levels lead to ineffective workforce planning, as a result, we would be failing to provide a resilient fire control capability.			SDC (SDB)	Director of Operational Delivery	15	15	6	Minimalist (Outwith Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Develop and implement and active recruitment strategy		01/08/2024	30/06/2025	Head of Function	Recruitment now the responsibility of the resourcing team. No timeline confirmed for completion of strategy due to capacity issues. Discussion to be held with the People Directorate.				3-9 months from original due date	
Explore targeted development of OC Management (Supervisory to Strategic level).		31/05/2024	30/06/2025	Head of Function	Supervisory Management Engagement Session content agreed with People Directorate and input from West LSO area. focusing on Culture, Values, Behaviours, Managing Employee Performance, Standards and Management in Practice. This will be supported by FDOs from Lanarkshire LSO area. To align with outcome of Crew Commander (Control) process - this has been rearranged for June.				On Target or 3 months from due date	

## Appendix A – Significant Risks – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SD001	2	There is a risk of failure to mobilise to an incident due to a technical failure of the existing mobilising systems. As a result, we would be failing to meet our statutory duty and also potentially bring reputational damage to the Service.			SDC (SDB)	Director of Operational Delivery	15	15	10	Minimalist (Outwith Appetite)
Controls Actions		Original Due Date	Est' Completion Date	Owner	Comment				Action Status	
Procurement and implementation of Vision 5 Disaster Recovery System (for EOC and DOC)		31/12/2023	31/07/2025	Head of Function	Vision modems reset and remain inoperable. Request from NEC to change sim cards however this has not resolved the issue. Modems remain inoperable and we are still unable to mobilise via Vision 5 - investigations continue. Meeting with NEC to be arranged to discuss a way forward. DATS colleagues to engage with NEC on remedial work.				Over 9 months from original due date	
Support the design, procurement, delivery and implementation of the New Mobilising System (NMS) - Phase 1		31/12/2023	31/12/2025	Head of Function	NMS Procurement now concluded with contract award to Motorola. NMS Project now moved onto Phase 1 - Planning and Implementation, with initial fact-finding workshops which will work to deliver the initial 'sandpit' environment in early December. Estimated completion date of ICCS implementation will be December 2025 with CAD implementation August to October 2026.				Over 9 months from original due date	

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS008	4	There is a risk of that the Service will be unable to achieve environmental and carbon reduction commitments of 6% per annum; Because of limited investment or anticipated saving targets not being achieved through current projects	ARAC (SDB)	FSC	12	12	8	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
3		2	1		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS011	5	There is a risk to the Service where incidents of fraud are undetected. This may be due to an unwillingness or a lack of awareness by individuals to follow policy and guidance on fraud prevention.	ARAC (CB)	FCS	12	12	9	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		0	1		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS015	6	There is a risk of a number of issues with regards to staffing, including the ability to recruit specialist staff, single points of failure across a number of key roles, lack of succession planning, age profile of staff in senior roles, staff retention rates and staff training; Because of a very buoyant job market in fleet and property, pay grades challenges and the need to review and update structure within sections not updated for 10 years	ARAC (SDB)	FCS	12	12	8	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		0	0		1			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS020	5	There is a risk of SFRS not achieving best value from the resources it has because of inefficient systems and processes, a failure to respond to changing risks and/or ineffective governance.	ARAC (CB)	FCS	12	12	8	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
2		1	1		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS021	2	There is a risk of SFRS Property, Fleet and Equipment Assets failing to meet operational standards; Because of a lack of sufficient capital investment from Government	ARAC (SDB)	FCS	12	12	8	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
5		5	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS023	5	There is a risk to the Service where delays are experienced in introducing a new Finance system. Extensions of the current finance system contract will end over the next two years and challenges will be experienced if further extensions are required.	ARAC (CB)	FCS	12	12	9	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
2		2	0		0			



## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS024	5	There is a risk of failure to deliver the capital programme due to capacity of current staffing levels.	ARAC (SDB)	FCS	12	12	4	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
FCS025	6	There is a risk to the Service where essential mandatory training for support staff is not available. This could put staff at risk or the Service may suffer disruption if no suitably certified staff are available to address workload.	PC (CB)	FCS	12	12	4	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
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 the ability of external partners to confirm requirements	PC (CB)	PEOPLE	12	16	4	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
3		2	0		1			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD018	5	There is a risk that SFRS is not fully compliant with Data Protection requirements due to a lack of effective processes related to how employee data is stored, accessed and maintained in paper based and electronic Personal Record Files	PC (CB)	PEOPLE	12	12	4	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
4		1	3		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD022	6	There is a risk to maintaining positive and harmonious employee relations within SFRS and of potential legal challenge as a result of a lack of prioritisation due to capacity and inconsistent approach to employee relations investigations.	PC (CB)	PEOPLE	12	12	4	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
3		3	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP004	1	There is a risk of insufficient levels of qualified and skilled Fire Safety Enforcement resources due to challenges with recruitment, training/qualification requirements, finances, ICT and retention of staff	SDC (SDB)	PPP	12	12	4	Open (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
3		3	0		0			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SD006	2	There is a risk that Service Delivery is unable to maintain an effective level of capacity and resource within the Directorate because of challenges relating to the recruitment, promotion and retention of staff			PC (CB)	OD	12	12	8	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
2		2		0			0			

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC007	5	There is a risk that the services reputation is adversely affected due to a lack effective communication and consultation plans and supporting management processes resulting in a loss of workforce, stakeholder and public confidence			ARAC (CB)	SPPC	12	12	12	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
1		1		0			0			

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC012	5	There is a risk that the service has inadequate organisation security because of a lack of up to date corporate security arrangements resulting in risk to staff and the public			ARAC (CB)	OD	12	12	8	Cautious (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
2		2		0			0			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
TSA014	6	There is a risk of not being able to demonstrate legislative compliance because of gaps identified in risk control measures, management arrangements and alignment with recognised standards resulting in potential criminal/civil litigation, and reputational damage.	PC (TSAB)	TSA	12	12	4	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD016	6	There is a risk that outdated 'Trainee Firefighter Development to Competent Policy and Procedures' and a lack of clarity amongst employees and managers around process leads to incorrect application of the MA/SVQ process, particularly for new apprentices	PC (CB)	PEOPLE	9	9	4	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SD003	2	There is a risk of SFRS operational availability systems reaching end of life and failing and the existing supplier ceasing to support or maintain legacy systems.	SDC (SDB)	OD	9	9	9	Minimalist (Above Appetite))
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
0		0	0		0			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SDD009	5	There is a risk of the Directorate being unable to embed Strategic Change capabilities across the SFRS as a result of organisational constraints that limit critical resource capacity and capability both within the Portfolio Office and across SFRS functions, which includes the necessity to further develop and build the skills and competencies that are required of a Strategic Change function			CC (CPPG)	PO	9	9	6	Open (Below Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
2		1		1			0			

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SD004	2	There is a risk of failing to maintain a standard suite of Policies because of the volume of Policies and the consultation timeframe. This would result in having an inconsistent approach to service response and could lead to possible operational failures.			SDC (SDB)	OD	8	8	6	Cautious (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
1		0		0			1			

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC003	5	There is a risk that the service does not have an appropriate and effective governance arrangements in place resulting in loss of public and stakeholder confidence.			ARAC (CB)	SSPC	8	8	8	Cautious (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
1		1		0			0			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC013	7	There is a risk that the service fails to secure adequate benefits from collaboration and partnership working due to a lack of effective management and the coordination and sharing of information	ARAC (CB)	SPPC	8	8	8	Open (Below Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
8		8	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC014	5	There is a risk that the service fails to demonstrate robust Business Continuity Planning arrangements, demonstrating lessons learned from Covid and other events	ARAC (CB)	SPPC	8	8	8	Cautious (Within Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
0		0	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD021	6	There is a risk to maintaining an effective Retained Duty System and meeting the Service's obligations under the Fire Scotland Act as a result of the impact of revisions to On Call T&Cs and associated policy / procedural arrangements, in particular effective management to meet the requirements of the Working Time Regulations	PC (CB)	PEOPLE	6	9	4	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
POD023	6	There is a risk to maintaining positive and harmonious employee relations within SFRS as a result of current and planned organisational change activity for which the Service does not yet have an agreed suite of framework and accompanying policies/guidance related to the impact of change on colleagues.	PC (CB)	PEOPLE	6	9	4	Open (Below Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
2		2	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
PPP006	1	There is a risk of SFRS being unable to undertake the powers detailed under Section 29 of the Fire (Scotland) Act 2005, to investigate the origin, cause and development of fires and fulfil it's obligations under the Joint Protocol Agreement with Police Scotland, British Transport Police and Forensic Services - Scottish Police Authority, due to a shortage of staff who have appropriate accreditation	SDC (SDB)	PPP	6	6	4	Minimalist (Above Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
1		1	0		0			

Risk ID	Strategic Outcome	Risk Description	Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SDD004	5	There is a risk that the Directorates ability to promote, enhance and mainstream an organisational culture of continual development and improvement is impacted due to a lack of resources, skills or knowledge contributing to an inability to influence culture and promote development and positive change.	CC (CPPG)	PO	6	6	4	Open (Below Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date	Number of Control Actions 3-9 months from original due date		Number of Control Actions Over 9 months from original due date			
2		2	0		0			



## Appendix B – Other Risk Summary – May 2025

Risk ID	Strategic Outcome	Risk Description			Governance Alignment	SLT Risk Owner	Risk Rating	Previous Risk Rating	Target	Risk Appetite
SPPC015	3	There is a risk that the services consultation and engagement processes do not adequately capture stakeholder feedback because of a lack of consistency across the organisation resulting in a loss of workforce, stakeholder and public confidence.			ARAC (CB)	SPPC	6	6	6	Ambitious (Below Appetite)
Number of control Actions		Number of Control Actions on Target or 3 months from due date		Number of Control Actions 3-9 months from original due date			Number of Control Actions Over 9 months from original due date			
1		1		0			0			

# SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



Report No: C/SDC/16-25

Agenda Item: 12

Report to:		SERVICE DELIVERY COMMITTEE						
Meeting Date:		28 MAY 2025						
Report Title:		FIRESTORM REPORT 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 href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>
1	Purpose							
1.1	The purpose of this report is to provide the Service Delivery Committee (SDC) with an overview of Scottish Fire and Rescue Services’ (SFRS) progress in response to recommendations contained within the Fire Brigade Union (FBU) Firestorm Report that are within the gift of SFRS to consider and action.							
2	Background							
2.1	In October 2023 the FBU published a review of the SFRS which was published ‘Firestorm – a report into the future of the Scottish Fire and Rescue Service.’							
2.2	Whilst the Service had no statutory requirement to give ‘due regard’ to the recommendations contained with the Firestorm Report, the Strategic Leadership Team (SLT) recognised that this represented the views of a large number of staff and as such it was vital this was accepted and progressed accordingly.							
2.3	SFRS is also committed to ensuring progressive, harmonious and effective partnership working relations with Representative Bodies and their members. This reinforces our commitment to the “Working Together Framework”.							
2.4	The SLT also recognised the importance that this report would play in supporting continuous improvement, developing the culture within SFRS and informing the work of the Strategic Service Review Programme (SSRP).							
3	Main Report/Detail							
3.1	Following publication of the report, SFRS and the SLT provided position statements in response to each of the recommendations within the report and instigated an action plan.							
3.2	This was then shared with the FBU who allocated a ‘Lead’ to work alongside each of the identified action owners. Work is continuing with SFRS and the FBU working collaboratively towards each of the actions identified in the action plan.							
3.3	It is worth noting that many of the recommendations made were already being progressed by SFRS in partnership with the FBU.							
3.4	The Firestorm Report contained 51 recommendations, 16 of these were out with the responsibility of SFRS and were aligned to Scottish Government and the National Joint Council. The remaining 35 recommendations relating to SFRS were set out within the							

3.5  3.6  3.7  3.8  3.9	<p>SFRS Firestorm Action Plan. Significant progress has been made with 23 of those recommendations now closed. There are therefore 12 recommendations that remain live.</p> <p>Five of those remaining recommendations relate to leadership and culture and are being progressed by the SFRS Culture Development Group.</p> <p>Three of the remaining recommendations relate to training and will be progressed through the delivery of current BA Recovery Plan and implementation of the Training Function Framework.</p> <p>Two of the remaining recommendations relate to Operations Control and will be progressed through the work of the Operations Control Enhancement Plan and completion of the New Mobilising System Project.</p> <p>One of the remaining recommendations relates to the On Call and will be progressed through the ongoing work of the On Call Improvement Programme.</p> <p>The final remaining recommendation relates to Organisational Learning and will be progressed through the completion on the internal SFRS Jenners Investigation and completion of any subsequent recommendations from that investigation.</p>
<b>4</b>	<b>Recommendation</b>
4.1  4.2  4.3	<p>It is recommended that progress against the remaining recommendations is scrutinised through existing executive and board governance arrangements.</p> <p>The Leadership and Culture and Training recommendations will be scrutinised at People Committee, Operations Control and On Call recommendations will be scrutinised at Service Delivery Committee and the progress of the Jenners Investigation will be overseen by SLT.</p> <p>Therefore, there would be no requirement for any further Firestorm Report Update being presented to the SDC.</p>
<b>5</b>	<b>Key Strategic Implications</b>
5.1 5.1.1	<p><b>Risk Appetite and Alignment to Risk Registers</b></p> <p>Specific Risk Registers relating to all aspects of SFRS activities are provided to the appropriate committees of the Board. There is an organisational risk in failing to respond appropriately or engage fully with the FBU in relation to the Firestorm Report.</p>
5.2 5.2.1	<p><b>Financial</b></p> <p>Any financial implications associated with this report will be considered by the Strategic Leadership Team and SFRS Board where this is out with the normal budgetary arrangements for the Operational Delivery, Prevention Protection and Preparedness and Training, Safety and Assurance Directorates. Where appropriate, this will be done through the Service's Business Case process.</p>
5.3 5.3.1	<p><b>Environmental &amp; Sustainability</b></p> <p>Although there are no direct environmental or sustainability implications associated with this report, SFRS is committed to protecting the environment from a service delivery perspective.</p>
5.4 5.4.1	<p><b>Workforce</b></p> <p>Any workforce issues arising from recommendations within the Firestorm Report are managed in accordance with normal SFRS protocols in this regard.</p>

5.5 5.5.1	<b>Health &amp; Safety</b> Any health and safety issues arising from recommendations within the Firestorm Report are managed in accordance with normal SFRS protocols in this regard.	
5.6 5.6.1	<b>Health &amp; Wellbeing</b> Any health and safety issues arising from recommendations within the Firestorm Report are managed in accordance with normal SFRS protocols in this regard.	
5.7 5.7.1	<b>Training</b> Specific details in relation to operational training are contained within recommendations within the Firestorm Report and were already being addressed through the Training Continuous Improvement Programme.	
5.8 5.8.1	<b>Timing</b> The FBU's Firestorm report was published on the 24 <sup>th</sup> October 2023. SFRS worked to provide position statements and an action plan to the FBU on the 5 <sup>th</sup> February 2024. Work has continued since to progress and complete SFRS specific recommendations.	
5.9 5.9.1	<b>Performance</b> The action plan remains under review by both SFRS and FBU leads for each outstanding action.	
5.10 5.10.1	<b>Communications &amp; Engagement</b> SFRS and FBU leads have continued to meet to discuss progress of actions.	
5.11 5.11.1	<b>Legal</b> Any legal issues arising from the Firestorm Report are managed in accordance with normal SFRS protocols in this regard.	
5.12 5.12.1	<b>Information Governance</b> DPIA completed No. If not applicable state reasons. A Data Protection Impact Assessment is not required as no personal information has been used in the creation of this report.	
5.13 5.13.1	<b>Equalities</b> EHRIA completed Yes/No. If not applicable state reasons. A specific Equality Impact Assessment is not required for this report, albeit these will have been undertaken where appropriate for relevant issues highlighted within the Action Plan.	
5.14 5.14.1	<b>Service Delivery</b> This report provides an update to SDC on service delivery related matters relating to the FBU's Firestorm report.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not Applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Andrew Watt, Deputy Chief Officer
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<b>Substantial/Reasonable/Limited/Insufficient</b>
7.3	<b>Rationale:</b>	All recommendations contained within the Firestorm Report have been given due regard and consideration. Actions have been taken to address recommendations working closely with the FBU.

8	Appendices/Further Reading	
8.1	N/A	
Prepared by:		Andrew Watt, Deputy Chief Officer
Sponsored by:		Andrew Watt, Deputy Chief Officer
Presented by:		Andrew Watt, Deputy Chief Officer
Links to Strategy and Corporate Values		
This report supports the SFRS Objectives of <i>Prevention</i> , <i>Response</i> and <i>People</i> , and all four Values of <i>Safety</i> , <i>Teamwork</i> , <i>Respect</i> , and <i>Innovation</i> .		
Governance Route for Report		Meeting Date
Service Delivery Committee		28 May 2025
		Report Classification/ Comments
		For Information

# SCOTTISH FIRE AND RESCUE SERVICE

## Service Delivery Committee



Report No: C/SDC/17-25

Agenda Item: 13

Report to:		SERVICE DELIVERY COMMITTEE						
Meeting Date:		28 MAY 2025						
Report Title:		ELECTRICAL INFRASTRUCTURE WORKING GROUP						
Report Classification:	For Information Only	<b>SFRS Board/Committee Meetings ONLY</b> <b>For Reports to be held in Private</b> <b>Specify rationale below referring to</b> <b><u>Board Standing Order 9</u></b>						
		<a href="#">A</a>	<a href="#">B</a>	<a href="#">C</a>	<a href="#">D</a>	<a href="#">E</a>	<a href="#">F</a>	<a href="#">G</a>
1	<b>Purpose</b>							
1.1	To provide the Service Delivery Committee (SDC) with an overview and assurance of Scottish Fire and Rescue Service (SFRS) work on emerging issues, as alternative fuels become more prevalent across Scotland. To outline the vision of the Electrical Infrastructure Working Group (EIWG) in preparing for and responding to, these unique risks and hazards.							
2	<b>Background</b>							
2.1	As the Scottish Governments works towards achieving their strategic aims of net-zero greenhouse gas emissions by 2045, this has seen energy innovation and product development evolve at a substantial pace. For Scotland and the wider UK to achieve energy independence and energy security, the development of alternative fuels and technologies are beginning to outpace safety standards. Due to this unprecedented pace, the full understanding of the associated hazards and risks may not be known until much later during a products lifecycle. Increased fire risks are a real concern for the SFRS, NFCC, Scottish Government, SEPA and other key partners.							
2.2	Across the UK, Fire and Rescue Services (FRSs) continue to report increasing numbers of fires associated to lithium-ion powered products. Most notable are incidents involving e-bikes and e-scooters. These trends are no different to Scotland with lithium-ion related incident DATA demonstrating a steady increase of incident activity with 243 incidents report since 2009-2010, 53 of those occurring within 2024-25. With there already being many products within Scottish homes and businesses, action is required to address the change in these incident types while new standards and legislation are developed.							
2.3	The SFRS are working proactively to understand the current and future risks associated with alternative fuels. To achieve this, the EIWG was formed in 2023. The EIWG not only looks at the safe use of lithium-ion products but also takes consideration of the expanding variety of alternative fuels and technology such as Hydrogen. By the EIWG addressing these challenges, the group look to enhance SFRSs preparedness and response capabilities, ensuring a safer environment for both firefighters and the public.							
3	<b>Main Report/Detail</b>							
3.1	In recent years the Scottish Fire and Rescue Service, as with other FRSs across the UK have seen a continued raise in lithium-ion related incidents and increased requests for information and support relating to the countries shift to alternative fuels. Most notably has been the growing increase in incidents involving lithium-ion powered products within the							



3.2	home and the waste industry. SFRS has experienced an increased volume of enquires relating to Battery Energy Storage Systems (BESS) planning applications from public, industry and political leaders.
3.3	The SFRS has taken a proactive approach to addressing the increasing risk and hazards associated with alternative fuels through the establishment of the EIWG. The group focuses on alternative fuels such as BESS, Hydrogen, and lithium-ion batteries.
3.4	The EIWG primary objective is to identify and mitigate the unique risks posed by these fuels. BESS for instance, can experience thermal runaway, leading to fires that are challenging to extinguish. They have also led to increased concerns from members of the public on their safe use. Including the impact that maybe experienced during an emergency incident to the local communities and their environment. Hydrogen, being highly flammable and explosive, requires specialised safety protocols and considerations. Lithium-ion batteries, commonly used in electric vehicles, e-bikes and household items, can also experience thermal runaway, posing significant fire risks within the home and the waste industry.
3.5	To address these risks, the EIWG comprises of expertise from across SFRS directories, key external stakeholders and representative bodies. As we learn through horizon scanning, information sharing and collaborative working with partners, the EIWG structure has evolved into specific subgroups to address four core themes, <ol style="list-style-type: none"> <li>1. Lithium-ion</li> <li>2. BESS</li> <li>3. Hydrogen</li> <li>4. Digital solutions and Innovative Technologies</li> </ol>
3.6	The over arching vision of the EIWG and its subgroups has been to develop strong working relationships with our partners to produce an effective multi-agency response to our changing operational environment, as Scotland strives to reach net zero by 2045.
3.7	To achieve this vision, the EIWG will undertake a six-step strategy of: <ol style="list-style-type: none"> <li>1. Assessment</li> <li>2. Community Safety Engagement</li> <li>3. Protection</li> <li>4. Preparedness</li> <li>5. Response</li> <li>6. Recovery</li> </ol>
3.8	During engagement with key stakeholders and partners, shared key concerns include the potential for complex and unpredictable incidents, inadequate legislation, insufficient training, and limited resources to respond effectively. Furthermore, they have raised concerns around the need for specialised equipment, protocols and expertise needed to mitigate these risks. In addressing these concerns and challenges, the EIWG has worked collaborative to align tri-service understanding and response protocols. This has included SFRS providing technical advice to Police Scotland (PS) in the safe storage of items of evidence which are categorised as lithium-ion powered products. Providing support to the Scottish Ambulance Service (SAS) in their delivery of incident command training. Supporting to both PS and SAS in the key areas of consideration and control measures when attending incident involving alternative fuels.
3.9	The EIWG has worked collaboratively with the British Metal Recycling Association (BRMA) to deliver a Fire Safety seminar to the Scottish refuse and recycling industry. This work is continuing to develop strong working relationship the waste industry sector across Scotland.

3.10	As the EIWG and subgroups evolve and work to mitigate associated risks of alternative fuels, the continued effective collaboration and information sharing among stakeholders will be crucial to address these challenges.
<b>4</b>	<b>Recommendation</b>
4.1	This report is for information only.
<b>5</b>	<b>Key Strategic Implications</b>
5.1 5.1.1	<b>Risk Appetite and Alignment to Risk Registers</b> Identified risk to SFRS employees and public safety is unlikely. Due to the increase in largescale incidents involving Lithium-ion within the waste industry, the risk is high to SFRS' reputation from political and public scrutiny.
5.2 5.2.1	<b>Financial</b> No financial investment aligned to EIWG. EIWG work streams aligned to individual directorate requirements.
5.3 5.3.1	<b>Environmental &amp; Sustainability</b> None currently.
5.4 5.4.1	<b>Workforce</b> Rate of progress made by the EIWG and Sub-groups will be dependent on availability of capacity of members and resources assigned.
5.5 5.5.1	<b>Health &amp; Safety</b> Reducing the risk to operational personnel during incidents through enhanced SSOWs and controls measures. Risk to public and environment from the inherent realise of hazardous material from incident involving alternative fuels.
5.6 5.6.1	<b>Health &amp; Wellbeing</b> None currently.
5.7 5.7.1	<b>Training</b> During the lifespan of the of the EIWG, it is envisioned that the identification and implementation of enhanced training to safely manage alternative fuel incidents will require support from the Training Safety and Assurance directorate.
5.8 5.8.1	<b>Timing</b> Three subgroups working to the EIWG six-step strategy at varying stages. Hydrogen subgroup in the early stages of implementation. Fifth subgroup to capture training and response to be implemented within the next 12 months.
5.9 5.9.1	<b>Performance</b> Performance and progress monitoring governed through Preparedness FMT, Prevention DMT, including lithium-ion incident activity from IRS via the Awareness Briefing: Incident Recording System / Input Free Text for Lithium-Ion Battery Fires.
5.10 5.10.1	<b>Communications &amp; Engagement</b> Communications subgroup developing and issuing educational material internally and externally to employees, partners and public. EIWG work and progress shared via Preparedness SDA SPoC's.

5.11 5.11.1	<b>Legal</b> UK Fire and Rescue Services currently are not statutory consultees in relation to alternative fuels. The SFRS are working to current legislation, Fire (Scotland) Act 2005, Building (Scotland) Regulations 2004 for both Fire Safety Enforcement and Water Planning.	
5.12 5.12.1	<b>Information Governance</b> DPIA completed <del>Yes</del> /No. If not applicable state reasons. Report and associated presentation is for information only	
5.13 5.13.1	<b>Equalities</b> EHRIA completed <del>Yes</del> /No. If not applicable state reasons. Report and associated presentation is for information only	
5.14 5.14.1	<b>Service Delivery</b> During the lifespan of the of the EIWG, it is envisioned that areas of improvement will be required in relation to the way that SFRS and partners prepare, respond and safely resolve Alternative Fuel related incidents.	
<b>6</b>	<b>Core Brief</b>	
6.1	Not applicable	
<b>7</b>	<b>Assurance (SFRS Board/Committee Meetings ONLY)</b>	
7.1	<b>Director:</b>	Jonathan Henderson, Director of Prevention
7.2	<b>Level of Assurance: (Mark as appropriate)</b>	<b>Substantial/Reasonable/Limited/Insufficient</b>
7.3	<b>Rationale:</b>	The proactive and partnership approach taken by SFRS through the establishment of the EIWG is addressing the associated challenges and risks, looking to enhance SFRSs preparedness and response capabilities, hence ensuring a safer environment for both firefighters and the public.
<b>8</b>	<b>Appendices/Further Reading</b>	
8.1	<b>Further Reading:</b> - <a href="#">Awareness Briefing: Incident Recording System / Input Free Text for Lithium-Ion Battery Fires</a>	
<b>Prepared by:</b>		Andy Buchan, Group Commander Prevention
<b>Sponsored by:</b>		Stephen Nesbit, Area Commander Prevention
<b>Presented by:</b>		Andy Buchan, Group Commander Prevention
<b>Links to Strategy and Corporate Values</b>		
<b>Preparedness Function Framework 2025-28:</b> Improve our understanding and develop processes and systems to reduce community risk from new and emerging technologies through our Electrical Infrastructure Working Group (EIWG).		
<b>Governance Route for Report</b>		<b>Meeting Date</b>
<i>Service Delivery Committee</i>		<i>28 May 2025</i>
		<b>Report Classification/ Comments</b>
		<i>For Information</i>

# PREPAREDNESS

## ELECTRICAL INFRASTRUCTURE

Working Group





01

# PREPAREDNESS STRUCTURE

**AC** Stephen Nesbit

**GC** Mark Cleland

**GC** Andy Buchan

Damien Griffith

Resilience

Directorate Support

Water Planning

Electrical Infrastructure  
Working Group  
(EIWG)

Operational  
Intelligence

Community Risk  
Identification Mitigation  
and Engagement  
(CRIME)



# 02 EIWG TIMELINE

## August 2023

- Operations Restructure Proposal
- EIWG Concept Agreed

## August 2024

- EIWG Transitioned to Preparedness
- EIWG structure review
- Internal/External Consultation sessions held with stakeholders
- Formation of Communication WG

## November / December 2024

- National Battery Safety Campaign
- NFCC Collaboration Meeting
- SEPA Collaboration
- Police Collaboration
- BMRA Seminar

## January 2024

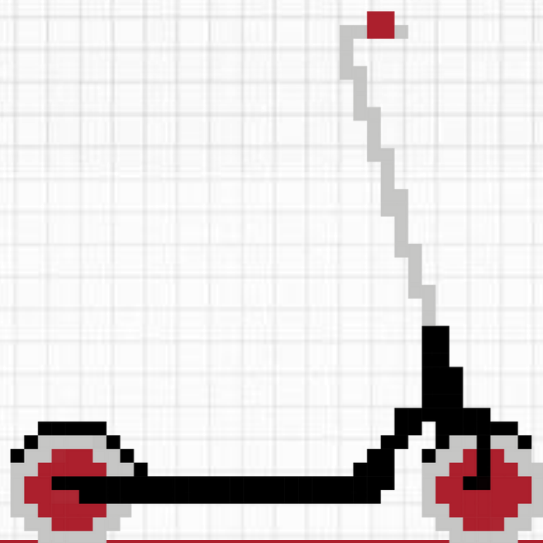
- Inception of Preparedness Function
- EIWG transitioned to Protection (BESS)
- EIWG Established – Draft ToR

## September/October 2024

- Introduction of EIWG Subgroups
- Reviewed EIWG ToR agreed
- HoPS Engagement Session

## February/March 2025

- National Battery Safety Campaign (Phase 2)
- SFRS/PS Emergency response consultation
- LIBERATE Group Member
- SEPA Employee Development Session
- Improvement Service Consultation





# 03 ADDRESSING LI-ION BATTERY RISKS

The purpose of the **Electrical Infrastructure Working Group (EIWG)** is to consider the current and emerging risks that Li-Ion Batteries, and associated technology, presents, and how we work to measure and mitigate the impact this has on the safety and wellbeing of Scottish Fire and Rescue Service (SFRS) employees, public, partners and the environment.

## INNOVATE, PREVENT, RESPOND

- Research and Innovation
- Risk Management
- Protection
- Information Sharing and Education
- Operational Response





# 04 OUR VISION FOR THE EIWG

Our vision for the **EIWG**, is to develop strong working relationships with our partners to produce an effective multi-agency response to our changing operational environment, as **Scotland strives to reach net zero by 2045**.

ASSESSMENT

COMMUNITY SAFETY ENGAGEMENT

PROTECTION

PREPAREDNESS

RESPONSE

RECOVERY



# 05 EIWG STRUCTURE



## Electrical Infrastructure Working Group

Chair: GC Buchan



### Lithium-ion

Chair: GC Haggerty



### Battery Energy Storage Systems

Chair: GC McKearney



### Hydrogen

Chair: SC Cranstoun



### Communications

Chair: GC Low

Partners/Stakeholders Collaboration



# 06 CHALLENGES AND OPPORTUNITIES

## CHALLENGES

- Scale and speed of emerging technologies
- Availability of guidance and support
- Time and Resources
- Legislation
- Development of firefighting tactics within high-risk environments

## OPPORTUNITIES

- NFCC
- SEPA
- Tri-Service Collaboration
- Rep Bodie Collaboration
- Sector leaders in innovation, safety, response and recovery
- Creation of ELWG training subgroup

# SERVICE DELIVERY COMMITTEE – FORWARD PLAN

Agenda Item 14.1

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
21 AUGUST 2025	<ul style="list-style-type: none"> <li>Chair's Welcome</li> <li>Apologies for Absence</li> <li>Consideration of and Decision of any Items to be taken in Private</li> <li>Declaration of Interests</li> <li>Minutes</li> <li>Action Log</li> <li>Review of Actions</li> <li>Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>Date of Next Meeting</li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li>Update from HMFSI</li> <li>Operational Learning</li> <li>Clinical Governance Annual Report</li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li>Service Delivery Update (incl NMS/OC Resilience)</li> <li>Service Delivery Performance Reporting: Quarterly Performance Report,</li> <li>HMFSI Inspection Action Plan Updates</li> <li>Strategic Risk Summary and Committee Aligned Directorate Risks</li> <li>Spotlight Risks: <ul style="list-style-type: none"> <li>TBC</li> </ul> </li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li>Grenfell Report</li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li></li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li></li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>
25 NOVEMBER 2025	<ul style="list-style-type: none"> <li>Chair's Welcome</li> <li>Apologies for Absence</li> <li>Consideration of and Decision of any Items to be taken in Private</li> <li>Declaration of Interests</li> <li>Minutes</li> <li>Action Log</li> <li>Review of Actions</li> <li>Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>Date of Next Meeting</li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li>Update from HMFSI</li> <li>Operational Learning</li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li>Service Delivery Update (incl NMS/OC Resilience)</li> <li>Service Delivery Performance Reporting: Quarterly Performance Report,</li> <li>HMFSI Inspection Action Plan Updates</li> <li>Strategic Risk Summary and Committee Aligned Directorate Risks</li> <li>Spotlight Risks: <ul style="list-style-type: none"> <li>TBC</li> </ul> </li> <li>SFRS Complaints and Compliments Annual Report 2024/25</li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li></li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>	<p><u>Standing/Regular Reports</u></p> <ul style="list-style-type: none"> <li></li> </ul> <p><u>New Business</u></p> <ul style="list-style-type: none"> <li></li> </ul>

## SERVICE DELIVERY COMMITTEE – FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
24 FEBRUARY 2026	<ul style="list-style-type: none"> <li>Chair's Welcome</li> <li>Apologies for Absence</li> <li>Consideration of and Decision of any Items to be taken in Private</li> <li>Declaration of Interests</li> <li>Minutes</li> <li>Action Log</li> <li>Review of Actions</li> <li>Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days</li> <li>Date of Next Meeting</li> </ul>	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> <li>Update from HMFSI</li> <li>Operational Learning</li> <li></li> </ul>	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> <li>Service Delivery Update (incl NMS/OC Resilience)</li> <li>Service Delivery Performance Reporting: Quarterly Performance Report,                             <ul style="list-style-type: none"> <li>HMFSI Inspection Action Plan Updates</li> </ul> </li> <li>Strategic Risk Summary and Committee Aligned Directorate Risks</li> <li>Spotlight Risks:                             <ul style="list-style-type: none"> <li>TBC</li> </ul> </li> </ul>	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> <li></li> </ul>	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> <li></li> </ul>
		<u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>	<u>New Business</u> <ul style="list-style-type: none"> <li>Marmot</li> </ul>	<u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>	<u>New Business</u> <ul style="list-style-type: none"> <li></li> </ul>