



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

PUBLIC MEETING - PEOPLE COMMITTEE

THURSDAY 5 JUNE 2025 @ 0930 HRS

**ENOCH HUMPHRIES ROOM, CLYDESMILL COMMUNITY FIRE STATION,
WESTBURN DRIVE, CAMBUSLANG G72 7NA / VIRTUAL (MS TEAMS)**

AGENDA

1 CHAIR'S WELCOME

2 APOLOGIES FOR ABSENCE

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

4 DECLARATION OF INTERESTS

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

5 MINUTES OF PREVIOUS MEETING: 6 MARCH 2025 (attached)

M Wylie

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

6 ACTION LOG (attached)

Board Support

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

7 COMMITTEE STATEMENT OF ASSURANCE (attached)

M Wylie

The Committee is asked to approve this report.

**8 PERFORMANCE MANAGEMENT FRAMEWORK QUARTERLY
REPORT 2024-25 Q4 (attached)**

*F Ross/
C McGoldrick*

The Committee is asked to scrutinise this report.

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

OFFICIAL

9 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING

- 9.1 People Performance Report Quarter 4 2024/25 (*attached*) F Ross
9.2 Learning and Development Annual Update 2024-25 (*attached*) F Ross/J Kidd

The Committee is asked to scrutinise these reports.

10 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK

- 10.1 Culture Update (*attached*) F Ross
10.2 Employment Law Horizon Scan (*attached*) L Gaja

The Committee is asked to scrutinise this report.

11 TRAINING

- 11.1 Training Function Update and Performance Report Quarter 4 2024/25 (*attached*) C McGoldrick/
R Robison

The Committee is asked to scrutinise this report.

12 SAFETY AND ASSURANCE

- 12.1 Safety and Assurance Performance Report Quarter 4 2024/25 (*attached*) J Holden
12.2 Contaminants Presentation (*attached*) C McGoldrick

The Committee is asked to scrutinise these reports.

13 AUDITS/INSPECTIONS

- 13.1 Internal Audit and Updates (verbal) L Gaja

The Committee is asked to note the verbal update.

14 PEOPLE COMMITTEE RISK REGISTER

- 14.1 Risk Report Update (*attached*) F Ross/C McGoldrick

The Committee is asked to scrutinise this report.

15 PARTNERSHIP WORKING

- 15.1 Employee Partnership Forum (verbal) M Wylie
15.2 Partnership Advisory Group (verbal) F Ross

16 FORWARD PLANNING

- 16.1 Committee Forward Plan Review (*attached*) M Wylie
16.2 Items for Consideration at Future IGF, Board and Strategy Day meetings M Wylie

17 REVIEW OF ACTIONS (*verbal*)

Board Support

18 DATE OF NEXT MEETING

Thursday 11 September 2025

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.

Report(s) for Information only:

- People Policy Review Schedule Update (*attached*)
- Training Continuous Improvement Programme – Update Report (*attached*)
- Training Function Policy Review Schedule (*attached*)
- Safety and Assurance Documents Forward Planning Schedule (*attached*)
- Follow Up on Equal Pay and Gender Pay Gap Report 2025 (*attached*)

PRIVATE SESSION

19 MINUTES OF PREVIOUS PRIVATE MEETING: 6 MARCH 2025
(*attached*)

M Wylie

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

20 PRIVATE ACTION LOG

Board Support

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

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

21.1 Draft Minutes of last meeting – 6 March 2025 (*attached*)

M Wylie

21.2 Update of next meeting – 16 June 2025 (*verbal*)

M Wylie

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

**22 VOLUME OF CALLS TO SAFECALL CONFIDENTIAL REPORTING
LINE AND ANALYSIS OF THEMES** (*verbal*)

F Ross

The Committee is asked to note the verbal update.

23 KEY CASE UPDATES 2024/25 – Q4 (*verbal*)

L Gaja

The Committee is asked to note the verbal update.



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PUBLIC MEETING – PEOPLE COMMITTEE

THURSDAY 6 MARCH 2025 @ 1300 HRS

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

PRESENT:

Mhairi Wylie (Chair) (MW)
Neil Mapes (NM)
Madeline Smith (MS)

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

IN ATTENDANCE:

Craig McGoldrick (CMcG)	Assistant Chief Officer, Director of Training, Safety and Assurance
Liz Barnes (LB)	Interim Deputy Chief Officer Corporate Services
Ross Robison (RR)	Deputy Assistant Chief Officer, Head of Training
Jim Holden (JH)	Head of Safety and Assurance
Lyndsey Gaja (LG)	Head of People
Fiona Munro (FM)	Head of People
Gillian Clark (GC)	People Manager Reward, (Item 8.2 only)
Les Mason (LM)	Group Commander Operations (Item 8.2 only)
Kenny McCartney (KM)	Group Commander Operations Control (Item 13.2 only)
Kirsty Darwent (KD)	Chair of SFRS Board
Chris Casey (CC)	Group Commander Board Support
Heather Greig (HG)	Board Support Executive Officer
Debbie Haddow (DJH)	Board Support/Minutes

OBSERVERS

Colin Brown, Fire Brigades Union

1 CHAIR'S WELCOME

- 1.1 The Committee Chair opened the meeting and welcomed those present and attending via MS Teams.
- 1.2 Those participating via MS Teams were reminded to raise their hands, in accordance with the remote meeting protocol, should they wish to ask a question. This meeting would be recorded for minute taking purposes only.
- 1.3 On behalf of the Committee, the Chair thanked Lyndsey Gaja for her input and support during her tenure as Interim Director of People.

2 APOLOGIES FOR ABSENCE

- 2.1 David Farries, Assistant Chief Officer, Director of Operational Delivery

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

3.1 The Committee discussed and agreed that the *Key Case Updates* verbal report would be heard in private session due to the small number of individuals involved and confidentiality and in line with Standing Orders (Item 9D). The *Wellbeing Recovery Plan* report and draft minutes/verbal update of the *Remuneration, Appointments and Nominations Sub Committee* would be taken in private due to the confidential nature of the issue (Item 9G).

3.2 No further items were identified.

4 DECLARATIONS OF INTERESTS

4.1 No conflicts of interest were declared.

5 MINUTES OF PREVIOUS MEETING: THURSDAY 5 DECEMBER 2024

5.1 The minutes were agreed as an accurate record of the meeting.

5.2 **The minutes of the meeting held on 5 December 2024 were approved as a true record of the meeting.**

5.3 Matters Arising

5.3.1 No matters arising from the minutes of the previous meeting.

6 ACTION LOG

6.1 The Committee considered the Action Log noting the updates and agreed the closure of completed items.

6.2 The Committee noted the costs/benefits arising from previous migration courses and queried whether this process would be considered again. LG advised that arrangements for the next wholetime firefighter intake were in progress and potential migration would be explored.

6.3 **Members noted the updated Action Log and approved the removal of completed actions.**

7 PEOPLE: WORKFORCE DEVELOPMENT AND WELLBEING

7.1 People Performance Report Quarter 3 2024/25

7.1.1 LG presented the People Performance Report Quarter 3 2024/25 to the Committee for scrutiny of the People KPIs from the Performance Management Framework and the further details within the People Performance Report. The following key areas were highlighted from the Executive Summary:

- Significant senior management recruitment processes conducted during this quarter.
- Significant uniformed promotional activities primarily driven by high retirement levels.
- Trainee Firefighters who commenced in August 2024 had concluded their training and were now deployed to identified stations. The next Trainee Firefighter course would commence in Quarter 4 and would include On Call migration and external transfers groups.
- Successful recruitment of Operations Control (OC) personnel resulting in high numbers of applicants and conversion rates.
- Outline of the steps being taken to progress the pending changes to the Protection of Vulnerable Groups Scheme.
- Update on future employment law changes to be brought to the next meeting.

7.1.2 The Committee questioned how the Service reconciles the Target Operating Model (TOM) with duty systems, Service Delivery Review (SDR) and the limited knowledge of daily working activities. LG stated that it was inaccurate to say that there was limited knowledge on daily working activities. Due to the nature of emergency response of frontline personnel, there was a limited ability to programme activities for specific periods. However, there were clear station routines and activities, including community engagement, safety and enforcement and operational intelligence activities undertaken. LG noted that any changes to the TOM or disposition of personnel as a result to SDR would only be understood following appropriate

public consultation and agreement of changes. It was further noted that the current disposition of personnel and resources were based on providing emergency response and legacy provisions. CMcG noted that the risk and demand drives the number of firefighters required, the nature of the station activities and training requirements. CMcG highlighted the use of the 7 week cycle tool that would help stations programme additional training based on their individual capacities, risks and levels of community engagement. This tool would provide an oversight of how individual stations utilised their time.

- 7.1.3 The Committee noted that it would be helpful to gain a wider understanding of the process in relation to the TOM. The Committee referenced previous discussions in relation to the Performance Management Framework review and how the Committee's involvement would be beneficial to aid their understanding and assurances being taken.
- 7.1.4 In regard to change in contractual hours for On Call personnel, the Committee queried how the Service would now calculate the Full Time Equivalent (FTE). LG outlined how the Service had previously calculated the FTE and noted that the same logic would be applied to the new bandings. It was noted that consideration would also have to be given to the appliance availability within individual stations.
- 7.1.5 In regard to disciplinary investigations, the Committee queried the Service's capacity to undertake these processes. LG commented on the challenges relating to capacity and other factors that impact on timescales. LG noted that the Service continues to monitor, review and mitigate where possible.
- 7.1.6 The Committee commented on the increased vacancy levels within OC and queried whether this was due to individuals leaving to pursue other opportunities or relatively new starts leaving for other reasons. CMcG noted that there was increasing recognition of competency/skill sets within OC personnel, nearing retirement, which were desirable to other organisations
- 7.1.7 In regard to future trainee courses, LG advised that the Service were still progressing the current pool of applicants. LG further advised that a cross functional working group was looking at the attraction and selection processes for wholetime personnel and targeted recruitment campaigns would commence in summer 2025.
- 7.1.8 In relation to the evaluation of the Crew Commander promotional process, FM briefly outlined the main issues highlighted from candidates and managers involved in the process. This included providing information ahead of the process to allow individual to prepare, ensuring consistency and calibration particularly if there is a large widespread volume of applicants, and providing in person feedback following interviews.
- 7.1.9 The Committee commented on the potential for further updates, learning and opportunities to extend the migration process from On Call to Wholetime to be provided at the next meeting. Brief discussion took place on the potential migration of personnel into other functions ie training.
- 7.1.10 The Committee noted and took assurance from the low level of activity on the confidential phone lines.
- 7.1.11 **The Committee scrutinised the report.**

(L Mason joined the meeting at 1330 hrs)

7.2 Standardisation of RDS Terms and Conditions

7.2.1 On behalf of the Service, LG extended her thanks to all colleagues across the Service and Trade Unions for their efforts and hard work throughout the process. The Committee also noted their thanks and recognised the staff affected by these changes.

7.2.2 GC and LM presented a report providing an update on the implementation of the standardisation of Retained Duty System (RDS) Terms and Conditions (T&Cs) of employment. The following key points were highlighted:

- Timescale from commencement to implementation date of 1 January 2025.
- Policies relating to Payment for Work Activities and Annual Leave & Public Holiday were implemented on 1 January 2025. A further policy relating to Dual Contracts was deferred to allow further clarity, development of support guidance, etc. This revised policy was currently out for familiarisation prior to going live on 1 April 2025.
- Series of staff engagement workshops were scheduled to help address queries and embedding of the policies.
- Ongoing monitoring of appliance availability and performance trends.
- Improved ability to realise various benefits and efficiencies.
- Positive impact on the rostering system for On Call, launching in November 2025 and SDR.
- Potential re-engagement/recruitment opportunities.
- Outline of the governance and oversight arrangements. Proposed update to be presented to the Committee in approximately 6 months.

7.2.3 In regard to appliance available, it was noted that the revised dual contract policy may impact on the availability levels which could take some time to stabilise, and the Committee should remain aware of this. LM advised the Committee that the recent reduction in availability was partially due to personnel taking their entitled rest periods. It was noted that the new rostering system would provide greater oversight and management of rest periods.

7.2.4 In regard to recruitment, LG noted any recruitment decisions would be targeted and based on local needs, challenges with appliances availability, etc.

7.2.5 The Committee noted that updates would be submitted to future meetings, approximately 6 and 12 months' time. It was noted that this Committee would focus on the performance indicators relating to recruitment and the Service Delivery Committee would oversee the appliance availability data.

7.2.6 The Committee questioned the financial implications of increased recruitment and the overall impact on the budget. It was noted that the On Call Improvement Programme/local management would continue to have oversight of any recruitment and the Strategic Leadership Team would continue to monitor and report any potential financial risks.

7.2.7 The Committee noted that going forward they would look for assurances on the impact and success around the dual contracts process, rostering project and recruitment including attraction, turnover, contract profile types and colleague experience.

7.2.8 The Committee scrutinised the report.

(G Clark and L Mason left the meeting at 1355 hrs)

7.3 Talent Pathways

7.3.1 LG presented a report to the Committee to provide an overview of the Service's current approach to talent identification, development, and succession planning along with potential future developments for scrutiny. The following key issues were highlighted:

- Less formalised or established approach to talent pathways and succession planning within the support staff group.

- Overview of the approach taken through the organisational change activity when reviewing operating model within functions. This includes clearer articulation of development pathways and reviewing structures to address single points of failure.
- Overview of the model used by the Finance function and Workforce Planning to predict the uniformed leaver's profile. This informs the recruitment, promotion and succession planning over the coming 12 month period.
- Positive progress and feedback from the Supervisory Management Development programmes.

7.3.2 In regard to secondments, LG noted that there were various development opportunities, both internally and externally, for individuals to broaden their skills beyond their substantive roles.

7.3.3 The Committee queried how the talent strategy addressed disability and neurodiversity. LG stated that the development programme was designed with accessibility in mind. Similarly, any recruitment and promotional process had similar arrangements to provide additional support, if required. FM advised that the Service were currently a Level 2 Employer for Disability Confident and were currently reviewing all processes to ensure that these guidelines were being met.

7.3.4 The Committee questioned how the pace and reach of the management and leadership development training could be increased. LG reminded the Committee of the scale of the supervisory management cadre which would take a significant amount of time to progress. LG noted that consideration was being given to different approaches to release individuals for training, but the Service had to remain mindful of capacity to facilitate the programme and individuals' ability to consume the learning.

7.3.5 In regard to coaching, LG noted the important role that this played in developing talent, however, there was no formal network established. LG further noted that informal coaching/mentoring was taking place within the Service. Discussion took place on the different approaches that could be undertaken and the potential challenges with capacity/capability.

7.3.6 The Committee commented on the Service's corporate volunteering policy and the potential for further information to be brought to a future meeting.

7.3.7 **The Committee scrutinised the report.**

7.4 SVQ External Verification Update

7.4.1 LG provided a verbal update in relation to the SVQ external verification. LG advised that the Scottish Qualifications Authority had recently undertaken a further verification audit. All elements were found to be satisfactory, and areas of good practice were identified. Additional areas for further improvements were highlighted during the audit.

7.4.2 The Committee noted and welcomed the improving position. Consideration should be given for future updates to be provided to the Committee for assurance purposes.

7.4.3 **The Committee noted the verbal report.**

8 EQUALITY, DIVERSITY, CULTURE AND FAIR WORK

8.1 Culture Action Plan – Update Paper

8.1.1 LB presented the report providing an update to the Committee on the progress of future pathway activities detailed within the Culture Action Plan and delivered via the Culture Development Group (CDG) and associated subgroups. The following key points were highlighted:

- Correction to the covering report, it was noted that the Strategic Leadership Team had not reviewed the Free Text Report at the 5 March 2025 meeting. This had been deferred to a future meeting.

- Launch of Focus Groups had been delayed due to the lack of volunteers.

8.1.2 In regard to the priority action, the Committee commented on the use of the word candidates rather than colleagues. LB noted that this had been discussed and that candidates was preferred for any external focus.

8.1.3 The Committee commented on the potential risks from a non-diverse or representative workforce. It was noted that a meeting had been scheduled to discuss this issue, and any outcomes would be fed back into the Committee.

8.1.4 In regard to future planned activities, the Committee requested that realistic but demanding timescales be identified. LB commented on the capacity within the Comms functions which was impacting on the planned activities and noted that work was ongoing to resolve the issues. At the recent CDG meeting, LB noted that Comms were tasked to develop a delivery plan, and that the assignment of a Project Manager within the Portfolio Office would help focus activities. The Committee requested that the realistic timeline for future planned activity, including how the value of innovation can be incorporated within our culture, be presented at the next meeting.

ACTION: LB/S O'Donnell

8.1.5 The Committee suggested that future reports should include reference to identifying and sharing good practice. LB welcomed this suggestion and would take this back to the CDG for consideration.

8.1.6 Brief discussion took place on events such as Women in the Fire Service, work with ethnic minority groups, etc to raise awareness of the Service and their role in local communities and recruitment opportunities.

8.1.7 The Committee noted that reference to maternity returners should be expanded to include paternity and adoption leave, etc.

8.1.8 **The Committee scrutinised the report.**

9 TRAINING

9.1 Training Function Update and Performance Report Quarter 3 2024/25

9.1.1 CMcG, introduced RR who presented the high-level overview of the Training function activity and performance over Quarter 3 2024/25 and highlighted the following key points:

- Recent audit on the ISO 9001 Quality Management System where zero non-conformities were reported.
- Update on progress of capital investment in line with the Training Service Asset Management Plan.
- Intention to review training standards under continuous improvement work. This would involve benchmarking exercises, ensuring compliance with legislative requirements, improved planning arrangements and strategic alignment.
- KPI22 and KPI23 (core skills) were reporting an overall increase across all duty groups.
- KPI24 (FDO Module Completion) was reporting a slight decrease during this quarter.
- KPI25 (Incident Command Course Currency) was reporting a slight decrease, and future courses were scheduled in April 2025.
- KPI26 (Core Skills Currency) was reporting an increase.
- KPI27 (Specialist Rescue Currency) reported an overall increase with the exception of one element, Mass Decontamination but this remained above set targets.
- KPI28 (Training Function Currency) was reporting a decrease in completion rates and alternative methods of delivery were being investigated and would be piloted in April 2025.
- KPI29 (Customer Satisfaction Rates) continues to report an increase and customer comments being taken on board.

9.1.2 CMcG gave a presentation to provide a comprehensive overview of the development and competency roadmap for both wholetime and on call firefighters. This would assist in understanding and correlating the roadmap to the People Committee Performance Management Framework (PMF) Key Performance Indicators (KPIs). The following key points were highlighted:

- Misleading terminology of currency and competency which needs to be revised.
- Wholetime Roadmap journey from entry to Service through to competence over a 3-year period.
- Explanation of the 5 phases on the training journey to become a competent firefighter including the additional layers required to ensure whole crews were competent.
- On Call Roadmap had the same standards and timescales with some adjustments to the delivery methods.
- Outline of additional training/skills required to underpin firefighters competence including how they are obtained, maintained and monitored.
- The current KPI for specialist skills provide data on performance against the programme of events that individuals are expected to undertake. Personnel movements between stations impact on this data due to the individual's skills set.

9.1.3 The Committee commented on the overuse of the term competency and the need to focus on using the correct language.

9.1.4 The Committee queried how the Service planned and maintained appropriate skills across crews and stations. CMcG noted that resilience was built into the system which was evident from specialist skills reporting at 130%.

9.1.5 In regard to the SVQ, LG advised that there were comparable qualifications within the other UK fire and rescue services.

9.1.6 In regard to the timescale required to achieve competency, CMcG noted that the 3-years were appropriate due to the volume of material/learning required, practical and observational elements. RR further noted the co-dependence with the completion of the training for operational competence framework which is progressed over a 3-year period.

9.1.7 It was noted that On Call personnel were not offered the opportunity to undertake this qualification due to the challenges involved in achievement. LG noted that On Call migrating into Wholetime could potentially achieve the qualification quicker due to their previous experience.

9.1.8 Brief discussion took place on the Training function capacity to flex to meet the needs of the Service and the advantages of training instructors being multi disciplined.

9.1.9 LG advised that there was a small number of reservists registered within the Service.

9.1.10 **The Committee scrutinised the report.**

9.2 Training Function Presentation – FF Currency/Competency

9.2.1 This item was presented and discussed under Agenda item 9.1.

(Meeting broke at 1455 hrs and reconvened at 1500 hrs)

10 SAFETY AND ASSURANCE

10.1 Safety and Assurance Performance Report Quarter 3 2024/25

10.1.1 JH presented the Safety and Assurance Performance Report Quarter 3 2024/25 to provide an update on key projects of works across the function to support Safety and Assurance KPIs. The following key areas were highlighted:

- Recent operational assurance work including key learning and recommendations arising from this.
- Reviews of legal register and guidance.
- KPI50 (verbal attacks) and KPI51 (physical attacks) increased during Q3, which is not uncommon however, physical attacks increased significantly. Review to be undertaken to identify the reason for this.
- KPI52 (RIDDOR) remained consistent within Q2 with 3 incidents.
- KPI53 (Accident/Injuries) reported a decrease in Q3 which was similar to previous years and analysis was being undertaken to identify any reasons for this.
- Launch of LCMS Assessors Manual Handling training module
- KPI54 (near miss) reported a slight increase, and reporting would continue to be promoted through the Safety and Assurance Groups.
- KPI55 (vehicle events) reported a slight increase. Training equipment has now been published for each service delivery area and low speed manoeuvre training would be rolled out in the new financial year. Low Speed Manoeuvre handbook was nearing completion and would be published in due course.
- KPI56 (health and safety improvement plans) continued to report a decrease over the last 2 quarters.
- KPI19 (operational assurance) would be reviewed to assess the value of this indicator.
- Organisational Learning Group (OLG) update noting the closure of 12 actions.
- Health and Safety Executive 50th Anniversary and key message from HSE.
- Update on Event investigations and OA13 Outcomes.

10.1.2 The Committee noted and welcomed the format and information within the report.

10.1.3 In regard to increased physical attacks during Q3, the Committee queried whether these incidents were prevalent in certain areas and what learning could be taken from these incidents/other blue light services. JH noted that the Service recorded the lowest number of incidents across the blue light services and that the dual attendance with Police Scotland may have impacted negatively on the number of incidents. JH further noted the work undertaken by Local Senior Officers within their local area to raise awareness and reduce any incidents. CMcG advised the Committee that the Service were engaging with Dr Richardson, who was undertaking a UK wide study of attacks on firefighters.

10.1.4 In regard to operational learning, the Committee noted that several actions raised since 2019 were still outstanding. JH noted that the Service had changed since the initial recommendations were made. As such, some of the actions had evolved into a larger piece of work and had not directly been addressed. Brief discussion took place on the wider issue across the Service relating to the timescale for recommendations to be addressed. It was noted that the Service should show due regard to recommendations, and the ability to fully address and close them. The Committee requested an update to provide clarity on any outstanding actions raised between 2019-2022 to be featured within the next report.

ACTION: CMcG/JH

10.1.5 The Committee commented on the benefit of raising public awareness of attacks and potential training opportunities. CMcG noted that due to the seasonal increase in attacks seen in Q3, there was a targeted and collaborative approach taken to messaging across the blue light services.

10.1.6 **The Committee scrutinised the report.**

(F Munro and R Robison left the meeting at 1515 hrs)

10.2 Contaminants Update

10.2.1 CMcG presented the report providing an update on the management of contaminants and highlighted the following key areas:

- Summary of work being carried out under the guidance of the National Fire Chiefs Council (NFCC).
- Fire Contaminants Standard Operating Procedure (SOP) had been issued for familiarisation. The collaborative approach taken within this area was noted and welcomed. It was recognised that the impact of the SOP would be continually monitored and evolved as appropriate.
- Thematic inspection to be undertaken after a suitable period to allow the SOP to be fully embedded.
- Related to the CivTech project, biological and physiological monitoring devices would help track exposure and effectiveness of control measures.

10.2.2 In regard to the CivTech monitoring devices, JH advised that volunteers would be sought from BA instructors and course participants due to the controlled environment of the training course. The exposure tracker would be offered, still on a voluntary basis, to a wider training courses/centre. It was noted that the equipment was a prototype and would be limited to controlled environments initially.

10.2.3 CMcG commented on the additional equipment which will be used to track physiological impact on individuals. It was noted that a display or demonstration would be given to the Service Delivery Committee in due course.

10.2.4 JH advised that CivTech were the main funders, however the Service had some initial investment. JH further advised that Legal Services were reviewing the intellectual property aspects.

10.2.5 The Committee scrutinised the report.

(R Robison left the meeting at 1525 hrs)

11 AUDIT/INSPECTIONS

11.1 HMFSI Inspection Action Plan Updates and Closing Reports

11.1.1 JH and LG presented the report updating the Committee on the progress against the action plans developed in response to the HMFSI Reports relating to Health and Safety: An Operational Focus and the Mental Health and Wellbeing.

11.1.2 JH advised the Committee that only one action remained outstanding for the Health and Safety action plan and remained on track for completion by the amended due date. JH outlined the reason for the delay.

11.1.3 CMcG reflected on earlier discussions in regard to how information was presented in order to provide greater understanding on the work being undertaken to achieve the recommendation.

11.1.4 With regard to the Mental Health and Wellbeing action plan, LG advised the Committee that due to prioritising the Wellbeing Recovery work, most of these actions have not been progressed. LG further advised that HMFSI were aware of the situation and were content that the action plan would be refreshed/rebaselined following stabilisation of the Wellbeing Recovery work. LG confirmed that the refreshed action plan would be available for the September 2025 meeting and that an update on indicative timings would be provided at the June 2025 meeting.

ACTION: LG/F Ross

11.1.5 LG outlined the challenges in securing a Chair for the Mental Health and Wellbeing Group and that this would be revisited as part of the refresh of the action plan.

11.1.6 **The Committee scrutinised the report.**

11.2 Internal Audit Updates

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

- Sickness Absence Management: Action plan had been completed.
- Equality, Diversity and Inclusion: Evidence relating to the final outstanding action had been provided to Azets for review and closure.

11.2.2 In regard to the Equality, Diversity and Inclusion action plan, the Committee confirmed that, subject to Azets acceptance of the evidence and approving closure, there was no requirement for a formal report to be brought to the next meeting.

11.2.3 **The Committee scrutinised the report.**

(K McCartney joined the meeting at 1540 hrs)

12 PEOPLE COMMITTEE RISK REGISTER

12.1 Committee Aligned Directorate Risk

12.1.1 LG and CMcG presented the Risk Report, identifying Directorate risks and controls pertinent to the business of the Committee. It was noted that there were 5 risks reporting risk ratings of 15 or above. The following key points were highlighted:

- POD020 (Capacity to support high priority workstreams): Control actions were being considered to manage this risk.
- POD015 (Pensions): One control action was overdue due to being outwith the Service's control, however the Service continues to work closely with Scottish Public Pension Agency on this issue.
- FCS022 (finance/procurement recruitment/retention): Consideration to be given to improve awareness of benefits, wider work package, etc over and above base salaries. Market allowance would continue to be explored. Restructure within finance and procurement teams to address recruitment challenges.
- TSA019 (maintain/improve training delivery due to facilities): Recent reduction in risk rating to 16 due to the introduction of the Training SAMP. Control actions have been reviewed to better reflect the current position.
- FCS018 (maintain/improve training delivery due to capacity): Increased risk rating to 16 due to work being undertaken to move courses/learning online.

12.1.2 The Committee noted and welcomed reference to the prioritisation exercise undertaken in regard to business as usual/project activities within the People Directorate.

12.1.3 **The Committee scrutinised the report.**

12.2 Risk Spotlight: Operational Control Staffing

12.2.1 KM presented the risk spotlight to provide an update on the risk of a non-resistant Operations Control (OC) due to insufficient number of employees and an ineffective OC structure. The following key points were highlighted:

- OC TOM had recently increased to 174 plus an additional 15 temporary firefighters during the implementation of the new mobilising system. Staffing levels, when fully established, are 8, 9 and 11 at Dundee, Edinburgh and Johnstone, respectively. These levels reflect the operational demand within the 3 service delivery areas.

- Current OC establishment levels were 154 and staffing levels regularly fall to 6, 7 and 9 respectively. When levels may drop to critical level (3 per watch), this is managed through maintenance of skills, overtime and balancing of shifts.
- Workforce demographics are 82% female and 18% male. This increases the likelihood of personnel requiring adjustments via New and Expectant Mother Management Arrangements, etc. Level of OC staff currently on maternity level was 5% (8 individuals).
- Recent recruitment campaign reported a demographic split of 50% male and female. Demographics of successful candidates were 66% female and 33% male.
- OC service delivery was facilitated through the 5-watch duty system. Due to the geographical spread, OC were not able to access some staffing resilience options such as detached duties, transfers, etc. Existing resilience measures such as diverting calls, buddy arrangements, etc are stood up as required.
- Implementation of the new mobilising system would offer greater interoperability options.
- Absorption rates over the last 2 years remain high at 21.1% with regular analysis of absence rates being undertaken.
- Recognition of impact on staff due to shortages, etc and noted the various support mechanisms available.
- Recognition of impact staff to demonstrate continuous improvement, undertake training and development opportunities whilst maintaining operational delivery needs.
- Recognition of the importance of leadership development.
- Recognition of the learning to be gained from exit interviews to understand reasons for individuals leaving the Service.

12.2.2 The Committee queried whether the TOM was accurate and how the Service compared to other UK fire and rescue services (FRS) and other public services. KMcC noted that similar challenges were being seen across other UK FRS. CMcG advised the Committee that the TOM was appropriate for the existing 3 independent OC sites. However, the Service would remain mindful that this may change following the implementation of the new mobilising system.

12.2.3 KMcC commented on sharing/standardisation of learning across individual OC, exposure of OC personnel to wider parts of the organisation and representation on Service wide and national forums. KMcC noted that these opportunities had to be balanced with operational needs.

12.2.4 **The Committee scrutinised the report.**

(K McCartney left the meeting at 1600 hrs)

13 PARTNERSHIP WORKING

13.1 Employee Partnership Forum (EPF)

13.1.1 MW advised the Committee that the last scheduled meeting for 10 February 2025 had been stood down due to no items being tabled.

13.1.2 MW and LG attended a constructive meeting with Rep Bodies and a further meeting would be scheduled in due course.

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

13.2 Partnership Advisory Group (PAG)

13.2.1 LG advised the Committee that the next scheduled meeting on 13 March 2025 had been stood down due to no items being tabled.

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

14 FORWARD PLANNING

14.1 Committee Forward Plan Review

14.1.1 The Committee considered and noted the Forward Plan.

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

14.2 Items for Consideration at Future IGF, Board and Strategy Meetings

14.2.1 There were no items identified.

15 REVIEW OF ACTIONS

15.1 CC confirmed that there were 3 formal actions recorded during the meeting.

16 DATE OF NEXT MEETING

16.1 The next meeting is scheduled to take place on 5 June 2025.

16.2 There being no further matters to discuss, the public meeting closed at 1600 hrs.

REPORTS FOR INFORMATION ONLY:

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

- People Policy Review Update
- Training Continuous Improvement Programme – Update Report
- Training Function Policy Review Schedule
- Safety and Assurance Documents Forward Planning Schedule

(Public meeting broke at 1600 hrs and reconvened in Private session at 1605 hrs)

PRIVATE SESSION)

17 MINUTES OF PREVIOUS PRIVATE MEETING: THURSDAY 5 DECEMBER 2024

17.1 The minutes of the private meeting held on 5 December 2024 were approved as a true record of the meeting.

18 PRIVATE ACTION LOG

18.1 The Committee noted that there were no outstanding actions.

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

19.1 The draft minutes of the RANSc meeting on 5 December 2024 had been circulated to the Committee and a verbal update from the meeting on 6 March 2025 was provided.

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

20 WELLBEING RECOVERY PLAN

20.1 LG presented a report to the Committee to update on the Wellbeing Recovery Plan being implemented to address the outcomes of the Wellbeing Audit. LG noted that JH was providing support and leading on engagement with the HSE.

20.2 **The Committee scrutinised the report.**

21 KEY CASE UPDATES 2024/25 – QUARTER 3

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

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

There being no further matters to discuss, the private meeting closed at 1625 hrs.

On behalf of the Committee, the Chair extended her thanks to Liz Barnes for her support and hard work during her tenure and wished her well for her pending retirement.

DRAFT

PEOPLE COMMITTEE – ROLLING ACTION LOG



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Background and Purpose

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

The status of actions are categorised as follows:

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

Actions/recommendations

Currently the rolling action log contains 3 actions. No actions have been completed.

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

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Meeting Date: 6 March 2025						
Minute Ref	Action	Lead	Due Date	RAG Status	Completion Date	Position Statement
8.1.4	Culture Action Plan – Update Paper: The Committee requested that the realistic timeline for future planned activity including how the value of innovation can be incorporated within our culture be presented at the next meeting.	LB/SO'D	June 2025			Update (05/06/2025): A reset and review of Culture & Leadership has commenced and a workshop with SLT on 3 June to review our approach, develop a shared Culture & Leadership vision, agree and prioritise key activities. This will lead to a strategy and an action plan and will migrate under the Portfolio Office governance structure.
10.1.4	Safety and Assurance Performance Report Quarter 3 2024/25: The Committee requested an update to provide clarity on any outstanding actions raised between 2019-2022 to be featured within the next report	CMcG/JH	June 2025			Update (05/06/2025): A verbal update will be provided by HoF Jim Holden on 05/06/25 (covered within S&A Q4 Performance Report); no additional agenda item required.
11.1.4	HMSFI Inspection Action Plan Updates and Closing Reports: LG confirmed that the refreshed action plan would be available for the September 2025 meeting and that an update on indicative timings would be provided at the June 2025 meeting	LG/F Ross	June 2025			Update (05/06/2025): The review of the HMFSI Inspection Action Plan will consider the findings and recommendations of the Compliance Investigation and a verbal update will be provided at the meeting.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/17-25

Agenda Item: 7

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 JUNE 2025						
Report Title:		COMMITTEE STATEMENT OF ASSURANCE 2024/25						
Report Classification:		For Decision	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
			A	B	C	D	E	F
1	Purpose							
1.1	The purpose of this report is to present the annual Statement of Assurance 2024/25 for the People Committee (PC), outlining evidence of how the Committee supports the effective functioning of the Board.							
2	Background							
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.							
3	Main Report/Detail							
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.							
4	Recommendation							
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.							
5	Key Strategic Implications							
5.1	Risk Appetite and Alignment to Risk Register							
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	Financial							
5.2.1	The PC supports the work of the RANSC to lead negotiations on behalf of the employer in respect of staff pay claims and terms and conditions.							

5.3 5.3.1	Environmental & Sustainability There are no environmental and sustainability implications arising from this report.	
5.4 5.4.1	Workforce The PC and RANSC review matters that relate specifically to all members of SFRS workforce.	
5.5 5.5.1	Health & Safety This report highlights the contribution towards improving the Health & Safety of staff.	
5.6 5.6.1	Health & Wellbeing This report highlights the contribution towards ensuring the Health & Wellbeing of staff.	
5.7 5.7.1	Training There are no training implications arising from this report.	
5.8 5.8.1	Timing 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	Performance Information contained within this report deems that there are no significant gaps in the performance of the PC or RANSC and its approach to scrutinising the monitoring and reporting arrangements.	
5.10 5.10.1	Communications & Engagement This report provides an opportunity for PC 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	Legal 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	Information Governance DPIA completed Yes /No. No DPIA was required for this paper as it contains no personal information.	
5.13 5.13.1	Equalities EHRIA completed Yes /No. If not applicable state reasons. Covered by the SFRS Corporate Governance Arrangements 2025 EHRIA.	
5.14 5.14.1	Service Delivery There are no Service Delivery implications arising from this report.	
6	Core Brief	
6.1	Not applicable.	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Richard Whetton, Head of Governance, Strategy and Performance
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/ Limited /Insufficient
7.3	Rationale:	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.	
8	Appendices/Further Reading		
8.1	Appendix A – People Committee Annual Statement of Assurance 2024/25		
Prepared by:		Heather Greig, Board Support Executive Officer	
Sponsored by:		Mhairi Wylie, Chair – People Committee	
Presented by:		Mhairi Wylie, Chair – People Committee	
Links to Strategy and Corporate Values			
This links to all seven outcomes of the SFRS Strategic Plan 2022-25.			
Governance Route for Report		Meeting Date	Report Classification/ Comments
People Committee		5 June 2025	For Decision



People Committee & Remuneration, Appointments and Nominations Sub-Committee Annual Statement of Assurance 2024/25

1 Purpose

The purpose of this statement is to give an overview of the work of the People Committee (PC) and Remuneration, Appointments and Nominations Sub-Committee (RANSC) over the period April 2024 – March 2025, in their roles as a Committee/Sub-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 PC and RANSC provide assurance, strategic advice and direction on matters affecting employees and to ensure that arrangements support the strategic aims and ethos of the SFRS.

3 Summary of the Committee's Work During 2024/25

Throughout the reporting period, the Committee and Sub-Committee have been keen to ensure that it focusses discussion, scrutiny and analysis around key aspects of work. Highlights of the work during the review period 2024/25 included:

- Spotlights, including risk related spotlights, on the following subjects: Women's Employee Liaison Group Case Study; Operations Control Staffing, both in September and in March; ICT Recruitment and Retention; Pensions Remedy Work.
- Continued monitoring of People and Training, Safety and Assurance (TSA) performance and development through scrutiny, consideration and challenge of the reports and indicators provided.
- A workshop was held in October 2025 with a specific focus on assurance pathways and measures. The intention was to support the continual improvement processes for the Performance Management Framework as they specifically related to the Committee's work.
- We continued to monitor and take assurance from the Service around managing staffing levels, training and safety relating to operational delivery and the management of associated risks. This has included updates in relation to work in response to internal audit and HMFSI, including but not restricted to, On Call Services, SVQ Assessment, and the Leadership Development Programme.

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- The Committee continued to receive assurance around the implementation of the Training Continuous Improvement Programme to support the ongoing development of training provision within SFRS.
- A standing item on Contaminants work has been added to the Committee agenda and updates on the development of the Standard Operating Procedure and rolling this out has been provided through this.
- The Committee members received an informative presentation on the 'Currency' and 'Competency' for Firefighters which was particularly useful and well received.
- Continued assurance has been provided in relation to the work around the Cultural Action Plan and the Committee welcome a renewed focus for this in the coming financial year.
- Initial reports were received by the Committee around the Colleague Experience Survey, with a fuller report of initial results being presented later in the year to the full Board.
- The Committee scrutinised the initial draft of the Annual Health and Safety Report for the 2023/24 year prior to the report being taken at the Board.
- RANSC continued to lead negotiations on behalf of the employer around pay and terms and conditions, in respect of uniformed and support staff pay claims.
- The Employee Partnership Forum (EPF) was stood down in all instances due to lack of escalated items being raised.

The Committee/Sub-Committee reviewed their Terms of Reference (ToR) in February 2025 to ensure its focus and responsibilities remained current and relevant. The proposed amendments to the ToR were subsequently agreed by the Board in April 2025.

4 Future Work Priorities of the Committee

The business which comes before the PC does not vary significantly from year to year and is primarily intended to obtain assurances on behalf of the Board, who are the statutory employer of all SFRS staff, regarding matters affecting employees. The RANSC formally report to the PC after each meeting. The business of the PC is set out in the ToR. These will be kept under review as necessary throughout 2025/26.

Reviews of the People and TSA Quarterly Performance Reports and Committee Forward Plan feature regularly on the PC agenda and these enable future work priorities to be set. Work will continue in 2025/26 to support a review of the assurances received, and accounting for the Performance Management Framework (PMF) and SFRS Strategy.

Work will continue to seek developing assurance on efforts to increase diversity within the Service, ensuring that it reflects the communities it serves. This includes understanding and taking assurance from the work to continue our journey around culture, leadership and diversity, around both our workforce and work practices in everything we do, specifically around the work outlined within the Cultural Action Plan and efforts to address recruitment and retention in competitive and lower diversity areas within SFRS.

The Committee will also continue to seek assurance around the progress of work connected to contaminants, the continuous improvement programme within Training and the ongoing work around Safety and Assurance.

In agreement with the staff representative bodies, we have revised the approach for EPF and we anticipate further use of this opportunity as part of the Working Together Framework.

5 Actions to Improve the Committee's Governance Arrangements

A workshop to discuss the purpose and effectiveness of the Committee/Sub-Committee was held in February 2025 to obtain the Committee members views in relation to current practices and to review the existing ToR. Overall, the conclusion was that the PC had the right skills and experience, was well led and well supported by People and TSA colleagues, met with appropriate frequency and provided good assurance to the Board.

The success of any organisation is critically related to the commitment and skill of its employees, and its adherence to the culture and values it espouses. These in turn are underpinned by the policies and procedures it has in place, the arrangements and opportunities for learning, training and development of staff so they may attain their full potential, and the quality of engagement and relations between the organisation and its representative bodies. The work of the PC and its RANSC seeks to assist the Chief Officer, the Strategic Leadership Team, People and TSA Directors, and their teams, to plan and deliver effective policies and actions in this regard and to provide appropriate assurance to the Board accordingly. It is recommended that the PC and RANSC continue to operate in this capacity and as felt necessary report matters to the Integrated Governance Forum for discussion amongst other Committee Chairs.

Mhairi Wylie

Chair of the People Committee/Chair of the Remuneration, Appointments and Nominations Sub-Committee

June 2025

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/31-25

Agenda Item: 8

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 JUNE 2025						
Report Title:	PMF QUARTERLY PERFORMANCE – 2024-25 Q4						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		A	B	C	D	E	F
1	Purpose						
1.1	To provide members with the fourth quarter performance of KPIs 22 – 29 (Training), KPIs 46 – 49 (People) & KPIs 50 – 56 (Safety & Assurance). Three annual performance indicators KPIs 62, 63a and 63b (People) are also reported in the fourth quarter report.						
2	Background						
2.1	The Performance Management Framework (PMF) defines how we, the Scottish Fire and Rescue Service (SFRS), manage our performance and how we use performance information to inspire change and improvement. This framework remains in place for the current fiscal year until the roll out of a new Strategic Plan in 2025.						
2.2	56 quarterly indicators (15 for TSA and 4 for People) and 9 annual indicators (2 for People) were identified across directorates to provide senior leaders, committees and the SFRS Board with relevant information on our performance. This supports those responsible for scrutiny of how SFRS perform in delivering its Strategic Outcomes.						
2.3	The quarterly performance dashboard (& report) provide an overview for those indicators and through the use of statistical process control charts (SPC) alerts stakeholders to situations deteriorating or improving or where performance is stable and in control.						
3	Main Report/Detail						
3.1	This paper covers all performance indicators stated in the PMF intended for scrutiny by the People Committee.						
3.2	KPI 62 (Female Ratio – Wholetime) was incorrectly reported last year. It was reported that 7.8% of the wholetime workforce was female. This was due to holding the incorrect total of female wholetime staff as 267. The true value for 2023-24 was 6.5% (224 female wholetime staff). We are working to ensure more robust processes are in place for future performance reporting.						
3.3	Exceptional variation: <ul style="list-style-type: none"> None 						
3.4	Deteriorating (long-term): <ul style="list-style-type: none"> 28 - % Training Function Currency 46 - On Call Retained FTE 51 - Physical attacks on Firefighters 						

3.5	Improving (long-term):
	<ul style="list-style-type: none"> • 24 - % Flexi Officer Module Completion • 26 - % Core Skills Currency • 27 - % Specialist Rescue Currency • 50 - Verbal attacks on Firefighters • 55 - Vehicle Accidents
3.6	Not changing:
	<ul style="list-style-type: none"> • 22 - % Core Skills Modules Completed • 23 - % Advanced, Support & Emerging Risks Modules Completed • 25 - % Incident Command Module Completion • 46 - On Call Volunteer FTE • 46 - Off Station FTE • 46 - Flexi Officer FTE • 46 - Operations Control FTE • 46 - Resource Based Crewing FTE • 46 - Support Staff FTE • 46 - Rural Full-time FTE • 47 - Vacancies Rate • 48 - Turnover Rate • 49 - Absence Rate • 52 - RIDDOR • 53 - Accidents and Injuries (excl. RIDDOR) • 56 - % YTD H&S Actions Completed
3.7	Not known – limited data or unspecified direction;
	<ul style="list-style-type: none"> • 29 - Customer Satisfaction Rate • 54 - Near Miss
4	Recommendation
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 Power BI Landing Page .
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Register
5.1.1	SFRS has a specific risk SPPC001 There is a risk of the service not consistently providing accurate performance management information from some sources due to inaccurate data or inadequate systems resulting in loss of confidence in reporting service performance.
5.2	Financial
5.2.1	There are no specific financial issues raised within this paper.
5.3	Environmental & Sustainability
5.3.1	There are no specific Environmental & Sustainability implications addressed in this paper.
5.4	Workforce
5.4.1	Performance measures reported for Strategic Outcomes 6 provide insight to workforce.
5.5	Health & Safety
5.5.1	Performance measures reported for Strategic Outcomes 6 provide insight to safety and assurance.
5.6	Health & Wellbeing
5.6.1	There are no specific Health and Wellbeing implications addressed in this paper.

5.7	Training	
5.7.1	Performance measures reported for Strategic Outcomes 2 & 6 provide insight to delivery of training and safety & assurance.	
5.8	Timing	
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	Performance	
5.9.1	All performance measures reported are linked to Strategic Outcomes 2 & 6 with a focus on personnel.	
5.10	Communications & Engagement	
5.10.1	There are no specific Communications & Engagement implications addressed in this paper.	
5.11	Legal	
5.11.1	There are no specific Legal implications addressed in this paper	
5.12	Information Governance	
5.12.1	DPIA completed - No	
5.13	Equalities	
5.13.1	EHRIA completed - No	
5.14	Service Delivery	
5.14.1	Performance measures reported for Strategic Outcomes 2 & 6 are linked to Service Delivery	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross, Director of People Craig McGoldrick, Director of Training, Safety & Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The service has continued to develop its approach to performance reporting. The Organisational Performance Dashboard, aligned to the SFRS Performance Management Framework, is now live and available across the service with a pdf version made available to the public. Scrutiny of service performance is evident across the service, at executive level and by the SFRS Board at committee and board level.
8	Appendices/Further Reading	
8.1	Appendix A: PDF copy of PBI0068 report	
8.2	Further reading: - Link to Power BI Landing Page .	
Prepared by:		Ellen Gayler, Senior Data Analyst
Sponsored by:		Richard Whetton, Head of Corporate Governance, Strategic Planning, Performance and Communications Directorate
Presented by:		Fiona Ross, Director of People & ACO Craig McGoldrick, Training, Safety & Assurance

Links to Strategy and Corporate Values		
<u>Strategy</u> Outcome 2 - Communities are safer and more resilient as we respond effectively to changing risks Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>Training, Safety & Assurance Board</i>	<i>12 June 2025</i>	<i>For scrutiny</i>
<i>Corporate Board</i>	<i>23 June 2025</i>	<i>For scrutiny</i>
<i>People Committee</i>	<i>5 June 2025</i>	<i>For scrutiny</i>



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FIRE AND RESCUE SERVICE

Working together for a safer Scotland

People 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



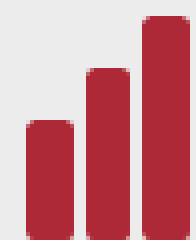
Welcome

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

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

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

Key contact: Bl@firescotland.gov.uk



**BUSINESS
INTELLIGENCE**



LIVE MANAGEMENT INFORMATION

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

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

SPC Charts

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

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

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

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

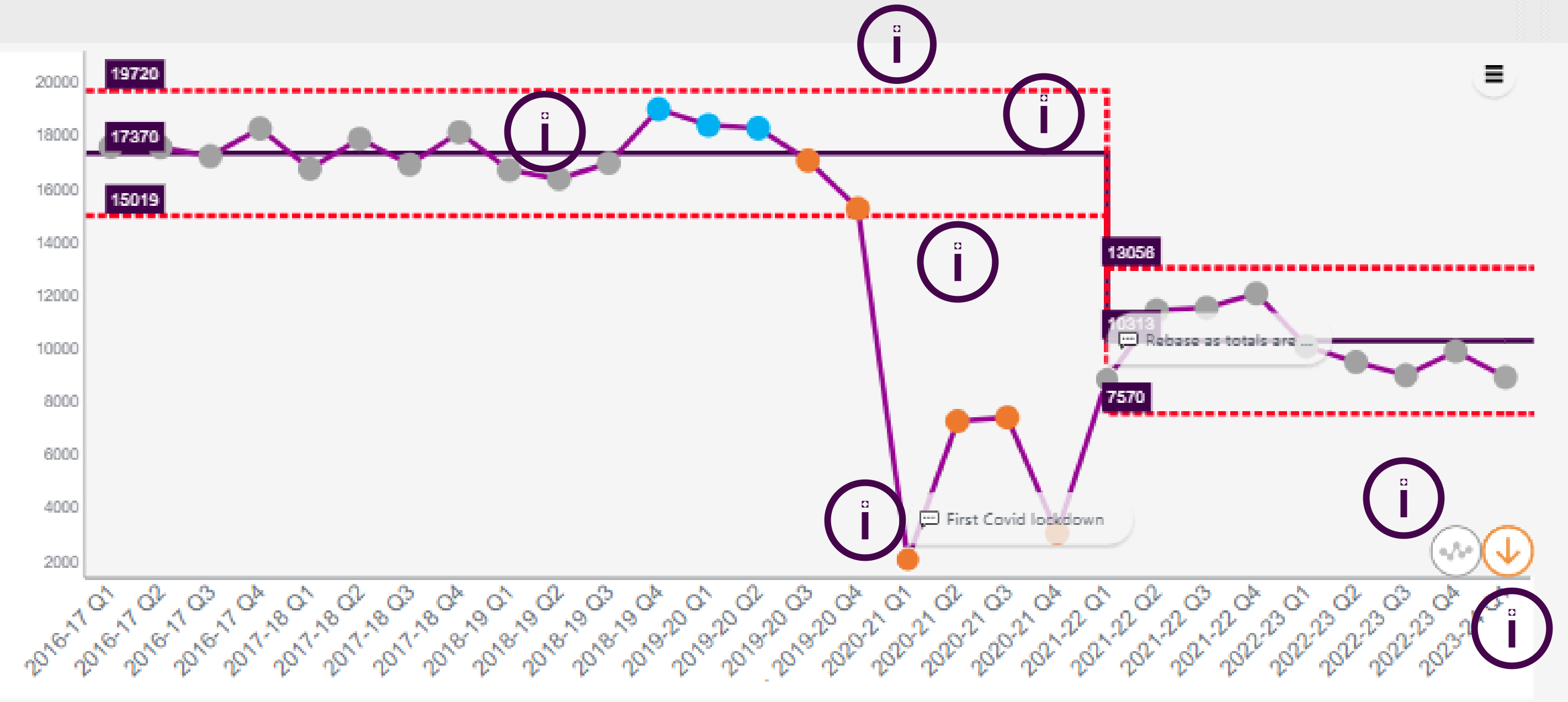
Normally data points will fall **between the upper and lower control limits**. If any of the following scenarios apply, the change needs to be investigated and an explanation provided. Over time this lets us analyse performance in a meaningful way.

- 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.

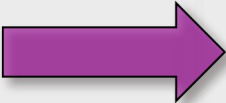


Frequency of update:

This report will be updated quarterly.

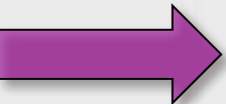
OUTCOME 02 (Response)

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



OUTCOME 06 (People)

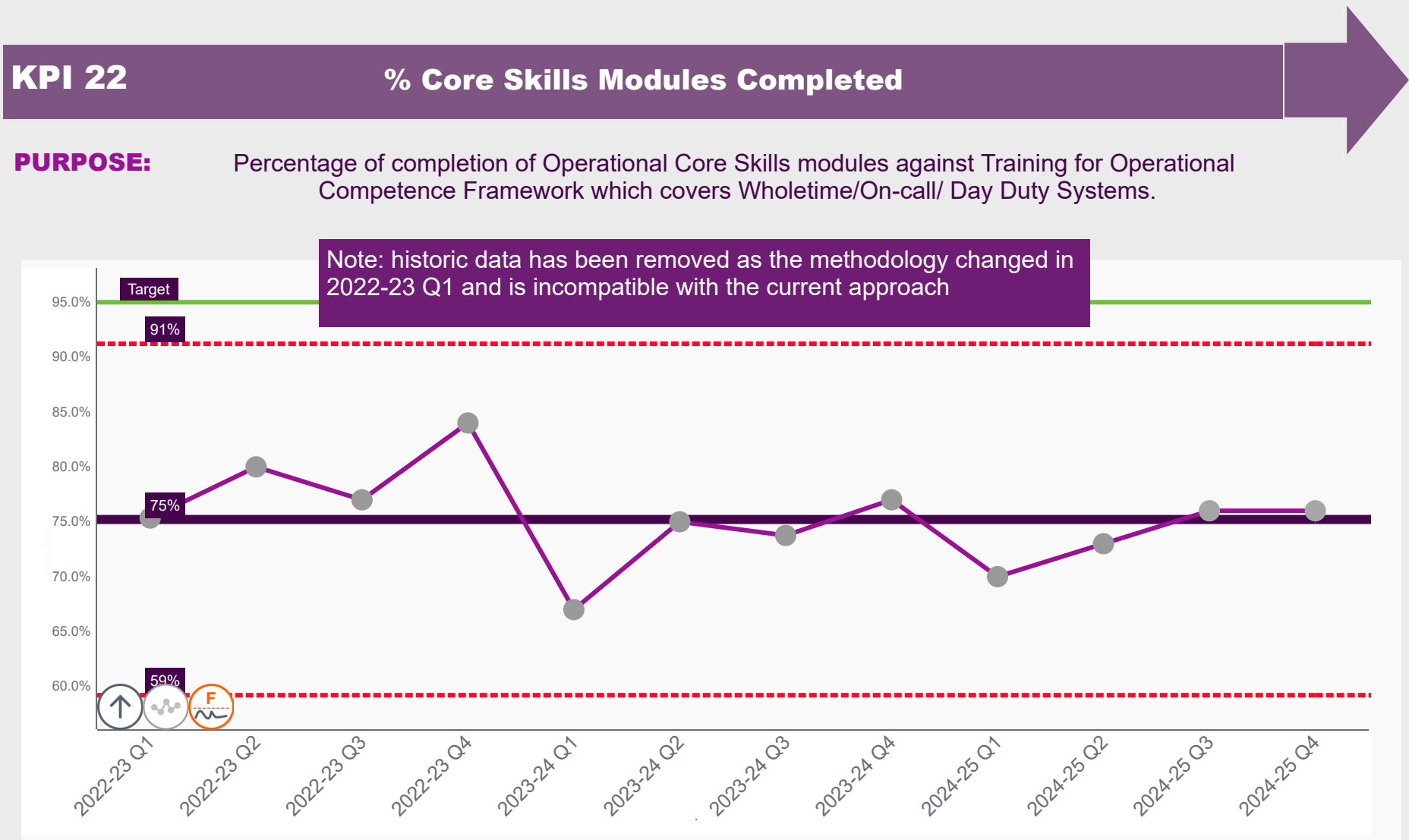
The experience of those who work for SFRS improves as we are the best employer we can be.




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

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





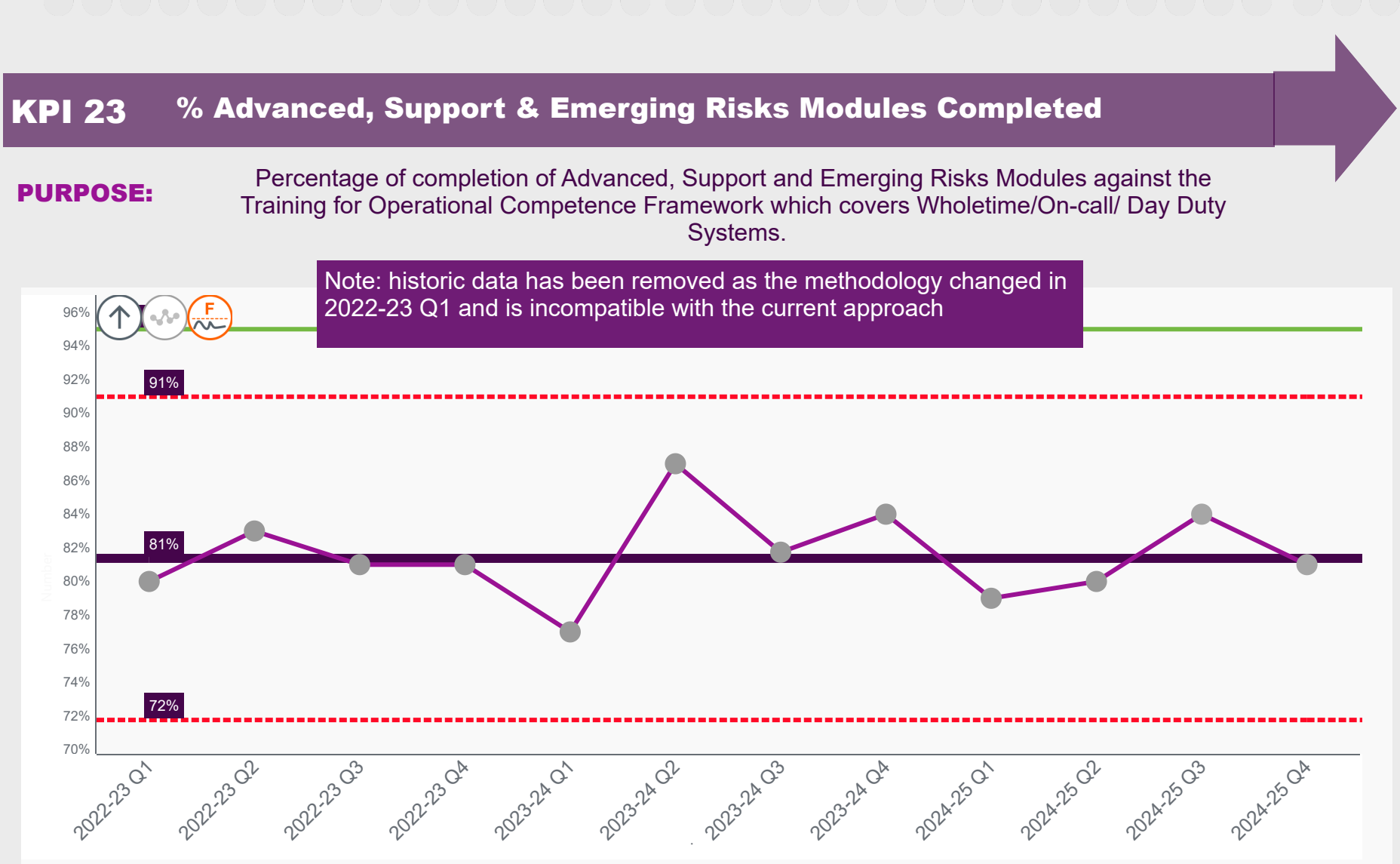
95%


OWNER:

Head of Training

SUMMARY

The Training Function team collaborates with Local Senior Officer (LSO) Area teams to promote completion of mandatory Training for Operational Competence. The use of LSO performance meetings, online engagement sessions, and station visits aim to boost completion rates in future quarters.



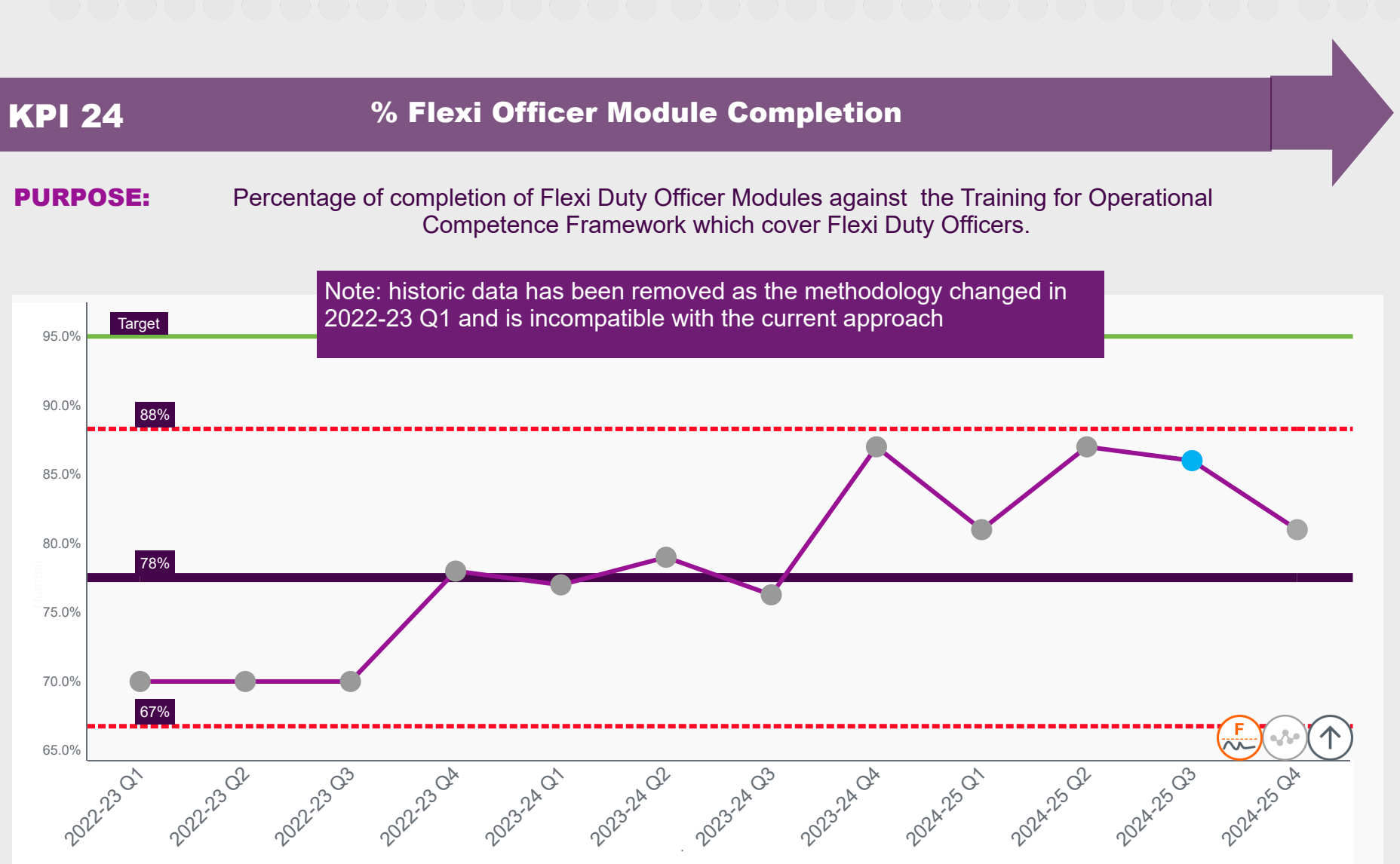
95%


OWNER:

Head of Training

SUMMARY

Training Function team collaborates with Local Senior Officer (LSO) Area teams to promote completion of mandatory Training for Operational Competence. The use of LSO performance meetings, online engagement sessions, and station visits aim to boost completion rates in future quarters.



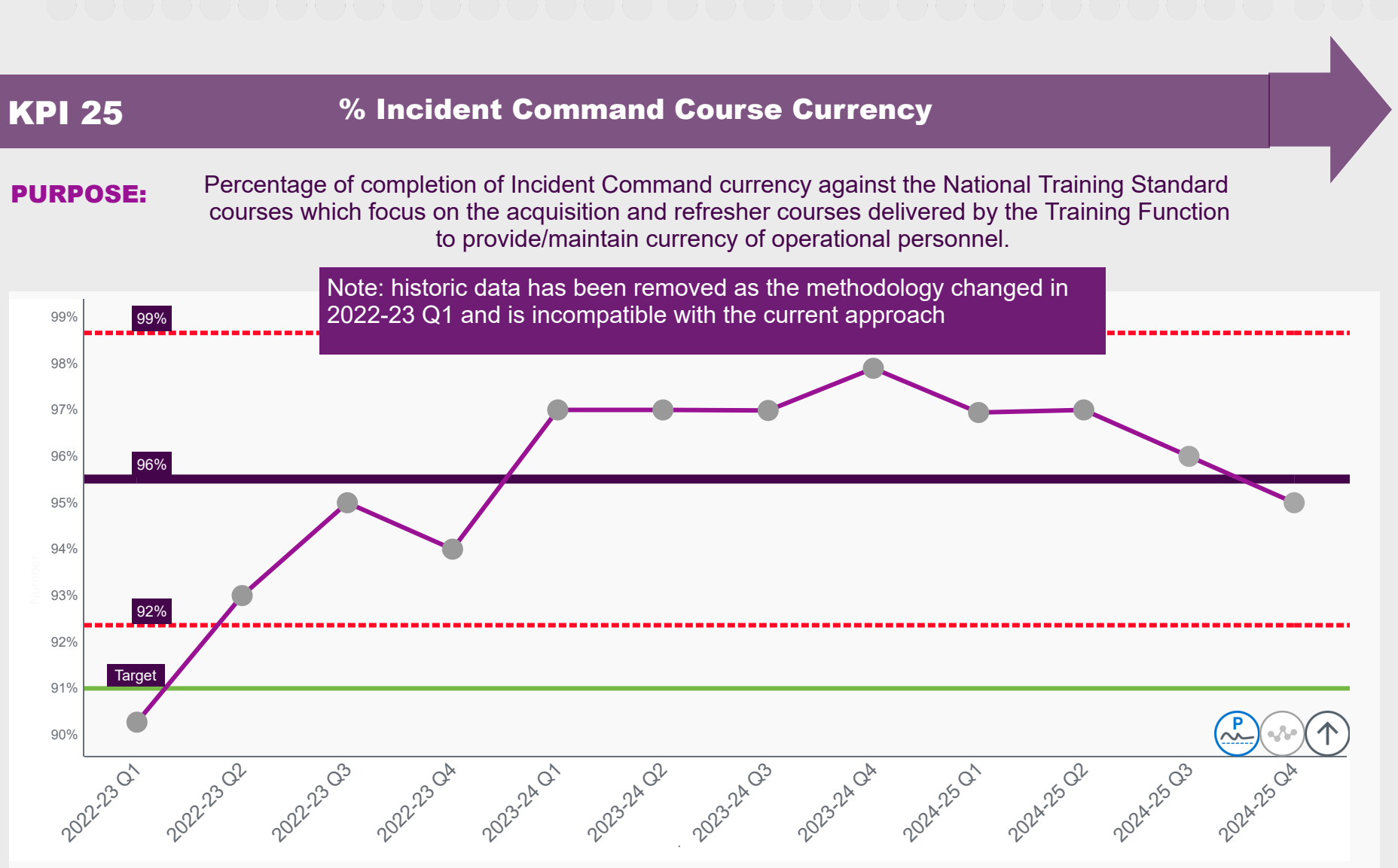
95%


OWNER:

Head of Training

SUMMARY

Training Function team collaborates with both Service Delivery & Directorate teams to promote completion of mandatory Training for Operational Competence for Flexi Duty Officers. Ongoing communication and sharing of data analysis are anticipated to boost completion rates in future quarters.



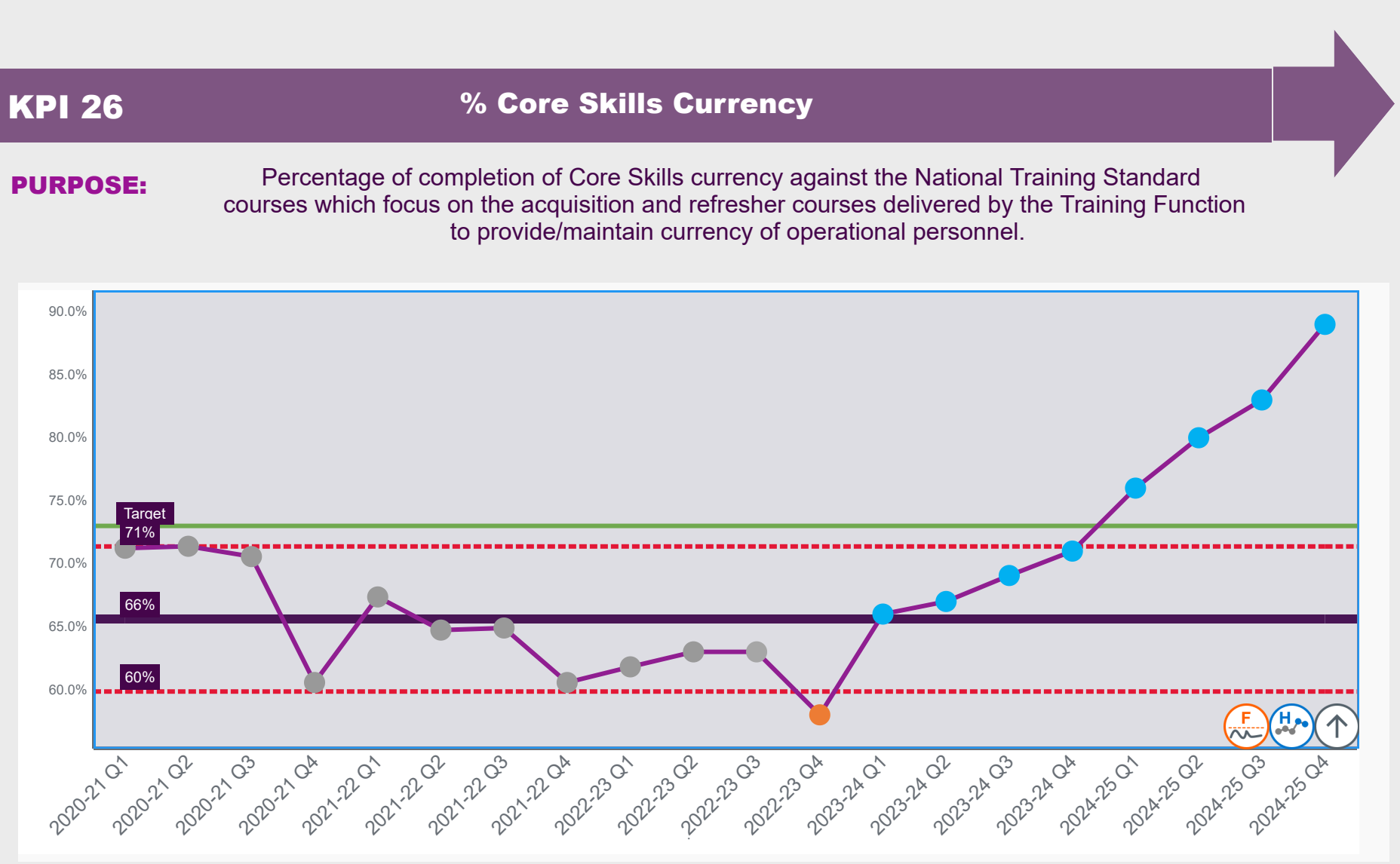
91%


OWNER:

Head of Training

SUMMARY

Incident Command (IC) team collaborates with Central Staffing and Workforce Planning to provide necessary acquisition and refresher training. Ongoing communication, planning, and scheduling ensure sufficient IC courses, and any management actions required regarding attendance to improve performance.



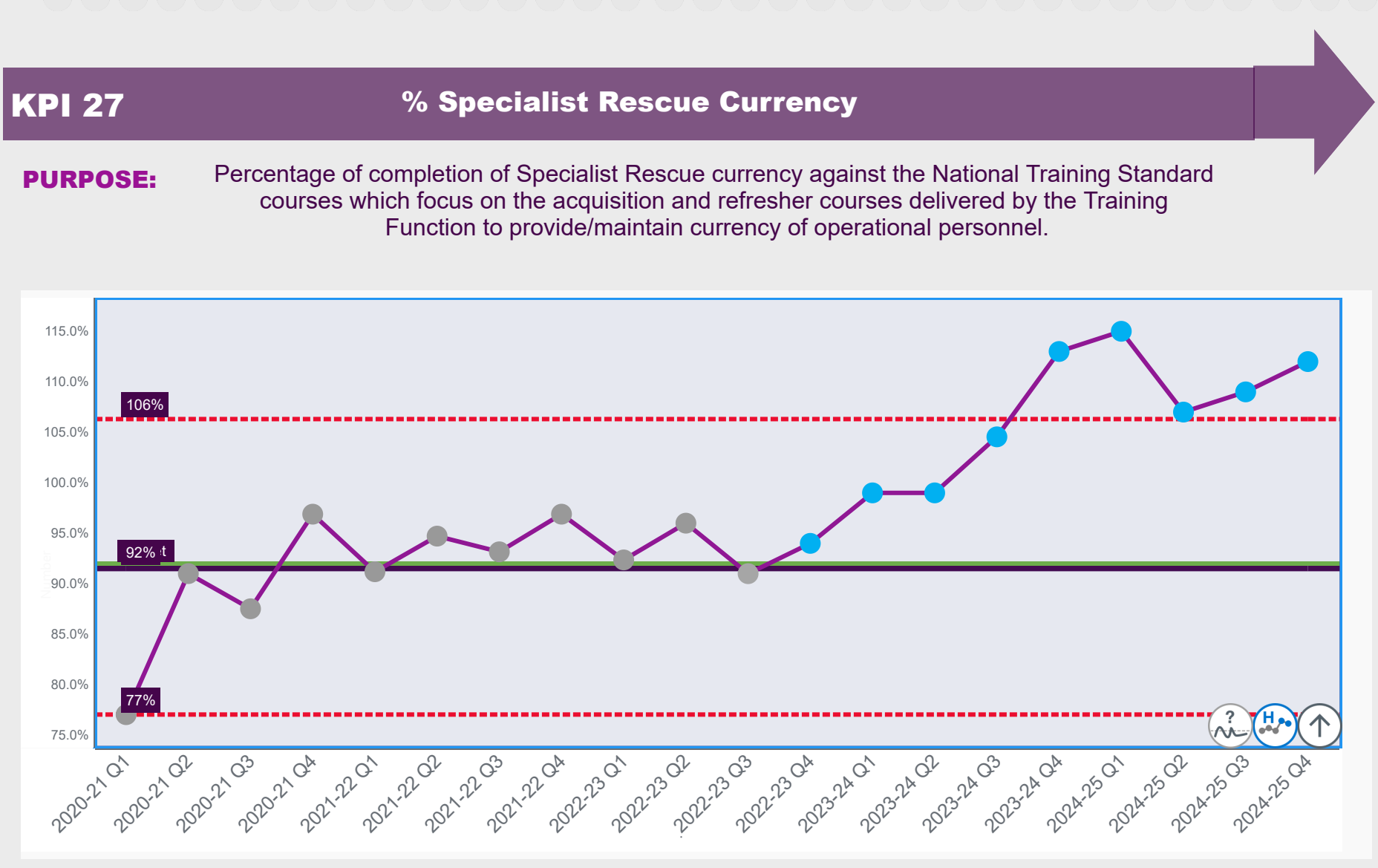
73%


OWNER:

Head of Training

SUMMARY

Training Function management team collaborates with Central Staffing and Workforce Planning to provide necessary acquisition and refresher courses. Ongoing, planning, and scheduling ensure sufficient Core skill courses, and any management actions required regarding attendance to improve performance.



92%

OWNER:

Head of Training

SUMMARY

The Specialist Rescue team collaborates with Central Staffing and Workforce Planning to provide necessary acquisition and refresher courses. Ongoing, planning, and scheduling ensure sufficient Specialist Rescue courses, and any management actions required regarding attendance to improve performance.

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

KPI ▲	Indicator	Purpose	Geography	Frequency	Target	Business Area
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - Flexi	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - OC	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - OS	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - RBC	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - RDS	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - RFT	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - SS	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
46	Actual Full Time Equivalent (FTE) staff against Target Operating Model - VDS	This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.	National	Quarterly	Track	People
47	% staff vacancies	Monitoring the vacancy rate provides insight into the Service’s ability to attract, recruit and retain staff, and the time to hire.	National	Quarterly	Track	People
48	% staff turnover	Monitoring staff turnover and the underlying reasons provides insight into SFRS’ attractiveness an as employer, aligned to our ambition to develop and sustain a positive and inclusive workplace culture where all employees are treated with respect and dignity.	National	Quarterly	Track	People
49	% staff absence	Monitoring levels of short- and long-term absence along with the underlying reasons and trends enables SFRS to support employee health and wellbeing, helping colleagues return to work and stay in work.	National	Quarterly	Reduce against previous year	People
50	Number of incidents in which there was a verbal attack on a firefighter	Demonstrates how many verbal attacks have occurred to SFRS personnel by members of the public	National	Quarterly	Reduce against previous year	Safety and Assurance
51	Number of incidents in which there was a physical attack on a firefighter	Demonstrates how many physical attacks have occurred to SFRS personnel by members of the public	National	Quarterly	Reduce against previous year	Safety and Assurance
52	Number of RIDDOR reportable injuries	Demonstrates how many notifications the has been to the HSE which may include death, specified injury, over 7 day injury, non-worker taken to hospital for treatment, dangerous occurrence or an occupational disease.	National	Quarterly	Reduce against previous year	Safety and Assurance
53	Number of accidents and injuries	Demonstates total accidents and injuries to occur through workplace accidents	National	Quarterly	Reduce against previous year	Safety and Assurance
54	Number of near miss events	Total recorded number of near miss events that had the potenial to lead to an accident or ill health	National	Quarterly	Track	Safety and Assurance
55	Number of vehicle accidents	Total number of events that involved vehicle accidents	National	Quarterly	Reduce against previous year	Safety and Assurance
56	Completion of Health and Safety Improvement Plans	Demonstrates the completion of improvement plans to drive safety performance	National	Quarterly	100%	Safety and Assurance
62	Gender balance	Allows the Service to report on and understand gender balance of various staff groups and how representative our workforce is of communities we serve	National	Annually	Increase proportion of female staff	People
63a	% of staff choosing to enter data into the sensitive information fields of iTrent	This indicator shows the % of SFRS Staff who entered data into the sensitive information fields in iTrent against key protected characteristics.	National	Annually	Increase against previous year	People
63b	% of staff choosing to withhold their demographic equalities data in iTrent.	This indicator shows the % of Staff who entered data into the Sensitive Information fields who then selected the Prefer not the Say response for that characteristic.	National	Annually	Reduce against previous year	People

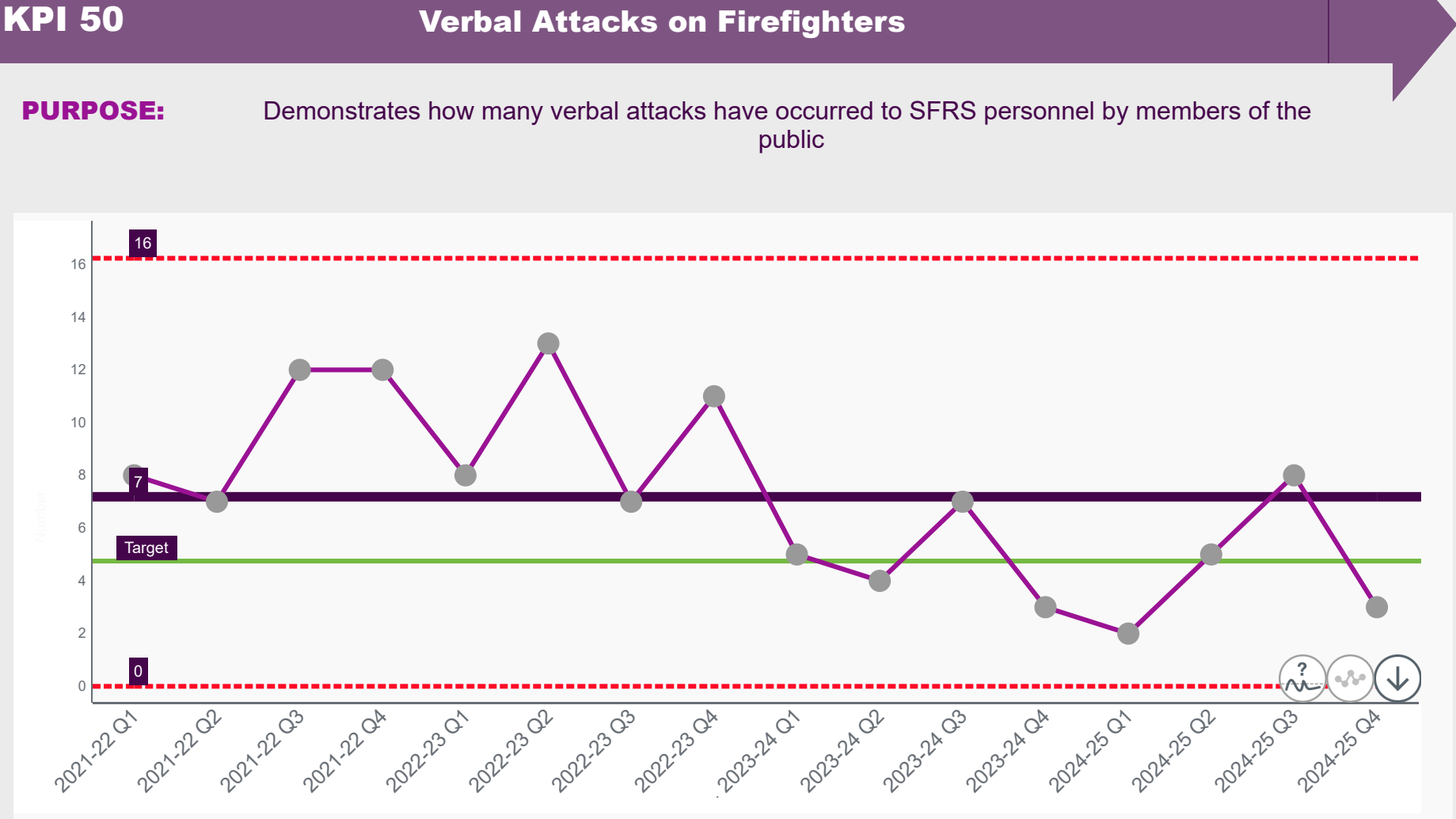


<div><div>KPI 46</div><div>Resource Based Crewing FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual RBC FTE measured against TOM has seen a slight increase in deficiency between Quarter 3 (85) and Quarter 4 (93) - predominantly due to Retirements. WT FF intake figures from Foundation Courses commencing in Quarter 4 of 2024/2025 will be reflective in Quarter 1 of 2025/2026.</div></div>	<div><div>KPI 46</div><div>Off Station FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual Off-Station FTE measured against TOM has seen a slight increase in deficiency between Quarter 3 (20) and Quarter 4 (21). The situation is being monitored.</div></div>
<div><div>KPI 46</div><div>Flexi Officer FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual Flexi-Officer FTE remains higher than TOM in Quarter 4, as it was in Quarter 3. The situation is being monitored.</div></div>	<div><div>KPI 46</div><div>Operations Control FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual OC FTE measured against TOM has seen a significant improvement between Quarter 3 and Quarter 4 - due to FFC recruitment activity throughout Quarter 3 - which is now reflective in Quarter 4 data. Deficiency has decreased from 15 to 4.</div></div>
<div><div>KPI 46</div><div>Rural Full-time FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual Rural FT FTE measured against TOM has seen a slight deficiency in Quarter 4 - compared with being 100% resourced in Quarter 3. Situation is being monitored.</div></div>	<div><div>KPI 46</div><div>On Call Retained FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual On-Call Retained FTE measured against TOM has seen a very slight decrease in deficiency between Quarter 3 (1019) and Quarter 4 (1017). Work is ongoing within various On-Call Improvement Working Groups to improve the current short-fall.</div></div>
<div><div>KPI 46</div><div>On Call Volunteer FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual On-Call Volunteer FTE measured against TOM has seen a slight increase in deficiency between Quarter 3 (103) and Quarter 4 (104). Situation is being monitored.</div></div>	<div><div>KPI 46</div><div>Support Staff FTE</div><div><div>PURPOSE:</div><div>This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Actual SS FTE measured against TOM has seen a slight decrease in deficiency between Quarter 3 and Quarter 4; predominantly down to slightly more successful recruitment activity in hard-to-fill areas/roles such as Portfolio Office and DaTS.</div></div>
<div><div>KPI 47</div><div>Vacancies Rate</div><div><div>PURPOSE:</div><div>Monitoring the vacancy rate provides insight into the Service's ability to attract, recruit and retain staff, and the time to hire.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>The overall vacancy rate has reduced marginally from 16.3% in quarter 3 to 15.4% in quarter 4. The main area highlighting a reduction in vacancies is within OC (10.5% to 4.7%), due to the recruitment of 16 FFC during Q4, and with WDS also reducing from 3.4% to 1.7%.</div></div>	<div><div>KPI 48</div><div>Turnover Rate</div><div><div>PURPOSE:</div><div>Monitoring staff turnover and the underlying reasons provides insight into SFRS' attractiveness as an employer, aligned to our ambition to develop and sustain a positive and inclusive workplace culture where all employees are treated with respect and dignity.</div></div><div></div></div> <div><div>Track</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>Overall staff turnover has reduced from 1.47% in quarter 3 to 1.42% in quarter 4 highlighted by retirements within WDS marginally decreasing across all 3 areas. There has been though some small increases across RDS, VDS and OC which is largely due to reasons other than retirements.</div></div>
<div><div>KPI 49</div><div>Absence Rate</div><div><div>PURPOSE:</div><div>Monitoring levels of short- and long-term absence along with the underlying reasons and trends enables SFRS to support employee health and wellbeing, helping colleagues return to work and stay in work.</div></div><div></div></div> <div><div>Reduce against previous year</div><div>OWNER: Head of People</div><div>SUMMARY</div><div>The overall absence percentage for all SFRS working days lost in quarter 4 is 4.43% which is comparable to the previous quarter (4.44%). All duty groups have seen a decrease in their absence figures between quarter 3 and quarter 4 with the exception of RDS and SS who have seen a marginal increase.</div></div>	



People

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

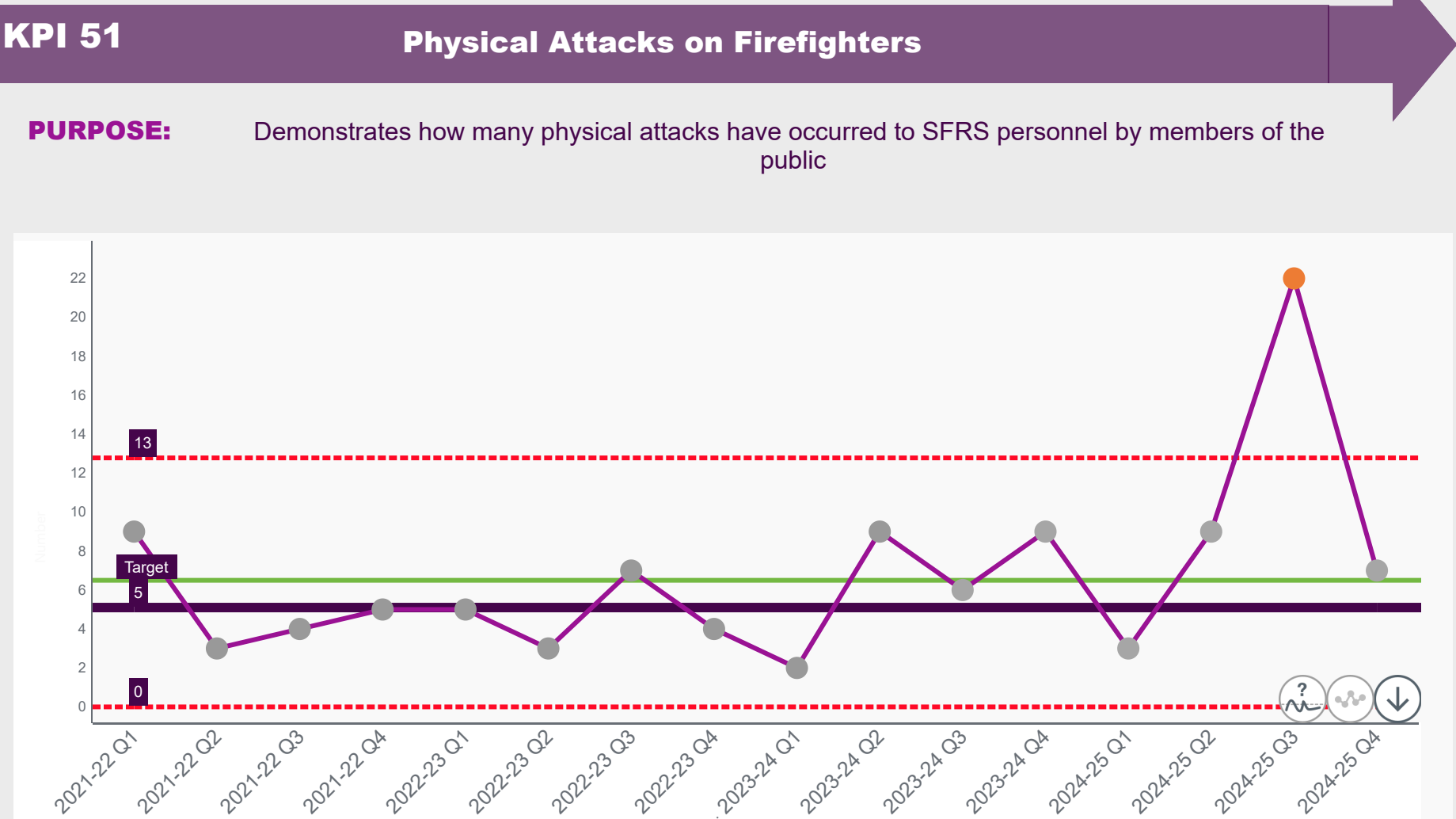


Reduce against previous year

OWNER: Head of Safety and Assurance

SUMMARY

A decrease is noted in Q4 from the previous quarter. We continue to encourage staff to report instances of AoV.

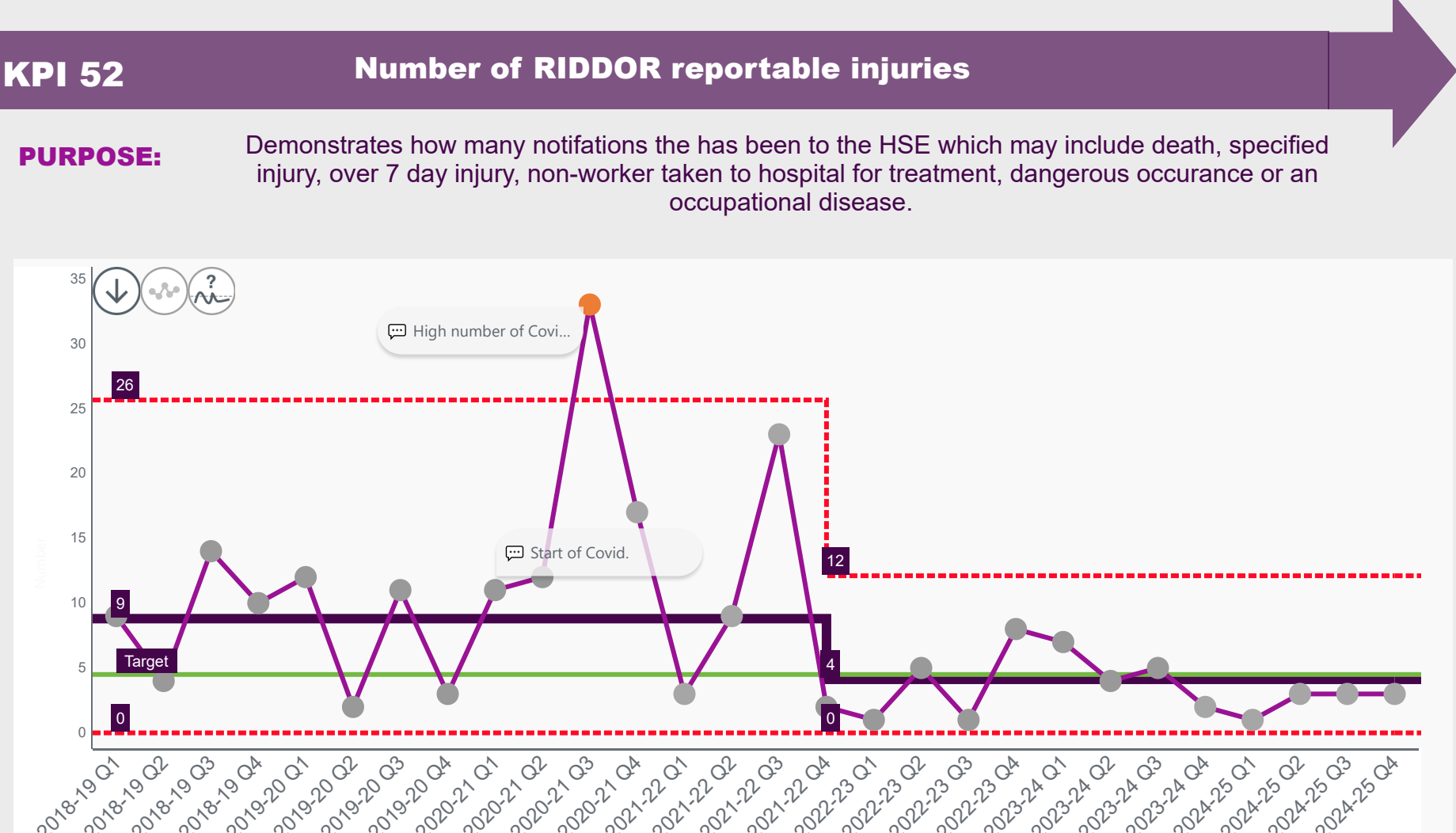


Reduce against previous year

OWNER: Head of Safety and Assurance

SUMMARY

A significant decrease is noted in Q4 from both the previous quarter and the previous reporting year. We continue to encourage staff to report instances of AoV.

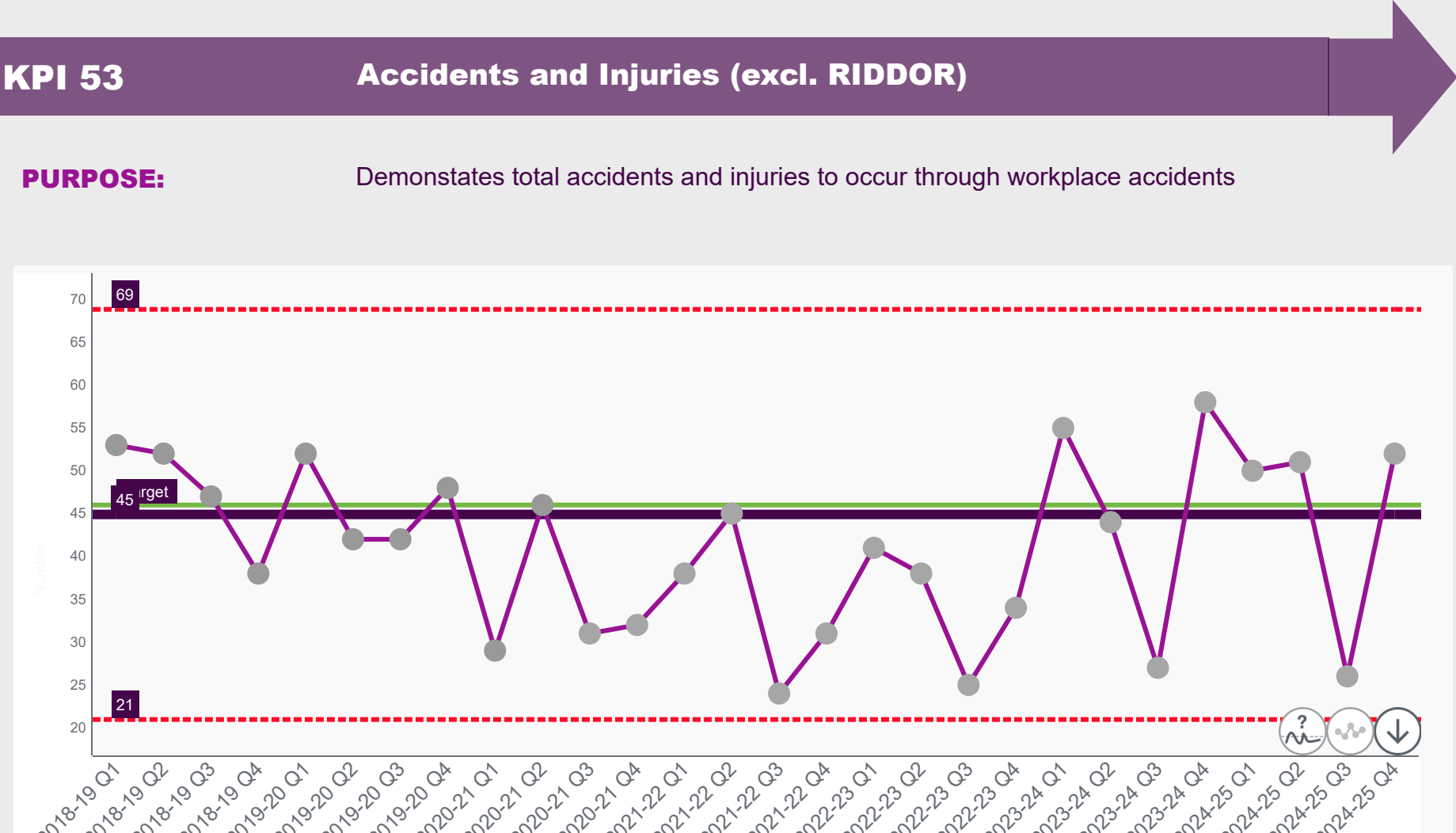


Reduce against previous year

OWNER: Head of Safety and Assurance

SUMMARY

3 RIDDOR were reported in Q4.
1 x Specified Injury
2 x Over-7 Day
Each event is investigated and managed locally within the LSO area.

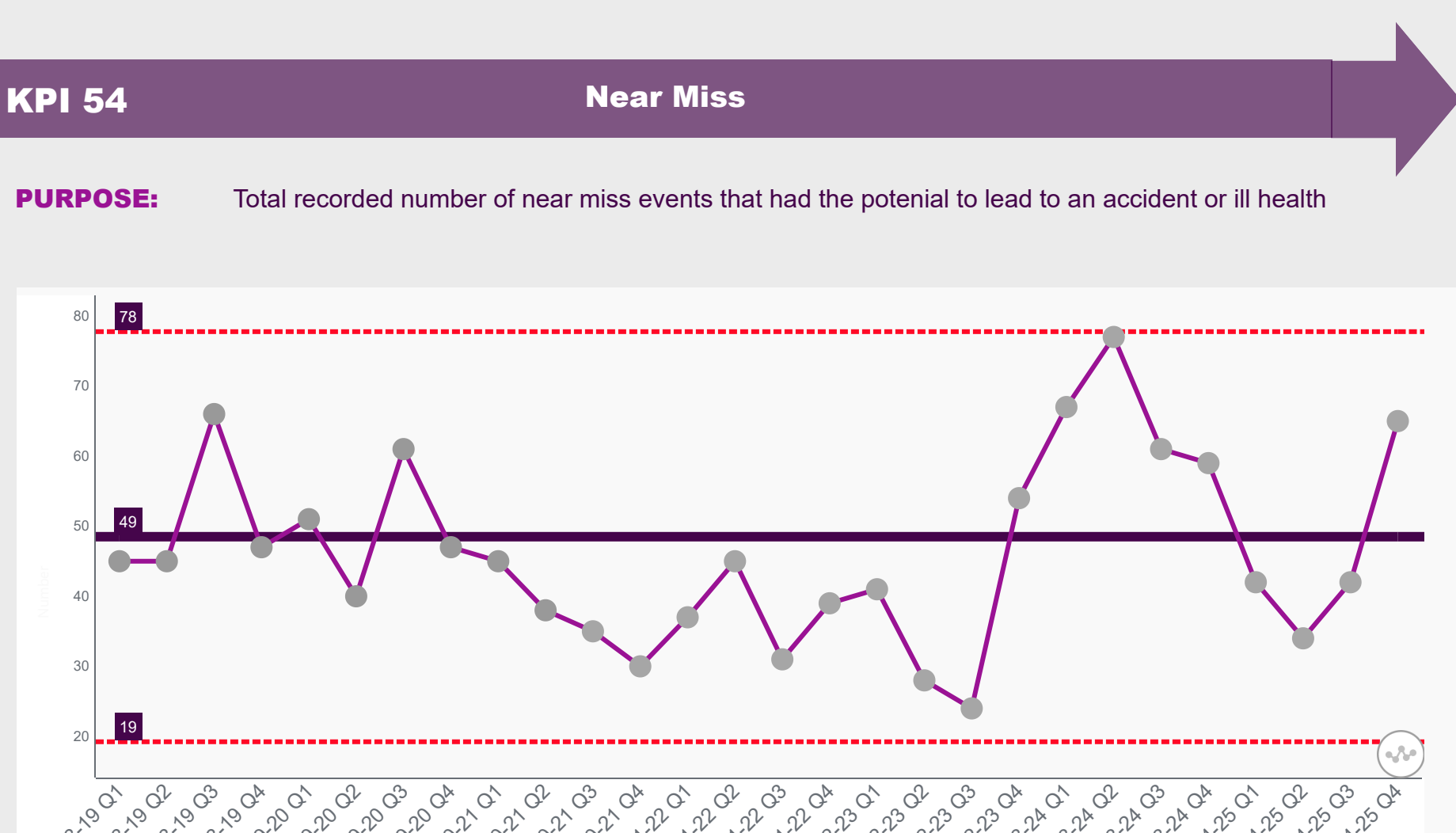


Reduce against previous year

OWNER: Head of Safety and Assurance

SUMMARY

An increase is noted in Q4. All events are investigated to reduce the likelihood of reoccurrence. Safety and Assurance Improvement Groups continue to monitor local trends and take action where required.

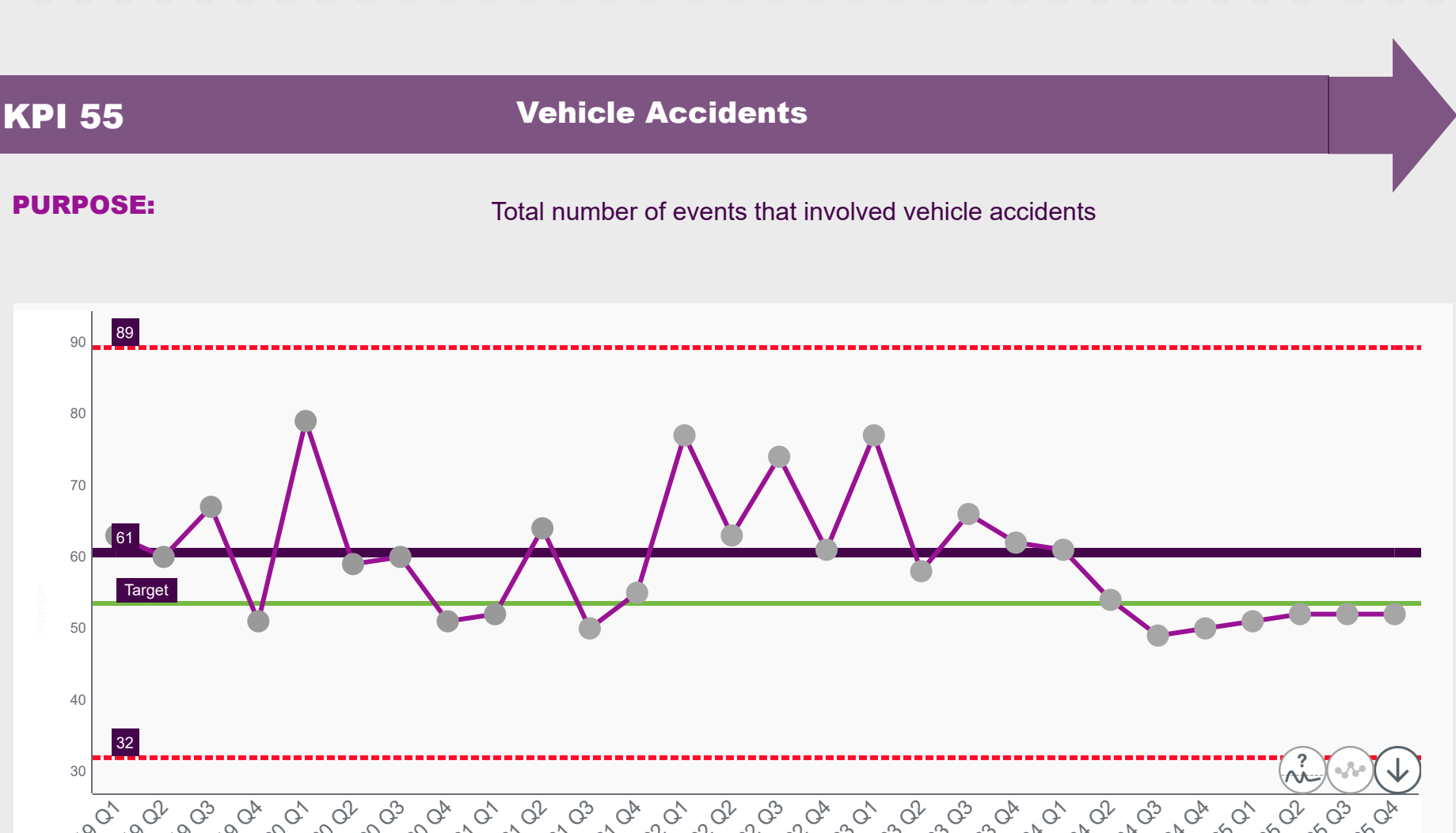


Track

OWNER: Head of Safety and Assurance

SUMMARY

An increase is noted in Q4. All Directorates promote Near Miss (NM) reporting at SAIG meetings to reduce the risk of injury and to ensure safe working environments. SA continue to provide NM feedback through quarterly reports to encourage reporting.

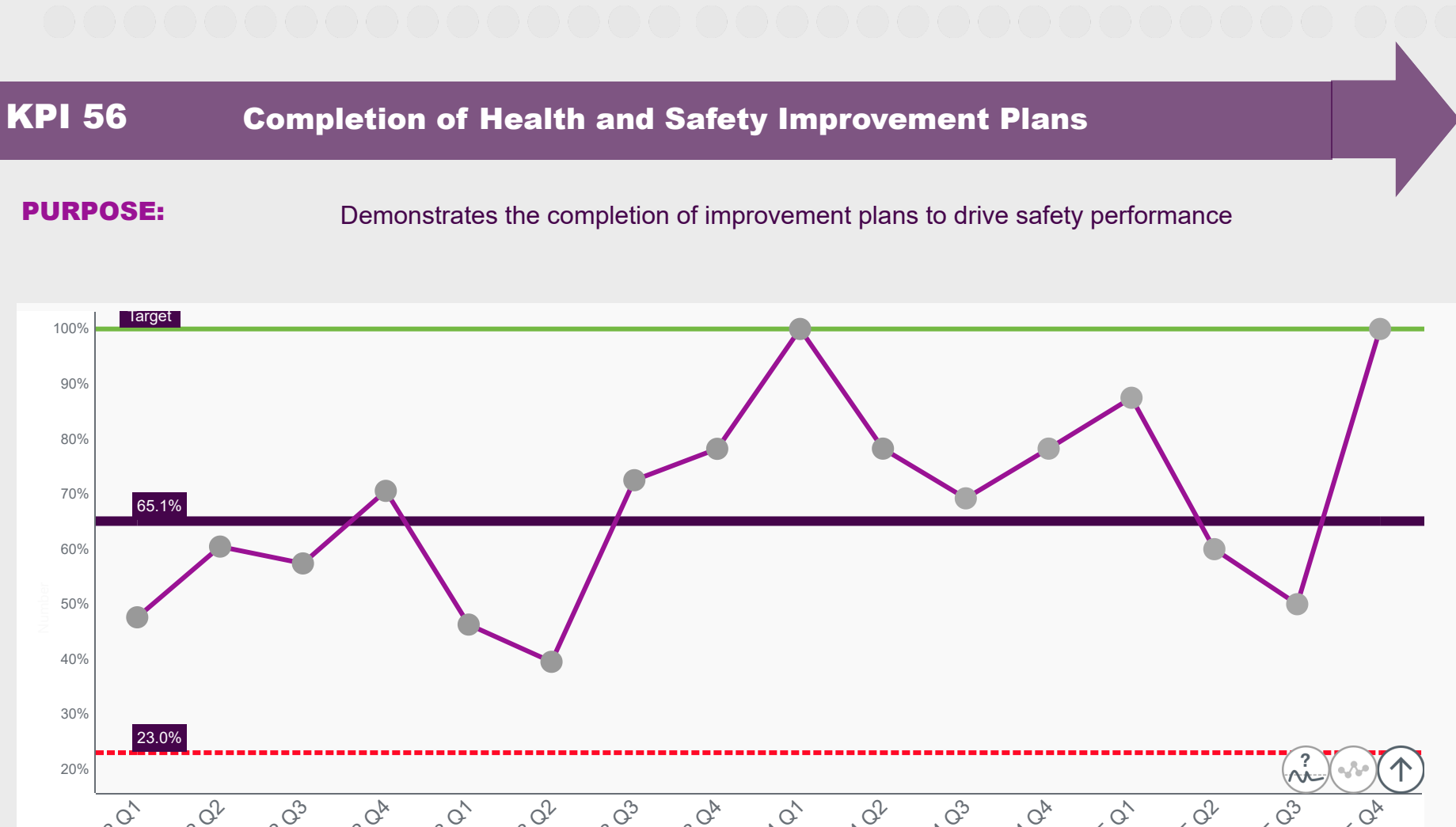


Reduce against previous year

OWNER: Head of Safety and Assurance

SUMMARY

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



100%

OWNER: Head of Safety and Assurance

SUMMARY

100% of actions were completed across all SDAs and Directorates in Q4. Following completion of quarterly actions, YTD is now 98% complete. HSIPs are supported by guidance provided by SA to support all Functions achieve their actions.

People



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

KPI 62 Female Ratio - Wholetime

PURPOSE: Allows the Service to report on and understand gender balance of various staff groups and how representative our workforce is of communities we serve

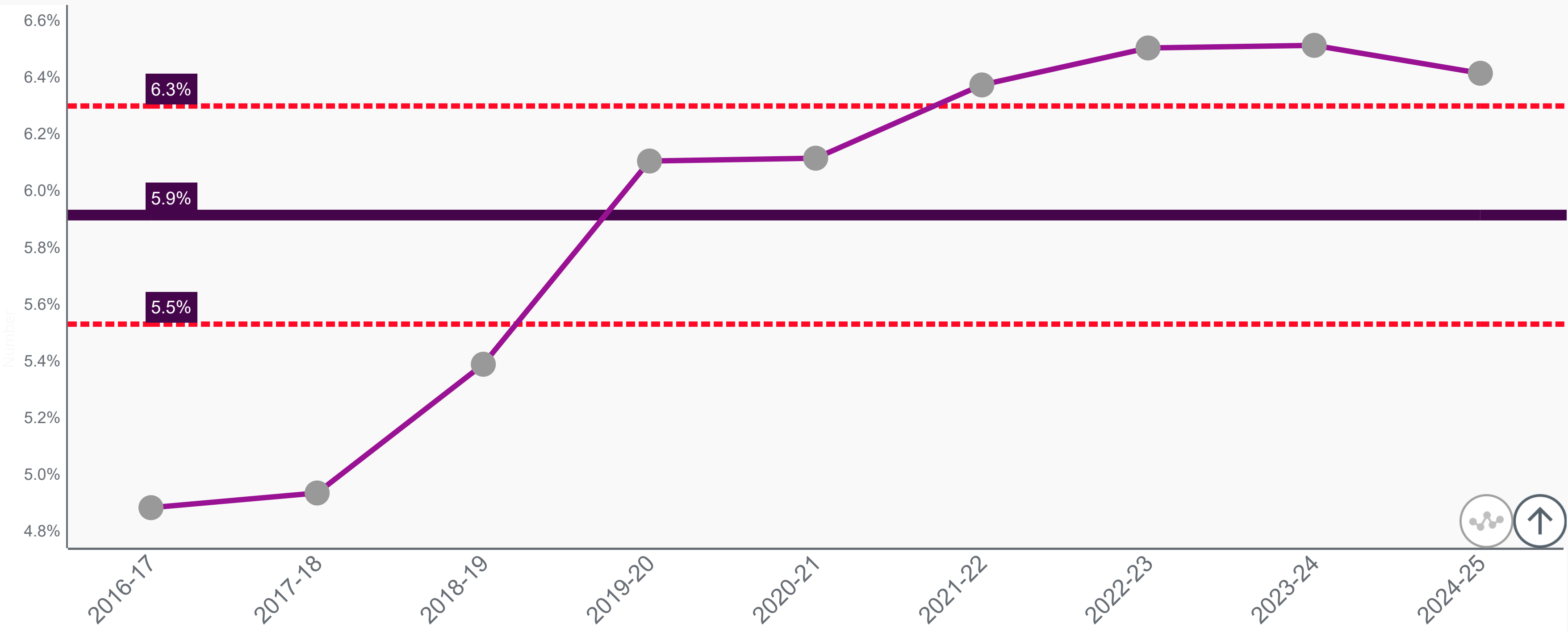


Increase proportion of female staff

OWNER: Head of People

SUMMARY

SFRS continues to diversify how it promotes career opportunities and engages in positive action initiatives targeted towards Women.



KPI 63a % of staff choosing to provide equalities data

PURPOSE: This indicator shows the % of SFRS Staff who entered data into the sensitive information fields in iTrent against key protected characteristics.

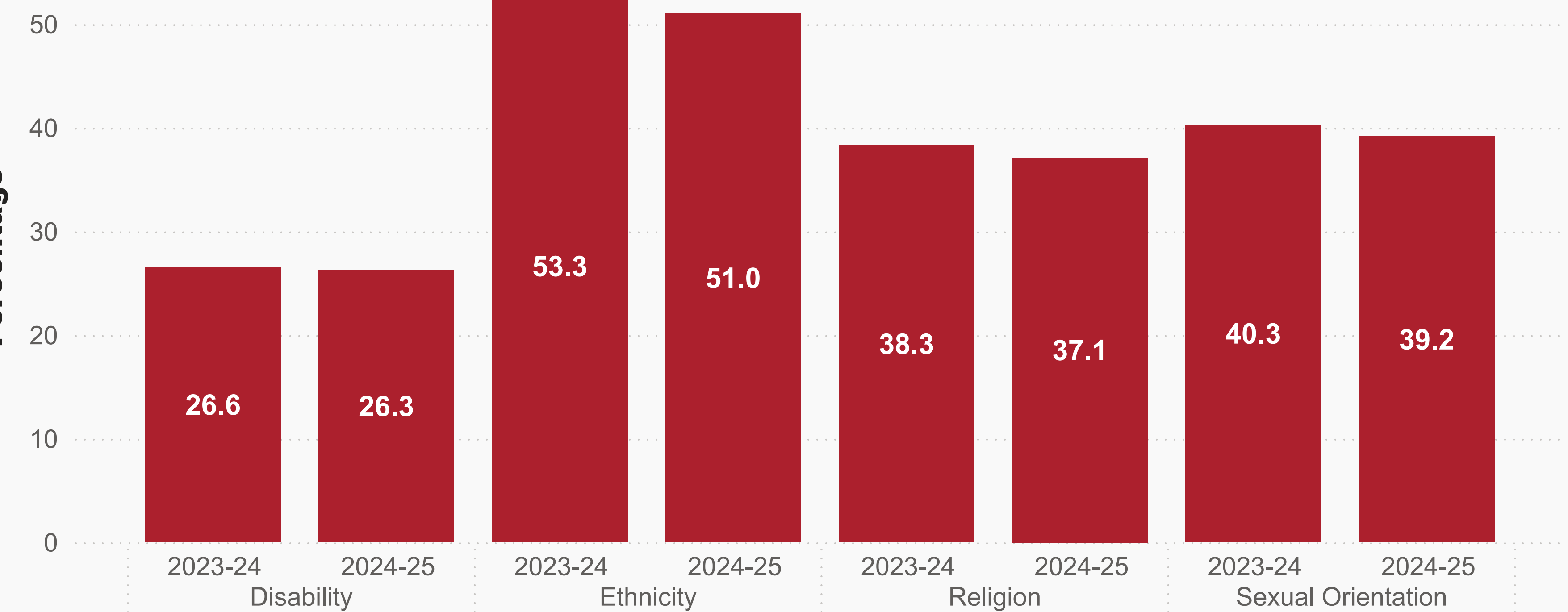


Increase against previous year

OWNER: Head of People

SUMMARY

SFRS encourages staff to provide their personal characteristic details. We explain what the data provided is used for as well as provide reassurance on the restricted access to this information once supplied.



KPI 63b % of staff choosing to withhold equalities data

PURPOSE: This indicator shows the % of Staff who entered data into the Sensitive Information fields who then selected the Prefer not the Say response for that characteristic.

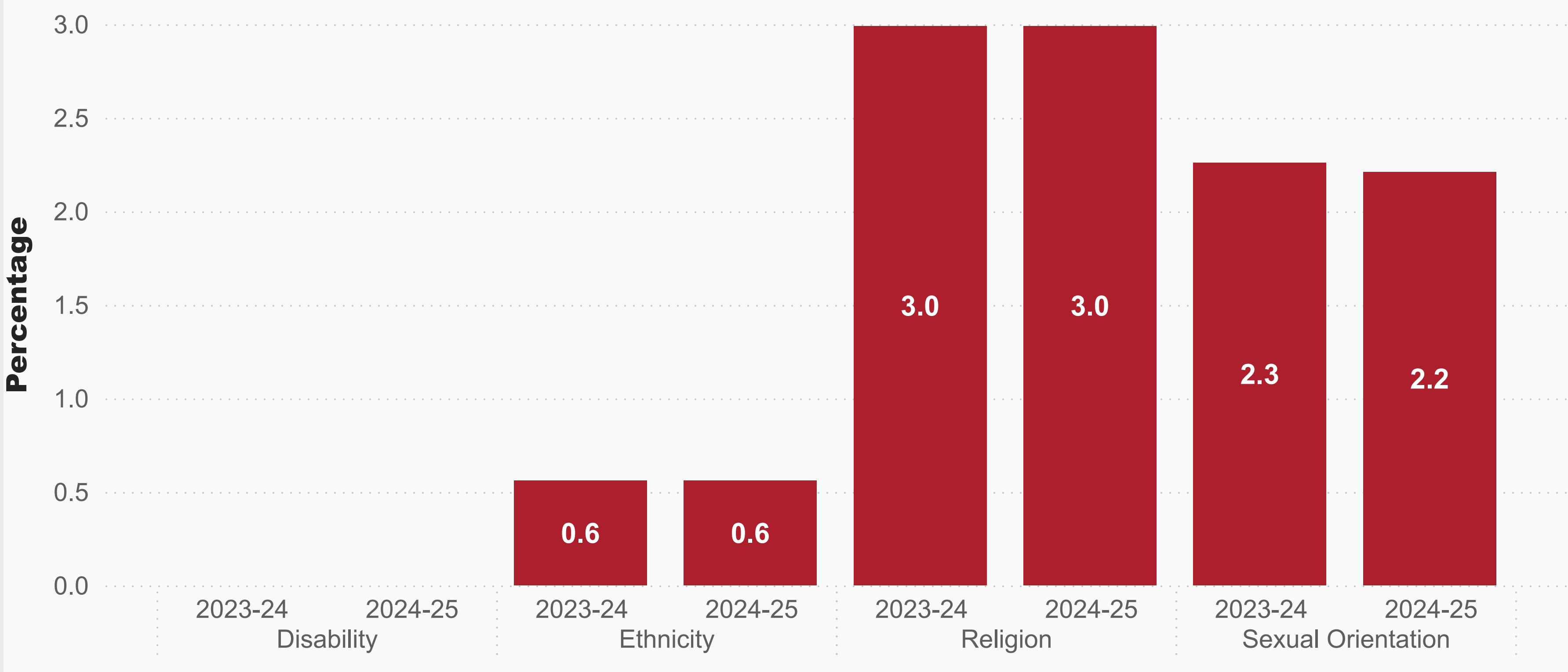


Reduce against previous year

OWNER: Head of People

SUMMARY

SFRS encourages staff to provide their personal characteristic details. We explain what the data provided is used for as well as provide reassurance on the restricted access to this information once supplied.





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

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Interpreting statistics and trends:

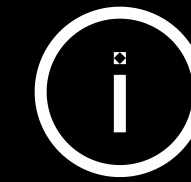
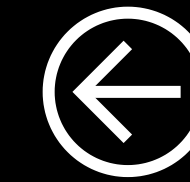
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SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/18-25

Agenda Item: 9.1

Report to:		PEOPLE COMMITTEE							
Meeting Date:		5 JUNE 2025							
Report Title:		PEOPLE PERFORMANCE REPORT – QUARTER 4 2025/26							
Report Classification:		For Scrutiny		SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
				A	B	C	D	E	F
1	Purpose								
1.1	The purpose of this report is report is to enable the People Committee to scrutinise the People KPIs from the Performance Management Framework (PMF) and the more detailed quarterly People Performance Report.								
2	Background								
2.1	People performance is monitored and reported through the quarterly People Performance Report, associated KPIs in the PMF, and scrutinised by the People Committee as well as within the Scottish Fire and Rescue Service (SFRS) Annual Report.								
3	Main Report/Detail								
3.1	The People quarterly performance report sets out organisational performance against the agreed set of People measures, which are regularly reviewed and enhanced where appropriate and practical.								
3.2	<p>The Executive Summary of the report (p. 5) draws the Committee’s attention to key points relating to:</p> <ul style="list-style-type: none">• The overall vacancy rate has reduced marginally this quarter from quarter 3, with the most significant reduction in vacancies within Operations Control (OC) driven by the successful OC recruitment campaign resulting in an increased headcount of 16.• Measures for turnover and absence are broadly in line with those for the previous period. With overall absence rates remaining stable at 4.4%, which has been broadly consistent for the last 11 quarters.• The 58 Trainee Wholetime Firefighters currently undergoing their foundation course at the National Training Centre are due to graduate in June 2025, contributing to an improvement in Resource Based Crewing numbers. Arrangements are underway to support a further intake of 72 across August to November 2025, as well as preparation for the launch of a new campaign for Wholetime Firefighter applicants in August 2025.• A number of Strategic level recruitment processes were concluded in quarter 4, with appointments to Deputy Assistant Chief Officer and Director of People vacancies. Watch Commander and Crew Commander processes also concluded, with the National Area Commander process taking place across quarter 4 and outcomes expected in May 2025.								

4	Recommendation
4.1	The People Committee is asked to scrutinise the report.
5	Key Strategic Implications
5.1 5.1.1	Risk Appetite and Alignment to Risk Register In relation to ensuring it has the appropriate capacity and capabilities to deliver its priorities, SFRS has an Open appetite, ensuring robust workforce plans are in place across all colleague groups, while exploring creative or innovative ways to deliver our services.
5.2 5.2.1	Financial There are financial implications related to absence in terms of contractual sick pay costs and increases in overtime. Turnover leads to indirect costs associated with recruitment, onboarding and training processes for new colleagues.
5.3 5.3.1	Environmental & Sustainability There are no environmental and sustainability implications arising from this report.
5.4 5.4.1	Workforce The report outlines organisational performance against key people and workforce measures.
5.5 5.5.1	Health & Safety There is potential that some of the absences reported in this paper result from Health & Safety related incidents.
5.6 5.6.1	Health & Wellbeing The report details a range of health & wellbeing activities to support employee wellbeing, attendance and performance.
5.7 5.7.1	Training The report highlights training activity related to the Management Capability Framework, which is designed to increase manager confidence and capability in managing people matters.
5.8 5.8.1	Timing The report details performance over the last quarter of 2024/25 and provides longer term trend analysis.
5.9 5.9.1	Performance The report details organisational performance against a range of people measures.
5.10 5.10.1	Communications & Engagement This report is shared with a range of governance forums for scrutiny and for information.
5.11 5.11.1	Legal Some elements of the report relate to SFRS' legal responsibilities as an employer.
5.12 5.12.1	Information Governance DPIA not required for this report.
5.13 5.13.1	Equalities EHRIA not required for this report.

5.14	Service Delivery	
5.14.1	There are no direct Service Delivery implications arising from this report.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Lyndsey Gaja, Head of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/Limited/Insufficient
7.3	Rationale:	The accompanying report details SFRS performance against agree People measures, allowing trend analysis to be carried out, risks identified, and corrective actions taken as appropriate. It should be noted that many aspects of the reporting are dependent on accurate recording of information by the relevant colleagues and managers, and manual analysis of data.
8	Appendices/Further Reading	
8.1	Appendix A - Q4 People Performance Report	
Prepared by:		People Managers and DMT
Sponsored by:		Fiona Ross, Director of People
Presented by:		Fiona Ross, Director of People
Links to Strategy and Corporate Values		
Strategic Plan 2022-25 Outcome 6: The experience of those who work for SFRS improves as we are the best employers we can be.		
Governance Route for Report		Meeting Date
<i>People Committee</i>		<i>5 June 2025</i>
		<i>For Scrutiny</i>



People Quarterly Management Information Report Quarter 4 2024 / 25

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Introduction

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

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

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

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

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

Executive Summary

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

The overall vacancy rate has reduced marginally this quarter from quarter 3, with the most significant reduction in vacancies within Operations Control (OC) driven by the successful OC recruitment campaign resulting in an increased headcount of 16.

Measures for turnover and absence are broadly in line with those for the previous period. With overall absence rates remaining stable at 4.4%, which has been broadly consistent for the last 11 quarters.

The 58 Trainee Wholetime Firefighters currently undergoing their foundation course at the National Training Centre are due to graduate in June 2025, contributing to an improvement in Resource Based Crewing numbers. Arrangements are underway to support a further intake of 72 across August to November 2025, as well as preparation for the launch of a new campaign for Wholetime Firefighter applicants in August 2025.

A number of Strategic level recruitment processes were concluded in quarter 4, with appointments to Deputy Assistant Chief Officer and Director of People vacancies. Watch Commander and Crew Commander processes also concluded, with the National Area Commander process taking place across quarter 4 and outcomes expected in May 2025.

Section 1

1.1

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

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

EMPLOYEE GROUP	Wholetime (WDS)					Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	Trainees	TOTAL WDS	RDS FT Rural	RDS*				
Target Operating Model (FTE)	2855	350	256		3461	58	3309	377	172	863	8240
Initiatives, Projects and Capital Funded		17	13		30				4	73	107
Actual (FTE)	2762	329	268	71	3430	57	2293	273	168	842	7063
Actual (Headcount)	2765	329	268	71	3433	60	2703	273	171	906	7546

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

As at 31 March 2025, SFRS employed 6953 people, equating to a headcount of 7588. The variance between the number of employees and actual headcount is reflective of where staff hold more than one role (dual contract). In addition to the figures in the above table; 11 employees are on external Secondment (including union duties), 19 on career or reservist breaks and 12 in Partnership Initiative funded posts.

1.1.2 Number of staff vacancies by FTE

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (FTE)	22	39	1	62	1	1016	104	8	94	1285

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

1.1.3 Percentage Staff vacancies

EMPLOYEE GROUP	Wholetime (WDS)				Retained*		VDS*	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS*				
Vacancy (%)	0.8%	10.6%	0.4%	1.7%	1.7%	30.7%	27.6%	4.7%	10.0%	15.4%

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

The overall vacancy rate has reduced marginally from 16.3% in quarter 3 to 15.4% in quarter 4. The main area highlighting a reduction in vacancies is within OC (10.5% to 4.7%), due to the recruitment of 16 FFC during quarter 4, and with WDS also reducing from 3.4% to 1.7%.

Workforce planning forecasts indicate that there will be a continued deficiency against the interim Target Operating Model (TOM) as we move through 2025. Planned recruitment and promotional activity continues with the Resourcing Plan for this year, whilst actual versus forecast retirements continues to be monitored and reported to inform recruitment requirements within the Wholetime Uniformed Staff Group.

The 58 trainee Firefighters who started their training in February 2025 at NTC will graduate on 13 June 2025 with the Newbridge graduation taking place on 16 May 2025 for 12 trainee Firefighters. A further intake of 36 Wholetime Firefighters is scheduled for August 2025 at NTC with another 36 scheduled across 3 migration transition courses at Newbridge and Dumfries over September, October and November 2025.

Planning arrangements are progressing well in advance of advertising for new Wholetime Firefighter applicants in August 2025, with external communications, positive action and engagement activities scheduled to begin in June 2025. This is being supported by a cross-functional review of attraction and selection approaches, including positive action activities, and the introduction of Automated Language Inference and Cognitive Evaluation (ALICE) for sifting candidate applications which is currently used in other Fire and Rescue Services (FRS) in the UK.

To enable SFRS to better manage capacity and resources, the vacancy will be targeted and more localised and a cap will be placed on the number of applications accepted prior to the application deadline based on the number of vacancies to be filled.

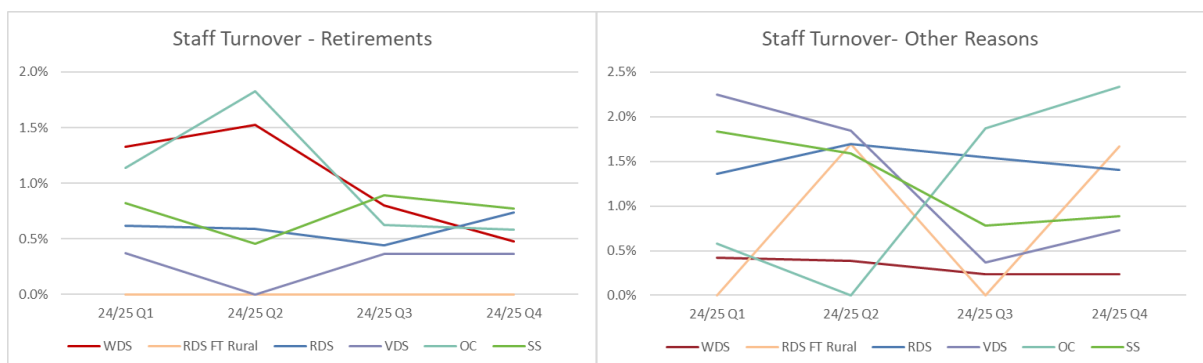
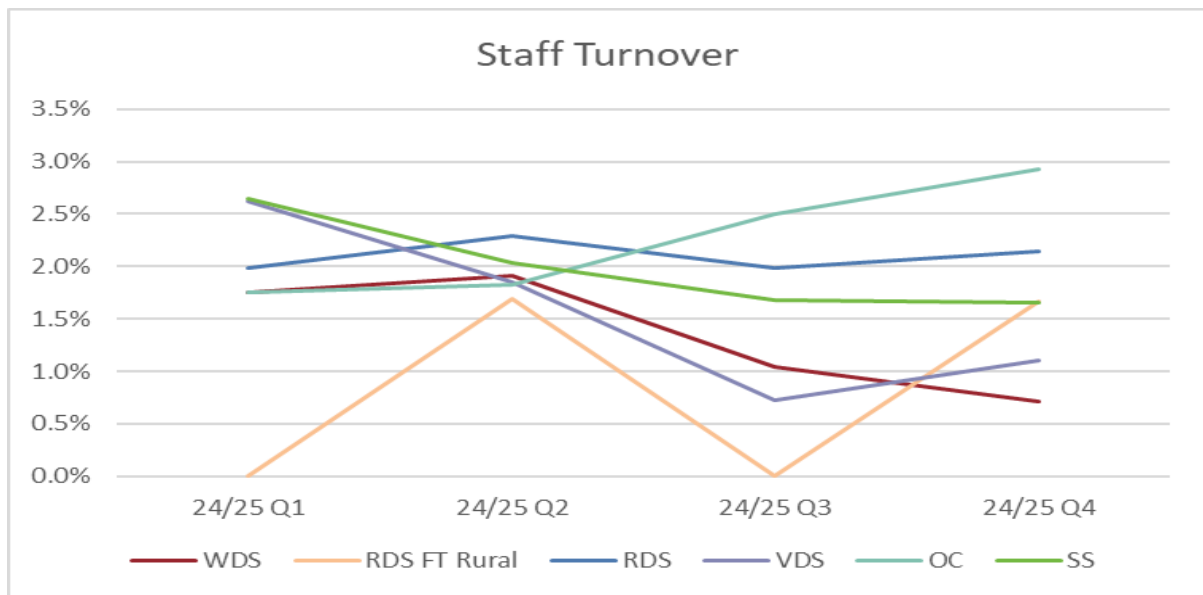
Application and Interview questions are being updated to ensure that they accurately assess whether candidates have the values, behaviours and skills required for the role and the introduction of a pacer as part of the Fitness assessment element is being explored to support candidates undertaking the bleep test. Further improvements are scheduled for Phase Two (April 2026) including a full review of the fitness and Practical Selection Tests.

Promotional activity continued in quarter 4 with several processes concluding. The Deputy Assistant Chief Officer (DACO) promotion process concluded in March 2025, along with Watch Commander and Crew Commander processes. The end of quarter 4 also saw the opening of the National Area Commander process with outcomes expected in May 2025. The process also launched for the substantive Director of People with a successful appointment made at the end of March.

Engagement continues between the People Directorate and the On Call Strategic Coordination Group (OCSCG), On Call Improvement Team (OCIT) and On Call SDA Leads to ensure effective monitoring of candidate status/progress through the Pre Recruitment Engagement Programme and the various stages of the Recruitment and Selection (R&S) process, to ensure Task and Task Management (TTM) courses are filled timeously in line with the recruitment plan and aligned to station priorities. The TTM overall intake for quarter 4 averaged 75% which highlights the available capacity to improve our on- call availability if we can progress candidates timeously.

1.1.4 Percentage Staff turnover by employee group

EMPLOYEE GROUP	Wholetime (WDS)				Retained		VDS	OC	SS	TOTAL (ALL)
	RBC	DD	FDS	TOTAL WDS	RDS FT Rural	RDS				
Retirements	0.25%	0.30%	2.99%	0.48%	0.00%	0.74%	0.37%	0.58%	0.77%	0.60%
Other Reasons	0.18%	0.91%	0.00%	0.24%	1.67%	1.41%	0.73%	2.34%	0.88%	0.82%
Turnover	0.43%	1.22%	2.99%	0.71%	1.67%	2.15%	1.10%	2.92%	1.66%	1.42%



Overall staff turnover has reduced from 1.47% in quarter 3 to 1.42% in quarter 4 highlighted by retirements within WDS marginally decreasing across all 3 areas. It should be noted though that there has been some small increases across RDS, VDS and OC which is largely due to reasons other than retirement.

Section 2

2.1

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

2.1.1 Total number of grievance cases

Number of new Grievance cases per SDA/Directorate	Q1	Q2	Q3	Q4	Total
East	1	0	0	0	1
North	1	3	4	0	8
West	0	0	0	1	1
Directorate	1	1	0	6	8
Total	3	4	4	7	18

A total of 7 formal grievances were submitted within quarter 4, which is an increase of 3 compared to the previous quarter. One grievance received in quarter 4 was from the West SDA and the remaining 6 were from Directorates. One case was in relation to a breach of policy, one was in relation to Dignity and Integrity at Work and the remaining 5 were submitted as a collective grievance. 2 grievance cases concluded within quarter 4 and the remaining cases will carry over to quarter 1 2025/26.

2.1.2 Total number of discipline cases

Number of new Disciplinary cases per SDA/Directorate	Q1	Q2	Q3	Q4	Total
East	5	3	4	7	19
North	8	8	9	4	29
West	3	13	12	10	38
Directorate	3	0	3	0	6
Total	19	24	28	21	92

A total of 21 new disciplinary cases commenced within quarter 4, which is a decrease of 7 from the previous quarter. Of these cases, 7 were in the East, 4 in the North and 10 in the West and there were no cases within the Directorates. The main themes of these new cases were Breach of Code of Conduct, Breach of Policy and Breach of Contract.

Of these new cases, 3 investigations were concluded within 6 weeks and the remaining 18 investigations will carry over to quarter 1 2025/26, which gives a total of 35 ongoing cases being carried forward into quarter 1. This figure includes cases which have hearing dates scheduled to conclude the process or investigation reports due to be submitted imminently.

The complexity of some cases and workload of Investigating Officers has resulted in an increase in expected timescales. There is ongoing work in relation to Employee Relation (ER) investigations with a view to addressing several challenges including the duration of investigations. This will focus on how cases are allocated, co-ordinated and prioritised to ensure timely completion. Improvement work has also been underway to develop enhanced case trackers aimed at improving recording, monitoring and reporting. The transition to the new trackers has resulted in a slight increase of carried over cases this month however this will even out in the next quarter.

2.1.3 Confidential Reporting Line

There were no reports received through the Confidential Reporting Line (CRL) during quarter 4. CRL activity remained consistent throughout quarter 1 - quarter 3 and dropped considerably in quarter 4. The last report was received on 26/11/24. The CRL has been live for 10 months, during which time 20 reports have been received and the Service remains within our benchmarked anticipated annual usage. A review will take place one year from its introduction in May 2024 to ensure it is meeting its intended benefits.

Section 3

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

3.1.1 Top 3 reasons for New Management Referrals

In quarter 4 there were a total of 386 new referrals. This is more than the last quarter (323) and significantly higher than the equivalent period last year (285).

The top 3 reasons for management referrals in quarter 4 were:

1. Musculoskeletal – 205
2. Psychological - 78
3. Other - 50

Psychological and Musculoskeletal (MSK) continue to be the 2 leading reasons for referral. This has been consistent across all quarters of the last year and the equivalent period last year. However there has been a significant increase in MSK referrals with 505 overall appointments in the quarter. This is believed to be as a result of the success of the internal physio model delivery who received 181 of the 205 new referrals. This provides easier and quicker access to a physio service and helps address issues associated with NHS lengthy waiting lists. The category of 'other' includes a range of conditions with very small numbers, however the fourth category is heart and circulatory with 15 referrals.

In December 2024 the Service outsourced all Wellbeing case management and referral appointments to Heales Medical, an external provider for a temporary period. Two hundred and ten of the new referrals were made to Heales who had a total of 328 appointments during the period, this is significantly lower than the circa 700 normally delivered within SFRS. It is too early to understand at this stage what the reasons are for this however, this will continue to be monitored over the coming period.

Psychological referrals are c18% lower than the equivalent period last year (95) but have increased from last quarter (62). Wellbeing has paused much of its wellbeing education and prevention activity due to recovery and this data will be monitored moving forward to consider if this is having an impact.

Further analysis of the 78 new appointments attended due to psychological reasons shows that 30 were due to mental health and 45 due to stress. This represents a slight increase in mental health referrals compared to last quarter (27) and quarter 4 2023/24 (25). It also illustrates an increase in stress referrals compared to last quarter (35), albeit this is a reduction compared to quarter 4 2023/24 (70).

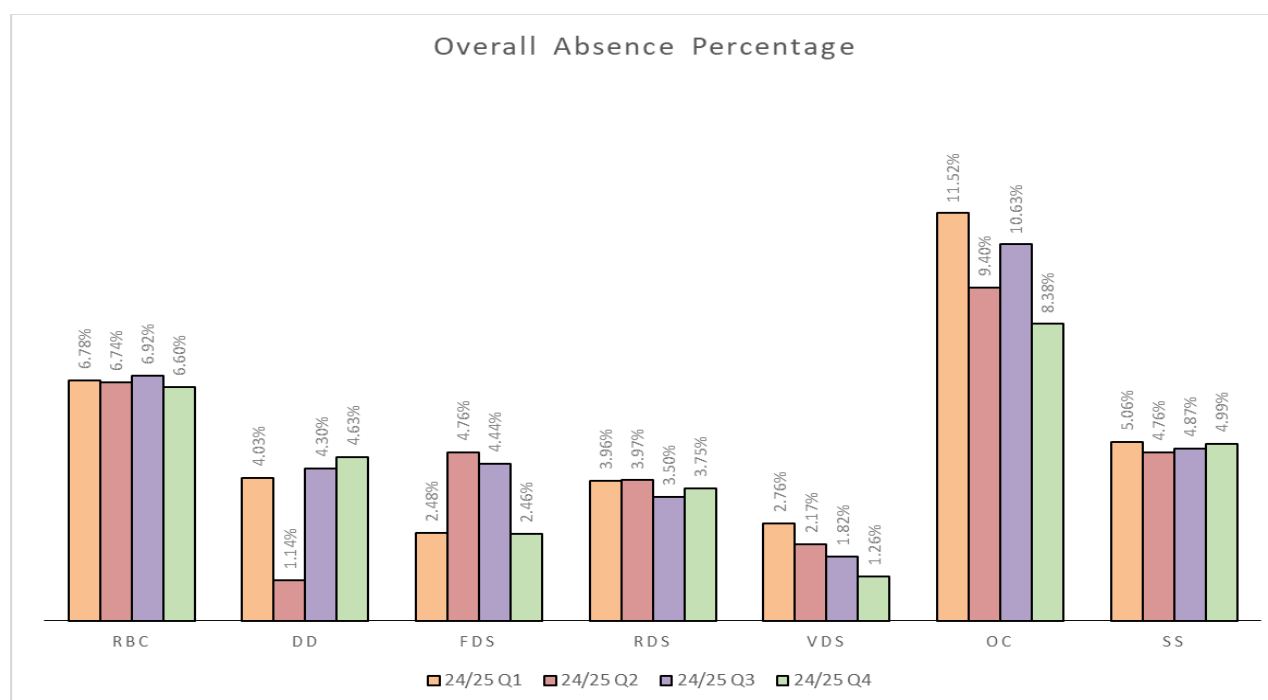
Of the 45 referrals due to stress, 20 were attributed to work-related stress and 24 were attributed to non-work-related stress (with 1 not known).

3.1.2 Overall absence percentage

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Overall Absence (work days lost versus work days available)	6.60%	4.63%	2.46%	5.79%	3.75%	1.26%	8.38%	4.99%	4.43%

The overall absence percentage for all SFRS working days lost in quarter 4 is 4.43% which is comparable to the previous quarter which was 4.44%.

All duty groups have seen a decrease in their absence figures between quarter 3 and quarter 4 with the exception of RDS and SS who have seen a marginal increase (i.e. a variance of less than 0.50%).



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

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Short-Term Absence (work days lost versus work days available)	2.44%	1.08%	0.65%	2.01%	1.07%	0.01%	2.84%	1.21%	1.34%

The total of short-term absence has also remained comparable to the previous quarter, which was 1.33%. However, DD and RDS have both seen marginal increases. People Advisers continue to support Line Managers in managing attendance and ensuring suitable monitoring is in place to reduce short-term absences.

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

EMPLOYEE GROUP	RBC	DD	FDS	TOTAL WDS	RDS	VDS	OC	SS	TOTAL (ALL)
Long-Term Absence (work days lost versus work days available)	4.16%	3.55%	1.81%	3.78%	2.69%	1.25%	5.54%	3.78%	3.10%

The total of long-term absence has also remained comparable to the previous quarter, which was 3.11%. Long term absence within OC has decreased from 7.11% last quarter to 5.54% in quarter 4, the lowest rate this year. OC managers continue to drive forward their Enhancement Plan, including a focus on management and leadership development, which may be positively impacting on employee attendance. All long-term absences are monitored by Line Managers and appropriate support is provided by the People Directorate.

3.1.5 Short-term absence by top three absence reasons

Short Term Sick - Top 3 Reasons	Respiratory	Musculoskeletal	Stomach or Bowel	Other	TOTAL
RBC	892	593	408	608	2501
DD	66	75	41	67	249
FDS	44	8	8	49	109
RDS	827	866	211	706	2610
VDS	1	0	0	1	2
OC	66	12	47	67	192
SS	190	73	58	237	558
Total Working Days Lost	2086	1627	773	1735	6221
Number of Employees	537	253	279	292	1361

3.1.6 Long-term absence by top three absence reasons

Long Term Sick - Top 3 Reasons	Musculoskeletal	Psychological	Surgical	Other	TOTAL
RBC	1760	1185	689	622	4256
DD	239	438	52	92	821
FDS	0	237	15	52	304
RDS	3242	875	801	1666	6584
VDS	141	151	17	0	309
OC	77	237	59	0	373
SS	279	715	262	484	1740
Total Working Days Lost	5738	3838	1895	2916	14387
Number of Employees	157	118	62	76	413

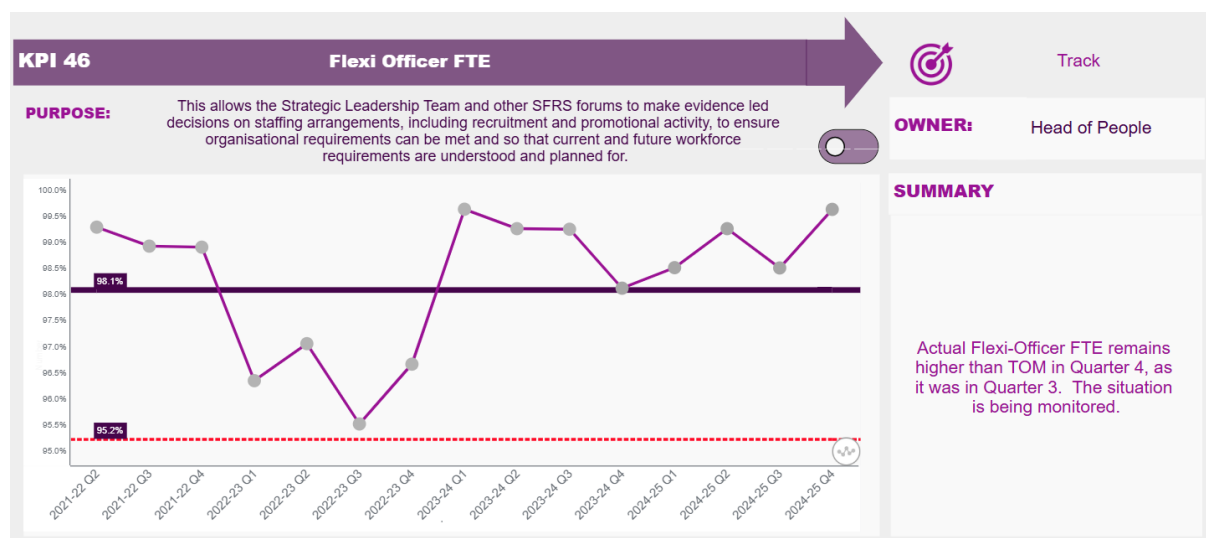
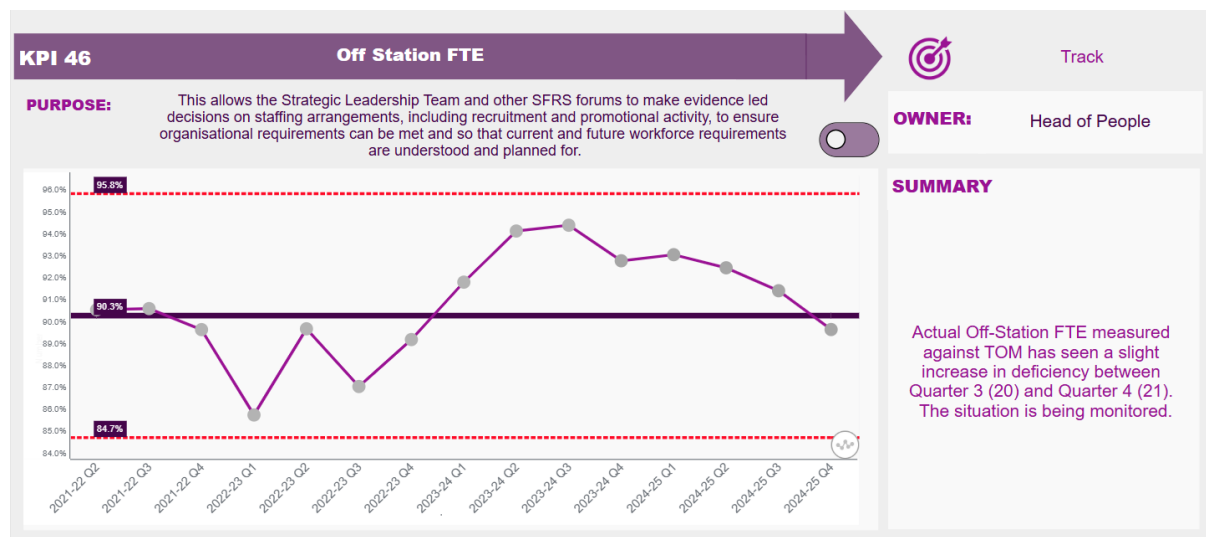
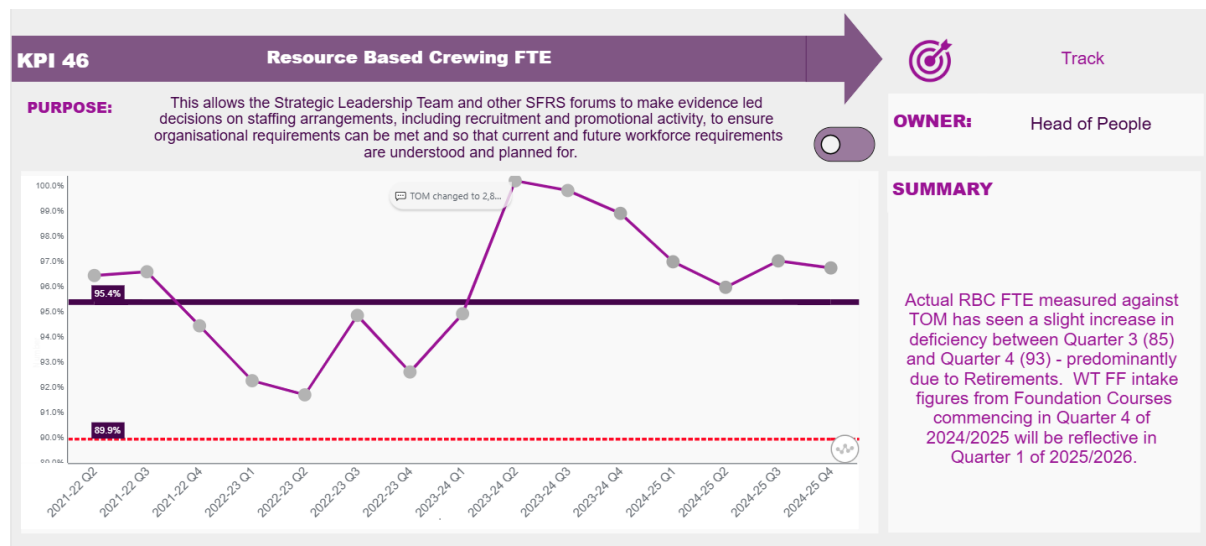
The tables above show the main reasons for employee absence in terms of working days lost, for both short and long-term absence, and the total number of employees absent against these categories. The most common long-term absence reasons are in line with the previous quarter, with Musculoskeletal and Surgical seeing a reduction in the number of working days lost and Psychological seeing an increase of 683 working days lost.

The top reasons for short-term absence also are in line with the previous quarter, with Respiratory and Stomach or Bowel seeing a reduction in working days lost, but Musculoskeletal seeing an increase of 351 working days lost.

Appendix 1 – Glossary of Terms

ALICE	Automated Language Inference & Cognitive Evaluation
CRL	Confidential Reporting Line
DACO	Deputy Assistant Chief Officer
DD	Day Duty
ER	Employee Relation
FDS	Flexi Duty System
FFC	Fire Fighter Control
FRS	Fire Rescue Service
FTE	Full Time Equivalent
MSK	Musculoskeletal
NHS	National Health Service
NTC	National Training Centre
OC	Operations Control
RDS/VDS (On Call)	Retained and Volunteer Duty System
OCIT	On Call Improvement Team
OCSCG	On Call Strategic Coordinating Group
R&S	Recruitment and Selection
RBC	Resource Based Crewing
RDS	Retained Duty System
RDS FT	Retained Duty System Full Time
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SS	Support Staff
TOM	Target Operating Model
TTM	Task Management Courses
VDS	Volunteer Duty System
WDS	Watch Duty System

Appendix 2 – KPI 46



KPI 46

Operations Control FTE



Track

PURPOSE:

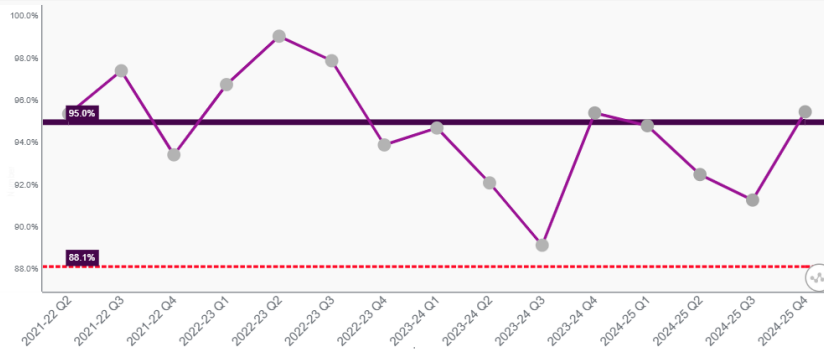
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

Actual OC FTE measured against TOM has seen a significant improvement between Quarter 3 and Quarter 4 - due to FFC recruitment activity throughout Quarter 3 - which is now reflective in Quarter 4 data. Deficiency has decreased from 15 to 4.



KPI 46

Rural Full-time FTE



Track

PURPOSE:

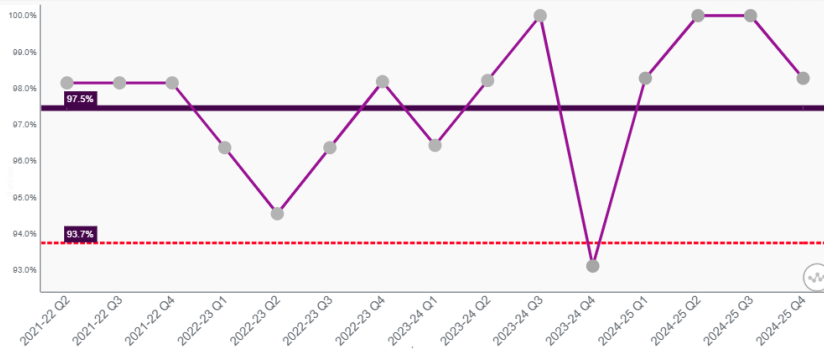
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

OWNER:

Head of People

SUMMARY

Actual Rural FT FTE measured against TOM has seen a slight deficiency in Quarter 4 - compared with being 100% resourced in Quarter 3. Situation is being monitored.



KPI 46

On Call Retained FTE



Track

PURPOSE:

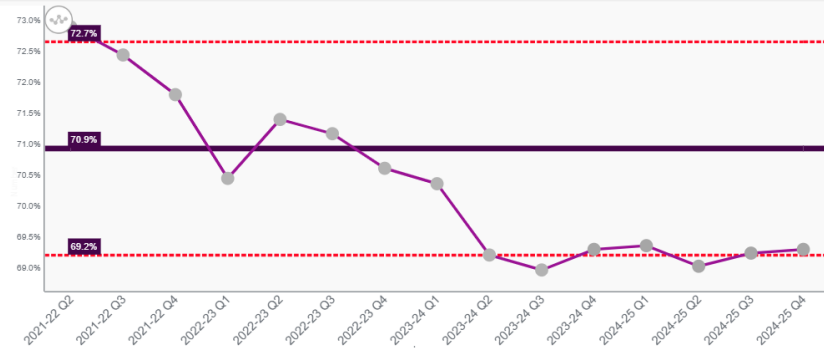
This allows the Strategic Leadership Team and other SFRS forums to make evidence led decisions on staffing arrangements, including recruitment and promotional activity, to ensure organisational requirements can be met and so that current and future workforce requirements are understood and planned for.

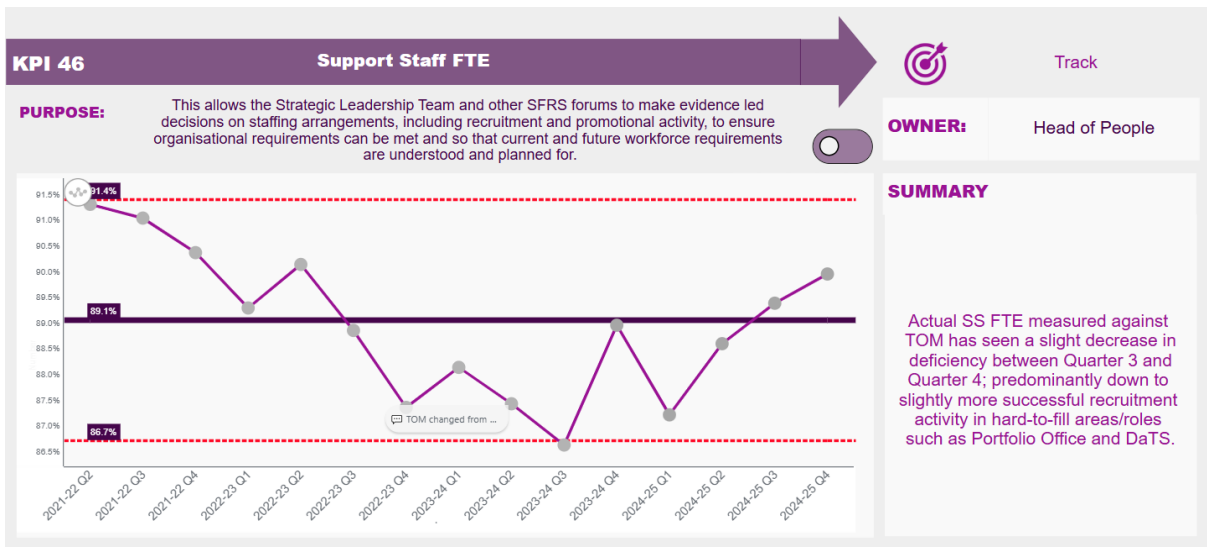
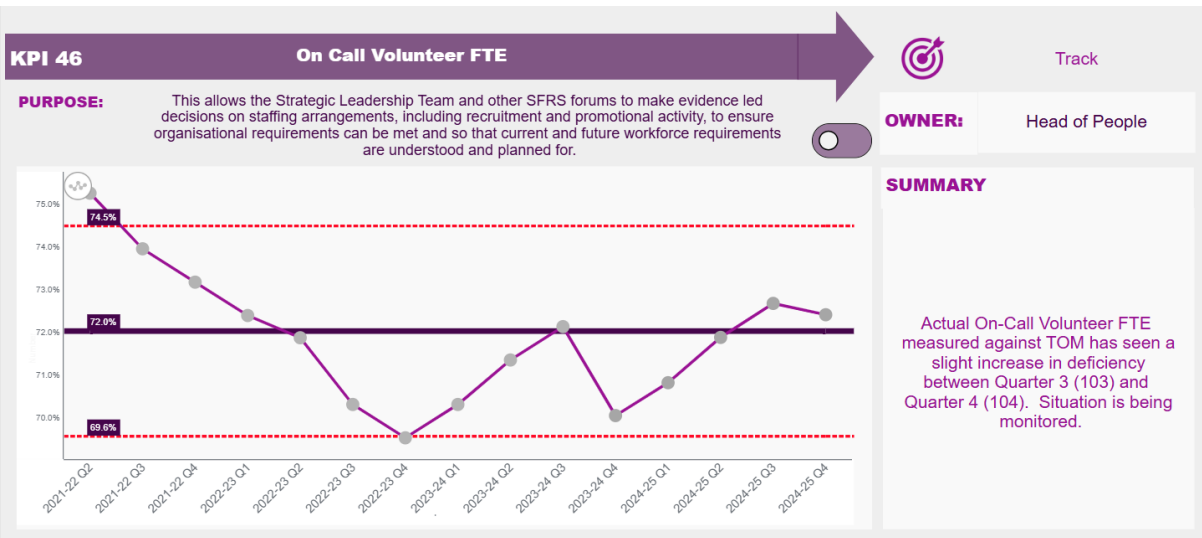
OWNER:

Head of People

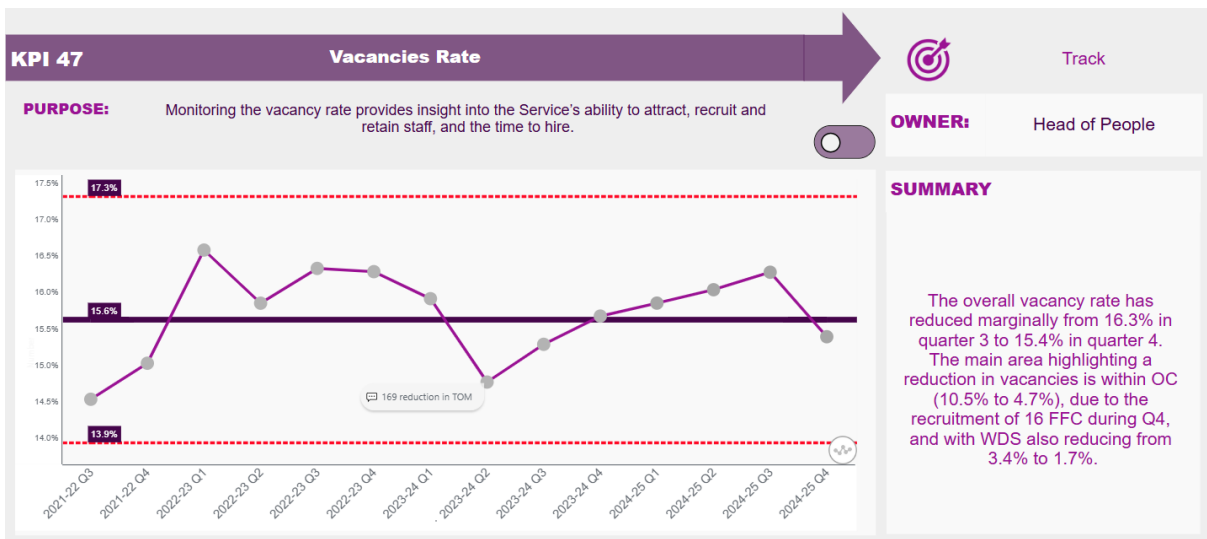
SUMMARY

Actual On-Call Retained FTE measured against TOM has seen a very slight decrease in deficiency between Quarter 3 (1019) and Quarter 4 (1017). Work is ongoing within various On-Call Improvement Working Groups to improve the current short-fall.

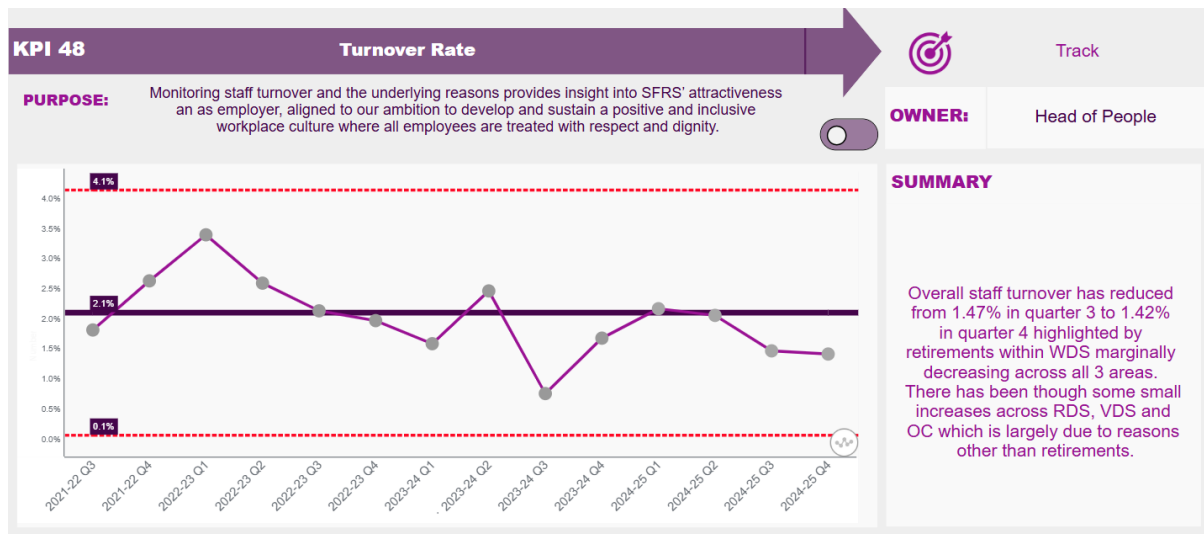




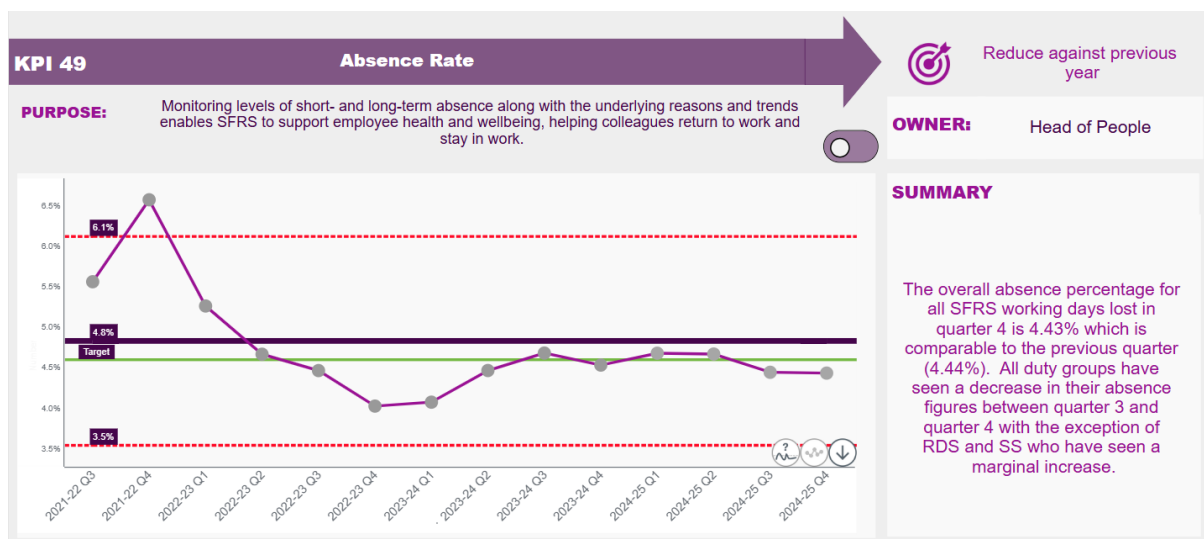
Appendix 3 – KPI 47



Appendix 4 – KPI 48



Appendix 5 – KPI 49



SCOTTISH FIRE AND RESCUE SERVICE

People Committee



Report No: C/PC/19-25

Agenda Item: 9.2

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 JUNE 2025						
Report Title:		LEARNING AND DEVELOPMENT ANNUAL UPDATE 2024-25						
Report Classification:		For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
			A	B	C	D	E	F
1	Purpose							
1.1	The purpose of this paper is to provide People Committee (PC) with an overview of the Services' Learning and Development (L&D) 2024-25 approach, provision and impact.							
2	Background							
2.1	The requirement to build a workforce capable of fulfilling individual and organisational needs and ambitions and innovatively overcome challenges remained a strategic imperative for 2024-25. L&D played a key role in enabling this objective, investing in skills to enable performance, futureproof the workforce, and strengthen our organisational resilience.							
2.2	Continued fiscal pressures and the identification of skills and competency gaps present a challenging operating environment for the Service. The provision of effective, efficient and impactful L&D initiatives is instrumental in addressing these challenges and enable the creation of an agile and skills rich workforce.							
2.3	This report provides the annual L&D update for 2024-2025 including an overview of our Learning Needs Analysis (LNA) approach, investment in Learning and Development from April 2024 to March 2025 and the impact of initiatives via learner feedback.							
3	Main Report							
3.1	Learning Needs Analysis (LNA) 2024-25							
3.1.1	Our annual learning cycle requires the submission of area/functional learning needs. Talent Development (TD) colleagues met with Learning Partners (LPs) and their Strategic People partners early in 2024 reinforcing key organisational/workforce factors to consider when submitting their learning needs request; <ul style="list-style-type: none">- Organisational Change – L&D requirements identified to support organisational change (implications of Service Delivery Review Phase 1, Corporate Service review and functional operating models), continuous improvement and innovation projects;- Existing/'Known' Commitments – Procured/contracted L&D provision over multiple financial years and consideration for qualifications over more than one year that require funding from the centralised L&D budget;- Role/Post Specific – these are typically informed by appraisal and personal development plans- Professional Development – including professional development and/or succession planning needs and can also be informed by appraisal and personal development plans.							

3.1.2	<p>The Learning Partner Group (LPG) led by the TD People team and supported by nominated functional LPs met nine times throughout 2024-25, progressing 103 requests from 135 submitted to the LPG in 2024-25. Functional LPs, Senior Management Teams, TD and the Strategic People Partners facilitate and enable the LNA process through regular engagement with management teams to support and optimise L&D outcomes.</p>
3.1.3	<p>2024-25 LNA Process</p> <pre> graph TD A[Simplified LNA form; Talent Development Adviser aligned to each Learning Partner (LP)] --> B[LPs Discuss with HoF and Dept Managers (Jan/Feb 24)] B --> C[Learning Partners, review, cleanse and prioritise LNA submissions] C --> D[Collated LNA reviewed, prioritised and agreed by Head of Function/ Management Team for submission to TD Adviser] D --> E[Approved LNA's recorded and categorised by TD informing L&D budget and work plans] E --> F[Service LNA shared with LPG, 6-weekly meetings to review, prioritise and recommend requests for budget allocation.] F --> G[Regular meetings between LP and aligned TD Advisers and Functional LP's] G --> H[Monthly budget meetings with finance colleagues to track approved Service L&D provision] H --> I[Quarterly recommendations report submitted to Corporate Board for scrutiny and assurance] </pre>
3.2	<p>2024-25 LNA Challenges and Improvement Opportunities</p>
3.2.1	<p>The LNA approach was reviewed and revised taking cognisance of recommended improvement actions from the L&D 2023-24 annual update paper. Increased fiscal pressures ratified the need to implement improvement measures to robustly monitor and scrutinise the allocation of L&D Budget. The continuation of monthly finance meetings assisted timely management and monitoring of the L&D budget including onward engagement and remedial action, where required, with areas/functions. Quarterly reporting to Corporate Board was introduced which enabled additional scrutiny and assurance which has further informed budgetary decision making. Additionally, this provided the opportunity for Heads of Functions (HoFs) to proactively support the LNA process with their management teams.</p>
3.2.2	<p>Improvement action progressed from 2023-24 recommendations for 2024-25 include:</p> <ul style="list-style-type: none"> • Initial use of MS Forms for the collation of the LNA identified some challenges relating to dataset accuracy, and the functionality was not as flexible as the previous excel spreadsheet, where data could be more easily collated and analysed. The TD team revised the existing excel spreadsheet and provided guidance and support to LPs to mitigate issues with data. • Quarterly update reports from LPG were submitted through governance to Corporate Board for scrutiny and assurance. • Regular engagement with LPs and Strategic People Partners progressed throughout the year, assisting with strategic talent and priority planning. • The LPG met on a 6-weekly basis to review requests against the principles of prioritisation. Increasing the frequencies of these meetings from quarterly has enabled agility in decision making and management of L&D provision in response to organisational change, whilst ensuring the approach remains aligned to Service priorities.
3.2.3	<p>Challenges and improvement opportunities for 2025-26 were identified from the ongoing review of the LNA process and arrangements:</p>

CHALLENGES	• IMPROVEMENT OPPORTUNITIES
Learning being progressed outwith LNA / LPG	<ul style="list-style-type: none"> • consideration to be given to budget allocation and tracking of learning initiatives (qualifications, contractual relationships with learning/skills providers, multi-year contracts)
Incomplete/Insufficient L&D Information	<ul style="list-style-type: none"> • Increased engagement and detailed analysis with Learning Partners, functional managers and HoF • Proactive, forward planning of learning needs to identify opportunity, priority and feasibility
Timeline for 2024/25 LNA Submission	<ul style="list-style-type: none"> • Further strengthen alignment with business planning period allowing time for scrutiny prior to submission • Continue to apply a zero-based budget approach to ensure L&D budget is well-informed
Approved Learning Needs not being progressed	<ul style="list-style-type: none"> • Increased engagement with HoF, management teams and people partners post learning needs approval to improve fiscal monitoring • Include the provision of PO numbers for approved learning prior to LPG meetings
Lack of awareness of LNA process	<ul style="list-style-type: none"> • Review and enhance supporting documents for the LNA process, including functional LP and management guidance.
Learner partner changes	<ul style="list-style-type: none"> • Induct new LPs and develop supporting documents to guide and advise on the Learning Partner role, and the LNA process.
3.2.4	<p>People directorate will continue to engage and work with internal stakeholders to progress the improvement actions to enhance and advance the Scottish Fire and Rescue Service (SFRS) learning culture.</p>
3.2.5	<p>Guidance and advice provided by both the Further and Higher Education and Appraisal Policies impact the LNA and consequentially the ability of the Service to provide learning opportunities which meet individual and Service needs. A review of each policy is scheduled to take place in 2025-26, with key considerations given to aspects aligned to the LNA:</p> <ul style="list-style-type: none"> • Further and Higher Education Policy <ul style="list-style-type: none"> ○ <i>Full policy review with a refresh of supporting artefacts</i> ○ Discussions with Legal to inform the review of the Learning Agreement contract to enable easier access to skillset/ knowledge in support of meeting Service priorities and statutory obligations. ○ Strengthen the leaver process and L&D repayment mechanism by progressing discussions with Finance and People Services colleagues to establish an agreed workflow approach. • Appraisal Policy <ul style="list-style-type: none"> ○ <i>Refresh Policy and supporting artefacts to reflect LNA cycle and recommendations.</i> ○ Enhance career progression and succession planning elements. ○ Review LNA detail within the policy and supporting artefacts to ensure it aligns with improvement work. ○ Enhance line manager guidance to reflect the LNA cycle and provide advice/ resources to address any identify skills gaps.
3.2.6	<p>The Recognition of Prior Learning policy informs corporate wide learning, training and development and is scheduled for review in 2025-26. TD colleagues will support Training</p>

Safety and Assurance for this review, taking cognisance of the increased application of policy/process with operational recruitment and training.

NB:- The scope of this review work will be informed by various factors as we move through the governance process.

3.3 Centralised L&D Budget Financial Overview 2024-25

2024-25 Learning and Development Budget	Amount (£)
Full Year Budget	£422K
Year to March '25 Budget allocation	£417k
Year to Mar '25 Actual Budget Spend	£403.5k
Actual Underspend as at May 2025	£18.5k*
*Dependant on progression of 2024-25 accruals.	

3.3.1 The centralised L&D budget for 2024-25 was c.£422k, a 10% decrease on 2023-24. 44% of this budget (£185k) was pre-committed through known recurring L&D needs for e.g. Scottish Union Learning, Cyber Security, leaving a centralised budget of £237k for remaining L&D requirements. To maximise efficacy and value of the L&D budget the LPG employed the principles of L&D prioritisation (see Appendix A) to provide learning recommendations for scrutiny at Corporate Board on a quarterly basis.

3.3.2 The current calculation of actual underspend for 2024-25 is c. £18k, this is a 75% decrease from 2023/24 and demonstrates that the improvement actions taken in 2024/25 have realised a positive impact.

3.4 2024-25 Functional Overview of L&D Investment

3.4.1 A functional level overview of the 2024-25 (April 2024 – March 2025) L&D investment is available in Appendix B: 2024-25 Learning and Development and is summarised below:

3.4.2 Organisational wide provisions

- c. 32% (£133.5k) investment.
- 45% pre-committed to the new Cyber security training.
- 28% supported our lifelong learning partnership, with an overview of the programme for 2024-25 provided in Appendix C.
- 16% was allocated to service improvement training.
- Increased activity relating to SVQ/MA qualifications and certifications for firefighters (FF), assessors and internal verifiers totalling £28k due to increased trainee intakes across the Service in 2024-25. This investment enhances our capability, capacity and culture through the development of professional and organisational practice.
- Additional National Fire Chief Council (NFCC) Supervisory and Middle Manager Management licences to support management development across all staff groups. 21 additional licences were purchased in 2024-25 (10 Supervisory and 11 Middle Manager), totalling £605.
- Funding also facilitated attendance at several conferences and events, namely the Women in the Fire Service Event and the Asian Fire Service Association Conference.

3.4.3 Finance and Contractual Services (FCS)

- c.15% (£63k) investment.
- 82% of this was allocated to actively support L&D provision to Asset management, namely fleet, workshops and equipment teams.
- Increased training activity including accredited training associated with the maintenance and service of fleet appliances and role specific training for maintenance of competence. It also includes training for the competent servicing of growing electric vehicles fleet in support of SFRS' Net Zero/sustainability agenda.
- High value investment is attributed to training for Scania courses (FBT1, FBT 2, FBT3 + IRTEC Maintenance) with 4 colleagues attending each course at a cost of £2.4k per person (£28.8k in total)

	<ul style="list-style-type: none">- ICT were allocated a separate L&D budget for 2024-25 which was managed and administered locally to support their on-going organisational change activity.- TD colleagues have engaged extensively with Asset Management to reconcile and support their changing L&D needs throughout 2024-25. Some examples of this include providing support, advice and guidance on the LNA cycle and more specifically to familiarise them with the finance processes associated with progressing requests. This work identified several improvement opportunities for the LNA process, as detailed in section 3.2.3.															
3.4.4	<p><u>Prevention, Protection and Preparedness (PPP)</u></p> <ul style="list-style-type: none">- c. 40% (£168k) investment.- Continued prioritisation of developing professional practice in response to change in regulation and statutory obligations. Investment in developing and diversifying the talent pipeline to meet new and existing statutory requirements. The sizable allocation of budget is relative to the significant structural change within PPP and skills shortages as a result of the impact of the pension remedy.- The Protection function within PPP progressed several high-value requests through the LPG, namely the Fire Safety Enforcement course for Recognition of Prior Learning course for 24 colleagues to attend at a cost of £1,387pp, totalling £43k. Alongside this, 4 new entrants to PPP enrolled in a Fire Investigation course at the cost of c. £3.4k pp, totalling c. £13.6k															
3.4.5	<p><u>People</u></p> <ul style="list-style-type: none">- c.6% (£24k) investment.- 95% of this investment facilitated Wellbeing learning interventions upskilling our colleagues on innovative medical practice, supporting the new operating model and progressing the Mental Health and Wellbeing Strategy.- 5% was allocated to Workforce Planning colleagues on qualifications to enhance knowledge and skills of our colleagues, and in turn our approach to workforce planning in support of SSRP.															
3.4.6	<p><u>Strategic Planning and Performance and Comms</u></p> <ul style="list-style-type: none">- c.2%, (£7k) investment- Investment was allocated to the Business Intelligence and Data Services teams PuMP Course Blueprint course, providing KPI based training on how to use performance measures to improve performance, instrumental in the development of key Service performance documents including the Performance Management Framework and Strategic Plan 2025-28.															
3.4.7	<p><u>Training, Safety and Assurance</u></p> <ul style="list-style-type: none">- c.2% (£7.5k) investment- Most investment focussed on enhancing our design approach to e-learning. Operational training investment is allocated through the Operational Training budget.															
3.5	<p>Scottish Union Learning</p>															
3.5.1	<p>Scottish Union Learning (SUL) courses are available to all SFRS employees. Appendix C: 2024-25 Scottish Union Learning Overview provides an overview of in-year SUL L&D activity in 2024-25.</p>															
3.6	<p>Management and Leadership Development</p>															
3.6.1	<p>In partnership with both the NFCC and Franklin Covey, the Service offered structured and accessible learning initiatives for colleagues across Supervisory, Middle and Strategic management groups across 2024-25.</p> <table><tr><th>Course</th><th>No. Attended</th><th>No. Completions</th></tr><tr><td>Inclusive Leadership (Franklin Covey)</td><td>19</td><td>9</td></tr><tr><td>NFCC Supervisory LDP</td><td>19</td><td>(Ongoing)</td></tr><tr><td>NFCC Middle Manager LDP</td><td>19</td><td>(Ongoing)</td></tr><tr><td>MDF Day 1</td><td>233</td><td>(On-going)</td></tr></table>	Course	No. Attended	No. Completions	Inclusive Leadership (Franklin Covey)	19	9	NFCC Supervisory LDP	19	(Ongoing)	NFCC Middle Manager LDP	19	(Ongoing)	MDF Day 1	233	(On-going)
Course	No. Attended	No. Completions														
Inclusive Leadership (Franklin Covey)	19	9														
NFCC Supervisory LDP	19	(Ongoing)														
NFCC Middle Manager LDP	19	(Ongoing)														
MDF Day 1	233	(On-going)														

3.6.2	The Management Development Framework (MDF), Day 1 “People Management Essentials” was designed using insights from our supervisory colleagues across the Service in 2023-24. Content was designed, tested and delivered internally via in-person sessions by TD colleagues throughout 2024-25.
3.6.3	<p>Learning opportunities were promoted to stakeholders across the Service. The TD team identified nominations for leadership and management training in LNA returns for 2024-25 and during in-year LPG meetings. Nominations were ratified in engagement with LPs and managers using the following criteria to ensure learning was achievable, meaningful and impactful:</p> <ul style="list-style-type: none"> • Substantive in post for the relevant management level. • Availability to attend for the duration of the course. • Demonstrated commitment and ambition to complete the course. • An understanding of the programme and career aspirations through development discussions/appraisal.
3.6.5	Manager briefings, supporting our leaders as developers, aligned to each course were delivered. These explored and enabled leadership roles to actively engage and support their team members through their learning journeys and created opportunities to apply and embed their learning as well as reflect and adopt continuous learning approaches.
3.6.6	<p>Whilst value-add and impact is realised in course evaluations (see Appendix D), challenges remain in the development and delivery of the MDF:</p> <ul style="list-style-type: none"> • Strategic direction has been sought through a series of reports detailing approach to delivery, financial and resource requirements, challenges faced with current model, and alternative options for further rollout were issued to SLT for consideration. This will be further considered through the Strategic Culture and Leadership Review and Reset Workshop. • Collaborative working - TD colleagues engaged regularly with Senior Management Teams on the progress of the MDF to build knowledge and endorsement of the framework and were regularly met with challenges aligning to resource (financial and human), service implications of colleagues’ attendance, and prioritised local area management and leadership development programmes. • Programme delivery - despite the ongoing discussions around MDF delivery approach including agreed and allocated resources, co-ordination of the programme continues to be reactive. This impacts on the opportunity to adequately promote, schedule and deliver sessions to the target audience.
3.6.7	A summary of the course content for each programme facilitated by TD colleagues, and figures for attendance is provided in Appendix E.
3.7	Learning and Development – Creating Value for the SFRS
3.7.1	The impact and value-add of L&D investment is illustrated in Appendix D through recent feedback which demonstrates our increasingly proactive and targeted L&D investment. This investment enhances employees’ skills, knowledge and competency, resulting in better work performance, promotes a learning culture and supports the aspiration of being the best employer we can be, as aligned to the Service’s strategic outcomes.
3.8	Future L&D Updates
3.8.1	It is recommended that Corporate Board continue to be provided with quarterly L&D reports and an annual overview of L&D delivery, spend and evaluation to enable scrutiny of L&D approach, provision and impact. It is recommended that this annual update/overview continue to be provided as a verbal presentation supported by a report in Q1 of the following year to the People Committee.

4	Recommendation
4.1	<p>People Committee are asked to:</p> <ul style="list-style-type: none"> • Scrutinise the Service's revised Learning Needs Analysis approach including the introduction of enhanced assurance arrangement from 2024-25. • Scrutinise the L&D investment from April 2024 to March 2025. • Scrutinise the improvement opportunities, and consider the challenges detailed in section 3.2.3 • Note L&D value created as demonstrated through examples of learner feedback showing skills developed and associated impact to strategic priorities and outcomes.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Register:
5.1.1	People: In relation to seeking innovative approaches to talent acquisition, development and retentions SFRS has an Open appetite, looking to experiment with new methods of attracting, developing and retaining talent. The centralised learning and development resource may not be able to support all L&D activities required to support and enable the Services' priorities.
5.2	Financial:
5.2.1	An improvement in L&D fiscal management and procurement arrangements are anticipated through enhanced governance & quality assurance arrangement.
5.3	Environmental & Sustainability:
5.3.1	Improvements are anticipated through enhanced governance & quality assurance arrangement ensuring alignment of investment to priorities.
5.4	Workforce:
5.1.1	Development of talent across the SFRS ensures that the organisation has the right level of skills, knowledge and resources to face current and future priorities.
5.5	Health & Safety:
5.5.1	Improvements are anticipated through enhanced governance & quality assurance arrangement ensuring alignment of L&D investment to SFRS priorities.
5.6	Health & Wellbeing:
5.6.1	Improvements are anticipated through enhanced governance & quality assurance arrangement ensuring alignment of L&D investment to SFRS priorities.
5.7	Training:
5.7.1	An effective LNA process is key to support the Service to meet the current and future priorities – prioritised learning and development = right people, in the right place, with the rights skills at the right time.
5.8	Timing:
5.8.1	The revised Learning Needs Analysis process and enhanced governance & quality assurance arrangements are aligned to established governance meeting schedules.
5.9	Performance:
5.9.1	It is anticipated that the LNA process, arrangement and associated L&D provision will continue to have a positive impact on performance as demonstrated in Appendix D.
5.10	Communications & Engagement:
5.10.1	Continued communication and engagement will be required to ensure that the revised LNA process embed and that any further improvements are identified and progressed. This will be supported through Learning Partner engagement arrangements, existing governance and established Communications channels.

5.11 5.11.1	Legal: No legal implications are anticipated	
5.12 5.12.1	Information Governance: <i>DPIA completed: No</i> – not required due to the nature of the report.	
5.13 5.13.1	Equalities: <i>EIA completed: No</i> – not required due to the nature of the report.	
5.14 5.14.1	Service Delivery: Development of talent across the SFRS via learning, training or experience will ensure that the organisation has the right level of skills, knowledge and resources to face current and future priorities.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross, Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/Limited/Insufficient
7.3	Rationale:	The Learning Partner Group was established 3 years ago to support our improved approach to delivering increased value from L&D. Quality assurance processes are being enhanced to provide additional rigour including fiscal monitoring and management, prioritisation and decision making in line with existing governance arrangements.
8	Appendices/Further Reading	
8.1	Appendix A: L&D Principles of Prioritisation	
8.2	Appendix B: 2024-25 Learning and Development Analysis	
8.3	Appendix C: 2024-25 Scottish Union Learning Overview	
8.4	Appendix D: L&D Creating Value - Learner Feedback and Skills Development	
8.5	Appendix E: Management and Leadership Development Summary	
8.6	Appendix F: Learning and Development Update 2025/26 Presentation	
Prepared by:		Jen Kidd, Lead People Adviser – Talent Development
Sponsored by:		Ceri Dodd, Deputy Head of People
Presented by:		Jen Kidd, Lead People Adviser – Talent Development
Links to Strategy and Corporate Values		
The SFRS Strategic Plan; Strategic Outcome 6: The experience of those who work for the SFRS improves as we are the best employer we can be; SFRS Values: Safety, Teamwork, Respect and Innovation		
Governance Route for Report		Report Classification/ Comments
<i>People DMT</i>		<i>28 January 2025</i> <i>For Scrutiny</i>
<i>Corporate Board</i>		<i>17 February 2025</i> <i>For Scrutiny</i>
<i>People Committee</i>		<i>5 June 2025</i> <i>For Scrutiny</i>

APPENDIX A: L&D Principles of Prioritisation

Statutory: This category stands alone as it focusses on the legislative and regulatory training needs that must be met to ensure the Service meets its legal responsibilities and remains compliant with its regulatory frameworks.

Job Specific/Required: This category focusses on the learning and development and certification that is required for people to carry out their duties. It refers specifically to the development that must be in place and maintained for the individual to fulfil their job, e.g., Practising Certificate for solicitors, Category B certification for some driving roles.

Priority One: Development that is essential in the next 12 months to support the person fulfil their current role and should focus on the requirements within the current Job Description. (This category should also cover those who have started but not completed Priority 1 Training, and people who have started a course/qualification which is continuing over more than one year.

Priority Two: Development that would allow the person to perform their role more effectively in the next 12 months or would support them in their career development aspirations. (This would include succession planning within the functions.)

Organisational Training: Learning/Development required to be undertaken by SFRS employees to enable the SFRS to deliver its services as a public service organization. This can range from compliance requirements e.g. GDPR, H&S training; to organisational security and safety e.g. Induction/Onboarding, Cybsafe; to behavioural/values and culture e.g. Professional Behaviours etc.

APPENDIX B: 2024-25 Learning and Development Analysis

Function	Development Activity	Investment 2024-25 %	Strategic Priority Alignment
SFRS Organisation	Cyber Security Training	32	Enabling more effective and efficient service delivery through developing professional and organisational practice resulting in enhanced SFRS capability, capacity, resilience and culture.
	Scottish Union Learning/ Lifelong learning		
	Continuous Improvement Programme (Cardiff Course)		
	SQA Assessor Verifier Training		
	MA/ SVQ Registrations		
Finance and Contractual Services	Fleet Training (Scania, Forklift Operator Courses)	15	Includes maintenance of core competency, and technical qualifications in servicing the growing electric vehicles fleet in support of SFRS' Net Zero/ sustainability agenda.
	Stores Training (H&S)		
	Governance (Crystal Reports)		
Prevention Protection and Preparedness	Level 7 PDA - Analysing Resilience* 2	40	Developing and enhancing professional practice aligned to regulatory and best practice changes; developing and diversifying the SFRS talent pipeline to build resilience and meet capability and capacity requirements.
	Certificate in Fire Science (Levels 2&3)		
	Fire Safety Courses		
	Fire Safety Enforcement Qualifications		
	RPL - Fire Safety Enforcement		
	GATR (PDR + L5) (Level 2, Practical)		
People	Health and Wellbeing training (Audiology and Spirometry)	6	Developing professional practice and SFRS People capability and capacity, facilitating and enabling effective Workforce planning aligned to SSRP.
	SVQ/MA Assessor Verifier Certification/ Accreditation		
	Workforce Planning Qualifications (CIPD)		

APPENDIX B: 2024-25 Learning and Development Analysis

Function	Development Activity	Investment 2024-25 %	Strategic Priority Alignment
Strategic Planning and Performance	PuMP Blueprint Course	2	Developing professional practice aligned to the development of key performance measures, informing our Performance Management approach and Strategic Plan 2025-28.
Training Safety and Assurance	Adobe After Effects training	2	Developing professional practice and SFRS e-Learning capability and capacity.

APPENDIX C: 2024-25 Scottish Union Learning Overview

COURSES 2024-2025 Year 3	Uniformed Learners	Non-Uniformed Learners	Total Learners	Accredited Learning
City of Glasgow College (CLP) Courses – Excel, BSL & Languages – 4 courses	53	60	113	Yes
Cycle Maintenance 3 courses	19	4		No
Velotech Cycle courses (Bronze, Silver, Gold) 5 courses	19	-		Yes
National Navigational Award Scheme (Bronze, Silver) 5 courses	28	1		Yes
Level 3 Personal Trainer 1 course	3	-		Yes
Level 3 Pre & Post Natal Exercise & Nutrition 1 course	6	-		Yes
Planning for Retirement 1 course	8	1		No
Effective Support & Supervision of Staff 1 course	13	-		No
Open University Micro-Credential Courses across 11 courses	13	5	18	Yes
TOTALS Learners 233 across 31 courses	<u>162</u>	<u>71</u>	<u>131</u>	N/A

Scottish Union Learning partnership enables lifelong learning for all SFRS employees and adds value to the SFRS through;

- Fitness/health courses supporting the Mental Health and Wellbeing Strategy via fitness training at station/SFRS location gyms
- Organisational change & changing skill requirements, fostering a learning culture and encouraging a growth/improvement mindset.
- The availability of ICT literacy, namely foundation Excel courses, improving reporting functionality
- Enabling the wider inclusive culture agenda via BSL activities

There is a high level of interest in the courses provided through the learning partnership. Assessment of value add and impact of the learning partnership from wider insights and data in 2025-26 will inform improvement opportunities for the learning partnership.

The full project Learning Fund has been allocated for 2023-25 (£46k) which is in year 2 of this third 2-year Scottish Union Learning Programme. It is anticipated that any new funding is likely to be accounted for when funding applications open due to current learner waiting lists.

The SFRS L&D budget funds circa 60% for the Union Learning Programme Coordinator seconded role within the FBU (c. £28K) to enable implementation of the SUL programme with SUL Funding contributing the remaining monies for the seconded role as well as monies for courses in 2024-25.

Flexible work Development Fund (£5000): funding was secured for the FBU as a small enterprise company to allow four Health & Safety officials to undertake their NEBOSH qualification on a fully funded external basis. Whilst this allocation was for 4 individuals in the 2023-24 budget – two Officials have now successfully attained their qualification with a further 2 undertaking their qualification, 6 in total.

Colleague Feedback from Scottish Union Learning Courses:

"I am enjoying the Mental Health First Aid course, very thought provoking, and I think more should be encouraged to attend"

"The OU Future Learn – Mental Health for Children course was excellent"

"I attended the NNAS course and it was fantastic, the instructor was brilliant so knowledgeable and friendly, he made learning easy"

"The bike repair course was great, everyone attending enjoyed and appreciated it and would like to be considered for the next Bronze award"

"This was a good conversational Spanish course and allowed for good practical practice and application of learning"

APPENDIX D: L&D Creating Value - Learner Feedback and Skills Development

The below table summaries examples value L&D activity has created by mapping skills developed to the SFRS strategic outcomes:

Strategic Outcome	Skills Development Examples and Strategic Links
One: Community safety and wellbeing improves as we deploy targeted initiatives to prevent emergencies and harm.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • PPP Training/Fire Investigation/Fire Safety
Two: Communities are safer and more resilient as we respond effectively to changing risks.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • Fire Investigation • Data Intelligence Training
Three: We value and demonstrate innovation across all areas of our work.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • PPP Training/Fire Investigation/Fire Safety • Data Intelligence training • Fleet Training
Four: We respond to the impacts of climate change in Scotland and reduce our carbon emissions.	<ul style="list-style-type: none"> • Fleet & Equipment Training
Five: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • PPP Training/Fire Investigation/Fire Safety • Workforce Planning qualifications
Six: The experience of those who work for SFRS improves as we are the best employer we can be.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • Health and Wellbeing Training • PPP Training/Fire Investigation/Fire Safety • Attendance at conferences e.g. AFSA, Women in the Fire Service
Seven: Community safety and wellbeing improves as we work effectively with our partners.	<ul style="list-style-type: none"> • SFRS Service Improvement Foundation Course • PPP Training/Fire Investigation/Fire Safety

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Course Or Programme	Reason for attending	Learning outcomes	How have you/ How will you apply this learning	Benefits of learning
BCI Good Practice Guidelines Training Course	A combination of role specific, legislative requirement and personnel development.	Currently mid-way through the course however the course focuses on the need for a Business Continuity (BC) Management System that underpins all BC plans. The needs of a testing and exercise program and the distinction of what best practice looks like.	At this early stage the course has provide me with the knowledge to assess where the SFRS BC processes are and where there may be gaps that need to be addressed. Ultimately this supports the organisation to be prepared for any service disruption.	As previous
CMI Level 5 Diploma in Management and Leadership	CPD and further development in Leadership and Management.	Project planning and CMI resources to support.	The softer people management skills delivered in the course regarding understanding people and what their frustrations are.	The course content has been very supportive in my role and added to my existing knowledge. I feel more confident in my abilities with the enhanced technical knowledge.
CMI Level 5 Diploma in Management and Leadership	The reason I attended the programme was to improve my understanding of various management activities to enhance my skills and knowledge for my role. I hoped to gain a greater depth of knowledge around leadership and change.	On My course I covered various topics which included, Change Management, Data and Information, Managing Projects, Performance Management, Principles of Leadership, Recruitment and Selection, and Personal Development Plan.	I have used the knowledge and skills gained in my day-to-day activities as a manager, particularly when managing staff and performance. The insights gained have made me a better manager. The only aspect I regret is that I do not feel that I absorbed as much information as I would like to have during the course. I felt I was constantly working to complete an assessment rather than learn the material. However, the information I can now access or go back to has been of great benefit, not only for myself but also those I manage.	I now have access to the CMI library and resources which allows me to review subjects which provides me with a greater depth of knowledge and the ability to understand aspects outside of the Fire Service environment
CMI Level 5 Diploma in Management and Leadership	Career development discussions with previous line manager as part of annual appraisals	The course delivered several subjects including, principles of leadership practices, managing performance, recruitment, selection and retaining talent, using data and information for decision making, managing projects, managing change and using reflective practice to inform personal development.	It has allowed me to review my own leadership style and how I can empower my teams using different styles that are easier for them to understand and buy into. It has allowed me to communicate better with my own teams as well as other stakeholders within the organisation. It has also allowed me to improve my own career prospects.	The course has provided me with great incite on different leadership styles and how they can be used and what kind of leader/manager I am. Gave good input into how management styles can assist with recruitment, and retention of staff and managing change within the organisation.

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Middle Manager Leadership Development Programme	Personal development in relation to leadership styles.	Greater understanding of leadership and how this relates to my role within the fire service and this will assist me in my future career endeavours.	Applied autocratic leadership style in developing stages of incidents and recognising when there is a requirement to move to a more diplomatic approach particularly when there is multi-agency involvement.	Knowing when to apply particular styles of leadership across a variety of job aspects
Improvement Foundation Course Lean Competency System Level 1b	Role specific requirement	Core lean principles, e.g. visual management, quality, problem solving, time & space for improvement, leading improvement work	Helping the service to think about what can be improved and done differently, implementing projects that streamline and improve existing processes	Yes - still ongoing as just starting lean project work, but will be able to demonstrate time savings
Inclusive Leadership Programme	I was hoping to gain some valuable learning from the course and from peers.	I learned a lot about how I am as a leader, and I was able to confirm that I actually already portraying a lot of the behaviours in the learning.	I have utilised the learning sporadically since I attended the course, in particular, I have referenced the numerous practice/information cards to assist me with various tasks.	Yes, it has benefitted me in my role. I am more aware of unconscious bias, and I can plan my week/workload better.
Inclusive Leadership Programme	To enhance my leadership skills, enhance my knowledge, review my thinking and approach with regards to inclusive leadership.	Unconscious bias, Identifying bias, Embracing diversity, Cultivating connections, Being courageous,	Being able to make the right choice or decision even when I am unsure. Being able to make the choice or decision even if it is not one I want to make. It allowed me to listen, to take stock, to empathise. On the limitation side this can take time, sometimes that I don't have! It has enabled me to be more assertive and direct (but in a positive way) to drive conversation and get the information I required.	It has also made me more aware of bringing people into the conversation / decision. Not everyone engages at meetings, and I am now more proactive in involving them. Now, when appropriate, my decision-making processes is enriched by a variety of viewpoints, leading to more effective and creative outcomes.
Inclusive Leadership Programme	Further develop my leadership training	I found the learning built on what I already knew after completing a PGDip in Public Services Leadership	I have used the skills and knowledge in my own personal interactions and raising my awareness in an organisational context	It hasn't had any direct impact on my current role, but I hope to be able to utilise this and my other skills elsewhere in the organisation

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Lean - Cardiff University (Improvement Foundation Course Lean Competency System Level 1b)	<p>I attended the Lean 1b training for self-development and to strengthen my ability to contribute to continuous improvement within my role.</p>	<p>The course covered key Lean principles and their practical application within departments and projects. It introduced 'a scientific approach to improvement,' including models for improvement, documentation, and tests of change. We explored the importance of standard processes, visual management, and quality control, along with practical methods for problem-solving and using evidence to make the right improvements. The training also addressed work planning, waste minimization, and effective meeting management. Additionally, we examined high-reliability organizations and the role of psychological safety in improvement work.</p>	<p>Since completing the course, I have actively integrated Lean methodologies into my work. I have applied visual management techniques to analyse and address challenges with senior management, worked on improving team self-sufficiency, and refined our collaboration with other departments to enhance long-term success. Our team has redesigned its work plan and work assignment process based on Lean principles. Additionally, I am using the course project to develop elements of our new Performance Management Framework, ensuring it aligns with our organizational strategy. The training has also reinforced my approach to Lean UX in product design, ensuring we create more valuable and effective solutions.</p>	<p>The course has strengthened my ability to drive meaningful change within my role. The balance of theory and real-world application has bolstered my confidence in promoting improvements, innovation, and ensuring what we do is grounded in evidence and benefits our customers. I have already used visual management techniques to explore problems with senior management and I've been working to improve team self-sufficiency and the way we collaborate with other departments so we can be more assured about future success. We've redesigned our team workplan and work assignment process and incorporated learning from this course. I'm looking forward to the lean 1b project and experiencing the full lifecycle of a lean project. I strongly advocate for more team members to attend this training, as I believe it is essential in fostering a culture of continuous improvement. It also aligns closely with our organizational goals around data and digital literacy, data governance, and resource optimization. Lean training is a key enabler for achieving these ambitions, and I look forward to continuing my learning journey while encouraging others to do the same.</p>
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Middle Manager Leadership Development Programme	My role is project Management so I thought it would be useful to attend and maybe improve some skills and expand my knowledge in leadership.	The course covered a lot of material. Personally, I found the scope a bit too wide and found it difficult to retain this knowledge. Some of the interesting aspects included the change model, the circle of concern, the 4 quadrants of importance/urgency for prioritizing workload. There was also some useful guidance for specific challenges such as managing difficult conversations which I have saved for future reference.	My main take away from the course was that I can plan ahead for all situations the same way I might plan a presentation. I also found change model relevant to acknowledge there is a period of disruption ahead of the desired results.	I found the course useful at the time to attend as the information was fresh in my mind. It was also beneficial to have the peer-to-peer discussions and share some challenges and experiences with other colleagues. I would find it hard to identify specific benefits since completing the course but would say I have more awareness of some leadership considerations such as empathy and how others might respond to change- my role involves implementing change.
Middle Manager Leadership Development Programme	To develop my knowledge and understanding in order that I can successfully lead and manage teams more effectively, whilst considering my own development requirements in order to achieve this.	The modules helped focus my attention on my role/involvement in ensuring the success of projects, team harmony and my role in ensuring teams continue to be productive, taking into account the different people I may deal with and managing expectations of all involved.	This will be a continuous application throughout my career, whatever my role within the organisation.	Beginning with the end in mind, with regards any projects/tasks I lead on, or I am involved with, focuses attention on what the primary objectives are and that everything should be working towards these.
Middle Manager Leadership Development Programme	I wanted to develop myself as a middle manager to ensure I was getting the best out of myself and my teams	I learned about the 6 critical practices leading a team and the change model	I used the techniques to identify ways to improve our on-call training. I ensured the team members were listened to, and allowed them to help develop the ideas that would best drive forward the change required	This course has helped me as it gave me confidence in my management style
Middle Manager Leadership Development Programme	To further develop my understanding of leadership	The course reaffirmed my beliefs in what matters in leadership, honesty, empathy and trust. You can possess lots of good qualities as a leader, but if people don't trust you, you will always struggle to build a successful team.	I feel that I am now more in control of my work week, I take 30 minutes on a Friday to plan for the following week and 10 minutes at the end of each day to ensure the following day is mapped out. This helps with switching off at the weekend which, in turn allows me to remain focused during the work week.	It helped with time management and understanding that boundaries help me; by taking the opportunity to switch off from work during days off, I am able to give 100% to my work when I'm at work.

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Middle Manager Leadership Development Programme	Requested to complete course as part of Appraisal. I aimed to refresh some management / coaching knowledge which may assist me within my current role.	The key principles of effective teamwork, particularly how/why everyone can react differently within a team and also that we all have different stimulus. I also understood the change process more, and how important communication is key within any change process.	I feel that I am now able to more effectively carry out appraisals and input key objectives for WC's. I also learned a few tips from others on the course for dealing with unusual situations.	Yes, I have particularly learned that as part of my role I need to ensure my own health and wellbeing.
Middle Manager Leadership Development Programme	To learn new skills and become more effective at leading teams.	I learned about the 7 habits of highly effective people, the 6 critical practices for leading a team, trust and change leadership.	I now have a greater awareness of the interdependencies within SFRS and how competing demands can mean our priorities across the service are not always aligned. With this in mind we can still look for opportunities for quick wins and create win/win situations.	I am more aware inwardly of prioritising workloads and time management and outwardly how interactions with others makes us more effective as leaders or collaborators.
SFRS Supervisory Leadership Development Program NFCC	Develop people management skills for day-to-day watch management and to add to incident command skills.	There is value in each individual's unique way of thinking and interacting with those around them. It is important to be mindful of those character traits and use an inclusive approach to those individuals to empower them to feel that they can contribute just as much as anyone else in the watch.	Delegation of tasks to empower people and develop skills that they were less competent at than some other watch members. And also, delegation as a way of me 'letting go' and trusting the people in my watch to do the task that has been given to them.	I have become much more open minded. I have also found managing people becoming less stressful and I now have a much better idea about to approach difficult conversations and the importance of leading by example.
SFRS Supervisory Leadership Development Program NFCC	To enhance my management skills.	There were 4 modules to complete online, they were Personal impact, outstanding leadership, service delivery and organisational effectiveness. We held regular teams meeting to discuss progress	Having a better understanding of things like the change transition curve will enable me to better help my watch progress through any large changes that will affect them.	There were lots of useful management tools to help me deal with the watch and the bigger organisation
SFRS Supervisory Leadership Development Program NFCC	I was hoping to increase my knowledge of management skills and styles which i feel i have.	All 4 modules were very informative and have really helped me in the day to day running of my watch. Having moved through the ranks within the fire service this course has been fantastic as a guidance tool for management.	Although I was aware each individual required different management style and handling this course has taught me how to implement this in the day to day running of the watch.	This course is excellent for teaching styles and skills in dealing with situations and people. I would highly recommend this course to anyone.

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SFRS Supervisory Leadership Development Program NFCC	Consolidate on existing skills and experience and career development.	Covered four modules that align to the NFCC leadership framework's 4 quadrants- Personal Impact, Outstanding Leadership, Service Delivery and Organisational Effectiveness.	I have used knowledge and skills from the course to work on my Emotional intelligence skills to become a better leader. I now manage my time and prioritise my workload better by using the Urgent/Important matrix tool. I continue to delegate where possible in to help manage my work but also give develop opportunities to my team members. I feel more prepared in how to manage change within my team.	I feel more knowledgeable and confident in my ability as a supervisory manager and have more understanding of what skills and attributes can help me to be successful.
SFRS Supervisory Leadership Development Program NFCC	My manager had registered me as I had no previous management experience and had been tasked with 2 employees. I explained that I was just new to the organisation and not happy to do this and also had no interview experience so was registered for the course as a supportive measure.	I have learned loads!! Time management and prioritisation as well as leadership styles, how to manage change, risk management and service delivery. Main thing I have taken is how to be effective and realistic manager.	It has helped me prioritise my work tasks and given me the confidence to deal with ongoing challenging situations and changes at work. The different theories and models used also help make sense of various scenarios at work and I would strongly recommend this course.	Mairi Carlton has been brilliant and the learning and support she has provided has been very beneficial. She is always available to talk to and was very helpful when I was undergoing challenging time within the workplace and struggled with keeping up with commitments to the course. As stated previously, I am relatively new to the organisation, and this has been an effective way of introducing me further to the variety of roles, people and work undertaken. It has given me the confidence to carry out my managerial responsibilities and grounding to instigate and continue coaching and bringing out the best in my staff.
SFRS Supervisory Leadership Development Program NFCC	personal development and managerial skills. I was asked if the course would interest me.	I found the whole course valuable. The standard models of management practice were well presented via media and working with my line manager helped formulate goal setting and integration.	dealing immediately with difficult conversations, knowledge of "frontline service providers management role" has helped understand my own provision to the Service better.	It has helped focus on SFRS goals. Helped on self-directed reflection and supported goals already in place.

Appendix E – Management and Leadership Development Summary

Course	Course Summary	No. Attended	No. Completions
Inclusive Leadership (Franklin Covey)	A blend of on-line facilitation, self-directed learning, and consolidation sessions over a 3-month period, exploring themes such as Unconscious Bias, Inclusive Leadership (cultivating team inclusion) and Inclusive Hiring and Advancement.	19	9
NFCC Supervisory LDP	Developed alongside CMI, the programme aims to develop the skills and behaviours of supervisory leaders. A self-directed learning experience coupled with facilitated consolidation sessions for the duration of the course, concluding with a final review session and learning presentation. Learners have access to suite of resources aligned to modules to support them through the programme.	19	(Ongoing)
NFCC Middle Manager LDP	A new programme piloted in 2024-25, developed alongside CMI, which focusses on embedding values of equality, diversity and inclusion and developing a people-focussed and empowering approach to leadership and the progression of a positive workplace culture. A self-directed learning experience coupled with facilitated consolidation sessions for the duration of the course, concluding with a final review session and learning presentation.	19	(Ongoing)
MDF Day 1	The overall aim of this session is to build people management skill and capability across all staff groups, piloting at Supervisory level, to encourage active management behaviours and shift the conversation and culture to inclusive teams. Delivered in-person across the Service, with weekend delivery and on-line modularised sessions piloted in Q4 of 2024-25 to ensure accessibility to those in our remote and rural locations.	233	(On-going)

Learning and Development Update 2025/26

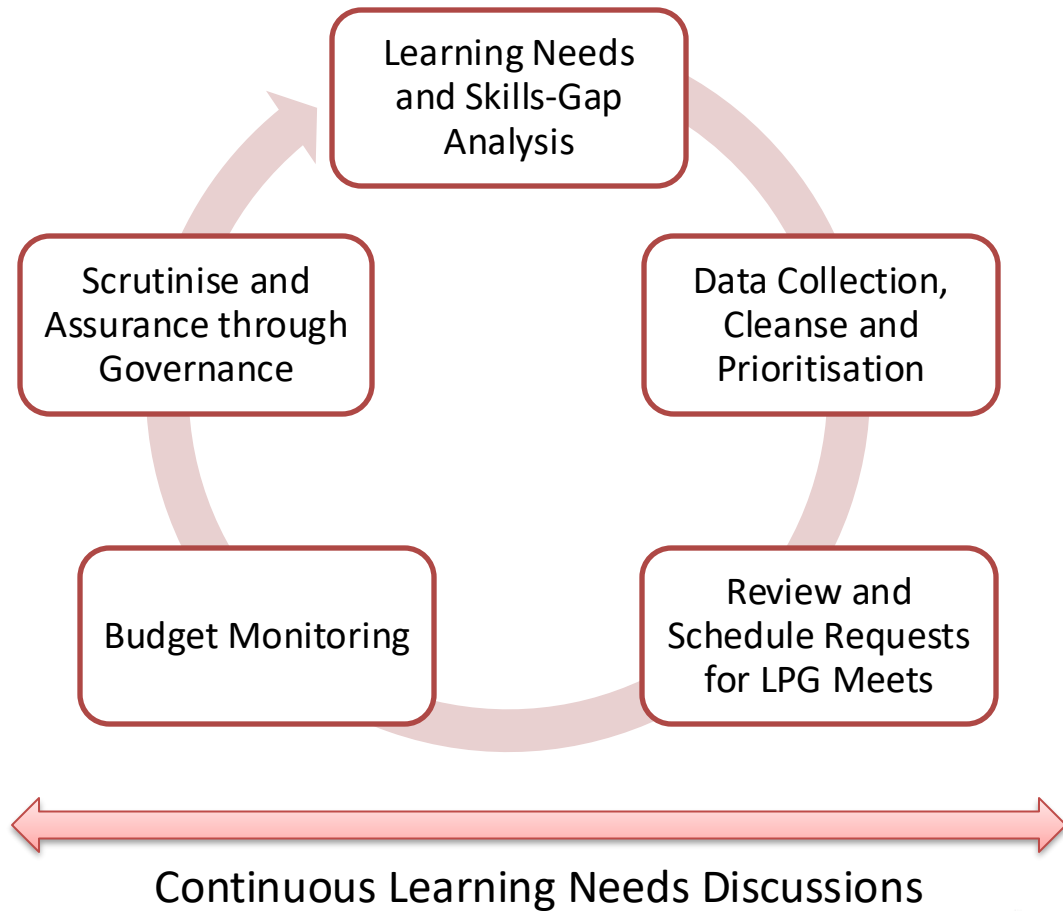
People Committee Workshop
June 2025



The purpose of this session is to provide the opportunity to discuss:

- the Service's Learning Needs Analysis approach and arrangements;
- the overview of L&D investment April 2024 to Mar 2025;
- learner feedback showing skills developed, and
- an opportunity to identify areas of interest for future L&D activity.

Learning Needs Analysis Process 2024-25



2024-25 Challenges & Improvement Opportunities



Progression of
Learning Needs



Data Integrity



LNA timeline

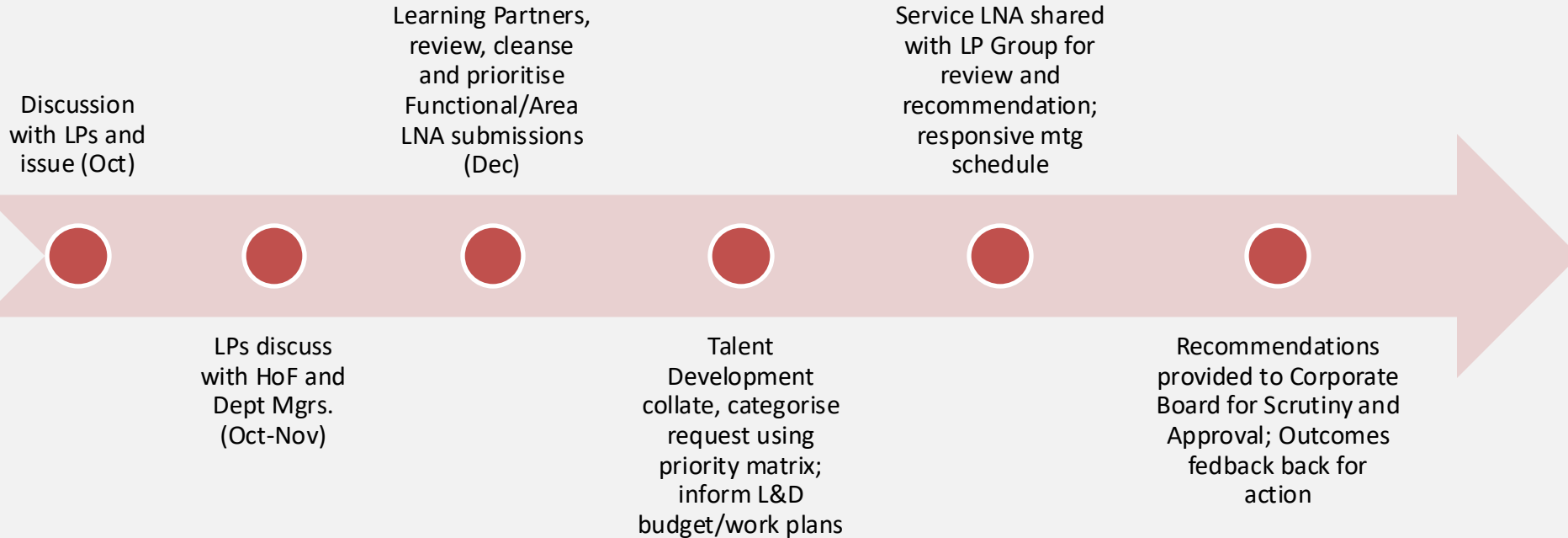


Knowledge and
Understanding

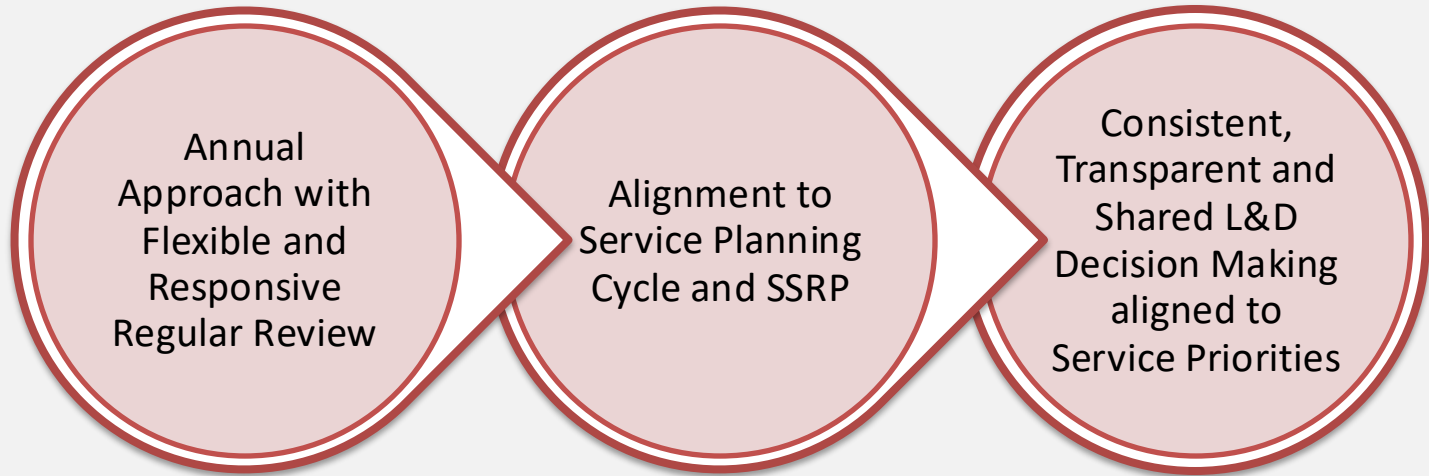


Budget

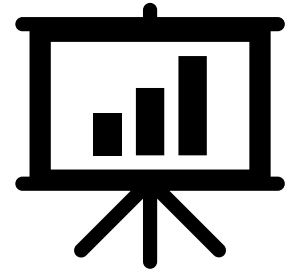
2025-26 Learning Needs Arrangements



Learning Partner Group (LPG)



Learning & Development Analysis: 2024-25



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2024-25 L&D Financial Overview

2024-25 Learning and Development Budget	Amount (£)
Full Year Budget	£422K
Year to March '25 Budget allocation	£417k
Year to Mar '25 Actual Budget Spend	£403.5k
Actual Underspend as at May 2025	£18.5k*
*The figure in the bottom row will decrease as invoices for 2024/25 courses are received.	

Function	Development Activity	Investment 2024-25 %	Strategic Priority Alignment
SFRS Organisation	Cyber Security Training	32	Enabling more effective and efficient service delivery through developing professional and organisational practice resulting in enhanced SFRS capability, capacity, resilience and culture.
	Scottish Union Learning/ Lifelong learning		
	Continuous Improvement Programme (Cardiff Course)		
	SQA Assessor Verifier Training		
	MA/ SVQ Registrations		
Finance and Contractual Services	Fleet Training (Scania, Forklift Operator Courses)	15	Includes maintenance of core competency, and technical qualifications in servicing the growing fleet of electric vehicles in support of SFRS' Net Zero/ sustainability agenda.
	Stores Training (H&S)		
	Governance (Crystal Reports)		
Prevention Protection and Preparedness	Level 7 PDA - Analysing Resilience* 2	40	Developing and enhancing professional practice aligned to regulatory and best practice changes; developing and diversifying the SFRS talent pipeline to build resilience and meet capability and capacity requirements.
	Certificate in Fire Science (Levels 2&3)		
	Fire Safety Courses		
	Fire Safety Enforcement Qualifications		
	RPL - Fire Safety Enforcement		
	GATR (PDR + L5) (Level 2, Practical)		

Function	Development Activity	Investment 2024-25 %	Strategic Priority Alignment
People	Health and Wellbeing training (Audiology and Spirometry)	6	Developing professional practice and SFRS People capability and capacity, facilitating and enabling effective Workforce planning aligned to SSRP.
	SVQ/MA Assessor Verifier Certification/ Accreditation		
	Workforce Planning Qualifications (CIPD)		
Strategic Planning and Performance	PuMP Blueprint Course	2	Developing professional practice aligned to the development of key performance measures, informing our Performance Management approach and Strategic Plan 2025/28.
Training Safety and Assurance	Adobe After Effects training	2	Developing professional practice and SFRS e-Learning capability and capacity.

Scottish Union Learning Overview

COURSES 2024/2025	Uniformed Learners	Non-Uniformed Learners	Total Learners	Accredited Learning
Year 3				
City of Glasgow College (CLP) Courses – Excel, BSL & Languages – 4 courses	53	60	113	Yes
Cycle Maintenance 3 courses	19	4		No
Velotech Cycle courses (Bronze, Silver, Gold) 5 courses	19	-		Yes
National Navigational Award Scheme (Bronze, Silver) 5 courses	28	1		Yes
Level 3 Personal Trainer 1 course	3	-		Yes
Level 3 Pre & Post Natal Exercise & Nutrition 1 course	6	-		Yes
Planning for Retirement 1 course	8	1		No
Effective Support & Supervision of Staff 1 course	13	-		No
Open University Micro-Credential Courses across 11 courses	13	5	18	Yes
TOTALS Learners 233 across 31 courses	<u>162</u>	<u>71</u>	<u>131</u>	N/A

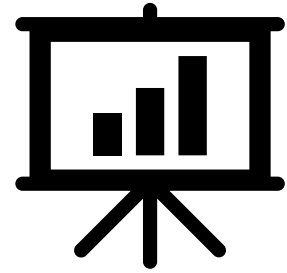
Management and Leadership Development Update 2024-25

Course	No. Attended	No. Completions
Inclusive Leadership (Strategic & Middle)	19	9
NFCC Supervisory LDP	19	(Ongoing)
NFCC Middle Manager LDP	19	(Ongoing)
Supervisory MDF Day 1 – People Essentials	233	(On-going)

Progress and Next steps:

- Supervisory Management Development Framework (MDF) progress has been slower than anticipated
- Additional NFCC Leadership Development Programme (LDP) (Supervisory and Middle Manager) provision established
- Strategic Culture Review and Reset: Agree SFRS leadership and management approach, prioritise and align required resources
- Build on current collaborative and partnership approaches for MDF design, development and delivery

Learning & Development Creating Value for SFRS: Learning Feedback



“(The Inclusive Leadership Programme) has made me more aware of bringing people into the conversation / decision. Not everyone engages at meetings, and I am now more proactive in involving them. Now, when appropriate, my decision-making processes is enriched by a variety of viewpoints, leading to more effective and creative outcomes.”

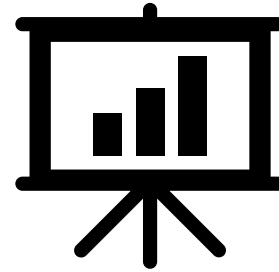
“I am enjoying the Mental Health First Aid course, very thought provoking, and I think more should be encouraged to attend.”

“The (CMI Level 5) course has provided me with great incite on different leadership styles and how they can be used and what kind of leader/manager I am. Gave good input into how management styles can assist with recruitment, and retention of staff and managing change within the organisation.”

“Through the NFCC Supervisory Leadership Development Programme) I have become much more open minded. I have also found managing people becoming less stressful and I now have a much better idea about to approach difficult conversations and the importance of leading by example.

“I found the (FC Middle Manager) course useful at the time to attend as the information was fresh in my mind. It was also beneficial to have the peer-to-peer discussions and share some challenges and experiences with other colleagues. I would find it hard to identify specific benefits since completing the course but would say I have more awareness of some leadership considerations such as empathy and how others might respond to change- my role involves implementing change.”

Future L&D Updates



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Future LNA Updates

Requirement

Frequency

Format

Any Questions?



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People Committee



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Report No: C/PC/20-25

Agenda Item: 10.1

Report to:		PEOPLE COMMITTEE							
Meeting Date:		5 JUNE 2025							
Report Title:		CULTURE UPDATE							
Report Classification:		For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
			A	B	C	D	E	F	G
1	Purpose								
1.1	To update the People Committee (PC) on progress of pathway activities detailed within the Culture Action Plan (CAP) and delivered via the Culture Development Group (CDG). Including an overview of the current 'Review & Reset' strategy to inform the future direction of Scottish Fire and Rescue Service (SFRS) culture and leadership activity.								
2	Background								
2.1	Continued scrutiny of Fire and Rescue Services in England and Wales has noted widespread discrimination, harassment and bullying through several published documents. This includes the London Fire Brigade report, HMICFRS 'Values and Culture in the FRS 2023' paper and the National Fire Chief Council (NFCC) Cultural Action Plan, as well as the HMICS Thematic Inspection into Organisational Culture in Police Scotland.								
2.2	The SFRS reviewed our position against this external context and wider media reports and recognised that, whilst these behaviours do not represent most of our employees, there is evidence of behaviour within the Service that does not fit with our values and professional standards. It has been agreed that this cultural misalignment needs to be addressed as a strategic priority.								
2.3	A Culture Action Plan (CAP) was initiated to address these concerns and identified three priority actions as strategic imperatives: 1. Attracting and supporting a more diverse pool of candidates. 2. Developing Managers and Leaders 3. Improving Business Intelligence to inform future actions.								
2.4	Work on these actions commenced under the governance of the Culture Development Group (CDG), which was set up to oversee all culture related activity. The ongoing need for review continues to be shaped by many factors, including service transformation, public cultural and behavioural perceptions of the industry, and improvements identified by SFRS from employee relations cases.								
3	Main Report/Detail								
3.1	<u>Review & Reset – Culture Strategic Visioning Workshop</u>								
3.1.1	To date, the work to deliver the CAP has been undertaken by four sub-groups, focusing on different aspects of cultural improvements. These groups report to the CDG which oversees all culture related activity and provides scrutiny and alignment. All groups are attended on a voluntary basis, often relying on additional discretionary effort to make progress and effect change.								

3.1.2	As the CDG, sub-groups and other people related initiatives evolved, activity on culture was growing at an increasing rate. To support the delivery of this work, it was intended that the project would migrate under the Portfolio Office (PO) governance structure so that the work could be delivered with project and change management expertise and utilise existing governance and assurance structures to report progress.
3.1.3	Recent changes within the Senior Leadership team (DCO Corporate Services, Director of People) presented an opportunity to reassess the strategic direction of culture activity within the SFRS. To facilitate this, the Senior Leadership Team and Heads of Function will participate in a SFRS Culture Strategic Visioning Workshop on 3 rd June 2025 to review the current approach to enhancing organisational culture and develop the pathway to continue this work over the next 1-3 years.
3.1.4	The CDG (and associated subgroups) has temporarily been paused pending the outcome of this review, however work on the Management Development Framework, in particular, is continuing to progress, recognising it will remain a key deliverable.
3.2	<u>Progress Update</u>
3.2.1	An update on the current progress across key enablers and work-streams that support the CAP is attached as Appendix A - Culture Action Plan Deliverables . With an additional synopsis of progress relating to: -
3.2.2	Management Development Framework (MDF) Subgroup: - <ul style="list-style-type: none"> Planning and preparation continues for the delivery of MDF Day 1 ‘People Essentials’ sessions in late Q1/early Q2 with a focus on newly promoted Supervisory Managers starting in the East Service Delivery Area. The development of MDF Day 2 ‘Training, Safety and Assurance’ and MDF Day 3 ‘Prevention, Protection and Preparedness’ and ‘Mental Health and Wellbeing/Lifelines’ continues with short-term working groups, focussing on applicable content for <u>all staff groups</u> Supervisory Managers. Collaborative engagement continues to establish requirements to support both content and delivery mechanisms for the wider MDF. Induction packs have been developed for Operational Supervisory and Senior Officer roles, currently in review status pending publication. The second NFCC Supervisory Leadership Development Programme (LDP) has recently concluded with the first of three 2025/26 Supervisory cohorts just starting. The first NFCC Middle Manager LDP is progressing well and at halfway stage with the second Middle Manager cohort due to start at the end of May 2025.
3.2.3	‘End of programme Learning Reviews’ clearly illustrate the value of these programmes with participants sharing their learning, demonstrating application and evidencing the positive contribution it is having in the workplace.
3.3	<u>Confidential Reporting Line</u>
3.3.1	The Confidential Reporting Line (CRL) reached its first annual milestone on 13/05/25. A comprehensive one-year post implementation review is planned, which will include a review of usage by quantity and type, assessment of project objectives, review of communication framework supporting the reporting line, stakeholder feedback and overview of lessons learned/areas for improvement. The CRL remained within our benchmarked anticipated annual usage of circa 29 reports.
3.4	<u>Colleague Experience Survey (CES2024)</u>
3.4.1	The CES2024 Quantitative Results have been shared across SFRS Service Wide, Corporate Services and Operational Delivery areas, Encouragingly, they concur with insight currently driving various culture related activity and there is alignment with the Culture Action Plan (CAP) priorities and work of the Culture Development Group (CDG). The insight derived from the CES2024 will also inform ‘current state’ assessments and help shape strategic approach.

3.5	<u>Free Text Report</u>
3.5.1	In December 2024, the Strategic Leadership Team (SLT) reviewed the draft 'Free Text Report' summarising two open text questions within the CES2024, that were used to as a mechanism to gather qualitative insight. Feedback indicated that the report was too lengthy and contained complex references that were difficult to understand outside of a specialist field. The report was revisited and subject to further review, with the final draft(s) of a short 'Executive Summary', alongside a more in-depth analysis of the findings as an optional supplement now submitted for scrutiny by the SLT on 21 May 2025.
3.6	<u>CES2024 'By Function' Dashboards</u>
3.6.1	Following publication of the Service wide, Corporate Services and Operational Delivery results dashboards, the SFRS committed to breaking down the CES2024 survey results by function and department level.
3.6.2	The functional dashboards have been prepared, along with a high level heatmap that will help to view comparisons between all survey results and their number of respondents.
3.7	<u>HMFSI Inspection</u>
3.7.1	HMFSI have completed their thematic Inspection of Organisational Culture (Volume One) within the SFRS. They have interviewed SFRS policy owners, representatives from across all support directorates, station-based personnel, Operations Control, staff network groups and Union representatives. Complimented by on-site visits and a series of MS Teams interviews with a randomly selected sample of individuals from across functions of the Service. All of which enabled the HMFSI to gather views relating to organisational values, policies, procedures and training that support organisational culture.
3.7.2	The inspection report is currently in its formal consultation and peer review stage, with the full publication of findings expected in early summer 2025, which will provide additional insight to inform our strategic approach.
3.8	<u>Next Step Actions</u>
3.8.1	<u>Publish Free Text and Dashboard Reports</u> There will be a significant resource requirement to prepare the departmental results to ensure they meet accessibility guidelines on iHUB. Therefore, it is likely that the publication of the free text report and functional dashboards will be phased, so that we can regain some momentum around CES2024 discussions. It is anticipated that this will begin with the publication of our CES2024 Free Text Report(s) likely in mid-June, followed later in the month with the functional dashboards and Heatmap when they are ready for publication.
3.8.2	It is hoped that the publication of the Free Text report and departmental updates will invigorate interest around the Colleague Experience Survey and increase appetite for participation in focus groups to discuss our results.
3.9	<u>Focus Groups</u>
3.9.1	Focus group discussions remain a pivotal part of the CES2024 evaluation process as they provide a platform to validate results, identify key drivers and promote solution focussed discussions to inform the development of manager toolkits and action planning.
3.9.2	Due to low levels of uptake for volunteers, we have found that the operation has responded well to direct engagement and are eager to organise discussion groups locally, that will be facilitated independently by the People team. The first of these sessions will be in the North SDA (Inverness) likely towards the end of June, with discussions in progress across other areas to finalise details. It is expected that there will be a series of in-person facilitated discussion groups, across both Corporate Services and Operational areas, supplemented by online sessions to provide accessibility and inclusive opportunities to optimise colleague participation.
3.9.3	To maximise resource and investment in attendance from focus group participants, it was

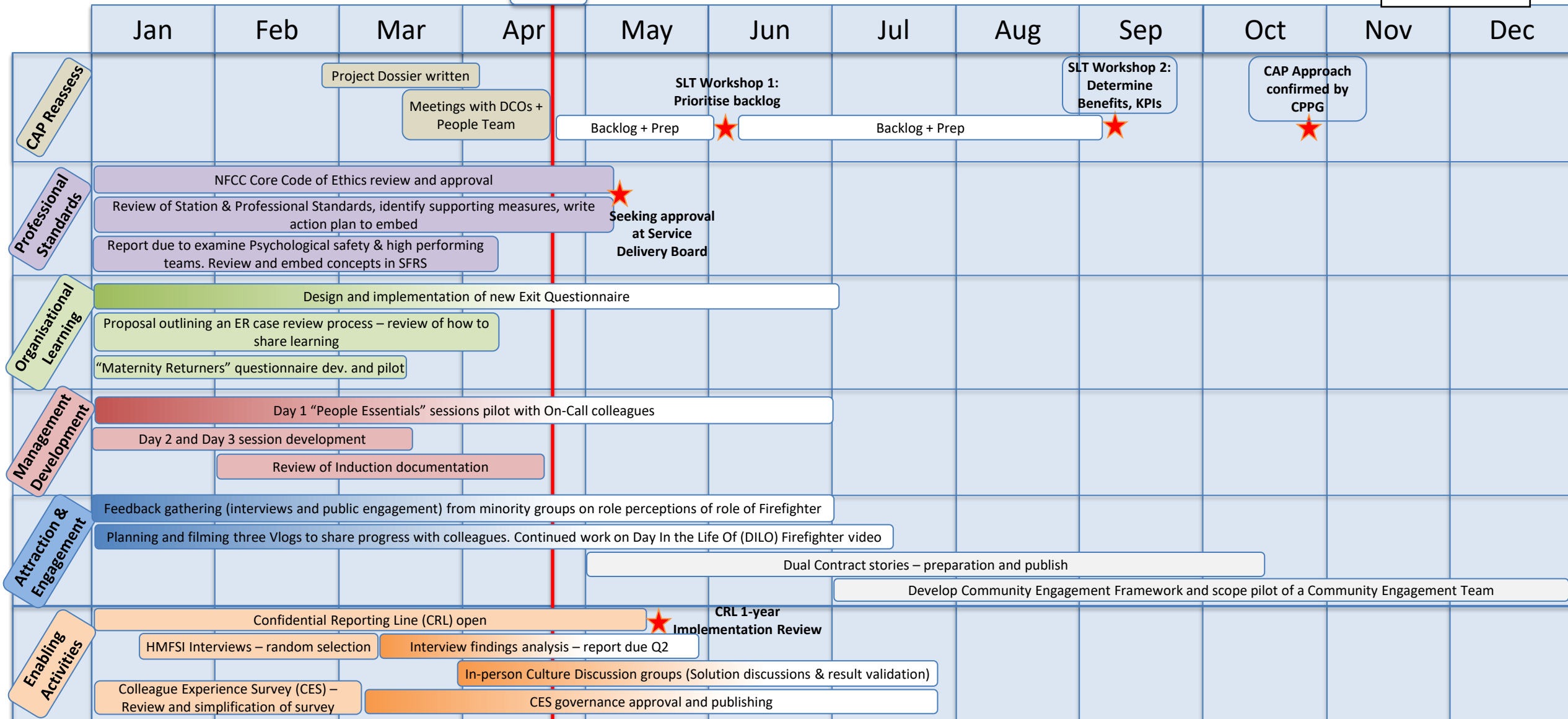
3.10	<p>agreed at the CDG that it would be beneficial to widen the scope of the discussion groups to provide opportunities to voice opinions on a broader range of topics relating to culture activity within the SFRS, as well as the CES2024. This will be discussed at the SLT culture workshop on 3rd June 2025 to explore options for input.</p> <p>Summary Next Steps (Proposed) Timeline</p> <ul style="list-style-type: none"> • SFRS Culture Strategic Visioning Workshop - 3 June 2025 • HMFSI Inspection Report – Early Summer 2025 • Communication of Free Text Report(s) – Mid-June • Communication of Departmental Dashboards – End of June 2025 • Commencement of Focus Group Discussions – End of June 2025 • Post Implementation Review of the CRL – June/July 2025
4	Recommendation
4.1	To note progress relating to key priorities identified within the Culture Action Plan and update People Committee on the SLT plans to reassess the strategic direction of culture activity within the SFRS.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers
5.1.1	There is a risk of potential reputational, legal and financial risks associated with any failure to embed an inclusive and psychologically healthy workplace culture.
5.2	Financial
5.2.1	There are currently no financial implications. There may be financial implications associated with any future development of actions in support of the findings.
5.3	Environmental & Sustainability
5.3.1	There are no specific Environmental & Sustainability implications arising from this paper
5.4	Workforce
5.4.1	There is a risk that culture related actions will not be effective if we do not engage with employees to identify their requirements and gain buy in. There is a risk of increased turnover in our workforce if we do not have a positive and inclusive culture.
5.5	Health & Safety
5.5.1	There are no specific Health and Safety implications arising from this paper.
5.6	Health & Wellbeing
5.6.1	There are no specific Health & Wellbeing implications arising from this paper, though the activities within the cultural action plan have the potential to positively impact employee health and wellbeing.
5.7	Training
5.7.1	There may be implications associated with future development frameworks for supervisory and middle managers.
5.8	Timing
5.8.1	Taking account of external reports in relation to culture across Fire and Rescue Services it is important to act responsively to support the delivery of planned activities for 2025/26.
5.9	Performance
5.9.1	Any improvement in cultural alignment with SFRS values will lead to improved engagement and productivity.
5.9.2	Any improvement in working environment directly calibrates with increased performance

	and productivity. Conversely, failure to maintain skilled and engaged employees could have a negative impact on performance.	
5.10 5.10.1	Communications & Engagement Engagement has taken place with representative bodies. Further engagement continues with managers and employees through the communication and roll out of the CAP and enabling workstreams. Ongoing support from the Communication & Engagement team is vital to develop and deliver strategies to support the aims of the CAP and CDG, and to communicate associated activities across the Service. Note: Currently paused for review.	
5.11 5.11.1	Legal There is a requirement to ensure the SFRS comply with employment legislation and our People policies; and that managers are appropriately trained to do so.	
5.12 5.12.1	Information Governance DPIA completed Yes/ No . If not applicable state reasons. No personal data is in scope of this paper.	
5.13 5.13.1	Equalities EHRIA completed Yes/ No . If not applicable state reasons. EHRIA will be completed for any policy or practice change arising from this paper.	
5.14 5.14.1	Service Delivery Engagement and support from Service Delivery will be required to ensure successful delivery of the Cultural Action Plan.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross – Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	Significant activity has taken place to progress the actions within the Culture Action Plan and future activity has been prioritised.
8	Appendices/Further Reading	
8.1	Appendix A – Culture Action Pan Deliverables	
Prepared by:		KellyAnne McDougall, Talent Team
Sponsored by:		Fiona Ross, Director of People
Presented by:		Fiona Ross, Director of People
Links to Strategy and Corporate Values		
Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public.		
Outcome 6: The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report		Meeting Date
People Committee		5 June 2025
		Report Classification/ Comments
		For Scrutiny

Cultural Action Plan: Deliverables

Today

APPENDIX A



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Safety. Teamwork. Respect. Innovation.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/21-25

Agenda Item: 10.2

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 JUNE 2025						
Report Title:	EMPLOYMENT LAW HORIZON SCAN						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		A	B	C	D	E	F
1	Purpose						
1.1	To provide People Committee with an overview of forthcoming changes to employment legislation, highlight the main impacts and considerations for Scottish Fire and Rescue Service (SFRS), and summarise the planned next steps.						
2	Background						
2.1	The UK Government's Employment Rights Bill, which is currently progressing through parliament, has been described as a once in a generation overhaul of employment legislation and will introduce a range of significant changes to employment law and associated regulations. Employers will need to understand the implications of these changes and update their own contracts, policies, procedures and practices in response.						
3	Main Report/Detail						
3.1	The Employment Rights Bill introduces twenty-eight reforms over more than one hundred pages, making it the most significant overhaul of employment legislation in decades.						
3.2	The Bill sets out how the government intends to meet the employment law related commitments set out in its election manifesto and Making Work Pay publication, however much of the detail still requires clarification through consultation and via regulations. As a result, the specific steps employers will need to take are not yet fully clear.						
3.3	The provisions of the Bill will come into effect on a phased basis, starting from autumn 2025.						
3.4	A presentation will be delivered to People Committee summarising the main provisions of the Bill, along with the impact and considerations for SFRS.						
4	Recommendation						
4.1	People Committee is asked to scrutinise the information presented at the meeting.						
5	Key Strategic Implications						
5.1	Risk Appetite and Alignment to Risk Registers						
5.1.1	In relation to meeting out legal and regulatory obligations, SFRS has a minimalist risk appetite.						

5.2 5.2.1	Financial While the direct costs of the measures in the Bill are likely to be minimal, there are potential indirect costs, for example through increased overtime to cover enhanced family leave provisions. There are financial risks associated with the extension on time limits to raise employment tribunal claims and the right to claim unfair dismissal becoming a day one right, as both changes have the potential to increase the volume of employment litigation.
5.3 5.3.1	Environmental & Sustainability None identified.
5.4 5.4.1	Workforce There are significant workforce impacts because of the changes which are detailed in the presentation.
5.5 5.5.1	Health & Safety No direct implications, although obligations around protection from harassment are linked to colleague safety in the workplace.
5.6 5.6.1	Health & Wellbeing Obligations around protection from harassment and enhancements to family and bereavement leave may indirectly improve the health and wellbeing of colleagues.
5.7 5.7.1	Training Manager training and awareness raising will be required to ensure the changes to working practices are fully understood and effectively implemented.
5.8 5.8.1	Timing The provisions of the Bill will be introduced on a phased basis. Some measures are likely to be effective from autumn 2025, while others will be significantly later. The exact timings for many elements are still to be confirmed.
5.9 5.9.1	Performance While the legislative changes are unlikely to have a direct impact on performance at organisational level, there will be a requirement to ensure appropriate individual performance development, monitoring and management arrangements are in place throughout to Initial Period of Employment.
5.10 5.10.1	Communications & Engagement Introduction of any changes to policies, procedures or practices because of legislative developments will be supported by comprehensive communication and engagement activities.
5.11 5.11.1	Legal Non-compliance with the legislative changes would present a risk of legal action against the service, with associated reputation and financial risks. In addition, changes to the criteria for raising claims in the Employment Tribunal have the potential to increase the volume of employment litigation.
5.12 5.12.1	Information Governance N/A – no personal data involved.
5.13 5.13.1	Equalities N/A – not required at this stage, however any policy changes would be supported by an appropriate EHRIA.
5.14 5.14.1	Service Delivery No specific service delivery impacts.

6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross, Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The information provided is based on the detail currently available regarding legislative changes. The People and Legal teams are monitoring updates and developments as the Bill progresses. Appropriate action plans will be agreed to develop and implement any changes required because of the Bill,
8	Appendices/Further Reading	
8.1	Presentation will be shared at the meeting.	
Prepared by:		Lyndsey Gaja, Head of People
Sponsored by:		Fiona Ross, Director of People
Presented by:		Lyndsey Gaja, Head of People
Links to Strategy and Corporate Values		
In addition to meeting the Service's legal obligations, addressing the forthcoming employment law changes also contributes to the Investing in our People objective in the SFRS Strategic Plan 2025-28.		
Governance Route for Report		Meeting Date
<i>Strategic Leadership Team</i>		<i>3 March 2025</i>
<i>Service Delivery Board</i>		<i>1 April 2025</i>
<i>People Committee</i>		<i>5 June 2025</i>
		Report Classification/ Comments
		<i>For Discussion</i>
		<i>For Discussion</i>
		<i>For Scrutiny</i>

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/22-25

Agenda Item: 11.1

Report to:		PEOPLE COMMITTEE											
Meeting Date:		5 JUNE 2025											
Report Title:		TRAINING FUNCTION UPDATE & PERFORMANCE REPORT QUARTER 4 2024-25											
Report Classification:		For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>										
			A	B	C	D	E	F	G				
1	Purpose												
1.1	The purpose of this report is to provide a high-level overview of the Training Function activity and performance over Q4 2024-25.												
2	Background												
2.1	This report outlines the performance measures collated by the Training Function against the Priorities set out by Scottish Government in the Fire and Rescue Framework for Scotland 2022, the Scottish Fire and Rescue Service (SFRS) Strategic Plan 2022-25 and Performance Management Framework (PMF).												
3	Main Report/Detail												
3.1	For ease of reference, this report is split into two key sections which can be accessed via the Training Function Update & Performance Report Q4 2024-25 document at Appendix 1. Firstly, providing a Training Function Update regarding key aspects of work across the Training Function over Q4 2023-24.												
3.2	Secondly, this report places a specific focus on the Key Performance Indicators as set out in the Performance Management Framework (PMF) 2023-24 . With an update into the Q4 2023-24 data, using the corporate Power BI reporting tool, aligned to the Training Function												
4	Recommendation												
4.1	To scrutinise the report and provide feedback as necessary on its content												
5	Key Strategic Implications												
5.1	Risk Appetite and Alignment to Risk Registers												
5.1.1	To ensure risk movement is monitored and actions taken to mitigate this at a Function level the Training Function have reviewed the Functional Risk Register with a specific focus on the control actions and aligned this to workstreams where applicable.												
5.2	Financial												
5.2.1	There are no financial implications arising from the content of this report.												

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

8	Appendices/Further Reading		
8.1	Appendix A – Training Function Update & Performance Report Q4 2024-25		
Prepared by:		Andy Scott, Learning Content, E-Systems & Performance Manager.	
Sponsored by:		Ally Cameron, Area Commander Training Function	
Presented by:		Ross Robison, Deputy Assistant Chief Officer Head of Training	
Links to Strategy and Corporate Values			
SFRS Strategic Plan 2022-25 Outcome 2 – Communities are safer and more resilient as we respond effectively to changing risks. We will achieve this by: Training effectively and efficiently as a Service and with our partners to improve community safety. Outcome 4 - We respond to the impacts of climate change in Scotland and reduce our carbon emissions. We will achieve this by: Ensuring our people continue to plan, are trained for and equipped to respond to climate change incidents. Outcome 6 – The experience of those who work for SFRS improves as we are the best employer we can be. We will achieve this by: Continuing to provide training and development opportunities for all our people to ensure they have the right mix of knowledge and skills. SFRS Training Strategy 2023-28			
Governance Route for Report		Meeting Date	Report Classification/Comments
Training Functional Management Team		7 May 2025	For Scrutiny
Directorate Management Team		22 May 2025	For Scrutiny
People Committee		5 June 2025	For Scrutiny
Training Safety and Assurance Board		12 June 2025	For Scrutiny

A photograph of a fire training exercise at an industrial site. Two red Scania fire trucks are parked on a wet asphalt surface. Several firefighters in full protective gear are visible, some holding hoses. In the background, there is a large dark industrial building and a tall metal storage tank. The sky is overcast with white clouds.

Training Function Performance Report

Q4 2024-25

Working together for a safer Scotland



Content

- [Introduction](#)
- [Key Activity -Training Function](#)
- [Training KPI Analysis](#)
- [Glossary of Terms](#)

Introduction

The purpose of this report is to provide a high-level overview of the Training Function Performance Q4 2024-25. This will enable key stakeholders and owners, to identify areas which can be discussed and what improvement actions are required.

Our Training Function indicators are set internally as part of the [SFRS Performance Management Framework 2023-24](#) and are aligned under Outcome 2: Communities are safer and more resilient as we respond effectively to changing risks.

Outcome 2: Communities are safer and more resilient as we respond effectively to changing risks.					
Ref	Indicators	Frequency	Target /Direction of Travel	Additional Scrutiny Routes	
				Service Delivery Committee	People Committee
22	% of completion of Operational Core Skills modules against training requirement ¹	Quarterly	95%		✓
23	% of completion of Advanced, Support and Emerging Risks Modules against training requirement	Quarterly	95%		✓
24	% completion of Flexi Duty Officers against training programme ²	Quarterly	95%		✓
25	% of completion of Incident Command currency following National Training Standards	Quarterly	91%		✓
26	% of completion of Core Skills currency following National Training Standards ³	Quarterly	73%		✓
27	% of completion of Specialist Rescue currency following National Training Standards	Quarterly	92%		✓
28	% of all Training Function Courses delivered versus total number of courses scheduled within agreed Training Delivery Plan	Quarterly	95%		✓
29	Training Function Course Delivery (Candidate Satisfaction %)	Quarterly	95%		✓

Our high level KPI approach for 2023/24 has also fully taken into account all our audit and inspection recommendations, to give the Committee assurances they are seeking. It is important to note that there will be the opportunity through scrutiny at public meetings of the Committee to ask for rationale and context against each high level KPI without having to get into the detail.

Behind these high level KPI's are lower-level indicators that are reported to the Executive forums and to give assurances this is where the detail and improvement actions needed are discuss in more detail.

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

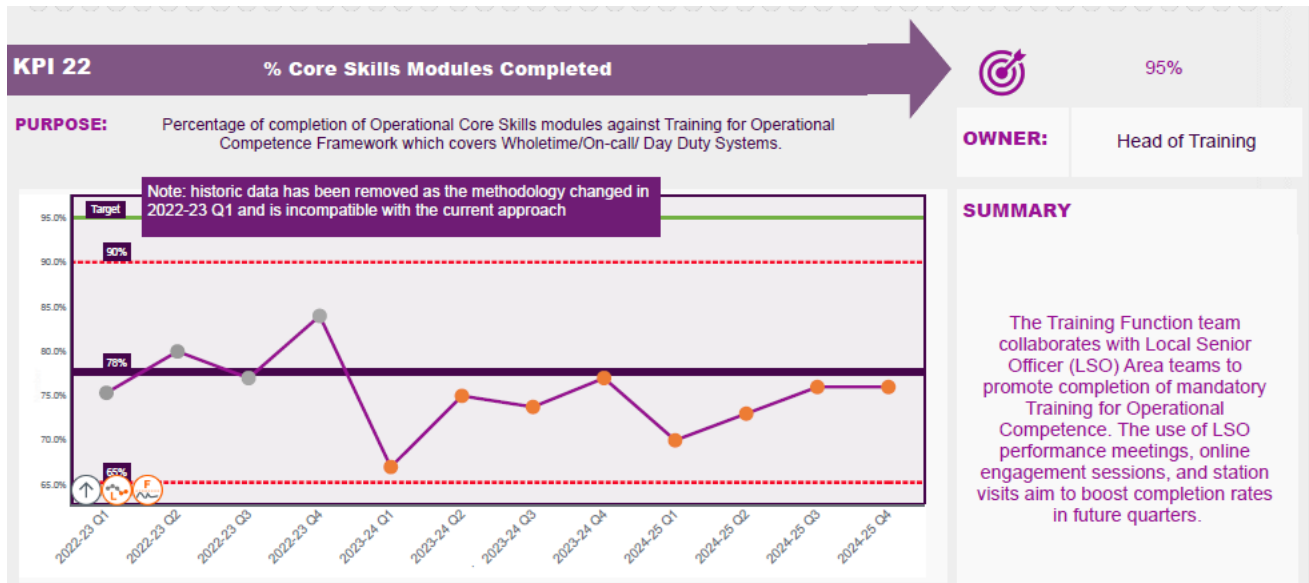
Key Activity: Training Function

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

Item	Commentary
Firefighter Safety	<p>The work to supply additional sets of Fire Kit is progressing well and Asset Resource Centres have started marking up the garments for distribution to each Training Centre through Q4 2024/25. A Management Arrangement process for requesting / delivering / laundering this additional PPE is also in development.</p> <p>Surveys are also being undertaken to identify suitable areas at NTC, Newbridge and Portlethen for BA Set cleaning machines, this will further improve our contaminants processes /procedures.</p>
Quality Management System – Continuing Assessment Visit	<p>The Training Function is currently in year two of a three-year external assessment programme covering all Training Centres and recently had a continuing assessment visit at the National Training Centre. This was carried out by British Standards Institution (BSI) who provide accredited certification to the ISO 9001 Quality Management standard. A range of areas were audited in the visit plan including the group management system, Instructor competence, course scheduling and bookings, credit rating and observation of training delivery.</p> <p>The objectives were achieved and the auditor determined that the certificate scope remains appropriate and that the Training Function fulfils the standards and audit criteria, and the management system continues to achieve its intended outcomes. There were no nonconformities identified during the assessment.</p>
XVR	<p>An XVR demonstration was given to the Board and SLT in January at a combined event. The LED Team continue to explore opportunities and identify where this software can be utilised, including the creation of a Marine case study and a CPD scenario for FDO's.</p>
Partnership Working	<p>The Training Function, Frontline Support and the SAS have met to establish the parameters for a partnership approach for the EXIT project. It was recognised that this approach to developing and introducing EXIT project procedures will be essential going forward to ensure effective management of casualties at RTC incidents.</p>
Capital Investment	<p>A finalised draft of the Training Service Asset Management Plan has been through executive governance and sets out the commitment and support needed in conjunction with our Asset Management function to make the necessary improvements and investment across the Training Fleet, Property and Equipment moving forward. This was recently approved by the Strategic Leadership Team in January '25.</p> <p>The CFBT facility at Perth Training Centre is progressing with project briefing documents under review by Safety and Assurance and BA Recovery and Contaminants Leads. Once approved works will progress with the design team, to create this further improved CFBT asset available within the Service, as part of our Training Assets portfolio.</p>

KPI Analysis

KPI22: Reporting the Completion of Operational Core Skills



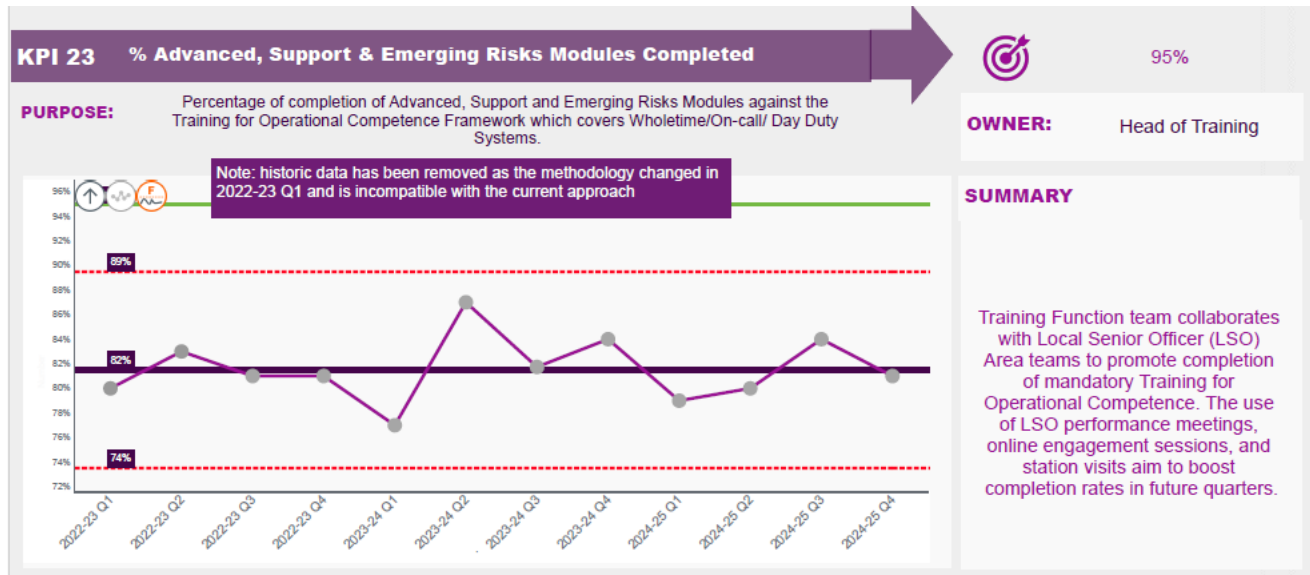
Core Skill topics covered in Q4 2024-25 were as follows:

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

In Q4 2024/25, completion rates for the five core skills showed minor changes across duty groups compared to Q3 2024/25. The Wholetime duty group experienced a slight decrease, while On Call and Volunteer groups saw small increases. Day Duty staff also had a slight decrease yet remained consistent with the annual trend line.

Feedback from Local Senior Officer (LSO) areas indicated that localised cluster training improved on-call performance. However, staffing issues and sickness contributed to non-completion rates. Concerns were raised about the demands on area based training instructors, including weekend work, overnight stays, and travel disruptions, especially ferry disruptions affecting remote island staff.

KPI23: Reporting the Completion of Advanced, Support & Emerging Risk Modules

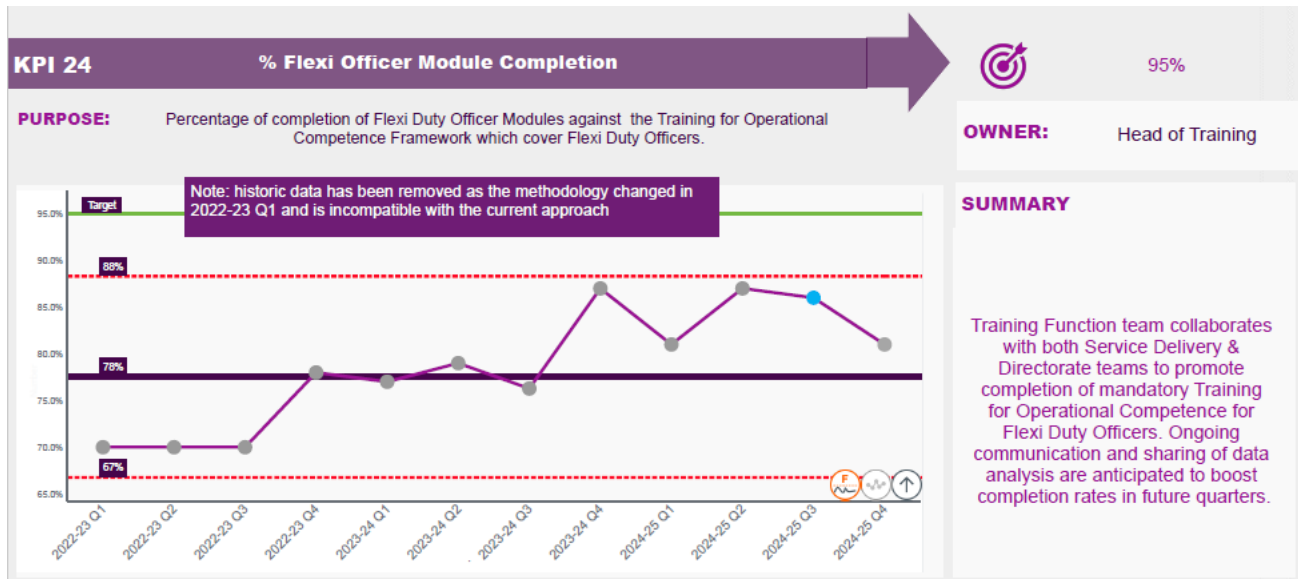


Topics covered in Q4 2024-25 were as follows:

- Silos
- Collapsed structures
- George IV Bridge Case Study

In Q4 2024/25, completion rates for all duty groups decreased when compared against Q3 2024/25 figures yet remained consistent with the annual trend. Feedback highlighted actions to improve performance, such as insistence of aligning Day Duty staff training with operational staff and providing pdrPro training to Volunteer On Call staff to improve recording processes. Additionally, there was a request to provide Training for Operational Competence (TfOC) data to LSO areas via Power BI for detailed analysis. The Training Function team continues to work with and provide support to LSO Area teams to maximise completion rates.

KPI24: Reporting the Completion of Flexi Duty Officer Modules



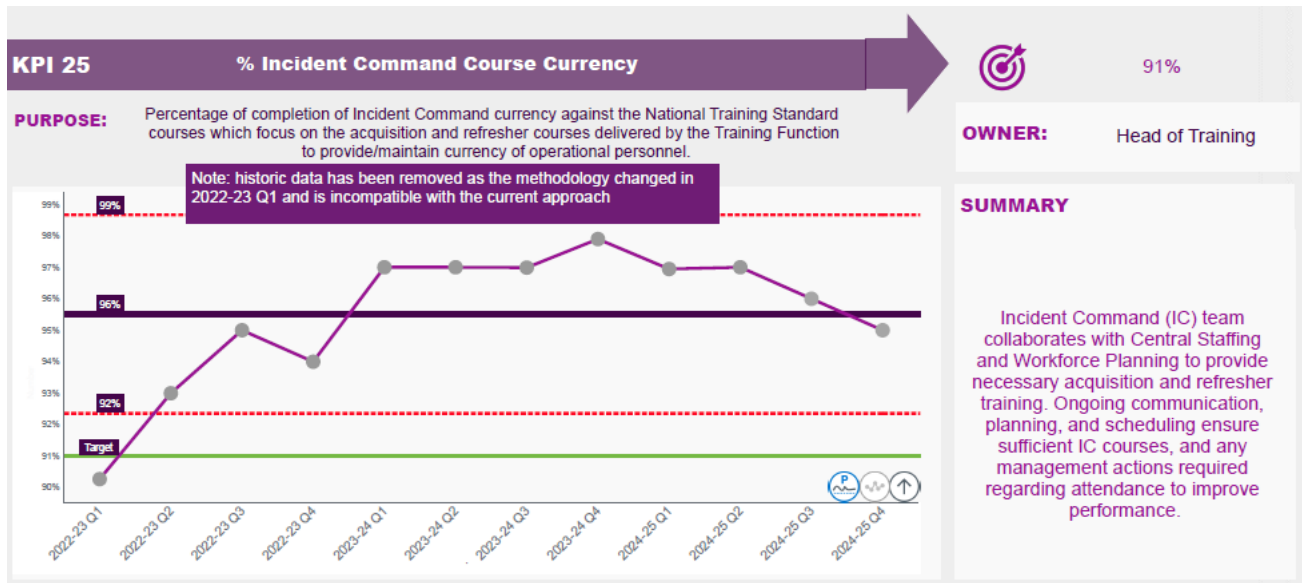
FDO Modules topics covered in Q4 2024-25 were as follows:

- January – Collapsed Structures
- February – Operational Assurance
- March – Silos
- Q4 - George IV bridge case study

The Q4 2024/25 Flexi Duty Officer (FDO) TfOC shows a 5% decrease when compared against Q3 2024/25 figures and falls below the trend in annual completion rates. Ongoing communication will continue within this duty group and further scrutiny will take place to identify where improvements can be made.

As of Q1 2025/26, all FDO TfOC modules will be allocated quarterly, enhancing alignment and reporting across all staffing groups. This alignment, coupled with the upcoming implementation of Workforce Pro, will help provide a comprehensive view of Organisational learning competence rates throughout the entire organisation.

KPI25: Reporting Incident Command Course Currency



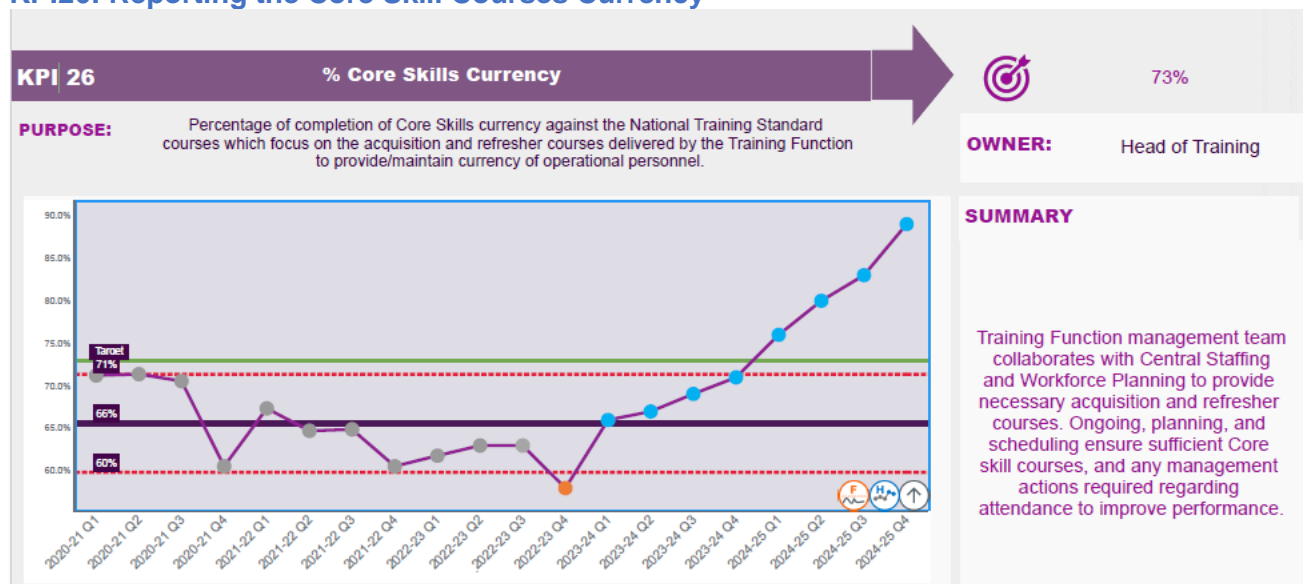
Incident Command competence across all levels continue to show a combined high level of performance of 95%.

ICL1 remains consistent with a competency rate of 95% with both Wholetime and On Call achieving in the mid 90 percentile. Although, Volunteer competency has increased by 6% since Q3, it remains below 90% with 6 (out of 72) out of currency.

ICL3 currency shows a further reduction from Q3 down to 83% (4 out of currency), this is due to secondment (1), personal improvement plans (2) and awaiting assessment (1).

ICL4 development course is scheduled for April 2025 which will address the 1 outstanding.

KPI26: Reporting the Core Skill Courses Currency



Core Skill	Q4 2023/24	Q4 2024/25
BA Refresher	82%	91%
CFBT Refresher	71%	89%
Tactical Ventilation Refresher	49%	75%
Emergency Response Driving	80%	83%
ICAT	79%	114%
Overall	71%	89%

Breathing Apparatus (BA), Compartment Fire Behaviour Training (CFBT), Tactical Ventilation (TV): The figures show an increase in all skill sets from the previous quarter and significant progress from Q4 of the previous year. The BA Recovery Programme is now 64% complete. To ensure completion by March 2026, all three SDAs need to maintain the current rate of course delivery. Regular meetings with key departments are established, and premises responsible persons have been identified. The training support coordinator continues to schedule necessary courses, ensuring risk-critical training is prioritised. This targeted approach improves skills, increases competency, and reduces organisational risk to the service.

Driving:

The overall percentage of ERD reassessment completion is steady across all duty systems, with slight variations in Wholtime, On-Call, and Volunteer rates. Instructor shortages due to resignations, promotions, and sickness have impacted these rates. Efforts are underway to address these challenges, including appointing new instructors and developing proposals to improve recruitment. Individual SDA results show some fluctuations, with certain areas performing better than others. The WSDA has faced significant challenges due to staffing issues, but improvements are expected with new appointments. A new reassessment model, developed with Police Scotland is now being piloted, this aims to increase completion rates significantly by assessing all ER drivers on the same day.

ICAT:

The competency target for ICAT Operators is based on 60% attainment for all operational personnel FF – WC. The figures in the report reflect the percentage of the attainment target, for all duty groups. The overall competency for ICAT Operators across all duty groups in the three SDAs remains high, which in part due to wholtime stations in general having attainment percentages above 60%. Variations in competency rates are evident across SDAs and LSO areas, with some performing strongly while others remain below target. The lower percentages are predominately with on-call and

volunteer units in the North and West SDA's but there are some wholetime stations not achieving expected competency levels.

Overall:

In Q4 2024/25, Breathing Apparatus (BA), Compartment Fire Behaviour Training (CFBT), and Tactical Ventilation (TV) skills showed significant progress from the same quarter the previous year. The BA Recovery Programme is on track for completion by March 2026. Driving reassessment rates remained steady, despite instructor shortages. Efforts to address these challenges include new instructor appointments and a pilot reassessment model with Police Scotland. ICAT Operator competency remains high overall, though variations exist across SDAs and LSO areas, with some on-call and volunteer units in the North and West below target.

KPI27: Reporting the Specialist Rescue Currency



Specialist Skill	Q4 2023/24	Q4 2024/25
Heavy Rescue	98%	114%
USAR	78%	90%
Water Rescue – Level 3	132%	129%
Rope Rescue	123%	124%
Mass Decontamination	119%	87%
Overall	113%	112%

Heavy Rescue:

Heavy Rescue currency continues to improve. Since the previous quarter an increase has been achieved within the North and West SDA, currency in the East SDA has remained the same (NSDA 99%, ESDA 157% WSDA 120%). Moving forward, focus will remain on maintaining and improving currency levels across all SDAs to ensure resilience and flexibility, course scheduling will prioritise nominations for NSDA stations during Q1 and Q2 2025/26. Additionally, CPD events have been planned for 2025/26 to provide refresher training and to maintain the skills and currency of existing qualified personnel.

USAR:

USAR continues to show steady improvement, continuing the positive trend over the past year. The team had one vacancy; this has now been filled and aligned to the NSDA This will allow a target approach to increasing NSDA currencies, USAR Tactical Advisor course has been complete with 12 new Tactical Advisors allowing us to meet the requirement for 24 Tactical Advisors nationally. The direct approach taken in Q2, identifying station personnel with skill gaps, is proving effective.

Water Rescue:

Water Rescue maintains a consistent elevated level of competence with over performance figures, with every trainee assigned to a water rescue station fully trained to SRT level prior to starting at station. There was a recognisable drop in figures moving from Q1 to Q3, however this is the result of the changeover to Logbooks and Knowledge Applied Training Assessment (KATA) sessions and the associated recording, which is now in place to maintain station currencies, this can be seen by the increase of 4%. VHF radio courses for all 20 Swift Water Rescue stations have now been completed. 12 new Managing Water & Flood Incidents managers have completed the course,

Ongoing dialog with ops to have this as a role within incident command structure and the development of Flood & HVP Tactical Advisor Courses in 2025-26 for the upskilling of Flexi Duty Officers.

Rope Rescue:

Rope Rescue had slightly decrease in Q3, however has recovered in Q4, Instructors have realigned to Specialist rescue across the North to increase delivery building resilience within stations. A horizon scan on personnel promotions, transfers, and retirements helps maintain this resilience. Targeted approaches and effective communication between service delivery and training teams have identified potential skill gaps early, allowing for targeted courses to be run and ensuring high resilience.

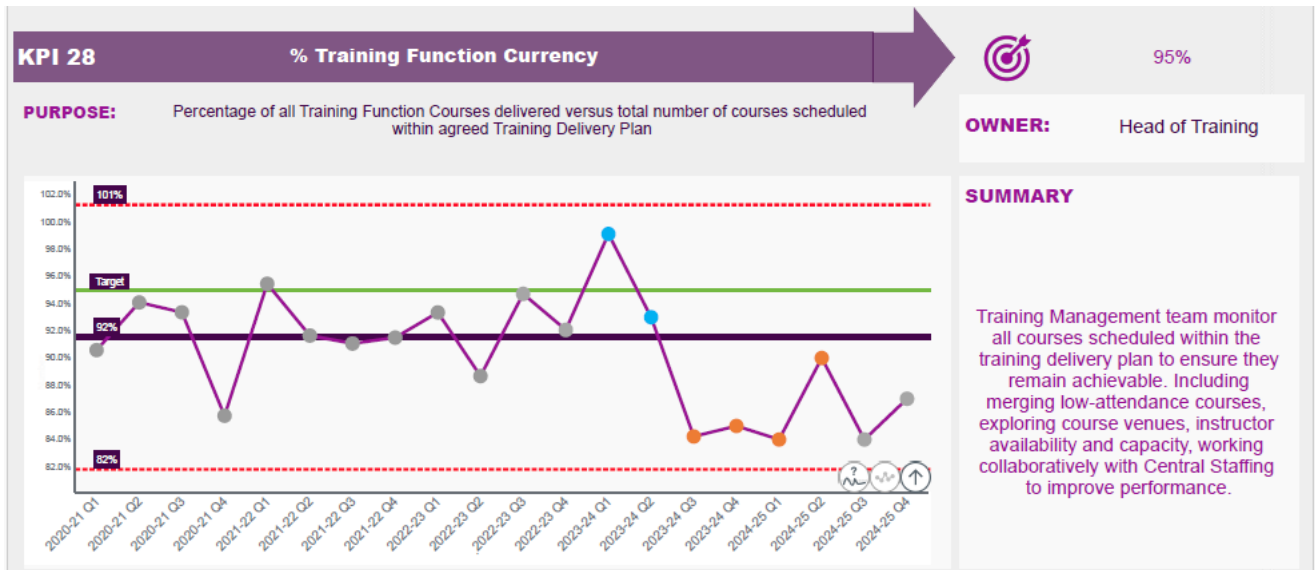
Mass Decontamination:

Mass decontamination has increased by 3%, a targeted approach has been made to upskill on station Instructors, 9 new PRPS & Mass Decontamination Instructors were trained in Q4 with a further course scheduled for Q1. TSA liaising with Ops to ensure suitable mass decontamination equipment is in place to allow on station training.

Overall:

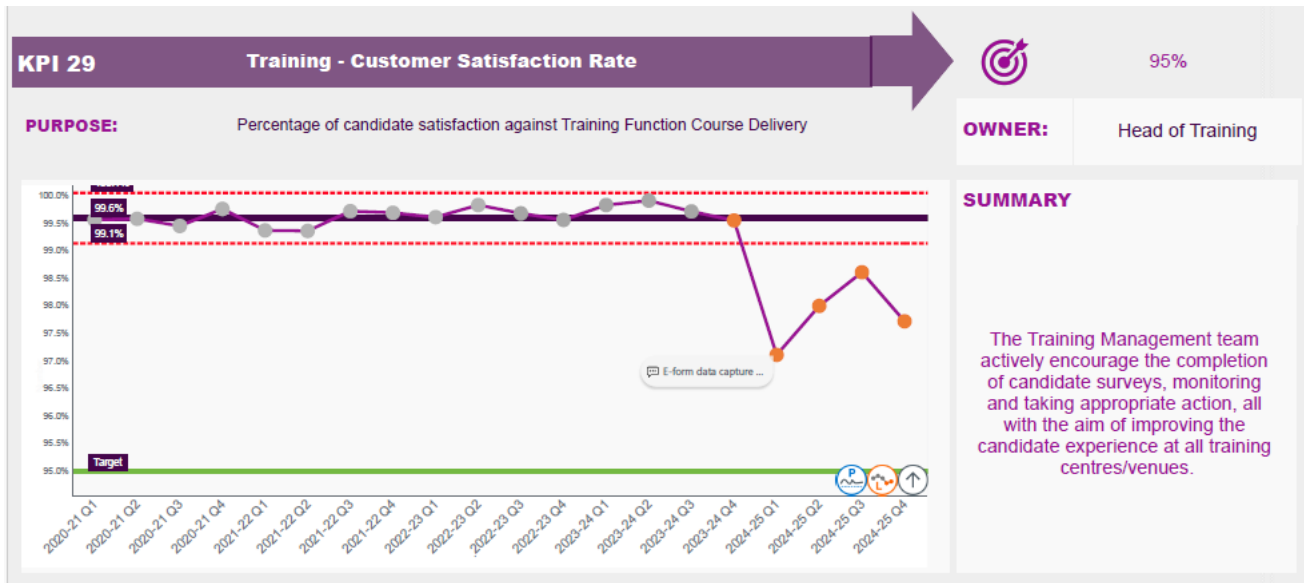
Heavy Rescue currency improved in the North and West SDAs, with a focus on maintaining levels through prioritised course scheduling and CPD events. USAR showed steady improvement, filling a vacancy and training 12 new Tactical Advisors. Water Rescue maintained high competence levels, despite a temporary drop due to recording changes, with all trainees fully trained before station assignment. Rope Rescue recovered in Q4 after a slight decrease, with targeted approaches to address skill gaps. Mass Decontamination increased by 3%, with new instructors trained and ongoing efforts to ensure suitable equipment for on-station training.

KPI28: Reporting the Training Courses Delivered



In Q4 2024-25, training completion remained consistent with the previous quarter. The BA Recovery Programme, Driving Courses, and Acquisition Courses showed high completion rates. Some courses were cancelled due to lack of uptake from candidates – in collaboration with People partners, efforts continue to improve this, including merging low-attendance courses, exploring more venue options, and addressing instructor availability through planning and recruitment. The commitment to delivering high-quality training and adapting to challenges continues to support the teams effectively.

KPI29: Reporting Customer Satisfaction Rate

Candidate Satisfaction (All Duty Groups):

The number of returns increased from Q3, with 1185 valid evaluation forms submitted for Q4 courses. Candidate satisfaction decreased slightly to 97.72% but remains above target. Reasons given by candidates for responding with "Fair" or "Poor" include course structure, Instructor rotation, training facilities and equipment and performance of other candidates on an Instructors course. This KPI is based on the percentage of candidates rating their overall experience as "Good" or "Very Good." In Q4, 2.28% of candidates rated their experience as "Fair" or "Poor." Efforts are ongoing to address these concerns and improve training quality.

GLOSSARY OF TERMS:

Accident/Injury Rate	The total number of reported accident/injuries divided by total number of employees multiplied by 100 to give the accident injury rate per employee
AOV	Acts of Violence
BA	Breathing Apparatus
COVID-19	Coronavirus Pandemic
CPD	Continual Professional Development
DD	Detached Duties
ESDA	East Service Delivery Area
FCS	Finance and Contractual Services Directorate
FF	Firefighter
FTE	Full-time Equivalent
HSE	Health and Safety Executive
ICL	Incident Command Level
ICT	Information Communications Technology
IP	Injured Person
Kronos	The Wholetime ICT availability system
LDP	Leadership Development Programme
LfCP	Leadership for Change Programme
LNA	Learning Needs Analysis
LSO	Local Senior Officer
MORR	Management of Occupational Road Risk
MPD	Maintenance Phase Development
MSK	Musculoskeletal
MTA	Marauding Terrorist Attack
NILO	National Inter-Agency Liaison Officer
NSDA	North Service Delivery Area
NTC	National Training Centre
NWR	Non - Work Related
OCSG	Operational Competence Strategy Group
OHCA	Out of Hospital Cardiac Arrest
POD	People and Organisational Development Directorate
Q1	Period 1 April – 30 June
Q2	Period 1 July – 30 September
Q3	Period 1 October – 31 December
Q4	Period 1 January – 31 March
RAG	Red, Amber and Green
RBC	Resource Based Crewing
RDS	Retained Duty System
RVDS	Retained and Volunteer Duty System
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
Ops	Operations Directorate
RTC	Road Traffic Collision
SDA	Service Delivery Area
SFRS	Scottish Fire and Rescue Service
SLT	Strategic Leadership Team
TfOC	Training for Operational Competence
TNA	Training Needs Analysis
TOM	Target Operating Model
TFF	Trainee Firefighter
TTM	Task and Task Management
TU	Trade Union
UK FRS	UK Fire & Rescue Services
USAR	Urban Search and Rescue
VDS	Volunteer Duty System
WFPR	Workforce Planning & Resourcing
WSDA	West Service Delivery Area
WR	Work Related

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/23-25

Agenda Item: 12.1

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 JUNE 2025						
Report Title:	SAFETY AND ASSURANCE PERFORMANCE REPORT: QUARTER FOUR (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>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is for the People Committee (PC) to note the content of the Safety and Assurance (SA) Performance Report Q4 2024-25.						
2	Background						
2.1	The SA Q4 Performance Report continues the revised format introduced in Q2 which has been well received by our Business Partners following publication.						
2.2	The report provides a performance update regarding key achievements and projects of work across the SA Function in Q4 to support SFRS Safety and Assurance Key Performance Indicators (KPI).						
3	Main Report/Detail						
3.1	SA continue to enhance the content of the report by including promotional activities. In Q4 this focusses on the Control of Substances Hazardous to Health (COSHH). We will continue to include an overview of relevant Health and Safety Events and OA13 investigations, providing a brief overview of outcomes to enhance communication with staff.						
3.2	Further detail on SA Key Achievements and KPI trends and analysis can be found within the Safety and Assurance Quarter 4 Report.						
4	Recommendation						
4.1	The PC are asked to scrutinise the content of the Safety and Assurance Performance Report for Q4 2024-25.						
5	Key Strategic Implications						
5.1 5.1.1	Risk Appetite and Alignment to Risk Registers In relation to meeting our legal and regulatory obligations SFRS has a Minimalist appetite.						
5.2 5.2.1	Financial There are no financial implications with the production of this report. Any recommendations to improve performance will be managed through appropriate governance routes by the risk owner.						

5.3 5.3.1	Environmental & Sustainability There are no environmental implications to be considered. This report is circulated electronically.
5.4 5.4.1	Workforce This report highlights the monitoring of SA performance and makes recommendations for continuous improvement to reduce the risk of injury or ill-health of the SFRS workforce.
5.5 5.5.1	Health & Safety Failure to monitor and improve the management of SA may result in injury or ill-health of our workforce and those affected by their activities, HSE investigation, receipt of an enforcement notice, fines and adverse publicity damaging the reputation of SFRS.
5.6 5.6.1	Health & Wellbeing No implications identified for Health and Wellbeing. Trend analysis of events will assist in implementing strategies to improve the Health and Wellbeing of SFRS employees.
5.7 5.7.1	Training There are no training implications as a result of this report. Training requirements will be approved through other governance routes or captured in Health and Safety Improvement Plans.
5.8 5.8.1	Timing The performance will be reported through the appropriate governance routes as noted within the Governance Route of Report Section.
5.9 5.9.1	Performance Health and Safety performance is monitored through KPIs managed by Think, Act, Stay Safe (TASS) and Operational Assurance Recording and Reporting (OARRS) management systems performance reports and through use of PowerBi. The performance outcomes are communicated through Safety and Assurance Improvement Groups (SAIG).
5.10 5.10.1	Communications & Engagement No further engagement is required. Performance is communicated through local Safety and Assurance Liaison Officers (SALO's) and SAIGs.
5.11 5.11.1	Legal Failure to monitor and improve the management of Health and Safety could result in non-compliance to Health and Safety legalisation.
5.12 5.12.1	Information Governance There are no implications that require to be noted for GDPR purposes within the Q3 report. Both TASS and OARRS management systems are fully compliance with GDPR.
5.13 5.13.1	Equalities There are no implications to be noted for equality and diversity. An Equality and Human Rights Impact Assessment (EHRIA) has been completed for the Health and Safety Policy and supporting arrangements.
5.14 5.14.1	Service Delivery This report has no direct impact on Service Delivery. Any actions will be discussed through service delivery SAIGs.
6	Core Brief
6.1	Not applicable

OFFICIAL

7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/Limited/Insufficient
7.3	Rationale:	The Quarterly Report informs the workforce of the organisation's safety performance and the progress being made toward achieving the defined KPI's, as well as how they contribute to the organisation's success.
8	Appendices/Further Reading	
8.1	Appendix A: Safety and Assurance Quarter 4 Report 2024-25.	
Prepared by:		Victoria Regan, Health and Safety Business Support Officer
Sponsored by:		Jim Holden, Head of Safety and Assurance
Presented by:		Jim Holden, Head of Safety and Assurance
Links to Strategy and Corporate Values		
Strategic Plan 2022-25 Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public. What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff. Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be. Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety and wellbeing of the public and our people.		
Governance Route for Report		Meeting Date
<i>People Committee (PC)</i>		<i>05 June 2025</i>
<i>TSA Functional Management Team (FMT)</i>		<i>10 June 2025</i>
<i>Training, Safety and Assurance Board (TSAB)</i>		<i>12 June 2025</i>
<i>Safety and Assurance Sub-Group (SASG)</i>		<i>17 June 2025</i>
<i>Strategic Leadership Team (SLT)</i>		<i>18 June 2025</i>
<i>TSA Directorate Management Team (DMT)</i>		<i>19 June 2025</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>
		<i>For Recommendation</i>
		<i>For Information</i>
		<i>For Decision</i>
		<i>For Information</i>
		<i>For Information</i>

Safety and Assurance Quarter 4 2024-25 Performance Report

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



Content

- [Introduction](#)
- [Key Achievements](#)
- [Legislative Compliance](#)
- [SFRS Key Performance Indicators \(KPIs\)](#)
- [Information and Updates](#)
 - [Contaminants](#)
 - [Driver Safety Group](#)
 - [Organisational Learning Group](#)
 - [Near Miss, Event and OA13 Outcomes](#)
 - [Health and Safety Executive Chemical Safety Awareness](#)
- [Directorate Event Statistics](#)

Introduction

The purpose of this report is to provide an overview of our safety and assurance performance for the past quarter. It highlights key projects, working group updates, and outlines our ongoing commitment to legislative compliance and continual improvement.

The SFRS annual Health and Safety Improvement Plan detailed within KPI 56 is developed to provide compliance with statutory obligations and promote continual improvement.

The Safety and Assurance Key Performance Indicators (KPIs) within PowerBi provide an overview and trend analysis of performance in accordance with the Performance Management Framework.

This report encourages a positive safety culture by enhancing communication through outputs and ongoing safety and assurance initiatives.

Key Achievements: Safety and Assurance Function

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

Item	Commentary
SFRS Manual Handling Training	SFRS Manual Handling programme of learning has been updated and must be completed every 3-years by all staff. It is support with an all-new Manual Handling Assessor course supporting staff undertaking MH assessments.
Management Arrangements	Confined Spaces, Mobile Elevated Work Platforms, Control of Contractors, Visitors and Co-occupants all completed their 5-year reviews. Premises Inspection was updated to reflect changes in the Confined Spaces MA
Operational Assurance Learning	OA has undertaken three structured debriefs during Q4, Hutton Square (Livingston), Sapphire Mill (Glenrothes) and severe weather event, Storm Eowyn. An Operational Discretion review took place for River Clyde Incident. Recommendations will progress to the Organisational Learning Group.
National Operational Learning	A National Fire Chiefs Council (NFCC) Action Note has been reviewed for Rescues from Water. Two Information Notes were also received on Hollow Concrete Blocks and Escorting Vehicles in Transport at Risk of Fire. Where learning is identified, an action plan will be progressed through governance.
Generic Risk Assessment (GRA)	The following GRAs were revised and published during Q4: <ul style="list-style-type: none">• Rope rescue• Incidents Involving Acetylene• Fire Ground Technician• Drillground Supervision course• All Terrain Vehicles Please see the relevant handbooks for GRA details.
Event Management	Two trend analysis papers and recommendations undertaken for steam burns to hands sustained during hot fire training and damage to Powered Rescue Equipment.

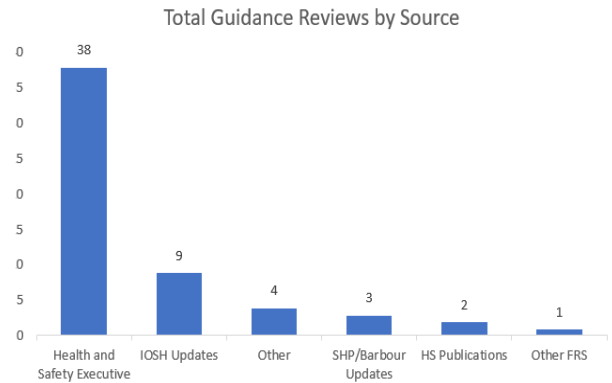
Recommendations will progress to the Organisational Learning Group Tacker.

Legislative Compliance

Guidance Reviews Q4

During Q4, a total of 57 guidance reviews were completed. Of these:

- 65% (37 reviews) required no further action, indicating strong alignment with current standards.
- 19% (11 reviews) were earmarked for future research and development, to be revisited as part of the Management Arrangement (MA) 5-year review cycle. This reflects our commitment to continuous improvement and ensuring our health and safety MAs and e-learning content remain aligned with evolving best practices.
- 16% (9 reviews) were referred to Business Partners, as the relevant risk owners, for further consideration and potential action.



This distribution demonstrates the robustness of our current guidance and the proactive role of Business Partners in risk management.

In preparation for April's Stress Awareness Month, several initiatives were undertaken to promote mental wellbeing across the organisation:

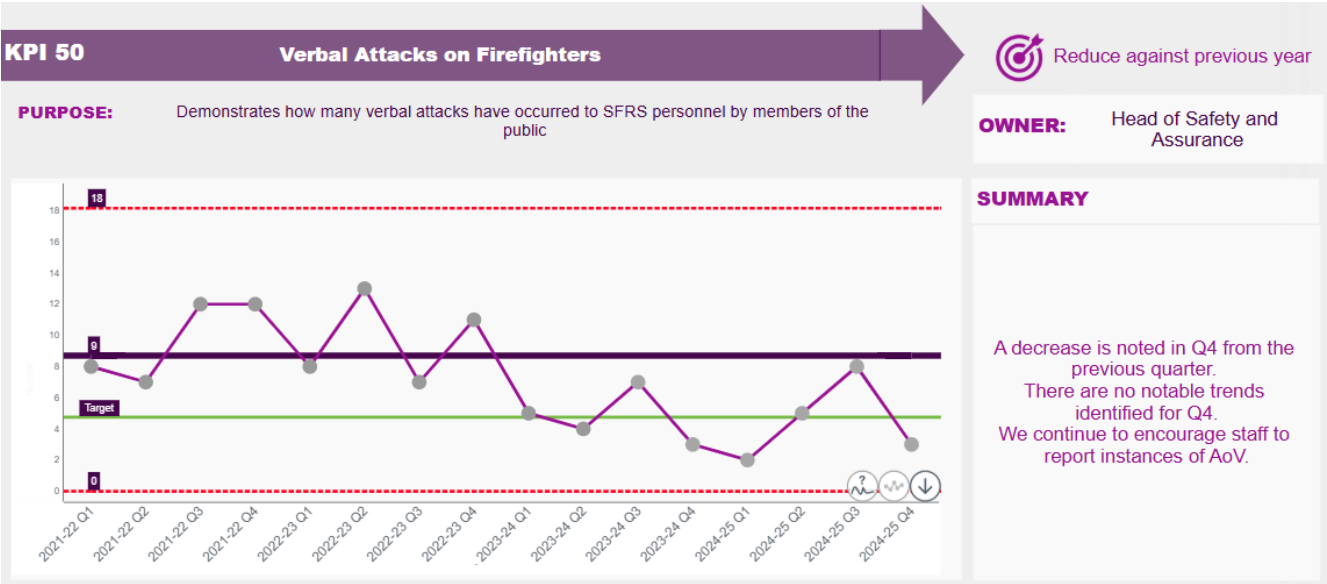
- Collaborative efforts with the People Directorate led to the dissemination of updated stress management guidance and support resources.
- Key messages and updates were shared through weekly staff briefings, ensuring consistent communication and engagement.
- Relevant content within the Learning Content Management System (LCMS) Stress programme was refreshed to reflect current guidance and enhance learning outcomes.

These efforts underscore our ongoing commitment to staff wellbeing and the promotion of a supportive work environment.



Key Performance Indicators

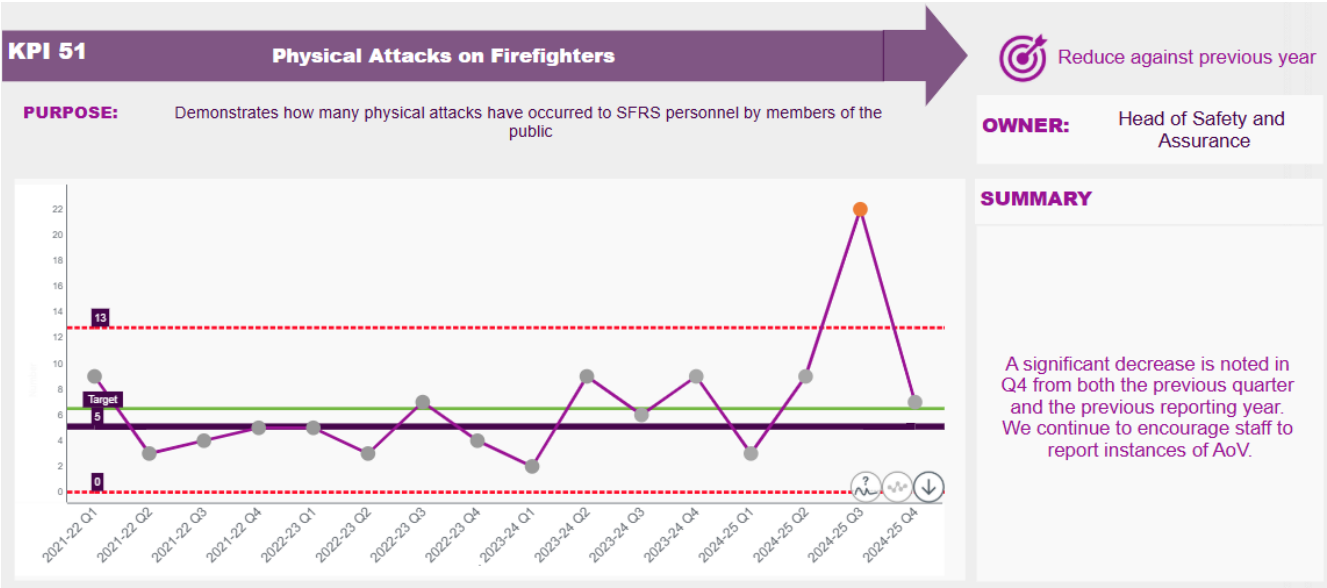
KPI50: Verbal Attacks on SFRS Staff



Verbal attacks remain numerically consistent when compared to the same quarter in the previous reporting year.

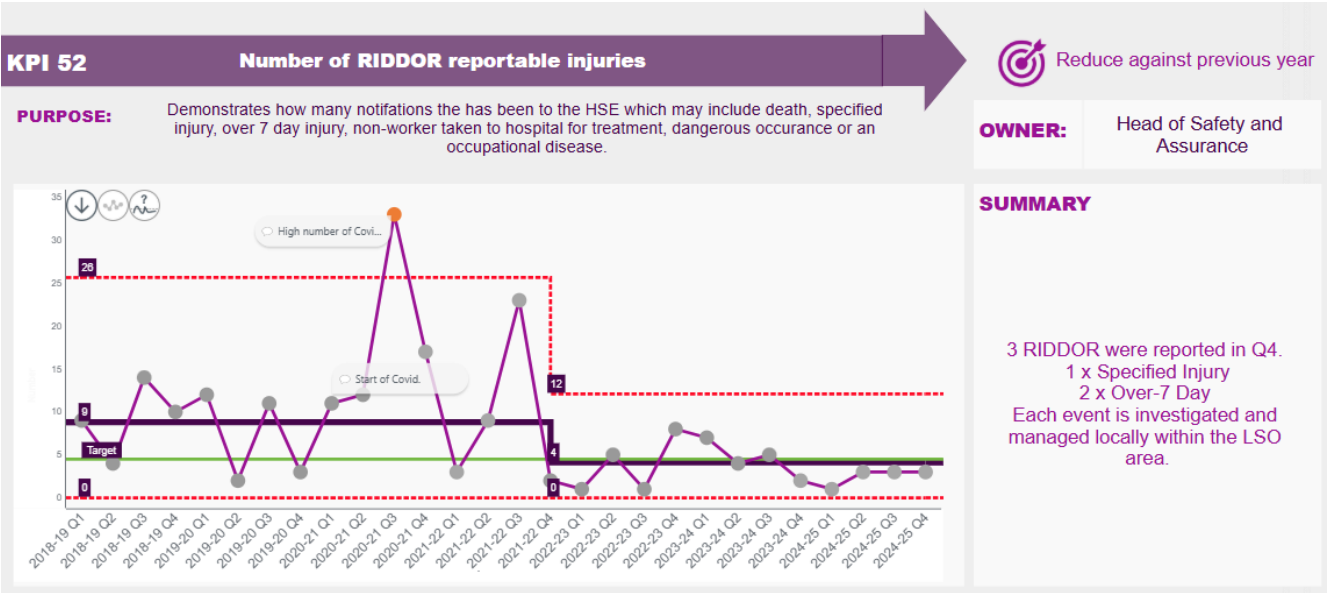
2 events occurred at operational incidents, and the remaining 1 at a non-operational incident. No events required the assistance of Police Scotland. Acts of Violence (AoVs) continue to be managed through SDA engagement with partner agencies to enhance and support the ongoing reduction.

KPI51: Physical Attacks on SFRS Staff



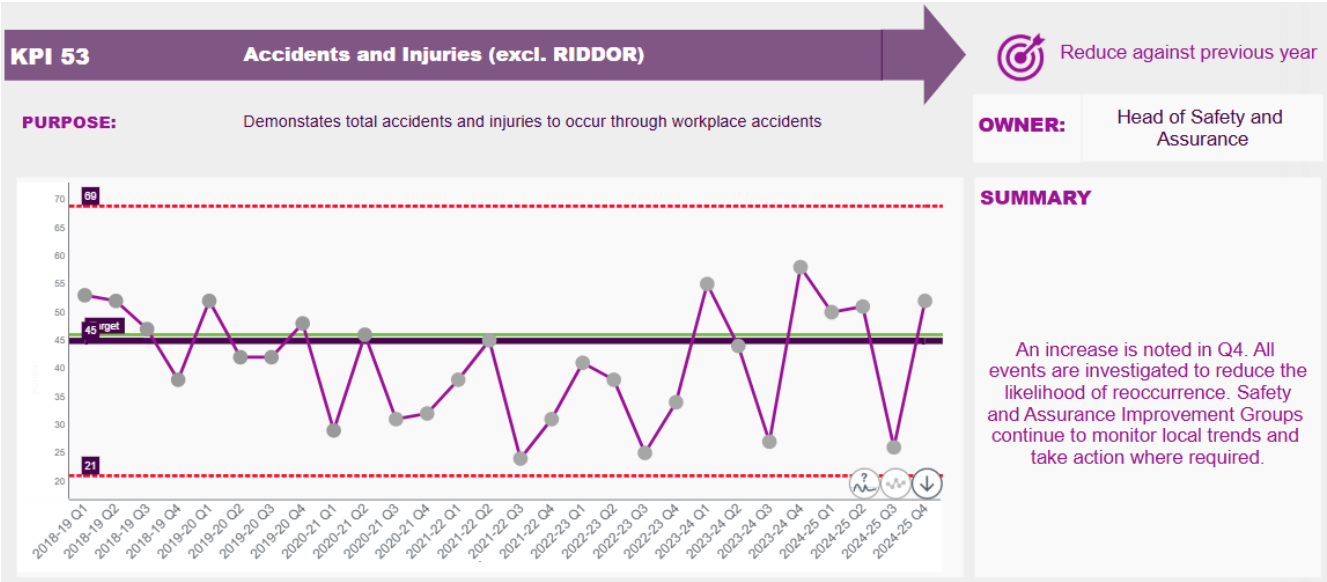
When compared to Q4 in the previous reporting year 23/24, a 22% decrease is reported (9 to 7). Missiles thrown was the most common AoV type at 86% (6 of 7). All events occurred during operational activities and no events resulted in an injury. SDA continue to engage with partner agencies to further develop and enhance current arrangements to support the reduction of Acts of Violence (AoV).

KPI52: Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR)



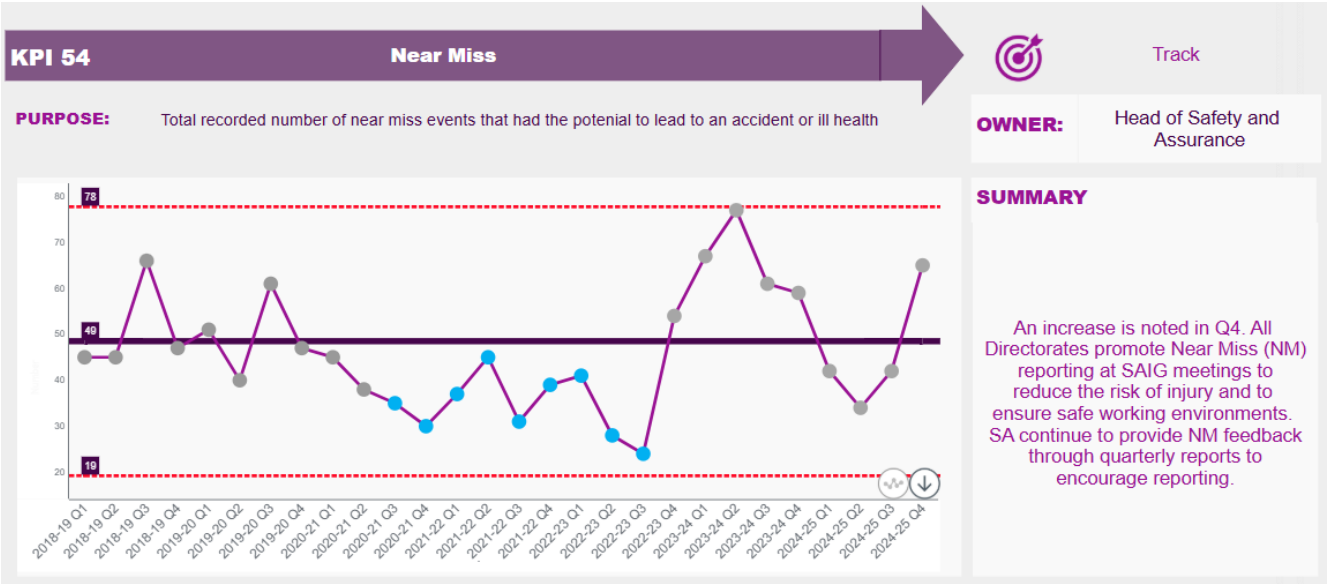
A 50% increase is noted in RIDDOR events when compared to Q4 of 23/24, (2 to 3). 1 event was reported as a specified injury resulting in an upper limb injury from a fall and 2 over 7-day injuries resulting in a burn and an upper limb injury.

KPI53: Accident/Injuries (Excl. RIDDOR)

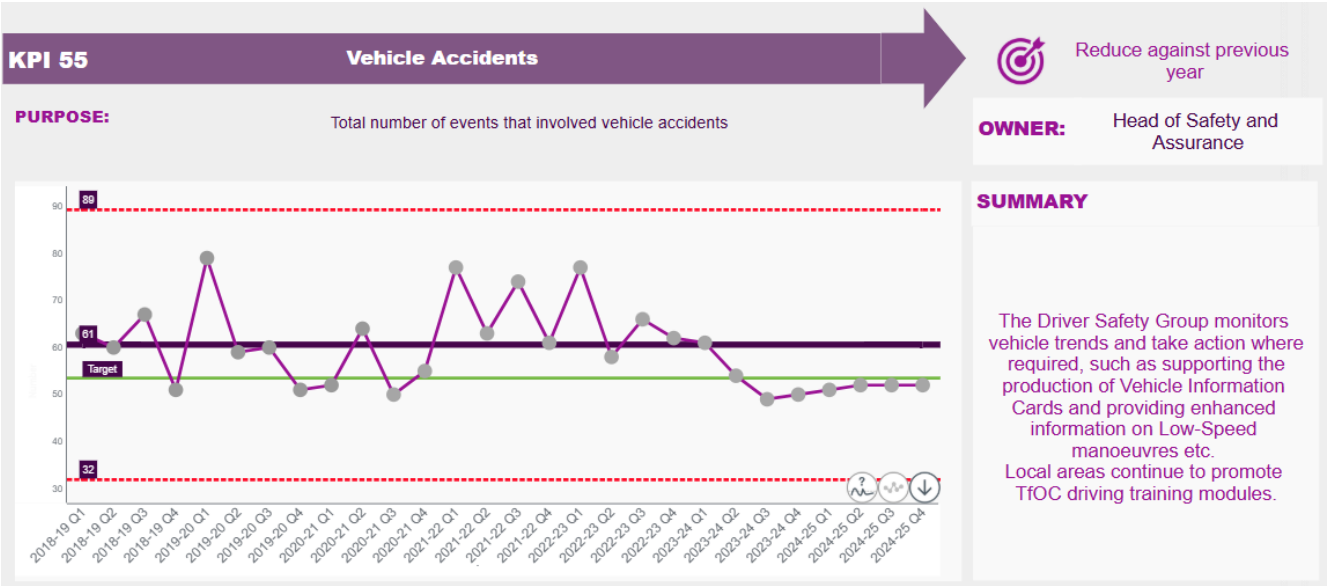


There was a 10% decrease in Accidents from Q4 23/24. The top three causations were Slips, Trips and Falls and Hot/Cold. 44% (23 of 52) occurred during training activities, 31% (16 of 52) occurred during operational activities and 25% (13 of 52) occurred during non-operational activities. Investigations are carried out to identify actions and reduce the reoccurrence risk.

KPI54: Near Miss Events



KPI55: Vehicle Events



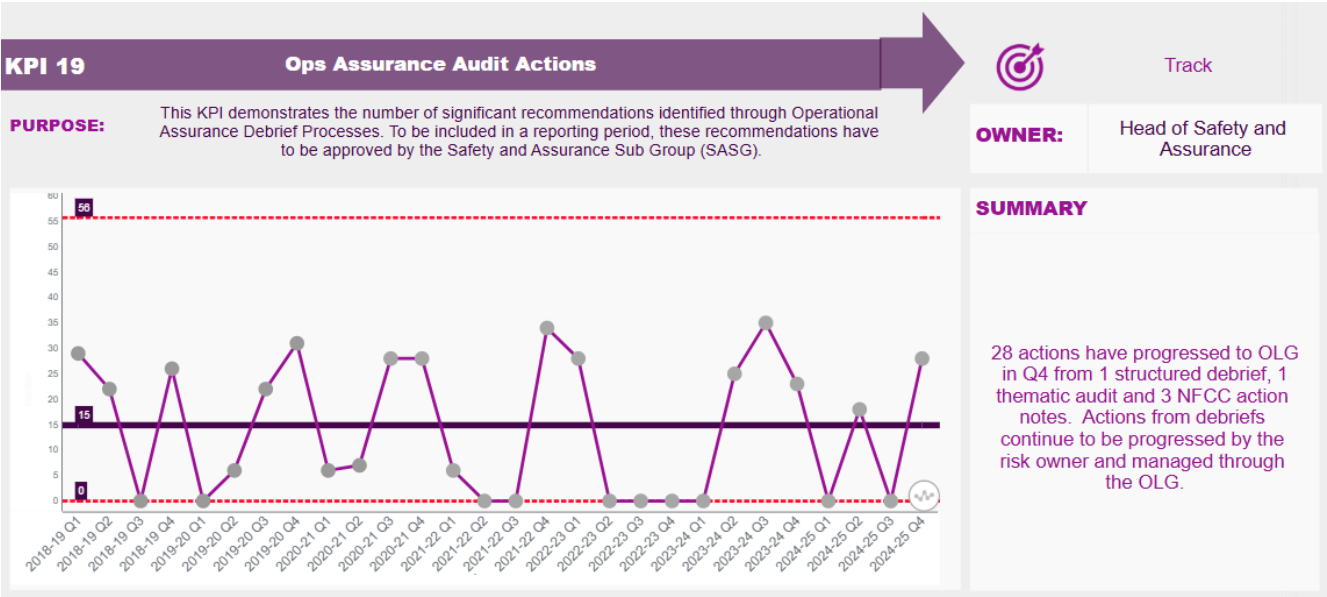
Vehicle Accidents (VAs) increased by 4% compared to Q4 in 23/24 (50 to 52). 52% (27 of 52) of all vehicle accidents reported were attributed to operational incident activities. A further 35% (18 of 52) were attributed to non-operational activities, and 13% (7 of 52) were accidents attributed to training. 36% of VAs were during low-speed manoeuvres, 34% were during blue-light conditions, 13% were during normal road speed and 8% whilst stationary. Driver Safety Group continues to work collaboratively with business partners to reduce VAs.

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



Overall, 100% of Q4 actions were complete. Year to Date, Improvement Plans were reported at 98% with one Q3 action outstanding in the TSA Improvement Plan surrounding Support Reviews of Statutory Inspections. Local SAIG groups continue to manage and support the completion of improvement plans.

KPI19: Operational Assurance Debrief Actions



Safety and Assurance Information and Updates

Contaminants

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

- Station Zoning: Comms have several updates on iHub including how to appropriately place stickers on doors of premises. Posters also available to download as a PDF on iHub.
- The Fire Contaminants SOP, MA, GRA and Zoning Guidance have been published and are now available on iHub.
- Reserve PPE for tunics now at stations. Helmets, gloves and flash hoods are to follow.
- Wholtime stations now have airing rails in place. Robertsons have begun installing cages, but this is taking longer due to ground conditions. Additional 50 cages have been ordered for on call stations
- BA cleaning machines have been installed at training centres. Drager are providing a training programme on how to use these at the end of the month.
- PPE boxes have been ordered and are now at sites. 14 larger boxes have been ordered for Hub Stations that require them.
- Contaminants presentation on all equipment ordered, things to celebrate and future steps has been created.

Driver Safety Group (DSG)

The DSG continue to promote control measures and safe systems. Some key workstreams include:

- Consultation on Low-Speed Manoeuvres (LSM) booklet has been completed following feedback received from Training, Safety and Assurance Board. The booklet will be published in Q1 2025/26;
- Analysis of vehicle accidents from TASS and Tranman continues to show that the majority are due to low-speed manoeuvres resulting in minor damage to appliances;
- Service Delivery Areas have sourced equipment for low-speed manoeuvre training;
- Iveco Vehicle Information Card has been completed by Training;
- Rollout of ATV training to Tier 3 stations is underway.

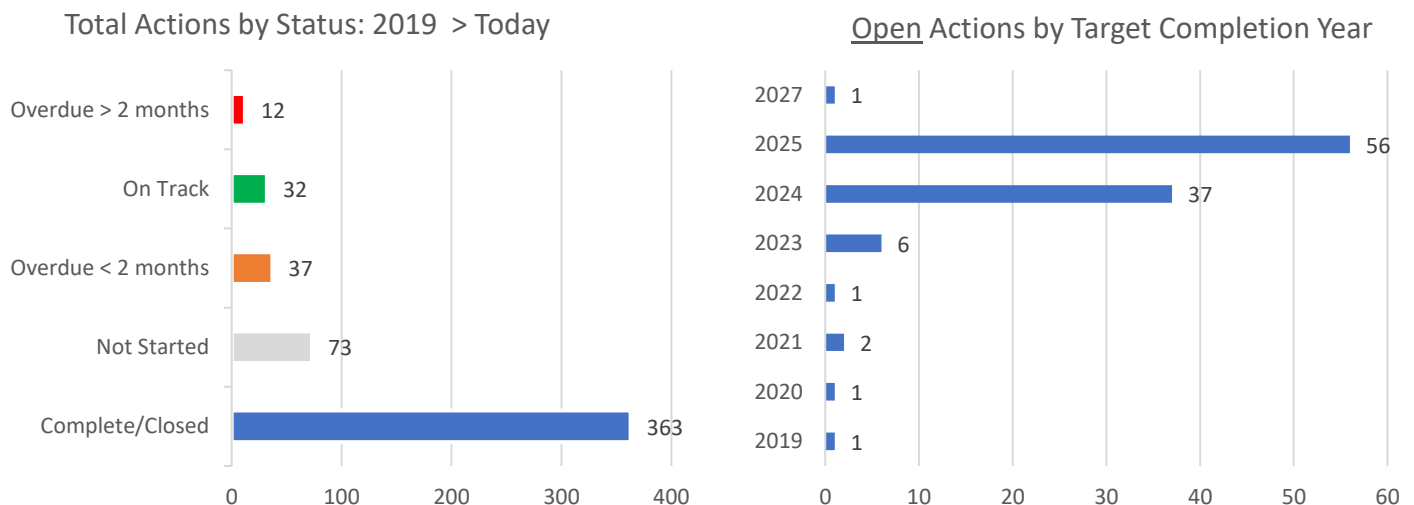
Organisational Learning Group (OLG)

The OLG tracker has a total of 517 recommendations from Debriefs, Accident/Near Miss Investigations, external learning cases, etc.

Of the 517 actions, 363 of these have been recorded as closed with 154 actions remaining in progress.

The following actions plans were added to the OLG tracker during quarter 4;

- NFCC Action Note- Wildfire Learning
- NFCC Action Note- The use of non-fire and rescue equipment and personnel at operational incidents
- NFCC Action Note- Persons in Crisis
- External Learning Case- Recycling centre fire involving Lithium-Ion batteries at WEE solutions
- Thematic Audit- Drager PARAT 5550 Fire Escape Hood Using in SFRS



Despite the overall positive progress, a small number of legacy actions remain overdue, reinforcing the importance of maintaining focus on actions to ensure full closure.

SA continue to work in partnership with risk owners to provide target support where required.

Health and Safety Event Investigation and OA13 Outcomes

- Accident/Injury: Crews attended a domestic fire. The fire was described as well-developed; however, BA teams were deployed with a hose reel jet. This has been identified as a recent trend where firefighter injuries have occurred. A Service Delivery Alert was issued to all personnel reminding of SFRS operational guidance on the selection of appropriate firefighting media.
- Near Miss: A 13.5m ladder had been extended to the third floor of the training tower when crews were making up. When lowering the ladder, the third section had not retracted and slipped and fell with force into the housed position causing damage to the ladder. Following an impound inspection, the asset was retained at FEW for workshops inspection with two key areas to check – 1) pulley/ wire head and 2) pawling distances.

It has been communicated to all personnel on station that future ladder inspections must be thorough and include a close inspection of the specific securing pin, pulley and associated equipment to ensure there is no damage. The findings and required actions have also been communicated to all area stations via a SALO communication.

- Near Miss: Personal issue BA mask found to be 7 months overdue an annual test and having no monthly tests recorded. To confirm if this extended to more than the Personal Issue Face Mask not being checked, the area asked for BA downloads to be conducted to determine if BA sets were being standard tested on a bi-daily basis. BA downloads conducted at 2 stations in the LSO area confirmed that BA sets were not receiving daily standard testing. Further checks were recommended by the SALO stations to determine if similar trends existed.

Watch Management Teams to conduct daily inspections of BA set logbooks and personal issue face masks to ensure logbooks are being annotated with the minimum of 2 bi-daily entries.

HSE Chemical Safety in the Workplace

A variety of harmful substances are found in our working environments and knowing how to handle these safely is key to safety and protection from injury. This HSE poster shows the Do's and Don'ts when handling chemicals.

Safe Handling of Chemicals

Chemicals can

- cause you and others harm
- cause skin allergies and asthma
- cause skin burns and eye damage

DO

Store chemicals safely:

- ✓ keep clean, cool, dry
- ✓ keep chemicals in their original containers
- ✓ secure storage to prevent access by vulnerable people

DON'T

- ✗ mix chemical products
- ✗ use chemicals if you are not trained to use them safely
- ✗ leave chemical products unattended



Read the label and follow instructions



Keep the workplace well ventilated



Use personal protective equipment, as required



Practice good hand care – remove contamination promptly, wash hands after use



Know what to do if you accidentally spill the chemical on yourself or others



Report any dangers, spills or damaged containers and clear up spills straight away



Don't store chemicals in bottles or containers designed for other uses (for example food and drink containers)



Don't store chemicals in unmarked containers



Don't place heavy containers on high shelves

Do you know the signs?



Hazardous to the Environment



Serious Health Hazard



Corrosive



Acute Toxicity



Health Hazard



Flammable

Further information on Control of Substances Hazardous to Health is available on the HSE website [linked here](#).

Directorate Events

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

> Red	Highlights an increase in statistical figures.	< Red	Highlights a negative decrease in Near Miss Events.	< Green	Highlights a reduction in statistical figures.
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NORTH	Q4 2023/24	Q4 2024/25
Verbal AoV	0	>1
Physical AoV	1	<0
RIDDOR	0	0
Accident/Injuries	5	>8
Near Miss	10	>21
Vehicle Accidents	10	>12
Improvement Plan % Completion	100%	100%

EAST	Q4 2023/24	Q4 2024/25
Verbal AoV	1	1
Physical AoV	1	>3
RIDDOR	0	>1
Accident/Injuries	8	>18
Near Miss	17	>22
Vehicle Accidents	8	>12
Improvement Plan % Completion	75%	>100%

WEST	Q4 2023/24	Q4 2024/25
Verbal AoV	2	<1
Physical AoV	6	<4
RIDDOR	0	>2
Accident/Injuries	24	<14
Near Miss	12	>18
Vehicle Accidents	15	>22
Improvement Plan % Completion	75%	>100%

Training, Safety and Assurance	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	1	<0
Accident/Injuries	11	>12
Near Miss	8	<4
Vehicle Accidents	2	2
Improvement Plan % Completion	86%	>100%

Operations	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	1	<0
Accident/Injuries	7	<0
Near Miss	11	<0
Vehicle Accidents	13	<1
Improvement Plan % Completion	100%	100%

Financial and Contractual Services	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	2	<0
Near Miss	0	0
Vehicle Accidents	1	>2
Improvement Plan % Completion	100%	100%

Strategic Planning, Performance and Communications	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	1	<0
Improvement Plan % Completion	100%	100%

Prevention, Protection and Preparedness	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	1	<0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	1	<0
Vehicle Accidents	0	0
Improvement Plan % Completion	100%	100%

PEOPLE	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	1	<0
Near Miss	0	0
Vehicle Accidents	0	0
Improvement Plan % Completion	67%	>100%

PORTFOLIO	Q4 2023/24	Q4 2024/25
Verbal AoV	0	0
Physical AoV	0	0
RIDDOR	0	0
Accident/Injuries	0	0
Near Miss	0	0
Vehicle Accidents	0	>1
Improvement Plan % Completion	100%	100%

All statistics and figures quoted are provisional information from the internal management system TASS and are subject to change pending scrutiny.

Published statistics should be quoted for wider public use.

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



Scottish Fire and Rescue Service

Safety and Assurance
Quarterly Performance Report Q4 2024/25
Version 1.0
April 2025



SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/24-25

Agenda Item: 12.2

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 JUNE 2025						
Report Title:		FIRE CONTAMINANTS SPOTLIGHT PRESENTATION						
Report Classification:	For Scrutiny	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>						
		A	B	C	D	E	F	G
1	Purpose							
1.1	The purpose of this paper is to provide People Committee members the opportunity to scrutinise the financial spend undertaken in 2024/25 to support the implementation of the Fire Contaminants Standard Operating Procedure (SOP).							
2	Background							
2.1	Strategic Leadership Team (SLT) approved budget of £3,226,500m for managing fire contaminants in 2024/25. A total of £2.46 million has been spent on PPE and equipment. The Contaminants Group and Subgroup oversaw the procurement of products for the service and coordinated the development of the necessary supporting documentation.							
3	Main Report/Detail							
3.1	Business Partners have demonstrated exceptional dedication and collaboration, leading to the successful procurement of products to support the Fire Contaminants SOP.							
3.2	The Fire Contaminants Spotlight presentation will provide detail on the following: <ul style="list-style-type: none"> Partnerships SFRS are involved with. The latest research published in 2024/25. The safety documentation developed by various members of the organisation. The SFRS training modules developed and implemented. Detail the purpose, implementation and spend (to date) on Personal Protective Equipment (PPE) and equipment. The Zoning arrangements implemented in relevant SFRS premises. The status of the Civtech process. NFCC Fire Contaminants Group update. The foreseeable projects of work in 2025/26. 							
3.3	A tour of the National Training Centre will follow to show new processes, and equipment implemented in SFRS.							
4	Recommendation							
4.1	The request from the People Committee is to scrutinise the content of this report.							

5	Key Strategic Implications
5.1 5.1.1	Risk Appetite and Alignment to Risk Registers In relation to meeting our legal and regulatory obligations, SFRS has a minimalist appetite.
5.2 5.2.1	Financial There is significant capital and resource budget allocation required to progress the contaminants implementation plan.
5.3 5.3.1	Environmental & Sustainability N/A
5.4 5.4.1	Workforce Potential impact of decontamination on operational resilience and resource availability which will be considered in the planning and implementation process.
5.5 5.5.1	Health & Safety There is a risk that failure to implement robust arrangements to manage contaminants may result in non-compliance with the employers' duty of care under the Health and Safety at Work etc. Act 1974.
5.6 5.6.1	Health & Wellbeing The implementation of arrangements for health surveillance for staff exposed to contaminants will ensure the effective monitoring and early diagnosis of illness potentially linked to contaminants.
5.7 5.7.1	Training Service wide training required to support the implementation of procedures and safe systems of work and develop positive culture and behaviours related to contaminants.
5.8 5.8.1	Timing There is significant political and public pressure for the SFRS to demonstrate progress of arrangements to manage the risks associated with contaminants therefore it is essential that appropriate resources are allocated to ensure this workstream is prioritised.
5.9 5.9.1	Performance Monitoring of implementation and application of arrangements will be through existing and new assurance arrangements.
5.10 5.10.1	Communications & Engagement Communications and engagement strategy required to ensure understanding and implementation of control measures.
5.11 5.11.1	Legal There is a risk that failure to implement robust arrangements to manage contaminants may result in personal injury claims being brought against the SFRS and Health and Safety legislation.
5.12 5.12.1	Information Governance No, but will be completed prior to publication of any documentation.
5.13 5.13.1	Equalities No. Consideration will be given at the prior to publication of any documentation.
5.14 5.14.1	Service Delivery Potential impact of decontamination on operational resilience and resource availability will be considered in the planning and implementation process.

6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	A Reasonable level of assurance is provided. The Contaminates G0roup/Contaminants Subgroup have made progress. There are several workstreams to be progressed. The impact of actions implemented to mitigate the risk of Contaminants will be evaluated.
8	Appendices/Further Reading	
8.1	Appendix A - Fire Contaminants Spotlight Presentation	
Prepared by:		Teresa Kelly, Deputy Head of Safety and Assurance
Sponsored by:		Craig McGoldrick, Assistant Chief Officer, Director of Training, Safety and Assurance
Presented by:		Craig McGoldrick, Assistant Chief Officer, Director of Training, Safety and Assurance
Links to Strategy and Corporate Values		
Strategic Plan 2022-2025: Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public. What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff. Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be. Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety, and wellbeing of the public and our people. Objective 6.2 Developing and deploying new and more agile ways of working to protect the safety, wellbeing, physical and mental health of our people. Safety Value: Safety of ourselves and others is something we take very seriously. Whether that be on the incident ground, in the office or as we go about our business in the community, safety is always at the core of what we do.		
Governance Route for Report		Meeting Date
People Committee		5 June 2025
Report Classification/ Comments		
For Scrutiny		

Fire Contaminants Spotlight Presentation

People
Committee
5th June 2025



PARTNERSHIPS WITH SFRS



The Scottish
Government
Riaghaltas na h-Alba



FIRE
BRIGADES
UNION

THE PROFESSIONAL VOICE
OF YOUR FIREFIGHTERS



NFCC

CivTech[®]

intrapreneurship

DOCUMENTATION: RESEARCH 2024/25



Journal of Toxicology and Environmental Health, Part B
Critical Reviews



ISSN: (Print) (Online) Journal homepage: www.tandfonline.com/journals/juteb20

Biomonitoring of firefighting forces: a review on biomarkers of exposure to health-relevant pollutants released from fires

Bela Barros, Marta

frontiers | Frontiers in Public Health

TYPE Original Research
PUBLISHED 06 March 2024
DOI 10.3389/fpubh.2024.1358435

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OPEN ACCESS

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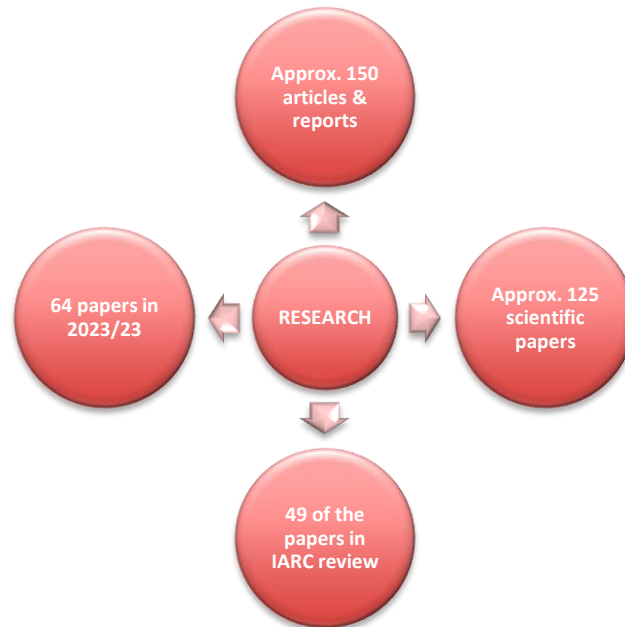
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RECEIVED 14 November 2023
ACCEPTED 23 February 2024
PUBLISHED 06 March 2024

CITATIONS

Baseline data and associations between urinary biomarkers of polycyclic aromatic hydrocarbons, blood pressure, hemogram, and lifestyle among wildland firefighters

Bela Barros¹, Ana Margarida Paiva¹, Marta Oliveira¹, Sara Alves², Filipa Esteves^{3,4,5}, Adília Fernandes², Josiana Vaz^{6,7}, Klara Slezakova⁸, Solange Costa^{3,5}, João Paulo Teixeira^{3,5} and Simone Morais^{9*}



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DOCUMENTATION

Operational Delivery



Training, Safety and Assurance



Training, Safety and Assurance



OPERATIONS

STANDARD OPERATING P

FIRE CONTAMINANTS

SAFETY AND ASSURANCE

FIRE CONTAMINANTS MANAG

SAFETY AND ASSURANCE

FIRE CONTAMINANTS PREMISES ZONING

Safe System of Work

SSOW-279 Management of Fire Contaminants when Training

It is important to note that this SSOW must be relevant GRA and Tra



RISK ASSESSMENT														
PART A														
REF NO: GRA-105	DIRECTORATE/DEPARTMENT AREA: Service Delivery/Operations				ACTIVITY: Fire Contaminants				OVERALL RISK RATING: Medium					
ASSESSMENT TYPE: Generic <input checked="" type="checkbox"/> Specific <input type="checkbox"/>	CATEGORY OF ASSESSMENT: Activity <input checked="" type="checkbox"/> Equipment <input type="checkbox"/>				REASON FOR ASSESSMENT: Initial <input checked="" type="checkbox"/> Periodic Review <input type="checkbox"/> Change of Procedure <input type="checkbox"/>									
DATE	PERSONS AFFECTED				INITIAL RISK RATING				ANTICIPATED RISK RATING					
APPROVAL DATE 21/09/2025	REVIEW 21/09/2028	CONTRACTOR	WELDER	WELDER	PUBLIC	EMPLOYEE	AGENCY	OTHER	1	2	TOTAL	1	2	TOTAL
									5	5	10	5	5	10
This Risk Assessment must be read in conjunction with:														
GRA 049 All Incidents														
GRA 103 Fires and Firefighting														
GRA 104 Fires in Buildings														
GRA 098 Refuse and Waste Site Fires														
GRA 094 Wastewater														

TRAINING & AWARENESS



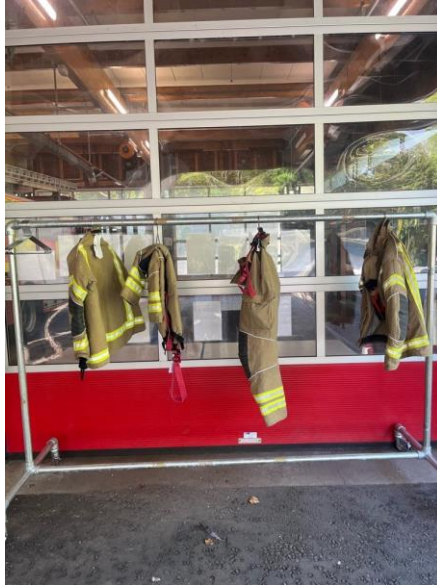
Contaminants LCMS modules available

PPE & EQUIPMENT: RESERVE PPE

- **Purpose:** Ease of replacement PPE during laundry of contaminated PPE
- **Implementation:** 36 Reserve PPE stock locations & summary on Register for booking out PPE
- **Expenditure:** £1,400,845.93



PPE & EQUIPMENT: AIRING RACKS & CAGES



Purpose: Fire contaminants may be released from PPE when aired outdoors.

Implementation: All Whole Time Fire Stations

Expenditure (to date):
£267,014.31

PPE & EQUIPMENT: EXTERNAL STORAGE

- **Purpose:** This contaminated PPE box is to be used for any PPE that requires to be laundered.
- **Implementation:** Issued to 353 fire stations.
- **Expenditure:** £206,251.06



PPE & EQUIPMENT: SHAMPOO / BODYWASH



- **Purpose:** Shampoo / Bodywash to assist with decontamination (shower within the hour) of fire fighters post incident.
- **Implementation:** Approx. 1000 units
- **Expenditure:** £74,359.24

PPE & EQUIPMENT: BA WASHERS



BA Washer



BA Washer: internal



Face mask washer



BA Dryer

PROPERTY DESIGN: STATION ZONING

- **Purpose:** To reduce the transfer of fire contaminants and secondary contamination in SFRS premises.
- **Implementation:** 374 zoning plans were approved by SA.
- **Expenditure:** £29,721.42



HEALTH & WELLBEING

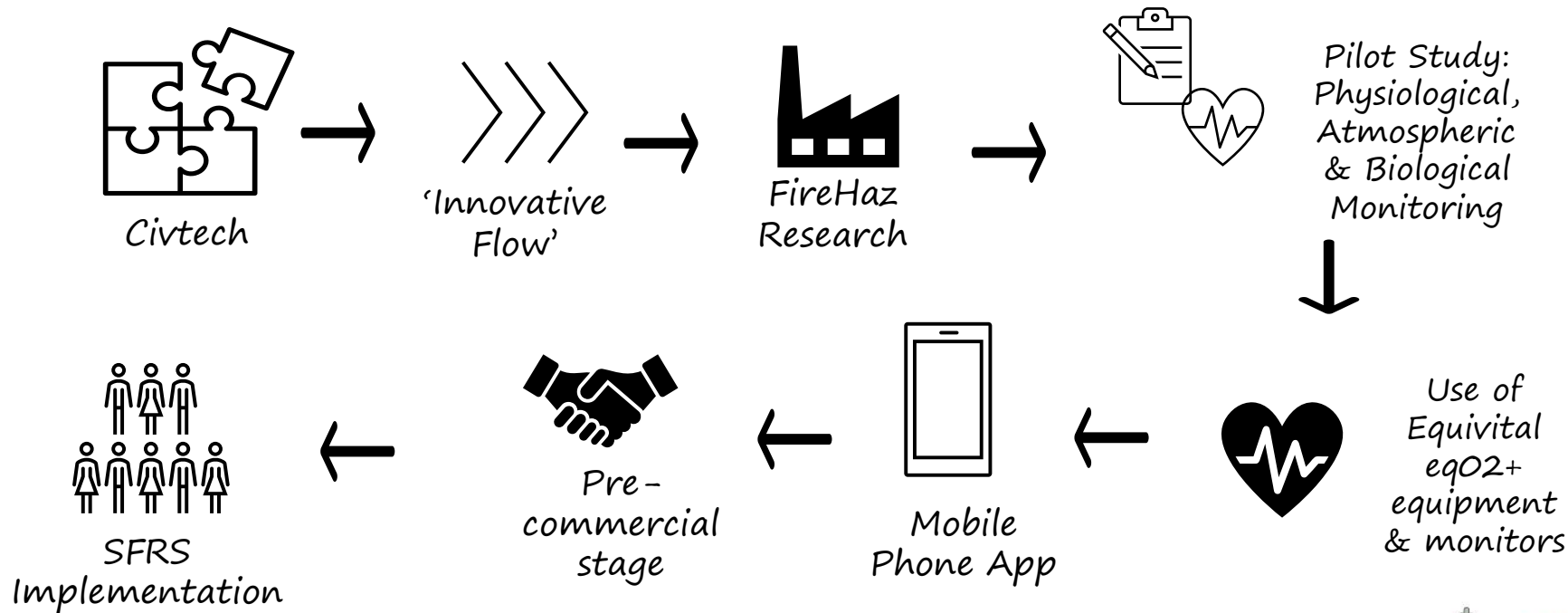


Asbestos Medicals: Asbestos Physicians contracted into SFRS.

SFRS Participation: Study of Firefighters Exposure to Contaminants and Risk of Cancer and Disease.

Research: Research to assess the validity and reliability of a real-time heat stress monitoring system for Firefighters.

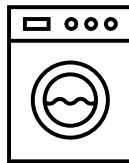
How Can Technology Identify & Measure FF Exposure to Contaminants Across A Range of Incidents?



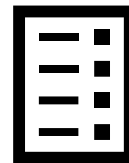
PREVENTION & PROTECTION



Incident Ground



On Station
Washing



Pathway: External
Provider



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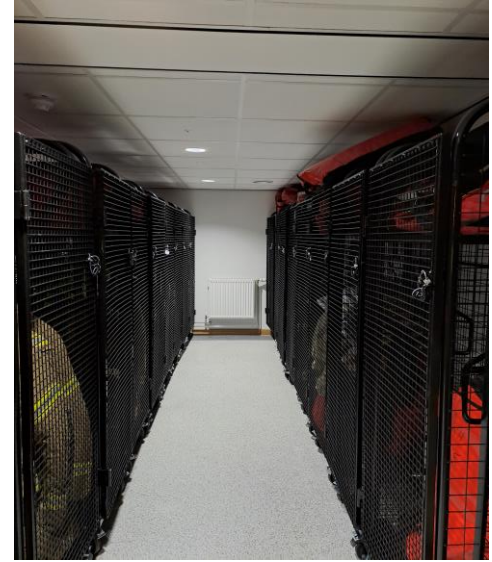
PROPERTY DESIGN: GALASHIELS



RAAC Remedial Works



Dignified Facilities



PPE Storage

NFCC CONTAMINANTS GROUPS



Literature
Review



Respiratory Protective
Equipment



Risk
Assessment



Clean Cab



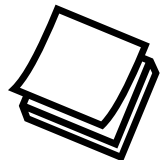
Health Surveillance



Personal
Protective
Equipment



Estates



NFCC Guidance



Training &
Awareness



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CivTech

WHAT'S NEXT?



SFRS Engage
with
Researchers



HSE
Inspections
Q3/4



NFCC Fire Contaminants
Guidance



HSE Research 'How Clean
is Clean' ?



Monitor & Consider New
Research



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Thank You!

Any Questions?



SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/25-25

Agenda Item: 14.1

Report to:		PEOPLE COMMITTEE							
Meeting Date:		05 JUNE 2025							
Report Title:		RISK 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>	<u>G</u>
1	Purpose								
1.1	The purpose of this report is to provide the People Committee (PC) with an overview of the current risks highlighted by Directorates.								
2	Background								
2.1	The purpose of the risk register is to inform decision making through Scrutiny and Assurance processes, providing additional awareness of the risks we face, and the actions required to minimise these risks.								
2.2	The Audit & 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.								
3	Main Report/Detail								
3.1	Risk Overview								
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.

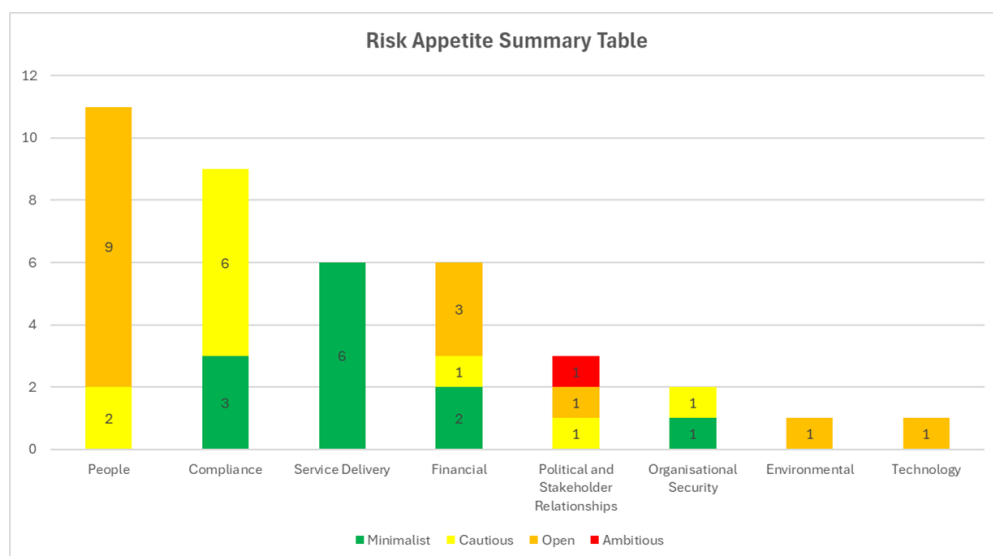
3.3

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
TSA018	PC (TSAB)	16	6	Compliance (Minimalist)	Above
TSA019	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
TSA014	PC (TSAB)	12	4	Compliance (Minimalist)	Above

3.3.4

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.

3.4

Risk Spotlights

3.4.1

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

3.4.2

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.

3.5

Significant Directorate Risks

3.5.1

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	

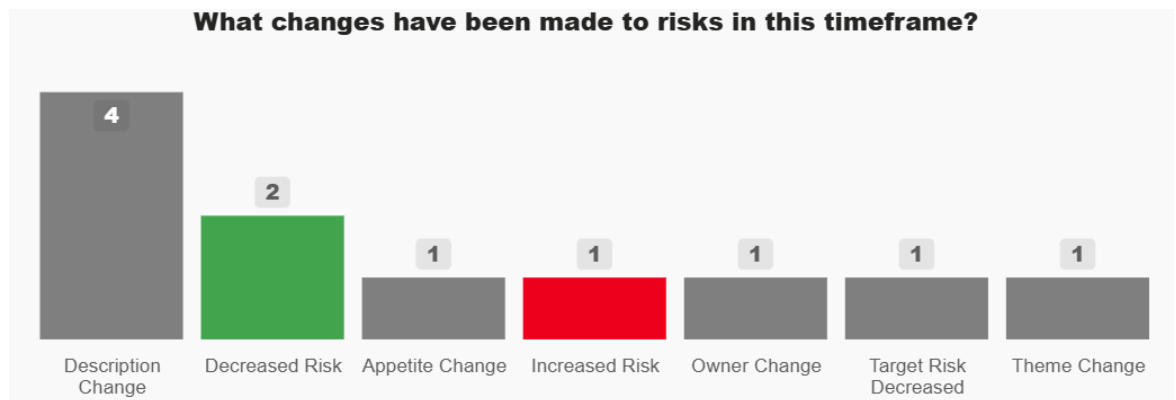
3.5.2

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

Risk Ref	Risk Description
FCS018	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.
FCS022	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.
POD020	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 initiative
TSA018	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,
TSA019	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

3.5.3

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



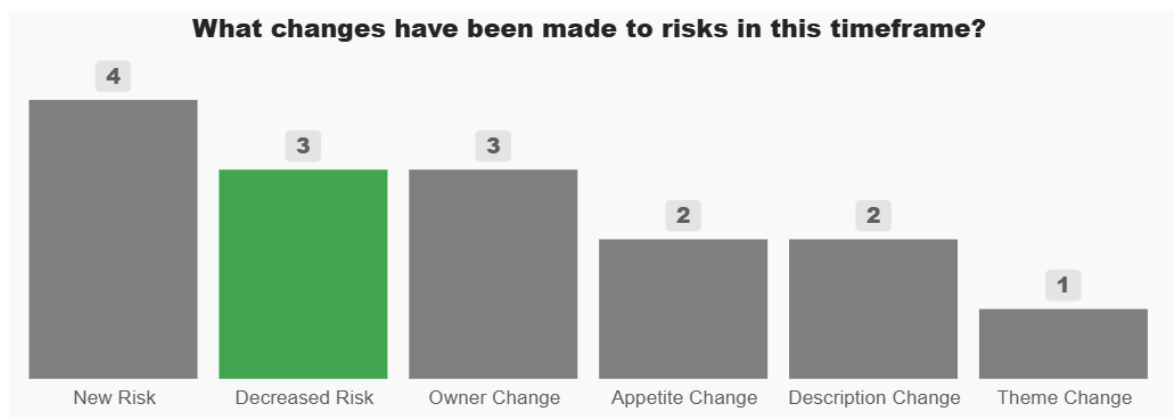
3.5.4

In relation to the increased risk rating this aligns to:

Risk ID	Description	Increased Risk	Comment
TSA018	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	Probability Increased from 3 to 4 resulting in a new risk rating of 16 from 12.	Increased in probability following an assessment of resourcing capacity, matched against stakeholder training needs leading into 2025/26

3.5.5

In relation to those risks rated below 15 aligned to PC the following changes have been made:

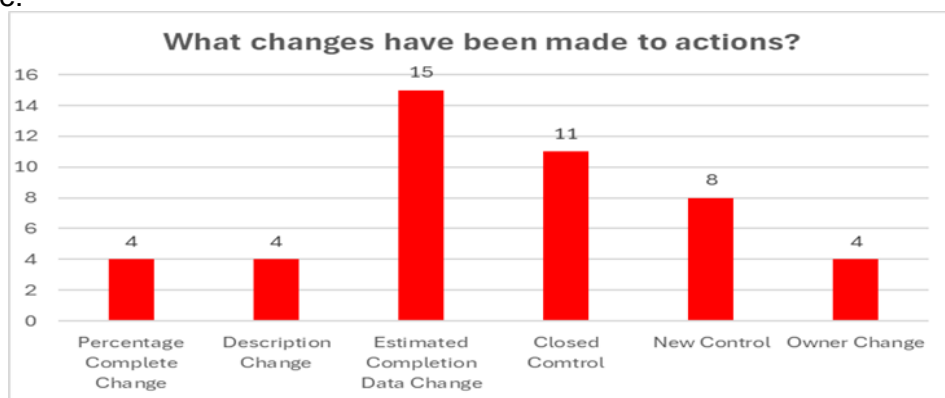


3.6

Control Actions

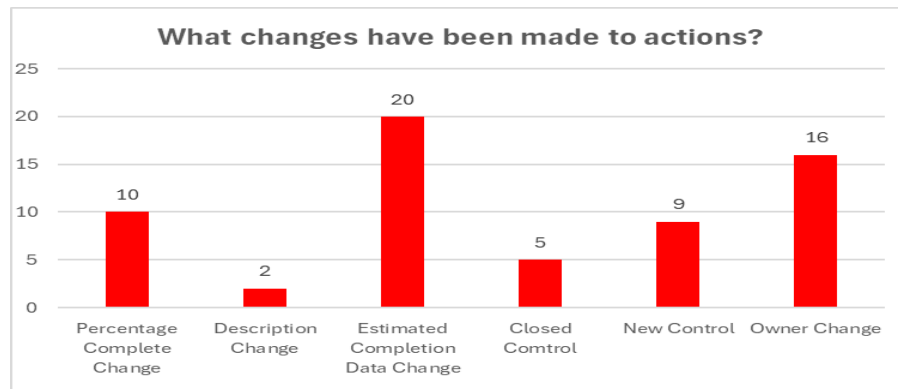
3.6.1

Following review, the following changes have been made to PC 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:



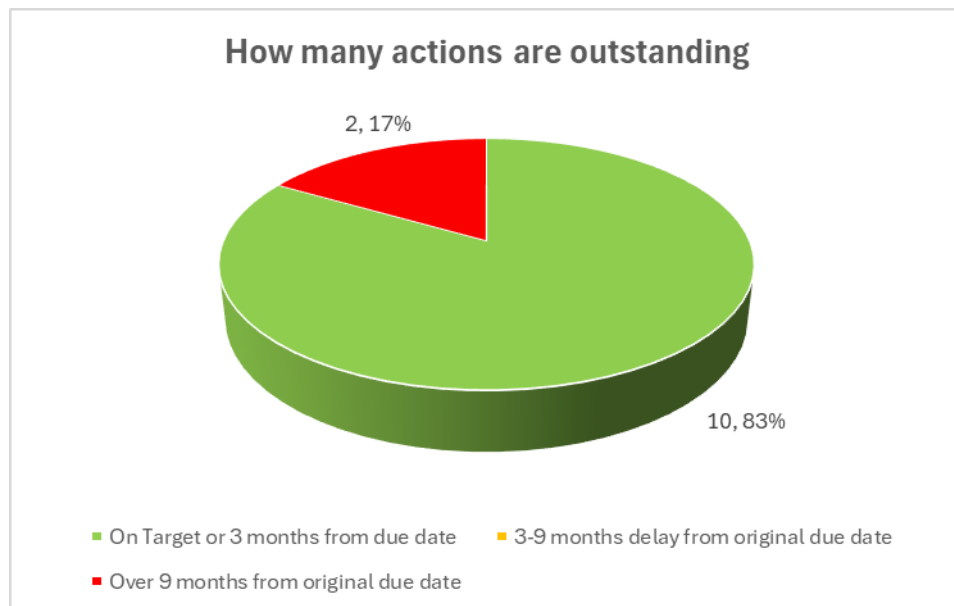
3.6.3

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:



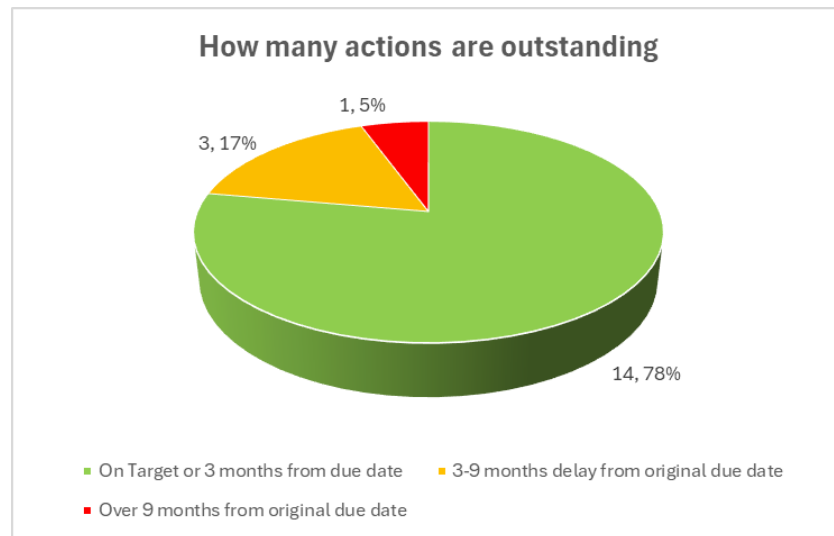
3.6.5

The table below identifies the two 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
TSA018	Introduce supplementary Structural Firefighting PPE solutions in collaboration with Asset Management across the Training Function.	31/03/24	31/05/25	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.
TSA019	Review the suitability of Dundee Airport site (course delivery and welfare facilities).	30/06/24	30/06/25	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.

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:



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

3.6.7

Risk ID	Action Description	Action Due	Est. Date	Action Comment
POD015	Ensure regular participation in process planning, and ongoing dialogue is in place with Scottish Public Pensions Agency and Finance colleagues through a number of informal and formal forums and provide regular progress updates to SFRS management teams and stakeholders to ensure appropriate oversight and escalation of potential challenges should these arise.	03-2023	31/03/2026	A phased approach to gathering "Expression of Interest" from in-scope current and former employees for the 2nd Option exercise was completed and a risk spotlight was provided to the People Committee on 5th December 2024. An update was also provided to the Service Delivery Board on 1st April 2025. The revised due date aligns to the latest project delivery plan received from SPPA.

4	Recommendation
4.1	The People Committee is asked to scrutinise the information presented within the report.
5	Key Strategic Implications
5.1	Risk
5.1.1	The report identifies risks from each Directorate together with the significant changes made since the last update. Each Directorate will be responsible for the identification and mitigation of any associated risk and for the update of relevant risk registers.
5.1.2	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 Cautious appetite.
5.2	Financial
5.2.1	The report identifies risks from each Directorate with financial implications arising from control decisions to be managed by the relevant Directorate.
5.3	Environmental & Sustainability
5.3.1	Any implications arising from the report will be managed by the relevant Directorate.
5.4	Workforce
5.4.1	Any implications arising from the report will be managed by the relevant Directorate.
5.5	Health & Safety
5.5.1	Any implications arising from the report will be managed by the relevant Directorate.
5.6	Health & Wellbeing
5.6.1	Any implications arising from the report will be managed by the relevant Directorate.
5.7	Training
5.7.1	Any implications arising from the report will be managed by the relevant Directorate.
5.8	Timing
5.8.1	The report is provided to the Audit and Risk Assurance Committee on a quarterly basis.
5.9	Performance
5.9.1	The risk report is used to ensure risks are identified and suitably managed by relevant Directorates.
5.10	Communications & Engagement
5.10.1	Any implications arising from the report will be managed by the relevant Directorate.
5.11	Legal
5.11.1	Any implications arising from the report will be managed by the relevant Directorate.
5.12	Information Governance
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	Equalities
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	Service Delivery
5.14.1	Any implications arising from the report will be managed by the relevant Directorate.

6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Deborah Stanfield, Director of Finance and Contractual Services
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient: The development of the risk management framework is informed through discussion with Committee and SLT, with registers developed and agreed by Directorates. Development of risk appetite statements and alignment to levels of assurance will add value to the framework and risk decision making.
7.2	Rationale:	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.
8	Appendices/Further Reading	
8.1	Appendix A – Significant Risks – May 2025	
8.2	Appendix B – Other Risk Summary – May 2025	
Prepared by:		Tracy Shankland, Risk and Insurance Officer
Sponsored by:		Lynne McGeough, Head of Finance and Procurement
Presented by:		Fiona Ross, Director of People Craig McGoldrick, Director of Training, Safety and Assurance
Links to Strategy and Corporate Values		
Risk Management forms part of the Services Governance arrangements and links back to Outcome 5 of the 2022-25 Strategic Plan, specifically Objectives 5.1 and 5.6:		
Outcome 5: We are a progressive organisation, use our resources responsibly and provide best value for money to the public. <ul style="list-style-type: none"> Objective 5.1: Remaining open and transparent in how we make decisions. Objective 5.6: Managing major change projects and organisational risks effectively and efficiently. 		
Governance Route for Report		Meeting Date
<i>People Committee</i>		<i>05 June 2025</i>
		Report Classification/ Comments
		<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
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			

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			

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
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			

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			

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
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
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			

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

Agenda Item 16.1

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
11 September 2025	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) Health and Safety Annual Report 2024/25 Health and Safety Policy and Policy Statement 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight - (TBC) Culture Update (verbal) Audit Action Plan Update Contaminants Quarterly update Draft Health & Safety Annual Report 2024/25 (TBC) 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
		<u>New Business</u> <ul style="list-style-type: none"> QMS ISO 9001 Training SAMP 	<u>New Business</u> <ul style="list-style-type: none"> Volume Of Calls To Safecall Confidential Reporting Line And Analysis Of Themes (Private - Written) 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none">
4 December 2025	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight: - (TBC) Culture Update (verbal) Audit Action Plan Update 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">

PEOPLE COMMITTEE – ROLLING FORWARD PLAN

	STANDING ITEMS	FOR INFORMATION ONLY	FOR SCRUTINY	FOR RECOMMENDATION	FOR DECISION
	<ul style="list-style-type: none"> Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 		<ul style="list-style-type: none"> Contaminants Quarterly update 		
		<u>New Business</u> <ul style="list-style-type: none"> Evaluation of physiotherapy services 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u>	<u>New Business</u> <ul style="list-style-type: none">
5 March 2026	<ul style="list-style-type: none"> Chair's Welcome Apologies for Absence Consideration of and Decision on any Items to be taken in Private Declaration of Interests Minutes of Previous Meeting Action Log Forward Planning: Committee Forward Plan and Items to be considered at future IGF, Board and Strategy Days Review of Actions Date of Next Meeting 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Partnership Working Update (EPF & PAG) People Policy Forward Planning Schedule Update Training Policy Review Schedule S&A Documents Forward Planning Schedule RANSc update (Private) Key Case Update (Private) 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> Performance Reports (People, Training & H&S) HMFSI Independent Audit/ Inspection Action Plan Update Committee Aligned Directorate Risks Risk Spotlight (TBC) Culture Update (verbal) Audit Action Plan Update Contaminants Quarterly update 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none"> 	<u>Standing/Regular Reports</u> <ul style="list-style-type: none">
		<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u> <ul style="list-style-type: none"> 	<u>New Business</u>	<u>New Business</u> <ul style="list-style-type: none">

OFFICIAL



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

PUBLIC MEETING – PEOPLE COMMITTEE

THURSDAY 5 JUNE 2025

The following reports were submitted for information only.

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/26-25

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 JUNE 2025						
Report Title:	POLICY REVIEW SCHEDULE UPDATE						
Report Classification:	For Information	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose is to provide an update on the People Directorate Policy Schedule and progress made on priorities identified for 2025/26 set out in People Committee Paper on 6 March 2025.						
2	Background						
2.1	The People Directorate is responsible for the development, implementation, review and quality assurance of a wide range of People policies and procedures for the SFRS. The People policy schedule remained under ongoing review during 2024/25 to enable progress of a number of priority policies for development or review, with flexibility for realignment based on Service priorities. This resulted in a number of priorities identified for 2025/26 on the same basis.						
3	Main Report/Detail						
3.1	Following the latest review of the rolling policy programme of work the People Directorate reviewed the current Schedule, took into account stakeholder engagement, SFRS strategic priorities and risks for 2025/26 and also reflected upon Directorate current and anticipated priorities and timescales in order to provide an updated Policy Review Schedule on 6 March 2025. An update on recent progress and priorities identified is outlined below.						
3.2	<u>Policies Recently Reviewed/Implemented (since 06 Mar 2025)</u>						
3.2.1	An updated Family Leave Policy was published on 31 Mar 2025 to reflect recent changes in legislation with regards Neonatal Care.						
3.2.2	A number of People policies were recently developed in support of the Standardisation of RDS T&Cs – two of which were implemented from 1 January 2025, namely On Call Payment for Work Activities and On Call Annual Leave and Public Holidays; and one which was implemented from 1 April 2025, Dual Contracts Policy.						
3.2.3	A new interim Health and Wellbeing Policy for Operational Fitness was implemented and published on 29 April 2025.						
3.2.4	An updated Whistleblowing Policy was published on 15 May 2025 following a desktop review to ensure this more closely aligns to the Anti-Fraud and Corruption Policy, clarifies links to the Audit and Risk Assurance Committee (ARAC) and provides more clarity regarding how and when this Policy should be used and where other Policies and Procedures may be more appropriate.						

3.2.5	<p>The following Framework/Policies were agreed at Corporate Board on 16 April 2025:</p> <ol style="list-style-type: none"> 1. People (Organisational Change) Framework 2. Updated Pay Protection Policy 3. Updated Redeployment Policy
3.2.6	<p>These were presented to SLT for info on 21 May with a view to them being published by end of May 2025. A toolkit is currently being developed to support these and will be available by the summer.</p>
3.2.7	<p>A revised Job Evaluation Policy and Appeals Procedure was recently approved by Corporate Board and is intended to be published with effect from 1 July 2025 – with supporting arrangements for JE appeals being put in place during that period to support their introduction.</p>
3.2.6	
3.3	<p><u>Policies for Review in 2025/26</u></p>
3.3.1	<p>Following a review and taking account of a number of factors including business requirements, organisational change, risk and legislative considerations, the following policies were identified as priorities for 2025/26 (with updates where applicable, as at 5 June 2025 provided in bold):</p> <ol style="list-style-type: none"> 1. (New/Revised) Several Wellbeing related Policies – in support of Wellbeing Recovery. Operational Fitness Policy already published. A number of Health and Wellbeing Protocols will be published in due course that will inform a new Health Surveillance Policy and a new over-arching Health and Wellbeing Policy. 2. (New) Organisational Change Framework, incorporating - (Reviews) Redeployment Policy and Support Staff Pay Protection Policy. Due to be published end of May 2025. 3. (Review) Market Allowance Policy. Was scheduled to be published in Q1 – now likely to be Q2. 4. (Review) Recruitment and Selection Policy. 5. (Review) Code of Conduct. 6. (Review) Whistleblowing Policy. Published 15 May 2025. 7. (Review) Discipline Policy & Procedure. 8. (Review) Overtime Policy (Uniformed employees). 9. (Review) Continual Professional Development Policy. Out for final consultation, with Corporate Board approval due in June 2025. 10. (Review) TOIL (Uniformed). 11. (New) Secondary Employment Policy. 12. (Review) Trainee Firefighter Development Programme. 13. (Review) Managers in Development to Competent Interim Policy. 14. (Review) Family Leave Policy (specifically to incorporate new provisions related to Neonatal care). Published 31 March 2025.
3.3.2	<p>In summary, 3 of the 14 policy areas above will be marked as complete in Quarter 1 (items 2, 6 and 14).</p>
3.3.3	<p>Updates on those Policies listed above which have not yet been progressed (i.e. those with no bold update narrative) will be provided on the next quarterly update. It should be noted that some of these reviews have commenced or early engagement is taking place with stakeholders to inform their review.</p>
3.3.4	<p>In addition to the above, there are a range of SFRS change programmes and associated projects which are likely to have implications for and the need to review existing People policies to ensure these are fit for purpose or amended to meet business needs, processes and operating models going forward eg. Rostering Project, Service Delivery Review, Culture Action Plan etc. A policy discovery piece of work is currently underway to assess</p>

	these interdependencies and anticipated timescales. This will require both the People Directorate and stakeholders to ensure there is capacity to support such policy review or development as required. The list of priority policies outlined at 3.3.1 will therefore remain under review with this in mind as they may be impacted by this work.
3.4	<u>Amendment of Policy to Guidance Notes</u>
3.4.1	<p>The following Policies were previously identified as being suitable to change to a guidance note – either as they are not considered to require a formal policy position or as they relate to or support an existing SFRS Policy therefore not warranting a separate policy. There was broad agreement from the representative bodies on this approach, although based on their feedback it is likely that the 3 identified in bold below will remain as is:</p> <ul style="list-style-type: none"> • Reimbursement of Dental/Optical costs • No Smoking Policy • Induction Process • Leadership Development Centre Policy • ID Cards Policy and Procedure • Volunteer Policy • Political Restrictions • Management of Health Conditions • Exit Interviews Policy and Procedure • Drivers Health Assessment Policy • Transfer of Uniformed Employees Policy • Transfer Requests • Temporary Promotions Procedure • Attendance During Adverse Weather and Disruptive Conditions
3.4.2	It is intended that this work will progress during 2025/26, although it should be noted that a number of these have undergone recent reviews to meet business need and therefore may be amended to guidance at their next review date. Further engagement will take place as appropriate with stakeholders to support this piece of work.
3.5	<u>Policies Beyond Next Review Date</u>
3.5.1	There are a number of People policies which have already been deferred for a period beyond their next scheduled review date, this has generally been due to competing priorities and these being considered low risk e.g. no specific legislative implications or organisational risks. This list remains under continual review during 2025/26 to establish whether a desktop review may be required to ensure these remain fit for purpose or whether they can otherwise be extended in terms of next review date. Further engagement with stakeholders will then take place in this regard.
4	Recommendation
4.1	People Committee are asked to note the contents of the report.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Register
5.1.1	In relation to ensuring it has the appropriate capacity and capabilities to deliver its priorities, SFRS has an Open appetite, ensuring robust workforce plans are in place across all colleague groups, while exploring creative or innovative ways to deliver our services.
5.2	Financial
5.2.1	There are no financial implications associated with this review.
5.3	Environmental & Sustainability
5.3.1	There are no implications that require to be noted.

5.4 5.4.1	Workforce Whilst employee implications are detailed within each separate policy, there are capacity implications in delivering reviews of a wide number of policies across 2025/26, taking account of policy interdependencies arising from a range of organisational change programmes.
5.5 5.5.1	Health & Safety Where applicable, matters relating to health and safety are outlined within each separate policy.
5.6 5.6.1	Health & Wellbeing Where applicable, matters relating to health and wellbeing are outlined within each separate policy.
5.7 5.7.1	Training Where applicable, matters relating to training are outlined within each separate policy.
5.8 5.8.1	Timing Once agreed, all policies will follow the review scheduled revised timeframes.
5.9 5.9.1	Performance All policies partake in a quality assurance process to ensure compliance. Where applicable, SFRS performance relating to matters of policy will be measured and reported.
5.10 5.10.1	Communications & Engagement There is a governance process in place, which involves consultation with the relevant Trade Unions, Service Delivery and Functional colleagues and People practitioners during the review process.
5.10.2	Updated policies are communicated with employees via normal communication channels once approved through governance.
5.10.3	Engagement took place early in Quarter 1 with all representative bodies on the policy priorities identified and there was broad agreement for these.
5.11 5.11.1	Legal SFRS endeavours to ensure all policies comply with employment legislation, are responsive to case law and aim to follow best practice.
5.12 5.12.1	Information Governance DPIA completed No. All individual policies and procedures are supported by their own DPIA where applicable.
5.13 5.13.1	Equalities EHRIA completed No. All individual policies and procedures have their own EHRIA.
5.14 5.14.1	Service Delivery The review of the Policy Schedule is in line with the Gateway Process which incorporates the benefits and impact on employees across the Service. It is recognised that priority policies need to be identified to ensure stakeholder engagement is realistic and achievable considering other organisational priorities.
6	Core Brief
6.1	Not applicable

7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross, Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/ Reasonable /Limited/Insufficient
7.3	Rationale:	The policy review approach and schedule has been developed taking into account organisational priorities, known information regarding legislative and organisational change, policy review timeframes, and team capacity.
8	Appendices/Further Reading	
8.1	N/A	
Prepared by:		Rachael Scott, Deputy Head of People / Chris Gavin, People Services Manager
Sponsored by:		Fiona Ross, Director of People
Presented by:		Fiona Ross, Director of People
Links to Strategy and Corporate Values		
Links to Corporate Value of Teamwork and Strategic Plan 2022-25 Outcome 6, The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report		Meeting Date
<i>People DMT</i>		<i>28 May 2025</i>
<i>People Committee</i>		<i>5 June 2025</i>
<i>Corporate Board</i>		<i>23 June 2025</i>
		Report Classification/ Comments
		<i>For scrutiny</i>
		<i>For Information</i>
		<i>For Information</i>

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

Report No: C/PC/27-25

Agenda Item: N/A FIO

Report to:	PEOPLE COMMITTEE (PC)						
Meeting Date:	5 JUNE 2025						
Report Title:	TRAINING CONTINUOUS IMPROVEMENT PROGRAMME – UPDATE REPORT						
Report Classification:	For Information	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	This paper updates the progress of implementing recommendations from the Scottish Fire and Rescue Service (SFRS) Training Continuous Improvement Programme (CIP). It will be a "living" document, reflecting improvements, history, and the current status of the CIP Action Plan. Regular updates will ensure all relevant forums are informed of the latest progress.						
2	Background						
2.1	In 2019, the Training function reviewed the training and development of SFRS operational staff, generating 56 recommendations for the Training CIP. This document has since evolved with additional recommendations.						
2.2	In February 2023, the CIP Action Plan was updated, reassessing all outstanding recommendations and ensuring the Training Function had ownership and oversight. A process was established to catalogue new improvement recommendations and assign ownership to relevant function leads.						
3	Main Report/Detail						
3.1	The CIP Action Plan remains a "living" document that incorporates all agreed closed, existing, and newly identified improvement recommendations. Training Function leads will update the Action Plan as required and all recommendations and updates will be reviewed at the weekly Training Management Team (TMT) meeting (CIP is now a standing item on the TMT meeting agenda).						
3.2	As of 1 May 2025, the status of all 77 recommendations is as follows: <ul style="list-style-type: none"> • 60 recommendations completed. • 17 recommendations in progress. 						
3.3	The Training Function will retain responsibility for the progression of all 17 outstanding recommendations, with an owner assigned to each and managed through the TSA Directorate governance route. A protocol is in place for the addition of new improvement recommendations and to allow periodic and status updates to the CIP Action Plan.						
3.4	Additionally, and for further assurance. The remaining "In Progress" recommendations will be assigned to each owner on our 'Tasks by Planner – MS Teams' and progress will be tracked at weekly Training Management Teams meeting as a standing item and reported by exception at monthly FMT's. The CIP Action Plan will sit on the Training Management Team SharePoint, where progress will be reviewed and updated accordingly.						

3.5	<p><u>CIP Action Plan – 3 Recommendations added within the last 6 months – 75 – 77.</u></p> <p>January 2025</p> <ul style="list-style-type: none"> • 75 - The design and implementation of a new business as usual BA training delivery model following the BA Recovery. BA Recovery Plan Phase 3. Following the delivery of the BA Recovery Plan (phase 1&2). The BAU model will commence delivery in April 25. • 76 - Using API technologies to extract reportable data to inform quarterly KPIs. Engage with pdrPro supplier to explore the utilisation of API technologies to assist in the production of the quarterly KPIs. • 77 - The Casualty Care (ICAT) delivery model involves training station/On Call Rural Watch Commanders as ICAT Intermediates to deliver operator refresher courses. An ongoing pilot project enhances station resilience and frees up instructors for other duties. A full review of the ICAT instructor pathway is underway to ensure alignment with NFCC standards and PHEM competencies set by the Royal College of Surgeons.
3.6	<p><u>CIP Action Plan – 5 Recommendations completed within the last 6 months.</u></p> <ul style="list-style-type: none"> • 46 – Completed Nov 2024 - It is proposed that there is further integration between water (historical NTS) and High-Volume Pump (HVP) requirements with NIP SRTI's training as HVP operators. Thereafter, these Instructors would be utilised to provide a national approach to the delivery. Evidence/ Benefits realised: Due to the demand and unique specialisms identified for each skill, Water Rescue Instructors and HVP Instructors will remain separate. This was agreed to close at the Training Function Management Team formal monthly meeting. • 66 – Completed April 2025 - Creation / production of a Skills Maintenance Framework document in support of the Training Function Vision and Strategy document. This document will be one the 3 fundamental building blocks to support the delivery of the Functions Vision and Strategy. Evidence/ Benefits realised: The Training Function Framework which outlines skill maintenance requirements is now live on Hub providing strategic direction to ensure all personnel are equipped with the necessary skills and training to deliver safe and effective services. • 67 – Completed April 2025 - Creation / production of a Training Delivery Framework document in support of the Training Function Vision and Strategy document. This document will be one the 3 fundamental building blocks to support the delivery of the Functions' Vision and Strategy. Evidence/ Benefits realised: The Training Function Framework is now live on Hub providing strategic direction to ensure all personnel are equipped with the necessary skills and training to deliver safe and effective services. The Training Function Framework explains how training will be delivered and in what format. It also states where training will be delivered and who is responsible for delivering each element of training. • 68 – Completed April 2025 - Creation / production of a Training Assets Framework document in support of the Training Function Vision and Strategy document. This document will be one the 3 fundamental building blocks to support the delivery of the Functions' Vision and Strategy. Evidence/ Benefits realised: The Training Service Asset Management Plan and Training Function Framework are now live on iHub which are both fundamental in supporting the Training Function Vision and Strategy. • 69 – Completed May 2025 - Review of the Training for Operational Competence (TfOC) framework following the end of the 3-year cycle. This will include acting on feedback/lessons learned throughout the first 3-year cycle to produce a revised framework. Evidence/ Benefits realised: Following a comprehensive review of the TfOC, the Training Function have streamlined the learning content, to eradicate duplication, blending core skill learning with incident type modules to generate more concise, meaningful learning for all operational personnel. By taking this innovative approach, and by using

3.7	<p>new technologies, they have produced a refreshed 3-year training cycle with enriched learning content, including focus on making the modules easier for On-Call colleagues to complete within their available time.</p> <p><u>Recommendations under review (New Section - CIP Action Plan – June 2024)</u> There are currently no proposed CIP Recommendations requiring further review.</p>
4	Recommendation
4.1	To review the contents of this paper as per the report classification and provide any relevant feedback.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers
5.1.1	The risk to the Training Function and SFRS is through non-completion of improvement recommendations, current and future, within this CIP Action Plan. However, the use of this update paper as a reporting mechanism through the governance process will ensure timely and consistent review and auditing of this Continuous Improvement Programme.
5.2	Financial
5.2.1	As a result of the budget pressures and to ensure best value finance/budgets will continue to be taken into account and any further re-structuring will continue to consider, finance as a key consideration.
5.3	Environmental & Sustainability
5.3.1	N/A
5.4	Workforce
5.4.1	This ongoing improvement programme is in support of the development of the Training teams and the wider development of SFRS personnel.
5.5	Health & Safety
5.5.1	Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.
5.6	Health & Wellbeing
5.6.1	Improvements in training processes, training team development and training resources are in direct support of improvements in firefighter safety.
5.7	Training
5.7.1	A “live” CIP Action Plan ensures and promotes regular review of all activities within the Training Function and supports improvement recommendations from all areas within the function as well as from internal and external partners.
5.8	Timing
5.8.1	All recommendations within the Training CIP Action Plan have planned completion dates and allocated Training Function Leads (TFL). All CIP Action Plan recommendations are regularly updated, and all completion dates reviewed as required.
5.9	Performance
5.9.1	All Improvement Recommendations submitted to the Training CIP Action Plan look to provide best value and best practise within the Training Function to improve internal performance and ensure the development and improvement of the service that we provide for our primary customers within Service Delivery.

5.10 5.10.1	Communications & Engagement The CIP Action Plan / CIP Update Report are now standing items within both the Training Management Team (TMT) and Training Function Management Team (FMT) meeting agendas.	
5.11 5.11.1	Legal N/A	
5.12 5.12.1	Information Governance DPIA completed Yes/No. If not applicable state reasons. The process uses existing systems and processes which are already in place.	
5.13 5.13.1	Equalities EHRIA completed Yes	
5.14 5.14.1	Service Delivery All improvement recommendations within the Training Function CIP Action Plan through progression and completion will have a positive impact on frontline teams through improved training course delivery.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/ Limited / Insufficient
7.3	Rationale:	The CIP action plan demonstrates progress being made towards the recommendations, with a robust governance process now in place thereby satisfying the level of assurance marked above.
8	Appendices/Further Reading	
8.1		
Prepared by: Sarah Robertson, Group Commander Training Function		
Sponsored by: Alasdair Cameron, Area Commander Training Function		
Presented by: Sarah Robertson, Group Commander Training Function		
Links to Strategy and Corporate Values		
SFRS Training Function Vision & Strategy 2023-2028		
The Overall Strategic Objective of the Training Function is:		
“To develop and deliver high quality training and development to support organisational and individual performance throughout the Scottish Fire and Rescue Service with a clear focus on safety and the pursuit of excellence.”		
Governance Route for Report		Meeting Date
Training FMT		7 May 2025
TSA Directorate Management Team		22 May 2025
People Committee		5 June 2025
Training Safety and Assurance Board		12 June 2025
		Report Classification/ Comments
		For Scrutiny
		For Scrutiny
		For Information
		For Information

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/28-25

Agenda Item: N/A FIO

Report to:		PEOPLE COMMITTEE						
Meeting Date:		05 JUNE 2025						
Report Title:		TRAINING FUNCTION POLICY REVIEW SCHEDULE						
Report Classification:		For Information Only	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
			<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose							
1.1	The purpose of this report is to provide the People Committee with a quarterly update on the status of Training Function documents and an overview of current and recently completed work.							
2	Background							
2.1	The Training Function maintain a range of documents including policies, procedures and training standards that are applicable to SFRS personnel both within and out with the Training Function. This report provides information on document review work completed during Q4, documents currently under review and those due to be reviewed during Q2 2025 26. The status and other relevant details for each document were exported from the Training Function Document Review Schedule on the 21 May 2025 and are included in the Appendix.							
2.2	Currently, the review period for most documents is set of five years as this aligned with review intervals in other Directorates however this may be reduced through an ongoing piece of work with Information Governance to adopt the document review, authorisation and publication processes within the new SharePoint Document Library.							
2.3	To ensure documents are current, an annual “light touch” review process is carried out during February and March. Where these are not able to be carried out during these months then they are carried out in the following months, when capacity allows.							
3	Main Report/Detail							
3.1	New Documents							
3.1.1	During Quarter 4 of 2024 25, two new Training Function documents were approved and published – <i>Training Vision & Strategy 2023-28</i> , <i>Ultra High-Pressure Firefighting System Instructor Revalidation Procedure</i> .							
3.2	Reviewed Documents							
3.2.1	During Quarter 4 of 2024 25, the following documents were reviewed, approved and published: <i>Training FMT Terms of Reference</i> , <i>Management Review Group Terms of Reference</i> .							

3.3	In Development and current work
3.3.1	A project to review the National Training Standards has commenced and aims to develop and publish of a suite of accurate, concise, easily digestible SFRS Training Standards for all existing training families.
3.3.2	The ToR for OCSG has been reviewed and a number of changes, including a change of the chair from GC to AC have been proposed. It has been through Training FMT for scrutiny and is due to go to OCSG for recommendation.
3.3.3	Following a review of the meeting arrangements, the ToR for Weekly Training Management Team has been updated and is due to go for approval prior to publication.
3.3.4	Work is continuing to update and finalise the <i>Training Function Governance Arrangements</i> document which will be published shortly.
3.3.5	BCP's across all locations are being reviewed to ensure they are current.
3.4	Under Review
3.4.1	There are currently nine documents under review (see Appendix A), four of which are Terms of Reference.
3.5	Upcoming Review
3.5.1	Out of the set of documents that have the status "current", there is one document due for review in Q2 2025 26.
4	Recommendation
4.1	The People Committee are asked to note the contents of this report and provide any relevant feedback.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers
5.1.1	Appropriate governance and scrutiny will reduce the risk that Training Function documents no longer meet requirements which could potentially affect the quality of training delivery.
5.2	Financial
5.2.1	Not applicable
5.3	Environmental & Sustainability
5.3.1	Not applicable
5.4	Workforce
5.4.1	Not applicable
5.5	Health & Safety
5.5.1	Not applicable
5.6	Health & Wellbeing
5.6.1	Not applicable
5.7	Training
5.7.1	Not applicable
5.8	Timing
5.8.1	Not applicable

5.9 5.9.1	Performance Not applicable	
5.10 5.10.1	Communications & Engagement Not applicable	
5.11 5.11.1	Legal Not applicable	
5.12 5.12.1	Information Governance DPIA completed No – nothing is being processed in relation to these proposed changes.	
5.13 5.13.1	Equalities EHRIA completed No – This has not been carried out as it has been considered but there is no impact on people in relation to the General Equality Duty.	
5.14 5.14.1	Service Delivery Not applicable	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial /Reasonable/Limited/Insufficient
7.3	Rationale:	<p>This list is supported by corresponding tasks within Microsoft Planner which provides automated notifications when reviews are due and a place for document owners to track review progress. In addition to this, tasks are monitored monthly at the Training FMT.</p> <p>This method of recording and governance ensures that documents are reviewed according to schedule and also provides the information required to complete this report on a quarterly basis.</p>
8	Appendices/Further Reading	
8.1	Appendix A - Training Function Document Review Schedule	
Prepared by:		Roger Crawford Watch Commander
Sponsored by:		Alasdair Cameron, Area Commander Training Function
Presented by		Ross Robison, Deputy Assistant Chief Officer Head of Training
Links to Strategy and Corporate Values		
Training Function Vision & Strategy 2023-28		
SFRS Strategic Plan 2022-2025		
Outcome 6: People The experience of those who work for SFRS improves as we are the best employer we can be.		
Governance Route for Report		Meeting Date
<i>TSA DMT</i>		<i>22 May 2025</i>
<i>People Committee</i>		<i>5 June 2025</i>
		Report Classification/ Comments
		<i>For Scrutiny</i>
		<i>For Information Only</i>

Training Function Document Review Schedule

Document Type	Document Title	Status	Approval Status	Published	Review due
National Training Standard	Overarching Principles	Current	Approved	08/11/2022	02/11/2027
National Training Standard	Rope Rescue and Safe Working at Height	Current	Approved	11/09/2023	07/09/2028
National Training Standard	Water Rescue and Flood Response	Current	Approved	13/10/2022	07/09/2027
National Training Standard	Urban Search and Rescue	Current	Approved	13/10/2022	07/09/2027
National Training Standard	Driver and Emergency Response Training	Current	Approved	15/11/2023	02/11/2028
National Training Standard	Breathing Apparatus	Current	Approved	01/05/2024	04/05/2027
National Training Standard	Firefighting with UHPFS	Current	Approved	08/08/2024	08/08/2029
National Training Standard	Hazardous Materials Response	Current	Approved	06/05/2024	01/10/2028
National Training Standard	Casualty Care	Current	Approved	12/03/2024	07/09/2027
National Training Standard	Incident Command	Current	Approved	01/03/2024	02/11/2027
National Training Standard	Marine Firefighting	Current	Approved	28/04/2022	06/04/2027
National Training Standard	Extrication (RTC)	Current	Approved	23/05/2023	23/05/2028
Policy	Quality Management System Quality Policy	Current	Approved	22/12/2021	22/12/2026
Policy	Training for Operational Competence Policy	Current	Approved	13/03/2024	01/01/2027
Policy	Incident Command Development Pathway Policy	Current	Approved	05/10/2023	01/05/2027
Policy & Procedure	Training Delivery Assurance	Current	Approved	22/12/2021	01/01/2027
Procedure	Non Conformance and Corrective Action	Current	Approved	30/05/2024	30/05/2029
Procedure	Maintaining High Quality Training Delivery	Current	Approved	30/05/2024	30/05/2029
Procedure	Credit Rating Procedure	Current	Approved	20/03/2024	20/03/2029
Procedure	BAI Revalidation Procedure	Current	Approved	20/12/2024	01/06/2028
EHRIA	Incident Command EHRIA	Current	Approved	05/10/2023	06/06/2027
Management Arrangement	Uniformed Employees Performance Improvement Plan	Current	Approved	19/06/2024	01/05/2027

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Document Type	Document Title	Status	Approval Status	Published	Review due
Terms of Reference	FMT Terms of Reference	Current	Approved	05/02/2025	05/02/2026
Terms of Reference	MRG Terms of Reference	Current	Approved	06/03/2024	30/05/2026
EHRIA	Training Function EHRIA	Current	Approved	12/06/2024	26/10/2028
Terms of Reference	BA Practitioners Group Terms of Reference	Current	Approved	17/07/2024	31/07/2025
Procedure	TVI Revalidation Procedure	Current	Approved	20/12/2024	01/06/2028
Procedure	CFBTI Revalidation Procedure	Current	Approved	20/12/2024	01/06/2028
Procedure	UHPFSI Revalidation Procedure	Current	Approved	14/01/2025	01/06/2028
Handbook	FDO Induction Handbook	Current	Approved	18/12/2024	01/05/2027
Framework	Training Function Framework	Current	Approved	02/04/2025	01/03/2028
Strategy	Training Vision & Strategy 2023-28	Current	Approved	13/03/2025	01/03/2028
Guidance	Training For Operational Competency	In Development	Not Submitted		
Terms of Reference	Clinical Governance Technical Working Group Terms of Reference	Under Review	Not Submitted	10/04/2024	30/04/2025
Guidance	TNA Guidance	Under Review	Not Submitted	26/01/2024	26/01/2025
National Training Standard	Animal Rescue Response	Under Review	Approved	03/04/2024	01/01/2026
Policy & Procedure	Health Management of Compartment Fire Behaviour Training	Under Review	Not Submitted		15/05/2020
Procedure	Command Competence Review	Under Review	Not Submitted		
Terms of Reference	TMT Terms of Reference	Under Review	Not Submitted	03/05/2023	03/05/2024
Terms of Reference	OCSG Terms of Reference	Under Review	Not Submitted		30/04/2024
Terms of Reference	OCTWG Terms of Reference	Under Review	Not Submitted		16/08/2024
Guidance	Training Function Governance Arrangements	Under Review	Approved		

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/29-25

Agenda Item: N/A FOI

Report to:	PEOPLE COMMITTEE						
Meeting Date:	5 JUNE 2025						
Report Title:	SAFETY AND ASSURANCE DOCUMENTS FORWARD PLANNING SCHEDULE						
Report Classification:	For Information Only	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>
1	Purpose						
1.1	The purpose of this report is to provide the People Committee with an update regarding the management of Safety and Assurance (SA) documentation up until the end of quarter 4 (Q4) 2024/25 in accordance with the SA Function Plan.						
2	Background						
2.1	The Safety and Assurance Function are responsible for the ongoing management of our published Policies, Frameworks and supporting Management Arrangements (MA) to ensure legal compliance, best practice and continual improvement of our management systems.						
3	Main Report/Detail						
3.1	Year-end summary						
3.1.1	The 2024/25 forward plan contained 16 major Management Arrangement (MA) reviews, and the revision of the Safety and Assurance Strategy document, of these, 31% (5 of 16) were carried over from previous reporting years. 68% (11 of 16) of the plan was published in the reporting year, 19% (3 of 16) are in an advanced stage of development currently progressing through Governance and or consultation. 13% (2 of 16) were deferred until 2025/26 due to other unplanned priorities (the ongoing Wellbeing Investigation).						
3.2	Q4 update						
3.2.1	The Working with Volunteers MA was updated. A new process flow chart was introduced, together with enhanced guidance and an updated Management Checklist. A new Volunteer feedback form was also introduced to enable continued improvement of volunteer events and management to be captured.						
3.2.2	The Control of Contractors and Visitors MA has been renamed Control of Contractors, Visitors, and Co-occupants MA. It was updated to make local induction information more accessible, formalise local arrangements for shared premises, and simplify self-induction for our Hard and Soft Facilities Management Contractors. Enhancements for visitor sign-in/out arrangements were also made.						
3.2.3	The Fire-contaminants MA was issued for 28 days of familiarisation and went live on 16/04/25. This new MA was issued with revised Fire-Contaminants Premises Zoning Guidance and the circulation of new premises zoning plans completed in Q4, information posters, and zoning labels prior to the go-live date.						

3.3	Ongoing Work
3.3.1	The Working at Height MA is being finalised. Its technical assessment is being simplified and updated, and guidance within the main body of the MA has also been targeted to reflect SFRS activities. Once completed, these changes will be consulted with Business Partners in Q1 before being updated on the iHub.
3.3.2	The Safety and Assurance Strategy has been further revised after receiving feedback during the governance process. It is now progressing through its governance journey before final consultation, prior to being published.
3.3.3	The Engagement and Governance MA had been updated, and additional changes were required to reflect the revisions within the Safety and Assurance Strategy.
4	Recommendation
4.1	The People Committee is asked to note the progress against the 5-year rolling Management Arrangement tracker for 2024/25 and Q4 which is also reflected in our SA Function Plan.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Registers In relation to meeting our legal and regulatory obligations, SFRS has a minimalist appetite.
5.2	Financial There are no financial implications for the development, maintenance, and monitoring of these processes, however failure to comply with health and safety legislation, learning lessons may result in financial implications.
5.3	Environmental & Sustainability There are no environmental and sustainability implications for developing, maintaining, and monitoring these processes.
5.4	Workforce Safety and Assurance continue to monitor the progression of actions in line with Health and Safety Improvement Plans and in partnership with our business partners.
5.5	Health & Safety Failure to comply with health and safety legislation may lead to potential consequences for both the organisation and individuals, which may result in, involvement, engagement and investigation and potential action from the HSE. Demonstrate Clause 6.1.3 Determination of Legal and other Requirements (ISO 45001)
5.6	Health & Wellbeing There are no health and wellbeing implementations for developing, maintaining, and monitoring these processes.
5.7	Training There are no training implications as MAs have supporting Programmes of Learning or will be captured in generic health and safety induction content.
5.8	Timing Safety and Assurance MAs are scheduled for periodic 5-year review to minimise disruption and maximise implementation for our business partners. Safety and Assurance will still review major/minor revisions subject to changes in legislation, guidance, best practice, or outcomes of event investigation outside this 5-year review cycle on a risk-based approach.

5.9	Performance A periodic review of our Health and Safety legal register and guidance review process will assist SFRS in maintaining its health and safety management system effectively and support possible ISO 45001 Requirements.	
5.10	Communications & Engagement The high level of compliance should be included in future health and safety communications as part of SA Communication Framework.	
5.11	Legal If Safety and Assurance Policies, Frameworks, and supporting arrangements are not maintained or fully implemented, the SFRS may not be compliant with its legislative responsibilities.	
5.12	Information Governance DPIA completed No. If not applicable state reasons. The review process of SA Documents includes DPIAs where personal data is identified to be held on file. Safety and Assurance are working with Information Governance to complete these assessments as required.	
5.13	Equalities EHRIA completed No. If not applicable state reasons. The documents reviewed within the paper is part of the SFRS Health and Safety Policy or Operational Assurance policy which both have an overarching EHIRA.	
5.14	Service Delivery It is anticipated that the outcomes of this annual periodic MA review processes outlined within the paper will have a positive impact on the safety of all SFRS staff and the committees we serve.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Craig McGoldrick, Director of Training, Safety and Assurance
7.2	Level of Assurance: (Mark as appropriate)	Substantial / Reasonable / Limited / Insufficient
7.2	Rationale:	The Safety and Assurance Forward Planning Schedule continues to be progressed on target and will be expanded to include Operational Assurance documentation once the ongoing review has concluded.
8	Appendices/Further Reading	
8.1	Appendix A – Safety and Assurance Documents Forward Planning Schedule.	
Prepared by:		Derrick Watson, Senior Health and Safety Adviser
Sponsored by:		ACO McGoldrick, Director of Training, Safety and Assurance
Presented by:		Jim Holden, Head of Safety and Assurance
Links to Strategy and Corporate Values		
Strategic Plan 2022-2025: Outcome 5 - We are a progressive organisation, use our resources responsibly and provide best value for money to the public. What we will do. - As an emergency service that is always looking to improve, we will continue to focus on the effective management of risk, and the health, safety, and wellbeing of the public and our staff. Outcome 6 - The experience of those who work for SFRS improves as we are the best employer we can be. Objective 6.1 Continuing to work in partnership with our representative bodies to ensure the safety and wellbeing of the public and our people.		

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

Safety Value:

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

Governance Route for Report	Meeting Date	Report Classification/ Comments
<i>People Committee</i>	<i>05 June 2025</i>	<i>For Information</i>

SAFETY AND ASSURANCE DOCUMENTS FORWARD PLANNING SCHEDULE 2024-2025

Title	Work Required	Financial Year	Development	Consultation	Governance	Familiarisation	Go Live	Comment
			BRAG Status	BRAG Status	BRAG Status	BRAG Status		
PUWER MA and LCMS module (carry-over)	5 Year Review	2021/22	Complete	28 Day consultation	April SA FMT	Closed 14/07	15/07/24	Republished on the iHub
Impound and Inspection MA (carry-over)	5 Year Review	2023-24	Complete	Conducted during review	N/A	N/A	30/05/24	Republished on the iHub
Engagement and Governance MA (Carry-over)	5 Year Review	2023-24	Final draft	Conducted during review				Minor revisions required Carried forward to 2025/26 Q1
Support Review and Audit Management Arrangement (Withdrawn from iHub)	Major review and republication	2022-23	First draft					Work postponed due to Wellbeing Investigation Carried forward to 2025/26
Contaminants MA (Carry-over)	New	2023-24	Third draft	Conducted during review	N/A	19/03/25	16/04/25	Published on the iHub
Liaising with the HSE MA	5 Year Review	2024-25	Complete	Conducted during review	Aug SA FMT	N/A	26/08/24	Republished on the iHub
Safety and Assurance Strategy 2024-27	Review	2024-25	Final draft	03/09 SA FMT Workshop 06/02 SA FMT	Ongoing			Progressing through Governance
Health and Safety Policy	Annual Review	2024-25	Complete	Conducted during review	Oct TSAB	N/A	09/01/25	Republished on the iHub

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Health and Safety Policy Statement	Annual Review	2024-25	Complete	Conducted during review	Oct TSAB	N/A	09/01/25	Republished on the iHub
Confined Spaces MA	5 Year Review	2024-25	Complete	Conducted during review	Paper presented to SA FMT Jan	N/A	25/02/25	Republished on the iHub
Mobile Elevated Work Platforms MA	5 Year Review	2024-25	Complete	Conducted during review	Paper presented to SA FMT Jan	N/A	03/02/25	Republished on the iHub
Station Audit MA	5 Year Review	2024-25	First draft					Carried forward to 2025/26
Working with Young Persons MA	5 Year Review	2024-25	N/A	Aug SA FMT	Oct SA FMT	N/A	24/10/24	MA withdrawn and content merged with Risk Assessment MA
Working with Volunteers MA	5 Year Review	2024-25	Complete	Conducted during review	N/A	N/A	10/12/24	Republished on the iHub
Working at Height MA	5 Year Review	2024-25	Final Draft	To be Conducted Q1				Carried forward to 2025/26 Q1
Control of Contractors MA	5 Year Review	2024-25	Complete	Consultation ongoing	N/A	N/A	02/04/25	Republished on the iHub

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

SCOTTISH FIRE AND RESCUE SERVICE

People Committee



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Report No: C/PC/30-25

Agenda Item: N/A FIO

Report to:		PEOPLE COMMITTEE						
Meeting Date:		5 JUNE 2025						
Report Title:		FOLLOW UP ON EQUAL PAY AND GENDER PAY GAP REPORT 2025						
Report Classification:		For Information Only	SFRS Board/Committee Meetings ONLY For Reports to be held in Private Specify rationale below referring to <u>Board Standing Order 9</u>					
			A	B	C	D	E	F
1	Purpose							
1.1	To provide People Committee with further background information on the Service's Equal Pay and Gender Pay Gap Report 2025, requested during the Scottish Fire and Rescue Service (SFRS) Board meeting on 27 March 2025.							
2	Background							
2.1	Under the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, SFRS are obliged to report on our Gender Pay Gap and to publish an Equal Pay Statement. The report continues the established practice of merging the Equal Pay Statement and Gender Pay Gap Report within one document to review a range of data and consider SFRS's workforce composition. The SFRS Equal Pay and Gender Pay Gap Report 2025 was published on 03 April 2025.							
2.2	The Equal Pay and Gender Pay Gap Report 2025 was reviewed by the SFRS Board on 27 March 2025. During this meeting background information was requested regarding benchmarking Strategic roles held by females in other Fire Services, the number of females going through internal Uniformed recruitment processes, and retention levels of Uniformed females. This paper now looks to provide this information for the People Committee's information.							
3	Main Report/Detail							
3.1	Strategic Roles held by Females - Benchmarking							
3.1.1	Further background information was requested by the SFRS Board around the number of females in strategic roles in other Fire Services.							
3.1.2	Since the first appointment of a female Chief Fire Officer (CFO) in 2011 at Kent Fire and Rescue Service, the representation of women has been growing in Fire Services in Strategic positions. Most recently, the female CFO at West Sussex Fire & Rescue Service is due to leave her current role at West Sussex to become the first female CFO of Hampshire & Isle of Wight Fire & Rescue Service later this year. SFRS have seen an increase in of female representation within our Uniformed workforce profile over the years and there is growing representation of women at higher ranks, albeit at a slow pace and no further than Area Commander level in Wholetime. From the recent Area Commander recruitment campaign, a female has been successful in attaining one of the promoted vacancies. The SFRS Board has requested a wider review of other Fire Services to offer some context to SFRS's position.							

3.1.3 The table below shows a selection of Fire Services and the gender within their Operation's Senior Leadership ranks. Although we see some progress with two female chiefs and five female Assistant Chief Fire Officers (ACFO), there are no female Deputy Chiefs within the Services sampled:

3.1.4 Table 1 – Comparison of Senior Posts held across Fire Services by Gender

Fire and Rescue Service	Chief		Deputy Chief		ACFO	
	Female	Male	Female	Male	Female	Male
SFRS	0	1	0	1	0	3
London	0	1	0	2	1	5
Manchester	0	1	0	0	1	2
Cheshire	0	1	0	1	0	1
Tyne and Wear	0	1	0	1	0	1
Devon and Somerset	0	1	0	1	1	0
County Durham and Darlington	0	1	0	1	0	2
Northern Ireland	0	1	0	1	0	2
Lancashire	0	1	0	1	1	0
South Wales	0	1	0	0	0	2
North Wales	1	0	0	1	1	3
Mid and West Wales	0	1	0	1	0	2
West Sussex	1	0	0	1	Not known	Not known

3.1.5 The National Fire Chiefs Council (NFCC) reported in March 2023 that 18.6% of fire service employees are women but only 8.2% of firefighters are women. This does suggest our representation of 6.35% women in Wholetime roles is lower than the average representation across the UK Fire Service. Of our total workforce, 15% are women compared to the NFCC figure of 18.6%. This highlights the importance of the initiatives that are underway and highlighted in the Equal Pay and Gender Pay Gap report 2025.

3.1.6 The table below shows a comparison between the gender split of Wholetime staff in the London Fire Brigade and SFRS. Although London has a higher overall proportion of women in their Wholetime workforce at 10.26% compared to SFRS at 6.35%, we do see a higher representation of the female population in all ranks above Firefighter in SFRS compared to London.

3.1.7 Table 2 – Comparison of Women in Ranks between SFRS and London

Level	% of Gender at Level			
	London		SFRS	
	Female	Male	Female	Male
Group Commander and Above	1.45%	2.09%	2.79%	3.25%
Station Commander	1.66%	3.02%	3.26%	4.70%
Watch Commander	10.63%	16.55%	13.95%	18.22%
Crew Commander	7.08%	12.11%	17.67%	18.82%
Firefighter	79.17%	66.21%	62.33%	55.01%
% of Total Operational Staff	10.26%	89.73%	6.35%	93.65%

3.1.8

Gender Pay Gap information has also been collated for a selection of Fire Services to compare to SFRS, including a breakdown across staff groups where this was found. From this research, it was found that SFRS hold the third most favourable Gender Pay Gap figures for women overall. Across the staff groups, there is a Pay Gap in favour of men in all Support Staff groups in the four other Service's to report this information with SFRS's pay gap sitting in the middle of the range. We also see SFRS have a low pay gap in favour of men for Uniformed Wholetime when compared to the other services:

3.1.9

Table 3 – Comparison of Gender Pay Gaps

Fire and Rescue Service	Overall Gender Pay Gap (Mean)	Uniformed - WT	Uniformed - RDS	Support	Control
SFRS 2025	-3.10%	2.05%	3.53%	7.92%	-7.64%
London	-6.38%	4.87%		2.01%	-5.37%
Greater Manchester Combined Authority (GMCA)*	-4.60%	6.90%		7.90%	
Tyne and Wear	10.17%	6.79%		11.82%	-2.12%
Devon and Somerset	6.30%	12.60%	8.20%	9.80%	-3.60%
Cheshire	9.61%				
County Durham and Darlington	5.50%				
South Wales	7.89%				
North Wales	9.30%				
Mid and West Wales	10.50%				
West Sussex	7.56%				

*GMCA report on staff from the 'Combined Authority' and Greater Manchester Fire and Rescue Service in one GPG report.

3.2

Female Numbers in SFRS Recruitment

3.2.1

A review of SFRS recruitment data has been carried out to provide information on candidate progress by gender within the Wholetime Firefighter Recruitment process and the Uniformed internal promotion process.

• Wholetime Firefighter Recruitment

3.2.2

The last three recruitment rounds for Wholetime Firefighters (WTFF) utilised a pool of candidates sourced from a recruitment campaign open from October 2020 to 31 January 2023. Of the total applications received during this time, 89% were male and 11% female. From these applications, a total of 465 candidates were selected to progress to the next stages, of which 92% were male and 8% female.

3.2.3

Those invited to the next stage took part in a selection process consisting of four stages. Table 4 below illustrates the success rate at each of these stages.

3.2.4

Table 4 – SFRS Recruitment of Firefighters by Stage and Gender

Stage	Successful			
	Female		Male	
	Headcount of those Successful at Stage	% of Females Successful at Stage	Headcount of those Successful at Stage	% of Males Successful at Stage
1. Bleep Fitness Test and Calculation Test	22	59%	343	80%
2. Practical Selection Tests	12	55%	215	84%
3. Interview	12	92%	194	73%
4. Medical	12	92%	202	86%
Offers Issued	11	30% (of total from stage 1)	175	41% (of total from stage 1)

3.2.5

We can see there is a significant difference in success rates during the first two stages between men and women – with women at 59% and 55% success compared to men's 80% and 84% success rates. This data is being considered within the Wholtime Firefighter (WTFF) Review Group. One improvement that is hoped to assist candidates in stage one of the review is introducing a pacer to help support candidates during the bleep fitness test.

3.2.6

Overall, it was found that 30% of the women who started the selection process were successful, compared to 41% of the men.

3.2.7

The WTFF Recruitment Review Group has been underway for some months and in addition there is a cross functional working group reviewing WTFF recruitment who are working on a range of improvements to bring in ahead of opening the next WTFF advert in August 2025. The review is being carried out in phases so further work will continue to introduce improvements such as a full review of the Practical Selection Tests and the fitness assessment.

- Promoted Posts

3.2.8

Table 5 shows the outcomes from a selection of national Wholtime promotion campaigns from 2022 to 2025. It shows that although the number of applications from women is lower than from men overall (which is to be expected due to the lower representation), the proportion of women who are successful in the process is higher across all ranks.

3.2.9

Table 5 – Uniformed Wholtime Promotions from 2022 to 2025

Rank Level	Female			Male		
	Applications	Offered Post (Head-count)	Success Rate	Applications	Offered Post (Head-count)	Success Rate
Crew*	14	9	64%	308	88	29%
Watch*	14	6	43%	189	54	29%
Station	10	3	30%	269	72	27%
Group	13	6	46%	152	39	26%
Area	1	1	100%	86	16	19%

*The 2022 Crew and Watch Commander processes were combined therefore the numbers are not included in Table 5. However, the combined data shows 26 female to 440 male applications, and a success rate of 50% for females and 37% for males.

3.2.10

We also looked at the number of applications from women from 2022 to 2025 for promoted Uniformed roles. The variable nature of when recruitment campaigns are undertaken makes it hard to draw firm conclusions however the data suggests there are increasing numbers of applications from women in the higher ranks of Station Commander upwards.

3.2.11

Table 6 – Uniformed Wholetime Promotion Applications from Women

Rank Level	2022	2023	2024	2025	Total
Crew	26	N/A	12	2	54
Watch		N/A	N/A	14	
Station	7	N/A	3	N/A	10
Group	3	4	6	N/A	13
Area	0	N/A	0	1	1
Total Applications	36	4	21	17	78

3.3

Retention Levels of Women in Uniformed Roles

3.3.1

At the SFRS Board meeting, there were discussions around the retention levels of women in Uniformed roles. The table below provides an overview of leavers from SFRS due to the reasons of resignation or transfer to other Fire Services (excluding retirements), by staff group. Although there are proportionately more women leaving due to these reasons than men, the percentage is still significantly low at 2.27% in 2023 and 2024 (compared to around 1% for men over both years). This table also shows this employee group hold the lowest leaving rates when compared to all other employee groups.

3.3.2

Table 7 – Leavers due to Resignation or transfer to other Fire Service in 2023 and 2024

Staff Group	2023				2024			
	Female		Male		Female		Male	
	Head-count	As a proportion of Total Headcount for Group	Head-count	As a proportion of Total Headcount for Group	Head-count	As a proportion of Total Headcount for Group	Head-count	As a proportion of Total Headcount for Group
Support	26	5.39%	27	6.41%	21	4.36%	22	5.23%
Uniformed - Control	13	9.49%	3	9.38%	5	3.65%	1	3.13%
Uniformed - RDS	19	9.45%	157	6.30%	11	5.47%	152	6.10%
Uniformed - Volunteer	3	7.14%	12	5.19%	3	7.14%	15	6.49%
Uniformed - Wholetime	5	2.27%	36	1.13%	5	2.27%	30	0.94%
Total	66	5.99%	235	3.64%	45	4.09%	220	3.41%

3.4	Unknown Information – Protected Groups
3.4.1	<p>The true representation of protected groups in SFRS such as those from ethnic minorities and people with disabilities, is hard to identify fully due to the high volume of unknown information held by SFRS. A range of methods have been used to try to increase completion rates of the sensitive information sections in employee records as outlined below and work continues to encourage completion of this:</p> <ul style="list-style-type: none"> • Colleagues logging in to iTrent will see a <i>Did you know...Sensitive Information</i> tab on their landing page dashboard. • It is acknowledged that uniformed colleagues may be less likely to regularly access iTrent and so a similar 'postcard' was loaded onto the login screen reminding colleagues about the importance of providing sensitive information, albeit this was time restricted, whereas the iTrent notice is permanent. • Postings in the weekly staff briefing have been provided as topic specific alerts. There has also been reference to why and how sensitive information is used embedded within other articles, such as about Black History Month. • The communications and guidance for the annual employee performance review process has been used to remind colleagues to complete their sensitive information record.
4	Recommendation
4.1	This report offers further background information as a follow up to the Equal Pay and Gender Pay Gap 2025 report. People Committee are asked to consider and review the information provided.
5	Key Strategic Implications
5.1	Risk Appetite and Alignment to Risk Register
5.1.1	The Equal Pay and Gender Pay Gap Report ensures we are compliant with the law for reporting but also provides opportunity to review our approach and ensure we reduce risk of inequality amongst our employees.
5.2	Financial
5.2.1	There are no implications identified.
5.3	Environmental & Sustainability
5.3.1	There are no implications identified.
5.4	Workforce
5.4.1	The Equal Pay and Gender Pay Gap Report provides information on our workforce population and highlights areas of occupational segregation. This report offers further insight into the areas requested by the SFRS Board.
5.5	Health & Safety
5.5.1	There are no implications identified.
5.6	Health & Wellbeing
5.6.1	There are no implications identified.
5.7	Training
5.7.1	There are no implications identified.
5.8	Timing
5.8.1	The Equal Pay and Gender Pay Gap Report must be published every two years, by 30 th April of the relevant year – in this case it was published on the SFRS website on 3 rd April 2025.

5.9 5.9.1	Performance There are no implications identified.	
5.10 5.10.1	Communications & Engagement The Equal Pay and Gender Pay Gap Report is published on the SFRS website for public access.	
5.11 5.11.1	Legal The Equal Pay and Gender Pay Gap Report is published in compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.	
5.12 5.12.1	Information Governance There are no implications identified.	
5.13 5.13.1	Equalities The report provides information to consider and review around Gender.	
5.14 5.14.1	Service Delivery There are no implications identified.	
6	Core Brief	
6.1	Not applicable	
7	Assurance (SFRS Board/Committee Meetings ONLY)	
7.1	Director:	Fiona Ross, Director of People
7.2	Level of Assurance: (Mark as appropriate)	Substantial/Reasonable/Limited/Insufficient
7.3	Rationale:	The Equal Pay and Gender Pay Gap report is produced to meet the statutory obligations. The report highlights the current initiatives underway to encourage and develop a diverse and representative workforce, and helps inform and identify areas for future initiatives. This paper provides further background information for the Committee's information.
8	Appendices/Further Reading	
8.1	Further Reading; - Equal Pay and Gender Pay Gap Report 2025	
Prepared by:		Lucy Begley, People Adviser (Reward)
Sponsored by:		Gillian Clark, People Manager (Reward)
Presented by:		Erica Glancy, Lead People Adviser (Reward)
Links to Strategy and Corporate Values		
Links to Strategic Plan 2022-25: The report demonstrates how SFRS will deliver on Strategic Outcome 6 by ensuring that the experience of those who work for SFRS improves as we are the best employer we can be, and on Outcome 2 by assisting in delivering a representative workforce that will help become more resilient as we respond effectively to changing risk.		
Governance Route for Report		Meeting Date
<i>People Committee</i>		<i>5 June 2025</i>
		Report Classification/ Comments
		<i>For Information</i>